

## Research Report

# Covid-19 and trends in children's social care: an analysis of the national datasets for England

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The Covid-19 pandemic led to widespread disruption to children's services, potentially affecting their ability to identify and respond to concerns about children's welfare. This was particularly apparent during national lockdowns, when schools were closed. Children's social care saw a fall in referrals, assessments and interventions during this period, which especially affected older children, Black children, and children assessed in relation to physical abuse and sexual abuse.

Anonymised data was extracted from the national children's social care (CSC) returns for all English local authorities (LAs) from 1 April 2014 to 31 March 2021. The analysis compared trends for 2020-2021 with the three previous years, focusing on changes during national lockdown periods and whether these were more pronounced for certain groups of children or types of provision.

### Key findings

- There was a reduction in referrals to CSC during the national lockdowns in Spring 2020 and Winter 2020-21. This was mostly due to a fall in referrals from schools, which were closed at this time. There was also a fall in numbers of assessments, child protection (CP) investigations, CP plans, and admissions to care.
- Assessments identifying a risk of physical abuse and sexual abuse were substantially lower during 2020-21 than in previous years, as were assessments identifying risk factors affecting older school-aged children, such as children's mental health problems, children's drug and alcohol misuse, and self-harm.
- The reduction in demand for CSC services was more pronounced for Black children and for older children. There were no notable differences on the basis of gender or deprivation.
- Trends in admission to care varied depending on placement type. Numbers of children placed in foster care fell during the first and third lockdown periods, whereas children placed with parents (under a care order) increased during the pandemic. Adoptions were also substantially lower during the pandemic.
- The analysis also highlighted seasonal dips in demand that are evident every year during the August summer break and – to a lesser extent – during the Easter and Christmas holidays.
- Despite the disruption during the pandemic, numbers of children assessed with needs around their mental health have been rising year-on-year. This upward trend is likely to have continued in 2021 and into 2022.

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## Introduction

This research briefing presents key findings from a quantitative study of the children in need (CIN) and children looked after (CLA) datasets in England. The project is part of research into the [outcomes of different types of demand in children's social care](#), funded by the Nuffield Foundation. It was carried out by researchers based at Kingston University, in collaboration with the social care data and analysis team at Ofsted, which is the inspectorate for CSC. The work reported here concerns the effect on demand and provision during the first year of the Covid-19 pandemic, when stringent social distancing measures were implemented by national and local government. In many countries, there have been concerns about risks to children's health, wellbeing and safety during this period, when the capacity of services to respond appropriately may also have been reduced. The impact of the pandemic on demand and provision is therefore an important issue for the study of contemporary child welfare services.

## Aims and objectives

The aim of this work was to explore whether and how patterns of demand and provision were affected during the first year of the Covid-19 pandemic. Specific research questions were:

1. Were patterns of demand and provision during 2020/21 different from those experienced in previous years?
2. What were the effects of national lockdown periods?
3. Did the effects vary for different groups of children, based on demographic characteristics such as age, gender, ethnicity and deprivation?

## Methods

The research was designed as a secondary analysis of administrative data from the national children in need (CIN) and children looked after (CLA) returns, which are data collected by LAs in England. The data is held by the Department for Education (DfE) and an extract is also held by Ofsted for analysis to support its research and analysis work, as well as statutory inspections of CSC. All data management and analysis took place within the Ofsted secure data environment. Anonymised individual case-level data were extracted for all children in need and children in care between April 2014 and March 2021. The data included information on levels of demand such as referrals, CIN episodes, Section 47 enquiries, CP plans, and periods of care. It also included information on child characteristics including age, gender, and ethnicity. Data on ethnicity were limited to broad, heterogeneous categories which may obscure differences between different ethnic groups in England. For all school-aged children Lower Layer Super Output Area (LSOA) codes were appended using the schools census (linked via the Pupil Matching Reference), which enabled the analysis of Index of Multiple Deprivation (IMD) scores; this part of the analysis is therefore limited to school-aged children only.

Firstly, the data was aggregated by year in order to see overall annual changes. Following this, the data was aggregated by month in order to see the changing patterns within years. Month was chosen as the unit of aggregation (rather than week) to reduce levels of low-count volatility and zeroes, especially for groups with relatively small numbers (e.g. children leaving care via adoption). However, it is reasonable to assume that there were fluctuations within months. Descriptive statistics using line charts and bar charts were used to show how patterns of demand and provision during 2020/21 differed from previous years. Discontinuities in the CSC data may be a result of events that occurred during the pandemic, so key events (such as school closures) are considered alongside the descriptive analysis using the CIN and CLA returns. However, the analysis in this report is descriptive and no formal statistical tests were carried out to test the impact of

specific events during the pandemic. The findings are based on all-England figures and more research would be needed to show how patterns varied between Local Authorities and Regions.

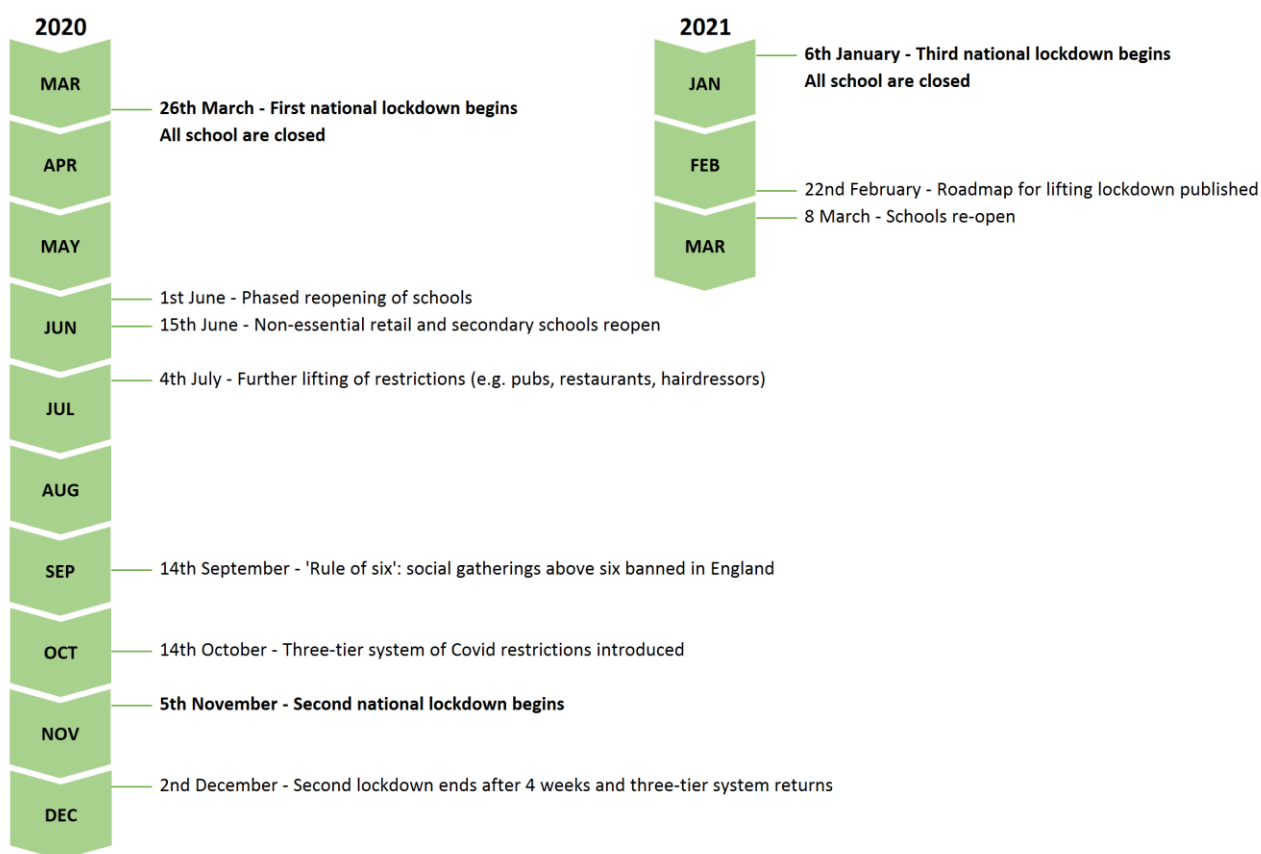
Since all LAs submit data through the DfE’s online data collection portal, which specifies automatic validation rules<sup>3</sup>, very little data cleaning was required. The data for Hackney was not submitted in the 2020/21 CIN returns and so was excluded from the analysis.

