Topic: Mental Health and Psychosocial Support Among Children in Humanitarian Settings

Highlights[1]

70% of displaced and refugee children in six nations reported needing psychosocial support due to the pandemic (1)

83% of Syrian refugee families reported changes in behaviour including anxiety, aggressiveness, and irregular sleep due to the pandemic (2)

88% of internally displaced and/or returnee children reported feeling stress due to the pandemic (3)

Risks of the pandemic

- School closures
- Feelings of missed opportunities
- Fear of the virus
- Job loss and caregiver stress
- Social isolation
- Interrupted access to basic services

Strategies for protective factors

- Children-centred community-based approaches
- Funding MHPSS in humanitarian settings
- Strengthening family support
- Inter-agency collaboration
- Capacity building
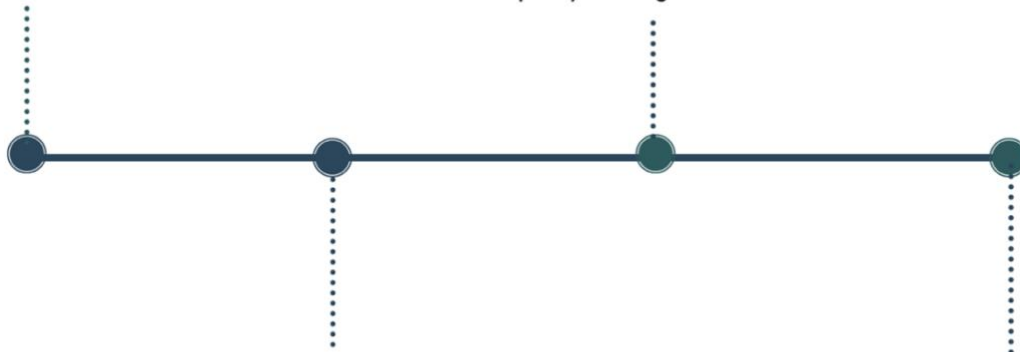
Emerging Practices

- Child-centred messaging
- MHPSS across sectors
- Supporting caregivers in providing a nurturing environment
- Adapting mental health services to support children's wellbeing

Evidence gaps. Lack of:

- MHPSS research
- Information on effectiveness and types of MHPSS provided
- Disaggregated analysis
- Reflection on barriers and facilitators of online service provision

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[1] Infographic references:

1. Hajjar, M. S., and Abu-Sittah, G. S. (2021). The multidimensional burden of COVID-19 on Syrian refugees in Lebanon. *Journal of Global Health*, *11*, 05003. https://doi.org/10.7189/jogh.11.05003
2. Wheeler, Daniel. (2020). Stressed. Special report: an NRC investigation finds that the fear of COVID-19 is leading to an alarming rise in stress levels amongst refugee and displaced children in the Middle East.
3. War Child and World Vision (2021). The silent pandemic: the impact of COVID-19 pandemic on the mental health and psychosocial wellbeing of children in conflict affected countries.

Background and Findings

COVID-19 and the public health measures to reduce its transmission have taken a toll on children's mental health worldwide (Hill et al, 2021; Panchal et al, 2021; U-Report, 2020). Social isolation, family hardships, school closures, service interruptions, and economic crises are all risks that impact children's well-being (UNICEF, 2021). COVID-19 has meant that children in humanitarian settings are particularly at risk to added stressors. Many already faced fear and distress due to displacement and conflict. Now they are at risk of additional mental health challenges during the pandemic (Song, 2021). At the same time, the supports available in conflict settings are minimal; only 1% of humanitarian health funding is allocated to mental health and psychosocial support (World Vision, 2021). This evidence brief summarizes what is already known about the impacts of the pandemic on children's mental health risks, specifically in humanitarian settings with the aim of providing an overview of evidence to date.[2]

Research Highlights: COVID-19 impacts on mental health among children in humanitarian settings

- A study conducted among 129 Syrian refugee families in Lebanon found that impacts of COVID-19 resulted in 83% of the children reporting changes in anxiety, aggressiveness, and irregular sleep (Hajjar and Abu-Sittah, 2021).
- In research conducted among 465 children and adolescents (aged 7-18) in Colombia, the Democratic Republic of the Congo (DRC), Jordan, Lebanon, the occupied Palestinian territory, and South Sudan, displaced and refugee children reported needing psychosocial support more than three times the pre-COVID-19 estimate of 22% (War Child and World Vision, 2021).
- In a 2020 survey conducted among 1599 refugees, internally displaced and/or returnee children (aged 6-17) in Syria, Yemen, Iraq, and Jordan, 88% reported feeling stress due to the pandemic. Of the respondents, almost half said their stress increased when compared to times before COVID-19 (Wheeler, 2020).

