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I. OVERVIEW

1. Rationale

First detected in Wuhan, China in December 2019, Coronavirus was the cause of the global COVID-19 pandemic. Up to 18.00 June 22, 2020, the world had recorded more than 8.8 million COVID-19 infected people and 465,740 deaths in 216 countries and territories. These numbers are still increasing and there is no sign of stopping.

In Viet Nam, the first positive case was detected in January 2020. As of June 12, 2020, 332 people had been infected with coronavirus, 321 had recovered, and no one had died of COVID-19 in Viet Nam². This is as the result from the great efforts of the Government and the entire population in the proactive disease prevention and control. From the end of January 2020, preschools, primary schools, lower secondary schools and high schools in 63/63 provinces and cities were officially closed as per Government's orders and respectively started re-opening from 4 May and 11 May 2020. On April 1, 2020, the Prime Minister issued Directive No. 16/CT-TTg on social distancing, encouraging people to stay at home and reduce movements and interactions outside homes unless it was absolutely necessary, restricting movement among provinces/cities. At the same time, a series of other measures such as testing and contact tracking along with isolation, quarantines and social distancing (including through lockdowns) have been implemented to eliminate the risk of pandemic transmission in the community. Such drastic measures have had positive health impacts, contributing to controlling the spread of the disease. However, these measures also contributed to a sharp increase in unemployment and many industries/ sectors falling into crisis, resulting in a decline in socio-economic conditions.

Besides the macro effects, the COVID-19 pandemic has left significant impacts on the daily lives of people, including children, when the Government had no choice but had to implement social distancing measures to prevent and control the spread of the pandemic. Although there have been several studies, there is no specific assessment on the impacts of COVID-19 on children. Some initial observations show that children in difficult circumstances, e.g., children living in remote, mountainous and ethnic minority areas; children living in Social Protection Centers (SPCs); LGBT children and adolescents who are already very vulnerable, face even higher risks of being affected in their life, learning and accessing other support services. Children who are quarantined at home, in health facilities and in quarantine facilities can be at risk, especially children who are without or at risk of losing parental care or were separated from caregivers. Social distancing can lead to fear and panic in the community and especially in children. Adults losing their jobs, reducing their incomes also increase the risks for children, especially girls, leaving school to work to help their families or getting into child marriage. Closures of schools and recreational spaces, hospital treatment restrictions, isolation and stressors for parents, caregivers and the community when losing income due to job losses, all can result in the increase of physical and mental abuse against children. The obstacles to reporting child abuse cases and

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¹ https://www.who.int/emergencies/diseases/novel-coronavirus-2019

² https://ncov.moh.gov.vn/ Updated on June 12, 2020

access to child protection services may increase. Psychological and emotional trauma can be worsened by data on worldwide cases and deaths; worries about being separated from family members due to quarantine/isolation and other causes of stress.

Recognizing that the COVID-19 pandemic is having major impacts on the lives of children in Viet Nam, and with the efforts of the government and UN agencies, the Child Rights Working Group (CRWG)³ has conducted a rapid assessment of the effects of the COVID-19 pandemic on children, especially groups of vulnerable children, including ethnic minority (EM) children, children with disabilities (CWDs), and children living in social protection centers (SPCs), to provide recommendations to line ministries and other stakeholders on how to best protect children's rights in emergencies and in particular measures to overcome long-term impacts of COVID-19.

2. Assessment objectives

- To collect perceptions of children and caregivers about the constraints that impede the realization of child rights, focusing on four areas: education, protection, gender equality, and health and nutrition.
- To understand the factors that increase the risk of violations of children's rights in the pandemic situation.
- To provide recommendations to stakeholders on better protection of children's rights in the event of a pandemic/emergency and measures to minimize the negative impacts of COVID-19 over the long term.

3. Assessment method

- Quantitative data collection: online survey system targeting people from 7 to under 18 years of age and caregivers.
- Qualitative data collection: phone interviews with groups of vulnerable children (EM children, CWDs, children living in SOS villages) and caregivers.
- The assessment was designed based on the principle of ensuring the confidentiality of personal information, ensuring the safety of children and their consent to participate in assessments of children as well as caregivers.

4. Assessment locations

The rapid assessment was conducted in 23 provinces/cities across the North, Central and South regions, the impact areas of CRWG's organizations members, including:

- In the North: Hoa Binh, Cao Bang, Bac Kan, Bac Giang, Bac Ninh, Hai Phong, Thanh Hoa, Ha Nam, Lao Cai, Lang Son, Son La, Hanoi, Ha Giang and Lai Chau
- In the Central: Quang Binh, Quang Tri, Quang Nam, Da Nang, Thua Thien Hue and Kon Tum
- In the South: Dong Thap, Ho Chi Minh City, Binh Thuan

³ The Child Rights Working Group (CRWG), established in 2006, consists of representatives from international and domestic NGOs and social organizations and individuals working in promoting child rights in Viet Nam.

