



A NEW AND BETTER NORMAL

Children and Young People's Experiences of the Covid-19 Pandemic

Summary Report

August 2021



INTRODUCTION

'Children are not the face of this pandemic. But they risk being among its biggest victims. While they have thankfully been largely spared from the direct health effects of COVID-19 - at least to date – the crisis is having a profound effect on their wellbeing. All children, of all ages, and in all countries, are being affected, in particular by the socio-economic impacts and, in some cases, by mitigation measures that may inadvertently do more harm than good. This is a universal crisis and, for some children, the impact will be lifelong. Moreover, the harmful effects of this pandemic will not be distributed equally. They are expected to be most damaging for children in the poorest countries, and in the poorest neighbourhoods, and for those in already disadvantaged or vulnerable situations. There are three main channels through which children are affected by this crisis: infection with the virus itself; the immediate socio-economic impacts of measures to stop transmission of the virus and end the pandemic; and the potential longer-term effects of delayed implementation of the Sustainable Development Goals'

*UN Policy Brief: The Impact of COVID-19 on Children.*¹

The COVID-19 pandemic is an unprecedented global crisis during the course of which national governments have necessarily had to introduce restrictive measures to protect the population from the spread of the virus.

These restrictions have had a severe impact on the rights and best interests of children and young people. While the COVID-19 pandemic was a health emergency, the impact on children's health has been limited, no doubt in no small part due to the public policy responses, through emergency legislation and including restrictions on freedom of movement

and association. Nonetheless, these in turn impacted on outcomes for children across a much wider range of areas, directly and indirectly. As an Organisation for Economic Co-operation and Development (OECD) report noted,

*'Evidence from multiple high-income countries clearly shows that how a government responds to a crisis (whether directly for children or not) can have serious implications for child and family poverty, parental care, child mortality, health, nutrition, learning outcomes, parental labour market attachment, gender equality, parental mental health and suicide, homelessness and more.'*²

The aim of this Northern Ireland Commissioner for Children and Young People's (NICCY) report therefore is to provide a comprehensive assessment of the impact of the government response to the COVID-19 pandemic on the lives of children and young people across Northern Ireland. In assessing the impact of the pandemic, we have looked at several key areas including health, education, family life, economic wellbeing and social/recreational activities. We have placed a particular focus on vulnerable groups including children in care, children with disabilities, and children at risk of domestic violence and/or abuse.

NICCY has examined the Northern Ireland Executive's response to the pandemic including the introduction and easing of successive lockdowns and the introduction of emergency legislation. We have analysed the steps that the Executive has taken to mitigate the impact of the pandemic on the education, health and social, and family life of children and young people and to ensure young people and their families do not fall into poverty.

1 UN (2020) Policy Brief: The Impact of COVID-19 on Children. Available at: [UNSDG | Policy Brief: The Impact of COVID-19 on children](#)
2 OECD (2021), Youth and COVID-19: Response, Recovery and Resilience. Accessible at: [Youth and COVID-19: Response, recovery and resilience \(oecd.org\)](#)

Our analysis has been informed by the statement issued by the UN Committee on the Rights of the Child (the Committee) on 8 April 2020 warning of the grave physical, emotional and psychological effect of the COVID-19 pandemic on children and calling on States to protect the rights of children.³ The Committee expressed concern about the situation of children globally, particularly those in situations of vulnerability, due to the effects of the COVID-19 pandemic. It pointed out that many children would be gravely affected physically, emotionally and psychologically, especially in countries that had declared states of emergencies and mandatory lockdowns, and outlined 11 recommendations to States, to safeguard children's rights during the pandemic.

In our analysis we have assessed how far the Executive has complied with the statement issued by the Committee on 8 April and, in particular, how far they have introduced measures which specifically address the 11 recommendations identified. Chapters of the main report focus on each of these recommendations while at the same time looking at the impact of the pandemic on children's rights under the United Nations Convention on the Rights of the Child (UNCRC) more generally.

Political context to the emergency of the COVID-19 pandemic in Northern Ireland

As 2020 started, Northern Ireland was in the middle of a political crisis where the main political parties could not reach agreement on the basis to form an Executive, and by this point Northern Ireland had been without a government for three years. While the civil service sought to ensure ongoing delivery of the government departments and their

agencies, increasingly the lack of Ministers to make decisions meant that many important developments were halted. Over this period of political vacuum, the Brexit negotiations were taken forward between the UK government negotiators and those representing the EU. Given Northern Ireland was the only part of the UK that would have a land border with the EU, and the way in which EU membership had played an important facilitatory role in the Belfast Agreement, the absence of a Northern Ireland government to represent the interests of the population was extremely problematic. With the UK formally leaving the EU at the end of January 2020, and the third anniversary of the absence of government in NI was approaching, the Secretary of State for Northern Ireland, Julian Smith, and the Irish Minister for Foreign Affairs, Simon Coveney, hosted talks and brokered agreement between the parties. On the basis of the New Decade, New Approach Deal (NDNA), on 11 January 2020 a new NI Executive was formed and the Assembly restored.

The NDNA document drew together a range of commitments for action from the new Executive, many of which had previously been in progress but had been delayed due to the absence of the Executive, while others reflected problems that had emerged or worsened in the political vacuum. The Executive was to develop a Programme for Government to outline how it would deliver on these commitments, but within two months the COVID-19 pandemic was to demand the full attention of the government, and the population. Having observed the emergence of the virus in the Wuhan region of China, and then its sudden spread across a number of European countries, the first case of COVID-19 in Northern Ireland was diagnosed on 27 February 2020 and the

3 UN Committee on the Rights of the Child, (2020), Statement on Impacts of COVID Pandemic on Children and Young People. Available at: https://tbinternet.ohchr.org/_layouts/15/treatybodyexternal/Download.aspx?symbolno=INT/CRC/STA/9095&Lang=en

first COVID-related death occurred on 19 March 2020. Schools and non-essential shops in Northern Ireland were closed from 23 March 2020, people were asked to work from home, there was no meeting up between households and regulations came into force on 28 March 2020 to enforce stay at home guidelines unless people had reasonable excuses not to do so.

As the pandemic progressed, restrictions were eased over the summer months (2020), with a return to school from September-December 2020, interrupted by an extended half-term break in October 2020. A second full lockdown came into force at the end of December 2020. Schools remained closed after the Christmas break, apart from Special Schools and for vulnerable children and children of key workers. Non-essential shops were closed and the government advised people to work from home where possible. Northern Ireland embarked on the programme of easing lockdown restrictions from April 2021, and despite an increase in cases linked to the Delta variant at the time of writing, the removal of restrictions has continued on a phased basis.

