The Strength of Family and Connections

Reaching out to and supporting LGBTQ2+ children and youth and their families: COVID-19 Response & Recovery Guidance Note

Introduction

Across the country, LGBTQ2+ communities have faced a unique set of challenges created by the COVID-19 pandemic. Disparities that existed prior to the pandemic have been amplified. Mental, social, and sexual health challenges that LGBTQ2+ communities faced even before the pandemic have been exacerbated by physical distancing and other measures that have disrupted community spaces and health services that these communities rely on[1]. We should spare no effort to ensure that children, youth and families in these communities remain safe and connected to the services they need.

Families who need the most help may be reluctant to reach out because they fear that letting agencies know they are struggling might lead to heavy-handed and more intrusive child welfare interventions. LGBTQ2+ young people are overrepresented in child welfare, many of which also identify as Black, Indigenous or racialized[2]. A 2020 Quebec study found that Black children in are 5 times more likely to be reported to child protection services than white children[3]. The intersections of homophobia, transphobia,

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[1] David J. Brennan, Kiffer G. Card, David Collict, Jody Jollimore, Nathan J. Lachowsky (2020) How Might Social Distancing Impact Gay, Bisexual, Queer, Trans and Two-Spirit Men in Canada? *AIDS and Behaviour.* https://www.cbrc.net/how_might_social_distancing_impact_gay_bisexual_queer_trans_and_two_spirit_men_in_canada

[2] OACAS Library Guides. *2SLGBTQ+ identities and child welfare* (2022) https://oacas.libguides.com/c.php?g=715117&p=5132947

[3] Boatswain-Kyte, A., Esposito, T., & Trocmé, N. (2020). A longitudinal jurisdictional study of Black children reported to child protection services in Quebec, Canada. *Children and Youth Services Review*, *116*, 105219.

racism, ableism, and sexism further contribute to impoverishment, social isolation and trauma, putting LGBTQ2+ families at increased risk of excessive state intervention.

Supportive effort must include actions to address systemic discrimination and stigmatization faced by LGBTQ2+ communities who have been disproportionately impacted by the COVID-19 pandemic[4].

This publication provides guidance on how front-line practitioners, foster families, alternative caregivers, and governments can help create the conditions for hope and love to shine through this difficult moment and into a brighter, more equitable future for all.

Impact of the pandemic on LGBTQ2+ children and youth and their families

While the COVID-19 pandemic continues to negatively impact the lives of Canadians, it stands to further exacerbate and contribute to the health disparities experienced by LGBTQ2+ community and LGBTQ2+ young people in particular[5]. The disproportionate impacts of COVID-19 on LGBTQ2+ people are seen across a large range of issues including employment, physical and mental health, household finances and quality of life.

In a national online survey conducted in 2019, over half (52.9%) of trans and non-binary respondents reported that COVID-19 had a negative impact on their ability to meet financial obligations or pay for essential needs[6]. Another online survey has shown that LGBTQ2+ people have been "more affected by layoffs and reduced hours than national

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[4] House of Commons. The health of LGBTQIA2 communities in Canada: Report of the Standing Committee on Health (2019). Available at:
https://www.ourcommons.ca/Content/Committee/421/HESA/Reports/RP10574595/hesarp28/hesarp28-e.pdf
[5] House of Commons. The health of LGBTQIA2 communities in Canada: Report of the Standing Committee on Health (2019). Available at:
https://www.ourcommons.ca/Content/Committee/421/HESA/Reports/RP10574595/hesarp28/hesarp28-e.pdf
[6] Trans PULSE Canada COVID Cohort Working Group on behalf of the Trans PULSE Canada Team. Social and economic impacts of COVID-19 on transgender and non-binary people in Canada. (2020). Available at:
https://transpulsecanada.ca/results/report-social-and-economic-impacts-of-covid-19-on-transgender-and-non-binary-people-in-canada/

respondents."[7] More so for LGBTQ2+ people who are Black, Indigenous, or racialized[8]. Indeed, existing inequalities "are exacerbated when other identity factors and determinants of health – such as age, ethnic origin, income and access to health care – intersect with gender identity and sexual orientation[9]." Additionally, a disproportionate number of LGBTQ2+ children and youth experience homelessness. In 2016, prior to the pandemic, 29.5% of homeless youth in Canada reported being LGBTQ2+[10]. Many LGBTQ2+ youth experience homelessness because of unsupportive, homophobic and transphobic families and experience significant childhood trauma such as physical, emotional and sexual violence, with potential impact on their mental health[11]. The COVID-19 pandemic has increased LGBTQ2+ youth homelessness and has exposed them to more violence as a result of public health measures such as "lockdowns", forcing these young people to spend more time in their family homes[12].

