

A Rapid Scoping Review - The Impact of the COVID-19 Pandemic on the Education, Health and Social Care Provision for Children with Special Educational Needs and Disabilities (SEND)

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Background to the review

This rapid scoping review was conducted to inform the Ask, Listen, Act Study funded by the National Institute of Health Research.

In England, the term 'special educational needs' (SEN) was first incorporated into law under the Education Act 1981 and 'represented an attempt to establish a new legal classification for children for whom the standard educational provision would not be adequate' (Harris, p. 446). This term is now included in the Children and Families Act (CFA) 2014, part 3 of which governs SEN provision. Within that legislation, a child is classed as having SEN if their learning difficulty or disability 'calls for special educational provision to be made for him or her' (s20(1)). Harris states that the definition is 'intended to ensure that the needs of children whose particular inherent difficulty or disability affects their capacity to learn are responded to via appropriate provision from the state, with the necessary support as their education progresses.' (Harris, p. 447). As Harris argues, the legal construction of 'special educational needs' can contribute to the oversimplification of a complex issue (Harris p.448).

The Department for Education and the Department of Health (2015) Code of Practice provides statutory guidance on duties, policies and procedures relating to Part 3 of the Children and Families Act 2014 and associated regulations and applies to England. It relates to children and young people with special educational needs and disabilities (SEND). The Code of Practice expands on the legislative definition of SEND by stating that a child has a learning difficulty or disability if he or she 'has a disability which prevents or hinders him or her from making use of facilities of a kind generally provided for others of the same age in mainstream schools or mainstream post-16 institutions' (p.16). As well as this, they organise SEND into four main groups: communication and interaction; cognition and learning; social, emotional and mental health difficulties; sensory and/or physical needs. The Department for Education and the Department of Health's definition of SEND has been considered problematic as it can lead to a 'deficit focused approach to meeting the needs of individuals, that is reliant on medical solutions' (Rolfe, 2019, p. 430). However, the statutory inclusion statement in the English National Curriculum helps to overcome this by stating that teachers should focus on 'setting suitable challenges' and 'responding to pupils' needs and overcoming potential barriers for individuals and groups of children' (DfE, 2013, p. 8). This inclusion statement is crucial as it recognises the impact of external barriers on the learning of children with SEND.

Overall responsibility for children with SEND rests under the CFA 2014 with each of England's 152 local authorities (LAs) (Harris p.448). Where a child or young person who has SEND has gone through the process of an Education, Health Care Needs assessment and it is deemed that special educational provision is needed, 'the LA must secure that an Education, Health Care (EHC) Plan is prepared for the child or young person' and 'once an EHC plan is prepared, it must maintain the plan' (CFA ss36-37).




The purpose of an EHC plan is ‘to meet the special educational needs of the child or young person, to secure the best possible outcomes for them across education, health and social care and, as they get older, prepare them for adulthood’ (DfE & DoH, 2015, p.142). This EHC plan identifies each child’s individual needs and the additional support required to meet those needs. As of June 2021, the percentage of pupils with an Education, Health and Care (EHC) plan has increased to 3.7% (or 325, 618 children), continuing a trend of increases since 2017. The percentage of pupils with SEN but no EHC plan (SEN support) has increased slightly, from 12.1% to 12.2% (or 1,083,083 children), continuing an increasing trend (National Statistics, academic Year 2020/21, Special educational needs in England).

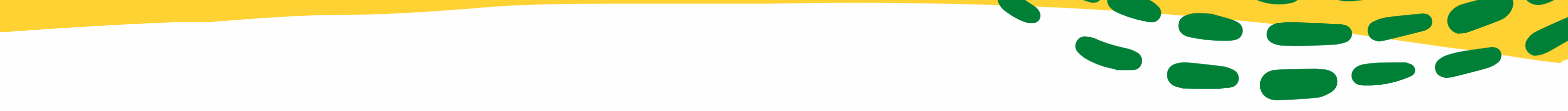
Children with SEND are some of the most vulnerable children in the education system (Byrne, 2020) and are disproportionately exposed to poverty. Government statistics show that more than twice as many pupils with an EHC plan get free school meals (35%) than pupils without SEND (around 15%) (Skipp, 2021). Children with SEND are also more likely to have a diagnosed mental health condition. For example, nearly a third (35.6%) of children with a mental health condition also have a SEND (compared to 6.1% of children without a SEND), and 71.7% of children with a diagnosed mental health condition also have a physical health condition or a developmental disorder (NHS Digital, 2018). Furthermore, in 2018 children with SEND comprised 45% of all children who had been permanently excluded from all state-funded primary, secondary and special schools (DfE, 2019; Byrne, 2020).

Before the COVID-19 pandemic, there were already stark inequalities and weaknesses in provision for children with SEND (CQC & Ofsted, 2020; Harris & Davidge, 2019; Byrne et al., 2020; National Autistic Society, 2020; Alghrani & Byrne, 2020). Support for children with SEND was described as already diminished, threadbare, and chronically underfunded (O’Hagan & Kingdom, 2020; National Autistic Society, 2021; Boesley & Crane, 2018; Byrne, 2020), with an estimated funding shortfall of £1.5bn (Disabled Children’s Partnership, 2018). In 2019 the Disabled Children’s Partnership found that only 4% of parents and carers could safely care for their disabled child/ren with the amount of support they received. On top of this, the current framework for the provision of services for children with SEND is ‘characterised by confusion, unlawful practices, bureaucratic nightmares, buck-passing, a lack of accountability, inadequate resources and an overly adversarial process for parents’ (Alghrani & Byrne, 2020, p. 2).

