

COVID-19 Micro Briefing 4: Consolidating evidence of the impacts of COVID-19 on children and young people

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INTRODUCTION

This micro briefing introduces evidence concerning the adverse impacts of COVID-19 on children and young people in Scotland. In consolidating this evidence, we draw upon Scottish and comparable UK data. The evidence reviewed makes clear the impacts of rising poverty and food insecurity, digital exclusion, and disruption to public services on the wellbeing of children and young people. Specifically, the briefing presents a focus on impacts to physical health, mental health, welfare and education.

EVIDENCE REVIEW: MAIN POINTS

In this section we have grouped the evidence concerning the mechanisms through which the pandemic has adversely impacted on the lives of children and young people in Scotland under three key themes. The themes are: rising poverty and food insecurity; exclusion from online education; and support service disruption.

Rising poverty and food insecurity

The Scottish economy has experienced a significant contraction since the COVID-19 pandemic began in March 2020, with some households suffering significant shortfalls in income.¹ These falls are particularly notable for households that were not eligible for government support. Lone-parent families are likely to be the worst affected by income loss during the pandemic, thus exacerbating existing issues and inequalities.²

The health and wellbeing of children and young people is strongly influenced by their material circumstances, particularly the income level of their household. While official statistics do not yet provide estimates of child poverty after the onset of the pandemic, other indicators suggest that unemployment,³ the inadequacy of social security,⁴ and the rising cost of living,^{5 & 6} have all contributed to an increase in child poverty. More families in Scotland are now reliant on social security in the form of Universal Credit (UC) than before the pandemic.⁷

The rise in poverty has in turn created food insecurity. In particular, the loss of school meals during the lockdowns has strained family budgets and reduced access to nutritious meals for many children and young people.⁸ Despite government measures and support schemes that were put in place to mitigate such effects on food insecurity,⁹ the Food Foundation,¹⁰ the Trussell Trust,¹¹ and Scottish independent food banks¹² have all

KEY POLICY IMPLICATIONS

1. The pandemic and related lockdowns have adversely impacted on children and young people. The evidence reviewed makes clear that families within disadvantaged areas have been disproportionately impacted.
2. Rising poverty and food insecurity; exclusion from online learning; and support service disruption have been the key mechanisms through which disadvantaged children and young people have been disproportionately impacted. Adverse impacts include the physical and mental health of children and young people alongside child welfare, education and social interactions.
3. A minimum basic income, increased living wage and re-establishment of uplift to universal credit could help address the poverty impact of COVID-19 on families.
4. The third sector has played an essential role in supporting the most vulnerable families during the pandemic. This has underscored the societal benefits of well-functioning public and third sector and community partnership working.

reported marked increases in the need for emergency food parcels, with children and ethnic minority communities most affected.¹³ Importantly, evidence is clear that food insecurity negatively effects educational outcomes.¹⁴

Exclusion from online learning

When in-person education ceased during lockdowns, children and young people without access to digital resources were unable to meaningfully engage in education. An Ofcom survey across the UK from January–March 2020 found that 9% of households containing children did not have home access to a laptop, desktop PC or tablet.¹⁵ 1-in-10 parents surveyed in April–June 2020 cited lack of appropriate digital devices as a reason for children struggling with home learning. This was significantly higher for single-parent households (21%).¹⁶ Digital exclusion also effects child poverty. Welfare services such as Universal Credit are now “digital-by-default” meaning that they are designed to be accessed online.¹⁷

A survey of over 4,500 children by UCL in April 2020 found that one-in-five of those eligible for free school meals in the UK had no access to a computer at home (20%).¹⁸ School leaders interviewed by Ofsted cited significant challenges for schools to engage pupils in remote learning in more deprived areas as many families did not have devices or internet access.¹⁹ Remote learning during the pandemic is likely to have widened the educational attainment gap.^{20 & 21}

Support service disruption

COVID-19 government restrictions have significantly inhibited access to services for children and young people, including mental health services,²² social care services, and child protection services. This disruption is likely to have long-term health impacts on some families and children living in areas of social deprivation.²³ The closure of schools hampered the ability of key workers, such as teachers and social workers, to identify children at a higher risk of abuse and neglect early.²⁴ The closure of libraries may have contributed to digital exclusion through the loss of access to computers and the internet. The pandemic also disrupted healthcare not related to COVID-19, delaying presentations at hospital²⁵ and slowing down access to services for paediatric cancer care,²⁶ and other serious and life-threatening conditions.²⁷

IMPACTS OF THESE PANDEMIC THEMES ON THE HEALTH AND WELLBEING OF CHILDREN AND YOUNG PEOPLE

In this section we have grouped the evidence concerning the specific impacts of the pandemic on children and young people in Scotland under five key themes. The themes include Impacts to physical health; mental health and wellbeing; child welfare; education; social interactions and out-of-school activities.

