### **Scottish COVID-19 Inquiry:**

# The Impact of the COVID-19 Pandemic on the Delivery of Education to Children Under Five

#### Final report

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## **Executive Summary**

### Aim and focus of this study

This study provides a detailed review of available evidence on the impacts of the COVID-19 pandemic, and the policy responses to it, on the education of children under five in Scotland. It details how these impacts have been unevenly distributed and experienced differently by children under five who face disadvantages based on socio-economic exclusion, disability, race/ethnicity, and other intersecting inequalities.

The report is based on a comprehensive, systematic deskbased review to provide an in-depth analysis of the most recent and relevant national and international, qualitative and quantitative research reporting on these issues.

## **Key findings**

The Early Learning and Childcare (ELC) sector in Scotland faced two periods of extended closure, from 20 March until 11 August 2020, and from 5 January until 22 February 2021.

- Because young children's learning is fundamentally play- and relationship-based, losing access to high quality play and learning environments impacted on their overall developmental outcomes.
- Increased speech, language and communication concerns for young children were recorded following ELC closures.
- ELC closures impacted both positively and negatively on bilingual language proficiency. For some children, their

bilingual language proficiency improved due to more time spent with their families. For other children, ELC closures impacted negatively on their proficiency in the language they were not exposed to at home during closures (such as Gaelic language for children in Gaelic Medium Education settings).

- Most settings provided remote learning opportunities to children and families, but how they were taken up and implemented depended largely on parents and their resources and home environments.
- The closure of ELC settings led to an increased risk for some children to be exposed to domestic violence, to a lack of adequate food and to the adverse effects of poor housing and poverty.
- During closure periods, local authorities operated 'hub' ELC settings for 'vulnerable' (note 1) and key worker children.
   These hubs consisted of ELC provided by local authority, private and third sector providers (e.g. nurseries, early years centres, childminders). The interpretation of 'vulnerable' varied across local authorities, leading to concerns about inequities of access.

# Once settings re-opened during the pandemic, and for Hub provision, a number of COVID-19 measures changed practices within ELC.

- Distancing measures impacted on children's experiences of spaces and relationships.
- Reduced cohort sizes (informally termed 'bubbles') required changes to setting layouts (and, for some settings, to the hours/places offered) and impacted on children's interactions with peers and staff.
- Staff were required to distance from other adults (both staff and parents), and parents and other visitors could not enter ELC settings. For some children and families, this improved

- their experiences of arriving at ELC settings, while for others it created challenges and anxiety.
- Enhanced hygiene and cleaning guidelines placed additional burdens on staff and impacted on their capacity to spend time with children.
- These guidelines also led to a reduction of available pedagogical resources in many settings, such as water, sand, playdough, and soft toys and furnishings.
- At times, group singing was only permitted outdoors, and children had less involvement in experiential and sensory learning opportunities like cooking or baking.
- As settings were instructed to maximise their outdoor areas, children spent more time outdoors and benefitted from the learning opportunities provided by this.
- Some families reported improved family relationships during the pandemic due to more time spent together, but these were mostly experienced by higher income families.
- Transitions arrangements from home to ELC, within ELC and from ELC to school – were disrupted, causing increased stress and anxiety to some children and families, especially those with enhanced transition needs.
- Children's right to participate in decisions that affect them, both in relation to overall public health measures as well as in the day-to-day life in ELC settings, was compromised due to prioritisation of their (and other age groups') health and safety.

# COVID-19 had a substantial, structural impact on the wider ELC sector in Scotland.

- The planned national expansion of funded hours of childcare, from 600 to 1,140 hours for eligible children, was delayed (from August 2020 until August 2021).
- Research suggests that this will exacerbate the pandemic's effects in terms of young children's development and

- learning, mostly for those who were already experiencing disadvantage.
- The ELC workforce faced increased responsibilities and pressures, such as adapting to changing public health requirements and supporting families in times of crisis, leading to increased stress and anxiety.
- The COVID-19 pandemic, combined with the expansion of funded hours, has exacerbated issues with ELC staff recruitment and retention. Increased costs for running settings place private provision at particular risk.
- In addition to ELC services, informal learning environments for young children and parents (such as baby and toddler classes) were disrupted, contributing to families' isolation.
- Research suggests that in order to mitigate the impact of the COVID-19 pandemic on children under five, high-quality play environments and pedagogies, increased access to ELC, and financial and emotional support for families and communities are needed.

# The impacts of the COVID-19 pandemic on children under five, and their families, were not evenly distributed.

- The pandemic, and policy responses to it, have exacerbated existing inequalities, and such inequalities – of socioeconomic factors, gender, race/ethnicity, disability and more – intersect in complex ways.
- Early indications from research suggest that the pandemic has widened the poverty-related attainment gap for children under five.
- Particular concerns were raised about children at risk of domestic violence.

- Black and minority ethnic children and families experienced disproportionate impacts of the COVID-19 pandemic, with racism and discrimination being a key factor behind this.
- Shielding advice, restricted access to settings, and changing practices within settings (e.g. with regard to transitions and distancing) posed particular challenges for children with additional support needs.
- Larger families were more likely to experience economic pressures, and one-parent families were more likely to experience economic hardship and isolation.
- Young children's access to digital educational offers during ELC closures was dependent on their parents' economic and technological resources.
- Rural children and families' struggles to access suitable highquality ELC continued throughout the pandemic, and rural families often experienced isolation.
- There are gaps in research which explores young children's own views, and in research with and about children from particular groups, such as Gypsy Traveller children.

## Introduction

Early childhood is a critical time in the lives of all people. It has been well-established that young children's early experiences and access to high-quality services significantly shape their educational, health, and economic outcomes, and thus ultimately contribute to society at large. Access to high-quality early childhood education and care has been shown to benefit children's cognitive, social, and emotional development, to improve their educational achievement, their relationships, and social experiences, and to increase their economic wellbeing throughout the lifecourse (notes 2, 3, 4, 5). These individual outcomes lead to social benefits which by far exceed the costs of early learning and childcare (notes 6, 7).

Children also have a right – in the here and now – to education, as established by the United Nations Convention on the Rights of the Child (Article 28). Education is both a right in itself, as well as providing the means to other rights being met (note 8), such as the right to play (Article 31). Children also have rights within education, such as non-discrimination (Article 2), best interests as a primary consideration (Article 3), survival and development (Article 6) and children's views being given due weight (Article 12) (note 9). Thus, the closure of educational settings throughout the pandemic has deeply affected children's right to education, and by extension to other rights such as the right to enough nutritious food, to the best mental health possible and to relax and play, along with many other rights (note 10).

We know that the impacts of the COVID-19 pandemic in Scotland have been vast and deep, and caused significant disruption to the education of children under five, their families, and the workforce involved in its delivery. As this report shows, these impacts have not been evenly distributed.

This report presents the evidence currently available on how the delivery of education for children under five has been disrupted and changed by the COVID-19 pandemic in Scotland, and how this has impacted children's experiences and outcomes. The report reflects on the impacts of closures of ELC settings, on changing practices within settings, and on wider structural changes in the sector, such as the delay of expanding funded hours of childcare and the impacts of COVID-19 on the early years workforce.

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.

## Research design

This report is based on a comprehensive, systematic deskbased review, and offers an in-depth analysis of the most recent relevant national and international, qualitative and quantitative empirical research reporting on issues relating to how the COVID-19 pandemic has impacted on the delivery of education to children under five in Scotland.

### **Defining key concepts and terms**

# Early learning and childcare for children under five

This report uses the Scottish terminology of 'early learning and childcare' (ELC) to describe the integrated education and childcare provided for children under five. ELC includes:

- nursery classes attached to primary schools;
- stand-alone early years / family centres;
- day nurseries;
- childminders; and
- funded playgroups.

ELC can be provided by local authorities, private businesses or the third sector.

While our study focuses on education and childcare, it does **not** focus on care in clinical settings, or on the impact of the COVID-19 pandemic on residential care or foster care.

# Informal learning opportunities for children under five

This report recognises that there are informal learning opportunities for children under five which are not included in the above definition of ELC, such as classes, networks or nonfunded playgroups for babies, toddlers and their families. While these are not included in the definition of ELC in Scotland, we have included a section on these informal learning opportunities in this report (see Beyond ELC). They may be provided by the public sector, third sector organisations, churches or businesses.

#### Children under five

In this study we use the term 'children under five' synonymously with 'children under school age'. We have reviewed evidence which focuses on children from birth to age 4 and have included research focusing on 5-year-olds in the context of early learning and childcare settings. This reflects the fact that generally, children in Scotland start Primary 1 when they are between  $4\frac{1}{2}$  and  $5\frac{1}{2}$  years old. Our study does not focus on children in Primary 1 and above.

#### Parents/carers

When we refer to parents in this report, we include parents **and** carers, recognising that not all children live with their parents as primary carers.

### **Research questions**

- a) How has the COVID-19 pandemic, and the policy responses to it, impacted on the delivery of education for children under five in Scotland?
- b) How has the COVID-19 pandemic, and the policy responses to it, impacted the education of children under five in Scotland?
- c) How have these impacts been distributed, and experienced by children under five who face disadvantages based on socio-economic exclusion, disability, race/ethnicity, and other intersecting inequalities?

## Methodology

#### Search criteria

Our literature search included:

- Literature published in the English language since March 2020, and by October 2023, relevant to Scotland;
- Literature focused on children under five:
- Literature focused on the delivery of education and childcare / early learning and childcare to children under five;
- Literature focused on the structural context of education for under-fives, e.g. workforce, expansion of funded childcare, integrated working;
- Literature focused on experiences and outcomes of children under five who face particular disadvantages based on socioeconomic exclusion, disability, race/ethnicity, and other intersecting inequalities; and
- Literature dated before March 2020 and beyond Scotland (UK and international) was included for contextualisation and/or in the absence of Scottish-focused studies, but was

not the main focus of our search. For example, where there were no studies from Scotland available, we have included studies from across the UK,etc.

The following were excluded from the search:

- Literature not published in English.
- Literature related to primary, secondary or higher education.
- Literature with a clinical focus.

#### **Data sources**

Data sources included national surveys and statistical datasets, peer-reviewed academic and grey literature, empirical research (qualitative and quantitative), meta-analyses, relevant policy guidance and briefings, trades union and professional association documents.

### Search strategy and analysis

This report is based on a general internet search as well as academic database search (the University of Edinburgh's DiscoverEd, Google Scholar, British Education Index, ProQuest Education Abstracts, ProQuest Sociological Abstracts, Web of Science). A Boolean Search technique was applied, using Boolean operators like AND, OR, "", \* to produce more accurate and relevant search results.