## Findings

### Timeline of Covid-19 restrictions

Figure 1 shows the timeline of Covid-19 restrictions between March 2020 and March 2021, which is the period focused on in these findings. National lockdowns are highlighted in bold. (Dis)continuities in the CSC data may be a result of events that occurred during the pandemic, so key events shown in Figure 1 (such as school closures) are considered alongside the trends described in the findings below.

Figure 1. Timeline of Covid-19 restrictions (March 2020 - March 2021)



### Annual trends in demand

Table 1 shows annual changes in demand for CSC services between 2014 and 2021. Each financial year runs from 1<sup>st</sup> April to the 31<sup>st</sup> March. CSC services were lower overall in 2020/21 compared with the previous year. Between 2019/20 and 2020/21 there were decreases in referrals (-7%), CIN episodes (-7%), CP plans (-

<sup>3</sup> <https://www.gov.uk/government/publications/children-in-need-census-2021-to-2022-reports-specifications>

4%), and Children Looked After (-9%), which were all larger than the decreases seen in previous years. In what follows, the data is aggregated by month in order to see the changing patterns within the years.

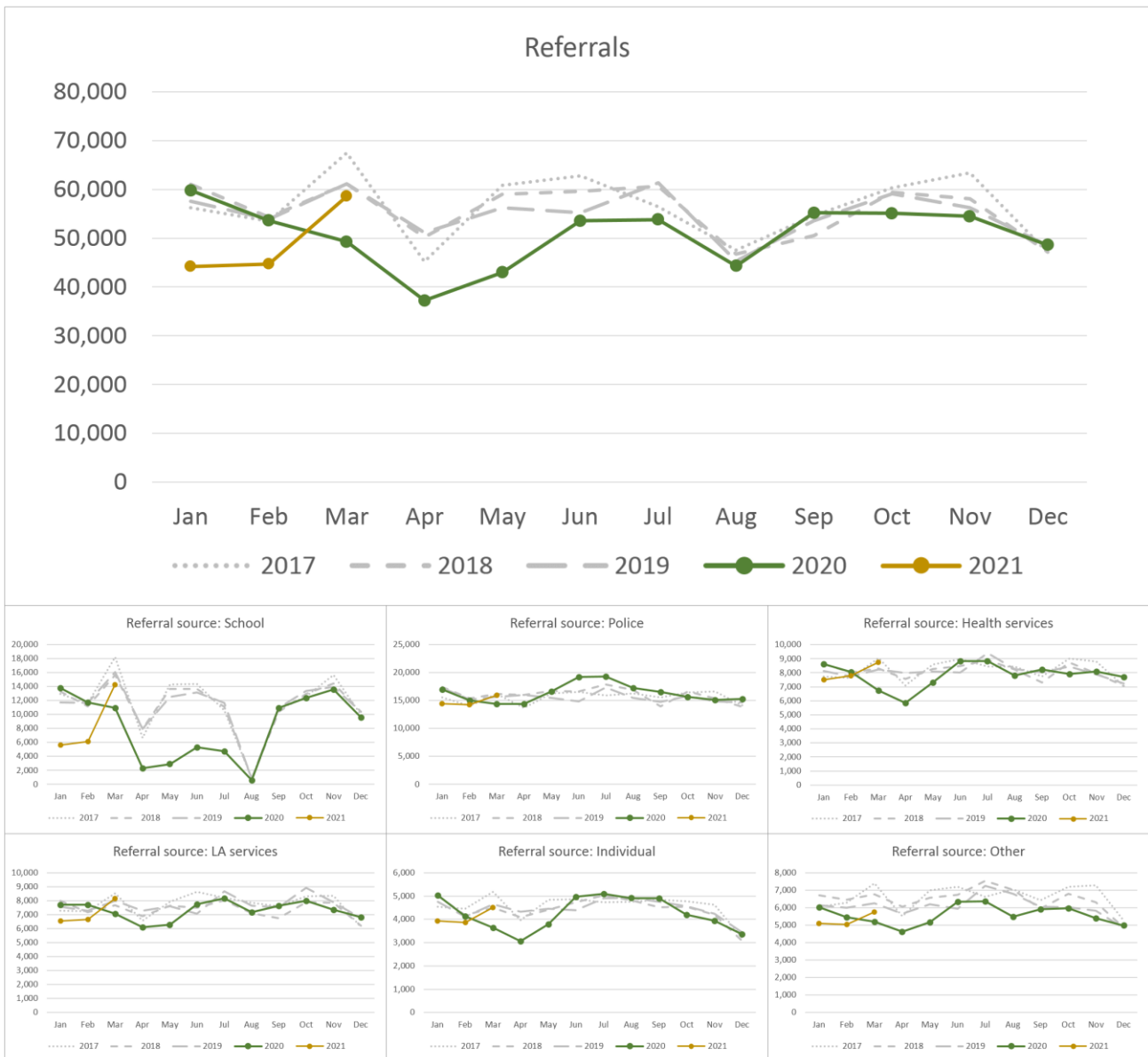
Table 1. Annual changes in demand for CSC services 2014-21

Year	Referrals		CIN starting		CIN ending		S47	
	Count	% change	Count	% change	Count	% change	Count	% change
2014/15	635620		403,300		364,330		160,490	
2015/16	621470	-2.2%	401,480	-0.5%	353,590	-2.9%	172,510	+7.5%
2016/17	646120	+4.0%	400,110	-0.3%	353,860	+0.1%	185,680	+7.6%
2017/18	655630	+1.5%	406,770	+1.7%	349,130	-1.3%	198,090	+6.7%
2018/19	650930	-0.7%	408,880	+0.5%	362,830	+3.9%	201,170	+1.6%
2019/20	642980	-1.2%	408,310	-0.1%	371,070	+2.3%	201,000	-0.1%
2020/21	597760	-7.0%	380,020	-6.9%	339,950	-8.4%	198,790	-1.1%
Year	CPP starting		CPP ending		CLA starting		CLA ending	
	Count	% change	Count	% change	Count	% change	Count	% change
2014/15	62210		60400		33147		32343	
2015/16	63310	+1.8%	62,750	+3.9%	33875	+2.2%	32,826	+1.5%
2016/17	66410	+4.9%	65420	+4.3%	34469	+1.8%	32201	-1.9%
2017/18	68770	+3.6%	65920	+0.8%	33498	-2.8%	30643	-4.8%
2018/19	66680	-3.0%	67910	+3.0%	32907	-1.8%	30082	-1.8%
2019/20	66380	-0.4%	66970	-1.4%	32108	-2.4%	30147	+0.2%
2020/21	63830	-3.8%	65200	-2.6%	29190	-9.1%	28178	-6.5%

