The impact of the COVID-19 disruption must be continually monitored as families are unlikely to be able to adequately manage all consequences.

Families with young children need wider community support to maintain their resilience in the face of ongoing restrictions.

Further research needs to be undertaken to understand the potential longer term impacts of the pandemic on children’s wellbeing.

### About the research
In Spring 2020, the first COVID-19 lockdown placed unprecedented restrictions on the UK population, and despite being least affected by the virus, young children experienced enormous disruption to their lives. As their routines were suddenly turned upside down, parents were faced with the role of managing their children’s wellbeing in a completely novel situation.

We interviewed 20 parents with a child aged 3-5 years. The results were analysed in terms of nurturing which is a framework most often used in educational settings to support children’s social and emotional needs. Nurture recognises the importance of social environments and their significance for development of healthy wellbeing.

Key nurture themes that arose in the interviews included an understanding that children’s learning is understood developmentally; all behaviour is communication and; the importance of transition in children’s lives. There emerged an overarching theme of disrupted routines which cut across these.

We found that parents were in no doubt that the pandemic disruption had impacted their children’s wellbeing.

### Implications
- The impact of the COVID-19 disruption must be continually monitored as families are unlikely to be able to adequately manage all consequences.
- Families with young children need wider community support to maintain their resilience in the face of ongoing restrictions.
- Further research needs to be undertaken to understand the potential longer term impacts of the pandemic on children’s wellbeing.

### About the School
The NIHR School for Public Health Research is a partnership between the Universities of Sheffield; Bristol; Cambridge; Imperial; and University College London; The London School for Hygiene and Tropical Medicine (LSHTM); LiLaC – a collaboration between the Universities of Liverpool and Lancaster; and Fuse - The Centre for Translational Research in Public Health a collaboration between Newcastle, Durham, Northumbria, Sunderland and Teesside Universities.

NIHR School for Public Health Research
Website: sphr.nihr.ac.uk
Twitter: @NIHRSPHR
Email: sphr@ncl.ac.uk
Telephone: +44 (0)191 208 3829
Children's learning is understood developmentally

Parents had to manage their children’s understanding in terms of what the virus was; why favourite places such as nursery or the park were inaccessible and; why they needed to stop in-person contact with friends and relatives. However, parents were aware of the importance of handling this sensitively, in a way appropriate to their child’s age.

Behaviour is communication

Parents reported changes in their child’s mood or behaviour during the period of restrictions. This included increased tantrums and anger; unsettled, anxious and emotional behaviours and regression. Parents understood the reasons for their child’s behaviour but their options for alleviating these emotions were limited. A few parents reported positive changes, which they put down to being able to spend more time together as a family.

School transition

Parents had mixed feelings about starting school. Many felt their child was ready, and for some there was a sense of relief that a daily routine would be starting up again. But some were concerned by a lack of transition activities and information, and felt unable to adequately prepare their children for school life.

Routine

The theme of routine cut across the 3 main themes identified in the interviews. Parents explained much of the impact of the pandemic on their children in terms of loss of established routine. Some created new routines, recognising their importance for their pre-school child. However they recognised that some routines could not be replaced without access to the wider community.

“I ended up turning the TV off, so he couldn’t hear it. I was a little bit concerned that he had taken too much in about everything that was going on. And obviously a child shouldn’t worry about things like that.”

“I think that’s what he found difficult, is that everything looks the same and everyone seems the same, but he couldn’t do the same things that he normally does, and he found that really, really difficult.”

“We definitely saw more tantrums than we did before. I think that was purely frustration about the situation.”

“He will start [school] in September, so that will start as a new routine for him… I think we all need it. I think we all need time away from each other.”

“We would’ve gone and met [school staff], and possibly gone and seen the school… I think they would’ve done five visits with the school from his preschool. He’s not going to have that.”

Further information

The proposed report is available here. This is a preprint version of the report and has not yet been through peer review or published.

www.medrxiv.org/content/10.1101/2021.07.02.21259900v1

Contact the researchers

For more information about this study, please contact Stephanie Chambers:

Email: stephanie.chambers@glasgow.ac.uk