

# Young Children and COVID-19



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# Very Young Children Under Stress

- may be very clingy with primary caregivers
- may regress developmentally- especially in self help activities such as toilet training or feeding, or lose expressive language
- may be more aggressive
- may be more withdrawn
- may have sleep problems or nightmares



## Very Young Children Under Stress

- may exhibit excessive crying
- may exhibit little affect
- may sleep or become withdrawn more than usual
- may demand more attention, to be carried and seek proximity to caregivers



# Primary Caregivers Under Stress

- may be less sensitive to the child's cues
- may be less responsive to the child's expression
- may be frustrated or irritated by increased caregiving demands at a time when there are other stresses
- may be less emotionally available to the young child
- may feel powerless- especially about safety



## Young Children

- Don't accurately assess physical safety, but are attuned to psychological safety
- Are very sensitive to and respond to the emotional state of their primary caregivers
- Believe adults can control things, keep them safe



# Caregiver-baby attunement

- Promotes physical, social and emotional outcomes for healthy mother-baby dyads
- Includes skin-to-skin contact of babies
- Baby massage can support early sensitive parent-child relationships
- Nurturing touch helps promote respectful communications between the caregiver and the child. (Tronick, 2007)
- Massage therapy between father-child enhanced the interaction (Cullen, 2000)



# Touch Institute (Tyfanny Field)

- Facilitates weight gain in preterm infants ;
- improves sleep patterns;
- mitigates exposure to (maternal) depressive symptoms;
- reduces infant pain;
- reduces stress hormones;
- improves immune function



# Touch/ Baby Massage

- **Reduced cortisol levels- stress** (Field, 1996)
- **Enhanced babies' capacity to regulate their stress levels** (Gunner, 2007);
- **Increased melatonin levels which supports circadian rhythms and sleep patterns** (Ferber, 2002)
- **Increase secretion of insulin and gastrin, improving food absorption** (Uvnas-Moberg K., 1987)



## For Caregivers

- Encourage active *caregiver support groups*-time/space for caregivers to support each other in discussion
- Explore safe/clean space for *small playgroup* of children- which allow caregivers to run errands, rest, etc. (Protracted)
- Routine communication for distant parents



## Options for Remote Play and Learn

- TV, (China, Babies programme)
- Radio
- Newspaper- play/learn section
- Social Media (Facebook, WhatsApp, Line, Wechat)
- @ home learning
- 15 Day Challenge



# “Ages, Stages and Phases”

Acute Emergency	Protracted	“New normal” Development
<ul style="list-style-type: none"> <li>• Wash hands</li> <li>• Social Distancing</li> <li>• Stay home</li> <li>• Wear mask</li> <li>• School closure</li> <li>• @ home learning (rapid)</li> <li>• Acknowledge constraints</li> <li>• Emotional “checkin”</li> </ul>	<ul style="list-style-type: none"> <li>• @ home learning/ support (age/domains)</li> <li>• Channels to reach families</li> <li>• Channels to reach front line workers</li> <li>• CBOs</li> <li>• Mini-play groups</li> <li>• Data: Parent “readiness”</li> </ul>	<ul style="list-style-type: none"> <li>• @ home learning/ support</li> <li>• National Coordination Mechanism</li> <li>• COVID Family Prescriptions</li> <li>• Remote Capacity building of frontline workers</li> <li>• Data:</li> </ul>



# Core COVID Takeaways

- **Physical Safety:** Ensuring your children feel safe from germs when they're at home, but also not getting caught up in family conflicts.
- **Emotional Safety:** Worrying about failing, disappointing parents, or feeling embarrassed in an online learning community can detract from your child's academic success.
- **Psychological Safety:** Avoiding triggers for children with a history of trauma, who tend to be particularly sensitive and can become distressed easily.
- **Sense of Identity:** Providing an environment that allows children to develop their sense of identity both inside and outside the family, as a member of the community, a citizen of the world, and a learner.
- **Intellectual Safety:** Encouraging your children to think creatively as they solve problems



## COVID Parent Tips

- **Relax.** The most important thing you can do is *support your child in feeling safe* as they do their work and play.
- **Focus on your children's needs.** The moment you became a parent/caregiver, *you developed the ability to understand* your child's needs, even when they couldn't talk. This is still an important part of providing support, even as they grow older, and you still know what your child needs.
- **Know that you're not alone.** You may be feeling additional stress and pressure. Stressful events, like a pandemic, can exacerbate that. Tap into your networks and family for support.
- **Take time to breathe.** Practice meditation or spirituality. The more that you can remain calm, the more that you can sense the needs of your child, which can decrease the likelihood that your child will act out to provoke you.

