

An aerial photograph of several people walking on a large, green-tinted map of London. The map shows the city's street grid and the River Thames. The people are scattered across the map, some walking alone and others in small groups. The overall tone is green, and the image is used as a background for the report cover.

The impact of the COVID-19 pandemic on the mental health of children and young people in London

London Assembly Health Committee

LONDONASSEMBLY

Health Committee



The Health Committee reviews health and wellbeing issues for Londoners, particularly public health issues. It also keeps a close eye on how well the Mayor's Health Inequalities Strategy is doing.

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Foreword



Dr Onkar Sahota AM
Chair of the Health Committee

Londoners' lives were changed beyond recognition when COVID-19 spread across the capital and everyday routines suddenly ground to a halt.

As the UK entered its third national lockdown on 6 January 2021, schools and workplaces were closed after weeks of stay-at-home Government guidance and cancelled family gatherings. The London Assembly Health Committee wanted to know how this was affecting children and young people in the city and launched an inquiry into the mental health and wellbeing of young Londoners.

This investigation gives the stories of young people a platform in London. As Public Health England reports, research into the mental health impacts of the pandemic on groups like young carers, young people with disabilities and young people from lower income homes is under-researched. It is estimated that in London there are more than 800,000 children living in poverty, over 70,000 young carers, and at least 200,000 young people with some level of disability, so we focused on these among the wider young population.

Over 300 young people took part in the survey and shared their experiences with us, which they were very candid about. Many were concerned about decisions being made without their input and felt out of control. Feelings of anxiety, depression, isolation and not knowing where to get help were key themes in their responses. Respondents were also frequently worried about school disruption, work and difficulties with their families and friends.

These sentiments are the foundation of our findings. We are grateful that the Chair of the London Youth Assembly, Sumaiya Bangura, also relayed the experiences of her peers to our Committee and expert guests. She shared a heart-breaking story of one young Londoner that really struck me. Since the pandemic, when they go out in public or participate in a video call with people they feel unfamiliar with, they get so stressed and tremble despite their best efforts to not to. They said it's so embarrassing. Mental health should not be embarrassing.

Any COVID-19 recovery strategy should include three clear principles: to consult young people on what they need from London's COVID-19 recovery; to make getting help easier; and to ensure that no-one is left behind.

The recommendations in this report asking the Mayor to help reduce mental health inequalities take place within the context of funding challenges facing the sector; with responsibility for the allocation and distribution of funding sitting largely with the Department of Health and Social Care, and the NHS.

However, the Mayor can help pave the way to make children and young people's mental health and wellbeing a priority in London's COVID-19 recovery. Firstly, young Londoners need representation and consultation to make sure that London-wide plans work for the people that need them. Secondly, the Mayor's strategic role can improve access to reliable mental health support in places like schools. Finally, any strategy needs to remember those who risk getting left behind in the recovery and should therefore be explicitly supported, including those who are disabled, carers and people from low income homes. By including young people at every stage of decision-making, London's young people will know they have our support and the COVID-19 recovery will be futureproofed.

Executive summary

This report explores the impact of the pandemic on the mental health of children and young people in London. A growing body of research, and the results of the Assembly's own survey of young Londoners, paint a worrying picture of a decline in mental health and wellbeing across the capital. We explore how certain groups have been disproportionately affected by the pandemic, with a focus on young carers, children and young people from low-income households and disabled children and young people. This compounds a reported rise in mental and emotional distress by children and young people in recent years alongside a rise in demand for counselling services, hospital admissions for self-harm and referrals to specialist Child and Adolescent Mental Health Services (CAMHS).¹

The Committee engaged with a range of experts from the statutory and third sector providing support services both nationwide and within London and consulted directly with representative organisations and platforms representing young people. This report provides key insights and recommendations to improve mental health across our capital and ensure children and young people are placed at the heart of decision-making regarding their own mental health future.

This report calls on the Mayor to pave the way for young people's mental health recovery from COVID-19, by consulting with them, making it easier for them to get help and not leaving anyone behind.

- **Consult:** Put young people at the heart of COVID-19 recovery. Involve them in decision making and make sure their diverse views and varying needs are represented at every step of the way.
- **Make help easier:** The Mayor should use his strategic role to improve access to the right mental health support and services, and there should be targeted strategies to deliver this in his COVID-19 recovery plans.
- **No-one left behind:** Many who have been hit hardest by the pandemic already had the poorest mental health. It is vital that they are not left behind in the recovery.

¹ [Mental health and well-being trends among children and young people in the UK](#), 1995–2014: analysis of repeated cross-sectional national health surveys, Psychological Medicine, Pitchforth J et al, June 2018

Recommendations

Recommendation 1

The London Health Board should seek to increase pan-London co-ordination between statutory and non-statutory providers of mental health services, and improve partnership working and commissioning practices with the third sector to improve health and care outcomes for children and young people in need of mental health support.

Recommendation 2

The Mayor should call on the Government to increase overall funding for mental health to ensure parity of esteem with physical health and to ensure the mental health of children and young people in London is adequately resourced in the recovery.

