



PLANT YNG NGHYMRU
CHILDREN IN WALES

Crisis after Crisis – the impact on babies, young children and families

2 February 2023
10am – 11.00am

Format:
40 mins presentation, followed by audience questions

Chair: Anna Westall, Children in Wales
Presenters: Sally Hogg, University of Cambridge &
Helen Wales, NESTA Cymru





PLANT YNG NGHYMRU
CHILDREN IN WALES

Housekeeping

- Your camera and microphone will not be active
- The event will be recorded and available to view on our website
- The Chat facility will be used for **QUESTIONS ONLY**

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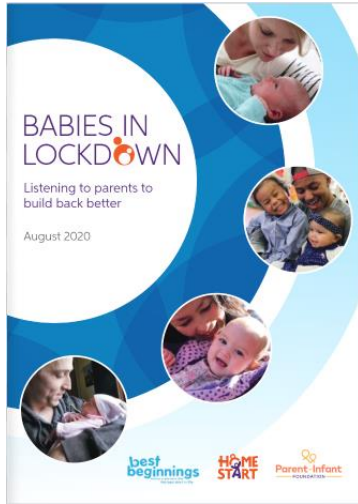


The impact of
the pandemic
on babies,
their
families and
the services
that work
with them.

Sally Hogg

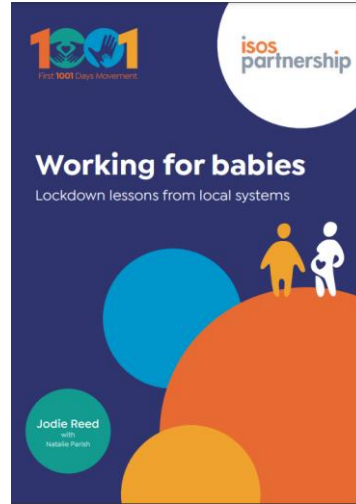
THE FIRST KISS
ALI HARRIS AND LEIGH HARRIS
FROM HOLD STILL EXHIBITION

Live Research Into the Impact of the pandemic



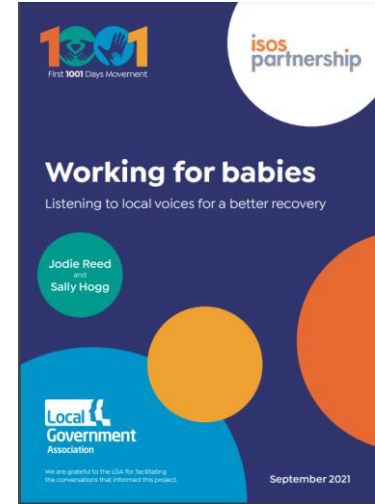
A survey of **5,474 expectant mothers, new parents and parents of toddlers.**

Published in August



Online survey, interviews and focus groups with professionals.

Published in January



Workshops with local leaders.

Published in January 2021.

Lockdown 2

The image shows the cover of a report titled "Babies in Lockdown". The main headline is "No one wants to see my baby" in a large, purple, serif font. Below it, in a smaller font, is "Challenges to building back better for babies". The cover features four circular photographs: a woman holding a baby, a young girl smiling, a woman kissing a baby on the cheek, and a woman holding a baby. At the bottom, there are logos for "best beginnings", "HOME START", and "Parent-Infant FOUNDATION". The date "November 2021" is printed in the bottom left corner.

BABIES IN LOCKDOWN

“No one wants to see my baby”

Challenges to building back better for babies

best beginnings
for every parent, for every child

HOME START

Parent-Infant FOUNDATION

November 2021

- We undertook **11 follow-up in-depth interviews** with **mothers** who had been in the original research.
- An online **professional survey** conducted by 224 professionals in October 2021.
- Published November 2021.

Lockdown 2

BABIES IN
LOCKDOWN

“No one
wants
to see my
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Challenges to building
back better for babies

November 2021

best beginnings
for every parent, for every child

HOME
START

Parent-Infant
FOUNDATION

Things had not bounced back.

- Over a **quarter (28%)** of respondents reported that health visiting routine contacts/checks remain mainly on the phone or online.
- Nearly **a third (30%)** report that health visitor drop-in clinics that existed before the pandemic no longer operate.
- **One in eight (12%)** say that baby and toddler groups are no longer running in their area.

