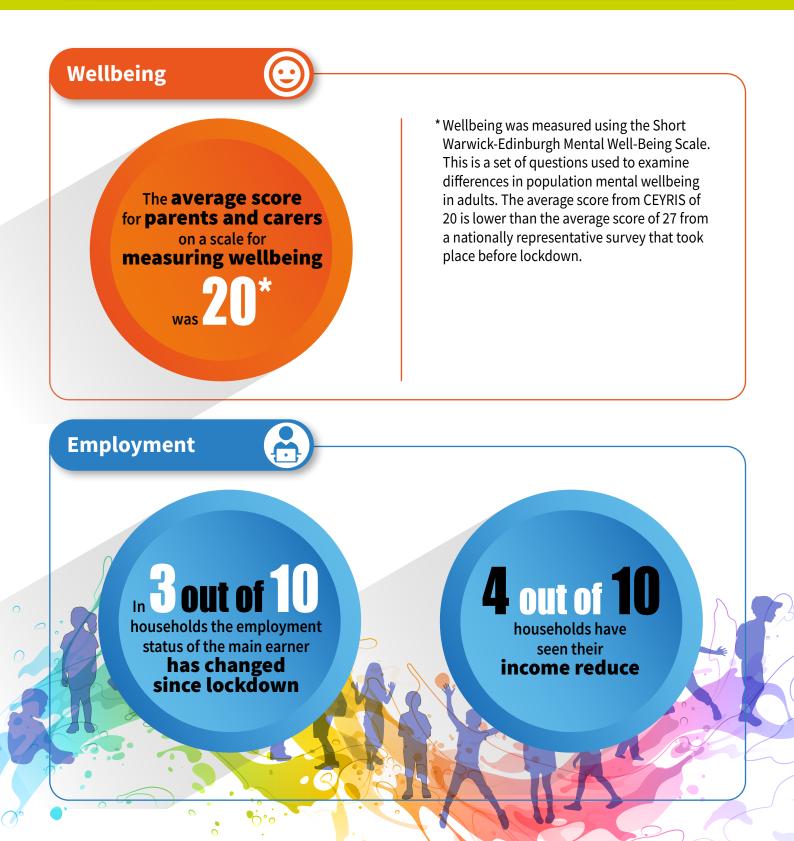


# How did COVID-19 affect children in Scotland?

## Report 3 The experience of parents and carers



### **Health services**

80 out of 100 parents and carers did not need contact with a health visitor or family nurse during lockdown. However . . .



School and nursery

46 out of 100 parents and carers did not need contact with nursery staff during lockdown. However . . .

23 out of 100 did make contact with nursery staff

and

**31 out of 100** would have liked to have had contact **but had not** 

32 out of 100 parents and carers did not need contact with school staff during lockdown. However . . .

55 out of 100 did make contact with school staff

and

**12** out of **100** would have liked to have made contact **but had not**  School and nursery

# $\mathbf{8}$ out of 10

parents and carers were planning to send their children **back to school** or nursery

#### Of those parents and carers:

# 4 **Out of** 10

that their children would catch coronavirus

# **Out of**

that their child might give coronavirus to someone else

## Bout of 10 were confident the school would

manage infection control

# B out of 10

said their children were looking forward to going to nursery or school



COVID-19 Early Years Resilience and Impact Survey (CEYRIS)

Report 3 – The experience of parents and carers of 2–7-year-olds in Scotland during COVID-19

#### **Citation:**

Watson M, Sarica S, Wason D, Mitchell R, Parkinson J. COVID-19 Early Years Resilience and Impact Survey (CEYRIS). Report 3 – The experience of parents and carers of 2–7-year-olds in Scotland during COVID-19. Edinburgh: Public Health Scotland; 2020.

#### For more information, please contact:

Dr Megan Watson, Public Health Intelligence Adviser Email: megan.watson4@nhs.net

Dr Shifa Sarica, Public Health Intelligence Adviser Email: shifa.sarica@nhs.net

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## Introduction

The COVID-19 Early Years Resilience and Impact Survey (CEYRIS) is an online survey launched by Public Health Scotland for parents and carers of 2–7-year-olds in Scotland. The first round of the survey was run between 22 June and 6 July 2020, and was completed by the parents and carers of over 11,000 children in Scotland.

