**Table S3**

*Sample Characteristics*

| **Study** | **Participants** | **Child Age**  **M(SD), Range** | **Child**  **Sex/Gender** | **Caregiver Age**  **M(SD), Range** | **Caregiver**  **Sex/Gender** | **Race/Ethnicity** | **Income/SES** | **Other** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Achterberg et al., 2021 | 151 children  106 caregivers | 12.00(0.81), 10.76–13.65 | 47% girls | 44.89(4.97), 33.45–58.80 | 93% female | 89% White | Middle to high SES (based on parental education: 3% low, 38% middle, 59% high) | 44.4% of children were twins  Among the twin pairs, 67% were monozygotic |
| Berry et al., 2021 | 159 caregivers:  115 C  44 NC | 4–18 years (eligibility criteria) | Not Reported | C: 40–49  55.65%  NC: 40–49  59.09% | C:  94.78% mothers  NC:  86.36% mothers | Not Reported | C:  40.00%  Managerial & technical workers  NC:  54.55% Managerial & technical workers | Clinical group based on parent-report of child conduct and/or hyperactive/inattention problems |
| Browne et al., 2021 | 1098 children  549 caregivers | Younger child: 9.62(3.21)  Older child: 11.80(3.32) | Younger child: 45.9% female  Older child: 49.0% female | 41.33(6.33) | 67.8% mothers | 73.1% White-European  12.3% White-North American  3.7% Asian-South  1.8% Asian-South East  2.2% Black-African  1.1% Black-North American  2.6% Mixed  2.8% Other | Median 2019 income $50,000–$74,999 USD | Eligibility criteria: Caregivers with at least two children |
| Cooper et al., 2021 | 894 children | 13.37(1.64) – 13.28(1.68), 11–16 | 49.4% female | Not Reported | Not Reported | 93.1% White – British, Irish, other | 20.5% <£30,000  72.1% >£30,000 |  |
| Corbett et al., 2021 | 122 child-caregiver dyads:  61 C (ASD)  61 NC | C:  13.24(1.16)  NC: 13.38(1.20) | C: 24.6% female  NC: 42.6% female | Not Reported | 96.3% mothers | 84.42% White  4.92% African American  10.66% mixed race  9.12% Hispanic  90.88% non-Hispanic | 18.8% < $50,000  33.9% = $50,000–$100,000  47.3% > $100,000 | Diagnosis of ASD was based on the DSM-5 and ADOS-2 |
| Di Giunta et al., 2021 | 80 children  156 caregivers | 14.97(2.27) | 44.4% girls | Mothers: 49.25(5.52)  Fathers:  50.14(5.80) | 51.3% mothers | Not Reported | Majority had an average gross annual income between €30,000–€40,000/year | Eligibility criteria: Children in treatment due to clinically relevant levels of depression, anxiety, learning problems, or conduct disorder |
| Donker et al., 2021 | 240 child-caregiver dyads | 11.4(0.50) | 50.4% girls | 44.2(5.04) | 85% mothers | Not Reported | Median monthly family net income: €4000–€4500 /month (SD = 4.44, ~ €2220) |  |
| Duttweiler et al., 2021 | 53 child-caregiver dyads:  26 high-risk mothers  27 low-risk mothers | 12.5(2.3),  9–15 | 77.4% female | 42.2(6.5) | 100% mothers | 52.8% White  24.5% Black  13.2% Asian  9.5% multiracial or another race  --  24.5% Hispanic/Latinx | Not Reported | High-risk mothers had a history of MDD  Low-risk mothers had no history of psychopathology |
| Essler et al., 2021 | 2921 caregivers | 5.67(2.03),  3–10 | 46.5% female | 38.10(4.93),  21–60 | 92.1% female | Not Reported | Not Reported |  |
| Feurer et al., 2021 | 45 child-caregiver dyads | 12.42(2.31),  9–16 | 82.2% female | 42.09(6.44),  30–56 | 100% mothers | 53.3% White  24.4% Black  11.1% Asian  11.2% multiracial or another race  25.0% Hispanic/ Latinx | Not Reported | 44.4% of mothers met diagnostic criteria for at least a single MDD episode using the Structured Clinical Interview for DSM–5 |
| Fogarty et al., 2022 | 257 child-caregiver dyads | 15.47(0.87), 14–17 | 54.5% female | Not Reported | 100% mothers | Not Reported | Not Reported |  |
