Real time assessment (RTA) of UNICEF's ongoing response to COVID-19 in Eastern and Southern Africa

Safe school reopening

Key insights from qualitative research in Ethiopia, Rwanda, South Africa and South Sudan

Photo credit: UNICEF South Sudan

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Preface

The UNICEF's Eastern and Southern Africa Regional Office (UNICEF ESARO) commissioned Oxford Policy Management (OPM) to carry out a Real-Time Assessment (RTA) of UNICEF's response to COVID-19 in countries in the region.

Three reports were produced in this phase, Phase II, of the RTA. The reports covered three thematic areas: COVID-19 vaccine supply; COVID-19 vaccine demand promotion; and education, specifically the safe return to school. This report outlines the findings from the education sector. Drawing on the qualitative data gathered during the course of 23 interviews with key informants in the four focal countries (Ethiopia, Rwanda, South Africa, and South Sudan), the report shares the key findings, emerging themes, and lessons to be learned.

The RTA team includes the following members: Jayne Webster (Team Leader), Emma Jones (Project Manager), Bilal Hakeem (RTA Coordinator), Kandi Shejavali (Monitoring and Evaluation (M&E) Expert), Lauren Mueenuddin (M&E Expert), Kate Gooding (health sector specialist), Sourovi De (education specialist), Elizabeth Harrop (Adviser – Gender and C4D specialist), Vimal Kumar (cold chain specialist) and Nicola Wiafe (Research Analyst). Lauren Mueenuddin conducted the interviews and drafted this report in collaboration with Emma Jones and Sourovi De. The report was then reviewed by the team leader, Jayne Webster.

Executive summary

This report provides the key insights from the real time assessment (RTA) of UNICEF ongoing support to the safe reopening of schools, alongside programming support to continuity of learning. It is based on qualitative research in four countries: Ethiopia, Rwanda, South Africa, and South Sudan. The aim is to support UNICEF's reflection and learning on its ongoing support to safe school reopening, especially success factors, challenges and lessons learned.

The assessment is based on a review of documents and interviews with 23 respondents across the four focal countries: UNICEF CO education staff (4), partners (10) and non-government organisations working at the frontline (9). An introductory interview was also conducted with members of UNICEF's Eastern and Southern Africa Regional Office (ESARO) education team. No direct beneficiaries were interviewed. The interviews were conducted from July to September 2021. Focused on UNICEF's support to safe school reopening, the study addressed questions related to policy advocacy, programming, partnerships and fund mobilisation.

Key Findings

The key findings summarised below were common to all four countries unless otherwise specified. However, we identify where an issue was emphasised more in specific countries. It should be noted that the research did not reach saturation point, so an issue not being reported in a country does not necessarily mean that it was not resonant.

Policy level

UNICEF country offices (CO) and education staff have played convening and coordinating roles in the education technical working groups (TWGs) and participated in COVID-19 steering committees or task forces in all four countries. Through these forums, the COs were often seen as playing a key role in facilitating consensus among divergent views. UNICEF was also frequently described as the lead UN agency *'making the case'* for school re-opening and promoting attention to inclusion and equity in the safe return to school and continuity of learning. In this regard, UNICEF's pre-existing relationships and coordination roles in the sector were seen as an enabling factor. UNICEF CO education teams were also widely recognised for their support to ministries of education (MoE) in the formulation of policy and plans on safe school reopening and the continuity of learning.

Lessons learnt:

- **Use of international data and examples in multiple spaces** (TWGs, Task Forces, mass media, briefing papers) and technical guidance public health, sanitation and other measures to keep schools safe, were perceived as influential in strengthening the case for safe school reopening and informing policy and plans.

- **UNICEF's strong leveraging of mass media and messaging** was also seen to raise the profile of and support for the need to safely reopen schools. UNICEF's role in promoting aligned messaging was also seen as important in South Africa and South Sudan.

- **Engagement in COVID-19 task forces and steering committees, and in South Africa and South Sudan at the highest level** (Offices of the President and Prime Minister) were seen as crucial for positioning and support, and for promoting intersectoral coordination, including with the health sector.

- **Collaboration with other sectors was seen as crucial for safe school reopening**, as was collaboration with C4D teams on public communications and community engagement to build local support for and confidence in the safe reopening of schools.

- **Direct engagement at multiple levels was seen as important for fostering broad-based support** for safe school reopening in all four countries, including with education leaders and officials, partners, teachers' unions, and at community level. However, some respondents felt that further work is needed to build consensus (Ethiopia and South Africa).

Programming

a. Continuity of learning

UNICEF CO education teams worked in collaboration with MoEs and partners to support distance and homebased learning during school closures in all four countries. This included technical and financial support to developing condensed core curricula and distance learning resources, and media partnerships for the broadcast of educational content. To reach children without access to technologies, UNICEF funded or facilitated partnerships to provide printed learning materials (except for Rwanda), and solar radios to marginalised children in South Sudan and Ethiopia. UNICEF COs also supported development of adapted curricula for children with disabilities (noted in South Africa and Rwanda). UNICEF worked with other sector teams to support children at home, through provision of food boxes (South Africa, Ethiopia) and monitoring children at risk (Rwanda, South Africa). UNICEF also supported capacity building for teachers and parent-teacher associations (PTAs) to support children's use of distance learning resources.

Lessons learned: challenges and good practices

- **Identifying skilled teachers to deliver education content on radio** was identified as a promising practice in South Sudan, given the large number of teachers who are unqualified.

- **Using radio scripts from other countries,** while content based on the national curriculum was being developed, enabled a fast initial response in Rwanda.

- **The exclusions of distance learning** for students without access to technologies, younger children, and those with disabilities, were noted in all four countries. The process of transitioning to remote learning was also difficult due to poor connectivity, lack of digital skills, and the need to adapt pedagogies to remote learning.

- **Capacity building for teachers and PTAs** to support children's use of distance learning resources was widely perceived as important.

- **However, inadequate digital literacy** among teachers and students was noted as a key challenge, especially in Rwanda and South Sudan.

- **The difficulties of monitoring the effectiveness of distance and online learning** and a lack of tools for this were also widely noted.

b. Safe school re-opening

Government partners appreciated UNICEF CO's technical and financial support to the safe re-opening of schools, and their leadership roles in partner coordination. Collaboration between CO education and C4D teams enabled intensive advocacy campaigns to bring learners back to school, through public messaging and community engagements. The CO education teams also supported development of operational plans, and school standard operating procedures (SOPs) for COVID-19, and systems to monitor these. This was supported by collaboration with

other sectors (health, WASH, etc); and mobilising funds for provision of personal protective equipment (PPE), handwashing stations, toilets and soap to schools. UNICEF also supported governments to introduce hybrid and rotational learning; and worked with partners to strengthen the enabling environment for girls' return to school, such as by providing menstrual hygiene kits and supporting female role models and girls' clubs (South Sudan, South Africa).

Lesson learned: challenges and good practices

- **CO education staff found ESARO webinars and technical support (e.g., guidance and promising practices from the region) useful** for informing the application of global guidance. However, some reported the need for capacity building on the translation of global guidance into local interventions.

- **Work with other sectors and teams was widely perceived as crucial** to the safe reopening of schools. Regular multisectoral meetings at national and subnational levels were seen as a factor in success. But there has been inadequate funding and capacity to provide clean water and PPE to all schools.

- **UNICEF support to develop tools to assess learning losses** and to develop learning resources for catch up classes were perceived as useful in Ethiopia and Rwanda. However, across countries, government respondents spoke of the **challenges of assessing child learning losses**, which makes remedial instruction difficult to formulate.

- **Inclusion and equity interventions were promoted by dedicated working groups and use of existing data to identify vulnerable children**. However, learning losses were described as most notable among marginalised groups (girls, children with disabilities, refugees, IDPs) and the need for remedial action for these groups were widely reported.

- **UNICEF support to train local organisations to monitor school adherence to SOPs was seen as an enabler for safe reopening.** But challenges for monitoring include travel restrictions and inadequate school staff understanding and time to implement the SOPs.

Partnerships

Respondent views on the most important partnerships in the safe return to school efforts were wide ranging. Most emphasised the breadth of the partnerships as crucial. Multisectoral partnerships and those that resulted in funding were seen as particularly crucial, as were partnerships with media (as these were channels for both advocacy on the safe return to school, and for distance learning). Partnerships with INGOs and CSOs were also vital for local level implementation, as were collaborations with local education groups (LEGs) and PTAs.

Which areas require more partnership engagement?

- **Development of distance learning** content and capacity (Ethiopia)
- **Building capacity for use of digital learning resources** among teachers, caregivers and students (especially emphasised in South Africa and Rwanda)
- **Providing devices to marginalised children,** to enable access to distance learning resources (all four countries).
- **Media partnerships** for broadcasting of learning content and funding to improve the coverage of TV, radio and internet connectivity (all four countries).
- **Local level partnerships** to improve the engagement of PTAs (Ethiopia, Rwanda, South Sudan), and faith-based organizations (Rwanda, Ethiopia), to support schools with plan rollout, child learning, return to school and the monitoring of SOPs.

- **Continuity of preschool learning** in future crises**,** especially given the close link between early learning and future school enrolment rates (South Africa, Rwanda)

Funding

Although financing for the safe return to school efforts was perceived as insufficient to meet the needs of all children, UNICEF was widely lauded for its active, responsive work to mobilise funds in all four countries. UNICEF secured funds from its HQ emergency funding mechanism; and was seen as flexible in allowing the reprogramming of existing partnership agreements to enable support to the education sector response. Global Partnership for Education (GPE) funding was perceived as particularly important (South Sudan, Ethiopia, Rwanda) and UNICEF CO support to develop proposals for GPE funds was reported as a key success factor. UNICEF was also lauded for successfully appealing to multilateral agencies (e.g., World Bank, UNESCO, UNHCR) and bilateral donors (e.g., USAID, EU, JICA, FCDO, NORAD) for additional emergency support; and in South Sudan, the *Education Cannot Wait* new global fund. Respondents perceived that private sector funding has been fairly limited, yet some private sector partnerships been important - such as Unilever and Rand Water funding to support provision of water tanks to schools in South Africa.

The largest gaps in funding were perceived to be in the following areas:

- Provision of PPE, clean water facilities and sanitation supplies to schools, especially in rural and remote locations (all four countries).
- Support for teacher's salaries/ incentives and capacity building (all four countries, but especially mentioned in Ethiopia and South Sudan).
- Broadcasting costs associated with distance learning (all four countries).
- Supporting learning opportunities and catch-up programmes for marginalised children – girls, child refugees (Ethiopia and South Sudan) and children with disabilities (Rwanda).
- Printing and distribution of learning materials (Ethiopia, South Africa, South Sudan).