5. Assessment sample

As this was a rapid assessment with a focus on determining the COVID-19 pandemic impacts on the lives of children in general and especially children in special circumstances, the samples of the assessment included EM children, CWDs, children living in SPCs, and their caregivers.

The total number of children participating in the assessment is 1,122 children, including 707 children participating in the online survey (273 males and 429 females, 05 children of other genders) and 415 interviewed children (217 females and 193 men, 05 children of other genders).

These children, aged from 7 to under 18, are from 20 different ethnic groups: Bru - Van Kieu, Dao, Tay, H'Mong, Nung, Thai, Giáy, Giấy, Sach, Hoa, Lu, Kinh, Thai, Kho Mu, Muong, Cham, K'Ho, Cao Lan, Ha Nhi and Phu La.

The total number of child caregivers participating in the assessment was 2,044: 2,027 participating in the online survey and 17 face-to-face interviews.

6. Limitations

The assessment was conducted during and immediately after the social distancing (lockdown) period and therefore had the following limitations:

- The rapid assessment was only conducted in less than half of all provinces in Vietnam (23/63 provinces/cities), and the number of children was limited to only 20 ethnic groups out of a total of 54 ethnic groups.
- The assessment was conducted in a short period of time (15 days), which took place during the social distancing period in Vietnam. Therefore, the assessment team could not meet children directly, but interviewed them by phone and other online platforms (such as Zalo, Facebook messagenger).
- The number of adults and children participating in the online survey was unevenly distributed among localities due to connectivity.
- The children participating in the interview were selected by teachers. However, the teachers selected more senior students to participate in the interview rather than children of lower grades so the samples are not diverse.
- Many interviews were conducted by commune officials, but their interviewing capacity/experience is limited.
- The assessment team was not able to interview children living in SPCs and CWDs, but only their caregivers, thus they were not able to fully collect/explore sensitive information about child protection in social protection facilities.
- The questionnaire was quite long; children did not have time for in-depth interviews; they only provided short answers and were not confident to share detailed information about reproductive health or domestic violence.

II. MAIN FINDINGS FROM THE ASSESSMENT

1. Education related issues

EM children, CWDs and children living in poor households are those who had difficulties in accessing education during the period of social distancing and school closure.

There are significant differences between students in cities and students in remote areas in accessing online learning platforms during the social distancing and school closure period. According to the online survey by the Vietnam Association for Protection of Child's Rights (VACR), nearly 100% of children living in the home/family environment and cities have access to online and TV-based learning. However, in a rapid assessment by CRWG of more than 415 children living in special circumstances (including EM children, CWDs and children living in social protection centers), only 35% of children have access to online and TV-based learning during this time.

One of the main reasons is that EM children in remote areas and children in poor families do not have phones, computers and internet to be able to study online.

"I am not able to continue my study because my family is in a remote area, does not have enough learning support facilities and technology such as computers and phones compared with lowland students." (Male, 12 years old, Dao ethnicity, Lai Chau).

These children often choose the solution of self-study at home, but their self-study is also very difficult.

"I still study at home by myself, but I cannot understand the lesson fully and easily. I have many difficulties because I do not understand the lesson and I have no one to help me." (Male, 10 years old, Bru-Van Kieu ethnicity, Minh Hoa district, Quang Binh province)

"It is very challenging when studying at home ... There are many difficult exercises that I can't understand, but I do not know who to ask" (Female, 14 years old, Ha Giang province)

In some cases, children have to assist their families with chores, so their time for learning is very limited.

"During the COVID-19 pandemic, my education did not continue because I had to spend time helping my parents' work and looking after my younger sibling, so I was tired and went to sleep and had no time for my study." (Female, 13 years old, Lung Chinh district, Ha Giang province).

CWDs, especially children with hearing impairment and intellectual disabilities, have more difficulties in accessing education. According to one caregiver: "My child's education was interrupted. When the school applied online teaching, he could not participate because he is a child with intellectual disability so he couldn't absorb it". According to a teacher of CWDs, "Hearing impaired students are not yet able to be independent in learning online. They depend on their parents, but their parents are busy working or lack child supporting skills".