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[2] Evidence relevant to mental health and psychosocial support generally and in conflict-affected settings were included. Together, 52 academic articles and resources and 21 news articles from April 2020 to July 2021 were compiled for this report.

COVID-19 and Mental Health: What are Children Concerned About?	
FEELINGS OF MISSED OPPORTUNITIES DUE TO SCHOOL CLOSURES	• In the study conducted by War Child and World Vision, almost 90% of refugee and displaced children indicated that school closures played a factor in contributing to negative mental health outcomes (War Child and World Vision, 2021). Children in conflict settings faced additional barriers accessing distance learning. For example, children in Jordan were excluded from distance learning if they were unable to retrieve a national identity number (Human Rights Watch, 2021). Thus, children in humanitarian settings feared that without access to school, they would miss opportunities in the future.
FEAR OF THE VIRUS	• In research conducted in Syria, Yemen, Iraq, and Jordan, 88% of displaced and refugee children reported feeling stressed by COVID-19 (Wheeler, 2020). They feared contracting the virus or having loved ones impacted by the virus. In the study conducted by War Child and World Vision, 40% of displaced and refugee children reported that the virus is the main factor affecting their emotions (War Child and World Vision, 2021). • CHILDLINE India has seen a spike in calls by 50% during the pandemic regarding calls of children in distress or those who see children in distress and children in danger of abuse, neglect, or exploitation (UNICEF, 2020).
FAMILY HARDSHIPS INCLUDING JOB LOSS AND FAMILY STRESS	• Economic impacts of COVID-19, including job loss, change in public transfers, changes in consumption of goods and essentials, and service disruptions, are significant across households worldwide (The World Bank Group, 2020). As a result of job loss within families, displaced and refugee children expressed having difficulties accessing food (War Child and World Vision, 2021). • Children have also taken on adult roles at home by taking care after their siblings. In research conducted in Syria, Yemen, Iraq, and Jordan, 48% of displaced and refugee children said that they are looking after their siblings during the pandemic (Wheeler, 2020).
REDUCED SOCIAL CONNECTION WITH PEERS, TEACHERS AND COMMUNITY	• Lockdown measures, including school closures, have profoundly reduced social interaction among children, which may be impacting their mental health and well-being (Cost et al., 2021). In a survey with 8,000 children across 46 countries, 54% of children who were not able to meet friends during the pandemic felt worried (Save the Children, 2020). In addition, social isolation in humanitarian settings has some challenges. Living situations are often overcrowded, while lacking access to sanitation or health services, putting children and families at risk for infection and heightened anxiety (Tdh Child Relief, 2020).
INTERRUPTED ACCESS TO BASIC SERVICES	• Lockdown rules have significantly reduced the accessibility to essential services. For children, schools are a resource for accessing health services and food that, with school closures, have been more difficult to access (Human Rights Watch, 2021). Lack of access to basic services is even more pronounced within humanitarian settings, where resources are already scarce (Hajjar and Abu-Sittah, 2021).

In addition, children have had to cope with significant changes to routine, caregiver stress and coping, boredom, remote school programmes, grief, loss, and for some, pre-existing mental health conditions, all potentially impacting their risks for stress during the pandemic (Daton, Rapa and Stein, 2020; UNICEF, 2020; IFRC, 2020).

