

Written evidence submitted by YoungMinds

Dear Robert Halfon MP,

- 1.0) I am writing on behalf of YoungMinds to provide a written submission to your Committee's inquiry into coronavirus and the impact on education and children's services.
- 1.1) YoungMinds is the leading children and young people's mental health charity in the UK, and we put the experiences of children, young people and families at the heart of everything we do. This submission will draw on the insights and lived experiences of the children, young people, parents, carers and professionals that we work with in addition to wider research.
- 2.0) The COVID-19 coronavirus pandemic is the biggest health crisis for generations, and it is having a devastating impact on the lives of people across the world. The measures that the UK Government has taken to address the crisis, including restrictions on movement and the closure of schools to most students, have been necessary to save lives. However, the pandemic and the measures taken to address it also risk having a long-term impact on the mental health of many young people, including those with existing mental health needs.
- 2.1) It is estimated that one in eight children and young people has a diagnosable mental health condition, which roughly equates to three children in every classroom¹. As the terms of reference for this inquiry show interest in vulnerable and disadvantaged young people, young people with mental health conditions represent an important group for your committee to consider throughout.

Summary

- 3.0) The COVID-19 pandemic is having a negative impact on young people's mental health and their access to support. Digital support has been a lifeline for many young people that we work with but it is not always appropriate or accessible.

¹ NHS Digital (2018) 'Mental Health of Children and Young People in England, 2017' Available at: <https://digital.nhs.uk/data-and-information/publications/statistical/mental-health-of-children-and-young-people-in-england/2017/2017>. Based on 12.8% of 5 to 19 year olds being identified as having a diagnosable mental health condition.

- 3.1) Schools play an extremely important role in supporting young people with their mental health, allowing young people to have structure and routine, contact with trusted adults and peers, and providing support and guidance to young people in terms of both their academic progress and emotional wellbeing.
- 3.2) We are concerned that, with most young people not currently attending school and many young people not having access to resources and materials with which to learn, there will be a subsequent detrimental effect on both academic attainment and wellbeing. The impact of this, particularly on groups who are already disadvantaged, is likely to widen existing inequalities and to contribute to a rise in young people looking for mental health support both during and as we transition out of the pandemic.
- 3.3) The COVID-19 crisis is likely to have a long lasting impact on young people's mental health and the services that support them, including schools and children's services. The Government must consider this throughout its emergency response and policies to recover from the crisis.

YoungMinds' research

- 4.0) To investigate the impact that the crisis is having on young people's mental health, we surveyed 2,111 young people with a history of mental health needs². While respondents supported the restrictions on movement as necessary to prevent the spread of the virus, they also believed that the measures, including schools being closed for the majority of young people, were having a significant negative impact on their mental health.
- 4.1) 83% of respondents agreed that the pandemic was making their mental health worse. The key factors that young people said had affected their mental health were concerns about their family, school and university closures, loss of routine and loss of social connection. Furthermore, risk factors associated with mental health conditions, including domestic violence³ and risk-taking behaviour such as increased alcohol consumption, are also increasing because of the pandemic.
- 4.2) We conducted a survey with 1,854 parents and carers⁴ to find out what impact the pandemic and the restrictions on movement were having on the mental

² The survey was conducted between Friday 20th March, the day on which schools closed to most students and Wednesday 25th March, when further restrictive measures had been put in place. Full details can be found in the report: https://youngminds.org.uk/media/3708/coronavirus-report_march2020.pdf

³ <https://www.refuge.org.uk/refuge-sees-700-increase-in-website-visits/>

health of the children and young people in their care. A significant issue for the respondents to our survey was the lack of continuity in the contact and care that their child had received from mental health services, including those that their child was accessing through school and children's services.

- 4.3) We are also carrying out a survey with teachers and members of school staff, focusing on the impact of the pandemic on both the perceived wellbeing of students and the ability of students to learn in a time when most of them are outside of a classroom environment.