Lockdown 2

BABIES IN LOCKDOWN

“No one wants to see my baby”

Challenges to building back better for babies

November 2021

best beginnings
for every parent, for every child

HOME START

Parent-Infant FOUNDATION

The infographic features a blue circular graphic with four circular inset photos: a man holding a baby, a young girl smiling, a woman kissing a baby, and a woman holding a baby.

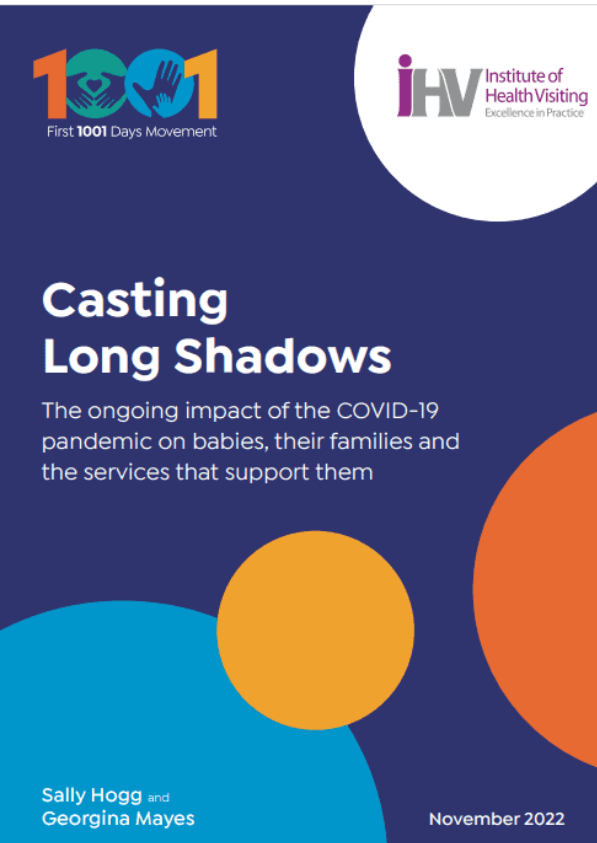
Families were still missing out on services and found remote delivery difficult for some services

“We’ve not seen anyone, we had a zoom call at the 12 month [health visitor] checkup. Of all my friends I was the only one that actually got a video call which was shocking. They didn't even get a phone call.”

“Health visitors weren't coming out. And ...when you're ringing health visitors, and they can't actually see your child, it's really difficult.”

“And if you can access a service, it is harder to get into it because it's first

Casting Long Shadows



- An **online survey of 555 professionals** and volunteers working with families in the first 1001 days across the UK.
- Repeated some of the questions asked of professionals in the Working for Babies and Babies in Lockdown professional surveys.
- A **brief review of academic papers, wider literature and national data.**
- Research conducted in Summer 2022, published in November.

Increased parental mental health problems are still affecting some children.

- The pandemic had widely reported **negative impacts on parental mental health, particularly anxiety levels**. These were generally felt more strongly in some families already at greater risk of poor outcomes.
- Whilst the significant deterioration in mental health experienced during the first year of the pandemic has been reversing, **mental wellbeing across the population has not returned to pre-pandemic levels**.
- More than **4 in 10 (42.7%) respondents to our survey told us that "many" of the babies they work with are still affected by increased parental anxiety, stress and depression due to the pandemic**.
- This is concerning, although it is good to see a reduction from 73% of respondents who answered this question the same way in summer 2020.

Adversity persists and is increasing.

- Families who have lived through the pandemic have not experienced only one challenging event but often an accumulation of adversity over time. This adversity is not over for many families.
- Families are now facing additional challenges, due to the cost-of-living crisis. The stresses of recent years may mean that some families are less resilient to these challenges.

Adversity persists and is increasing.

"It is difficult to capture all the ways the pandemic and lockdown have impacted infant mental health, but parents were severely adversely affected on their whole journey through pregnancy labour birth and in the early weeks and months in all sorts of ways by the restrictions in place in medical settings and the need to stay isolated from those vital support systems. And these difficult parental experiences have necessarily impacted the parent-infant bonding process in quite profound and alarming ways."

"The terrifying reality is that the residual mental/physical health impact of Covid on the most vulnerable families can only be further compounded by the oncoming cost of living/fuel crisis."

