# Evidence Search Service Results of your search request

## The impact of Covid 19 on the emotional needs of looked after and adopted children

**ID of request:** 25160  
**Date of request:** 18th September, 2020  
**Date of completion:** 22nd October, 2020

If you would like to request any articles or any further help, please contact:  Julia Hallam at [julia.hallam@oxfordhealth.nhs.uk](mailto:julia.hallam@oxfordhealth.nhs.uk)

Please acknowledge this work in any resulting paper or presentation as: Evidence search: The impact of Covid 19 on the emotional needs of looked after and adopted children. Julia Hallam. (22nd October, 2020). OXFORD, UK: Oxford Health Library and Knowledge Service.

**Sources searched**  
CINAHL (3)  
EMBASE (6)  
MEDLINE (13)  
PsycInfo (16)  
PubMed (16)  
Social Care Online (65)

**Date range used** (5 years, 10 years): 2019-2020   
**Limits used** (gender, article/study type, etc.): Date   
**Search terms and notes** (full search strategy for database searches below):

(Coronavirus OR "Covid-19" OR "C-19" OR Betacoronavirus OR "nCoV\*" OR "2019nCoV" OR "19nCoV" OR "COVID19\*" OR "COVID-19" OR COVID OR "SARS-COV-2" OR "SARSCOV-2" OR "SARSCOV2" OR "Severe Acute Respiratory Syndrome Coronavirus 2" OR "Severe Acute Respiratory Syndrome Corona Virus 2" OR "Severe Acute Respiratory Syndrome Coronavirus 2" OR "SARS-CoV-2" OR Corona OR "2019-nCoV Acute Respiratory Disease" OR "Novel Coronavirus Pneumonia")

OR

(Wuhan OR Hubei OR China OR Chinese) ADJ4 (Pneumonia OR Pandemic\* OR Epidemic\* OR Outbreak\*)   
  
AND   
  
(Adopted OR Adoption\* OR Adoptee\* OR Foster OR Fostered OR "Looked After" OR "Looked-After" OR "Social Service\*" OR "Social Care\*" OR "Social Work\*" OR "Local Authorit\*" OR Welfare OR "Residential Care" OR "Kinship Care\*" OR Vulnerable OR "In Care" OR "In-Care" OR "Child Arrangement\* Order\*" OR "Special Guardianship Order\*" OR "Connected People" OR "Family Carer\*" OR "Friend Carer\*")

AND

(Child\* OR Infan\* OR Toddler\* OR Schoolchild\* OR Preschool\* OR "Pre-school\*" OR P?ediatric\* OR Girl\* OR Boy\* OR Teen\* OR Adolescen\* OR Minor\* OR "Young People" OR "Young Person\*")

The above keyword searches were combined with controlled MeSH searches on the following databases:   
  
PsycINFO, MEDLINE, CINAHL, EMBASE, PubMed, The Cochrane Library and Social Care Online.

Keyword searches were also conducted on NHS Evidence and Google to try and locate grey literature.

For more information about the resources please go to: <http://www.oxfordhealth.nhs.uk/library/>.

## Summary of Results

There is some research on this specific topic. However, it is quite general to adopted and looked after children’s needs in general (rather than specifically their emotional needs). There is a also a lot of research about the impact of Covid-19 on the mental health of all children (not just those that are adopted/looked after/in care).  I have included some papers in the result list that look at the impact of covid 19 on the emotional needs/mental health of all children in general, in case they are relevant, but I have tried to focus the selection of results to papers specifically looking at the impact of covid on children in care. As stated, some of these papers may be looking at the impact generally, rather than specifically looking at their emotional needs. NHS Libraries do not have access to some of the main social work databases (e.g. social services abstracts and sociological abstracts) and therefore there may well be some really relevant research that is missing from our result list. My advice would be, that if you have an association with a university, to see if you can obtain a university athens account to try and access these databases, via your university. Oxford Brookes University Library for example, does have access to these two databases. However, I have searched Social Care Online and NHS Evidence, which do contain social work research, so hopefully, there will not be too much relevant information that is missing. If you would like me to run a more general search on the impact of covid on the mental health and emotional needs of children in general (i.e. not specific to adopted/fostered children), then please do let me know and I will be more than happy to run further searches for you. If you would like any assistance in obtaining the full text of any of these articles, then please do get in touch.

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33. [COVID-19: guidance for residential children's homes in Northern Ireland](#Research763074)
34. [COVID-19: Guidance to accompany the Children's Social Care (Coronavirus) (Temporary Modification of Children’s Social Care) Regulations (Northern Ireland) 2020](#Research763077)
35. [COVID-19: survey of residential services in Ireland during the lockdown restrictions](#Research763103)
36. [Cross-departmental actions for vulnerable children and young people during the Covid-19 pandemic period: consultation document](#Research763091)
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45. [Health care providers must be alert for violence against children during the pandemic.](#Research763034)
46. [Home learning during the Covid-19 lockdown: the impact of school closures on care experienced children](#Research763082)
47. [How COVID-19 Is Placing Vulnerable Children at Risk and Why We Need a Different Approach to Child Welfare.](#Research763020)
48. [How is COVID-19 pandemic impacting mental health of children and adolescents?](#Research763019)
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58. [Managing through COVID-19: the experiences of children’s social care in 15 English local authorities](#Research763080)
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74. [Safeguarding children and families during the COVID-19 crisis](#Research763089)
75. [Screening for economic hardship for child welfare-involved families during the COVID-19 pandemic: A rapid partnership response.](#Research763055)
76. [Seeing the silver lining in the cloud: resiliency demonstrated by children in residential care in India during the Covid-19 crisis](#Research763061)
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84. [The COVID‐19 pandemic and its impact on children in domestic violence refuges](#Research763102)
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86. [The impact of COVID-19 on children and young people](#Research763098)
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88. [The impact of social vulnerability on COVID-19 in the U.S.: An analysis of spatially varying relationships](#Research763012)
89. [The impact of the coronavirus pandemic on child welfare: domestic abuse](#Research763105)
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91. [The impact of the coronavirus pandemic on child welfare: sexual abuse](#Research763113)
92. [The impact of the COVID-19 pandemic on intercountry adoption and international commercial surrogacy.](#Research763033)
93. [The impacts of COVID-19 on children.](#Research763025)
94. [The PCFSW and Social Work England COVID-19 ethical response and best practice guide for children and families services](#Research763062)
95. [The PCFSW best practice guide for risk assessment and prioritising children and families' needs during pandemic](#Research763114)
96. [The state of child poverty 2020: the impact of COVID-19 on families and young people living in poverty](#Research763109)
97. [Using telemedicine to reach adolescents during the COVID-19 pandemic](#Research763003)
98. [Vulnerable Children in a Dual Epidemic.](#Research763030)
99. [Vulnerable Youth and the COVID-19 Pandemic.](#Research763026)
100. [We're all in this together? Local area profiles of child vulnerability](#Research763115)
101. [When stay-at-home orders leave victims unsafe at home: Exploring the risk and consequences of intimate partner violence during the covid-19 pandemic](#Research763017)
102. [Young lives in lockdown: NYAS' survey of care-experienced children and young people during Covid-19](#Research763079)
103. [Young people in care: how lockdown provides a haven of security and belonging](#Research763097)
104. [Zooming Toward a Telehealth Solution for Vulnerable Children with Obesity During Coronavirus Disease 2019.](#Research763043)

### [C. Search History](#SearchHistory)

**A. Grey Literature:**   
  
**COVID-19 - guidance for paediatric services | RCPCH**  
www.rcpch.ac.uk › resources › covid-19-guidance-pae...  
13 Mar 2020 — Staff caring for children with confirmed COVID-19 or undertaking aerosol ... PHE guidance for households with possible coronavirus infection would ... looked after children (LAC), adoption, child death and children with special ...

**What is remote leadership? - What Works for Children's Social ...**orca.cf.ac.uk › WWCSC\_Rapid\_Review\_Remote\_Lead...22 Jun 2020 — protection, looked after children and adoption. It is the only ... The 2020 Covid-19 pandemic and associated ... (leader\*) AND. • (remote OR ...by D Wilkins · ‎2020

**Looked After Children (LAC) - guidance | RCPCH**www.rcpch.ac.uk › resources › looked-after-children-lacMore than 93000 children in the UK are in care, 70000 in England. ... She also collaborates with the British Association of Adoption and Fostering (Coram ... Looked After Children services in COVID-19 pandemic recovery plans - statement.

**Looked After Children services in COVID-19 pandemic ...**  
www.rcpch.ac.uk › resources › looked-after-children-se...  
3 Jun 2020 — Adoption pathways and court requirements will affect how statutory health assessments are prioritised. Close liaison with local social care teams ...

## B. Original Research

1. **"Oh, this is actually okay": Understanding how one state child welfare training system adapted to the COVID-19 pandemic.**  
   Schwab-Reese LM Child abuse & neglect 2020;:104697.

BACKGROUND: Training for new and existing child protection system (CPS) caseworkers is critical to developing and maintaining a competent workforce that effectively works towards safety, permanency, and wellbeing outcomes for children in the system. The COVID-19 pandemic required a shift to virtual training to continue training CPS professionals safely. OBJECTIVE: The purpose of our project was to determine if there were differences in learning outcomes between learners who completed training in the usual delivery methods (Pre-COVID) and the fully virtual delivery methods (Post-COVID). We also sought to understand any factors that facilitated or impeded successful virtual training during the pandemic. PARTICIPANTS AND SETTING: Caseworkers-in-training completed learning and satisfaction assessments through standard continuing quality improvement efforts. Training facilitators, course developers, and leadership completed qualitative interviews. METHODS: We assessed quantitative differences in one US state in learner knowledge, satisfaction, and behaviors before and during the COVID-19 pandemic and conducted a qualitative thematic analysis of interviews with training system employees. RESULTS: Overall, there were limited differences in learner outcomes before and after the transition to virtual training delivery. Across the employee interviews, three main themes emerged: organizational culture facilitated the transition, external constraints caused challenges during the transition, and there were opportunities to evolve training practices positively. CONCLUSIONS: The shift to a virtual learning environment had little impact on learner knowledge or satisfaction. Employee perspectives indicated that the pre-COVID investment in organizational culture has substantial dividends for performance during the crisis.

1. **'When will I be free': Lessons from COVID-19 for Child Protection in South Africa**  
   Haffejee S. Child Abuse and Neglect 2020;:No page numbers.

Background: COVID-19 has highlighted and amplified structural inequalities; drawing attention to issues of racism, poverty, xenophobia as well as arguably ineffective government policies and procedures. In South Africa, the pandemic and the resultant national lockdown have highlighted the shortcomings in the protection and care of children. Children in alternative care are particularly at risk as a result of disrupted and uncoordinated service delivery. <br/>Objective(s): The aim of this study was to explore the experiences and impact of the pandemic and the resulting social isolation on the wellbeing and protection of children living in a residential care facility. Methods and participants: We used qualitative, participatory approaches - specifically draw-and-write methods - to engage with 32 children (average age = 13.5 years) living in a residential care facility in Gauteng. <br/>Finding(s): Children in care demonstrated an awareness of the socio-economic difficulties facing communities in South Africa, and shared deep concerns about the safety, well-being and welfare of parents and siblings. Although they expressed frustration at the lack of contact with family members, they acknowledged the resources they had access to in a residential care facility, which enabled them to cope and which ensured their safety. Discussion and conclusion: We focus our discussion on the necessity of a systemic response to child welfare, including a coordinated approach by policy makers, government departments and child welfare systems to address the structural factors at the root of inequality and inadequate, unacceptable care. This response is essential not only during COVID-19 but also in pre- and post-pandemic context.<br/>Copyright &#xa9; 2020 Elsevier Ltd

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[Available online at this link](https://www.knowledgeshare.nhs.uk/index.php?PageID=link_resolver&link=1740da3a6d4077f321eddcc07695fa34)

1. **A rapid review investigating the potential impact of a pandemic on the mental health of young people aged 12-25 years**  
   O'Reilly A. Irish Journal of Psychological Medicine 2020;:No page numbers.

Objectives:In March 2020, the WHO officially declared the spread of COVID-19 as a pandemic. Adolescence and early adulthood are peak times for the onset of mental health difficulties. Exposure to a pandemic during this vulnerable developmental period places young people at significant risk of negative psychological experiences. The objective of this research was to summarise existing evidence on the potential impact of a pandemic on the mental health of 12-25-year-olds. <br/>Method(s):A rapid review of the published peer-reviewed literature, published between 1985 and 2020, using PsycINFO (Proquest) and Medline (Proquest) was conducted. Narrative synthesis was used across studies to identify key themes and concepts. <br/>Result(s):This review found 3,359 papers, which was reduced to 12 papers for data extraction. Results regarding the prevalence of psychological difficulties in youth were mixed, with some studies finding this group experience heightened distress during an infectious disease outbreak, and others finding no age differences or higher distress among adults. Gender, coping, self-reported physical health and adoption of precautionary measures appear to play a role in moderating the psychological impact of an infectious disease outbreak. Most studies were conducted after the peak of an epidemic/pandemic or in the recovery period. <br/>Conclusion(s):More longitudinal research with young people, particularly adolescents in the general population, before and during the early stages of an infectious disease outbreak is needed to obtain a clear understanding of how best to support young people during these events.<br/>Copyright &#xa9; College of Psychiatrists of Ireland 2020.

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1. **Adolescent psychiatric disorders during the COVID-19 pandemic and lockdown**  
   Guessoum S.élim Benjamin Psychiatry Research 2020;291:No page numbers.

The aim of this paper was to review the literature on adolescent psychiatric disorders related to the COVID-19 pandemic and lockdown. Stressful life events, extended home confinement, brutal grief, intrafamilial violence, overuse of the Internet and social media are factors that could influence the mental health of adolescents during this period. The COVID-19 pandemic could result in increased psychiatric disorders such as Post-Traumatic Stress, Depressive, and Anxiety Disorders, as well as grief-related symptoms. Adolescents with psychiatric disorders are at risk of a break or change in their care and management; they may experience increased symptoms. The COVID-19 pandemic and lockdown may have a negative impact on the mental health of adolescents, although there is still no data on the long term impact of this crisis. Adolescents’ individual, familial, and social vulnerability, as well as individual and familial coping abilities, are factors related to adolescent mental health in times of crisis. Adolescents are often vulnerable and require careful consideration by caregivers and healthcare system adaptations to allow for mental health support despite the lockdown. Research on adolescent psychiatric disorders in times of pandemics is necessary, as such a global situation could be prolonged or repeated. (PsycInfo Database Record (c) 2020 APA, all rights reserved) (Source: journal abstract)

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[Available online at this link](https://www.knowledgeshare.nhs.uk/index.php?PageID=link_resolver&link=bcc5b1f79cbd46e9482ccef49469eefc)

1. **Adoption and Children (Coronavirus) (Amendment) Regulations 2020**  
   FOSTER David 2020;:11.

This briefing describes the laying of the Adoption and Children (Coronavirus) (Amendment) Regulations 2020, which came into force on 24 April 2020, its content, and reaction from the sector. The regulations temporarily amend ten sets of regulations relating to children’s social care in England. The briefing includes commentary from the Association of Directors of Children’s Services, the Children’s Commissioner for England, and charity organisations. It also outlines the UK parliamentary proceedings in relation to the regulation and references relevant reports from the House of Lords Secondary Legislation Committee and the Joint Select Committee on Statutory Instruments.

[Available online at this link](https://www.knowledgeshare.nhs.uk/index.php?PageID=link_resolver&link=a5bcb571e3265ab4a28e1500f8768784)

1. **Assessing the vulnerability of care-workers in England to modern slavery risks during the COVID-19 pandemic**  
   BRADY Emily 2020;:28.