An overarching point which underpins the five areas of impact is that families within disadvantaged communities are more likely to feel the negative impact of the pandemic and the impacts are likely to be more severe.²⁸ While some of these impacts are already evident, it is likely that the full impacts on physical and mental health, education, and the economic and social lives of children and young people, will become more apparent over the longer term.

Impacts on physical health

While children and young people can be infected with the virus, they have much lower rates of hospitalisation²⁹ and mortality³⁰ than adults and are less likely to develop complications.³¹ Similarly, to adults, some individuals are at higher risk of serious illness due to COVID-19 because of underlying health conditions.³² In general, the indirect impacts of COVID-19 are more consequential for children and young people, particularly regarding mental health and wellbeing, child welfare and education.

Lockdown and loss of in-person schooling altered the physical activity and sleeping patterns of children and young people.³³ Surveys show deterioration in the levels of physical activity for roughly half of Scottish children.³⁴ Reduced physical activity and/or increasing sedentary behaviour puts children at higher risk of becoming overweight or obese,³⁵ which is directly linked to disease and premature mortality in adulthood.³⁶ Children in higher-income households appeared to cope better with lockdown. They were more likely to maintain healthy sleep routines, take part in home-learning activities and have access to good-quality greenspace. Their parents were more successful in accessing health services and their households were less likely to experience income loss.³⁷

Impacts on mental health and wellbeing

As result of the pandemic there has been a rise in demand for mental health services for children and young people. Over 60% of children and young adults living in Glasgow interviewed by The Scottish Youth Parliament, YouthLink Scotland, and Young Scot said they were extremely or moderately concerned about the impact of COVID-19 on their futures.³⁸ Research within rural communities in Scotland also found that during lockdown young people reported the highest levels of loneliness amongst all age groups.³⁹ The disruptions in access to healthcare⁴⁰ and school closures⁴¹ have been especially detrimental to the mental health of those with pre-existing needs.⁴² Many children with Special Educational Needs and Disabilities (SEND) have experienced worsening mental health, often in the form of loss, worry, and changes in mood and behaviour, resulting in additional vulnerabilities.^{43 & 44} The impact of the pandemic on these children negatively affects the mental health of their parents or carers,⁴⁵ thus contributing to a more challenging home environment overall. International evidence shows that the mental health of girls and minority ethnic young people has been disproportionately affected by COVID-19.⁴⁶ Overall, studies indicate increased levels of distress, worry and anxiety, as well as an increased likelihood of PTSD symptoms in minority ethnic children.⁴⁷ The increased demand for specialist mental health services for children and young people adds to pre-pandemic backlog of referrals to Child and Adolescent Mental Health Services.⁴⁸

Impacts on child welfare

Schools and communities carry out important protective and early intervention work, monitoring and intervening in situations of neglect or abuse. The abrupt loss of in-person contact with teachers and social work services as a result of the pandemic resulted in significant challenges to this protective work. Multiple lockdowns created a context of increased vulnerability and reduced options for support⁴⁹. From March to September 2020, Childline experienced an 11% increase in the number of counselling sessions about online sexual abuse, a 22% increase for physical abuse, and a threefold increase in calls related to child sexual abuse within the family.⁵⁰ The number of people contacting the NSPCC helpline for domestic abuse also increased by about 32% from the previous year.⁵¹ Data also suggests an increase in abuse and neglect among new-borns and infants.⁵²

Impacts on education

During both lockdowns in-person education and childcare provision ceased, except for key worker families and some vulnerable children. During the first lockdown (April to June 2020), just 24% of Scottish educational settings were open, serving 1.1% of all children and 4.8% of vulnerable children. As a result, most year groups lost 11 weeks of in-person schooling in the Spring-Summer 2020.⁵³ Scottish schools reopened in mid-August 2020. By October 2020 more than 90% of providers of early education and childcare had reopened.⁵⁴ With the resurgence of cases and restrictions in Winter 2020, pupils returned to remote learning, with a staggered return to in-person teaching from February 2021.