## Referrals

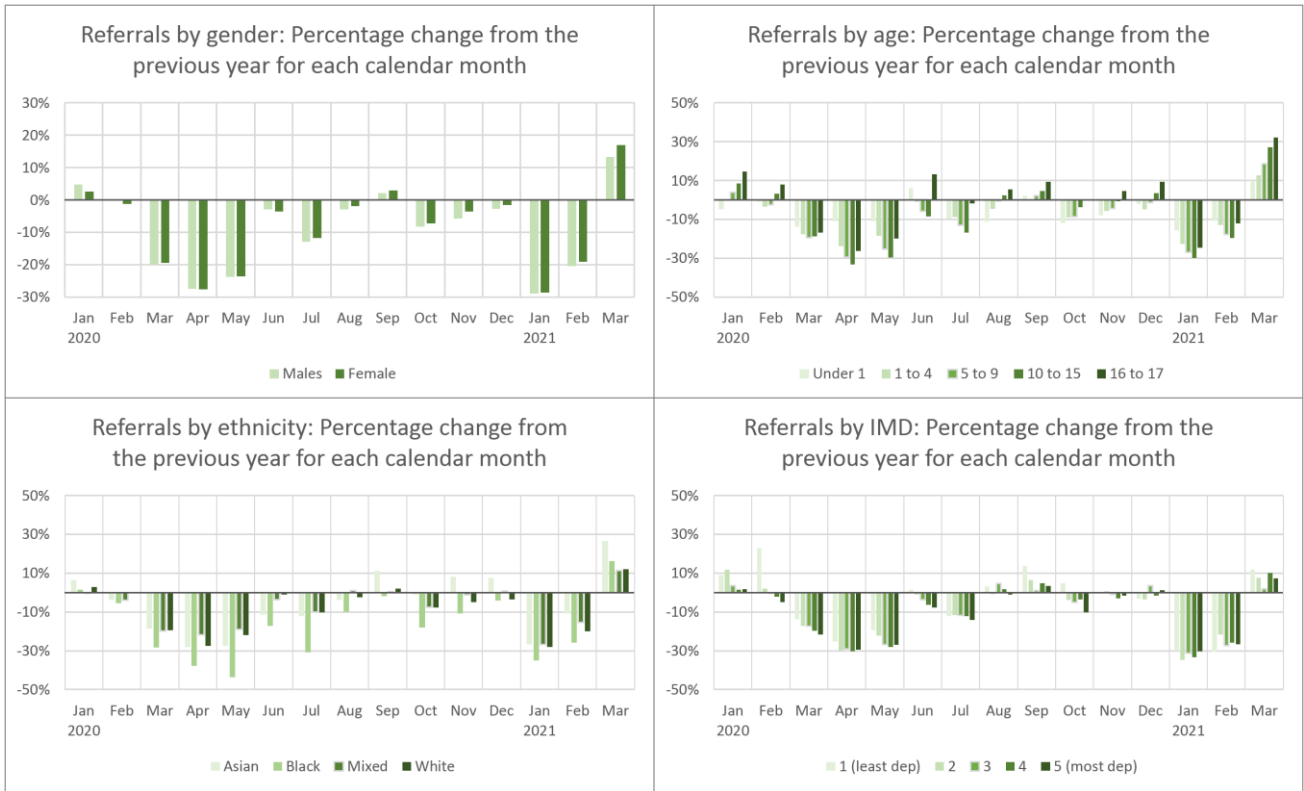
- As shown in Figure 2, numbers of referrals were lower during the first lockdown of Spring 2020 than in previous years. For example, in April 2020, there were 27% fewer children referred to CSC than in April 2019. Referrals returned to a broadly similar level to the year before when lockdown restrictions were lifted in June 2020.
- Numbers of referrals were also lower during the third lockdown of January 2021 than in previous years. For example, in January 2021 there were 26% fewer children referred to CSC than in January 2020. Referrals returned to a broadly similar level as previous years when lockdown restrictions were lifted in March 2021.
- Figure 2 shows that most of the reduction in referrals was from schools. During the first year of the pandemic schools closed at the end of March 2020 and did not fully reopen until September 2020. During the second year of the pandemic schools closed between January 2021 and March 2021. As expected, school referrals dropped during these periods.
- Referrals from health services, LA services, and individuals were slightly lower during the first year of the pandemic, but police referrals were slightly higher in mid-2020 compared with previous years.
- In each year, a seasonal effect is seen, with referrals falling in August (Summer holidays). To a lesser extent a seasonal effect is also seen in April (Easter holidays) and December (Christmas holidays).

Figure 2. Trends in referrals 2017-2021



- As shown in Figure 3, the fall in referrals was more pronounced for Black children. For example, in May 2020, there were 44% fewer Black children referred to CSC than in May 2019, compared to an equivalent fall of 22% for White children. The same pattern was found across all age groups.
- Figure 3 also shows that school-aged children were particularly affected. For example, in April 2020 there were 33% fewer 10 to 15 year olds and 30% fewer 5 to 9 year olds referred to CSC than in 2019, compared with an equivalent fall of 24% for 1 to 5 years and 11% for under 1s.
- There were no notable differences on the basis of gender or deprivation.

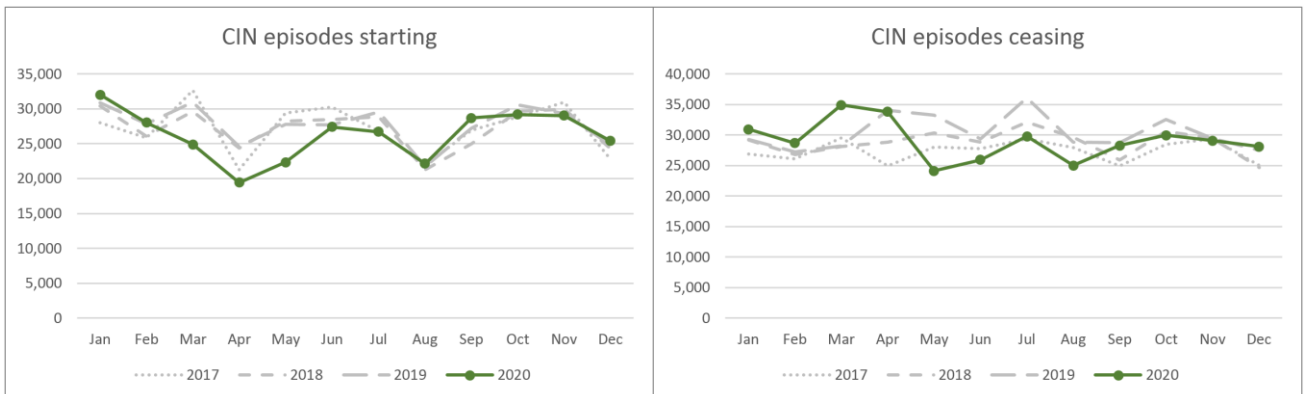
Figure 3. Percentage change in referrals from 2019-2021 by calendar month



### Children in need (CIN)

- As shown in Figure 4, numbers of CIN episodes starting were lower during the first lockdown of Spring 2020 than in previous years, e.g. in May 2020 there were 20% fewer CIN episodes starting than in May 2019.
- Figure 4 also shows that numbers of CIN episodes ceasing fell by 27% in May, and remained below the level of previous years between May and September 2020.

