I. Your critical role in supporting students as they return to school

The COVID-19 pandemic has had a major impact on children, adolescents and their families. Sadly, during containment measures children’s mental health may have been impacted and they may have been exposed to violence, abuse and exploitation. Further, children in households affected by the financial impact of containment measures may be at risk of exploitation and harmful traditional practices. These impacts of COVID-19 might affect both school attendance and school attainment in the short- and long-term.

As schools reopen, teachers, school management and other trusted school personnel are in a position to play a critical role in protecting and supporting children:

- Schools may be the first place where a child has contact with a trusted adult outside their family after months of home confinement. You may be the first person to whom children can report abuse or other problems;
- This may be the first time that students who are suffering abuse and harm or who are struggling to cope with the impact of COVID-19 and containment can be identified; and
- You will be able to flag absenteeism, which may be a sign of abuse or exploitation.

This document provides: a summary of risks and impacts of COVID-19 and containment measures on children to be aware of; tips for identifying signs that your students may be suffering abuse and harm or struggling to cope; and key steps you can take to support them.

II. Understanding the impact of COVID-19 and containment measures on your students

The impact on your students’ mental health and well-being

- Some children have suffered health and psychosocial consequences from the pandemic. They may have fallen sick themselves and been isolated from their family. Their family member or friend may have contracted COVID-19 and they may have lost loved ones from the virus. They may have experienced or still be experiencing fear and worry about themselves or their family and friends contracting the virus and they may be worried about the risks of coming back to school.
- School closure and lockdowns have disrupted children’s daily routines, interrupted their education and disrupted their ability to socialise and seek support from their friends, impacting their mental health and ability to cope with increased stress.
- Children may also be worried about the future and be concerned about the economic impact of COVID-19 on their family.
• Adolescents may have seen their futures impacted from examinations not being held. Adolescents in particular are at-risk, as most mental health conditions develop during this period of life.  
• Learners with disabilities or learners without access to technology may have been left out of distance learning, potentially resulting in falling behind and a feeling of being discriminated against, as well as fear about not being able to catch up when schools reopen.

The increased risk of emotional, physical and sexual violence and abuse
• Parental and family stress and use of unhealthy coping mechanisms (such as alcohol abuse) may have increased the risk of children experiencing neglect, violence and abuse during containment measures. There has also been an increased risk of children witnessing domestic violence.
• Children and women facing abuse may not have been able to escape the household and seek help due to movement restrictions and the disruption of protection services.
• Increased time online, especially unsupervised time for younger children, may have heightened the risk of children being exposed to harmful content, cyberbullying and online sexual abuse and exploitation.

The increased risk of exploitation, early/forced marriage and teenage pregnancy
• For many families, especially those that were already financially vulnerable, the economic impact of the crisis has been severe and will continue to worsen. Some families may lose their incomes and their homes.
• To reduce economic burdens, families may engage children in work, including hazardous and exploitative labour, or may send them to beg.
• Sexual exploitation of children may also increase, including exploitation facilitated by parents and caregivers, such as online live streaming.
• Due to economic strain, the instance of early/forced marriage may increase.
• In other public health emergencies, teenage pregnancy rose, including because safe spaces such as schools had closed and girls were at increased risk of sexual abuse, violence and exploitation. This is also a risk during the COVID-19 pandemic and containment measures. Pregnant girls and adolescent mothers often do not return to school because of stigma, childcare obligations, economic considerations and laws and policies that discourage or block them from doing so.

The increased risk of stigma and discrimination
• Students, including those belonging to certain groups or coming from areas with high rates of infection, may be suspected of being infected and become the target of stigmatization, discrimination, bullying and violence inside and outside of school.

Already vulnerable groups, such as adolescent girls, children with disabilities, children of diverse sexual orientation, child refugees and children affected by migration are particularly at risk of the impacts of COVID-19 and containment measures.

