Youth Mental Health and Covid-19: 2021 Policy Lab
Briefing Note

ESRC Centre for Society and Mental Health

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Introduction

COVID-19 has been challenging for the mental health of children and young people in the United Kingdom (UK). There has been significant upheaval in their school, family, and social lives, and many continue to have concerns about impacts on their mental health, their education, and their futures.

The current evidence base is mixed and incomplete. Nonetheless, actions to mitigate the short and long term harms, and to leverage the positive impacts, of the pandemic need to be taken now. The evidence base will take time to reach maturity, and opportunities for providing support may have gone or be more difficult to take advantage of by then.

To address this, we ran a policy lab to explore the actions that can be taken, based on syntheses and evaluations of the current evidence base, to better support the mental health of children and young people in the UK, both in the immediate circumstances of the pandemic and in the longer term. The lab was the culminating event of "Youth Mental Health and Covid-19: What do we know and what should we do?" a conference jointly run by the UKRI Emerging Minds research network (University of Oxford), the ESRC Centre for Society and Mental Health (King's College London) and the Policy Institute (King's College London) from 1 - 3 March 2021. The conference comprised of presentations of emerging evidence on the impacts of COVID-19 and related responses on the mental health of young people, with particular focus on the differential impacts on young people in disadvantaged, marginalised, and vulnerable groups, and on how the social and economic consequences of COVID-19 may affect mental health in the short, medium, and long term.

The lab was specifically designed to identify the most pressing challenges for children and young people's mental health and what we can do to "build back fairer", as well as examine barriers and facilitators to these actions.[1]

The policy lab comprised two intensive workshops on consecutive days. We brought together stakeholders from different settings and contexts, and with different perspectives, to explore in detail the issues around children and young people's mental health during and after the pandemic. As with other policy labs we have run, our approach was to encourage rapid, creative thinking to develop novel responses, but also with a

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[1] Originally, the purpose was to explore mechanisms for 'building back better' but following the conference opening Keynote from Prof Sir Michael Marmot, we adjusted this to explore how to 'build back fairer'.

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practical focus and grounded in the existing evidence base. In this instance, participants were drawn from policy, academia, civil society and schools. Young people, including those with lived experience of mental health issues, as well as parents and carers, also participated, representing perspectives from across social care, public health, mental health, education, and digital technology. A full list of participants and the agenda for the lab is provided in the Appendix.

The first day of the lab was spent looking at the most pressing challenges for children and young people's mental health and what we could do to "build back fairer". The second day of the lab focused on understanding the barriers to action and how they might be overcome, and identification of the stakeholders who should be engaged to ensure that the proposed actions are implemented.

This briefing note presents the key points of discussion and recommendations emerging from the lab.

Key findings

The key challenges for UK children and young people's mental health emerging from the pandemic

During the policy lab, a range of challenges affecting UK children and young people in the short- and longer-term were identified and reflected upon by participants. Three key themes emerged in these discussions: direct challenges to the mental health of young people; issues around the provision of effective support to young people; and the wider environment which impacts on the experiences of young people during this pandemic.

1. **The impact of the pandemic on schooling and families has directly challenged the mental health of children and young people in a variety of ways**

Isolation and academic pressures have created substantial challenges

Many of the challenges to mental health identified in March 2021 related to immediate concerns around the return to school when initial lockdown restrictions were lifted. These concerns related to both pre-existing challenges (e.g., the impact of health and social inequalities on children and young people) and newly emerging concerns (e.g., experiences of isolation and loneliness for some) that have continued throughout the pandemic. For example, much of the discussion related to the focus, among some policymakers, on children 'catching up' on learning – a focus that has persisted with continued disruptions to education related to test and trace and requirements to self-isolate in the event of exposure to someone who has tested positive. Concern was expressed that this focus placed undue and unfair pressure on children's academic performance, particularly for those children who may already be anxious about exams.

The move to online education also impacted children and their education differently. Some may feel they have benefited from new digital tools and more flexibility in how they can learn. For others, however, limited access to technology and poor internet connections have compounded or created new inequalities which must be militated against should any of the technological changes of the past year be maintained.