In March 2020, the UK prime minister implemented the first national lockdown to slow the spread of the severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) and COVID-19. The lockdown involved those who were not key workers staying at home, not mixing with other households, and social distancing when in public. Schools were closed except for the children of keyworkers and vulnerable children. NHS staff were redeployed to respond to COVID-19 related pressures (Special Needs Jungle, 2020). Education, mental health and social care services were rapidly withdrawn (National Autistic Society, 2020), leaving many children with SEND and their families stranded, cut off, ignored, and without access to their usual support (National Autistic Society, 2020; Coughlan, 2020; Ashbury et al., 2020; Family Fund, 2021). According to O’Hagan and Kingdom (2020), ‘it took a matter of weeks for parents to reach breaking point. As schools closed and resources in health and social care were redirected to meet the looming crisis, the walls began to close in on families of children and young people with SEND’ (p. 230).

In May 2020, children with EHC plans had their educational rights formally downgraded (Byrne, 2020; Children’s Commissioner, 2020) by the Coronavirus Act 2020. Typically, the Local Authority has an absolute duty to secure special educational and health care provision in accordance with EHC plans (CFA, s42). However, from 1 May to 31 July 2020, the absolute duty under section 42 of the CFA) was modified by a notice from the Secretary of State for Education issued under the Coronavirus Act 2020.





During this period, local authorities and health commissioning bodies were required to use their 'reasonable endeavours' to discharge this duty. The Alliance for Inclusive Education (ALLFIE) (2020) believe this was problematic because:

'Government's guidance emphasis on local authorities and education providers using their reasonable endeavours to arrange special education needs provision in a flexible manner has left many disabled students without any support. Indeed, "reasonable" endeavours has been interpreted as meaning "no endeavours" in securing special education needs provision for disabled pupils.' (p. 3)

Essential services (outlined in EHC plans) such as 1-to-1 educational support, mental health support, speech and language therapy, occupational therapy, respite care, differentiated learning, physiotherapy and hydrotherapy were discontinued (Alghrani & Byrne, 2020). This discontinuation has been reported as catastrophic for the education, health, and social care of children with SEND (Alghrani & Byrne 2020). On the 5th of November 2021 there was a second national lockdown until the 2nd of December 2020 (schools remained open during this lockdown), and on the 6th of January 2021 there was a third national lockdown until the 29th of March 2021 (schools opened fully again to all pupils on the 8th of March 2021).

Methodology of the review

Given the timely nature of the topic, a rapid scoping review (Tricco et al., 2017) approach has been utilised. This approach fits within the family of rapid reviews (Tricco et al., 2017) which are a form of knowledge synthesis that aims to produce evidence in an efficient manner, accelerating the process of a traditional systematic review through the streamlining or omitting of a variety of methods (Hamel et al., 2021). The rapid scoping review approach we adopted 'intended to respect the key principles of knowledge synthesis' (Tricco et al 2017, p5) and included a clear review aim, statement of review objectives, predefinition of eligibility criteria and the systematic presentation and synthesis of results' (Tricco et al 2017, p5). In line with Arksey & O'Malley's (2005) scoping review framework we did not appraise the evidence for quality or assess the evidence for validity (Joanna Briggs Institute 2015, Tricco et al., 2017).

Aim of the review

To date, a review of the existing evidence regarding how COVID-19 has impacted children with SEND has not been conducted. This rapid scoping review of the literature aimed to identify the reported impacts of the COVID-19 pandemic on the education, health and social care of children with Special Educational Needs and Disabilities (SEND).

Scope of the review

This rapid scoping review focussed on studies that involved children with SEND, including children with needs in the following areas: communication and interaction; cognition and learning; social, emotional and mental health difficulties; sensory and/or physical needs. Children with SEND included in the review were aged 5-15, as this age range is typically when most children are in formal and compulsory education. However, we recognise there is research which focusses on older young people with SEND (aged 16-25) (e.g. ALLFIE, 2021; ARU, 2021).

The review focusses on research studies and reports involving children with SEND from within the UK. Children with SEND in different countries may have varying experiences of the pandemic due to different Government policies and guidelines. We recognise there are many studies on how COVID-19 has impacted children with SEND from outside the United Kingdom (e.g. Neece et al., 2020; Petretto, Masala & Masala, 2020; Nusser, 2021; Marachetti et al., 2020; Fontanessi et al., 2020).

All kinds of empirical evidence (qualitative, mixed methods, quantitative) were included in the rapid scoping review.

Search strategy

The evidence was located by searching databases (CINAHL, MEDLINE, PSYCInfo) using comprehensive search terms, Boolean operators and wildcard term endings and we made a call for evidence to key organisations (Council for Disabled Children, ADHD Foundation, Autism UK, WellChild) on social media to identify any grey literature or reports that have not been published. We also searched google and google scholar. The searches were conducted in June 2021. The searches, selection and review of evidence was discussed within the team to check evidence against the inclusion criteria and review aim. The review process did not include a quality appraisal stage, but as a team we checked the methods and nature of the evidence for each paper to ensure ethical conduct.

Screening and reviewing the evidence

We identified 68 papers and reports, the abstract and title screening excluded 35 papers and reports. In total, we reviewed and synthesised evidence from 11 papers and 22 reports (see table at the end for included papers and reports). We extracted the data from the included studies and reports into a simple table designed for this review. The extraction focussed on mapping the different aspects (education and learning, health and social care) of children's lives which were reported as being impacted by the pandemic. We also remained open to inductively identify any other key aspects the evidence identified.

Findings of the review


The review is structured to examine the evidence which relates to **education and learning, health, social care and looking forward**. The evidence is drawn from 33 published empirical research reports and unpublished research made known to us through our networks. The majority of the evidence is drawn from parent reports gathered using online surveys (n=19), the views and experiences of children and young people with SEND were directly sought in six studies. Five studies gathered information from professionals.

