Summary

The COVID-19 pandemic and responses to it have brought new risks to street children and homeless youth in developing countries unlike any we’ve ever seen before. This population, already vulnerable before the onset of the pandemic, has largely been forgotten in emergency preparedness and response. As a result, street children and homeless youth face devastating direct and indirect consequences of this pandemic. Directly, street children are at increased risk of contracting the virus due to their limited ability to take preventative measures, and of developing complications if they contract the virus due to often having underlying health conditions and compromised immune systems.

Indirectly, with support services being shut down in many countries and children being persecuted and criminalised or otherwise punished for not having a home in which to isolate themselves, they are at an increased risk of harm by the very measures governments have put in place to keep people safe. Pushed to the margins and with no means at all to make any money to provide for themselves as the public stays at home, street children are at increased risk of hunger and exploitation by adults.

This submission provides evidence of these risks before offering lessons learned from the work of Consortium for Street Children’s Network Member StreetInvest in Sierra Leone during the 2014-2016 Ebola epidemic which prove that street children and homeless youth can and should continue to be supported during public health emergencies. It draws attention to two implications for DFID’s global health strategy: 1) More data is required about the impact of COVID-19 on street children and homeless youths; 2) Review of public health strategies to highlight and safeguard street children and homeless youth’s specific needs during a pandemic.

Finally, it stresses the importance that international development funding places a proportion of its funding and budget to services specifically targeted at street children and homeless youth, especially for small local organisations who have the trust of street children and are in the best position to respond.

Introduction

The Consortium for Street Children (CSC) is the global network of organisations working to change the world for street children and homeless youth. We do this by working together on advocacy, research and innovative projects to support these children and improve their lives. We
have 140+ members working in 130 countries around the world, including many with ongoing humanitarian crises and/or dependencies on development aid. Many street children and homeless youth also fall into categories like children with disabilities, refugees, internally displaced persons and children on the move, pushed from their communities of origin by diverse factors including abuse or violence at home, or loss of family livelihood.

In the context of the global COVID-19 pandemic, this submission seeks to draw attention to the current situation for street children and homeless youth and the immediate risks or threats to their lives and to the work of the organisations who support them. The information in this submission has been collected from organisations in the CSC network working with street children and homeless youth around the world via an online survey as well as discussions with individual members.

**Direct impact of the outbreak on street children and homeless youth in developing countries**

Existing research suggests that, due to their extreme poverty and the circumstances in which they live, street children and homeless youth may be particularly vulnerable to COVID-19. They are among the most exposed to the risk of contagion due to their living conditions including the difficulty to respect distancing and self-isolation measures and the absence of handwashing facilities available to them. For example, a CSC Network Member in Tanzania reports that street children have been denied access to the hygiene facilities that the government has placed in markets and bus stands, being told they are “used to dirtiness”. Street children and homeless youth are also at increased risk of developing severe symptoms if infected due to a higher prevalence of respiratory infections, such as pneumonia, and of pre-existing conditions, such as asthma, that make them more vulnerable than other children.\(^1\),\(^2\),\(^3\),\(^4\) If they do develop symptoms, street children and homeless youth may not be able to access health care, often due to a lack of official identity documents.

However, there is no reliable quantifiable data available on the number of cases of coronavirus among street children and homeless youth in developing countries. These children are unlikely to be able to access tests. In addition, contact tracing among identified cases is difficult within street-connected populations, who are disproportionately exposed to other members of the community.

Children’s mental health may also be suffering as a result of the pandemic. CSC Network Members around the world have expressed concern that their governments are overlooking the psychological distress that vulnerable populations such as street children and homeless youth

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4. See [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(13)62518-0/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(13)62518-0/fulltext).
face during the pandemic. In Uganda, Dwelling Places reported that when the government announced the lockdown, it caused panic among the children forcing a few of those who have homes to start walking back to their villages, many of which are over 200km away from Kampala. SASCU, another organisation in Uganda, reported that the street children that they interviewed feel mentally tortured and are living in fear. In Karnataka, India, according to the organisation Concerned for Working Children, uncertainty about potential access to basic needs such as food, housing and medical services affects in particular children working on the streets, who fall out of the protective measures, as well as children dismissed from care institutions due to the coronavirus outbreak and children who are mentally disabled. The organisation, however, reports that the government of Karnataka has not taken action to prevent these vulnerable children from being further traumatised.