Readapting to the school environment, routine and structure may bring further challenges for some

The focus on 'catching up' risks neglecting and exacerbating the issues that some children may experience in simply returning to a full-time school environment. The

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disruptions caused by lockdown and school closures to peer relationships, to the support structures and social networks that children rely on, and to the routines and structures of everyday life, must be considered by parents and carers, educators, and policymakers, when guiding children in reintegrating into school life, even more so as we emerge from the pandemic and school life returns to more usual patterns. This may be particularly relevant for those children whose experiences of education pre-pandemic were difficult, whether through bullying, harassment, or other sources of distress. For these children, being out of a school environment may have improved their wellbeing, and their return to school must be managed with sensitivity and, where possible, flexibility to cater to their individual needs.

Participants also raised the different ways in which children may manifest their distress and suggested those who externalize it or display behavioural issues may be punished, while those whose distress is manifested as low mood or anxiety may receive a more sympathetic response from teachers and other caretakers. For children who are put in detention or excluded from school because of their behaviour, their distress may be compounded by falling behind in their education, particularly if there is pressure to 'catch up', and by feeling frustrated or isolated. As a result, they may become even more disruptive and disengaged from education.

Returning to full-time, in-person education also means children will have much less time at home. Evidence presented at the conference indicates that many children enjoyed spending more time with their family during lockdown and may miss this benefit after going back to school. However, for more vulnerable children, more time spent at home may have increased exposure to abuse and neglect, while making it more difficult for schools, social care, and other institutions to reach and support them.

Not all children and young people have been affected equally and there may be important longer-term consequences for inequality as a result

The diversity of children and young people's experiences during the pandemic was reflected upon at length during the lab. It was noted that their backgrounds, responsibilities, and the environments in which they live all impact upon their experiences and their needs.

Some of the groups particularly impacted are higlighted in Box 1.:

Key findings

- Young people with disabilities

- Young carers

- Those experiencing grief through bereavement or other forms of loss

- Black, Asian, and minority ethnic young people

- LGBTQ+ young people

- Those experiencing poverty

- Those in transition periods – into adulthood, between schools, or between mental health services (moving from Child and Adolescent Mental Health Services to adult services)

- Young people living in cities and those living in rural areas

- Those in abusive households

- Those affected by long COVID-19 (or other health conditions in the household)

- Young people with special educational needs

- Young people experiencing gang violence

Box 1. Groups particularly impacted by the pandemic.

A number of longer-term concerns for the mental health of children and young people were also identified. Many of these related to potential impacts on future education, employment, and financial security. Youth unemployment increased during the pandemic, as sectors which disproportionately attracted younger candidates were hit by the lockdown. Furthermore, confusion around university admissions created stress for many applicants, who then went on to remote education while still paying full university fees and accommodation costs.

These experiences reflect another challenge for children and young people around the loss of important rites of passage – the transition to secondary school; the first year away from home at university; and movement into a career pathway to name a few.

2. Existing means of providing effective support have been disrupted by the pandemic

As children and young people experienced this range of challenges to their mental health, the provision of effective support also became more difficult, both in terms of access and the kinds of services that could be delivered. Schools and other services needed to adapt in order to find ways to effectively engage with children in need of support, as the

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usual mechanisms such as referrals to social services declined while exposure to abuse increased for some children. Other ways to identify children in need, such as networks, clubs, and after-school activities, were also impacted. These impacts have continued throughout the pandemic and are an ongoing concern. Furthermore, it was noted that while it may have been possible to reach some of these vulnerable children even during lockdown, the challenges of connecting them with services that are appropriate for their individual needs remain. Some participants also spoke to their experience of children expressing reluctance to ask for help as they were concerned about being a burden.

Another barrier to the provision of effective support identified during the lab were the limited opportunities for young people, as well as parents and carers, to be meaningfully included in decision-making about their care and wellbeing. This is an issue that existed before the pandemic, but for many participants in the lab, was brought to the fore during lockdown.

