

Save the Children

COVID-19 PANDEMIC LESSONS FROM ASIA-PACIFIC

How the region's societies – and their children –
can emerge stronger from the crisis

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Acknowledgement

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Cover photo
Feliza*, 5, wearing a washable mask included in family hygiene kit distributed by Save the Children in Razal, Philippines.
(Lei Tapang/Save the Children)



Timothy*, 6, who received hygiene kit support from Save the Children, Philippines
(Lei Tapang/Save the Children)

INTRODUCTION

The COVID-19 pandemic has caused enormous tragedy and disrupted the lives of hundreds of millions of children and their families in Asia-Pacific and beyond. Despite significant responses by governments and the heroic efforts of medical staff and other key workers, this global societal emergency has taught us several costly lessons.

Hospitals in many countries have been overwhelmed. Efforts to provide cash benefits to impoverished households or shift education and jobs online have helped many people – but such solutions remain inaccessible to millions of poor, socially marginalised families. Amid the stress and restrictions, violence and abuses against children, especially girls, has risen.

Meanwhile, continued armed conflict in some countries not only compounds the dangers facing vulnerable families and aid workers but creates conditions for the COVID-19 virus to persist. All of this raises the question: In an age of increasing crises caused by hazards such as disease and the growing climate emergency, should our societies have been better prepared? But in this crisis there is also immense opportunity – to learn crucial lessons and rebuild our societies better than before.

This report looks at six crucial pathways – underpinned by a new social contract fit for the 21st Century – that can not only help save lives and livelihoods but also lay the foundations for safer, healthier, more sustainable societies and a more promising future for their children.



EXECUTIVE SUMMARY

The COVID-19 pandemic has created two overarching global crises – one in public health and one financial – that have combined to create a multi-dimensional societal emergency affecting the lives of hundreds of millions of children and their families in myriad ways on an unprecedented scale.

But in crisis, there is also opportunity - to build back better, safer societies in an era of more frequent and damaging shocks. Whether it is strengthening public health systems, making online education safer and more accessible, addressing poverty and social exclusion, tackling violence against children, or creating a greener, more sustainable economies, the pandemic marks a historic opportunity for a fresh start that Asia-Pacific's governments and societies should seize.

The pandemic first triggered an extraordinary public health crisis. In early July, there were approximately **11 million confirmed cases** and more than **520,000 fatalities reported worldwide**, making this the worst pandemic in 100 years. Hospitals in many Asian countries have been overwhelmed, especially those with low levels of state investment in public health.

In order to stem the human toll, governments worldwide have triggered various countermeasures including the closure of businesses, educational institutions, and cultural activities, as well as strict constraints on public movement and air travel. By early April, **over 50%** of the global population was in lockdown, with severe implications for economic activity everywhere. The result has been a second, economic crisis unfolding in almost simultaneously in most countries. The world economy could slump by **more than 6%** of global gross domestic product (GDP) according to Asian Development Bank projections updated in May — the worst recession since the 1930s Great Depression. It estimates **almost 70%** of global job losses are likely to happen in Asia-Pacific[1].

Families dependent on informal livelihoods and small business are among the most affected yet have often been beyond the reach of social safety nets, especially migrant informal workers and their families. Save the Children and UNICEF published an analysis in May 2020 revealing that without urgent action, the number of children living in poor households across low- and middle-income countries could increase by **15%, or 86 million**.

Across the region, extraordinary efforts have been made to support education, business, and other vital activities such as food purchases, including by expanding operations online. However, these benefits have not been evenly distributed. Many households, especially from marginalised communities, have lacked access to the internet or state benefits, leaving many children isolated and impoverished. Such challenges have increased social and domestic pressures, contributing to a rise in violence and abuses against children, especially girls.

In countries suffering from conflict such as Afghanistan and Myanmar, attempts to suspend hostilities or broker peace – usually with little or no input from civil society or the most affected communities – have run into familiar difficulties and deadlock, placing both vulnerable populations and health workers trying to assist them in unjustifiable danger while hindering disease control efforts.

To address this global societal emergency, a whole-of-society approach is needed, firstly, **to stop the spread of disease, minimise loss of life, and avoid spiralling household poverty**. Adequate resources should be allocated to public health, economic stimulus and social safety nets, with a focus on the most vulnerable and poor households. Children need effective support to continue distant learning and return to school safely when possible.

But it is also crucial for governments, businesses and society to implement reforms that not only ensure a robust recovery but also limit both the risk and impact of future pandemics, which studies show are becoming more frequent[2]. We need to build back better and more sustainably from the current crisis.

For this ambitious agenda to succeed, it must be underpinned by a new social contract for the 21st Century between governments and society. This would echo the seismic shifts following the Great Depression and the Second World War when many governments expanded their responsibilities to support mass employment and public health as well as international cooperation and peace. The result was a healthier, more stable and prosperous world. We must seize similar opportunities in the current crisis.

The pandemic has given us a license to change. But although the wheels of reform must spin quickly, they do not need to be reinvented. Most of the frameworks to steer and enable those changes already exist. These include, in particular, the 2030 Agenda for Sustainable Development adopted by governments worldwide in September 2015, the 17 Sustainable Development Goals (SDGs) set out therein, as well as commitments made under the 2015 Paris Agreement on the climate crisis.

This paper does not aim to provide a comprehensive analysis of all issues and solutions relevant to this subject. Instead, it highlights six fundamental pathways that governments and international donor and development agencies cannot ignore if the pandemic recovery is to leave Asia-Pacific better prepared and more resilient in the face of future shocks.



Md. Nazrul Islam, Distribution and Monitoring Officer,
Cox's Bazar, Bangladesh.
(Sonal Chakma / Save the Children)



Accelerate steps to provide adequate universal health coverage. In the face of growing threats from pandemics, governments especially in low and middle-income countries should allocate an initial minimum of 5% of their Gross Domestic Product (GDP) to public health by 2030 to guarantee universal health coverage free at point of access.



Expand the coverage of social safety nets. These should mitigate the pandemic's potentially devastating impacts on vulnerable households including via universal entitlements accessible to all families including those of informal workers. They should lay the foundation for a broader, child-sensitive, shock responsive programme of benefits and essential services that alleviates poverty and improves society's resilience to future crises.



Ensure effective support for children at risk of violence and abuse. The pandemic has exposed children to alarming levels of domestic abuse, highlighting the need to strengthen protection systems for all children. Such efforts should target high risk, socially excluded or stigmatised groups, such as girls, refugee or internally displaced children, street children, those with disabilities, ethnic minorities etc. Schools should be equipped to help children in need of support and protection.