The work of the Northern Ireland Commissioner for Children and Young People through the COVID-19 pandemic

The Northern Ireland Commissioner for Children and Young People was created in accordance with 'The Commissioner for Children and Young People (Northern Ireland) Order' (2003) to 'safeguard and promote the rights and best interests of children and young people in Northern Ireland'. Under Article 7 of this legislation, NICCY has a statutory duty to keep under review the adequacy and effectiveness of law, practice and services relating to the

rights and best interests of children and young people by relevant authorities, and to provide advice on these matters.

In carrying out her functions, the Commissioner's paramount consideration is the right of the child or young person, having particular regard to their wishes and feelings. In exercising her functions, the Commissioner is required to have regard to all relevant provisions of the United Nations Convention on the Rights of the Child (UNCRC), and to the role of parents in the upbringing and development of children. The Commissioner's remit is children and young people up to 18 years, or 21 years, if the young person has a disability or experience of being in the care of social services.⁴

The Commissioner is supported by a staff team of 25, led by the Chief Executive, working in our Legal and Investigations team, Policy and Participation team and our Corporate Services team. In addition, she is advised by the NICCY Youth Panel, currently involving 154 young people and, through a range of methods, is informed by the experiences and opinions of children and young people more generally across Northern Ireland.

Since the start of the COVID-19 pandemic, NICCY has consistently scrutinised the response of the Northern Ireland Executive, its departments and agencies, through information requests and meetings. Our focus was on providing advice, in 'real time' as the crisis unfolded. While much of this can be found in our formal advice papers on our website (www.niccy.org), a significant amount of this was delivered in meetings with Ministers, politicians, civil servants and other professionals responsible for the delivery of children's services, and in evidence sessions at the Northern Ireland Assembly.

4 In this report we variously refer to 'children' and 'young people'. When using either term we are intending to be inclusive of all children and young people under our remit, unless otherwise stated.

NICCY was also very aware of the concerns of children and young people, and their families, particularly in the early stages, when there was little in the way of information accessible to children, and parents were suddenly having to address many practical difficulties in terms of supporting their children's education, allaying anxieties, and understanding the restrictions applied.⁵ We therefore established an information page on our website to hold information relevant to children and young people and their families, and the Commissioner made frequent statements and posted videos on social media where she sought to explain recent developments and reassure children and young people.⁶

In addition, over this time the Commissioner's Legal and Investigations team addressed complaints from individual children and young people experiencing rights breaches in relation to a wide range of issues, many of which related to the government response to the COVID-19 pandemic.

Given the major changes affecting the education sector due to the pandemic, unsurprisingly most COVID-19 queries received by our Legal team related to education. These varied from calls to cancel exams, grading problems, the use of masks and issues with the post primary transfer process. Other queries related to health waiting lists for children with additional needs, delays in health assessments, access to respite services curtailed due to restrictions and a lack of access to digital devices required for home schooling.

We publish this report at this point in the COVID-19 pandemic response, as the Northern Ireland Executive is starting to move forwards to develop its COVID-19 Recovery Plan. It is critical that this takes into account the impacts of the pandemic response on children and young people, and has a focus on the longer term goals for them. The report aims to draw out key learning from the pandemic response, to inform the continuing response to the COVID-19 pandemic, the Executive's Recovery Plan, and also to inform government responses to any future emergencies.

Hearing directly from children and young people throughout the pandemic has been important for NICCY, to inform our interventions and advice to government. It has also been important to inform this report, and the recommendations it contains. The NICCY Youth Panel have worked with the Commissioner and her staff throughout the pandemic and have provided an important 'reality check' as to the difficulties they, their families and their peers were experiencing.

Our report was also informed by many other organisations working with or on behalf of children and young people. At the beginning of the first lockdown NICCY contacted a wide range of organisations asking them to alert us to any child rights breaches that they became aware of as a result of the COVID-19 pandemic, and over subsequent months we were contacted by several. Many have also gathered information and published reports on the impact of COVID-19 on the children and families with which they worked, or on specific children's issues. These reports have proved excellent sources of information and we have drawn extensively on these in this report.

5 See [Coronavirus - information for children & young people and parents \(niccy.org\)](https://www.niccy.org/coronavirus-information-for-children-and-young-people-and-parents)

6 See, for example Statement from the Commissioner on Covid 19 (1 April 20) (niccy.org); <https://youtu.be/JMpBtZy4L9E>

Methodology

In preparing this report, NICCY has sought to hear from a wide range of children and young people about their experiences of the pandemic, and through surveys and focus groups have heard from a total of 4,385 young people. We have:

- Drawn upon our advice to government over the duration of the pandemic to date;
- Commissioned modules on two surveys with children and young people – the Kids Life and Times Survey (KLTS) and the Young Life and Times Survey (YLTS) – from ARK⁷ who are based at Queen’s University Belfast (QUB). These surveys sought views from children and young people directly and asked them about the impact of COVID-19;
- Commissioned a detailed qualitative research report from the Centre for Children’s Rights at QUB. Researchers engaged with professionals from the statutory and voluntary sector working with children and young people on the impact of COVID-19 on the planning and delivery of services to children and young people across the 11 key areas identified by UNCRC;
- Engaged directly with groups of children and young people who may have been ‘vulnerable’, in terms of the uneven impact of COVID-19 and the response, by running a series of 11 focus groups, facilitated by voluntary sector groups;
- Requested and analysed data from government and research literature from other sources including statutory bodies, voluntary sector organisations, and academic institutions; and

- Identified learning relating to the current COVID-19 emergency to inform recommendations on planning for the COVID-19 recovery.

Associated reports

This is the Commissioner’s ‘summary report’ providing a brief overview of the findings and recommendations from the main report, and is accompanied by a number of other publications and communications:

- The main report outlining in detail NICCY’s analysis of the impact of the response to the Covid-19 pandemic on children’s rights in Northern Ireland.
- Supporting Information providing more detail in relation to the experiences of children and young people through the COVID-19 pandemic, including further analysis of the KLTS and YLTS findings, and the focus groups conducted by NICCY;
- An ‘easy read’ summary of the report’s findings;
- Information communicating the findings to children and young people; and
- The commissioned report from QUB: *Corr, M-L, Byrne, B., McAlister, S., Templeton, M. (2021), The Impact of COVID-19 on the Planning and Delivery of Children’s Services: A Rights Review*, (Belfast: NICCY).

This full suite of reports and videos are available to download from the NICCY website.

⁷ ARK is a Northern Ireland social policy hub, established in 2000 by researchers at Queen’s University Belfast and Ulster University, with the primary goal to increase the accessibility and use of academic data and research.



ASSESSMENT OF RESPONSE TO UN COMMITTEE RECOMMENDATIONS:

Summary

This section summarises NICCY's assessment of Governments' response to the COVID-19 pandemic to date against the 11 recommendations from the UN Committee on the Rights of the Child.

1. Consider the health, social, educational, economic and recreational impacts of the pandemic on the rights of the child.

