



Effects of Covid-19 on LEAP's population and workforce

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Lambeth Early Action Partnership



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Background & Rationale

LEAP needed to quickly understand:

- How the pandemic was affecting families, practitioners and services;
- Whether these impacts were being felt proportionately;
- The likely short, medium and longer term impacts of the Covid-19 pandemic.



UK newspaper headlines from March 23, 2020

Research plan

Phase 1

Capture the **immediate** impacts of Covid-19

Phase 2

Capture the **intermediate** impacts of Covid-19

Phase 3

Capture the **longer-term** impacts of Covid-19

Mar - Apr 2020

May – Nov 2020

Dec 2020 - 2021

Research questions

Our research questions focused on:

- 1. Need**
- 2. Reach**
- 3. Provision**
- 4. Outcomes**



Phase 1: opportunistic insights

Overview

A rapid exercise to inform our early thinking and response activities:

- Mar – Jun 2020 (during the first national lockdown)
- Insights gathered opportunistically from LEAP families, practitioners and partners
- Optional to contribute to
- Received input from at least 12 LEAP services and LEAP core team members

Opportunistic insights: findings

Theme	Subthemes
Child health, wellbeing and welfare	Mental health and wellbeing; medical and dental needs; safeguarding
Family relationships	Interparental conflict; domestic violence; lone parenting
Finance and employment	Job insecurity; unemployment; income loss; financial advice
Food insecurity and nutrition	Access to food; FSM replacements
Housing	Overcrowded housing; housing insecurity
Inequalities	BAME; NRPF; digital exclusion
Parental health and wellbeing	Mental health and wellbeing; isolation and loneliness
Home learning and education	Home education; access to play and educational resources

Phase 1: secondary research

Research briefing

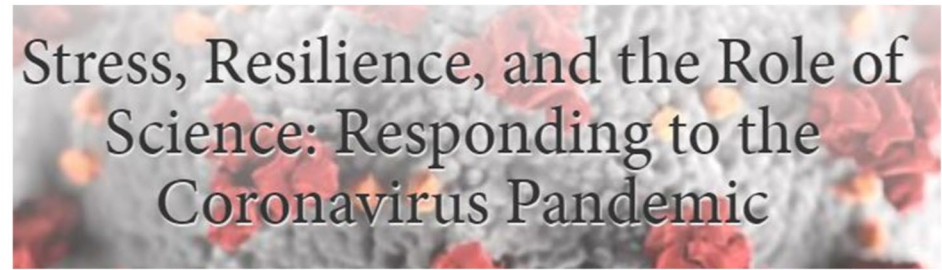
- Collated emerging national and international evidence about the impacts of the Covid-19; pandemic on early childhood development (ECD);
- Identified six key themes that were linked to LEAP's priority areas;
- [Report](#) was published on LEAP's website in April 2020.

**CHILDREN OF THE PANDEMIC
POLICIES NEEDED TO SUPPORT CHILDREN
DURING THE COVID-19 CRISIS**

Institute for Public Policy Research, March 2020

**Coronavirus and early intervention:
Confronting a new world for families,
children and vital services**

Early Intervention Foundation, March 25, 2020



**Stress, Resilience, and the Role of
Science: Responding to the
Coronavirus Pandemic**

Center on the Developing Child, March 20, 2020

Secondary research

Six key themes

Social implications

- Impacts of Covid-19 not felt equally across society

Physical health

- Child diet and nutrition
- Child access to outdoor/green space

Mental health and wellbeing

- Parental mental health
- Child and adolescent mental health

Education

- Educational inequality

Financial implications

- Household income
- Child poverty

Vulnerable children & families

- Inadequate housing
- Domestic abuse
- Single parent families
- Looked after and SEND children

Phase 2: Primary research

- Fieldwork with families and practitioners to understand the impacts on **families' needs** and **engagement with services**
- Mixed methods approach
- Three workstreams:
 1. **Family survey:** August 2020 (period of eased restrictions)
 2. **Provider survey:** September 2020 (cases rising again, tighter restrictions introduced but not in London)
 3. **Family interviews:** October/November 2020 (London in Tier 2, England on the brink of 2nd national lockdown)
- Ethical review provided by the Research and Ethics Advisory Group at the National Children's Bureau

Family survey: findings

- 84 responses: 49 via Survey Monkey, 35 via post
- 79 valid responses (included in analysis)
- Some incomplete data
- Prize draw for £10 shopping vouchers (x20)
- Six families report English not spoken at home
- Most respondents live in rented accommodation, mostly in flats
- Most respondents have access to some kind of outdoor space; 22% did not
- Most respondents had some type of internet access (Wi-Fi and/or phone data)
- Ethnic breakdown:
 - White ($n = 25$, 46%); Black ($n = 15$, 28%); Asian ($n = 4$, 7.5%); Other ($n = 4$, 7.5%); Prefer not to say ($n = 6$, 11%).