Bridge the digital divide to strengthen education and livelihoods. The pandemic has shown how the internet can sustain learning (via online classes and television) and jobs in times of crisis as well as crucial measures such as contact tracing. Investing in connectivity for all will strengthen educational access and continuity and the sustainability of livelihoods, including for the most marginalised populations as well as women and girls.



Build back better on green and sustainable foundations. As part of a whole-of-society approach, countries in the Asia-Pacific should use their COVID-19 recovery efforts to accelerate the transition to low carbon economies and reduce both the risk and impact of future crises, including pandemics triggered by human and climate-induced disruption to natural ecosystems. COVID-19 recovery efforts should be compatible with Paris Agreement objectives.



Pause current conflicts and increase support for more inclusive conflict prevention and peacebuilding. In line with existing international commitments including UNSCR 1325 on Women, Peace and Security and UNSCR 2250 on Youth, Peace and Security, governments, donors and other relevant stakeholders should actively support ceasefires to allow effective pandemic responses, as well as increase technical, political, and financial support for the role of civil society, including children, girls and youth, in preventing and resolving conflicts more effectively and sustainably.

Governments and aid donors might balk at the expected cost. But ultimately, this new social contract will pay for itself. Healthier populations are more economically productive and less dependent on social services. Studies show that a green economic recovery would be better for jobs and growth. More resilient businesses and livelihoods can help minimise economic impacts of disasters. Conflicts are expensive; peace would free up resources.

Additionally, governments can mobilise more resources by reforming public finances, including strengthening their progressive tax-base, increasing measures to tackle corporate tax evasion, and removing unjustifiable subsidies to the fossil fuel industry.

Meanwhile, the international donor community must meet long-standing aid commitments, and prioritise support for health, education, child protection and social protection as well as climate crisis mitigation and adaptation. Pledges to spend 0.7% of GDP on overseas development aid were reaffirmed by rich countries in the 2030 Agenda and the UN Financing for Development agreement. But only a handful of countries have kept their promises.

Urgent action on debt relief is also needed. In 2020 and 2021, low-income countries were due to spend over \$50 billion in debt servicing to bilateral, multilateral and private creditors. When the pandemic struck, Save the Children – as part of its global [#ProtectAGeneration](#) campaign – joined many others around the world in calling for urgent action on debt.

In response, the G20 governments agreed in April to a temporary debt moratorium (suspension) for 2020, with the G7 following suit. The IMF is also taking action to cancel debts owed by the poorest countries. All this is welcome - but more countries need to be covered by debt cancellation and moratorium agreements for a healthier, safer and more prosperous world to emerge.

The price of inaction and delay is the scale of human tragedy and economic upheaval that the world is currently witnessing. We must either learn from history – or doom ourselves to repeat it.



Aldrin, and Timothy*, 6, with their hygiene kits from Save the Children (Lei Tapang / Save the Children)

CHAPTER I. Public health:

Paying the price of underinvestment

The healthcare sector in Asia-Pacific was the first frontline in the global battle against the pandemic. Across the region, medical staff have been rightly hailed as heroes for working under extreme pressure and risking their lives in order to save many others.

But applause is no substitute for ensuring effective plans, systems and resources are in place to support such heroic efforts – particularly when the increasing number and severity of disease outbreaks is a known threat. So, what does this pandemic teach us to better prepare for the next one?

Conclusions about the impact of different approaches are difficult to draw because several variable factors are involved, such as prevention and containment practices, the attitudes of leaders, and public behaviour. Under-reporting and different approaches to testing have made comparisons difficult. Hence, for each discernible correlation, exceptions can be found.

But broadly speaking, countries that took early precautions and had invested in their medical staff, well-equipped hospitals and clinics, as well as stockpiles of essential items such as Personal Protective Equipment (PPE) have been able to treat more patients and save more lives, including countries that took early precautions. Conversely, governments who invested less have struggled more, resulting in a higher toll of lost lives and broken families across the region. Routine health care, vaccination programmes and nutrition services have also been disrupted.

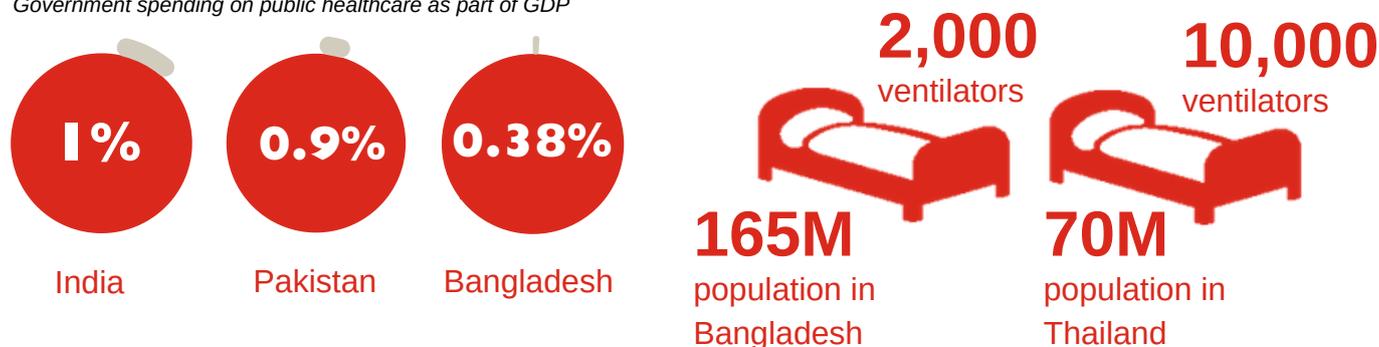
In early June, for example, there were widely reported warnings from local officials in New Delhi and Mumbai of alarming shortages of hospital beds as the rate of infections soared[3]. Significant efforts have been made to address the shortage of beds since then, including by using venues such as hotels and sports facilities to house patients.

The lack of hospital capacity in Gujarat may explain why the Indian state struggling with the highest caseload in mid-June (over 21,500) was also recording the highest fatality rate (6.2% compared with a national average of 2.8%). By contrast, Kerala – where decades of investment have built up one of India's best public health systems – has been praised for its response to the crisis, despite being the first state in the country with a COVID-19 case.

In the densely packed Rohingya refugee camps in southern Bangladesh – four times the density of New York City – latrines and washing facilities are shared and social distancing and self-isolation are extremely challenging. To meet the urgent health needs of the community, Save the Children has opened new isolation and treatment centre (ITC) in July, with a capacity of up to 60 beds. It provides higher level care for confirmed and suspected COVID-19 patients from both the Rohingya refugees and the local community in Cox's Bazar.