This report sets out findings of a research project to identify the key risk factors that may increase modern slavery risk in the care sector as a result of COVID-19. Whilst the pandemic is ongoing, and the situation continues to develop, it is likely that the extent of modern slavery risk will only be fully revealed in retrospect. The report draws on the analysis of primary interviews with key stakeholders and a review of the guidance and safeguarding documentation of organisations representing care procurers and providers. identified risks can be grouped into the following categories: pre-recruitment financial risk – increased recruitment activity and rise in use of migrant labour, with risk of work-visa debt; post-recruitment financial risk – wages being withheld, especially with regard to sick pay and travel time, delays in payment through retrospective reconciliation, and increasing reliance on “pay-per-minute”; pre-recruitment operational risk – flexible employment practices in response to workforce availability, including waiving of full DBS checks, media perception of care homes discouraging potential staff, leading to labour shortages, and reliance on unregulated temporary staffing agencies; and post-recruitment operational risk – decreasing quality of working conditions, pressure for staff to live ‘locked in’ on-site, audit limitations, isolation of home carers, increased risk for BAME staff, obscured signs of exploitation and unacknowledged home care workload increases. There have, however, been some unprecedented positive impacts from COVID19, which have the potential to mitigate modern slavery risk. These include: (1) increased inter-organisational co-operation; (2) increased community-orientated care approach; (3) perceived increase in the societal value of social care.

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1. **Before COVID-19: the effect of the 1918 pandemic on Scotland’s children**  
   CONNELLY Graham Scottish Journal of Residential Child Care 2020;:1-16.

The erroneously named ‘Spanish Flu’ pandemic of 1918-1920 was responsible for the deaths of at least 50 million people worldwide. Its point of arrival in the UK was Glasgow, Scotland, probably brought by troops returning from the battlefields of the Great War. The first infections were in factories and a boys’ industrial school and the first recorded deaths were of eight children at the former Smyllum Orphanage in Lanark. The British Newspaper Archive is a valuable online source of reports about the pandemic from local Scottish newspapers of the time, but there is more research to be done in the National Records of Scotland and in local archives. The authors welcome advice on potential sources of the effects of the 1918 pandemic on Scottish orphanages, children’s homes and industrial schools.

[Available online at this link](https://www.knowledgeshare.nhs.uk/index.php?PageID=link_resolver&link=8417921f731442ebad73e87ece3d8588)

[Available online at this link](https://www.knowledgeshare.nhs.uk/index.php?PageID=link_resolver&link=9e3106bb11429b149a0a5e6d5dbb592f)

1. **Building a country that works for all children post COVID-19**  
   ASSOCIATION OF DIRECTORS OF CHILDREN'S SERVICES 2020;:13.

This discussion paper looks at the impacts of Covid-19 on children and their families. Its purpose is three-fold: to put children, young people and their lived experiences of the pandemic front and centre in national recovery planning; to articulate what is needed to restore the public support services they rely on; and to capture the positives and gains made during a very complex national, and indeed, global emergency. The paper reveals that the directors of children’s services in England share concerns about increased exposure of children to ‘hidden harms’ such as domestic violence and the impact of social distancing on children and young people’s development and on their mental and emotional health and wellbeing. The vulnerability of specific cohorts, including care leavers, young carers, children and young people in conflict with the law and families with no recourse to public funds, has been heightened during this period. Covid-19 has disrupted professionals’ relationships with children and families and weakened the sustainability of both the voluntary and charitable sector and the early years and childcare sector. Both families and the workforce have shown great levels of resilience, flexibility and creativity. The paper calls for a rapid review of the response to the first phase of the pandemic to improve preparedness for future waves and spikes of infection, arguing that the experiences of practitioners and of children and families must be part of this process. It also suggests that the recovery phase offers the government an opportunity to further its ‘levelling up’ agenda, and the initiation of an ambitious, world leading health inequalities strategy, making wellbeing rather than straightforward economic performance the central goal of policy.

[Available online at this link](https://www.knowledgeshare.nhs.uk/index.php?PageID=link_resolver&link=8c72cd6c75e420c12fa4af61d401bcbe)

1. **Care in the time of Covid-19: nurturing our children**  
   TAYLOR Caitlin J. Scottish Journal of Residential Child Care 2020;:1-8.

In recent years there has been increasing emphasis placed upon the value of nurturing practice within children’s services in Scotland. The outbreak of COVID-19 is having an invisible, yet devastating, impact on our most vulnerable children. For most there is no school, no sports or social activity. Many children are witnessing their parents losing employment or falling ill. The longer the outbreak lasts the deeper the consequences will be on children’s life chances; their social and emotional development, their behaviour and learning.

[Available online at this link](https://www.knowledgeshare.nhs.uk/index.php?PageID=link_resolver&link=c529cb932713bf15b10d0d43bd6ad188)

[Available online at this link](https://www.knowledgeshare.nhs.uk/index.php?PageID=link_resolver&link=9e3106bb11429b149a0a5e6d5dbb592f)

1. **Changes to the adoption and children regulations: coronavirus (COVID-19)**  
   GREAT BRITAIN. Department for Education 2020;:63.

This consultation seeks views on proposed changes to the Adoption and Children (Coronavirus) (Amendment) Regulations 2020. The coronavirus (COVID-19) pandemic continues to present significant challenges to the country, including the way children’s social care services are delivered. The amendments to the regulations are temporary and will expire on 25 September 2020 – the proposed changes seek to extend a small number of these to manage future challenges. The first part of the document sets out the reason the amendments were needed and what is done to monitor the use of the flexibilities. The subsequent parts of the document set out the regulations that would need to lapse and detail on those that should be extended. The consultation closes on 5 August 2020.

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1. **Child and family social work during the COVID-19 pandemic: a rapid review of the evidence in relation to remote leadership**  
   WILKINS D. 2020;:23.

A review of the evidence on barriers and facilitators to effective remote leadership. As a result of the COVID-19 pandemic, and associated lockdown, one key challenge for those in leadership roles is how best to support and manage their teams when working remotely. The review identifies five facilitators: leadership style – leaders need to be flexible, and provide task-oriented and relationship-based support; communication – needs to be regular and allow for the sharing of ideas; team organisation – leaders need to pay special attention to team coordination and set specific goals for team members; team cohesion – leaders need to be visible to all team members and facilitate (non-mandatory) social as well as work-related activities; and focus on team performance – leaders need to set clear goals, provide regular feedback and allow more time and flexibility around task completion. The evidence also suggests four main barriers to effective remote leadership, including: diluted and unequal leadership – the impact of the leader is likely to be diluted and previous methods of working may not be as effective, the demands of remote leadership may not be felt equally by female and male leaders; communication – there will be an absence of opportunities for informal discussions; team cohesion – conflict or fault-lines between team members may emerge; team performance – individuals will find it harder to collaborate and overall team performance may be less productive than normal.

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1. **Child maltreatment online education for healthcare and social service providers: Implications for the COVID-19 context and beyond.**  
   Kimber Melissa Child abuse & neglect 2020;:104743.

Evidence indicates that healthcare and social service providers (HSSPs) receive inadequate education related to recognizing and responding to child maltreatment. This is despite the fact HSSPs are identified as an important factor in the primary, secondary, and tertiary prevention of this childhood exposure. The need for online education for HSSPs' is highlighted during the COVID-19 pandemic restrictions and will continue to be relevant afterward. The objective of this commentary is to provide an overview of: (a) educational interventions for HSSPs' related to recognizing and responding to child maltreatment; (b) the development of VEGA (Violence, Evidence, Guidance, Action), which is an online platform of educational resources to support HSSPs to recognize and respond to child maltreatment; and (c) the RISE (Researching the Impact of Service provider Education) project, which is an ongoing multi-province evaluation of VEGA in Canada. It is important to consider ongoing ways that HSSPs can receive education related to recognizing and responding to child maltreatment. The virtual implementation of VEGA and the RISE Project provide a necessary opportunity to continue to increase the capacity of Canada's HSSPs to adequately and safely recognize and respond to child maltreatment, while simultaneously advancing education scholarship for the field of child maltreatment and which will have relevance for the COVID-19 context and beyond.

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1. **Child protection in a pandemic**  
   NAQVI Shahid Professional Social Work 2020;:14-15.

Social workers Sian Miljkovic and Emily Hill share their experiences of working with children and families during the COVID-19 outbreak. Issues highlighted include: working from home during lockdown; concerns about lack of personal protective equipment (PPE) how the pandemic has impacted on the work of a child protection social worker. One of the key issues highlighted is that the services that keep placements going, for example CAMHS and schools have closed down and means that universal support for families that social workers that are usually in place have dropped away. This raises safeguarding risks, because other professionals or services are not seeing children and families, and puts added pressure on social workers to keep up with their caseloads. Other concerns raised include that children could be at risk in their homes because they are locked up with perpetrators of violence, with parents of drug and alcohol addiction, parent with poor mental health who cannot access the support services they had before. Concerns over contact arrangements during the pandemic were also raised. The social workers interviewed suggest that the workload for social workers will be even greater after the crisis is over, particularly in relation to domestic abuse. The social workers also discuss how they are using technology as best they can to continue working with service users remotely but note that this is dependant on families having technology and being online.

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1. **Child safety, protection, and safeguarding in the time of covid-19 in great britain: Proposing a conceptual framework**  
   Levine Diane Thembekile Child Abuse & Neglect 2020;:No page numbers.

BACKGROUND: Great Britain has the highest coronavirus death rate in Europe. While the pandemic clearly poses a risk to the lives and wellbeing of vulnerable groups, necessary public health measures taken to delay or limit the spread of the virus have led to distinctive challenges for prevention, family support, court processes, placement and alternative care. The pandemic has also come about at a time when statutory changes to partnerships have led to a reduction in the importance of educational professional representation in the new formulation in England and Wales. OBJECTIVES: In this discussion paper, we propose a novel and pragmatic conceptual framework during this challenging time. PARTICIPANTS: We consulted with 8 education professionals and 4 field-based student social workers. SETTING: Bodies responsible for safeguarding have been working quickly to develop new approaches to fulfilling their responsibilities, for example through online home visits and case conferences. However, some communities have been highlighted as experiencing particular challenges because of the pandemic and its impacts. Protection of vulnerable children is increasingly dependent on individualised - and often pathologising - practice with a lack of emphasis on the importance of the social. Holistic consideration of the child is side-lined. RESULTS: Our framework comprises two phases: pandemic and aspirational. CONCLUSION: The framework illuminates the importance of interconnected sectors and multi-agency working, the need for resilient and adaptable support systems, and the need to promote the importance of children’s rights and voices to be heard above the noise of the pandemic. (PsycInfo Database Record (c) 2020 APA, all rights reserved) (Source: journal abstract)

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1. **Child welfare in the midst of the coronavirus pandemic-Emerging evidence from Germany.**  
   Jentsch B. Child abuse & neglect 2020;:104716.

BACKGROUND: The coronavirus pandemic has had a major impact on the situation and well-being of children and their families, while simultaneously affecting the ability of welfare services for children and youth to support vulnerable families. As measures of contact restrictions were introduced to contain the virus, and schools and childcare facilities closed, the potential risk to child welfare could hardly be overlooked. OBJECTIVES: Focusing on Germany, this article aims to explore some of the effects of the COVID-19 measures on children and families. Furthermore, it examines a number of key challenges for child protection practitioners. These include identifying potential cases of child maltreatment without the support normally provided by teachers and child carers; and establishing and maintaining contact with clients under physical distancing rules. METHODS: The article is based on a review of German and English language scientific and journalistic articles, position papers from professional associations and other gray literature. It benefits from recently published (interim) results of empirical studies conducted in Germany, which explore child welfare issues in the pandemic. CONCLUSION: Under COVID-19, the child welfare system faces unprecedented challenges and uncertainty (e.g. (partial) loss of cooperation opportunities with key partners) whilst showing signs of remarkable resilience (e.g. child protection workers' ability to adjust to new conditions). While the potential of digitalising work processes in child protection has become apparent in the pandemic, the proven continuous face-to-face contact between practitioners and their clients is neither dispensable nor replaceable.

1. **Child welfare workers and peritraumatic distress: The impact of COVID-19.**  
   Miller JJ Children and youth services review 2020;119:105508.

Whilst there is broad consensus that COVID-19 has had a pernicious impact on child welfare services, in general, and child welfare workers, specifically, this notion has not been thoroughly examined in the literature. This exploratory study examined COVID-19 related peritraumatic distress among child welfare workers (N = 1996) in one southeastern state in the United States (U.S.). Findings suggest that the study sample was experiencing distress levels above normal ranges; 46.4% of participants were experiencing mild or severe distress. Sexual orientation, self-reported physical and mental health, relationship status, supervision status, and financial stability impacted distress levels experienced by child welfare workers. Overall, data suggest that COVID-19 is impacting child welfare workers and there is a need to conceptualize, implement, and evaluate initiatives aimed at assuaging distress among child welfare workers.

1. **Childhood in the time of Covid**  
   CHILDREN'S COMMISSIONER FOR ENGLAND 2020;:35.

Examining the impact of the Covid-19 crisis on children, this report provides a roadmap for what should be done to help them recover from their experiences of the last six months and the ongoing crisis. It focuses on specific aspects and settings that affect children’s experiences, including: education; children with special educational needs and disabilities; social care; looked after children and care leavers; health; early years; youth justice; housing; and family life. Even before the crisis struck, there were 2.2 million vulnerable children living in risky home situations in England, including nearly 800,000 children living with domestic abuse and 1.6 million living with parents with severe mental health conditions. The report warns these numbers are likely to have swelled, fuelled by families locked down in close quarters for weeks and months, and an emerging economic crisis adding pressures on family finances. Some of the most vulnerable children, including children in care, children in custody and children with Special Educational Needs or Disabilities have seen their rights actively downgraded at a time when protections should have been increased, not weakened. The report makes a number of recommendations, calling for a comprehensive recovery package for children to mitigate the damage caused by the crisis thus far – through greater investment in early help services, targeting resources to reduce educational disparities between disadvantaged children and their wealthier peers, increasing focus on pastoral care, and pushing back as far as possible next year’s summer exams; and for children to be put at the heart of planning for further lockdowns, local or national – ensuring children’s rights and protections are upheld, ensuring respite services for disabled children and their families continue to operate, and reviewing the rule of six over time with a view to exempting children under 12.

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1. **Children on the brink: Risks for child protection, sexual abuse, and related mental health problems in the COVID-19 pandemic**  
   Ramaswamy S. Indian Journal of Psychiatry 2020;62(9):No page numbers.

In developing contexts such as India, children in adversity form a high-risk group, one that cannot be subsumed under the general category of children, who are generally considered as a vulnerable group in disaster and crisis situations. Child mental health issues in contexts of protection risks and childhood adversity tend to be over-looked in such crises. This article focuses on examining the impact of the COVID-19 pandemic and its socio-economic consequences on children in adversity, describing the increased child protection and psychosocial risks they are placed at, during and in the immediate aftermath of the COVID-19 crisis and its lockdown situation. It specifically links the lockdown and the ensuing economic issues to sexuality and abuse-related risks, as occur in contexts of child labour, child sex work and trafficking, child marriage and child sexual abuse, and that result in immediate and long-term mental health problems in children. It proposes a disaster risk reduction lens to offer recommendations to address the emerging child protection, psychosocial and mental health concerns. <br/>Copyright &#xa9; 2020 Indian Journal of Psychiatry Published by Wolters Kluwer-Medknow.

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1. **Children's social care: Government consultation response**  
   GREAT BRITAIN. Department for Education 2020;:19.

Sets out the Government’s response to a consultation seeking views on proposed changes to the Adoption and Children (Coronavirus) (Amendment) Regulations 2020. These are intended to provide flexibilities to support the effective delivery of children’s social care services, whilst ensuring children’s safety. A majority of responses were in favour of each of the proposals to extend individual regulations on medical reports, virtual visits, and the continued suspension of the regular cycle of Ofsted inspections of children’s services providers. The majority of responses also agreed that all other temporary flexibilities introduced in April 2020 should lapse and the need to introduce additional safeguards. However, many consultees also raised concerns in the way the regulations were introduced, and many felt the regulations should not be extended and should be revoked immediately. On the basis of responses to the consultation the Government has decided to continue with plans to allow the majority of regulations to lapse on 25 September, save those specifically set out in this document, on medical assessments, virtual visits and Ofsted inspections. The Government has no plans to extend the regulations beyond March 2021.