Most studies used a mixed method approach (n=22) or a qualitative approach (n=4) to gain insight into the impact of the pandemic on children and young people with SEND and their parents/carers and services.

The impact of COVID-19 on children with SEND's education and learning

Attending school and not being able to attend school

Reports suggest the education of children with SEND has been detrimentally affected by COVID-19 (Alghrani & Byrne, 2020). Nearly half (46.9%, n=108) of parents of children with SEND who responded to a survey in the early stages of the pandemic were overwhelmingly dissatisfied with the level of education provided to their child (Alghrani & Byrne, 2020).




The Alliance for Inclusive Education (ALLFIE) (2020) surveyed its members (disabled students, their parents and education practitioners) and found that although some children and young people with SEND continued to go to school throughout the pandemic, many did not. The same study concluded that during the pandemic, disabled children were denied access to education. Family Fund (2021) gathered information using online surveys to families over the period of a year (n=3,487) between March 2020 and February 2021. The survey highlighted that only 30% of children with SEND carried on going to school (Family Fund, 2021) and a report by The Children's Commissioner for England (2020) drew on data from the Department for Education (2021) to show that only 6% of children with EHC plans went to school from March 2020 to May 2020. For the minority of children with SEND who did go to school (March 2020 – July 2020), the focus was reported by special school providers as being on childcare rather than learning (Skipp (2021). Of those children who were offered a place to continue to go into school, some did not go because they/their families were advised to shield (CQC & Ofsted, 2021) and others did not go to school because of parents' concerns about going to school during the pandemic (CQC & Ofsted, 2021). However, many children with SEND were not given the choice to continue to go to school in person as they did not have a EHC plan and the Government did not classify children receiving SEND support without an EHC plan as vulnerable, and therefore 1.1 million children could not attend school (CQC & Ofsted, 2021).


However, children with EHC plans were classed as vulnerable and should, after a risk assessment, have been able to attend school. This risk assessment should have been carried out with family involvement; however, Alghrani and Byrne (2020) found that 89.9% (n=207) of parents surveyed reported that no risk assessment had occurred for their child. Similarly, Special Needs Jungle (2020) found that most of the parents they surveyed (75%, n=715) reported that no risk assessment had taken place, or parents did not know if a risk assessment had taken place. Reports suggest that in several cases, risk assessments were used by schools as a mechanism to stop children with SEND from going to school (Children's Commissioner, 2020; Special Needs Jungle, 2020). In the early stages of the pandemic, 15% (n=34) of parents reported no contact from their child's school, and 95% (n=222) of parents reported no contact from their Local Authority (Alghrani and Byrne 2020).

Furthermore, some children with SEND could not attend school because their health and personal care needs could not be met by their school (CQC & Ofsted, 2021). Some pupils, particularly those with considerable health and medical needs, could not attend school because specialist medical equipment was out of use and in many cases health practitioners were redeployed or their access to schools was limited by regional lockdown restrictions (CQC & Ofsted, 2021).

The majority of special schools faced extreme difficulties in delivering education and learning for children with SEND and had to run at a severely limited capacity (Skipp, 2021). Special schools faced difficulties adhering to the 2-metre rule of social distancing, especially when pupils needed personal care or physical contact (Skipp 2021). Challenges were also encountered in children not being able to use school transport services, teacher difficulty in using small rooms or negotiating the one to one support that is part of provision within 98% of special schools (Skipp 2021).

Crane et al. (2020) in an opinion piece based on expert reports from schools providing education for children with autism, pointed out that government guidance was enormously challenging for staff in specialist provision schools to apply and was designed to meet the needs of pupils in mainstream schools. As such, Crane et al. (2020) state that in the early phases of the pandemic 'special schools were overlooked by the UK Government' (p. 4) and 'treated as an after-thought' (p, 5).






Similarly, the findings of a study of senior school leaders (Skipp 2021) highlighted that the guidance 'shows a very limited understanding of how special providers operate and the types of needs that their students have'. Indeed, Crawley et al. (2020) discuss in an opinion piece, that the government measures to prevent the impact of COVID-19 on adults are harmful to children and has left vulnerable children (including children with SEND) 'without a safety net' (p.2).


The challenges and positives of learning remotely

When children with SEND were not able to attend school, many schools provided remote learning. Although some children with SEND adapted well to remote learning (Council for Disabled Children 2021), others did not (CQC & Ofsted, 2021; Council for Disabled Children, 2021). Problems with remote learning are reported as including no individualised support, work not being differentiated, online lessons not being adapted, and minimum adjustments being denied (ALLFIE, 2020; Council for Disabled Children, 2021; Canning & Robinson, 2021; Greenway & Eaton-Thomas, 2021). As a result, many children with SEND found lessons hard to understand (Council for Disabled Children, 2021; National Autistic Society, 2021), could not keep up, and were overwhelmed by the workload (Council for Disabled Children, 2021; Canning & Robinson, 2021). To further exacerbate difficulties, school online platform providers are reported as failing to incorporate accessibility features into their platforms (ALLFIE, 2020). A significant number (18%, n=43) of parents reported they were not able to home school their child/ren (Greenway & Eaton-Thomas, 2020), and nearly two thirds (65%, n=1,574) of families who were surveyed reported that their autistic child was unable to do online work (National Autistic Society, 2021). Parents (n=8) of children with SEND discussed in qualitative interviews how their child was overwhelmed by the sensory experience of online learning (Canning & Robinson, 2021), and some children found online lessons boring and disengaged after staring at a screen for too long (Council for Disabled Children, 2021).

