Experiences of vulnerable children, young people, and parents during the Covid-19 pandemic

Children and Families Analysis

July 2021

Scottish Government
Riaghaltas na h-Alba
gov.scot

Experiences of vulnerable children, young people, and parents during the Covid-19 pandemic

Children and Families Analysis

Contents

Summary

Introduction

This report presents findings from qualitative research conducted with a range of children, young people and parents in vulnerable or seldom heard groups, carried out to explore their lived experiences during and throughout the Covid-19 pandemic. Participant groups were selected to fill gaps in the existing evidence base and included children, young people and their parents with additional support needs; with domestic abuse experiences; who are asylum seeking and from minority ethnic backgrounds; and in gypsy/traveller families. Participants also included young and single parents; parents with physical and/or mental illness; and parents in the perinatal period.

In total, the research involved 247 participants, 44 children, 90 young people and 113 parents. The main methods used were focus groups, individual interviews and drama-led play sessions. Some research was also conducted via text conversations and non instructed advocacy.

Experiences of the pandemic overall

Overall, many experiences were similar across all groups and consistent with findings from existing research carried out with children and young people in Scotland.

All participants – children, young people and parents – reported a decline in their mental wellbeing over the course of the pandemic, particularly during the two lockdown periods in spring 2020 and early 2021. There was agreement that the second lockdown affected them more because of weather conditions and the duration of Covid-19 mitigation measures.

Drivers of low mental wellbeing identified were feelings of isolation due to being unable to see peers; tensions within the family due to spending all day in the same space; excessive screen use; pressures related to social media; the absence of activities that were not screen based; and a lack of routine leading to poor sleep. Some positives of spending more time with family and exploring the local area were identified by some, and most participants reported improved wellbeing as restrictions eased.

Most children and young people found home learning during the school closures very challenging. Some children and young people found the learning difficult to follow or struggled to motivate themselves to complete work. There was a recognition that home learning provision during the second lockdown was more organised, but also that this increased pressure on young people to keep up with tasks, which increased anxiety for many. The increased structure of home learning during the second lockdown does not appear to have been sufficient to establish a routine for those struggling with this aspect. Participants would have welcomed more direct 1 on 1 engagement with teachers, and for schools to proactively check on children's and young people's wellbeing. Digital access was a widespread problem during the first lockdown, but was resolved for most families by the summer of 2020.

Parents also reported a substantial decline in mental wellbeing. Many parents had no "respite" from childcare responsibilities during the period of school and ELC

closures, which affected their wellbeing, and in some cases their employment and own education.

In terms of access to health and mental health services, experiences among children, young people and parents varied. There was a general drop in provision in the initial part of lockdown, but services became available again as they adjusted to remote delivery methods. Children, young people and parents seeking to access services for the first time found this difficult, and there was a feeling that access routes were unclear, particularly for mental health services. Parents discussed having to seek out services themselves and be persistent, which was challenging for some, and felt that there should be more proactive offers of support to ensure needs were met. Some parents reported being unable to access any support for their children. There was also a general feeling that primary care was not available for routine appointments. However, parents were also very appreciative of mental wellbeing support being offered through schools, nurseries or third sector organisations, where this was available.

Overall, those who were accessing services found online and phone provision challenging, and the length and quality of remote GP appointments was described as lower than pre-pandemic. Most would have preferred face to face contact, although some young people preferred remote access as they were able to fit service into their days more easily.

Participants understood the reason for Covid mitigation measures, and most were in favour of restrictions as they were, although some felt that restrictions on meeting friends outside were too strong. Face coverings caused difficulties for some, e.g. those with limited English or hearing impairments who were reliant on lip reading, and some with exemptions felt stigmatised and felt that the exemption system was not effective. In general, it was challenging for children and young people to stick to physical distancing in schools.

Needs of particular groups

Children, young people and parents in different vulnerable groups also talked about challenges they faced as a result specific circumstances and needs. Many of the challenges faced by children and families as a whole affected participants in vulnerable groups more strongly. For example, young and single parents were most strongly affected by social isolation and the absence of childcare provision to provide "respite" from parenting responsibilities and to allow them to work or study. Those with very young children also felt particularly affected by the lack of social interaction for their children, who had lived all or most of their life during the pandemic. They reported that their children did not engage with others through online methods, and in some cases struggled to understand restrictions. Both young parents and parents with young children were particularly worried about their children's development.

Children and young people who had had tailored additional support for their learning prior to the pandemic, such as those with Additional Support Needs (ASN) or those with limited English, found it very difficult to take part in home learning when this support was removed, and felt that they were falling further behind their peers as a result. These groups called for increased 1-to-1 support from teachers, or face to face contact. Some children and young people with ASN were also particularly affected by the change in their daily routines.

Another issue relevant to several groups was the suitability of online service provision, including some remote technology and social media. Some children and young people with ASN were unable to use video calls or social media due to their health conditions, or found it very difficult to engage with. Some participants with domestic abuse experiences within their home also struggled to find private places to make use of remote support services, and some were unable to access support that had previously been provided face to face outside the home.

Some groups also experienced particular problems in accessing services. Parents of children with ASN reported postponed diagnosis assessments, and that it was not possible to indicate in advance that an individual has ASN when booking Covid-19 tests. Many parents in the perinatal period experienced delayed health appointments and a lack of support through health visitors. Having more knowledge about adapted health procedures during the pandemic would have helped decrease their anxiety. Participants in this group were also more nervous about being a new parent and missed interactions with other new parents.

For children, young people and parents experiencing domestic abuse, feelings of safety in relation to the perpetrator depended very much on individual circumstances. For some families affected by domestic abuse, pandemic restrictions reduced contact with perpetrators, which was perceived as beneficial, while others who were living with their perpetrator and spending all day in the same space felt significantly less safe.

1.   Introduction

This report presents findings from qualitative research conducted with a range of children, young people and parents in vulnerable or seldom heard groups, carried out to explore their experiences during the Covid-19 pandemic. Groups included in this research were selected because their lived experiences and views had not been sufficiently captured in existing research.

The vulnerable groups covered were:
-   Children and young people with additional support needs and their parents, with one or more factors requiring significant or co-ordinated support
-   Children, young people, and mothers with domestic abuse experiences
-   Children, young people, and parents who are asylum seeking and from minority ethnic backgrounds
-   Young people in gypsy/traveller families
-   Young and single parents
-   Parents with physical and/or mental illness
-   Parents in the perinatal period

During the period of research, there was a phased return to in-person childcare and teaching. Children in nurseries and Primary 1-3 returned to in-person childcare and teaching in February 2021. Other primary school children returned to in-person teaching in March. All other pupils, including secondary school children and young people, returned to in-person teaching in April after the Easter holidays. Some pupils had attended school in-person prior to those dates – for example, vulnerable children and children of key workers. The period of March to July 2020 is referred to as the first lockdown and December to April 2021 as the second lockdown.