This recommendation recognises that in crisis situations international human rights law exceptionally permits restrictions for limited periods to protect public health, but that they should be imposed only as necessary, be proportionate and kept to a minimum. It also reminds states that responses to the pandemic must reflect the principle of the best interests of the child.

Early in the pandemic response it was stated that children generally were unlikely to be particularly badly affected by the COVID-19 virus as, on infection, their symptoms were less severe than those of adults, particularly elderly people and/or those with an existing health condition. However, the response to the pandemic has had a severe impact on children's right to health, both in terms of their physical and mental health, and on their education, their family incomes and protection from harm and led to many being socially isolated.

NICCY accepts that restrictions on children's lives, as with the rest of the population, were necessary to protect public health - particularly the elderly and vulnerable in society. Nonetheless there was insufficient consideration given to children's right to health and rights overall, including their best interests, particularly in the earliest days of the pandemic response. The Coronavirus Act 2020 provided sweeping powers to amend the Public Health Act to take action to combat the spread of the virus, and many of these amendments were made without consultation or the usual scrutiny processes. Whilst recognising the requirement for timely actions, the Commissioner has raised concern at the lack of consultation with her Office in the development of the emergency legislation and its impact on children's rights.

As outlined throughout this report, the situation has improved over the period of the COVID-19 pandemic, but it remains the assessment of NICCY that the UK Government and NI Executive should have, from the initial stages, applied a child rights lens to the pandemic, undertook child rights impact assessments (CRIAs) and considered children's best interests proactively as decisions were made. This should be rectified in the continuing pandemic response and in recovery planning, or in any future public health emergency.

See Main Report Chapters 1, 2, 3, 4, 5, 6, 7, 8, 9.

2. Explore alternative and creative solutions for children to enjoy their rights to rest, leisure, recreation and cultural and artistic activities.

There was an insufficient focus in the COVID-19 pandemic response on ensuring that children's rights to rest, leisure, recreation and cultural and artistic activities were addressed. It is clear from the children and young people with whom we engaged through surveys and focus groups how important friendships and developing relationships are throughout childhood and into the teenage years, and how deeply they have felt the restrictions on their social interactions. Many expressed a deep sense of loss for important times they felt they missed and would never get back. The research data shows that the decline in play, recreational and leisure activities has had a devastating impact on many children's physical health and emotional wellbeing.

Many children and young people spoke generally about feeling lonely and trapped, particularly during the first lockdown when they couldn't physically go out and meet anyone and even parks were closed for many months. At this time, people were only able to take one short walk a day and weren't allowed to sit outside in public. While some people could be outside in their own gardens, many didn't have an outside space. Young people told us that staying indoors all day was very difficult.

As education moved to home learning in lockdown many young people felt that the boundaries between school and leisure time had blurred. Not being able to socialise with friends or take part in sports or recreational activities meant that there were few opportunities to vent. When restrictions were eased this allowed most children and young people to get outside more and to meet up with friends, however, many felt great anxiety about social contact because they were shielding or because of vulnerable family members.

While efforts were made to organise activities and events for children and young people using online platforms, this is not a substitute for play, recreation and leisure activities over the longer term. Moreover, the needs of children and young people for play, recreational activities and social interaction have not been prioritised in the easing of restrictions, and many have felt judged and scapegoated when they have met up with friends in public spaces.

The feedback from young people is that this is an area which has been overlooked in the COVID-19 response and so this must be a primary focus for the Northern Ireland Executive over the coming months.

See Main Report Chapters 3 and 5.

3. Ensure that online learning does not exacerbate existing inequalities or replace student-teacher interaction.

A consistent theme arising from consultation with children and young people is that remote learning is not the same as in-school learning; feedback reflected the fact that it is less structured, largely unmetabled and that an undue degree of responsibility was placed on children and young people to manage their work in their own time. The latter was deemed particularly challenging for young people in exam years, many of whom talked about the weight of expectation placed on them in terms of the volume and range of work to be completed at home. Some had consequently disengaged. Many reflected on poor motivation and on difficulty in maintaining focus at home; others highlighted how they had fallen behind with their education.

There is a strong evidence base that highlights digital poverty as a barrier to enabling online 'remote' learning in areas where there are high levels of economic and social disadvantage and lack of connectivity in rural areas. Schools have acknowledged an absence or inadequate numbers of appropriate digital devices for learning within the household and an absence of reliable access to broadband or wi-fi within the household as barriers to learning during both phases of lockdown.

Such findings chime with reports received by NICCY of children and young people in need of a device but unable to gain access to one. Despite investment by the Department of Education (DE) in additional devices and a free Wi-Fi scheme for disadvantaged pupils, the relatively slow allocation of devices meant that many children were without a digital device for much of the first period of school closures. Indeed, some remained without these during the second period of closure from January 2021. Furthermore, NICCY's research with vulnerable young people highlights that, despite needs which should have precipitated the provision of devices, some young people did not receive a device for quite some time.

It is evident that the need to address digital exclusion remains to ensure equity of experience, in case a pupil is required to isolate at home, and in case of future waves of the virus.

The impact of school closures and subsequent disruption to education, has been felt acutely by children and young people. Almost half of P7 children who responded to the KLTS (46%) felt their education had been negatively affected following the first lockdown. Further concerningly is that data from the YLTS, captured after the second lockdown in May 2021, revealed that over two thirds (70%) of the 16-year-olds surveyed felt that their education had been negatively affected. It is evident that children and young people have deeply felt the effects of school closures and are greatly concerned about the impact on their education. Evidence suggests that inconsistency in pupil engagement in, and support for, remote learning are amongst the major contributory factors which have impacted on children's and young people's education during school closures.

It is evident that some groups of children and young people have experienced the effect of school closures more acutely than others. For instance, there is much evidence of the adverse impacts of the pandemic on children and young people with SEN and disability, whose access to vital educational and health supports was drastically reduced over the course of the pandemic. It is quite apparent that it is those children and young people who were already facing significant barriers in accessing education, who have been most gravely affected by the COVID-19 crisis. The continued closure of schools has undoubtedly exacerbated educational inequalities which were previously well documented before the pandemic.

Furthermore, it is evident that COVID-19 has had a significant impact on the mental health and wellbeing of children and young people. In NICCY's experience, significant stress was experienced by young people following the re-opening of schools in September 2020. The uncertainty about whether summer 2021 exams would go ahead meant that, from the first period of term, young people were faced with repeated assessment as schools prepared for the eventuality that exams would be cancelled and grades would, again, be based on centre assessment. Young people reported extreme stress and anxiety arising from an exceedingly high volume of assessment.