Specifically, our study used combinations of the following search terms:

- Scotland, COVID-19, COVID-19 pandemic
- Early learning and childcare (ELC), early childhood education and care (ECEC), early childhood education (ECE), early childhood care and education (ECCE), under-fives education

(and care), early years education (and care), nursery, preschool, early years centre\*, childminder\*, playgroup\*, early childhood/postnatal class\*

- Remote early learning and childcare, online delivery, digital delivery
- Access to/ attendance of/ changing practices within early learning and childcare
- Early childhood workforce, leadership and management, early childhood practitioner\*, early childhood teacher\*, early years professional development
- Integrated working/partnership working/inter-professional working
- Pedagogies, outdoor learning, children's participation
- Educational outcomes for under-fives (early language, literacy and numeracy, attainment gap, child development)
- Parental engagement, parental involvement
- Transition\*, transition arrangement\*
- Expansion of funded hours, ELC sector
- Race/ethnicity, BAME, BME, asylum seeking child\*, refugee child\*, gypsy traveller child\*, migrants, socio-economic, Scottish Index of Multiple Deprivation (SIMD), gender, disability, child\* with additional support needs, child\* in care, looked after child\*, bilingual\*, Gaelic, intersectionality.

In addition to online searches, the research team reached out by email to key experts, stakeholders and professional associations working in the field of education for under-fives in Scotland to gather additional evidence in the form of unpublished research and data sets.

Our search has taken account of the methodological rigour, reliability, and generalisability of each source. Coding and thematic analysis adopted approaches from Braun and Clarke (2019) (note 11). A coding frame was developed by the research team based on a review of all evidence. Emerging

themes and sub-themes were cross-checked against our search criteria and, through team discussion, used as the basis to develop the thematic summaries and key findings of this report.

#### Limitations

Much of this desk-based research is informed by emerging research findings on the impacts of the COVID-19 pandemic. Research on the longer-term effects for children under five and the early childhood education sector is still emerging.

Not all evidence included in this report was peer-reviewed (e.g., the vast field of public and third sector grey literature). To ensure academic rigour, we only included literature with an indication of suitable methodology.

Our report also identified a shortage of research with young children themselves, which gathered their own perspectives during and after the COVID-19 pandemic, as well as with specific groups of children, such as Gypsy Traveller children or care-experienced children.

These limitations notwithstanding, the study provides a necessary and invaluable synthesis of the most recent evidence available.

#### **Ethical considerations**

This study involved no primary data collection. Ethical considerations, therefore, focused on whether the included studies were conducted ethically. The data drawn upon contained no identifiable information about individuals or groups. Following the guidelines of the British Educational Research Association (note 12), our duty was to be transparent

in our methodology and findings, and to protect and extend understanding of existing research on the impact of the COVID-19 pandemic on the education of children under five. Dr Kustatscher was responsible for ensuring ethical integrity of the research.

### **Quality assurance**

Dr Kustatscher was responsible for all aspects of quality assurance and data management, including responsibility for data collection, quality and storage.

# Early learning and childcare (ELC) in Scotland: a framework of provision

In Scotland, the term 'early learning and childcare (ELC)' is used to describe the full range of early childhood education for children under school age:

"The term early learning and childcare is intended to emphasise that the care and education of very young children are inseparable. Babies, toddlers and young children learn all the time from their experiences." (note 13)

This integrated approach to early childhood education and care leads to better outcomes for children, especially for younger children. This is because an integrated approach recognises that younger children benefit from pedagogical approaches to learning (rather than needing 'just care') and the early years workforce should be as valued and qualified as the teaching profession (note 14).

The delivery of ELC falls under statutory and non-statutory provision. Local authorities have a statutory duty to provide funded hours to eligible children (i.e. all three- and four-year-olds, and eligible two-year-olds) (see section on **Funding** below). It is not mandatory for children and families to take up the funded hours that they are entitled to.

Funded hours are either provided by the local authority, or by private/third sector providers which have a partnership agreement with the local authority and meet the National Standard for Early Learning and Childcare. Non-funded hours (for those not eligible for funded ELC or for those topping up their funded hours) can be provided by local authorities, private or third sector providers.

The key guidance documents shaping ELC in Scotland today are:

- Realising the Ambition: Being Me (2020): national practice guidance for education from birth to early primary (note 15);
- Curriculum for Excellence (2004, Refreshed Narrative 2019): from age 3-18, with the early learning applying from 3 to end of Primary 1 (note 16);
- The Early Years Framework (2009): sets out the vision for early years in Scotland to provide for children's best start in life (note 17); and
- How good is our early learning and childcare? (2016): a framework of quality indicators for early learning and childcare (ELC) for children aged from 0-5 years (note 18).

## **Types of provision**

ELC settings can be operated by local authorities, private businesses, voluntary sector organisations, and, in the case of childminders, self-employed individuals (note 19).

There is a large variety of provision types and arrangements, and these vary across local authorities. For example, not all 'school nurseries' or all 'early years centres' operate the same hours and timetables, and the terminology for settings varies across local authorities. In addition, as part of the expansion of funded ELC, the sector is currently undergoing significant changes, and many settings are changing the hours and timetables they provide.

When referring to ELC in Scotland, the following types of provision are commonly included:

- Nursery schools and classes attached to primary schools: many primary schools operate nursery provision (both local authority and independent primary schools). These often follow similar hours (for example, 8.30am – 3.15pm) and term calendars to the schools they are attached to. They mostly cater for children in receipt of funded hours, i.e., eligible twoyear-olds and three- and four-year-olds. Some nurseries may give the option of attending full days only, while others offer half-day spaces.
- Family centres / early years centres: operated by local authorities, these often offer ELC alongside other family services (such as adult education classes, toy libraries, therapy services, etc.). Their provision can follow school times and term calendars or be 10 hours (8.00am 6.00pm) and year-round. They generally cater for children aged 0-5 years. They may offer full-day or half-day places.
- Day nurseries: day nurseries tend to be operated by private providers (either as local businesses or part of larger, often international, companies). They tend to be open for 10 hours per day, year-round, and cater for children aged 0-5 years. Some day nurseries offer full days only, while others give the option of attending half days.
- Childminders are self-employed individuals who look after children in their homes, often alongside their own children. They cater for children aged 0-5 (and often also older children, for example offering school pick-up and afternoon care).
- Funded playgroups are often provided by community / voluntary groups and tend to cater for children who are eligible for funded hours (i.e. eligible two-year-olds, and three and four-year-olds.)

All ELC providers need to be registered with the Care Inspectorate, which regulates and inspects them.

The Care Inspectorate releases annual data on uptake of different provision types. For example, in 2022, 221,290 children in Scotland were registered with a day care service. Of those, 62.8% were registered with nurseries, 10.6% with childminders, 3.7% with children and family centres, and 1.4% with playgroups (the remaining percentages relate to afterschool and holiday clubs, which are also included in the definition of day care services but not in the definition of ELC) (note 20).

## **Funding**

In 2014, the Scottish Government announced its flagship policy of expanding the entitlement of children to funded hours of ELC from 600 hours a year to 1,140 hours a year (note 21). All threeand four-year-old children, as well as eligible two-year-olds, are entitled to these funded hours under the new policy, although it is not mandatory that they use them. About a quarter of all two-year-olds are eligible for funded ELC. The criteria include being looked after by a local authority, being in kinship care, having been appointed a guardian, or parents being in receipt of certain benefits (note 22). After delays to the original plans, the expanded hours were implemented in August 2021 (note 23).

The principle of 'Funding Follows the Child', introduced alongside the expansion of funded hours, means that families can access funded ELC provided by local authorities as well as by private/third sector providers (including childminders) if these meet the National Standard for Early Learning and Childcare Providers and are in a partnership contract with a local authority (note 24). Some families choose to access their funded hours across more than one ELC setting simultaneously.

Uptake of funded hours among eligible children is high. The Scottish Government estimates that 99% of eligible three- and four-year-olds were registered for funded ELC in 2022 (97% in 2021, 95% in 2020). For two-year-olds, 14% of the total population were registered for funded ELC in 2022 (13% in 2021, 9% in 2020) (note 25).

Most local authority ELC services cater for children aged 2-5, in order to meet the statutory entitlement to funded hours. Most private providers (nurseries and childminders) cater for children aged 0-5 (note 26). Most local authorities rely on private and voluntary partner providers to meet their statutory duties of ELC delivery. If local authorities have ELC places available after meeting their statutory duty, these can be allocated to feepaying families. There is currently no unified process in place to allocate these places across different local authorities.

As part of the agreement to deliver the expanded statutory entitlement of 1,140 hours, children attending funded ELC sessions are entitled to free meals and snacks, and, since August 2021, children have received free milk as part of the Scottish Milk and Healthy Snack Scheme (note 27).

Families who chose to pay privately for non-funded hours, either before their children meet the entitlement criteria or in order to top-up their funded hours, can apply for the Tax-Free Childcare scheme, which enables them claim up to £2,000 per year towards registered childcare. Parents need to be in minimum of 16 hours employment per week and earning under £100,000 per year (note 28). This scheme has replaced the previous Childcare Vouchers scheme, which is now only operating for those who registered up until 2018. Families in receipt of Universal Credit can apply for up to 85% of their childcare costs (note 29).

# Timeline of key events for ELC during the COVID-19 pandemic

The following table illustrates key events and guidance relating to ELC during the COVID-19 pandemic in Scotland (highlighted in yellow), contextualised against some of the broader events during this time.

#### 1 March 2020

First case of COVID-19 in Scotland.

#### 11 March 2020

First case of community transmission in Scotland.

#### 13 March 2020

First confirmed COVID-19 death in Scotland.

#### • 17 March 2020

First Minister's COVID-19 speech emphasises the need to reduce all non-essential social contact for all citizens.

#### 19 March 2020 [highlighted in yellow]

Scottish Government announces the closure of ELC settings and schools from the end of the school day on Friday 20 March 2020 except for 'vulnerable' children and children of key workers.

#### • 24 March 2020

First day of 'lockdown' in Scotland.

#### 25 March 2020 [highlighted in yellow]

Scottish Government advises registered childminders to cease all provision except for 'vulnerable' children and children of key workers (and, for these, to limit the number of households for whom they provide childcare to a maximum of two, excluding their own families).

#### • 27 March 2020

Scottish Government publishes rules on 'staying at home and away from others' (social distancing).

#### 30 March 2020 [highlighted in yellow]

Scottish Government publishes guidance for schools and ELC settings who provide care to 'vulnerable' children and for children of key workers, focusing on physical distancing and hygiene measures within settings; this guidance is updated regularly over the following months.

#### 30 March 2020 [highlighted in yellow]

Scottish Government announces that the expansion of funded ELC to 1,140 hours is paused to give local authorities the flexibility to focus on responding to the COVID-19 pandemic (original target date of August 2020 is postponed to August 2021).