**Indirect impact of the outbreak for street children and homeless youth in developing countries**

Even when they do not personally catch the virus or develop symptoms, the already difficult circumstances of street children’s lives are being exacerbated by efforts to halt the pandemic. While putting in place measures designed to protect populations, such as lockdowns and curfews, national and local governments around the world are failing to take into account some of the most vulnerable children in society. Street children and homeless youth are suffering from these measures in a number of ways.

Firstly, many children and youth without homes to go to or living in crowded temporary or informal settlements are unable to adhere to restrictive measures and are being punished or further discriminated against as a result. Street children and homeless youth are often criminalised simply for being on the streets, and the pandemic has worsened this discrimination in many countries. This includes children being arrested and put in overcrowded cells for breaking the rules of lockdowns or curfews.

CSC is particularly concerned by the situation of street children and homeless youths in the Philippines, as reported by network members and NGO/news reports. Children violating the curfews rules in the Philippines are subject to inhuman or degrading treatment, including reports of children being locked in a coffin or confined in dog cages, or being forced to sit in the midday sun. The life of these children is at risk as President Duterte issued a shoot to kill policy for anyone protesting or causing ‘trouble’.

In a slum in Islamabad, Pakistan, hundreds of people were made homeless after 75 homes were destroyed, seemingly to address a ‘den of professional beggars’. Following public outcry over the incident, the government is launching an inquiry into the facts of the forced evictions of the 75 families, and offering shelter and relief services for the affected families. The incident speaks to a lack of understanding of the vulnerability of the urban poor during this pandemic.

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In Uganda, a CSC Network Member reports that with nowhere else to go, children are sleeping in drains to avoid being beaten after the curfew. SASCU, another CSC Network Member in Uganda, reported that over 200 individuals, including many street children and homeless youth, have been arrested. Since normal judicial proceedings have been suspended, they will be in remand custody for the foreseeable future. Likewise, partners across Tanzania have recorded an increase in police round-ups, but there is no data yet on the exact number of children arrested.

Even where alternative shelters have been offered, there may be negative repercussions for some street children and homeless youth. CSC Network Member StreetInvest reports that in Kolkata, street-dwelling families with COVID-19 symptoms who have been supported to self-isolate in school buildings are returning to the street for fear of losing their ‘patch’ on the pavement and being pushed out of their communities in their absence, losing their homes and their livelihoods in the long term.

In addition, street children and homeless youth are increasingly being stigmatised and discriminated against by the general public, in a time where many people are afraid and misinformed. In India, CSC network member Safe Society reported that street children, homeless youth and their families are “facing high discrimination and torture” as a result of public perceptions of the pre-existing respiratory diseases to which their living situations make them particularly susceptible.

As well as being punished or discriminated against for their inability to isolate themselves or stay indoors, the responses to the pandemic are resulting in many street children and homeless youths losing existing lifelines in the way of both livelihoods and support services. Many are dependent on practices that require contact with other people in the streets to survive, such as begging or street vending. Others live with their families who are dependent on daily wages. With the populations of most of the world’s cities confined indoors and those on daily wages unable to work, these children and their families have lost their livelihoods. CSC Network Members in several countries (including Tanzania, Uganda, Bangladesh, India, and Pakistan) report that children are struggling to find food to eat as a result. In some cases, private businesses that previously donated food have abruptly come to a halt. According to CSC Network Member StreetInvest, for example, in Mombasa, a daily meal service for children on the street, provided by a local business, has been suspended without warning, leaving children hungry and with no other option for food.