Babies are at greater risk of harm caused by abuse and neglect.

- The Child Safeguarding Practice Review Panel observed that the pandemic presented *"a situational risk for vulnerable children and families, with the potential to exacerbate pre-existing safeguarding risks and bring about new ones."*
- Case reviews of children who experienced abuse and neglect during the pandemic revealed how COVID-19 restrictions hampered the efforts of professionals to safeguard children, despite their best efforts.
- **In our survey, more than 4 in 10 (44.1%) of respondents said that "many" of the babies they work with are currently affected by increased exposure to domestic conflict, child abuse and neglect.**
- This is **higher** than the proportion of professionals making the same observation in 2020; in research for the Working for Babies report, only 29% of respondents said "many" babies they work with had been

There has been a reduction in opportunities to experience play and other enriching activities.

- Children's experiences and opportunities for play and other positive stimulation in lockdowns varied greatly depending on their families' situation, housing, resources, and parents' time and ability to interact with their children.
- UK Research suggests that children who spent more time engaged in enriching activities, such as reading, singing, or arts and crafts, with parents during the first lockdown showed stronger executive functions and social competence six months later. (Hendry et al 2022).
- **Nearly half (49.4%) of respondents to our survey reported many babies they work with are impacted by more sedentary behaviour and less stimulation and play.**

Both parents and young children often have smaller social networks.

- Lockdowns and social distancing reduced mixing, and the closure or restricted use of many groups and facilities have also restricted social contact. Women who were pregnant during the pandemic were advised to adhere to stricter social distancing.
- During the pandemic, parents' reported loneliness increased from 38% to 63%. This increase was more apparent in the most deprived areas (Royal Foundation).
- **In our survey, nearly half (45%) of professionals stated that family "self-isolation" was still affecting "many" of the babies they worked with.**
- This figure is similar to that reported in the 2020 Working for Babies survey, despite changes in the prevalence and risk of the virus and the ending of national restrictions.

"I feel parents are more fearful and have less confidence in their parenting ability which they usually learn from peers as well as professionals."

"I think a lot of mothers have been left socially isolated and have not formed the friendships they would have. This will have an impact on their children."

"Lack of social opportunities for both children and parents/carers and access to health visiting/support groups for parents/carers to understand child development."

More babies and their families are living in poverty.

- Young children are more likely to live in poverty than older children. Of the 4.2 million children in poverty in the UK, 1.3 million are babies and children under the age of five. Child poverty in the UK is getting rapidly worse.
- As the cost-of-living crisis intensifies, families will experience further financial pressures, which will be particularly detrimental to those already on low incomes.
- **In our survey, 4 in 10 respondents (40.4%) reported that many babies they worked with had been affected by the loss of family income or increased risk of food poverty.**

The pandemic has impacted children's health & development, particularly communication & social skills

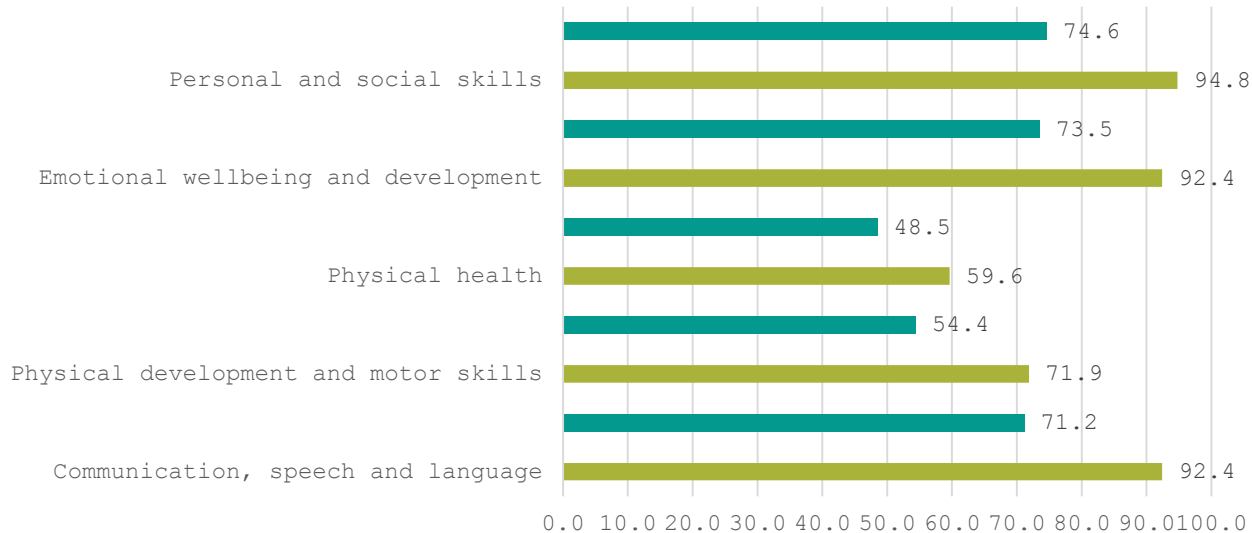
- A range of research into children's development and accounts from parents and professionals have suggested that the consequences of the pandemic, such as isolation, exposure to family stress, and lack of positive activities, **have negatively impacted children's wellbeing and development.**
- In particular, there is research to show an **increased prevalence of speech and language delays and increased social, emotional, and mental health needs, and impacts on physical development and motor skills.**
- Polling undertaken by YouGov for the UNICEF-UK showed that 2 in 5 parents in England with children aged 0-4 said they have been