| Fosco et al., 2022 | 204 caregivers | 4.17(2.17) | 45.1% girls | 27.43(1.67) | 70.6% mother  1.5% stepmother | 90.7% White  4.4% Black/ African American  0.5% American Indian, Eskimo, or Aleut  4.4% Other  --  10.8% Hispanic | Median annual family income: $50,000–59,999 |  |
| Frigerio et al., 2022 | 74 caregivers | 4.20(0.61) | 45.8% female | Mothers: 37.17(3.51)  Fathers:  40.04(5.62) | 100% mothers | Not Reported | 3.4% low  44.1% middle  50.8% high |  |
| Gordon-Hacker et al., 2022 | 230 caregivers | 4.02(0.85)  2.17–6.33 | 44.7% female | 33.6(4.74),  23–44 | 100% mothers | Not Reported | 17.6% significantly below average  29.5% below average  35.2% average  13.3% above average  4.3% significantly above average |  |
| Guazzelli Williamson et al., 2022 | 1334 children | 13.54,  10.92–17.41 | 58.2% girls | Not Reported | Not Reported | Sample mostly reflects the ethnic/racial breakdown of Peruvian youth, oversampling from the mestizo population | Low- and middle- income |  |
| Hastings et al., 2021 | 49 caregivers | 5.12(0.37) | 61.22% girls | Not Reported | 100% mothers | 100% of families spoke Arabic as their primary language in the home | 36.73% Poverty (<350 JOD)  38.77% Low income (350–850 JOD)  16.33% Middle-high income (>850 JOD) | 16.33% of the sample identified as urban Syrian refugees |
| Janssen et al., 2020 | 34 children  67 caregivers | 16.95(1.01)  14.66–19.01 | 64.7% girls | 49.12(5.73),  36.25–71.04 | 56.7% female | Not Reported | Sample lived in relatively favorable circumstances (e.g., high SES) |  |
| Jones et al., 2022 | 95 caregivers | 7.23 (1.53),  4.37–9.75 | 45.3% female | 38.21(5.71),  25.72–51.60 | 100% mothers | 95.38% European American | Majority middle-class |  |
| Jordan et al., 2022 | 80 children:  47 C (fragile X syndrome; FXS)  33 NC | C: 11.84(3.11),  6.3–18.0  NC: 12.23(2.25),  8.2–16.6 | 100% girls | Not Reported | 100% mothers | C: 89.36% White  2.13% Black  4.25% Asian  4.25% multiracial  NC: 54.54% White  24.24% Asian  21.21% multiracial | Not Reported | Full mutation FXS diagnosis confirmed by molecular genetic testing |
| Köhler-Dauner et al., 2021 | 91 caregivers | 6.03(0.61),  4.98–7.14 | 47.3% girls | 38.14(4.08),  31.00–46.00 | 100% mothers | 89.6% German origin | 60.9% of mothers had a university degree  6.5% had a decrease in income during the pandemic |  |
| Lengua et al., 2022 | 143 child-caregiver dyads | 14.33(0.48) | 63% female | Not Reported | 100% mothers | 65% White  12% Black  11% Latinx  9% Asian  4% Another race or ethnicity | Median and mean income = $75,000–$100,000 |  |
| Liang et al., 2021 | 288 caregivers | 13.89(2.15),  11–18 | 45.1% female | 46.50(4.65), | 95.5% female | Not Reported | Monthly family income:  4.5% ≤ €999  20.2% €1000–€1999  32.6% €2000–€3999  30.3% €3000–€4999  12.4% ≥ €5000  Mostly middle-class |  |
| McArthur et al., 2021 | 846 child-caregiver dyads | 9.85(0.78),  9–11 | 47.1% female | Not Reported | 100% mothers | 82.9% White  12.2% Asian  2.6% Other/mixed  1.3% Latin  0.5% Black  0.2% First Nations, Inuit, Metis | Household income before COVID-19:  80.3% ≥ $80,000 CAD  16.4% ≤ $79,999 CAD |  |
| Neubauer et al., 2021 | 970 caregivers | 9.81(2.85),  6–19 | 47.8% female | 42.93(6.40),  25–82 | 86.4% women | Not Reported | Net monthly household income:  46.0% > €4,000  24.4% < €3,000  21.4% €3,000– €4,000 |  |
| Nocentini et al., 2022 | 166 children | 11.14(0.47) | 51.8% female | Not Reported | Not Reported | Not Reported | Out of 7 schools:  5 represent medium-low SES  2 represent medium SES | Middle school students |