#### 20 April 2020 [highlighted in yellow]

Scottish Government publishes guidance to support home learning for children and young people, including online collections of resources for teachers, practitioners, and families.

#### • 18 May 2020

Scottish Government announces that testing for COVID-19 will be open to anyone over the age of five who is symptomatic.

#### • 21 May 2020

Scottish Government publishes a route map which presents a phased approach to easing lockdown restrictions.

#### • 21 May 2020 [highlighted in yellow]

Scottish Government announces that children will return to schools and ELC settings on 11 August, with a blended model of part-time in-school teaching and part-time in-home learning.

Scottish Government publishes 'Coronavirus (COVID-19): strategic framework for reopening schools and early learning and childcare settings: initial impact assessment'.

#### 26 May 2020 [highlighted in yellow]

Scottish Government publishes summary of scientific evidence relating to opening schools and ELC settings.

#### • 3 June 2020 [highlighted in yellow]

Childminders and fully outdoor nursery provision can reopen with guidance on safe operation.

#### 5 June 2020 [highlighted in yellow]

Scottish Government publishes guidance to help local authorities, ELC settings and schools support children and young people's learning.

Scottish Government publishes guidance to support teachers and practitioners in preparing their curriculum offer for and during the Recovery Phase.

#### 15 June 2020 [highlighted in yellow]

Guidance published for early learning and childcare (ELC) providers to support a safe reopening, updated 30 July 2020. Coming into effect from 10 August 2020.

#### • 21 July 2020

Scottish Government announces testing eligibility of children under five who are symptomatic.

#### • 11 August 2020 [highlighted in yellow]

ELC settings and schools reopen to all children and young people in Scotland, with measures in place such as reduced cohort sizes ('bubbles'), enhanced hygiene and cleaning practices, Test and Protect measures including self-isolation, face coverings and physical distancing between adults (staff and parents).

#### 8 December 2020

First vaccinations against COVID-19 are given in Scotland.

#### 19 December 2020

Announcement on tightening COVID-19 restrictions during festive period due to spread of new variant.

## • 5 January 2021 [highlighted in yellow]

Second 'lockdown' in mainland Scotland. Closure of ELC settings and schools except for 'vulnerable' children and those of key workers.

#### 22 February 2021 [highlighted in yellow]

Children in ELC and Primary 1-3 return to settings. Remaining primary pupils return in March.

#### • 16 March 2021

Scottish Government publishes timetable for easing lockdown restrictions.

#### • 9 August 2021

Scotland moves beyond Level 0 of lockdown restrictions (physical distancing and limits on gathering removed, with some protective measures kept such as face coverings indoors).

05 October 2021 [highlighted in yellow]
 Scottish Government published Coronavirus (COVID-19)
 education recovery: key actions and next steps document.

#### 14 December 2021

Scottish Government publishes updated guidance to manage increased risks of transmission associated with Omicron variant.

#### 10 March 2022 [highlighted in yellow]

Scottish Government's COVID-19 Education Recovery Group concludes its work.

Routine measures remain in place for ELC and childminder settings on reducing the risks of COVID-19 (e.g. hand hygiene, cleaning practices) (latest update August 2023 (note 30)).

#### 19 March 2022

Scotland offers COVID-19 vaccination to children aged 5-11.

#### • 18 April 2022

Legal requirement to wear face coverings indoors removed.

#### • 30 April 2022

COVID-19 test sites close and people with symptoms are no longer advised to seek a test.

#### • 5 May 2023

World Health Organisation declares COVID-19 no longer be a global health emergency.

#### • 25 August 2023

Children aged 6 months and over with a condition that places them at higher risk are offered COVID-19 vaccinations.

Table 1: Key events and guidance relating to ELC during the COVID-19 pandemic in Scotland (adapted from Silistire (2023) (note 31) and Care Inspectorate (note 32))

In summary, the ELC sector faced 2 periods of closure: from 20 March 2020 until 11 August 2020, and from 5 January 2021 until 22 February 2021. There were some exceptions to these closures, namely ELC provision for children deemed 'vulnerable' and children of key workers, as well as slightly differing timetables for childminders and fully outdoor nurseries. A number of physical distancing and hygiene measures shaped ELC provision during the COVID-19 pandemic, which impacted on the experiences of children, their families, and staff.

# Provision for 'vulnerable' children and children of key workers

Throughout the pandemic and as long as ELC and school settings were not operating at full capacity, local authorities coordinated 'Hubs' for the children of 'key workers' and children deemed 'vulnerable'. These hubs were provided by local authorities (e.g. nurseries attached to schools and early years centres), private / third sector partners, or childminders. Local authorities were encouraged to prioritise the use of private or third-sector providers to help support the sector to stay viable. In rural areas, this would have been a necessity even without this encouragement, due to the reliance on private and third-sector partners and childminders in rural areas (note 33). Some childminders were granted registration to provide overnight care (note 34).

Scottish Government guidance defined 'vulnerable' children as being: on the child protection register; looked after; on the edge of care; being eligible for free school meals; having complex additional support needs; and being affected by poverty and deprivation (note 35). However, Scottish Government 'has not adequately specified the definition of 'vulnerability', allowing for local authorities to adapt to local needs' (note 36). Thus, criteria were interpreted differently by different local authorities, leading to inequities in provision for 'vulnerable' children across Scotland (note 37). Barnardo's Scotland highlighted that in some areas of high disadvantage, 'if all 'vulnerable' children attended there would be too many present to maintain appropriate social distancing', and called for a clear and consistent referral system (note 38).

Key workers were defined as those critical to health and care, energy, emergency and other key services, with local

authorities being able to decide exact definitions based on their needs:

"Local authorities are best placed to decide on the exact definition based on local needs which will obviously differ in island and rural communities to that in our cities." (note 39)

ELC staff providing education and care to the children of key workers were also considered key workers.

Initial uptake of Hub provision was lower than expected, both by key worker and 'vulnerable' children. Evidence suggests that this was due to concerns about transport to and from hubs, the potential stigma of attending for 'vulnerable' children, and fears of COVID-19 transmission (note 40).

# Impact of ELC setting closures on children under five

### **Measuring impacts**

This report draws together evidence from a range of studies and research disciplines (e.g., social science research, children's rights research, child development research), and we have used the terminology adopted in the respective studies.

Different disciplines conceptualise children, and the impacts of the COVID-19 pandemic, in different ways. For example, many studies on the impacts of the pandemic on young children adopt developmental frameworks. Child development is generally associated with disciplines of health and psychology and refers to children's physical, cognitive, language, emotional and social development. A child development perspective is based on the assumption that children will meet certain developmental 'milestones' at certain times in their lives. In ELC, these are often recorded in so-called 'trackers'. In Scottish ELC, there is currently no universal model of child development that is adopted across all local authorities, and different local authorities use different approaches to gather data on children's development in ELC. In some local authorities, there is also variation between how different settings record such data. Education Scotland has recently (October 2023) published resources on tracking and monitoring (note 41).

Other disciplines, such as social science research with children, are often critical of child development and 'milestone tracking' approaches in the ELC field. Such critiques include: that a developmental perspective imposes normative and deficit approaches onto diverse groups of children, that it individualises structural problems or pathologizes certain

groups of children (e.g., those living in poverty), that 'trackers' prevent a holistic view of the child and are reductionist, and that they lend themselves to imagining children as incomplete and dependent, compared against an imagined ideal of a complete, fully functioning, independent adult (notes 42, 43, 44, 45). Alternative approaches to developmental tracking have been developed in some ELC settings in Scotland, such as the 'Lived Stories' approach, a narrative assessment 'designed to track children's progress whilst respecting the complexity of their learning, their position within the learning process, the flow/fluidity of their ways of being and their ability to act in radical, creative and innovative ways' (note 46).

Thus, there exists no agreed, universal measuring approach or tool for the impacts of the pandemic on children under five (in Scotland, or elsewhere). By drawing on different disciplinary perspectives, we have sought to ensure that our report captures the complex and nuanced nature of the impacts on young children in a holistic way.

# Play: children's right to play and learning through play

Closures of ELC settings and wider COVID-19 restrictions impacted especially on the ways in which children in the early years learn (note 47). Young children's learning is fundamentally play-based and shaped by their environments, relationships, physical movements and spaces for sensorial stimulation (note 48). Thus, play is not only a **right for all children**, enshrined in Article 31 of the United Nations Convention on the Rights of the Child, but also linked to positive social, emotional, physical and cognitive outcomes, and a fundamental aspect of their learning and development.

Children's play has been the subject of much research and debate, and there is no unified definition or typology of play. For example, researchers have highlighted that children use first-hand experiences in their play and try out new skills, children make up symbolic representations as they play, children may play alone or in groups (with other children or adults), and children make sense of relationships and cultures through their play (note 49). While children are **learning through play**, it is important to recognise play as important in and of itself rather than just perceiving it as a means to learning outcomes (note 50).

Many children's access to play was restricted during ELC closures. For many children, closures led to a lack of interaction with children beyond their homes (note 51) as well as decreased access to play in outdoor spaces (note 52).

The CEYRIS study (note 53), a survey study of Scottish parents, looked at how they perceived the impacts of the pandemic on their children's imaginative play. Parents' perceptions varied throughout the course of the pandemic. In June-July 2020, around half of parents reported that their child's imaginative play had been better than before lockdown. In November-December 2020, a similar percentage reported that their child's imaginative play was better than during the first lockdown period. In September-October 2021, only a quarter of parents reported that the pandemic had a positive impact on children's imaginative play. In this final round, nearly half of all parents reported that the pandemic had a negative impact on the imaginative play of their children under 2. This was much higher than for older age groups (3-11) in the survey (notes 54, 55). A qualitative study with Scottish ELC practitioners found that they observed children's post-lockdown play to be richer and more imaginative (note 56).

It is difficult to disentangle the effects of ELC closures from the effects of broader lockdown restrictions on young children, which further decreased their access to play spaces and to their peers (note 57). The Independent Children's Rights Impact Assessment found that restrictions such as limited time spent outdoors and the closures of schools and playgrounds had a significant impact on children's play, rest, leisure, recreation and cultural and artistic activities (UNCRC Article 31) (notes 58, 59). There is a lack of substantive research that details the impacts of social restrictions on children's play, but concerns have been raised about children re-socialising into ELC and school settings, and about the impacts on children's learning, mental health and well-being (note 60).

# Social and emotional development, wellbeing, and relationships

The CEYRIS survey with Scottish parents of 2-7 year-olds found that parents identified a **range of developmental impacts** on their children during ELC closures and pandemic restrictions, including social and emotional development, wellbeing, sleep and concentration. Negative impacts were experienced more severely and more commonly by children from low-income and one-parent families (note 61).