During the first lockdown (data collected between 29 April and 20 June 2020), parents reported in an online survey that 59% of primary aged school children and 67% of secondary aged school children didn't always have access to a laptop or a tablet (Cattan et al., 2021). In addition, some children with SEND reported how they struggled to access online lessons as they did not have access to appropriate technology, their laptops or tablets did not work well enough, or their internet connection was poor (Council for Disabled Children, 2021). Indeed, issues with digital technology were raised by SENDCos as negatively impacting the support a child was able to receive during the pandemic, especially a child with SEND (Wedell, 2020). Through a survey, conversations with parents and focus groups with children with SEND, Bradley (2021) found numerous barriers to digital inclusion including connectivity challenges, the design of software and hardware, motivation and support within the child's household, and personal skills. The difficulties in accessing education and learning for many children with SEND meant that any progress children with SEND had previously made at school was in many cases lost (Children's Commissioner, 2020). Over 75% (n=179) of parents reported that their child not attending school had put their child with SEND at a disadvantage (Greenway & Eaton-Thomas, 2020). Around 50% (n=1,211) of parents in another study focused on autism said that their child's academic progress had suffered as a result of the pandemic (National Autistic Society, 2021).

Learning remotely has also been linked to children being denied essential social contact (Canning & Robinson, 2021; National Autistic Society, 2021). Parents in a large national survey reported that their children with SEND were less likely to have regular contact with their friends than children without SEND (68-76% compared to 89-91%) (Co-SPACE, 2021).






The Disabled Children's Partnership (2021d) amalgamated research from their previous reports (2020, 2021a, 2021b, 2021c) and found that overall, during the pandemic parents reported that 9 out of 10 children with SEND were socially isolated. The same report also found that three quarters (76%) of parents saw no improvement to their child's social isolation after lockdown restrictions were reduced in 2021.

Parents in a separate study reported that a lack of social contact had a negative impact on their child with SEND (36%, n=86) (Greenway & Eaton-Thomas, 2020). Parents worried that their child/ren were losing their social skills and becoming withdrawn, and children report that being away from school made them feel sad as they missed their friends (Council for Disabled Children, 2021). A small number of parents (10%, n=16) reported in a survey that they would have liked more opportunity for their child/ren with SEND to see familiar faces (such as a teacher), even if this had been done remotely (Tosheeb et al., 2020).

It is important to remember that the pandemic did not affect each child with SEND in the same way (Council for Disabled Children, 2021). Some children have been described as having preferred learning from home as there was less noise, and they experienced less sensory overload (Council for Disabled Children, 2021). Many children with SEND were supported during home learning by not having to have their camera on while learning and being allowed to take breaks when they needed them (Council for Disabled Children, 2021). The CQC (Care Quality Commission) and Ofsted (2021) found that a few parents thought being at home was beneficial for their child/ren due to the relative calm. Between June and July 2020, a small minority (3%, n=8) of parents in a survey reported that they felt that not going to school had improved their child's academic performance and stress levels (Greenway & Eaton-Thomas, 2020). Furthermore, through surveys and focus groups with children, their parents, and professionals, the Council for Disabled Children (2021) found that when children with SEND were in school during the pandemic, they enjoyed being in smaller classes and receiving more one-to-one support from teachers (Council for Disabled Children, 2021).

The impact on parents and families of children with SEND learning at home/ virtually.

For children with SEND, school is not just a place for education and learning; it also provides parents/carers with a break from the full-time care of their child (Family Fund, 2021). School closures and home schooling has been shown to negatively impact on parents' wellbeing, with 41% (n=98) of parents reporting that they felt stressed and 21% (n=50) reporting feeling tired and exhausted (Greenway and Eaton-Thomas, 2020). Parents discussed feeling under pressure to fill in the gaps and take on the role of support teacher to their child (Canning & Robinson, 2021) and 'sometimes found it hard to help' (Council for Disabled Children, 2021, p.7). At the beginning of the pandemic, nearly three-quarters (72%, n=171) of parents reported that they did not feel that they received enough support for their child's educational needs (Greenway & Eaton-Thomas, 2020). In a survey focussed on children with autism, 40% (n=969) of parents reported that they could not sufficiently support their child's educational needs (The National Autistic Society, 2021). In another study focussing on autism, Canning and Robinson (2021) noted how the home environment (which was once a safe space prior to COVID-19) was invaded by home schooling, parents working from home, and online meetings. Parents reported that this was confusing, constrictive, and difficult to comprehend for many children, and they struggled to safeguard their child's wellbeing (Canning & Robinson 2021).



Instead of the formal remote learning provided by schools, a third (35%, n=83) of parents stated in a survey that they had had to use alternative online resources to support their child's education and learning (Greenway & Eaton-Thomas, 2021). Other parents found 'creative' ways to educate their children, such as learning from 'everyday experiences', which was reported as a positive experience, as not having to compete with other children to complete set tasks increased their child's self-confidence (Canning & Robinson, 2021). For a small minority of parents (8%, n=238) home schooling was reported to have had a positive effect on their own wellbeing (Greenway & Eaton-Thomas, 2021). Parents enjoyed spending more time together as a family (Greenway & Eaton-Thomas, 2020).

Returning to school after closures

In the Autumn term (September 2020-December 2020), when schools opened fully to all pupils, only 80% of children with EHC plans went back to school in comparison to 86% of children without EHC plans (CQC & Ofsted, 2021). Additionally, when children with SEND did return to school, schools sometimes provided them with a 'narrower curriculum than usual' (CQC & Ofsted, 2021, p.4). Newcastle City Council (2020) surveyed 546 children with SEND and found that they had lots of worries about returning back to school. They reported being especially worried about everything being different (58%, n=171), not being able to see their friends (48%, n=142), and not feeling safe (48%, n=141). The majority of parents from this study (95%, n=519) also had numerous worries about their child going back to school, including safety concerns, their child not being able to understand or remember to social distance, the impact on their child's mental health, and their child not being with their friends because of smaller class sizes. One-fifth (20%, n=32) of parents of children with SEND stated in a survey that they would have liked their child to have had a phased return to school to help with the transition back to the school environment (Tosheeb et al., 2021). The same study highlighted that around a quarter (24%, n=38) of parents reported that their child would have benefitted from more emotional support (e.g., reassurance and support around anxiety) and help to re-establish previous routines on their return to school. In January 2021, schools closed once more except for vulnerable children (including children with an EHC plan, but not children without an EHC plan) and children of keyworkers. The number of children with SEND going to school dropped again. Family Fund (2021) found that between January 2021 and February half-term 2021, only 43% of children with SEND were reported as attending school.