2.   Methods

Nine third sector organisations with a thematic interest in specific vulnerable groups conducted research with 247 participants between 25 January and 20 April 2021. Data collection took place in a range of locations across Scotland, including urban and rural areas. The research included children (those aged new-born to 11 years), young people (aged 12 years and over), and their parents. Participants were recruited by stakeholders from the children, young people and families they work with based on convenience sampling.

Data collection took different forms according to the preferences and capabilities of interviewed people. The main methods were focus groups (17 in total) and individual interviews (99) and drama led play sessions (6). Some research was also conducted via text conversations (2) and non instructed advocacy (2).

The tables below set out details of methods and number of participants in the different elements of this research.

Children and young people with additional support needs and their parents, with one or more factors requiring significant or co-ordinated support			
Organisation	**Method**	**Number and ages of CYP**	**Number of parents**
Enable	1 focus group, 4 individual interviews	23 young people aged 15 - 25	-
Partners in Advocacy	2 focus groups, 20 individual interviews, 2 individual text conversations, 2 non-instructed advocacy: Participants with very complex needs were supported by their advocacy worker in expressing their views via observations and 1-to-1 conversations	7 children aged 6 - 11; 21 young people aged 12 - 18	-
Parent Network Scotland	1 focus group		13 parents

Children, young people, and mothers with domestic abuse experiences			
Organisation	**Method**	**Number and ages of CYP**	**Number of parents**
Scottish Woman's Aid	35 individual interviews	12 children aged 8 - 11; 14 young people aged 13 - 24	9 parents
Shakti Woman's Aid	25 individual interviews	3 children aged 11; 13 young people aged 12 - 17	9 parents

Children, young people, and parents who are asylum seeking and from minority ethnic backgrounds			
Organisation	**Method**	**Number and ages of CYP**	**Number of parents**
Scottish Refugee Council	2 focus groups	17 young people aged 12 - 16	-
Lickety Spit	1 focus group with parents, 2 individual interviews with parents, 6 drama-led play sessions over 3 sessions	22 children aged 5 - 11	20 parents
Parent Network Scotland	1 focus group		10 parents

Young people in gypsy/traveller families			
Organisation	**Method**	**Number and ages of CYP**	**Number of parents**
Article 12	2 individual interviews over 2 sessions	2 young people aged 13 and 16	-

Young and single parents			
Organisation	**Method**	**Number and ages of CYP**	**Number of parents**
Parent Network Scotland	1 focus group		8 parents with children aged between 3 weeks and 3

Parents with physical and/or mental illness			
Organisation	**Method**	**Number and ages of CYP**	**Number of parents**
Parent Network Scotland	1 focus group		10 parents

Parents in the perinatal period			
Organisation	**Method**	**Number and ages of CYP**	**Number of parents**
Home-Start	7 focus groups, 9 individual interviews		34 parents with children under 1. Some parents also had other children aged up to 12 years

Data collection was informed by a topic guide, which provided a loose structure. Questions were tailored to the experiences and living circumstances of different vulnerable groups, and focus groups and interviews remained open to topics and issues raised by participants throughout data collection. Participants were asked about the following general topics, as well as issues specific to the group:

- Education closures
- Digital access and skills
- Housing, space, and family
- Mental and physical health of children and young people
- Mental and physical health of parents
- Covid-19 mitigation measures

The next sections outline key findings across all vulnerable groups. Subsequently, findings specific to vulnerable groups are presented. By highlighting the lived experiences of different vulnerable groups, the report seeks to illustrate their particular life situations, experiences, challenges, and needs throughout the pandemic. Findings on the experiences of parents with physical and/or mental illness are integrated into key findings across all groups, as they had very similar experiences.

3.   Findings across all groups

3.1   School and childcare closures

Children and young people's views on education closures

Most children and young people were negatively affected by school and childcare closures. They said that they did not enjoy home schooling and online learning and found it very hard to adapt. The ongoing closing and opening of schools heightened anxiety among children and young people.

> "School work should just be for school, because it belongs there. It is confusing to be at home for school. It is not right. It's like mixing two different types of Lego – they don't go together. They shouldn't be mixed, and they don't make sense."
> (Young person with Additional Support Needs)

Many children and young people struggled with their workload and deadlines, and to maintain concentration. Most children and young people described missing face to face support from their teachers and being able to ask questions directly. As a consequence, they understood less of their subjects and worried about their academic development. Children and young people would also have liked teachers to check on them and their well-being – and not just whether they had completed their assignments. Some participants reported that teachers frequently became angry over uncompleted assignments. Overall, education closures increased stress amongst most children and young people. At the same time, a few participants preferred home-schooling over in-person teaching and were able to work better from home.

Lack of structure

Education closures resulted in a lack of routine and structure, which was a big challenge for many. Children and young people adopted an irregular daily rhythm and lacked motivation to get up, do their school work, and engage in activities. Some older children and young people stayed up during the night and slept more during the day out of boredom and a feeling of having nothing to do. Most children and young people recognised that a good structure to their day was important, but struggled in maintaining one. While there was some discussion that home learning processes were more organised during the second lockdown, it is not clear that this was sufficient in providing participants with a meaningful structure and routine.

Parents' views on education closures

Many parents found that home schooling put a high workload on children, and that support from schools in completing this work was missing. Furthermore, many parents felt inadequately trained to support their children with home schooling, which increased parents' stress levels. Parents who were in education reported having to cut back their own learning in order to supervise their children or could not support their children sufficiently due to having a job. Parents with multiple children with different needs and at different stages of education found this particularly challenging. Many parents were worried about their children's academic development during the pandemic and its consequences.

Participants stated that more support from schools would have helped – for example, by teachers reaching out more frequently and addressing individual pupils, clear

instructions for assignments and providing well-structured homework. Many parents also described that nurseries had not been reaching out and checking up on the children regularly. Some parents also struggled with a lack of information from schools on current Covid-19 mitigation measures and home learning and would have liked more regular updates from schools.

Some children and young people also directly missed out on school material during the period when schools had re-opened. One parent said that pupils self-isolating and waiting for Covid-19 test results had not been provided with home schooling materials. One parent described that in-person rotation, namely different groups of pupils attending school in-person alternately, was not always organised along subjects, resulting in pupils missing out on specific subjects.