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1. **Contact during lockdown: how are children and their birth families keeping in touch? Briefing paper**  
   NEIL Elsbeth 2020;:7.

This briefing presents key findings from a survey and interviews with professionals, birth parents, foster carers, kinship carers and adoptive parents, in order to understand what arrangements agencies are putting in place to support children to keep in touch with their birth families during lockdown during the coronavirus. It also looks at what works in relation to digital forms of contact and available guidance to help manage digital contact. The recommendations highlight the need for special consideration around virtual contact between babies and young children and their parents needs; and for children’s family contact in lockdown should draw on the principles of best practice that have been learned from the wider research around contact for children. The research was commissioned by the Nuffield Family Justice Observatory and carried out by researchers and the Centre for Research on Children and Families, University of East Anglia in April 2020.

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1. **Coronavirus (COVID-19): guidance for children's social care services**  
   GREAT BRITAIN. Department for Education 2020;:No page numbers.

Advice about coronavirus (COVID-19) for local authorities to help support and protect vulnerable children. It includes answers to frequently asked questions in the areas of: Alternative provision, Children's safeguarding, Children's residential care, Unaccompanied asylum-seeking children, Care leavers, Foster care, Adoption, and social workers in children's social care. The guidance is for local authorities, those who have corporate parenting responsibilities, and local safeguarding partnerships who work together to safeguard and promote the welfare of all children in their area. It will also be of interest to social workers, residential care providers and those with safeguarding responsibilities. [Last updated 25 September 2020].

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1. **Coronavirus (COVID-19): guidance on vulnerable children and young people**  
   GREAT BRITAIN. Department for Education 2020;:No page numbers.

Government guidance providing answers to a range of questions about the provisions being made for vulnerable children and young people during the Coronavirus outbreak. It covers provisions for children supported by the child social care system, those with education health and care (EHC) plans, and those in alternative provision settings.

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1. **Coronavirus Disease 2019 (COVID-19) in Children: Vulnerable or Spared? A Systematic Review.**  
   Saleem H. Cureus 2020;12(5):e8207.

The ongoing pandemic of coronavirus disease 2019 (COVID-19) has affected people from all cultures, religions, gender, and age groups around the world. In the last few months, several studies have been conducted on various aspects of COVID-19. Our goal was to see if the pediatric population is vulnerable to this infection. In this review, we conducted extensive research mainly by using the PubMed database. We used Medical Subject Headings (MeSH) and associated keywords to engage in an extensive search focussing on COVID-19 in the pediatric population. We discovered that most of the studies were from China, and some of them were in the Chinese language. However, English translations of many of the studies were available. For accessing the relevant statistical data, we relied on the World Health Organization (WHO) resources and the official website of the Ontario Government (ontario.ca). Most of the studies showed that the virus has affected the pediatric population. However, we found some differences among these studies regarding the severity of symptoms in children affected by COVID-19. While a few studies stated that the virus has presented with milder symptoms in the pediatric population, some studies have presented data of children who have suffered life-threatening complications due to COVID-19. Although the data is limited, we have been able to conclude from the studies we reviewed that COVID-19 does indeed affect children the same way as any other age group. Moreover, children can act as carriers of the virus and can endanger the lives of other individuals. Besides, neonates and infants can easily acquire the infection from family members without having any exposure to the outside world. Hence, utmost care should be taken while handling this population. More trials and studies should be conducted to analyze the impact of early diagnosis of infection in children and its management.

1. **Coronavirus: separated families and contact with children in care FAQs (UK)**  
   FOSTER David 2020;:10.

This briefing paper provides information in response to key questions regarding the impact of the Coronavirus outbreak on separated families, maintenance arrangements and access to children. It addresses: whether children move between the homes of separated parents; how parents should comply with a court-orders for contact; how are child maintenance payments impacted; can I visit my child in care/residential home; alternative arrangements when child contact centres are; and sources of help and advice. The paper notes that it is a fast-moving issue and the information was correct at the time of publication.

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1. **Costing of actions to safeguard vulnerable Mexican households with young children from the consequences of COVID-19 social distancing measures.**  
   Vilar-Compte M. International journal for equity in health 2020;19(1):70.

COVID-19 has imposed unprecedented challenges to society. As the pandemic evolves, the social distancing measures that have been globally enforced, while essential, are having undesirable socioeconomic side effects particularly among vulnerable populations. In Mexico, families who depend upon informal employment face increased threats to their wellbeing, and households who in addition have young children may face long-term consequences. The Mexican government has not yet taken actions, but a coalition of non-governmental organizations is advocating in partnership with academic institutions for social protection actions such as a cash transfer and basic services subsidies for families with young children, subsisting from the informal sector economy. To facilitate governmental action, we estimated the costs for implementation of these recommendations. The methodology used could be replicated in other countries facing similar challenges.

1. **COVID-19 and inequalities**  
   BLUNDELL Richard 2020;:28.

This report brings together what has emerged so far about the impact of the COVID-19 pandemic on inequalities across several key domains of life. It provides an overview of the state of inequalities before the pandemic; examines how the pandemic interacts with existing inequalities, particularly in relation to sector shutdowns, working from home and key workers, families with children, school closures, health risks and vulnerable people; and considers the implications for future inequalities. The study finds that the nature of the economic shock associated with the pandemic has interacted with many old inequalities, with young people and BAME groups being particularly affected. In addition, some ethnic minority groups have had higher death rates than the rest of the population. The report also highlights some opportunities resulting for examples from an expansion of remote working and changes in attitudes toward the welfare system, which may contribute to address and reduce some of the current inequalities.

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1. **COVID-19 and Parent-Child Psychological Well-being.**  
   Gassman-Pines Anna Pediatrics 2020;146(4):No page numbers.

BACKGROUND AND OBJECTIVESThe outbreak of coronavirus disease 2019 has changed American society in ways that are difficult to capture in a timely manner. With this study, we take advantage of daily survey data collected before and after the crisis started to investigate the hypothesis that the crisis has worsened parents' and children's psychological well-being. We also examine the extent of crisis-related hardships and evaluate the hypothesis that the accumulation of hardships will be associated with parent and child psychological well-being.METHODSDaily survey data were collected between February 20 and April 27, 2020, from hourly service workers with a young child (aged 2-7) in a large US city (N = 8222 person-days from 645 individuals). A subsample completed a one-time survey about the effects of the crisis fielded between March 23 and April 26 (subsample n = 561).RESULTSOrdered probit models revealed that the frequency of parent-reported daily negative mood increased significantly since the start of the crisis. Many families have experienced hardships during the crisis, including job loss, income loss, caregiving burden, and illness. Both parents' and children's well-being in the postcrisis period was strongly associated with the number of crisis-related hardships that the family experienced.CONCLUSIONSConsistent with our hypotheses, in families that have experienced multiple hardships related to the coronavirus disease 2019 crisis, both parents' and children's mental health is worse. As the crisis continues to unfold, pediatricians should screen for mental health, with particular attention to children whose families are especially vulnerable to economic and disease aspects of the crisis.

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1. **COVID-19 Impacts on Child and Youth Anxiety and Depression: Challenges and Opportunities.**  
   Courtney Canadian Journal of Psychiatry 2020;65(10):688-691.

The authors comment on impact of Covid-19 on child and youth anxiety and depression. Topics discussed include reasons health care workers who see young people should remain vigilant when infected with Covid-19, most common mental disorders in children and youth, and how the typical development and expression of mood and anxiety problems will change as the impact of Covid-19 evolves.

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1. **COVID-19 pandemic: The impact on vulnerable children and young people in Australia.**  
   Jones Benjamin Journal of paediatrics and child health 2020;:No page numbers.

The COVID-19 pandemic and associated system disruptions are impacting all children and young people (CYP) in Australia. For vulnerable groups of CYP, who already experience poorer health and well-being, these impacts are amplified. Challenges include reduced access to usual services, reduced community supports, financial instability, unemployment and other life circumstances that threaten to widen pre-existing inequities. This article aims to present the reasons for vulnerability of CYP during the pandemic, and to focus on actions by health professionals that mitigate additional challenges to their health and well-being. Using a rapid review of the literature and team-based discussions, eight vulnerable groups were identified: CYP with disabilities, mental health conditions and chronic diseases; CYP facing financial hardship; within the child protection system; Aboriginal; migrant and refugee; in residential care; rural; and isolated CYP. Recommendations for action are required at the level of governments, health professionals and researchers and include enhancing access to health and social supports, prioritising vulnerable CYP in resuming health activity and elevating the voice of CYP in designing the response. The pandemic can be conceptualised as an opportunity to create a more equitable society as we document the inequities that have been exacerbated. Vulnerable groups of CYP must be recognised and heard, and targeted actions must focus on improving their health outcomes during the pandemic and beyond.

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1. **COVID-19 series: briefing on children’s social care providers, September 2020**  
   OFSTED 2020;:10.

Findings from assurance visits to children’s homes under the social care common inspection framework (SCCIF) made between 1 and 11 September. This analysis covers visits to 70 homes, which were selected according to risk. Overall, the assurance visits found that most children’s homes had been managing the challenges of the COVID-19 (coronavirus) pandemic well. They had put suitable measures in place to ensure that children were safe and they remained aware of the possible impacts on children’s emotional well-being. However, homes that were not managing well before the pandemic continued to struggle. Of the visits analysed, nine identified serious and widespread concerns. Key findings include: inspectors were generally confident that children were safe and well cared for; homes reported an increase in anxiety and frustration in children around COVID19; staff worked hard to make homes fun and provided activities to support learning; staff helped children to maintain relationships with friends and families through messaging and video technology and worked with partners to ensure that specialist services continued; there was some evidence of less oversight in many homes, but much more evidence of strong leaders managing the challenges of the pandemic well.

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1. **COVID-19: consequences for the child welfare system in Catalonia**  
   ORTEGA Daniel Scottish Journal of Residential Child Care 2020;:1-6.

How has confinement by COVID-19 affected the welfare system for children and adolescents? The aim of this article is to reflect on the consequences of the global pandemic on the child welfare system, analysing the main consequences on children, adolescents and educational teams. The context of analysis focuses on the author's experiences in the child welfare system in Catalonia (Spain) during the pandemic, through his work as a social educator and researcher. The purpose of this article resides, therefore, in the reflection and subsequent proposals with the aim of redefining the system and improving the care of supervised children and adolescents.

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1. **COVID-19: guidance for 16-21+ jointly commissioned supported accommodation settings**  
   NORTHERN IRELAND. Department of Health 2020;:19.

Guidance for providers of jointly commissioned/funded supported accommodation projects for young people aged 16-21+ in Northern Ireland to support planning and preparation for widespread transmission of the coronavirus (COVID-19). This guidance sets out key messages, and includes information on: what to do if someone develops symptoms of COVID-19, what to do if someone refuses to self-isolate, use of shared spaces, hygiene and infection control, and Personal Protective Equipment (PPE). The guidance may be updated to reflect the changing situation.

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1. **COVID-19: guidance for residential children's homes in Northern Ireland**  
   NORTHERN IRELAND. Department of Health 2020;:22.

This guidance sets out key messages to support planning and preparation to respond to the risk of widespread transmission of the coronavirus (COVID-19). It applies to all registered providers of residential children’s homes, including independent sector providers. Key messages focus on: protecting the safety and wellbeing of children, young people and staff; effective multi-agency collaborative working; and the need be aware of updated guidance. The guidance may be updated to reflect the changing situation.

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1. **COVID-19: Guidance to accompany the Children's Social Care (Coronavirus) (Temporary Modification of Children’s Social Care) Regulations (Northern Ireland) 2020**  
   NORTHERN IRELAND. Department of Health 2020;:18.

Guidance issued in conjunction with temporary modifications to Health and Care Trusts’ statutory functions in respect of looked after children, including some children awaiting adoption, and care leavers, which have been brought into effect by the Children’s Social Care (Coronavirus) (Temporary Modification of Children’s Social Care) Regulations (Northern Ireland) 2020. The functions covered by the regulations include: visits by social workers to looked after children; reviews of foster carers, looked after children, care leavers and children placed or awaiting placement for adoption; approvals for foster carers and placements); and Secure Accommodation reviews.

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1. **COVID-19: survey of residential services in Ireland during the lockdown restrictions**  
   MURPHY John Scottish Journal of Residential Child Care 2020;:1-8.

Resulting from the outbreak of COVID-19 and the subsequent lockdown, EPIC (Empowering People in Care), a national voluntary organisation in Ireland working with and for children and young adults who are currently in care or who have experience of being in care, decided to contact all young people’s residential centres in Ireland. Often the young people that live in residential homes are the forgotten children in care, so it was important to reach out to ensure that their issues were being heard. The survey concentrated on the needs of the young people, issues affecting staff, how work practices had changed and what extra supports were needed. The responses were positive on many levels and certainly the voices of the young people and the staff were heard.

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1. **Cross-departmental actions for vulnerable children and young people during the Covid-19 pandemic period: consultation document**  
   NORTHERN IRELAND. Department of Health 2020;:13.

This plan has been developed in response to the challenges and risks facing children, young people and their families in Northern Ireland due to the Covid-19 pandemic. It is intended to reflect a series of activities that will be, or have been, undertaken across the Executive to meet the needs of vulnerable children, young people and their families during this time and in the recovery period after. The aim of the plan is to promote the safety and well-being of children and young people during the Covid-19 pandemic period within the home environment and within the wider community; and to strengthen system capacity to respond to current challenges and risks; and rebuild services. This consultation seek to ensure to ensure the plan reflects the activities that are being undertaken to support children and vulnerable families during Covid-19; reflects how services have adapted and enhanced provision to continue to support children and families during Covid-19; and includes new actions, which have been undertaken specifically to address some of lockdown's risks and challenges.

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1. **Data-informed recommendations for services providers working with vulnerable children and families during the COVID-19 pandemic.**  
   Wilke NG Child abuse & neglect 2020;:104642.

BACKGROUND: The COVID-19 pandemic and associated response measures have led to unprecedented challenges for service providers working with vulnerable children and families around the world. OBJECTIVE: The goal of the present study was to better understand the impact of the pandemic and associated response measures on vulnerable children and families and provide data-informed recommendations for public and private service providers working with this population. PARTICIPANTS AND SETTING: Representatives from 87 non-government organizations (NGOs) providing a variety of direct services (i.e. residential care, family preservation, foster care, etc.) to 454,637 vulnerable children and families in 43 countries completed a brief online survey. METHODS: Using a mixed methods design, results examined 1) ways in which children and families have been directly impacted by COVID-19, 2) the impact of the pandemic on services provided by NGOs, 3) government responses and gaps in services for this population during the pandemic, and 4) strategies that have been effective in filling these gaps. RESULTS: Data revealed that the pandemic and restrictive measures were associated with increased risk factors for vulnerable children and families, including not having access to vital services. The NGOs experienced government restrictions, decreased financial support, and inability to adequately provide services. Increased communication and supportive activities had a positive impact on both NGO staff and the families they serve. CONCLUSIONS: Based on the findings, ten recommendations were made for service providers working with vulnerable children and families during the COVID-19 pandemic.

1. **Debate: Recognising and responding to the mental health needs of young people in the era of COVID-19**  
   Danese Andrea Child and Adolescent Mental Health 2020;25(3):169-170.