Summary of key recommendations

This section first summarises the key emerging issues that were prioritised by key informants in the focal countries; and then the prioritised action points developed by the ESARO Education team. The latter were developed following a workshop on the RTA findings in which the emerging issues were discussed and prioritised by ESARO and CO education colleagues.

Shorter term: suggested areas for further support in the response to COVID-19

- **Build school staff and teacher capacity to adhere to COVID-19 SOPs** (Ethiopia, South Sudan) and broader capacity to monitor SOPs (Rwanda, South Africa).
- **Tools, expertise and resources to assess child learning losses** (all four countries).
- **More support to design catch-up curricula and remedial classes** (all four countries),
- **Specific remedial actions and investment to address learning losses among marginalised children** and to ensure their return to school, with special emphasis on girls, disabled learners, and (in Ethiopia and South Sudan) child IDPs and refugees.
- **Support governments to develop policies on the mitigation of learning losses** caused by school closures during COVID-19, including the articulation of strategies for bringing vulnerable children back to school (girls, refugees, IDPs, disabled learners).

- **Strengthen partnerships with local groups** (PTAs, LEGs, CSOs) to support distance learning and remedial work, monitoring of school SOPs, and to build the capacity of district authorities and school administrators to roll-out school re-opening plans (emphasised especially in Rwanda and Ethiopia).

- **Further capacity building and support to develop distance learning content** for use in the COVID-19 response and to build capacity and resources for future crises.

- **More funding to print pedagogical materials** was noted in Ethiopia, South Sudan and South Africa, as was the need to **provide IT devices** to more marginalised children.

- **More funding for provision of PPE, handsfree water stands and hygiene supplies to schools** (all four countries)**,** and to enable disabled learners' access (e.g., ramps, appropriate water facilities, and toilets). Private sector partnerships to support this area were suggested (South Africa), as well as the need for more long-term agreements with local suppliers, so that COs can quickly more respond to largescale supply issues.

Lessons learned for education in emergencies (EiE)

Respondents highlighted some support areas for the longer term, as routes to improving preparedness for future crises.

- **Further build   capacity for core curricula condensation and developing distance learning content,** among MoEs and regional education authorities (all four countries).

- **Develop new pedagogical methods to reach children without access to technologies.** The need to develop methods and resources for children with disabilities (Rwanda) and young learners (South Africa and Ethiopia) was also noted.

- **Support to develop methods to monitor the effectiveness of distance learning**, including tools to determine baseline core competencies.

- **Build partnerships to ensure the continuity of early learning** (preschool) in future crises, which was prioritise due to the close link between early learning programs and later primary and secondary enrolment rates (South Africa).

- **To better enable distance learning in future crises, many respondents spoke of the need to build both teacher's and student's digital literacy** and capacity to use digital learning resources (emphasised in Rwanda and South Africa). A focus on brokering new partnerships to enable this was suggested. The need for partnerships to strengthen IT infrastructure in rural areas was also mentioned in all four countries.

- **Establishment of dedicated committees on equity and inclusion** in Rwanda and South Africa promoted attention and interventions; and might be replicated in future crises.

- **The need to build CO education team and MoE expertise in EiE planning and preparedness** was noted in all four countries**.** Several informants emphasised that multisectoral emergency planning should be undertaken in advance of emergencies, to enhance preparedness. Some CO staff also identified the need **to develop CO education team capacity in translating global EiE guidance** into practical contextualized activities, and to adapt the learning and contingency plans developed during Ebola and COVID-19 for use in future crises.

- **The need to strengthen intersectoral collaboration between education and health/EPI, nutrition and child protection services** was also noted, especially at subnational levels. Emphasis was placed on the need for preparedness planning for the

maintenance of critical health programs (e.g., immunization, vitamin supplementation and sexual health services) when schools are closed in crisis situations.

Concrete action points (summary)

Following the workshop to discuss the RTA findings, the ESARO Education team forwarded concrete action points, as summarised below.

	Short term (by end 2021)	2022	Longer term
Keeping schools safe and prepared	• Resource mobilisation for measures to keep schools safe • Intersectoral collaboration ((MoE-MoH)	• Strengthen preparedness of the system for further crises (including national, regional and local capacity building) • Continued strengthening of multisectoral school-based services to prepare schools for the return of all children and offer a platform for integrated service delivery.	Ensuring the systematic integration of risks in education sector planning and budgeting (includes COVID but also shocks and emergencies. Strengthening the humanitarian-development nexus.
Bring learners back	• Develop tools to monitor re-enrolment, understand barriers; and develop targeted measures • Engage and build capacity of community structures to bring vulnerable learners back	• Foster partnerships: community radio, traditional and religious leaders, PTA, youth organisations. • Resource mobilisation investment case: social protection interventions in countries most affected by dropout	
Learning loss and remedial work	Consolidate evidence and resources on learning loss and catch-up in ESAR; develop recommendations for the region.	• Develop tools for teachers to assess learning loss. • Engage teachers in training to develop tailored remedial learning programs.	
Digital learning	Develop partnerships with mobile phone operators and satellite companies to provide zero-rated access to online and digital learning solutions.	• Strengthen teachers, parents and learners' skills to use digital learning platforms, including partnerships with disability organisations. • Expand and reinforce partnerships with mobile phone operators and satellite companies.	Build long-term partnerships with device manufacturers and waste management companies to recycle digital devices for EdTech

List of abbreviations

C4D	Communication for Development
CO	Country Office
ECD	Early Child Development
EiE	Education in Emergencies
ESAR	Eastern and Southern Africa Region
ESARO	Eastern and Southern Africa Regional Office (of UNICEF)
FCDO	Foreign Commonwealth and Development Office
IPC	Infection Prevention and Control
KII	Key Informant Interview
LEG	Local Education Group
MICS	Multiple Indicator Cluster Survey
MODA	Multi- Overlapping Deprivation Analysis
OPM	Oxford Policy Management
PPE	Personal Protective Equipment
RTA	Real-Time Assessment
SOP	Standard Operating Procedures
WHO	World Health Organization
UNHCR	United Nations High Commission for Refugees
USAID	United Sates Agency for International Development
WFP	World Food Programme

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1   Introduction

As of September 2021, over 4.6 million people globally have died from COVID-19.[1] The pandemic has upended people's lives across the globe, and the effects on economies, livelihoods and service provision are exacerbating poverty,[2] vulnerability and inequity (Robertson et al 2020).

This real time assessment (RTA) was commissioned by the UNICEF Eastern and Southern Africa Regional Office (ESARO) to support UNICEF reflection on its COVID-19 response to date, including success factors, challenges and lessons learned. The RTA has been implemented in two phases:

Phase I (research undertaken from October to December 2020) had a broad multi-sectoral basis. It included a light-touch regional analysis and deep dives in six countries (South Africa, Somalia, Uganda, Kenya, Madagascar and Namibia).

Phase II (research undertaken from June to September 2021) has a more discrete focus on three thematic areas and four focal countries (Rwanda, South Africa, South Sudan and Ethiopia). This responded to UNICEF staff reflections on Phase 1, which highlighted preference for more in-depth analysis. Phase II assesses UNICEF's response to COVID-19 in three thematic areas, encompassing the work of four UNICEF programmes:

- COVID-19 vaccine supply (UNICEF Supply and Health EPI teams)
- COVID-19 vaccine demand promotion (C4D)
- Education - specifically the safe return to school - **the focus of this report**

The thematic focus for Phase II was defined by the RTA Steering Committee. As described in the RTA Phase II inception report, the focus and questions for each thematic study were agreed through a series of engagements with the focal ESAR programme teams (regional and country offices), with support from the ESARO Evaluations Team. The focal countries were also identified in collaboration with the regional programme teams and the UNICEF Deputy Regional Director. The focal countries were a 'best fit' of the four programme team preferences, based on factors such as progress with programme roll out, country contexts (e.g. conflict, economic development, and effective vaccine management rating), and UNICEF's role in country coordination structures.

1.1   Background to the study on safe school reopening

Globally, the COVID-19 pandemic has affected nearly 1.6 billion learners in more than 190 countries, representing one of the most significant disruptions in global education systems to date.[3] Since the start of the pandemic, children around the world have lost an estimated 1.8 trillion hours of in-person learning.[4] School closures have interrupted school feeding and immunization programmes, and have increased dropout rates (especially among girls). School closures have also increased vulnerability to violence among children with disabilities and girls,[5] and children who rely on school as a safe space have been cut off from this safety net.[6]

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[1] WHO Coronavirus Disease (COVID-19) Dashboard: https://covid19.who.int/ [accessed July 2021]
[2] World Bank website: https://www.worldbank.org/en/topic/poverty/overview [accessed July 2021]
[3] UNITED NATIONS policy_brief_covid-19_and_education_august_2020 (1).pdf [accessed July 2021]
[4] UNICEF (Sept 2021) Education disrupted: *The second year of the COVID-19 pandemic and school closures.*
[5] UNICEF, UNESCO, World Bank, OECD (2021), What Next: Lesson on Recovery: Findings from a Survey of Education Ministries during the Covid-19 Crisis.
[6] Borkowski et al (2020).

Worldwide, over 90% of education ministries have implemented some form of remote learning that involves radio, television, or the internet.[7] Yet, it is estimated that 462 million (31%) of school children worldwide cannot be reached by the digital or broadcast remote learning programs enacted to counter school closures.

East and Southern Africa region (ESAR)

In ESAR, the situation is even more grave. UNICEF has estimated that 40% of children remain out of school as of July 2021, affected by the COVID-19 pandemic combined with prior factors.[8] It has also been estimated that nearly 50% of school children (67 million) cannot be reached by digital or broadcast learning programs.[9] UNESCO estimated that 64% of schools in ESAR were open as of September 2021.[10] Yet evidence of the negative impact of the school closure on children's learning, safety, physical and mental health is overwhelming.[11] There have been major learning losses for all grades and socio-economic groups of children. Yet estimates show that marginalised children have suffered the brunt of learning losses, including girls, children from poor households, in rural and hard-to-reach areas, children with disabilities, and children who are internally displaced or refugees.[12]

1.2   Intervention Contexts: situating the four focal countries

In ESAR, since the beginning of the pandemic, there have been 4,740,722 confirmed COVID-19 cases and 124,191 deaths. There is considerable country variation, however.[13] Of the four focal the countries, South Africa has had the highest number of cases (2,882,630) by a substantial margin, followed by Ethiopia (332,961), Rwanda (95,257), and South Sudan (11,814). Figure 1 shows the cumulative number of COVID-19 cases per 100,000 population in the four focus countries compared to wider ESAR by September 2021.