# *COVID: Family Prescription*



<https://inee.org/resources>

<https://www.unicef.org/parenting/>



# Parenting and COVID-19

## Global Resources

### An Inter-Agency Initiative Endorsed by the WHO and UNICEF

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Universiti Putra Malaysia, Department of Human Development and Family Studies,  
Faculty of Human Ecology



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for every child



End Violence  
Against Children



INTERNET  
GOOD THINGS



PARENTING FOR  
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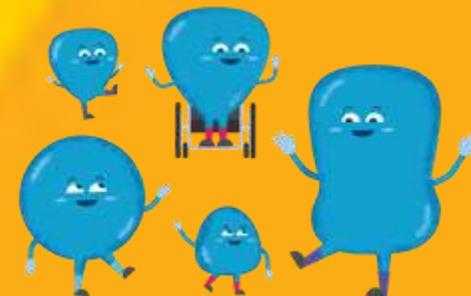


ACCELERATE  
LEARNING  
SUCCESS



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# Early Childhood Development in the Global South



Photo credit: Rumaya Juhari

- 250 million or 43% of children under 5 years old at risk of not achieving developmental potential (Black et al., 2017)
- 1 billion children experience violence globally each year (Hillis, 2019)
- Early childhood development and violence linked by similar risk factors (Lannen & Ziswiler, 2014)
- Risk factors include poverty, poor health & nutrition, stunting, psychosocial deprivation, partner violence
- Long-term effects on health, learning, behaviour, and poor economic outcomes

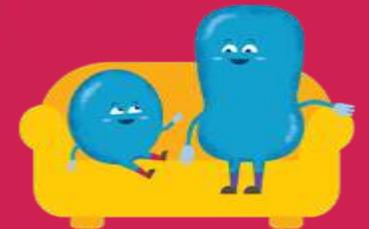


# Role of Parenting on Childhood and Later Adult Outcomes



Photo Credit: UNICEF

- Positive, consistent parenting predicts better child and parental mental health, school readiness, partner relationships
- Harsh, inconsistent parenting predicts poor child development, behavior problems, juvenile delinquency, crime, drug use, family violence, school failure, and poor health
- Outcomes of poor parenting are very costly to multiple systems (e.g., \$585 billion in US; Fang, 2012)



# Parenting Interventions



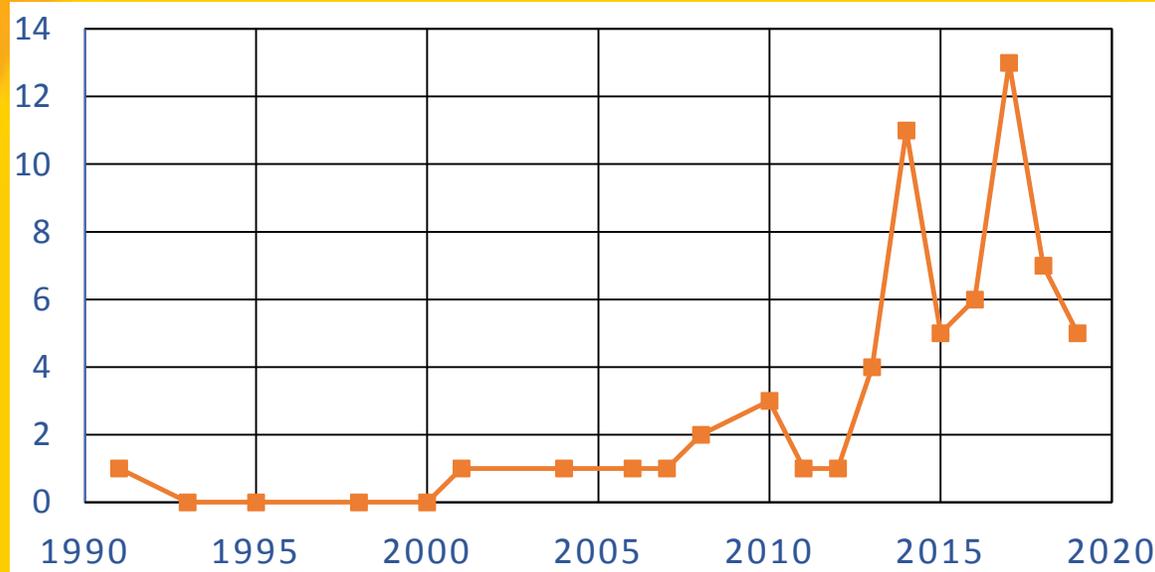
Photo credit: Rumaya Juhari

## Similar evidence-based content & scientific principles

- Improve child development and health;
- Increase nurturing relationships and attachment;
- Increase positive parenting: play, communication, praise, education;
- Improve child behaviour management skills;
- Reduce violent discipline and negative child behaviour;
- Reduce parent stress & depression



# Parenting Interventions: Evidence of Effectiveness



Number of randomized controlled trials of parenting interventions by year published

- **Evidence from high income countries** - for reducing child abuse and other child/parent risk factors (Chen & Chan 2015)
- **Evidence in emerging economies** - over 90 rigorous studies (Gardner et al, 2020, McCoy et al, 2019)
- Transported & homegrown programs **equally effective** - as long as based in core principles (Gardner et al 2016; Leijten et al 2016)
- Poor families, single-mother families, migrant & ethnic minority families **are likely to benefit as much as average families** (Gardner et al 2018)
- Parenting programs are **equally effective for young and old children** (Gardner et al 2018)