Family survey: findings

1. **Positive changes for adults:** spending more time with family; spending less money.
2. **Positive changes for children:** spending more time with family; more connected with family.
3. **Most frequently reported worries:** children's future; my mental health or wellbeing; friends or family catching Covid-19; work or financial problems.
4. **Preferred ways to receive support:** phone calls; face to face.
5. **Most common support received:** children's centres; food support.

Family survey: quotes

"Unfortunately playing was 99% screen time."

"We did spend more time outside because the weather was good and we were all at home and fortunate enough to have a garden but we would have spent less time outside given the restrictions if we hadn't have had a garden."

"My first and most difficult time is my kids feel they have no friends any more. I had a 2 years old girl and even she feel strange when see people, we usually visit before."

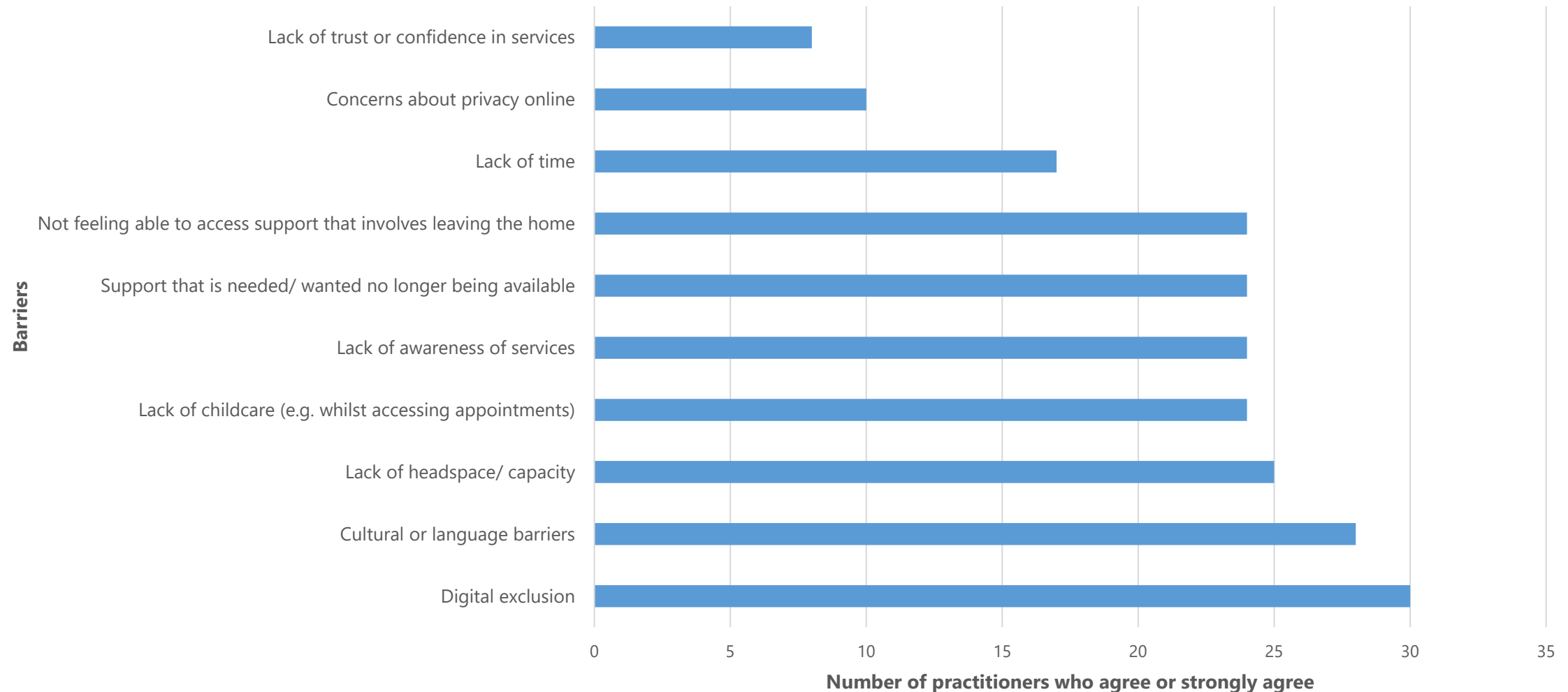
"My son was born during lockdown. He lost a lot of weight due to an undiagnosed tongue tie which was not detected earlier due to lack of home visits after he was born."

Practitioner survey: responses

- 74 practitioners were invited to complete the survey online
- 39 practitioners completed it (53% response rate)
- All strands were represented in responses
- 33% of respondents ($n = 13$) had been redeployed since March 23rd 2020
- Of those who were redeployed:
 - 38.5% ($n = 5$) were from the D&N strand;
 - 38.5% ($n = 5$) were from the SED strand;
 - 7.7% ($n = 1$) were from the CLD, maternity and systems change strands.