Even where relief initiatives are set up by the government, it often does not reach street children and homeless youth. For instance, UK-based CSC Network Member Cities for Children, operating in Pakistan, reported that the government social protection programme, Ehsaas, is distributing and tracking relief aid based on information related to national identity cards. This excludes unregistered refugees of Afghan origin in cities like Islamabad and Peshawar, and stateless communities such as Bengali communities and Rohingya in Karachi. It also excludes many street children and homeless youth who have lost their livelihoods.
Small, frontline NGOs are stepping in to fill the gap, both providing food rations and health supplies directly and distributing government relief provisions to those who would otherwise not be reached through mainstream channels.

Another crucial challenge shared by CSC network members in many countries is that their work with street children and homeless youths is not being considered as essential work. This means that services which provide a lifeline for children are being shut, and staff and volunteers do not have permission to continue their outreach work with children in the streets. Drop-in centres and, in some cases, residential homes have had to be shut to adhere to the restrictive measures put in place, for example in Uganda, Pakistan and Malawi. A CSC member in the UK who works in Uganda reports that they are waiting for permission from the local authorities to open an emergency centre for children who are still on the streets, with the process of providing this urgent service being slowed down by bureaucratic requirements.

Rather than protecting street children and homeless youths, the restrictive preventative measures put in place by many governments without providing any alternative means of support may therefore be putting these children at risk of additional harm.

Despite these difficulties, CSC Network Members are continuing to work tirelessly to do what they can to continue supporting and protecting street children and homeless youths. In some cases, they have been able to acquire government permission to keep working. In Mombasa, Kenya, CSC Network Member Glad's House has successfully negotiated with local government officials to get authority to continue street outreach work. They have also made recommendations to the local government, sharing the information directly gathered from street children and homeless youth themselves particularly on the issues that these children anticipate that they will face due to the curfews and the lockdown. In Nepal, a partner organisation of UK-based CSC Network Member Street Child United has received government permit to continue working with children in the streets while another CSC Network Member Voice of Children, has been able to keep four centres open to street children and homeless youth, to provide a safe space to stay during the pandemic. In Bangladesh, the Dhaka Ahsiana Mission is collaborating with the local government to deliver free food and medicines to street children and homeless youth, as well as allowing them access to the government facilities. These examples demonstrate that with collaboration, local governments and organisations can continue to support street children and homeless youths during the pandemic.

**Lessons identified and learned/applied from previous experience with infectious diseases**

UK-based CSC Network Member StreetInvest has applied their experience gained from working with partners to coordinate a street-level community response to the Ebola epidemic in Sierra Leone in 2014-2016, including:

1) A street-based approach to mitigating the spread of the disease in the most vulnerable communities, whereby Street Work teams worked with street children and homeless
youth, supporting, educating and mobilising them as distributors of soap, buckets, handwashing advice and other provisions to those in their communities hidden from government responses.

2) A large-scale Street Work response in the wake of the crisis, employing an extra 100 street workers for a 3-month period, who reached 31,346 children and supported over 10,000 to return to school.

StreetInvest and their partners continue to deliver a two-year Street Work intervention to reach 9,000 of the most vulnerable children still disconnected from their communities and support 4 years after the epidemic. This is in response to a national headcount of street-connected children in Sierra Leone in 2019 found that there were over 70,000 – around 20,000 higher than the figure enumerated in a similar count in 2011. This suggests that the numbers of children living or working in the streets may increase after public health crises, something that governments and development organisations must prepare for when considering their response to the current pandemic.

Other lessons to be learned from the experiences of StreetInvest and their partners are as follows:

1) The provision of street-level support can be done safely and effectively during a public health emergency, with the right expertise, resources and coordination with government responses.
2) Widespread deployment of additional street and community level social workers in the immediate aftermath of an epidemic can reconnect children with education and support and help prevent longer term street-connections being made
3) Street children and homeless youth can, and should, play a role in their communities during a public health emergency. Lessons from this in Sierra Leone are now being applied in Kolkata where street children trained as health advocates and researchers have become community contact points educating their communities on hygiene and virus prevention and, via Street Workers, reporting support needs of hard to reach children in their communities and making the most vulnerable visible to government responses.