Recommendation 3

The Mayor should evaluate the provision of mental health services in schools across London and draw up an action plan to address shortcomings or inconsistencies in provision as part of London's recovery. The action plan should detail how he would work with the Department for Education, Department of Health and Social Care, local authorities, and child and adolescent mental health services. Particular attention and consideration should be given to securing funding for the provision of viable discretionary budgets for schools to commission mental health services and the role of school nurses.

Recommendation 4

The Mayor should ensure that the requirements of young carers are explicitly recognised in his recovery missions.

Recommendation 5

The Mayor should ensure that young carers are adequately represented in future Mayoral policy making processes, whether that be through consultative boards, focus groups or formal engagement with the third sector.

Recommendation 6

The Mayor should call on the Government to deliver the increased funding for social care that was outlined in its 2019 manifesto.

Recommendation 7

The Mayor should ensure that his recovery plans to improve access to youth services for young Londoners will harness existing relationships between youth services and the young Londoners they support, and not just replace them with new schemes and avenues of support.

Recommendation 8

The Mayor should review his housing policies to ensure they take account of the impact of overcrowding on the mental health of children and young people.

Recommendation 9

The Mayor should ensure that disabled young Londoners are adequately represented in future Mayoral policy making processes, whether that be through consultative boards, focus groups or formal engagement with the third sector. He should review what is currently in place to identify any gaps where disabled young Londoners are not being represented.

Recommendation 10

The London Health Board should evaluate whether mental health services across London adequately provide for young Londoners with SEND, and present the results of this evaluation to the Committee.

Understanding the impact of the pandemic on the mental health of children and young people

Recommendation 1

The London Health Board should seek to increase pan-London co-ordination between statutory and non-statutory providers of mental health services, and improve partnership working and commissioning practices with the third sector to improve health and care outcomes for children and young people in need of mental health support.

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The UK entered its third national lockdown on 6 January 2021, closing schools and workplaces after weeks of stay-at-home Government guidance, tiered regions, and cancelled family Christmases. The Children's Commissioner for England, Anne Longfield, said that the first lockdown was devastating for the mental health and wellbeing of children: *"It is widely accepted that lockdown and school closures have had a detrimental effect on the mental health of many children...we have seen how the National Health Service has risen to the scale of the COVID crisis for adults. We owe children, who are suffering the secondary consequences of the pandemic, a mental health service that provides the help and support they need."*²

There is a growing body of research that suggests the pandemic has had a profound effect on the mental health of children and young people. Studies have found increased levels of distress, worry and anxiety among children and young people (CYP), with reasons including increased feelings of loneliness and worries about school and the future, and wider changes to their

² [News, Children's Commissioner](#), accessed 10 February 2021

familial and social settings.³ These findings were corroborated by many of the experts at the Health Committee meeting.

“For some young people they will have had traumatic experiences at home during the initial lockdown, whether that is bereavement or some form of abuse or violence at home. For others, anxiety about the pandemic itself. In some cases, worries about becoming ill yourself, but often we work with young people who are very worried about family members, that they might spread the virus to a family member. Isolation and loneliness is a big factor. We work with lots of young people who have been able to stay in touch with friends to some extent during the lockdowns, but equally still feel very isolated and lonely and like it is not the same as it was before”.

Nick Harrop (Head of External Affairs, YoungMinds)

Feelings of anxiety, depression, social isolation and emotional instability were also prevalent themes that emerged from our survey of young people in London.

“People are dying every day and I can't do anything about it and I am forced to continue as normal (going to school, etc). Also, being away from friends for so long, especially as meeting socially distanced outside in winter isn't preferable.”

Health Committee survey respondent, aged 17, Ealing

“I'm scared that everyone I love will die and leave me alone.”

Health Committee survey respondent, aged 16, Lewisham

³ [Mental Health Foundation](#), accessed December 2020

29 per cent of the young Londoners we surveyed said that over the past two weeks they had felt down, depressed, or hopeless.

(235 respondents) London Assembly Health Committee survey of young Londoners, Jan-Feb 2021

85 per cent of the young Londoners we surveyed said that the pandemic had made them feel either down, or very down.

(40% down, 45% very down, 202 respondents) London Assembly Health Committee survey of young Londoners, Jan-Feb 2021

50 per cent of the young Londoners we surveyed said that someone had asked them about their mental health and wellbeing

(202 respondents) London Assembly Health Committee survey of young Londoners, Jan-Feb 2021.

The Committee heard that children and young people will experience the pandemic in different ways, depending on their emotional resilience and broader personal and family circumstances. For many with existing mental health conditions and emotional distress, the pandemic has served to exacerbate their situation. The NHS Digital, Mental Health of Children and Young People Survey from July 2020 in England shows that children and young people with a probable mental disorder were more likely to say that lockdown had made their life worse (54.1 per cent of 11- to 16-year-olds, and 59.0 per cent of 17- to 22-year-olds), than those unlikely to have a mental disorder (39.2 per cent and 37.3 per cent respectively).⁴

One respondent from our survey, clearly articulated the ‘double jeopardy’ of the impact of their own existing mental health condition while experiencing the pandemic.

⁴ [Mental Health of Children and Young People in England, 2017](#), NHS Digital, Sadler K et al, 2017

"...with mental health issues it's difficult to catch up and be motivated to even do the simplest of things. It has caused major stress leading to crippling anxiety, depression follows along and feeling trapped. I don't want to constantly tell my teachers that I'm not handing something in again because it's embarrassing and it seems like they've given up on me. So overall, it's just been a depressing mess."