3. **Children and young people are also affected by the challenges and losses that their families, communities, and wider society experience**

Discussions around the provision of effective support widened to include the impact of the pandemic on the mental health of the population more broadly, and how it fed into young people's wellbeing. Evidence presented at the conference pointed to significant levels of stress and other mental health concerns experienced by many parents and carers, who may have had to balance working from home, homeschooling their children, and managing financial and health concerns among other issues. Participants in the lab questioned the availability of sufficient, ongoing support for parents and carers experiencing these pressures. Furthermore, participants expressed concern about how the distress experienced by parents and carers was impacting upon young people's mental health.

As noted above, young people were also exposed to much of the trauma and loss experienced by the general population during the pandemic. These losses include bereavement and experiences of poor physical health for themselves or loved ones, while the unrelenting uncertainty over the course of the pandemic and shifting lockdown rules was also felt by many. Additionally, participants highlighted findings presented at the conference indicating that pre-existing inequalities that impact upon health, education, and other outcomes for children had widened during the pandemic, with potentially profound mental health implications in both the short- and long-term.

Key findings

There are practical steps that can be taken to support children and young people as we emerge from the pandemic

With many of the key challenges to the mental health of children and young people identified in the policy lab, discussions moved on to potential solutions to these challenges.

While a wide range of ideas were suggested by participants, these can broadly be grouped as actions that might be taken in three different settings: schools, mental health services, and the wider policy and practice environment. Considering them in this way highlights some of the practical aspects of implementation and allows a more 'complete' discussion of how challenges might be overcome.

1. Schools are an important setting for prevention and intervention

There are opportunities for students to process their experiences and to support their reentry into in-person education.

As noted above, many of the challenges young people have faced relate to the disruptions to and uncertainties around school. Continued management of this disruption and the ultimate return to more usual schooling poses a number of challenges to young people's mental health. Much of the discussion around policy interventions focused on this topic. Rather than the emphasis placed on 'catching up' on missed classes, many participants proposed giving students the space and time at school to share their experiences of the pandemic and their feelings about readjusting to conventional schooling. In this context, the importance of facilitating peer support among young people, including equipping them with the required tools and resources to support each other effectively, was emphasized by several policy lab participants. It was noted that these relationships are vital, particularly for those without supportive or stable families.

It was also suggested that some students might benefit from a gradual return to conventional schooling, with a hybrid model of at-home and school-based learning. These ideas led to a broader discussion about the need to effectively embed wellbeing approaches in schools and improve literacy around wellbeing to normalise discussions about mental health. Taking steps in this direction requires resources such as reliable wellbeing screening tools to help identify children whose needs may be unknown, as well as appropriate training and support for school staff to enable them to identify and

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respond to the needs of their students.

The benefits created by new digital tools should be retained and maximized by bridging the digital divide

As noted above, the shift to online learning and the introduction of new digital tools was a profound shift in education and brought benefits (as well as disadvantages). There is a huge opportunity for education stakeholders to reflect on lessons learned in this process and rethink some of the core elements of schooling. Some tools such as recorded lessons and online discussion groups were singled out as new tools that were particularly effective, as well as more general changes in producing a more adaptive and flexible approach to meeting educational needs. It was also highlighted by some participants that children and young people with disabilities, or who are unable to travel easily, have found that digital methods of education and support improved accessibility and should remain available. However, concerns about the impact of the digital divide on students led to suggestions for free internet access for all young people, and access to computers and other forms of information technology where required for schooling.

A reimagined curriculum and a whole-school approach can address many needs but may require profound changes to implement

Participants also noted that school settings have the potential to address some of the concerns experienced by young people in relation to their employment and financial security. Some proposals included investment in life skills and personal development, financial management and more emphasis in schools on promoting awareness of and preparing young people for a wider range of career trajectories, including those which do not entail higher education.