Transition experiences during the pandemic

Participants experiencing a major life transition during the pandemic found that the pandemic made an already difficult situation even more challenging. Those transitioning from primary to secondary or changing schools struggled in adapting to their new environment. They stated that they missed out on activities, and made fewer friends. Where they were available, additional support and guidance, such as online tours, weekly check-in calls, receiving teachers' contact details, being allocated a mentor, or being able to visit a new school in-person once helped. Many young people finishing school during lockdown felt as though they missed out on important milestones, marking major life transitions, in their lives. Some parents also expressed concern about the impact of missing out on events marking transitions on their children's development.

Young people who started university or college during the pandemic described falling behind with work, lacking motivation and enjoyment of their courses. They were not able to make new friends, struggled with meeting deadlines, and would have liked to receive more support from universities – though they did not specify what kind of support besides more flexibility regarding deadlines. Some young people delayed starting college due to the pandemic.

Higher education and career aspirations

Many young people became more uncertain about their future during lockdown. Some worried about finding a job or starting college in the future or had changed their professional aspirations due to the pandemic. There were participants who raised the need for more support through career advisors, emphasising that schools' career advisors were frequently too busy.

Some young people had been unable to keep up with their college courses during the pandemic and had dropped out as a result. They said that this was due to a lack of appropriate equipment (e.g. correct materials in practical courses, technological equipment, software) or suitable study environments (e.g. due to family tensions at home). One participant struggled in completing his college course work due to being homeless. He said his lecturers had been "sympathetic but not supportive" regarding his difficulties in completing course work due to his homelessness.

Comparison between the first and second lockdown and phased return

Overall, children and young people said home schooling had improved from the first to the second lockdown. They were clearer on what was expected of them and found home learning provision more organised. Some parents also noted that schools

provided more live lectures and better home-schooling protocols throughout the second lockdown, which they found helpful. Children and young people who could visit school in-person on allocated days appreciated this opportunity, and most took up the offer. Those without allocated days in an education hub would have liked to have gone in. One young person had not been offered an education hub spot during the first lockdown, and her well-being decreased drastically. With the help of a local politician, her family managed to secure a spot for the second lockdown, which improved her well-being. Many participants interviewed during school closures were looking forward to an easing of restrictions and going back to school. Overall, children were keener to go back to school than young people. Furthermore, children and young people experiencing major life transitions were less looking forward to going back to school.

3.2   Digital access and skills

Technological equipment and internet access

At the start of the pandemic, many children, young people, and parents lacked suitable technological equipment, skills, or a stable and fast internet connection. Families with insufficient devices had to share devices and rely on mobile phones. All of these aspects negatively impacted children and young people's home schooling and online activities and parents' further learning – especially during the first lockdown.

For most families, these issues were resolved during or after the first lockdown – they received equipment or internet sticks through schools or third sector organisations. However, some families reported continuing problems with their internet connection. Some young people said they had been expected to use technological devices independently because of their young age but struggled in doing so. They said more support in acquiring these skills would help but did not specify what kind of support.

A related issue was the digital skills of teachers and schools' online systems. Some young people said that usage of technology in schools prior to the pandemic was comparably low, and that it took teachers time to get used to new circumstances and for schools to adopt functioning online systems. One participant noted that it would have helped if technology had been used more frequently before the pandemic.

Social media and staying connected through technology

The majority of children, young people, and parents' social relationships moved online and relied mostly on social media – with both negative and positive consequences. Most participants appreciated being able to stay connected with friends and family, and to take part in activities, but missed face to face interactions, found online communication insufficient, and said that some friendships had suffered.

Because of home schooling, online activities, gaming and social media, screen usage increased significantly among children and young people. Many children and young people reported spending increased hours on their phones, even at night. Many children, young people, and parents were aware and critical of this increased screen time. In this regard, many parents worried about their children's screen usage, and some described heightened agitation relating to online gaming. At the

same time, it was participants' only way of staying in touch with the outside world. One parent suggested that schools could provide some printed tasks in addition to online teaching.

> "Every day my child starts her day around 9:30 to 10:00am and finishes by 5pm. Most of that time, she is doing some school task or the other using her iPad or my laptop. We do not have a printer at home so she either works on screen shots on the iPad or writes in her notebooks. But she needs to constantly refer to the iPad for the tasks and instructions etc. I feel this demands a huge amount of interaction with online devices, as well as the pressure to have internet access for all of the tasks. Perhaps some of the tasks can be handed as a set of printed tasks from school?"
> (Parent who is asylum seeking and from minority ethnic background)

Tensions arose when parents tried to restrict the internet and social media consumption of their children – who perceived this as unfair, given the lack of alternatives for interaction. Some parents were also concerned about allowing their children to socialise online for security reasons.

Some children, young people, and parents found online activities and communication stressful and felt pressure to be constantly available online. Through using social media, they gained the impression that other people were having a more productive, enjoyable, and wholesome life, leaving them demotivated. Some young people also reported getting more critical of their body image because of spending much time on social media. Some young people were critical of social media for these reasons and consciously tried to reduce their usage.

Some young people engaged in potentially risky digital activities out of isolation and loneliness. One participant said he started speaking to people online because he felt isolated – however, this resulted in him receiving unwanted sexually explicit images: "lots of pictures of penises, which is crap and off putting."

Nonetheless, some children and young people were happy about the move to online communication. They could talk with friends far away and were no longer restricted time-wise.

Children were less able than young people and parents to stay in touch via social media. Having fewer contact with friends and being unable to interact was difficult for them. Some reported feeling isolated precisely because they were unable to communicate with friends or extended family. However, some children and young people also declined to engage in online groups, activities and communication and spoke over months with no one outside their immediate family.

3.3   Family life during the pandemic

Most participants spent more time together as a family during the pandemic. Many children, young people, and parents appreciated this, could re-connect and enjoyed communal activities. Children especially enjoyed spending more time with their family, and some parents highlighted its positive impact on their development. Some

children and young people valued that they were able to pick up new hobbies or learn a new skill.

At the same time, spending a lot of time together increased tensions and stress in families. Many families spent much time inside and found it difficult that schools and community spaces remained closed. Being confined to the house was particularly challenging for families with more than one child, children and young people of different ages, children and young people with complex needs, single parents and families in which one partner works far away. Some parents noted that they lacked quality time as a couple. Because of lockdown, children and young people were at home most time and observed and witnessed more family tensions, fights, or mothers crying. In one family, parents were unable to separate due to the pandemic. All of this increased stress within families. Most families looked forward to outdoor activities once the pandemic eases. Children and young people with larger families in particular experienced increased pressure on parent and sibling relationships.

Another theme was the absence of childcare or other activities to give parents "respite" from caring responsibilities. Parents highlighted the negative effect on the whole family of not having breaks from each other. They said that being allowed to have more support in childcare, for example, through extended family, would have helped. This was less the case for families who could rely on extended family for support during the second lockdown. Participants eligible for a support group or a bubble – once this had been allowed – found it easier to adapt and noted that it had been beneficial for their mental health.