LGBTQ2+ youth have also suffered mental health impacts from the pandemic and its disruption to essential health and support services that these communities rely on, such as gender-affirming care, mental health support, and sexual health care. In fact, a 2021 study suggests that mental health and substance use concerns have been exacerbated for this population, by the COVID-19 pandemic. The online survey revealed that a majority of the LGBTQ2+ youth respondents experienced a need for mental health and addictions services after March 2020, but also faced barriers when attempting to access them[13].

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[7] National Observer. The pandemic hit LGBTQ Canadians differently. Researchers want to know why (2020). Available at: https://www.nationalobserver.com/2020/09/24/news/pandemic-hit-lgbtq-canadians-differently-researchers-want-know-why

[8] Laurencin, C.T. & McClinton, A. (2020). The COVID-19 Pandemic: A Call to Action to Identify and Address Racial and Ethnic Disparities. *Journal of Racial and Ethnic Health Disparities, 7,* 398-402: https://link.springer.com/article/10.1007/s40615-020-00756-0

[9] House of Commons. The health of LGBTQIA2 communities in Canada: Report of the Standing Committee on Health (2019). Available at: https://www.ourcommons.ca/Content/Committee/421/HESA/Reports/RP10574595/hesarp28/hesarp28-e.pdf

[10] Stephen Gaetz, Bill O'Grady, Sean Kidd & Kaitlin Schwan. Without a Home: The National Youth Homelessness Survey. Canadian Observatory on Homelessness. Available at: http://homelesshub.ca/sites/default/files/WithoutAHome-final.pdf

[11] Shelley L. Craig, Ashley Austin, Jill Levenson, Vivian W.Y. Leung, Andrew D. Eaton, Sandra A. D'Souza, Frequencies and patterns of adverse childhood events in LGBTQ+ youth, Child Abuse & Neglect, Volume 107, 2020. Available at: https://www.sciencedirect.com/science/article/abs/pii/S0145213420302787

[12] Abramovich A, Pang N, Moss A, Logie CH, Chaiton M, et al. (2021) Investigating the impacts of COVID-19 among LGBTQ2S youth experiencing homelessness. PLOS ONE 16(9): e0257693. Available at: https://journals.plos.org/plosone/article/citation?id=10.1371/journal.pone.0257693

[13] Chaiton M, Musani I, Pullman M, Logie CH, Abramovich A, Grace D, Schwartz R, Baskerville B. Access to Mental Health and Substance Use Resources for 2SLGBTQ+ Youth during the COVID-19 Pandemic. *International Journal of Environmental Research and Public Health*. 2021; 18(21):11315. Available at: https://doi.org/10.3390/ijerph182111315

People who were already struggling to meet their needs have lost critical supports, and have had to cope with a disproportionate sense of loss and trauma related to the pandemic. LGBTQ2+ people reported more stress than the average Canadian and less satisfaction with their lives as a whole[14]. Research has shown higher rates of some chronic illness among sexual and gender minorities, putting them at greater risk to COVID-19[15].

Finally, the pandemic has put additional pressure on LGBTQ2+ children and youth with disabilities and their families. Therapies, specialized recreational programs, key health services, and respite care have been disrupted and delayed and young people in long-term care homes are separated from their caregivers for extended periods of time[16]. These closures assume much more significance for families of LGBTQ2+ children and youth with disabilities and complex medical needs and have led to greater isolation and mental health concerns for these young people[17].

Supporting the Health, Safety and Well-Being of LGBTQ2+ young people and their families in the Context of COVID-19

We must be creative and determined in our efforts to protect, maintain and increase young people's and families' access to services and supports. We must also address the underlying factors that made them vulnerable before, during and will continue to make them vulnerable after the pandemic.

Equity[18] in services and significant access to family, peers, community and culture must be maintained – the kind that satisfies the relational and emotional needs of the young person and those they are connecting to.