This report is the third in a series presenting the findings from the first round of the survey. It focuses on describing the experience of parents and carers of 2–7-year-old children during the COVID-19 pandemic in Scotland. It covers:

- parents' and carers' health and wellbeing
- the impact of COVID-19 on parents' and carers' employment and income
- parents' and carers' experience of key children's services
- parents' and carers' thoughts and feelings about schools reopening.

There are important methodological caveats that must be considered when using these findings. Our sample is not nationally representative as we did not reach all the groups in our community equally. Our results, therefore, only represent the views of the parents and carers who answered our survey. In particular, under-representation of lower-income families may influence some findings. More information on the background, context and methods of the survey, including an overview of the demographic characteristics of the participants, is provided in the **Background report**.

## Results

In total, we had 11,228 valid responses to our survey.<sup>1</sup> In this section, we report our findings under relevant questions from the survey.

### Parents' and carers' mental wellbeing

**Below are some** statements about feelings and thoughts. For each statement, please tick the box that best describes your experience of each over the last two weeks.

We used the Short Warwick-Edinburgh Mental Well-being Scale (SWEMWBS) to assess the mental wellbeing of parents and carers. This is an established survey instrument for examining differences in population mental wellbeing in adults. It is not used as a clinical assessment tool, so scores on the scale have no meaning in isolation. The questionnaire asked seven positively worded questions about the respondent's thoughts and feelings over the previous two weeks. Responses to the questions are combined to produce a mental wellbeing score.

This section summarises responses for:

- overall mental wellbeing score
- the seven individual questions of the scale.

Please see **Appendix 1** for details on how the SWEMWBS scores reported in this section were calculated.

The mean SWEMWBS score for parents and carers was 20. This was similar in parents and carers of younger children (aged 2–4 years) and older children (aged 5–7 years). These figures are lower than expected. For example, in a nationally representative sample of parents and carers of 3 and 4/5-year-olds in Scotland (Scottish Study of Early Learning and Childcare, SSELC 2019), the mean SWEMWBS score was 27. However, as our CEYRIS

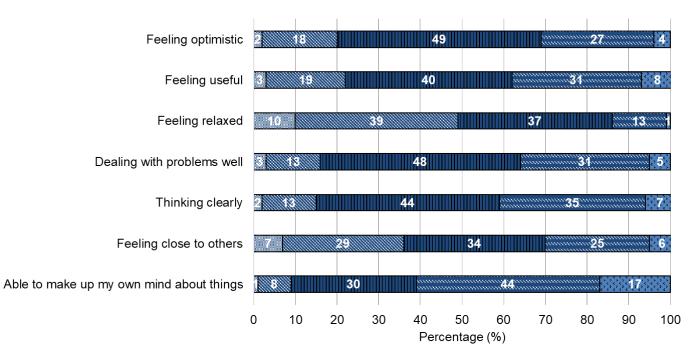
<sup>&</sup>lt;sup>1</sup> Parents and carers could complete the survey once for every child they cared for within the age range. Therefore, the number of responses relates to individual children, not individual families.

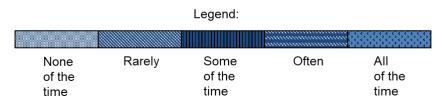
sample is not nationally representative, and was self-selected, direct comparisons are not valid and the observed differences should be interpreted with care.

Parent and carer	Mean	Base
All parents and carers	20	8,852
Parents and carers of 2–4-year-olds	20	4,466
Parents and carers of 5–7-year-olds	20	4,357

**Figure 1** on the next page shows responses to the seven individual questions which are used to calculate the SWEMWBS score. There was little difference between the parents and carers of younger and older children in responses to the individual SWEMWBS questions, so these age groups are not reported separately.