# COVID-19 Impact Crisis of Care



Photo credit: UNHCR

- Group-based programmes not possible
- 188 country-wide school closures
- Estimated 1.58 billion children out of school
- Parents/caregivers providing 24/7 care
- Low-income families affected most
- Reports of escalation of child abuse during health emergencies (e.g., Ebola)



# COVID-19 and Increased Risks of Violence Against Children

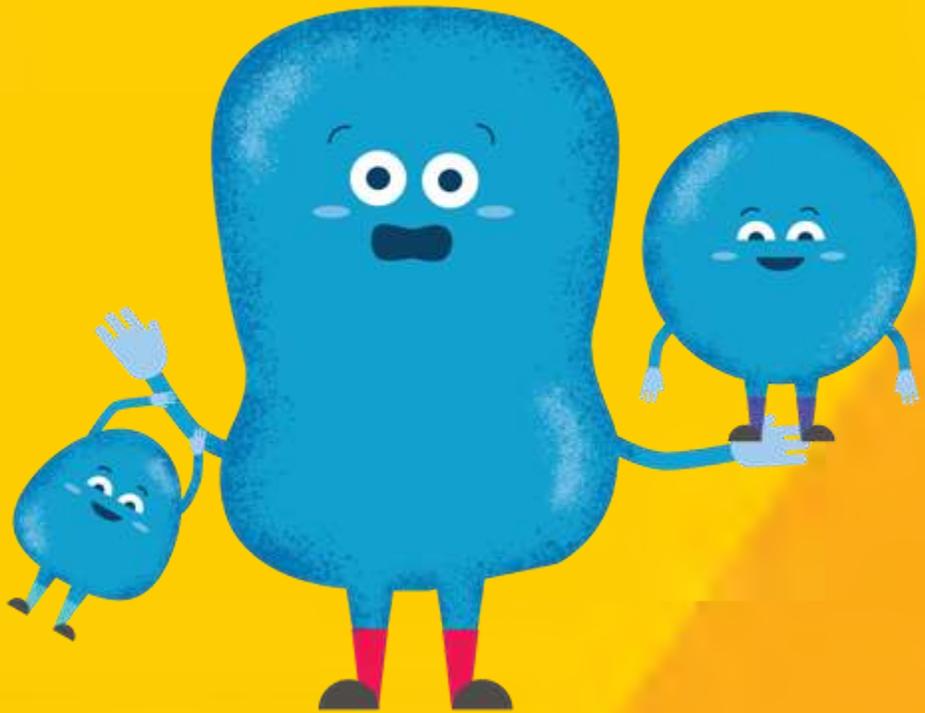


Photo credit: UNICEF

- Reduced social support due to isolation
- Alcohol/substance use
- Stress, depression, and anxiety
- Increased intimate partner violence
- Crowded and cramped living conditions
- Financial and food insecurity
- Online child safety risks



