

# Scottish COVID-19 Inquiry

## The Delivery of Education and Certification, Impact on Children and Young People:

The impact of school closures and changes to support packages on pupils with additional support needs

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Final Draft

Professor Gillean McCluskey

Dr Ian Fyfe

Rosa Murray

Dr Zoè Robertson

Dr Annie Taylor

25th July 2023



THE UNIVERSITY *of* EDINBURGH  
Moray House School of  
Education and Sport



Centre for Research in  
Education Inclusion  
and Diversity

## Disclaimer:

This report was commissioned by the Scottish COVID-19 Inquiry as scoping research. It was written to assist the Inquiry with the shape and direction of its investigations, and is published in the interests of transparency. The Inquiry is grateful to the author[s] for their work. The Inquiry is an independent body, and is carrying out its own investigations in accordance with its Terms of Reference. The research represents the views of those who wrote it, and nothing in it is binding on the Inquiry. The research is one of many sources which will be considered by the Inquiry during the course of its investigations.

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# List of abbreviations

- ASL: Additional Support for Learning
- ASN: Additional Support Needs
- CERG: COVID Education Recovery Group
- CSP: Co-ordinated Support Plan
- EAL: English as an Additional Language
- HMIE: HM Inspectors of Education
- IRD: Inter-agency Referral Discussion
- LAC: Looked After Children/ Child
- SCQF: Scottish Credit and Qualifications Framework
- SEBD: Social, Emotional and Behavioural Difficulties
- SEND: Special Educational Needs and Disabilities

# Executive Summary

## Aim and Focus of This Study

This research builds on the findings of our earlier study ‘The Delivery of Education and Certification, Impact of COVID-19 on Children and Young People’, led by Prof McCluskey in 2022, commissioned as scoping research for the Scottish COVID-19 Public Inquiry. This new study focuses specifically on the impact of the COVID-19 pandemic on children and young people with additional support needs. In this way, this research aims to support the overall aim of the Inquiry: to establish the facts of, and learn lessons from, the strategic response to the COVID-19 pandemic in Scotland. It covers only the strategic response of the devolved administration in Scotland.

## Key Issues

The initial months of the pandemic produced an unprecedented level of research, but a relatively small proportion of this focused on children and young people with additional support needs, despite the term ‘additional support needs’ encompassing a wide range of reasons for and expression of needs. The pace of research has continued to slow, and there are indications that research on education and certification has ‘moved on’ from its focus on COVID-19. Key findings are summarised below.

The impact of school closures and changes to support packages on children and young people with additional support needs (ASN):

- Children and young people with ASN are not one homogenous group; the term ASN covers a wide range of needs. Children with different needs were affected differently

by school closures and changes to support packages, but overall, children with ASN were disproportionately affected.

- The pandemic impacted on the learning, rights and participation, physical and mental health, family relationships, and access to support services of children and young people with ASN.
- Parents of children and young people with ASN faced additional challenges and barriers during school closures, and some experienced a lack of support. This had deep and wide impacts on family life.
- The pace of research in this area has slowed; there is a lack of recent research examining the impact on different groups of children and young people, which means that the mid-to-long-term impacts are largely unknown.
- Transitions into, between and out of education settings have been challenging for all during the pandemic, but have brought additional challenges for some children and young people with ASN.
- Scottish Government allocated £240 million for recruitment of extra staff to support resilience and additional support needs, but some schools, local authorities and unions have indicated that this won't be enough money for recovery.

The intersectional impact of the pandemic:

- School closures and changes to support packages exacerbated existing inequalities. These inequalities intersect with ASN, further compounding disadvantage in multiple, complex ways, many of which remain largely unexplored.
- Poverty and inequality underpin and exacerbate many of the challenges faced by vulnerable groups.
- For children and young people who required more than one type of support (health, social, education), lack of access to some supports may have had detrimental effects on their ability to access and benefit fully from the other supports.

- As time goes on it will become harder to disentangle the impacts of school closures/ changes to support services from other social changes like the cost of living crisis, but it is essential that mitigating the longer-term impacts of the pandemic on the most vulnerable remains a priority.

Impact on specific groups with additional support needs:

- There is a lack of systematic research using representative samples to understand the impact of the pandemic on particular sub-groups of children and young people.
- School closures had disproportionate effects on the mental health of pupils with pre-existing mental health difficulties, those who were receiving additional educational support before the pandemic, and those experiencing financial difficulties.
- There may have been some positive impacts for some children and young people, such as the removal of exam stress or spending more time with family, but overall the evidence points overwhelmingly to negative impacts.
- The number of children on the child protection register and becoming looked-after decreased during the pandemic, but it is likely that an increasing number of children have needs that were unmet during school closures due to a focus on those at the highest risk.
- There were additional challenges around access to learning for care leavers, those experiencing poverty, those who required specialist equipment, and EAL learners, refugees and families seeking asylum.
- The impact of various approaches to re-opening school buildings, rebuilding relationships, and supporting emotional wellbeing remains underexplored.



## Introduction

The right to education is enshrined in the United Nations Convention on the Rights of the Child. This right has been profoundly affected by the COVID-19 pandemic. UNESCO estimates that nearly 1.6 billion (91.3%) learners in 194 countries experienced closures of schools and universities. In response, education practitioners at all levels adapted to an ever-changing context, utilising technology and finding new and creative ways to meet young people's needs.

However, an increasing body of evidence indicates ways in which the impacts of COVID-19 were not equally distributed. We know that children and young people living in the most disadvantaged circumstances experienced the most significant impact ([reference 1](#)). Inequalities have been exacerbated and amplified by COVID-19 and responses to it, creating periods of uncertainty, pressure and instability for children and young people in families already living with the trappings of poverty and the current cost of living crisis. The loss of contact due to COVID-19 restrictions and periods of isolation increased vulnerability for some children and in the most serious of cases, led to direct harm including increased levels of abuse at home and online ([reference 2](#)). Concerns about the mental health of young people have been a constant focus for our collective attention. As a cohort, young people have been less likely to fall seriously ill but have felt the full force of changes to the education landscape on their learning, academic progress, personal health and wellbeing overall.

The impact of the COVID-19 pandemic here in Scotland has been vast and deep. Although education practitioners here have used technology and found new and creative ways to meet the needs of learners, the pandemic, and responses to it, have profoundly affected the lives of children and young people.

These effects have been felt most directly by children and young people with additional support needs (ASN). For most young people, schools and community-based youth work services are crucial in providing an environment in which to learn, build relationships and stay active ([reference 3](#)). For many with ASN, this access is a lifeline of support, providing a physical space for learning, and importantly, for safety, emotional connection, and routine.