Figure 1. Responses to individual Short Warwick-Edinburgh Mental Well-being Scales (SWEMWBS) questions





Base for optimistic: 8,847; useful: 8,842; relaxed: 8,848; dealing with problems: 8,849; thinking clearly: 8,846; feeling close to others: 8,847; make up own mind: 8,847. Excludes missing and refused (prefer not to say) responses. Due to rounding of percentages to whole numbers, the cumulative percentages may not always add up to 100.

### **Employment status**

Is the employment status of the main earner now different from just before lockdown? Please select all that apply.

For 25% of the children, the employment status of the main earner in their household had been affected by the lockdown. The most common impact was furlough (11%), followed by a reduction in pay (8%) or a reduction in hours (6%). Loss of employment (e.g. redundancy, not having a contract extended, and leaving due to childcare commitments) affected the parents and carers of 4% of the children.

Change in employment of main earner	Number (overall)	Percentage (%) of sample	Percentage of 2–4-year-olds	Percentage of 5–7-year-olds
No change	6,532	75	74	75
They have been furloughed	955	11	11	11
Their pay has been reduced	685	8	8	8
Their hours have been reduced	514	6	6	5
They have been made redundant	147	2	2	2
Their contract has not been extended	58	1	1	1
They have been asked to take unpaid leave	62	1	1	1
They have left their job due to childcare commitments	54	1	1	1
Other	351	4	4	4

Table 2. Effect on employment status of main earner during lockdown

Base for overall: 8,680; Parents/carers with children aged 2–4 years: 4,430; 5–7 years: 5,325. Excludes missing and refused (prefer not to say) responses. Percentages may add up to >100% as participants could select multiple responses.

### Household income

Has your household income changed because of lockdown and the different social restrictions as we move out of lockdown?

While the previous question found that the employment status of the main earner in the household had changed for only 25% of the children, when asking about the impact on household income, we see that for 44% of the children, their household income had reduced because of lockdown. The parents and carers of 54% of the children said that their household income had not been impacted and 3% said that their income had increased.

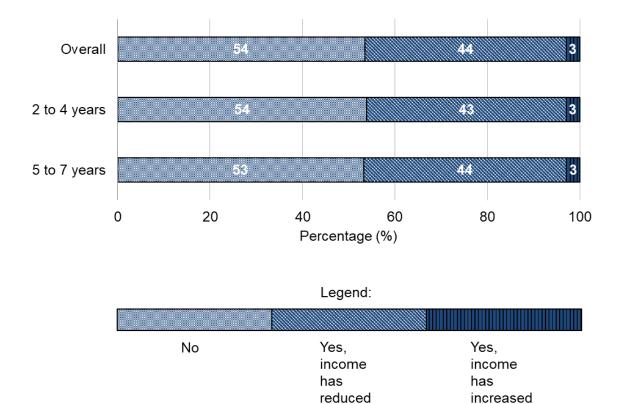


Figure 2. Effect of lockdown on household income

Base for overall: 8,559; Parents and carers with children aged 2–4 years: 4,312; 5–7 years: 4,219. Excludes missing and refused (prefer not to say) responses. Due to rounding of percentages to whole numbers, the cumulative percentages may not always add up to 100.

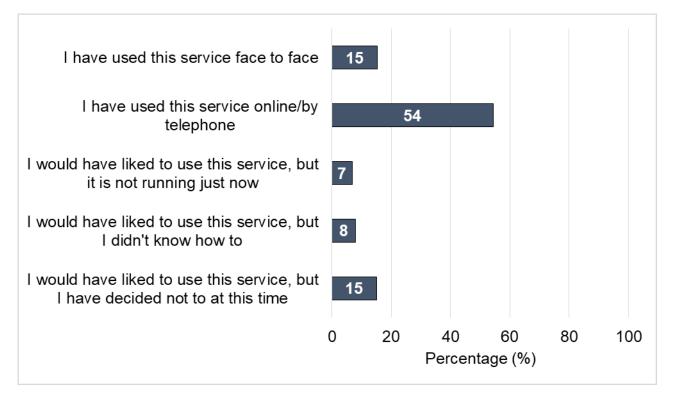
### Use of children's services

Below is a list of services for children and families. For each service, please tell us about your experience since lockdown started. Please select all that apply for each service.