Similarly, in neighbouring Pakistan, federal ministers warned on 14 June that the number of cases in the country could double by the end of June and peak at more than a million infections a month later. In major cities like Karachi and Lahore, doctors at several major hospitals told journalists they were running out of beds, ventilators and other vital equipment[4]. However, the federal government announced plans to add 1000 beds with oxygen supply capability in major cities by the end of June.

Government spending on public healthcare as part of GDP



In both India and Pakistan, spending on public healthcare by successive governments has been extremely low: just over 1%[5] and 0.9%[6] respectively of gross domestic product (GDP). It is a similar story in Bangladesh, which spends just 0.38 percent on public health[7]. Tellingly, Bangladesh had fewer than 2000 ventilators for a population of 165 million in May, whereas Thailand could provide 10,000 ventilators for a population of 70 million[8]. Bangladesh, India and Pakistan - all middle-income countries - also suffer from persistent shortages of medical staff[9].

In contrast, some middle-income countries have managed their pandemic responses comparatively well. By mid-June, largely as a result of effective disease control measures and healthcare capacity, Vietnam (population: 96 million) had recorded **334 cases and zero deaths**, while Thailand had counted just **over 3100 cases with fewer than 60 fatalities**.

Both Thailand and Vietnam have consistently invested in public health over a long period. Government health expenditure as a percentage of GDP for Vietnam and Thailand was 2.69% and 2.85% respectively in 2017. This has enabled them to provide free-to-access primary healthcare at least for the marginalised communities, with progress being made on some secondary healthcare services.

Minimising or eliminating out-of-pocket health expenditure for households has been crucial not only to provide support to those who need it but to prevent them infecting others. But in much of Asia, affordability is still a key factor in access to healthcare. In Cambodia, for example, where the government spends just 1.41% of GDP on public health, even relatively modest out-of-pocket health expenditure frequently causes indebtedness and can lead to poverty[10]. The average South Asian must cover about 62% of their health expenditure from their own pockets.

Such low levels of state expenditure are far below the five percent of GDP that Save the Children and other organisations believe governments already need to spend to ensure comprehensive universal health coverage[11]. The rising threat from pandemics and other crises – such as the growing climate emergency – may require more than this in the years ahead.

Achieving this minimal five percent target will oblige many governments to take bold action – and for tax-payers and other members of society to demand it – including a reorganization of national budgets that prioritises protecting people’s lives and wellbeing. Building on positive steps taken already to support the pandemic response, international donors should prioritise support for public health systems while creditors should expand debt relief to the most financially restricted countries to help enable increased health sector investment. In turn, a healthier and more economically productive population will ultimately pay back the investments made.

Better resourced health systems should also be re-designed with future crises in mind. These include forecasting mechanisms to predict where, when, and how future outbreaks may occur, and expanding telemedical solutions, which have enabled doctors in many countries to sustain or expand their reach – even when quarantined. Such innovations should be designed in consultation with the professionals who deliver services as well as the people who will use them.

Finally, an investment in people is crucial. Health workforces of all kinds have worked round the clock and under great pressure for several months already. Many will be utterly exhausted by the time the pandemic has run its course. Some 70% of the global health workforce are women, with particular experiences and insights (alongside often distinct family responsibilities). It is crucial that relevant authorities retain and appropriately support these invaluable personnel, capitalise on their experiences and expertise, equip them properly, and develop the new talent required before the next pandemic or similar emergency strikes.



Merlina*, 26, with Timothy*, 6, and Feliza*, 5, giggling together at home, Philippines. (Lei Tapang / Save the Children)

Recommendations:

1. Governments should increase state health expenditure to an initial minimum of five percent of GDP by 2030. Adequate resourcing is a crucial first step to providing effective universal health coverage. Funding for this should be raised by fiscal reforms based on fair and progressive taxation and improved public financial management. More than this may be required as a longer-term target to address growing pandemic and climate crisis risks.
2. Governments should establish Universal Health Coverage (UHC) as a legal right. All governments have committed to UHC through the SDGs and the UN High-Level meeting on UHC in 2019. This should be translated at national level, including through UHC legislation that cements state obligations. Primary healthcare must be accessible for all and free at point of use as an urgent priority.
3. The international community including financial institutions should increase the funding available to national health systems to respond and build back better from the pandemic. Donor agencies should build on previous support by prioritising efforts to rapidly strengthen health systems and coverage, while all creditors should expand debt relief measures through cancellations or suspensions.
4. Governments should support reforms and innovations in consultation with relevant experts, civil society and communities. Innovations such as telemedicine^[7] may be critical for ensuring sustainability and resilience the future and will require government to invest in essential technological infrastructure and expertise as well as ensuring redesigned services are informed by the views and experiences of the children, women and men who will use them.
5. Governments should increase investment in healthcare workers. More investment is needed to address critical health staff shortages, especially in frontline categories, and deliver expanded, more resilient, gender-sensitive healthcare systems through enhanced recruitment, remuneration, equipment, and professional development.

CHAPTER 2. Social protection: From survival to resilience

The COVID-19 pandemic has not only claimed more than half a million lives so far but also triggered severe immediate and potentially long-term economic consequences. Taken together, these dual health and economic crises and their secondary impacts – children bereft of parents, families left without a breadwinner and so on – have in turn created a global society-wide emergency that has left households, communities, and industries reeling across the world.

According to Asia Development Bank (ADB), the global economy could suffer between \$5.8 trillion and \$8.8 trillion in losses—equivalent to 6.4% to 9.7% of global gross domestic product (GDP)^[12]. The ADB also predicted the loss of between 158 million and 242 million jobs worldwide, with Asia and the Pacific comprising almost 70% of these. Households have been hit hard, particularly in middle and low-income countries, with children among the worst affected.

For example, although Cambodia had officially confirmed only 141 COVID-19 cases by July, more than 1.76 million jobs are at risk owing to the outbreak, including thousands of garment workers who lost their jobs when their factories closed owing to supply chain disruptions[13]. The three most affected sectors—tourism, manufacturing exports, and construction—contributed more than 70% of growth and 39.4% of total paid employment in 2019. Cambodia’s economy is likely to register its slowest growth since 1994 as a result of COVID-19. For many households, the consequences are devastating, including loss of family income, land and assets: often a fast track to abject poverty.

Travel restrictions due to COVID 19 will also significantly affect economies in the Pacific, especially Palau, Vanuatu and Fiji which are among the world’s 20 most tourism-dependent economies[14]. According to the ANZ Bank, Fiji may lose nearly 602,000 visitors by air this year, a 67% drop translating into a 12% GDP contraction, putting around 75,000 jobs at risk. Vanuatu, too, is expected to suffer a fall in GDP, in part due to a loss of up to 21,000 tourism jobs, and will likely experience a major recession, compounding the impact of Tropical Cyclone Harold[15]. Early estimates indicate the number of people living in extreme poverty in the four poorest Pacific countries will increase to 30% in PNG, 27% in the Solomon Islands and 17% in Vanuatu[16].