Key points relating to children with SEND and their education and learning during the COVID-19 pandemic and associated lockdowns

- Over the first lockdown, most children with SEND did not attend school.
- Some children could not go to school because they were not given a risk assessment, or the risk assessment was used as a mechanism to stop them from attending school. Other children could not attend school because their school couldn't meet their health and social care needs.
- Government guidelines such as social distancing made it very difficult for schools to teach children with SEND.
- Overall, not going to school and seeing other children was reported as harmful to most children with SEND, with a negative impact on their social and emotional well-being as well as their ability to learn
- Whilst some children with SEND were reported as liking remote learning, most found it really hard and many could not engage in remote learning at all.
- There were minimal adaptations made to ensure that children with SEND could access learning based on their individual needs.
- It was in many cases left up to parents to try and educate their child/ren with SEND. Parents found trying to facilitate their child's learning incredibly tough. Many parents were left feeling abandoned and reported feeling as though they had failed and as a result their child's academic progress suffered.

The impact of COVID-19 on children with SEND's health and access to health and therapeutic services

A study conducted by Alghrani and Byrne (2020) indicates that the COVID-19 pandemic has been 'detrimental and injurious' to the physical, mental and social health of children with SEND (p.6). In the same survey, a majority (87.8%, n=201) of parents reported that their child's overall level of health, social and educational wellbeing had deteriorated and regressed. Parents witnessed 'declining mental health, increased anxiety, social regression, behavioural breakdowns, and a cessation of essential health and therapeutic services' (Alghrani & Byrne, 2020, p.6). This finding is also reported by The Disabled Children's Partnership (2021d) who found that 71% of parents reported that their child's development regressed because of delays in accessing health services. Similarly, Family Fund (2021) surveyed parents of disabled children and found that 96% (n=3348) reported that their disabled child/ren had experienced a decrease in their health and wellbeing since the start of the pandemic.

The CQC and Ofsted (2021) stated that a lack of physical and mental health support over the pandemic has had a seriously detrimental and potentially permanent impact on children with SEND. Essential appointments and assessments were delayed, rescheduled, or cancelled during COVID-19, meaning there was insufficient support for families of children with SEND when they needed it the most (Council for Disabled Children, 2021; Family Fund, 2021). For example, in June 2020, Special Needs Jungle (2020) surveyed parents of children with SEND and found that only 12% (n= 114) of parents reported that their child was receiving physiotherapy, speech and language therapy and occupational therapy. Similarly, Family Fund (2021) surveyed parents of seriously ill or disabled children and found that in March 2020, 65% (n= 2,267) of parents were receiving a 'decreased' level of vital support (vital support included educational psychologists, occupational therapists, speech and language therapists, and Child and Adolescent Mental Health Services). By February 2021 67% (n=2,336) of parents were still receiving a 'decreased' level of support (Family Fund, 2021). This study also found that by February 2021, 37.5% (n=1308) of parents reported that their child/ren were still not receiving their usual support from a paediatrician or consultant, 56% (n=1953) were still not receiving their speech and language therapy, 58% (n=2022) were still not receiving occupational therapy and 51%, (n= 1,778) were still not accessing Child and Adolescent Mental Health Services (CAMHS) support. The same study found that from March 2020 to February 2021 45% (n= 1569) of disabled children had missed hospital appointments, 48% (n=1674) had missed health assessments and reviews, and 26% (n= 907) had missed appointments with their family doctor. The report does not evidence the reasons for the appointments being missed. When health appointments were not cancelled, some older children with SEND had to attend by themselves due to COVID-19 restrictions, and they reported finding this really tough (Council for Disabled Children, 2021). When appointments went online, professionals worried that they were less accessible and less engaging for children with SEND (Council for Disabled Children, 2021).

Children's physical health has been reported as greatly affected by a delay or cancellation of essential health and therapeutic appointments (Alghrani & Byrne, 2021). The Disabled Children's Partnership (2021d) found that across the pandemic paediatric pain management clinics decreased by 84%, and paediatric surgery was reduced by 40% (Disabled Children's Partnership, 2021d). Nearly half (45%, n= 1,833) of parents and carers stated that in the early stages of the pandemic their child's physical health had declined (Disabled Children's Partnership, 2020). Through 'interim visits' to children's service providers during the Autumn term of 2020 and the Spring term of 2021, The CQC and Ofsted (2021) found that some children had been left immobile and in pain due to the cessation of physiotherapy, and some children were now unable to communicate fully due to a lack of speech and language therapy and the unavailability of communication devices.

Furthermore, for children with the most complex needs, services delivered in the home could not replicate the usual services provided at school, for example some specialist equipment (such as large standing frames) could not fit in their homes (CQC & Ofsted, 2021). Although some local areas were able to adapt service provision after the first lockdown and refine the way they worked with families, The CQC and Ofsted (2021) found that by early 2021 some children with SEND were still not receiving their usual therapies and health services. Children with SEND's physical health has also been reported as affected by the COVID-19 pandemic due to lower physical activity levels and disrupted sleep (Council for Disabled Children, 2021).

