



Key messages and guidance to prevent and respond to COVID-19 for:

- Children
- Parents/Caregivers
- Communities
- Residential care facilities

May 2020

Changing
THE WAY WE
care



Introduction

The following are key messages including critical information about keeping children safe and healthy during the pandemic. Furthermore, the content addresses the psychosocial concerns and increased child protection risks that can occur as a result of measures put in place to prevent the spread and negative impact of COVID-19. The messages are designed for use by country child protection actors, such as public child protection officers, directors of residential care facilities¹ and government and civil society actors that work with vulnerable children and families. The information included herein should guide targeting of activities and services for vulnerable children and families. These messages have been informed by existing guidance provided by the World Health Organization, UNICEF, and others, and were originally drafted by an inter-agency Technical Working Group convened by the National Council for Children's Services and UNICEF in Kenya. The content is framed by applicable international standards, including the Convention on the Rights of the Child, the Convention on the Rights of Persons with Disabilities, the Guidelines for the Alternative Care of Children and the 2019 Child Protection Minimum Standards.

The guidance is designed to inform child protection actors and includes information targeting the following groups:

- Children: Key messages about COVID-19
- Parents and other caregivers: Key messages about COVID-19 and preventing violence in the home and promoting online safety
- Special Audiences: Key messages about COVID-19 for those working or caring for:
 - Children with disabilities
 - Children in residential care facilities; and
 - Children who have exited care facilities, including care leavers
- Child protection and care organizations: Programming considerations related to child protection and care during the pandemic.
- Case management practitioners: guidance on virtual monitoring of children and families and

This guidance should be considered **a living document** and will be updated as new information is made available. Please note that for all health-related information, refer to the World Health Organization or your local Ministry of Health.

¹ Such as children's protection homes, "orphanages", residential institutions, charitable children's institutions

Quick Reference

Messages About COVID-19 For Children..... 3

Messages about COVID-19 for Parents/Caregivers..... 4

Parents/Caregivers of Children with Disabilities..... 5

Key Messages to Keep Communities Safe and Healthy during COVID-19..... 6

Key Messages to Adults to Prevent Domestic Violence and Violence Against Children . 7

Key Messages to Adults to Keep Children Safe Online 7

Key Messages to Children on Violence Against Children and Online Safety..... 8

Messages about COVID-19 for Residential Care Facilities..... 9

Guidance for Virtual Monitoring 12

**Program Guidance: preventive and responsive support to children, families and
alternative care providers during COVID-19 13**

Gatekeeping considerations during the COVID-19 pandemic 18

Messages About COVID-19 For Children

Parents, family members, other caregivers, school teachers and other trusted adults can help children to make sense of information about COVID-19 with accurate and honest information, presented in age-appropriate ways to minimize anxiety and fear. The following messages are generally suggested for school-aged children or older. The additional resources suggested at the bottom of the page provide language for younger children. **General principles:**

- Be calm and reassuring – children pick up both spoken and non-spoken or body language.
- Be available for questions and to listen to children’s ideas, questions and concerns.
- Be cautious to avoid language that blames others – viruses can make anyone sick.

What is COVID-19?

- COVID-19 is the short name for coronavirus disease. It is an illness caused by a new virus that makes people sick in different ways, like with fever, cough or having a hard time breathing. Most people who have gotten COVID-19 get better but some people have more serious problems.
- Doctors and health experts are working hard to help people stay healthy.
- It is spread from person to person by coughing, sneezing without covering your mouth, and/or touching the skin or other surfaces where the virus is.
- If you feel sick, stay home and tell an adult. They will find where to get health advice.

What can I do to keep myself from healthy and prevent the spread of COVID-19?

There are some important things you **should know and practice** to keep yourself and others healthy.

- Clean your hands with soap and water or alcohol-based sanitizer as often as possible. Wash for at least 20 seconds. Follow these five steps—wet, lather (make bubbles), scrub (rub together), rinse and dry. Sing the “Happy Birthday” song twice to know how long you should wash.
- Stay inside your home as much as possible. You can open the windows for fresh air but avoid contact with anyone outside of those you live with.
- Show good practices to younger family members, such as washing your hands and sneezing or coughing into your elbow.
- Talk about your feelings. Being worried or feeling afraid is normal. Find someone you trust and talk about it. There is no right or wrong way to feel but talking about it can help you feel better.
- It is safe to play with your siblings, read books, sing, dance, pray, talk to your friends from a distance and play indoor games with your family. Be creative. Do not fight with or be violent with others in your family.
- Avoid getting close to any person who is coughing or has a fever. Let a trusted adult know if you think someone around you is sick.
- There is a lot of information about COVID-19 but not all of it is true. Discuss information you hear or read with a parent or caregiver.
- If you have access to a phone, WhatsApp or the internet be careful about what you view. Always make sure that your parents or caregiver approve how you use the internet. Do not chat with strangers and never give out your name or address.
- Avoid crowded places like school, market, religious services or sporting events, including playing outside with other children because it is hard to know who might be sick and coronavirus can easily be spread in groups.



Additional resources:

1. Link to My Hero is You, a children's book on COVID-19 developed by War Child: <https://interagencystandingcommittee.org/iasc-reference-group-mental-health-and-psychosocial-support-emergency-settings/my-hero-you>
2. WHO Tips for talking to children: https://www.who.int/docs/default-source/coronaviruse/healthy-parenting/english-tip-6-covid-19-parenting.pdf?sfvrsn=232558c1_8
3. Talking to Children about COVID-19 by Centers for Disease Control: <https://www.cdc.gov/coronavirus/2019-ncov/daily-life-coping/talking-with-children.html>

Messages about COVID-19 for Parents/Caregivers

There are some very important information that all parents or caregivers should understand and behavior they should practice to keep family members healthy and safe during the crisis caused by COVID-19.