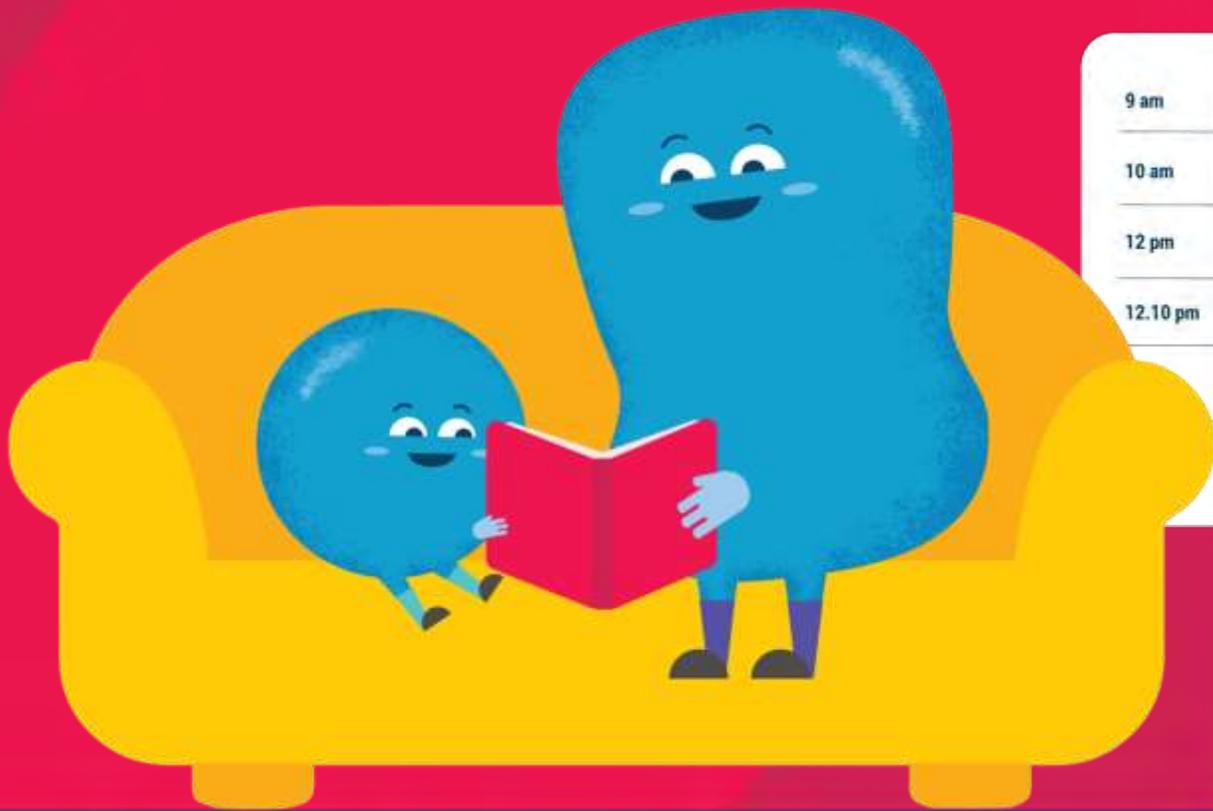
# COVID-19 Global Parenting Resources



- Derived from evidence-based programme content adapted to fit context of COVID-19
- Developed with and reviewed by UNICEF, WHO, CDC, USAID, and Global Partnership
- 6 original and 6 additional topics
- Simplified for transportability across languages and contexts
- Relevant for non-COVID-19 contexts



# Original COVID-19 Parenting Resources

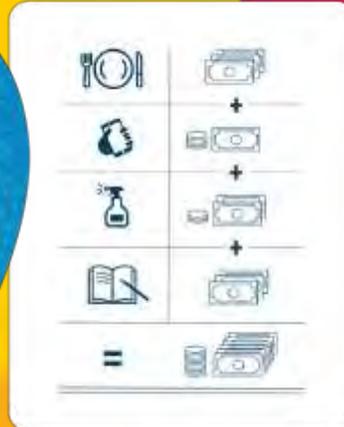
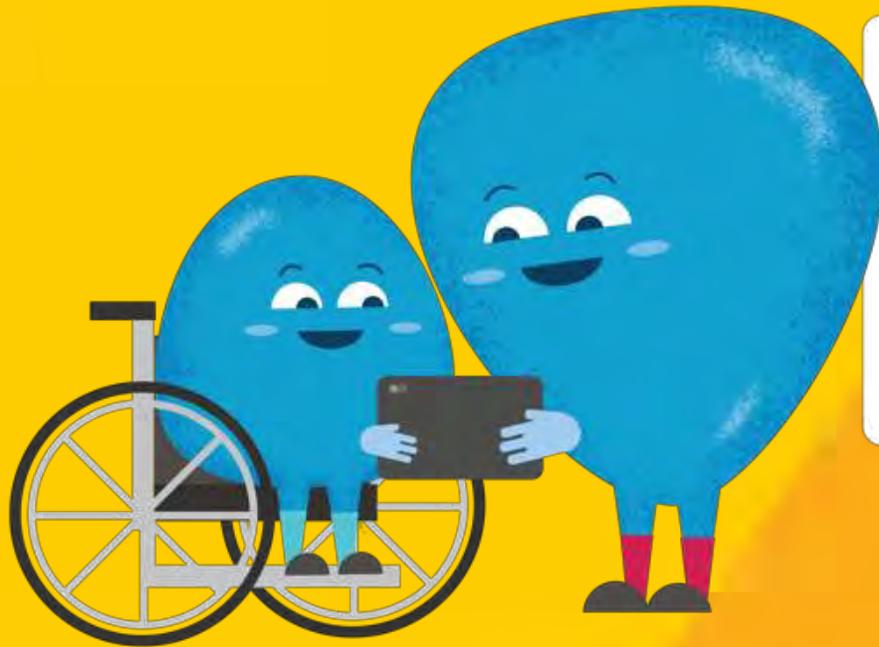


9 am	
10 am	
12 pm	
12:10 pm	

1. One-on-One Time with children
2. Keeping it positive
3. Making routines and keeping safe
4. Managing difficult behaviours
5. Coping with stress and taking care of oneself
6. Talking about COVID-19



