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Citation: Newlove-Delgado, T., McManus, S., Sadler, K., Thandi, S., Vizard, T., Cartwright, C., Ford, T. & Mental Health of Children and Young People group (2021). Child mental health in England before and during the COVID-19 lockdown. Lancet Psychiatry, 8(5), pp. 353-354. doi: 10.1016/s2215-0366(20)30570-8

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Link to published version: https://doi.org/10.1016/s2215-0366(20)30570-8

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Child mental health in England before and during the COVID-19 lockdown

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While evidence has emerged of the impact of COVID-19 on adult mental health [1], few data sources around the world cover children [2]. Given the importance of probability sampling and directly comparable pre-pandemic baseline measures [3], the recent follow-up of England's Mental Health of Children and Young People (MHCYP) survey provides a rare resource on what the pandemic has meant for children [4]. We consider the clinical and policy implications of the initial study results.

The study revealed that the increase in probable mental health conditions also affected 5-16-year olds in England; from 10.8% in 2017 to 16.0% in July 2020. An increase evident across age, gender, and ethnic groups. As in 2017, during the pandemic young women had the highest prevalence of probable mental health conditions (27.2%), indicating they should remain a group of particular policy concern.

Over a quarter of children and young people reported disrupted sleep, and one in ten often or always felt lonely. Both problems were more common in those with probable mental health conditions, among whom 18% felt fearful of leaving the house due to COVID-19 worries. Children with a parent in psychological distress were more likely to have a probable mental health condition; particularly concerning given parents have experienced larger than average increases in mental distress during the pandemic and indicating that support for parents at this time matters for child mental health [1].

The results highlight how social protection systems must respond to the socioeconomic challenges families are facing. Children with probable mental health conditions were more than twice as likely to live in households newly falling into debt. One in ten reported that during the pandemic their family did not have enough to eat or increased reliance on foodbanks. These stark conditions matter more when schools close, highlighting the unequal impact of lockdown on learning. One child in ten (12%) had no reliable internet access at home, a fifth (19%) no quiet space to work, and a quarter (27%) no desk they could study at. Crucial context for schools planning pupils' home-based learning, and the need, where possible, to prioritise schools remaining open.

Healthcare providers know treatment access has been disrupted. The study reveals the extent to which this has affected younger groups too: 45% of 17-22-year olds with probable mental health conditions reported not seeking help because of the pandemic. Clinicians have raised similar concerns about timely access to services, and a sharp decrease in CAMHS referrals has been observed [5]. Children and young people have been physically distanced from adults outside their family who might monitor and intervene: 21.6% of children and 29.0% of 17-22-year olds with probable mental health conditions reported having no adult at school or work that they could turn to during lockdown. Even after schools re-opened, one in six children who could have attended stayed home. Academic practitioners anticipate that the cumulative effects of failure to intervene will result in further widening health and education inequalities [6].

Sound policy derives from strong evidence, and quality rather than quantity of data is critical [3]. The living systematic review [7] on the mental health impact of Covid-19 screened more than 27,511 abstracts; only 14 were identified as sufficiently rigorous to measure change in mental health. None included children.

The few other studies in children with pre-pandemic data provide conflicting findings, which may relate to the age and circumstances of participants. A small study of children in the East of England [7] (n=168, age 10.1 years during lockdown) found an increase in depressive symptoms, while another with approximately 1,000 13-14-year olds in South West England found little overall change in anxiety, depression, or wellbeing [8]. In the latter study, mental health among those who were struggling in October 2019 improved on all three measures in Spring 2020. Whilst parents responding to the CoSPACE survey [9] reported deteriorating mental health among children early in lockdown, young people reported no deterioration during this time, and parents of those with Special Educational Needs and Disabilities or pre-existing mental health conditions reported fewer emotional difficulties. In MHCYP [4], half of 11-16-year olds (54.2%) with probable mental health conditions said lockdown had made their lives worse, but notably 27.2% said it had made their lives better.

The 2020 MHCYP survey benefits from a large, national, longitudinal probability sample spanning childhood, adolescence and emerging adulthood, using detailed, validated and consistent measures. These initial descriptive results compare cross-sections of 5-16-year olds before and during the pandemic, analysed at pace to meet the urgent need to understand the circumstances of children.

Our job is far from complete. Further data collections and a range of longitudinal analyses are planned to improve understanding of the differential impacts of the pandemic and inform the policy, commissioning, and practice response. Linkage of the survey responses to administrative records, such as the National Pupil Dataset, must proceed as fast as governance permits to enhance the ability to understand the impact of the pandemic on children's mental health and access to education and services over time [10]. An enormous amount of work and engagement from children and young people underpinned the initial survey and this first follow up, and there is a moral imperative to utilize the full potential of the resulting data to improve the health and wellbeing of the next generation [11].