- Coronavirus disease, also referred to as COVID-19, is an illness caused by a virus that affects people's breathing and lungs.
- Know the facts and follow instructions from your **Ministry of Health** or the [World Health Organization](#) about how to prevent the spread COVID-19. You should also know what to do if someone falls ill.
- Teach and model good hygiene practices for your children and other family members. Wash your hands with soap and running water frequently. If soap and running water are not readily available, use an alcohol-based hand sanitizer with at least 60% alcohol. Follow UNICEF's handwashing guidance [here](#).
- Have contact information of your community leaders, health professionals and emergency services like the police and/or existing helplines. Know where to seek help if needed.
- If you have to keep children inside the house guide the children to indoor games or activities to keep them occupied. Create time to play, read, pray or sing together as a family! This is a good way to reduce stress and anxiety.
- Be aware of any changes in your child's emotional behavior. Encourage your child to ask questions and express their feelings with you. Remember that your child may have different reactions to stress; be patient and understanding.
- To help explain COVID-19 and address anxiety or other emotions that children might feel, parents can access this useful story [My Hero is You](#).
- Young children who are not yet able to speak (particularly in the 0-2 age group) also notice and are affected by the stress and anxiety that family members are feeling. Very young children are particularly vulnerable in situations of crisis. Make sure to spend time with them and reassure them of your support.
- Being inside the house with children all day can be stressful. However, be mindful of your own behavior. Step away, take a deep breath and give yourself a few moments to calm down if you get tense or feel angry. Never use violence against children.
- Model behaviors you would like to see in your children. When necessary, teach children right from wrong with calm words without resorting to harsh discipline methods. You can access free information on parenting in [English](#) and in other languages [here](#).
- Make good choices about where you get your information. If you have questions, please reach out to your local health facility. You can also visit the following website for up to date information: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019>
- Be aware of what your child is watching online. Discuss and set rules about use of the phone, TV and internet. Always closely monitor and supervise your child's access to internet and phone to ensure that it is safe and appropriate.

- If you have concerns about or know of a child in a violent or other call the police, [Child Helpline](#) or reach out to a community leader for help.
- Do not be afraid to ask for help if you feel sick. Do so immediately. Contact your health facility or a neighbor.
- If you have to leave the home for work or for an extended period of time, be sure that your child(ren) are cared for by a trusted adult. When you come home you must wash your hands and change your clothes before engaging with your family.
- Have a plan in place in case you or a family member gets sick. Make sure that you have identified a person who will take care of the child in the event that you cannot.
- Ask for help if you feel that you are unsafe, or your children are in danger, but do not place children in an orphanage. Contact a Child Protection Volunteer, Community Health Volunteer or a Child Protection Officer if you are worried about caring for your child.

Additional parent/caregiver guidance and messaging from Parenting for Lifelong Health, WHO, UNICEF, CDC and partners: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/advice-for-public/healthy-parenting>

Parents/Caregivers of Children with Disabilities

- Be sure to explain, in whatever way is most appropriate for your child, how and when they should wash their hands. If they cannot do it by themselves, support them in doing it.
- Explain to your child the importance of not touching their face.
- Show your child new ways to greet others. Calmly explain to your child the importance of avoiding hugs, handshakes, and other close contact.
- Teach your child how to cover their coughs and sneeze into their elbow, if they're physically able.
- Pictures, drawings, video, games and songs can help teach your child these new protective behaviors. Ask your [community health volunteer? Case worker? Local DPOs] for resources that address your child's communication needs.
- Adhere to all the same rules for your child with disabilities that you would for other children. Keep them inside the home and do not allow them to attend public events or crowded locations like school, markets, religious ceremonies or sporting events, unless official health recommendations suggest otherwise. In contexts where there are curfews in place, orders to wear masks and social distancing requirements, it is advised that children with disabilities, especially intellectual disabilities not be allowed to go outside without alone as they might not understand the rules and regulations and unknowingly break them putting themselves and others at risk.
- Certain conditions make children with disabilities more vulnerable to coronavirus disease. Extra precautions should be taken to protect them.
- Do not permit your child to play outside with other children. Instead, find creative and appropriate ways to engage the child, to his or her ability, in indoor games and play activities to keep them occupied. Create time to play, read, pray or sing together as a family. This will help put them at ease.
- Your child might be feeling anxious but not be able to express it. Be attentive to their reactions, moods or emotional behavior. Try to reassure and calm them. Be extra patient with them.
- Have a plan in place in case you or a family member gets sick. Make sure that you have identified a person who will take care of the child in the event that you cannot.
- Be aware that your child might require continued health and other services during this time. Be sure to discuss and create a plan with the health and other relevant care provider. Ask to be taught how you can continue physiotherapy sessions with your child at home, as applicable.
- Have the name and number of a Community Health Volunteer, Child Protection Worker, Police or other community leader printed and accessible in case you need to reach them.

- This can be a very emotional time for everyone but especially as a parent of a child with disabilities. Make sure that you have someone to speak to or ask for help. Ask your Community Health Worker or Child Protection Worker about available hotlines for tele-support.
- Do not hesitate to reach out to a family member, friend or community support person if you need to talk or if you need a temporary break from caregiving. However, be sure that those that do engage with your child are taking all recommended precautions to prevent the spread of coronavirus including proper handwashing before and after engaging with the child and coughing or sneezing into the elbow. To minimize the possibility of exposure to the virus it is strongly recommended that any person that is invited into the home to care for the child be known to the family and be practicing proper social distancing.
- If you are part of a network of parents of children with disabilities, keep in touch with them via phone or WhatsApp. You can provide remote emotional support to one another during this very difficult time.

