British Association for Child & Adolescent Public Health

House of Lords enquiry.

Life beyond COVID 19.

BACAPH submission.

Key points

Fortunately children have been relatively unaffected by the viral illness itself, however they have suffered significantly from the mitigation responses which have largely exacerbated pre-existing concerns. This submission concentrates on the key issues that have been highlighted by the pandemic, that have policy implications for the future. Although considered under separate headings, there is often an interaction between the highlighted issues that requires an alignment and synergy between different policy interventions to achieve better health and more equity for the whole nation into the future.

While the focus of this submission relates to children and young people, the fact that they live in family groups means that they are hugely influenced by the health, well-being and circumstances of their parents. There is increasing evidence that the experience of adverse childhood experiences (ACEs) have a prolonged impact on well-being, but it is also true that excellent childhood experiences also benefit long-term health. The policy aim should therefore be to protect children from adverse circumstances that have the potential to cause harm, whilst simultaneously promoting exposure to assets that have benefits and also to provide effective services if things go wrong. (https://rm.coe.int/guidelines-of-the-committee-of-ministers-of-the-council-of-europe-on-c/16808c3a9f)

The pandemic has had the greatest impact on those in society with the least resources and it is essential that post COVID policy starts to address the many determinants that affect vulnerable families and their children face, including income, housing, learning opportunities or good nutrition.

We summarise the existing state of evidence and make recommendations to build on assets and minimise risks in order to promote the long term health and wellbeing of children and young people.

Mental health.

The pandemic is affecting the mental health of children and young people in direct and indirect ways, including:

- Social isolation.
- Illness and death of parents and grandparents, family and friends.
- Loss of contact with extended family, friends, and peers.
- Lack of school contact and education
- Fear and uncertainty about the future

Creation of good mental health is our aim. Social isolation and the fear of COVID 19 has created anxiety in previously well individuals and has aggravated many long-term mental health conditions in people who have found it difficult to access the necessary support and treatment during the pandemic period.

An element of this anxiety has been transmitted to children who now fear contact with people and peers from whom they previously would have gained support and comfort. The death, hospitalisation and illness of parents and grandparents are profoundly adverse childhood experiences, with ongoing sometimes life-long impact. Young people aged 18-25 have particular issues of concern. Their lives should be about gaining increasing independence, but they have been severely limited by the lockdown and social distancing. Moreover, opportunities for education and employment have been severely limited by the economic recession/depression which will have longer term mental health implications.

Policy focus areas.

- *Improving the general response to the pandemic will have positive implications for mental health of children and young people*
- *Policies to promote a public health approach to mental health.*
- *Support parents and carers in promoting and supporting children's mental health*
- *Investment in mental health services for children and young people.*
- *Ensure and improve access to services, particularly around digital inequalities.*

Investment in the communication of the importance of continued social distancing is the backbone of pandemic control, supplemented by track and trace and population monitoring. Thought needs to be given to how an immunisation programme will be rolled out to prioritise those with pre-existing medical conditions first and foremost when a viable vaccine becomes available.

The majority of adult mental health problems have their origins in childhood, then further aggravated by poverty, traumatic life events, substance misuse and other health issues. Inequity of life chances can be traced back to the preschool period, reflected by school readiness assessments in the first year of school life predicting later health and employment prospects.

Investment in prevention programmes throughout pregnancy and early childhood demonstrate good returns on investment for a wide range of interventions.

While investment in tackling the determinants of good mental health is an important long-term policy strategy, the more immediate effects of the pandemic on existing and new mental health problems should be acknowledged with further investment in mental health services that can be delivered in both face-to-face and digital forms with remote access.

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Poverty.

- Loss of income.
- Longer term economic recession.
- Loss of agency and stake in society and the future.

The association between poverty and poor health has been documented multiple times by many authors in the last seven decades since the NHS was created. While the UK is one of the richest world nations it also has a great divide between the rich and poor that has been further exacerbated by the pandemic. Often quoted figures include "*in 2018 the richest 10% of households had 45% of national wealth, while the poorest 10th had just 2%*". One of the most affected groups are single mothers in their 30s with children, with 20% of children growing up in persistent poverty.