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[14] National Observer. The pandemic hit LGBTQ Canadians differently. Researchers want to know why (2020). Available at:
https://www.nationalobserver.com/2020/09/24/news/pandemic-hit-lgbtq-canadians-differently-researchers-want-know-why
[15] House of Commons. The health of LGBTQIA2 communities in Canada: Report of the Standing Committee on Health (2019). Available at:
https://www.ourcommons.ca/Content/Committee/421/HESA/Reports/RP10574595/hesarp28/hesarp28-e.pdf
[16] Baumbusch, Jennifer; Lamden-Bennett, Shawna R.; Lloyd, Jennifer E. V. 2020. The Impact of COVID-19 on British Columbia's Children with Medical Complexity and their Families. Available at :
https://open.library.ubc.ca/cIRcle/collections/facultyresearchandpublications/52383/items/1.0395118
[17] Arim, Rubab, Findlay, Leane and DafnaKohen. 2020. The impact of the COVID-19 pandemic on Canadian families of children with disabilities. Available at: https://www150.statcan.gc.ca/n1/pub/45-28-0001/2020001/article/00066-eng.htm.
18 George Washington University. Equity vs. Equality: What's the Difference? Available at:
https://onlinepublichealth.gwu.edu/resources/equity-vs-equality/

> **"The route to achieving equity will not be accomplished through treating everyone equally. It will be achieved by treating everyone justly according to their circumstances.[19]"**
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> *—Paula Dressel, Race Matters Institute*

The Government of Canada's LGBTQ2+ Secretariat has conducted a nationwide survey between November 27, 2020 and February 28, 2021, collecting a total of 25,636 LGBTQ2+ respondents across the country. The survey was the first activity in the development of the Federal LGBTQ2+ Action Plan which seeks to put an end to the long-standing barriers to full freedom and equity faced by LGBTQ2+ communities[20]. By collecting national data and assessing the current discrimination faced by these communities, equitable and trauma-informed practices may be created to better serve the needs of these young people and their families.

The Ontario Government has also produced a comprehensive resource guide[21] to serving LGBTQ2+ children and youth in the child welfare system that can be used to better answer to the needs of LGBTQ2+ youth in care during the pandemic.

LGBTQ2+ youth are adept at finding community and support through online media and demonstrate considerable resilience. Public health measures such as "lockdowns" have solidified the use of the internet for this population when seeking support with family relationships, identity formation, community and belonging and sharing knowledge and information[22]. This provides an interesting opportunity for service providers to build remote programming and use their online media as a tool to help enforce positive media representations for LGBTQ2+ youth[23].

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[19] "Racial Equality or Racial Equity? The Difference it Makes," Race Matters Institute. 2014. Accessed Oct. 15, 2020. Availble at: http://viablefuturescenter.org/racemattersinstitute/2014/04/02/racial-equality-or-racial-equity-the-difference-it-makes/

[20] Government of Canada. LGBTQ2 Action Plan Survey. Accessed Jan. 2022. Available at: https://women-gender-equality.canada.ca/en/free-to-be-me/lgbtq2-action-plan/survey-findings/quick-stats.html

[21] Government of Ontario. Serving LGBT2SQ children and youth in the child welfare system: A resource guide. Accessed Jan. 2022. Available at:
http://www.children.gov.on.ca/htdocs/English/documents/LGBT2SQ/LGBT2SQ-guide-2018.pdf

[22] Alexa Hiebert & Kathy Kortes-Miller (2021) Finding home in online community: exploring TikTok as a support for gender and sexual minority youth throughout COVID-19, Journal of LGBT Youth. Available at: https://www.tandfonline.com/doi/full/10.1080/19361653.2021.2009953

[23] Shelley L. Craig, Lauren McInroy, Lance T. McCready & Ramona Alaggia (2015) Media: A Catalyst for Resilience in Lesbian, Gay, Bisexual, Transgender, and Queer Youth, Journal of LGBT Youth, 12:3, 254-275. Available at: https://www.tandfonline.com/doi/full/10.1080/19361653.2015.1040193

Trauma-Informed Approaches for COVID-19 Response and Recovery

Trauma can be broadly defined as experiences that cause intense physical and psychological stress, often resulting in long-term adverse effects on an individuals' mental, physical, social, and emotional well-being[24][25]. A trauma-informed approach takes into account the intersection of trauma with other health and social problems. A trauma-informed approach guides services providers to consider the impacts of trauma for children, youth, and families accessing their supports, in order to adapt and shift practices to better serve the needs of individuals impacted by trauma[26]. Trauma-informed approaches are being widely adopted across diverse social services and healthcare settings, supported by ongoing research[27].