Figure 1 Cumulative number of COVID-19 cases per 100,000 population[13]
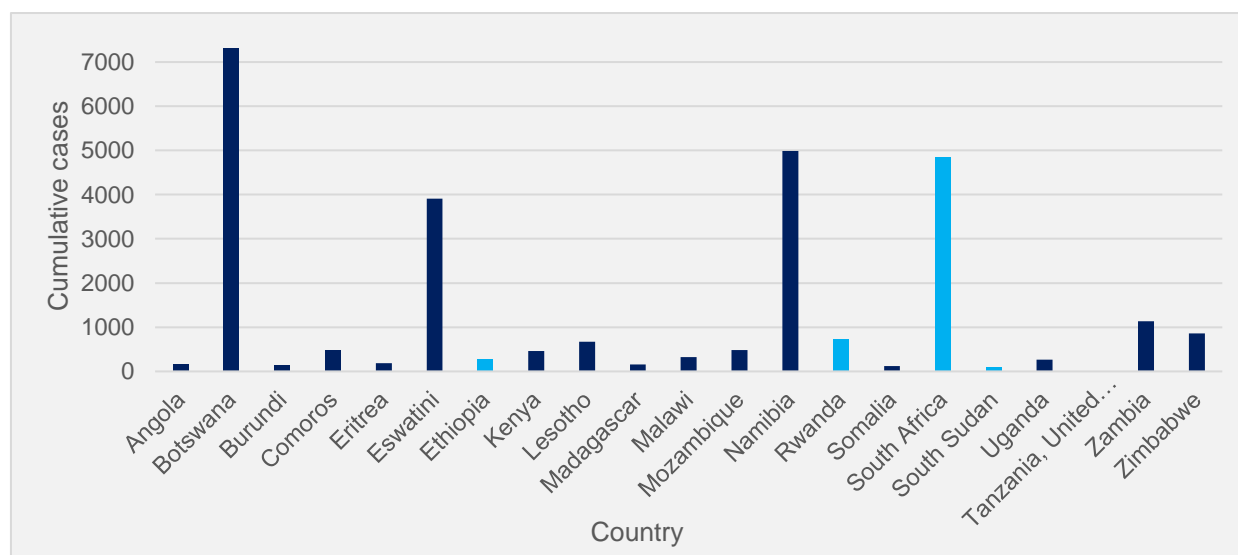
Figure 1 shows that, among the four focal countries, South Africa has also had the highest cumulative number of cases per 100,000, although bordering nations (Botswana and Namibia)

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[7] UNESCO et al (2020)
[8] UNICEF (July 2021) 40 per cent of children in Eastern and Southern Africa are not in school (unicef.org)
[9] UN Report on COVID-19 (2021): Are Children Able to continue learning During School Closures?"
[10] UNESCO Global monitoring of School Closures - website [accessed July 2021]
[11] UNICEF, UNESCO, UNHCR, WFP, World Bank (June 2020), Framework for School reopening
[12] UNICEF COVID-19 and Children Data Hub [accessed July 2021]
[13] WHO COVID-19 Dashboard: https://covid19.who.int/ [Accessed 21st September 2021].

have had higher case rates. Rwanda has had more cases per 100,000 population than Ethiopia, while South Sudan has had the fewest. The number of deaths per 100,000 population in the four countries follows the same pattern.[13]

As shown in Table 1, the four study countries also vary in regard to contexts that affect the provision of education services, and access to education in the longer-term and during the COVID-19 crisis.

Table 1   Broad context characteristics of the four focal countries

	Population[14]	Income classification[15]	Poverty headcount ration at $1.90 a day (2011 PP) (% of population)	Fragile and conflict affected context?[16]
Ethiopia	114,963,583	Low-income	30.8	Yes
Rwanda	12,952,210	Low-income	56.5	No
South Africa	59,309,690	Upper middle-income	18.7	No
South Sudan	11,194,730	Low-income	76.4	Yes

Of particular note, South Africa is an upper middle-income country, while Ethiopia, Rwanda and South Sudan are low-income, with a large proportion of the population below the poverty line: Ethiopia (31%), Rwanda (57%) and South Sudan (76%). Additionally, Ethiopia and South Sudan are both classified as fragile and conflict-affected states and COVID-19 has further complicated complex humanitarian situations. In both countries, civil conflict has led to a lack of basic services and infrastructure, population displacement and restricted movement.

Table 2 provides key education sector data for the four countries before COVID-19, and indicates the number of weeks that schools had been closed at the time of the research (August 2021).

Table 2   Key characteristics of the four focal countries: education profiles

	Pre-COVID out of school rate – Primary (%)[17]	Female pre-COVID adjusted net attendance rate (%)[18]	Pre-COVID School-age digital connectivity (%)[19]	Estimated proportion of schools with basic drinking water services 2019 (%)[20]	Estimated proportion of schools with basic hygiene services - water & soap 2019 (%)[21]	Duration of full school closures (weeks), at time of research[22]
Ethiopia	25.2	68.1	Not available	15.5	5.4	21
Rwanda	5.5	95.5	Not available	55.0	51.5	32
South Africa	1.0	98.9	0.20	76.7	Not available	15
South Sudan	72.4	21.1	0.00	50.8	18.1	33

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[14] World Bank (2021). https://data.worldbank.org/ [Accessed: 21st September 2021]
[15] World Bank (2021). World Bank Country and Lending Groups.
https://datahelpdesk.worldbank.org/knowledgebase/articles/906519-world-bank-country-and-lending-groups
[16] The World Bank. 2021. Classification of Fragile and Conflict-Affected Situations. [Accessed: 21/9/2021]
https://www.worldbank.org/en/topic/fragilityconflictviolence/brief/harmonized-list-of-fragile-situations
[17] UNICEF (2021). UNICEF Global database on out-of-school children rate.
https://data.unicef.org/topic/education/overview/ [Accessed: 8th October 2021]
[18] UNICEF (2021). UNICEF Global database on adjusted net attendance rate.
[19] UNICEF (2021). UNICEF Global database on school-age digital connectivity
https://data.unicef.org/topic/education/overview/ [Accessed: 8th October 2021]
[20] WHO/UNICEF (2020) Progress on drinking water, sanitation and hygiene in schools: Special focus on COVID-19. https://data.unicef.org/topic/water-and-sanitation/wash-in-schools/ [Accessed: 8th October 2021]
[21] WHO/UNICEF (2020) Progress on drinking water, sanitation and hygiene in schools: Special focus on COVID-19. https://data.unicef.org/topic/water-and-sanitation/wash-in-schools/ [Accessed: 8th October 2021]
[22] Month of main research: August 2021. Data from OCHA global dataset on the duration of school closures.
https://data.humdata.org/dataset/global-school-closures-covid19 [Accessed: 24 November 2021]

Ethiopia: Before COVID-19, eight million children were out of school (25% in primary; 31% in lower secondary; 54% in upper secondary)[23] and 2.3 million children required immediate educational assistance.[24] Schools were closed on 20 March 2020. There was partial reopening in October 2020 and April 2021, especially for students in exam years, but further closures after that. **At the time of the research, schools were closed for most students and decisions on reopening were in progress**. Reopening is now scheduled for October 10, 2021. UNESCO data indicates that schools had been fully or partially closed for 26 weeks at the time of the RTA research, affecting over 26 million children.

Rwanda has a high primary school enrollment rate (98%), yet there are more children out of school at lower and upper secondary levels (26% and 59% respectively). Classrooms are often overcrowded however, with an average of 62 students per qualified teacher. Although there are relatively equal numbers of boys and girls in classrooms, girls are more likely to drop out of school, and boys outperform girls in 26 of Rwanda's 30 districts.[25] **Schools were closed in March 2020. They were partially reopened in November 2020 and more fully in February 2021. Yet partial closures were reintroduced in June-July 2021**. UNESCO data indicates that schools had been fully or partially closed for 46 weeks at the time of the RTA research.

South Africa's pre-COVID school enrolment rates were 99% at primary level, and 90% at secondary level.[26] However, access to quality education varies by wealth quintile, and 25% drop out before matriculation (age 18) with a disproportionate number of girls and children from poor areas.[27] **Schools closed in March 2020, were reopened in June 2020, but with ongoing partial closures to date. The country quite quickly switched to distance and blended learning.** However, poorer children have had significantly less access to these distance learning resources, and sporadic school closures have resulted in school children losing an estimated 60% of learning time, and missed school-based meals.[28] Over 400,000 learners have reportedly dropped out of school altogether during the pandemic, again with a disproportionate number from poorer households.[29] The pandemic has **also catalysed social unrest which resulted in over 2000 schools being looted or vandalised, while being out of school also exposes children (especially girls) to violence**.

South Sudan: Before the COVID-19 crisis, only 28% of primary age children were enrolled in school (Table 2). 2.2 million of all school age children were out of school, most of whom were girls.[30] Protracted conflict has devastated the country's education system and COVID-19 has raised the number of out-of-school children to 4.6 million.[31] **Schools were closed in March 2020. They were partially re-opened in October 2020 (for students in exam years) and more fully in April 2021**. COVID-19-related school closures have heightened the risk of violence towards girls, while child marriage (affecting 51.5% of girls in the country pre COVID-19) and early pregnancy are on the rise, which dramatically increases the risk of girl's school dropout.[32]

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[23] UNICEF data on Out of School Children 2021
[24] Ethiopia 2021 Humanitarian Response
[25] UNICEF Rwanda Website [Accessed August 2021]
[26] Education | UNICEF South Africa [Accessed September 2021]
[27] ibid.
[28] An Education economist has estimated that the majority of learners could have lost almost 60% of their contact school days. https://theconversation.com/counting-the-cost-of-lost-schooling-in-south-africa-160031
[29] https://www.unicef.org/press-releases/learners-south-africa-one-school-year-behind-where-they-should-be
[30] UNICEF data on Out of School Children, 2021
[31] Getting girls back to the classroom after COVID-19 school closures (South Sudan).pdf (unicef.org)
[32] Reopening schools – at a high cost | UNICEF South Sudan

Photo Credit: UNICEF/UNI319836/

1.3   Study scope, approach and questions

Scope: The RTA provides a relatively light-touch assessment, based on review of available documents and a limited number of key informant interviews (KIIs) in the four focal countries. This design recognises the need for real time learning and reflection in an unchartered and fluid context in which programme adaptations may be needed. As UNICEF support interventions are being rolled out in the evolving COVID-19 context, the RTA aims to inform what is working, challenges and possible adaptions, whilst recognising their non-static nature.