Across the region and beyond, the financial calamity engulfing many households is leading to broader social impacts, such as deepening income inequality, rising domestic violence, and social unrest. As this paper notes elsewhere, children – especially those in categories already experiencing discrimination or social exclusion – face higher risks of violence, abuse, and mental distress especially when schools are closed and access to supportive friends and family is restricted. Moreover, households made destitute may resort to negative coping strategies, such as child labour, sexual exploitation of minors, child marriage and so on. Girls are often the worst affected in such situations.

It is also crucial to note that as schools reopen, not all students will return. There is overwhelming evidence that the longer children are out of school, the greater the risk of them never returning, particularly girls as numerous studies show. There are some 111 million girls living in the world’s least developed countries affected by school closures, where getting an education was already a struggle. For many families, the financial impact of COVID-19 means that many girls may be forced into early marriage or other negative coping strategies, or to made to prioritise domestic work over education, ensuring they will not return to school.

The current pandemic has underlined the absolute necessity of social protection programmes, which in many countries have already helped millions of households to survive, prevent decades of socio-economic progress being dismantled within a few months, and help maintain social and political stability. But the current crisis has also highlighted gaps that should be addressed as well as the need to plan for the future with a focus on the safety and wellbeing of the most vulnerable children.

Broadly speaking, this requires a three-pronged strategy. Firstly, robust social protection that reaches the most vulnerable and affected households and enables them to survive the pandemic is an urgent priority. This means expanding social safety nets so that they quickly transfer cash to existing beneficiaries as well as newly struggling households.

Such measures need to reach households whose status makes accessing state benefits more difficult, such as informal daily wage earners, including migrant workers. Targeting benefits takes time – and time is in short supply during a crisis. Instead, universal income support and child benefits would allow struggling households in this category to self-identify and access desperately needed assistance.

Secondly, governments need to support employment and livelihoods to minimise mass joblessness and stave off spiralling household poverty. Families dependent on small businesses are particularly at risk. As a short-term measure, governments can provide one-off grants to help small businesses survive or resume after the pandemic, as well as subsidies to employers to help small businesses survive or resume after the pandemic, as well as subsidies to employers to help minimise loss of jobs – prioritising sustainable businesses and sectors that have a future in a local carbon economy (see Chapter 5).

Several countries in Asia-Pacific have made significant progress with one or more of these aims. The Philippines, for example, has initiated five new cash programmes in addition to its national Pantawid programme, while Cambodia has vowed to spend US\$25 million per month to support the poorest families[17].

Japan has set out to provide special cash payment of ¥100,000 (about US\$940) per person, an additional ¥10,000 per child for families that receive child allowances, and a further payment of ¥50,000 to low income single-parent households[18].

Similarly, the Chinese central government has instructed local authorities to extend the coverage of Dibao (China's Minimum Living Standard Guarantee programme) and temporary assistance schemes, simplify the application and approval process, and increase the benefit level to cover hard-hit families.

To support employment, the South Korean government has cooperated with local authorities to provide relief packages to struggling social and solidarity economy (SSE) enterprises while also providing wage subsidies[19]. Thailand's government is adopting similar wage subsidies to help small and medium-size enterprises (SMEs) survive the looming economic recession.

In India, social protection is critical since half the population earns less than \$3 a day and over 90% of India's workforce is employed in the informal sector, without access to stable savings[20]. The Indian government's Social Protection Response Programme had reached \$1 billion by May 2020 to immediately help scale-up cash transfers and food benefits for vulnerable groups, particularly migrants and informal workers.



We were told to maintain social distance and hygiene properly and I have stopped going out. But maintaining hygiene in a crowded camp is very difficult. It doesn't matter how seriously I maintain hygiene, the people around me are not taking it seriously

-Nazrin, 16, Bangladesh*



Thirdly, governments need to recognise the growing threat from pandemics as well as the climate emergency and make social protection systems more responsive to future shocks. This means reforming social safety nets so they can reach vulnerable families faster, with the ability to ramp up support in times of crisis. Making such schemes more sensitive to vulnerable groups such as children (including girls, children of migrants and refugees, and those with disabilities) is essential.

All this will require Asia-Pacific governments, as well as international donors and financial institutions, to update budget priorities and development aid policies, as well as strengthen progressive tax bases to ensure fiscal sustainability. Meanwhile, expanding international debt relief would enable countries struggling the most financially to prioritise the welfare of the most vulnerable families.

Before the pandemic, barely 38% of people in the Asia-Pacific had access to social protection, with child and family benefits one of the main gaps regionally. Integrating an expansion of child-sensitive social protection into the pandemic recovery can thus become a springboard for lasting changes that leave societies and economies fundamentally stronger, fairer, and more resilient.

Recommendations:

1. Governments should rapidly scale up and sustain cash transfer programmes to reach all vulnerable households and their children. Such benefits should be designed as universal entitlements to ensure that all children and families can survive without resorting to harmful coping strategies. This includes families of workers engaged in the informal economy, whose incomes are among the most affected but are not typically covered by unemployment insurance schemes. Universal child benefits should be the cornerstone of this approach.

2. Governments should strengthen and expand child-sensitive shock responsive social protection systems. The pandemic requires an immediate response but also underlines the need to build sustainable long-term shock responsive social protection systems to meet the challenge of growing threats from major disease outbreaks and the climate emergency. Such systems should effectively target the most vulnerable children including those with disabilities, girls, migrants and refugees.

3. Governments should put measures in place to ensure that girls are protected from negative coping strategies and do not miss out on an education. Girls from financially struggling households are less likely than boys to return to schools after the pandemic, and so special efforts are needed include close monitoring of girls' attendance after educational facilities re-open, and income support to poor families to ensure girls are not subjected to harmful practices such as early marriage and their education is not sacrificed.

4. The international donor and finance community should increase the funding available to expand child-sensitive social protection. Donor agencies should increase support for strengthening social safety nets accessible to the most vulnerable families and their children, while all creditors should facilitate such efforts by expanding debt relief measures.

CHAPTER 3. Violence against children: An unseen epidemic

Long before the world discovered COVID-19, it was known that household stress raises the likelihood of violence and abuse at home. The extraordinary impacts of the current pandemic have led to increased incidents of gender-based violence, including violence against children, in part due to people being compelled to spend more time at home with abusers amid heightened pressures and anxieties.