Preschool children had almost no interactive learning activities with their teachers. Most children played at home with their siblings. Some children were supported by their parents or older

siblings in learning the alphabet, numbers and playing games at home. A caregiver in Hai Phong said that her child's preschool teacher suggested organizing an online class through Zoom twice a week, but the parents did not cooperate, so it could not be done.

The majority of students surveyed in all age groups felt sad because they could not go to school; They said that they missed their friends and schools because the duration of being out of school was too long and thus they could not see and play with their friends like before COVID-19. More importantly, most of the students in the lower and upper secondary schools were worried that they would lose knowledge and not be able pass their upcoming exams or would have to drop out of school. In addition, as the COVID-19 period was also the time for crop cultivation and harvest, children in upland/mountainous areas often had to support their parents, hence they could not concentrate on schooling like when they stay in boarding and semi-boarding schools. They worried about their knowledge gaps and not being able to understand lectures. The difficulty in acquiring knowledge is also the reason that they felt anxious about not being able to keep up with the knowledge when returning to school.

"I do not like to study at home, I just wish that the pandemic would end so that I can go back to school. When studying at home, if a lesson is difficult to understand, I cannot communicate with friends and teachers. Studying at school, I understand and apply lessons better." (Male student, junior high school, Lao Cai province)

"I just want to go to school, see my classmates because when studying at home, I don't know how to study, what lessons to study." (Male student, Junior high school, Lao Cai province)

"I still study at home, but the time duration for study at home is limited. Everyday the teacher delivers homework to my house and collect and mark it at the end of the day. But my understanding about the lesson is limited. There are many difficulties while studying at home because I did not understand the lesson, because there was no instructor and some of my books were left at school, before the pandemic". (Male, 10-year-old, Bru-Van Kieu ethnicity, Minh Hoa district, Quang Binh province).

A very noticeable point in access to quality education is that the approaches to maintaining children's learning are not homogeneous between localities. How did teachers choose appropriate methods to support their students' learning? It depended on their ability/experience and the real conditions/ resources of each locality. Some teachers chose to send homework/assignments to students and guide them through television; others opted for social networking apps (like Facebook, Messenger, Zalo, etc.) to create study groups with students; some teachers selected online training/conferencing platforms such as Edu, Zoom, Microsoft Teams to conduct teaching (mainly for large classes and in urban areas). On one hand, it demonstrateed the education sector and teachers' efforts in maintaining student learning. But on the other hand, it showed the sector also struggled to respond to the needs of all children (i.e. interactive learning and engagement with preschool children, children with disabilities, children without access to TV or online platforms, children living in remote areas). Also, there was little support for teachers on how to be more effective in online/remote teaching.

"I studied by myself at home. The teachers gave me the Edu apps. After that they also had paperbased homework/ assignments and asked my parents to come to pick them up for me. They gave a deadline for submitting the assignment/homework and asked my parents to come again to collect new homework/ assignments". (Male, 15 years old, Nung ethnicity, Thach An district, Cao Bang province)

"I had to study online. Previously, my teacher used to give lectures via zoom, but because the zoom was reported on the news to be unsafe, my teacher stopped using it and switched to give homework/ assignments for students to do at home". (Male, 13 years old, Muong ethnicity, Tan Lac district, Hoa Binh province).

2. Health and nutrition related issues

The food security of children surveyed in the short term is still ensured. No child claims to have suffered from hunger due to the effects of COVID-19. The number of meals for most children during the COVID-19 outbreak did not change. About two-thirds of the EM children participating in the assessment live in mountainous areas. Their daily food was mainly produced by themselves or collected/found near their homes, which was unchanged compared to before the social distancing period.

"My family cultivates rice and vegetables in two seasons, so we have enough food to eat. I still eat 03 meals a day. In the last 02 months, nothing has changed." (14 years old, Muong ethnicity, Hoa Binh province).

However, it is worth noting that *household nutrition security has been significantly impacted by the COVID-19 pandemic*, especially for EM children living in mountainous areas (where there is not enough land for their family to do farming/ plant crops) and groups of vulnerable children (orphans, children involved in child labor, children living in poor/near poor households). The quality of their meals lacks the variety of essential food groups or is significantly reduced compared to school meals. The main reasons include a decrease in the mobile/traveling market; increases in food prices, especially pork price; long unemployment of young parents, which all resulted in being unable to afford a variety of foods.

"In the past, we had more food to eat. Now my family has no food in storage, but only veggies and bamboo shoots... No meat and eggs in the last two months." (Female, 15-year-old, Thai ethnicity, Thuan Chau district, Son La province).