III. Addressing the impact of school closures on your students

Absenteeism
After prolonged school closures, there is an increased risk of children not returning to school. While for some children and families this may be linked with the fear of infection with COVID-19, for most it will indicate a risk of dropout, the presence of mental health concerns or problems in the family, including child protection vulnerabilities such as exploitation or abuse. Absenteeism may result from or indicate:
• Psychosocial distress, in particular increased fears, worries and other acute emotions;  
• Child abuse or neglect;  
• Families using their child for work or exploitative activities at home or outside the home because of financial anxiety;  
• Early/forced marriage or unintended pregnancy;  
• Bullying and stigma at school;  
• Children falling behind in studies during containment. For example, some children may not have been able to access available online learning platforms while schools were closed.  
• Regular means of transport to come to school not being “contamination proof” or becoming unaffordable (due to increased financial stress).  
• Families not being able to afford the protective equipment, such as masks, necessary for students to return to school.

Tips for teachers
• Be vigilant on absenteeism among your students and monitor absences. Protracted absenteeism contributes to school dropout.
• Understand the risks and context causing children to be absent from or dropout of school.
• Intervene early to prevent chronic absenteeism or dropout.
• Consider how to adapt your teaching approach and style in order to accommodate the needs of students who are facing problems arising from COVID-19, the closure of schools and other containment measures.
• Seek out the support of the school counsellor, if available, to help to address students’ needs.
• Alert school management in a timely manner if your student has not returned to school within the agreed period.
• In consultation with the school management, collaborate with community workers and child protection workers/social workers to proactively reach out to families and communities, to encourage children’s return to school.
• Adapt activities during the first weeks of reopening to encourage children to return to school and to help to address anxieties (e.g., mental health and psychosocial support (MHPSS) activities, discussions and activities to address fears, etc.).
• Proactively address bullying, including stigma and discrimination related to COVID-19.

Tips for school management

• Establish a system in your school for monitoring and identifying children who have not returned to school within a reasonable timeframe (to be determined by the school or local education authorities).
• Report which children have not come back to school to Social Welfare/Child Protection authorities and work with them to identify and address barriers to children’s return to school.
• Update and test school-based referral and reporting mechanisms (to the Social Welfare/Child Protection authorities), adapted for COVID-19 if necessary.
• With your teachers and Social Welfare/Child Protection agencies, set the guidelines for who, when and how to reach out to absent children and their families, in accordance with the school’s child safeguarding and child protection policies and procedures.
• If school absenteeism is a challenge in the school, consider consulting with your teachers and school management committee, communities and education authorities, to discuss measures to support children in the community to return.
• Review procedures and policies to ensure that children are not intentionally or unintentionally prevented from attending school (e.g. because they cannot afford protective equipment such as masks, because of a policy on excluding pregnant students or students who are mothers).
• Ensure a zero tolerance and proactive approach to tackling bullying and stigma.

Abuse
Boys and girls of any age can suffer abuse, including physical, sexual and emotional violence and abuse, and neglect. Very few children report cases of abuse or neglect and actively ask for support from adults. Abused children might blame themselves or not understand what is happening to them, especially if they are younger. They also may be scared of the consequences for themselves or their family if they speak out. During containment, abuse may have started or gotten worse, and children will have had less opportunity to tell someone they trust and also less opportunity to seek help.

Tips for teachers

• As your students return to school, you might be the first trusted adult they have encountered outside their home since containment measures started. Ensure you provide a safe and child friendly environment for your students in your classes. Encourage your students to ask for help if they need it. Make them aware of the school’s child protection policy and procedure, in an age appropriate manner, and provide them with information on where to access support in school and out of school. Be aware that female students may prefer to speak to female teachers/staff and male students may prefer to speak with male teachers/staff.
• Display numbers or details of available hotlines and helplines that your students can use to get help. Include information about disability-accessible platforms, where available.
• Discuss online safety with your students – see Tips for Young People and Tips for Parents and Caregivers.