This new research builds on the findings of our earlier study *The Delivery of Education and Certification, Impact of COVID-19 on Children and Young People*, led by Prof McCluskey in 2022, commissioned for the Scottish COVID-19 Public Inquiry. This new study focuses specifically on the impact of the COVID-19 pandemic on children and young people with additional support needs. In this way, this research aims to support the overall aim of the Inquiry: to establish the facts of, and learn lessons from, the strategic response to the COVID-19 pandemic in Scotland. It covers only the strategic response of the devolved administration in Scotland.

## Methodology

### Key Questions

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This study offers a robust assessment of:

- The impact of school closures on children and young people who required additional support to benefit from their school education; and
- The impact of changes to support packages on children and young people with additional support needs, while schools were closed.

# Research Design

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## Search Criteria

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The terms 'education' and 'certification' are necessarily broad and, while recognising the challenges of definitional agreement, we include here issues pertaining to the following: formal and informal education including youth work; school structures and environment; leadership; teaching and teachers; staff wellbeing and welfare; access to schools and other educational establishments; teacher education, pedagogies (including digital literacies); assessment and attainment, formal and informal curricula; inter-professional and cross-disciplinary partnership working; personal and social aspects of education; pastoral care; transition arrangements. In addition, there is consideration of measures of performance such as attainment levels and other accredited learning, rates of attendance, absence and exclusion.

The term 'Additional Support Needs' is defined within the Education (Additional Support for Learning) (Scotland) Act (2004), as amended. The most recent Statutory Guidance (2017) ([reference 4](#)) is also helpful here. It re-emphasises that the term is intended to be 'broad and inclusive'; that it applies to **'children or young people who, for whatever reason, require additional support, in the long or short term, in order to help them make the most of their school education and to be included fully in their learning. Children or young people may require additional support for a variety of reasons and [the term] may include those who:**

- **have motor or sensory impairments**
- **have low birth weight**
- **are being bullied**
- **are children of parents in the Armed Forces**

- are particularly able or talented
- have experienced a bereavement
- are affected by imprisonment of a family member
- are interrupted learners
- have a learning disability
- have barriers to learning as a result of a health need, such as fetal alcohol spectrum disorder
- are looked after by a local authority or who have been adopted
- have a learning difficulty, such as dyslexia
- are living with parents who are abusing substances
- are living with parents who have mental health problems
- have English as an additional language
- are not attending school regularly
- have emotional or social difficulties
- are on the child protection register
- are refugees
- are young carers.'

This Statutory Guidance (2017) goes on to reiterate that this list is not intended to be exhaustive, though neither should it be assumed that inclusion in the list inevitably implies that additional support will be necessary, except in the case of looked-after children and young people. All care-experienced young people are assumed to have ASN unless the education authority deems to the contrary. This study has been guided by the parameters of these definitions.

The search included:

- Literature published in English since January 2020, and by the end of March 2023, relevant to Scotland.
- Literature focused on children and young people between ages 5 to 19.

- Literature focused on the delivery of education and certification, including achievement (attainment and accreditation), attendance, exclusion, school closure.
- Literature focused on experiences and outcomes of children with additional support needs.
- Literature including national surveys and statistical datasets, empirical research (qualitative and quantitative), meta-analyses, relevant legislation, policy guidance and briefings, trade union and professional association documents.

The following were excluded from the search:

- Literature not published in English.
- Literature related to pre-school education.
- Literature with a clinical focus.

## **Data Sources**

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Data sources included: national surveys and statistical data sets on e.g. school achievement, qualification and accreditation, attendance, exclusion; national, UK and international research studies relating to education and certification published in the period from 1 January 2020 to the end of March 2023, and contextualised within existing literature on the impacts of COVID-19 and broader historical patterns and trends, relevant national legislation, guidance and briefings, trade union and professional association documents.

## **Search Strategy and Analysis**

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The search included analysis of relevant national and international, qualitative and quantitative empirical research, legislation, policy and grey literature, reporting on issues relating to education and certification in the context of the pandemic in Scotland, taking full account of the methodological rigour, reliability and generalisability of each source.

Search terms included: Scotland, children, young people, student, school, college, COVID-19/pandemic, education, community, family, key worker, youth work, disadvantage, vulnerability, disruption, attendance, exclusion, attainment, achievement, accreditation, online/remote/home learning, isolation, lockdown, recovery, school building closure, digital access/exclusion/poverty, additional support needs/special needs/disability, wellbeing/health/mental health, teacher, education workforce.

Coding and thematic analysis adopted approaches from Braun and Clarke ([reference 5](#)). A coding frame was developed based on the frame used for the previous study, and extended to include a review of all newly available evidence. Emerging themes and sub-themes were cross-checked against search criteria and, through an iterative process, used as a basis to create thematic summaries and identify key findings.

## **Limitations**

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It is important to recognise that desk-based research in the context of the COVID-19 pandemic often still draws on early findings because the pandemic itself is so recent and, at the time of writing, still a major global issue. It is important to note that there was a pre-existing paucity of large-scale qualitative research generally in the field of education and this is also the case in relation to ASN. Furthermore, our analysis in the previous report revealed how quickly some of the available data has become obsolete and how quickly assumptions made, e.g. about school closures, financial and resource costs, have been overtaken by the rapidly changing shape and impact of the pandemic. These limitations notwithstanding, the updated study will provide a necessary and invaluable synthesis of the evidence available to date.

## **Ethical considerations**

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This research study has been subject to the detailed scrutiny and approvals process of the Moray House School of Education and Sport's research ethics, integrity and governance committee. As the study is focused on secondary data analysis rather than primary data collection, issues of confidentiality and anonymity are relatively unproblematic. Nonetheless, ethical considerations have remained central throughout, centred on ensuring that the greatest possible good comes from the study. Following the guidelines provided by the Ethics Guidance for Scottish Government Social Science Researchers (2015) ([reference 6](#)), and the British Educational Research Association (2018) ([reference 7](#)), our duties were: to ensure we were transparent and explicit about choices and decisions in relation to methodology and findings, to protect the integrity of the study undertaken, conduct this research to the highest standards, to be open to and engage with critical analysis and constructive criticism aimed at improving research practice and knowledge, and to protect but also extend understanding of existing research related to education and certification in Scotland overall during the pandemic.

## **Quality Assurance**

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Professor McCluskey has been responsible for all aspects of quality assurance and data management, including responsibility for data collection, quality and management and the overall data management plan as well as data storage, security and back up requirements. Professor McCluskey has also been responsible for ensuring all ethical approvals.