"I prefer eating at school because there I have friends and more meat than at home. At home I only eat greens with corn and rice. No one has given my family anything else to eat and my family didn't have money to buy anything else to eat". (Male, 15-year-old, Meo Vac District, Ha Giang Province).

In addition, the government's regular support (rice and money) for disadvantaged children was stopped during the social distancing period due to school closures and students not attending school. The local governments have not received detailed information/guidance about which forms of support to be provided when children return to school.

"Before social distancing, I was provided 30kg rice every month. But during social distancing period, the school was closed, thus I was not granted any rice during this period. I don't know whether or not the school will provide the compensated rice. Probably not because I am back to school already but I still haven't seen my teacher." (Male, 15-year-old, H'Mong ethnicity, Yen Chau district, Son La province).

Children have good knowledge and practice of COVID-19 virus infection/ transmission prevention measures: Most of the surveyed children can list COVID-19 prevention methods, especially wearing masks and washing hands often with soap and clean water. Most of the children have learned this information in a variety of ways, most notably through the local communication channels, such as commune/ ward/ village leaders, health workers, grassroots collaborators, loud speaker broadcasts and flyers. Televisions, and phones with communication apps about COVID-19 disease prevention and social networks are the channels they watch regularly. Their teachers and families are also effective channels to share information about COVID-19 prevention measures. Schools are well prepared for face masks and soap/hand wash for children when they return to school. The role of village leaders in mountainous areas and EM communities is very important in ensuring effective communication to the people.

"I have been instructed by teachers in how to prevent COVID-19 such as how to wash hands properly, watching TV on how to wash hands, always wearing a mask when going out. The school gave each student two masks and my family also bought more; the school had enough soap. (Female, 15 years old, Kho Mu ethnicity, Thuan Chau district, Son La province).

Increasing risk of having refractive errors due to online learning and using electronic devices: According to an online survey conducted by VACR, out of 707 surveyed children, 56% of children aged 6 years and older thought that online learning had negative impacts on their health. 77% of children used internet/ electronic devices less than 6 hours/day and 18% of children spent between 6 and 8 hours/day learning online and electronic devices. In the assessment, the majority of children and caregivers worried that the amount of time children spent using electronic devices such as watching TV, playing games and learning online, and on social networks increased; for some groups, this even increased by 2-5 hours/ day compared to before. This may have increased the risk of vision-related issues or negative effects on children's attention if the school closure had lasted longer.

"Sometimes I felt dizzy due to spending too much time on television and computers during my study" (12 years old, Kinh ethnicity, Ha Dong district, Hanoi).

Access to health and reproductive health services remained normal during the social distancing period. 90% of surveyed children were not found to be sick at this stage. A small number of sick children and family members said that access to health services during the social distancing period was not problematic.

"I was sick, went to the district health center and was given medicine." (Female, 14-year-old, Bru - Van Kieu ethnicity, Dakrong district, Quang Tri province)

Most respondents appreciated the quality of locally available medical services (such as clinics and hospitals) and trusted the capacity of the medical staff.

"My father was sick. And when he came to the health station to get medicines, he still received medicines as usual. There was no problem compared to before the social distancing period. Doctors and nurses at the medical station are always devoted to the patients." (Female, 14-year-old, Dao ethnicity, Ha Giang province)

Minors did not have difficulties accessing contraception methods (asking for/ buying/ receiving counseling) at clinics, drugstores, village health clinics and other sources.

"I could buy contraceptive pills at the pharmacy, or from the local/village medical doctor." (Female, 15-year-old, Thai ethnicity, Thuan Chau district, Son La province).

Children's mental health: During school closure due to the COVID-19 pandemic, children spent more time with their parents and families. The assessment shows that children had many positive emotions/feelings when they were at home with their parents and siblings. Especially EM children who usually stay in boarding schools (far away from home) said that they felt happy because they had more time with their family members in daily activities (working, playing, etc.) during the social distancing period.

"I felt happy because I did not have to stay in the boarding area of my school, but instead being with my parents, working and learning from my parents." (Female, Bru - Van Kieu, Huong Hoa district, Quang Tri province).

"I felt happy because everyone has the opportunity to be closer to each other. My father works far away from home and usually comes home every 2-3 months. Each time he comes home, he usually stays 5-6 days at home. Now the whole family has the opportunity to be together. (Male, 15-year-old, Thai ethinicty, Yen Chau district, Son La).

