

## An Investigation of the Effects of COVID-19 on Children and Social Workers in Windhoek, Namibia

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### Abstract

The study's goal is to look into the effects of covid-19 on children and social workers in Windhoek, Namibia, with a particular focus on children and social professionals who work closely with them. The study's target population consisted of 20 children from certain Windhoek schools, 10 child protection social workers from the Ministry of Health and Social Services, and extra key informants from the Namibia Social Workers Association and the Namibia Health Professions Council. The material was evaluated qualitatively by thematic analysis. Because of the nature of the research, in-depth interviews were conducted to obtain data from participants, allowing the researchers to gain a thorough understanding of the topic. In-depth interviews also allowed the researcher to pose open-ended questions, allowing participants to respond in greater detail during the interview. The study's objectives revealed that among of the effects of covid-19 on children include disruptions in access to education, food insecurity, and an increase in aggression. Social workers reported disruptions in service delivery, difficulty obtaining personal protective equipment, increasing caseloads, and burnout. The study's recommendations include maintaining a strong nurse-student relationship during school closures to assist pupils feel more connected and emotionally supported, perhaps lowering their risk of mental health disorders. Virtual learning environments can also be utilized to teach students about how the virus works, how to prevent getting it, mental health literacy, and pandemic coping skills. Improving insurance coverage for underserved groups and frontline workers, from farm workers to medical professionals, who are also the most affected by the pandemic, is critical for achieving health equity in the absence of universal healthcare.

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### 1.0 Introduction

On March 14, 2020, Namibia reported its first case of COVID-19. By December 10, 2020, there had been 15,773 cases and 118 deaths. Many children were already at risk for poor health, nutrition, sanitation, education, and access to social services when the epidemic occurred. Vulnerable families, especially those residing in crowded urban informal settlements, required immediate support with preventative hygiene practices due to lockdowns brought on by COVID-19 and a rise in unemployment. For many already disadvantaged households, food insecurity has increased (UNICEF Namibia country office annual report), 2020).

Many countries have closed schools and childcare centers, imposed border restrictions, instituted stay-at-home orders

and canceled events. Regular activities have been abruptly interrupted and restricted, including going to school, having fun, and hanging out with friends (Lemish *et al.*, 2020). While COVID-19 impacts all children in the country, it is anticipated to have a particularly detrimental impact on the four million children and young people who are thought to be living in poverty in the United Kingdom at the moment. Furthermore, based on statistics from The Children's Society. Due to school closures, 804,079 students had disruptions in their education between March and September of 2020. This had negative impact on the over 370,000 children who depend on school meals for sustenance. During the COVID-19 lockdown period, an estimated 4,000 female students fell pregnant putting them at risk for HIV and STIs.

Approximately 15,000 children were studying at home, out of an estimated 30,000 children who have not returned to school. During the COVID-19 response, there was a 23 percent rise in gender-based violence instances (2083 cases were recorded from March to September 2020) compared to 1693 cases during the same period in 2019 (UNICEF Namibia country office annual report), 2020.

Social welfare organizations, families' quality of life and communities were all significantly impacted by the Covid-19 pandemic (Banks *et al.*, 2020 and Jungmann & Wilken, 2020). Social workers in Italy faced challenges in executing new tasks and activities during the first lockdown due to the high number of infections and strict government restrictions (Harms *et al.*, 2020 and Truell, 2020). This resulted in a significant reorganization of social services. In order to help individuals in need, they also had to experiment and build up new skills (Cabiati, 2021). For social workers who work in child protection, this rearrangement was much more complicated (Calcaterra & Landi, 2023).

Recent studies have demonstrated stress experiences, emotional exhaustion and burnout among healthcare staff during the COVID-19 pandemic (Mehta *et al.*, 2021 and Nelson & Kaminsky, 2020). Frontline workers' stress levels were exacerbated by challenges in accessing personal protective equipment (PPE) (Nyashanu *et al.*, 2020; Restauri & Sheridan, 2020).

Understanding the difficulties faced by Child Protection Social workers at this critical juncture might help clarify what experts need to do to support the nation's most vulnerable children and families. In addition to this, tackling these issues and demonstrating the fortitude of CPS supervisors and front-line employees can help minimize burnout and ensure the workforce's viability during the COVID-19 epidemic and subsequent crises.