Figure 4. Trends in CIN episodes starting and ceasing 2017-2020

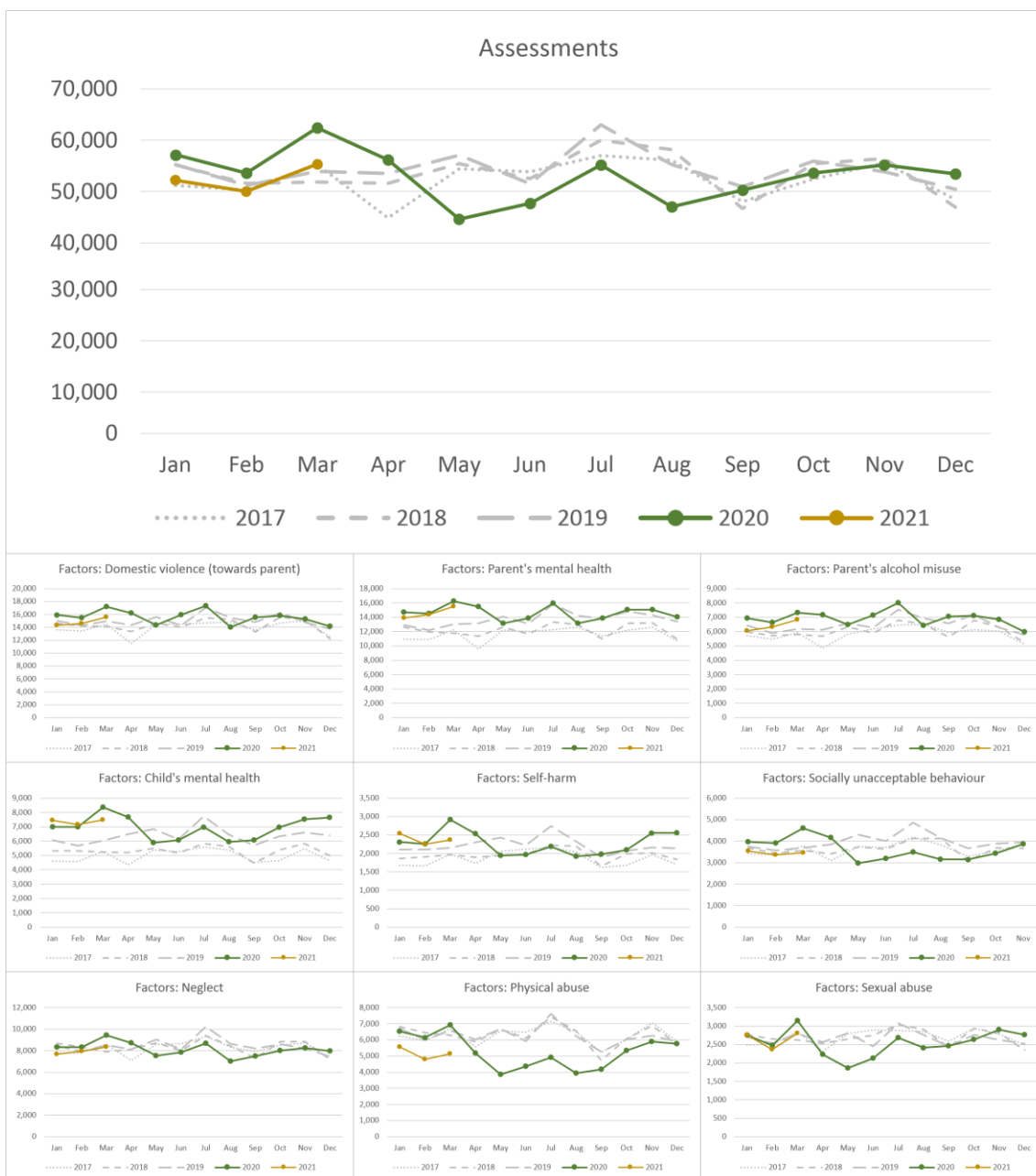


### Assessments

- Numbers of social work assessments increased in March 2020 (16% higher than in March 2019), but then dropped below the levels seen in previous years between May and September 2020.

- Figure 5 shows a selection of trends for factors recorded at assessments. Assessments where domestic violence (towards the parent) was recorded generally followed the trend for assessments as a whole; numbers were similar to previous years except for March and April, when they were slightly higher. A similar pattern is seen for parental mental health and parental drug and alcohol misuse.
- The fall in numbers during the first lockdown appeared more pronounced for assessments identifying risk factors relating to the child compared with those of the parent. The fall in assessments identifying children’s mental health problems, children’s drug and alcohol misuse, and self-harm also came at a point when numbers for these factors were already relatively high compared to previous years.
- Assessments identifying a risk of physical abuse were similar to previous years but dropped by 44% between March and May 2020. The figures were substantially below the level of previous years between May and September 2020. A similar pattern was observed in relation to assessments of sexual abuse, child sexual exploitation, and going/being missing.

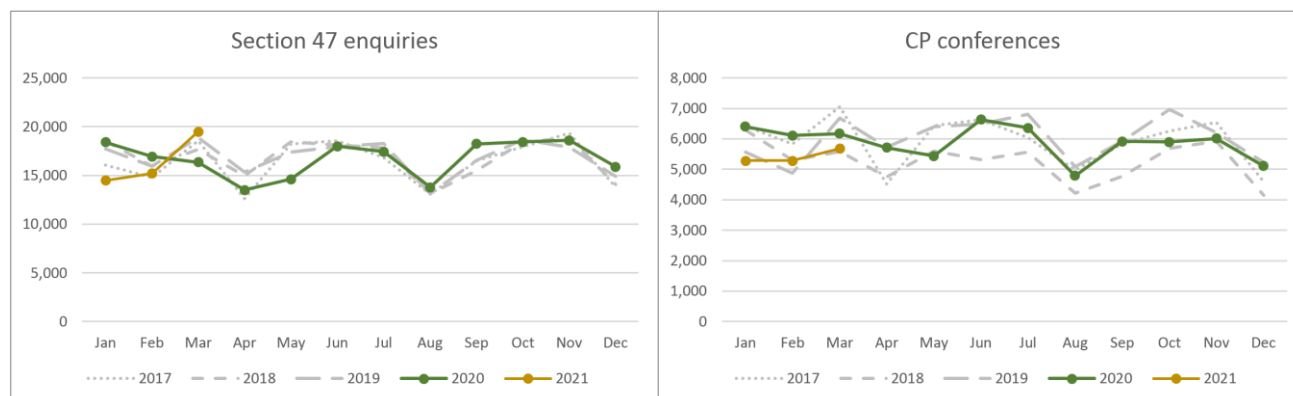
Figure 5. Trends in assessments and factors at assessment 2017-2021



### Section 47 enquiries and CP conferences

- As shown in Figure 6, numbers of Section 47 enquiries were slightly lower during Spring 2020 than in previous years. In May 2020, there were 16% fewer Section 47 enquiries than in May 2019. Numbers were also lower in January 2021 than in previous years e.g. 21% lower than January 2020.
- Figure 6 shows that numbers of CP conferences were broadly in line with trends in previous years.
- Each year, a seasonal effect is seen with numbers falling in August (summer holidays), and to a lesser extent, April (Easter holidays) and December (Christmas holidays).

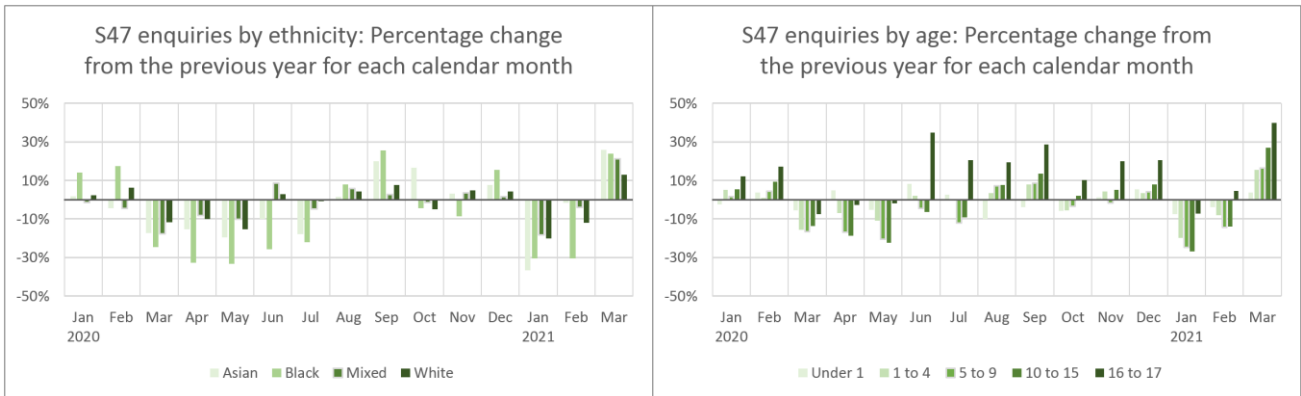
Figure 6. Trends in Section 47 enquiries and CP conferences 2017-2021



- As shown in Figure 7, the fall in Section 47 enquiries during the first lockdown was more pronounced for Black and Asian children. For example, in April 2020, there were 33% fewer Section 47 enquiries for Black children than in April 2019, compared to an equivalent fall of 15% for Asian children and 10% for White children. By June 2020, when overall numbers of Section 47 enquiries had caught up to their equivalent level in 2019, there were still 26% fewer enquiries carried out for Black children than in June 2019, compared with an equivalent 3% increase for White children.
- A similar pattern was seen during the third lockdown with fewer Section 47 enquiries carried out for Black and Asian children during January and February 2021 compared with the previous year.
- The pattern was reversed in September 2020 and in March 2021 (when schools fully reopened), with more enquiries undertaken for Black children and Asian children compared with equivalent figures for White children.
- Figure 7 also shows that children aged 5 to 15 were most affected by the reduction in Section 47 enquiries during the first and third lockdown periods. However, Section 47 enquiries for 16 to 17 year olds increased substantially after May 2020. For example, in November 2020 there were 20% more enquiries carried out for children aged 16-17 than in 2019, much higher than the equivalent figures for younger age groups.
- There were no notable differences on the basis of gender or deprivation (not shown).