Respondent sample: The RTA of UNICEF's support on safe school reopening is based on 23 interviews with key informants in Ethiopia, Rwanda, South Africa and South Sudan. This comprised of interviews with UNICEF country office education staff (4), partners (10) and frontline workers (9). Annex B provides a more detailed breakdown of the interviewees. The respondents were purposively sampled based on their roles in work related to the safe reopening of schools in the context of the COVID-19 pandemic.

Interviews and analysis: All respondents were sent a statement on research ethics ahead of the interview, and all provided informed consent at the beginning of the interview. The interviews were undertaken from July to September 2021, using semi-structured interview guides (see **Annex C**). The interviews were recorded. The interview data were analysed using a framework based on the study sub-themes, and successes and challenges within these.

The intended audience of the study are the ESAR education teams at the regional and country levels. The report identifies findings that were common across the four countries, and thus may be applicable to wider ESAR. It also identifies country-specific innovations, successes and challenges, which may be applicable to ESAR countries with similar contexts.

Limitations

- As the RTA was relatively light touch and entailed a small number of KIIs, we have not captured a broad range of perspectives and the research did not reach saturation point. It did not include interviews with final beneficiaries. This affects the depth of analysis.

- The report highlights the countries in which specific successes and challenges were mentioned by interviewees. However, if the issue was not mentioned in a country, it does not mean that the issue was not resonant there. As may be expected with a small sample, the issues raised by respondents varied even within countries.

- There are limitations to the transferability of the findings to other countries

- As the COVID-19 response work is ongoing, the assessment does not make judgements on the impact and coverage of UNICEF's COVID-19 response.

Study focal questions

High level question: How has UNICEF contributed to preparing for the safe 'return to school' for all learners? What lessons have been learned on EiE preparedness, response and risk reduction efforts and capacities? Are there best practices that could inform work in other countries, and UNICEF's programming & preparedness in future disasters/pandemics?

Specific questions:

1. **Policy level:** What has been UNICEF's role in influencing/advocating for safe school reopening and promoting equity in the 'safe return to school' effort? What strategies have worked well or less well, and why? What are the lessons learned in UNICEF positioning vis-à-vis government and decision makers?

2. **Programming**: What have been UNICEF's key focus and strategies in the continuity of learning approach, in preparing schools to reopen safely and bring back all learners, including the most vulnerable? *How holistic was the approach, and is multisectoral support and collaboration proving key to successful programming?* What are the lessons learned, in particular on the effectiveness of applying an equity lens; the usefulness of different tools/ frameworks/ guidance; and in regard to future EiE preparedness, response and risk reduction? What are some of the internal lessons learned (capacity building/expertise, HR, etc.?)

3. **Partnerships**: What strategic alliances and operational partnerships have been essential in supporting the preparedness and safe return to school effort? What areas require further partnership engagement? What are the lessons learned?

4. **Funding**: What have been the largest gaps in funding, in regard to preparing and supporting the safe return to school effort? What new donor funding has been key? What are the lessons learned regarding mobilising funds and private sector engagement?

Research findings

Photo Credit: UNICEF South Sudan / Rich

2 Policy advocacy

2.1 UNICEF's role in advocating for safe school reopening

UNICEF COs and education staff have played convening and coordinating roles in the COVID-19 education technical working groups (TWGs) and have engaged at higher and multi-sectoral levels through COVID-19 steering committees and task forces in all four countries. In Rwanda and South Africa, the CO also supported and engaged in technical committees on inclusion and equity in the COVID-19 response.

The COs have pursued high-level engagement with ministers, and with the Offices of the President (in South Africa) and Prime Minster (South Sudan) to promote support for the safe re-opening of schools. The South Africa CO also presented international evidence at a Southern Africa Development Community (SADC) forum to promote regional debate and support for the safe reopening of schools, creating further impetus in South Africa.

In all four countries, UNICEF has developed and shared briefing notes and website stories which use international evidence (e.g., on the relatively low impact of COVID-19 on child health, and the negative impact of prolonged school closure) to promote safe school reopening. This has been coupled with sharing **examples from other countries** on safe school reopening and facilitating peer learning exchanges among ministries of education in different countries (mentioned in South Africa).

The COs have used mass media to raise the profile of the learning losses, and developmental and wellbeing risks inherent in prolonged school closure and to build confidence and support for safe school reopening. In this regard, UNICEF COs disseminated key messages, released national and local level press communiqués, and made statements on national and community-based media platforms.

To promote broad-based support for the reopening of schools, which has been essential for policy development and implementation, UNICEF COs have worked at multiple levels. This included collaboration with UNICEF C4D teams to develop and disseminate messages to the general public to build support for safe school reopening; and work with partners on direct engagement at sub-national level, for example with education departments (regional, zonal, district), teachers' unions, and with community leaders and organisations.

UNICEF education teams have also directly supported governments (national and regional) to develop policy and plans on safe school reopening. To achieve this, they have worked closely with other UNICEF sector teams and experts.

2.2 What worked well and challenges

In all four countries, respondents perceived that UNICEF's strong positioning in national dialogues on safe school reopening was enabled by its earlier engagement and lead role in advocacy on the continuity of learning during school closures. In that regard, UNICEF was described as quickly responding and as the lead UN agency *'making the case'* for the continuity of learning and promoting inclusion and equity in distance and home-based learning.

In all four countries, partners perceived that UNICEF COs played a key role in facilitating consensus among stakeholders with divergent views. In this regard, UNICEF was widely described as a 'neutral arbiter', while its **coordination and convening role in the TWGs** was seen as a key factor in contributing to an 'all-partner response' (especially in South Africa and Ethiopia). However, in Ethiopia, where schools were closed at the time of the research, a government partner perceived that further work was needed to create the necessary consensus to re-open schools, taking account of the opinions of all stakeholders from political leaders and teachers unions to caregivers.

"UNICEF played a galvanizing role… UNICEF comes with an international footprint and a legitimacy that helps create consensus among competing interest and different points of view" **(Government Partner, Ethiopia)**

"UNICEF is seen as a neutral arbiter of some of the difficulties that we have encountered in decision-making about school closing and re-opening during the COVID-19 crisis" **(Government partner, South Africa)**

UNICEF CO engagement in COVID-19 steering committees and task forces were widely seen as important for higher level positioning and engagement, and for multi-sectoral engagement. For example, the South Sudan UNICEF CO was described as playing a very significant role in advocacy to reopen schools*,* especially through its membership of the *National Task Force on COVID-19*. The Task Force was perceived as a particularly important entry point as it convenes various ministries[33] involved in decisions on the closing and reopening of schools. Here, a partner explained, a key moment of UNICEF influence on the safe reopening of schools was its sharing of a briefing note with the Task Force, which presented international evidence on the relatively low impact of COVID-19 on child health**.**

Engagement with the offices of the President or Prime Minster was seen as crucial in South Africa and South Sudan for building the required high-level support for safe school reopening and keeping schools open. UNICEF CO respondents in both countries spoke of close collaboration between high level government decision makers and the UNICEF leadership in delivering aligned messages, which was perceived to build confidence among the public, school administrators, teachers and parents.

"UNICEF and the Government of South Sudan spoke with the same voice about the need to keep schools open" **(Government partner South Sudan)**

UNICEF engagement in the SADC regional forum was described as an influence in galvanizing high level support in South Africa. In particular, UNICEF shared international evidence on the negative impacts of school closures on child wellbeing in the SADC forum.

Respondents in all four countries felt that UNICEF made strong use of mass media to raise the profile of child learning losses and the developmental risks to children of prolonged school closure, and to instil understanding that '*children and schools were not the drivers of the pandemic',* and other messages tailored to country contexts. The profile gained through media work was perceived to be an influence over high level support, in part because it was seen to foster community understanding and demand.

Working at multiple levels: Government respondents, NGOs, and frontline workers in all four countries perceived that UNICEF successfully launched both high-level national advocacy and also worked effectively with partners on messaging and direct engagement at the subnational and community levels. This multi-layered approach was perceived as crucial to getting a wide spectrum of key stakeholders onboard both for safe school reopening and for attention to inclusion. In this regard, many respondents (in all four countries) referred to the utility of UNICEF's decentralized presence in educational systems and work with multiple partners.

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[33] This Task Force includes the Ministries of Education, Health, Interior, Social Welfare, Labor, Environment and Forestry, all of which played a role in decisions to close and reopen schools.

Government respondents in all four countries perceived that UNICEF CO's use of international data and examples were crucial in strengthening the case for safe school reopening. International data were used in TWGs and task force meetings, in meetings with policy makers, and in UNICEF media communiqués. Numerous examples were provided of such evidence having influence at ministries of health and education, and among political decision makers. For example, government, NGO and frontline partners in Ethiopia and South Sudan perceived that UNICEF sharing of international data helped to firmly position the concept of the 'protective nature' of schools for children in the COVID-19 pandemic. In South Africa, this was achieved by sharing evidence that disruptions in schooling have caused breakdowns in child protection systems and increased violence against out-of-school girls; and that school closures can result in increased rates of teenage pregnancy and school drop-out for marginalized children. In Ethiopia, UNICEF worked at federal level to draft a joint briefing paper on the impact of school closures on children's educational achievements.

Peer sharing of country experiences were described as an influence over policy formulation in several of the countries. For instance, a government respondent in South Africa explained that the national COVID-19 education sector response plan was influenced by peer learning (facilitated by UNICEF) with New Zealand, France, Australia and South Korea.

Finally, UNICEF's direct support to policy development, and mobilisation of funds to support specific solutions, were mentioned as key influences over policymaker's support for specific policy directions in safe school reopening in all four countries. Such support and funding enabled interventions that offered to make school environments safer, such as PPE and handwashing facilities. It also enabled locally appropriate solutions to the challenges of distance learning (e.g. donor funding for provision of solar radios to children in Ethiopia and South Sudan).

Photo credit: UNICEF South Sudan/ Ryeng

3   Programming

This section outlines the findings on programming, starting with the continuity of learning (section 3.1) and then safe school reopening (section 3.2).

3.1   Continuity of learning approaches

3.1.1   UNICEF's key focus and strategies

The focal UNICEF COs worked in close collaboration with governments and development partners in the education sector to support continuity of learning plans and interventions during school closures, and as part of blended learning approaches when schools have (often partially) reopened. UNICEF's focus and strategies were similar in all four counties unless otherwise stated.