# Section 1: The Impact of School Closures and Changes to Support Packages on Children and Young People with Additional Support Needs

## Summary

- Children and young people with ASN are not one homogenous group; the term ASN covers a wide range of needs. Children with different needs were affected differently by school closures and changes to support packages, but overall, children with ASN were disproportionately affected.
- The pandemic impacted on the learning, rights and participation, physical and mental health, family relationships, and access to support services, of children and young people with ASN.
- Parents of children and young people with ASN faced additional challenges and barriers during school closures, and some experienced a lack of support. This had deep and wide impacts on family life.
- The pace of research in this area has slowed; there is a lack of recent research examining the impact on different groups of children and young people, which means that the mid-to-long term impacts are largely unknown.
- Scottish Government allocated £240 million for recruitment of extra staff to support resilience and additional support needs, but some schools, local authorities and unions have indicated that this won't be enough money for recovery.



## Key Events and Related Changes to Relevant Educational Legislation, Policy and Guidelines that Affected Children and Young People with Additional Support Needs

During lockdowns in 2020 and 2021, Scottish Government required local authorities to move teaching online but retain face-to-face teaching for the children of key workers and vulnerable children via a system of local 'hub' schools ([reference 8](#)). Education Scotland suspended many regular activities including the statutory requirement for school inspections ([references 9, 10](#)). The COVID Education Recovery Group (CERG) was formed in April 2020, chaired by the Cabinet Secretary for Education and Skills. It had 11 workstreams. Throughout the acute phase of the pandemic ([reference 11](#)) it supported the development of guidance, including 'Coronavirus (COVID-19): guidance on reducing risks in schools', which was published in 17 versions between July 2020 and February 2022. This guidance stated the necessity of complying with Additional Support for Learning legislation ([reference 12](#)), for example in the use of facemasks and in creating individual risk assessments for students who are at increased clinical risk from COVID or with complex additional support needs. CERG had its final meeting in March 2022 ([reference 13](#)). Also of relevance to many children and young people with ASN were changes to health and social care provision which meant that non-urgent treatment and face-to-face services outside of hospitals were suspended and services provided remote support ([reference 14](#)).

In guidance to local authorities, Scottish Government highlighted the importance of making local decisions about how best to support children with ASN; nationally, reference to children and young people with additional support needs was made throughout broader Scottish Government guidance about

supporting learning throughout the pandemic. Guidance encouraged local authorities to take into account the individual needs of children, plan carefully and communicate with children and parents/carers, ‘take an inclusive approach to learning’ and work with partner organisations ([reference 15](#)). Information for parents of children with ASN was available through the Scottish Government funded website and associated information packs ([references 16, 17](#)).

## **Impact on the Rights and Participation of Children and Young People with Additional Support Needs**

The number of children and young people recorded by schools as having an additional support need was increasing before the pandemic ([reference 18](#)), partly due to improved reporting and widening of the definition of additional support needs (ASN). The number of pupils recorded as having an ASN continued to increase throughout the pandemic; there does not appear to have been a sudden jump in recording. It is possible that some ASNs are unrecognised or unrecorded, or that the pandemic has changed the ‘baseline’ for some ASNs (for example, almost the entirety of Scotland’s pupils could be, but are not, currently recorded as ‘interrupted learners’ due to school closures). By 2022, 34% of children were recorded as having an additional support need ([references 19, 20](#)).

Research with children and young people with additional support needs throughout the pandemic has highlighted the importance of feeling valued and listened to ([reference 21](#)). Children’s rights analyses have highlighted that several of the continuity directions empowered by the Coronavirus Act 2020 excused local authorities from some of their responsibilities towards children and young people with ASN, including making

‘adequate and efficient provision’ for additional support and meeting time limits, including around assessments and placing requests, with failures in these areas attributable to the pandemic ([references 22, 23](#)). The tribunal that ordinarily deals with ASN appeals dealt only with time-critical cases, with children’s participation minimised and hearings moved to conference calls or heard by a judge with no input from other members ([reference 24](#)). An independent Children’s Rights Impact Assessment carried out by the Observatory of Children’s Human Rights Scotland found that ‘...many children and young people with ASN have been unable to access adequate additional support for learning or teaching either in school or remotely’ during the first school closures ([reference 25](#)). The pre-existing low number of children and young people with co-ordinated support plans (CSPs) made it harder to assess needs and risks when making decisions about the best interests of children with ASN throughout the pandemic ([reference 26](#)).

## Impact on Learning

Parents, children and young people report that they were not adequately supported in their learning, were often given the same input as others in their mainstream class, and therefore became frustrated when they were unable to complete it. Being unable to see familiar people and faces was particularly difficult for those with communication challenges ([references 27, 28, 29](#)). This meant that transitions were particularly challenging for many young people with ASN who would usually have had an enhanced transition package involving extra in-person visits ([references 30, 31](#)).

Qualitative studies with parents of children and young people with ASN found that parents spent a great deal of time and

energy filtering, adapting, preparing and ‘translating’ online resources into physical resources so that their children could access the curriculum, which had practical and mental health implications. This was partly due to the online nature of the work but partly due to the level of work being inappropriate for the children, and because children with additional support needs often benefit from the use of physical manipulatives ([references 32, 33, 34](#)). Some parents faced particular challenges engaging with education resources in this way, including those struggling financially, those who had to work outside the home, and those with limited English. Although an HMIE review of the impact of online learning on children with ASN suggested that things improved during the second lockdown, with more planned contact from teachers ([reference 35](#)), it should be noted that this review was based on the views of schools and did not include the accounts of parents or children and young people ([reference 36](#)).

Research with teachers highlights the challenges of meeting the needs of learners with ASN online; differentiating work was difficult and teachers were concerned about the impact of the move to online learning for children and young people who found it harder to access the work ([reference 37](#)). The support provided to pupils varied widely by school, and parents and young people pointed out that regular communication in the form of phone calls or online meetings between school and ASN pupils had been strongly beneficial. Schools provided this to varying degrees ([references 38, 39](#)). Learning from home worked well for some and was extremely difficult for others, highlighting that people learn in different ways and should be supported and encouraged to work in the ways that best suit them ([reference 40](#)).

Some young people have said that the additional support they required when they returned to in-person schooling was ‘pushed aside’, that they had not received enough support, and

that staff absence had made it challenging to make progress ([reference 41](#)).

## Wider Impacts on Children and Young People with Additional Support Needs and Their Families

International, UK and Scottish research has considered the impact of school closures on parents of children with ASN. It points to a lack of support, particularly in the early phase of the pandemic. This particularly affected lone parents who found themselves with access to none of their usual support and respite, those who needed to work in paid employment, those with financial worries, and those with more than one child. This lack of support contributed to **'stress, anxiety, domestic conflict and social isolation'** ([references 42, 43, 44, 45, 46, 47](#)).