3.4   Financial impacts

Many families experienced increased financial difficulties, which heightened anxiety and stress. Some parents had lost their job or could not take up a new job due to childcare commitments, putting pressure on their spending budget. Some children and young people were worried about their family running out of money for essential items, such as electricity. Some families relied on food vouchers or parcels due to a lack of money.

> "My mum couldn't work because of the lockdown and we had to rely on food parcels. Some of the things in there were of no use to me, but my mum said we had no other food, and we had to use everything from the bag - like oat milk and soya milk. I wished we had more money to be able to choose our own food."
> (Young person with domestic abuse experiences)

One family in need of new children's shoes had to use their food vouchers to buy new shoes at a supermarket, leaving them with no vouchers for groceries and had to ask a third sector organisation for additional vouchers. They said it would be good to receive more vouchers and that they would have been able to buy cheaper shoes at charity shops or discount clothes shops – but did not have the money for that. At the same time, some families said they saved money throughout the pandemic because they spent less on activities and going out.

3.5   Space and housing

Many families used outdoor spaces more frequently and said they enjoyed this. However, many children, young people, and parents also avoided going outside in general because they were afraid of catching Covid-19. There was a general agreement that the second lockdown had been more difficult because the cold weather and darkness prevented spending much time outside – and because of the duration of restrictions.

The housing situation influenced how well families could cope with lockdown. Those with bigger flats, a garden, or a ground-floor flat found it easier to manage. Some families reported being unable to move to a new home because of lockdown. Families with pets, such as dogs, also described this as beneficial for their well-being and maintaining a routine. Participants who had to live together with extended family, such as in-laws, described this as difficult and experienced increased tensions. This was especially the case when one household member had to go to work, whereas another household member had to shield. One young person reported being homeless and unable to move into a new flat due to increased waiting lists during the pandemic.

3.6   Mental and physical health of children and young people

Overall impact of the pandemic

Overall, the pandemic had a negative impact on the mental health and physical health of children and young people. Among most, feelings of loneliness and isolation increased. Many parents thought that the pandemic had a particular negative impact on the mental health of children and young people.

Most children and young people, as discussed above, lacked structure and missed seeing their friends, romantic partners, and extended family – all of which had a negative impact on their mental health. The lack of interaction with others impacted participants' socialisation, confidence, self-esteem, and mood. Some children and young people became restless or destructive, and parents of younger children reported an increase in tantrums. Other children and young people became more introverted, lacked motivation, and began or magnified self-harming or an eating disorder. The closing down of clubs and activities worsened these problems. Some parents said their children had expressed disturbing thoughts, such as not wanting to be alive. Some parents of younger children also found that their children regressed in terms of developmental steps such as toilet training. Being allowed to meet outside with other children, young people, and family members would have helped. Furthermore, children and young people felt that more options to do things outside the house would have helped them adopt a better routine and get more physically active. Some parents also said that having play group meetings outside would have helped.

The lack of routine discussed above led to irregular meals and a lack of sleep, which impacted the physical health of children and young people. Many parents were concerned about the lack of exercise and increased food intake of their children during lockdown, resulting in weight gain. Comfort eating was a problem for many children and young people. However, some also exercised more by going for walks,

and one other mother was happy that she could provide her children with healthy food at home.

Support and health services

Overall, the availability of health and support services for children and young people decreased or suddenly stopped at the start of the pandemic, although many services resumed in some form over the course of the pandemic.

A number of participants reported that it was very difficult to request or access new services for children and young people for the first time. Parents were confused about, and felt that there was a lack of guidance about available services and access to support. A simplified access route to support services would have been beneficial. Some participants described not knowing how or where to access information and support on mental health – in extreme cases, some young people mentioned having self-harmed or feeling suicidal but having struggled to access appropriate support. Some participants had been unable to access services altogether despite reaching out. Consequently, they turned to friends and family for support.

Some families said they have not had input or contact with services and support agencies and felt isolated and left alone to cope with challenges. There were parents who noted that they were the ones who always had to make the first initial contact with health services, which they found difficult. This related to different medical services, such as primary care and check-ups, as well as mental health services.

The amount and quality of received services and support for physical and mental health varied significantly between local authorities, nurseries, schools and other organisations delivering services. While some parents said that their children had not been supported, others were more positive. Parents appreciated whenever schools provided mental wellbeing support for children, for example, through meditation or yoga sessions.

Remote access services and support

Most services and support moved from face to face to video, phone, or text formats. This change was difficult for most children and young people, and many found this less efficient, difficult to access and unsuitable for their needs. They struggled in expressing their needs and difficulties over the phone and would have preferred continued face to face support. However, most participants preferred phone and video calls over text messages.

Services such as physiotherapy or speech therapy were conducted via Telehealth. Some families found this difficult, saying that they could not get their children engaged with Telehealth. Many parents were looking for more understanding from health professionals that children and young people react differently to online communication than adults, and might require alternative services and support forms. However, some young people preferred support via the phone and text because it was constantly available and not location bound.

Most support and health services for parents also moved to phone or video format. Many parents found this change difficult and felt less able to open up and talk about health issues and said that video support would have been preferable. There was also a feeling from both parents and young people that telephone appointments were shorter and more rushed than pre-pandemic appointments, some parents said that

over the course of the pandemic, with lockdown easing and face to face meeting resuming, this became easier.

Both parents and young people noted that medical services had been difficult to get in touch with via online or phone channels, and to access prescriptions – for themselves, and for their children in the case of parents. In general, health appointments via the phone were perceived as challenging. Some participants had the impression that health services seemed to remain closed.

There was an agreement that participants were looking for more online as well as face to face appointments with a wide range of support functions beyond primary care – for example, with schools, mental health support workers, and specialist health professionals.

Mental health support

Many young people and parents talked about difficulties in receiving sufficient mental health support for themselves or their children during the pandemic. They talked about long waiting times for services, such as having to wait several months for CAMHS (Child and Adolescent Mental Health Services), and called for quicker access to these. For some participants, online services from CAMHS worked well, but many found it unhelpful. Two young people also talked about feeling "fobbed off" by the service.

Many parents said that the availability of support and health services also depended on the age group of children and young people – and that there were age support gaps for certain services.

> "I tried CAMHS and was told at my daughter's age she couldn't have mental health problems and they would need a suicide attempt to help. 10 months later, I am still on the waiting list for the doctors to get her support, and they all are telling me she is too young at age 6 to get further help. She has been saying she wants to be dead, which is really upsetting and a year later I feel that nobody is taking that seriously. There was a help line that was opened during lockdown for CAMHS but I was told she was too young to be seen about mental health issues. There is an age gap for support."
> (Parent with physical/mental illness)

One participant mentioned sleep support for young people over 18 years. Mental health support seemed easier to access for children than for young people. Some young people said that they thought there should be more mental health support targeted specifically at them, as well as more signposting and clearer access routes. This included mental health support advertisements directed at young people themselves rather than their parents.