Policy implications.

- *Living wage.*
- *Living benefits.*
- *Tackle income in equities.*

The minimum wage is inadequate to support a secure family life and this has to be topped up with benefits to promote health, wellbeing, and survival of our most vulnerable groups. Where a living wage has been implemented it has not led to an economic downturn, rather it promotes growth and stability. Social protection, including financial benefits are vital to protect vulnerable children and families, and are associated with increased survival, better health, and stronger economies.

Increasingly there are voices questioning whether perpetual economic growth is a sustainable strategy for any economy, simply because most economic growth requires the continuous consumption of natural resources and this planet is a finite resource. Ideas such as replacing GDP with alternative measures which better represent the interests of people, the concept of a circular economy and measuring the environmental and social impacts of "doing business" require serious consideration since returning to pre-pandemic "business as usual" is no longer a viable economic policy.

The pandemic gives us an opportunity to reset and rebalance for the future. This should start with promoting equity, eliminating poverty, and redefining the values of our society to focus on wellbeing as a measure of wealth and success.

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Nutrition.

- Poor nutrition.
- Increasing obesity and malnutrition.

- Increased use of free school meals.
- Increased use of food banks.

The majority of children in the UK do not receive all the recommended minimum intake of key nutritional requirements in their diet. Many have a diet with excess calories, sugar, fat and additional salt. Children have relatively little control over what they are offered to eat and this obesogenic diet has long-term health consequences throughout their lives. Sadly the food industry thinks that adding sugar and fat to natural ingredients in the food processing process "adds value" but in fact merely reduces costs and adds to poor health.

Agriculture and the journey of food from "farm to fork" contributes some 35% of total carbon dioxide production and has a significant contribution to climate change. Generally food supplies have been maintained during the pandemic, but there has been a vast change in the hospitality sector secondary to the implications of social distancing with a concomitant change in food distribution. Most food banks have seen substantial increases in numbers they serve due to loss of income during the pandemic.

Children who receive free school meals are particularly affected and it is essential that school meals are of a high nutritional standard and available throughout the year including school holidays. The use of school kitchens to prepare meals for those who are isolating, or on low incomes should be explored further.

Policy implications.

- *Access to free school meals for all on universal credit.*
- *Free school meals during holiday times.*
- *Good nutritional standards for school meals.*
- *Tackling the UK obesogenic environment.*
- *Food supplies for those shielding to be of high nutritional value*.

It is essential that all children have access to a healthy diet throughout childhood. This is particularly important for children living in low income families. The recently published obesity strategy should go further to tackle the obesogenic culture largely driven by free market provision of food. Food processors would welcome increased regulation providing it created a "level playing field" without an increased advantage for certain groups. Nutritious free school meals should be available to all families throughout the year who are claiming universal benefit.

References

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Access to learning. Education.

- Online access, equitable and available
- Learning materials.

- School support.

There has yet to be an assessment of pupils recently returning to school who may have fallen behind in their learning during the pandemic. While the relatively small number of children cannot access the World Wide Web a more substantial number, particularly those whose parents who found learning difficult themselves, living in socio-economically disadvantaged circumstances, will not have been able to access appropriate learning materials throughout the pandemic for the children. Anecdotal reports reveal some schools created a virtual whole school day remotely, while others provided little remote support for learning.

Policy implications

- *World Wide Web access for all children and young people.*
- *Access to age-appropriate learning materials-a national resource.*
- *Access to parenting support materials online.*

The pandemic and social distancing will have significant impacts on the educational system for many months yet to come. It is essential to ensure those children with least access to learning materials can benefit most from support from school. Every family should have access to a laptop and since access to the web is an essential function in society today. The Pupil Premium may need to be increased to provide additional learning opportunities for those most in need. A single national resource, to cover the whole curriculum, using the best online learning materials should be available to support children of all ages through this difficult time. Parents may need support to guide them through the use of distance learning materials.