Impact of changes to education

- 5.0) Schools play an important role in supporting young people with their mental health. As well as providing stability, routine and consistency to many young people, schools provide protective factors for young people's mental health and notably a connection with trusted adults such as teachers and pastoral support. In our surveys with both young people with established mental health needs, and parents and carers, significant concerns arose about education and schooling and how the measures implemented in response to the coronavirus crisis would affect their mental health.

Impact of school closures on wellbeing and mental health

- 6.0) There are a variety of reasons that school closures will have an impact on the mental health of young people. While some young people have told us that being away from school has been beneficial to their mental health, the majority responded that it has had a detrimental effect⁵. The closure of schools to most students creates uncertainty both in the short term and in relation to educational and employment outcomes in the future. For young people who are living in difficult or dangerous situations, the closures may also represent the loss of a safe and stable environment.
- 6.1) Data collected by the Office for National Statistics has shown that in the period from 24th April – 3rd May, 41% parents reported that they felt the wellbeing of the child or young person in their care was being negatively affected due to trying to continue their education at home, while 33% reported that this was also negatively affecting the relationships between members of the household⁶

⁴ The survey took place between Thursday 9th April and to Monday 20th April. We will be publishing findings wider findings from the survey in due course.

⁵ https://youngminds.org.uk/media/3708/coronavirus-report_march2020.pdf

⁶ Office for National Statistics (May 2020) 'Coronavirus and the social impacts on Great Britain: 14 May 2020'. Available at

- 6.2) This has been echoed by the respondents to our survey with parents, with 67% of respondents agreeing that they are concerned about the long-term impact of coronavirus on their child's mental health, and 66% concerned about their own mental health⁷. Many respondents cited increased levels of anxiety and feelings of isolation as prominent effects of being away from the school environment. For those young people who would otherwise have had exams imminent, parents also reported a significant level of concern about their future prospects and the long-term impact that changes to the calculation of results would have.

Mental health support in schools

- 7.0) Many young people who were receiving some form of mental health support through schools (for example through school counsellors) have had this support disrupted or cancelled during the pandemic. While some young people are now receiving online support from school counsellors, this has sometimes not been possible because of logistical or safeguarding concerns. In other cases, young people have been offered online counselling but been unable to access it because of concerns about privacy at home, or because of a lack of access to appropriate technology. As schools re-open, there will need to be clear plans in place to ensure that in-school counselling services can operate safely and reach students who have lost access to support, as well as those who now require support as a result of the pandemic.
- 7.1) The roll-out of Mental Health Support Teams in schools, which began at the beginning of 2020, has also been severely disrupted by the pandemic. While Mental Health Support Teams have been redeployed to support schools and NHS services, it is important to note that they have only been operational for a short period of time in a small minority of schools in England; they will therefore only be able to play a limited role in national plans to provide mental health support as schools re-open.
- 7.2) Before the pandemic, only two-thirds of schools provided in-school mental health support. With every school likely to see an increase in mental health needs, including among children who have been bereaved or other traumatic experiences, it will be important to consider how all schools can provide fast and appropriate access to in-school support⁸.

<https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/healthandwellbeing/bulletins/coronavirusandthesocialimpactsongreatbritain/14may2020#homeschooling>

⁷ <https://youngminds.org.uk/about-us/media-centre/press-releases/parent-survey-reveals-widespread-concerns-about-mental-health-impact-of-covid-19-on-young-people-s-mental-health/>

- 7.3) The Welsh Government has already recognised the need to provide additional support to schools and have announced funding to local authorities to deliver counselling services in schools alongside new guidance and online resources for mental health to help deal with additional issues created by the coronavirus⁹

School refusal

- 8.0) Though most parents acknowledged that the time away from school was likely to have a negative effect on the mental health of the young people in their care, we are aware that for some young people being away from the school environment has been broadly positive. For young people with mental health difficulties, additional learning needs, who experience bullying or school-based anxiety, a break from the school environment can feel like a respite.
- 8.1) For this reason, the issue of possible school refusal as schools reopen must be included within the scope of this inquiry. It is likely that schools may require some coordination of resources in order to work with young people and their families regarding school refusal, given that there is also likely to be increased demand for the existing pastoral and counselling services within schools upon the return of the majority of students.
- 8.2) It is welcome that, given understandable concerns about safety, parents will not be penalised for choosing not to send their children back to schools this academic year. However, given that many children and young people may experience additional anxiety about attending school in the next academic year as well, it is important that measures to encourage attendance are carefully considered before being re-introduced. It would be inappropriate and counter-productive to penalise parents or schools for pupils being unable to attend due to the effects of the pandemic on their mental health.