The COVID-19 pandemic has been repeatedly described as a ‘perfect storm’ for mental health, and this description is certainly fitting for the mental health of young people. On the one hand, the pandemic and related restrictions to daily activities have exposed young people to known risk factors for psychopathology: perception of threat, such as the infection and its dramatic health consequences; the many negative consequences of school closure – from social isolation to disruption of routine and lack of structure, uncertainty about the future, and malnutrition for the most disadvantaged; reduced levels of enjoyable activities and physical activity; and, possibly, the direct effects of the infection on the brain. Beyond these individual risk factors, young people have also been affected by family stressors: parental mental illness, family financial stressors, child abuse/neglect, and complicated/traumatic bereavement. On the other hand, as observed in previous large-scale emergencies (Danese, Smith, Chitsabesan, & Dubicka, 2020), young people have been left without important external infrastructures that are normally in place to ensure their safety and provide support. The impact of school closure cannot be overstated here. Social services experienced a paradoxical situation whereby, despite concerns about the increased risk to children, they had to reduce activity because of the social distancing measures imposed through the lockdown. Child & Adolescent Mental Health Services (CAMHS) had similar trends and now have even longer waiting lists than before lockdown. Because the pandemic has reached in some ways or another every child in the population, population-level interventions will be needed to minimise the impact of the COVID-19 pandemic on young people’s mental health. (PsycInfo Database Record (c) 2020 APA, all rights reserved)

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1. **Delivering a Coronavirus recovery that works for children: summary and recommendations**  
   CHILDREN'S SOCIETY 2020;:8.

This briefing sets out an approach to delivering a recovery from the impact of COVID-19 that works for all children. Such an approach is underpinned by a set of principles, including taking an integrated and holistic approach, promoting children’s rights and entitlements, treating children as partners, reducing inequalities, committing to a comprehensive, long-term funding settlement, responding to the changed needs, investing in the workforce, adopting relationship-based, person-centred models of care. Experts from across the children’s sector have been working closely together to produce a set of briefings summarised in this paper. These briefings build on these principles to begin to set out an approach to delivering a recovery which works for children across six key areas: child poverty and social security; mental health and wellbeing; early years recovery; supporting children in care and care leavers; safeguarding and child protection; and school returns.

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1. **Delivering a recovery that works for children: full list of recommendations**  
   CHILDREN'S SOCIETY 2020;:16.

This briefing sets out a comprehensive set of recommendations to ensure recovery plans from Covid-19 work for all children and young people. Drawn up and endorsed by a number of leading children’s sector organisations, the recommendations support a vision that considers the needs of children, young people and their families in the round, from conception to age 25; puts their voices at the heart of the recovery process; and is committed to investing in the services and workforce that they rely on. The recommendations consider both the short and the long-term, focusing on child poverty and social security; mental health and wellbeing; early years recovery; school returns; children in care; keeping children safe; and the overarching principles for recovery.

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1. **Domestic violence and abuse: Safeguarding during the COVID-19 crisis**  
   SOCIAL CARE INSTITUTE FOR EXCELLENCE 2020;:No page numbers.

A SCIE quick guide aimed at professionals and organisations who are involved in supporting and safeguarding adults and children experiencing domestic abuse during the coronavirus (COVID-19) pandemic. It covers recognising abuse and the importance of multi-agency working. It also looks at how local authorities and charities are responding to the situation.

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1. **Effect of COVID-19 lockdown on child protection medical assessments: a retrospective observational study in Birmingham, UK.**  
   Garstang Joanna BMJ open 2020;10(9):e042867.

OBJECTIVESTo determine any change in referral patterns and outcomes in children (0-18) referred for child protection medical examination (CPME) during the COVID-19 pandemic compared with previous years.DESIGNRetrospective observational study, analysing routinely collected clinical data from CPME reports in a rapid response to the pandemic lockdown.SETTINGBirmingham Community Healthcare NHS Trust, which provides all routine CPME for Birmingham, England, population 1.1 million including 288 000 children.PARTICIPANTSChildren aged under 18 years attending CPME during an 18-week period from late February to late June during the years 2018-2020.MAIN OUTCOME MEASURESNumbers of referrals, source of disclosure and outcomes from CPME.RESULTSThere were 78 CPME referrals in 2018, 75 in 2019 and 47 in 2020, this was a 39.7% (95% CI 12.4% to 59.0%) reduction in referrals from 2018 to 2020, and a 37.3% (95% CI 8.6% to 57.4%) reduction from 2019 to 2020. There were fewer CPME referrals initiated by school staff in 2020, 12 (26%) compared with 36 (47%) and 38 (52%) in 2018 and 2019, respectively. In all years 75.9% of children were known to social care prior to CPME, and 94% of CPME concluded that there were significant safeguarding concerns.CONCLUSIONSSchool closure due to COVID-19 may have harmed children as child abuse has remained hidden. There needs to be either mandatory attendance at schools in future or viable alternatives found. There may be a significant increase in safeguarding referrals when schools fully reopen as children disclose the abuse they have experienced at home.

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1. **Exploring Children's Social and Emotional Representations of the COVID-19 Pandemic.**  
   Idoiaga Nahia Frontiers in psychology 2020;11:1952.

COVID-19, a new emerging infectious disease (EID), has spread throughout the world, including Europe. Spain, in particular, has witnessed a significant outbreak of the pandemic. All classes have been canceled, and the government has declared a state of emergency, ordering the lockdown and confinement of the entire population. All children in the country have been confined to their homes since March 13 and are not allowed to leave at any time. This population is thus facing the harshest restrictions. Given the vulnerable situation of children, the aim of this research is to understand how they represent and emotionally cope with the COVID-19 crisis. A free association exercise elicited by the word "coronavirus" was completed by 228 children (age range: 3-12 years) from the North of Spain. To analyze the content, we employed the Reinert method with Iramuteq software for lexical analysis. The results revealed that children represent the COVID-19 as an enemy that is being fought by the doctors. Children are afraid and worried about catching the virus, but mainly because they think they can infect their grandparents, and this makes them feel guilty. Moreover, the lockdown situation has produced conflicting emotions in the children. On the one hand, they are scared, nervous, lonely, sad, bored, and angry, but they also feel safe, calm, and happy with their families. These results indicate the need for governments to also consider children in their management of the current situation by placing greater emphasis on social and inclusive policies to help alleviate the possible effects that they may suffer as a consequence of the pandemic and the lockdown. In short, there is a need to address the psychological, educational, social, health, and well-being needs of children.

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1. **From unnoticed to invisible: the impact of COVID‐19 on children and young people experiencing domestic violence and abuse**  
   DONAGH Ben Child Abuse Review 2020;29(4):387-391.

This continuing professional development paper provides an overview of the impact that COVID‐19 has had on specialist services delivering support to children and young people experiencing domestic violence and abuse (DVA). It draws upon the experiences of being the operational manager of two specialist children's services. The target audience includes professionals working with young people in a range of settings including schools, youth clubs and statutory services. This understanding also contributes a valuable insight into those with a strategic or commissioning responsibility to provide support services for children and young people.

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1. **Health care providers must be alert for violence against children during the pandemic.**  
   Kang CMAJ: Canadian Medical Association Journal 2020;192(28):No page numbers.

We wish to commend Bradley and coauthors for their timely and insightful commentary on the critical issue of intimate partner violence in the context of the coronavirus disease 2019 pandemic, and practical ways for health care providers to identify and support victims.[1] In this discussion of intimate partner violence, it is imperative that we also consider the impact of the pandemic on violence against children in Canada and abroad. Together, these factors have led to a deeply troubling dichotomy - reports of child abuse are down and severity of cases is up.[5] We as health care providers continue to see children and families despite the pandemic and are uniquely situated to identify child maltreatment.

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1. **Home learning during the Covid-19 lockdown: the impact of school closures on care experienced children**  
   ADOPTION UK 2020;:28.

This report examines the challenges of supporting vulnerable children’s learning during the COVID-19 lockdown and makes recommendations for the months ahead. To find out about the impact of school closures on care experienced children, a week-long survey was carried out in April for parents and carers of care-experienced children who would normally be in school. There were 674 responses, which form the basis for this report. The survey revealed that the lockdown has had significant impacts on families, both positive and negative. Some have reported severe challenges, including increases in challenging behaviour, violence and aggression, and concerns about the mental wellbeing of both children and adults in the household. However, some families have reaped positive benefits, enjoying spending more time with their children and having more conversations with them, with many reporting that their children seem calmer without the stress of school. The report argues that planning now for the re-opening of school settings is crucial. It recommends that Governments in all four nations of the UK provide additional funding and resources to help schools support children, include support with learning and with wellbeing. In addition, specific guidance should be given to schools about supporting care experienced children and those with special and additional learning needs during school closures.

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1. **How COVID-19 Is Placing Vulnerable Children at Risk and Why We Need a Different Approach to Child Welfare.**  
   Herrenkohl Todd I. Child maltreatment 2020;:1077559520963916.

The onset of the COVID-19 pandemic brings new worries about the welfare of children, particularly those of families living in poverty and impacted other risk factors. These children will struggle more during the pandemic because of financial pressures and stress placed on parents, as well as their limited access to services and systems of support. In this commentary, we explain how current circumstances reinforce the need for systemic change within statutory child welfare systems and the benefits that would accrue by implementing a continuum of services that combine universal supports with early intervention strategies. We also focus on promising approaches consistent with goals for public health prevention and draw out ideas related workforce development and cross-sector collaboration.

1. **How is COVID-19 pandemic impacting mental health of children and adolescents?**  
   Marques de Miranda Debora International journal of disaster risk reduction : IJDRR 2020;51:101845.

The coronavirus disease (COVID-19) affected virtually all countries. Uncertain about the health risk and an increasing financial loss will contribute to widespread emotional distress and an increased risk of psychiatric disorders shortly. Posttraumatic, anxiety, and depression disorders are expected during and aftermath of the pandemic. Some groups, like children, have more susceptibility to having long term consequences in mental health. Herein, we made a comprehensive and non-systematic search in four databases (PubMed, Scopus, SciELO, and Google Scholars) to answer the question: What are children's and adolescents' mental health effects of the pandemic? Furthermore, which features are essential for mental health in a pandemic? Results: Seventy-seven articles were selected for full text read, and 51 were included. Children answer stress differently, depending on the development stage. High rates of anxiety, depression, and post-traumatic symptoms were identified among children. Discussion: Symptoms were as expected. New supportive strategies have appeared during this pandemic, but there is no measure of its effectiveness. Some groups seem to be more vulnerable to the mental health burden of the COVID-19 pandemic, and the mitigation actions should prioritize them. The school's role appears to be revalued by society. This review seems to pick good targets to prioritize mitigation actions aiming to spare children not only from the severe cases of COVID-19 but also to help them to deal with the mental health burden of the pandemics.

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1. **Impact of COVID -19 on children: special focus on the psychosocial aspect.**  
   Ghosh Ritwik Minerva pediatrica 2020;72(3):226-235.

Although medical literature shows that children are minimally susceptible to 2019-Corona virus disease (COVID-19), they are hit the hardest by psychosocial impact of this pandemic. Being quarantined in homes and institutions may impose greater psychological burden than the physical sufferings caused by the virus. School closure, lack of outdoor activity, aberrant dietary and sleeping habits are likely to disrupt children's usual lifestyle and can potentially promote monotony, distress, impatience, annoyance and varied neuropsychiatric manifestations. Incidences of domestic violence, child abuse, adulterated online contents are on the rise. Children of single parent and frontline workers suffer unique problems. The children from marginalized communities are particularly susceptible to the infection and may suffer from extended ill-consequences of this pandemic, such as child labor, child trafficking, child marriage, sexual exploitation and death etc. Parents, pediatricians, psychologists, social workers, hospital authorities, government and non-governmental organizations have important roles to play to mitigate the psychosocial ill-effects of COVID-19 on children and adolescents. To provide the basic amenities, social security, medical care, and to minimize the educational inequities among the children of the different strata of the society are foremost priorities.

1. **Impact of COVID-19 and lockdown on mental health of children and adolescents: A narrative review with recommendations**  
   Singh S. Psychiatry Research 2020;293:No page numbers.

Background: COVID-19 pandemic and lockdown has brought about a sense of fear and anxiety around the globe. This phenomenon has led to short term as well as long term psychosocial and mental health implications for children and adolescents. The quality and magnitude of impact on minors is determined by many vulnerability factors like developmental age, educational status, pre-existing mental health condition, being economically underprivileged or being quarantined due to infection or fear of infection. <br/>Aim(s): This paper is aimed at narratively reviewing various articles related to mental-health aspects of children and adolescents impacted by COVID-19 pandemic and enforcement of nationwide or regional lockdowns to prevent further spread of infection. Methodology: We conducted a review and collected articles and advisories on mental health aspects of children and adolescents during the COVID-19 pandemic. We selected articles and thematically organized them. We put up their major findings under the thematic areas of impact on young children, school and college going students, children and adolescents with mental health challenges, economically underprivileged children, impact due to quarantine and separation from parents and the advisories of international organizations. We have also provided recommendations to the above. <br/>Conclusion(s): There is a pressing need for planning longitudinal and developmental studies, and implementing evidence based elaborative plan of action to cater to the psycho social and mental health needs of the vulnerable children and adolescents during pandemic as well as post pandemic. There is a need to ameliorate children and adolescents' access to mental health support services geared towards providing measures for developing healthy coping mechanisms during the current crisis. For this innovative child and adolescent mental health policies policies with direct and digital collaborative networks of psychiatrists, psychologists, paediatricians, and community volunteers are deemed necessary.<br/>Copyright &#xa9; 2020

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1. **Impact of COVID-19 on children and young people**  
   WALES. Welsh Parliament. Children Young People and Education Committee 2020;:39.

This interim report outlines the activity to date of the Welsh Parliament Children, Young People and Education Committee in relation to the impact of COVID-19 on children and young people. While recognising that children and young people appear to be less susceptible to the virus than adults, the Committee stresses that the wider effects of Covid-19―and the measures taken to manage it―have impacted their lives significantly. Throughout the COVID-19 crisis, the Committee has focused its efforts on the Welsh Government’s response to the pandemic looking at the following main areas: arrangements for ensuring continued access to education and childcare for children and young people; the impact of COVID-19 on vulnerable children; the impact of COVID-19 on the physical and mental health of children and young people; and the impact of COVID-19 on higher and further education. The document argues that children and young people’s rights must be a priority in COVID-19 recovery plan in Wales.

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1. **Impacts of COVID-19 on vulnerable children in temporary accommodation in the UK.**  
   Rosenthal Diana Margot The Lancet. Public health 2020;5(5):e241.

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1. **Impacts of pandemics and epidemics on child protection: lessons learned from a rapid review in the context of COVID-19**  
   BAKRANIA Shivit 2020;:74.

This rapid review collates and synthesises evidence on the child protection impacts of COVID-19 and previous pandemics, epidemics and infectious disease outbreaks. It provides lessons for global and national responses to COVID19 and recommendations for future research priorities. While the evidence is limited, the findings suggest that there are various pathways through which infectious disease outbreaks can exacerbate vulnerabilities, generate new risks and result in negative outcomes for children. Outcomes are typically multi-layered, with immediate outcomes for children, families and communities – such as being orphaned, stigmatisation and discrimination and reductions in household income – leading to further negative risks and outcomes for children in the intermediate term. These risks include child labour and domestic work, harmful practices (including early marriage), and early and adolescent pregnancy. Lessons from previous pandemics and epidemics suggest that the following could mitigate the child protection risks: responding to children in vulnerable circumstances, including orphans (e.g. through psychosocial interventions focused on improving mental health and community-based interventions); responding to stigmatisation and discrimination (e.g. through information and communication campaigns and support from public health systems, communities and schools); investing in social protection to enable livelihoods during outbreaks and to counteract shocks; promoting access to health, protective and justice services, particularly for girls, who may be adversely affected. The report also argues that evidence generation strategies during and after the COVID-19 crisis should consider rigorous retrospective reviews and building upon monitoring, evidence and learning functions of pre-existing programmes.