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Health.

There has been a marked reduction in use of healthcare, for urgent and non-urgent problems. This is likely to reflect a true reduction in incidence, for example of injuries, but also to represent missed opportunities for preventive and primary care, and in the case of missed illnesses and injuries clear avoidable harm. The reduction in urgent healthcare use without evident rise in short term adverse effects may represent scope for exploring new models of care for urgent health needs.

- Reduction of injuries attending emergency departments.
- Reduction of respiratory illnesses requiring hospital admission.
- Reduction of STDs.

Limited social interaction has reduced the transmission of the majority of community derived infectious diseases, reduction in air pollution largely from road vehicles which in turn also reduced asthma admissions. Limited outdoor play opportunities have also reduced the number of injuries presenting to

the Emergency Departments. The pandemic has demonstrated that many acute health conditions are actually preventable and that those interventions often have multiple benefits for example reducing the dependency on vehicle transport improves air quality, improves road safety, increases active travel and good mental health.

Policy implications.

- *Greater investment in injury prevention, especially road related injuries.*
- *Improve air quality in urban areas.*
- *Invest in new models of care for community based urgent and acute healthcare for children*

A number of road related policy initiatives should be implemented including:

- Safe active travel routes to school.
- Separated cycle lanes.
- Reduced traffic speed and parking around school entrances.
- Potentially road closures for 30 minutes at school drop-off and pickup times.
- Better road architecture to encourage active travel.
- Pollution monitoring on commonly used routes to school and school playgrounds.

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https://www.who.int/violence_injury_prevention/child/injury/world_report/European_report.pdf

What's happened to A&E attendance patterns for children and young people since the covid19 lockdown?

https://www.strategyunitwm.nhs.uk/sites/default/files/2020-06/Changes%20in%20A%26E%20attenndance%20patterns%20since%20covid%20lockdown%20-%20children%20and%20young%20people%20-%20week%2020%20-%20200601.pdf

Natural environment.

- Improvements in air quality.
- Appreciation and access to nature.
- Improve biodiversity.
- Tackle climate change.

The benefits of access to the natural environment is increasingly being recognised both in terms of physical and mental health. There appears to be a dose response curve ranging from access to gardens to parks, from tree-lined streets to natural forests. The natural environment also has important benefits in increasing biodiversity, particularly insect life, reducing pollution and carbon dioxide from the air and

the creation of microclimates. All political parties promised increased tree planting during the last election which needs to be translated into action, particularly in urban environments where the majority of people live. The benefits of greener schools in terms of learning and behaviour has yet to be fully evaluated (patients recover quicker when they can see trees and prisoners are better behaved when they have windows with views of nature).

Erosion of nature and closer living relationships between the human race and wild species partially explains the origins of recent pandemics (SARS, MERS, swine flu, Ebola and Marburg). The destruction of natural habitats particularly forests also contribute to climate change, while intensive agriculture using insecticides reduces pollination potential.

Policy implications.

- *Investment in pedestrian/cycling infrastructure.*
- *Investment in the natural environment especially trees/parks in urban areas.*
- *COP 26 climate justice.*

The recent 'Gear change a bold vision for cycling and walking' should be fully implemented with a particular emphasis on active transport to schools.

There is considerable opportunity to invest in natural infrastructure within urban environments, ranging from small parks on wasteland through to vertical verdant walls (living walls) on buildings. Developing active travel routes through natural environments improves the health of both people and the environment.

It is essential that the UK uses the opportunity of the COP26 conference to resolve the issue of climate injustice to enable those countries most likely to be affected by climate change to receive support from those countries that contribute most to climate change. Effectively tackling climate change and world poverty reduces the likelihood of population migrations and pandemics.

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Circular economy

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Vulnerable families.

