How have groups of people been affected by the virus?

Mental Health and wellbeing

The pandemic has given rise to a significant impact on mental health in almost all of the groups that we support. For some children and young people, we have seen a positive impact as the stress and anxiety associated with school attendance has been reduced and they have been able to spend a significant amount of time with their immediate family. This has led to strengthened relationships and time to work on areas of development such as life skills, personal care and creative education provided by parents and schools which they are able to work through at their own pace.

Conversely, and far more frequently, for many people living with learning difficulties anxiety has been heightened by the virus and the sudden and lengthy interruption to routines. Many individuals have experienced depression or this condition has been heightened due to the imposed isolation, compounded by mental health treatment and care being reduced or withdrawn entirely as services struggled to deal with the impact of the restrictions imposed on service delivery. For example, we have spoken to many families who have found the withdrawal of face to face services to be extremely difficult. Others have lost much-needed respite services, or ongoing mental health support. Some people coped well with the changes but not all - group work, for example, moved online but this doesn’t help to address specific issues such as fears of interacting with people in person. It is therefore not a suitable or accessible medium for all who require mental health support. We saw that in some areas, Treatment teams became completely unavailable. This caused traumatic experiences for those people who needed that support, with their right to appropriate care and treatment not respected or met.

Social work

The pandemic has given rise to a lack of social work support to varying degrees among the families we support. Where support is available, it is focussed mainly on the most critical cases or vulnerable families where child protection issues had been identified previously. However, this has been to the detriment of the other families whose needs were viewed as less critical or urgent – they have received a significantly reduced service in a number of cases we support. For example, several young people we support were informed they would be receiving no services until further notice, with services withdrawn across the board where face to face interaction was a necessary component. The impact of social distancing and local authorities’ implementation of social distancing policy lead to people being unable to receive supports they had previously relied on – e.g. home visits by allocated social workers, social work provision of respite.

Schools

Many schools have been unable to provide the same level of support to children with ASN as previously. While some did offer good support, the following observations were widespread among the families we support (across Scotland).

There have been delays or alternative (and less suitable) ways of providing additional support. For pupils who access Co-schooling (e.g. attending partly mainstream and partly special school), this has been restricted to one school or another in a single school day resulting in half a day instead of a full day’s timetable. This impacts on the right of the child to receive an education based on equal opportunity for all.
Enhanced transitions to their new school was not possible for children with ASN, for whom this is especially important as school visits were withdrawn. It impacted particularly on children due to the make the transition from P7 to High School.

Physical adaptations to schools such as one-way systems are highly problematic for children with ASN. For example, going to the toilet via a one-way system can be difficult for children with mobility issues as well as those who struggle to adapt to new regimes.

All children missed various rites of passage such as end of term celebrations, school proms and ‘leavers’ dos’.

Access to Additional Support for Learning (ASL) services was reduced or removed due to lockdown. Levels of support provided by ASL services were reduced due to safety concerns. Virtual learning was offered but not consistently to all learners and, where available, was not appropriate for all. Redirection of funding to expand virtual learning appeared to negatively affect services available elsewhere.

The pandemic has given rise to greater restrictions in terms of accessing schoolwork, particularly for young learners. While some secondary schools were able to provide subject materials for self-study with some online support from teaching staff online, the nature of primary teaching meant that this was more difficult to facilitate in a meaningful way.

Social groups became largely unavailable for most people. Community centres and schools closed their physical locations due to social distancing restrictions and government or local authority policy.

Parental support at groups also became largely unavailable due to restrictions, however some efforts were made by various organisation to bring theses group sessions online for parents.

The suspension of large sections of legislation under the Coronavirus (Scotland) Act 2020 relating to providing support for pupils with additional support needs led to a situation where there was little or no accountability in terms of meeting ASN needs. Our support to parents was adversely impacted by the legal changes that meant their usual rights to seek support for their child could not be enforced. It is important to highlight that education and social work staff were under immense professional as well as personal pressure and stress due to the pandemic and the restrictions this imposed on both professional and family life. Unfortunately, this gave rise, in some circumstances, to professionals being unable or unwilling to provide additional support that may have previously been in place, with no recourse for parents and carers.

General

The pandemic has seen a significant impact on a number of groups, but this has been particularly felt by young carers. There has been a large impact on the demands placed on young carers in terms of both physical and mental resilience. Many have seen respite removed due to restrictions leading to a loss of vital support.

Young people in particular have seen an impact on the confidentiality of their conversations with support workers. The level of privacy when interacting (virtually or in person) in the family home is potentially far less than could be achieved in a private therapeutic or clinical setting for example. This could mean that children may not be as candid in their feedback to advocacy services or other services seen as private/confidential to the young person.

There has also been a significant impact on already stretched health services such as CAMHS. Waiting lists for referrals have seen increases in the expected waiting times. For example, one family we support have been told they will need to wait over a year for an ENT appointment. During this wait period the professional involved can’t guarantee that the YP won’t lose their hearing. However, this seems to have been seen as acceptable in that the case was “not urgent” and therefore the family would require to wait for suitable support or potentially access this support from the private healthcare sector if possible.