Trauma can occur as the result of violence, abuse, neglect, loss, disaster, war, or witnessing a traumatic event. Trauma can also be experienced as a result of ongoing, historical, and contextual factors, such as colonization, forced relocation, genocide, and racism[28].

Trauma can change how one's body responds to stress and is linked to biological survival 'fight or flight' mode. It can be experienced directly or indirectly, by witnessing a traumatic event, or repeated trauma exposure. Trauma can also be a one-time event (acute trauma) or prolonged (chronic trauma). Exposure to traumatic experience(s) can also result in Post-Traumatic Stress Disorder (PTSD), can be carried over generations through parental behaviours and/or a person's environment.

[24] BC Ministry of Children and Family Development. Healing Families, Helping Systems: A Trauma-Informed Practice guide for Working with Children, Youth and Families. (2017) Available at: https://www2.gov.bc.ca/assets/gov/health/child-teen-mental-health/trauma-informed_practice_guide.pdf

[25] SAHMSA's Trauma and Justice Strategic Initiative. (2014). *SAMHSA's concept of trauma and guidance for a trauma-informed approach*. Substance Abuse and Mental Health Services Adminstration. Available at : https://store.samhsa.gov/sites/default/files/d7/priv/sma14-4884.pdf

[26] Bowen, E. A., & Murshid, N. S. (2016). Trauma-informed social policy: A conceptual framework for policy analysis and advocacy. *American Journal of Public Health*, *106*(2), 223–229. https://doi.org/10.2105/AJPH.2015.302970

[27] SAHMSA's Trauma and Justice Strategic Initiative. (2014). *SAMHSA's concept of trauma and guidance for a trauma-informed approach*. Substance Abuse and Mental Health Services Adminstration. https://store.samhsa.gov/sites/default/files/d7/priv/sma14-4884.pdf

[28] Fast, Elizabeth & Collin-Vezina, Delphine. 2010. Historical trauma, race-based trauma and resilience of Indigenous peoples: A literature review. *First Peoples Child & Family Review. Vol 5:1*, pp.126-136.

When supporting LGBTQ2+ young people and their families, it is important to start by recognizing the prevalence of trauma across diverse communities and use a trauma-informed approach[29]. Key components of a trauma-informed approach are:[30][31]

- Awareness of trauma: Build knowledge about the prevlance and impacts of trauma

- Strengths-based: Start with the strengths of people and communities.

- Safety: Foster physical, psychological, and cultural safety.

- Trust: Be trustworthy and transparent to ensure trust is built between those accessing services and those offering support.

- Collaboration: Value peer support, collaboration and mutuality – relationships are essential in healing from trauma.

- Empowerment: Give people and communities the power to decide how care and healing happens.

- Culture and identity: Encourage, prioritize and safeguard the protection of the experiences (and voices) of racialized children and youth to preserve their cultural integrity, including the psychological privacy of their families and/or relatives.

In addition to these key principels of a trauma-informed approach, it is important that when working with LGBTQ2+ young people and their families that their perspectives and experiences with the Child Welfare system and other interrelated systems (i.e., criminal justice, education, health care) are heard and acknowledged.

[29] Substance Abuse and Mental Health Services Administration (SAMHSA). 2014. *Guiding Principles of Trauma-Informed Care*. SAMHSA Newsletter, 22:2.
https://www.samhsa.gov/samhsaNewsLetter/Volume_22_Number_2/trauma_tip/guiding_principles.html

[30] BC Ministry of Children and Family Development. Healing Families, Helping Systems: A Trauma-Informed Practice guide for Working with Children, Youth and Families. (2017) Available at:
https://www2.gov.bc.ca/assets/gov/health/child-teen-mental-health/trauma-informed_practice_guide.pdf

[31] SAHMSA's Trauma and Justice Strategic Initiative. (2014). *SAMHSA's concept of trauma and guidance for a trauma-informed approach*. Substance Abuse and Mental Health Services Adminstration.
https://store.samhsa.gov/sites/default/files/d7/priv/sma14-4884.pdf

What Service Providers, Foster Families and Alternative Caregivers Can Do:

- Connect with organizations that are led by and that centre LGBTQ2+ communities to leverage the knowledge, community capacity and readiness to provide culturally safe social supports

- Be intentional in creating cultural safety.[32] Seek to understand people's experiences, cultural background, connection, and identity and take into consideration cultural healing and community practices as part of the intervention plan.