In terms of **social and emotional development** and **wellbeing**, parents thought that 1 in 10 children had better mood, and 5 in 10 children's mood was worse. Parents thought that 1 in 10 children had better **concentration**, and 4 in 10 children had worse concentration. In the age group of 2-3 year-olds, parents thought that 5 in 10 children had the '**behaviour and emotions** expected of their age', and 5 in 10 had 'difficulties with their behaviour and emotions'. In the age group of 4-7 year-olds, 6 in 10 parents thought that their child had the

'behaviour and emotions expected of their age', and 4 in 10 had 'difficulties with their behaviour and emotions'. Only 6 in 10 children had recently met up with other children at the time of the survey (note 62). There were suggestions that children's confidence may have been impacted by uncertainties around education and increased family pressures (note 63), although our report could not identify any actual evidence of this for young children in Scotland.

ELC and school closures were a significant factor for causing children **stress and anxiety**, and amplified their sense of **loneliness and isolation** (note **64**). Young children also experienced fear of dying, fear of loved ones dying, and struggled with **changing family practices and routines** (note **65**).

Children missed spending time with practitioners with whom they had formed close bonds, both in ELC settings and with childminders (notes 66, 67). Some families experienced positive effects, such as improved **relationships** within the household. These positive effects were less likely to be experienced by low-income households (note 68). Many low-income families experienced additional stress from economic pressures, such as lost income opportunities due to a lack of childcare and additional economic burdens to provide food and educational materials (otherwise provided by ELC settings) (note 69).

Our report could not identify any evidence on how ELC closures may have impacted on young children's **ability to use a toilet**. Reports in England suggested that, according to practitioners, some young children who were previously able to use a potty or toilet had reverted to using nappies during lockdowns (note **70**), and that some school teachers highlighted an increased number of children who started P1 without the ability to use a toilet (note **71**). Across the UK, 52% of low-income families

reported that the pandemic had impacted on their ability to afford nappies and other child-related costs (note 72).

Parents suggested that children's **sleep** was affected: they said that 1 in 10 children slept better during the COVID-19 pandemic, and 3 in 10 slept worse. These results were similar for younger and older children in the survey (note **73**).

### **Nutrition and eating**

The closure of ELC services led to an increased risk for children of inadequate access to **food** (note **74**). Local authorities provided free meals to those children who were entitled through vouchers, direct payments or home deliveries, as well as in the 'Hub' settings (notes **75**, **76**). In addition, some ELC settings delivered food parcels to families (notes **77**, **78**).

For parents taking part in the CEYRIS study, 54% suggested that children's **eating behaviours** at home had not changed from before the pandemic, 14% said it had improved, and 32% said it had got worse. These results did not differ greatly by age group (note **79**).

# Outdoor play and physical development

In the same study, 26% of parents thought their children had spent as much time **outdoors** as before lockdown, and 29% rated time spent outdoors as 'worse'. However, 45% of parents thought that children's amount of time spent outdoors had increased during lockdowns, and this did not differ greatly by children's age. However, it is important to remember the non-representative sample of this study, as 91% of parents taking part had access to a private outdoor space, such as a garden

(note 80). This suggests that, for children and families with no garden access, access to outdoor spaces and the resulting effects will have been experienced differently.

While our study did not identify any evidence on children's **physical development** or the impact of ELC closures on their gross and fine motor skills, some English studies suggest that children's fine and gross **motor skills** were affected by the disruption of early childhood education (notes **81**, **82**) and that some providers noticed delays in walking and crawling in some children (note **83**).

The CEYRIS study reported that children under five's **screen time** had increased significantly during the pandemic (although this increase was less for the under-2s) (note **84**). Concerns have been raised that the increased screen time for children has increased sedentary behaviour and childhood obesity, with marked socio-economic differences (note **85**). However, there were mixed results in the CEYRIS study about children's levels of **physical activity**, with 47% of parents reporting less physical activity, 24% reporting more physical activity, and 29% of parents reporting unchanged levels of physical activity compared to before lockdown (note **86**).

# Language and communication

The closures of ELC, as well as the generally reduced variety of social interactions during lockdowns and the wearing of face coverings, have limited children's exposure to language and communication-enriching environments. In Scotland, **increased speech, language and communication concerns** were recorded at children's 13–15-month (from 4% in January 2020 to nearly 6% in July 2021) and 27–30-month child health reviews (from 10% in January 2020 to nearly 15% in July 2021).

These concerns were greater for boys than girls, and for children from low-income households (note 87). In addition to ELC services, Speech and Language Therapy services were also disrupted severely during the pandemic, contributing to this increase (notes 88, 89). The CEYRIS study highlighted that 10% of parents felt they had needed to use allied health professional (AHP) services, such as speech and language therapists, during lockdown. Of those who felt they had needed the service (n = 916), 52% had used AHP services remotely (online or by telephone) and 4% had used them face to face. However, 44% had wanted to access AHP services during lockdown but had not (note 90). Referrals to Speech and Language Therapy services can be made as self-referrals, by education or health professionals. Therefore, it is likely that the referral process for young children was disrupted due to ELC staff not being able to make such referrals.

A survey of early years practitioners across all Scottish local authorities found that the majority had seen an 'increase' or 'significant increase' in the number of communication needs within their settings, and that this impacted on the children's peer interactions, behaviours, participation, learning, friendships and wellbeing (note 91). Research with under-3-year-olds found that, for those who continued to attend ELC during the pandemic, their language and cognitive development continued to grow (note 92).

Some practitioners in Scotland highlighted that children for whom English is an additional language (EAL) appeared to be more at ease using their home languages on return to settings (note 93). This echoes findings from international literature that ELC closures could lead to increased bilingual language proficiency in young children. For example, one study with Mandarin-speaking children in the United States found that young children's Mandarin proficiency improved, while their English proficiency remained the same (note 94). However, a

study with Polish mothers in the UK who raised their children bilingually found that the COVID-19 pandemic had both positive and negative effects on both languages, resulting from factors such as different childcare arrangements, new language practices, and a lack of travel to either Poland or the UK (note 95). These studies highlight the complexity of language acquisition for bilingual children during ELC closures, and the potential for both positive and negative outcomes.

Education Scotland highlighted that Gaelic Medium Education was drastically impacted by lockdowns, especially for children who were still in the immersion stage and where there was no Gaelic spoken at home. Practitioners suggested that this led to gaps in children's Gaelic language knowledge following lockdowns. For children in the early years, teachers use play, stories and rhymes to support children's early level of Gaelic learning, which was severely disrupted by ELC closures (note 96). Recognising the importance of the early years for language learning, Comann nam Pàrant, the national parents' advice and support organisation on Gaelic Medium Education, in 2021 recruited a team of 3 early years officers to support Gaelic Medium parent and toddler groups and playgroups as part of its COVID-19 recovery plan (note 97).

Scottish parents indicated that they read more books to their young children during lockdown periods, although high-income parents were more likely to do so than other parents (note 98).

# Remote, digital alternatives

The nature of young children's play-based, relational and embedded learning means that their learning could not be replicated online to the same extent as with older children (note 99).

Nevertheless, most ELC settings across Scotland offered online gatherings and activities to children and families during closure periods, and disseminated online resources. This presented a new challenge for the ELC workforce who would not normally engage in remote learning activities. Research with parents suggests that there was a wide range of experiences of support from ELC settings during closures. Parents' ability to engage with their young children's learning depended on the contact and materials they received from ELC settings (note 100).

Guidance on home learning for ELC settings during the pandemic encouraged settings to support parents to understand the importance of play rather than more formal activity (note 101), an aim which research suggests was shared by ELC staff (notes 102, 103). Research with parents suggests that some would have preferred more access to formal literacy-or numeracy-focused tasks in addition to play-based activities, and that some sought these out when they were not provided by ELC settings, while others were concerned primarily about their children's lack of access to play and socialisation with other children (notes 104, 105). Practitioners highlighted that they felt dependent on parents' interpretation and uptake of their remote educational offers, and shared concerns that parents may not be aware of the importance of play-based learning in early years (note 106).

Remote educational offers by ELC staff produced more interactions with parents (they shared photos and videos of their children) rather than with the children directly. This meant that the remote offer was not a substitute for children's interactions with peers and ELC staff. Parental engagement with their children's online learning was higher for the early years (than in older age groups) (note 107). Some parents said the pandemic made them even more grateful for their childminders, highlighting the major role their childminder

played in supporting their family through very stressful times (note 108).

International research highlights the importance for ELC settings of keeping a connection with children and families during closure periods, and that the success of these connections and engagements was highly dependent on the children's home environments and resources (including access to technology and parental support) (notes 109, 110, 111).

Our report could not identify any studies on how children under five themselves experienced these remote educational offers in Scotland.

### **Safety**

The closure of ELC settings has not only impacted on children's education but has raised concerns about children's **safety** and wellbeing. ELC settings are known to be a protective factor for identifying children who are at risk and for being a first point of access for families with particular needs (note **112**). Their closure therefore led to an increased risk for children to be exposed to domestic violence, to a lack of adequate food and to the adverse effects of poor housing and poverty (note **113**). It is likely that the ELC closures as well as the delays to the ELC expansion of funded hours will have longer term consequences for children who were in their early years during the pandemic, especially those from poorer backgrounds (note **114**) (see section on Disproportionate Impacts).

# Re-opening ELC settings with restrictions: changing practices and their impact

Upon reopening ELC settings in August 2020, and for settings operating for 'vulnerable' and key worker children, a number of evolving measures were in place to reduce the transmission of COVID-19 among children and adults.

Returning to ELC settings brought challenges for children, families and practitioners (note 115). When ELC settings reopened, COVID-19 restrictions meant that parents could usually not enter the buildings, which caused parents some worry and feelings of disconnectedness from their child's setting, particularly for those who were attending a new setting (notes 116, 117). Parents expressed disappointment that they missed out on many of the social aspects of ELC when settings reopened, due to pandemic restrictions including staggered start and finish times and discouraging parents to congregate around the door; this made it harder to meet and get to know other parents (note 118). While most parents felt confident that settings would do what was required to manage transmission, 41% were concerned about their child becoming ill with COVID-19, and 49% were concerned about passing COVID-19 to someone else (note 119).

The Children's Parliament's 'Listen and Act' research project (note 120) found that the reopening of ELC was identified by all participating families with young children as the most positive thing to happen since the start of the pandemic.

# Distancing and smaller cohort sizes ('bubbles')

Distancing measures were different for ELC than for schools, reflecting differing risks and patterns of transmission by age group. From the onset of the pandemic until Scotland moved beyond Level 0, various levels of distancing restrictions were in place within ELC settings.