Health Committee survey respondent, aged 17, City of London

The pandemic has also created new challenges for children and young people which inevitably has had a negative effect on their mental health and wellbeing.

"I feel like my personality has changed over lockdown a bit.. lockdown has impaired my ability to meet new people, and with new outside-of-school clubs I have started this year I haven't really got to talk to or meet any of them and I am just in a corner by myself. But I think that over the course of lockdown I have gotten some anxiety issues. When I go out in public, or even on a Zoom call with people and I am unfamiliar with them, I get really stressed and I start trembling, even though I try not to, and it's so embarrassing."

Testimonial from an anonymous peer, submitted by Sumaiya Bangura (Chair, London Youth Assembly)

Early research findings on the impact of the pandemic on the wellbeing of young people showed that in April 2020, almost half of 16 to 24-year-olds showed new symptoms of psychological distress. The same study revealed this age group was the most likely to report new symptoms in May 2020. This group also reported feeling relatively more anxious over the summer months, when adults' reported anxiety was reducing.⁵ While the medium to long term impact of COVID-19 is unknown, some studies suggest a more mixed picture. There is evidence some children and young people have coped well. Some studies suggest life satisfaction appears to have only slightly reduced and children and young people's happiness scores are relatively stable.⁶

Several experts at the Health Committee meeting noted that the conditions created by the pandemic have increased the likelihood that both stressors and vulnerability will increase for children and young people, leading to increased demand for mental health support services.

⁵ [Report 1: Initial research findings on the impact of COVID-19 on the well-being of young people aged 13 to 24 in the UK](#), Levita L et al, PsyArXiv, 2020

⁶ [Research and analysis, children and young people](#), Public Health England, December 2020

The situation may be further compounded by reduced social support be it through school, wider family networks or peers.

Understanding the impact on support services

Several pressing issues emerged from the Health Committee meeting with regards to the increased pressure and disruption to current support services; be it from local authorities, schools and health services, to voluntary and community organisations and the criminal justice system. The recommendations in this report, asking the Mayor to help reduce mental health inequalities, exist within the context of funding challenges facing the sector. This has been further exacerbated, as the report highlights, by increased demand for care, upward pressure on workforce costs and capacity pressures in primary care. Overall, the report acknowledges the financial position of the provider sector has deteriorated considerably in recent years in the face of these numerous challenges.⁷

However, mental health services have received a substantial cash injection in recent years and the sector has a fully costed programme for mental health delivery with The Five Year Forward View for mental health. This has been significantly built upon by the NHS Long Term Plan, which makes further progress on improving people's mental health and wellbeing a priority for the next decade. In the November 2020 Spending Review, the Government announced three billion pounds to support the NHS's recovery from COVID-19, including "around £500 million to address waiting times for mental health services, to give more people the mental health support they need, and invest in the NHS workforce". There was also confirmation of £165 million capital funding ringfenced for 2021-22 to replace outdated mental health dormitories with single en suite rooms and £4.3million will be used for green social prescribing, funding projects involving nature and the outdoors that could improve people's mental health and reduce health inequalities.⁸

In response to the Spending Review announcement, mental health charity Mind stated: "While there is no doubt that the additional funding for NHS mental health services set out in the Spending Review is essential, and very much welcomed, we do note that this is some way short of estimates that due to increased demand mental health services will require more than £1bn a year for the next three years, to deal with the long term fall out of the pandemic."⁹

In terms of formal support services in London, it was observed by Gemma Antoniak (Clinical Team Lead, Mind in Brent, Wandsworth and Westminster) that for several areas in London, CAMHS have only been able to focus on what it calls 'red/very urgent' cases, which involves trying to prevent immediate hospital admission.

⁷ [Mental Health Funding and Investment](#), Briefing January 2020, NHS providers

⁸ [Mind responds to spending review](#), press release 25 November 2020

⁹ [Mind responds to spending review](#), press release 25 November 2020

“From my experience in the areas we do cover, all of those CAMHS services are very stretched. As I said before, they are, from my understanding, only able to work with the red or the very urgent cases at the moment. We work with the green, the early intervention, and my opinion is that it is the amber, the cases that are somewhere in the middle, that are not very urgent but also not early intervention, that are getting missed and a bit left behind at the moment”.

Gemma Antoniak (Clinical Team Lead, Mind in Brent, Wandsworth and Westminster)

Ms Antoniak stressed however the picture was not uniform across London, with patchy provision depending on the local area. While it is too early at this stage to assess the level of unmet need in formal mental health provision, there is emerging evidence that the need to provide capacity to meet the immediate demands in acute care of COVID-19 led to a realignment of NHS services at the outset of the pandemic.¹⁰

Therefore, children and young people that are deemed medium risk may not be able to access formal mental health services. In an attempt to address this shortfall in provision, the Health Committee heard that charities such as Mind have tried to pick up some of the medium risk cases, when resources allow.

“Now one of the key purposes of our service as mental health support teams is to bridge that gap around prevention and early intervention to prevent young people from getting to the point where they have a diagnosable mental health illness, and us supporting with the gap with the red cases”.