Formulating COVID-19 communication strategies and materials: Early in the pandemic UNICEF education, health and C4D teams collaborated in developing communication strategies to inform school administrators, caregivers and children about the COVID-19 virus, community transmission and prevention – to promote family health during school closures.

Developing condensed core curricula: UNICEF COs worked with MoE curriculum specialists to identify the core academic competencies for priority focus during school closures, and to develop corresponding condensed curricula.

Developing lesson content: UNICEF provided technical and financial support to ministries of education to develop radio, TV and e-learning content for primary, pre-primary and secondary classes. In Ethiopia, where responsibility for education is decentralised, this support was provided to the regional education authorities; while UNICEF also facilitated regional sharing of resources and supported the MoE to establish guidelines for the regional programs.

Support to media broadcasting of educational resources: UNICEF leveraged its media partnerships and provided or mobilised funding for the broadcast of educational content on various mass media (TV, national and community radio), internet and social media platforms.

Identifying skilled teachers to deliver education content on radio (promising practice): In South Sudan during the initial lockdowns, UNICEF worked closely with the MoE to identify highly skilled teachers to deliver live teaching and pre-recorded lessons (on core subjects such as maths, English literacy and life skills) for broadcast on national and sub-national radio. A partner explained that this was important due to the high number (70%) of unqualified teachers in South Sudan.

Printed materials: To reach children without access to radio, TV or information technology, UNICEF assisted the MoEs in South Sudan and Ethiopia to develop and distribute printed learning materials for use at home. However, in Rwanda, the use of printed materials was discouraged due to the potential for spreading the virus, which reportedly left many children without access to learning resources.

UNICEF COs promoted and supported inclusion in distance and homebased learning in all four countries. This objective was advanced through support to committees on inclusion in Rwanda and South Africa. In the latter, UNICEF financed the work of an *Advisory Committee on Inclusion and Equity*, tasked with reviewing ways to mitigate the effects of COVID-19 on existing inequities. Solutions proposed by the committee, and financed by UNICEF, have

included remote learning solutions for the poorest schools, lessons in indigenous languages on TV and community radio, and adapted curricula for deaf and blind learners. Similarly in Rwanda, UNICEF promoted creation of a *TWG on Inclusive Education*, which has focused on vulnerable children, including children with disabilities. This led to production of TV lessons with sign language, and provision of individual home-based support for over 7500 children with disabilities.

Innovation: In Ethiopia and South Sudan, UNICEF provided solar radios to children without electricity (in remote villages and refugee settings) to enable them to continue to learn during the COVID-19 crisis.

Providing technologies to marginalised children, to enable access to distance learning resources: In Ethiopia and South Sudan, UNICEF mobilised partner support to provide solar radios to children without such devices and in areas that lack electricity. Additionally in South Sudan**,** numerous children within internally displaced populations (IDP) and refugee camps have been provided with tablets and disk drives.

UNICEF COs also supported capacity building for teachers and PTAs to enable them to promote and support child use of digital and broadcast educational resources, in all four countries.

Support to children at home: UNICEF COs worked closely with learner support programs and home education associations, in all four countries. Additionally, the Rwanda and South Africa CO education teams **collaborated with child protection workers** to promote the monitoring of at-risk children during school closures. **Food boxes** were also provided to children at home in South Africa and Ethiopia, to continue nutritional support to children in lower-wealth quintile schools. In South Sudan, UNICEF has continued support to Peace Clubs during COVID-19, to engage children in stimulating extra-curricular activities, with a parallel focus on life skills.

Photo credit: @ UNICEF South Africa

3.1.2 Continuity of learning: challenges and lessons learnt

Drawing on educational resources from other countries: In Rwanda, as a short-term measure when schools first closed, UNICEF initially utilised its networks to leverage radio scripts on numeracy and literacy from other countries, which were contextualised for Rwanda. This enabled a fast response while, in parallel, UNICEF supported the MoE to develop learning materials that are aligned with the Rwandan curriculum.

Shortage of specialists for development of core curricula: This was noted by government informants in Ethiopia and Rwanda, who also reported challenges with accommodating the vast differences in core educational needs across diverse populations.

Need for more capacity building on radio scriptwriting and production of educational content (emphasised especially in Rwanda).

Lack of funding to print or distribute enough pedagogical materials: This was mentioned by respondents in Ethiopia, South Sudan and South Africa and affected efforts to reach all out-of-school children.

The COVID-19 crisis has laid bare the exclusions that arise from the digital divide which affect children from lower wealth quintiles and vulnerable groups, such as disabled and refugee children, who have less access to radio/TV and online learning resources. **Beyond the pressing need to strengthen radio/TV infrastructures, partners in Rwanda and Ethiopia, identified the need to develop new pedagogical methods** to reach children who lack access to technologies. Government respondents, especially in Rwanda, Ethiopia and South Sudan, also reported that the process of transitioning to remote learning was difficult due to poor connectivity, lack of digital skills, and the need to adapt pedagogies to remote learning.

The difficulties of monitoring the effectiveness of distance learning for students, and the lack of tools for such assessment, was noted in all four countries. Respondents in Rwanda and South Africa suggested the development of core competency assessments to measure academic achievement for students relying on distance learning during emergencies.

Distance learning is not always appropriate for young learners. Partners in South Africa suggested the need to develop new types of educational engagement and early child development activities to ensure the continuity of learning for younger children during COVID-19 and other crises. Partners in Ethiopia also identified the need to develop pre-primary and parental education radio and TV content for younger children.

There is a need to strengthen digital literacy among teachers and students (mentioned in Rwanda and South Africa) and this was seen as an important part of preparedness for future crises that may require extensive use of online and digital learning resources.

For distance learning, IT infrastructure needs to be strengthened in rural areas to ensure accessibility (mentioned by numerous respondents in all four countries).

Photo credit: UNICEF Ethiopia/2020/ NahomTesfaye

3.2   Safe school reopening

3.2.1   Use of guidance and frameworks

Partners, and UNICEF CO education staff, in all four countries, perceived that the *Global Framework for School Re-opening* (UNESCO et al, 2020) was useful for informing national plans on safe school reopening. In all four countries, these were used by UNICEF and MoEs to inform country-specific programmes and guidelines on safe school reopening and efforts to bring children and youth back into schools, including tailored services to meet their learning, health, psychosocial and other well-being needs.

Other global and regional guidance were also described as useful, especially by CO education staff in South Sudan and Rwanda, such as the guidance on *Children with Disabilities* (UNICEF 2020); *Building Back Equal: Girls Back to School* (UNESCO et al 2020), and the *Re-Imagining Education Guidelines*. Respondents in South Sudan and Rwanda also indicated that their experience in planning education sector responses in earlier crises (e.g., Ebola in Rwanda), have been useful for developing education sector response plan during COVID-19.

CO education staff (especially in South Africa) and some partners also found UNICEF's webinars and regional meetings useful for informing the application of global guidance, and for learning from peer experiences. An area that was highlighted as especially useful was the sharing of experiences on *blended learning* approaches (i.e. classroom and distance learning).

UNICEF CO education staff in all four countries appreciated the technical support provided by UNICEF global and regional teams to guide country-level education sector responses. Yet, some reported the **need to build UNICEF CO staff expertise in translating global guidance into practical contextualized activities** that can be quickly implemented in resource-constrained settings.

3.2.2   UNICEF CO focus and strategies

Government respondents across the four countries appreciated UNICEF's technical and financial support to developing operational plans for safe school re-opening. In most cases this was done through direct (or consultancy) support to MoEs, as well as engaging the TWGs or (in Rwanda) by helping to convene a *School Re-opening Task Force*.

Tools to assess and address learning losses: Partners in Ethiopia and Rwanda reported UNICEF's important contribution to developing tools for determining levels of learning loss resulting from school closures.

Rotational and hybrid learning: In South Africa, UNICEF helped the MoE to introduce rotational learning (staggered lessons) to enable compliance with social distancing requirements, and also a hybrid model (classroom and distance learning).

Multisectoral collaborations

UNICEF COs supported the MoEs, in all four countries, to develop standard operating procedures (SOPs) and guidelines for schools on COVID-19 infection prevention. UNICEF CO education staff facilitated multisector inputs into these, which many partners saw as crucial. For example, both health and WASH teams provided technical support to develop protocols for schools on hygiene measures, such as handwashing, respiratory etiquette, use of protective equipment, cleaning procedures for facilities and safe food preparation practices within schools. Health teams also provided technical inputs into SOPs on social distancing,

and protocols for the management of positive COVID-19 cases in schools, including the need for patient isolation, quarantine and referral for medical services.

Box 1: School safety protocols: SOPs, implementation and monitoring in South Africa

In South Africa, an MoE respondent appreciated UNICEF's engagement of a consultant to support the ministry to develop SOPs for the containment of COVID-19 in schools (cleaning, social distancing, etc.), and to develop (with UNICEF support) training manuals for schools on maintaining school hygiene.

Tracking and management of positive cases: The consultant also supported development of protocols and training materials on the management of positive COVID-19 cases, including guidelines on contact tracing, isolation of positive cases and referral to medical services. UNICEF then supported development of a *WhatsApp TeacherConnect* group to report daily COVID-19 cases in schools, as a part of the national epidemiological monitoring of cases.

*Monitoring adherence to SOPs***:** UNICEF and its local implementing partners have trained and supported a network of 30 NGOs (in 13 states) to work in collaboration with local Education Directorates to monitor school adherence to safety protocols. UNICEF has also supported the placement of youth in schools, as screeners and cleaners and to monitor adherence to SOPs.

Monitoring school adherence to SOPs: In Rwanda, Ethiopia and South Africa, UNICEF and its local implementing partners are also working with local education authorities, school staff, NGOs and volunteers to monitor school adherence to safety protocols (see example in Box 1).

Personal protective equipment (PPE), toilets and handwashing facilities: UNICEF COs have assisted the MoEs and subnational education authorities, in all four countries, to procure PPE for schools; and to support the provision of toilets, handsfree handwashing stands, soap and hygiene promotion activities. In this regard, UNICEF was widely described as working '*tirelessly'*. This support has been focused on remote, rural and under-resourced schools. Despite this, current funding for these provisions and facilities was widely described as inadequate to cover all schools.