In our survey, Professionals clearly believe that the pandemic has an ongoing impact on children's development, particularly for children who were living during the lockdowns.

% of respondents who said the pandemic has had either a negative or very negative ongoing impact on the wellbeing or development of babies and young children. (n=555)

Lighter bars represent answers for babies who were alive during the pandemic.

Darker bars represent answers for those born since the last lockdown (i.e. after summer 2021).



"Many babies and young children have missed out on the opportunities to socialise with others which has impacted negatively on their communication skills and social and emotional development."

"Poor speech and language development, some families have got into the habit of lockdown and not mixing socially. Poor social interaction is delaying speech and language skills and personal skills."

"Restricted social networks and opportunities to play with peers in an environment out with the family home has caused significant challenges with children's social and emotional development."

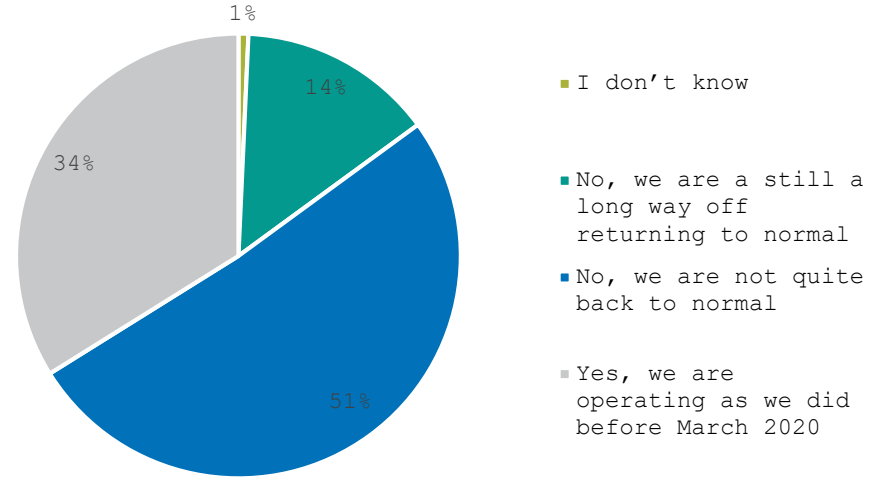
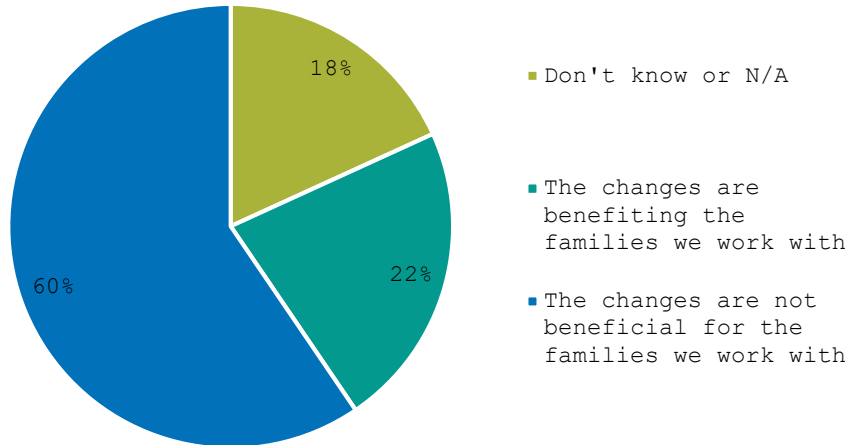
The pandemic has exacerbated inequalities