- Increase in domestic violence.
- Reduced access to support services.
- Likely increase in Child abuse, along with rises in domestic violence and abuse

Domestic abuse and child abuse are both likely to have increased during the COVID 19 pandemic due to forced close coexistence, economic stress and reduced access to support/protective services. Children living in vulnerable families include those with pre-existing health conditions and disabilities, some of which are linked to adverse outcomes from the disease, those with parents who have poor physical or mental health or substance misuse and those living in poor socio-economic circumstances.

The pandemic will have increased the likelihood of poor outcomes for many vulnerable families. Supporting these families is a complex process which requires both individual and family assessment, prevention and intervention, coupled with a population-based approach for increasing financial support, improving housing, and accessing employment for whole communities. A life course approach is recommended so that any gains in early years can be carried forward in subsequent years to adequately prepare children for adulthood and potentially parenting. This requires an integrated delivery of services across health, education and social care and other sectors.

Policy implications.

- *Access to community support services in times of reduced social contact.*
- *Design of support services during social isolation.*

Financial insecurity will be the greatest impact of the pandemic due to loss of employment and income. Ongoing economic support will be essential throughout pandemic to reduce the stress induced by financial insecurity. Services must embrace social distancing into service delivery in ways that continue to deliver effective care of the families most in need. The financial package for prevention within children's services should be increased in order to deliver the aspirations for prevention programme set out in Advancing our Health: prevention in the 2020s.

References

No child left behind. A public health informed approach to improving outcomes for vulnerable children https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/913764/Public_health_approach_to_vulnerability_in_childhood.pdf

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Housing instability and poor housing conditions

- Increase mental health problems
- Increase respiratory problems

One in five houses in the UK do not meet minimum standards set out in the Decent Homes standard. Homes should be safe, affordable, supply the basics and be reasonably connected within the community. Children living in crowded homes are more likely to be stressed and have poor health and attainment at school. Homes in poor environments are often lacking in safe play space for younger children and risk gang and drug culture for older children. For a minority of families in persistent poverty and children in the care system, frequent moves prevent the development of sound relationships within the community and school. Housing supply has not kept up with the additional demand generated by increasing life expectancy, immigration and the rise in one-person households. Housing supply has not kept up with demand consequently housing in the rented sector is becoming increasingly unaffordable forcing people to travel further for employment opportunities particularly in cities, this is particularly true for young people on low incomes..

Policy implications

- *Increase access to high quality social housing.*
- *New build housing programs.*
- *Retrofit housing improvements.*

This problem is not unique to the UK, but the replacement of social housing following the sale of council owned homes to renters without replacement started the mismatch between supply and demand. The UK could learn from different initiatives around Europe to improve the supply of affordable homes.

To address the problem of poor quality homes there is an urgent need to improve insulation to reduce energy use and fuel poverty, reduce damp housing, and move from traditional to renewable sources of energy. The return on investment is considerable and could contribute to regenerating the economy post-pandemic.

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Summary.

This short submission highlights the key policy issues relevant for children, young people and families in a post COVID pandemic UK-based world. Many of the issues are interdependent and should not be considered in isolation from one another. Future policy aims should focus on achieving greater health and equity for the population rather than the traditional focus mainly on GDP to achieve a sustainable economy rather than one based on perpetual growth. The pandemic response will result in an increased national debt which should be managed with alternatives strategies than austerity measures resulting in cuts in public services, indeed it could be argued that economic stimulation through investment in effective public sector services and infrastructure should be the correct strategy. In particular, as the population structure changes with fewer people in employment and people live longer, it is essential to develop a sound economic strategy to maintain the health and social care sector. Part of that strategy must be to prevent ill-health through a wide variety of interventions tackling the traditional "social determinants" of health, starting in early life and continuing through out the life course.

The COVID19 pandemic represents an opportunity to build a more resilient health system and a healthier society. BACAPH is undertaking a research project to better understand the COVID health system shock and to make evidence-based recommendations for building a more resilient health system for children. We will report our findings and in early 2021.