Inclusion and equity focus

Partners and frontline workers in all four countries reported that the UNICEF COs have advocated strongly for equity and inclusion in the COVID-19 education response. For example, a government informant in Rwanda lauded UNICEF's work to promote the inclusion of children with disabilities, girls and poorer children. Similarly, in Ethiopia, frontline workers reported that UNICEF has advocated strongly to the Ethiopian MoE, through the School Re-opening Task Force, for a special focus on girls, children with special needs, child IDPs and refugees. A key strategy to promote the return to school for such vulnerable children has been targeted public communications and dialogues with community leaders and organisations.

Promoting girls return to school has been a special focus of the COs in all four countries. In South Sudan and South Africa, UNICEF and partner work has included a focus on reproductive health, such as provision of menstrual hygiene *Dignity Kits*. In South Africa, UNICEF has also supported partners to provide safe spaces and life skills classes for girls. The South Sudan CO and partners have used networks of *'female role models'* and '*girls' clubs'* to create safe spaces for female dialogue and to promote girls return to school. Several partners lauded this focus on the enabling environment for girls to return to school; and felt that the extension of existing interventions to the COVID-19 emergency context makes sense

South Africa: teaching handwashing in schools

Hotlines for children: In South Africa, UNICEF has supported a national telephone hotline that offers psychosocial support to vulnerable children, and has decentralized the system to provincial level, with funding for child counselling in local languages. This was perceived as providing much needed space for addressing the psychosocial effects of COVID-19.

Child rights framings are being used in Ethiopia, where UNICEF has supported the MoE to advocate for the passage of a *Children's Education Act*. The Bill promotes access to quality education as a fundamental child right, including during the COVID-19 crisis. If the act is passed, a respondent explained, it would ensure the right to education in Ethiopia, and support the '*creation of an enabling and equitable environment for the national COVID-19 response'*.

Collaboration with C4D

Partners and INGOs in all four countries applauded UNICEF's support to intensive advocacy campaigns to bring learners back; to share information on COVID-19 and to quell fears about infection in schools; and to explain COVID-19 containment measures in schools. The messaging strategy was perceived as particularly comprehensive because it was targeted at different audiences, at national and local levels, and used multiple channels.

- **Use of mass media:** In Ethiopia, UNICEF supported the *Bring Children back to School Campaign,* which used social media, radio and TV to share messages about the importance of children returning to school. **Interactive channels**, such as radio talk shows, were considered as especially useful by some respondents, as they provided space for dialogue on fears about reopening schools and the opportunity to ask questions. UNICEF's **social listening** (e.g., on Facebook Live in South Sudan) was also perceived as useful in monitoring public attitudes about school re-opening – which was used to refine messages.

- **Community engagements** were supported by UNICEF in all four countries. These were perceived as influential because they provided space for dialogue and drew on influencers and trust networks. In Rwanda, for example, UNICEF supported partners to undertake house-to-house dialogues with caregivers, as well as utilising existing partnerships with PTAs and local education leaders. Similarly, in South Sudan, UNICEF supported the MoE's "*Back to Learning*" campaign, which engaged community chiefs, elders and religious leaders, as well as local education officials.

3.3   Lessons learned and challenges

Assessing the extent of child learning losses was a widely noted challenge, which has made remedial instruction difficult to formulate. Some respondents emphasised the need for more resources and expertise in assessing learning losses and felt that more pedagogical resources are required to help "bridge the gap" through remedial course work (especially in Ethiopia, South Africa and Rwanda)

Challenges with the monitoring of school COVID-19 SOPs, affected by travel restrictions and staff limitations, were noted especially Ethiopia and South Sudan. Frontline workers in both countries reported the need to train or retrain teachers and school staff on the SOPs, and on COVID-19 positive case management and referral mechanisms.

Some respondents identified the need to work with MoEs to develop specific national and subnational policies to address learning losses caused by school closures and to bring vulnerable children back into schools (Ethiopia and South Sudan).

- **The need for specific remedial actions to mitigate girls' learning losses** and to ensure their re-integration into the formal education system was emphasised in all four countries.

- **The need for more investment to increase disabled learner's access to learning** opportunities was also emphasized in Rwanda and Ethiopia. Suggestions included adapted sanitation facilities and adapted curricula for blind and deaf learners.

- **Additional support for child refugees and IDPs** was raised as a priority in Ethiopia and South Sudan. In both countries, several key informants perceived that child refugees and IDPs have received less support during COVID-19 and now need special attention to compensate for learning losses and weak access to educational opportunities.

Multisectoral programming: lessons learned

A key strategy for establishing effective intersectoral collaboration was regular convening of multisectoral meetings. For example, UNICEF Ethiopia has conducted weekly multisectoral meetings throughout the pandemic, to coordinate inputs from all sectors. These meetings were led by the Deputy Country representative, which was reported as providing a senior impetus for effective coordination, while UNICEF sector chiefs were encouraged to *'think outside the box'* (key informant). In South Africa, the UNICEF CO has supported intergovernmental and inter-sectoral cooperation (with health, WASH, transport, local governments, police). This was described as a link into UNICEF's collaboration with a private sector entity (Rand Water) to provide water tanks to schools and for ICT support.

Multisectoral collaboration at sub-national level: In South Sudan, UNICEF's subnational field offices have also worked in a cross-sectoral manner with health, WASH, nutrition, C4D and social mobilization units to undertake multi-dimensional interventions in schools and within communities. This work has been done in close collaboration with UNICEF's supply and logistics sections on the delivery of equipment to schools.

Multi-disciplinary assessment tool (promising practice): In Rwanda, a government respondent lauded UNICEF's financial and technical support to development of a multi-disciplinary child assessment tool (assessing learning losses, physical and psychosocial health, disabilities etc) for use in schools. It was reported that such assessments have resulted in specialized educational support for struggling children, rehabilitation services, and referrals for protective services for at-risk children. The tool is being piloted in 5 districts and it was reported that it is likely to be scaled up to all districts.

Equity and inclusion: strategy entry points

- **UNICEF COs supported the use of existing survey data to identify vulnerable children**, in all four countries. An NGO respondent in South Africa described this as enabling quick identification of children most at risk during COVID-19; and providing evidence that promoted attention to the need for inclusive response strategies among partners and at the MoE.

- **Dedicated committees on inclusion and equity** were promoted and supported by UNICEF in South Africa and Rwanda. These were described as important for raising dedicated attention and targeted work on inclusion in an intensive emergency response.

Internal lessons learned identified by UNICEF CO education staff

- **There is a need to build UNICEF CO education staff expertise in translating global guidance** into practical contextualized activities that can be quickly implemented in emergencies and resource-constrained settings.

- **There is a need to build capacity on *Education in Emergency* (EiE) responses,** including emergency planning exercises, among both UNICEF CO education teams and MoE staff (mentioned in all four countries)**.** Key informants noted a shortage of EiE specialists within MoEs, UNICEF COs and the development community at large. Several emphasised that multisectoral emergency planning needs to be undertaken in advance of emergencies, to enhance preparedness in regard to actionable policy, staff capacity and resources.

- **It would be useful to adapt the learning and contingency plans developed during the Ebola crisis** for COVID-19, and subsequently adapt COVID-19 plans for use in other future public health crises.

- **Building a longer-term collaboration between education and nutrition** support activities was identified as a priority, to promote the continuity of critical school feeding programs for children in future crises (emphasised in South Africa and Ethiopia). This suggestion referred to both UNICEF teams and also ministries and partners.

- **Strengthen intersectoral collaboration between health, immunization and child protection services to develop plans for the maintenance of critical health programs** such as immunization services, vitamin supplementation and sexual health services in schools during emergencies (mentioned in Ethiopia and South Sudan).

4 Partnerships

4.1 Which partnerships have been most important?

In regard to which partnerships have been most important in supporting preparedness and the safe return to school effort, key informants provided a wide variety of responses.

Most respondents (in all four countries) placed emphasis on the **breadth of partnerships that were forged, which enabled the cocreation of strategies and plans**. When explaining this breadth, key informants often referred to a full spectrum of alliances, from ministries of education and health, bilateral and multilateral development agencies (including the World Bank, UNHCR and UNESCO), implementing partners, INGOs, local CSOs and community stakeholders.

"UNICEF has been strong in co-creating with partners in the education sector response to COVID-19" (**Partner, South Africa**)

"UNICEF and the Government of South Sudan spoke with the same voice about the need to keep schools open" (**Partner, South Sudan**)

Forging consensus and unified voice: Several respondents, especially in South Africa, South Sudan and Ethiopia, emphasised the UNICEF CO's roles in promoting consensus and a unified voice in the education sector response. CO support to coordination was also perceived to strengthen coherence and reduce duplication.

"The CO participated in wide and frequent consultation with education stakeholders and partners including weekly meetings with provincial education heads and senior managers" (**UNICEF CO South Africa**)

Partnerships that resulted in funding were perceived as particularly crucial (see section 5). For example in Ethiopia, a strong strategic alliance with the World Bank and the Global Partnership for Education (which raised US$10 million for the education sector response) were singled out as particularly important.

Multi-sector partnerships were also important (see section 3.2.2)**,** including both collaborations among UNICEF sections, and UNICEF CO's close collaboration with child protection agencies, early child development, WASH and health specialists in the formulation and implementation of the education sector response to COVID-19.

Partnerships with media organisations: UNICEF COs and their partners leveraged their relationships with national TV, radio and newspapers, and community radio stations, in all four countries. Media partnerships were perceived as crucial because they enabled broad communications about the return to school and the broadcast of distance learning content.

Partnerships with INGOs and CSOs were described as crucial for local level implementation in all four countries. A key entry point has been UNICEF's pre-existing collaborations with national NGO platforms in the education sector, which provided important connections to CSOs at local level. For example, an INGO in South Africa emphasised the importance of UNICEF funding support to a network of local organisations (women's groups, trade unions, teachers' unions, CSOs, student organizations) which helped to steer COVID-19 interventions at the local level.

Local and community level partnerships: UNICEF COs were also widely perceived as supporting strong partnerships with front-line responders who have engaged parents and caregivers.

"UNICEF has worked closely with partners and stakeholders to raise local capacity" (**Partner Rwanda**)

Photo credit: UNICEF Rwanda/Habib Kanobana

Partnerships with local education groups (LEGs): UNICEF played a key role in galvanizing support from LEGs in the safe return to school effort, including work with education authorities and school administrators to promote planning for the return to school plans.

4.2   Which areas require further partnership engagement?

While respondents felt that partnerships have generally been strong and effective, they also referred to areas in which they perceive the need for more partnership engagement.