An undue focus on assessment not only diverted the emphasis from wellbeing and education recovery for GCSE, AS and A Level students, but also for Year 7 pupils amidst continued uncertainty about the Transfer Test. The outbreak of COVID-19 has placed a further spotlight on the adverse consequences of this unregulated system. The unacceptable pressure placed on children as young as 10 and 11 years of age to perform in the Transfer Test, and the resultant negative impacts on children's health and wellbeing add weight to the calls for the cancellation of the tests.

Going forward, it is imperative that there is a concerted, collaborative effort to ensure the safe and sustainable opening of our schools, building on the learning from the previous lockdowns. There must be a focus on building resilience in the system in order to maintain the education of our children, to reduce the risk of outbreaks, and to respond when these occur.

See Main Report Chapter 4.

4. Activate immediate measures to ensure that children are fed nutritious food during the period of emergency, disaster or lockdown, as many children receive their only nutritious meal through school feeding schemes.

The impact of the COVID-19 restrictions on family incomes were not experienced evenly across the population. Families already on low incomes were more likely to be affected and families with children with disabilities and/or long-term illnesses reported considerable financial strain.

Over the months following the first lockdown the UK Government introduced programmes that sought to prevent job losses and protect the economy, namely the Coronavirus Job Retention Scheme and the Self-Employed Income Support Scheme. At the peak, at the start of the first lockdown, one in three eligible workers were furloughed (250,000 positions)⁸ and four in five eligible self-employed people (78,000) received financial support due to lost earnings.⁹ In April 2020, as part of the Chancellor's early economic response to the pandemic, he announced a £20 weekly top up to the standard Universal Credit allowance. This additional payment has been important to families on low incomes, struggling to make ends meet. Over the year from February 2020 to February 2021, the number of Universal Credit claimants doubled to 135,710.¹⁰ As things stand as this report goes to print, all of the financial support schemes are due to end in September: the Coronavirus Job Retention Scheme, the Self-Employed Income Support Scheme, and the £20 weekly Universal Credit top-up. There is a risk that many families will start to face severe poverty around this time.

In order to prevent homelessness, mortgage payment holidays, a ban on home repossessions, and legislation protecting private tenants from eviction were introduced, no doubt preventing many families becoming homeless during the pandemic. However, all of these measures had ended by June 2021, and it remains to be seen whether there will be a surge in repossession and evictions. Between July and December 2020, 4,849 households presented as homeless, one third (34%) of which were families containing a total of 3,136 children.¹¹ There was also an increase in the number of young people aged 16-25 presenting as homeless.¹²

From the start of the pandemic, there was an immediate focus by the Northern Ireland Executive and voluntary and community sector on ensuring access to nutritious food for vulnerable households, including those with children. Statutory and voluntary sectors worked together to provide food boxes as an emergency response on demand, in recognition that problems accessing food were not only due to poverty, but also for people who were shielding or for single parents who were not permitted to take their children into shops with them due to the restrictions that were in place.

8 [HMRC \(1 July 2021\), Coronavirus Job Retention Scheme statistics.](#)

9 [HMRC Self-Employment Income Support Scheme statistics. HMRC coronavirus \(COVID-19\) statistics - GOV.UK \(www.gov.uk\)](#)

10 DfC/NISRA, (May 2021), [Northern Ireland Benefits Statistics Summary February 2021](#), (Belfast, DfC).

11 DfC, NISRA, NIHE (March 21), [Northern Ireland Homelessness Bulletin, July to December 2020](#)..

12 NIHE, (Nov 2020), ['The Way Home: Homelessness responses to COVID-19'](#), (Belfast, NIHE)

In addition to the food parcels provided to low-income households, the NI Executive provided direct payments to families whose children would usually benefit from a school meal. Around 100,000 families received £2.70 per child per day for each day of term the schools were closed, paid directly into their bank accounts on a fortnightly basis.¹³ This was originally intended to cover only the usual school term up to 30 June during the first lockdown, but the Executive subsequently agreed to continue the payments over the school summer holidays and the Halloween half term break. In November 2020, the Education and Communities Ministers stated that these payments would continue during all school holidays up to Easter 2022; these payments were also continued during the second lockdown in Winter/Spring 2021. While direct payments in lieu of Free School Meals (FSMs) were also made across the UK, the Northern Ireland Executive led the way by the speed in which they took this forward under the first lockdown, then extending it to include school holidays and into the future.

See Main Report Chapter 2.

5. Maintain the provision of basic services for children including healthcare, water, sanitation and birth registration.

Before the pandemic, demand for child health services outstripped capacity and waiting lists were a growing problem which affected children and young people's access to high quality treatment and care. During the pandemic, many statutory services scaled back their services, prioritising 'emergency', 'urgent' or 'essential' services. Due to this scaling back, existing health issues, waiting times and health inequalities in Northern Ireland have been exacerbated. There has been an increase in the numbers of and length of time children and young people are waiting for healthcare across a range of acute and community-based services.

Several reports have been critical of the disproportionate blanket application of health-related policy or guidance during the pandemic. These referred to a lack of assessment of its implications for children as a group, a lack of service specific risk assessments, person-centred care around matters such as when and how services should close or reopen, and the implementation of policy around hospital visits.

Mental health has been one of the most discussed impacts of the pandemic and particularly so in relation to children and young people. Whilst many children and young people will have maintained good emotional wellbeing and mental health during the pandemic, a significant number have experienced a deterioration. A significant increase in referrals to CAMHS has been predicted post lockdown, the full impact of which is yet to be seen by services. However, young people are presenting to statutory services with much more complex mental ill health, including those with pre-existing mental health problems whose conditions have been made worse by the impact of the pandemic and response to it.

¹³ Free School Meals Payment Scheme | Department of Education
<https://www.education-ni.gov.uk/free-school-meals-payment-scheme>

The long-term impact of the pandemic on children and young people's mental health has the potential to be significant, particularly if appropriate support and intervention is not provided.

While birth registration was delayed for a period of time during the first lockdown, we have no evidence that this impacted on services. However, for a significant part of the pandemic, Health Visitors were redeployed to provide COVID-19 related care and services resulting in a reduction in the number of health assessments and home visits. Reductions in health visiting appointments, in addition to restrictions in access to other early years services, removed an important support system for parents, particularly first-time mothers and those from disadvantaged backgrounds.

At the beginning of the vaccine roll-out in NI, the Joint Committee on Vaccination and Immunization (JCVI) advised that vaccination of certain groups of clinically extremely vulnerable 16 and 17-year-olds was reasonably safe and effective. Only in July 2021, was the decision made to offer the vaccine to specific groups of children aged 12 years and over. Whilst understandable that clear evidence of risk versus benefit was required before making such a decision, this delay has often meant very lengthy periods of shielding and ongoing stress and anxiety for children and their families. There remain questions over what non-vaccination will mean for children's rights with respect to access to travel, hospitality / leisure and employment and work to be done with regards to informed consent, particularly where young people and their parents do not agree.

