



**REPUBLIC OF KENYA  
MINISTRY OF EDUCATION**

**STATE DEPARTMENT FOR EARLY LEARNING AND BASIC  
EDUCATION**

**CONCEPT NOTE FOR SUPPORT ON PREPAREDNESS AND RESPONSE  
TO COVID-19**

**24<sup>TH</sup> MARCH 2020**

Kenya confirmed its first case of COVID-19 on the 13<sup>th</sup> of March 2020 and a total of four cases had been confirmed by 17<sup>th</sup> March 2020. In the wake of this news, all schools and colleges were closed from the 16<sup>th</sup> to 20<sup>th</sup> of March 2020 for an unspecified period. By 24<sup>th</sup> March 2020, the number of infected people in Kenya had risen to sixteen (16) with over 300 people having been in contact with the latest eight infected persons.

The Education sector through the Ministry of Education is leading response and recovery efforts to ensure continued access to education for all children in the country while they are at home.

School closures during a pandemic such as the COVID-19- even when temporary - carry high social and economic costs. The disruptions they cause touch people across communities, but their impact is particularly severe for disadvantaged boys and girls and their families.

Some of the reasons why school closures are so harmful are listed below. While the list is far from comprehensive, it helps clarify why school closures should matter to all of us- and should happen- only when the situation demands.

- **Interrupted learning:** Schooling provides essential learning and when schools close, children and youth are deprived opportunities for growth and development. The disadvantages are disproportionate for under-privileged learners who tend to have fewer educational opportunities beyond school.
- **Nutrition:** Many children in ASALs, urban slums and pockets of poverty in Kenya rely on school meals provided by MoE and partners. When school's close nutrition is comprised.

- **Parents unprepared for distance and home schooling:** When school's close parents are often asked to facilitate the learning of children at home and can struggle to perform this task. This is especially true for parents with limited education and resources.
- **Unequal access to digital learning portals:** Lack of access to technology or good internet connectivity is an obstacle to continued learning, especially for students from disadvantaged families.
- **Gaps in childcare:** In the absence of alternative options, working parents often leave children alone when schools close and this can lead to risky behaviors, including increased influence of peer pressure and substance abuse.
- **High economic costs:** Working parents are more likely to miss work when schools close in order to take care of their children, incurring wage loss in many instances and negatively impacting productivity.
- **Unintended strain on health-care system:** Women often represent a large share of health-care workers and often cannot attend work because of childcare obligations that result from school closures. This means that many medical professionals are not at the facilities where they are most needed during a health crisis.
- **Increased pressure on schools and school systems that remain open:** Localized school closures place burdens on schools as parents and officials redirect children to schools that are open.
- **Dropout rates tend to rise:** It is a challenge to ensure children and youth return and stay in school when schools reopen after closures. This is especially true of protracted closures.
- **Social isolation:** Schools are hubs of social activity and human interaction. When schools are closed, many children and youth miss out of on social contact that is essential to learning and development.

With schools closed in Kenya and children at home, it is important that there is seamless learning to ensure that children do not lose out on essential learning times that could have an impact on developmental milestones of children. In the ongoing crisis, continued access of learners to education opportunities can contribute to;

- ✓ Reducing the spread of the virus through community sensitization through children as a medium of transfer of information
- ✓ Preserving stability, social cohesion and reducing stigma that could lead to panic
- ✓ Building capacity to prepare for future outbreaks through system strengthening and capacity building of relevant stakeholders
- ✓ Community sensitization through children on preparedness and mitigation of impact on children and their access to education



## Proposed Interventions

To ensure that children learn in the midst of the ongoing global health crisis; the MoE calls for support from Partners in the humanitarian and private sector as well as other distinguished stakeholders to support in the response. The following are the ways in which partners can contribute to reducing the impacts of the pandemic to access to quality education in Kenya. During emergency while schools remain closed;

- a) Support KICD in the airing of daily radio shows to reach 15,000,000 children across the country and building KICD's capacity in transmitting extra digital content to learners
- b) Support local FM stations to air additional content for learners
- c) Sensitizing the community on the KICD Radio timetable for 2020 through various forms of communication channels including public announcements in newspapers, radio programmes and TV shows, community announcement boards, and mobile network platforms such as the existing networks of head teachers and teachers through KEPSHA, KESSHA, KEPSA and COG for ECD centers. WhatsApp groups of teachers in refugee hosting schools and APBET institutions.
- d) Support provision and coverage of diverse online and offline learning avenues to compliment the KICD daily radio programmes including review and update of existing programme as well as creation of new programme inclusive of the needs-based and targeted modules for to teachers in order to support their e-teaching and e-classroom-management.
- e) Making use of local FM stations to disseminate critical sanitation and hygiene messages directed to children through children and during children's airtime (time in which children's programs are aired), as children can be powerful agent for promoting healthy hygiene practices and the importance of collective behavioral change in their communities
- f) Support coordination, monitoring and evaluation of the EiE response during the active phase of the emergency.


When schools resume, there will be a critical phase in which return to normalcy will be dependent on the interventions laid down at the recovery phase. The following interventions are proposed;

- a) Back to school campaign and community outreach to ensure that no child is being dropped out of school due to COVID-19 emergency;
- b) strengthening prevention efforts and/or reducing future effect of similar or related outbreak by providing training to teachers on school hygiene practices; and

- c) Possibly develop curriculum support materials to incorporate the COVID-19 emergency experiences as part of the selected relevant topics. Examples of age-appropriate education may include as follows:
- Pre-primary/early learning: simple quiz of good health behaviors, handwashing and use of sanitizer while singing songs, creating own songs for handwashing, use of puppets and dolls for demonstrating the sickness; (ii) Primary education: role play, basic health and hygiene education in daily living; (iii) Secondary education: Science for knowledge about viruses/communicable diseases etc., Social Studies on the history of pandemics, and Media Study on communication channels for spreading the accurate messages.
- d) Provision and improvement of WASH facilities including handwashing, latrines and water tanks to improve sanitation and hygiene in selected schools across major urban areas and in the refugee response operations.

To ensure a coordinated response, the MoE will lead all response and recovery interventions across the country. The EiE Working Group will coordinate with the WASH and Child Protection sectors to ensure a holistic reach and leverage on gains made.

The proposed budget is attached in a separate document.

  
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