- **Distance learning content and capacity:** Respondents in Ethiopia reported the need to build technical and financial support in the MoE and Regional Education Bureaus for the development of distance learning content and its broadcasting on radio and TV. More partnership engagement is also required to support teachers' capacity in using and disseminating digital learning resources (mentioned in Rwanda) and to develop digital literacy for parents and students (mentioned in South Africa)

- **Online and broadcasting of resources:** Increased partnerships and support are required for the funding of online resources, provision of IT devices for children, and to improve the coverage of TV, radio and internet connectivity (mentioned in all four countries)

- **Partnerships:** Key informants in Ethiopia, Rwanda and South Sudan saw the need for greater collaboration with LEGs and PTAs. Closer alliances with faith-based organizations were also seen as needed in Rwanda and Ethiopia, to support caregivers and schools in regard to provision of remedial and psychosocial support.

- **Continuity of learning at preschool level:** Key informants in South Africa and Rwanda reported a 'critical need' to create partnerships to ensure the continuity of early preschool learning opportunities in future crises, particularly given the close link between early school programs and future primary and secondary enrolment rates.

- **Private sector partnerships:** There is a perceived need to build private engagement in the education sector response to COVID-19 (South Africa, Ethiopia). Respondents also noted the need for long-term agreements with local suppliers and a list of pre-qualified suppliers, so they can quickly respond to largescale supply issues such as the provision of PPE and hand sanitizers etc., during emergencies (emphasised in Ethiopia).

5   Fund mobilisation

According to UNICEF CO education staff, resourcing has been overall insufficient to fully respond to the needs of all school children, both from the side of national governments and in regard to UNICEF core funds. **To offset insufficient resourcing, UNICEF reprogrammed core country level funds, drew upon UNICEF headquarter emergency resources, and leveraged its long-standing relationships** with a wide range of funding partners (multilateral, bilateral, global education partnerships, and the private sector). Partners in all four countries felt that UNICEF COs had worked 'tirelessly' to leverage its core funding and to access the UNICEF HQ COVID-19 emergency response funds for their countries.

The Global Partnership for Education (GPE) was perceived as particularly important for raising emergency response funds for the education sector in South Sudan, Ethiopia and Rwanda. **UNICEF CO technical support to MoEs and implementing partners to develop GPE proposals was reported as a key factor in success** in South Sudan and Ethiopia. UNICEF was also lauded for successfully appealing to multilateral agencies (e.g., World Bank, UNESCO, UNHCR) and bilateral donors (e.g., USAID, EU, JICA, FCDO, NORAD) for additional emergency support; and, in South Sudan, *Education Cannot Wait* - a new global fund. Several implementing partners in Ethiopia and South Sudan also reported that UNICEF had worked closely with them to access available emergency funds and built their capacity to do so.

> *"UNICEF is very approachable and proactive in working with donors and development partners to gain access to the urgent funding required for the re-opening of schools"*
> **(Partner, South Sudan)**

5.1   What new forms of funding support have been key?

Respondents referred to the following as important forms of new funding support, although some may refer to new directions by existing funders rather than new sources per se.

- **UNICEF HQ emergency funding** provided for the education sector response.

- **GPE funding**. For example, UNICEF supported South Sudan's MoE to develop a successful GPE proposal. This catalytic grant is to support school reopening (including provision of WASH facilities, implementation and monitoring of SOPs, sensitization on COVID-19 prevention, continuity of learning and addressing child learning losses).

- Also in South Sudan, the **European Union** was mentioned as an important new funding source in regard to providing support for teacher incentives to promote workforce retention.

- UNICEF secured funding from **USAID** to support the South Africa MoE to provide water tanks and water resources to over one-thousand under-resourced schools.

- **Private sector funding** was also raised in South Africa to support the provision of water tanks, handwashing stations and sanitation infrastructure in schools (Unilever and Rand Water). Rand Water also supported provision of information technologies to children in South Africa. **The Rand Water funding evolved from UNICEF issuance of an open bid in the commercial sector; while Rand Water interest in donating resources emerged from its participation in weekly multisector meetings** on the education response in South Africa (described in section 3.3). However, respondents in all four countries generally felt that **private sector support has been quite limited,** and this was identified as a key domain for further fund mobilisation in South Africa.

- **In Ethiopia, some funds for the education sector response were linked to humanitarian support**. For example the Ethiopia MoE received $1 million from *Education Cannot Wait* (a new global fund is focused on supporting teaching and learning in emergencies) to support children and youth impacted by the deteriorating humanitarian crisis in Ethiopia's Tigray region. This includes a focus on internal displacement, violence, COVID-19 and other factors that are contributing to school drop-out. UNICEF-Ethiopia also gained some bilateral funding ($3 million from Norway and Finland) for children within Tigray conflict zones - including funds for the education sector response to COVID-19.

5.2   What have been the largest gaps in funding?

The largest gaps in funding were perceived to be in the following areas:

- **A major shortage of funding for clean water, handwashing stations**, toilets and soap in schools was reported in all four countries - with remote, rural and poorly resourced schools suffering the brunt of short supply.
- **Provision of PPE to schools** (masks, soap, thermometers) to ensure proper adherence to COVID-19 SOPs and guidelines (all four countries).
- **Funding for teacher capacity building and salaries during COVID-19** were identified as gaps by some respondents in all four countries, especially in Ethiopia and South Sudan.
- **Funding for the broadcasting costs associated with distance learning** (all four countries).

Some additional resourcing gaps were highlighted in specific countries:

- **Supporting learning opportunities and catch-up programmes** for marginalised children – girls, child refugees (Ethiopia and South Sudan) and children with disabilities (Rwanda).
- **Ensuring that reopened schools are accessible for children with disabilities** (appropriate handwashing facilities, toilets, ramps) - mentioned in Rwanda.
- **Printing and distribution of learning materials,** particularly printed materials for children without access to technologies or electricity (Ethiopia, South Africa)
- **Building and rehabilitating more classrooms** to enable social distancing (South Sudan and Ethiopia).

5.3   Lessons learned

Several partners and frontline workers appreciated UNICEF's flexibility in allowing the reprogramming of pre-existing partnership agreements to allow for the re-orientation of workplans toward the COVID-19 response (Rwanda, Ethiopia and South Africa).

The process for accessing UNICEF funding was raised as a challenge by some respondents (South Sudan), who felt that the application process for UNICEF funding is '*bureaucratic and laborious',* and '*sometimes exceeds the experience of local partners and hampers the accessing of funds, particularly in emergencies*.'

Several respondents (especially in South Sudan and Ethiopia) felt that more needs to be done to ensure a planned and intentional focus on *building back better*, and developmental impacts from emergency COVID-19 funding in the education sector. For example, some respondents

in Ethiopia spoke of the need to focus more on building resilience in education systems, in order to strengthen country capacity to weather shocks whether they be due to climate change, conflict or future pandemics. However, others emphasised the ways in which the COVID-19 crisis and emergency funding is being used for developmental outcomes, such as improving school facilities (particularly water and sanitation infrastructure), and to focus greater attention on equity and inclusion. Some respondents also felt that COVID-19 has provided an opportunity to build new collaborations across sectors that should be maintained and furthered to promote better connection between humanitarian and development efforts.

Photo credit: UNICEF South Sudan / Naftalin

6 Conclusions and recommendations

This section first summarises the key emerging issues that were prioritised by key informants in the focal countries. It then outlines the prioritised action points developed by the ESARO Education team. The latter were developed following a workshop on the RTA findings in which the emerging issues were discussed and prioritised by ESARO and CO education colleagues.

Areas for further support in the ongoing response to COVID-19

- **The need to strengthen adherence to school SOPs** on sanitation and social distancing, as well as COVID-19 positive case management and referral mechanisms was noted in all four countries. Respondents in Ethiopia and South Sudan focused on the need to build school staff understanding of the SOPs, while respondents in Rwanda and South Africa emphasised the need to strengthen monitoring.

- **Assessing the extent of child learning losses was a widely noted challenge**. The need for assessment tools was emphasised in South Africa. In Rwanda and Ethiopia, where UNICEF has already supported development of tools, respondents perceived the need for more resources and expertise in assessing learning losses.

- **Support to design catch up curricula, and specific remedial actions and investment to mitigate learning losses**. UNICEF has supported the design of catch-up classes in Rwanda and Ethiopia. Yet respondents in these countries too felt that more pedagogical resources and investment are required to help "bridge the gap" through remedial course work. Some respondents focused especially on catch-up curricula and resources for marginalised children: girls (all four countries); disabled learners (Rwanda and South Africa); and child IDPs and refugees (Ethiopia and South Sudan).

- **Support governments to develop policies on the mitigation of learning losses** caused by school closures during COVID-19, including the articulation of strategies for bringing vulnerable children back to school (girls, refugees, IDPs, disabled learners).

- **A need to strengthen the engagement and partnerships with local level groups** (PTA, LEGs, CSOs) was mentioned in all four countries, as a route to support distance learning and remedial classes (via work with caregivers and schools) and also SOP monitoring.

- **Further capacity building and support to develop distance learning content** was seen as required in all four countries. This was also seen as an opportunity to build capacity and resources for future crises. Identification of skilled teachers to deliver radio-based lessons was described as a promising practice in South Sudan. An immediate need for more funding to print pedagogical materials was noted in Ethiopia, South Sudan and South Africa, as was the need to provide IT devices to more marginalised children.

- **More funding for provision of PPE, handsfree water stands and hygiene supplies to schools** (all four countries)**.** Support to enable disabled learners access to facilities was also mentioned in Rwanda (e.g., ramps, appropriate water facilities, and toilets). Private sector partnerships to support this were suggested by some respondents in South Africa, and more broadly CO staff raised the need to develop more long-term agreements with local suppliers, so that COs can quickly more respond to largescale supply issues.

Lessons learned for education in emergencies (EiE)

Particularly in Ethiopia and South Sudan, respondents articulated the need to strengthen the humanitarian and development nexus and partnerships. The need to strengthen the resilience

of education systems was mentioned in all four countries. Respondents highlighted some support areas for the longer term, as routes to improving preparedness for future crises.

- **The need for further MoE capacity building on the development of condensed core curricula and distance learning content** was noted in all four countries. A respondent in Rwanda suggested that this would be strengthened by nurturing and training a cadre of subject specialists on curriculum condensation and associated learning resources.

- **Reflecting on the exclusions of distance education, some respondents emphasised the need to develop new pedagogical methods to reach children without access to technologies.** The need to develop methods and resources for children with disabilities (Rwanda) and young learners (South Africa and Ethiopia) was also noted.

- **Support governments to develop policies on the mitigation of learning losses** caused by school closures (during COVID-19 and future crises), including articulation of strategies for bringing vulnerable children back to school (girls, refugees, IDPs, disabled learners).