#### Health visitor or family nurse

The parents and carers of 21% of 2–4-year-olds felt they had needed to use the health visiting or family nurse services during lockdown. Of those (n = 967), 54% had used these services remotely (online or by telephone) and 15% had used them face to face. However, 30% had wanted to access the health visiting or family nurse services during lockdown but had not.

**Figure 3.** Contact with health visitor or family nurse during lockdown for those who felt they had needed the service

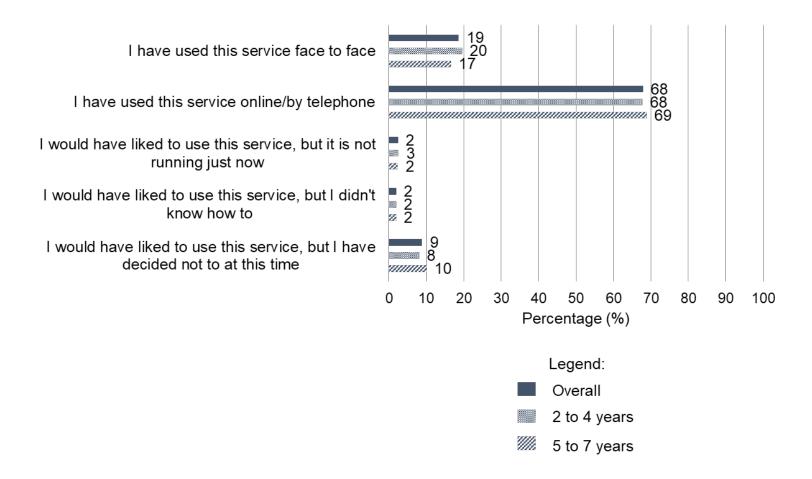


Base for those who felt they needed the service (2–4 years): 967. Excludes missing responses. Due to rounding of percentages to whole numbers, the cumulative percentages may not always add up to 100.

GP

The parents and carers of 25% of the children felt that they had needed to use GP services during lockdown. Of those (n = 2,282), 68% had used GP services remotely (online or by telephone) and 19% had used them face to face. However, 13% had wanted to access GP services during lockdown but had not.

Figure 4. Contact with GP during lockdown for those who felt they had needed the service

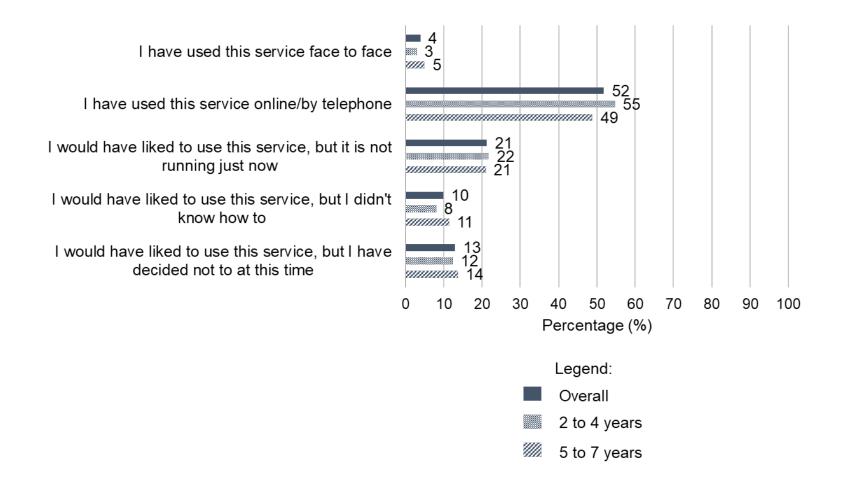


Bases for those who felt they needed the service – Overall: 2,282; 2–4 years: 1,317, 5–7 years: 948. Excludes missing responses. Due to rounding of percentages to whole numbers, the cumulative percentages may not always add up to 100.