Tips for school management

• Ensure the school has a child protection and safeguarding policy and procedure in place that includes a clear reporting and referral mechanism for teachers and school management. If the school has a policy and procedure in place, take the opportunity to review the documents to ensure they cover child protection risks exacerbated by COVID-19 (e.g. child online protection).
• Establish communication with Social Welfare/Child Protection authorities. Verify the reporting and referral mechanisms with them (in advance of the school reopening, if possible). If necessary, agree on adaptations to the COVID-19 context.
• Ensure that all staff, including teachers and non-teaching staff, are familiar with the school’s policy and procedures on child protection and safeguarding, including reporting and referral mechanisms. Providing refresher training on the policy and procedures is highly recommended.
• Ensure that students are informed about the child protection policy and procedures.
• Ensure that there are trained male and female staff who students can access and talk to.
• Identify helpline and hotline services that are available in your area and share with your students and teaching staff.
• If it is possible, position social workers in schools during the reopening to facilitate referrals for students that need support.
• Provide emotional and practical support by helping students to access social welfare services and/or mental health and psychosocial services, as needed and available.
• Ensure that a child with disabilities has a trusted assistant to accompany her/him to the services and/or a trusted interpreter in case the services do not provide this.

**Tips for teachers - identifying abuse and neglect**
As your students return to school, be extremely vigilant for signs of possible abuse that they may be experiencing. Remember:
• While some children may tell you about the abuse they are suffering, most will not.
• Signs of certain forms of violence, such as physical violence, are easier to recognize, while sexual and emotional abuse may be more difficult to identify, as signs may be hidden.
• Indicators of abuse can be physical or behavioural or both. See the table below for more details (non-exhaustive examples).

<table>
<thead>
<tr>
<th>Physical signs of abuse</th>
<th>Behavioural signs of abuse</th>
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</thead>
<tbody>
<tr>
<td>▪ Unexplained injuries, abdominal injuries, lacerations, abrasions, fractures, burns, bruises/welts, dislocations, injuries to the head, bald spots and scalp bruises</td>
<td>▪ Frightened of parents and afraid to go home</td>
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<td>▪ Signs of severe, long-term bruising</td>
<td>▪ Wary of adult contact</td>
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<td>▪ Burns</td>
<td>▪ Displays behavioural extremes</td>
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<td>▪ Bite marks</td>
<td>▪ Apprehensive when other children cry</td>
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<td>▪ Evidence of old but untreated broken bones</td>
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<tr>
<td>▪ Delays in emotional and intellectual development</td>
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<td><strong>Sexual abuse</strong></td>
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<tr>
<td>▪ Wearing layers of clothing, ‘double dressing’</td>
<td>▪ Unwilling to change for sports classes and activities</td>
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<tr>
<td>▪ Medical problems such as stomach pain when walking or sitting</td>
<td>▪ Inappropriate sexual knowledge and behaviour, or overly affectionate/knowledgeable in a sexual way</td>
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<td>▪ Pregnancy</td>
<td>▪ Learning difficulties and deterioration in school</td>
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<td>▪ Lack of trust or fear of someone they know well</td>
<td>▪ Lack of trust or fear of someone they know well</td>
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<td>▪ Abrupt change in behaviour or personality change</td>
<td>▪ Abrupt change in behaviour or personality change</td>
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<td>▪ Over compliance</td>
<td>▪ Over compliance</td>
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<tr>
<td>▪ Poor peer relations; isolated from friends, shy, reserved, fearful</td>
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<tr>
<td>▪ Withdrawal, infantile behaviour, regression and compulsive behaviours</td>
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<tr>
<td>▪ Self-harm/mutilation</td>
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<tr>
<td>▪ Delinquency/offending</td>
<td>▪ Delinquency/offending</td>
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<td>▪ Attempted suicide</td>
<td>▪ Attempted suicide</td>
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<tr>
<td>▪ Drastic change in appetite</td>
<td>▪ Drastic change in appetite</td>
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<tr>
<td><strong>Emotional abuse</strong></td>
<td></td>
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<tr>
<td>▪ Neglect of appearance</td>
<td>▪ Learning problems or sudden speech disorders</td>
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<tr>
<td>▪ Slow physical development</td>
<td>▪ Disruptive or attention-seeking behaviour</td>
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<tr>
<td>▪ Low self-esteem, insecurity</td>
<td>▪ Low self-esteem, insecurity</td>
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<tr>
<td>▪ Anxiety and fear of new situations</td>
<td>▪ Anxiety and fear of new situations</td>
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<tr>
<td>▪ Inability to relate to others; difficulties in forming relationships</td>
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<tr>
<td>▪ Withdrawal</td>
<td>▪ Withdrawal</td>
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<td>▪ Neurotic traits</td>
<td>▪ Neurotic traits</td>
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<tr>
<td>▪ Depression</td>
<td>▪ Depression</td>
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<tr>
<td>▪ Slow intellectual or emotional development</td>
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</tbody>
</table>
### Neglect
- Unattended physical problems
- Poor clothing, or dressed inappropriately for age
- Untreated medical problems
- Poor hygiene or neglected personal cleanliness.
- Frequently missing school
- Early arrival or leaving late
- Constant hunger; begging/stealing or hiding food; losing weight
- Saying that there is no one to care for him/her
- Falling asleep in class, constant tiredness and listlessness
- Conduct disorders; behavioural difficulties; attention seeking behaviour; delinquent acts
- Withdrawal
- Anxiety
- Depression
- Few friends
- Failure to thrive