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1. **Invisible children and non-essential workers: Child protection during COVID-19 in Israel according to policy documents and media coverage**  
   Katz C. Child Abuse and Neglect 2020;:No page numbers.

Background: The protection of children from maltreatment has become extremely challenging during the COVID-19 pandemic. The public's gaze is focused on the urgent health crisis, while many children are at risk due to social isolation and reduced social services. <br/>Objective(s): Examine child protection in Israel during COVID-19, as portrayed in mainstream news media and government policy documents. Participants and setting: The study analyzed all policy documents and mainstream media reports published in Israel from March to May 2020, during the initial mandatory nationwide quarantine. <br/>Method(s): (1) Search of relevant articles in mainstream news websites; (2) Search of documents in official websites of relevant government ministries and agencies. <br/>Result(s): 28 government policy documents and 22 media articles were found relevant. When examined chronologically, what stood out was the initial decision to shut down social services, including some of the residential care units for youth at risk, and declare social workers "non-essential". These decisions were revoked a few weeks into the quarantine, following persistent media pressure by child advocates, resulting in minor changes in policy. <br/>Conclusion(s): Children were initially invisible to Israeli policymakers facing the pandemic, highlighting the centrality of advocates promoting children's rights and of mainstream news media in disseminating the discourse of protecting children from maltreatment, especially in times of crisis. Moreover, the study points to the heightened threat to at-risk children due to inadequate policies, and to the urgent need to develop child protection policies in order to avoid further risk in future global crises.<br/>Copyright &#xa9; 2020 Elsevier Ltd

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1. **Lessons from lockdown: supporting vulnerable children and young people returning to school and to learning**  
   BARNARDO'S Cymru 2020;:20.

This briefing highlights what Action for Children Cymru and Barnardo’s Cymru have learnt from their services, practitioners, and partners in schools about the impact of COVID-19 on vulnerable children, young people and their families. It explores what might facilitate their recovery and promote their development as we emerge from the crisis. In particular it explores the support that may be needed in, and for, schools to support the mental health and well-being of vulnerable children and young people as they transition back into the learning environment; and to support vulnerable families so that, where possible, children and young people can remain at home safely and improve their well-being, development and learning. The evidence suggests that during a time of pandemic more children and families will require a range of support over the short to medium term. In order to address this expected need the briefing recommends a set of actions, including reviewing the Together for Mental Health Delivery plan to extend access to additional lower tier, non-clinical community based services, to all families with school aged children.

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1. **Leveraging parent–child interaction therapy and telehealth capacities to address the unique needs of young children during the COVID-19 public health crisis**  
   Gurwitch Robin H. Psychological Trauma: Theory, Research, Practice, and Policy 2020;12(S1):S82.

COVID-19 and related efforts to mitigate its spread have dramatically transformed the structure and predictability of modern childhood, resulting in growing concerns children may be particularly vulnerable to serious mental health consequences. Worldwide stay-at-home directives and emergency changes in healthcare policy and reimbursement have smoothed the trail for broad implementation of technology-based remote mental health services for children. Parent–Child Interaction Therapy (PCIT) is particularly well-positioned to address some of the most pressing child and parental needs that arise during stressful times, and telehealth formats of PCIT, such as Internet-delivered PCIT (iPCIT), have already been supported in controlled trials. This commentary explores PCIT implementation during the COVID-19 public health crisis and the challenges encountered in the move toward Internet-delivered services. (PsycInfo Database Record (c) 2020 APA, all rights reserved) (Source: journal abstract)

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1. **Managing the coronavirus pandemic in Portugal: A step-by-step adjustment of health and social services.**  
   Oliveira M. Psychological trauma : theory, research, practice and policy 2020;12(5):536-538.

This article presents an overview of what has been done in Portugal to curb the spread of coronavirus disease 2019 (COVID-19), regarding public health actions, mental health implications, and measures taken or recommended to prevent the harmful effects of the pandemic. Because Portugal has been pointed out as a case of success in managing the COVID-19 pandemic, this report offers opportunities to build on the experience gained, which may positively influence other countries, especially those that are still deeply affected by the COVID-19 pandemic. (PsycInfo Database Record (c) 2020 APA, all rights reserved).

1. **Managing through COVID-19: the experiences of children’s social care in 15 English local authorities: briefing paper**  
   BAGINSKY Mary 2020;:9.

Summarises the finding of a study examining the arrangements put in place in children’s social care services in 15 local authorities during the period of the COVID-19 lockdown. Findings cover: the social work workforce; referrals to children’s social care; work with families; foster care; care leavers; unaccompanied young people seeking asylum; residential homes; multi-agency working; cross-authority work; students and placements; recruitment; support for local authorities through COVID-19; planning for the end of lockdown; and lessons for the future. Lessons include: the use of technology in contacting parents should be approached with caution, taking account of the family’s ability to access it and their confidence in working in this way, and the service’s capacity to provide support in doing so; a proportion of meetings and other interactions will continue to be conducted virtually but these should be monitored to determine what it is effective and efficient to do and in what particular circumstances; the potential of technology to improve social workers’ engagement with young people has been established, but it is important to recognise that it will not work for everyone and there will be those who do not wish to use it in some circumstances; it will be important to build on positive developments that have emerged such as those in relation to multi-agency working.

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1. **MCR pathways lockdown survey: how to build back better: listening to the voices of our young people**  
   MCR PATHWAYS 2020;:35.

Findings of a survey of 1,347 care-experienced and disadvantaged young people (aged 13 -18) from across Scotland, gaining insight into their experience of the COVID-19 lockdown, specifically in relation to mental wellbeing, home learning, and impact on career plans and future expectations. Key findings on the impacts of the lockdown include: impact on mental wellbeing – two thirds (66.8%) of young people are feeling low, more anxious and stressed since lockdown and 88.8% said their sleeping patterns have changed and over a quarter (26.5%) said they were experiencing significantly disrupted sleep; impact on education and return to school – since lockdown, 68.2% did not use any learning materials provided by the school while, significantly, over a quarter had caring duties that impacted on their capacity for home learning; impact on the future – 64.8% of young people say that COVID-19 has not changed their future plans for what they want to do when they leave school and 38.5% of leavers are feeling confident about their next steps. The report makes a number of recommendations, including ensuring education is provided on a full-time basis, schools offer a recovery curriculum, and disadvantaged young people are systematically and comprehensively consulted as a matter of course throughout the formation of all recovery and rebuild plans.

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1. **Mitigate the effects of home confinement on children during the COVID-19 outbreak**  
   Wang Guanghai The Lancet 2020;395(10228):945-947.

In response to the coronavirus disease 2019 (COVID-19) outbreak, the Chinese Government has ordered a nationwide school closure as an emergency measure to prevent spreading of the infection. Public activities are discouraged. Although these measures and efforts are highly commendable and necessary, there are reasons to be concerned because prolonged school closure and home confinement during a disease outbreak might have negative effects on children’s physical and mental health. Evidence suggests that when children are out of school (eg, weekends and summer holidays), they are physically less active, have much longer screen time, irregular sleep patterns, and less favourable diets, resulting in weight gain and a loss of cardiorespiratory fitness. Such negative effects on health are likely to be much worse when children are confined to their homes without outdoor activities and interaction with same aged friends during the outbreak. Since the COVID-19 epidemic is no longer confined to China, school closure and home confinement related issues also become relevant in other affected countries. As children are vulnerable to environmental risks and their physical health, mental health, and productivity in adult life is deeply rooted in early years, close attention and great efforts are required to address these emergency issues effectively and avoid any longterm consequences in children. (PsycInfo Database Record (c) 2020 APA, all rights reserved)

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1. **Mitigating the Impacts of the COVID-19 Pandemic Response on At-Risk Children.**  
   Wong Charlene A. Pediatrics 2020;146(1):No page numbers.

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1. **Out of sight? Vulnerable young people: COVID-19 response**  
   NATIONAL YOUTH AGENCY 2020;:24.

This report highlights the scale of young people’s needs which have increased or been caused by the coronavirus (COVID-19) pandemic. It focuses on supporting and safeguarding vulnerable young people aged 8-19 with: ‘Known’ vulnerabilities amplified by COVID-19; At risk’ vulnerabilities exacerbated by COVID-19; and ‘Emerging’ vulnerabilities caused or triggered by COVID-19. The report draws on the latest data and vulnerability framework by the Office of the Children’s Commissioner for England and includes the views of partners and young people from across the youth sector. It identifies increased mental health problems, missing from education, increased risk at home, homelessness, self-harm and suicide, poverty, risky behaviours in potentially unsafe environments as key vulnerabilities for young people. It also identifies the potential role of youth work in alleviating these risks. It makes recommendations for Government to recognise youth services as an essential key service, and to encourage local authorities, children’s services and academy trusts to engage, deploy and up-skill youth workers in support of young people.

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1. **Physical child abuse demands increased awareness during health and socioeconomic crises like COVID-19: A review and education material**  
   Martinkevich P. Acta Orthopaedica 2020;:No page numbers.

Background and purpose - Physical abuse of children, i.e., nonaccidental injury (NAI) including abusive head trauma (AHT) is experienced by up to 20% of children; however, only 0.1% are diagnosed. Healthcare professionals issue less than 20% of all reports suspecting NAI to the responsible authorities. Insufficient knowledge concerning NAI may partly explain this low percentage. The risk of NAI is heightened during health and socioeconomic crises such as COVID-19 and thus demands increased awareness. This review provides an overview and educational material on NAI and its clinical presentation. Methods - We combined a literature review with expert opinions of the senior authors into an educational paper aiming to help clinicians to recognize NAI and act appropriately by referral to multidisciplinary child protection teams and local authorities. Results - Despite the increased risk of NAI during the current COVID-19 crisis, the number of reports suspecting NAI decreased by 42% during the lockdown of the Danish society. Healthcare professionals filed only 17% of all reports of suspected child abuse in 2016. Interpretation - The key to recognizing and suspecting NAI upon clinical presentation is to be aware of inconsistencies in the medical history and suspicious findings on physical and paraclinical examination. During health and socioeconomic crises the incidence of NAI is likely to peak. Recognition of NAI, adequate handling by referral to child protection teams, and reporting to local authorities are of paramount importance to prevent mortality and physical and mental morbidity.<br/>Copyright &#xa9; 2020, &#xa9; 2020 The Author(s). Published by Taylor & Francis on behalf of the Nordic Orthopedic Federation.

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1. **Preventing the disadvantage gap from increasing during and after the Covid-19 pandemic**  
   EDUCATION POLICY INSTITUTE 2020;:19.

This policy paper contains an assessment of the likely impact of COVID-19 on the outcomes of children and young people, particularly the most disadvantaged. The research finds that disadvantaged pupils are over 18 months behind their more affluent peers in attainment by age 16. In recent years, this gap has stopped closing and, even before the pandemic, there was a real risk that the gap would start to widen. The impact of the pandemic is expected to increase that risk. Research on attainment of children who have missed significant periods of schooling due to authorised absences suggest a large overall impact on attainment in addition to widening of the disadvantage gap that is expected based on studies of summer learning loss. In order to minimise the impact of COVID-19, particularly for the most vulnerable pupils, the paper makes a series of recommendations for government in relation to the role of wider services in supporting vulnerable children and young people; the effect of the pandemic in the early years; the cancellation of formal exams in summer 2020; supporting the most vulnerable groups; supporting young people in post-16, vocational and higher education; and improving the resilience of the sector in case of any future national emergency.

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1. **Problem posing during the COVID19 pandemic: rethinking the use of residential childcare**  
   GIBB Joe Scottish Journal of Residential Child Care 2020;:1-8.

Starting a new residential childcare service can be a daunting task at the best of times and, it could be argued, even more daunting during the wake of a global pandemic. Located in North Ayrshire, Compass Child and Family Services is a small charity providing support to children and families. The charity’s first children’s house, named Taigh Araich (which translated from Gaelic to English means Nurture House), offered a home to its first child during March 2020. The charity utilises the Social Pedagogy perspective within its philosophy of care and is beginning to connect the perspective to the Scottish context. In this article Joe Gibb, residential service manager at Taigh Araich, provides an overview of some of the learning that has taken place during the past five months. Joe concludes by arguing that social pedagogy and the GIRFEC (Getting It Right For Every Child) national practice model in Scotland, have an excellent fit in which a new residential childcare paradigm could emerge as society begins to make sense of the new normal that awaits its citizens.

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1. **Professional practice guidance for children and families social work during Covid-19**  
   BRITISH ASSOCIATION OF SOCIAL WORKERS 2020;:No page numbers.

Practice guidance support frontline practitioners and provide a framework to influence good practice within the workplace, as well as helping social workers to manage the ethical and emotional impact of their work. Developed by the British Association of Social Workers, the guidance is based on best available evidence, latest public health guidance, practice experience. It highlights the importance of strengths-based and relationship-based practice. It also provides a checklist to help social workers to order their thinking when working with vulnerable children and their families and when meeting their own support needs. It includes links to resources and organisations providing additional support for children, families and their social workers.

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1. **Psychological Wellbeing of Vulnerable Children During the COVID-19 Pandemic.**  
   Vallejo-Slocker L. Psicothema 2020;32(4):501-507.

BACKGROUND: A pandemic disaster has specific effects on mental health, however, little is known about those specific effects in children and adolescents. Thus, the aim of this study is to describe the psychological impact of the COVID-19 pandemic on a sample of children and adolescents and to compare the results with previous national data and other studies to determine variations. METHOD: A total of 459 children and adolescents in residential care, foster families, kinship families, or family strengthening programs under SOS Children's Villages Spain were evaluated using the SDQ to measure internalizing and externalizing problems and using KIDSCREEN-10 index to measure heath related quality of life. An independent sample t-test, one-way ANOVA and the chi-square test were used. RESULTS: The children and adolescents in this study had worse psychological wellbeing than those in the 2017 Spanish reference, that is, before the COVID-19 outbreak. Quality of life remained the same. No differences between care modalities were found. CONCLUSION: It is necessary to monitor the mental health status of children and adolescents to prevent possible problems. Additionally, it is necessary to use well-known assessment instruments because it is essential to have a reference to other situations and populations.

1. **Rapid return of children in residential care to family as a result of COVID-19: Scope, challenges, and recommendations.**  
   Wilke NG Child abuse & neglect 2020;:104712.

BACKGROUND: As a result of the COVID-19 pandemic, some governments have mandated that residential care providers rapidly return children and youth to family. OBJECTIVE: The goal of the present study was to better understand the scope and characteristics of rapid return, and to provide data-informed recommendations for service providers working with this population. PARTICIPANTS AND SETTING: Representatives from 67 non-government organizations (NGOs) providing residential care that were government-mandated to rapidly return children and youth to family completed a brief online survey. They collectively serve 12,494 children in 14 nations. METHODS: Using a mixed methods design, results examined 1) characteristics of the rapid return mandate, 2) preparation received by children and families, 3) support services provided since the return, and 4) primary concerns for children and families. RESULTS: Data revealed that rapid return was characterized by compressed timelines that did not allow for adequate child and family assessment and preparation. However, all respondents indicated they believed at least some families would be able to remain intact safely with appropriate support. Primary concerns for children and families related to unresolved antecedents to separation, lack of economic capacity, limited monitoring, and lack of access to education. CONCLUSIONS: Based on the findings, 9 recommendations were made for service providers working with children and families that have been rapidly reunified as a result of the COVID-19 pandemic.

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1. **Recovering from Covid-19: supporting children and families**  
   COUNTY COUNCILS NETWORK 2020;:20.

This short report draws on research on the funding of Children Social Care carried out by the County Councils Network, highlights some of the key findings which are likely to impact the ability of County Authorities to respond to the needs of children and families which is anticipated will arise from the Covid-19 crisis. The research found that declining funding and rising demand has meant councils have had to decrease spending on preventative services and early intervention services in order to ensure they meet their statutory duties. Local authorities have also become increasingly reliant on the Troubled Families Programme to support their preventative work with families. The report argues that as lockdown starts to lift, it is preventative services which councils will need to help support recovery in their communities. It makes recommendations to Government which include: reform of the Troubled Families programme beyond 2020/1 centred on helping families to recover from the Covid-19 emergency; and renaming the Troubled Families programme to become less stigmatising and more inclusive as the nature of the families targeted by the programme change due to the impact of Covid-19.