Beyond the practical aspects of returning to school, the school setting also provides an important access point for reaching children and families, providing an opportunity to engage with them in relation to wider issues and provide 'holistic' support. Policy lab participants were in consensus on the importance of adopting such a 'whole-school approach' to children and young people's mental health. This has been defined as a framework under which schools bring together key stakeholders including teachers, school governing bodies, parents and carers, local public health teams, school nurses and all those in the wider school community who are responsible for protecting and

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promoting children's mental health.[2]

Public Health England has produced guidance on implementing a whole-school approach, with eight key tenets including targeted support and appropriate referral; enabling student voice to influence decisions; and an ethos and environment that promotes respect and values diversity.[3] Evidence from abroad on the whole-school approach suggests that it can produce a small to moderate improvement in the mental health of young people. However, it is important to highlight that sustainability of the approach, given the intensity of coordination between multiple stakeholders that is required, has proven challenging. Furthermore, participants noted that there is a lack of understanding of the approach in many schools and there is much work to be done in improving awareness.

Participants also highlighted the profound changes to the UK education system required to implement many of the policy interventions proposed during the policy lab. For example, it was noted that giving schools more autonomy in finding ways to support students' mental health is a challenge to some stakeholders who argue for a more traditional emphasis on core subjects in education and for an education system that is focused on producing young adults for higher education and employment rather than well-rounded, resilient individuals. Participants in the policy lab described some of the mechanisms by which school leaders may feel pressure to conform to an established approach to education, such as teacher assessments, OFSTED school ratings and education league tables.

Adequate resource investment was also raised by participants as essential in implementing these policy interventions, as special education, support care and mental health funding, particularly in the voluntary sector, remained at historically low levels. Likewise, expansion of the specialist mental health practitioner workforce and increased mental health training for teachers is vital.

2. Support services should be easier to access and could be targeted more effectively

A number of potential policy solutions were put forward by participants in the policy lab

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[2] https://www.mentallyhealthyschools.org.uk/whole-school-approach/

[3] https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/958151/Promoting_children_and_young_people_s_emotional_

health_and_wellbeing_a_whole_school_and_college_approach.pdf

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to address challenges in access to support from services. Of these, several participants highlighted the profound importance and, in many contexts, absence of early intervention from services such as mental health support teams. Others highlighted changes to the provision of services brought on by the pandemic, such as a shift to online rather than face-to-face services. For some young people, these new modes of service delivery have been more effective, and again it is important to learn the lessons of what worked during the pandemic and establish these practices permanently where it is indicated.

In addition, the Children and Young People's Mental Health (CYPMH) Coalition, the Children's Society, and Youth Access are advocating for open access mental health services for young people up to the age of 25. Open access hubs provide drop-in support on a self-referral basis for those who do not meet the threshold for CAMHS. The hubs can be delivered through the NHS in partnership with local authorities or voluntary organisations and offer wrap-around support such as psychological therapies, youth services, and employment advice, provided by clinical staff, counsellors, and youth workers. Participants in the policy lab highlighted evidence from abroad indicating that open access hubs can reduce psychological distress among young people; draw in young people who may be less likely to engage with existing mental health services; and provide cost savings to services delivered by the health system.

Other potential solutions related to challenges that predated but were exacerbated by the pandemic. For example, some participants stressed the need for extra support at transition points in young people's lives, particularly for the more vulnerable, such as moving from Child and Adolescent Mental Health Services (CAMHS) to adult mental health services. Others called for systemic action on focusing services not just on immediate circumstances of the pandemic but on widening health, economic, and social inequalities.

3. Interventions and reforms in the wider policy environment can also impact on the mental health of children and young people

While the lifting of many lockdown restrictions may have eased the pressures being experienced by parents, carers, and teachers, as well as young people themselves, there are many other avenues through which the wider environment around young people's mental health can be improved. Some of these may be characterised as relatively 'quick wins', for example, maintaining or increasing financial support to families experiencing hardships due to or exacerbated by the pandemic and providing COVID-19-related mental

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health resources - a suggested example was the bereavement pack produced by Thrive LDN and the Mayor of London. Improving links between schools and families was also raised, as mental health issues in one setting can affect children in the other.

Other proposed policy interventions were much more ambitious and require long-term commitment and resources to come to fruition. These proposals included reforms to the benefit system and universal credit, and the introduction of a guaranteed income scheme. While these are clearly major reforms requiring much wider discussion, the potential consequences for young people, their families and their mental health is an important consideration which should not be absent from the debate.

