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Please document any feedback that you receive from the field on the technical note. Feedback could be related to revision of existing text or information gaps. The aim of this document is to help us when we decide to update the technical note. Please be as specific as possible in your https://www.google.com/url?q=https://www.google.com/chrome/browser/%3Fhl%3Den-gb%26brand%3DASVC%26utm_source%3Den-gb-material-callout%26utm_medium%3Dmaterial-callout%26utm_campaign%3Dedge-slides-material-reco&source=hpp&id=19016402&ct=7&usg=AFQjCNHpHnEJmbXn3t66lClKN5He67GYTQ feedback to support integration in the next version.

Please provide the following three pieces of information when you document your feedback:

Name (of person documenting the feedback):

Type of feedback (new content, revision, etc):

Feedback (content of the feedback):

------------------------ 18 March 2020--

Name (of person documenting the feedback): Vijaya RR

Type of feedback (new content, revision, etc): mix

Feedback (content of the feedback):

1. Perhaps we could add a few more sentences about the international human rights legal framework that continue to apply in this current context, including the restrictions placed on the actions by States to curtail or limit human rights including for children. As the recent statement from OHCHR (https://www.ohchr.org/EN/NewsEvents/Pages/DisplayNews.aspx?NewsID=25722&LangID=E) highlights the declaration of national emergencies on the grounds of public health or other reasons have very clear parameters in human rights law. While many of the points draw attention to the situation of children already in detention, I am also concerned as we go forward that some governments may in fact deprive children of their liberty on health related grounds or could use the crisis as a basis to detain specific groups of children.
2. Following on from this point, while there are clear points made in the paper on consulting children and young people in the design and delivery of interventions, we could articulate even further the role of children and young people vis-à-vis their rights to express their views about matters/decisions that affect them, consent to medical treatment, and periodic review of their treatment/placement. Some of this does blur the lines between health and child protection

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    concerns, however my experience has shown that the health sector can sometimes be a little less vocal about children's rights so perhaps we can support them by including such elements.

3. While it is not within the scope of the paper to draw out every cp issue for every single group of vulnerable children, perhaps we could include even more specific tailored child protection actions or considerations for children with disabilities. My sense is that the standard catch all phrase of "strategies/interventions to protect vulnerable groups" leaves colleagues without some concrete actions that can be taken, including accessible services and communications.

------------------[21 March 2022]-----------------------

Name (of person documenting the feedback): Monika S.

Type of feedback (new content, revision, etc): mix

Feedback (content of the feedback):
- Provide some guidance on how to activate/boost child helplines
- Provide training for CP actors to be able to provide some services through helplines
- Look into the situation of institutions that are closing due to COVID-19

------------------[23 March 2020]-----------------------

Name (of person documenting the feedback):
Patricia Lim Ah Ken

Type of feedback (new content, revision, etc):
New content

Feedback (content of the feedback):
- Proposing to include content on heightened child online protection risks due to many children now being online (for learning and other purposes);
- Risk of COVID-19 for children in residential care facilities (institutions/orphanages etc.)

------------------[23 March]-----------------------

Name (of person documenting the feedback): Richa Nagaich

Type of feedback (new content, revision, etc): mix

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Feedback (content of the feedback):
1. Suggestion to include risks for children in child care institutions/residential care facilities. Also, in cases where child care institutions are being shut and children are being sent back to stay with parents/families, what are the mechanisms and strategies to ensure well-being of children?
2. Proposing to elaborate about the risks and responses for the well being of children who are already placed in family-baes/family-like alternative care settings.

------------------[23 March]-----------------------

Name (of person documenting the feedback): Tasha G.

Type of feedback (new content, revision, etc): New Content

Feedback (content of the feedback):
-   Guidance on quarantine
-   Care for children without parental care, children with disabilities,

------------------[24 March]-----------------------

Name (of person documenting the feedback): Jennifer Lee (jennifer.lee@rescue.org)

Type of feedback (new content, revision, etc): New content

Feedback (content of the feedback):
-   Add increased risk of sexual violence in the home on page 1 of the COVID-19 Guidance Note under the GBV section of the table
-   Related to the point above, additional guidance on safety planning and harm reduction
-   Please let me know if the Child and Adolescent Survivors Initiative can support with the points noted above - happy to contribute as needed

Name (of person documenting the feedback): Writu Bhatta (Rai)

Type of feedback (new content, revision, etc): new content
-   Urban children are mostly engaged in the internet and online activities, they might get sexually and emotionally exploited..
-   Separated and working Children and Adolescent may deprived, discriminated, denied of health, protection, hygiene and nutrition

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  - Children on move, mainly cross boarder moving children, might get unattended and forcely detainedChildren in institutional care including juvenile may have limited access to health facility, lack of personal hygiene, inadequate proper facilities

Advocacy Actions:
  - Educating NGOs on child protection in infectious disease caused crisis through virtual classes, such as webinars.
  - Advocate to include in health response protocol for including identification of dependent children and refer to child protection service providers.
  - Build/rebuild contact with government officials and act with distant lobbying for considering child protection in Covid-19 response.
  - Mobilise media at local and international level (online, TV/audio, blogs) to raise concern on Child Protection in Covid-19 Crisis.
  - Advocate with Social Media operators to receive complaint on rumors and misleading information and Control over such content.
  - Develop regional forums (Virtual- Such as Whatsapp or Viber) of NGOs to advocate with their local, national governments and promote cross boarder collaboration.
  - Sharing of Technical note into local languages and sharing

------------------[26 March 2020]-----------------------

Name (of person documenting the feedback): Anne-Laure B.