Additional resources:

1. For practitioners working with children and families living with a disability, the following link has useful disability-specific information including sign language resources or support to children with autism. It is recommended that the material be reviewed by the practitioner and then shared as needed with the family or caregiver. The International Disability and Development Consortium repository on disability inclusion and COVID-19: <https://docs.google.com/document/d/1IVP1u6yHfLuN9qNyLEct5-vtCOaqLkKr-o-faAjves/edit#>
2. Risk Communication and Community Engagement for COVID-19 – Engaging with Children and Adults with Disabilities: https://www.unicef.org/disabilities/files/COVID-19_engagement_children_and_adults_with_disabilities_final.pdf
3. COVID-19 response: Considerations for Children and Adults with Disabilities: https://www.unicef.org/disabilities/files/COVID-19_response_considerations_for_people_with_disabilities_190320.pdf

Key Messages to Keep Communities Safe and Healthy during COVID-19

- Get the facts about how to prevent the spread of coronavirus from the Ministry of Health or World Health Organization. See here for useful information from WHO: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019>
<https://www.who.int/emergencies/diseases/novel-coronavirus-2019/advice-for-public/myth-busters>
- Follow your Government guidelines on handwashing, social distancing and any quarantine measures.
- Anyone can catch coronavirus disease. Do not stigmatize or discriminate. To prevent and address any social stigma related to COVID-19 please see this document: <https://www.who.int/who-documents-detail/a-guide-to-preventing-and-addressing-social-stigma-associated-with-covid-19>
- It is normal and expected to feel sad, distressed, worried, confused, scared or angry during a crisis. But it is not OK to treat others poorly or use violence against anyone.
- Talk to people you trust. If you feel overwhelmed or afraid, call or text a Community Health Volunteer, Psychosocial Volunteer, Child Protection Volunteer, religious leader, friend or neighbor. Many governments have established hotlines for COVID-19 information. They are free of charge.
- Don't use tobacco, alcohol or other drugs to cope with your emotions. Instead, talk to friends, members of your religious community or community leaders. Doing exercises such as stretching in the house, walking running will also help you deal with your emotions.
- Make a plan with your family about where to go and seek help for physical and emotion health, if required. Have contact information for local health facility readily accessible for all family members.

- For additional information about how to address the mental health and psychosocial issues that COVID-19 is having on community members please see this useful resource from the WHO. Versions are available in multiple languages: <https://www.who.int/publications-detail/WHO-2019-nCoV-MentalHealth-2020.1>
- These additional resources also contain helpful information about promoting positive mental health and psychosocial wellbeing during the pandemic.
 - Mental Health and Psychosocial Support Network. [MHPSS COVID-19 Toolkit](#).
 - Centre for Disease Control. [Stress and Coping](#).

Key Messages to Adults to Prevent Domestic Violence and Violence Against Children

The current situation has put additional stress on families. Loss of income, closure of schools and fear of getting sick can all lead to an extraordinary amount of fear, frustration and anger. However, during these times, it is especially important that as adults, we manage our emotions and take active steps to control our reactions.

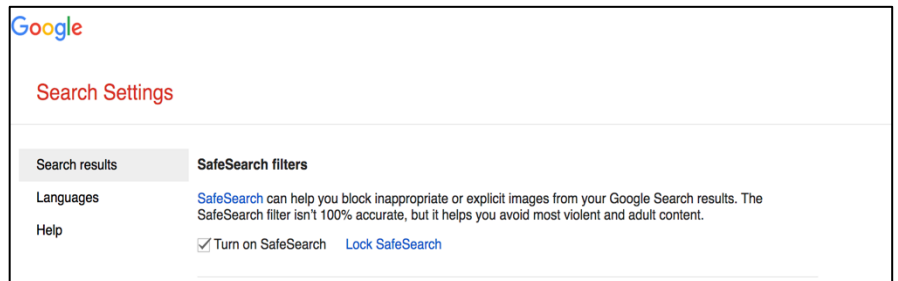
- Violence is never ok! Even when we are facing stress and pressure, it is not appropriate to take this out in a violent manner on any adult or any child. Ever.
- If you feel you are losing your temper, remove yourself from the situation – even if it is difficult to do so in a small shared space, if you feel that you are going to get angry with someone else walk away. If possible, go outside, listen to music, pray or do something to calm yourself down.
- If you feel that you cannot calm down or fear that you will be violent to another adult or child, call someone for help. Ask a Chief, religious leader, Child Protection Volunteer or a trusted relative or friend for help.
- Learn what actions to take to control your stress and anger. See the World Health Organization positive parenting tips during coronavirus. You can access free information on parenting in [English](#) and [other languages](#).
- To try and avoid stress, anger or frustration during this difficult time, try to talk about any issues, constraints and/ or frustrations as a family. Create routines, house rules and find solutions that will enable all of you to feel safe and get through this difficult time.
- These are very difficult times, but every adult and child has the right to be protected from violence. Being required to stay home does NOT mean that you cannot seek urgent help, advice or support if you are being abused.
- If you are experiencing violence or abuse of any kind or are concerned about violence or abuse in a household you know, please find help. Go to a trusted neighbor, relative, Community Health Volunteer, or the police. You may also call the Child Help Line in your area. See [here](#) for a list of countries and the Child Help Line number. It is free to call.

Key Messages to Adults to Keep Children Safe Online

As children continue to spend time at home during this pandemic, they will live more of their lives online. This makes them more vulnerable to online bullying, abuse and exploitation. Don't let COVID increase violence!

- **Explore together:** Ask your child to show you their favorite websites and apps and what they do on them. Listen, show interest and encourage them to teach you the basics of the site or app.
- **Chat little and often about online safety:** If you're introducing them to new learning websites and apps while school is closed, take the opportunity to talk to them about how to stay safe on these services and in general. Ask if anything ever worries them while they're online. Make sure they know that if they ever feel worried, they can get help by talking to you or another adult they trust.