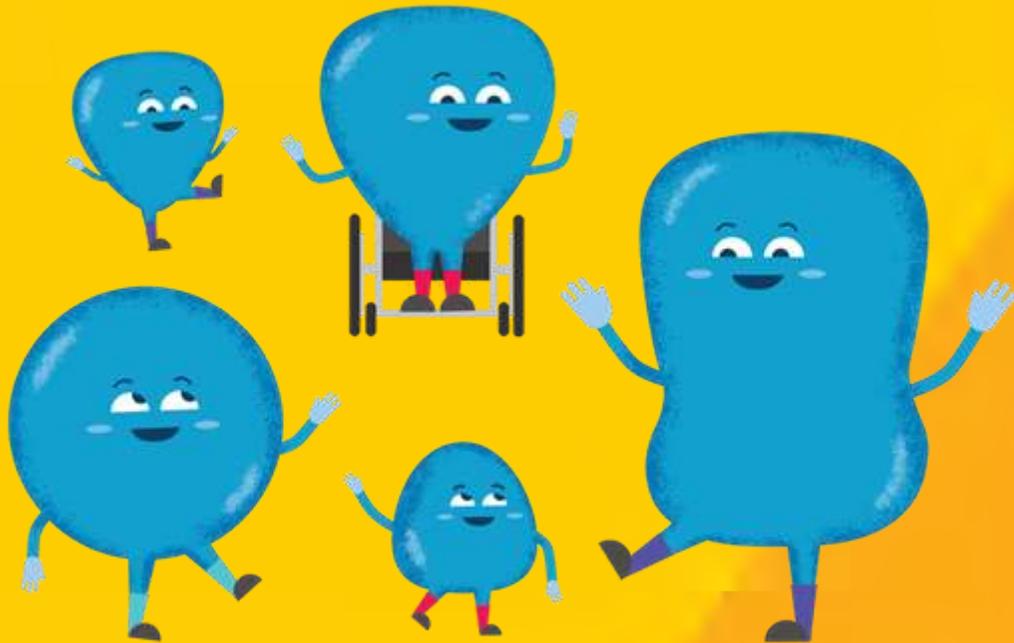
# Additional COVID Parenting Resources



1. Online child protection
2. Intimate partner relationships in context of parenting
3. Family budgeting and financial stress
4. Parenting in crowded households and communities
5. Managing anger
6. Learning through play



# COVID-19 Parenting Reach and Response



- UNICEF, WHO, Global Partnership websites and social media
- 43 million children reached in 178 countries
- Translated into 66 languages (mostly by volunteers)
- Adopted by multiple governments

Bangladesh, Brazil, Cambodia, Colombia, France, Germany, Iceland, Malaysia, Montenegro, Paraguay, Philippines, Thailand, Uganda, Vanuatu, and Vietnam

- Media (e.g., TIME by Angelina Jolie)
- Adaptation and scale up challenges to reach more vulnerable

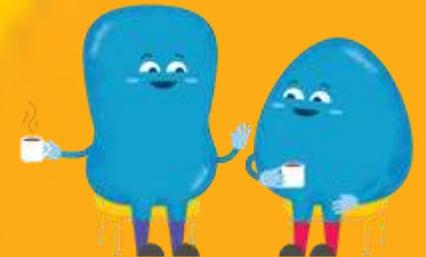


# COVID-19 Context in Malaysia



Photo credit: Rumaya Juhari

- Relatively low number of cases (5,482) and deaths (92)
- Movement Control Order (MCO) extended through 28 April
- Includes prohibition of public gatherings including religious activities
- Schools closed with home-based learning required
- Inability to do in-person child protection



# COVID-19 Parenting Response in Malaysia



- Multisectoral collaboration
  - UNICEF (Child Protection, Communication for Development, Innovations, Comms)
  - Universiti Putra Malaysia, Maestral International
  - Ministry of Women, Family, and Community Development
  - NGO and business partners
- Dissemination of materials reach all parents including those without internet access and those with disabilities
- Support for child protection case management online and by phone



Low internet access

High internet access

# DISSEMINATION STRATEGY IN MALAYSIA

## Print Distribution

- Put in food parcels
- Leave by food shop checkouts
- Send to health centers
- Community centers

## Radio and media

- Public Service Announcements
  - Radio scripts
  - Share with media
- Parenting hotline on radio/phone

Yellow = in development – fast!

## Text Messages

- Daily texts with structured parenting support for COVID-19
- RapidPro delivery platform for smartphones or basic phones

## Adaptive Testing

- Reach, delivery, adaptation
- Baseline and 8 weekly assessments

## Internet Distribution

- Links on websites
- Teachers, schools, employees, government, faith networks, communities of parents
- Parenting advice webinar