Nana Owusu (Head of Youth Services/Mental Health Support Team Lead, Mind in Hammersmith, Fulham, Ealing and Hounslow)

Pressures on the workforce providing support services was also a recurrent theme throughout the Health Committee meeting.

¹⁰ [The impact of Covid-19 on mental health in England; supporting services to go beyond parity of esteem](#), British Medical Association, 19 May 2020

“Our staff are working overtime to deal with very complex cases, quite often of suicide ideation relating to COVID, and, sadly, active suicide and self-harm. These things are happening today at a huge rate and that is overwhelming all services, both statutory and non-statutory”.

Benn Keaveney (Chief Executive Officer, Mind in Hammersmith, Fulham, Ealing and Hounslow)

The impact for the youth sector and for those providing support in schools was also highlighted as a key concern. While schools are first and foremost educational institutions, several experts at the Health Committee meeting stressed the importance of schools in terms of informally and formally supporting vulnerable children and young people’s mental health, and operating as a key referral gateway.

The Health Committee heard that there was inconsistent mental health support within schools before the pandemic and these services had inevitably been either disrupted or ceased altogether during the pandemic. Nick Harrop (Head of External Affairs, YoungMinds) highlighted in 2020 that YoungMinds had called for extra funding for mental health provision in schools, to enable schools to commission the appropriate support they needed. At the present time, he suggested many schools may need to engage with bereavement counsellors as a short-term measure to support pupils. In the longer-term Mr Harrop was keen to see a counsellor in every school and the expansion of mental health support teams more broadly.

The role and contribution of nurses in schools was also noted to be essential in terms of the early identification of young people who may need mental health support and their role in signposting to more formal services. Nana Owusu (Head of Youth Services/Mental Health Support Team Lead, Mind in Hammersmith, Fulham, Ealing and Hounslow) suggested to the Health Committee that it was essential that nurses were facilitated to returned to school as soon as possible, as many were redeployed to work in hospitals during the pandemic.

Outside of the school environment, Rosemary Watt Wyness (Chief Executive, London Youth) stressed the key role of youth workers in providing mental health support for children and young people.

“For a long time, even pre pandemic, youth workers were saying to us that it was difficult to access support from CAMHS because CAMHS was already stretched. They felt that they were holding, as a consequence, higher levels of mental distress among the young people they were seeing. Obviously, that has got much worse with the impact of COVID.”

Rosemary Watt Wyness (Chief Executive, London Youth)

In 2018 the Mayor supported, through the Healthy London Partnership, a mapping exercise to understand the provision of mental health and wellbeing support in schools across London, and identified that this provision varied considerably between boroughs.¹¹ The impact of the pandemic on young Londoners' mental health, and the importance of schools providing mental health support, suggests it would be timely for provision across London to be reassessed and a plan put in place to improve provision across London as part of the city's recovery.

Predating the pandemic, the Mayor's main mental health initiative is Thrive LDN, which primarily delivers educational and awareness programmes, research and grants. Thrive LDN has some programmes specifically for children and young people.¹² This includes the Youth Mental Health First Aid, Young London Inspired, which provides small grants for projects that encourage young Londoners at risk of developing mental health problems to volunteer or take part in social action. Alongside this sits the Healthy London Partnership (between NHS in London, the Mayor of London, Public Health England, London Councils), which has delivered a Mental Health in Schools Toolkit and the Good Thinking digital mental health and wellbeing service.¹³

¹¹ [Mental Health in Schools toolkit and mapping exercise](#), Healthy London Partnership, 2018

¹² [Greater London Authority](#), accessed 9 February 2021

¹³ [Healthy London Partnership](#), accessed 9 February 2021

Young carers

Recommendation 4

The Mayor should ensure that the requirements of young carers are explicitly recognised in his recovery missions.

Recommendation 5

The Mayor should ensure that young carers are adequately represented in future Mayoral policy making processes, whether that be through consultative boards, focus groups or formal engagement with the third sector.

Recommendation 6

The Mayor should call on the Government to deliver the increased funding for social care that was outlined in its 2019 manifesto.

Carers provide invaluable support and help to their family, friends and loved ones. Caring can have a significant impact on the mental health of young carers including experiencing anxiety and depression. The latest Census reports 70,883 unpaid carers aged 0-24 providing any level (i.e. 1+ hours per week) of unpaid care in London.¹⁴ However, it is widely acknowledged that unpaid care provided by children and young people is under-reported: research from 2018 conducted by the BBC and Nottingham University reported that across the country a fifth (22 per cent) of children (aged 5-17) delivered some form of care, and 7 per cent have a 'significant caring role'.¹⁵

There is a strong evidence base to indicate that the pandemic has had far reaching implications for young carers. While children and young people are less likely to experience significant physiological effects from the virus itself, the indirect impact is highly likely to have significant consequences for their psychological well-being. A survey from the Carers Trust, a charity for carers, reported in July that there had been a worrying decline in the mental health of young carers (age 12-17) and young adult carers (age 18-25) during the pandemic. The survey found that:¹⁶

- 40 per cent of young carers and 59 per cent of young adult carers say their mental health is worse since COVID-19.