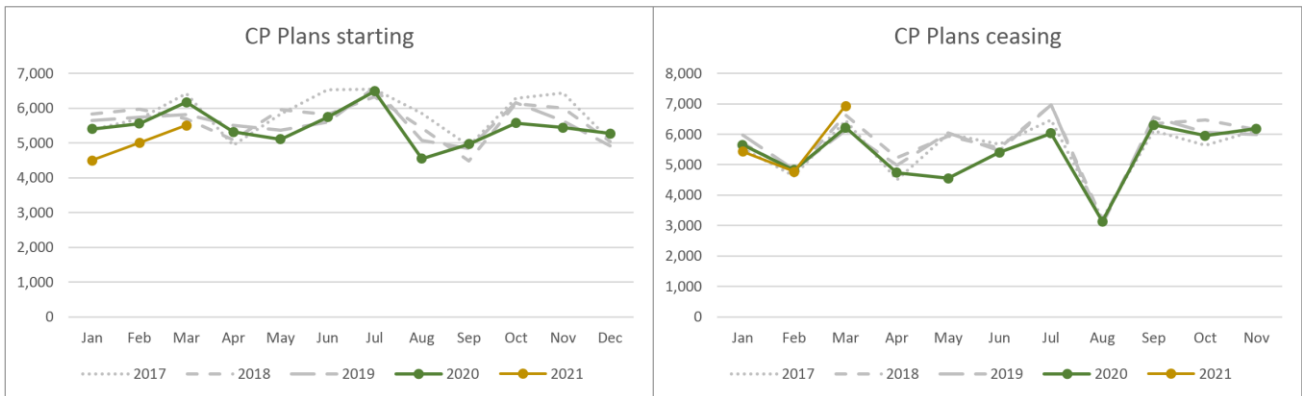


Figure 7. Percentage change in Section 47 enquiries from 2019-2021 by calendar month



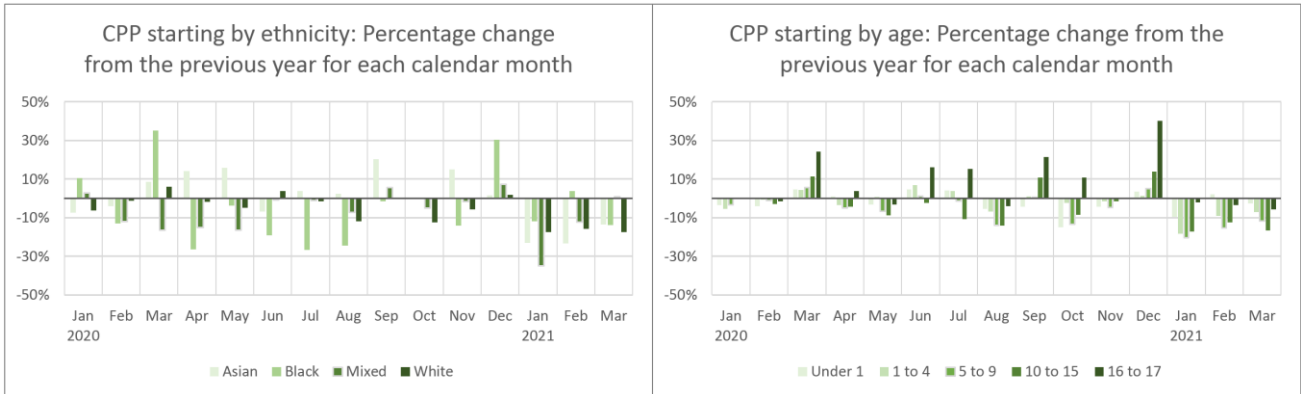
- As shown in Figure 8, numbers of CP plans starting did not deviate substantially from those recorded in previous years, except during the months of January and February 2021; e.g. there were 17% fewer CP Plans in January 2021 than in January 2020.
- Figure 8 also shows that CP plans ceasing did not deviate substantially from those recorded in previous years, except for May 2020 which saw 25% fewer CP Plans ceasing than in May 2019.
- In each year, a seasonal pattern is seen with numbers of CP plans ceasing falling sharply in August. Numbers of CP plans both starting and ceasing appear to peak in the month of July before falling in August. Numbers of CP plans ceasing are also consistently higher in March.

Figure 8. Trends in CP plans starting and ceasing 2017-2021



- As shown in Figure 9, the fall in CP plans starting during the first lockdown was more pronounced for Black and Mixed Heritage children. For example, in April 2020, there were 26% fewer CP plans starting for Black children than in April 2019, whereas numbers for White children fell by only 2%. By July 2020, when overall numbers of CP plans starting had caught up to their equivalent level in 2019, there were still 27% fewer enquiries being carried out for Black children than in July 2019.
- The reverse was seen in the months of March 2020 and December 2020 (the months leading up to the first and third lockdowns). In March 2020 there were 35% more CP plans starting for Black children than in March 2019, and in December 2021 there were 30% more CP plans starting for Black children than in December 2019, much higher than the equivalent figures for other ethnic groups.
- Figure 9 also shows that while children aged 5 to 15 were particularly affected by the reduction in CP plans starting during the lockdown, it was largely the older age group of 16 to 17 year olds that accounted for any comparative increase in CP plans in the second half of 2020. For example, in December 2020 there were 40% more CP plans starting for children aged 16 to 17 than in 2019, much higher than the equivalent figures for younger age groups.

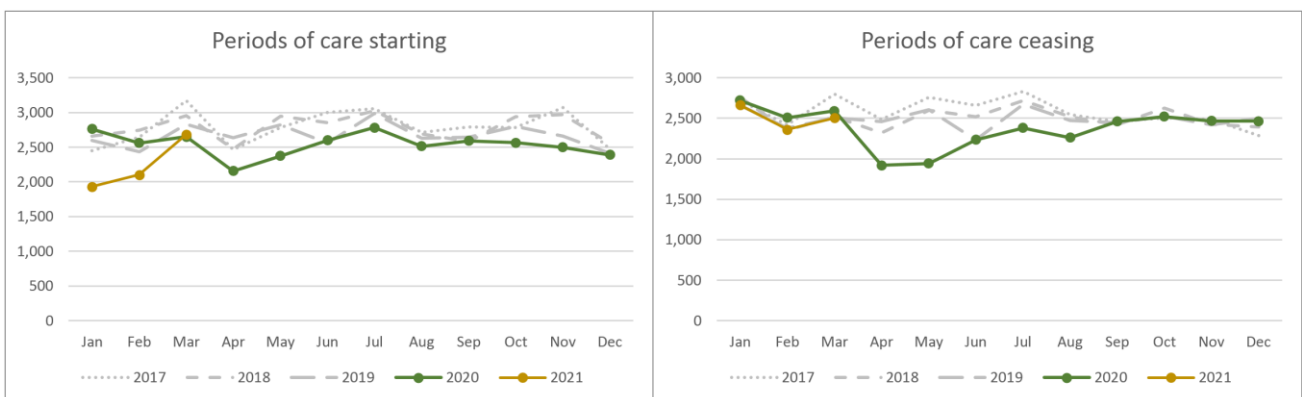
Figure 9. Percentage change in CP plans starting from 2019-2021 by calendar month