One recent study estimates that domestic violence against children globally is likely to rise by 20 to 32% during quarantine, affecting some 85 million boys and girls.

People living in shared spaces such as families and those in cramped conditions are most likely to experience incidents of aggression. Children are inherently among the most vulnerable, with girls especially at risk in many contexts. One and a half billion children and youth – over 91% of the world’s student population, the majority of whom live in Asia – have faced different levels of lockdowns and disruptions[21].

Violence against women and girls – already at epidemic levels before the pandemic struck – has been exacerbated. As early as April this year, the UN Secretary General recognised a “horrifying surge” in gender-based violence and extended his call for a global ceasefire to cover domestic violence against women and girls.

Many Asian countries have already reported sharp rises in domestic violence.



In India and Singapore, for example, calls to domestic violence hotlines have increased dramatically[22]. In Sri Lanka, the National Child Protection Authority’s (NCPA) child helpline, 1929, has seen an increase of 30% in complaints involving cruelty against children from the start of the country’s lockdown, making it highly probable that instances of online violence have increased as well.

In the Philippines, a Department of Justice report found that online sexual abuse and exploitation of children tripled during the three months of community quarantine from March to May 2020 with 279,166 cyber tips (i.e. reports made by the public to authorities) compared to 76,561 cyber tips over the same period in 2019.

In the county of Hubei, China, the initial epicentre of the COVID-19 outbreak, reports to police of domestic violence towards children and women more than tripled during the lockdown in February, from 47 last year to 162 this year, activists told Chinese media[3] and among which, 12.27% involved senior family members taking committing violence against younger family members (children and young people)[23].

Low rates of reporting gender-based violence and increased difficulty reporting in lockdowns suggest that across the region the actual increase in incidents is far higher. Even before COVID-19, the region had some of the highest rates of violence against women and girls globally, and was home to the highest number of females who were married as children: a form of gender-based violence that places girls at heightened risk of lifelong violence by their partners.

Physical and humiliating punishment (PHP) is the most prevalent category of violence against children. Yet only four countries in the region have prohibited corporal punishment by law in all settings: New Zealand (2007), Nepal (2018), Mongolia (2016), Japan (2020). It is routinely used, for example, to discipline children to enforce how boys and girls should look and behave. For example, 70% or 4 million children across eight countries in the Pacific experience violent discipline at home, including a staggering 2.8 million (75 % of the child population) in Papua New Guinea[24]. Violence against children is also often a result of gender roles. For example, fathers and caregivers may use violence to demonstrate their masculinity, while mothers and other female caregivers may use violence as punishment in order to meet expectations of their roles. Boys and girls are likely to experience different kinds of violent punishment, coinciding with harmful expectations of what they can cope with, which may also shift with the child's age.

Lockdown restrictions allow adults already prone to abusing children more opportunity to do so. Isolated from school friends, teachers, social workers and the safe space that schools provide, vulnerable children have fewer opportunities to report harmful incidents to others. Simultaneously, the disruption to people's ability to earn a living reduces families' access to essential goods and services, causing additional stress that can fuel aggression.

Girls are often particularly vulnerable to domestic violence and other forms of abuse. They are also less likely than boys to return to school when normal classes eventually resume, especially in poor families where the cost of schooling forces parents to choose which child to educate. The combination of school closures and long-term economic distress can prevent some girls from returning to school, resulting in higher rates of child marriage. Families experiencing economic and food insecurity may be more likely to marry off their daughters as minors to reduce the number of children they have to provide for.

Some threats to children arise even when their lives appear safe and secure. Many children stuck at home have spent more time than usual online. Much of this extra screen time – such as online schooling and staying connected to friends and family – has clear benefits. But increased time on social media also exposes young children to higher risks of online abuse from other children or adults, leading several UN agencies to issue warnings in April about steps that authorities and the online industry needed to take.



Virtual gaming platforms are very popular and I spend most of my time playing PUBG – it's fun and interactive, as you can talk to other players. But then, because I am a girl, I face a lot of jibes, cat calling, and some of the gamers even have harassed me verbally. It's like we are always attacked – be it in the real world or the virtual world.

-A girl from Nepal





Jermaine, 10, shows his hygiene kit with soap and hand sanitiser, received from Save the Children (Lei Tapang / Save the Children)

Outside the home, children face a range of societal threats exacerbated by the pandemic. Migrant children and those from ethnic minority groups have sometimes been perceived as being a source of COVID-19 contagion, aggravating existing discrimination and violence. Some pandemic countermeasures themselves have led to abuses of children. The Philippines, for example, has seen a string of humiliating and degrading punishments meted out to children and young people for allegedly breaking COVID-19 curfews.

What can we learn from all this?

The first step is to strengthen systems and services already in place to protect the most vulnerable children from harm and help victims because the pandemic has not run its course. In mid-June, after 55 days without any confirmed cases of locally transmitted infections, Beijing re-imposed some control measures including the closure of recently opened schools after a fresh wave of local COVID-19 cases was confirmed. The pandemic is far from over.

Additionally, COVID-19 recovery strategies should ensure adequate planning and investment is scaled up in relevant services and sectors to meet the growing challenge posed by pandemics to vulnerable households and children. The reopening of schools can play a vital role in helping to identify and respond to vulnerable and distressed children if school staff have the right knowledge and tools. The private sector also has an important role to play especially in efforts to improve online safety.

Only by doing this can we stop each emergency leaving permanent scars – on society’s most vulnerable members and its collective conscience.



During the lockdown period, me and my friends are mostly on social media, and there are cases of harassment. For example, a stranger approached one of my friends on Facebook, and they started talking. Now this boy is threatening her. If she tells her parents, then they will react very negatively, and rather than helping they will blame my friend,

-A girl from Nepal ”

Recommendations:

1. Backed by international financial support, governments should ensure adequately resourced and effective child protection mechanisms are in place to support children at risk of violence. Such efforts should provide communities facing restrictions on movement with easy access to comprehensive, child-friendly services, including accessible information about free-to-call helplines. The international donor and finance community should allocate more development assistance to this sector and expand debt relief for the most financially constrained countries.

2. Governments and child protection authorities should implement special measures to support high risk, socially excluded and stigmatised groups. The principle of non-discrimination and inclusion should be upheld with special attention to vulnerable groups such as girls (with support for their resumption of education in high risk contexts), refugee or internally displaced children, street children, those with disabilities, ethnic minorities etc. Efforts should include public information campaigns that counter misinformation and social stigmatisation as well as the strict enforcement of laws banning hate speech. Measures to address stigma and social exclusion in schools should be urgently implemented.