Sexual health services

For some young people, access to sexual health services was unclear during the pandemic. Participants thought sexual health services were no longer available and did not want to talk about this topic on the phone. One participant had been advised to visit a sexual health clinic outside their local area, which they had initially been told not to leave. At the same time, some young people said they knew how to gain access to sexual health services.

3.7 Mental and physical health of parents

Overall impact of the pandemic

The pandemic had a negative impact on the mental and physical health of most parents – though the extent of this negative impact varied. Many parents felt lonely, isolated and found it challenging to raise their children without external support – especially during the first lockdown. Not being able to see friends and extended family was difficult, and they worried about their children. One participant had a family member with cancer, and found it difficult not being able to see them. One mother with anxiety struggled because her support family member could no longer visit her in-person at the start of the pandemic, increasing anxiety and isolation.

Support and health services for parents

There was a general agreement among parents that their access to physical and mental health services had decreased. Many parents reported longer waiting times and fewer available services during the pandemic. Some health services, such as physiotherapy or check-ups, were paused at the start of and during the pandemic, which decreased participants' health. However, many parents also said that support had slowly increased again over the course of the pandemic. This applied to both physical and mental health services.

Support received differed among parents, with some feeling as though their problems were not taken seriously by health professionals. Support for children received through schools or nurseries also impacted the well-being of parents and how they managed to cope. Parents found it helpful whenever schools regularly reached out and checked up on children's well-being and stayed in touch. Support in the form of well-being and activity packages for home was appreciated by children, young people, and parents – though many noted that these could not replace face to face support and activities. Many parents thought that throughout the pandemic, general awareness of mental health issues increased, which they appreciated. This made it easier to share mental health concerns and problems.

Many parents were hesitant in asking for more support and health services during the pandemic. They thought other people were worse off and did not want to take resources away from the NHS during the pandemic. Consequently, many dealt with health issues and mental health problems on their own. One parent was also afraid of being deemed unfit as a mother when asking for more support.

3.8 Covid-19 mitigation measures

Understanding and adhering to mitigation measures

Overall, most children, young people, and parents understood Covid-19 mitigation measures and agreed that it was important to implement them. Many participants also said that there had been a good balance between freedom and restrictions. At the same time, many struggled with the long duration of restrictions and were upset about being unable to see their friends – some felt that rules were too restrictive in this regard.

Some parents noticed that their very young children did not understand the restrictions. They thought they had done something bad and were being punished for

it by being forbidden to play with friends. Some parents also said their children had become germ-phobic during the pandemic and were washing their hands excessively.

Most participants adhered to mitigation measures, partly because many were afraid of going out and catching Covid-19. At the same time, it was difficult for most children, young people, and parents to stay inside all the time. All participants found it hard to adhere to mitigation measures whenever (they had the impression that) other people did not do so. They expressed annoyance and frustration about other people not sticking to measures and perceived this as unfair. A common example was the impression that others were having big parties, while participants could not even meet with their extended family.

> "I don't know what I can say to make people take it more seriously. It's not fair when I have things I want and need to do, but other people are still doing what they want."
> (Parent with physical/mental illness)

Families who had been shielding described this as very difficult. Parents worried about the negative consequences of their children staying inside all the time and others not adhering to physical distancing measures. Public transport restrictions had a negative impact on one family without access to a car.

Criticisms of mitigation measures

Overall, participants perceived the ongoing change in measures as confusing, with many finding it difficult to stay up to date. There was a general agreement that distinct rules for different age groups of children and young people made understanding and adherence difficult, particularly around socialising. Many young people perceived the different rules for children and young people of different ages as unfair and did not feel that the reasons for the difference were explained sufficiently. Tensions emerged when parents had to ensure their children stuck to measures. There was a lack of understanding among some children, young people, and parents why restaurants and pubs had been opened up before schools, baby and toddlers' groups and nurseries during the easing of the first lockdown.

Young people had different impressions of whether their peers adhered to mitigation measures. Many found it difficult to maintain physical distancing at school and adhere to measures when their peers disapproved of and disregarded measures. For example, it was difficult to ask others to stay away in school. Not wanting to admit that she cared about mitigation measures, one participant made up excuses for being unable to socialise.

> "Saying no to social requests is hard. You have to make an excuse if you're saying you're not going. If you said it was because of Covid you'd get laughed at. Our age feel like they can't say no to social things because of it."
> (Young person with domestic abuse experiences)

One young person struggled because he was not allowed to go home for lunch because of Covid-19 regulations, but could not afford to buy lunch at school. All participants appreciated sufficient hand sanitisers in schools.

Face coverings

Most children, young people, and parents had no problems with wearing a face covering where they were required. They were happy that they protected themselves and others. However, some children and young people found face coverings uncomfortable. They said it was hard to breathe while wearing one and gave them sore heads. Some young people were also unhappy with having to wear a mask all day in school upon returning to in-person teaching. They did not understand the need for this, would have preferred wearing masks only in communal areas or to be given breaks to take the mask off.

Many children, young people, and parents felt unsafe whenever others did not wear face coverings or did not adhere to physical distancing. In these cases, they called for a stricter enforcement of measures – for example, in shops and public transport.

Parents with exemptions for themselves or their children noted ongoing stigmatisation and discrimination of people without face coverings. They said that exemptions had been misused and taken advantage, and had lost their meaning. Therefore, some children, young people, and parents wore face coverings despite exemptions – both to avoid stigmatisation or because they did not want to wear a visible lanyard stating their disability.

> "I am exempt, and it's awful. When I am out in public, I have people watching, I hear whispering. I wear the lanyard but I still have people telling me to put one on. I have started wearing one sometimes now as its saves the whispering. I see Facebook posts saying people are lying to get out of masks and making up problems, like shaming you for being exempt, and they feel there are people faking it. In my college, there are posters to raise awareness that some people can't wear them, but I still get questioned about it, from students and teachers even with the lanyard."
> (Parent with physical/mental illness)

One participant said it had been difficult to get an exemption for face coverings.

Information on Covid-19

Children, young people, and parents received information on Covid-19 from different sources, including friends and family, social media, the BBC, TV news and government websites. Participants felt that there was a need for information to be adapted to the abilities of different vulnerable groups (e.g. simple language and autistic-friendly information) and in community languages. Some parents reported getting desensitised to information throughout the second lockdown.