Children entering and leaving care

- As shown in Figure 10, numbers of children leaving and entering care during the Spring 2020 lockdown were below the levels recorded in previous years. For example, in May 2020, there were 16% fewer periods of care starting and 26% fewer periods of care ceasing compared to the same month in 2019. Numbers of children entering and leaving care remained lower between the months of April and June compared with previous years.
- Most of the reduction in children entering care during 2020 was due to a fall in admissions under Section 20 of the 1989 Children Act<sup>4</sup>. For example, in May 2020 there were 23% fewer admissions to care under Section 20, compared to 9% fewer admissions under a Care Order.
- Numbers of periods of care starting also dropped in January 2021; there were 30% fewer periods of care starting in January 2021 than in January 2020. Numbers of children entering care returned to a broadly similar level as previous years in March 2021.
- When the numbers of children entering care are compared with those leaving care each month, the figures show there was a net inflow into care during the Spring 2020 lockdown and a net outflow during the Winter 2020/2021 lockdown.

Figure 10. Trends in children entering and leaving care 2017-2021



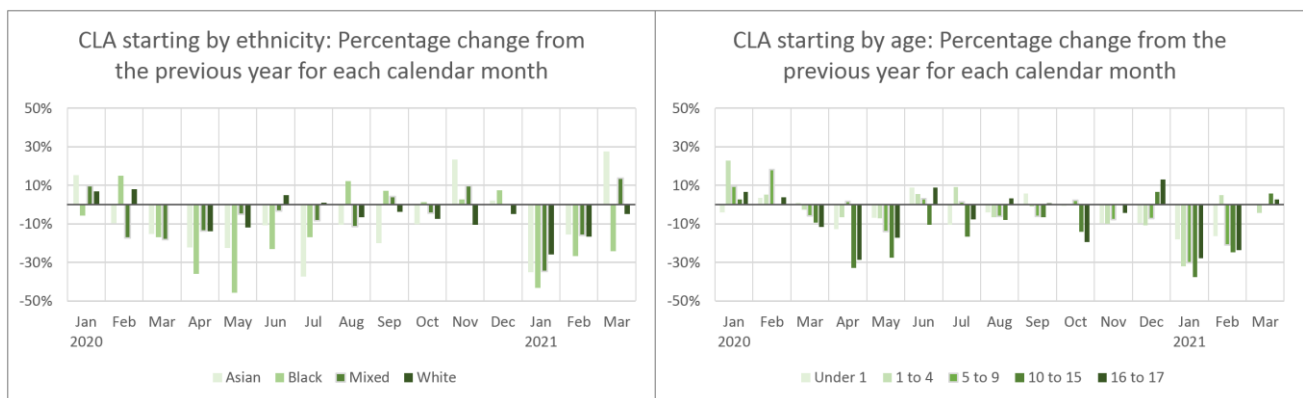
- As shown in Figure 11, the fall in children entering care during the first lockdown was more pronounced for Black and Asian children. For example, in May 2020, there were 46% fewer periods

<sup>4</sup> A voluntary arrangement that requires the agreement of parents or carers with parental responsibility.

of care starting for Black children than in May 2019, compared to a fall of 23% for Asian children and 12% for White Children. By July 2020, when overall numbers of new periods of care had caught up to their equivalent level in 2019, there were still 37% fewer Asian children and 17% fewer Black children entering care than in July 2019, much lower than equivalent figures for White and Mixed Heritage children. To a lesser extent, a similar pattern is seen in January and February 2021.

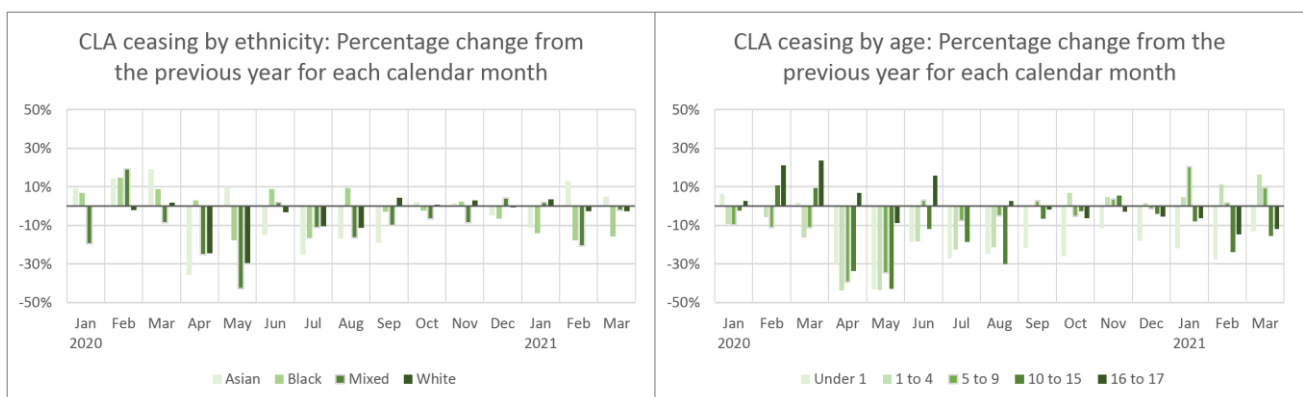
- Figure 11 also shows that older age groups were particularly affected by the reduction in admissions to care during the first lockdown. For example, in April 2020 there were 33% fewer children aged 10-15 and 29% fewer children aged 16-17 entering care, much higher than the equivalent figures for younger age groups. There were no notable differences during the second and third lockdowns.

Figure 11. Percentage change in children entering care from 2019-21 by calendar month



- As shown in Figure 12, the ethnicity profile of children leaving care, unlike those entering care, was more varied. The first lockdown was characterised by a higher number of children from White and Mixed Heritage leaving care compared with those entering care. For example, in May 2020, there were 43% fewer Mixed Heritage children and 30% fewer White children leaving care than in May 2019, lower than the equivalent figure for Black children.
- Figure 12 also shows that the reduction in children leaving care during Spring 2020 was more evenly spread among age groups than was the case for children starting a care episode.