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1. **Relationships and resilience in the time of the Coronavirus**  
   HENDERSON Danny Scottish Journal of Residential Child Care 2020;:1-5.

Coming together as a community is an important function for members of The Why Not? Trust, a charity which supports long term connections and relationships between young people with care experience and the people who matter to them. These networks allow young people to access experiences and events which give opportunities they may not be able to access on their own. Their approach is based on a belief in being defined by relationships. The COVID-19 lockdown presented a challenge to relational engagements which are contingent upon being able to interact. Despite their fears they have managed to cope. The online world provided a way of maintaining contact and providing support with young care experienced adults. The experiences of the past few months helped the Trust better understand the causes of isolation and exclusion, but also to appreciate more than ever the value of human relationships.

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1. **Research briefing one: child protection, social distancing and risks from COVID-19**  
   FERGUSON Harry 2020;:9.

This briefing shares some emerging findings about the challenges of achieving social distancing during child protection work, especially on home visits, and how children and families and social workers can be kept safe from COVID-19. The data shows that social workers, family support workers and their managers have worked creatively in addressing the complex practical and moral dilemmas they have faced in implementing social distancing guidance and in aspiring to best practice in helping children and families. The briefing focuses in particular on the implication of going into homes, the impossibility of social distancing, and virtual home visits; Personal Protective Equipment (PPE) use and dilemmas; and the professional values that guide social workers’ decisions about whether or not to conduct in person visits, including selflessness, public accountability and leadership. On the basis of the very early findings from this research, the briefing advises that social work staff should be told that they do not have to take any personal risks they do not feel comfortable with; staff doing visits inside family homes need to be provided with full PPE while other creative ways of seeing children, like in gardens, on walks, and on virtual visits, need to continue; social work leaders and managers at all levels need to address organisational anxieties by constantly being clear with frontline staff that how their practice and record keeping is evaluated will take full account of the constraints placed on their work by COVID-19 and social distancing.

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1. **Research briefing two: disruption and renewal of social work and child protection during COVID-19 and beyond**  
   FERGUSON Harry 2020;:8.

This briefing shares some emerging findings about how COVID-19 has disrupted child protection and led children’s social care to improvise in creative ways that, if sustained post- pandemic, could renew practice and provide improved outcomes for children and families. The briefing focuses in particular on the challenges of social distancing; ways of being effective and achieving non-physical closeness to some families; hybrid practice – integrating face-to-face, digital and humane practice; the changing use of time – developing non-traditional ways of keeping in contact with families and children through various formats; doorstep and garden visits; mobile practice – e.g. going on walks with young people and sometimes parents and using parks and other open spaces near family homes to walk, play or just be together. While some such work has been enabled by conditions that are unlikely to persist – such as reduced rates of referral to assessment teams – data collected during this period yield insights that have the potential to renew policy and practice over the longer-term and provide improved outcomes for children and families.

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1. **Responding to COVID-19: issues affecting services for children and young people**  
   CHILDREN ENGLAND 2020;:3.

This paper highlights some of the issues that professional from across the children’s sector are experiencing in the course of their work during the coronavirus (Covid-19) pandemic. It highlights: difficulties in reaching children and young people in need of support; the large amount of often conflicting guidance and information being issued by agencies, local and national government and industry bodies; and concerns about the financial stability of organisations, particularly third sector organisations, and their ability to provider services. The briefing suggests solutions to address each issue.

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1. **Safeguarding children and families during the COVID-19 crisis**  
   SOCIAL CARE INSTITUTE FOR EXCELLENCE 2020;:No page numbers.

This SCIE quick guide is for practitioners working to safeguard children and families during the coronavirus (COVID-19) outbreak, including social workers and those working in social care settings. It looks at the factors that could place children at an increased risk of abuse, harm and exploitation during the COVID-19 pandemic; the types of abuse and harm are likely to be more prominent; and using strengths-based practice. It also considers the impact of reduced services and provides a checklist of things for family-facing practitioners to consider.

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1. **Screening for economic hardship for child welfare-involved families during the covid-19 pandemic: A rapid partnership response**  
   Fallon Barbara Child Abuse & Neglect 2020;:No page numbers.

BACKGROUND: Pandemics have a wide range of economic, health and social consequences related to both the spread of a disease and efforts made by government leaders to contain it which may be particularly detrimental for the child welfare-involved population. This is because child welfare agencies serve some of the highest needs children and families. A significant proportion of these families face economic hardship, and as a result of containment measures for COVID-19, more families inevitably will. OBJECTIVE: Given the range of negative consequences related to the pandemic and the evolving supports available to families, child protection workers needed a clinical tool to guide and support work with families informed by an understanding of economic hardship. The objective of this paper is to report on the development and implementation strategy of a tool to be used for practice intervention during the pandemic. METHODS: Action research methodology was utilized in the creation of the clinical tool. The tool’s development and implementation occurred through an academic/child welfare sector partnership involving child welfare agencies representing diverse regions and populations in Ontario, Canada. Factor analysis of representative child welfare data from the Ontario Incidence Study of Reported Child Abuse and Neglect 2018 (OIS-2018) on economic hardship was used to inform the development of questions on the clinical tool. RESULTS: The development and implementation strategy of the clinical tool are described, including the results from analyses of the OIS-2018. CONCLUSIONS: Future directions for the project are discussed, including considerations for using this tool beyond the pandemic. (PsycInfo Database Record (c) 2020 APA, all rights reserved) (Source: journal abstract)

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1. **Seeing the silver lining in the cloud: resiliency demonstrated by children in residential care in India during the Covid-19 crisis**  
   MODI Kiran Scottish Journal of Residential Child Care 2020;:1-6.

The main priority during the COVID-19 emergency for Udayan Care, an NGO based in Delhi, India, is to quickly assess the risks and take steps to mitigate them so that the children and youth in the care system, and the care leavers, already unsupported and left in the lurch, do not succumb to the harsh realities caused by the pandemic. This article describes ways in which children and staff have been adapting to the difficult circumstances they are facing.

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1. **Social Care Sector COVID-19 Support Taskforce: BAME Communities Advisory: report and recommendations**  
   SOCIAL CARE SECTOR COVID-19 SUPPORT TASKFORCE. BAME Communities Advisory Group 2020;:24.

This is the report of the BAME Communities Advisory Group (AG), established to make recommendations to feed into the work of the Social Care Sector COVID -19 Support Taskforce. It includes a summary literature review and selections of findings from consultations that the AG has drawn upon to make its recommendations. Part 2, is an appendix, containing the other material that informed the work of the AG. The methodology for developing the recommendations in this report comprised: a rapid literature review (UK Civil Service, 2014) to scope overall thematic issues and appraise existing research on the employment experiences of BAME professionals; an online survey of BAME professionals and service users and carers; two virtual consultations on Zoom of BAME service users and carers and professionals, using the focus group method; and key informant interviews of leaders of social care organisations and faith groups. The report make ten recommendations, including that that people with lived experience should be at the forefront of developing social care policy and guidance that affects BAME communities; and that there should be parity between staff working in the NHS and social care in research, the design, development and delivery of programmes that support BAME staff through this and future pandemics

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1. **Social work under coronavirus: children’s practitioners report bigger problems than adults’ colleagues**  
   TURNER Alex Community Care 2020;(04.06.2020):No page numbers.

The results from a survey carried out by Community Care about practice in England during the Covid-19 pandemic. The survey was completed by almost 500 people working in adults’, children’s and mental health services, 92 percent of them qualified social workers. An analysis of responses found considerable disparities between adults’ and children’s practitioners across the measures such as: satisfaction with their employer, access to personal protective equipment and whether they had faced practice situations that made them anxious. Adults' services staff were happier with access to personal protective equipment and less likely to report increases in workload during pandemic than children's practitioners.

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[Available online at this link](https://www.knowledgeshare.nhs.uk/index.php?PageID=link_resolver&link=ce8f209ca86d59297920d347256fd8cb)

1. **Supporting care-experienced children and young people during the Covid-19 crisis and its aftermath**  
   BRITISH PSYCHOLOGICAL SOCIETY 2020;:11.

This advice is intended for foster and kinship carers, adoptive parents, and professionals who work with care-experienced children in schools, residential care homes and other settings across the United Kingdom. The term ‘care-experienced’ is used with reference to all looked after and adopted children and those in kinship or residential care. The guidance has a focus on thinking about care-experienced children and young people particularly in relation to education during the Covid-19 pandemic. It covers self-care; support in feeling safe; stay connected; making the most of opportunities; and supporting transitions.

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1. **Supporting vulnerable children and young people during the coronavirus (COVID-19) outbreak: actions for educational providers and other partners**  
   GREAT BRITAIN. Department for Education 2020;:No page numbers.

Guidance for schools and local authorities about children supported through social care, with Education Health and Care (EHC) plans or identified as vulnerable by their school, college, early years provider or local authority. The guidance covers the identification of vulnerable children and young people; determining whether attendance at school or college is appropriate; supporting vulnerable children and young people's wellbeing; and responding to increased safeguarding concerns as more children return to on-site education provision. The guidance is for service providers, including: local-authority-maintained schools and academies, all alternative provision including pupil referral units local authorities and providers of children’s social care. [Published 22 March 2020. Updated 15 May 2020].

[Available online at this link](https://www.knowledgeshare.nhs.uk/index.php?PageID=link_resolver&link=7b48a31dc793e532d694b8b8c66d9178)

1. **Surviving COVID-19: social work issues in a global pandemic (Child protection and welfare, and social care)**  
   DOMINELLI Lena 2020;:9.

This briefing provides advice for social workers working with children and families during this coronavirus (COVID-19) pandemic. The briefing covers what is COVID-19 and its symptoms; what steps do World Health Organisation (WHO) and national and local health advisors advocate people follow in preparedness, mitigation and suppression strategies; how can social workers work with children and families during this pandemic; and how can social workers take care of themselves and others while performing their statutory duties. The briefing also covers how to uphold anti-oppressive practice, ethical behaviour and human rights, home visits and personal protection and protective equipment.

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1. **Teleassessment with children and adolescents during the coronavirus (COVID-19) pandemic and beyond: Practice and policy implications**  
   Farmer Ryan L. Professional Psychology: Research and Practice 2020;:No page numbers.

Due to physical distancing guidelines, the closure of nonessential businesses, and the closure of public schools, the role of telehealth for the delivery of psychological services for children has never been more debated. However, the transition to teleassessment is more complicated for some types of assessment than others. For instance, the remote administration of achievement and intelligence tests is a relatively recent adaptation of telehealth, and despite recommendations for rapid adoption by some policymakers and publishing companies, caution and careful consideration of individual and contextual variables and the existing research literature, as well as measurement, cultural and linguistic, and legal and ethical issues, is warranted. The decision to use remotely administered achievement and intelligence tests is best made on a case-by-case basis after consideration of these factors. We discuss each of these issues as well as implications for practice and policy, as well as issue provisional guidance for consideration for publishing companies interested in these endeavors moving forward. (PsycInfo Database Record (c) 2020 APA, all rights reserved) (Source: journal abstract) Impact statementPublic Significance Statement—The current review describes a number of factors that may reduce the accuracy of standardized tests, like intelligence tests, when they are given remotely. Additionally, it highlights the importance of considering the purpose of assessment, client cultural and linguistic background, as well as ethical and legal decision making, on the use and interpretation of standardized test results. (PsycInfo Database Record (c) 2020 APA, all rights reserved)

1. **The Adoption and Children (Coronavirus) (Amendment) Regulations 2020**  
   GREAT BRITAIN. Parliament 2020;:13.

This statutory instrument makes amendments to 10 sets of Regulations to assist the children’s social care sector during the coronavirus (COVID-19) pandemic. It includes the relaxation of a range of duties relating to children in care, such as visits by social workers and independent reviews. The amended regulations come into force on 4th April 2020 and cease to have effect on the 25th September 2020.

[Available online at this link](https://www.knowledgeshare.nhs.uk/index.php?PageID=link_resolver&link=6f105219195f7ccc4435269e88e64e26)

1. **The COVID‐19 pandemic and its impact on children in domestic violence refuges**  
   OVERLIEN Carolina Child Abuse Review 2020;29(4):379-386.

This short report, reports the findings of a a web‐based survey of domestic violence refuges in Norway (N = 46) distributed on 8 April 2020 with the aim of obtaining an overview of the impact of the COVID‐19 crisis and the virus control measures implemented on 13 March 2020 on victims of domestic violence and abuse. During lockdown in Norway, all daycare centres and schools were closed immediately, as were many small businesses, including restaurants and shops. Moreover, all gatherings, such as sporting events and concerts, were banned. These and numerous other restrictions in Norway during the spring of 2020 represented the most extreme measures enforced by the Norwegian government since the Second World War. Many of the restrictions have significantly impacted the lives of children and adolescents, especially the closing of daycare centres, schools and arenas in which many children spend their leisure time, such as football fields, swimming pools and art centres. Three key themes identified in the survey responses were: concern for children living with domestic violence outside of the refuge; concern for children and adolescents living at the refuge; and services that are flexible and accustomed to crisis situation. While at time of writing, the lockdown had been lifted in Norway, the authors report that the lives of children and adolescents remain very much affected by the pandemic, and there is reason to believe that the last few months have seen an increase in violence against children.

[Available online at this link](https://www.knowledgeshare.nhs.uk/index.php?PageID=link_resolver&link=b0445f63913a7ae4b5d82f3eaebe74a9)

[Available online at this link](https://www.knowledgeshare.nhs.uk/index.php?PageID=link_resolver&link=e70ac5285ff3d2ceb2852900555e25b4)

1. **The effects of the COVID-19 pandemic on the risk of youth substance use**  
   Richter Linda Journal of Adolescent Health 2020;67(4):467-468.

This article explores the effects of the COVID-19 pandemic on youth substance abuse risk. It is argued that although the pandemic might increase substance use as a means of coping, self medication, or even social enhancement in vulnerable children, the full effects of the pandemic on youth substance use might not all be negative and that it is important to examine the totality of its effects on young people. Richter notes that because of the stay-at-home orders, some of the risk factors for substance abuse have been reduced because adolescents are home with family and not in school or in the physical company of peers. While it is developmentally appropriated for children to increase their reliance on peers as they age, time spent with peers who engage in unhealthy behaviors is one of the strongest risk factors for substance abuse. Youth also do not have the accessibility to shopping or online ordering for drugs. Lastly, Richter maintains that because the earlier a child initiates substance use, the higher the likelihood of developing later addiction and because children are spending more time at home away from peers, drug use initiation may be delayed. It is concluded that as we learn more about the relative risks and protections, we must target interventions to capitalize on the fortuitous protective factors while addressing the inevitable risk factors wrought by this pandemic. (PsycInfo Database Record (c) 2020 APA, all rights reserved)

[Available online at this link](https://www.knowledgeshare.nhs.uk/index.php?PageID=link_resolver&link=f4e67396fea50cc391cc6c06f49a2d7b)

1. **The impact of COVID-19 on children and young people**  
   CHILDREN'S SOCIETY 2020;:20.

This briefing outlines policy recommendations for Government around the impact of coronavirus (COVID-19) pandemic on children and young people. It includes recommendations to support children in poverty; refugee and migrant children; and young people at risk, such as looked after children, children experiencing child abuse and neglect, young carers and children at risk of sexual and criminal exploitation. The briefing also outlines the potential impact of the COVID-19 pandemic on children's mental health and wellbeing.

[Available online at this link](https://www.knowledgeshare.nhs.uk/index.php?PageID=link_resolver&link=9688908a5cc6617422e315da99b80281)

1. **The impact of COVID-19 on Children's Social Care in England.**  
   Baginsky M. Child abuse & neglect 2020;:104739.