These involved reduced cohort sizes for children in nurseries (which came to be termed 'bubbles' informally) to minimise children's peer contacts, from initially 8 children per group to later 33 children. This required changing the layout of settings, and some settings reduced the number of places/hours offered. For children, this meant that they may have had a reduced variety of peers and staff they were able to interact with, that some relationships were disrupted, and that some children were not able to play with their usual friends. Splitting the environment into separate areas also meant dividing up resources and introducing fences and other boundaries to children's movements (note 121). Some practitioners thought that the smaller cohort sizes enabled them to build stronger relationships with the children (note 122).

Staff were required to distance from other adults (both staff and parents). This meant reduced interactions at drop-off and pick-up times, and parents (and other visitors) being generally not able to enter ELC spaces (note 123). Some practitioners in Scotland indicated that more structured routines at drop-off improved children's separation anxiety (note 124), while some international evidence suggests that separation anxiety may have increased for some children following closure periods (notes 125, 126).

Furthermore, both children and staff were required to adhere to general self-isolation measures and advised to follow Test and Protect measures. While there was no legal vaccination requirement, ELC staff were encouraged to be COVID-19 vaccinated (note 127). Despite some calls from individuals in the sector, an occupational approach for the roll-out of vaccinations to all educational staff was never introduced.

# **Face coverings**

While children under five were never required to were face coverings, staff in ELC had varying requirements to do so. While initially face coverings were required for staff throughout the day, this was later relaxed to apply just when a safe distance to other adults could not be maintained, and did not apply to interacting with children. However, staff were allowed to use face coverings if this was their own preference (note 128).

There is no research on how adults' face coverings have affected young children in Scotland, but international studies point towards children not being able to communicate and relate as well with masked adults (note 129).

A survey of 800 families of deaf children across the UK found that face masks entailed huge communication barriers for deaf children. While the survey did not present results by age group, it suggested that especially for young deaf children, transparent masks were experienced as friendlier (note **130**).

Research in Scotland and other contexts found that young children often understood the rationale behind restrictions and that mask-wearing play or 'not touching' games were frequent (note 131).

Requirements for staff to wear medical-grade face coverings or Personal Protective Equipment (PPE) varied throughout the course of the pandemic. Staff were required to carry out risk assessments to decide on PPE wearing, such as when interacting with children's bodily fluids (nappy changing, toileting accidents, sickness) (note **132**).

# **Enhanced hygiene and cleaning**

Hygiene and cleaning guidelines were specified and updated throughout the pandemic. These involved additional cleaning of spaces and toys, and in some cases led to settings having to remove soft toys and furnishings which were harder to clean. Extra staff time was required for cleaning, placing additional burdens on staff. Both staff and children were required to follow frequent handwashing guidelines. Many young children were able to understand the need for this (note 133), and some children enjoyed the certainty that new routines like handwashing brought to their otherwise disrupted lives (note 134). Some settings introduced guidance around handwashing in playful ways, giving children some flexibility about how and when to wash, whilst others implemented it more strictly (note 135).

# Singing, food and other practices

Guidance around distancing and hygiene practices had implications for many routine activities within ELC settings. For example, in October 2020 it was announced that singing in groups should not happen indoors. At later stages of the pandemic, singing indoors was permitted again if adequate ventilation was in place. Hygiene guidelines led to removing standard ELC resources such as sand, water and playdough for

periods of time. Hygiene guidelines meant that food became prepared predominantly by adults (rather than with children), and food-based activities like shopping or baking were limited. These changes removed important and rich experiential and sensory learning opportunities for young children (note **136**).

# **Outdoor pedagogies**

COVID-19 guidance stipulated that ELC settings should maximise the use of outdoor areas. This further supported the Scottish Government's existing commitment to outdoor learning for children in Scotland, recognising the significant benefits children gain from playing and interacting with/in nature (note 137). Settings that struggled to find sufficient outdoor spaces for all their 'bubbles' looked to community gardens and beaches as alternatives (note 138).

### **Transitions**

Transitions are a key aspect of young children's ELC experiences. They go through many transitions, both vertical (from one type of provision to another, e.g. starting in a new ELC setting, ELC to school), and horizontal (transitions which form a part of each day: home to ELC and back, different rooms/groups within ELC, indoors and outdoors) (note 139).

The importance of planning for and supporting children through transition periods is well documented and embedded in Scottish policy, with transitions for children with additional support needs recognised as particularly sensitive times (notes 140, 141, 142). The way transitions are guided and supported can have a major bearing on how well children settle into their surroundings and has been linked to positive outcomes for children in terms of

their emotional, physical, intellectual and social expectations and adaptations (note 143).

Effective transition practice focuses on: active involvement of parents and carers; clear and shared processes; and exchanging meaningful information, between children, their parents/ carers and staff (notes 144, 145). Many of these practices were severely disrupted during the pandemic, affecting in particular children living with disadvantage (notes 146, 147). For example, children were not able to visit schools prior to starting, or were only able to visit with staff rather than with their parents. This raised concerns about increased anxiety levels for children, especially for those who needed enhanced transition support (notes 148, 149).

A number of guidance documents were published throughout the COVID-19 pandemic. For example, Education Scotland published 'Transitions in the context of COVID-19' in 2020, acknowledging the complex blend of transitions created by the pandemic and the potential for significant impacts on children in relation to both learning and wellbeing (note 150). In response to the changed landscape resulting from COVID-19, the Care Inspectorate published a new Quality Framework in 2022 (note 151). This self-evaluation resource included 'Key Question 5' which asked ELC settings and staff to evaluate how well they were supporting children and families during COVID-19, including in relation to transitions. Such guidance, although necessary and intended to support, nevertheless cut across fundamental principles of effective transition with consequent impacts on children, families, ELC settings and schools.

Transitions were recognised as challenging times for children even before the pandemic, and COVID-19 disruptions have amplified these challenges. Stress during closure and distress after the reopening of ELC, including separation anxiety and distress on the part of some children and parents, have been

cited in international evidence, where child and parental distress after reopening were seen to be positively related (note **152**). Connect's online 'Back to School' survey of parents in Scotland during September and October 2020 was completed by 572 parents across 29 local authorities. It found that 56% of parents of 0–3-year-olds, and 54% of parents of 3–5-year-olds, were worried about their child's return to nursery (note **153**). Even once ELC provision resumed, some parents felt that the pandemic and resulting restrictions had had a negative impact on their child's learning at nursery (note **154**).

Education Scotland's 'Realising the Ambition: Being Me' (2020) (note 155) also notes the potential for a high level of uncertainty around the transition back to ELC settings and the reintegration of children into nursery and school life. In recognition that 'normal' transition activities were no longer possible, ELC and primary school settings were asked to consider: careful planning between ELC and primary schools; digital connections; safe solutions to physical distancing; creative use of outdoor space; and opportunities for play. For those children starting nursery or about to start school, there may have been a sense of relief to be re-establishing a regular routine, but also a worry that parents could not enter the nursery or school buildings, or of feeling more separated from events within their ELC than pre-pandemic (note 156).

# Parental involvement and engagement

Scottish policy recognises the key role of parents as the first and ongoing educators of their children, and that children's learning outcomes are better when parents and other family members are effectively involved in their education (notes 157, 158).

Parental involvement is understood as parents supporting children with their learning (note 159), while parental engagement relates to partnerships between parents, ELC providers and wider communities (note 160). The COVID-19 pandemic and resulting restrictions had several impacts on parental involvement and engagement, most obviously resulting in parents taking over the role of teachers and practitioners (note 161).

For many parents, COVID-19 and the accompanying restrictions increased their stress and anxiety, which had a knock-on effect on relationships with, and support for the learning of, young children, particularly those from disadvantaged groups (notes 162, 163, 164).

Some parents had increased engagement with ELC staff, because some settings made regular phone calls and delivered materials and food parcels (notes 165, 166). Other parents had hardly any contact with their child's ELC setting during the closures (notes 167, 168). On re-opening settings, distancing guidelines meant that parents were not allowed to enter ELC settings and there were decreased opportunities for parents to interact with ELC staff (note 169).

Education Scotland provided guidance for ELC settings and schools on engaging with parents, emphasising that 'ongoing supportive communication between parents and staff is arguably more important than ever' (note 170).

# Impacts of COVID-19 on the ELC sector in Scotland

In addition to the direct impacts on children under five and their families, COVID-19 had substantial impacts on the wider ELC sector in Scotland. In turn, these structural consequences have shaped the context in which young children's learning and experiences are now situated.

# The expansion of funded hours of ELC

As outlined earlier in this report, in 2014 the Scottish Government set out a commitment to almost double the hours of funded early learning and childcare (ELC) from 600 to 1,140 hours per year, equalling approximately 30 hours a week during school term-time or 22 hours a week if used all year round.

In March 2020, the duty on local authorities to provide 1,140 hours of ELC to eligible children from August 2020 was put on hold to allow them to deal with the urgent necessities of the pandemic. The Scottish Government worked with local authorities to understand the impacts of COVID-19 on delivery plans and risks for the expansion. Based on this engagement, the 1,140 Joint Delivery Board recommended a new delivery date of August 2021, accounting for delays in staff recruitment and completing building works (note 171).

As part of the expansion, the Scottish Government introduced a National Standard which providers of funded hours (whether they were local authorities, private businesses, third sector or childminders) needed to meet. In addition, the Scottish Government introduced the principle of 'Funding Follows the Child' which means that families can access their funded hours

with eligible providers (note 172). Interim guidance was issued throughout the pandemic on both policies, and their implementation was affected (note 173). For example, the Care Inspectorate suspended routine inspections in March 2020. This meant that some settings which were working towards improving their Care Inspectorate quality evaluations ahead of the introduction of the National Standard in August 2020 did not have an opportunity to complete this work, or for an inspection to take place, in time (note 174).

Although the increase to 1,140 hours was put on hold until August 2021, all eligible children across Scotland were still able to access at least 600 hours of funded ELC. Many authorities were already offering 1,140 hours in advance of this statutory duty, to some or all eligible children (note 175). A 2023 report by Audit Scotland found the Scottish Government, councils, and partners 'did well to increase early learning and childcare (ELC) provision to 1,140 hours a year per child', by August 2021, despite the challenge of the pandemic. The report also found that councils had completed 'most of the infrastructure projects and had significantly expanded the workforce' (note 176). However, it stated that 'the sector remains fragile' because of workforce recruitment and retention, and the sustainability of private providers. Potential reductions in provision risk limiting flexibility and choice for families, which are important to achieving the intended policy outcomes. There were also data gaps at local government level (e.g. information on children accessing funded ELC), making it harder for local authorities to plan and manage services (note 177).

The main aims of the ELC expansion were to improve children's outcomes and help close the poverty-related attainment gap, to increase family resilience, health, and wellbeing, and to support parents into work, study, or training (note 178). Child poverty in Scotland was increasing prior to the pandemic and COVID-19 further increased levels of social and economic inequality and

poverty (note 179). While there exists no research specifically on the impacts of the delayed expansion in Scotland, wider research suggests that it will have exacerbated the effects of the pandemic in terms of children's development and learning (note 180).