- **Help your child identify trusted adults who can help them if they are worried:** This includes you and other adults at home, as well as adults from wider family, school or other support services who they are able to contact at this time. Encourage them to draw a picture or write a list of their trusted adults.
- **Be non-judgmental:** Explain that you would never blame them for anything that might happen online, and you will always give them calm, loving support.
- **Supervise their online activity:** Keep the devices your child uses in communal areas of the house such as in the living room or kitchen where an adult is able to supervise. Children of this age should not access the internet unsupervised in private spaces, such as alone in a bedroom or bathroom.
- **Set limits.** Discuss and agree with your child how much time they will be allowed online. Follow through and stick to the agreement.
- **Talk about how their online actions affect others:** If your child is engaging with others online, remind them to consider how someone else might feel before they post or share something. If they are considering sharing a photo/video of somebody else, they should always ask permission first.
- **Use 'SafeSearch':** Most web search engines will have a 'SafeSearch' function, which will allow you to limit the content your child can access whilst online. Look out for the 'Settings' button on your web browser homepage, which is often shaped like a small cog. Once you go to your "Settings" button it should look like the image at right.



Key Messages to Children on Violence Against Children and Online Safety

- If you have concerns about another child experiencing violence or abuse or you are experiencing violence and abuse, please tell someone. If you have access to a phone, call the police or Child Helpline. It is free.
- These are very difficult times, but you and every child have the right to be protected from violence. Being required to stay home does NOT mean that you and other children cannot get urgent help, advice or support if you are experiencing or at risk of experience any kind violence.
- During this time, you might also be online more than usual. It is important that you are aware of potential dangers on the internet. Do not post personal information online such as address, phone number, location or your photos. EVER.
- Be careful of and do not exchange with any person online that you do not know personally. Make sure to tell your parents or another trusted adult if someone you don't know tries to contact you online or something just doesn't feel right.

Additional resources:

1. Online safety activities from Childnet International: <https://www.childnet.com/resources/online-safety-activities-you-can-do-from-home>
2. UNICEF's Internet of Good Things: <https://www.unicef.org/innovation/loGT>

Messages about COVID-19 for Residential Care Facilities

There is important information that you should be aware of and understand to keep you, your staff and children in your care healthy and safe during the crisis. There are important actions **that you must know and practice** to prevent the spread of COVID-19, treat someone who is sick and important protocols to ensure that children who are in your institution or those that exit stay safe and healthy during the pandemic.

- Explain, in a child-friendly and age appropriate way, about COVID-19 (see messages for children, above).
- Ensure all children and staff respect required personal hygiene and provide appropriate supplies for all children and staff:
 1. Wash hands with soap frequently and for at least 20 seconds or use alcohol-based sanitizers.
 2. Cover your nose and mouth with tissue or cough and sneeze into your flexed elbow. Dispose of the tissue appropriately. Wash your hands with soap and running water immediately afterwards.
 3. Avoid physical contact with everyone, such as handshaking, hugging and kissing.
 4. Put signs up next to all basins, behind toilet doors and in other highly visible locations reminding children and staff of rigorous hand washing method.
- Develop and implement protocols for any staff re-entering the institution after having been outside, such as washing, clothing change, etc. Put a sign at the entrance highlighting these protocols, and handwashing point and/or a large alcohol-based sanitizer that must be used before entering.
- Receive all deliveries to the institution at the gate and maintain a social distance of at least 1.5 meters with the other delivery personnel. All items brought into the institution should be disinfected immediately before use.
- No visitors should interact with children. Do not organize any events involving those outside the institution within the institution. However, the pandemic should not impede communication between the child and his or her family members. It is the responsibility of the administration of the residential care facility to facilitate regular contact between the child and his/her family members via telephone, text or other communication platforms.
- Avoid taking the children out of the institution. They should not attend school, religious service, go to the market or sporting events.
- Only essential staff, i.e., those responsible for the physical, emotional and safety needs of children in care, should report to work. If space permits, essential staff should be encouraged to reside in the institution to minimize exposure to the virus.
- Limit the number of people you, your staff and the children interact with. The fewer people you engage with, the less chance there is to be exposed to people who may have the virus.
- Adhere to all the same rules for children with disabilities that you would for other children. Keep them inside the home and do not allow them to attend public events or crowded locations like school, markets, religious ceremonies or sporting events. See messages for Parents/Caregivers of Children with Disabilities, above.
- Certain conditions make children with disabilities more vulnerable to coronavirus disease. Extra precautions should be taken to protect them.
- Be supportive and actively listen to all children under your care during this time of uncertainty. If a child exhibits signs of worry or stress, take time to listen to them. Explore their concern and reassure and comfort them and explain, in a child friendly manner, about what is happening.
- Be aware of any changes in children's emotional behavior. Encourage children to ask questions and express their feelings with you. Remember that each child may have different reactions to stress; be patient and understanding.

- To help explain COVID-19 and address anxiety or other emotions that children might feel, you can access this useful story: [My Hero is You](#).
- Young children who are not yet able to speak (particularly in the 0-2 age group) also notice and are affected by the stress and anxiety that family members are feeling. Very young children are particularly vulnerable in situations of crisis. Make sure to spend time with them and reassure them of your support.
- In case you or a child could benefit from some professional advice about a psychosocial issue, call the Child Helpline.
- Violence is never ok! Even when we are facing stress and pressure, it is not appropriate to take this out in a violent manner on any adult or any child. Ever.

If your children’s institution is sending children home (reunifying) to their families at this time, there are several things that you [must do](#) to ensure that the child’s transition is safe and that the child will remain safe and healthy within the family.