3. Relevant ministries should ensure schools and colleges have the resources and skills they need to identify and respond to children in need of support and protection. School staff should have the necessary knowledge and skills to recognise signs of distress and refer children who may have specific child protection needs. Teachers and volunteers have training related to gender-based violence risk mitigation (GBV), Prevention of Sexual Exploitation and Abuse (PSEA), child safeguarding, and safe referral practices. Child-friendly complaints and feedback mechanisms in schools and other education facilities should be implemented as a priority.

4. Governments and information technology companies should work together to keep children and youth safe online through updated policies, information and safety features. Initiatives should include awareness raising for parents and educators to teach children how to use the internet safely, strengthened cyber safety measures provided by social networking platforms (especially for children using virtual learning tools) and effective child safety referral services and helplines.

CHAPTER 4. Education: Bridging the digital divide

COVID-19 has disrupted education on an unprecedented scale across the globe, affecting more than 1.58 billion students across 191 countries. The Asia-Pacific is no exception. By 1 April, almost all countries in the region had closed schools, while some 55% of all students globally affected by school closures in early 2020 reside in Asia. In India alone, some 320 million students were affected[25]. In this context, Save the Children has called for increased efforts to sustain and restore the education of all children as part of its global [#ProtectAGeneration](#) campaign.

The COVID-19 pandemic has led to a global boom in so-called EdTech (education technology) software, as schools shifted from physical to virtual classrooms.

In China, for example, nearly 200 million primary and secondary students started their new semesters via the Internet this year, which the World Bank said “might amount to the largest simultaneous online learning exercise in human history”[26].

Several other Asian countries, including India, Indonesia and South Korea have offered online learning alternatives during the pandemic, or shifted at least parts of their education systems online or using other mediums such as television.

Education technology was on the rise even before COVID-19, and is now even more likely to become a permanent feature of schooling systems across the region. Although learning through the internet can be an effective tool to ensure continuity of education, there are also several risks involved – in particular for the most financially disadvantaged children. The use of online education has exposed the “digital divide” across the globe, where for many poorer and marginalized families an internet connection is still considered a luxury.

In Thailand, for example, some 1.8 million children without access to the Internet or television receivers, were unable to access an online education system trialled by the government in May. One 18-year-old woman from Kalikot, Nepal told Save the Children:

“I have heard that online classes are running in the urban places where there is internet access. But there is no such facility in our rural areas.”

Governments must ensure that no children are left behind in the push to digitize education, and that they do not rush towards embracing new technology without mitigating the risks. Some Asia-Pacific countries have already adopted innovative measures to this end. In Timor-Leste, for example, the government has developed distance learning material across a range of channels (TV, radio, online and print) to ensure that as many children as possible can access them.

There are also privacy concerns about EdTech software that must be addressed, with reports that some apps are harvesting students’ personal information even after their class have ended. While the US state of New Mexico has sued Google Education for collecting students’ data illegally. Governments should consider other risks and issues that require attention (including teacher skills and social impacts).



The challenge of learning at home is you must be able to manage your time because the assignments are endless. I hope there is a social interaction between teachers and us too, so teachers will not only give us assignments and assess them.



-Karina*,17,Indonesia



Tablet PC distribution in South Korea (Save the Children)

More broadly, the pandemic has highlighted the need for Asia-Pacific governments to prioritise expanding Internet infrastructure. Internet penetration rates remain low in many countries where marginalized children are already facing barriers to education. According to the World Bank, the number of individuals using the Internet as part of the population in 2017 was 40% in Cambodia, 34.45% in India, 30.1% in Myanmar and 13.5% in Afghanistan[27]. There is a growing consensus that Internet access is crucial to realising a range of children's human rights, including the right to education and to information.

Additionally, governments need to address the lack of access to electronic devices in poor, rural, and or marginalised communities. Numerous government-private sector partnerships have explored the dissemination of low or no-cost tablets for educating children from poor households in low and middle-income countries including India, offering lessons for future efforts to bridge the digital divide. The international community can also support such efforts through increased aid and debt relief.

Policymakers and donors concerned about the cost should remember that such investments will benefit the economy as a whole and better prepare children for life and livelihoods in the 21st century. The pandemic has highlighted the benefits of the internet in enabling a range of activities, from sharing government advice and supporting contract tracing apps, to sustaining online business and commercial operations that enabled many people to work from home or continue essential retail purchases.

Sustaining such activities has helped lessen the blow to economies and secondary impacts on societies. This has highlighted the valuable role of enhanced, expanded connectivity in reducing the impact of future pandemics and similar society-wide emergencies. The future resilience of nations may depend, therefore, on ensuring more schooling, livelihoods and businesses can be sustained this way.

Recommendations:

1. Governments across Asia-Pacific should prioritise efforts to ensure internet connectivity for all households and educational continuity for all children. COVID-19 has highlighted how access to the Internet is crucial for children to enjoy a range of their rights, including education access and continuity and life-saving information about the pandemic, as well as to supporting business and livelihoods. Governments should work with the private sector to expand internet infrastructure to ensure all households, including in remote and marginalised communities, can benefit from internet access.

2. Governments should put ambitious and creative measures in place to ensure that the boom in online education does not leave the most marginalised children behind. Distance education, primarily online, is here to stay. Governments should ensure that children without home internet access or capable devices are not excluded from educational opportunities, including by exploring private sector partnerships to provide low-cost or free devices to children from lower income households.

3. Governments and other actors should address new and emerging risks to children using education software, including protecting children from gender-based violence and abuse as well as their right to privacy. Online education is still a relatively new phenomenon, and there are serious questions about how EdTech providers use the data of students that should carefully addressed. Other issues and risks – including the increased exposure to gender-based violence abuse and cyberbullying – should be carefully studied and anticipated by specific measures included in online education expansion plans.

4. The international donor and finance community should increase support for inclusive education, including resources for expanding internet connectivity and access. Increased donor support for education should include promoting connectivity as a public good and strengthening internet access in remote communities and marginalised households, including affordable devices and software for education. International creditors should facilitate such efforts by expanding debt relief measures.

CHAPTER 5. The case for a green Covid-19 recovery

The global scale of human deaths, social upheaval and economic crisis caused by the COVID-19 pandemic came as a complete surprise to most people across the world in early 2020. But many scientists were not surprised. They had been warning for more than a decade that the number of dangerous new diseases with the potential to become pandemics was increasing.

For example, a 2008 study led by academics at the University of Colombia, Tufts University, and University College, London – Global Trends in Emerging Infectious Diseases – found that the number of emerging infectious diseases had increased significantly since 1940. Crucially, more than 60% were of animal origin – zoonotic diseases – and the majority of these were from wildlife. Some studies estimate that as many as 75% of infectious diseases in humans are of zoonotic origin[28].