A recent overview of systematic evaluations of studies shows that COVID-19 has had a negative impact on the health and well-being of front-line healthcare personnel. High stress levels, burnout, sadness, anxiety, trouble sleeping and post-traumatic stress disorder (Chirico *et al.*, 2021) are some of these repercussions (Chirico *et al.*, 2021). Along with high levels of emotional and mental health problems like grief and secondary trauma, social workers also reported large levels of stress and burnout during this time, according to findings from Dima *et al.* (2021) and (Holmes *et al.*, 2021). They also did not practice self-care as much as they did before the pandemic (Miller & Reddin Cassar, 2021). This increases their vulnerability to stress and burnout.

The COVID-19 epidemic has posed unique problems for the social services workforce, particularly with regard to securely providing services for children, families and diverse communities (Ezra and Hamama-Raz, 2020). According to Brown (2020), social workers put up a lot of effort during COVID-19 to ensure that infected individuals had access to the resources they required, provided remote counseling, and devised plans for overcoming isolation. Moreover, they ensured inclusive planning initiatives, contacted groups to support preparedness, sought to dispel myths and worries, and convinced governments to increase financing (Brown, 2020). Due to the COVID-19 pandemic, social workers were required to cope with exceptionally difficult job demands in addition to needing to swiftly adapt their practices and procedures. As a matter of fact, COVID-19 also required other caregivers to adapt to new situations (Pontieri-Lewis, 2020). However, there were no standardized policies or procedures pertaining to workplace safety for social workers,

nor were there any instruments available for their use at home. Healthcare experts can provide home-based counseling on morality in decision-making, as well as necessary and non-necessary duties (Ezra and Hamama-Raz, 2020).

## 1.1 Problem Statement

The dynamics of the pandemic and its immediate and long-term repercussions directly affects children (Nyahunda and Tirivangasi, 2021). This was evident in the nationwide lockdowns that were put in place, these lockdowns resulted in school closure. This had an adverse effect on many children which include exposure to violence, learning disruptions, heightened rates of poverty, an increase in child labor, an increase in child marriages and an increase in delinquent behavior (Dziva, 2020). Some children relied on school feeding programs for them to be able to receive appropriate meals each day but due to the fact that schools were closed during the pandemic, their nutrition was negatively impacted. The closure of schools also meant that lessons had to be conducted online to avoid face to face contact with between teachers and children. However as much as this seemed to be an advantage, it was a disadvantage for those children that did not have access to internet services. Social workers also faced some problems during the pandemic, for instance in terms of accessing personal protective equipment which seemed to always be in shortage. They also faced a disruption in service delivery meaning they had to adapt to delivering their services online instead of face to face, which was a challenge.

## 1.2 Research Objectives

The research study tried to investigate both general objectives and specific objectives which helped to determine the effects of covid-19 on children and social workers in Windhoek, Namibia.

### 1.2.1 General Objective

- To investigate the effects of covid-19 on children and social workers in Windhoek, Namibia.

### 1.2.2 Specific Objectives

1. To assess the challenges faced by children as a result of the effects of covid-19.
2. To explore the challenges that social workers faced during the covid-19 at community level.
3. To establish the techniques social workers implemented to reduce the effects of the pandemic.

## 1.3 Research Questions

1. What were the challenges faced by children in Windhoek as a result of the effects of COVID- 19?
2. What challenges did social workers face during the COVID-19?
3. What techniques did social workers implement to reduce the effects of COVID-19?

## 2.0 Literature Review

### 2.1 Challenges that were Faced by Children in Windhoek as a Result of the Effects of COVID-19

Lockdowns occurred in many different countries. According to a recent review, closing schools could not have a major impact on preventing fatalities or reducing infection rates. Nevertheless, potential negative effects including missed class time, a diminished ability to interact with peers and a loss of daily structure need to be taken into account. Additionally, in certain places, stigmatization of impacted children and families may occur (Ferget *et al.*, 2020).