¹⁴ [2011 Census Analysis: unpaid care England and Wales, ONS](#), accessed 15 February 2021

¹⁵ [New research suggests more than one in five children in England carry out some care for sick and disabled family members.](#), University of Nottingham, 14 September 2018

¹⁶ Carers Trust, [Steep decline in mental health of young carers and young adult carers following Coronavirus outbreak](#), 15 July 2020

- 67 per cent of young carers and 78 per cent of young adult carers are more worried about the future since COVID-19.
- 66 per cent of young carers and 74 per cent of young adult carers are feeling more stressed since COVID-19.
- 69 per cent of both young carers and young adult carers are feeling less connected to others since COVID-19.
- 11 per cent of young carers and 19.7 per cent of young adult carers report an increase of 30 hours or more in the amount of time they spend caring per week.

The Health Committee heard that young carers were particularly affected by school closures, as school often serves as a break from caring responsibilities and acts as a source of key emotional and mental health support.

"It has really taken a toll on my education and affects my motivation to get through the day. I am a carer of my disabled brother so I have to balance a lot of house chores with looking after him whilst prioritising my education."

Health Committee survey respondent, aged 18, Hackney

Furthermore, due to the fear of infection and transmission to the loved one they are caring for, many young carers and families made the decision to stay at home when schools reopened. It was highlighted that access to digital learning and support is critical for young carers, for not only educational purposes, but as a means of accessing online support services such as counselling. For some carers, their responsibilities also increased during the pandemic as paid care support workers were no longer able to come to the house, either due to fear of infection risk or due to insufficient personal protective equipment being available.

Ms Bennett also pointed to the calls from the care sector for greater social care funding to help London's young carers:

"Things around better social care funding would really help London's young carers, for example, and that is something that the Government committed to. It would be great if the Department of Health and Social Care (DHSC) and the Treasury could come together to find that solution on social care, which was a Manifesto commitment, which would be great to see."

Laura Bennett (Head of External Affairs, Carers Trust)

The pandemic has also presented a range of unexpected challenges for young carers. Laura Bennett (Head of External Affairs, Carers Trust) outlined to the Health Committee that young carers faced a range of barriers and unintended discrimination.

“We have seen examples of compounding youth discrimination towards young carers and young adult carers during this time. For example, we have heard of young carers being asked why they were hanging about outside supermarkets when they were just trying to get food for themselves and their family. While I understand that of course it is the job of supermarket staff to make sure that social distancing is being adhered to and to check in with any potential antisocial behaviour, that is often not what young carers and young adult carers were doing”.

Laura Bennett (Head of External Affairs, Carers Trust)

Ms Bennett highlighted that while young carers are often at risk of distinct disadvantage and discrimination, they are often underrepresented and unsupported compared to, for example, disabled children and young people. It was noted that, although as a group they are recognised under the Children and Families Act (2014) and Care Act (2014) and have parity of support in terms of legislation, they are frequently overlooked. Ms Bennett highlighted the importance of partnership working, with schools, colleges, social care and healthcare services needing to come together to holistically assess and support the needs of young carers. Furthermore, it was stressed that young carers need to be at the heart of decision-making regarding their own care and support needs.

Children and young people from low-income households

Recommendation 7

The Mayor should ensure that his recovery plans to improve access to youth services for young Londoners will harness existing relationships between youth services and the young Londoners they support, and not just replace them with new schemes and avenues of support.

Recommendation 8

The Mayor should review his housing policies to ensure they take account of the impact of overcrowding on the mental health of children and young people.

The Social Metrics Commission calculates that 43 per cent of children – equal to 800,000 children – in London live in poverty.¹⁷ Children in London are more likely to grow up in poverty than children elsewhere in the UK. London has the highest rate of child poverty of any English region, and there are as many poor children in London as in all of Scotland and Wales.¹⁸

Children and young people from low-income households are disproportionately affected by higher levels of mental health conditions. There is a strong socio-economic gradient in mental health: people with a lower socio-economic status have a higher likelihood of developing and experiencing mental health problems than people with a higher socio-economic status.¹⁹

Children and adults living in households in the lowest 20 per cent income bracket in Great Britain are two to three times more likely to develop mental health problems than those in the highest.²⁰

There is growing evidence that the pandemic may widen mental health inequalities, as well as increase the overall prevalence of mental health issues in children from low-income households.²¹ A Human Rights Watch report into the impact of the pandemic on children highlighted the impact of food insecurity and digital exclusion on the overall mental health and wellbeing of children and the wider household.²² Many families have faced increased food and utility costs, at a time when their incomes are reduced, leaving many struggling to afford essentials.²³

¹⁷ [Measuring Poverty 2020](#), Social Metrics Commission, July 2020

¹⁸ [Child Poverty in London](#), Child Poverty Action Group, accessed 23 February 2021

¹⁹ [Mental health statistics: poverty](#), Mental Health Foundation, accessed 10 February 2021

²⁰ [Fair society, healthy lives: Strategic review of health inequalities in England post 2010](#), Institute of Health Equality, Marmot et al, 2010

²¹ [Covid-19 could widen mental health inequalities for a generation, says Centre for Mental Health report](#), Centre for Mental Health, June 2020

²² [Inquiry into the impact of COVID-19 on education and children's services](#), Human Rights Watch, July 2020