# Allied health professional, for example speech therapist or physiotherapist

The parents and carers of 10% of children felt they had needed to use allied health professional (AHP) services during lockdown. Of those who felt they had needed the service (n = 916), 52% had used AHP services remotely (online or by telephone) and 4% had used them face to face. However, 44% had wanted to access AHP services during lockdown but had not.

Figure 5. Contact with allied health professionals (AHPs) during lockdown for those who felt they had needed the service.

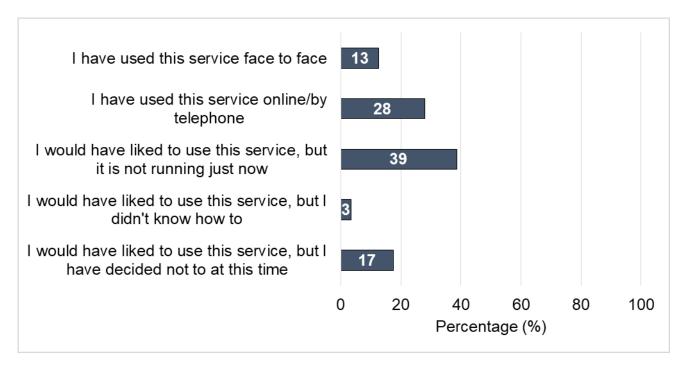


Bases for those who felt they needed the service – Overall: 916; 2–4 years: 473, 5–7 years: 438. Excludes missing responses. Due to rounding of percentages to whole numbers, the cumulative percentages may not always add up to 100.

#### Nursery staff or childminder

The parents and carers of more than half (54%) of 2–4-year-olds felt they had needed to access nursery or childminding staff during lockdown. Of those (n = 2,360), 28% had had contact with nursery or childminding staff remotely (online or by telephone) and 13% with them face to face. However, the parents and carers of 59% of 2–4-year-olds had wanted contact with nursery or childminding staff during lockdown but had not had it.

**Figure 6.** Contact with nursery staff during lockdown for those who felt they had needed the service

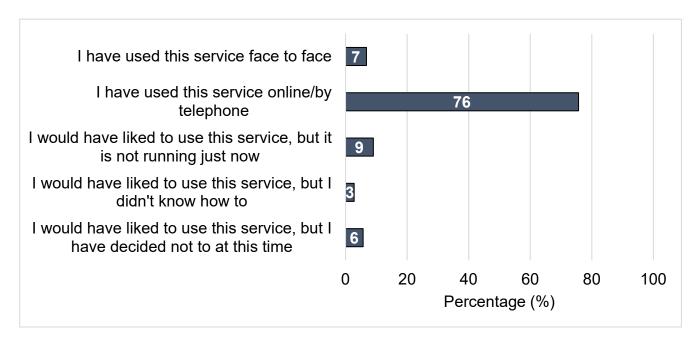


Base for those who felt they needed the service (2–4 years): 2,360. Excludes missing responses. Due to rounding of percentages to whole numbers, the cumulative percentages may not always add up to 100.

#### School staff

The parents and carers of 33% of 5–7-year-olds indicated that they had not needed to access school staff during lockdown. The parents and carers of 68% of 5–7-year-olds felt that they had needed contact with school staff during lockdown. Of those (n = 2,969), 76% had had contact with school staff remotely (online or by telephone) and 7% with them face to face. However, the parents and carers of 18% of 5–7-year-olds had wanted contact with school staff during lockdown but had not had it.

**Figure 7.** Contact with school staff during lockdown for those who felt they had needed the service



Base for those who felt they needed the service (5–7 years): 2,969. Excludes missing responses. Due to rounding of percentages to whole numbers, the cumulative percentages may not always add up to 100.