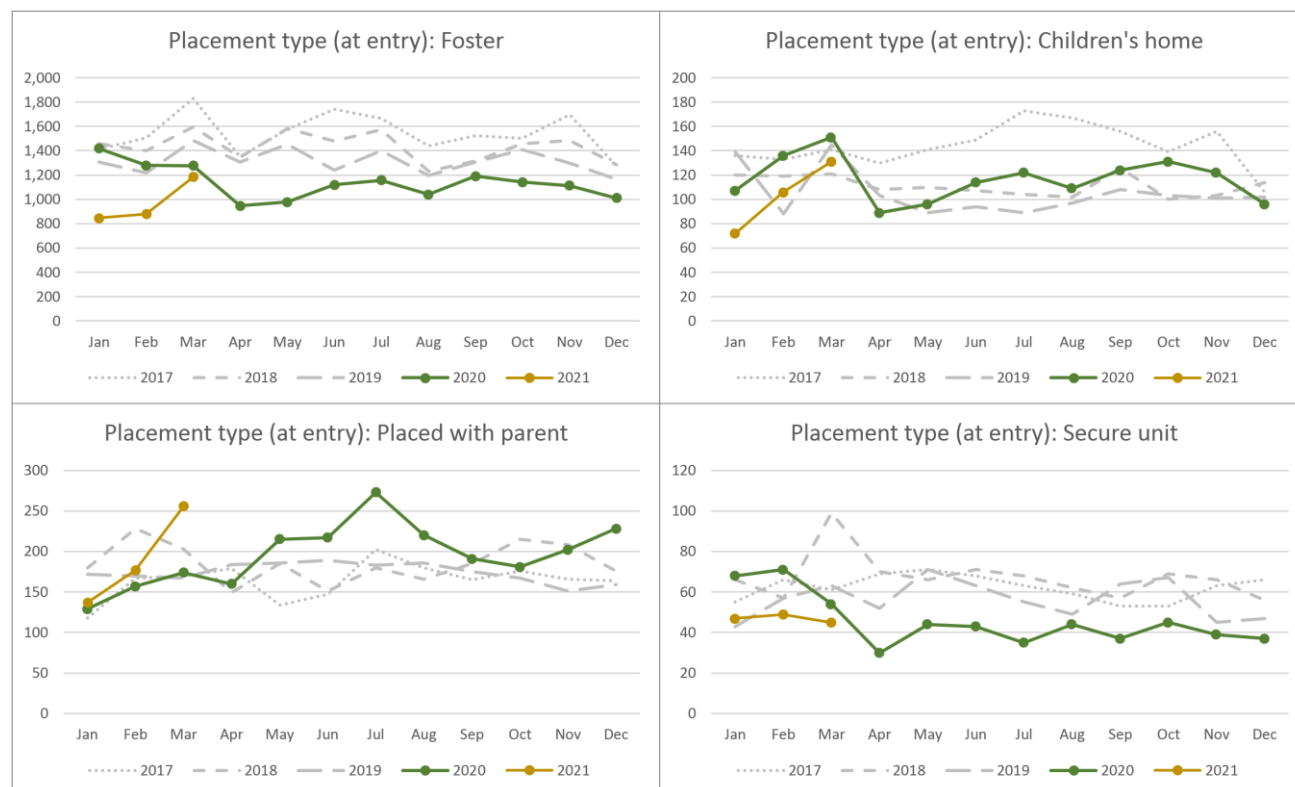
Figure 12. Percentage change in children leaving care from 2019-21 by calendar month



- As shown in Figure 13, the impact of lockdown varied for different types of placement. There was a substantial drop in foster care placements, for example, with numbers of children entering foster care in May 2020 falling by 33% compared to May 2019. Similar falls were seen during January and February 2021 (e.g. 40% lower in January 2021 compared to January 2020).

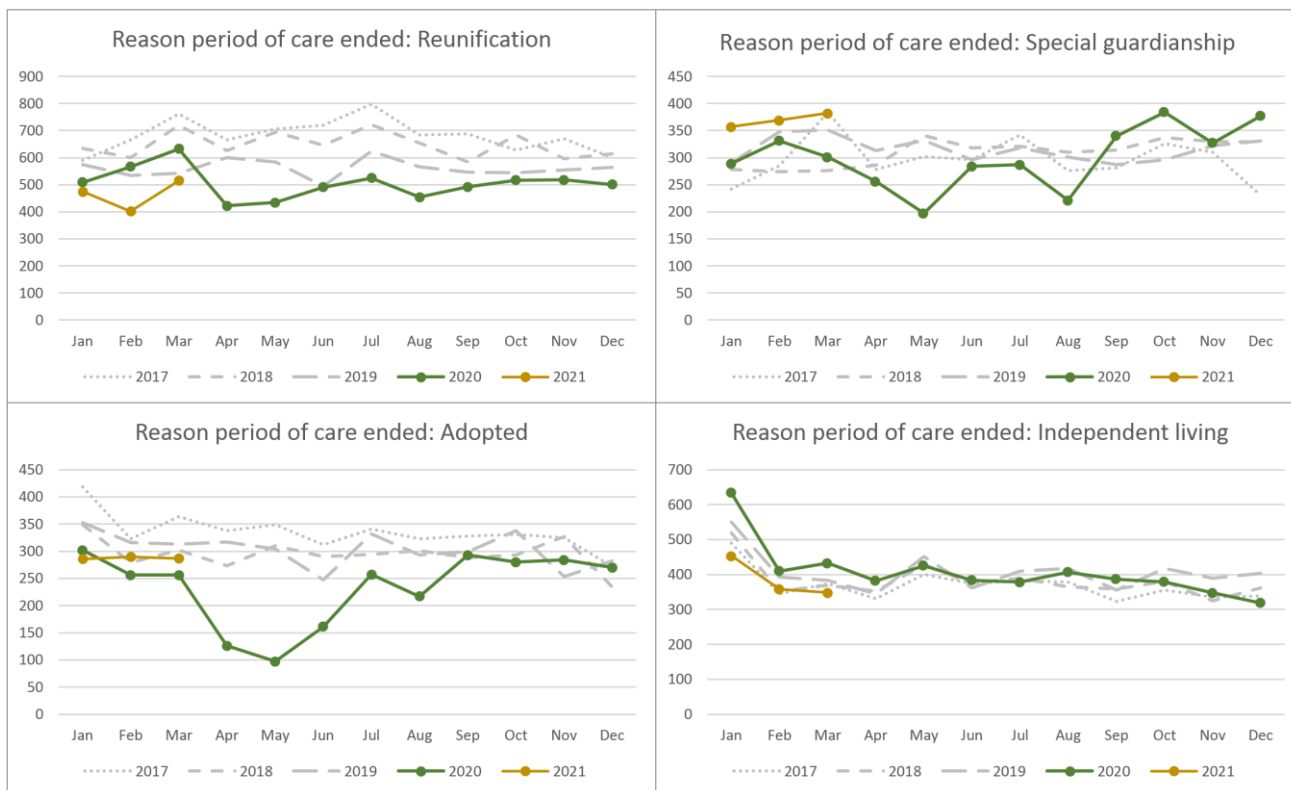
- In contrast, there was a rise in children placed with parents over this period, peaking in July 2020 when numbers were 49% higher than in July 2019. Similar increases were seen at the end of the third lockdown peaking in March 2021 (e.g. 47% higher in March 2021 compared to March 2020).
- Numbers of children being placed in secure units and in independent living fell steeply in April 2020 and in both cases remained substantially below previous years' levels for the rest of 2020.
- With the exception of a drop in numbers of children placed in a children's home in April 2020, the figures for this type of placement did not deviate substantially from those recorded in previous years.

Figure 13. Trends in types of placement on children's entry to care 2017-2021



- As shown in Figure 14, the impact of lockdown on children leaving care varied for different types of exit route. For example, figures for children leaving care to live independently were similar to those from previous years. The most noticeable trend for this cohort is a spike in numbers recorded in January, which was identified in all years.
- In contrast, numbers of children being adopted fell steeply during April and May 2020. For example, in May 2021 numbers of children adopted were one third of the levels seen in May 2020. Numbers of adoptions recovered to previous years' levels by September 2020.
- The fall in children leaving care to return home during the Spring 2020 lockdown came at a point when numbers children exiting via reunification were already decreasing year-on-year; however, there were substantial falls in April and May 2020. The figures for special guardianship were more volatile but fell in May 2020 (41% lower than in May 2019).

Figure 14. Trends in reasons for children leaving care 2017-2021



## Discussion and implications

The findings should be seen in the context of national and international research into the impact of Covid-19 on the welfare of children. An accumulating body of literature points to three main areas of concern. The first is that families and communities have been placed under enormous stress, particularly in deprived regions and neighbourhoods that have been disproportionately affected by the health crisis and its socio-economic consequences<sup>5</sup>. The second is that certain risk factors for child abuse and neglect, such as domestic violence and parental mental illness, may have increased at a time when the provision of children’s services – including child protection – have been reduced and constrained<sup>6</sup>. This has been particularly

<sup>5</sup> Patel, J.A., Nielsen, F.B.H., Badiani, A.A., Assi, S., Unadkat, V.A., Patel, B., Ravindrane, R. and Wardle, H. (2020) 'Poverty, inequality and COVID-19: the forgotten vulnerable', *Public health*, **183**, pp. 110-111.

