



Adaptation for The **Caregiver Support** **Intervention** during COVID-19

Supporting Parents in Lebanon in Order to Strengthen the
Psychosocial Wellbeing of Their Children during COVID-19

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THE CAREGIVER SUPPORT INTERVENTION AIMS

- 1: Strengthen parenting indirectly by reducing parental stress & improving parental wellbeing
- 2: Strengthen parenting directly through training in “positive parenting”

Parents Mediate the Impact of War & Displacement on Children

- Parents can be powerful force in protecting children from war-related stress.¹ However...
- Parents also experience increase in stress, trauma, depression, frustration, shame/humiliation.
- This can take a powerful toll on parenting.

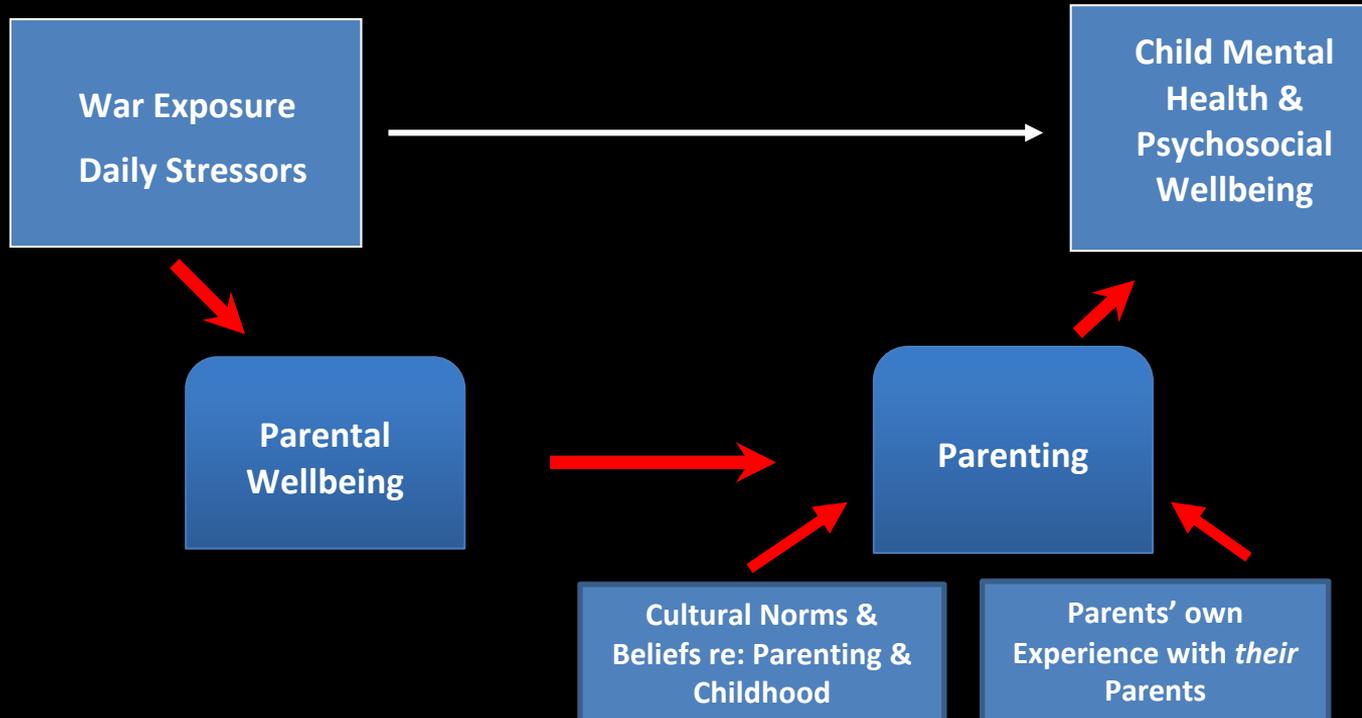
(1) Tol et al., 2013 (2) Catani et al., 2009; Clark et al., 2010 Khamis, 2014; Miller & Jordans, 2016; Wachter et al., 2018



IMPLICATION

To strengthen the wellbeing of war-affected children, we also need to strengthen the wellbeing and parenting of their parents or other caregivers.

THE CSI: UNDERLYING MODEL



THE CAREGIVER SUPPORT INTERVENTION

- A brief (9 session) psychosocial intervention for parents affected by war and forced migration. *Aimed at mothers and fathers.*
- Implemented by trained community members.

METHODS

1. Strengthen parental wellbeing through:

- **Social support of group**
- **Coping skills for anxiety and stress**
- **Anger and frustration: triggers and coping strategies**
- **Weekly home practice of mindfulness, self-calming, and relaxation exercises**

METHODS

2. Strengthen parenting directly through:

- Recognizing impact of stress on parenting, and on kids
- Key elements of effective (“positive”) parenting
 - Early childhood development
 - Influence of fathers
 - Positive parent-child interactions
 - Non-violent methods of discipline
- Home practice of parenting techniques

THE RATIONAL BEHIND ADAPTING THE CSI FOR THE COVID-19 RESPONSE

- When the lockdown started in Lebanon and all face to face activities stopped, we had an assessment with caregivers and children.
- Most of the caregivers expressed that they are very stressed and they are not able to deal with the uncomfortable feelings nor with their children.

The Adapted version of CSI

Focuses on 7 topics:

These topics were adapted from the original version of CSI

- 1- what is the stress and how to deal with
- 2- what is the “thinking too much” and how to deal with.
- 3- Anger and frustration and how to deal with.
- 4- Children’s stress and how to deal with.
- 5- effective discipline technics.
- 6- Activities and games

The modality of reaching the caregivers.

Based on a mapping done with caregivers, most of them preferred to receive the sessions via Audio recordings sent through Whatsapp .

What we took into consideration while adapting.

1. Focus on key elements: Quick and straight forward messages.
2. Topics relevant to the care givers messages context.
3. Choose very simple language, to make sure that the information will be understandable from every one.
4. The duration of every recording, not more then 3 minutes.
5. Making the recordings appealing and relaxing.
6. The follow- up with caregivers.
7. Some caregivers might be at a very high level of distress.
8. Providing caregivers with the National Emotional Support and Suicide Prevention Helpline

The structure of the remote version

every topic was divided into two recordings

A total of 7 topics 15 recordings in addition to specific relaxation exercises for every topic.

At the end of every recording we remind the caregivers, that in case they were not able to deal with their uncomfortable feeling or if they are in a very high level of distress, to ask for support and we provide them with the national helpline for support and suicide prevention.

Modality of implementation

A guidance note was developed in order to specify the modality of implementation.

- 1- the community facilitators who implemented face to face CSI where responsible for the follow up with caregivers.
- 2- After taking their consent, caregivers were added into small groups of WhatsApp
- 3- A clear introduction with clear objectives was made.
- 4- One topic was provided every week (two recordings – specific dates)
- 5- A space for asking questions was open after every session.
- 6- Caregivers were asked to give feed back regarding the sessions.

Caregivers interaction and feedback

1. Most of the caregivers were showing interest and they were involved in listening and practicing the coping exercises.
2. Caregivers reported that the topics was very relevant and helpful.
3. The number of drop out from the what's app group was very minimal

“I felt like the girl who recorded these audios, is living with me she is describing things that are happening with me, I will be waiting for the coping skills that she will be providing me with”

Q&A