BACKGROUND: As a response to COVID-19 the population of England was asked to stay at home and work from there wherever possible. This included those working in children's social care (CSC) who have responsibility for child protection and other safeguarding duties. OBJECTIVE: The study was designed to understand how CSC made the transition from being an office-based agency to one where the majority of social workers were based at home and to understand how CSC perceived the impact on children and their families. Participants and setting Senior members of CSC staff in 15 local authorities took part in the research in June 2020. METHODS: Nine interviews were conducted by video call, three by telephone, and three consisted of initial written responses that were then followed by telephone calls. RESULTS: Service delivery had been maintained across all the authorities with most visits being made virtually after assessments of risk had been conducted on all cases. Multiagency working had improved, with greater involvement of general practitioners and paediatricians. Overall activity in CSC had been lower than normal but as lockdown eased this was changing. Concerns were expressed about how to manage the response that would be required to meet the expected level of harm that had occurred but been hidden. CONCLUSIONS: Responses to COVID-19 prompted widespread innovation and it will be an imperative to evaluate which initiatives have worked for children and families, as well as practitioners, and which should be discarded, sustained or reshaped

1. **The impact of social vulnerability on COVID-19 in the U.S.: An analysis of spatially varying relationships**  
   Karaye Ibraheem M. American Journal of Preventive Medicine 2020;59(3):317-325.

Introduction: Because of their inability to access adequate medical care, transportation, and nutrition, socially vulnerable populations are at an increased risk of health challenges during disasters. This study estimates the association between case counts of COVID-19 infection and social vulnerability in the U.S., identifying counties at increased vulnerability to the pandemic. Methods: Using Social Vulnerability Index and COVID-19 case count data, an ordinary least squares regression model was fitted to assess the global relationship between COVID-19 case counts and social vulnerability. Local relationships were assessed using a geographically weighted regression model, which is effective in exploring spatial nonstationarity. Results: As of May 12, 2020, a total of 1,320,909 people had been diagnosed with COVID-19 in the U.S. Of the counties included in this study (91.5%, 2,844 of 3,108), the highest case count was recorded in Trousdale, Tennessee (16,525.22 per 100,000) and the lowest in Tehama, California (1.54 per 100,000). At the global level, overall Social Vulnerability Index (e β = 1.65, p = 0.03) and minority status and language (e β = 6.69, p < 0.001) were associated with increased COVID-19 case counts. However, on the basis of the local geographically weighted model, the association between social vulnerability and COVID-19 varied among counties. Overall, minority status and language, household composition and transportation, and housing and disability predicted COVID-19 infection. Conclusions: Large-scale disasters differentially affect the health of marginalized communities. In this study, minority status and language, household composition and transportation, and housing and disability predicted COVID-19 case counts in the U.S. Addressing the social factors that create poor health is essential to reducing inequities in the health impacts of disasters. (PsycInfo Database Record (c) 2020 APA, all rights reserved) (Source: journal abstract)

[Available online at this link](https://www.knowledgeshare.nhs.uk/index.php?PageID=link_resolver&link=b04023b7a3861bae6e6374280e14e2af)

1. **The impact of the coronavirus pandemic on child welfare: domestic abuse**  
   NATIONAL SOCIETY FOR THE PREVENTION OF CRUELTY TO CHILDREN 2020;:9.

This briefing uses insight from NSPCC helpline contacts and Childline counselling sessions to highlight the impact of domestic abuse on children and young people during the coronavirus pandemic. Domestic abuse is any type of controlling, bullying, threatening or violent behaviour between people who are, or have been, in a relationship. Between 23 March and 17 May 2020 the NSPCC helpline received 1,500 contacts from adults worried about the impact of domestic abuse on children, and Childline delivered over 500 counselling sessions to children and young people who were worried about domestic abuse. The key themes of these contacts include: reduced access to support networks; and lockdown bringing domestic abuse into sharp focus – making it harder to speak out, making it more difficult to leave, drinking during lockdown, exploiting fears about the coronavirus, young people worried about other family members.

[Available online at this link](https://www.knowledgeshare.nhs.uk/index.php?PageID=link_resolver&link=96bb6eb3aa8c59b5849f3898b3a1b6d9)

1. **The impact of the coronavirus pandemic on child welfare: online abuse**  
   NATIONAL SOCIETY FOR THE PREVENTION OF CRUELTY TO CHILDREN 2020;:15.

This briefing uses insight from NSPCC helpline contacts and Childline counselling sessions to highlight the impact of online abuse on children and young people during the coronavirus pandemic. It focuses on perpetrators targeting children online for sexual abuse and contains quotes from children and young people reporting their experience. Key themes include: the impact of online sexual abuse on children; online grooming; loneliness and self-esteem; using online platforms for the first time; sharing sexual images; sexual exploitation; and speaking out about abuse. The briefing highlights that while children and young people have been able to access important support via the internet during the coronavirus pandemic, perpetrators have also been provided with more opportunities to target children for sexual abuse online. Techniques used by perpetrators include: using multiple channels to communicate with children; moving conversations from one platform to another; and taking conversations from public to private online spaces. The report calls for expansive and ambitious Online Harms regulation across the UK, to help keep children safe. This includes: a Duty of Care on online platforms; a regulator that has comprehensive investigatory, disclosure and enforcement powers to address online risks; and user advocacy arrangements, funded by an industry levy, to provide counterbalance to industry engagement and ensure children’s needs are represented in regulatory decisions.

[Available online at this link](https://www.knowledgeshare.nhs.uk/index.php?PageID=link_resolver&link=4afcdfef925708831224b80d1c09fe40)

1. **The impact of the coronavirus pandemic on child welfare: sexual abuse**  
   NATIONAL SOCIETY FOR THE PREVENTION OF CRUELTY TO CHILDREN 2020;:13.

This briefing uses insight from Childline counselling sessions and NSPCC helpline contacts to highlight the impact of child sexual abuse within the family during the coronavirus pandemic. This includes abuse by an adult parent, carer or relative; the partner of a family member; a sibling; or a cousin. The briefing highlights that the restrictions created by the coronavirus pandemic exacerbated the risk for some children who were experiencing sexual abuse within their family home. Lockdown provided some perpetrators with more opportunities to sexually abuse children in their family. Being in lockdown also made it harder for children to speak out to trusted adults, ask for help and get the support they needed; conversely, in some cases, the stay-at-home rules increased the urgency for adults to contact the NSPCC helpline and report their concerns. The analysis also finds that spending more time alone and without the usual distractions meant that distressing memories of past abuse began to surface for some young people. The briefing calls on governments to deal with the “hidden harms” of the pandemic and ensure support for children who have experienced sexual abuse is embedded in recovery planning. In England this must include the publication and implementation of a comprehensive, cross-government strategy for tackling child sexual abuse.

[Available online at this link](https://www.knowledgeshare.nhs.uk/index.php?PageID=link_resolver&link=7bc62fc150d0373aeb39dfe5e0c24413)

1. **The impact of the COVID-19 pandemic on intercountry adoption and international commercial surrogacy.**  
   Fronek International Social Work 2020;63(5):665-670.

The COVID-19 pandemic has created unprecedented economic, health and social impacts as it has swept the globe. Intercountry adoption and international surrogacy are practices immediately affected, furthering vulnerabilities of children and vulnerable adults. This short report calls attention to heightened risks, raises awareness for practitioners in these fields and asserts the need for caution.

[Available online at this link](https://www.knowledgeshare.nhs.uk/index.php?PageID=link_resolver&link=9f973a1895107c3a00ea736f03e2c164)

1. **The impacts of COVID-19 on children.**  
   Gupta Sonia Acta paediatrica (Oslo, Norway : 1992) 2020;:No page numbers.

Millions of children could be adversely affected by the COVID-19 pandemic and we anticipate that the greatest impact could be on those in poor socioeconomic groups, who are already vulnerable and disadvantaged. However, some positive changes could also come out of this global crisis. This paper discusses what we see as the possible effects of this pandemic.

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[Available online at this link](https://www.knowledgeshare.nhs.uk/index.php?PageID=link_resolver&link=7e0d3f5a4c5004d502c5334894f07167)

1. **The PCFSW and Social Work England COVID-19 ethical response and best practice guide for children and families services**  
   BUZZI Peter 2020;:7.

This good practice guide aims to encourage ethical thinking in response to the coronavirus (Covid-19) pandemic and support practitioners in applying social work values, principles and standards in their everyday practice, decisions and actions. It has been developed by the Principal Children and Families Social Worker (PCFSW) network and Social Work England and draws on the work of the PCFSW research and practice development project. It has been developed to inform practice and to support the implementation of relevant legislation, national guidance and practice standards provided by the Department of Education and Social Work England. The guidance will be updated in response to changing circumstances.

[Available online at this link](https://www.knowledgeshare.nhs.uk/index.php?PageID=link_resolver&link=7dc121b4aa9ffe7c25cec03a14857e78)

1. **The PCFSW best practice guide for risk assessment and prioritising children and families' needs during pandemic**  
   BUZZI Peter 2020;:9.

Drawing on research from the Principal Children and Families Social Worker (PCFSW) Network and feedback from local authorities, this guide will support social workers and local authorities in assessing and prioritising needs and risks of vulnerable children and families in the context of coronavirus (COVID-19) pandemic. It offers evidence-based support for practitioners and managers to help continuity of services and should be considered alongside the local authority's guidance to ensure continued support and safeguarding of vulnerable children and young people and their families and carers. The document can be used to support individual reflection, in supervision or in virtual group discussions to support reflection for and after action.

[Available online at this link](https://www.knowledgeshare.nhs.uk/index.php?PageID=link_resolver&link=f592dc34b9cba6a7ab640560a9e06a5a)

1. **The state of child poverty 2020: the impact of COVID-19 on families and young people living in poverty**  
   SMITH Amelia 2020;:65.

This report provides insight into the impact of the COVID-19 pandemic inside the homes of the most vulnerable families in the UK. It presents findings of a qualitative study of nearly 1000 nationwide frontline workers was carried out at the point lockdown restrictions started being lifted in June 2020 and is based on a survey of support workers who have been interacting daily with families throughout the crisis. The report provides a detailed picture of the basic essentials many children in poverty have to go without; the adversities and trauma they have to cope with; how children and young people in poverty have an unequal access to education and how all of these difficulties have a significant detrimental impact on their mental health. The findings show that during lockdown, there have been multiple pressures on children's education – food poverty and a lack of digital access being two of the main issues. As a result, the education gap has widened, and many vulnerable children will have been left behind by the crisis. The impact of being cut off from peers has also impacted mental health – 84% of frontline workers have seen increases in children and young people’s mental health problems. In addition, COVID-19 has impacted considerably on families’ financial wellbeing and their ability to meeting their children's basic needs – 83% of frontline workers have seen an increase in need for foodbanks and 64% for local authority welfare assistance; frontline workers reported major difficulties during lockdown for families in accessing basics, with 57% of families unable to afford essential household items and 47% of families unable to afford food.

[Available online at this link](https://www.knowledgeshare.nhs.uk/index.php?PageID=link_resolver&link=7a4684289b4007dd967fc2cc92aeaeed)

1. **Using telemedicine to reach adolescents during the COVID-19 pandemic**  
   Evans Yolanda N. Journal of Adolescent Health 2020;67(4):469-471.

The article discusses the uses of telemedicine to reach adolescents during the COVID-19 pandemic. The term telemedicine is used when discussing health care delivered by providers located in a different physical location from the patient. Benefits of telemedicine are highlighted and confidentiality and standards of care are addressed. It is maintained that adolescent health is embracing the use of telemedicine during the COVID-19 pandemic, we must continue to work to ensure care is available and consider any patient populations who may not have access because of inequalities in our health care systems. Ideas for future telemedicine uses include increasing school-based telehealth services, partnering with communities to reach youth who are unstably housed or involved in the juvenile justice system, expanding access to specialty care (e.g., gender and eating disorder care) in rural or provider shortage locations, using telemedicine during and/or after climate disasters as well as future infectious disease outbreaks, and expanding access to confidential services (reproductive health, contraception, mental health, addiction, and medicine). We must also consider how to incorporate telemedicine into multidisciplinary team care (especially as providers are working remotely and team members are not in the same physical location). More research is needed on health care delivery to adolescents and young adults using technology-based solutions outside of the clinical setting. Guidelines must be developed on how to involve learners in care and teach the future adolescent health providers how to think safely, yet creatively about solutions for reaching youth. One thing is certain moving forward, now that patients and providers have experienced digital technology for health care, school, and social connection, telemedicine is here to stay. (PsycInfo Database Record (c) 2020 APA, all rights reserved)

[Available online at this link](https://www.knowledgeshare.nhs.uk/index.php?PageID=link_resolver&link=0b19eff746243e6e3c2bfb0b3d9173ad)

1. **Vulnerable Children in a Dual Epidemic.**  
   Levine Carol The Hastings Center report 2020;50(3):69-71.

Two epidemics-Covid-19 and opioid use disorder (OUD) -are creating short- and long-term mental and physical health risks for vulnerable children and adolescents. Information about the risks to children from exposure to the coronavirus is still fragmentary, but even many healthy children are not getting appropriate health care, such as vaccinations or monitoring of developmental milestones during the Covid-19 pandemic. Children living in poverty are at heightened risk. Youngsters who are already dealing with OUD in their families-2.2 million as of 2017-face serious consequences stemming from trauma and stress. Although not officially designated by the Centers for Disease Control and Prevention as "adverse childhood experiences" ("ACEs"), these situations meet the CDC's criteria for inclusion, such as death or separation from a parent. It is important to recognize and meet the needs of all these children now and not just when the long-term consequences become apparent.

1. **Vulnerable Youth and the COVID-19 Pandemic.**  
   Silliman Cohen Rachel I. Pediatrics 2020;146(1):No page numbers.

[Available online at this link](https://www.knowledgeshare.nhs.uk/index.php?PageID=link_resolver&link=135af1402aa8e45ae2d6e7db08eab7dd)

1. **We're all in this together? Local area profiles of child vulnerability**  
   CHILDREN'S COMMISSIONER FOR ENGLAND 2020;:8.

Using the Children’s Commissioner for England’s local area profiles of child vulnerability, this report looks at the different ways in which children can be vulnerable and at risk under lockdown during the coronavirus (COVID-19) pandemic. It highlights children who were vulnerable due to difficulties in their families before lockdown, such as parental mental health problems or children with SEND children at risk or suffering harm; children in care; and children who are at risk of falling behind in education. The analysis provides a way for councils to understand which groups of children are likely to be at risk under lockdown during the coronavirus (COVID-19) pandemic, and how many children in their area fall into those groups. It also provides a framework for central government to target additional resources at the areas most in need.

[Available online at this link](https://www.knowledgeshare.nhs.uk/index.php?PageID=link_resolver&link=f8460dc72a0a5d08ee25bd1c7a842fd8)

1. **When stay-at-home orders leave victims unsafe at home: Exploring the risk and consequences of intimate partner violence during the covid-19 pandemic**  
   Kaukinen Catherine American Journal of Criminal Justice 2020;:No page numbers.

AbstractThe novel coronavirus pandemic (hereafter COVID-19) is likely to have unprecedented impacts on the incidence and impacts of crime and violence globally. This includes impacts to the risk, consequences, and decision-making of women experiencing violence by an intimate partner (hereafter IPV). Most importantly, the COVID-19 pandemic, and its impact on the risk of IPV is likely to differentially impact vulnerable populations, including minority women and those with long histories of victimization and mental health issues. This review paper explores the potential short- and long-term implications of COVID-19 on the risk of IPV, highlighting some of the most recent preliminary data. The economic impact of the COVID-19 pandemic, record levels of male unemployment, added stressors in the home, including the care and home schooling of children, and the social distancing measures required by the epidemiological response, may serve to undermine the decades of progress made in keeping women and children safe at home. Victim police reporting, help-seeking decisions, and social service utilization during the pandemic are likely to be impacted by stay-at-home orders and social distancing requirements. The paper concludes with a discussion of the implications for providing safety planning and self-care for victims and their children. (PsycInfo Database Record (c) 2020 APA, all rights reserved) (Source: journal abstract)

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[Available online at this link](https://www.knowledgeshare.nhs.uk/index.php?PageID=link_resolver&link=0f74992aeb2baf5e55a4f685fbff50db)

1. **Young lives in lockdown: NYAS' survey of care-experienced children and young people during Covid-19**  
   CROXTON Lucy 2020;:12.