Concluding thoughts

The COVID-19 pandemic, with its associated upheaval to school, family, and social life, has exacerbated and created new challenges for children and young people's mental health. There is an urgent need to address these issues. However, it is also critical to recognise and preserve the positive consequences of the changes experienced as families, schools, and wider society begin adapting to a post-pandemic future. It is clear that there is tremendous scope to improve both access to and the quality of mental health support available to young people, with schools, early help hubs and other services reaching out to those needing support and coordinating services.

For such an approach to be successful, it is critical that the views of all relevant stakeholders, including children, young people, and parents and carers themselves, are meaningfully considered and that appropriate resources are provided to deliver it. While the pandemic has burdened the mental health of many children and young people and exposed and widened inequalities that impact heavily on health, social, and economic outcomes, it also presents us with an opportunity to take bold steps in protecting and promoting their wellbeing into the future.

Summary of recommendations for policy makers

The following table lists the key policy proposals emerging from the lab and captured in this briefing note. Further reflection on the key stakeholders required to engage in each intervention; potential timelines for implementation; and required resourcing is the next step in addressing the challenges and maximising the opportunities identified in the lab.

School-based interventions
1. Empower and equip school staff to normalise discussions about mental health, providing them with reliable screening tools to help identify children whose needs may be unknown, alongside appropriate training and support
2. Option for some children to have a gradual return to conventional schooling, with a hybrid model of at-home and school-based learning
3. Assess the effectiveness of new digital tools introduced during lockdown, such as recorded lessons and online discussion groups, and retain the tools which improved children's experience of education
4. Bridge the digital divide by providing students with access to the internet and information technology required for their education
5. Implement a 'whole-school approach' to children and young people's mental health by bringing together stakeholders including teachers, school governing bodies, parents and carers, local public health teams, school nurses and all those in the wider school community who are responsible for protecting and promoting children's mental health
6. Invest sufficient resources in special education, support care and mental health funding, to implement these policy interventions

Summary of recommendations for policy makers

Support services – based interventions
7. Strengthen the provision of early intervention from services such as mental health support teams
8. Assess the impact of changes to the provision of services brought on by the pandemic, such as the shift to online rather than face-to-face services, and retain the changes that have increased the effectiveness of these services
9. Develop open access mental health services for young people up to the age of 25
10. Provide extra support at transition points in young people's lives, particularly for the more vulnerable, such as moving from CAMHS to adult mental health services

Policy and community-based interventions
11. Maintain or increase financial support to families experiencing hardships due to or exacerbated by the pandemic
12. Provide COVID-19-related mental health resources for those who have experienced trauma or loss
13. Improve links between schools and families, as mental health issues in one setting can affect children in the other
14. Introduce reforms to the benefit system and universal credit and explore the feasibility of implementing a guaranteed income scheme

Conference Agenda: Youth Mental Health & COVID-19 – What do we know and what should we do?

Day 1: Youth Mental Health & COVID-19: The Evidence Base 1 – Overall Trends

How has children & young people's mental health changed due to COVID-19?

- Introduction – Professor Cathy Creswell, University of Oxford

- Tracking the impact of Covid-19 on the mental health of children, young people and families: findings from the Mental Health of Children and Young People in England surveys - Tamsin Newlove-Delgado, University of Exeter

- Tracking the mental health of children and young people over the course of the COVID-19 pandemic: findings from the CO-SPACE study - Dr Polly Waite, University of Oxford

- Anxiety and depression in the wake of the COVID-19 pandemic: initial findings from the RAMP and COPING studies - Dr Katherine Young, Kings College London

- Suicidal behaviours in young people in the COVID context - Professor Ann John, Swansea University

- In isolation instead of in school; interviews with young people affected by school closures and COVID-19 lockdowns in 2020 - Dr Deborah Fry, Professor McLuskey & Dr Tracy Stewart, University of Edinburgh

- CoRAY project – producing mental health resources for and by young people in the COVID-19 context - Dr Rebecca Watson, Elise Sellars and Co-RAY Young People's Advisory Group

- Keep Cool, a rapid knowledge mobilisation project to promote adolescent mental health in the era of COVID-19 - Meg Kiseleva, Kings College London

Appendix I

Day 2: Youth Mental Health & COVID-19: The Evidence Base 2 – Disadvantaged, Marginalised & Vulnerable Groups

How has the mental health of children & young people living in different circumstances changed due to COVID-19?