However, besides the small joys, they also encountered certain difficulties during the pandemic. With the total duration of being out of school being more than 03 months, children also faced psychological and social problems. Social distancing disrupted the schedule of activities and children's relationships with people outside of their family, restricted children from leaving home and having the opportunity to meet their teachers, friends or other relatives. Social distancing and pandemic also worried and frightened some children - their psychological and emotional well being became unstable due to their worries about the future.

"I feel worried because I am afraid of forgetting all knowledge, and because I think that I may get infected with the virus when going out [due to the fact that we don't know the people we meet are positive or negative to the virus]; If someone in my family has to be quarantined, I feel very worried because I don't know if that member has Corona or not". (Male, 15-year-old, Nung ethnicity, Hoang Su Phi district, Ha Giang province).

"I am worried because the disease is spreading outside the community" (Female, 14-year-old with disability in Hai Lang District, Quang Tri Province)

"I felt scared when hearing about the pandemic information. So even though so far no one in my village has been quarantined/ isolated, I still feel scared" (Female, 15-year-old, Thai ethnicity, Son La province)

Regarding the pandemic, most of the children were worried about COVID-19 infection, especially when they heard the explanation about the transmission routes and heard/saw many deaths on TV. Many of them said that they were very worried about being infected with COVID-19 by people returning home from their work (these people work far away from home), thus they actively limited their exposure to people outside home and follow preventive measures. Their concerns increased when they found that their community had many quarantined people, who could carry diseases and pass them on to others or when they saw many people without masks in public places. They also feared that if their family has someone in need of quarantine, the whole family (and community) would have their health affected and would be quarantined. In addition, children were worried that returning to school would increase the risk of infection if someone at school has COVID-19.

"It's scary to go back to school, but I still have to go" (Female, 16-year-old, Muong ethnicity, Kim Boi district, Hoa Binh province).

In addition, some also said that they felt bored when being around the house all the time with their parents or being scolded more often when they made mistakes. Because family members often stayed home together, 48% of the surveyed children faced pressure from being scolded. Even 32.5% of surveyed children felt that their parents were not close to and did not care about them in this period. This finding is similar to the that of an online survey by VACR, which shows that due to the complex disease situation, children are restricted from leaving the house; Therefore, they felt bored because they were only around their home with their parents all the time. This is also considered as one of the main pressures children experienced during this time. These children accounted for 44.1% of the children surveyed by VACR.

Some children feared that if their parents were quarantined, no one would take care of them. In particular, some students worried that if their parents had to stay home too long due to the pandemic, they would have no jobs to earn income to support their families. This was especially the case of children in lower and upper secondary school age who are currently living in disadvantaged or mountainous areas and whose parents have to work as seasonal workers.

"During the absenteeism from school due to COVID, I was worried that I could no longer go to school and my parents could no longer work to earn money" (Male, 15-year-old, Meo Vac district, Ha Giang province).

Recreational/ entertainment and daily activities of children: During this time, children were restricted from having activities outside their home or going to the places which had people returning home from far workplaces [due to fear of infection from these people]. An online survey conducted by VACR also found that 56% of children entertained themselves by listening to music, watching movies on the internet and television, playing games on computers and

phones; Only 47% of children spent time on exercise/ physical games and sports such as soccer, badminton, shuttlecock, etc.

"I woke up in the morning to walk; in the afternoon I played badminton and football to improve my health" (Male, 15 years old, Yen Chau, Son La province)

Some children helped their parents with housework, which reduced their play time. Others did not have to do farming work, hence spent more time playing compared with the time when they were at school.

During the extended school closures due to the COVID-19 pandemic, children were conscious of taking care of their health, increasing exercise to enhance their own immunity and helping parents with housework. Many children were happy to be able to do many things they wanted to do that they had had no time to do before the social distancing period.

"During the school closure due to COVID-19, my daily life changed a lot. I had more time to help my parents with housework, such as cooking, cleaning the house, and taking care of my family's health. This job previously was totally taken by my mother. "(Female, 14 years old, Kinh ethnicity, Quang Nam province)

However, this has somehow also created an arbitrary and disorganized attitude and lifestyle in children. According to a survey by VACR, 55% of child caregivers had difficulty managing their children's daily activities such as staying up too late, getting up late, spending too much time using electronic equipment. 25.7% of adult respondents had difficulty supervising children using electronic devices.