- Develop services specifically for LGBTQ2+ youth to support their mental, physical, and social health including services that can be accessed remotely to support young people throughout public health measures and that can transition to supporting LGBTQ2+ in remote or rural communities following the pandemic.

- Ensure that children, youth, and their families have access to the necessities they require for their specific needs and that available services have integrated anti-discriminatory policies and programs.

- Involve and listen to LGBTQ2+ children and youth with disabilities and their families when developing ways to help and support them and offer barrier-free financial help, services and emergency supports to strengthen families' ability to meet the needs of LGBTQ2+ children and youth with disabilities.

- Consult with youth as well as Diversity, Equity and Inclusion (DEI) experts to determine the best approaches to address to the needs and concerns of LGBTQ2+ youth and their families, more so if they are Black, Indigenous or racialized.

- Adopt a rights-based approach in service access and delivery as outlined in the UNCRC.

- Use a trauma-informed approach to services and supports

- Validate young people's worldview, their worth, and their strengths.[33]

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[32] Additional resources on cultural safety: https://www.fnha.ca/wellness/wellness-and-the-first-nations-health-authority/cultural-safety-and-humility

[33] Kenneth V. Hardy, Healing the Hidden Wounds of Racial Trauma (2013) https://static1.squarespace.com/static/545cdfcce4b0a64725b9f65a/t/54da3451e4b0ac9bd1d1cd30/142358 6385564/Healing.pdf

- Provide ongoing guidance and mentorship through modelling healthy coping behaviours and responses to challenging situations.
- Support LGBTQ2+ youth and their families in affirming their identities
- Address bullying based on stigmatization in the school environment from an anti-oppressive framework.
- Understand how your own social identity, cultural bias (worldview), social location, and the position of power and privilege you hold as a service provider can impact your relationship with LGBTQ2+ people, as well as the services you are providing to them.

What Governments Can Do:

Provincial Government:

- Increase funding for services that support LGBTQ2+ communities.
- Ensure that there is a cross-sectoral body to address the negative impacts of COVID-19 for LGBTQ2+ communities.
- Ensure child welfare agencies prioritize Diversity and Equity.
- Declare families of LGBTQ2+ children and youth with disabilities essential workers and allow them to access critically important services and care for their loved ones during pandemic lockdowns.
- Implement anti-discrimination curriculum as part of new worker training for child welfare agencies and other service providers.
- Ensure workers in health, social services, and child and family services receive training on developing and implementing disability-informed and trauma-informed policies, programs and services.
- Mobilize and prioritize licensing processes to expedite new vaccinations for disability and trauma-affected children and youth across provinces and territories.
- Enforce the collection of demographic data to reflect the realities of LGBTQ2+ children, youth and their families, and use this data to create services, programs and policies. The 'what' and 'how' of data collection and analysis should be guided by people with lived experience and communities.
- Require child welfare agencies to collaborate with community-based services and engage trained navigators to coordinate visits with child welfare staff.

- Prioritize community partnerships and communications around vaccine hesitancy.

- Create subsidized accommodation units to reduce the length of time families and youth experiencing homelessness wait for subsidized housing.

- Create safe LGBTQ2+ youth specific homeless shelters and transitional housing programs.

- Remove eligibility barriers to health care supports for LGBTQ2+ people.

- Offer community resources[34] and programs to children, youth and their families that can help with cognitive and community development.

- Collaborate strategically with public schools to integrate the distribution of mental health and trauma-informed educational toolkits, to educate children and youth on the importance of traumatic experience and encourage alleviation and healing.

- Mobilize public schools to create programming and policies to support LGBTQ2+ youth, including mental health services, anti-bullying and inclusion policy and opportunities for recreation. Such policies should be inclusive of remote and online learning platforms.

- Acknowledge the impacts of the COVID-19 pandemic on the learning and reintegration of LGBTQ2+ youth and their families and that approaches to reintegration cannot be 'one size fits all'. For instance, youth with identified histories of trauma or loss, pre-existing anxiety, depression, and other mental health considerations, as well as children in early education may be especially sensitive to changes in their routines and to constantly evolving COVID-19 prevention measures (e.g., physical distancing, school closures, remote learning)[35]. More trauma-informed education service delivery is required in order to support children and youth in their reintegration at school and in the community (e.g., multiple systems of care, increasing school resource capacity)[36].