- Talk to children about what is going to happen and ensure that they understand what is happening. If children express safety/security related concerns, take notes and discuss with children officers to seek for alternative options.
- Conduct family assessments using existing documents and case files, and information collected via phone calls, etc. to ascertain the ability of parents/caregivers to ensure the child’s developmental needs are being met after they are released.
- Work closely with the Children’s Officer, Chief, or Child Protection Volunteer or Social Development Officer in the location where the family resides, ideally have them visit the family to check home safety and verify their readiness. These visits should be done with workers properly prepared with personal safety protection.
- Notify parents or caregivers of children **before** the child exits the institution. Work closely with the Children’s Officer, Chief, or Child Protection Volunteer or Social Development Officer in the location of the institution and in the location where the family resides. This can be done via phone, email, text or WhatsApp.
- Document communication that happens with the child, parents/ caregivers and other key actors at the community or county level.
- Prior to children exiting, document all of the following information about each child:
 - full name of child, date of birth, recent photo of the child, address where the child is going (county, village, location, landmarks, GPS), names of family members/caregiver that the child is staying with, relationship of the family members/caregiver to the child, contact information for the child, date of exit from the institution, contact information for the caregiver/parents, name and contact number of the Children’s Officer and Community Health Volunteer and/or Child Protection Volunteer, Psychosocial Volunteer or Social Development Officer in the location where the child is being placed.
- Provide children and their families/caregivers child-friendly messages about COVID-19 as per your government’s or WHO guidelines.
- Households should have access to running water and soap. If they do not, your institution should support or link them to other organizations that can provide.
- Ensure regular follow up with children who have returned to their families, in person if possible and in line with social distancing guidelines, using phone or other virtual means to ascertain if the child’s health, safety and developmental needs are being met. The first phone call should be two days after the reunification and then on a once a week basis. Ensure families have access to food and health care. Work with County Government, Children’s Officers, Social Development Officer, Psychosocial Volunteer, local

organizations and community leaders to identify available support services or address any noted concerns.

- Design and adhere to a monitoring plan, either in person or virtual depending on the local situation and requirements (see example below).

If your institution is sending young people home or arranging independent living in the community, there are key actions that you must do to ensure that the transition is safe, and the young person is able to remain healthy.

- Ensure that the young person has a place to live before they leave the institution.
- Facilitate the young person's transition, ensuring that they have clothing, personal hygiene supplies, and can cover basic needs.
- Link the young person to social support services that target vulnerable populations within the community. This includes food and financial (cash transfer) support services. Link them to the Children's Officer, Social Development Officer, Psychosocial Volunteer, Child Protection Volunteer, Community Health Volunteer and Chief in the area where they will be living.
- Discuss and prepare a virtual monitoring plan that includes talking via phone, email or WhatsApp on a weekly basis.
- Inform the young person about the Child Helpline which offers free counselling, if needed. Look [here](#) to find your country and the number of the Child Helpline.
- Design and use a virtual monitoring plan.
- Depending on the unique circumstances of the case and the desires of the young person, consider delaying the transition until it can be done in a manner that is safe for the young person.

Guidance for Virtual Monitoring

It is important for those working with vulnerable children and families to stay informed about the increased child protection risks that can and do occur during an emergency. Safeguarding procedures should be reviewed to determine responsibilities, reporting and referral pathways in the case of suspected or substantiated child protection violations. At the same time children, families and communities are resilient and can be helped to draw upon their strengths in these times of stress.

Whilst in-person monitoring visits to family homes, alternative care placements or residential care facilities are not possible during times of quarantine, restricted movement and social distancing, it is critical that programs and case workers maintain regular phone or virtual contact with the children and families they have responsibility for.²

- **Conduct COVID-19 awareness raising** via phone or internet with basic messages on signs and symptoms, hygiene measures and social distancing, health referral pathways and hotline numbers.
- **Support caregivers** around emotional wellbeing of children, talking to children about COVID-19, mitigating childhood stress, parenting, continuing school at home, home activities, and scenario planning for families in the event a caregiver falls ill.
- Ensure that children receive **clear, child-friendly, gender-sensitive messages** about COVID-19, including proper handwashing and social distancing.
- **Design and deliver simple messages** to reassure children and to help caregivers appropriately respond to the informational and emotional needs of children.
- **Identify strategies for providing psychosocial support** to children, especially to those under quarantine. See [here](#) for some examples of psychosocial support to children highlighted in Intervention 3 and [here](#) for suggestions for adolescents.
- Before caregivers fall ill, work with them to outline **alternative care solutions** that may be needed if they fall ill, are quarantined, hospitalized or worse.
- Ensure that phone contacts **maintain confidentiality and the families' privacy** by making phone calls away from other adults as much as possible and not using speaker phone.

Sample monitoring plan

Twice weekly phone calls to PARENTS/ CAREGIVERS

- Attain update on status of all family members
- Track case plan actions
- Provide simple guidance on prevention, signs and symptoms, prevention, and emergency numbers
- Assess for and make needed referrals
- Provide basic psychosocial support

Twice weekly phone calls with CHILDREN and ADOLESCENTS (able to converse via phone)

- Attain update on health and well-being status
- Track case plan actions
- Provide child-friendly guidance on preventative measures, maintaining learning
- Provide basic psychosocial support

Twice weekly phone calls to RESIDENTIAL CARE FACILITIES

- Attain updates on entry and exit of children
- Provide adult and child-friendly guidance on preventive measures
- Check in about regular supplies, especially WASH, and educational / recreational supplies
- Assess for child protection issues

Weekly communication with local to national government partners, child protection and other relevant (health, WASH, education, protection, shelter) humanitarian coordination mechanisms, civil society networks and community leaders

- Attain updated on actions they are taking to protect families and children
- Report / follow up any child protection issues
- Review, update and synchronize key messages
- Identify areas in need of additional support
- Identify possible linkages, collaboration opportunities and coordinate efforts

Case file records should be completed for all phone or virtual meetings with families or children

² More on case management at: <http://www.socialserviceworkforce.org/system/files/resource/files/Child-Protection-Case-Management-Guidance-Covid19.pdf>

Program Guidance: preventive and responsive support to children, families and alternative care providers during COVID-19

The COVID-19 pandemic requires that we assess how to best adapt existing or adopt new services and programming to best serve children and families in uncertain times. An ecological framework³ (see image below) can help us understand how COVID-19 might impact the children, families and communities we aim to serve. This framework also serves to help programs adapt, reorganize and prioritize prevention and response activities.