A large longitudinal UK study showed that at the start of the first lockdown, children and young people with ADHD and/or ASD had more mental health problems than others. Over time ([reference 48](#)), they experienced some emotional and behavioural improvements, but **'attentional problems'** remained unchanged. Overall, neurodiverse children and those with **'special educational needs'** experienced greater behavioural, emotional, and attentional difficulties throughout the study (2020-22) than others ([references 49, 50](#)). The same study found that for the sample in general, behavioural, emotional, and attentional difficulties decreased as pandemic restrictions eased in 2021, but children with 'SEND' ([reference 51](#)) and those from low-income families had **'not shown this post-lockdown recovery'** by October 2022 ([reference 52](#)).

For some children and young people who had previously had negative experiences of school or who were not accessing

school at the onset of the pandemic, online learning meant increased accessibility, and some parents saw improvements in their children's development, although this is likely to be moderated by other factors including financial stress ([references 53, 54](#)). For many, the closing, reopening, then closing again of schools was difficult to adjust to ([reference 55](#)), and UK evidence suggests that this affected the subsequent school attendance of children and young people with neurodevelopmental conditions ([reference 56](#)).

Pupil census data suggests that the proportion of the children and young people attending special schools who spend no time in mainstream classes may have increased slightly during the pandemic ([reference 57](#)), although there appears to be an overall lack of evidence about the impact of the pandemic on special schools in Scotland.

## Hub Schools

In Scotland, fewer schools remained open during the pandemic than in the rest of the UK, in part because schools in Scotland were opened as local 'hubs' rather than individual schools. Hub school places were available to children whose parents were key workers or who were considered 'vulnerable', with the details of eligibility determined locally. Only around 1% of eligible children and young people, and 4% of 'vulnerable' children and young people attended Scotland's hub schools during lockdowns ([references 58, 59](#)). Stigma and fear of infection are likely to have played a part in low take-up ([references 60, 61, 62](#)) but some research with parents of children and young people with ASN has highlighted a lack of clarity about eligibility ([references 63, 64, 65](#)). Support for complex additional needs could often not be provided in hub schools ([reference 66](#)). Disaggregated data about who used

hub schools – and who did not use them and why – does not appear to be available, although it seems that the large majority of those using the hubs were children of key workers ([references 67, 68](#)).

## Services and Recovery

Over the last decade, while overall education spending has increased, spending on ASN in mainstream schools had fallen ([references 69, 70, 71](#)). In June 2020, an independent review of ASL was published, although the review itself had concluded in February 2020, before lockdowns began ([reference 72](#)). An ASL action plan was developed ([reference 73](#)), and the Additional Support for Learning Project Board ([reference 74](#)), with representation from local government, third sector, parent groups, unions and children’s groups, currently supports delivery of the action plan ([references 75, 76, 77](#)).

A planned Audit Scotland review of resource and spend on additional support needs in education was postponed due to the pandemic ([references 78, 79](#)), and Audit Scotland has highlighted **‘The effectiveness of actions to improve outcomes for young people with additional support needs and to mitigate the impact of COVID-19’** as a potential area for further work ([references 80, 81, 82](#)). Scottish Government allocated £240 million for recruitment of extra staff to support resilience and additional support needs, but some schools, local authorities and unions have indicated that this won’t be enough money for recovery ([references 83, 84, 85](#)), that funding has not been adequately targeted and impact has not been adequately measured since the beginning of the pandemic ([reference 86](#)). The creation of the National Measurement Framework for Additional Support for Learning and the implementation of the ASL action plan may go some way to rectify this.

## Attainment and Achievement

Limited attainment data was collected during the pandemic, and due to changes to the ways that qualifications were assessed during 2019/20 and 2020/21, caution should be used when interpreting change over time ([reference 87](#)), but with these caveats it is possible to consider attainment over time.

Between 2018/19 and 2021/22, the literacy gap between those with and without ASN reduced slightly across primary level literacy, mainly due to reduced achievement levels among those recorded as having no ASN ([references 88, 89](#)). The numeracy gap remains the same as in 2018/19. It is possible that the small reduction in the literacy gap may be partially explained by the use of additional resources such as ‘catch-up’ teaching, additional supported study sessions, and additional reading support in 2021/22 ([reference 90](#)), but there is a need for evidence around how additional funding was used and targeted, the sustainability of these resources and outcomes, and their impact on children and young people with additional support needs ([references 91, 92](#)). Crucially, the gap still remains wide; in 2021/22, the attainment gap between those with and without an ASN at primary school was 33 percentage points for literacy, and 29 for numeracy.

Similarly, the gap between school leavers with at least one SCQF level 5 increased slightly in 2019/20 then decreased in subsequent years, leading to a small decrease in the gap by 2021/22 ([references 93, 94, 95, 96](#)). Overall, pupils with ASNs are less likely than those without to achieve formal qualifications, and the gap widens as qualification level increases ([reference 97](#)).

Achievement is far wider than exam results, but data about wider achievement, for example through work experience and



apprenticeships, and wider wellbeing, which is often particularly important for children and young people with additional support needs, is not always available and has not been prioritised ([references 98, 99](#)). There is a limit to how much this achievement data can tell us about the impact of the pandemic due to missing data, but also because the impact on children and young people with ASN has been wide and complex. Those who already required additional support have been disproportionately affected by the pandemic ([references 100, 101](#)), but to adequately understand the impact of the school closures and changes to support packages on children and young people with ASNs it is necessary to consider the intersectional impact of the pandemic, and the experiences and outcomes of those with specific ASNs.

## Section 2: The Intersectional Impact of the Pandemic

### Summary

- School closures and changes to support packages exacerbated existing inequalities. These inequalities intersect with ASN, further compounding disadvantage in multiple, complex ways, many of which remain largely unexplored.
- Poverty and inequality underpin and exacerbate many of the challenges faced by vulnerable groups.
- For children and young people who required more than one type of support (health, social, education), lack of access to some supports may have had detrimental effects on their ability to access and benefit fully from the other supports.
- As time goes on it will become harder to disentangle the impacts of school closures/ changes to support services from other social changes like the cost of living crisis, but it is essential that mitigating the longer-term impacts of the pandemic on the most vulnerable remains a priority.

The pandemic has disproportionately affected some groups of children and young people. These include those living in poverty and from disadvantaged backgrounds, young people with disabilities, young people from BAME groups, LGBTQI+ young people, and children and young people in rural communities ([references 102, 103, 104](#)). Not all of these groups appear on the 'list' of reasons for Additional Support Needs provided in statutory guidance ([reference 105](#)), but all these factors are likely to have intersected with young people's additional support needs since the beginning of the pandemic, further compounding the challenges of COVID-19.