# Impacts on the ELC workforce

#### **ELC** workforce overview

The ELC workforce in Scotland is comprised of managers/heads of ELC, senior practitioners, Excellence and Equity lead practitioners, practitioners including childminders, teachers, and support staff, each with different experiences and qualifications. In 2020, 97% of the ELC workforce in Scotland were women, white, and relatively young. Only 1% belong to minority ethnic groups (compared to 4% of the overall Scottish workforce) (note 181). Prior to the pandemic the Scottish Government ran a national recruitment campaign to attract people to a career in ELC, including pilot projects to support more men and people from minority ethnic communities into the profession (note 182). The sector is also aiming to attract people with more life experience (career changers and returners) (note 183).

Private partner providers are an important element of delivering the funded hours of ELC: in 2022, 69% of staff were in local authorities, 30% worked for funded partners and 1% were childminders (note 184).

#### Impacts on workforce responsibilities

ELC staff in general, and managers in particular, were reported to experience increased levels of stress due to: changes to

working hours and patterns and expectations of work; intensified bureaucracy; competing demands on time; closure and reopening of provision; and creation of bubbles within ELC settings and hubs within schools (notes 185, 186, 187, 188).

The impacts of COVID-19 on teachers in schools are well documented but less is known about teachers in ELC. The peripatetic model (one teacher working in multiple nursery settings) was impacted by restrictions placed on people visiting more than one establishment (note **189**).

The ELC workforce was often characterised by its resilience and creativity, adapting to new ways of working such as reading bedtime stories online, or meeting parents face-to-face in the nursery car park. Research reveals that such tasks made staff feel useful and provided a sense of professional commitment (note 190).

#### Impacts on workforce development and training

Skilled and well-qualified practitioners are a key element of high-quality ELC, making a proven difference to children's learning and development, particularly for children from low income and for at-risk families (note 191).

A range of further and higher education qualifications are required for ELC staff, depending on their roles within ELC. The Scottish Social Services Council (SSSC) deals with registration of the workforce, including recognition of different qualifications. The National Certificate in Early Education and Childcare (NC) and the Scottish Vocational Qualification (SVQ) Social Services Level 6 qualify individuals to become a support worker in ELC. The Higher National Certificate (HNC) in Childhood Practice and the SVQ Social Services Level 7 qualify individuals to become a practitioner in ELC, and provide opportunities to join

Modern Apprenticeship schemes. Courses to become a manager or lead practitioner in ELC include the BA Childhood Practice, the SQA Professional Development Award in Childhood Practice, the PG Diploma in Childhood Practice, Masters in Childhood Practice or Graduate Apprenticeships. Each of the above has, as a core component, either a requirement for practice-based experience in an ELC setting or an expectation of learning on the job.

The practice or placement-based elements of learning were often disrupted during the pandemic due to restrictions on visitors to settings. Most qualification providers switched to forms of remote provision (note 192).

Compulsory online training and self-assessments were introduced (for example by the Care Inspectorate) on COVID-19 infection prevention and control, including the use of personal protective equipment (note 193).

#### Impacts on workforce wellbeing

The wellbeing of the Scottish ELC workforce has been shaped by poor working conditions (note 194) in general. Annual turnover of staff is high, particularly amongst those in the private sector, and there is a reliance on an inadequately qualified, low status, and poorly paid workforce (note 195). Even before COVID-19, many ELC practitioners suffered from burnout and stress, which affected their emotional well-being and mental health (note 196).

It is evident from a range of studies, both within Scotland and internationally, that COVID-19 had a substantial impact on the ELC workforce, through further amplifying the demands of the role, which contributed to lack of job satisfaction and poor mental health (notes 197, 198, 199, 200).

The ELC Directorate worked with Early Years Scotland to develop an ELC Wellbeing Hub, launched in July 2020. It included a website providing practical advice and opportunities to connect with other staff, and a series of online events which received positive feedback (note 201). Further research is needed to better understand the impacts of the COVID-19 pandemic on the complex nature of the ELC workforce including variations across locations, types of provision, and communities served (note 202).

#### Impacts on recruitment and attrition

Prior to the COVID-19 pandemic, there were long-term issues in recruiting and retaining staff within ELC, especially highly-qualified staff (note 203). This has been exacerbated by the pandemic and the staffing needs of the expansion, and some stakeholders have expressed concerns that this could compromise the quality of ELC in the long term (note 204).

A sense of lack of recognition for the hard work of ELC settings and staff during the pandemic has left the sector even more strained. There is a high level of turnover in the ELC workforce, which is losing more experienced and qualified staff, mainly due to low salaries and lack of career progression. Only 37% of private services currently pay staff the Living Wage (note 205). The Scottish Childminding Association predicts that by 2026 there will be a 64% decline in the number of childminders (note 206).

The majority of ELC services have lost at least one staff member since March 2020. Services in the private sector were most likely (86%) to have lost a staff member since March 2020 (note 207). Many funded providers had to restructure their business models and further invest in their settings in anticipation of delivering for the expansion. Centres also faced

additional costs when health and safety guidance was in place (note 208).

Settings had to place staff on furlough, with staff with no qualifications the most likely to be furloughed. A number of staff had voluntarily terminated their contracts because: 'they found early years low pay and very stressful'; 'the stress of the last year has impacted on their well-being and the uncertainty of a job'; and 'want to earn a higher wage which they can in other jobs e.g., Tesco, receptionist at a hotel' (note 209).

# **Integrated working with other services**

Partnership and collaboration with other services are recognised as significant features of effective ELC settings in Scottish policy (note 210). ELC staff are often the first to recognise the needs of children and to signpost and connect families with other services. During lockdown periods, many families' access to health visitors and family nurses, and to allied health professionals such as physiotherapists and speech therapists, was severely disrupted (notes 211, 212).

For most children in ELC settings, their Named Person (the central point of contact for children and families, with responsibility for providing information and helping them get support) is their health visitor, so it is likely that changes to partner services such as the NHS affected partnerships with ELC settings (note 213). ELC settings were advised to continue working in partnership and avoid working in silos, and reminded of the importance of inter-agency working and child planning meetings (notes 214, 215). Anecdotal evidence suggests that some parents preferred the online meetings over in-person meetings that they experienced during the pandemic. This highlights the potential to learn from some pandemic practices

by listening to the preferences of individual parents and children and providing choice where possible.

Distancing guidelines upon reopening had a major impact on ELC settings' use of peripatetic staff, on partnership working with schools, local businesses and organisations, the local community, invited guests, and trips including the use of public transport (note 216).

In some cases, ELC settings worked in partnership with third sector and community organisations to provide financial and practical support for families (notes 217, 218).

# Beyond ELC: informal learning opportunities, networks and classes

Young children's learning is significantly shaped by their home and community learning environments (note 219). While not formally included in the definition of ELC in Scotland, there is a range of educational offers for young children – particularly babies and toddlers – which they attend in the company of their parents and which provide important educational opportunities. These were affected by the pandemic.

While overall children's attendance of ELC services is rising (both funded ELC and self-funded ELC), there are many children under five in Scotland who either attend only part-time or attend no ELC at all. This is because even the 1,140 funded hours do not provide full-time ELC, because most children under three are not eligible for funded ELC, and because the cost of ELC is prohibitive for many families, especially one-parent households (note 220).

Thus, it is important to recognise the importance of educational offers beyond funded ELC. These offers are provided by third-sector organisations, including churches, for example in the form of non-funded playgroups (generally running during term time and asking for a donation of £1-2 towards their running costs). There are also private offers such as baby sensory, baby massage or baby and toddler music classes.

Bookbug (the universal book-gifting scheme operated by the Scottish Book Trust, funded by the Scottish Government) provides free sessions for children under five and their parents and carers in Scottish public libraries, including songs, rhymes and stories. During lockdown periods, many libraries offered online Bookbug sessions (note 221).

Some of these optional educational offers overlap with peri- and postnatal classes and support for parents and carers, such as breastfeeding support and other practical and wellbeing support services. While this report could not identify any studies on the impact of such closures for young children in Scotland, it has been established that the lack of social support for new parents, particularly mothers, during the COVID-19 pandemic has significantly increased their risk of depression and poor mental health (notes 222, 223). While many classes were moved online during the pandemic, research suggests that in-person support classes are more effective at improving baby-parent bonding and skills and confidence as a new parent (note 224). In turn, parents' poor mental health impacts on their ability to develop warm, sensitive and nurturing relationships with their child, with implications for children's home learning environments (note 225).

Many parents reported that they were still struggling to access baby and toddler and other community groups in 2021, either because they were no longer running at all in the local area, or because they were running with some restrictions which made waiting lists longer. The need to book online affected the accessibility of these groups, which for many had been their main appeal (notes 226, 227). The loss of learning opportunities such as swimming lessons and access to leisure pursuits with children has been important. For those whose children were not yet eligible for funded ELC, the loss of these opportunities was felt very keenly (notes 228, 229).

These changes to informal support networks and learning opportunities were especially felt by disadvantaged groups and those having babies during lockdowns (notes 230, 231).

# Disproportionate impact on particular groups

It is well evidenced that the pandemic exacerbated existing inequalities (notes 232, 233, 234). Children as a group were particularly exposed to the impacts of COVID-19 restrictions due to their dependency on adults and their lack of independent access to spaces and resources (note 235). Within the group of children under five and their families, as with other children and young people, 'families already at risk of poorer outcomes have suffered the most' (note 236).

The following groups of children under five were disproportionality affected by the pandemic. Children are often affected by more than one form of oppression or marginalisation – for example, minority ethnic children are more likely to experience poverty – and it is therefore important to take an intersectional approach to addressing these inequalities (note 237).

# **Children in poverty**

There were many direct impacts on the financial pressures experienced by families, including job losses and furlough and their emotional and financial toll. Those in low-paid or precarious positions pre-pandemic were at higher risk of job losses than others, and the direct costs of additional heating, food and connectivity had a greater impact on families who had less to start with (notes 238, 239, 240, 241). Poverty affects and intersects with all aspects of life, such as disability, ethnicity, gender, child protection interventions and child removals, exclusion and marginalisation, and family structure

(notes 242, 243), further compounding disadvantage in complex ways, many of which remain largely unexplored.

Quantitative and qualitative research strongly indicated that lockdowns were especially difficult for less affluent families. The CEYRIS study with Scottish parents found that children aged 2-7 in low-income families were less likely than others to be doing well psychologically and behaviourally, and parents in low-income families reported a greater 'decline' than others across all areas of their children's lives except physical activity (note 244), a finding borne out by qualitative research (note 245).