COVID-19 specific impacts on educational inequalities are set within the context of existing attainment gaps between disadvantaged pupils and their peers.⁵⁵ While the effects of this are ongoing, reports already find that pupils from disadvantaged backgrounds experienced higher levels of learning loss across all subjects and for all age groups,⁵⁶ and that attainment scores decreased approximately twice as much in schools with a high percentage of children eligible for free school meals (FSM) compared to schools with a low percentage of FSM-eligible children.⁵⁷ Notably, the effects of this crisis have been estimated to reverse up to a third of the progress that has been made in closing the poverty-related attainment gap in primary school pupils in the last decade,⁵⁸ suggesting that it will take an extended period of time for these impacts to be reversed.

Impacts on social interactions and out-of-school activities

Social interactions with peers and informal networks have been extensively disrupted by COVID-19 restrictions. COVID-19 resulted in the closure of many out-of-school activities. Youth workers quickly adapted to restrictions by moving much of their provision online, sending out packs of resources to children's homes, and organising outdoor activities as restrictions allowed.⁵⁹

COVID-19 has increased social isolation, especially for those children and young people who were already disadvantaged. Young children from poorer backgrounds are less likely to engage in after-school activities and

have less access to outdoor space and books than their more affluent peers and these differences have become more pronounced during the pandemic.⁶⁰

IMPLICATIONS OF THE EVIDENCE REVIEWED

Poverty and inequality

The COVID-19 pandemic has been described as an ‘unequal’ pandemic, with health, social and economic impacts felt disproportionately among disadvantaged populations.⁶¹ This crisis has implications for every aspect of policy that impacts on children and young people’s lives, particularly in relation to poverty. Potential policy actions include the re-establishment of the COVID-19 universal credit uplift, an increase to the living wage and the implementation of a universal basic income.

Place and health

There is evidence to suggest that children have a keen sense of the relationship between their neighbourhood and their health.⁶² Children and young people need safe and accessible spaces in their communities. Planning approaches that reflect the principles of ‘20-Minute Neighbourhoods’ can help promote community health and wellbeing alongside the development of vacant and derelict land into green spaces, the provision of accessible outdoor activities and repurposing local assets to meet local needs. For these policies to deliver on the needs of children and young people, their voices need to have a strong influence within the development and planning process.

Investing in the third sector

The challenges of low income, food insecurity, mental and physical health, socio-emotional development, and child welfare have long been among some of the key focus of the local third sector organisations and community groups. Third sector workers have been primary engagers for families providing important in-person social and wellbeing enrichment activities for children and young people in the form of youth clubs, sports, arts, outdoor education, and volunteering. Many have expanded their remit into mental health support and food aid. The sector played an essential role in COVID-19 response during lockdowns and are engaged in supporting the recovery despite many already stretched organisations struggling with a lack of sustainable funding.⁶³ Sustainable, long-term funding of the third sector is vital to address the long-term impacts of the pandemic and future crises.

Strengthening partnership working

One of the key lessons learned from this crisis has been the value of collaboration between the local public sector and the third sector. Emergency responses to those shielding, such as food provision and setting up helplines, demonstrated that it is possible for local services to adapt and reprioritise at speed⁶⁴. Local authorities and the third sector should consider how to build upon these successes. Success in partnership working was achieved, in part, because of a reported different public sector approach to working with the third sector.⁶⁵ Shared values and the ethos of care that was so apparent during the first lockdown, provides a strong basis for improved partnership working in the future.

Future research

Many of the impacts of the COVID-19 crisis on children and young people’s health and wellbeing may not be identified immediately and are more likely to be realised over the longer term. Future research should continue to track both the mental and physical health outcomes of children and young people. Further studies should also assess the impacts of disruption in services, including routine and preventative health services; and the impact of lockdown and school closures on the physical health and socio-emotional development of children and young people.

MICRO BRIEFINGS: PURPOSE AND APPROACH

The Glasgow Centre for Population Health and Policy Scotland have developed a series of COVID-19 ‘micro briefings’ written in collaboration with expert partner agencies. They are designed to support a range of partners and decision makers by providing concise, accessible overviews of current evidence concerning complex and evolving issues relating to the COVID-19 pandemic.

This micro briefing has been co-written with [Children’s Neighbourhoods Scotland](#) (CNS). CNS is focused on supporting efforts to reduce poverty and increase participation within communities, strengthening the voices and priorities of children and young people, and supporting partnerships and collaboration between organisations and services to enable change. Based in the University of Glasgow – and in partnership with the Glasgow Centre for Population Health – CNS is a place-based programme working to improve outcomes for all children and young people living in neighbourhoods with high levels of poverty.

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