### Possible severe abuse
- Fears going home
- Reluctant to have parents contacted
- Distrust of adults
- Fear of physical contact - flinching if touched
- Aggression
- Being isolated or withdrawn
- Inability to concentrate or regressing to younger behaviour
- Self-destructive tendencies; suicide attempts; depression; self-mutilation

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**Tips for teachers – when you suspect abuse or a child reports abuse to you**

- Ensure you know the school's policy and procedures on child protection and child safeguarding.
- Ensure you know who you need to report to if you suspect abuse or a student discloses abuse to you, and report immediately.
- Ensure you maintain confidentiality in line with the school's policy and procedure.

**DO**

If a student discloses abuse to you:

- Stay calm.
- Listen respectfully and carefully, with empathy, to what he/she is saying.
- Ask about the student's worries or concerns and needs, and answer all of their questions.
- Recognize the student's feelings and respond without judgement.
- Take action to keep the student safe and minimize harm, including harm that might arise from them sharing their experience and the likelihood of the abuse continuing.
- Provide information appropriate to the student's age about what you will do and whether and with whom you will need to share any information.
- Handle the disclosure with discretion.
- Ensure the conversation takes place in a way/place that maintains the student's privacy.

If you suspect a student has been abused:

- Be aware of the evolving behaviour of the child, without making it obvious you are observing the child.
- Offer opportunities to discuss individually about issues that may worry the child.
- Handle your suspicions with discretion.

**DO NOT**

- Do not make promises you cannot keep.
- Do not investigate any allegations your students make.
- Do not confront the alleged abuser.
- Do not judge the offender or the offence.

**Stress, grief and mental health**

As students come back to school, if they have experienced stressful or painful events, you might notice that they are:

- Sleepy, as they may have difficulties sleeping or have frequent nightmares.
- Scared, alert and manifesting fears.
- Withdrawn and seeking isolation.
- Being sad and crying more than usual, sometimes for no apparent reason.
- Irritable and aggressive with peers and adults and rejecting rules.
- Complaining about stomach pain or headaches.
- Starting to behave younger than they really are.
- Clinging, including to teacher, and exhibiting other dependent behaviours.
• Exhibiting decreased interest in playing and engaging in playful activities.
• Getting distracted often/easily, showing difficulties in completing tasks and concentrating and suffering a drop in motivation to learn and engage during lessons or in their school performance.
• Losing hope for the future and suffering disillusionment.
• Experiencing increased anxiety concerning their safety.