3. Child Protection related issues

Psychological pressure and the risk of suffering from mental and emotional abuse. During the social distancing period, children were at risk of suffering from psychological stress and emotional abuse. Parents were more likely to get angry with and scold children, leading to negative effects on children's morale and development. Especially in the context of the COVID-19 pandemic, and when children could not meet their friends and teachers, the frequent and unjustified and unreasonable scolding by parents could make children feel more anxious and frightened. On the other hand, some children had to stay home alone because their parents still had to go to work. The fact that children did not have parental care negatively affects their psychology and behaviors. This can make children worried, stressed, scared, feel abandoned or even angry and commit violent behaviors. Girls (60% of the surveyed children) often felt more worried and pressured than boys (40%).

"I often got scolded by my mother and this happened often. I asked my dad to help me but he didn't care". (Female, 12-year-old, Kinh ethnicity, Thua Thien Hue province)

"Dad often drank because he didn't have a job. Then he came back and talked badly and vulgarly" - (Female, 13 years old, Thua Thien Hue)

In addition, leaving children alone at home unattended by adults can increase the risk of having an accident such as fire, injury, drowning, or being abused.

Online Abuse. The risk of cyber abuse was very obvious to children during the social distancing period when schools were closed and they had to study online. In the context of the COVID-19 pandemic, there have been numerous reports of children increasing their time online and using the internet. In addition to learning purposes, children also used the internet for entertainment, gaming and joining social networks such as Facebook, Zalo, YouTube, TicTok, etc.

Some participants in the assessment encountered unwanted experiences related to fake news, violence, pornographic images or documents. This finding also reflects the risk of cyber abuse as stated in the Report by the National Hotline for Child Protection under the Ministry of Labor, War Invalids and Social Affairs (MOLISA). The press also reported on some cases of children being tempted to share personal photos wearing swimsuits in the form of being invited to participate in beauty contests or obscene suggestions related to online sex or being asked to share personal information/photos. Others reported being bullied, losing personal information, or being scammed online.

"I was teased by my friends; my friends posted pictures of me online. I also once lost an account, and after that I created a new account". (Female, 16-year-old, Muong ethnicity, Tan Lac district, Hoa Binh province).

"Sometimes on Facebook and YouTube appear vulgar and violent clips, and sex images" (Male, 17-year-old, Nung ethnicity, Quang Hoa district, Cao Bang province).

"Someone texted me and tried to trick me into topping up VND 20,000 for him. Also, my friend shared my photo with someone else" (Male, 12 years old, Tay ethnicity, Thach An district, Cao Bang province).

"A few times some foreigners came into the chat, then sent me sensitive photos; At that time, I reported it to Facebook, told my parents and stopped those people. Since then I have been more careful when making friends with strangers." (Female, 15 years old, Thua Thien Hue)

Regarding the knowledge of protecting themselves on the internet, VACR's online survey shows that 46% of children think that they need to improve their skills of preventing and combating cyberbullying, and 49.6% of children say that they need to improve their personal information protecting skills due to their lack of knowledge or ability to do it by themselves.

One problem worth noting is that when faced with an abusive or uncomfortable situation, most of the children only seek the help from their family members, relatives or friends; In particular, for abusive acts in the cyber environment, children tend to resolve the problems themselves without seeking the support from others. Notably, all of them did not mention seeking assistance from their local child protection officers or the National Hotline for Child Protection 111.

"I use Zalo, Facebook, access information on the Internet. I am afraid of losing information, afraid of losing my Facebook account, afraid of being gossiped/rumored, threatened, etc. if I encounter such situations, I will not seek help because I want to overcome it myself." (Male, 13 years old, H'Mong ethnicity, Hoang Su Phi district, Ha Giang)

"I use Facebook and people often backbite me for that, which makes me sad. Every time I see that case, I tell my parents". Girl, Kinh ethnicity, Hue city).

"On Zalo, Facebook and Instagram, some strangers have invited me to join groups for 18+, but I have blocked those strangers/ groups." (Female, 14 years old, in Quang Binh province)

"Websites often post false news. Zoom was broken into, interrupted and harassed by strangers while students were studying online" (Male, 16 years old, in Quảng Bình province)

The risk of early marriage. One thing worth noting is that prolonged absence from school for students after Tet holiday has increased the risk of child marriage among EM children, especially girls.

"A girl from class 9A has been married to a boy for more than 01 month. Another boy has been married to a girl in his village for more than 02 months. They got married, but did not organize weddings, so the village and commune did not have any intervention yet". (Female, 14-year-old, H 'Mong ethnicity, Meo Vac district, Ha Giang).

"I'm sad because there is a classmate who did not listen to my teacher and got married. I worry that she will suffer from it because she has no job" (Female, 15-year-old, Bru-Van Kieu ethnicity, Quang Tri province).