The challenges for low-income families were exacerbated by gaps in available support (note 246). For some families experiencing financial insecurity, the resultant stress made it harder to support their children's learning and meant that they were not always able to support the learning as much as they wanted to (notes 247, 248). In accordance with this, CEYRIS found that children in high-income families took part in more home learning activities than children in low-income families (note 249).

It is well evidenced that the poverty-related attainment gap begins in the early years, and in Scotland there was already a focus on reducing the attainment gap in early years (often referred to as the 'outcomes' gap) pre-pandemic (note 250). As highlighted earlier in this report, the expansion of funded hours was delayed. This meant that some eligible 2-year-olds were not able to access ELC as planned (note 251).

UK-wide studies using parent-reported data have found that high-quality, centre-based ELC among those who continued to attend during the pandemic had a greater positive effect on children from disadvantaged backgrounds than for other children, especially in relation to vocabulary development, communication, and problem solving (notes 252, 253). Scottish

Government research found that the biggest worry for families on low incomes was the impact of school and ELC closures on their children's emotional, mental and academic development (note 254).

Health visitor and GP services were less likely to have been accessed by low-income parents than by high-income parents during lockdowns, while family support workers, ELC staff, and community organisations were more likely to have been accessed by low-income parents than high-income parents (note 255). Thus, ELC closures will have been felt more starkly by this latter group.

# Care-experienced children and children on the child protection register

Children on the child protection register and care-experienced children were disproportionately affected by COVID-19 and the resultant closures and restrictions (note 256). Issues affecting many families in this group included: a lack of access to face-to-face services including social work and family support; the low uptake of school places for 'vulnerable' children; concerns about 'hidden harm' for families which did not meet the threshold for child protection registration but required more support than universal services could provide; and worries about the impacts of lockdowns on domestic violence. These concerns applied to children of all ages, including those under 5 (notes 257, 258, 259, 260). In addition, some specific issues are evident for those aged under 5.

Local area social work services have expressed concern about whether the needs of new parents were being identified and met during the pandemic, highlighting that parents of very young children had not had access to the support of family, friends, and informal groups that they usually would have had (note **261**). Those with the youngest children were prioritised for face-to-face appointments with health visitors and family nurses, but these appointments could not take the place of the daily interaction and practical support that may otherwise have been provided by ELC. Although referrals to the Children's Reporter declined overall between April 2020-March 2021 compared to the same period in the previous year, there was a higher frequency of referrals for children under 2 (note **262**).

Although many third-sector services continued to provide services online and became involved in providing essential goods such as food parcels, the redirection of services to those identified as being at the highest risk meant that some who were previously receiving face-to-face support or respite services could no longer receive them, leading to increased stress on families and negatively impacting on wellbeing. As one parent of young children explained in a Save the Children report:

"Before, I had a volunteer twice a week. I used one of these sessions to do essential household chores. ... The other session I used for swimming lessons for them because you need one adult per child. And those swimming lessons were the best thing we did, it made them happy, it got them active and me out of the house and it became my weekly shower because at the pool after the lesson, the volunteer would stay with the twins and we'd have a coffee and I'd get my shower. So those visits were survival for me. ... I was overwhelmed all the time, I was on the verge of tears constantly, the whole time. With all this suddenly cut that was very difficult." (note 263)

Evidence from third sector organisations in Scotland suggests that many parents struggled during the pandemic, with an increase in calls to helplines such as ParentLine and the NSPCC helpline, including an increase in calls focusing on concerns about financial and emotional wellbeing (note **264**). Children 1st highlighted the increased referrals to their Family Group Decision- Making service for children under the age of 5 (note **265**).

# Children from minority ethnic groups, refugees and families seeking asylum

Research in Scotland has highlighted the disproportionate impact of the COVID-19 pandemic on minority ethnic populations, both in terms of experiencing the highest COVID-19 infection and death rates and social impacts. Discrimination and racism are key drivers behind these inequalities, and any successful interventions thus need to aim at dismantling racism (note 266).

In qualitative research about the impacts of COVID-19 with children of colour in Scotland, in which 9 of 35 participants were under 5, children said they did not feel listened to by people in power, including 'teachers, GPs, other healthcare workers, politicians at local and national levels, courts, lawyers, the general public and their own communities' (note **267**).

A wider body of research highlights an increase in racist abuse faced by members of East and Southeast Asian Communities in Scotland and worldwide during the COVID-19 pandemic. Children of colour in Scotland were subject to racist abuse, for example by being called racist names in public spaces or facing racist exclusions by peers (note **268**).

The stress of living through a pandemic was not experienced equally. In a UK-wide study of parents of babies, almost 9 in 10 parents said they felt more anxious since lockdown but Black

and Asian parents were more likely than white parents to say they felt 'a lot more anxious' (note 269).

For some new single mothers seeking asylum, the isolation of the pandemic restrictions was compounded by a lack of practical support; some reported that the only help they were offered was intervention from social services, which they did not want to take up due to fears about child removals (note **270**).

The impacts of face masks on the speech and language development of young children are not well understood, but research with older children suggests that some with English as an additional language found it harder to understand what people were saying when they were wearing face masks (notes 271, 272).

Minority ethnic people were disproportionately employed in key worker roles. As well as the direct impacts of being more exposed to the virus, this had negative impacts on mental health, and entailed financial difficulties when they could not afford to self-isolate. Some essential jobs, such as cleaning, were not defined as essential for the purposes of education provision, which created a childcare challenge for some key workers who were unable to utilise ELC provision during closures (note 273).

The change in immigration rules resulting from Brexit coincided with the pandemic. This meant that many EU nationals – newly arrived and already settled – had difficulties accessing employment and welfare entitlements during the pandemic due to difficulties getting a National Insurance Number while offices were non-operational. This meant that access to Universal Credit or Child Benefit for some new mothers was particularly challenging (note 274).

Like the Children's Rights Impact Assessment on Education (note 275), our report could not identify evidence on the impact of the pandemic on the delivery of education to gypsy traveller children and children within Roma communities under five.

# **Children with additional support needs (ASN)**

This section should be read in conjunction with the report commissioned by the Scottish COVID-19 Inquiry which focuses solely on ASN, highlighting the impacts of the pandemic on the rights and participation, education, and wellbeing of children and young people with ASN (note 276). Although that report does not specifically cover children under five, it is likely that many of the same issues affect families with young children.

In Scotland, the concept of ASN is intended to be 'broad and inclusive' (note 277), in order to meet children's needs as they arise, rather than requiring a diagnosis or label to access support.

Children with ASN are not one homogenous group: the term ASN covers a wide range of needs. Children with different needs were affected differently by the pandemic and resulting restrictions but, overall, children with ASN were disproportionately affected. Understanding the specific impacts of pandemic restrictions on children under 5 with additional support needs is challenging as there appears to be limited research in this area.

In line with children in other age groups, the proportion of children under five recorded as having an ASN was rising consistently pre-pandemic, partly due to improved reporting and widening of the definition of ASN. This trend continued throughout the course of the pandemic; there does not seem to

have been a sudden increase in recording (notes **278**, **279**, **280**, **281**, **282**).

There were challenges in recognising, diagnosing and responding to ASN for children and young people in general during the pandemic (notes 283, 284), and anecdotal evidence suggests that this was also the case for some children under five. As highlighted in the 'integrated working' section, ELC staff are often the first to recognise children's needs and to connect families with other services. During ELC closures, many families experienced disrupted access to ELC staff, NHS staff and allied health professionals (notes 285, 286). It is important that the needs of very young children are met in a timely and sensitive way, to support their development and enable them to benefit as fully as possible from their education. In addition, some people find diagnoses helpful to help them to understand children's needs and behaviour, and diagnoses were sometimes delayed during the pandemic (note 287). Some parents of children with ASN struggled to get the support they needed to meet their children's needs (note 288), sometimes with consequences that affected family relationships, day-today life, financial security (due to parents having to give up work) and the wellbeing of both children and adults (notes 289, 290, 291, 292, 293, 294).

Restrictions affected parents' ability to make informed choices regarding which ELC provider to send their child to, because they could not visit settings or meet staff face-to-face. For those with children with additional support needs this was particularly difficult as it was harder to make decisions about the appropriateness of settings (note 295). Transitions for children with additional support needs are particularly crucial and require sensitive planning (notes 296, 297, 298), and for those who required enhanced support for these transitions, it is likely that anxiety levels were increased during the pandemic, when COVID restrictions were in place (notes 299, 300). For many

older children with ASN, the closing, reopening, then closing again of schools was difficult to adjust to (note **301**), and UK-wide evidence suggests that this affected the subsequent school attendance of children and young people with neurodevelopmental conditions (note **302**). Anecdotal evidence suggests that this was also the case for those under five.

For children whose ASN were already recognised or diagnosed at the onset of the pandemic, mechanisms for partnership working such as Child Planning Meetings remained in place, albeit online, although pandemic response led to changes within organisations such as NHS Scotland which affected partnerships with ELC settings (notes 303, 304, 305). Some children with ASN were offered a space at hub settings during closures, but eligibility criteria were inconsistent across local authorities.

Some children under five considered to be potentially at higher risk from COVID-19 were advised to shield at various times throughout the pandemic. This meant that they had less access to ELC during closures, when some may have otherwise been eligible as children of key workers or 'vulnerable' children, and at some points when provision was open but those considered clinically vulnerable were advised to shield (note 306).

Young children with long-term serious health conditions were disproportionately negatively affected by ELC closures, particularly affecting their sleep and ability to concentrate. In addition, parents of children with long-term conditions more commonly reported concerns around their own mental health and wellbeing during lockdown (note 307). Research with older children in Scotland highlights that disabled children were disadvantaged by reduced or modified access to specialist provision (note 308).

# **Children in families of different sizes**

Some **one-parent families** were particularly affected by the isolation resulting from lockdowns and pandemic restrictions. One-parent families were more likely to report lower levels of mental health and wellbeing, and more likely to have a long-term mental or physical health condition, than those in a household with two or more adults (note **309**). The lack of access to services, support and respite precipitated by the pandemic may have especially affected adults in one parent families, who were unable to share the work involved in childcare and education with another adult (note **310**). It was harder for lone parents to find time to work or study, and lone parents did not automatically qualify for ELC Hub places (note **311**).

Research also highlights that children in one-parent households were less likely to have had access to green space and outdoor activities, experienced more emotional or peer problems, and took part in fewer home learning activities, than those in a household with two or more adults. It is likely that this is indicative of the fact that one-parent families are more likely than others to be on low incomes (note 312), and those on lower incomes were disproportionately negatively affected by pandemic restrictions.