## Social Media Messages

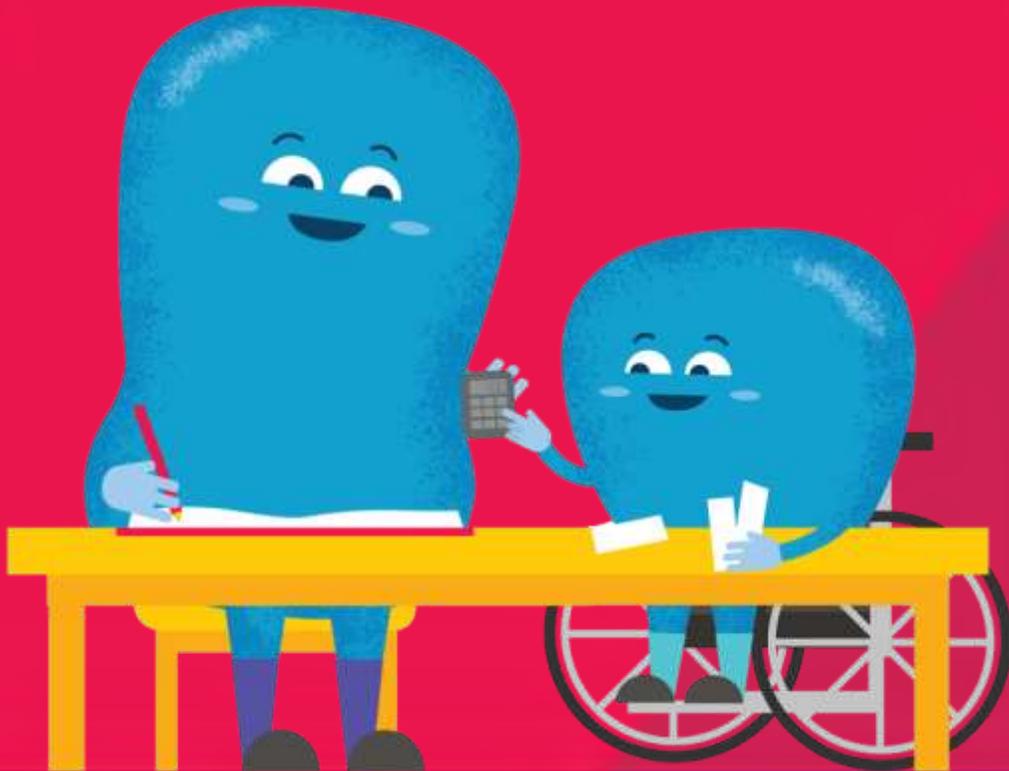
- Send out and share – Telegram, WhatsApp, Facebook (messenger), LINE, Viber, WeChat, Twitter...

## Very high-risk families

- Guidance for caseworkers contacting families by phone and online
- Increase access for people with disabilities (e.g., short videos by local celebrities and sign languages)



# COVID-19 Parenting Challenges and Opportunities



- Time is of essence
- Rapid development and dissemination of resources required
- Materials need to be based on evidence-based research
- Limited impact of online and “light” touch interventions
- Need to build in monitoring and evaluation of reach and impact
- Limited funding but critical need!



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End Violence Against Children



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**LOCKDOWN WITH KIDS IS HARD.  
PARENTS DESERVE PRAISE.  
THEY ARE STARS.**



**WHO website for COVID19 parenting**  
[bit.ly/COVID19parenting](https://bit.ly/COVID19parenting)

**UNICEF Website for COVID19 Parenting**

<https://www.unicef.org/coronavirus/covid-19-parenting-tips>

**More Languages**

[www.covid19parenting.com](http://www.covid19parenting.com)



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End Violence



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Thank you to funders and collaborators

# EVIDENCE FROM RANDOMIZED TRIALS AND COMMUNITY CONSULTATIONS

- ▶ Tomlinson, M et al (in press). Improving mother-infant interaction during infant feeding: A Randomised Controlled Trial in a low-income community in South Africa. *Infant Mental Health Journal*.
- ▶ Tomlinson, M. et al. (2016). Improving early childhood care and development, HIV-testing, treatment and support, and nutrition in Mokhotlong, Lesotho: study protocol for a cluster randomized controlled trial. *Trials*, 17(1), 538.
- ▶ Ward, C. et al (2019). Parenting for Lifelong Health for young children: A randomized controlled trial of a parenting program in South Africa to prevent harsh parenting and child conduct problems. *Journal of Child Psychology and Psychiatry*.
- ▶ Lachman, J et al. (2019). Preventing child mental health problems through parenting interventions in Southeastern Europe (RISE): Protocol for a multi-country cluster randomized factorial study. *Contemporary Clinical Trials*.
- ▶ Frantz, I et al. (2019). Prevention of child mental health problems in Southeastern Europe: A multicentre sequential study to adapt, optimise and test the parenting programme 'Parenting for Lifelong Health for Young Children', protocol for stage 1, the feasibility study. *BMJ Open*, 9(1).
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- ▶ Lachman, J. M. et al (2017). Randomized controlled trial of a parenting program to reduce the risk of child maltreatment in South Africa. *Child abuse & neglect*, 72, 338-351.
- ▶ Cluver, L. et al (2018). Parenting for Lifelong Health: A pragmatic cluster randomised controlled trial of a non-commercialised parenting programme for adolescents and their families in South Africa. *BMJ Global Health*, 3 (1) e000539;
- ▶ Redfern, A et al (2019). Cost and cost-effectiveness of a parenting programme to prevent violence against adolescents in South Africa. *BMJ Global Health*, 4(3), e001147
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# Promoting Parents / Caregivers Psychosocial Support to Ensure Children Well-Being during COVID-19

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[www.ChildFund.org](http://www.ChildFund.org)