"There are 03 girls from my village who have gone to their boyfriends' houses in other communes: One girl has gone to Thang Tin village, another girl who dropped out of school has gone to Then Phin commune, and a third girl (currently in grade 9) has also gone to Then Phin and stayed there" (Male, 12-year-old, H'Mong ethnicity, Hoang Su Phi district, Ha Giang).

In Son La province, when interviewing 6th graders (12 years old), they also mentioned four female classmates who were already married (two of them are pregnant) and two male friends are already married.

The risk of children dropping out of school and child labor. During the COVID-19 pandemic, many children had to work, helping their parents to earn money in various ways such as farming, goods delivery, working at caffes, milk tea shops or selling things online, etc. These jobs take up a lot of children's time and can distract them from their study and play.

"Some friends spend time selling things online, so don't learn through Zoom software, but just learn on the Google classroom to earn money to help their parents" (Female, 14 years old, Kinh, Quang Nam province)

"My friends all went to work like me, and the Thai friends in my village [were hired to] went to cut sugar cane until they were no longer hired by anyone". (Female, 14-year-old girl, Son La province)

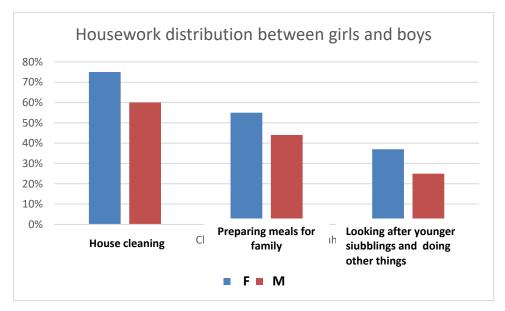
"Some friends in my village take advantage of the time off school to work in Hanoi to earn money, but I don't know what they are doing. Now they all have returned here". (Female, 15-year-old, Thai ethnicity, Son La province)

"In my class, Huân and Huy spend a lot of time working and do not spend time studying. They mainly spend time growing cassava and banana" (Female, 15 years old, Bru-Van Kieu, Quang Tri province).

4. Gender issues

There have been some gender equality issues before and during the social distancing period.

VACR's online survey shows that 75% of girls are often asked to clean their homes to support their families while the percentage of boys is 60%; 55% of girls had to prepare meals for their families, while the percentage of boys was only 44%; 37% of girls were asked to look after their younger siblings and do other household chores while the percentage of boys was 25%. Several children and youths with non-binary genders were engaged in this assessment, however, due to the limited percentage, their gender issues as well as potential discrimination issues were not properly analysed.



In some families, discrimination between boys and girls persists through an uneven distribution of housework. Girls are often in charge of doing things like washing dishes, cooking and cleaning the house, while boys often do less or almost do nothing.

"My family does not have a specific job distribution, but people often follow the existing custom, i.e., girls washing clothes, picking vegetables, cooking, fetch water, boys often cutting trees, chopping firewood in forests" (Male, 14 years old, Bru-Van Kieu, Huong Hoa district, Quang Tri province)

"During the pandemic, I saw girls doing more housework than boys." (Male, 14 years old, Kinh ethnicity, Minh Hoa district, Quang Binh province).

III. RECOMMENDATIONS

1. General recommendations

- Based on the experience of coping with the COVID-19 pandemic, sectors and localities should proactively develop emergency scenarios, prepare response plans to ensure timely and adequate outreach and access to the system of collecting disaster information, and allocate an annual fixed budget for emergency assistance, ensuring the protection of the rights of disadvantaged groups, especially the most vulnerable children, in central and local interventions.
- There should be a mechanism to mobilize the participation of social organizations and non-state organizations in conducting comprehensive assessments of the impacts of emergencies and recommending appropriate solutions and supporting Government in outreach and support to affected populations.
- Ensure that current forms of assistance are not interrupted; emergency assistance must be timely in emergency periods; and ensure fairness and equality in the spirit of "leaving no one behind". Information about forms of assistance should be transparent, easily understood and accessible to all people.
- There should be effective mechanisms for all people, especially beneficiaries, to be able to provide feedback on state support in responding to emergencies.

2. Specific recommendations for addressing the negative effects of COVID-19 in the short and long term

1.1 Inter-sectoral recommendations

- It is necessary to conduct comprehensive evaluations of the implementation of the Prime Minister's direction in pandemic prevention and control as well as the impacts of COVID-19 on disadvantaged groups, children in general and most deprived children in particular, to have valuable lessons learnt documented in order to be well prepared for any upcoming situations and protection of children rights in emergencies.
- It is important to increase the participation of children and people in providing feedback on child and community support mechanisms/services in response to the impacts of COVID-19, to promote state management responsibilities and investment in the pandemic context.