Implications for DFID’s policy on a global health strategy

Implication 1: More data is required about the impact of COVID-19 on street children and homeless youth

Before the advent of the global pandemic, street children and homeless youth were already an invisible and hidden population. They are routinely disregarded by policy-makers, partly due to a lack of reliable data to illuminate their lives and their needs. Most governments around the world have continued this trend in their responses to the COVID-19 outbreak, failing to consider street children and homeless youth as they seek to protect the wider population. Where large segments of a city’s population are street-connected and are unable to socially distance as a result, the impact of overlooking these groups could be devastating.
In order to combat this exclusion to ensure that street children are able to protect themselves while continuing to meet their daily needs, and to fully understand the impact of the pandemic on their lives, better data is required. This includes ensuring that street children and homeless youth have access to testing services, and that the organisations that have existing connections with these groups are able to continue their work, including documenting the impact on their lives.

Government efforts and those of development agencies such as DFID to collect data about the impact of the virus should make sure that hidden populations such as street children and homeless youth are reached by their methodologies.

Implication 2: Review of public health strategies to highlight and safeguard street children and homeless youth’s specific needs during a pandemic

As described above, street children and homeless youth are particularly vulnerable during the pandemic and are likely to be negatively affected by governments’ public health strategies. The introduction of new regulations such as lockdowns and curfews can unfairly criminalise children who have nowhere to go, leading to violent punishments as well as overcrowding in prisons and detention centres, where they will be at increased risk of contracting and/or spreading the virus.

To ensure a comprehensive, sustainable response to the covid-19 pandemic in which the most vulnerable are not left behind, the specific needs and vulnerabilities of street children and homeless youth need to be prioritised. Public health strategies should include measures, guidance and standards on providing shelter for homeless populations, providing relief efforts without requirements for legal identity or presence of adults, and information sharing that reaches street children and homeless youth who may not be able to read and access mainstream media. Public health strategies must also ensure that street work and the street and community-level presence of trusted social workers and NGO staff are recognised as essential work. Public health strategies must also protect street children and homeless youth from discrimination and punishment for having nowhere safe to go.

The UK’s response, bilaterally and with the international community, to the spread of coronavirus to developing countries

Governments of course are the primary duty bearers to ensure that their emergency preparedness and response is appropriate, proportionate, and targeted to those who need it the most. They are responsible for ensuring that appropriate and proportionate public health protection measures are implemented at the right times, in order that populations are protected as best they can be from COVID-19. Direct budget support to Governments as they struggle to implement these public health measures can be one of the ways that the UK can support the global effort.

However, our evidence indicates that for the most part, governments have not prioritised, or considered, how to include and protect their most vulnerable populations – street children and homeless youth. In the absence of commitment and action to protect street children, the
Consortium for Street Children considers it appropriate and necessary for overseas development aid to include specific requirements that street children and homeless youth be included in responses, and that a proportion of the assistance be targeted specifically to protect this vulnerable population group not only from the direct impact of the pandemic, but also the indirect impacts as outlined in this submission.

Street children respond best to sustained contact with trusted adults, and as such often it is smaller local organisations who are best placed to offer protection to the most vulnerable street children and homeless youth. As such, it is imperative that a proportion of immediate emergency response funding be allotted for small and medium size flexible grants to organizations working directly to street children. Hoping that the larger consortiums will include street children will not yield the same results – experience shows that if the most marginalised are to be included in emergency response, they must be identified, and funding be targeted to assist them. Grants must be awarded to the organisations best placed to assist, regardless of their size. In order to ensure street children are protected, this means that emergency flexible grants be immediately made available to organisations who can demonstrate their track record of trust by working daily with street children. By earmarking funding for street children, and by prioritizing emergency funding to address their needs, the UK government will start to ensure that they are not left behind by the global response to COVID 19.