| Omiya et al., 2022 | 166 child-caregiver dyads | 27.7% 12–13  72.3% 13–14 | 53% female | 44.9(4.2) | Mainly mothers | Not Reported | Subjective economic conditions:  10.2% poor/very poor  47.6% average  42.2% relatively rich/rich | 2 groups:  59.6% increased/ maintained sense of coherence from Tpre–TCOVID  40.4% decreased sense of coherence from Tpre­–TCOVID |
| Operto et al., 2022 | 383 families | 9.89(4.42),  2–18 | 39% female | Mothers:  40.82(6.34)  Fathers:  43.87(7.05) | Not Reported | Not Reported | Not Reported | 9 clinical groups based on a neuropsychiatric diagnosis made using DSM-5:  29.8% ASD  24.3% epilepsy  10.7% specific learning disorders  8.9% intellectual disability  8.4% communication disorders  5.5% ADHD  4.2% behavioral disorders  4.2% anxiety disorders  4.2% mood disorders |
| Paschke et al., 2021 | 824 child-caregiver dyads | 13.06(2.4),  10­­–17 | 46.36% female | 46.46(7.98),  28–75 | 50.85% female | Not Reported | Family financial worries:  17.06% yes  82.94% no | 2 groups:  Increase in psychological stress  No increase in psychological stress |
| Pelham et al., 2022 | 7940 children | 12.4(0.9),  10.5–14.6 | 50% female | Not Reported | Not Reported | 60.3% White  8.8% Black  17% Hispanic  2.9% multiracial  11% different racial/ethnic identity | 8.3% < $25,000  11% $25,000­–49,000  13% $50,000­–74,000  15% $75,000­–99,000  34% $100,000­­–199,000  13% ≥ $200,000 |  |
| Penner et al., 2021 | 185 children | 12.21(1.31),  10–14 | 56.2% female | Not Reported | Not Reported | 71.9% Hispanic/ Latinx  9.7% Black/ African American  5.4% Asian  1.1% White  1.1% American Indian  5.4% Multiple races  5.4% Other | Neighbourhood had a median family income of $29,124 in 2017, $20,000 less than the city average | 2 groups:  24.9% high scorers - highest 20% of scorers on the Brief Problem Monitor scale (i.e., youth with elevated mental health problems at baseline)  75.1% low scorers -  lower 80% of scorers on the Brief Problem Monitor scale at baseline |
| Qu et al., 2021 | 879 children | 13.14(1.31),  11–16 | 51% girls | Not Reported | Not Reported | Not Reported | Primarily working- and middle-class families |  |
| Ren et al., 2021 | 240 caregivers | 9.48(1.39),  7–12 | 46% girls | 38.50(5.80) | 75% mothers | All caregivers and children were of Han ethnicity | 81% low- to middle-SES  Monthly household  income < RMB 8,000 (around $1,300 USD) |  |
| Rizeq et al., 2021 | 441 children  1069 caregivers | 11.06(3.37) | 42% female  41.07% girls | Not Reported | Not Reported | 59.96% European, non-aboriginal North American  14.41% non-European  23.76% Multiple ancestries | Last year’s family income:  51.92% > $99,999 | 65.58% of children were reported to have a pre-COVID psychiatric diagnosis |
| Roche et al., 2022 | 547 children | 13.73(0.91) | 55.2% female | Not Reported | Not Reported | 100% Hispanic | Not Reported | 10.4% were first-generation immigrants  65.3% were second- generation immigrants  24.3% were third or later generation immigrants |
| Rosenthal et al., 2022 | 1234 children  620 C (ADHD)  614 NC | C: 12.4  NC: 12.5 | C: 31.0% female  NC: 31.1% female | Not Reported | Not Reported | C:  68.5% White  11.5% Black  19.0% Other or Multiracial  NC:  69.2% White  11.6% Black  19.2% Other or Multiracial | Total family income:  C:  22.5% < $50,000  29.1% $50,000–$99,999  42.1% > $100,000  NC:  22.7% < $50,000  29.8% $50,000–$99,999  40.7% > $100,000 | The KSADS-5 was used to determine the presence of a current diagnosis of ADHD |
| Shelleby et al., 2022 | 308 caregivers | 8.11(2.09) | Not Reported | 37.59(7.01) | 100% female | 76.9% White  7.5% Black  6.8% Asian/Pacific Islander  5.5% multiracial/ multiethnic  2.6% Hispanic/ Latina  0.3% Other | Median household income: $70,000  35.5% low income 9.8% below the poverty line |  |