Impact on academic attainment

- 9.0) There are a multitude of factors that can impact on young people's ability to learn outside of a school environment. These can have a significant effect on schoolwork and it is crucial to take into account the bearing that they will have

⁸ <https://www.place2be.org.uk/about-us/news-and-blogs/2020/february/significant-rise-in-number-of-school-based-counsellors/>

⁹ <https://gov.wales/increased-support-childrens-mental-health-following-covid-19-outbreak>

on both the academic attainment and wellbeing of young people during a time when most are unable to learn within the school environment. Examples of such factors include overcrowding, parents not speaking fluent English, parents and carers not educated to a level where they feel they can confidently assist their children and experience of an unsuitable home environment.

- 9.1) During our research since the pandemic began, it has repeatedly been indicated that the responsibility to educate children is increasingly falling on parents and carers, and this could exacerbate inequalities, particularly for young people with mental health conditions. For a variety of reasons, some parents will be better able to support their child's home-schooling than others. This includes whether they are working; their own educational background; access to technology; and whether they have multiple children with different needs that they are supporting.
- 9.2) Whilst we understand that these are difficult circumstances, for the reasons outlined above, we are concerned about the impact that the lack of support for some young people and their parents and carers will have on their ability to continue to engage with their education, as well as the negative implications that the reduced support could have on their mental health. All children have a right to a continuity of education, and inadequate support may lead to negative outcomes for children and young people, particularly those with mental health problems or additional learning needs.
- 9.3) However, our research also shows that for many parents, encouraging home learning has been a major source of tension within the home. Many parents have understandably been reluctant to force their children to prioritise academic progress at a time of heightened stress. As one parent told us:

"I do my best, but I am mum and not their teacher, and the shift in dynamics is difficult for us all."¹⁰

- 9.4) Teachers and school staff surveyed by YoungMinds overwhelmingly reported (70% of respondents) being concerned about the impact of the majority of young people being away from the school environment will have on their attainment. One member of teaching staff told us:

"Most families are not in a position that allows them to recreate a school day at home [due to] lack of computers, knowledge and the fact it is a different environment. It is not vital during this time."

¹⁰ The detailed responses from parents are taken from responses to the survey referenced above.

- 9.5) In the case of young people who would under usual circumstances be sitting, or preparing to sit, exams, the issues of academic attainment and mental health are likely to be particularly linked. Young people have told us that their mental health has been detrimentally affected due to the uncertainty they feel around the effect that COVID-19 will have on their exam results. One young person said:

“The uncertainty is causing me to think catastrophically. Even if exams are pushed back we are going through circumstances that will inevitably impact our results.”

- 10.0) While it is understandable that there have been proposals to help students who have fallen behind in their education to catch up academically as soon as possible – for example through additional lessons in the summer holidays – they are only likely to be able to learn effectively if they have good emotional wellbeing. It is therefore vital that there is flexibility in the curriculum in the short and medium term, and a clear message for schools that wellbeing must be their priority.
- 10.1) When asked what would be helpful when schools reopen to the majority of students, one teacher responded that “fewer timetabled lessons to allow more time for deeper/additional assessment and feedback”, combined with an additional counselling and pastoral care offer, would be crucial to allow students to make up for the lack of access to “quality teaching and learning resources” that would have usually been available.