- **Monitoring the effectiveness of distance and online learning for students has been challenging.** Some respondents articulated the need to develop tools to determine baseline core competencies, and to assess the effectiveness of distance and hybrid learning methods; as well as tools to identify children with multi-dimensional vulnerabilities for referral to specialized remedial services once schools are re-opened.

- **Build partnerships to ensure the continuity of early learning** (preschool) in future crises. This was described as a priority due to the close link between early learning programs and later primary and secondary enrolment rates (South Africa and Rwanda).

- **To better enable distance learning in future crises, many respondents spoke of the need to build both teacher's and student's digital literacy** and capacity to use digital learning resources (emphasised in Rwanda and South Africa). A focus on brokering new partnerships to enable this was suggested. The need for partnerships to strengthen IT infrastructure in rural areas was also mentioned in all four countries.

- **Establishment of dedicated committees on equity and inclusion,** in Rwanda and South Africa, promoted attention to inclusion and interventions. This might be considered as a best practice for wider replication in future crises.

- **The need to build CO education team and MoE expertise in EiE planning and preparedness was widely emphasised** in all four countries**.** Key informants noted a shortage of EiE specialists within MoEs, UNICEF COs and the development community at large. Several emphasised that multisectoral emergency planning should be undertaken in advance of emergencies, to enhance preparedness and to ensure the development of actionable policy, staff capacity and resources. Some CO staff also identified the need **to develop CO education team capacity in translating global EiE guidance** into practical contextualized activities, to enable rapid implementation in resource-constrained settings. In this regard, some CO staff considered that it would be useful to adapt the learning and contingency plans developed during Ebola and COVID-19 for use in future crises.

- **Multisectoral collaboration in the education sector response was widely perceived as a strength** of the COVID-19 response. Convening multisectoral weekly meetings were enabling. However, the **need to strengthen intersectoral collaboration between education and health/EPI, nutrition and child protection** was also noted, especially at subnational levels. Emphasis was placed on the need for preparedness planning for the maintenance of critical health programs (e.g., immunization, vitamin supplementation and sexual health services) when schools are closed in crisis situations.

Concrete action points

Following the workshop to discuss the RTA findings, the ESARO Education team forwarded concrete action points which are summarised below.

	Short term (by end 2021)	**2022**	**Longer term**
Keeping schools safe and prepared	• Resource mobilisation on sustaining measures to keep schools safe, under the PFP 'RESILIENCE' collaboration • Strengthen intersectoral collaboration (MoE-MoH)	• Strengthen preparedness of the system for further crises (including national, regional and local capacity building) • Continued strengthening of multisectoral school-based services, to prepare for the return of all children and offer a platform for integrated service delivery (health, nutrition, WASH, MHPSS, CP..)	Ensuring the systematic integration of risks in education sector planning and budgeting (includes COVID but also shocks and emergencies. Strengthening the humanitarian-development nexus**.**
Bring learners back	• Develop tools to monitor re-enrolment and understand barriers; and develop targeted measures to bring everyone back (campaigns, showcasing good practices, human interest stories) • Build capacity of community structures (SMCs, PTAs) and (with C4D) engage communities, to bring vulnerable learners back in a flexible and inclusive way.	• Build local partnerships and capacities to support back-to-school efforts: *community radio, traditional/ religious leaders, PTA, youth organisations.* • Resource mobilisation: investment case (with Social Policy) on social protection interventions in the countries most affected by the dropout	
Learning loss and remedial work	• Consolidate evidence and resources on learning loss and catch-up in ESAR, share lessons, and develop recommendations for the region. • Engage teachers in training to develop tailored remedial learning programs	• Develop tools for teachers to assess learning loss (building on simulation model)	
Digital learning	• Develop partnerships with mobile phone operators and satellite companies to provide zero-rated access to online and digital learning solutions (with UNESCO/IIEP, GEP, ECHO).	• Strengthen teachers, parents and learners' skills to use digital learning platforms (applying Universal Digital Learning principles) including partnerships with PWD organisations. • Expand and reinforce partnerships with mobile phone operators and satellite companies.	• Build long-term partnerships with device manufacturers and waste management companies to recycle digital devices for EdTech (tablets, smartphones etc.,).

Annex A   References

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Annex B   Interviewees

Education study: interviewees

Key: * ESARO education staff were interviewed at the start of the study to orient the research and gain overarching insights on the programme. Several ESARO staff were in the interview.

Interviewees by organisational category	
UNICEF staff	**5**
Country office staff (education staff only, not CO management)	4
Regional office staff	1*
UNICEF partners	**10**
Government staff (MoEs). *(Interviewees included: Curriculum Development Unit; Basic Education Board; Early Child Development, Unit of Planning and Resource Mobilization, Bureau of Educational Development).*	6
Bilateral (foreign government) staff	
NGO/INGO	4
UN Agency	
Frontline workers	**9**
Government staff	
Local and international NGOs *(Interviewees were working in the education sector at the frontline, either in community mobilisation, or with schools/ teachers/ school boards/ education officials)*	9
Private sector	
UN Agency	
TOTAL	**24**

Interviews per country	
Ethiopia	7
Rwanda	5
South Africa	6
South Sudan	5
Regional	1*
TOTAL	**24**

Annex C   Data collection tools

Question guide for UNICEF CO education staff

1. Policy level

1.1.   What have been UNICEF's roles in influencing/ advocating for safe school reopening and promoting equity in the 'safe return to school' effort?
- Probe: what went well?
- Probe: what would you suggest that UNICEF should do differently next time?
- Probe: What are the lessons learned in UNICEF positioning vis-à-vis government and decision makers?

2.   Programming

2.1.   What have been UNICEF's key focus and strategies in the **continuity of learning** approach, in **preparing schools to reopen safely**?
- Probe: what went well?
- Probe: what would you suggest UNICEF should do differently next time?

2.2.   What have been UNICEF's key focus and strategies for **bringing learners back to schools** after reopening; in particular, **the most vulnerable and marginalised children**?
- Probe: what went well?
- Probe: What are the lessons learned on the effectiveness of applying an equity lens?

2.3.   What have been UNICEF's key focus and strategies to **prepare schools for safe reopening and promote continuity of safe school operations**, including keeping children and teachers safe while in school?
- Probe: what went well?
- Probe: what would you suggest UNICEF should do differently next time?

2.4   What is being done to monitor the implementation of the SOPs/Guidelines and monitoring of COVID-19 situations in schools

2.4.   **How holistic was the approach**, and is multisectoral support and collaboration proving key to successful programming?
- Probe: what worked well and what are the lessons learned regarding collaboration with specific sectors: WASH, health, Child Protection, others?

2.5.   How useful were the various **tools/ frameworks/ guidance** that shaped UNICEF's approach?
- Probe: what are some of the specific internal lessons learned for future EiE preparedness and response?

2.6.   What are some of the **internal lessons learned** regarding CO capacity building, expertise and human resources etc?

3. Partnerships

3.1.   What **strategic alliances** have been essential in supporting the preparedness and safe return to school effort?

- Probe: How effective was the Education Cluster (where relevant) and can you reflect on UNICEF's effectiveness/lead role within?
- Probe: What was UNICEF's role in the local education group (LEG) of development partners? What strategies went well in building alliances across the LEGs?
- Probe: What areas require further partnership engagement?

3.2.   What **operational partnerships** have been essential in supporting the preparedness and safe return to school effort?
- Probe: What strategies went well in building operational partnerships?
- Probe: What areas require further partnership engagement?

4. Funding

4.1.   In regard to preparing and supporting the safe return to school effort, what have been the **largest gaps in funding** (and in which programming areas) and why?

4.2.   What **new donor funding** has been key?

4.3.   What are the challenges with existing funding modalities (flexibility, humanitarian-development nexus)

4.4.   How did UNICEF engage with the private sector?

4.5.   What are the **lessons learned regarding mobilising funds?**

5. CLOSING

5.1.   Do you have anything to add?

Education: Question guide for Partners (govt and devt partners)

1. Policy level

1.2.   What have been **UNICEF's roles in influencing/ advocating** for safe school reopening and promoting equity in the 'safe return to school' effort?
  - Probe: What went well? What went less well?

2. Programming

2.1 What have been UNICEF's key focus and strategies in the **continuity of learning** approach, in preparing schools to reopen safely?
  - Probe: What went well? What went less well?

2.2 What have been UNICEF's key focus and strategies for **bringing learners back to schools** after reopening; in particular, the **most vulnerable and marginalised children**?
  - Probe: what are the lessons learned on the effectiveness of applying **an equity lens**?

2.3 What have been UNICEF's key focus and strategies to **prepare schools for safe reopening**, and to promote continuity in safe school operations, including keeping children and teachers safe while in school?
  - Probe: what went well?

2.4 How holistic was the approach, and is multisectoral support and collaboration proving key to successful programming?
  - Probe: what worked well and what are the lessons learned regarding collaboration with specific sectors: WASH, health, Child Protection others?

3. Funding

3.1 In regard to **preparing and supporting the safe return to school effort** what are the key sources of new funding that have been made available?

3.2 What are the challenges with existing funding modalities (flexibility, humanitarian-development nexus)

3.3 Have there been gaps in funding?

4   Partnerships

4.1 What **strategic alliances** have been essential in supporting the preparedness,safe return and continuity of safe operations in school effort?
  - Probe: What was UNICEF's role in the local education group (LEG) of development partners?
  - Probe: What areas require further partnership engagement?

4.2 What **operational partnerships** have been essential in supporting the preparedness and safe return to school effort?

5.. CLOSING

5.1 Is there anything else you'd like to add?

Education: Question guide for frontline workers
1. Policy level
1.2 What have been **UNICEF's roles in influencing/ advocating** for safe school reopening and promoting equity in the 'safe return to school' effort?
2. Programming
2.1 What is the key focus of your work with UNICEF? • **continuity of learning approach** • **preparing schools to reopen safel**y and to continue operating safely • **bringing learners back to schools** after reopening • **focus on marginalised children?** 2.2 What is being done to monitor the implementation of the SOPs/Guidelines and monitoring of COVID-19 situations in schools 2.2 What are the **lessons learned** on the effectiveness of applying **an equity lens**? 2.3 **How holistic was the approach?**
3. Funding
3.1 What level of support have you received from UNICEF to support your work?
4.Partnerships
3.1 What **strategic and operational alliances** have been essential in supporting your work? Probe: What areas require further partnership engagement?
5. CLOSING
4.1 Is there anything else you'd like to add?