²³ [Poverty in the Pandemic](#), Child Poverty Action Group and the Church of England, December 2020

The impact of unemployment and the furlough scheme was highlighted as a key challenge for young people during the Health Committee meeting. One month after the UK went into lockdown, the number of 18-24 years old claiming unemployment related benefits increased by 59 per cent compared with the previous month,²⁴ while the number of apprenticeships offered by employers fell 80 per cent of pre-virus expectations.²⁵ A report from the Resolution Foundation confirmed that young people already in work have been among those most affected by the crisis with 23 per cent of employees aged 18-24 years old being furloughed and a further nine per cent losing their jobs.²⁶

“There is a correlation between stress within a household and the likelihood of mental health problems. Therefore, it is going to have a significant impact now, but also, as we emerge from the pandemic, if we do go into a time of economic difficulty with higher levels of family unemployment or financial insecurity, that is going to have an impact on younger children... then for older children, teenagers, there is just a lot of uncertainty about ability to find work. Obviously, being in employment is also protective for your mental health in most cases, while not being able to find work can clearly contribute to worse mental health.”

Nick Harrop (Head of External Affairs, Young Minds)

Concern over family and personal income was also a recurrent theme that emerged from our survey, with young people in London clearly worried by the impact of the pandemic on household income and future employment opportunities.

“One of my parent's workplaces is at risk of closing due to the pandemic. On a minor note, the graduate scheme I am on has failed to adapt to virtual working and so isn't delivering what was promised.”

Health Committee survey respondent, aged 25, Bexley

The digital divide was another recurrent theme during the Health Committee meeting. The meeting heard that some families struggle to afford devices and access to the internet. The digital divide also impeded the ability of teachers to teach effectively and provide any additional pastoral or emotional support for vulnerable children and young people.

²⁴ [Youth unemployment statistics \[online\]](#), House of Commons Library, January 2020

²⁵ [Revealed: COVID-19 hit to apprenticeship starts, FE Week, 2020](#), April 2020

²⁶ [Class of 2020: Education leavers in the current crisis](#), Resolution Foundation, May 2020

"I think routine keeps me sane. Because of difficulties with technology, we have a digital divide. I am so sad that young people do not have access and that makes them feel sad. These are very depressing situations. Some people in your class have laptops and some people do not, so that takes a toll on the way you see yourself and your family".

Testimonial from a peer submitted by Sumaiya Bangura (Chair, London Youth Assembly)

"I started a new job at the start of lockdown. The salary was decent but the job was such a nightmare - largely because of the pandemic - (I was never trained properly, had long COVID for the entire time I was there and could never meet my coworkers in a social way) - that I ended up quitting in September. Since then I've been freelance but never knowing where my next paycheck is coming from is very anxiety-inducing."

Health Committee survey respondent, aged 22, Greenwich

"Worried about financial situation a lot because we are working class family also worried because my mother comes under the at risk group and she goes out to meet others very often."

Health Committee survey respondent, aged 18, Newham

Our survey results also confirmed the problems of digital access and technology for young people during the pandemic.

"Simply, this age group has been forgotten about. We have been faced with the challenge of online learning and it's been a struggle especially since I share a room with siblings and don't have access to laptop devices each, screen time has also been an issue and I feel like I am constantly losing focus as the day progress with each lesson I undertake..."

Health Committee survey respondent, aged 16, Lewisham

Rosemary Watt Wyness (Chief Executive, London Youth) stressed the key role of youth workers in providing mental health support for children and young people.

“For a long time, even pre pandemic, youth workers were saying to us that it was difficult to access support from CAMHS because CAMHS was already stretched. They felt that they were holding, as a consequence, higher levels of mental distress among the young people they were seeing. Obviously, that has got much worse with the impact of COVID.”

Rosemary Watt Wyness (Chief Executive, London Youth)

It was highlighted that youth services are a particular lifeline for children from low-income families, but that provision across London is inconsistent between boroughs.

“There is such a huge differential in spend between hundreds of pounds in some boroughs down to tens of pounds in others. For the children and young people from low-income families that means there is effectively, in some areas, no safety net of youth services.”

Rosemary Watt Wyness (Chief Executive, London Youth)

In response to the Mayoral action on mental health, Ms Wyness asked for further clarification on the Mayor’s ‘New Deal for Young People’ mission²⁷ which states that ‘by 2024 all young people in need are entitled to a personal mentor and all young Londoners have access to quality local youth activities’. The mission also recognises and endorses the importance of positive professional youth work and the positive relationships with mental and physical health and safety. While welcoming the initiative, Ms Wyness stressed the importance of focussing and supporting existing relationships with young people through their youth workers or within schools as opposed to creating new mentors.

The Health Committee also explored the impact of housing in London and the effect this could have on the mental health and wellbeing of children and young people, particularly with regards to overcrowding. While around three per cent of households in most English regions are overcrowded, the rate of overcrowding is considerably higher in London at eight per cent.²⁸ The Committee heard that lack of access to outdoor space, overcrowding and the safety of the neighbourhood would all clearly influence wellbeing and mental health.