4.   Findings specific to each group

4.1   Children and young people with additional support needs and their parents

Education closures

Children and young people with additional support needs (ASN) experienced many of the same problems as others in the areas of home schooling, mental health, and health services and support, often to a greater degree. Home schooling had been a particular challenge for participants with ASN. Most young people and parents noted that online learning had been put out with little or no ASN provision, and all were looking for more tailored learning support from schools. There was a consensus that a one size fits all approach had been implemented without additional support or checking in. Online learning and homework were not structured to the abilities of children and young people with ASN, and teachers provided insufficient guidance. This led to children's feelings of being overwhelmed and frustrated about being unable to complete required tasks.

> "I feel I have been caught between a rock and a hard place when I have been feeling upset – you can either try to keep doing the school work even if you're struggling…. or stop and then get punished next day when there is twice as much work. You just can't win either way. I could have really used a bit more flexibility and understanding from the school."
> (Young person with Additional Support Needs)

Some young people noted that there should have been more access to schools and support from schools for children with ASN – such as drop-in sessions or 1-to-1 sessions with teachers. Some parents emphasised the need for homework structured at the level of pupils with ASN. Parents of children with ASN were concerned about their children's learning being at serious risk and that they were falling further behind due to the lack of ASN provision.

For some participants with ASN, home schooling was a positive experience. This was because they could avoid a sensory overload in the school environment and direct interaction with others. Parents whose children benefitted from home learning hoped that a more flexible approach towards learning could be continued after the pandemic.

More generally, many parents were worried about their children's wellbeing as schools reopen. Lockdown had become the new routine of their children, and they said it will take time and work to settle back in once things ease up. The reopening of schools and then closing again was difficult for some children with ASN to adjust to.

Technology

Some participants with complex needs required technological equipment suitable for their needs (e.g. an iPad rather than a laptop) – which some received only after a few months. One participant with complex needs had not been able to access online learning, as he needed support to use his laptop, and his parents both worked full-time. Participants without access to social media or without the capacity to use them

independently were at risk for further isolation and could not stay in touch with their teachers and peers – for example, non-verbal young people. They would have required additional help in using social media.

Mental and physical health and support

Among parents of children with ASN, there was an overall agreement that there were already problems with ASN provision before the pandemic, but that these had become more severe throughout the pandemic. The mental health of children and young people improved after the first lockdown once children and young people returned to school, but many parents noted that they worsened even more during the second lockdown. Support services, such as diagnosis assessments, differed significantly between participants and local areas. Participants in this group had to fight harder and wait longer for required support. They also noted a significant decrease in the quality and frequency of services for individuals with ASN.

Several participants described extremely long waiting times for diagnosis assessments and added that some diagnosis could not be carried out online, which posed a challenge. They called for faster diagnosis assessments and shorter waiting times for health services and support. One participant with audio, visual and respiratory illnesses described hospital appointments as being shorter and less thorough, resulting in poorer treatment. Parents noted that it was difficult to get children with ASN to engage with online services but that there were no alternative options.

Some children and young people, including those with very complex needs, were forced to move from care service back to live with their parents during the pandemic, which caused family challenges and disruption. Participants living outside the family home experienced a significant increase in isolation. In general, for non-verbal individuals support decreased dramatically initially at the start of the pandemic, although it was recognised that it increased as restrictions eased. Lack of access to care resulted in anxiety, isolation and worsened mental health. Parents would have liked more support, for example, through support workers helping at home.

Views on Covid-19 mitigation measures

There was an agreement that people with ASN should be high on the priority list for vaccinations. Some participants noted that carers' access to vaccinations remained unknown for a long time, which had a negative effect. Some children with ASN were also worried because there was no news on children's vaccinations.

Some children and young people with ASN were extremely afraid of risks through Covid-19. They were afraid to go outside, concerned about many people being outside and anxious about how to interact with other people. Their parents said that extreme fears had been projected upon them because people with ASN take things literally. At the same time, some children and young people liked being able to go outside because outdoor spaces were quieter.

There was a general consensus that there is a need for information on Covid-19 suited for people with ASN – such as autistic-friendly information.

> "The First Minister and Government should also communicate with people who have a learning disability." (Young person with Additional Support Needs)

Not being allowed to play with younger friends was difficult for children over 12 years. Children without spatial awareness struggled especially with physical distancing. One parent noted that there was no possibility to inform testing centres in advance that a test person has ASN. This led the parent to trying to book multiple tests because more time was required for the test. They said being able to indicate beforehand that a Covid-19 test will go differently than for a neuro-typical person would be helpful.

4.2   Children, young people, and parents with domestic abuse experiences

Support and health services

Children and young people with domestic abuse experiences had similar experiences as others with regards to home schooling and mental health. Participants with domestic abuse experiences were generally able to access services and many participants agreed that support was easy and discreet to access. Some participants accessing support for the first time found that access routes to support were unclear, especially women with limited language skills. Signposting and clearer access to mental health services would have helped.

Some women did not have access to the internet, and this stopped them from accessing mental health support online. With services moving online, one participant emphasised the need for basic digital skills training for women with limited digital skills who left abusive relationships. She also highlighted the need for access to the internet, mobile devices or PCs for those women and wished for more services to be made available online.

The change from face to face to phone, video calls and text messages was difficult for many participants with domestic abuse experiences. They lacked privacy at home and could not talk openly on the phone with their support workers. Some participants had to be flexible to ensure they were home alone during support sessions, while others had to halt their support entirely.

Digital access was also an issue for many in this group. Some women had no, or only unreliable access to the internet, and this made remote support difficult, or in some cases, impossible. One participant emphasised the need for basic digital skills training for women with limited digital skills who left abusive relationships. She also highlighted the need for access to the internet, mobile devices or PCs for those women and wished for more services to be made available online.

Some participants with domestic abuse experiences found it difficult whenever services took a longer time until they got back to their support requests. They also struggled in always having to reach out because of a lack of face to face contacts in their daily life.

> "When it's online, no one can really see if you are struggling. If I had been in university, I would have seen an advisor more or friends would have noticed."
> (Young person with domestic abuse experiences)

Children and young people received information about support services through their parents, school, and family friends. Mothers received information via their GP, police, friends, internet, social worker, and relatives.

School closures

School closures brought along specific challenges for children and young people in this group. Some participants said they missed meeting their support workers in school or coffee places, and one participant had to stop her support sessions because these had been taking place at school. One young person had planned in guidance with her school to move out of her family home where she lives with the perpetrator (father). When schools suddenly closed, moving out was no longer an option, and she still lives with her perpetrator. She would have needed more time in advance of education closures to figure this situation out.

Feelings in relation to the perpetrator

Feelings of safety in relation to the perpetrator differed between participants in this group during the pandemic.

