

Impact of Covid

Measures That Impacted Babies and Young Children

During the pandemic, many measures directly or indirectly impacted on the day-to-day experiences of children:

- Antenatal, maternal, postnatal and neonatal care provision changed, prioritising reducing transmission of the virus over optimal practices for perinatal care.
- Midwife, health visiting, and many other health appointments and support services moved to remote provision.
- Parent/child support groups were paused or moved to remote delivery.
- Playgroups, nurseries, and schools were closed to most children from 23rd of March, with many children absent the week prior. Full return to schooling took place in August and September; but further closures happened in October 2020 and in January 2021 lasting to 8th March. In England, formal early education or childcare attendance dropped from 68% of all two-to-four-year-olds to [just 7% during lockdown](#). Many playgroups and other support groups held in unavailable public buildings took significantly longer to return to normal operational levels.
- Children's play parks were closed.
- Travel was restricted, which further restricted experiences and the range of children's activities.
- Restrictions on meeting with people outside the family unit limited children's interactions with those other than adults. Including children in the ratios of people who could eventually meet further limited family opportunities for social interaction. Non-resident parents were also particularly affected by measures that restricted contact between different households.
- Remote learning for school-aged children varied significantly in quality and approach.
- SEND/ASN assessments were paused, and many children lost some or all educational support and health services.



Yet even when [evidence demonstrated](#) that children were unlikely to transmit COVID-19, were themselves unlikely to be ill with the virus, and that surface transmission outdoors was an unlikely transmission pathway, children remained disproportionately impacted by pandemic measures, and restrictions that impacted on children were removed later than those that boosted the economy: for example pubs and restaurants reopened with gatherings of up to 30 people permitted months before all levels of schooling resumed.

The focus on reducing the risk of COVID transmission, and the assumed temporary nature of the measures introduced, created a blind spot for assessing short- and long-term risks to children, in particular the youngest children whose voices are seldom heard.