The prevailing evidence is that the direct health risk from COVID-19 on most children and young people is low; however there is growing concern about the effect of 'long Covid' for some children, particularly those with a history of infection. Furthermore, as government policy starts to distinguish between vaccinated and unvaccinated people including in relation to the roll out of 'vaccination certificates' or 'vaccination passports', there is concern that unvaccinated children and young people will be treated differently in relation to access to travel, hospitality / leisure and employment.

See Main Report Chapter 3.

6. Define core child protection services as essential and ensure that they remain functioning and available, including home visits when necessary, and provide professional mental health services for children living in lockdown.

In the study undertaken by QUB on behalf of NICCY, participants from across statutory, voluntary and community sectors all expressed serious concern about the safety of children and young people during the pandemic. In addition to noting concerns relating to trends in referrals and reporting, participants highlighted workforce pressures with staff and services who play a key role in safeguarding, such as health visiting, being redirected or redeployed elsewhere within the health system and significant reductions in workforce availability due to COVID-19 related absences at key points in the pandemic. We note that health and social care in Northern Ireland operates with persistent challenges in relation to absence rates and vacant posts leaving services at greater vulnerability when under any additional pressures.

NICCY is mindful that there is little Northern Ireland reporting to date which provides a more qualitative insight into how key professionals, such as social workers, managed the impact of the crisis while protecting children. However, during engagement with professionals, QUB noted participants' concerns that with the onset of the COVID-19 pandemic there had been a shift from early intervention and prevention support to crisis intervention responses. More positively, practitioners also identified that learning from the first lockdown period was incorporated into later responses to safeguarding children.

Across children's social care the immediate response to the pandemic took the form of Surge Planning and use of a regional Action Card to guide statutory responses alongside sector specific guidance, such as on the use of PPE and on childcare, supported living and adoption services. This was accompanied by a Vulnerable Children and Young People Plan¹⁴, brought forward by the Northern Ireland Executive and developed by the departments of Health, Education, Justice, Economy and Communities. It is important to reflect that the Plan sought to embed a cross-departmental and multi-agency approach and to establish a broad definition of children who are particularly vulnerable to the impact of COVID-19.

See Main Report Chapter 7.

¹⁴ DoH (2020) <https://www.health-ni.gov.uk/sites/default/files/consultations/health/Cross-Departmental-Actions-for-Vulnerable-Children-and-September-2020.pdf>. The plan was not consulted on until September 2020

7. Protect children whose vulnerability is further increased by the exceptional circumstances caused by the pandemic.

Across this report NICCY has identified groups of vulnerable children whose rights have been particularly affected during the COVID-19 pandemic. While few children and young people have escaped the impact of the COVID-19 pandemic, it has not been experienced in the same way by all.

For some households the pandemic has had little effect on their financial situation while others have experienced significant hardship and difficulties making ends meet. Children in poverty were identified as being particularly impacted by the move to online education, as they were more likely not to have access to an appropriate digital device or online IT access. They were also more likely to be living in accommodation that did not have adequate inside or outside space to study and for recreational activities in lockdown. The COVID-19 pandemic therefore has the potential of further entrenching the existing socio-economic inequalities.

Existing barriers faced by children with disabilities or complex health needs in accessing support and services significantly worsened during the pandemic. It has been reported that children with disabilities and pre-existing and life-limiting conditions faced the most disruption to access to healthcare. Families with disabled children experienced a reduction in both formal and informal support during the pandemic.

Whilst the full impact of school closures on children's education and wellbeing is unlikely to be known for some time yet, it is evident that some groups of children and young people have experienced its effects more acutely than others. Groups most negatively affected include children and young people from lower socio-economic backgrounds, those with special educational needs or disabilities in mainstream and special schools, and newcomer groups. Other vulnerable groups include those accessing Education Other Than at School (EOTAS); receiving support from Health & Social Services including family support, child protection, and looked after children services; those on the Child Protection Register; young carers; those with emerging and diagnosed mental health needs; and those affected by domestic violence.

Children with experience of care and secure care have given powerful testimony to NICCY on the impact of not being able to have in person contact with social workers and other professionals and visits with family members, particularly at times of both family celebrations or family illness. Young people have also highlighted disparities in the operation of COVID-19 restrictions on arrangements for visiting and outings across different parts of the care system.

Young people subject to immigration control were particularly vulnerable to feelings of isolation and stress due to a lack of social and other activities and visits. Concerns were expressed about reductions in face-to-face contact with key professionals, such as social workers and legal representatives, including in relation to preparing for key events such as asylum interviews with the Home Office. Young people's experiences also highlighted

the particular difficulties for separated and asylum-seeking children who may have arrived in Northern Ireland just prior to, or during, the pandemic period and who did not have pre-existing friendship networks, school or college connections, or sporting or faith community links to draw on.

These are just some examples of the groups of vulnerable children and young people, and some of the ways their vulnerabilities were further increased through the pandemic. The Northern Ireland Executive brought forward a 'Vulnerable Children and Young People Plan' which established a broad definition of children who are particularly vulnerable to the impact of COVID-19 and sought to embed a cross-departmental and multi-agency approach. While this made a start in addressing the particular challenges faced by vulnerable children and young people, as the Northern Ireland Executive looks to drive recovery forward, it must ensure a focus on the most disadvantaged children and young people and their families.

See Main Report Chapters 2, 3, 4, 5, 6, 7, and 9.

8. Release children in all forms of detention, whenever possible, and provide children who cannot be released with the means to maintain regular contact with their families.

There was no evidence of children in detention being released as part of the COVID-19 pandemic response.

There was an immediate cessation of all external visitors to young people in the Juvenile Justice Centre (JJC), including visits from family. While they were provided virtual access to families and friends through online technology such as Zoom and Skype, there was a noted reluctance among the young people to engage with these forms of communication. Some found it hard to adapt or mistrusted the privacy of the calls. This led to feelings of disconnectedness and isolation. During the first 10 days after a young person entered the JJC, they had to be isolated from others in the Centre and could only have access to phone calls with family and friends.

During focus groups with young people in alternative care, NICCY heard powerful testimony from young people about the difficulties arising from restrictions on face-to-face contact with family and professionals. Young people in secure care said that visiting had been curtailed because of COVID-19 and that Zoom calls were not as good as a face-to-face visits. They said it was sometimes difficult to maintain contact virtually as the IT equipment was broken or it did not work properly. Some reported problems trying to contact social workers and commented that the lack of contact made it difficult for them to build relationships. Similarly to young people in the JJC, they said that COVID-19 had made things more difficult for young people coming into secure care as they also had to isolate when they arrived.

NICCY's legal team supported a sixteen-year-old being treated as an inpatient in a mental health facility. At the beginning of 'lockdown' the unit advised that direct visits from her immediate family could no longer take place. After a review of Covid-related regulations and practice applied in other medical settings, NICCY made representations to the psychiatric unit noting that their policy made less allowance for visits than comparable settings. The visitation policy at the unit was changed to allow direct contact.