Reports suggest that many children with SEND experienced a decline in their mental health and wellbeing during the pandemic (Alghrani & Byrne, 2020; National Autistic Society, 2020; Council for Disabled Children, 2021; Family Fund, 2021; Ashbury et al., 2021; The Disabled Children's Partnership, 2021a, 2021b). Family Fund (2021) found that in March 2020, 68% (n= 2,371) of parents reported in a survey that their child's mental health had been negatively impacted, and by February 2021, this had increased further up to 87% (n= 3,034). In a survey and focus groups conducted with children and young people with SEND, their parents, and professionals who work with children with SEND, The Council for Disabled Children (2021) found that children with SEND had experienced a range of negative feelings such as anger, loneliness, sadness, and anxiety. According to this study, children missed seeing their extended family and friends, which led some children to feel sad and depressed (Council for Disabled Children, 2021). Change and a lack of routine unsettled some children with SEND, leading to their behaviour becoming more challenging (Council for Disabled Children, 2021). Between the 22nd of March 2020 and the 1st of April 2020, Ashbury et al. (2020) asked parents to 'please describe in your own words how the coronavirus outbreak is affecting your mental health and your child's mental health'. From parents' responses to this question the authors suggest that low moods, distress, behaviour change, and acting out (such as violence, destructiveness, and incidents involving the police) were experienced 'more severely' by families with children with SEND than the general population (p. 1799).

Similarly, during the third lockdown (January 2021), The Disabled Children's partnership (2021a) found that 34% (n=216) of parents of disabled children felt their child had depression. Children reported feeling especially anxious when they thought about getting COVID-19 or passing it onto people they love, and at the thought of going back to school or being around other people again (Council for Disabled Children, 2021). Across the whole of the pandemic, The Disabled Children's Partnership (2021d) found there was a 60% increase in referrals to paediatric emergency mental health services. In January 2021, the Co-SPACE (2021) study found that just over a third (35.1%) of children with SEND had possible/probable conduct problems, in contrast to 13.4% of children without SEND. At multiple time points across the pandemic, children with SEND have been reported as showing more emotional and hyperactivity/attentional difficulties than children without SEND (Waite et al., 2020; Co-SPACE, 2021).

The replacement of face to face contact and interaction with online and virtual contact has been reported as problematic for many children with SEND (Canning and Robinson, 2021). In some cases, it was hard for children with SEND to understand why they could not see other people or hug them and they found COVID-19 rules and announcements confusing and inaccessible (Council for Disabled Children, 2021). Parents reported that children became distressed due to not understanding what was going on and why things had changed (Ashbury, 2020). In a large national survey, parents of children with SEND reported that their child had higher levels of anxiety (5.1 out of 10 on a scale of 0-10 (n=113)) than children without SEND (2.7 out of 10 on a scale of 0-10 (n=1000)) (DfE, 2020).

A majority (85%, n=202) of parents felt they did not receive enough support for their child's psychological needs (Greenway & Eaton-Thomas, 2021). During the first lockdown, parents reported they would have benefitted from professional advice on how to support their child's mental health and wellbeing (Ashbury et al., 2020; Tosheeb et al., 2020).

Not all children with SEND experienced the pandemic in the same way. In surveys and focus groups with children and young people and their parents, The Council for Disabled Children (2021) found that for some children and young people, the restrictions helped them stay mentally healthy as they enjoyed home schooling and a slower pace of life. The report also showed that some children liked not having to go out and interact with others, especially if they were getting bullied at school. Additionally, the report found that children also learnt how to connect with their friends over online gaming, and some children found online communication easier than face to face communication.

The lack of support for many children with SEND has had a ripple effect on their families. Parents of children with SEND reported that their family (79%, n=2,755) and their child's siblings (87%, n= 3,034) had both experienced a decrease in their health and wellbeing since the start of the pandemic (Family Fund, 2021). Ashbury et al. (2020) asked 241 parents and carers of children with SEND to describe how the COVID-19 outbreak was affecting their own mental health and wellbeing and found that parents and carers reported experiencing a 'substantial and serious' level of worry (p. 1776). Likewise, in a survey by The Disabled Children's Partnership (2020), parents reported that they suffered sleepless nights, stress, and extreme exhaustion. In interviews with mothers of children with intellectual disabilities, Rogers et al. (2021) found that for them, the lockdown was like living 'on a knives edge' (p. 6) and parents felt powerless and abandoned by professional services. As well as this, Family Fund (2021) tracked the mental wellbeing scores of parents and carers using the Short Warwick-Edinburgh Mental Wellbeing Scale (which measures mental wellbeing on a scale from 5-35) and found that average scores declined from 20.14 to 18.71 between March 2020 to February 2021. This score meant that, on average, parents and carers began lockdown with a score that indicated 'average wellbeing' (a score of between 20-27), but by February 2021, their score indicated 'possible depression' (a score of between 18-20). Furthermore, the same study measured parents' and carers' loneliness (using a measure from the Office of National Statistics) and found that loneliness scores increased from 6.72 in March 2020 to 7.01 in February 2021 (a score closer to 3 means infrequent loneliness and a score closer to 9 means frequent loneliness). In addition to parents and carers experiencing overall challenges to their wellbeing, they also reported very specific challenges they encountered such as having to contend with 'confusing and distressing information' surrounding 'Do Not Resuscitate' notices being given to people with learning disabilities whilst they were in hospital with COVID-19 (Pavlopoulou, Wood & Papadopoulos, 2020, p.2).