Similarly, larger families (those with three or more children) are also more likely to have low incomes and thus to have experienced many effects of the COVID-19 pandemic disproportionately (note 313). Earners in larger families were less likely to be on permanent contracts and more likely to be stay-at-home parents or self-employed (note 314). Children in larger families experienced a greater decline of imaginative play and time spent outdoors than those in smaller families, and children in larger families took part in home learning activities

less frequently (note **315**). However, children in larger families slept better (compared to other families) during lockdowns, and their parents fared better in terms of mental health during lockdowns (note **316**).

For children with no siblings, closures may have led to a lack of interaction with other children (note 317). However, anecdotally, many families in Scotland live in shared gardens, and children were able to play with other children in these gardens throughout much of the pandemic.

# Children in rural areas

Rural and island communities in Scotland were disproportionately affected by the pandemic in terms of economic outcomes (and impacts on rural businesses) and isolation and mental health. However, the increased use of digital communication enabled communities to be better connected, but concerns about digital divides were also raised (note 318).

In rural and island communities, ELC closures affected the mental health of children negatively, but on many occasions also led parents and children to find creative ways of spending their time together. Young children displayed more long-standing behavioural changes (note 319). The pandemic had a negative impact on rural parents' wellbeing, especially that of mothers, and there are concerns about women's longer-term mental health, and gender equality (note 320). Parents reported a lack of suitable high-quality childcare (in terms of cost, logistical challenges involving e.g. distance, and different childcare settings for siblings of different ages), which had already been an issue pre-pandemic (note 321).

In rural and island communities, ELC services tend to be provided by childminders, third sector and local authorities, with fewer private settings operating. These settings are typically smaller and face higher operating costs, placing risks on the sustainability of ELC provision post-COVID-19 pandemic (note 322).

### Children's participation

Children have a right to have their views heard and taken into account in decisions that affect them (Article 12, UNCRC). The COVID-19 measures affecting ELC and young children's lives in general were devised and implemented by adults assuming they were in children's 'best interests'. However, as the Child Rights Impact Assessment on Education (note 323) found, children were not consulted about the closure and re-opening of settings as well as the adaptation of practices within ELC, despite the established evidence around the importance of including children's views in planning processes which affect their lives. Consequently, children's own abilities and solutions were not included (note 324).

Both within practice and policy planning, ELC settings shifted towards protecting children rather than enabling their participation. Children's right to survival was prioritised over the enabling of other rights (notes 325, 326, 327). Even once it became apparent that young children themselves were less likely to be infected, and to experience serious symptoms from COVID-19, restrictions placed on their education were often to protect the survival of other age groups (note 328).

Many participatory practices in ELC settings – such as children's 'free flow' movements between different rooms, children's decisions whether to be indoors or outdoors, or children's active involvement in daily activities like planning, shopping, cooking – were curtailed by physical distancing measures (note 329).

Furthermore, this report highlighted a lack of research which includes children under five's own voices on their experiences of ELC during and after the COVID-19 pandemic. Notable exceptions are the '15 Stories' by the Children's Parliament

(note **330**), Pascal and Bertram's study on children's narratives during COVID-19 (note **331**), and Blaisdell, Daramy and Sarma's research with children of colour (note **332**). The findings of these studies highlight that young children want to be heard and involved in decisions that affect them, and that they want (and can understand) transparently shared child-friendly information around COVID-19.

# Future challenges and strategies for ELC in Scotland

According to Audit Scotland (2023), the funded ELC take-up among three- and four-year-olds remains high and 'most parents are happy with the flexibility available'. More two-year-olds are now receiving funded ELC, but 'many more are estimated to be eligible' (note 333). In 2020, there was a temporary decrease in children's uptake of funded ELC: 95% of eligible three- and four-year-olds were registered for funded ELC, down from 98% in 2019, and 9% of two-year-olds were registered, down from 11% in 2019. This may be due to parents choosing not to send their children to ELC during a pandemic because of fear of transmission (note 334). However, as stated earlier in this report, uptake of funded hours has been rising since 2020 for three- and four-year-olds (95% in 2020, 97% in 2021, 99% in 2022) and for two-year-olds (9% in 2020, 13% in 2021, 14% in 2022) (note 335).

There has been a tendency among policymakers, and some researchers, to focus on young children's 'learning losses' during ELC closures, and to compensate these through 'catch up' agendas suggesting an intense focus on children's academic learning (note 336). There is a risk that such narratives displace the importance of play-based approaches for young children in favour of more structured approaches to learning (notes 337, 338).

A study with over 400 early childhood experts and practitioners in Wales focused on actions to mitigate the impact of the COVID-19 pandemic on children under five (note 339). It found that experts and practitioners were highly critical of 'catch up' agendas focusing on children's academic learning in ELC. Instead, experts and practitioners identified the following three

strategies to mitigate the impact of the pandemic on young children:

- (1) Ensure high-quality ELC practice and pedagogy: that is supportive of play (including social play, indoor and outdoor play); that is less focussed on formal learning and more focussed on play and exploration (e.g. loose parts play, fantasy, talking and listening, creative activities, unstructured high-quality play opportunities and time for exploring); that creates a sense of belonging for children; that creates a calm supportive environment, giving time for children to speak not rushing them; that develops confidence and risk-taking in children.
- (2) Support families and communities: by ensuring children experience a positive home environment; by supporting families financially and emotionally; by providing more neighbourhood-based play and family support interventions); by supporting parents to enable children's speech and language learning at home (e.g. through close interaction, stories and rhymes); through free events and activities in local spaces to allow children to experience new environments and develop physical skills.
- (3) Address ELC finance and resourcing: by increasing highquality funded ELC opportunities for all children; by ensuring play-based learning in an outdoors/nature-based environment is available to all children; by supporting universal rather than targeted access; by ensuring speech and language therapy is available at an early intervention stage.

The evaluation of the roll-out of the expansion of funded hours will be published in 2024 (note **340**). In the meantime, there is some evidence that some families struggled to access provision that suited their needs when ELC reopened (notes **341**, **342**). For nearly three-quarters of parents, COVID-19 has not had ongoing impacts on their use of ELC. However, around a fifth

mentioned they had reduced since August 2021 the amount of ELC they used. Often this was because their provider had cut back their hours or had closed. In some cases, the parents had cut back the hours used – for example, to self-isolate, because of illness, or through personal choice (note 343). Some parents mentioned that providers had become less flexible (note 344).

The poverty-related attainment gap has led the Scottish Directors of Public Health to suggest that local areas could provide additional access to resources and activities to children under 2, to help close the attainment gap before attendance of ELC (note 345).

As previous sections of the report have showed, the ELC sector in Scotland remains fragile in terms of recruitment and financial sustainability (notes 346, 347).

The Scottish Government recently (September 2023) made a commitment to enable those delivering funded ELC in private and third-sector services, including childminders, to be paid at least £12 per hour from April 2024 (note 348).

In the future, it is important that local authorities and Scottish Government work together to develop a sustainable plan for the workforce and sector (note 349) to implement high-quality ELC for all children under five in Scotland. For this age group, it is especially important that post-COVID-19 education not only engages children in curriculum-based learning but also enables opportunities for play and re-building relationships (note 350). Partnerships between children, families, communities, ELC providers and policymakers are needed to ensure that ELC planning is crisis-resilient in the future (note 351).

### **Conclusion**

This study has highlighted the deep and extensive impacts of the COVID-19 pandemic, and policy responses to it, on the education of all children under five in Scotland. It has summarised research on the impacts of closing ELC settings, of changing practices within settings, and of wider structural impacts on the sector – from the delays in expanding funded hours to the significant impact on workforce wellbeing, recruitment and attrition. As this study shows, the impacts on children's rights – to education, and to other rights – have been profound.

While this report has identified a wealth of relevant evidence, there exist some important gaps. For example, the views of children under five themselves are relatively absent from research, as is research with and about particular groups of children, such as Gypsy Traveller children.

The pandemic had some positive impacts, such as improved family relationships, but these were mostly experienced by higher-income families.

Our report has shown that there are deep structural inequalities that shape children's lives in Scotland, and the COVID-19 pandemic has highlighted and exacerbated these. Children from low-income and one-parent households or larger families, children with additional support needs, children from minority ethnic groups, and children considered 'vulnerable' in other ways (such as being on the child protection register) have been disproportionately affected. Research suggests that these underlying inequalities need to be addressed as part of efforts to mitigate for the impact of the COVID-19 pandemic on young children. As research has shown, high quality ELC is a key means for addressing complex and intersecting inequalities,

and for improving the outcomes for young children and their families in the short, medium and long term.

The re-opening of ELC settings in itself does not constitute a return to 'normality'. The challenges for the sector are not to be underestimated. Our report has highlighted some of the ongoing issues for ELC in Scotland, such as the sector's financial sustainability and workforce issues. Research has highlighted the importance of high-quality play environments, of pedagogies which support children's exploration and belonging, and of financial and emotional support for families and communities. Children themselves, families and practitioners need to be involved in the research and planning for ELC in Scotland, to ensure that their views can be taken into account.

### List of abbreviations

#### AHP

Allied Health Professionals

#### ASN

Additional Support Needs

#### BAME

Black, Asian and Minority Ethnic

#### BME

Black and Minority Ethnic

#### • CEYRIS

COVID-19 Early Years Resilience and Impact Survey

#### • EAL

English as Additional Language

#### • ECE

Early Childhood Education

#### • ECEC

Early Childhood Education and Care

#### • ELC

Early Learning and Childcare

#### • GP

**General Practitioner** 

#### • HNC

**Higher National Certificate** 

#### • NC

**National Certificate** 

#### NHS

National Health Service

#### NSPCC

National Society for the Prevention of Cruelty to Children

#### • PG

Postgraduate

#### PPE

Personal Protective Equipment

#### • SIMD

Scottish Index of Multiple Deprivation

#### • SSSC

Scottish Social Services Council

#### • SVQ

Scottish Vocational Qualification

#### • UNCRC

United Nations Convention on the Rights of the Child

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All hyperlinks were active at time of submission on 28 November 2023.

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## **Notes**

- 1. We use the term 'vulnerable' in inverted commas to acknowledge the contested nature of this term. What and who counts as 'vulnerable' is socially constructed. Even within Scottish policy and reports, there is no unified definition of 'vulnerability'. Further, conceptualising some groups of children as 'vulnerable' risks individualising specific issues rather than transforming the structures that give rise to this 'vulnerability' - such as poverty or gender-based violence (Cheney, 2010). There is also a risk that the term stigmatises 'vulnerable' children, entrenches uneven power relations (between children and adults, between 'vulnerable' and 'non-vulnerable' people or 'experts') and does not acknowledge children's own agency (Kamenarac, 2021). Barnardo's Scotland (2020) suggested that the term 'vulnerable' may have caused some families not to take up Hub spaces during the pandemic, because they did not want to be identified as having social work involvement or did not want to be seen as 'not coping'.
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