Exams and assessment

- 11.0) The Government recently published its consultation on the ‘Exceptional arrangements for exam grading and assessment in 2020’¹¹ where it outlined its planned approach to awarding the grade for educational qualifications, given the cancellations of all exams due to the COVID-19 pandemic. The consultation outlines that the calculated grade will be based on information provided by the school, including the grade they believe you were most likely to get if teaching, learning and exams had happened as planned, based on classwork and homework; previous assignments and mock exams; any non-exam assessment or coursework you might have done; and your general progress during your course.
- 11.1) The corresponding equality impact assessment¹² to the consultation provides a review of the literature and concedes that students ‘studies of potential bias

¹¹https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/879627/Exceptional_arrangements_for_exam_grading_and_assessment_in_2020.pdf

¹²https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/879605

in teacher assessment suggest that differences between teacher assessment and exam assessment results can sometimes be linked to student characteristics like gender, special educational needs, ethnicity and age' (p4). They outline that the effects of this are small. However, the evidence suggests that there is an impact on assessments of students with special education needs, which may include young people with mental health conditions. Therefore, we are concerned about the negative impact that the procedure for determining grades and ultimately on educational outcomes. As one parent told us:

'My son has an EHCP [Education, Health and Care Plan] in place & was mostly studying through virtual learning (vle) which has only recently (6 months) been put in place. Before this he missed a huge amount of school. He was due to take GCSEs this year & I feel that the huge progress he has made through vle will not be taken into account for his GCSE grades'.

Impact on existing inequalities

- 12.0) Though time away from the classroom is likely to impact on the academic attainment of the vast majority of young people, there is an increasing body of evidence making the case for school closures having a particularly detrimental impact in terms of increasing existing inequalities amongst young people.
- 12.1) The Institute for Fiscal Studies has recently produced research claiming that children and young people from better-off families spend 30% more learning at home than those from disadvantaged backgrounds¹³, and have considerably better access to resources with which to study.
- 12.2) Factors listed in the report from the IFS as having an impact include the space available for young people to study; the confidence parents from different income quintiles have in their own aptitude to adequately teach the young people in their care; access to private tutors; and access to appropriate technology with which to carry out school work.
- 12.3) Related to the issue of access to technology, in the IFS's research, 64% of secondary pupils in state schools from the richest households reported being offered some form of active help – such as online learning and video chats with teachers – compared with 47% from the poorest fifth of families.

[/Equality impact assessment literature review 15 April 2020.pdf](#)

¹³ Institute of Fiscal Studies (May 2020) 'Learning during the lockdown: real-time data on children's experiences during home learning'. Available at: <https://www.ifs.org.uk/uploads/BN288-Learning-during-the-lockdown-1.pdf>

- 12.4) Though given the unprecedented nature of the coronavirus pandemic it is impossible to predict precise outcomes, it is clear that unequal access to resources is likely to result in students from disadvantaged backgrounds returning to school on unequal footing to their peers. By the time UK children leave school, at the age of 16, children from low-income families are nearly two years behind their peers from higher income families¹⁴, and likely have not had access to many of the protective factors that work to create favourable mental health outcomes.
- 12.5) It is also vital that this inquiry takes into the account the specific disadvantage that coronavirus is likely to cause to young people from BAME backgrounds. Given that BAME communities have been disproportionately affected by COVID-19¹⁵, and those from BAME backgrounds are more likely to develop mental health problems than the wider population¹⁶, the particular effects that the pandemic will have for this demographic must be carefully considered.
- 12.6) Further to this, recent research by Girlguiding¹⁷ shows that 51% of young women aged 15–18 say the coronavirus and lockdown has negatively impacted on their mental health, and 87% of young women aged 15-18 are worried about the impact of the crisis. Given that IPSOS Mori and the Fawcett Society have shown that women are feeling relatively more strain from the emotional repercussions of the pandemic¹⁸, the gendered aspect of the pandemic and its effect on young people's mental health is also critical.

Impact of school closure on vulnerable young people

- 13.0) A further point that was highlighted in our survey with parents and carers is the impact of the coronavirus on young people that have Education, Health and Care Plans (EHCPs). Following the Children and Families Act 2014, EHCPs were introduced to support young people with special educational needs and disabilities (as defined by the Equality Act 2010) who find it harder to learn than other children or where methods of teaching are not accessible to them.