Key points relating to children with SEND and their health and access to health and therapeutic services during COVID-19 and associated lockdowns

- The evidence shows that important health and therapeutic services for children with SEND such as mental health support, speech and language therapy, occupational therapy, physiotherapy, and hydrotherapy were cancelled, delayed, rescheduled, or moved online over the pandemic.
- Reports indicate that a lack of physical and mental health support over the pandemic has been harmful for children with SEND, some have been left with their mobility negatively impacted and experienced higher levels of pain due to cancellation of physiotherapy. Some children lacked their usual access to speech and language therapy and communication devices, and this impacted on their ability to communicate.
- Children with SEND have been particularly impacted in relation to their mental health and wellbeing during the pandemic, feeling a range of negative feelings such as anger, loneliness, sadness, depression, and anxiety. More than half of children with SEND stopped receiving Child and Adolescent Mental Health Services (CAMHS) support from March 2020 to February 2021.
- Change, and a lack of routine caused high levels of anxiety for some children with SEND, leading to their behaviour becoming more challenging.
- Many parents and carers of children with SEND have experienced deteriorating mental health and wellbeing as a result of the pandemic.

The impact of COVID-19 on children with SEND's access to social care provision

The COVID-19 pandemic severely affected the social care provision for children with SEND, 'leaving many parents and carers feeling abandoned' (National Autistic Society, 2020, p.6). The Disabled Children's Partnership (2020) found that 72% (n=2,933) of parents and carers and 68% (n=2,770) of siblings who participated in their study were having to provide a lot more care to a child with SEND than they did before the pandemic. Moreover, special school providers reported in surveys and interviews that due to reduced social support services, they had to take on the responsibility of family welfare checks and deal with an increased number of safeguarding issues (Skipp, 2021).

A national survey (Family Fund, 2021) of parents/carers demonstrated that before lockdown, 38% (n=1,325) of parents and carers received respite care for their disabled child. However, when lockdown began all support stopped entirely for 76% (n=1,007) of these parents and carers, and only 8% (n=106) of parents and carers continued to receive the same support as they had before the pandemic. By February 2021, respite care had not returned for nearly three quarters (73%) of families (Family Fund, 2021). The CQC & Ofsted (2021) stated in their report that a lack of respite care had left families frustrated, exhausted, and sometimes in despair. Parents were left to look after their child 24/7 without a break, whilst caring for other children, overseeing and helping with remote learning, and going to work themselves (Skipp, 2021). Ashbury et al. (2020) found that lone parents, especially those with children who show very challenging behaviour, reported that they were particularly affected by the pandemic due to being isolated without their usual support and access to respite.

Many (78%, n=2,720) parents and children with SEND have also reported the difficulties they had to contend with as a result of losing access to play and recreational activities (Family Fund, 2021). On top of this, parents of children with SEND also reported experiencing a fall in income due to the pandemic and were spending more money on food, electricity and gas, leaving them in a precarious financial situation and struggling to pay bills (Family Fund, 2021). Lack of social care and support left parents and carers pushed to their limits (Disabled Children's Partnership (2020).


Key points relating to children with SEND and their access to social care provision during COVID-19 and associated lockdowns

- The COVID-19 pandemic severely affected social care provision for children with SEND.
- During the pandemic, parents were left to look after their child with SEND 24/7 without a break, whilst caring for other children, helping with remote learning, and going to work themselves.
- Most families report still not being able to access adequate respite care.
- Lack of respite care has left families frustrated, exhausted, and sometimes in despair.
- It appears that lone parents, especially those with children who show very challenging behaviour, have been particularly affected by the pandemic due to being isolated without access to their usual support mechanisms.
- Parents and children with SEND have struggled with losing access to play and recreational activities
- The pandemic also exacerbated some families' financial challenges, with some families of children with SEND experiencing a fall in income and a need to spend more money on food, electricity and gas.

Looking forward to a time after COVID-19

Children with SEND and their families face a long road to recovery and key organisations believe it will be a long time (over a year) until their lives will return to normal if they indeed ever do (Family Fund 2021). In June 2021, the Disabled Children's Partnership (2021c) found in their national survey that even though COVID-19 restrictions had been lifted, children with SEND and their parents remain socially isolated and still receive less support than before the pandemic began.

Although there is evidence that COVID-19 and changes to society and service provision has had a positive impact upon a minority of children with SEND, this paradox is readily explained by lockdown bringing welcomed respite, calm, and relaxation for children with SEND, who were having a difficult time at school and in society before COVID-19 (Asbury et al., 2020; O'Hagan & Kingdom, 2020). Indeed, O'Hagan and Kingdom (2020, pg 232) point out that there should not be a rush to return 'back' to a world filled with 'routines, structures, demands and challenges' which do not readily adapt to the needs of children with SEND.



Moving forward, Greenway and Eaton-Thomas (2020) suggest that teachers may want to re-think the way children with SEND are educated and include more outdoor activities and non-traditional forms of learning. The Council for Disabled Children (2021) make several recommendations orientated around a need to consider that 'a 'one size fits all' approach doesn't work' (p.13) for children with SEND. One of these recommendations is to keep a slower, calmer pace of life, enabling children with SEND to spend more time with their families and pets. A second recommendation is to provide more mental health support for children with SEND, especially for those who have lost loved ones or are experiencing anxiety. A third recommendation is for schools to emphasise children's health and wellbeing over academic achievement by focussing on friendships, talking about feelings, having fun, and prioritising activities that build children's confidence. A final recommendation is to provide more extra-curricular activities (such as youth clubs) that specifically cater to children with SEND. Family Fund (2021) also make a series of recommendations for moving forward for children with SEND, including increased financial support for families of SEND children and reinstating support and respite care.

The Disabled Children's Partnership (2021d) also make a number of suggestions for central and local Government. The first of these is that the needs of children with SEND should be prioritised in their COVID-19 recovery plans. The second is to clear the backlog of assessments and re-assess children's needs to take into account a lack of support throughout the pandemic. The third is to provide the right support for all children with SEND, including equipment and therapies, health (including mental health), and education. The fourth is to take into account the whole family (including siblings) when doing assessments and providing support (such as providing respite and short breaks). The final suggestion is to provide more funding for services that support children with SEND.