Impact on children and families

Disruptions to families, friendships, daily routines, schooling and the wider community can have negative consequences on children's well-being, development and protection. Measures used to prevent and control the spread of the COVID-19 virus can expose children to protection risks. Home-based, facility-based and zonal-based quarantine and isolation measures, whilst critical to slow the spread of the virus, can also negatively impact children and their families in different ways. It is important for those working with vulnerable children stay informed about the increased safeguarding risks that can and do occur during an emergency and when families, care givers and communities are under stress. See this Interagency [Technical Guidance](#) on child protection during the COVID-19 pandemic.⁴

COVID-19 can quickly change the context in which children live. Quarantine and social distancing measures such as school closures, community center and other service limitations, prohibitions of family visitation to children in alternative care and general restrictions on movement can disrupt children's routines and stress family social supports. It also places new stressors on parents and caregivers who may have to be without childcare or out of work. Children and families who are already vulnerable due to socio-economic exclusion, living in overcrowded settings, or are already separated, are particularly at risk for protection and care disruptions. For example, parents could lose employment which causes both economic and emotional stress; stress can lead to caregivers with less attention for children. With schools closed and children home, tensions within the household can rise sometimes resulting in increased levels of violence, abuse or neglect against children. Furthermore, loss of employment and school closures can also result in children moving to the streets or into work. Some may be sent to live in outside of their communities or families. Finally, spontaneous closure of residential care institutions can result in mass and poorly planned reunifications, often into unprepared families, without monitoring, putting children at great risk for protection violations and re-separation.

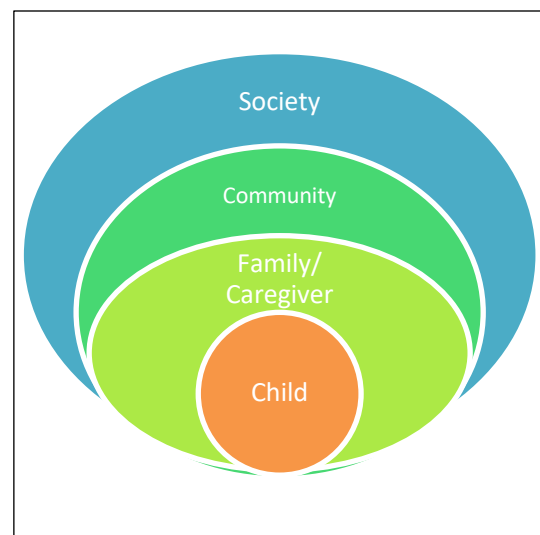


Figure 1: An ecological framework to guide our work

³ An ecological framework is one that represents how different systems affect one another; existence does not occur in a vacuum but in relation to changing circumstances; systems are dynamic and interrelated. More at:

<https://www.oxfordbibliographies.com/view/document/obo-9780195389678/obo-9780195389678-0095.xml>

⁴ The Alliance for Child Protection in Humanitarian Action, Technical Note: Protection of Children during the Coronavirus Pandemic, Version 1, March 2019. <https://alliancecpha.org/en/COVID19>

However, challenging times are also opportunities to recognize the resilience in the children and families with whom we work. Whilst we must acknowledge the additional risks, it is also important to balance it with a concerted effort to recognize, build upon and leverage the strengths of children, families and communities. We must be proactive in helping families to make decisions around their own care and well-being, to access learning and essential services, to implement good hygiene and parenting practices, and find ways to cope within their homes and communities. We must also be intentional about regularly engaging with organizations engaged in and government bodies responsible for child protection and care. Where conditions are changing rapidly and will continue to do so for an unknown period of time it is important to seek ways to collaborate and leverage existing resources to meet the ever-changing needs of the people we serve. We have to be creative in using virtual communication and new ways of communicating and connecting with families and partners.

Taking care of yourself

Self-care is critical to our ability to care for ourselves, our own families and others. There are things that we can do to make sure that we stay physically healthy and emotionally ready to meet the needs of children and families in our programs

- Determine what you need to do to make sure that you are mentally and physically at your best. Do it daily!
- Participate in a webinar or read posts on self-care.
- Make sure that you have a work from home routine that works for you and your family.
- Ensure that you and your family have the information needed to make smart choices, including for children. See [here](#) and [here](#) for simple steps to take for yourself and build resilience.

Program action and adaptation

As programs take rapid action to adapt and design services and activities to both prevent the spread of COVID-19 and respond to the increased risks and challenges associated with the pandemic, the use of an ecological framework can help guide decision-making and prioritization of actions is recommended. We encourage organizational teams to use this framework to help identify what can and should be done at each of the levels: the child, family/caregiver, community and society. Once identified, potential actions in each level can be ranked/prioritized in terms of the timing of the action including immediate/urgent, short term (within days), medium term (over weeks) and long term and the resources (financial, human, technological) needed.

Child level

As a starting point, begin thinking about the individual children you work directly with (as an individual or a program). This includes children living in vulnerable families, in alternative care, as well as children living in residential institutions.