¹⁴ http://newsroom.northumbria.ac.uk/pressreleases/expert-comment-learning-loss-and-implications-for-covid-19-and-school-closures-3001150?utm_campaign=send_list

¹⁵ <https://www.icnarc.org/DataServices/Attachments/Download/cbcb6217-f698-ea11-9125-00505601089b>

¹⁶ The Five Year Forward View for Mental Health (2016). Available at: <https://www.england.nhs.uk/wp-content/uploads/2016/02/Mental-Health-Taskforce-FYFV-final.pdf>

¹⁷ https://www.girlguiding.org.uk/what-we-do/our-stories-and-news/news/girls-tell-us-how-theyve-been-affected-by-covid-19-crisis/?utm_source=twitter&utm_medium=social-media&utm_content=external&utm_campaign=covidsurvey

¹⁸ <https://www.fawcettsociety.org.uk/news/women-are-bearing-the-emotional-brunt-of-the-coronavirus-crisis>

- 13.1) Whilst educational settings remain open and safe for vulnerable children and young people, the majority of vulnerable children are remaining at home. Data that has been published by the Department for Education indicates that only 5% of all children that are classified as 'children in need' or who have an EHCP are attending school¹⁹. Throughout the coronavirus pandemic, the duty remains on local authorities to consider the need of young people with EHCPs, where they were instructed to make a risk assessment, consult educational settings and parents or carers, to determine whether children and young people with SEND will be able to have their needs met at home, and be safer there than attending an educational setting²⁰.
- 13.2) Many of the parents that responded to our survey said that they have felt unsupported with their children's educational and wellbeing needs, and therefore unable to uphold the measures outlined in their EHC plan. As one parent told us:
- 'I am not a qualified teacher. I am not a qualified occupational therapist. I am not a qualified speech and language therapist. I am not a qualified MH therapist. I am not a qualified physiotherapist. I am not a qualified Educational psychologist... I am their mother, for which I am qualified but I will be unable to provide the provisions listed in their EHCPs'.
- 13.3) However, there are also a number of young people with mental health conditions that do not have EHCPs and the corresponding additional support. The parents and carers of those young people also highlighted a lack of communication from the agencies that support their children, including schools and mental health services. Parents reported that they think their child would benefit from regular communications or 'check-ins' to enable them to get advice about how to best support their children with their mental health and with their education.

Adversity and trauma

- 14.0) Young people who have had the most difficult starts in life are more likely to develop mental health problems, more likely to become suicidal, and more

¹⁹https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/881663/COVID19_attendance_in_education_settings_170420.pdf

²⁰ Currently, there remains an absolute duty upon local authorities to secure and deliver special educational provision contained within an EHC Plan. The Coronavirus Act 2020 makes two key amendments to the law related to this if the Secretary of State for Education makes an order to that effect. These are temporary amendments for local authorities to make 'reasonable endeavours' to uphold that plans, but that has as yet not been defined. Additionally, the duty on schools to admit a child where the EHC plan names that school (section 43 of the Children and Families Act 2014) can be temporarily disapplied.

likely to die younger than their peers, and some groups of young people are more at risk than others. Furthermore, at least one in three adult mental health conditions relate directly to childhood adversity and trauma²¹.

- 14.1) Organisations such as the Centre for Mental Health have noted that the nation is likely to experience a collective trauma in the wake of the coronavirus pandemic, and that it will be predominantly marginalised demographics that are most likely to experience this²².
- 14.2) Young people who experience trauma in their childhoods are more likely to develop mental health conditions as adults²³, and so it is vital that young people are able to access support which can act as a protective factor, lessening the chance of long-term mental ill health resulting from the pandemic.
- 14.3) As such, we need a national commitment from the Government to addressing childhood adversity that ensures that all professionals who are working directly with young people know what behaviours may be related to trauma, and how to properly support them if they need it.