Over 1.6 billion children suffered some kind of educational loss and at least 463 million children were unable to access remote learning, according to UNICEF's 2021 State of the World's Children report. These closures could have a catastrophic effect on children's wellbeing because schools play such an important role in their daily lives (Letzel *et al.*, 2020). According to (Bartholet, 2020; Cardoso *et al.*, 2019), schools serve as their main source of hot meals, a refuge from abuse and neglect at home, or a location where children can go for support. Consequently, studies have demonstrated the negative effects of social isolation, school closures and limited engagement and communication with school staff on COVID-19. Furthermore, other studies have consistently linked a decrease in CM (child maltreatment) complaints to school closings with informants from educational systems reporting the largest fall (Baron *et al.*, 2020).

Children's poor mental health is already known to be associated with low socioeconomic position; the recent recession has just made this relationship worse. Relationships between parents and children are significantly impacted by parental substance abuse and mental illness, which also increases the likelihood that children may experience mental health problems (Ferget *et al.*, 2020). In addition, there is a discernible increase in domestic violence during recessions. Experiences of financial stress brought on by income loss and other financial troubles can lead to divorce. Stress levels rose during quarantine when privacy and freedom were restricted. It may exacerbate the offenders' current controlling tendencies as they attempt to regain control. Exposure to domestic violence negatively affects children's mental health and may have long-term consequences. Additionally, there has been proof of a noticeable increase in sexualized, mistreatment of children during recessions, both physical and emotional. The restricted control of society and the current lack of access to child protection organizations present additional challenges. Ferget *et al.*, (2020) stated that another greater risk associated with quarantines is the possibility of sexual exploitation over the internet. Since the epidemic began, children and teenagers have used the internet more frequently, which may increase the likelihood that they will come into touch with online predators. Due to less social interactions, children are reaching out to new people and groups online. The increased number of people living alone at home may lead to an increase in the demand for pornography. Europol has received more reports of child pornography since the outbreak began. The pandemic's effects could have an impact on every child. However, a number of indicators point to the fact that children who are already on the margins are more susceptible. First, financial losses will pressure low-income families' finances more because they don't have enough reserves. Secondly, due to differences in parental support for leisure activities and homeschooling during the pandemic, there may be an increase in the disparities between families belonging to high and low socioeconomic classes. Certain modalities, such as telemedicine and telepsychiatry, are less accessible to children from low-income households because they may not have the means to use telepsychiatry or to do so in a quiet, secure setting (Ferget *et al.*, 2020).

Given that teenagers are the most likely to self-harm, it's plausible that the COVID-19 pandemic has contributed to an increase in suicide attempts and self-harm among young people. This is an issue that needs to be addressed immediately. Since many people already have pre-existing mental health issues, it is expected that the COVID-19 pandemic will make them worse and cause new stress-related

conditions to arise in many of them, especially in children and adolescents whose pre-existing vulnerabilities would be made worse by the pandemic.

## 2.2 Challenges were Faced by Social Workers During the COVID-19 Pandemic

In some areas, front-line non-medical staff, such as social workers, may have found themselves working in unstable jobs due to a lack of essential worker classification during a period of variable human resource distribution (Banks *et al.*, 2020). Banks *et al.* (2020) state that social workers have been forced to prioritize their clients' increasingly complex requirements while operating on a tight budget, as well as strike a balance between policy and client requests. Social workers claim that the pandemic is made it harder for them to handle a range of social justice issues, satisfy client requirements and keep daily work schedules (Banks *et al.*, 2020). Social workers and other front-line practitioners were at risk for burnout as a result of the high client requirements, high demands and revolutionary changes in practice brought about by the COVID-19 epidemic (Bohman *et al.*, 2017).

Due to their already excessive workloads and severe staffing shortages in the majority of social agencies, social workers in Israel faced substantial obstacles in managing the COVID-19 pandemic (Gal, 2020). Moreover, Israel was going through a serious constitutional crisis even prior to the epidemic, which affected the way the health crisis was handled and had far-reaching effects.

Regarding social welfare, Israel was caught off guard by the COVID-19 pandemic due to a significant proportion of the population living in poverty, a meager cash transfer social protection system, a disproportionate reliance on non-governmental service providers, and inadequate funding and staffing for social services.