Numerous studies have confirmed or implicated various animals as the origin of diseases such as HIV (monkeys and chimpanzees), swine flu (pigs), SARS (bats), MERS (camels), and Ebola (primates). COVID-19 – a novel coronavirus similar to SARS and MERS – is believed to originate from bats.

Why is this happening? Scientists point to a combination of factors, including population growth and rapid urbanisation. But the fundamental reason is the increased interactions between people and wildlife, primarily driven by human destruction and encroachment of the natural environment through activities such as deforestation, as well as pollution of air, land and water. Such activities lead to loss of natural habitats, disruption of ecosystems, and the forced migration of wildlife (or their capture for trade and consumption). This in turn exposes more humans to animals and insects carrying dangerous viruses or bacteria, leading to spread of diseases[29].

Both deforestation and pollution are serious challenges in many most of Asia. Indeed, 99 of the 100 most polluted cities in the world in 2018 were in Asia[30]. Children are especially vulnerable to harm from air pollution, which is associated with one of the biggest killers of children – pneumonia – and is linked to asthma, bronchitis, and other respiratory infections.

But the greatest threat to ecosystems – and to humanity as a whole - comes from the heating of the planet caused by human activity. Global heating is triggering momentous changes including higher temperatures, rising sea levels, and changing rainfall patterns, which are disrupting ecosystems and causing some animals and insects to migrate to new areas, spreading the diseases they carry.

If this recovery is to be sustainable—if our world is to become more resilient—we must do everything in our power to promote a green recovery.

-Kristalina Georgieva, Managing Director, International Monetary Fund



Save the Children staff distributing personal protective equipment in coronavirus affected area (Save the Children)

Already the world's most disaster-prone region, the Asia-Pacific has seen an increase in the frequency and intensity of extreme weather events in recent decades. Across the region, this is exacerbating water shortages, hampering agriculture, threatening food security, and increasing health risks. Entire ecosystems are crumbling. Climate refugees have already migrated from some low-lying coastal areas and Pacific Ocean islands as sea levels rise coastal lands erode[31].

In all this, children – especially from poor and marginalised communities – face some of the highest risks and impacts. Young children are more likely to die or suffer from heatstroke because they cannot regulate their body temperature or control their environment. Floods threaten children's lives and development, causing injuries and death by drowning, contaminating water supplies, and leaving schools damaged or turned into emergency shelters. Damage to food production and resulting increases in malnutrition mean that, without adequate adaptation to climate crisis impacts, 7.5 million additional cases of stunted children worldwide are projected by 2030, and 10.1 million by 2050[32].

Harsh reminders of this came when Typhoon Harold tore through Fiji, Solomon Islands and Vanuatu in April, Cyclone Amphan struck Bangladesh and northeast India in late May, and Cyclone Nisarga lashed western India in early June – all of them disrupting Covid-19 responses on the ground and hitting vulnerable children and their families the hardest.

The COVID-19 pandemic is therefore the latest and clearest signal yet that humanity must reset its relationship with the natural environment, or continue to suffer the consequences of its own actions. The solution is therefore in our own hands – and to a considerable extent, in Asia-Pacific hands.

That is because the region not only suffers from the climate crisis but also contributes to it. It produces about half the planet's greenhouse gas (GHG) emissions and hosts three of the world's five biggest carbon-emitting countries (China, India and Japan)[33]. Coal, oil and gas are among the main drivers of the climate crisis – coal use alone is responsible for almost two-thirds of GHG emissions. Yet, Asia still accounted for 75% of global demand in 2019. Meanwhile, investments in climate crisis adaptation and disaster resilience in the region (and globally) represent only a fraction of what is needed.

All this not only fuels the growing climate and environment-related crises of the present but deepens the emergencies that future generations will face. The profits and lifestyles of today's adults have been paid for by ravaging the planetary home that their children will inherit – a terrible injustice.

So, what can be done? The vast resources being mobilised to revive pandemic-hit economies provide an unmissable opportunity to address both the current crisis and the climate emergency simultaneously. Governments, as well as international financial and donor institutions, should ensure that economic recovery efforts accelerate the shift to low carbon economies – a transition already started by the 2015 Paris Agreement – and ramp up investment in climate crisis adaptation and disaster resilience. Without investments in this area, the sustainability of all other development investments becomes questionable.

A recent Oxford University study, whose research team included Nobel-prize winning economist Joseph Stiglitz, showed that such an approach would actually be better for jobs and growth than traditional stimulus practices[34]. The study highlighted renewable energy projects, such as the development of wind and solar farms, as being among the most effective forms of economic recovery spending.

Other stimulus policy areas that scored well in the global study included increasing energy efficiency (e.g. in housing), ecosystem regeneration, and investment in education and training to address unemployment resulting from COVID-19 and decarbonization. For developing countries, the study pointed to spending on sustainable agriculture programmes as an area yielding high economic returns.

Society as a whole should play its part. Industries relying on taxpayers' support to survive should in turn fulfil their social responsibility to conduct business in ways that avoid harming public health and children's future. Public support for high emissions businesses such as airlines and fossil fuel companies should be contingent on strong commitments to green their operations rapidly. Some investment funds, banks and insurance companies had already begun to shift their business away from the coal industry to the renewable sector before the pandemic struck.

And individuals should consider lifestyle changes, including more plant-based diets, and greener, more sustainable modes of transport - as advised by the UN's Intergovernmental Panel on Climate Change (IPCC)[35]. We can all play our part.

How governments have responded to the COVID-19 pandemic so far offers another valuable lesson in dealing with a global environmental threat: effective and early action saves lives. The decisions that Asia-Pacific's governments and societies take now will determine the fate of generations to come.

Recommendations:

1. Governments donors and financial institutions should strengthen disaster preparedness and disaster management, climate crisis adaptation and disaster resilience as part of pandemic recovery efforts. For economic recovery to be sustainable, governments and societies must prepare for the growing impacts from global heating and environmental destruction that are already locked in for decades to come. This requires a holistic approach that strengthens systems and infrastructure, consults vulnerable communities and their children, while also tackling underlying issues such as poverty and social exclusion. International donors should increase support for adaptation and resilience efforts, without which other development investments and gains become less sustainable.