Emerging Practices	
CHILD CENTERED MESSAGING	• Children-centered messaging around COVID-19 and its implications have been important for children's understanding of the virus. The children's story book "My hero is you" is an example of using feedback from children, parents and children about the mental health impacts of COVID-19 and creating a tool to promote children's wellbeing (Inter-Agency Standing Committee, 2020). Other story books include The Flying Scientist (Kid Pass Culture, 2020), What is Coronavirus, (Save the Children, 2020), and My Name is Coronavirus (Mindheart, 2020) (Child Protection AOR, 2020). Case studies 1, 2 and 7 highlight the importance of child-centered strengths-based approaches (Annex A).
ADDRESSING CHILDREN'S MENTAL HEALTH ACROSS SECTORS	• Developed in collaboration with the Norwegian Refugee Council (NRC) and the Arctic University of Norway, the Better Learning Programme helps teachers support children who are emotionally affected by displacement and conflict. Recognizing that children are reporting fear of the virus, this program is being adapted to address mental health impacts of COVID-19 among displaced children (Norwegian Refugee Council, 2020). • Education Cannot Wait (ECW) has integrated MHPSS in education curriculums as a response to the crisis in Gaza. About 50,000 children affected by the crisis will require both MHPSS and learning during the summer months (IPS, 2021).
SUPPORTING CAREGIVERS TO PROVIDE A NURTURING ENVIRONMENT FOR CHILDREN	• In collaboration with the IRC, a Sesame Workshop called Ahlan Simsim ("Welcome Sesame" in Arabic), provides media content with learning and early development support to engage children and caregivers in Syria, Jordan, Lebanon and Iraq. Adapted with distance learning, children learn about literacy, numeracy, and social-emotional learning. Caregivers learn about ways to play and entertain their children (IRC, 2021). • Reach Up and Learn (RUL) is a program implemented by IRC for Syrian and Jordanian children from 6-35 months of age living in Jordan. RUL supports caregivers by providing mental health support, health messages, and creative ways to engage with their children through play using household items (UNICEF, 2020). • The COVID-19 Parenting for Lifelong Health (PLH) provides a platform of open-source and evidence-based resources for parents that foster parent-child relationships through play (PLH, 2020). • The MHPSS collaborative and Save the Children have together produced a set of tips for parents and caregivers to address the wellbeing of children as they navigate school closures during the pandemic (The MHPSS Collaborative and Save the Children, 2020).

ADAPTING MHPSS PROVISION TO SUPPORT CHILDREN'S WELLBEING	• Mental health services have faced challenges in delivering services during the pandemic. Using the Socio-Ecological model, UNICEF has created a guide for adapting MHPSS activities for children, adolescents, and families (UNICEF, 2020). • Countries all over the world have expanded and established mental health helplines in refugee communities that connects individuals to psychologists and support (UNHCR, 2020; El-Khatib et al, 2020). Case studies 4 and 5 titled "Remote Group Based Structured Psychosocial Support Program" in Turkey and "Adapting to Serve Children Involved in Worst Forms of Child Labour During COVID-19 in Lebanon", respectively, highlighted examples and challenges of adapting mental health services to be delivered online (Annex A). Case study 4 found that remote services created gaps for group-based programs while the program in case study 5 helped improve children's wellbeing. • The Inter-Agency Standing Committee (IASC) outlines fourteen MHPSS key activities to implement as part of the response to COVID-19, from conducting rapid assessment of MHPSS issues to COVID-19 information sharing and including MHPSS trained staff in COVID-19 treatment and isolation sites (IASC, 2020). • The International Federation of Red Cross and Red Crescent Societies (IFRC) provides guidelines to support practitioners in remote Psychosocial First Aid service provision during COVID-19 (IFRC, 2020).

Strategies for Protective Factors	
CHILDREN-CENTRED COMMUNITY-BASED APPROACHES	• Strengths-based and children-centred community approaches to support children are essential. In Bangladesh, Rohingya, refugee children from ages of 10 to 18 are encouraged to lead peer mental health discussions among other children in the refugee camp (UNHCR, 2020). Starting in 2019, this programme allowed children to meet amongst themselves to share their feelings and worries. Although the programme was significantly reduced during COVID-19, children who took part felt that they had the foundation to cope with some of the stress exacerbated by the pandemic.
BASED APPROACHES	• UNICEF initially planned to allocate US$4.2 billion towards humanitarian action for children (UNICEF, 2021). However, as crises have accumulated throughout the pandemic, UNICEF has raised its commitments to funding humanitarian settings with US$6.4 billion through to 2021, from which 19.2 million children and caregivers are to receive mental health and psychosocial support (UNICEF, 2020).
FUNDING MHPSS IN HUMANITARIAN SETTINGS	• Programmes that improve the well-being of parents and caregivers are helpful in curbing mental health risks among children. The Caring for the Caregiver (CFC) is a training package that aims to support caregivers and promote emotional well-being, self-care, and self-efficacy among caregivers (UNICEF, 2020). A collaborative guide on the CFC from various agencies compiles guidance notes, key messages, and case studies to encourage frontline workers and caregivers themselves to also prioritize their mental health and well-being (Brashaw et al, 2020). • Helping Adolescents Thrive (HAT) Package highlights the psychosocial interventions targeted at parents to improve adolescent-caregiver relationships, and thus the family's well-being (UNICEF and WHO, 2021). • Case Study 6 titled "Parenting during COVID, the tale of the foster parent," provided an example of engaging both foster parents and refugee children by enhancing their stress management skills (Annex A). Children who utilized this programme maintained their home arrangements.
FAMILY STRENGTHENING SUPPORT	• Programmes that aim to support and improve the well-being of parents and caregivers are important in curbing mental health risks among children. Training packages, such as Caring for the Caregiver (CFC – see details under 'Training' below), should be applied to guide programming. • Helping Adolescents Thrive (HAT) Package highlights the psychosocial interventions targeted at parents to improve adolescent-caregiver relationships, and thus the family's well-being (UNICEF and WHO, 2021). • Case Study 6 titled "Parenting during COVID, the tale of the foster parent," provided an example of engaging foster parents by enhancing their stress management skills (Annex A). Parents who utilized this programme reported that the children were able to maintain their home arrangements with them.