- The uncertainty and changes to routine can result in anxiety and fear for children. Design simple messages to reassure children and to help parents or other caregivers appropriately respond to the informational and emotional needs of children in a positive manner. Identify strategies for providing psychosocial support to children, especially to those under quarantine. See [here](#) for some examples of psychosocial support to children highlighted in Intervention 3 and [here](#) for suggestions for adolescents.
- Ensure that you have child-friendly key messages about COVID-19, including on handwashing, hygiene and social distancing. Make them simple for children to understand. Examples can be found [here](#) and [here](#).
- Provide recreational and learning activities to children during isolation. Examples of activities for children recommended by the CP AOR⁵ can be found [here](#). In addition, the following links provide online learning resources for young children (preschool-Grade 2) using visual images to introduce basic concepts of math, science, social studies, art and health to the youngest learners: [Everyday Learning and PBS KIDS videos, games and activities all about handwashing and staying healthy](#).
- Provide children in residential care with items to support their hygiene, health and wellbeing whilst in care e.g., soap, hand sanitizer, educational materials, recreational supplies like sporting equipment, games or puzzles. This should include the provision of child-friendly hand-washing stations made in close collaboration with Water, Sanitation and Hygiene (WASH) service providers.

⁵ The [Child Protection Area of Responsibility](#) (CP AoR) is specifically focused on enhancing child protection coordination and response in humanitarian contexts (as defined as Humanitarian Coordinator and Early Warning contexts). They have put resources together that they regular update in this [Dropbox folder](#).

- In close collaboration with WASH service providers, develop and conduct child-friendly hygiene promotion activities, including the development of posters and infographics targeting children, parents/caregivers and other carers.
- Make sure that administrators and other staff of residential institutions have materials (e.g., posters) explaining the basics of preventing the spread of COVID-19, including child-friendly messages.
- Caregivers in institutions will be experiencing stress as well, share messages of self-care and caring for mental health.
- Pay special attention to the unique needs and risks of children with disabilities. See [here](#) for guidance.

Child Protection Risks in Emergencies⁶

Separation of children from family: Children can become separated from families and primary caregivers due to death, disability or illness, if one or the other is isolated for quarantine, or the child is abandoned after they have received treatment or have been quarantined. Children are at increased risk of being placed in care, including in residential institutions.

Psychological distress: Children can feel fear of being infected with the disease, and may also be frightened by health or aid workers wearing personal protective gear (including masks), isolation due to school and community closures or quarantine can leave children feeling anxious and lonely, children or their caregivers may be stigmatized if they are infected, or are suspected to be infected with, the disease.

Violence: Household and community quarantine measures can lead to tensions between caregivers and children, resulting in increased parental frustration and corporal punishment, and increased obstacles to reporting physical violence are common. The illness or death of caregiver reduces family protection, family stress and/or reliance on outsiders to transport goods and services to the community, can leave children prey due to reduced supervision.

Child Labor: Loss of household income due to death or illness of caregiver increases the risk of child labor.

Neglect: Children may not receive consistent levels of social and/or cognitive stimulation due to closure of school and other facilities.

Family level

Review and consider the family level including caregiver/ carers in residential and other alternative care. This includes children and families served by our programs. Ask yourselves what you can do for them immediately to keep them healthy, together and able to meet their daily needs in this new context? Examples include:

- Establish virtual monitoring tools and schedules for reintegrated and/or at-risk families of separating (see suggestions in text box, below).
- Regularly communicate with partners to ensure that they align their approach with new restrictions including taking appropriate hygiene and social distancing measures to protect both their staff and children/families.
- Provide hygiene kits to families, especially those with limited access to water and soap and those living in crowded environments.
- Ensure children and families in quarantine/self-isolation have access to adequate food.
- Consider providing food, hygiene or educational supplies to families via grocery vouchers/cash transfers to ensure that vulnerable families stay together and can meet their basic needs.
- The disruption of school and work routines can increase stress and anxiety and result in protection violations against children. To prevent this, design simple messages to share with caregivers about self-care, positive discipline and what to do to minimize stress-filled (including violent) reactions to children's behaviors. See [here](#) for excellent positive parenting resources.
- Ensure that your organization's safeguarding policies are clear and that you know what to report, to whom and how.

⁶ The Alliance for Child Protection in Humanitarian Action, [Guidance Note on the Protection of Children During Infectious Disease Outbreaks](#), 2018.

- Recognizing the elderly are more vulnerable to becoming ill, identify grandparents and other older carers in your program that might be at high risk and ensure they get the support they need and, if they need to be isolated/ quarantined, identify other family members to care for children who were in their care.
- Identify needs and provide targeted support to other particularly vulnerable families and households such as foster families and child headed households.

Community level

Explore options at the community level. This includes reaching out to other organizations, local government institutions and humanitarian coordination mechanisms working in the child protection and children’s care, in health, education and other sectors. Find out what they are doing and try to sync efforts wherever possible – reducing overlap of services can ensure that scarce resources are able to reach more children and families over time. In particular, health-focused organizations and government actors are likely to key messages and develop new initiatives to help reduce spread. It may be possible to leverage the coverage of these initiatives and ‘layer’ other needed services. Communicate regularly. Examples include:

- Map services within the community (existing or new) for vulnerable families. Ask yourself if your program helps families to access these. If not, find ways to link families to services that could benefit them.
- Design simple, concise flyers or job aids for community leaders (chiefs, religious and cultural leaders, child protection volunteers) about the importance of keeping children in families.
- Design key messages to share with frontline health and other emergency response workers about the increased child protection risks to children, including family separation, the importance of facilitating safe and regular communication between children and parents/caregivers who are temporarily separated and provision child-friendly services. Make sure health and other emergency response frontline workers have information about what to do and who to contact if they identify a risk. Make sure that information also includes children or families living with disabilities.