- Prioritize research to identify the criteria required to facilitate curriculums that can be delivered within a trauma-informed framework.

- Determine resources per capita/per household that may be needed to support trauma-affected LGBTQ2+ youth and families during and post-pandemic to

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[34] https://www.communitiesthatcare.net
[35] Ontario Agency for Health Protection and Promotion (Public Health Ontario). Focus on: trauma informed practices for children and families during the COVID-19 pandemic. Toronto, ON: Queen's Printer for Ontario; 2020
[36] Chafouleas, S.M., Johnson, A.H., Overstreet, S. *et al.* Toward a Blueprint for Trauma-Informed Service Delivery in Schools. *School Mental Health* 8, 144–162 (2016). https://doi.org/10.1007/s12310-015-9166-8

support their learning goals and schooling needs (e.g., learning resources, technology, school materials).

Federal Government:

- Increase funding & resources to support LBGTQ2+ communities negatively impacted by COVID-19. Include mandates to explicitly expand LGBQ2S programs, research and policy for all federal departments and ministries.

- Ensure trauma-informed practices are integrated at all levels of federal agencies and organizations.

- Work with the provinces and territories to encourage the provision of age-appropriate education on sexual orientation and gender identity to children and youth of all age groups as well as parents and caregivers.

- Support parents in becoming technologically literate at a Pan Canadian level, as this is instrumental to support families in search for housing, accessing online tutoring, supporting their children's virtual education, and searching for employment[37].

- Remove barriers for LBGTQ2+ communities to access COVID-19 related funding support.

- Include families and caregivers of LGBTQ2+ children and youth with disabilities in the federal Disability Inclusion Plan and ensure the proposed Canada Disability Benefit is inclusive of such families.

- Consult with LGBTQ2+ organizations, researchers and individuals to help collect relevant and necessary data for these communities in the Canadian Census.

- Prioritize research on the experiences and effects of trauma for LGBTQ2+ communities.

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[37] Neil Squire (https://www.neilsquire.ca/), a pan-Canadian organization, provides such tools and services to support parents with disabilities in Canada. This type of support and service should be offered to all parents to ensure technological literacy, which is crucial in this digital era.

Protecting the Rights of LGBTQ2+ People

The United Nations Convention on the Rights of the Child (CRC)[38] affirms the rights of children to not be discriminated against (Article 2) and to have their best interests considered as a priority in decision-making that affects them (Article 3). Freedom from all forms of discrimination are always in a child's best interests. Yet even this foundational right has proven contentious in Canada, where the state and its actors have at times been quick to impose oppressive ideas about a child's best interest to the detriment of LGBTQ2+ communities. Consistent with a child's right to be heard in decisions that affect them (Article 12), any determination of a child's "best interest" should begin with the child's perspective, and should consider the implications of colonialism and structural discrimination in Canada.

Other provisions of the CRC recognize children's rights to the highest standard of health and rehabilitative care, to sustain or recover family relationships, to practice their language and culture, to education, to material security and social protection, to play and socialize, and to be heard when decisions affect them.

While some limits on the rights of children, youth and families may be necessary in a state of emergency – such as the COVID-19 pandemic – these restrictions must be reasonable, justifiable and based in judicious decision-making. All situations must be evaluated individually and any limits should be time bound, with regular review periods put in place to modify, ease or release restrictions as soon as possible. There should be exceptions made on a case-by-case basis where possible.[39]

Beyond respecting the rights of children and youth, governments, agencies and caregivers must take steps to ensure that they understand the negative impact of trauma and structural, institutional and interpersonal discrimination on children and youth in order to effectively help them to feel safe and hopeful. That can be facilitated by creating the conditions under which positive relationships and meaningful connections can be maintained and nurtured.

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[38] *United Nations Convention on the Rights of the Child (UNCRC)*:
https://www.ohchr.org/en/professionalinterest/pages/crc.aspx.
[39] UNICEF. (April 9, 2020). *Don't let children be the hidden victims of COVID-19 pandemic*:
https://www.unicef.org/press-releases/dont-let-children-be-hidden-victims-covid-19-pandemic.

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Acknowledgements