INTER-AGENCY COLLABORATION	• As children's mental health risks are related to their access to various services, collaboration between child protection, health services, education, and mental health efforts is vital (Solerdelcoll, Arango and Sugranyes, 2021; UNICEF and WHO, 2020). For example, low- and middle-income countries have adopted the 4Ws tool, developed by the global IASC and World Health Organization (WHO) (Kohrt, 2021). The 4Ws tool helps identify who is where, when, and doing what in MHPSS within their countries, to promote collaboration amongst government and grassroots organizations, and to avoid duplication while reducing gaps (IASC, 2012). • To promote cross-sectoral collaboration, IASC created a resource for practitioners to incorporate psychosocial support into their COVID-19 responses (IASC, 2020).
TRAINING IN MHPSS	• Capacity building can provide greater access to mental health and psychosocial support for children. In Malaysia, UNHCR has made efforts to scale up mental health service provision by providing 85% of service providers with training in Integrative Adapt Therapy for its delivery in various humanitarian settings across the country (Tay and Balasundaram, 2021). • UNICEF's Caring for the Caregiver (CFC) training module provides tools for mental health practitioners to build skills in strengths-based counselling that encourages caregiver emotional awareness and coping, with the aim of reducing stress amongst caregivers directly and children, indirectly (UNICEF, 2020). A collaborative guide on the CFC from various agencies compiles guidance notes, key messages, and case studies to encourage frontline workers and caregivers themselves to also prioritize their mental health and well-being (Brashaw et al, 2020).

Evidence Gaps

- Specific research about the mental health needs of children living in humanitarian settings is thin. There is a need for additional research that centres children's voices and understands their holistic experiences in conflict settings.
- There is little information on the types of psychosocial support provided to refugee children. More information on the effectiveness of specific techniques of psychosocial support and sharing about strategies and learning amongst practitioners would be beneficial in establishing best practices.
- Evidence lacks disaggregated information to highlight various levels of inequalities and experiences. Disaggregated data broken down to gender, age, disability status, and location of marginalized children is missing amongst the evidence but is necessary for the delivery of targeted approaches. Although Case Study 1 highlights that women and girls may be disproportionately in need of mental health services due to an increased risk of gender-based violence during the pandemic, an analysis of this is not readily available.
- While MHPSS programmes have done their best in adapting to online services, there is little analysis and reflection of the barriers and facilitators in delivering services online or through the phone.