See Main Report Chapters 3, 6 and 9.

9. Prevent the arrest or detention of children for violating State guidance and directives relating to COVID-19 and ensure that any child who was arrested or detained is immediately returned to his or her family.

Throughout the focus groups conducted by NICCY, a common theme emerged from vulnerable children and young people, particularly those estranged from families and living independently, that they had to negotiate lockdown restrictions and the implications on their mental wellbeing because of enforced isolation. Prior to social bubbling, some young people actively made decisions to break COVID-19 regulations to limit their own mental health decline or that of their peers.

The PSNI created a direction for officers, 'Engage, Explain, Encourage and finally Enforce' as their primary means of engagement with children and young people suspected of breaking lockdown regulations, with the open methods of engagement primarily asking children and young people 'are you ok', rather than 'why are you out'. However, between 1st April 2020 and 31st March 2021, there were a total of 585 Community Resolution Notices issued to under 18s by the PSNI related to the contravention of the Coronavirus Health Protection Regulations.

While media stories suggested that these breaches were common, the vast majority of children and young people adhered closely to issued regulations and guidelines. Despite this, children and young people maintained they felt demonised and discriminated against by adults when they met together in public as restrictions relaxed.

See Main Report Chapters 5 and 9.

10. Disseminate accurate information about COVID-19 and how to prevent infection in languages and formats that are child-friendly and accessible to all children including children with disabilities, migrant children and children with limited access to the Internet.

Young people have expressed frustration that there was seemingly little consideration on how communications would have been received by them and whether it would be informative, understandable or simply confusing. The ever-changing guidance and advice made for inconsistency and confusion. Young people felt they were negatively stereotyped and blamed for spreading the virus.

In many cases it seems that NGOs and community and youth organisations filled the information void, passing on key messages and guidance on measures to protect themselves in formats appropriate to their audience – especially to the most vulnerable young people, for example, young people with disabilities or migrant young people. There is no evidence that there was a co-ordinated structural system for messaging which, if in place, would have improved the speed and accuracy of information reaching children and young people, especially our most vulnerable.

See Main Report Chapter 8.

11. Provide opportunities for children’s views to be heard and taken into account in decision-making processes on the pandemic. Children should understand what is happening and feel that they are taking part in the decisions that are being made in response to the pandemic.

For many years young people have been asking to have a say in our society, to have their voices heard and make a vital contribution to community at large. For many years, when given the opportunity, young people have also demonstrated that they can make an immense contribution to society.

During the initial lockdown period when high level strategic decisions were being made, children and young people’s involvement or engagement in decision making was not a priority. While some subsequent efforts were made to engage with children and young people, in general, they felt they had been excluded from expressing their views, opinions and ideas and that there were few opportunities for them to have a say on issues affecting them during the pandemic.

See Main Report Chapter 8.



CONCLUSION

Having reviewed the impact of the COVID-19 pandemic on children in Northern Ireland, it is clear that despite sudden and previously 'unthinkable' changes in the way we lived our lives, protected and delivered for children and young people, in reality there was clear continuity flowing from what had gone before. The inequalities present in our society, the vulnerabilities associated with disabilities, physical or mental ill health, and fault lines that existed in socio-economic differences and family circumstances amongst others, have been greatly exacerbated. This led to further widening of chasms in exposing the uneven impacts of the COVID-19 pandemic responses on children and young people.

Of course, no child was untouched by the pandemic – all faced social isolation and adverse impacts on their lives and education. However, where they had the support of families who could focus on their wellbeing and had the resources to address their needs, most children and young people should be able to transition back to 'normal' – hopefully a 'new and better normal' – fairly unproblematically. For others though like the young people who were bereaved by COVID-19, children and young people with disabilities who were not able to access critical services for months at a time, those who could not access health treatments, children whose parents lost their jobs, young people who have suffered mental ill health, families with newborn babies, families facing challenges of poverty and/or mental health without access to the full range of support, those in secure justice or care settings, those who couldn't engage in education due to digital poverty, and vulnerable newcomer, refugee or asylum seeking children - their needs should be prioritised in the COVID-19 recovery process.

It is the case that the degree to which the processes in implementing children's rights are already effective and embedded in government policies and service delivery processes prior to a public emergency, will determine the degree to which children's rights are prioritised during the emergency response. In this case, the support structures have been tested and in many ways have been found to be effective whilst in others have been found wanting. Efforts were made to maintain safeguarding systems, there were high levels of compliance with public health messages, and government established programmes to address unemployment, destitution and homelessness and to support the continuation of children's education in lockdown. However, other problems have also been exposed in this public health emergency – the invisibility of some vulnerable groups of children and young people, the lack of adequate, timely and easily accessible data on critical matters, the withdrawal of critical services for children with highly complex needs, the insecurity of employment for parents in low-income families, access for children and young people to physical and mental health services, children and young people without digital devices and online connectivity missing out on education, to name a few.

While we welcome the focus of the Executive on developing and implementing a COVID-19 Recovery Plan, this must not become another layer of planning separate from the Programme for Government, the Children and Young People's Strategy and all the important strategies that fall under these. These must be integral to, and inform, each other. We must learn the lesson that, alongside the vital actions required to support recovery, there must be a focus on embedding a child rights culture within the fundamental workings of government and its agencies so that, whether we face another public emergency or not, we are tackling the deep inequalities that have been laid bare over the COVID-19 pandemic.

Recommendations

Delivering more effectively for children in the continuing COVID-19 pandemic response

Young people have highlighted the lack of clarity in communication and information received about COVID-19 from both health and education perspectives, referencing confusion, inaccessibility and mixed messages. They also were very critical about how they felt their voices were not heard throughout lockdown, leading to little faith and confidence in leadership from Government and a question as to whether political leaders had their best interests to the fore.

- 1.1 As the response to the COVID-19 pandemic continues, the rights and best interests of children and young people must take priority in decision making. The NI Executive, its Departments and Agencies must ensure meaningful engagement with children, young people and their parents prior to making decisions on enhancing or relaxing restrictions, and to understand the implications for children and their families.

Prioritising infants, children and young people in the Executive's COVID-19 Recovery Plan

As we move out of the pandemic, more children and young people and their families are living in poverty, health waiting lists are unacceptably long, many have had their education adversely impacted due to lack of access to digital equipment, children in care and other vulnerable groups have not received the support they need. These are significant problems which cannot be resolved without an explicit focus in the recovery plans and the allocation of substantial additional resources.

- 1.2 The Northern Ireland Executive's COVID-19 Recovery Plan (CRP) must prioritise children and their families and should be informed by the recommendations contained in this report. A child rights impact assessment (CRIA) process should inform its development. The CRP must be integrated with the Programme for Government and the commitments contained in NDNA, and the Children and Young People's Strategy should be the key delivery mechanisms for children and young people, along with the other important strategies that fall under these. The CRP must be fully costed and funded.