**Tips for teachers - supporting students’ mental health and psychosocial wellbeing**

- Understand students’ behaviours and feelings and be able to recognize signs of severe distress.
- Be open to your students. They may be looking for support and reassurance from you. Actively listen to them when they share how they are feeling and give them comfort.
- Promote a supportive learning environment, as it is key to help your students gradually release tension and painful feelings and overcome their distress, grief and loss.
- Conduct activities in the classroom to promote understanding of emotions and reactions to stressful events, while encouraging positive coping strategies.
- When students appear distressed, prioritize support to their psychosocial wellbeing, including adoption of coping strategies, over learning outcomes.
- Actively engage with caregivers to share concerns related to children’s wellbeing and capacity for recovery.
- When you have concerns related to imminent threats to the safety of a child (e.g., a student attempting suicide), you must inform school management, who in turn must immediately alert appropriate Social Welfare/Child Protection authorities (such as social workers).

**Tips for teachers – supporting children with loss and grief**

Some of your students may have experienced loss of family members and friends during the COVID-19 pandemic. They may be struggling to cope with loss and grief. In addition to the above tips in creating a supportive environment for your students, being open to your students to discuss their feelings and being alert to signs of distress:

- If they choose to speak to you, help students talk about the person they have lost. This can be in terms of describing the person, their appearance, what they liked to do, the time the child spent with them and things they did together. Remember - do not say or imply that just because other children have been through similarly painful experiences, this should lessen the difficult emotions that your student is experiencing.
- You can use age-appropriate toys, artwork, and other creative ways (role play, puppets, writing journals) to help them communicate and express their feelings.
- It is important to not refer to a child as ‘the child who lost his/her mother/father…’ because this will become that child’s whole identity rather than allowing them to retain their identity and heal.
- Refrain from using technical terminology or psychological diagnosis, such as ‘depression’, as these diagnoses are not substantiated by professional evaluation. These terms may increase stigma and are not helpful for the recovery process.

**Tips for teachers – when students are aggressive or have angry outbursts**

Students who have experienced loss and grief or are experiencing severe distress may be aggressive or have angry outbursts. This is may be challenging for you to manage.

- Avoid getting upset or angry with your students when they adopt aggressive or other disturbing behaviours. Remember that such behaviours are often a request for help, indicating that things are not okay and they are struggling.
- Try talking to your student in a calm and firm manner. However, if a student is uncontrollably upset (angry or sad), do not attempt to engage them in conversation. Wait for them to calm down before addressing the aggressive behaviour with the child. Once the situation is calm, try to speak to your student about what happened. You can help your student understand the consequences of the behaviour and identify the reason for being angry or frustrated. You can also help your student to identify different ways for them to express their anger, frustration, sadness or other disturbing emotions causing the intense reaction.
- If they are crying, do not try to distract them with other activities to get them to stop. Stay silent and allow them to cry. Once they have calmed down, gently and respectfully address the issue they are crying about.
- One option is also to give your student a ‘time-out’ from the classroom, letting them calm down and regain control over themselves. However, this should be done only if there is a trusted adult who can supervise and be of support to the child while out of the classroom.

**Referral**

You should report to school management, which should refer the case to existing service providers for dedicated and specialized mental health and psychosocial support services, if the student:

- Continues to be overwhelmed by immediate emotional reactions.
- Has severe physical reactions.
• Is very withdrawn and unable to return to daily activities.
• Lacks orientation of time and place.
• Cannot remember events of the past 24 hours.
• Gets overly aggressive and violent.
• Speaks about or attempts suicide or self-harm.
• Uses harmful coping mechanisms, such as alcohol or drugs, or adopts other harmful behaviours.

**Tips for school management**

- Identify available service providers in the area that can provide mental health and psychosocial support services (PSS) for under-18s and for your teachers and school staff and put in place a referral mechanism. This should be done in advance of the school reopening, if possible.
- Where possible, provide training on PFA and PSS for your teaching staff and school counsellors.
- Promote PSS activities at the school, especially in the first few weeks when your school reopens, to support your students during the transition period. Allow time for learners and teachers to adjust before fully restarting academic lessons.