"Children from low-income areas have been undoubtedly more effected in the pandemic and subsequent lockdowns. Contributing factors have been a lack of space, potential lack of access to fresh air/garden play, potential lack of availability of stimulating activities. Parents on low income may have also struggled to provide nutritional food due to loss of jobs, income during the pandemic."

"I find children from deprived families seem to have suffered worse, possible those who haven't had an outdoor space to use and have been stuck indoors with little stimulation. We are seeing huge developmental delays in these children, particularly communication."

There is a "new normal" in service delivery

Has your service returned to "normal" operations (ie. the way it operated before March 2020)?
(n=555)



If your service is operating differently to how it was before March 2020, are the changes for the better or worse?

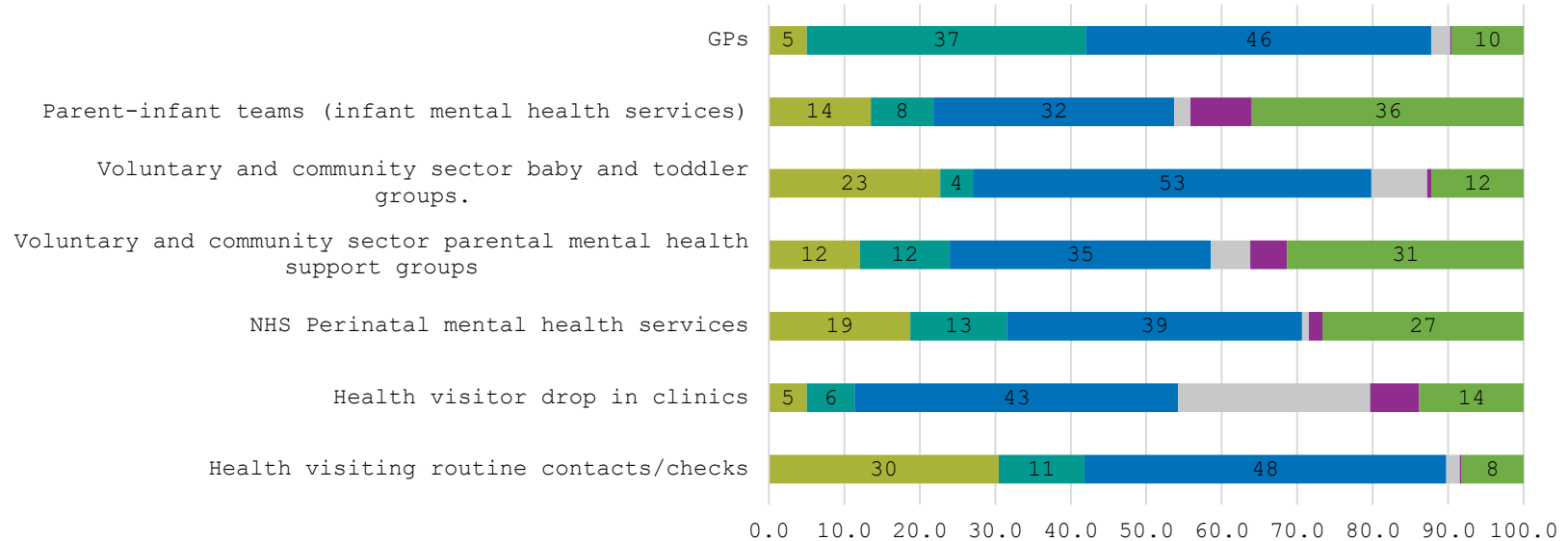
(n=363)

There is a "new normal" in service delivery

Children's experiences

Children's outcomes

The state of services



- These services are back to operating as they were before the pandemic.
- These services are mainly only operating via phone and/or online.
- These services are mostly back to operating as they were before the pandemic but with some changes.
- These services existed in my area before the pandemic but are no longer operating.