# CAREGIVERS condition impacted by COVID-19

## General Issues:

- Worry about uncertain situation (managing dominant feeling)
- Less/lost family earnings
- Additional burden/multi tasking → not only responsible for child rearing but child learning as well
- Hoping for a normal response in an abnormal situation
- Changed daily routine activities

## Parents/caregivers with early childhood children

- Children 3-6 yr feel more attached to their teachers than to their parents
- Need to be creative in explaining about Covid and assist children in learning

## Parents/caregivers of school age children

- Child boredom, spend time only with parents
- Children spending most of their time on gadgets
- Education gap for children in higher grades

# Parenting Guidance from WHO and UNICEF

- One on One time
- Keeping it Positive
- Structure Up
- Bad Behavior
- Keep calm and manage stress
- Talking about Covid-19



# ChildFund Indonesia Parenting Program



- Responsive Parenting for parent/caregivers of early childhood children
- Positive Parenting for parents/caregivers of school age child

## WHY Different?

Because each age group has its own characteristics and needs that require a different parenting style

# Principles Caregivers action in Covid Situation - CFI

- Keep normal routine activities → the changes is only the location where all activities are done (at home and indoors and/or small yard instead of school) → [Structure Up](#)
- **Change caregiver “mindset”** that education/learning and care is one unit → this will decrease the feeling additional burden when children are 24 hours at home
- Focus on caregivers mental health and well being → **we can't provide** good child rearing in stress or while feeling depressed



# Standard Process of Parenting Class

## Normal Situation

- Session conducted twice/month
- 75 to 90 minutes per session
- 20-25 parents/caregivers per group
- 2 or 3 community facilitators per group
- Monthly capacity building session for facilitators
- Each session is a combination of knowledge and skills

## Current situation (adjustment because of covid situation):

- For the area that already have active covid case, the face to face class is stopped and changed the modality to facebook, whats app group call and video at evening time (30 min/weekly).
- Capacity building facilitators through zoom meeting
- For the remoted village that not yet found active covid case, the session still held but with protocol of covid, seat in distance, wear mask, hand wash when entering the venue, no shake hand.

# Standard Content of Parenting Class

## Normal Situation

### General content:

- Concept of parenting
- Short- and long-term goals in parenting
- Positive discipline
- Sex education
- DRR and CBCPM

### Specific to Responsive Parenting:

- Early stimulation and school readiness → **“bringing ECD teachers to home”**
- Nutrition
- Other practical skills that align with the needs of early childhood

### Specific to Positive Parenting:

- Effective communication to children and persuasive communication to spouse and caregiver peers
- Parenting 4.0

[www.ChildFund.org](http://www.ChildFund.org) mental health

## Covid Situation:

- Focus on the information about covid, sharing and support on facing daily parenting challenges
- Parenting group as the media for sharing COVID information
- IEC distribution on parentings tips and activities guidance of parent and children for all age group

# Psychosocial support for caregiver through parenting program

Establishment regular parenting program DOES support the caregiver psychosocial status during covid outbreak, because:

- Practicing positive discipline in daily care decreases the tension of caregivers → manage bad behavior, keeping it positive
- Parenting groups that have routine meetings create a bond between parents/caregivers and they use this opportunity to share parenting challenges → support group, talking about Covid
- Practicing 6 mental health skills on: 1) manage negative thoughts; 2) manage negative feelings; 3) self respect; 4) take good decisions; 5) seek support; 6) simple relaxation practices → keep calm and manage stress

# What Caregiver Say..... (1)

"We can easily see the different reaction of parents who routinely joined the responsive parenting meetings and parents that have not been involved in responsive parenting in the COVID-19 outbreak. Parents who joined the parenting classes have no significant problem conducting stimulation and learning at home, as they practiced these skills regularly while parents that never joined responsive parenting always complain and feel a heavy burden teaching their kids at home. Some children call us crying by phone, because they want to go to the ECD centers, they **don't** want their parents to teach **them**" – WS, ECD tutors/responsive parenting facilitators in Pasar minggu, south Jakarta.

"I **don't** feel any significant change that the ECD centers are temporarily closed, as I can do the stimulation as good as the ECD tutors. My child is happy learning with me. I always practice all the skills that I learn in responsive parenting class at home, so I am used to assisting my **children's learning**" – DW, parents in Cilandak, south Jakarta



## What Caregiver Say..... (2)

*“In the beginning of the COVID-19 outbreak, I was feeling so tense, I was worried about my family, but then I practiced managing negative thoughts and dominant feelings. I said to myself **‘this will pass’** and practiced simple relaxation when anxiety comes, I will be OK. My children face this difficult time and cannot meet their teachers and their friends. I have to support my children the best I **can**”* (K, parents from Kulonprogo, Central Java).