#### Family support worker, social worker and voluntary organisation staff

The parents and carers of a small but important group of children felt they had needed to use a family support worker (3% of children, n = 282), social worker (2% of children, n = 182), or voluntary organisation staff (6% of children, n = 533). Of those, 34%, 53% and 41% (respectively) had accessed the service remotely (online or by telephone) and 8%, 18% and 10% (respectively) had had face-to-face support. However, a significant proportion of parents and carers who had felt they needed to access these services during lockdown had not done so (family support workers: 57%; social workers: 29%; voluntary organisations: 49%). This represents:

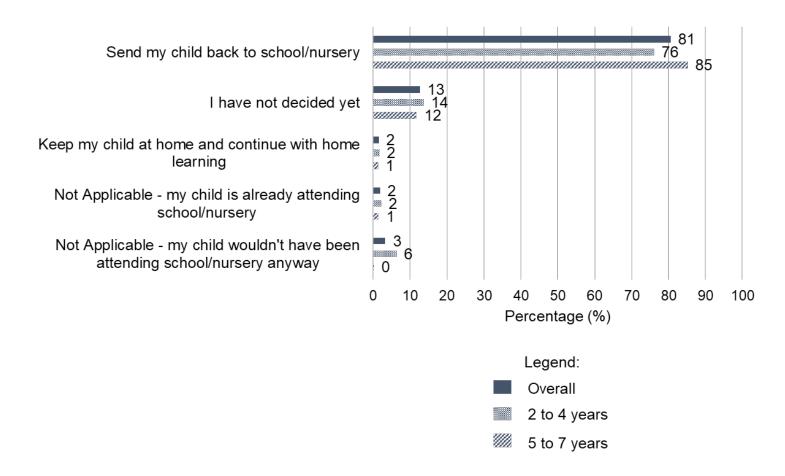
- parents and carers of 162 children who would have liked to have had contact with a family support worker but had not
- parents and carers of 52 children who would have liked to have had contact with a social worker but had not
- parents and carers of 260 children who would have liked to have had contact with voluntary agency support but had not.

# Parents' and carers' intentions for when schools and nurseries reopen

When schools and nurseries reopen, I am planning to...:

The parents and carers of 81% of the children were planning to send their child back to school or nursery when they reopened. This was slightly higher for older children (85%) than for younger children (76%). For 13% of the children, their parent or carer was undecided about sending them back. For 2% of children, their parents and carers were planning to keep them at home and continue with home learning after schools and nurseries reopened.

Figure 8. Future intentions regarding school or nursery

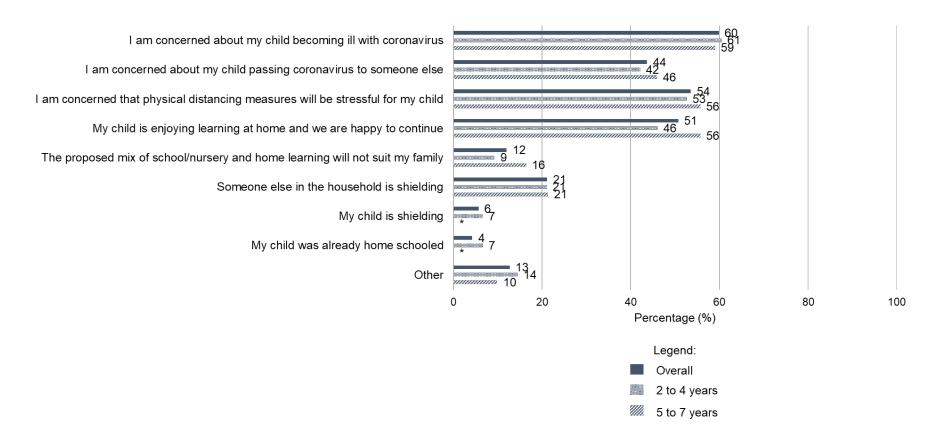


Base for overall: 9,097; 2–4 years: 4,599; 5–7 years: 4,468. Excludes missing and refused (prefer not to say) responses. Anything less than 1% is labelled 0. Due to rounding of percentages to whole numbers, the cumulative percentages may not always add up to 100.

What are the main reasons you are planning to keep your child at home? Please select all that apply.

For those planning to keep their child at home, 60% of parents and carers were concerned about their child becoming ill with coronavirus. This was similar for both age groups. The next most frequent concern was that physical distancing measures within schools would be stressful for their child (54%), closely followed by a feeling that their child was enjoying learning at home (51%). The fourth most common concern was that their child would pass on coronavirus to someone else (44%). Twenty-one percent of parents and carers who were planning to keep their children at home stated that someone in the household was shielding, with 6% stating that their child was shielding, and 12% stating that the proposed blended model would not suit the family.