Pupils in the most deprived areas are consistently around twice as likely as those in the least deprived areas to be recorded as having an additional support need ([reference 106](#)), although this is far higher for some specific support needs such as social, emotional and behavioural difficulties and being a looked-after child ([reference 107](#)). Poverty intersects with disability, ethnicity, sex, child protection interventions and child removals, exclusion and marginalisation, and affects all aspects of life ([references 108, 109](#)). Families in Scotland including a disabled person, lone parent families – over 90% of which are headed by women – and some ethnic minority families, especially those seeking asylum, are more likely than others to experience poverty ([reference 110](#)). Scottish Government research found that for families on low incomes, the **‘single biggest source of worry was around isolation and schools closing and the harmful impact this was having on their children’s education, emotional growth and mental health’** ([reference 111](#)).

We know that the pandemic exacerbated existing inequalities ([references 112, 113, 114](#)). The pandemic had many direct impacts on the financial pressures experienced by families. Many were worried about job losses and the financial impact of furlough, or lost their jobs altogether; those working in low-paid or precarious roles were more at risk of job losses than others. The cost of additional heating, particularly during the winter school closures, food, and connectivity was disproportionate for those who had less income to start with ([references 115, 116, 117](#)).

## Access to Education and Services

Digital exclusion affected families’ ability to access support and services and to stay connected to family and friends ([reference](#)

**118**). Some families had no access to digital devices or connectivity at the onset of the pandemic (**references 119, 120**). This appears to have improved somewhat by the winter school closures, although evidence from children's organisations suggests that not all children and young people had access to a digital device by then (**reference 121**), and connectivity remained an issue in rural areas (**reference 122**). The ability to access online learning depended not only on access to devices and connectivity, but also parents' ability to support learning, which depended on their economic circumstances, work status, and their own language barriers, as well as the support needs of their children (**references 123, 124**). For those who required more than one type of support (health, social, education), lack of access to some supports may have had detrimental effects on their ability to access and benefit fully from the other supports (**reference 125**). Provision from schools was not equal; children and young people in deprived areas were less likely to have access to online lessons, further reinforcing inequalities (**references 126, 127**). Socioeconomic inequalities in absenteeism were higher post-lockdown than in previous years, driven by those from lower socioeconomic backgrounds missing more school for reasons related to COVID-19 (**references 128, 129, 130**).

Black and minority ethnic pupils were more likely to face increased social isolation, greater risks of poverty and financial and food insecurity and overcrowding during the pandemic (**references 131, 132**). Children and young people from Gypsy/ Traveller communities may have faced further exclusion from educational services and support due to challenges around digital access, space to study, and for some, parents' literacy (**reference 133**). There is a lack of evidence about the impact of the pandemic on specific ethnic minority groups (**reference 134**).

The mental health impact of school closures affected children, young people and families in poverty in specific ways; the pivot to online mental health provision was not accessible to those who did not have the childcare, space, and digital access to talk confidentially. Lockdowns compounded existing mental health problems and exacerbated feelings of shame about poverty ([references 135, 136](#)). There were negative consequences of school closures and the pivot to online services for LGBT young people, including an increase in online bullying and prejudice ([references 137, 138](#)).

Many families in Scotland whose children were eligible for free school meals were unable to access adequate provision during initial school closures ([references 139, 140, 141, 142](#)). Some groups of children and young people, including disabled people, those caring for or cared for by someone who was shielding, and those living in 'food deserts' were disproportionately impacted by changes to free school meals during the pandemic ([references 143, 144](#)). Youth work and community approaches enabled many families to access food and support ([reference 145](#)), but an independent child rights assessment commissioned by Scotland's children's commissioner concluded that **'The state response was inadequate and inconsistent, relying too heavily on the third sector to deliver on state obligations, and with too little direction given to local authorities which resulted in many children entitled to support not receiving it due to inconsistent approaches...'** ([reference 146](#)). Although most local authorities had moved to cash payments, as preferred by families, by the time of the winter lockdown ([references 147, 148](#)), there has been little subsequent analysis of the impact of the loss of free school meals during this time on children and young people. Access to outdoor space was an issue for families on lower incomes, particularly for those in built-up areas, and especially when play parks and sports facilities were closed and families without access to a garden reported being

stopped by the police for playing outdoors with their children in public spaces ([references 149, 150](#)). We know that physical health, mental health and educational attainment are interconnected ([references 151, 152, 153, 154](#)), so it is highly likely that the closure of schools and sports and leisure facilities, combined with not being allowed to play outside, and lack of access to food, had a detrimental impact on the health and therefore learning of children and young people experiencing poverty.

## Attainment

The pandemic has had a disproportionate impact on the attainment of children and young people from the most deprived areas of Scotland. In 2021/22, the gap between the curriculum for excellence level achievement of literacy and numeracy of children and young people from the most and least deprived areas was wider than in 2018/19 for both primary and secondary, suggesting that the impact of the pandemic was ongoing. The gap decreased between 2020/21 and 2021/22 ([reference 155](#)), but the longer term impact is currently still unknown ([reference 156](#)).

School leavers' data shows that the gap widened in 2019/20 across all levels of qualification (SCQF 4, 5 and 6), narrowed slightly in 2020/21, then widened again in 2021/22, except at SCQF level 4, where it continued to narrow. The gap widens with qualification level. At SCQF level 6 the gap is wider than it was in 2018/19 ([reference 157](#)).

Spending restrictions on Attainment Scotland funding were relaxed in 2019/20 and 2020/21, and schools used this funding to provide a wide range of support including family support and digital assistance. An additional premium was introduced in

2021, recognising the need for recovery efforts. COVID-19 restrictions presented some challenges to a fully flexible approach, for example not being able to mix classes, and decreased staff and pupil attendance. There is evidence of innovative, creative practice during this time ([reference 158](#)) but systematic evidence about the interventions used, with whom, and what the outcomes were, is lacking ([reference 159](#)).

In the wake of the pandemic some have pointed to the problems with SG's current way of targeting poverty ([references 160, 161](#)). Audit Scotland point out that the current approach 'does not fully capture pupils living in poverty' for various reasons including not being able to fully account for rural poverty and pockets of deprivation within affluent areas. They suggest that **'Future efforts to tackle the poverty-related attainment gap, including the targeting of funds, should take account of the impact of COVID-19 on the scale and spread of poverty'** ([reference 162](#)).

The Scottish Attainment Challenge programme has been refreshed in light of the pandemic and local authorities have set their own ambitious 'stretch aims' aiming to narrow the attainment gap. Some, but not all, local authorities have considered the intersection of poverty and ASN in doing so ([reference 163](#)). There is ongoing debate within the education sector about whether the use of attainment performance measures to help close the attainment gap has unintended consequences on children and young people's mental and physical health recovery ([references 164, 165](#)).