Findings from our survey, which reached 230 care-experienced children and young people across 55 local authorities in England and Wales, exploring how they have been coping during the lockdown. The survey found that over half of care-experienced children and young people are feeling lonelier and more anxious than they were before the pandemic. Many of the care-experienced children and young people who responded are having less contact with their social workers and personal advisers during lockdown. For every care leaver who was having more contact, four were having less. During the lockdown, one in ten children in care said they had not heard from their social worker at all.

[Available online at this link](https://www.knowledgeshare.nhs.uk/index.php?PageID=link_resolver&link=d1ca391ffb35754e87f3b20f1db8329e)

1. **Young people in care: how lockdown provides a haven of security and belonging**  
   CAMERON Claire Scottish Journal of Residential Child Care 2020;:1-6.

Amidst all the gloom and concerns about what effect the emergency lockdown measures associated with COVID-19 are having on children, there is a small group of young people finding positive benefits. Staff at one Scottish provider of residential services for children and young people who have complex needs, say young people are less distressed than before lockdown and many seem happier than they were before the measures were implemented. Daily life is less pressured. Staff are happier too. Lockdown is proving to be a catalyst for changes in line with the principles of Social Pedagogy which promotes the value of meaningful relationships that offer emotional and practical support.

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[Available online at this link](https://www.knowledgeshare.nhs.uk/index.php?PageID=link_resolver&link=9e3106bb11429b149a0a5e6d5dbb592f)

1. **Zooming Toward a Telehealth Solution for Vulnerable Children with Obesity During Coronavirus Disease 2019.**  
   Woo Baidal JA Obesity (Silver Spring, Md.) 2020;28(7):1184-1186.

Health inequities exist throughout the life course, resulting in racial/ethnic and socioeconomic disparities in obesity and obesity-related health complications. Obesity and its comorbidities appear to be linked to coronavirus disease 2019 (COVID-19) mortality. Approaches to reduce obesity in the time of COVID-19 closures are urgently needed and should start early in life. In New York City, a telehealth pediatric weight-management collaborative spanning NewYork-Presbyterian, Columbia University Vagelos College of Physicians and Surgeons, and Weill Cornell Medicine was developed during COVID-19 with show rates from 76% to 89%. To stave off the impending exacerbation of health disparities related to obesity risk factors in the aftermath of the COVID-19 pandemic, effective interventions that can be delivered remotely are urgently needed among vulnerable children with obesity. Challenges in digital technology access, social and linguistic differences, privacy security, and reimbursement must be overcome to realize the full potential of telehealth for pediatric weight management among low-income and racial/ethnic-minority children.

### Opening Internet Links

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### Guidance on searching within online documents

Links are provided to the full text of each document. Relevant extracts have been copied and pasted into these results. Rather than browse through lengthy documents, you can search for specific words as follows:

**Portable Document Format / pdf / Adobe**  
Click on the Search button (illustrated with binoculars). This will open up a search window. Type in the term you need to find and links to all of the references to that term within the document will be displayed in the window. You can jump to each reference by clicking it.

**Word documents**  
Select Edit from the menu, the Find and type in your term in the search box which is presented. The search function will locate the first use of the term in the document. By pressing 'next' you will jump to further references.

## C. Search History

## Reviewers note 5/11/20: consider exploding all subject headings, and using the MeSh terms *exp CORONAVIRUS/* as well as *exp “CORONAVIRUS INFECTIONS”/*.

|  | **Source** | **Criteria** | **Results** |
| --- | --- | --- | --- |
| 1. | PsycINFO | (Coronavirus OR "Covid-19" OR "C-19" OR Betacoronavirus OR "nCoV\*" OR "2019nCoV" OR "19nCoV" OR "COVID19\*" OR "COVID-19" OR COVID OR "SARS-COV-2" OR "SARSCOV-2" OR "SARSCOV2" OR "Severe Acute Respiratory Syndrome Coronavirus 2" OR "Severe Acute Respiratory Syndrome Corona Virus 2" OR "Severe Acute Respiratory Syndrome Coronavirus 2" OR "SARS-CoV-2" OR Corona OR "2019-nCoV Acute Respiratory Disease" OR "Novel Coronavirus Pneumonia").ti,ab | 2610 |
| 2. | PsycINFO | CORONAVIRUS/ | 1084 |
| 4. | PsycINFO | ((Wuhan OR Hubei OR China OR Chinese) ADJ4 (Pneumonia OR Pandemic\* OR Epidemic\* OR Outbreak\*)).ti,ab | 238 |
| 5. | PsycINFO | (1 OR 2 OR 4) | 2798 |
| 6. | PsycINFO | (Adopted OR Adoption\* OR Adoptee\* OR Foster OR Fostered OR "Looked After" OR "Looked-After" OR "Social Service\*" OR "Social Care\*" OR "Social Work\*" OR "Local Authorit\*" OR Welfare OR "Residential Care" OR "Kinship Care\*" OR Vulnerable OR "In Care" OR "In-Care" OR "Child Arrangement\* Order\*" OR "Special Guardianship Order\*" OR "Connected People" OR "Family Carer\*" OR "Friend Carer\*").ti,ab | 213656 |
| 7. | PsycINFO | "CHILD WELFARE"/ | 11904 |
| 8. | PsycINFO | "ADOPTIVE PARENTS"/ | 1605 |
| 9. | PsycINFO | "ADOPTION (CHILD)"/ | 3171 |
| 10. | PsycINFO | ADOPTEES/ | 823 |
| 11. | PsycINFO | "ADOPTED CHILDREN"/ | 1941 |
| 12. | PsycINFO | (6 OR 7 OR 8 OR 9 OR 10 OR 11) | 218707 |
| 13. | PsycINFO | (Child\* OR Infan\* OR Toddler\* OR Schoolchild\* OR Preschool\* OR "Pre-school\*" OR P?ediatric\* OR Girl\* OR Boy\* OR Teen\* OR Adolescen\* OR Minor\* OR "Young People" OR "Young Person\*").ti,ab | 1008562 |
| 14. | PsycINFO | (child).ti,ab,mm,mh,me,su,mj | 484684 |
| 15. | PsycINFO | (adolescent).ti,ab,mm,mh,me,su,mj | 383994 |
| 16. | PsycINFO | (13 OR 14 OR 15) | 1186905 |
| 17. | PsycINFO | (5 AND 12 AND 16) | 73 |
| 18. | PsycINFO | 17 [DT 2019-2020] | 68 |
| 19. | Medline | (Coronavirus OR "Covid-19" OR "C-19" OR Betacoronavirus OR "nCoV\*" OR "2019nCoV" OR "19nCoV" OR "COVID19\*" OR "COVID-19" OR COVID OR "SARS-COV-2" OR "SARSCOV-2" OR "SARSCOV2" OR "Severe Acute Respiratory Syndrome Coronavirus 2" OR "Severe Acute Respiratory Syndrome Corona Virus 2" OR "Severe Acute Respiratory Syndrome Coronavirus 2" OR "SARS-CoV-2" OR Corona OR "2019-nCoV Acute Respiratory Disease" OR "Novel Coronavirus Pneumonia").ti,ab | 81026 |
| 20. | Medline | BETACORONAVIRUS/ | 25355 |
| 21. | Medline | ((Wuhan OR Hubei OR China OR Chinese) ADJ4 (Pneumonia OR Pandemic\* OR Epidemic\* OR Outbreak\*)).ti,ab | 4113 |
| 22. | Medline | (19 OR 20 OR 21) | 84068 |
| 23. | Medline | (Adopted OR Adoption\* OR Adoptee\* OR Foster OR Fostered OR "Looked After" OR "Looked-After" OR "Social Service\*" OR "Social Care\*" OR "Social Work\*" OR "Local Authorit\*" OR Welfare OR "Residential Care" OR "Kinship Care\*" OR Vulnerable OR "In Care" OR "In-Care" OR "Child Arrangement\* Order\*" OR "Special Guardianship Order\*" OR "Connected People" OR "Family Carer\*" OR "Friend Carer\*").ti,ab | 343492 |
| 24. | Medline | ADOPTION/ | 4790 |
| 25. | Medline | "CHILD, ADOPTED"/ | 88 |
| 26. | Medline | "CHILD, FOSTER"/ | 112 |
| 27. | Medline | "FOSTER HOME CARE"/ | 3631 |
| 28. | Medline | (23 OR 24 OR 25 OR 26 OR 27) | 346252 |
| 29. | Medline | (Child\* OR Infan\* OR Toddler\* OR Schoolchild\* OR Preschool\* OR "Pre-school\*" OR P?ediatric\* OR Girl\* OR Boy\* OR Teen\* OR Adolescen\* OR Minor\* OR "Young People" OR "Young Person\*").ti,ab | 2366208 |
| 30. | Medline | "CHILD, PRESCHOOL"/ | 921165 |
| 31. | Medline | CHILD/ | 1694540 |
| 32. | Medline | MINORS/ | 2583 |
| 33. | Medline | ADOLESCENT/ | 2036321 |
| 34. | Medline | (29 OR 30 OR 31 OR 32 OR 33) | 4092038 |
| 35. | Medline | (22 AND 28 AND 34) | 430 |
| 36. | Medline | 35 [DT 2019-2020] | 401 |
| 37. | CINAHL | (Coronavirus OR "Covid-19" OR "C-19" OR Betacoronavirus OR "nCoV\*" OR "2019nCoV" OR "19nCoV" OR "COVID19\*" OR "COVID-19" OR COVID OR "SARS-COV-2" OR "SARSCOV-2" OR "SARSCOV2" OR "Severe Acute Respiratory Syndrome Coronavirus 2" OR "Severe Acute Respiratory Syndrome Corona Virus 2" OR "Severe Acute Respiratory Syndrome Coronavirus 2" OR "SARS-CoV-2" OR Corona OR "2019-nCoV Acute Respiratory Disease" OR "Novel Coronavirus Pneumonia").ti,ab | 21762 |
| 38. | CINAHL | ((Wuhan OR Hubei OR China OR Chinese) ADJ4 (Pneumonia OR Pandemic\* OR Epidemic\* OR Outbreak\*)).ti,ab | 892 |
| 39. | CINAHL | "COVID-19"/ | 9306 |
| 40. | CINAHL | (37 OR 38 OR 39) | 24237 |
| 41. | CINAHL | (Adopted OR Adoption\* OR Adoptee\* OR Foster OR Fostered OR "Looked After" OR "Looked-After" OR "Social Service\*" OR "Social Care\*" OR "Social Work\*" OR "Local Authorit\*" OR Welfare OR "Residential Care" OR "Kinship Care\*" OR Vulnerable OR "In Care" OR "In-Care" OR "Child Arrangement\* Order\*" OR "Special Guardianship Order\*" OR "Connected People" OR "Family Carer\*" OR "Friend Carer\*").ti | 404093 |
| 42. | CINAHL | ADOPTION/ | 2932 |
| 43. | CINAHL | "CHILD, FOSTER"/ | 2117 |
| 44. | CINAHL | (41 OR 42 OR 43) | 406077 |
| 45. | CINAHL | (Child\* OR Infan\* OR Toddler\* OR Schoolchild\* OR Preschool\* OR "Pre-school\*" OR P?ediatric\* OR Girl\* OR Boy\* OR Teen\* OR Adolescen\* OR Minor\* OR "Young People" OR "Young Person\*").ti,ab | 797131 |
| 46. | CINAHL | CHILD/ | 461912 |
| 47. | CINAHL | "MINORS (LEGAL)"/ | 705 |
| 48. | CINAHL | ADOLESCENCE/ | 528938 |
| 49. | CINAHL | (45 OR 46 OR 47 OR 48) | 1164909 |
| 50. | CINAHL | (40 AND 44 AND 49) | 156 |
| 51. | CINAHL | 50 [DT 2019-2020] | 150 |
| 52. | EMBASE | (Coronavirus OR "Covid-19" OR "C-19" OR Betacoronavirus OR "nCoV\*" OR "2019nCoV" OR "19nCoV" OR "COVID19\*" OR "COVID-19" OR COVID OR "SARS-COV-2" OR "SARSCOV-2" OR "SARSCOV2" OR "Severe Acute Respiratory Syndrome Coronavirus 2" OR "Severe Acute Respiratory Syndrome Corona Virus 2" OR "Severe Acute Respiratory Syndrome Coronavirus 2" OR "SARS-CoV-2" OR Corona OR "2019-nCoV Acute Respiratory Disease" OR "Novel Coronavirus Pneumonia").ti,ab | 81354 |
| 53. | EMBASE | ((Wuhan OR Hubei OR China OR Chinese) ADJ4 (Pneumonia OR Pandemic\* OR Epidemic\* OR Outbreak\*)).ti,ab | 3484 |
| 54. | EMBASE | BETACORONAVIRUS/ | 6212 |
| 55. | EMBASE | (52 OR 53 OR 54) | 83706 |
| 56. | EMBASE | (Adopted OR Adoption\* OR Adoptee\* OR Foster OR Fostered OR "Looked After" OR "Looked-After" OR "Social Service\*" OR "Social Care\*" OR "Social Work\*" OR "Local Authorit\*" OR Welfare OR "Residential Care" OR "Kinship Care\*" OR Vulnerable OR "In Care" OR "In-Care" OR "Child Arrangement\* Order\*" OR "Special Guardianship Order\*" OR "Connected People" OR "Family Carer\*" OR "Friend Carer\*").ti,ab | 451625 |
| 57. | EMBASE | "ADOPTION,CHILD"/ | 15237 |
| 58. | EMBASE | ADOPTION/ | 15237 |
| 59. | EMBASE | "FOSTER FAMILY"/ | 4671 |
| 60. | EMBASE | "FOSTER CHILDREN"/ | 123 |
| 61. | EMBASE | "FOSTER CHILD"/ | 123 |
| 62. | EMBASE | "FOSTER CARE"/ | 4671 |
| 63. | EMBASE | (56 OR 57 OR 58 OR 59 OR 60 OR 61 OR 62) | 454737 |
| 64. | EMBASE | (Child\* OR Infan\* OR Toddler\* OR Schoolchild\* OR Preschool\* OR "Pre-school\*" OR P?ediatric\* OR Girl\* OR Boy\* OR Teen\* OR Adolescen\* OR Minor\* OR "Young People" OR "Young Person\*").ti,ab | 2985475 |
| 65. | EMBASE | TODDLER/ | 4935 |
| 66. | EMBASE | "SCHOOL CHILD"/ | 368429 |
| 67. | EMBASE | "PRESCHOOL CHILD"/ | 551630 |
| 68. | EMBASE | INFANT/ | 600882 |
| 69. | EMBASE | GIRL/ | 40304 |
| 70. | EMBASE | BOY/ | 27363 |
| 71. | EMBASE | CHILD/ | 1746134 |
| 72. | EMBASE | ADOLESCENT/ | 1542442 |
| 73. | EMBASE | ADOLESCENCE/ | 40060 |
| 74. | EMBASE | (64 OR 65 OR 66 OR 67 OR 68 OR 69 OR 70 OR 71 OR 72 OR 73) | 4194578 |
| 75. | EMBASE | (55 AND 63 AND 74) | 392 |
| 76. | EMBASE | 75 [DT 2019-2020] | 357 |

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