### Psychological First Aid (PFA)

PFA provides immediate humane, supportive and practical help to a child (or adult) who is suffering serious crisis events and who may need support. PFA differs from professional counselling and you don’t need to be a professional to provide it. PFA should be provided respecting the dignity, culture and abilities of its recipient. The RAPID model to PFA includes:

- Reflective listening
- Assessment of needs
- Prioritization
- Intervention
- Disposition

Guidance on PFA is available in the WHO *Psychological first aid: Guide for field workers*, endorsed by many organizations¹⁸, in the Inter Agency Standing Committee *Basic Psychosocial Skills: A guide for COVID-19 responders*¹⁷ and in the online course on PFA offered on Coursera and Agora (agora.unicef.org).

**IV. Taking care of your own mental health and psychosocial wellbeing**¹⁵

The last few months may have been very stressful for you and your family. You might be dealing with your own grief and loss or worried about financial issues and your own fears of COVID-19. You may feel increased pressure as you help your students return to school. It is very important that you look after yourself and your own mental wellbeing. This will also allow you to better support your students.

**Tips for teachers**

- Maintaining a healthy lifestyle will help you to manage your stress. Follow a proper diet, get sufficient sleep, exercise, keep connected with your loved ones and make time for activities that you enjoy.
- Talk to people you trust, if you can every day, including your friends and family. Also consider turning to other teachers or colleagues who may be experiencing similar feelings. Consider creating a peer support group, if possible.
- Avoid negative coping mechanisms, such as alcohol or drug abuse, to deal with your stress and emotions.
- Get the facts about COVID-19. Gather information that will help you take reasonable precautions. Find a credible source of information you can trust such as a local or state public health agency, WHO or UN agencies.
- Draw on skills that you have successfully used in the past to manage adversity in your life and use these skills to manage this challenging time.
- Know where you can seek help for physical and mental health support if needed.
- If you are handling a case of disclosure or suspicion of abuse, ensure you get support for yourself as well.
References

1 United Nations, 13 May 2020. COVID-19 and the need for action on mental health
3 Adapted from:
   - IA CP CM Training, Module A, slides 49 –61 and Global Education Cluster. Recognising child abuse (Childline RSA);
   - Global Education Cluster, Recognising child abuse (Childline RSA);
4 Adapted from:
   - IA CP CM Training, Module A, slides 49 –61 and Global Education Cluster. Recognising child abuse (Childline RSA);
   - Global Education Cluster, Recognising child abuse (Childline RSA);
5 Adapted from:
   - IA CP CM Training, Module A, slides 49 –61 and Global Education Cluster. Recognising child abuse (Childline RSA);
   - Global Education Cluster, Recognising child abuse (Childline RSA);
6 Adapted from:
   - IA CP CM Training, Module A, slides 49 –61 and Global Education Cluster. Recognising child abuse (Childline RSA);
   - Global Education Cluster, Recognising child abuse (Childline RSA);
7 Adapted from:
8 Adapted from UNICEF EAPRO C4D Child Protection Mental Health and Psychosocial support messages during the COVID-19 response
9 Adapted from UNICEF EAPRO C4D Child Protection Mental Health and Psychosocial support messages during the COVID-19 response
10 Depending on the age of the child and only if appropriate to the culture and if gender sensitive, you could hug the child to provide additional comfort. However, this tip applies only if in compliance with the COVID-19 prevention measures established within the own country; it is not applicable where social distancing is required to avoid spreading the virus. In addition, you must be very careful and mindful of your physical behaviour (including physical proximity and body language) to ensure that your actions do not provoke additional discomfort to the child. In addition, you must ensure that your actions are not inappropriate. For instance: for an adolescent, being hugged or touched by an adult may cause discomfort; a male teacher hugging or touching an adolescent girl is never appropriate. If you have any doubt, then it is advised not to hug or touch the child but only to sit with them.
12 https://apps.who.int/iris/bitstream/handle/10665/102380/9789241548618_eng.pdf;sequence=1
14 Adapted from:
   - UNICEF and others, 2020. COVID-19 PARENTING. When We Get Angry
   - UNICEF and others, 2020. COVID-19 PARENTING. Keep Calm and Manage Stress