## Section 3: Impact on Specific Groups with Additional Support Needs

### Summary

- There is a lack of systematic research using representative samples to understand the impact of the pandemic on particular sub-groups of children and young people.
- School closures had disproportionate effects on the mental health of pupils with pre-existing mental health difficulties, those who were receiving additional educational support before the pandemic, and those experiencing financial difficulties.
- The number of children on the child protection register and becoming looked after decreased during the pandemic, but it is likely that an increasing number of children have needs that were unmet during school closures due to a focus on those at the highest risk.
- There were additional challenges around access to learning for care leavers, those experiencing poverty, those who required specialist equipment, and EAL learners, refugees and families seeking asylum.
- The impact of various approaches to re-opening school buildings, rebuilding relationships, and supporting emotional wellbeing remains underexplored.

### Disabled and Seriously Ill Children and Young People

Disruption and reduced access to agencies and services affected children and young people with physical health difficulties. Many families with disabled children were advised



to avoid all contact with those outside the household, and those on the shielding list were told to quarantine even from those within the household, which is not possible for children with disabilities, who require care and support. Many whole families therefore quarantined, increasing isolation and pressure ([references 166, 167](#)), or separated siblings to reduce the risk of their shielding child contracting COVID-19 ([reference 168](#)). Paid personal assistants were often no longer able to provide care; one UK-wide study found that 75% of families with disabled or seriously ill children experienced decreased support during the pandemic ([reference 169](#)). Some young people living in supported accommodation before the pandemic had to move back in with their parents. These changes had an impact on the autonomy of many disabled children and young people, family roles and relationships, and a loss of respite for carers ([references 170, 171, 172, 173](#)), leaving families exhausted and struggling to cope ([reference 174](#)). UK research found that people who reported living with someone in a high-risk group were more likely to experience depression and anxiety ([reference 175](#)). During the chronic pandemic years, many families expressed concern that cuts to care packages would continue after the pandemic ([reference 176](#)).

The financial situations of many families of disabled or seriously ill children worsened ([reference 177](#)), with delays to assessment processes often having an additional financial impact ([reference 178](#)). In Scotland, there was an uplift to carer's allowance during the pandemic ([reference 179](#)).

For children with rare conditions, the loss of specialist services during lockdowns posed specific challenges. Parents of children with rare neurogenetic conditions reported greater anxiety and greater impact of their children's behavioural difficulties than others, including those with other neurodevelopmental conditions ([reference 180](#)). Children who required medical treatment that was usually accessed at school

often had their treatment paused during school closures, and referrals and diagnoses were delayed or missed. For some children, this has far-reaching and serious implications: **‘windows of opportunity to develop skills such as fine motor skills are lost; it may lead to short- and long-term pain’** ([reference 181](#)) and physical deterioration ([reference 182](#)).

Although children were overall at lower risk from the direct health impacts of COVID-19, some developed debilitating long-term conditions (long covid) as a direct result of infection, making it difficult to attend and engage with school ([references 183, 184](#)). Recent statistics suggest that 62,000 2-16 year olds across the UK may be experiencing long covid ([reference 185](#)).

Children and young people with visual impairments were disadvantaged by the move to online learning because of the loss of practical, hands-on learning, and because the specialist software and equipment they usually used could not be provided at home ([reference 186](#)). Deaf children and young people reported the problems facemasks caused and the anxiety they felt if they asked people to remove them to help understanding ([reference 187](#)). Disability studies scholars have pointed out that the move to online learning and the subsequent return to face-to-face have had uneven effects on disabled students and staff, and decisions continue to be based on what suits able-bodied people ([reference 188](#)).

Research with people with learning disabilities and their carers has been critical of transition arrangements during the pandemic, pointing out that the lack of plans and funding that had been put in place highlighted a disparity between policy aspirations and the realities of families ([references 189, 190](#)).

## Children and Young People with Pre-Existing Mental Health Difficulties

Throughout the pandemic, Scottish Government guidance for schools emphasised the importance of wellbeing ([references 191, 192](#)). The impact of school closures on the mental health of children and young people has been well documented ([references 193, 194](#)). Research has suggested that the mental health and practical consequences of the pandemic have been worse for those with pre-existing mental health difficulties and those who are already 'isolated or on the margins, and more vulnerable to risk' ([references 195, 196, 197, 198, 199](#)). A mixed methods study of 899 14-18 year olds found that young people who received additional support at school prior to COVID-19 were at a higher risk than others of depression (four times more likely than others) and PTSD-like symptoms (twice as likely as others) during the pandemic, a finding which is borne out in qualitative research ([references 200, 201](#)). The same study found that those who had previously received mental health support prior to COVID-19 were four times likelier than others to experience clinical depression and anxiety during the pandemic, leading the authors to conclude that 'adolescents with pre-existing symptoms have been uniquely, and negatively, impacted by the COVID-19 pandemic' ([reference 202](#)). While some young people expressed a positive impact of the removal of exam stress, this was not the case for those who had previously sought mental health support.

Mental health services outside of hospitals moved online during lockdowns. A UK-wide survey suggested that in March 2020, although the majority of young people with pre-existing mental health problems were able to still access mental health support, a quarter were not ([reference 203](#)), rising to 31% in summer 2020 ([reference 204](#)). In autumn 2020, when students

returned to in-person learning, 61% of those with pre-existing mental health problems said the return to school had had a negative impact on their mental health, and almost a quarter said their schools had less mental health support available than before the pandemic ([reference 205](#)). The mental health impacts of the winter lockdown appear to have been worse than the previous lockdowns, with 75% of those with pre-existing mental health problems saying they were finding the winter lockdown harder to cope with. 67% said they thought the pandemic would have a long-term impact on their mental health ([reference 206](#)).

Although face-to-face mental health services re-opened, many of the routes for access/referrals (schools, leisure centres, youth clubs) remained closed or online. In addition, the number of children and young people attending hospital due to self-harm reduced during lockdown periods ([reference 207](#)) despite a pre-COVID-19 increase for several years ([reference 208](#)), suggesting that ‘government restrictions might have inadvertently further discouraged help-seeking behaviour in those who were in need’, particularly from those living in more deprived areas, although the authors point out that this could alternatively reflect improved mental health as a result of some academic stressors being removed during lockdowns ([references 209, 210](#)).

Data from Public Health Scotland suggests that demand for mental health services outstripped supply during 2021, with average waiting times increasing by more than four weeks, and the proportion of people waiting more than a year for an initial consultation rising drastically ([reference 211](#)). Researchers have expressed concern that increased demand, combined with financial pressure on services, may lead to worsening delays ([reference 212](#)).

Scottish Government reports that counselling services and preventative mental health services ([reference 213](#)) are now in place and can be accessed from secondary schools across Scotland, although the way these are organised and delivered varies across local authorities. Of the 17,786 children and young people who used these preventative services between July and December 2021, 3,371 had learning disabilities, were LGBT+ or were care-experienced.