A whole school approach

- 15.0) There is a strong and growing evidence base that universal, whole-school approaches to wellbeing, and social and emotional learning, can have a range of benefits for individual students, staff and whole-school populations²⁴, including higher engagement, attendance and academic attainment, improved behaviour, reduced anxiety, bullying and stigma²⁵. There is also some evidence that social and emotional learning programmes can have particular benefits for children who come from lower-income backgrounds or are performing below average academically²⁶.
- 15.1) The coronavirus pandemic is likely to have a detrimental impact on some, if not all of the factors, mentioned in the previous paragraph, including mental wellbeing and academic attainment. As this submission has outlined, the

²¹ Kessler, R. (2010). Childhood adversities and adult psychopathology in the WHO World Mental Health Surveys' *British Journal of Psychiatry* 197(5): 378–385

²² https://www.centreformentalhealth.org.uk/sites/default/files/2020-05/CentreforMentalHealth_Briefing56_Trauma_MH_Coronavirus_2.pdf

²³ Mehta, D. et al. (2013) 'Childhood maltreatment is associated with distinct genomic and epigenetic profiles in posttraumatic stress disorder' *Proceedings of the National Academy of Sciences* 110(20): 8302–8307: <http://www.pnas.org/content/110/20/8302.full.pdf>

²⁴ Weare, K and Nind, M (2011) *Mental health promotion and problem prevention in schools: what does the evidence say?*, *Health Promotion International*, Vol. 26 No. S1 Oxford: OUP

²⁵ Banerjee R et al (2016) *Promoting Emotional Health, Wellbeing and Resilience in Primary Schools*

²⁶ Challen A, Noden P, West A and Machin S (2011), *UK Resilience Programme Evaluation: Final Report*

distribution of this detrimental impact will be uneven; often affecting children and young people who are already at a disadvantage compared to their peers.

15.2) To best mitigate this, we recommend that a whole school approach to mental health, wellbeing and social and emotional learning is a key component to any recovery plan undertaken by schools as we transition out of restrictions. As reflected in many of the comments included elsewhere in this submission, space to transition back into learning within the classroom and comprehensive mental health support are a crucial foundation to allow for a return to a full curriculum.

16.0) We therefore recommend that the UK Government delivers the following immediately and over the next six months:

- **A wellbeing support package for schools**, enabling them to support young people during restrictions and providing guidance and resources for schools on how to manage transitions and implications as students return to school including;
 1. **Clear best practice guidance for teachers and school staff** on when and how to stay in touch with children and families including those with mental health conditions and EHCPs, whilst restrictions are in place, and how to refer for further support if needed
 2. **Additional funding to help schools support the wellbeing of students**, potentially through an increase in the pupil premium. Depending on the needs of the school, this could be used to commission additional mental health support (e.g. through additional provision of school counselling services or through access to online support services such as Kooth) or to arrange support to help manage transitions back to school.
 3. **Guidance and resources to manage transitions back to school** to support young people, including a simple list of best practice steps schools should take, links to evidence-based resources and lesson plans, and guidance on how trauma may affect behaviour.
 4. **Make wellbeing a priority in the education system** into the next academic year, through clear Government directives and the adaptation or reduction of accountability measures.
- **Amplify the Public Health England guidance** for parents and carers through a national campaign delivered through the voluntary sector and by schools.

Reducing the immediate impacts of the pandemic on young people's mental health and access to support

- 17.0) During this time when we expect young people's mental health to be getting worse, our research suggests that not all young people who need to be receiving support for their mental health are doing so. While recent initiatives, including those outlined in the NHS Long Term Plan, aim to improve access to young people's mental health services, only around one-third of children and young people with a diagnosable mental health problem receive NHS support²⁷. Access to other forms of support, including that provided through schools or the voluntary sector, also varies considerably across the country.
- 17.1) In our survey with young people, among the respondents who were accessing mental health support in the lead-up to the crisis, 26% said that they were no longer able to do so. Some young people had experienced cancellations due to a disruption in NHS support, schools closing, not being able to attend peer support groups or because services that had been delivered face-to-face could not be provided online or by phone.
- 18.0) Community and voluntary organisations are also important for supporting young people with their mental health. VCSE organisations are facing particular challenges in response to the coronavirus crisis. Charity sector bodies have made initial estimates that there be a minimum reduction of £4.3bn of income over 12 weeks, though the figure could be far higher²⁸.
- 18.1) In some areas this had already led to the closure of local community organisations that provide mental health support for young people at the local level, leaving many young people without the appropriate support for their mental health. The Government must now take urgent action to invest in support for young people and their mental health.
- 19.0) While we welcome the Government's commitment to support mental health charities, including £5 million made available through Mind and the Mental Health Consortium and £4.2 million pledged to mental health charities, there will not meet the scale of need. Without additional financial support, young people's access to mental health support through youth groups, charities and helplines is likely to worsen as we emerge from the pandemic.