<sup>6</sup> Kourti, A., Stavridou, A., Panagouli, E., Psaltopoulou, T., Spiliopoulou, C., Tsofia, M., Sergentanis, T.N. and Tsitsika, A. (2021) 'Domestic violence during the COVID-19 pandemic: a systematic review', *Trauma, Violence, & Abuse*, p. 15248380211038690.

apparent during lockdown periods<sup>7</sup>. Third, the cumulative effect of such trends could eventually lead to a surge in referrals, investigations and interventions once the immediate health crisis is over and services resume normal operation. In the UK, these concerns must also be seen in the context of pre-existing problems within the children's social care system: a rising care population, acute budgetary pressures, erosion of preventative services, and steep inequalities in provision<sup>8</sup>.

CSC trends during the first year of the Covid-19 pandemic therefore have implications not only for the protection of children during periods of national crisis, but also for the system as a whole. The evidence in this report has highlighted the following areas:

### 1. *The importance of schools*

It is widely accepted that the closure of schools during national lockdowns had a hugely damaging effect on children's welfare<sup>9</sup>. As well as the loss of education, children experienced a loss of routine, friendships, social interactions and potentially a safe haven from problems at home. This report shows that the steep fall in referrals to and provision of CSC services during the first and third national lockdowns coincided with the closure of schools throughout the country. In contrast, little change was observed during the second lockdown when schools remained open. It is also worth noting that seasonal dips in demand are evident every year during the August summer break and – to a lesser extent – during the Easter and Christmas holidays. These dips in demand affect not just referrals but all types of provision including Section 47 investigations, CP plans and admissions to care, and are often preceded by a peak in demand during March and July. Such observations reinforce the importance of schools, not just as a source of referrals but also of professional expertise contributing to assessment, decision-making and care-planning. The findings also show how children and families' experience of child welfare provision is shaped by institutional priorities and constraints. This is relevant to the study of inequalities, which are shaped by the interaction of demand and supply factors.

### 2. *Race and ethnic inequalities*

The Covid-19 pandemic exposed and exacerbated the health inequalities experienced by ethnically minoritized groups, both in the UK and in other countries<sup>10</sup>. Inequalities were reflected in the unusual patterns seen in the first lockdown – and to a lesser extent in the third lockdown – when the steep fall in CSC demand and provision was noticeably more pronounced for minority groups than for White (British) children. Black children were particularly affected, although similar trends were observed for children of Asian or Mixed heritage. The reasons for this are unclear, although may be connected to the closure of schools as well as the type of cases that child protection agencies chose to focus on during lockdown. Katz

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<sup>7</sup> Panovska-Griffiths, J., Szilassy, E., Johnson, M., Dixon, S., De Simoni, A., Wileman, V., Dowrick, A., Emsley, E., Griffiths, C. and Barbosa, E.C. (2022) 'Impact of the first national COVID-19 lockdown on referral of women experiencing domestic violence and abuse in England and Wales', *BMC Public Health*, **22**(1), pp. 1-8.

<sup>8</sup> Hood, R., Goldacre, A., Gorin, S., Bywaters, P. and Webb, C. (2020) 'Identifying and understanding the link between system conditions and welfare inequalities in children's social care services', Kingston Upon Thames, Kingston University and St Georges, University of London.

<sup>9</sup> Timmins, N. (2021) 'Schools and coronavirus: The government's handling of education during the pandemic', London, Institute for Government.

<sup>10</sup> Marmot, M., Allen, J., Goldblatt, P., Herd, E. and Morrison, J. (2020) 'Build Back Fairer: The COVID-19 Marmot Review. The Pandemic, Socioeconomic and Health Inequalities in England', London, Institute of Health Equity.

and colleagues<sup>11</sup> refer to the risk of children being ‘doubly marginalised’ during periods of crisis, meaning that higher exposure to risk coincides with lower levels of support and attention from services. It will be important to scrutinise carefully the intersections of social structures, such as gender, race, class and disability, which contribute to such inequalities among different groups and communities.

### 3. *Domestic abuse and violence*

Domestic abuse and violence (DAV) is the most common risk factor identified in child welfare assessments<sup>12</sup>. Globally, there is substantial evidence that lockdowns were associated with increased incidence and reduced reporting of DAV, leaving vulnerable women and children both more at risk and less likely to receive help<sup>13</sup>. The findings in this report suggest that the likely increase in incidents of DAV over this period does not seem to have prompted a similar increase in social work assessments of DAV, which were broadly similar to numbers undertaken in previous years. However, it is important to remember that DAV is a complex problem that appears in many forms within families and relationships. Broad trends in what is recorded as DAV may therefore mask changes in the type and severity of cases referred to CSC. A more nuanced understanding of DAV in the child protection context would be helpful in future public health crises<sup>14</sup>.

### 4. *Child and adolescent mental health*

Government measures to control the spread of Covid-19 had serious repercussions for children’s mental health<sup>15</sup>. Emotional and psychological problems associated with anxiety, isolation and confinement were particularly concerning for older children and adolescents, whose development was hindered in critical ways. Trends in factors at assessment show that numbers of children with mental health problems identified by CSC services were substantially higher than previous years at the start of 2020, i.e. just before the pandemic hit, and had again risen to higher levels by the end of 2020 and beginning of 2021. Although the England data only goes up to the end of March 2021 when the country was still emerging from the third national lockdown, child and adolescent mental health is an area where there is understandable concern about a post-pandemic surge in demand.

### 5. *Medium and long-term trends*

If the short-term impact of the pandemic was largely to dampen demand for CSC services, such effects were almost certainly driven by supply-side factors. In other words, the first year of the pandemic reduced the responsiveness of services – e.g. due to the closure of schools – when levels of need in the community were likely to have risen. In the medium term, the continuing toll of Covid-19 as well as the impact of rising inflation and other economic problems make it hard to envisage anything but a further deterioration in the circumstances of vulnerable children and families. Theoretically, this should lead to an increase in referrals, assessments and interventions, with the most likely immediate pressure coming from referrals of older children and adolescents. In many ways, the latter would be a continuation of pre-Covid trends, with admissions to care and demand for mental health services rising for older children. More unpredictable is

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<sup>11</sup> Katz, I., Katz, C., Andresen, S., Bérubé, A., Collin-Vezina, D., Fallon, B., Fouché, A., Haffejee, S., Masrawa, N. and Muñoz, P. (2021) 'Child maltreatment reports and child protection service responses during covid-19: knowledge exchange among Australia, Brazil, Canada, Colombia, Germany, Israel, and South Africa', *Child Abuse & Neglect*, **116**, p. 105078.

<sup>12</sup> Department for Education (2020) *Characteristics of children in need: 2020 to 2021 (England)*, Available online: <https://www.gov.uk/government/statistics/characteristics-of-children-in-need-2020-to-2021>.

<sup>13</sup> See 4 and 5

<sup>14</sup> <https://www.nuffieldfoundation.org/project/rethinking-domestic-abuse-in-child-protection-responding-differently>

<sup>15</sup> Samji, H., Wu, J., Ladak, A., Vossen, C., Stewart, E., Dove, N., Long, D. and Snell, G. (2022) 'Mental health impacts of the COVID-19 pandemic on children and youth—a systematic review', *Child and Adolescent Mental Health*, **27**(2), pp. 173-189.

whether the fiscal constraints on service provision, combined with a renewed focus on Early Help, mean that other types of demand will be diverted away from the statutory system, or whether rates of child protection interventions will start to rise again. Substantial investment in children's services may be necessary to head off such a possibility.

### **Further information**

To find out more about the study, please contact Professor Rick Hood: [rick.hood@sgul.kingston.ac.uk](mailto:rick.hood@sgul.kingston.ac.uk)

A selection of reports, summaries and publications is available to download from the project webpage:

The project has been funded by the Nuffield Foundation, but the views expressed are those of the authors and not necessarily the Foundation. Visit [www.nuffieldfoundation.org](http://www.nuffieldfoundation.org)

July 2022