While few can have escaped the impact of COVID-19, it has not been experienced in the same manner by all children and young people. There is clear evidence that the pandemic exacerbated existing social, financial, health and educational inequalities and vulnerable children and young people were more adversely affected than others. Without

a determined effort by the Northern Ireland Executive to support those who have been particularly adversely affected, there is a danger that pre-existing inequalities will widen further and become entrenched. As the Northern Ireland Executive looks to drive the recovery from Covid forward, it must ensure a focus on the most disadvantaged children and young people and their families.

- 1.3 The NI Executive's COVID-19 Recovery Plan must include a focus on vulnerable groups of children and young people, address socio-economic inequalities and inequalities within the education, youth justice and health and social care systems.

In general, staff working in the public sector have responded exceptionally well to the pandemic and there is evidence that many went the extra mile to ensure children and young people received the support they needed. As the lockdown lifts, it is clear that in many key services staff are exhausted and that public services across the board need to rebuild. This will be a considerable challenge, given that many key children and young peoples' services (e.g., CAMHS) pre-COVID-19 were inadequately resourced leading to unacceptable waiting times, and the demand for these services has significantly increased as a result of the pandemic.

- 1.4 The NI Executive must identify the financial, staffing and other interventions required to rebuild our public services post-COVID-19 and take prompt and effective action to ensure this support is provided to those areas where it is needed.

While clearly there was a need for emergency legislation to be introduced in response to the pandemic, nevertheless given that the powers were put in place for a period of two years, the limited legislative scrutiny was a matter for concern. Arguably, this was justifiable at the start of the pandemic when extensive changes were required within a very short period. However, over time, the accountability processes should have been extended again in a proportionate manner to allow for more engagement with relevant bodies such as NICCYS for more meaningful scrutiny of the many regulations made.

- 1.5 The Northern Ireland Executive should commission an independent review of the emergency legislation developed in response to the COVID-19 pandemic, the processes for developing this, including in relation to legislative scrutiny and the degree to which processes (including statutory obligations and equality screening) were followed in its development and implementation. This should consider how the legislation and its implementation met international standards and provide guidance for the development of emergency legislation in any future public health emergencies. The current emergency powers should come to an end as soon as possible and not be extended beyond the emergency period.

Planning for the future

The NI Executive's initial response to the pandemic was reactive and it appears that there was little planning in place for largescale public health emergencies such as COVID-19. While the response improved over time, it is imperative that if we are faced with a similar health crisis in the future, public services' plans should be able to respond more effectively by 'learning' from the experience of this pandemic and putting in place emergency measures to mitigate the impact of the pandemic and to minimise the disruption to the lives of children and young people.

- 1.6 The Northern Ireland Executive must prepare contingency plans for future emergencies to ensure they are better prepared and able to respond in a more systematic and coordinated way, and that children's rights and best interests are a primary consideration throughout.

The UK Government has signed up to the UN's Sustainable Development Goals and the 'Paris Agreement' to tackle climate change. Children and young people have been very vocal over recent years about the need for Government to take a long-term focus on sustainability and the need for action on climate change. They have been demanding major changes in how we live our lives to protect the environment now, and for future generations. The global emergency of the COVID-19 pandemic and the changes to lifestyles that resulted, represented a break from what had been considered 'normality' and offers a chance to build back more sustainably and more fairly. We have all lived through changes that would have been unimaginable in January 2020 and this provides an opportunity to make radical adjustments as we recover from the pandemic and look to the future.

- 1.7 The Northern Ireland Executive must re-commit to the UN Sustainable Development Goals and its NDNA actions on climate change. The Executive should engage with children and young people to hear about their vision for the future and for the improved society we should be 'building back'.

Poverty

- 2.1 The NI Executive's Coronavirus Recovery Plan must prioritise rebuilding the economy with a focus on those who have been hardest hit, including unemployed young people and families in low-income work. The new Jobstart youth employment programme should be monitored and adapted as it is rolled out to ensure that it is providing the maximum benefit to young unemployed, or underemployed people.
- 2.2 The £20 additional weekly payment should be maintained on a permanent basis. At the same time the UK social security system should be transformed so that, once again, it becomes an effective 'safety net' for all in society. Benefits must be sufficient to provide an adequate standard of living to all recipients. A Minimum Income Guarantee should be provided, with the goal of ensuring that this is set at a level so that no children are living below the poverty line.
- 2.3 Until the social security system is transformed, the Northern Ireland Executive should extend the mitigations package to include elements to address child poverty and provide support for low income families, including continuing the mitigations relating to the social sector size criteria, the benefit cap, the payment for children transferring from Disability Living Allowance (DLA) to Personal Independence Payment (PIP) and the following new elements:
 - mitigation payments for families affected by the two-child limit and removal of the family elements of tax credits;
 - grants to address costs associated with employment;
 - a per-child payment for low income families; and
 - an expanded payment for low income families with young children.
- 2.4 The NI Executive should develop an ambitious Anti-Poverty Strategy, which should have a vision of eradicating child poverty, provide specific commitments on how it will progressively reduce child poverty over time, and a fully resourced delivery plan.
- 2.5 Eligibility for Free School Meals should be reviewed to ensure all children in poverty are included. Direct payments in lieu of FSMs should continue to be provided over school holidays on a permanent basis.

Health

- 3.1 The NI Executive must adopt a cross-departmental mechanism which is committed to taking a 'child health in all policies' approach in all decisions at both regional and local levels.
- 3.2 The Health and Social Care (HSC) rebuilding plans must be underpinned by the principles of children's rights and focus on systemic reform which strengthens their reach to all infants, children and young people through universal services and targeted provisions for the most disadvantaged.
- 3.3 The DoH response to the health waiting list crisis must include specific planning and resourcing to address health waiting lists for under 18s.
- 3.4 The NI Executive Covid Recovery Plan should ensure children's right to health is prioritised and that a comprehensive range of emotional wellbeing and mental health services are in place to meet the immediate needs of parents and carers, infants, children, and young people caused by the pandemic.
- 3.5 The HSC system should ensure that changes made to child health services in response to COVID-19 are fully evaluated and only retained and mainstreamed where they offer greater flexibility, choice and improved access and quality of care to children and young people.
- 3.6 In any future public health emergency, the following measures should be taken:
 - i. Restrictions to child health services should fully respect the best interests of the child, only be applied where necessary, be proportionate and remain in place for the shortest time possible.
 - ii. Where access to allied health related services such as speech and language therapy, educational psychology, and occupational therapy are impacted, alternative ways for children to access support must be provided.
 - iii. Public health emergency planning should have a child rights impact assessment process embedded within it to ensure that decisions take account of children's rights and best interests.
 - iv. Health and Social Care Services should have access to a robust Child Health Information system to ensure accurate and timely information is provided to all clinically vulnerable children and their families.