In general, the government implemented severe social distancing measures, closed schools, halted travel by plane, enforced curfews and lockdowns and all but shut down the economy in response to the COVID-19 epidemic that struck Israel in February 2020 (Maor *et al.*, 2020). According to emergency regulations enacted by the government on March 22, social workers are essential service providers during the COVID-19 pandemic. Unlike other employees, they provide professional ongoing assistance in addition to addressing emotional and practical needs resulting from the pandemic.

In many African countries, it may be truly impossible to obtain the resources required to support the effective and efficient activities that must be taken to address patients' problems in the healthcare settings (Dako-Gyekye & Kofie, 2017). This means that medical social workers may not have the resources or money needed to assess psychosocial requirements of patients, monitor case management issues, or deal with the social consequences of chronic illnesses in the setting of the pandemic. Social workers during the COVID-19 pandemic seemed to be under pressure to fulfill deadlines connected to their jobs and to swiftly adjust their procedures and guidelines to adhere to the pandemic's restrictions.

Social workers struggled to balance their personal and professional lives during the COVID-19 pandemic (Hopkins & Pedwell, 2021). According to Williamson *et al.*, (2020), front line staff members were forced to jeopardize their health during the pandemic in order to meet the needs of clients who were becoming more complex, and some of them had to forego their family responsibilities. Mishna *et al.*, (2021) claim that during the COVID-19 pandemic, some clients called social workers after hours in an attempt to get

assistance, crossing boundaries and making it challenging for social workers to manage their personal and professional lives. It should be noted that the behavior of their clients allowed social workers' families to function more effectively. According to Ross *et al.*, (2021), social workers were under pressure from the COVID-19 pandemic to balance their personal and professional life by responding to the immediate and severe demands of their clients and their families.

### 2.3 Techniques that were Implemented by Social Workers to Reduce the Effects of COVID-19

Beyond halting the COVID-19 virus from spreading, social workers' responsibilities also include ensuring that the most vulnerable are included in planning and responding. Communities were organized through campaigns and orientation programs to guarantee the availability of basic necessities like food and clean water, to support the social inclusion of the most vulnerable into the social service system, and to promote physical distance and social solidarity International Federation of Social Works (IFSW), 2020).

According to recent studies, social work is essential in the fight against the COVID-19 pandemic (Walter-McCabe, 2020). Medical social workers have participated in pandemic-related policy decisions and the social facets of health in addition to practicing at the micro, meso and macro levels (Truell, 2020). They possess the skills and expertise required to combat the COVID-19 epidemic, including crisis management, advanced care planning, case management, problem solving, and policy development (Bern-Klug &Beaulieu, 2020; Walter-McCabe (2020). Medical social workers have established clinics, hospitals, mental health institutions, and assisted living facilities throughout the pandemic by lending their expertise.

In addition, the high proportion of poverty in many parts of the continent makes it difficult for many Africans to afford their hospital stays (Beegle *et al.*, 2016 & Chitereka, 2010). In addition to having a detrimental effect on other sources of healthcare finance and government and donor support, the COVID-19 pandemic has also affected how healthcare is generally provided in several countries (Abor and Abor, 2020). Medical social workers provide psychological needs assessments to patients during pandemics and offer opportunities to waive medical costs for disadvantaged patients. In addition, they have been looking into and handling incidents of domestic and child abuse, which can lead to health issues during a pandemic.

Creating social change and enabling people thru it is one of the social work profession's primary duties. In order to uphold the sanctity of life, it also depends on the concepts of social justice and human rights (Amadasun, 2020). These responsibilities enable medical social workers to assume more proactive roles in empowering COVID-19 impacted persons and communities. They link patients with resources and services in clinics and assisted living facilities, while also offering the best healthcare available. Other responsibilities to stop the COVID-19 virus from spreading are public education, making sure vulnerable populations are considered in the development and execution of social service programs, and providing communities with access to basic resources like food and clean water (International Federation of Social Works (IFSW, 2020). Medical social workers spread knowledge about the stigma, discrimination, and misinformation surrounding the COVID-19 pandemic, despite the fact that many people have differing beliefs about the pandemic's causes and treatments (Tabong and Segtub, 2021).