## Children on the Child Protection Register, Looked-After Children, and Care-Experienced Young People

Those on the child protection register, looked-after children and care-experienced young people are not a homogenous group – these terms cover a wide range of living situations, including, among others, those who are living at home with their parents but are on the child protection register or looked after at home, those living with prospective adopters, and those living in a secure unit. For many children and young people in this group, however, ‘..., **disruption, isolation and chaos is not a once in a lifetime, extraordinary event. This is often the status quo, and lockdown represents a lit match dropped in petrol, explosively compounding disadvantage and risking a lost generation**’ ([reference 214](#)).

## School Closures

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In a 2021 survey with care-experienced young people, three quarters said they had received less support from professionals (teachers/lecturers, social workers, doctors) during the pandemic ([reference 215](#)). This is particularly important, as care-experienced people are less likely to have family support networks to fall back on. In an MCR pathways survey with

young people in care or on the edge of care in 2020, two thirds of young people said they felt low, more anxious and stressed since lockdown, and two thirds said they had not engaged with any of the educational materials provided by their schools because they were too hard to understand and they were too stressed and anxious to do any schoolwork. In addition, those surveyed said they were worried about getting back into the school routine (80%), finding it hard to get back to normal (77%); and being behind with school work (76%) ([references 216, 217](#)).

Researchers pointed out the disproportionate impact of the lack of digital access experienced by many care leavers during the pandemic; access to advice and information, services and application forms all moved online during the pandemic, and care leavers were no longer able to access public libraries to use the internet during this time ([reference 218](#)).

Care-experienced parents and parents of looked-after children were not always aware of their entitlement to use ‘hub’ schools during the pandemic ([reference 219](#)).

## **Support Services**

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Sources of child protection referrals changed during school closures, with more referrals from Police Scotland and the community, and fewer from education ([reference 220](#)).

Although child protection referrals and inter-agency referral discussions (IRDs) increased during the pandemic years, there was a decrease in child protection registrations ([references 221, 222, 223](#)). This decrease may be partially due to the ‘creativity and responsiveness’ of multi-agency partners working together, the pandemic creating a shared experience and supporting a move towards more compassionate, relational practice and the provision of financial support, and a reduced number of children’s hearings ([reference 224](#)).

Analysis of more detailed, weekly data shows that during lockdowns, there were fewer IRDs but a higher proportion were placed on the child protection register (a higher ‘conversion rate’ from IRD to child protection registration than pre-pandemic and post-lockdown) ([reference 225](#)). The reduced IRDs during lockdowns are likely to be a result of professionals’ (education, health, family support) reduced contact with vulnerable children and young people, suggesting that children may have experienced ‘hidden harm’ ([references 226, 227](#)). Social work managers attribute the higher conversion rate to children referred having more complex needs than pre-pandemic. Concerns focused on the mental health of children and parents, parental alcohol and substance use, neglect, and emotional abuse. Although these were pre-existing concerns, there was a perception that they worsened during the pandemic due to increased financial pressure, pressure on family relationships, stress and isolation ([reference 228](#)).

The number of children not meeting the threshold for child protection registration, but with unmet needs requiring more support than universal services, is thought to be increasing, but the pandemic has necessitated a focus on the children at greatest risk. Concerns have been expressed by researchers in Scotland and internationally about gaps in knowledge about this group of children ([references 229, 230](#)).

Evidence from third sector organisations in Scotland suggests that many parents struggled during the pandemic, with an increase to helplines such as Parentline and the NSPCC helpline, and calls focusing on concerns about financial and emotional wellbeing. Calls to Scotland’s Domestic Abuse and Forced Marriage Helpline highlighted that some abusers were using pandemic restrictions as opportunities for controlling behaviour and abuse, including through child contact ([reference 231](#)). For those who were already accessing family support services, the pandemic exacerbated the often complex

multiple adversities they faced. Research with social work practitioners in the early phase of the pandemic suggested that social workers were concerned about not being able to access families face-to-face and were worried about how families were coping ([references 232, 233, 234](#)). For these families, the closure of wider community services such as schools, leisure centres, and youth clubs had a disproportionate impact on mental health ([reference 235](#)). Children with family members in prison reported finding it very difficult not being able to see them for long periods of time, due to a mixture of pandemic restrictions and COVID-19-related staff shortages in prisons ([references 236, 237](#)).

International evidence (including Scotland) highlights that the rates of hospitalisations for self-harm increased for looked-after children during lockdowns, particularly in countries with stringent lockdown measures ([references 238, 239](#)).

Care leavers are likely to have been particularly negatively affected by changes to support services, because this group may struggle with employment, training and housing as they are less able to draw on family support networks. Qualitative research has highlighted the ‘fractured and fragmented’ transitions for care leavers during the pandemic ([reference 240](#)). There was a rise during the pandemic in the number of deaths of young people in throughcare and aftercare, from 4-7 in 2016-18 to 12 in 2019 and 15 in 2020 ([references 241, 242](#)). In October 2021, new arrangements for reviewing the deaths of children and young people were put in place ([reference 243](#)).

Specialist services were restricted even after the return to schools, meaning that many children and young people requiring support did not receive it. Virtual therapeutic support is difficult, and in many cases impossible, with children. This was particularly important for those who had experienced domestic violence during lockdowns, many of whom missed out on timely and appropriate recovery work ([reference 244](#)).



## Attainment

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Outcomes for looked-after children are still significantly worse at all stages than for children overall ([references 245, 246, 247](#)).

The number of looked-after pupils leaving school with no qualifications decreased from 17% in 2018/19 to 13% in 2019/20 ([reference 248](#)), and rose again to 16% in 2020/21. The gap remains large – only 2% of all school leavers leave with no qualifications, making looked-after children eight times more likely to leave school with no qualifications than the general population. Although a lower proportion of looked-after young people left school in S4 or earlier in 2020/21 than in previous years, they were still more than three times likelier than all children to leave school at this age.

The proportion of children achieving curriculum for excellence levels relevant to their age fell for looked-after children and for ‘all children’ across all four domains (reading, writing, listening and speaking, numeracy) between 2018/19 and 2020/21. At primary 1 level, the gap between LAC and all pupils increased, but at P4 and P7 it decreased slightly, due to worsening outcomes for the ‘all children’ group ([reference 249](#)).

## Social, Emotional and Behavioural Difficulties

The ASN category of ‘social, emotional and behavioural difficulties’ (SEBD) had been increasing before the pandemic, and is consistently the largest category of any ASN recorded. This label is often stigmatised and is associated with school exclusion. There is also a strong association with poverty; those from the most deprived areas are almost three times as likely as those in the least deprived areas to be recorded as

having SEBD ([reference 250](#)). The number of children and young people recorded in this category continued to increase throughout the pandemic, but not at a higher rate than before the pandemic, though this is unsurprising given that schools were closed for much of this time ([references 251, 252](#)).