Type of feedback (new content, revision, etc): Strengthening prevention aspect

Feedback (content of the feedback):

- Starting from facts that are known would be recommended, and the facts in question relate to (this is not an exhaustive list):
(i) the number of people affected by the virus by region/country, the fact that older people and people with health issues are more at risk, etc.
(ii) high and middle income countries are more affected than other countries, but some other countries have started to be affected.
(iii) quarantine measures taken in the first category of countries vs. absence or impossibility of quarantine measures in the second category + in certain settings such as refugee camps or settlements.
(iv) closure of certain countries' borders.
(v) non essential socio-economic activities have stopped.
(vi) state of emergency declared with increased police power.
- Based on these facts, I would detail the corresponding CP risks. In addition to the ones listed in the Note, maybe the risk of a major socio-economic crisis and its effect on girls and boys could be included, and risk of police/state violence and its impact on children.

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------------------[28 March 2020]-----------------------

Name (of person documenting the feedback): Dharmendra Kumar

Type of feedback (new content, revision, etc): Personal Hygiene related basic materials support in rural areas of developing countries.

Feedback (content of the feedback):
   ❖ **COVID -19 is a global epidemic that is spreading around the world As per researcher we can save ourselves through good personal hygiene habits, so need all person hygiene-related materials supply in rural areas of across the developing countries.**
   ❖ **As per my personal experience of rural areas that their children are not friendly with personal hygiene behaviour related to precaution of the COVID-19. They are not aware of COVID 19. Till date they do not know about Mask, Hand Sanitizer, Alcohol Hand Wash and Hand Gloves due to awareness and economically families poor background.**
   ❖ **To be needed personal hygiene related materials production and supply systems at the local level.**
   ❖ **Children are living in very risk in present a global epidemic situation especially those living in Child Care Institutions, Open home, Observations homes. There are not proper precautions maintained as per COVID -19. Because there are no basic facilities as per the number of children. There should be a one-metre distance between one bed to another bed.**
   ❖ **In Child Care institutions there are required personal hygiene-related material for the precaution of the COVID-19.**

 ---------------[31 March]-----------------------

Name (of person documenting the feedback): UNICEF ESARO CP team

Type of feedback (new content, revision, etc): New Content

Feedback (content of the feedback):

----------------[21 April]-----------------------

Name (of person documenting the feedback): Mariam Fishere, PhD candidate in psychology and researcher; currently working as mental health consultant for the WHO, involved in a low-intensity intervention for mental health and psychosocial support during COVID-19

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Type of feedback (new content, revision, etc.): Revision and new content

Feedback (content of the feedback):

Revision of content:

On P. 1:

- The introduction seems focused on "child marriage and female genital mutilation" in particular. Perhaps leave it more open to all or different types of violence; or, mention some other types in addition to the ones already there?
- "Hundreds of millions of children and adolescents **are likely…"** would give a stronger sense of urgency of the matter, rather than "will."
- I would remove the part mentioning that girls are particularly at risk. I would begin with children and adolescents in general and then mention this later on.
- Text in blue - I would have phrase a strong statement about the danger/urgency of the matter, which we know already from previous pandemics
- I'd change the order - Social distancing; Epidemics are disruptors; non-biomedical explanations; Not all harmful practices (this can be the introduction of how girls are disproportionately at risk) and end on the same "New networks" point

On P. 2:

- Health box can include mental health effects as well

On P. 3:

- Perhaps a good idea to mention the Convention on the Rights of the Child (1989)?

New content:

On P. 2:

- Health box is only focused on girls - I would:
    1. Begin with the general effects
    2. Report the health effects on and for girls
    3. Anything specific for male adolescents?
    4. Generalize the part about STDs, not only for girls/females

- Mental health could include risk for onset of mental health disorders (I'd also change the order in which the effects are listed)

- Children and adolescents in institutions could be mentioned as well

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- Policy-level interventions:
    1. Unaccompanied refugee minors?
    2. Ensuring the quality of services provided within the institutions; not only for children and adolescents but also for service providers and caretakers

- Evidence gathering and research:
    1. Mapping of all available services, especially in areas at-risk
    2. Mapping of all available resources produced by UNICEF and other "sister" organizations

On P. 4:

- Ensure that any use of media is inclusive of children with disabilities

General suggestions:

1. More information on reporting system(s) within countries - reporting of violence, etc.
2. Call for engaging children and adolescents in such planning and action-taking
3. Grief is an important theme that is likely to keep coming up in the coming months, maybe there is something that can be done about it
4. Children who witness violence at home - not necessarily exposed to violence themselves, which is unlikely but still
5. Emotional and verbal violence as well as neglect - not only physical/sexual/etc.
6. Importance of thinking about resilience and empowerment as well