Annex A. Success stories in mental health – Case studies

Case Study #	Case Study Title	Country or Region	Target Population	Summary	Key Findings
1	**Using SBCC to Prevent Domestic Violence & Increase Access to Psychosocial Support**	*Afghanistan*	*Women and girls*	*The COVID-19 pandemic and its measures have isolated women who are most at risk of gender-based violence (GBV) from getting support, including mental health and psychosocial support. MAGENTA is a programme that addresses the root causes of GBV through participatory research and information sharing with the hopes of challenging the normalized culture around GBV.*	• *Mental stress is a recurring challenge across communities.* • *Information is best received when country specific.* • *Community-centred and women-centred approaches are empowering.*
2	**Play Your Part, Join #TeamKind**	*Southeast Asia*	*Adolescents, women, religious leaders, and frontline workers*	*MAGENTA has created a campaign called "Play Your Part, Join #TeamKind" to deliver messages of kindness, foster open communication and mitigate issues in misinformation, stigma, discrimination, and mental health across Southeast Asia.*	• *After MAGENTA, more participants feel that seeking support is acceptable.* • *Targeted messaging is key in providing MHPSS.* • *MHPSS services must be able to meet the increased demand and deliver quality services.*
3	**Mainstreaming Psychosocial Support and Delivering Mental Health and Psychosocial Support Services**	*Zimbabwe*	*Children*	*Regional Psychosocial Support Initiative (REPSSI) delivered direct provision of PSS services to monitor child protection across the country, identify and mitigate risks of emotional maltreatment, strengthen family support, and monitor mental health outcomes.*	• *There are reports of fear and anxiety due to separation from families, uncertain futures, and loss of livelihood and incomes.* • *After REPSSI, there is improved community support and child protection.* • *298 service providers were trained, reaching 9,963 services.*

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				Support to Life Association recognized the need for psychosocial support among children who are isolated due to COVID-19. They enhanced their programme to be delivered over the phone or online.	• Remote service provision creates gaps for group-based programmes where direct interactions are especially valued.
4	Remote Group Based Structured Psychosocial Support Programme	Turkey	Children	Support to Life Association recognized the need for psychosocial support among children who are isolated due to COVID-19. They enhanced their programme to be delivered over the phone or online.	• Remote service provision creates gaps for group-based programmes where direct interactions are especially valued.
5	Adapting to Serve Children Involved in Worst Forms of Child Labour During COVID-19 in Lebanon	Lebanon	Children	To address mental health and child labour, World Vision Lebanon adapted their child protection programming to deliver Focused Psychosocial Support (FPSS) online, which included child-centred activities, such as stories, educational games, emotional regulation skills, and children's rights education.	• 91% of children have an improvement in their psychosocial well-being. • Children are voicing their gratitude for being included in this much needed programme. • Not all children go to school.
6	Parenting During COVID, The Tale of Foster Parents	Ethiopia	Refugee children and families	Bethany aimed to strengthen foster care of refugee children by implementing a remote parenting skills and stress management intervention that supports and reduces stress amongst both foster parents and children.	• Children can maintain their home arrangements. • 98% were satisfied with the support. • 2% were referred to other services.
7	Psychosocial Youth Coordination: Virtual Working Model	Costa Rica	Children and adolescents	Currently in their second wave of the pandemic, the Costa Rican Youth Red Cross Programme has adapted their peer-to-peer support programme to be online. Volunteers who are also peers help foster open communication amongst the community to help identify children who may be at risk for mental health issues. Communication about mental health with other sectors and global actors has been a focus for this programme as well.	• Strengths-based understanding that adolescents are equipped to lead in supporting. • Child-centred approaches rather than adult centric approaches. • Technology can be harnessed to innovatively deliver MHPSS activities.

References (not exhaustive)