It is likely that children and young people with SEBD have been affected in specific ways by the pandemic. Delivering practical and work-based courses was challenging throughout the pandemic, and even when schools reopened, due to ongoing, though less severe, restrictions ([references 253, 254](#)). This is likely to have particularly affected young people who would otherwise have had an education timetable shared between school and college or practical provision ([references 255, 256, 257](#)). Restrictions on youth work services also disproportionately affected this group. Shifts between in-person and online learning are likely to have been difficult, but the impact of various approaches to re-opening school buildings, rebuilding relationships, and supporting emotional wellbeing remains underexplored.

Since schools reopened there has been increased attention on behaviour, with media reports and industrial action centring concerns around staff safety due to the perceived violent behaviour of some children and young people ([reference 258](#)). In response, there has been a Scottish Parliament debate ([reference 259](#)) and the Education Secretary has announced that a 'behaviour summit' will be convened in the coming weeks ([reference 260](#)). The most recent Behaviour in Scottish Schools survey data available is from 2016, as the most recent wave was postponed due to the pandemic; the next report will be published later in 2023 ([reference 261](#)). There is an evidence gap around behaviour in schools since the pandemic, and it is important not to oversimplify the complex issues surrounding experiences and perceptions of behaviour in schools ([references 262, 263, 264, 265](#)). There is a danger of

scapegoating the children and young people who have been worst affected by the pandemic ([references 266, 267](#)). Taking the disproportionate impact of the pandemic on the physical and mental health, economic circumstances, and attainment of some groups of children and young people into account, it will be important to explore and address the underlying issues including poverty, societal and cultural issues, structural issues, adults' actions, interactions and perceptions, resourcing and staffing in schools.

## **English as an Additional Language (EAL), Refugees and Families Seeking Asylum**

Children and young people with EAL faced some specific barriers around school closures and online learning. Research with teachers suggests that many were concerned about the impact of the move to online learning for children and young people who found it harder to access the work, including those with EAL ([reference 268](#)). Children, young people and parents have also raised problems associated with school closures, including being unable to ask teachers direct questions, challenges with understanding instructions, fewer opportunities to practice speaking English, and being unable to access their usual additional support ([references 269, 270, 271, 272](#)). On returning to school, it was harder for some to understand what staff were saying when they wore face masks ([reference 273](#)). There is also evidence that those with limited English found it harder to understand and access benefits, sometimes on account of temporary changes in eligibility, and services such as GP appointments, because of language barriers in telephone appointments ([reference 274](#)).

In addition to these challenges, families seeking asylum experienced barriers to digital access, because the housing

provided did not usually have WiFi access, as well as difficulties accessing basic amenities such as online shopping and broadband contracts, because they could not open a bank account ([references 275, 276, 277](#)). The issues affecting families experiencing poverty were also likely to have affected many families seeking asylum, many of whom experience extreme poverty, with those with no recourse to public funds particularly at risk of destitution during the pandemic ([reference 278](#)). These problems were often compounded by increased fear of infection leading to increased isolation, and pandemic-induced delays to the asylum process causing further financial problems, stress and anxiety ([references 279, 280, 281](#)).

The proportion of children with EAL meeting the levels associated with their age in literacy and numeracy at primary level dropped in 2020/21, then increased in 2021/22, and is now higher than it was in 2018/19 for literacy and the same as it was in 2018/19 for numeracy (compared with those with English as a main language, where the proportion of children achieving these levels at primary is still lower than in 2018/19). Similar patterns can be seen at S3 ([reference 282](#)).

## Young Carers

Young carers, who live with someone with a disability, mental or physical illness, or drug or alcohol problem, and help to look after them, experienced some specific challenges due to school closures and changes to support packages. Young carers' circumstances vary but for some there is overlap between the issues affecting disabled and ill children and young people and those with child protection involvement. When young carers' support networks became unavailable or moved online, many took on more caring responsibilities to fill these gaps ([references 283, 284](#)). At the same time, children were not

allowed to be in certain spaces such as supermarkets during some COVID restrictions. Paid carers were often not available during lockdowns, with one UK survey finding that fewer than 3% of young carers had a paid assistant providing support at home, drastically affecting access to respite and breaks ([reference 285](#)). Delays to healthcare and difficulties accessing support services for the person they cared for led to increased stress and anxiety, and access to mental health support services was slow and difficult ([references 286, 287, 288, 289](#)). There was sometimes a lack of clarity about whether young carers were eligible to attend hub schools, as well as concerns about protecting shielding or vulnerable family members ([references 290, 291, 292](#)).

Online learning was particularly difficult for many young carers, many of whom were supporting their siblings with their learning as well as their own. Some young carers said they found the cancellation of exams stressful as it led to increased pressure on coursework ([references 293, 294, 295](#)).

# Conclusion

The impact of the COVID-19 pandemic and resulting restrictions have disproportionately affected children and young people with additional support needs and their families, and particularly those whose additional support needs intersect with other disadvantages and vulnerabilities. The impacts of school closures and changes to support packages cannot be disentangled from each other or from the wider social contexts in which they occurred - contexts in which poverty and inequality were rife, services including but not limited to education were already struggling, and many children and young people with additional support needs were already not receiving the resources and support they needed to thrive.

This study offers a summary of the key impacts of school closures and changes to support packages affecting children and young people with additional support needs. It demonstrates the dramatic impact on children and young people and their parents, with impacts on learning, rights and participation, physical and mental health, family relationships, and access to support services. There were also specific impacts for various groups of children and young people, many of whom have more than one support need and therefore experienced overlapping, compounded effects of school closures and changes to support services.

This review highlights a concerning lack of systematic longitudinal research using representative samples to understand the impact of school closures and changes to support packages on particular sub-groups of children and young people. There also appears to be a lack of systematic evidence about the outcomes of interventions used to mitigate the learning loss caused by the pandemic and responses to it,

narrow attainment gaps and prevent further learning loss for children with additional support needs.

The pace of research in this area has slowed, which is concerning because many of the mid- and long-term impacts of the pandemic are only just beginning to emerge, as we may be seeing with recent concerns over behaviour in schools. Without further research which acknowledges and explores the multi-faceted impact of the pandemic and other social changes on the educational and wider experiences of children and young people with additional support needs, we risk unintentionally further entrenching the harms and inequalities that the pandemic at one point appeared to offer an opportunity and impetus to overcome.

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Unit 4 Montpelier Central, Station Road, Bristol BS6 5EE  
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