Declaration of interest: We conducted the study and wrote the report discussed in this Comment: *Mental Health of Children and Young People in England, 2020: Wave 1 follow up to the 2017 survey*. We declare no other competing interests.

Acknowledgements: Dr Tamsin Newlove-Delgado was funded by a National Institute for Health Research Advanced Fellowship (NIHR300056) whilst undertaking this work. Professor Tamsin Ford was also supported with funding from the UK Research and Innovation (Medical Research Council) as part of their "Ideas to address COVID-19" call. The MHCYP survey was funded by the Department of Health and Social Care, commissioned by NHS Digital, and carried out by the Office for National Statistics, the National Centre for Social Research, University of Cambridge and University of Exeter.

Appendix: The MHCYP collaboration includes: Cher Cartwright (NHS Digital), Jodie Davis (Office for National Statistics, ONS), Tamsin Ford (Cambridge University), Charlotte Leach (ONS), Dhriti Mandalia (National Centre for Social Research), Franziska Marcheselli (National Centre for Social Research), Sally McManus (National Centre for Social Research), Tamsin Newlove-Delgado

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References

1. Pierce M, Hope H, Ford T, Hatch S, Hotopf M, John A, Kontopantelis E, Webb R, Wessely S, McManus S, Abel KM. Mental health before and during the COVID-19 pandemic: a longitudinal probability sample survey of the UK population. The Lancet Psychiatry. 2020 Jul 21.

2. Thombs B, Bonardi O, Rice DB et al. Curating evidence on mental health during COVID-19: A living systematic review. Journal of Psychosomatic Research. 2020. https://doi.org/10.1016/j.jpsychores.2020.110113. Accessed 28th October 2020.

3. Pierce M, McManus S, Jessop C, John A, Hotopf M, Ford T, Hatch S, Wessely S, Abel KM. Says who? The significance of sampling in mental health surveys during COVID-19. The Lancet Psychiatry. 2020 Jun 2.

4. Vizard T, Sadler K, Ford T, Newlove-Delgado T, McManus S, Marcheselli F, Davis J, Williams T, Leach C, Mandalia D, Cartwright C. (2020) Mental Health of Children and Young People in England 2020, Wave 1 follow-up to the 2017 survey. NHS Digital. https://files.digital.nhs.uk/CB/C41981/mhcyp_2020_rep.pdf

5. Royal College of Psychiatrists. Royal College of Psychiatrists' briefing: Analysis of second COVID-19 RCPsych member survey – other key themes. 2020 [cited 28.10.20]. Available from: https://www.rcpsych.ac.uk/docs/default-source/about-us/covid-19/second-rcpsych-covid-member-survey-summary---other-key-themes.pdf?sfvrsn=95c259cc_4

6. Cambridge University's Cross-Disciplinary Special Interest Group for Policy Related to Children and Young People. Written evidence to the Education Select Committee Reviewing the impact of COVID-19 on education and children's services. https://committees.parliament.uk/writtenevidence/9078/pdf/ accessed 19th October 2020

7. Bignardi, G., Dalmaijer, E. S., Anwyl-Irvine, A. L., Smith, T. A., Siugzdaite, R., Uh, S., & Astle, D. Longitudinal increases in childhood depression during the COVID-19 lockdown in a UK cohort. 2020. https://doi.org/10.31219/osf.io/v7f3q

8. Widnall E, Winstone L, Mars B, Haworth CMA, Kidger J. Young People's Mental Health during the COVID-19 Pandemic: Initial findings from a secondary school survey study in South West England. NIHR School for Public Health Research. 2020 Aug 24. https://sphr.nihr.ac.uk/wp-content/uploads/2020/08/Young-Peoples-Mental-Health-during-the-COVID-19-Pandemic-Report.pdf Accessed 28th October 2020

9. Report 05: Changes in children and young people's mental health symptoms and 'caseness' during lockdown and patterns associated with key demographic factors [Internet]. Co-Space. [cited 14 October 2020]. Available from http://cospaceoxford.org/wp-content/uploads/2020/08/Co-SPACE-report-05-SDQ-symptoms-caseness-demographics_11-09-202.pdf

10. Downs JM, Ford T, Stewart R, Epstein S, Shetty H, Little R, Jewell A, Broadbent M, Deighton J, Mostafa T, Gilbert R. An approach to linking education, social care and electronic health records for children and young people in South London: a linkage study of child and adolescent mental health service data. BMJ open. 2019 Jan 1;9(1).

11. The LP. Smorgasbord or Smaug's hoard?. *The Lancet Psychiatry*. 2019 Aug;6(8):631.