RESOURCES
General

- Hill, R. M., Rufino, K., Kurian, S., Saxena, J., Saxena, K., and Williams, L. (2021). Suicide Ideation and Attempts in a Pediatric Emergency Department Before and During COVID-19. *Pediatrics*, *147*(3), e2020029280. https://doi.org/10.1542/peds.2020-029280
- Panchal, N., Kamal, E., Cox, C., Garfield, R., and Chidambaram, P. (2021). Mental health and substance use considerations among children during the COVID-19 pandemic.
- U-Report. (2020). The impact of COVID-19 on the mental health of adolescents and youth.
- UNICEF. (2021). At least 1 in 7 children and young people has lived under stay-at-home policies for most of the last year, putting mental health and well-being at risk – UNICEF.
- Fitzgerald, D. A., Nunn, K., and Isaacs, D. (2021). What we have learnt about trauma, loss and grief for children in response to COVID-19. *Paediatric Respiratory Reviews*. https://doi.org/10.1016/j.prrv.2021.05.009
- Kola, L., Kohrt, B. A., Hanlon, C., Naslund, J. A., Sikander, S., Balaji, M., … Ugo, V. (2021). COVID-19 mental health impact and responses in low-income and middle-income countries: reimagining global mental health. *The Lancet Psychiatry*, *8*(6), 535–550. https://doi.org/10.1016/s2215-0366(21)00025-0
- Aten, J. (2020). The COVID-19 Burden of Disease on Refugees and Immigrants. Psychology Today. (News)
- Høvring, R. (2020). 7 ways we are helping children get through the pandemic. Norwegian Refugee Council. (News)
- UNHCR. (2020). Bangladesh/refugee response: COVID-19 response.
- CBM. (2020). World Humanitarian Day 2020: our partners and staff in the refugee camps of Cox's Bazar, Bangladesh, show selfless commitment during the COVID-19 pandemic by ensuring that persons with disabilities continue receiving inclusive humanitarian services. (News)
- Abaya, M. (2020). We must preserve asylum to protect children. The Hill. (News)
- Meredith, R. (2021). COVID-19 pandemic likely have "profound" effect on mental health. BBC News. (News)
- CBC News. (2021). How COVID-19 is affecting the physical-mental health of children: pediatric ER chief. (News)
- Singh, A and Chawla, N.A. (2021). The COVID generation: India's children stare at a grim and desperate future. The New India. (News)
- Knight, A. (2021). COVID-19 is also mental health epidemic for children. The Hill. (News)
- Raman, S. (2021). Children face added mental health struggles during pandemic. Medical Press. (News)
- Davis, L.S. (2021). Keep paying attention to your kids' mental health in this pandemic. CNN Health. (News)
- Global News. (2021). COVID-19: Doctors worry "social malnutrition" is affecting kids as teen emergency visits rise. (News)
- UN News. (2021). Mental health alert for 332 million children linked to COVID-19 lockdown policies: UNICEF. (News)
- Rooney, K. (2021). This is why mental health should be a political priority. World Economic Forum. (News)

- Sample, I. (2020). COVID poses 'greatest threat to mental health since second world war'. The Guardian. (News)
- VOA. (2021). Global rise in childhood mental health issues amid pandemic. (News)
- Action Against Hunger. (2021). As India faces COVID-19 crisis, Action Against Hunger responds with medical and mental health support and emergency food aid. (News)
- Global Citizen. (2021). 4 key ways you can help those impacted by the humanitarian crisis in Gaza. (News)
- India Today. (2021). COVID-19 impact on our mental health and how to deal with it. (News)
- Prideaux, E. (2021). How to heal the 'mass trauma' of COVID-19. BBC News. (News)

Children in Humanitarian Settings

- Song, S. J. (2020). Protecting the Global Mental Health of Forcibly Displaced Children From the COVID-19 Pandemic. *Pediatrics*, *147*(4), e2020025346. https://doi.org/10.1542/peds.2020-025346
- World Vision. (2021). Number of refugee children who say they need mental health support more than triples because of COVID-19, warns new report.
- Hajjar, M. S., and Abu-Sittah, G. S. (2021). The multidimensional burden of COVID-19 on Syrian refugees in Lebanon. *Journal of Global Health*, *11*, 05003. https://doi.org/10.7189/jogh.11.05003
- War Child and World Vision. (2021). The silent pandemic: the impact of COVID-19 pandemic on the mental health and psychosocial well-being of children in conflict affected countries.
- Wheeler, Daniel. (2020). Stressed. Special report: an NRC investigation finds that the fear of COVID-19 is leading to an alarming rise in stress levels amongst refugee and displaced children in the Middle East.
- Human Rights Watch. (2021). "Years don't wait for them" Increased inequities in children's right to education due to the COVID-19 pandemic.
- Cost, K. T., Crosbie, J., Anagnostou, E., Birken, C. S., Charach, A., Monga, S., … Korczak, D. J. (2021). Mostly worse, occasionally better: impact of COVID-19 pandemic on the mental health of Canadian children and adolescents. *European Child & Adolescent Psychiatry*. https://doi.org/10.1007/s00787-021-01744-3
- Save the Children. (2020). The hidden impact of COVID-19.
- Logie, C. H., Okumu, M., Latif, M., Musoke, D. K., Odong Lukone, S., Mwima, S., and Kyambadde, P. (2021). Exploring resource scarcity and contextual influences on well-being among young refugees in Bidi Bidi refugee settlement, Uganda: findings from a qualitative study. *Conflict and Health*, *15*(1). https://doi.org/10.1186/s13031-020-00336-3
- Couch, J., Liddy, N., and McDougall, J. (2021). "Our Voices Aren't in Lockdown"—Refugee Young People, Challenges, and Innovation During COVID-19. *Journal of Applied Youth Studies*. https://doi.org/10.1007/s43151-021-00043-7
- Browne, D. T., Smith, J. A., and Basabose, J. de D. (2021). Refugee Children and Families During the COVID-19 Crisis: A Resilience Framework for Mental Health. *Journal of Refugee Studies*, *34*(1), 1138–1149. https://doi.org/10.1093/jrs/feaa113
- Tdh Child Relief. (2020). COVID-19: one danger too many for refugee children. (News)
- Right to Play. (2019). Rising up: empowering displaced children in Thailand to cope with stress. (News)
- Dalton, L., Rapa, E., and Stein, A. (2020). Protecting the psychological health of children through effective communication about COVID-19. *The Lancet Child & Adolescent Health*, *4*(5), 346–347. https://doi.org/10.1016/s2352-4642(20)30097-3