Education

- 4.1 In order to truly understand the extent of engagement and the subsequent impact on children's development and attainment, there must be an assessment of the effectiveness of the education that children received during school closures and a benchmarking of any learning lost or gained over the course of lockdown.
- 4.2 Education and Health Bodies should report on how they have identified, met, and will continue to provide for the needs of vulnerable children, and ensure that issues which previously prevented the full-time opening of special schools are identified and addressed.
- 4.3 Ongoing guidance and support must be provided to schools to ensure safe and sustainable openings and robust plans be in place to effect facilitation of blended learning should disruptions occur between home study and study at school.
- 4.4 Robust mechanisms must be established by the DE and the Education Authority (EA) to ensure that there is a central record of all children who require access to a device and/or the internet and the number of children who remain without.
- 4.5 Additional supports must be provided to children and young people who were unable to fully engage with learning during school closures. Robust evaluation data must be gathered to explore the impact of both school summer schemes and the Engage 2 Programme and that there is an ongoing identification of any further supports required by children and young people.
- 4.6 There must be ongoing contingency planning for alternative awarding in 2022 in case of any change in the public health situation. This must build on the learning of the determination of centre assessed grades in 2021 and, essentially, must ensure young people are at the heart of discussions and decision making.
- 4.7 The Department of Education must work with schools to establish alternative contingency arrangements for the transfer from primary to post-primary school. This must include a set of common admissions criteria which must be statutorily enforced by the Department of Education to ensure equitability and accessibility for all pupils.

Play, Leisure and Social Engagement

- 5.1 The Executive, Agencies, Councils and service deliverers should consult with young people as they make changes to restrictions and prioritise safe re-opening of venues and services that are important to them including youth clubs, sports clubs, cinemas, gyms, open air concerts, activity centres, leisure centres. Parks should be kept open and children and young people facilitated to meet there safely, and without being demonised.
- 5.2 The Northern Ireland Executive should provide a financial package dedicated to overcoming the loss of play and recreational activities over the COVID-19 pandemic, and the social isolation experienced by children and young people. This should be used to increase the provision of facilities, programmes and events appropriate to different ages of children and young people up to 18, and a process of children's budgeting and consultation used to determine how it is spent.
- 5.3 Consideration should be given to a 'social incentive scheme' for children and young people, providing them with provide free access, vouchers or discounts for cinema tickets, concerts, waterparks, indoor play places, gym memberships, arts and craft activities, and driving lessons. This could be similar to the 'High Street Voucher Scheme' due to be rolled out in NI.
- 5.4 When schools are open, every effort should be made to ensure that safe extracurricular activities like sports, orchestra, choir, clubs and drama start up again. Schools should be aware of the impact of social isolation and home schooling on anxiety and mental health and there should more emphasis on balancing schoolwork and wellbeing.
- 5.5 As restrictions are relaxed, there should be a focus on the key social occasions that have been missed by children and young people, both in terms of ensuring that these happen at the time but also, where possible, facilitating events and occasions that have been missed in lockdown. These include events marking the transitions between schools or leaving school, school events and school trips, sporting events and formals.

Family Life and Alternative Care

- 6.1 The Department of Health's 'Family and Parenting Support Strategy' should comprehensively consider the impact of the COVID-19 pandemic on children, young people, their parents and carers, and wider families. It must set out a series of mitigations and additional provisions to address any adverse impacts on family and home life.
- 6.2 Any barriers to maintaining contact between children and family members, including, e.g., where parents are separated or family members are in prison, must be identified and provisions made to ensure that there is no further disruption to contact.
- 6.3 The full provision of respite services must be safely available to families of children with disabilities and complex needs both in the recovery period and in any future emergency situations.
- 6.4 The Department of Health should explore the issues that resulted in the inconsistent use of the Children's Social Care (Coronavirus) (Temporary Modification of Children's Social Care) Regulations (Northern Ireland) 2020 across different areas of social care and different Health and Social Care Trusts (HSCTs), in order to ensure greater consistency in practice and compliance with timeframes across HSCTs in Northern Ireland.

Safeguarding

- 7.1 Government and statutory agencies must ensure that COVID-19 restrictions are implemented consistently and equitably across children's social care, with particular reference to visits and outings in all care settings.
- 7.2 There should be a clear government commitment to ensure face-to-face contact with children where there are safeguarding concerns or where children are cared for by the State at all times. Any pauses in this should be in the most limited of circumstances, when absolutely necessary, for the shortest time possible, and would require more stringent regulatory and monitoring arrangements than have been in place in the 2020-21 period.
- 7.3 A thorough and ongoing assessment of the impact of the COVID-19 pandemic on safeguarding should be undertaken. The experiences and views of children and young people as well as those who care for them and practitioners should directly inform this and the recovery and rebuilding of children's social care.
- 7.4 The Children and Young People's Strategy (CYPS) and its Delivery Plan should be informed by the feedback on the consultation on the Vulnerable Children and Young People's Plan and adapted as necessary to provide a robust framework for safeguarding children during the current continuing uncertainty and in any future crisis.

Information and Participation

- 8.1 Each Government Department should prioritise developing information for children and young people, especially those most vulnerable, in an appropriate, relevant style and format, in conjunction with information provided for the wider population.
- 8.2 Each Government Department should sign up to and endorse the Northern Ireland Participation Policy as developed through the CYPSP Participation in Decision Making initiative led by DE and provide the appropriate resources and training to ensure that a network of participation structures is established.
- 8.3 Executive Ministers should engage with and communicate directly with young people on matters that impact on their lives.

Youth Justice

- 9.1 The PSNI must continue to embed a best interest and trauma informed approach to the young people it comes into contact with, including those accused of breaching COVID-19 restrictions, ensuring that arrest and detention are a measure of last resort.¹
- 9.2 Reflecting on the findings of the current survey work, the use of Stop and Search powers must be fundamentally reviewed and revised to ensure the most effective use of such powers that promotes children's best interests and community safety.
- 9.3 Spit and bite guards should not be used where officers or staff are aware or believe that a member of the public is under 18.
- 9.4 Effective and early intervention and prevention initiatives must be used to ensure children and young people are diverted from the youth justice system. Such measures must be provided by the health, education and voluntary and community sector (VCS) and developed in consultation with young people their families and the Youth Justice System.
- 9.5 All children and young people must have reasonable adjustments made to meet their additional support needs during court proceedings (virtual or in real time) including access to an independent advocate. Their attendance in person must always be facilitated.

¹ UN 2020 Op Cit



Cover image: Rainbows submitted by children and community groups to the MAC's In a Rainbow of Coalitions exhibition, displayed in the Tall Gallery

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