²⁷ [London Recovery Programme Overview Paper](#), October 2020

²⁸ [Overcrowded Housing, Briefing Paper](#), House of Commons, March 2020

“There is evidence that if you are living in more crowded conditions and you have less access to outside space, that is associated with worse mental health. If you do not feel safe in your neighbourhood if you are out, that is associated with worse mental health. People in lower income families, young people growing up in lower income families, again there is an association with worse mental health.”

Nick Harrop (Head of External Affairs, Young Minds)

The Health Committee’s review²⁹ (published May 2020) of the first year of delivery of the Mayor’s Health Inequalities Strategy included recommendations for the Mayor to review policies on overcrowding and family-sized homes and to create mechanisms for better sharing of best practice on health inequalities between boroughs containing the most deprived communities.

Disabled children and young people

Recommendation 9

The Mayor should ensure that disabled young Londoners are adequately represented in future Mayoral policy making processes, whether that be through consultative boards, focus groups or formal engagement with the third sector. He should review what is currently in place to identify any gaps where disabled young Londoners are not being represented.

Recommendation 10

The London Health Board should evaluate whether mental health services across London adequately provide for young Londoners with SEND, and present the results of this evaluation to the Committee.

In London, over 65,000 children and young people (aged 0-25) in 2019/20 had statements of Special Education Needs or an Education, Health and Care (EHC) plan – meaning they are recognised by their local authority as requiring additional support.³⁰ Using a broader definition, in 2018 the London Assembly Education Panel reported that over 200,000 children and young people in London were “assessed as having some level of special needs”, and the Education

²⁹ [Health Committee investigation – one-year review of the Health Inequalities Strategy](#), London Assembly Health Committee, 19 May 2020

³⁰ [Number of children and young people \(0-25\) with statements of Special Education Needs \(SEN\) or Education, Health and Care \(EHC\) plan in London](#), LG Inform.

Panel have highlighted that the number of children and young people in London with high-level needs is growing.³¹

Children with a learning disability are highly likely to meet the criteria for having additional learning needs, also known as special educational needs or disability (SEND) and additional support needs. It is important to note that having a learning disability is not the same as having a mental health problem. However, children with learning disabilities have a much higher chance of also developing mental health difficulties. They are, for example, eight times more likely to have attention deficit and hyperactivity conditions, six times more likely to have a conduct disorder and nearly twice as likely to have depression. Despite this strong link, mental health issues are often not identified and supported in children with a learning disability, as symptoms are frequently mistaken for being part of their learning disability.³²

Under the Equality Act, 'disability' includes children who have physical disabilities such as sensory impairments (affecting sight or hearing) and long-term health conditions such as asthma, diabetes, epilepsy and cancer. Children and young people with such conditions do not necessarily have additional learning needs, but there is a significant overlap between these children with disabilities and those with additional learning needs. Physical health problems significantly increase the risk of poor mental health, and vice versa. Around 30 per cent of all people with a long-term physical health condition also have a mental health problem, most commonly depression and/or anxiety.³³

A prominent theme of discussion for the Health Committee was the impact of the pandemic on children and young people with SEND. It was highlighted that accessing normal support services had become particularly difficult and as a result compromised access to support, there was often a deterioration in the mental health and wellbeing of the child or young person.

"The main issue for disabled children and their families has been either the pausing of their special educational needs support or, as I mentioned, services having to pause around that, for example, perhaps having concerns about paid care support workers coming into the home or around having other things that might be possible."

Laura Bennett (Head of External Affairs, Carers Trust)

Learning at home also presents several challenges. Children and young people with SEND are, by definition, entitled to additional support for learning and reasonable adjustments, this includes individualised teaching and therapeutic support. But reports suggest most learning materials provided by schools during lockdown were not tailored to the individual needs of

³¹ [Together: Transforming the lives of children and young people with special education needs and disabilities in London, London Assembly Education Panel](#), July 2018

³² [Disability and illness](#), Mentally Healthy Schools, accessed 13 January 2021

³³ [Research paper. Epidemiology of multimorbidity and implications for health care, research, and medical education: a cross-sectional study](#), Barnett K et al, The Lancet online, 2012

children in this group.³⁴ These research findings were corroborated by the experiences of mental health workers on the ground, as the Health Committee meeting heard.

“One of the challenges we have met by trying to adapt some of these early interventions is going back to the digital divide. Some of these families do not necessarily have the digital equipment that is necessary, or even if they do, children with SEND often do not engage very well through the remote working. We have been trying to go into special schools to continue the work, but obviously it is very much based on whether that is safe. They have been at a disadvantage in our service because they are not able to engage in that remote therapeutic support.”

Gemma Antoniak (Clinical Team Lead, Mind in Brent, Wandsworth and Westminster)

A lack of adequate and tailored service provision for children and young people with SEND who may be experiencing a decline in their mental health and wellbeing was a recurrent theme during the Health Committee meeting.

“This has always been a problem pre-pandemic. You will find, even within CAMHS services - I worked in CAMHS - a lack of actual therapeutic intervention support for children with a learning disability or with neurodevelopmental needs. There is a real gap in terms of expertise and learning around the therapeutic intervention that actually works with children and young people to support the parents and the young people directly themselves.”