| Shi & Wang, 2021 | 213 children | 12.18(0.60) | 48.4% female | Not Reported | Not Reported | Participants were recruited from Shanghai, China, a major city in which 98.8% of the population are of Han descent | Not Reported |  |
| Trucco et al., 2022 | 167 children | 16.2, 14–18 | 44.9% female | Not Reported | Not Reported | 85.0% White  7.8% Black  7.2% Other  83.2% Latinx | 59.2% had a family income of at least $35,000 |  |
| Ueda et al., 2022 | 89 child-caregiver dyads | 11.6(2.8) | 21.3% female | 44.3(5.3) | 94.4% mothers | Not Reported | 10.1% Low-income households with welfare | 89 school-aged children with NDDs:  52.8% ADHD  55.1% ASD  7.9% SLD |
| Wang, Henry, et al., 2021 | 447 child-caregiver dyads | 15.09(1.66),  13­–18 | 60.9% female | 43.66(6.86),  27–52 | 87% female | 46.1% Black/ African American  38.7% White/ European American  8.5% Latinx  6.3% Asian/Asian American  0.4% Native American | 62% low income |  |
| Wang, Henry, et al., 2022 | 546 children | 15.0, 13–18 | 60% female | Not Reported | Not Reported | 43% Black  37% White,  10% Latinx  8% Asian American  3% Native American | 61% low-income  39% high income |  |
| Wang, Ng & Siu, 2022 | 281 children | 10.07(0.42),  9.46–12.15 | 44.1% female | Not Reported | Not Reported | Not Reported | Not Reported |  |
| Wang, Toro, et al., 2021 | 444 children | 15.0, 13–18 | 60% female | Not Reported | Not Reported | 44.4% Black/African American  39.2% White/ European American  8.6% Latinx  6.3% Asian American  1.5% Native American | 62.2% Household income below 130 percent of the national poverty level |  |
| Wong et al., 2022 | 233 child-caregiver dyads | 12.20(0.43),  3–8 | 60.5% female | Not Reported | > 97% of parent respondents were mothers | Not Reported | Monthly household income:  Mean = 58,927 HKD (SD = 39,087 HKD) |  |
| Zhou et al., 2022 | 488 caregivers | 5.04(1.59) | 44% girls | 36.73(5.92) | 77% mothers | 65% non-Hispanic White or European Americans  13% Asian Americans or Pacific Islanders  8% Black/African Americans  6% Hispanic/Latinx Americans  2% Middle Eastern and North Africans  1% Native Americans  5% Multiracial | Annual family income:  52% reporting  < $100,000  73% reporting eligibility for a stimulus check |  |
| Zhu et al., 2021 | 1491 children | 13.04(0.86),  10–17 | 53.12% female | Not Reported | Not Reported | 95.10% Chinese | 34.47% did not receive financial assistance  12.34% received financial assistance (government or nongovernment)  9.73% received financial assistance (government and nongovernment) |  |
| Zuccolo et al., 2022 | 5795 children | 10.70(3.63),  5–17 | 49.23% female | Not Reported | Not Reported | 69.20% White  30.80% non-White | Monthly income (in BRL):  16.29% >10,000  37.99% 3000–10000  34.55% 1000–3000  11.17% <1,000 | 18.45% chronic disease, needing treatment  12.70% previous psychiatric diagnosis |

*Note*. SES = socioeconomic status; C = clinical; NC = non-clinical; MDD = major depressive disorder; ASD = autism spectrum disorder; FXS = fragile X syndrome; ADHD = attention-deficit / hyperactivity disorder; NDD = neurodevelopmental disorder; SLD = specific learning disorder; DSM-5: Diagnostic and Statistical Manual of Mental Disorders, 5th Edition; ADOS-2 = Autism Diagnostic Observation Schedule-Second Edition; KSADS-5 = Kiddie Schedule for Affective Disorders and Schizophrenia for DSM-5; USD = US dollar; JOD = Jordanian dollar; CAD = Canadian dollar; RMB = Renminbi; HKD = Hong Kong dollar; BRL = Brazilian Real.