*“After being at home with my children for 24 hours for almost a month, I really used the time to practice parenting 4.0 skills on how I, my children, and gadgets build mutual friendship. Before I got parenting 4.0 I always complained when my children spent time on their gadget, but now I realize that I should take a position on my **children’s** side and be friendly with the gadget* (Parent of E, lebak bulus, south **Jakarta**)”



# Reaching Parents on Responsive Parenting for Young Children in times of COVID 19



# Context

## Coronavirus disease (COVID-19) pandemic

- Upended lives of families, children
- Lead to uncertainty
- Fear

## Need special efforts to ensure for children

- Care
- Protection
- Well-being and
- Yes, survival

# Indian Context

- COVID-19 cases on a high – around 20,000 as on 22<sup>nd</sup> April – with concentration of cases in urban and semi urban areas
- Country in lockdown since 25<sup>th</sup> March till 3<sup>rd</sup> May
- All services except essential suspended - Pre-schools and schools closed since mid-March
- State governments planning staggered lifting of the lockdown districts across the country colour coded
  - Red as hotspots
  - Orange with few cases
  - Green where there are no cases

# Feelings in the Context

Parents and children are at home and disturbed, evidence from India show that more than 40 percent of people are facing emotional distress



# Opportunity in the Context

## CONFINED AT HOME

Preschools and schools are closed due to lockdown and restriction in free movement. Girls and boys are confined at home

## TOGETHERNESS

Time well spent together (between parents and their sons and daughters) will help in bonding.

## PLAY & LEARN

Gendered parenting provides children with appropriate play and learning opportunities  
Play can be stressbuster for parents.

# Parenting in times of COVID-19

Preventive  
Care

Psycho-  
social  
Wellbeing

Continued  
Learning

[What should you know as a parent about COVID 19](#)  
[How do you talk to the child about COVID 19](#)  
[How do you support their children through COVID 19](#)



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# Platforms to Reach out Parents

Current time is not business as usual

- Frontline workers (Anganwadi and ASHA workers in India) have limited outreach to parents and caregivers with the messages – given the lockdowns, restricted movement, suspension of services
- Need to think out of the box
  - Inventive new ways to reaching to parents – IVR, Apps, Social Media, Whatsapp
  - Expanding the work force to reach parents - COVID Academy to reach to organisations and volunteers working with on ground with messages around parenting

# COVID Academy

An innovative platform developed by multi agency collaboration

- National Disaster Management Authority – apex body of Government mandated to lay down policies for disaster management
- SPHERE India – National coalition of humanitarian agencies in India with a vast network of organizations and volunteers
- UNICEF and WHO – Technical partners
- HCL Foundation – provides the IT platform

This online academy is a platform for capacity building of frontline volunteers and outreach workers through a range of technical sessions for preparedness and response to COVID-19

COVID Academy <http://www.sphereindiacovid19academy.org/>

# Sessions in COVID Academy

- Basic of COVID-19
- Science-Stigma-Solidarity during COVID-19 Epidemic
- Maintaining Healthy Eating and Lifestyle for General Population during COVID-19
- Infection Presentation and Control During COVID-19
- Safe Environmental Sanitation and Hygiene during COVID-19
- Disability Inclusive COVID-19 Preparedness and Response
- Welfare of Animals in need During COVID-19 crisis
- Child Protection needs and Psychosocial Support to children during the covid-19 pandemic
- Supporting food security and nutrition in covid-19 pandemic

# Responsive Parenting through COVID-Academy

Responsive parenting and caregiving was one of the session available for volunteers and organisations – first session delivered on 14<sup>th</sup> April

- 940 volunteers attended first session
- Session focus on – orientation to responsive parenting, messages for parents, tips and hands on activities for children, access to resources
- Discussion around reaching to parents in the rural and tribal areas with no or limited access to internet
- Volunteers will take messages to parents on their own or through their organization
- Volunteers will be placed with the local government authorities
- Feedback and hand holding mechanism in place through community focal points

# Responsive Parenting Messages – 6 tips

Spend  
Quality Time  
with Children

Maintain  
Structure

Keeping it  
Positive

Manage  
Challenging  
Behavior

Keep Calm  
and Manage  
Stress

Talk about  
COVID -19



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# HOW CAN WE SPEND TIME WITH FAMILY DURING LOCKDOWN

By Playing



By Watching T.V.



By Drawing



By Reading



By Studying



By making Outdoor games come indoors





ARNEC

Asia-Pacific Regional Network  
for Early Childhood

# Three requests from ARNEC

- Please respond to the webinar evaluation form
- Webinar #3: *Understanding how young children cope with stress, fear and anxiety during crisis such as COVID-19 and how parents and caregivers can support them (April 30)*
- Survey: Impact of COVID-19 on young children and status of ECD in Asia-Pacific



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for Early Childhood



A SURVEY ON

## PERSPECTIVES ON THE IMPACT OF COVID 19 ON YOUNG CHILDREN AND EARLY CHILDHOOD DEVELOPMENT IN ASIA PACIFIC



Visit [bit.ly/ARNECccovid19](https://bit.ly/ARNECccovid19) or scan the QR code on  
the top right to participate in a 10 minute survey

\*By 5th May 2020



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