Nana Owusu (Head of Youth Services/Mental Health Support Team Lead, Mind in Hammersmith, Fulham, Ealing and Hounslow)

The Health Committee heard from London-based representatives of the charity Mind, who all echoed the challenges of providing mental health support for children and young people with learning disabilities. While it was noted that some SEND schools do buy in mental health support that can be effective, it was suggested the challenges remain for many in terms of building capacity and investing in specialist support. Furthermore, it was noted that many mental health professionals were not necessarily trained in providing support for children and young people with SEND.

³⁴ [The pandemic's impact on: Children and young people's education - The Children and Young People's Commissioner Scotland \(cypcs.org.uk\)](https://www.cypcs.org.uk), Children's and young people commissioner for Scotland, accessed 13 January 2021.

"I think it is about higher education and training. As we have talked about before, we have very specialised, qualified clinicians working in CAMHS and in mental health support teams, but those people are not necessarily trained to specialise in SEND and they are seeing young people with SEND... Like I say, I think there is a missing link at the moment for SEND".

Gemma Antoniak (Clinical Team Lead, Mind in Brent, Wandsworth and Westminster)

The broader challenge of an increase in demand for services while funding pressures for local authorities increase was also highlighted as a key barrier. It was noted that while many children and young people may have a special needs assessment and EHC plans are developed, local authorities are then not always able to deliver on the plans. This in turn will have an impact on the mental health of the child or young person.

"It is huge, and I think that is all down to funding of services, which is a big issue. I mentioned what the Disabled Children Partnership said around people who have not had their EHC plan met... some of it is around funding and some of it is around coronavirus affecting availability. I also think there can be examples of better partnership working, but many local authorities are having to make extremely difficult decisions, as I am sure the Committee is aware."

Laura Bennett (Head of External Affairs, Carers Trust)

The Health Committee meeting also considered how best to ensure people with disabilities particularly with hidden disabilities are meaningfully included and represented in decision-making processes at both the local, regional and national level.

The Health Committee's investigation

The Health Committee wanted to understand the impact of the pandemic on the mental health of children and young people with a particular focus on young carers, children and young people from low-income households and disabled children and young people. In addition, the Committee wanted to explore the experience for children living in London and assess what further Mayoral support is required.

The Committee engaged with a range of experts from the statutory and third sector providing support services both nationwide and within London and consulted directly with representative organisations and platforms representing young people. The Committee also conducted a survey of young people to explore the mental health and wellbeing of young people in London during this latest phase of the pandemic.

Key contributors:

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Other formats and languages

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Chinese

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Email 与我们联系。

Hindi

यदि आपको इस दस्तावेज का सारांश अपनी भाषा में चाहिए तो उपर दिये हुए नंबर पर फोन करें या उपर दिये गये डाक पते या ई मेल पते पर हम से संपर्क करें।

Vietnamese

Nếu ông (bà) muốn nội dung văn bản này được dịch sang tiếng Việt, xin vui lòng liên hệ với chúng tôi bằng điện thoại, thư hoặc thư điện tử theo địa chỉ ở trên.

Bengali

আপনি যদি এই দলিলের একটা সারাংশ নিজের ভাষায় পেতে চান, তাহলে দয়া করে ফো করবেন অথবা উল্লেখিত ডাক ঠিকানায় বা ই-মেইল ঠিকানায় আমাদের সাথে যোগাযোগ করবেন।

Greek

Εάν επιθυμείτε περίληψη αυτού του κειμένου στην γλώσσα σας, παρακαλώ καλέστε τον αριθμό ή επικοινωνήστε μαζί μας στην ανωτέρω ταχυδρομική ή την ηλεκτρονική διεύθυνση.

Urdu

اگر آپ کو اس دستاویز کا خلاصہ اپنی زبان میں درکار ہو تو، براہ کرم نمبر پر فون کریں یا منکورہ بالا ڈاک کے پتے یا ای میل پتے پر ہم سے رابطہ کریں۔

Turkish

Bu belgenin kendi dilinize çevrilmiş bir özetini okumak isterseniz, lütfen yukarıdaki telefon numarasını arayın, veya posta ya da e-posta adresi aracılığıyla bizimle temasa geçin.

Arabic

الحصول على ملخص لهذا المستند بلغة،
فارجاء الاتصال برقم الهاتف أو الاتصال على
العنوان البريدي أو عنوان البريد
الإلكتروني أعلاه.

Punjabi

ਜੇ ਤੁਸੀਂ ਇਸ ਦਸਤਾਵੇਜ਼ ਦਾ ਸੰਖੇਪ ਆਪਣੀ ਭਾਸ਼ਾ ਵਿਚ ਲੈਣਾ ਚਾਹੋ, ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਇਸ ਨੰਬਰ 'ਤੇ ਫੋਨ ਕਰੋ ਜਾਂ ਉਪਰ ਦਿੱਤੇ ਡਾਕ ਜਾਂ ਈਮੇਲ ਪਤੇ 'ਤੇ ਸਾਨੂੰ ਸੰਪਰਕ ਕਰੋ।

Gujarati

જો તમારે આ દસ્તાવેજનો સાર તમારી ભાષામાં જોઈતો હોય તો ઉપર આપેલ નંબર પર ફોન કરો અથવા ઉપર આપેલ ટપાલ અથવા ઇ-મેઇલ સરનામા પર અમારો સંપર્ક કરો.

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