### 2.4 Research Gap

A number of studies have been conducted in relation to the topic, but they have been conducted in other Western or African countries that are not Namibia specifically. Therefore this research study aimed to discover the effects of covid-19 on children and the role of social workers in Windhoek. Completion of this research study will add on to the body of knowledge in Windhoek, as little to none research has been conducted on this topic. Therefore this is a huge gap that exists.

## 3.0 Research Methodology

### 3.1 Research Design

As noted by (Kothari, 2014), a research design is a master plan of methods and procedures used to collect and analyze data needed for decision making purposes. A case study research design was used in the investigation. According to Coombs (2022), a case study is a methodical research strategy that is utilized to create modern circumstances or phenomena within a constrained system. To gain an understanding of a case study, a comprehensive evaluation of a person, a group, or even a real-life event is required. One of the most popular and widely accepted qualitative research techniques in the social sciences is the case study (Bloomberg and Volpe, 2022). The case study method is particularly useful for researching a single group of individuals inside a closed system (Yin, 2017). In actuality, the main goal of the current study was to gather viewpoints, ideas, and insights regarding the impact of COVID-19 on social workers and children in Windhoek, Namibia.

### 3.2 Population of the Study

The purposive sampling technique was used in this research study because the population is already known. The study included 20 children from specific Windhoek schools, 10 child protection social workers from the Ministry of Health and Social Services and additional key informants from the Namibia Social Workers Association and the Health Professions Councils of Namibia.

### 3.3 Data Collection Tools

Data for the study will be gathered through in-depth interviews. The selection of this data collection approach was based on its ability to gather qualitative data, which is crucial for this particular project. The researcher can also offer open-ended questions during in-depth interviews; these questions typically have blank spaces where respondents can share their thoughts (Hancock *et al.*, 2007).

### 3.4 Data Analysis Tools

A theme analysis that is both interpretive and descriptive was applied to the responses. According to Woods (2011), thematic analysis is a technique for examining and categorizing qualitative data. When a researcher employs theme analysis to present facts in a coherent and methodical manner, the audience can understand the idea (Elliott and Timulak, 2005). With this strategy, it was possible to show how data categories can be utilized to support the main conclusions of the study, which are found in the overarching themes (Hancock *et al.*).

## 4.0 Demographic Data

The study categorized the respondents based on sex, age and education level of children. For social workers the data was based on number of years practising as a social worker, sex,

age and highest level of education. Children who participated in the study were aged 12 to 18. Social workers who participated in the study were aged 28 to 50 years.

#### 4.1 Data Analysis and Discussions

- The study found that lockdowns and other restrictions caused many schools to close for protracted periods of time, interfering with children's education all across the nation.
- This is consistent with (Hoofman and Secord, 2021), who claimed that early social development and the formation of many children's social relationships take place at school.
- The study indicated that since schools were closed during the pandemic, some children in Windhoek were unable to receive the main meals they were accustomed to receiving from school. These children depend on school feeding programs to provide them with the nutrients they need for their health.
- This is consistent with research from (Hoofman and Secord, 2021), which found that when schools go virtual, students from lower socioeconomic classes are disproportionately impacted by the loss of school-based meals and health services.
- Performing in-person house visits and face-to-face interventions was challenging for social workers because to lockdowns, movement restrictions, and the requirement for social distancing.
- In this study, social workers faced challenges because to the risks associated with COVID-19 infection, especially those who were members of the minority performing in-person interactions with service consumers. This is the situation that social workers in our study were forced to confront with the idea that they too posed a risk to service users.

#### Conclusion

Based on the study findings, the researcher draws the following conclusions:

- Children's struggles during the COVID-19 epidemic included food insecurity, disruptions in their educational opportunities, and a rise in online aggression.
- Children's education was disrupted because face-to-face instruction was made impossible by COVID restrictions.
- As a result, children had to learn online, which led to inequality because not all children had access to data or WIFI services, which would have allowed them to consistently attend their online classes.
- Social workers in Windhoek claim that in order to lessen the difficulties they were experiencing, they had to come up with coping mechanisms. Some of these mechanisms include shifting to remote service delivery, giving priority to important interventions, and speaking up for vulnerable groups.
- The government may enhance education resilience, build community resilience, and bolster public health infrastructure in the future to solve the issues Namibia faced as a nation.

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