#### Figure 9. Reasons to keep child at home



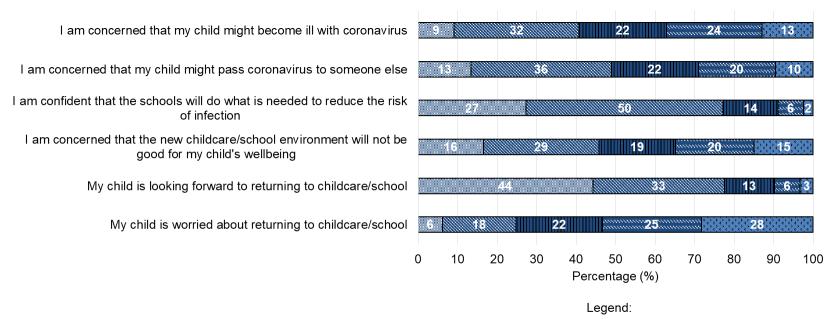
\*Values suppressed due to statistical disclosure reasons.

Base for overall: 142; 2–4 years: 76; 5–7 years: 61. Excludes missing and refused (prefer not to say) responses. Percentages may add up to >100 as participants were able to select multiple responses.

Below are some statements about thoughts and feelings related to childcare and schools reopening. For each statement, please state the extent to which you agree.

The following results, presented in **Figure 10** on the next page, relate to the thoughts and feelings of the parents and carers who were planning to send their child back to school or childcare.

#### Figure 10. Thoughts and feelings related to childcare and schools reopening\*



None of the	Rarely	Some of the	Often	All of the
time		time		time

\*Base differs for each statement as it is based on complete responses. Base for 'I am concerned that my child might become ill with coronavirus': 8,558; 'I am concerned that my child might pass coronavirus to someone else': 8,547; 'I am confident that the schools will do what is needed to reduce the risk of infection': 8,542; 'I am concerned that the new childcare or school environment will not be good for my child's wellbeing': 8,420; 'My child is looking forward to returning to childcare or school': 8,528; 'My child is worried about returning to childcare or school': 8,124. Due to rounding of percentages to whole numbers, the cumulative percentages may not always add up to 100. The parents and carers of 41% of children returning to school or childcare agreed or strongly agreed that they were concerned about their child becoming ill with coronavirus, while 37% disagreed or strongly disagreed. This was similar for both age groups. The parents and carers of just under half of children returning to school or childcare (49%) agreed or strongly agreed that they were concerned about their passing coronavirus to someone else. A total of 45% agreed or strongly agreed that they were concerned that the new childcare or school environment would **not** be good for their child's wellbeing. Overall, 77% of parents and carers agreed or strongly agreed that they were confident that schools will do what is needed to reduce the risk of infection.

The parents and carers of over three quarters of children returning to school or childcare (77%) agreed or strongly agreed that their child was looking forward to returning. This was similar for both age groups. Conversely, the parents and carers of just under a quarter of children returning to school or childcare (24%) agreed or strongly agreed that their child was worried about returning.

## Appendix 1 – Background information

#### Validated measures

SWEMWBS assesses mental wellbeing through seven positively worded statements about thoughts and feelings experienced over the previous two weeks https://warwick.ac.uk/fac/sci/med/research/platform/wemwbs/

It was completed by the parents and carers about their own mental wellbeing.

This short version of the Warwick-Edinburgh Mental Well-being Scale (WEMWBS) is Rasch compatible and therefore has better scaling properties but requires a transformation of the raw scores for analysis. The raw survey scores were converted into transformed scores using the required conversion

table https://warwick.ac.uk/fac/sci/med/research/platform/wemwbs/using/howto/swemwbs\_ra w\_score\_to\_metric\_score\_conversion\_table.pdf and range from 7 to 35.

Other formats of this publication are available on request at:



0131 314 5300

phs.phs-otherformats@nhs.net

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