²⁷ National Audit Office (2018) 'Improving children and young people's mental health services'. Available at: <https://www.nao.org.uk/wp-content/uploads/2018/10/Improving-children-and-young-peoples-mental-health-services.pdf>

²⁸ <https://www.ncvo.org.uk/about-us/media-centre/press-releases/2748-every-day-counts-as-charities-still-wait-for-government-support>

- 19.1) We also recognise the importance of public health campaigns to ensure visibility of mental health concerns during this period. We therefore call on the Government to launch a national campaign to reach 10 million children and young people to promote positive approaches for maintaining mental wellbeing, during the pandemic and as restrictions are lifted, working alongside the voluntary sector to do so. This should be co-produced with young people with lived experience of mental health problems.

Reducing the long-term impacts of the pandemic on young people's mental health

- 20.0) As we have already outlined, the coronavirus pandemic is having a significant impact on the mental health of young people and their access to mental health services. This is likely to be because the key routes for referral to NHS mental health services, notably schools and youth groups, are now far less able to identify children and young people who are struggling with their mental health. Additionally, since the coronavirus pandemic, access to primary care has been significantly reduced with the closure of GP surgeries or a transition to primarily telephone only appointments.
- 20.1) Young people's mental health services were already overstretched before the pandemic. Given the amount of young people that are experiencing a disruption in their care during the lockdown and the expected increase in young people with emerging mental health conditions, it is likely that services will be overwhelmed by the numbers of young people that are looking for support as we transition back to normal life. This is likely to be exacerbated by young people being unable to receive support through educational settings for long periods of time.
- 21.0) We have already outlined the important role that community and voluntary organisations play in the mental health system. They also have a crucial role at intervening early and supporting young people with emerging mental health needs with their mental health. The financial pressures on VCSE organisations are likely to lead to a reduction in the support available to young people, as well as youth organisations that provide the protective factors that help young people to build the resilience that is needed to help them overcome life's obstacles²⁹.
- 21.1) It is clear that to meet the needs of young people as we recover from the vast economic and social repercussions of the COVID-19 pandemic, we need a new

²⁹ <https://nya.org.uk/wp-content/uploads/2020/04/Out-of-Sight-COVID-19-report-Web-version.pdf>

and systematic approach to mental health support. This must strengthen mental health support in the NHS and prioritise early intervention in our communities.

- 22.0) In order to mitigate for the long term impact of the coronavirus on the mental health of young people and the available support, there are a number of steps we would advise the Government to take over the next six months.
- 22.1) These include the creation of an action plan to support the growth and continuity of support as restrictions begin to lift, alongside a contingency plan in case further restrictions are introduced in future. This would include prioritising early intervention services in local communities, including a network of open access Mental Health Hubs to provide support to those with emerging needs, alongside advice on employment, housing and education.
- 22.2) Wider policies we view as vital to ensuring long-term support for young people's mental health include the establishment of a cross-government strategy on young people's mental health, re-commitment to funding and delivering the young people's mental health plan outlined in the NHS Long Term Plan in full and the introduction of a national commitment on childhood adversity and trauma, with dedicated training for professionals who work with young people.

If you would like to discuss any of the points raised in this submission, then please do not hesitate to get in contact. Additionally, if you are holding any evidence sessions with people with that have lived experience of the impact of coronavirus on their mental health, we would be happy to discuss involvement from YoungMinds' Youth Activists.

Yours sincerely,

Charlotte Watson
Policy and Parliamentary Officer
YoungMinds

May 2020