For many children and young people, feelings of safety stayed the same. However, for some children and young people feelings of safety improved. One participant, for example, was furloughed from her weekend job during the pandemic. This meant that she stopped seeing her perpetrator who had visited her at the workplace and she felt safer. Some also stopped seeing their perpetrator – which often was their father – because supervised contacts were cancelled during the pandemic, making them feel safer. Most said that they did not mind missing out on supervised contacts.

Other children and young people said their feelings of safety had worsened during the pandemic – especially those living together with the perpetrator. For example, one young person's father (perpetrator) had lost his job, and she no longer knew when he would be at home. Many children and young people found it difficult that they were unable to leave the house and go anywhere in case of family tensions, feeling trapped and isolated. Always having to reach out to other people and being unable to meet with friends also made some young people feel more unsafe.

Many mothers with domestic abuse experiences said their feelings of safety in relation to the perpetrator did not change throughout lockdown. For some women, their feelings of safety improved. This was because supervised contacts with the perpetrator were cancelled during the pandemic. One woman stated that she decided to supervise contacts between her child and ex-partner (perpetrator). At first, this caused her anxiety, but more recently, it improved her relationship with her ex-partner. Two participants were able to leave a relationship and move to a different part of the country just before lockdown. This also increased the feelings of safety of their children because perpetrators no longer knew their address. Some participants appreciated that they would no longer run into their perpetrator in the neighbourhood or were able to not let the perpetrator into their house due to lockdown restrictions. One participant worried that this would change again with the ease of restrictions.

Some women said the pandemic had worsened their feelings of safety. This was often the case when women lived with the perpetrator. Some also said that perpetrators always knew their location due to lockdown regulations and would come to their house more often. Some mothers said that the pandemic had worsened the abusive behaviour of their perpetrators, for example, due to a lack of structure.

4.3 Children, young people, and parents who are asylum seeking and from minority ethnic backgrounds

The findings in this section relate to experiences of children, young people and parents who are asylum seeking and from minority ethnic backgrounds. Findings of focus groups with parents who are not asylum seeking but from minority ethnic backgrounds were the same as findings among all groups and have been integrated in section three.

School and childcare closures

Children and young people who are asylum seeking and/or from minority ethnic backgrounds faced the same challenges with regards to school and childcare closures and mental health as many others.

Home schooling was particularly challenging for most children and young people in this group with limited English language, or otherwise requiring additional support. Because of home schooling, they were unable to interact directly with teachers and receive immediate answers to their questions. It was challenging for them to understand what teachers were saying and to know what they had to do, making it difficult to understand their subject matters. They needed more help and would have appreciated support with remote learning from their teachers.

A major issue for some children and young people was the cut in support study in the afternoon during the pandemic. Support study had taken the form of personal support hours in the afternoon during which pupils can ask questions. There had been differences with regards to which schools offer support study prior to the pandemic. Those who had been offered support study described it as vital for understanding their subjects and exam preparation. Due to the cuts, many received insufficient support and most agreed that schools should provide supported study in the afternoon.

Some children and young people had difficulties understanding their teachers when they were wearing face masks. They would have preferred teachers wearing face shields.

> "My modern studies teacher, he has a very thick Scottish accent, there is an accent barrier. When he didn't wear a face mask, I was able to read his lips and understand what he was going to say and what he meant. But now, with a facemask, I find it difficult to understand what he said."
> (Young person who is asylum seeking and from minority ethnic backgrounds)

Furthermore, many participants could not improve their English skills further because of being at home with their family where they spoke their first language. Practising English was a key reason why children and young people wanted to go back to school and meet with their friends. They called for more support in this area – extra support for learning English beyond regular school classes would have helped.

Many parents perceived online learning as not effective and were looking forward to children going back to school. Most parents felt ill-prepared and were unable to support their children with online learning. Some parents did not speak English well enough to support their children. One participants' niece could not support her children in home schooling because she cannot write or read herself.

Digital access

Access to digital equipment or the internet was a key issue among participants in this group. Many families had remained without devices or a stable internet connection for several months before these problems were remedied. Not having digital access made home schooling difficult, and participants felt isolated. During or after the first lockdown, digital devices had often been provided by stakeholders as families did not have enough money to afford them. Overall, internet connections had been insufficient for online learning. Free, high-speed internet access would help.

Because of insufficient digital skills and the inability to open a bank account, some isolating families could not order food online and relied on food packages. It would have helped if asylum seekers could open a bank account. Some participants could not reach out for support or attend online health appointments. This was due to a lack of digital skills and language barriers, making it difficult to talk about health issues on the phone. Video calls instead of phone calls and face to face consultations with GPs would have helped.

Family life and getting out

Many families were afraid of catching Covid-19 and avoided going outside. None of the children in this group were getting outside every day and most were not going out to a park at least once a week due to parents' anxiety about overcrowding of parks. While spending time inside, parents tried to ensure their children did not make too much noise inside so their neighbours would not complain. Some families also lived far away from green spaces and parks, preventing them from visiting those regularly. Participants felt that cheaper public transport tickets for children and young people once lockdown eases would allow them to explore new areas.

Covid-19 and the asylum process

Overall, participants felt that the pandemic had delayed the asylum process, which led to increased stress, anxiety, and financial insecurity. This also affected the mental health of parents and their ability to support their children. Parents emphasised the need to speed up the process because not having the right to work was the biggest issue for them. The delayed asylum process also had an impact on their children – for example, they could not participate in school excursions. Being allowed to open a bank account at an earlier stage would help.

Covid-19 mitigation measures

Among participants in this group, there was a need for information on Covid-19 in community languages. Some children and young people translated information for their families, as information was only provided in English.

4.4   Young people in gypsy/traveller families

The gypsy/traveller element of this research consisted of interviews with two young people which were focused on their individual circumstances. Findings suggest many similar experiences as other young people participants, for example around mental health, peer relationships, family tensions and social media. One finding related to this particular group was that neither interviewee attended school prior to the pandemic.

One participant described having no form of formal or informal support with learning during the first lockdown. This changed throughout the second lockdown, where she received support through a third sector organisation. She was happy that she had moved from no home learning at all during the first lockdown to supported learning. Both young people found their digital access to be sufficient. They also understood the necessity of Covid-19 mitigation measures but expressed frustration about the length of these.

> "I didn't mind staying at home at first, but it has been too long now."
> (Young person who is in a gypsy/traveller family)

Throughout the pandemic, the two young people became increasingly bored and were upset that the pandemic impacted their plans for the future. Both participants had no problems with accessing support, but one participant suggested that online games about mental health would be helpful.