- Introduction - Professor Craig Morgan, Kings College London

- The impact of the pandemic and associated restrictions on the mental health of children and adolescents from marginalised and vulnerable groups in the UK. What does the evidence suggest so far? - Dr Charlotte Gayer-Anderson, Kings College London

- "My biggest worry right now is the mental health of my children": the experiences of families living on a low income during t he pandemic- Dr Katie Pybus, University of York

- COVID-19, social restrictions, and mental distress among young people from diverse backgrounds: findings from REACH - Dr Gemma Knowles, Kings College London

- Off-radar children and young people at risk of abuse in their homes during COVID-19: What do we need to know and what can we do? - Laura E Fischer, Artist-Activist, Researcher, Consultant and Jane Chevous, Co-founder of Survivors' Voices

- From "feeling lost" to "a better understanding of yourself": how did lockdown impact the mental health of young people in inner city London? - Dr Georgina Miguel Esponda, Kings College London

- How the mental health of children & young people living in our communities has changed due to COVID-19 - John Murphy, Chief Executive of Oasis Community Learning

- Panel Discussion

Appendix I

How will the wider societal consequences of COVID-19 affect children and young people's mental health?

- Introduction - Dr Helen Fisher, Kings College London

- Social justice, health equity, and COVID-19 - Professor Sir Michael Marmot, University College London

- Young people's assessment of the short, medium, long-term individual consequences of the COVID-19 crisis - Dr Golo Henseke, University College London

- Interventions to address common childhood emotional and behavioural difficulties in the context of COVID-19 - Professor Cathy Creswell, University of Oxford

- Social inequalities in adolescent mental health and school experience - Dr Jo Inchley, University of Glasgow

- Digital opportunities to improve access to CAMHS and support young people's mental health going forwards - Dr Johnny Downs, Kings College London

- A Northern Ireland perspective on what "building back fairer" looks like for children's mental health - Koulla Yiasourna, Northern Ireland Commissioner for Children and Young People

- What will young people need to support their mental health as we emerge from the pandemic? 'No Wrong Door' responses for 2021 and beyond - Professor Sally Holland, Children's Commissioner for Wales

- Panel discussion

Appendix II

Policy Lab participant list

- Kadra Abdinasir, Centre for Mental Health
- Nikki Chapman, Emerging Minds Network
- Richard Crellin, Children's Society
- Cathy Creswell, University of Oxford
- Lydia Davies, NHS
- Maisie Davies, Barnardo's
- Emily Dobson, YoungMinds
- Helen Fisher, King's College London
- Aileen Jackson, Health Innovation Network
- Ann John, Swansea University
- Gemma Knowles, King's College London
- Matt Lee, Department of Health and Social Care
- Lea Milligan, MQ: Transforming Mental Health
- Craig Morgan, King's College London
- Patrick Myers, Department for Work and Pensions
- Vicky Nevin, NSPCC
- Alexandra Pollitt, Policy Institute at King's College London
- Nicola Reynolds, Oxleas NHS Foundation Trust
- Maria Rodrigues, Academies Enterprise Trust Careers
- Zoe Seager, Department of Health and Social Care
- Elise Sellars, University of Oxford
- Emily Lloyd, University of Oxford
- Gregor Henderson, Public Health England
- Rebecca Watson, University of Oxford
- Benedict Wilkinson, Policy Institute at King's College London
- Charlotte Woodhead, King's College London
- Sarah Brown, NHS England & Improvement
- Niki Cooper, Place2Be
- Pratap Perseeddoss, Oxleas NHS Foundation Trust
- Daniela Durso, Department for Education
- Alice Turner, King's College London
- Wendy Minhinnett, Charlie Waller Trust
- Lucy Strang, Policy Institute at King's College London