Practitioner survey: findings

Since March 23rd, I have been aware of families not accessing LEAP and other early help services because of:



Practitioner survey: findings

Considering the ways that Covid-19 has changed your service's content, provision, staffing and/or engagement, to what extent have these changes been positive or negative?

Positive & extremely positive	<i>N</i>
How inclusive the service is for families	13
Families' satisfaction with our service	17
How accessible the service is for families	17
Team members having the necessary skills for the work	17
Increased role of digital technology	24

Negative & extremely negative	<i>N</i>
How accessible the service is for families	10
Team well-being	10
Efficiency of delivery	10
How families are recruited or referred to our service	11
Managing data collection and analysis	16

Practitioner survey: findings

Practitioners identified decreased engagement from families experiencing/requiring:

Theme	Freq	Example
Technology challenges	9	"Families with poor access to digital resources ... have been the hardest to maintain engagement with."
Antenatal care	3	"We have supported far fewer women antenatally, although we are starting to see more referrals for this group now Baby Steps has resumed..."
EAL	2	"Non- English speaking parents were reluctant to join in online sessions" "Women who don't speak English ... we are not able to support them"
New families	1	"Challenge in recruiting new families"
NRPF families	1	"...it can be harder for women with no recourse to public funds, as charities such as Little Village are not operating in the same way."
Mental health challenges	1	"I have found it harder to reach some of my clients with mental ill health, as they have disengaged from my visits"

Family interviews: methodology

- $N = 10$ families, all with at least one child under age five
- Convenience sampling strategy
- 30 – 45 minutes per interview
- Information about the interviews sent electronically beforehand, verbal consent obtained
- Audio recorded and transcribed
- £10 shopping voucher as compensation

Family interviews: findings

Themes

- **Wellbeing**
 - **mental wellbeing**: stressors; positive outcomes
 - **physical wellbeing**: fear of infection; practical concerns; health behaviour decisions
- **Support**: helpful; unmet needs
- **Coping**: outdoors; physical activity; digital. Not all positive coping examples
- **Social** engagement: face to face contact; digital unsatisfactory replacement

Family interviews: quotes

"...for us, nothing positive came out of it. I can't wax lyrical about this wonderful family time where we were all thrown together. It may have been like that if there wasn't this added stress that we were dealing with, but because of that it just didn't feel like a good, positive time at all."

"...if I get ill, I'm in charge of these kids, but with Covid if you get ill, really ill, then what the hell is going to happen to them?"

"...really tried hard to make his schedule varied; doing different things and playing different things, and not use the TV as a distraction, which would have been much easier. It just felt like it might have a long-term effect on him, so we tried to get out to the park as much as possible..."

"Quite a lot has just gone online, story time and stuff, but my daughter, she was not having it. We would turn it on and she would just like, 'No, no, no, I don't want to see', so we couldn't even have her play nicely next to us and take part in the activity."

"The kindergarten was brilliant over the pandemic, because they did little packs every day and came around... That was really, really good and then there, with that, you had your little doorstep talks... I think that was the most helpful I would really say, because you had your outside social contacts and that was just... Even if it was just small talk, it did lift your spirit for the whole day."

Phase 3: Longer-term impacts

- LEAP are currently tendering for an Evaluation Partner (to be appointed March 2021);
- The successful bidder will design, deliver and manage LEAP's independent evaluations including phase 3 of our Covid-19 research.

Phase 3

Capture the **longer-term** impacts of Covid-19

Limitations of our primary research

- Some incomplete responses to the family and practitioner surveys.
- Our sample of families is not representative of the LEAP/Lambeth population.
- Limited engagement from 'hard to reach' families who were not already engaged with LEAP services. Disappointing response rate to family survey.
- The Covid-19 pandemic – and the restrictions imposed as a result – have changed significantly since our initial research proposal was developed.

What did we learn?

- Findings are consistent with wider national and international evidence about the impacts of Covid-19.
- Many people found lockdown to be stressful and struggled to cope, others coped better. Some positive outcomes too.
- Practitioners reported that people's experiences were varied but families appreciated the opportunity to engage with services virtually where possible. Although this is not seen as a desirable replacement for face-to-face support.
- Social engagement with other people is critically important for wellbeing.
- Full details about all our research will be available in the forthcoming report.

LEAP's Covid-19 response

Application of learning

LEAP's Covid-19 response activities fall into five categories:

1. Service continuity and adaptation including support for digital delivery
2. Financial support for service providers
3. Communication and information for families
4. Changes to the LEAP portfolio
5. Learning

The report summarising our response activities will be published on our website.

LEAP's next steps

- Our current aim is to move between face-to-face and virtual delivery as required, recognising the irreplaceability of in-person interaction;
- The effects and aftermath of the pandemic will likely shape our local context for the remainder of the LEAP programme and beyond;
- We will continue to evaluate the medium- and long-term impacts of Covid-19 and will adapt our work, where necessary, so that LEAP makes the greatest possible contribution to improving young children's outcomes locally.

Any questions?



Thank you!

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LEAP

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