4.5   Young and single parents

Well-being and support

Many parents in this group felt very isolated during the pandemic and would have needed more support and company. Some participants were frustrated because they were confined to their home and childcare commitments, saying they did not have a life outside of being a parent. Most participants had no relief from childcare responsibilities during lockdown. This was especially the case for parents without families in the UK. Having a nursery spot for the child during the pandemic would have helped and provided relief.

Some participants found it confusing why only some nurseries offered spots for children. One participant had received a nursery spot for her child during the first, but not the second lockdown, which was challenging for her. Several single parents were worried about catching Covid-19 and leaving their children without a parent or carer.

Physical and mental health services

Young and single parents had similar experiences with physical and mental health services as many other participants with regards to access and the reduced availability of services. Two participants experienced long waiting hours for health service when their children were ill and had to use out of hours appointments and felt like they had not received medical support soon enough. One participant who was pregnant during the pandemic found it challenging that she could not take anyone with her to health appointments.

Some participants were anxious about mental health problems of their children but could not get access to therapies or other support. Many participants emphasised the need for more advertising for helplines and mental health support for children and parents. They suggested this should take the form of social media advertisements, posters and leaflets.

> "I haven't felt like I have had a lot of help. We are on social media a lot due to lockdown, but there should have been more advertising for helplines and mental health advertisements. No leaflets to let you know where to go. […] I don't know where to

start, and some adverts telling you where to go would have
been much better."
(Young and single parent)

Combining parenthood and further education

Many parents attending college courses struggled in combining their parenting responsibilities and education during the pandemic. They had difficulties completing course work and were unable to focus on their educational development and career because of childcare commitments. This meant that they missed out on courses, took longer to finish their courses, and struggled in meeting deadlines. They said that while colleges acknowledged their childcare commitments, they were still expected to complete assignments according to deadlines. One participant mentioned being unhappy about having to neglect her child while doing important assessments. Another participant worried about additional night-time and weekend lessons after the pandemic to catch up, which she would not be able to attend due to childcare commitments.

Most parents attending college felt that they had not received sufficient support from nurseries during lockdown. Many had not received a nursery spot for their children but agreed that they should have been offered one. One participant who had received a nursery spot for her child noted that it did not always fit with her college schedule. Another participant stated that it was impossible to have a job and secure sufficient income while being a single parent. One participant was unable to take driving lessons because of the pandemic and childcare commitments. She explained that her theory test taken before lockdown would go out of date soon, meaning she will lose money, effort, and face a backlog in accessing driving lessons after the pandemic.

4.6   Parents in the perinatal period

Children's well-being

Many parents in this group worried about and described the negative impact of their very young children not meeting and interacting with others. This made children isolated and negatively impacted their socialisation and speech development. Speech also deteriorated for those in need of additional help who could not access speech therapists. Most parents found it difficult that children could not bond with extended family such as grandparents. Some children got shy and anxious around other people. Furthermore, some children became more emotional, sensitive, and whiny. More freedom for children to meet up with other children or family members and playgroup meetings outside would have helped.

Most parents in the perinatal period were able to spend more time with their children throughout the pandemic and valued this opportunity. At the same time, many children were never separated from their parents and found it difficult to stay with other adults once restrictions eased.

"My children cling to me and are more cautious of things…they
need a lot of reassurance from me."
(Parent in the perinatal period)

It was challenging and intense for some parents to spend so much time with their child. Some participants also noted that young children – particularly toddlers –

demanded more one-to-one attention throughout lockdown. This was difficult for parents with both a young child and new-born at home, as older children found it difficult to adapt to having a younger sibling at home all of the time. One parent said that being outside and playing a lot in the park had been good for the child's development.

Parents in the perinatal period experienced the same problems as others in the area of health services for children and mental health. There were difficulties in conducting virtual health check-ups with younger children. Some parents had received sufficient support through health professionals. However, many participants also described postponed health appointments, long waiting lists for services and a lack of support, contact and guidance from health visitors. This led to over-due and missed developmental check-ups for children. Overall, parents would have found more health appointments and support from health visitors, midwives and mental health support workers beneficial. One participant received insufficient support for her post-natal depression.

Mental and physical health of parents

Many parents in the perinatal period felt tired, stressed, and depressed throughout the pandemic. One father was very stressed with working from home and could not cope with the noise of the children. The mother could not go anywhere with the children, which caused stress and finally led to the breakdown of the relationship. Being unable to see their extended families increased parents' sense of isolation and worsened their mental health. Because of a lack of external childcare, some parents had to take their young children with them to shops, resulting in additional anxiety and risks of infecting the child.

Most participants had been worried about being a new parent during their pregnancy and many were concerned about the impact of these worries on their then unborn children. With the closure of support groups, many parents did not get as much reassurance and interaction with other parents, leading to increased anxiety during pregnancy and after birth. More opportunities to meet with other families outside would have helped. Some parents described less social pressure to engage in social groups and activities with children and appreciated the lack of unannounced visitors at their homes. However, they also felt their children missed out on important activities. For some, it was positive that they could care less about their appearance.

Experiences of partners

Many fathers did not feel treated equally by health professionals – which was difficult for both fathers and mothers. Fathers felt excluded and left out prior and during the birth, but did not want to burden their partners with their negative feelings. One father, who was the main carer, felt ignored by their health visitor. Overall, fathers emphasised the need for support groups specifically for fathers and were surprised health visitors had not drawn their attention to these. Some parents were unhappy that fathers were classified as visitors in hospitals. Having designated spaces in hospitals for families to bond would have helped.

Views on Covid-19 mitigation measures

Covid-19 mitigation measures in hospitals were difficult for many participants. Not being allowed to bring another person to health appointments made several participants anxious and gave their partners the feeling of being left out. It was overwhelming for mothers to go alone to scans, and they would have liked support to

process new information. One participant was on her own when she was told that her baby had no heartbeat, which led to increased anxiety in her subsequent pregnancy. A participant staying in hospital after giving birth was not allowed to be visited by her partner, which she found very stressful. Being allowed to smoke a cigarette outside during this stay would have helped her. One participant paid for a private scan so her partner could accompany her, and another participant organised a home birth so her partner could be with her. Those who could bring along partners to their birth were very happy about this.

Uncertainty about Covid-19 mitigation measures in hospitals increased anxiety among many parents. It would have helped to have more knowledge of this in advance. One couple had to wait twelve hours for their Covid test results until they could see their baby again, which they found traumatic. Many parents were hoping for looser restrictions for children in the future. Some parents also said that during the second lockdown, they did what they feel is best for their child while still following the rules.

Future plans

For some parents, the pandemic did not change their future career plans and prospects. Others were pessimistic about finding a job because of childcare commitments or found it difficult to combine higher education with childcare commitments. Some parents were keen on engaging in activities with their children once everything would ease, such as getting children swimming and to new places.