Increased hybrid working (mixed remote and F2F) has some benefits

"a change in support offered.. a hybrid approach to services, offering virtual, face-to-face and community groups (smaller group sizes) and video feedback methods. We have adapted and can offer Whatsapp video call, zoom and teams communications and sessions"

"Access to free online breastfeeding classes... mums can attend in their PJs! ... online breastfeeding support available somewhere in the UK virtually every day of the week - no need to wait for local ones.

"

"...many pregnant women prefer the video contact as it fits in with working late into pregnancy and not having to travel to appointments or wait around."

There has been innovation, leading to some sustained changes

"We moved our creative play service for young families from indoors to outdoors and now we recognise the health benefits for all and the need to take a leap towards more outdoor working."

"...We've become more creative in our offer working with different partners and introducing sessions such as walk and talk which may have remained further down the agenda if we had not..."

"We became more flexible in the way we work, via telephone and video platforms. We opened our service so that parents could book one-off consultations with our team. We also offer sessions outdoors in the park with parents and infants/young children."

Children's experiences virt Children's outcomes tion The state of services

well for staff, enabling flexibility and efficiency.

"It encouraged alternative methods of communication - for instance using Microsoft teams for meetings - whilst there can be benefits of meeting face to face, it could result in a lot of staff travelling fairly significant distances for meetings such as countywide meetings or training - this change has helped to reduce time spent.."

"..Teams meetings for safeguarding at times to ensure lots of people can attend. Access to more training, nationwide training at times."

But hybrid and remote working also brings risks

"The digital offer has advanced significantly during the pandemic... However, this has reduced the number of face-to-face visits we are offering and so I feel we are not always offering quality assessments which will impact on our ability to safeguard children."

"... I don't think there's a simple answer - some families have benefitted from the increased flexibility offered by remote provision, including e.g. Dads able to participate in appointments ... Other families have not benefitted, with digital deprivation still an important consideration."

And not all changes may be popular or helpful for families.

"Use of virtual appointments rather than face to face has continued just to ensure kpi's are met. We have less staff, more families and no drop in clinics. There's no continuity of staff and universal families only get a face to face new birth visit. Safeguarding has increased hugely. We pass people onto other services rather than work with them in the way we used to. I've been a HV for 23 years, and the service is sadly no longer what it used to be/should be."

Many children are not getting the help they need.

- The pandemic has not only increased the challenges facing children and their families but also made it less likely that their needs will be identified and that they will receive timely support.
- Polling for UNICEF-UK **found that one in three (32%) parents in England are finding it difficult to access professional support for themselves and their child in the earliest years. And of those, 78% have been left feeling frustrated by this, and a worrying 21% left feeling desperate.**

Needs are less likely to be identified and addressed...

"Telephone contact for any development checks rely on parents to spot if somethings not quite right, and no one generally likes to admit their child is not doing what they should be as they are afraid of what that means, where as an eyes-on appointment often shows a HV issues the parent hasn't noticed, such as deviant squints, leg dragging, poor speech (parents think it's fine often in first children as nothing to compare to)"

"We no longer persist at chasing those families that don't respond to review offers; it worries me that the only face to face contact a child may have had was their primary visit. Who knows what may have happened to that child over those years, then we discharge them at two. These hidden children are often the vulnerable ones."

Needs are less likely to be identified and addressed.

"For those babies and young children needing additional support, there seem to be more delays for assessments and longer waiting times to access support, e.g. referrals to tongue-tie clinics, speech and language therapy."

The workforce is at breaking point.

"the pressures now on the sector to 'fix' children without any further support from the government is unacceptable. We need more experienced staff than ever and Brexit and post-pandemic staff shortage puts even more pressure on us, driving the remaining workforce out due to exhaustion and feeling devalued.."

"...Staff are so disillusioned and leaving in droves. Only routine mandated contact delivered by qualified HV is the new birth contact."

"Families and children need us more than ever now, but there has been freeze on employment and we are very short staff, stressed and burnt out. Due to this, we have lots of staff illness and services not running as they should "



So what?

- We know a lot about what happened during the pandemic. But we still have to learn more about the longer term impact.
- We need to act quickly so we can help those children who have experienced harm.
- We can learn some lessons about child development to inform longer term policy and practice.
- There are opportunities to accelerate service development and innovation, but it must be done mindfully, based on evidence, and with children's best interests at heart.