Society level

Finally, look at what can be done at the society level to support large scale information sharing. It is critical to reach out to other organizations, government bodies and networks to see where efforts can be coordinated, and messaging

Considerations for virtual monitoring

Phone calls to PARENTS/ CAREGIVERS

- Attain update on status of all family members
- Track case plan actions
- Provide simple guidance on prevention, signs and symptoms, prevention, and emergency numbers
- Assess for and make needed referrals

Phone calls with CHILDREN and ADOLESCENTS (able to converse via phone)

- Attain update on health and well-being status
- Track case plan actions
- Provide child-friendly guidance on preventative measures, maintaining learning
- Provide basic psychosocial support

Phone calls to RESIDENTIAL CARE FACILITIES

- Attain updates on entry and exit of children
- Check in about regular supplies, especially WASH, and educational / recreational supplies
- Assess for child protection issues
- **Weekly communication** with local and national government partners, child protection and other relevant (health, WASH, education, protection, shelter) humanitarian coordination mechanisms, civil society networks and community leaders

Case file records should be completed for all phone or virtual meetings with families or children

can be standardized. Priority is to support vulnerable families in their ability to stay together and send clear messages about how to protect and keep children and families healthy.

- Make sure that emergency or front-line workers are provided with information about the additional [child protection risks](#) that COVID-19 may create. Be sure to provide information about what to do and who to contact should they identify at-risk children. Make sure that child protection is represented on working groups with other sectors.
- Ensure that existing residential care facilities' minimum standards of care are not reduced due to COVID-19; support to children and caregivers highlighted in the previous sections is in place; remote communication between children and families is facilitated during any period of isolation / quarantine; gatekeeping mechanisms are strengthened to ensure children are not placed by default due to COVID-19 instead of strengthening and preserving family unity or identifying other family care options.
- Design posters with key messages to be posted in Children's Courts about preventive measures to keep children in families and keeping placement in residential care as a last option.
- Ensure that government announcements include important information about children in alternative care and ensure that information, services and supplies also target and reach them.

Gatekeeping considerations during the COVID-19 pandemic

As the world continues to face the multiple impacts of COVID-19, children are inevitably impacted. In many countries COVID-19 has resulted in economic turmoil and stretched health and social welfare to the limit. Whilst the impact has been felt by everyone, the full brunt of the pandemic is most felt by children and families already marked by poverty and social exclusion, whose situations are at risk of being overshadowed by the public health response. The silent victims are children who might not be as susceptible to the direct effects of COVID-19 on their health, but who are made even more vulnerable by the insidious effects of COVID-19 which is exacerbating violence, social isolation, and physical and mental wellbeing.

Disruptions to families, friendships, daily routines, schooling and the wider community can have negative consequences on children's well-being, development and protection. Measures used to contain the spread of COVID-19 can expose children to new protection risks or intensify already existing ones. Because of this, children are at heightened risk of becoming separated from their families during the pandemic. Additionally, spontaneous closure of residential care institutions can result in mass and poorly planned reunifications, often into unprepared families, without monitoring, putting children at great risk for protection violations and re-separation.

The below tips should be considered to ensure gatekeeping procedures continue to remain effective or in some cases are strengthened during the COVID-19 pandemic. **The end goal is to prevent the unnecessary separation of children from their families, to ensure the child is safe if separation does occur, and that temporary alternative care options utilised are those which best responds to the unique needs and situation of each child.**

- It is critically important that where gatekeeping mechanisms do exist, they are supported to function virtually while physical distancing is being observed. Gatekeeping mechanisms should be supported with data, hardware (i.e. smart phones) and software (i.e. Zoom, skype, or similar) which enable those responsible for decision-making to meet virtually to review cases and make recommendations.⁷
- Where gatekeeping mechanisms have not yet been established, it is critical that local-level statutory actors with a child protection mandate lead decision-making processes informed by recognized standards, the principles of alternative care and safe practice. That is, a government officer with statutory authority must be responsible for approving the removal of any child from their family and all placements into alternative care. Authority should not be delegated to non-statutory authorities.
- Gatekeeping mechanisms should place children into care options where they will have their needs met, prioritising the safety and protection of the child, and their health and nutrition needs. Other basic needs, such as education, may be temporarily disrupted due to government physical distancing requirements. However, where possible children should be supported with education materials for home-based learning.
- Restrictions or prohibitions should be placed upon the irregular admission of children into residential care facilities during the emergency. Service providers should be required to immediately notify authorities if a child is brought to their facility and not through formal gatekeeping mechanisms.⁸

⁷ Better Care Network, Alliance for Child Protection in Humanitarian Action and UNICEF (April 2020). Protection of Children During the COVID-19 Pandemic: Children and Alternative Care. Retrieved from: <https://alliancecpha.org/en/series-of-child-protection-materials/protection-children-during-covid-19-pandemic>

⁸ Better Care Network, Alliance for Child Protection in Humanitarian Action and UNICEF (April 2020). Op Cit.

- Child welfare authorities should issue a moratorium on the establishment of new residential care facilities which should be widely communicated along with directives and messages that reinforce existing or modified gatekeeping mechanisms for new referrals to existing facilities.⁹
- Where children may be moving rapidly or at short notice, and where a majority of placements are likely to be temporary, documentation will be increasingly important. Efforts should be made to ensure documentation is accurate and detailed. This will support monitoring efforts once containment measures are eased.
- Gatekeeping mechanisms / statutory authorities should ensure virtual monitoring is conducted for all new placements. See guidance [here](#).
- Service provision and availability may change rapidly during the evolving pandemic. It is critical that gatekeeping mechanisms and statutory authorities maintain an up-to-date service directory, including new health and other family strengthening services which are developed throughout the pandemic.
- Where a child’s caregiver becomes ill, kinship care should be prioritised while the caregiver is temporarily incapacitated and requiring quarantine. Relatives may fear caring for a child who comes from a household where a family member was exposed to the virus, so targeted messaging around how the family can protect themselves whilst caring for the child should be shared and ongoing support should be provided to the kinship household via virtual monitoring (see link to guidance above).

This brief will be regularly updated with the latest information, guidance and tools to ensure to ensure program teams have the information they need to make informed decisions.



⁹ Ibid.