- UNICEF. (2020). COVID-19: Operational guidance for implementation and adaptation of MHPSS activities for children, adolescents, and families.
- IFRC. (2020). Loss and grief during COVID-19.
- UNICEF. (2020). Psychosocial Support for children during COVID-19.
- The World Bank Group. (2020). Poverty and distributional impacts of COVID-19: Potential channels of impact and mitigating practices.

Emerging Practices and Strategies for Protective Factors

- Inter-Agency Standing Committee. (2020). My Hero is You, Storybook for children on COVID-19.
- Norwegian Refugee Council. (2020). Children are afraid of the virus too.
- IPS. (2021). Education cannot wait for refugee children in crisis, says Yasmine Sherif.
- IRC. (2021). Keeping children safe and learning in a pandemic: education, conflict, and COVID-19.
- UNHCR. (2020). Emerging practices: mental health and psychosocial support in refugee operations during the COVID-19 pandemic.
- El-Khatib, Z., Al Nsour, M., Khader, Y., and Abu Khudair, M. (2020). Mental health support in Jordan for the general population and for the refugees in the Zaatari Camp during the period of the COVID-19 lockdown.
- Murray, D and Donovan, L. (2020). Rohingya refugee children learn to support one another. UNHCR. (News)
- UNICEF. (2021). Humanitarian action for children.
- UNICEF. (2020). UNICEF issues record US$6.4 billion emergency funding appeal to reach more than 190 million children impacted by humanitarian crises and the COVID-19 pandemic.
- UNICEF. (2020). Mental health and psychosocial support for children in humanitarian settings: an updated review of evidence and practice.
- UNICEF. (2020). Caring for the caregiver.
- Solerdelcoll, M., Arango, C., and Sugranyes, G. (2021). Calling for the integration of children's mental health and protection into COVID-19 responses. *Revista de Psiquiatría Y Salud Mental*, *14*(2), 113–116. https://doi.org/10.1016/j.rpsm.2021.02.004
- Kohrt, B. A. (2021). COVID-19 and global mental health. *The Lancet Psychiatry*, *8*(6), 456.
- Tay, A. K., and Balasundaram, S. (2021). Mental health services for refugees in Malaysia during the COVID-19 pandemic. *The Lancet Psychiatry*, *8*(2), e7. https://doi.org/10.1016/s2215-0366(20)30525-3
- Kid Pass Culture. (2020). A storybook for children about the coronavirus.
- Save the Children. (2020). Explaining COVID-19 to kids through comics.
- Mindheart. (2020). #COVIBOOK: Support and reassuring children around the world.
- Child Protection AOR. (2020). PSS and learning kits for COVID-19.
- PLH. (2020). COVID-19: 24/7 playful parenting.

- The MHPSS Collaborative and Save the Children. (2020). Tips for parents and caregivers during COVID-19 school closures: Supporting children's well-being and learning.
- IASC. (2020). Addressing mental health and psychosocial aspects of COVID-19 outbreak.
- IFRC. (2020). Remote psychological first aid during COVID-19.
- Brashaw, et al. (2020). Caring for caregivers during the COVID-19 crisis.
- UNICEF and WHO. (2020). A compendium of tools for the assessment of the mental health and psychosocial well-being of children in the context of humanitarian emergencies.
- IASC. (2012). Who is where, when and doing what (4Ws) in mental health and psychosocial support.
- IASC. (2020). Basic psychosocial skills: a guide for COVID-19 responders.
- IFRC. (2020). Monitoring and evaluation for MHPSS in COVID-19.
- Global Mental Health Action Network. (2020). Global Mental Health Advocacy Roadmap 2020 - 2021.
- UNICEF. (2020). MHPSS Technical Note.