The impact on disadvantaged families has also been more significant, in many ways, than for those with more access to financial and family support. For example, those with means to access private services could potentially mitigate some of the impact of the pandemic through online support and private medical care. However, private services were not available for everyone due to affordability as well as other practical issues such as online access (digital poverty).

Which groups have been disproportionately affected by the virus and the response to it?

Please enter your answer in the text box below:
In our experience the following groups have been impacted by the coronavirus pandemic:

Children and young people, including young carers/sibling carers and particularly children living with learning difficulties.

Parents and carers have also been affected and particularly those of children with learning difficulties.

Statutory services, such as schools and education staff, social workers and mental health services (specifically CAMHS) have also been affected to a large extent.

Have there been specific equality or human rights impacts on groups of people as a response to the virus?

Please enter your answer in the text box below:

The right to family life was severely impacted for one young person we support. They are in supported living with 24/7 staffing but closed to visitors. Video check-in was not suitable, so the young person had no contact at all with their parent over lockdown.

Children’s rights to access health services have also been significantly affected by the pandemic with services reduced or suspended to accommodate the increased demand as a result of the pandemic. This could be seen as a breach of Article 24 of the UNCRC (health & health services).

The effect of the pandemic and the UK government’s actions to control the spread of the infection has led to a significant impact on the economy. This in turn has seen an impact on standards of living due to falling incomes and underfunded social security systems which could be seen as a breach of UNCRC articles 26 & 27.

As already noted, the right to privacy (UNCRC article 16) has been massively impacted. Online conversations are taking place either in school or home and in
both situation the young people cannot be guaranteed privacy in the same way that could be achieved if our team members were able to be physically present in
the school or other venue with the young person. There are no guarantees of privacy, and indeed often online contact with children in schools is conditional upon
an adult being present.

Equality of access to learning has also been impacted (UNCRC article 28). Examples include the inability to access school provision, not having access to all
online platforms, Teams log-ons not working, not everyone having a laptop or other suitable device.

• In one case, a social worker had sourced an iPad for a young person, but they couldn’t receive it due to lockdown restrictions. As a result, they have missed
loads of school and meetings. In other cases, schools have cited hygiene reasons for not lending out IT equipment.
• In some cases, the computer literacy of the parents has been an issue- some are able, but many are unable to use technology. This impacts on the
parent/carers’ ability to access key meetings as well as education for their child. This also potentially impacts on a child’s goals of education (UNCRC article 29)
by limiting the education the child is able to receive.
• Online learning at home is challenging for parents having to work and ‘teach’ at the same time. This can be especially tough for parents of children with ASN.
Single parents we support have found this very challenging. As a result, there has been a massive impact on children with ASN slipping out of their educational
routines. It has also affected the parental relationships due to having to take on the role of teacher, or other support professional.

Increasing reliance on online platforms to deliver education and other services increases the vulnerability of children and young people on the internet, due to
issues of online safety and the increased accessibility of vulnerable youngsters. The situation has created a high degree of reliance on technology, meaning
children and young people are glued to their phone/iPad. For many, there has often been lots of work invested to reduce their screen time and now they are
having to use digital all the time.

Children and young people with ASN are particularly vulnerable to cyber bullying, to the point their emotional and social needs are impacted but accessing
suitable support to combat this is reduced. This could be seen as a failure to protect a child’s freedom of expression and to protect against discrimination under
the UNCRC (article 2 & 13).

The lockdown measures have meant the right to play (UNCRC article 31) has been massively impacted for all children, and especially for only-children. Children’s
ability to socialise has reduced and the opportunities to practice socialising have been removed or restricted.

What do the Scottish Government and public authorities (e.g. local authorities, health boards etc.) need to change or improve as a matter
of urgency?

Please enter your answer in the text box below:
Establish a mechanism to identify the cases of highest need and ensure that services are not abruptly withdrawn from those most in need in time of national or
local emergency.
Establish emergency funding process that can be immediately triggered in the case of a national emergency.
Digital equality must be addressed- The affordability of online access needs to be carefully considered as minutes/data can be expensive or unaffordable. With
everything moving online people without access to the internet suffer disproportionately.
More consistency between schools in terms of contact and resources.
More guidance on what schools are expected to provide and this should be resourced effectively.
Flexibility of employment and the availability of childcare.
Appropriate changes to the Corona Virus Bill to ensure Local Authorities and Education Authorities remain accountable for provision of necessary supports and
service as removing this accountability is having a significant impact on human rights issues.

What do the Scottish Government and public authorities need to change or improve in the medium to long term?

Please enter your answer in the text box below:
Timescales for assessment of entitlement to, and ultimately delivery of, services must be shortened.
All local and national service delivery should begin from a rights-based stance, with right of recourse for individuals when their rights are not met.