2. Governments, donors and financial institutions should design their COVID-19 recovery efforts to accelerate the transition to low carbon economies. Options for investment include energy efficiency retrofits, clean research and development, carbon capture and storage, ecosystem regeneration (including reforestation), sustainable agriculture programmes and re-training for workers affected by the pandemic and the decarbonisation of the economy. International donors should support developing countries' decarbonisation efforts for the collective global good. COVID-19 recovery efforts should comply with Paris Agreement ambitions and targets

3. Governments and societies should use the COVID-19 recovery to speed up the move from using and supporting fossil fuels – especially coal – towards renewable and green energy. The region's biggest greenhouse gas emitting countries should lead the way in an accelerated transition to renewable energy and energy efficiency, combined with electrification of end uses (including transport). Governments and the financial sector (including banks and insurance companies) should stop supporting the unsustainable fossil fuel sector.

4. Governments and societies should take urgent steps to reduce pollution. Authorities should invest in cleaner, renewable sources of energy; provide affordable access to clean public transport, increase green spaces and vegetation (including trees) in urban areas, and provide better waste management solutions to prevent open burning of harmful chemicals. All state support for high-polluting businesses such as fossil fuel-based vehicle makers and airlines should be conditioned on ambitious, enforceable commitments to switch rapidly to low polluting operations and products.

CHAPTER 6. Fighting disease in conflict zones

There are some 415 million children living in conflict zones across the globe, and close to 170 million in Asia-Pacific alone[36]. Last year, 19 million children globally were displaced within their own countries from violence, the highest figure ever recorded. There are 1.8 million internally displaced children just in South Asia, the majority of whom are victims of the conflict in Afghanistan[37].

The COVID-19 pandemic has magnified the deadly effects of conflict on children. Children in conflict areas already suffer from limited access to healthcare and information about protective measures to take against the virus, while other social safety nets may also have broken down. Systematic and targeted attacks on health infrastructure and aid workers by parties to conflict, the politicisation of aid and service delivery, border closures and restrictions on humanitarian access within affected states are all likely to further exacerbate the spread of the virus.

The pandemic has highlighted the need for armed actors to respect the sanctity and legally protected status of humanitarian operations and medical personnel in conflict. In Myanmar on 22 April, for example, a driver with a World Health Organisation team was killed after unidentified gunmen attacked his vehicle delivering COVID-19 tests in Rakhine State[38]. In Afghanistan, the UN recorded 15 attacks on hospitals just during the first two months of the pandemic[39].

Such incidents – already unacceptable before the pandemic – highlight the new dangers arising in the age of increasing major outbreaks of disease. Conflict zones may be deadly for people but provide safe havens for disease if prevention and treatment efforts are compromised by continuing violence and attacks on humanitarian and medical staff and assets. This not only exacerbates the threats already faced by children and other vulnerable groups in such areas but keeps alive the risk of infection spreading to wider populations (combatants and civilians alike) both within and beyond borders.

After a deadlocked UN Security Council failed to support UN Secretary General Antonio Guterres' initial call for a global ceasefire during the pandemic in April, deadly conflict continued in many of the Asia-Pacific major conflict zones.

In Afghanistan, there has been an alarming spike in violence during the pandemic, with the UN recording a sharp rise in civilian casualties in March and April. On 12 May, at least 24 civilians were killed during an attack on a maternity ward in Kabul, including female patients and children[40]. In Myanmar, conflict between the military and the Arakan Army has escalated, leading to tens of thousands of people being displaced from their homes.

There have, however, been small glimmers of hope. Eleven countries globally responded to Secretary General Guterres' call in April[41]. In the Asia-Pacific, brief moments have highlighted what peace could look like in regions long ravaged by conflict. In the Philippines' Mindanao province, both government forces and the insurgent group the New People's Army (NPA) declared ceasefires in March to contain the pandemic, although fighting re-erupted soon after and the NPA eventually officially ended its ceasefire on 1 May[42].

In Afghanistan, the Taliban and government forces declared a three-day ceasefire to mark the Eid-al-Fitr holiday from 24 May. In Thailand's "Deep South", a de facto ceasefire by the main rebel group the Barisan Revolusi Nasional held for almost a whole month until 30 April[43]. Then, on 1 July, the UN Security Council adopted Resolution 2532, demanding a "durable humanitarian pause" of at least 90 days. It is crucial all parties back their words with action to implement this global ceasefire, and work to sustain it past the end of the year given the likely duration of the pandemic.

A ceasefire alone, however, is not enough to bring about a sustainable reduction in violence. Indeed, that is seldom their purpose. Achieving and sustaining peace usually requires a viable process that brings key stakeholders together to resolve disputes or engage in efforts to ensure conflicts do not start or re-ignite. Governments and donors should therefore renew and redouble peacebuilding and conflict prevention efforts – and make such processes more transparent, effective, and legitimate by supporting the role of civil society and affected communities themselves.

Crucially, the people usually most affected by conflicts – children and women – should be meaningfully consulted and included in such processes, to ensure their experiences and insights inform decision-making and their particular needs are addressed. Their involvement also helps ensure any agreements are supported by the majority of the population. Yet such groups have historically been left out or sidelined in peace talks, despite evidence showing that their inclusion increases the likelihood, durability, and legitimacy of peace agreements.

In a year when two landmark UN Security Council Resolutions – UNSCR 2250 (2015) on Youth, Peace and Security and UNSCR 1325 (2000) on Women, Peace and Security – mark their fifth and 20th anniversaries respectively, governments should seize the opportunity to demonstrate their fulfilment of past promises and their commitment to strengthening peace and security.

Political and military leaders must create similar opportunities to improve respect for international humanitarian law and strengthen peacebuilding.

Recommendations:

1. Governments and armed groups in the Asia-Pacific involved in conflicts should, at a minimum, adhere to the UN Security Council's global ceasefire and facilitate the pandemic response. All military and paramilitary forces should suspend hostilities and actively facilitate the work of humanitarian and medical personnel to ensure essential disease prevention, containment and treatment efforts take place safely. Ceasefires should ideally be sustained for the rest of 2020 in light of the persistent risks of contagion, and extended or renewed in areas where COVID-19 cases are identified

2. Governments and armed groups should protect humanitarian and medical personnel in accordance with International Humanitarian Law and International Human Rights Law. The COVID-19 pandemic has highlighted the importance of adequately staffed and well-equipped medical facilities for the provision of healthcare on a large scale. Under IHL, medical personnel, units and transports exclusively assigned to medical purposes must be respected and protected in all circumstances.

3. Governments and donors must redouble efforts in conflict prevention and peacebuilding in line with UNSCR 2250 (Youth, Peace and Security) and UNSCR 1325 (Women, Peace and Security) and related commitments. This should include stronger political, technical and financial support as needed to ensure that a cross section of civil society, including children and women, are meaningfully involved in these processes to improve their effectiveness, transparency and legitimacy.

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