1.2 Recommendations in specific sectors

2.2.1. Education and training

- Pilot and widely apply distance and/or online learning/ teaching for all levels of education with specific quality standards, detailed guidance, and these learning and teaching programs should be officially recognized.
- Promote suitable mechanisms and potential ways of supports to children living in remote and EM areas, and disadvantaged children in urban areas to access to digital literacy and online learning.

- Organize accelerated learning or flexible extra-curricular activities to help children to strengthen their knowledge that has been missed due to long absences from schools due to long social distancing periods.
- Pilot the development of and encourage schools and teachers to develop educational programs/ curriculums on safe and resilience school and learning and natural disaster and pandemic response skills in emergencies for students according to their local areas.
- Instruct students to protect themselves from risks of cyber abuse/violence, relieve stress in the context of pandemics or other emergency situations.
- Provide training for and improve the capacity of teachers in using information technology to effectively organize interactive and exciting online or distance learning activities for students; pay attention to every student to ensure that students can catch up with the curricula without learning pressure and students learn effectively.
- Continue to carry out communication activities on pandemic prevention; seek and coordinate resources to support the dissemination of knowledge and practice of personal hygiene skills to children through school activities (such as washing hands with soap, using face masks, covering their faces when coughing/sneezing, etc.)
- Collect sufficient data on children who do not return to school after the social distancing period and comprehensively review the reasons related to student absences to have prompt interventions, help them return to school and promptly and effectively prevent child marriage and child labor.
- Support and implement models of home- or community-based classes for CWDs and children living in remote/ isolated areas, as well as ECD, so that these children may continue to have lessons with teachers and instructors during the social distancing periods.

2.2.2. Social welfare

- Review all children who are benefiting from social support policies that were interrupted by COVID-19. Ensure that they will receive support again as soon as possible.
- Assess the impacts of the government's social support policies as well as cash transfer program to households, children and other disadvantaged groups in order to gain lessons learned and replicate good practices. Inclusion of other marginalized groups (e.g., LGBT youths) for government's social support.

2.2.3. Child protection

- Promote community communication, especially communication to children about the National Hotline for Child Protection 111, child abuse prevention, how to recognize and prevent cyber risks, child marriage prevention, child labor prevention, mental healt support, etc...
- Enhance communication to parents and caregivers on the "positive discipline" or "learning without tears" approach to raise the awareness of parents and caregivers on positive educational measures, prevent the use of physical and emotional punishment in disciplining children at home. Develop communication and training materials, focusing on providing

knowledge and skills for children and parents facing and dealing with psychophysical crises in emergencies and pandemics.

- Strengthen child protection support and counseling through the National Hotline for Child Protection 111, social work centers; at the same time continue to strengthen the Child Protection system at all levels, especially at the grassroots level through assigning relevant people to be in charge of commune-level childcare work, supporting village-level childcare collaborators and strengthening coordination among departments and unions; assess the problems children are facing in order to have appropriate and timely responses; invest in technology, improve the capacity of grassroots child protection officials and staff on the application of child protection apps.
- Ensure that the cases where children living in special circumstances, children suffering from violence and abuse, groups of children at high risks have to drop out of school to work or get married early shall be detected and intervened promptly, specifically and directly.
- Issue guidelines on procedures for supporting and protecting children in emergencies
- Promulgate regulations on working hours, forms/models of working from home, support mechanisms for workers (both men and women) having young children in case schools have to close for a long time.

2.2.4. Nutrition and health

- Conduct comprehensive health checks on children of all ages, especially in the areas at high-risk of being affected by COVID-19 (based on existing data and/or after implementation of recommendation 2.1.), including mental health, in order to provide appropriate and timely intervention and treatment regimens for children affected by COVID-19.
- Allocate budget in implementing nutrition interventions in emergency situations under the Technical Guideline on nutrition in emergencies issued by the National Institute of Nutrition (NIN)/Ministry of Health (MOH).
- Have solutions for livelihoods support and access to nutritious food sources, help households with children to ensure food security and household nutrition security, especially for poor households who have children belonging to the groups of vulnerable children and have no regular income.
- The provision of emergency relief products (such as instant noodles, packaged rice porridge, etc.) is only a temporary and short-term solution. It is necessary to comply with the recommendations of the United Nations' Humanitarian Charter and Minimum Standards in Disaster Response.
- Enhance community communication on domestic livestock production and gardening improvement to ensure the availability of nutritious food.