Key points relating to moving forward after COVID-19 for children with SEND

- Children with SEND and their families face a long road to recovery and key organisations believe it will be a long time (over a year) until their lives will return to normal if they indeed ever do.
- Even though COVID-19 restrictions had been lifted, children with SEND and their parents remain socially isolated and still receive less support than before the pandemic began.
- A one size fits all approach doesn't work for children with SEND.
- More mental health support needs to be provided for children with SEND.
- Schools need to emphasise children's health and wellbeing over academic achievement for children with SEND.
- Children with SEND should be prioritised in Government COVID-19 recovery plans.



Conclusion

The COVID-19 pandemic has disproportionately impacted children with SEND, exposing and exacerbating already stark inequalities and weaknesses in SEND provision (CQC & Ofsted, 2021; Harris & Davidge, 2019; Byrne et al., 2020; National Autistic Society, 2020; Alghrani & Byrne, 2020). The evidence indicates that children with SEND's education has been adversely affected during the pandemic. Although children with an EHCP plan should have been able to attend school, the majority did not, and many were not offered a place in school. Online learning was not an adequate substitute for children with SEND as it was inaccessible, and work was not differentiated and individually tailored to their needs. Furthermore, in many cases, health and social care provision completely stopped, or moved online, with a negative impact on children's physical health. Many children with SEND struggled with deteriorating emotional well-being and mental health, for which there was little or no support. With very little respite care available, families of children with SEND have been left exhausted and sometimes in despair. Eighteen months on from the beginning of the pandemic, support for children with SEND and their families has still not fully returned. Recommendations from the evidence are orientated around the need for children with SEND to be prioritised in recovery plans moving forward after the pandemic.

Limitations of the review

The review only focussed on children aged 5-15 years with SEND within the UK. The search was conducted in June 2021 and as a result there is a focus on literature and evidence published from the earlier stages of the COVID-19 pandemic.

Table 1: Brief overview of the evidence used in the review

Author and date	Title	Short description of the nature of the evidence
Alghrani, A & Byrne, S (2020)	The impact of COVID-19 on education and children's services	An online survey of parents/carers (n=234) of disabled children (aged 3-20) between April 2020 and May 2020
ALLFIE (2020)	The Alliance for Inclusive Education's submission to the Education Select Committee's "The impact of COVID-19 on education and children's services" inquiry	ALLFIE surveyed its members and invited Facebook posts to collect disabled pupils, parents and educational professionals' experiences of the provision of education services for disabled people during the Covid-19 pandemic
Ashbury, Fox, Deniz, Code and Toseeb (2021)	How is COVID-19 affecting the mental health of children with SEND and their families?	Parents (n=241) of children with special educational needs and disabilities (aged 5-18 years) were asked to answer free-response questions relating to the impact of COVID-19 on their own mental health and their child's mental health. Recruitment was between March 2020 and April 2020.
Bradley (2021)	'Locked Out': Digital Disadvantage of Disabled Children, Young People and Families during the Covid-19 Pandemic	Research into digital exclusion and digital disadvantage during the COVID-19 pandemic and an evaluation of the response to support children with SEND and their families. The report includes analysis of publicly available data, findings from a survey of parents of children with SEND (n=421), findings from a focus group with children with SEND and findings from 20 conversations with different SEND services and parents of children with SEND.
Byrne (2020)	The impact of COVID-19 on children with special educational needs and disabilities	A briefing paper on the impact of COVID-19 on children with SEND's educational rights.

Author and date	Title	Short description of the nature of the evidence
Canning and Robinson (2021)	Blurring boundaries the invasion of home as a safe space for families and children with SEND during COVID 19 lockdown in England	Parents (n=8) of children with SEND/autism took part in a qualitative ethnographic narrative study using a private social media messaging group, online interviews and telephone interviews. The research was orientated around the challenges they and their child had faced during lockdown and how these challenges had been managed.
Children's commissioner (2020)	Childhood in the time of COVID	A report which draws on publicly available sources of data sets out the main ways in which children's lives have been impacted by the Covid-19 pandemic.
Co-SPACE (2021)	Report 08: Changes in children's and young people's mental health symptoms: March 2020 to January 2021	An online survey was completed by parents/carers (n=12,500) and adolescents (n=1,300) to track the mental health of children and young people (aged 4-16 years) every month throughout the COVID-19 pandemic.
Council for Disabled Children (2021)	Lessons learnt from lockdown: The highs and lows of the pandemic's impact on disabled children and young people: Children and young people's summary	Focus groups and an online survey were completed by children and young people with SEND (n=643), parents (n=128) and professionals who work with or support young people with disabilities (n=110). During February and March 2021.
CQC (Care Quality Commission) and Ofsted (2021)	SEND: old issues, new issues, next steps	The CQC and Ofsted visited 10 local areas in the Autumn term of 2020 and the spring term of 2021. During these visits The CQC and Ofsted spoke to 44 parents and carers of children and young people with SEND.
Crane et al. (2020)	Vulnerable and forgotten: The impact of the COVID-19 pandemic on autism special schools in England	An collaborative article from the Pan London Autism Schools Network (PLASN; a collective of special schools catering for pupils on the autistic spectrum) which reflects on how the COVID-19 pandemic has impacted special schools.

Author and date	Title	Short description of the nature of the evidence
Crawley et al. (2020)	Wider collateral damage to children in the UK because of the social distancing measures designed to reduce the impact of COVID-19 in adults	An opinion paper discussing how children have been harmed by the government guidelines designed to protect adults.
Department for Education (2020)	State of the nation 2020: Children's and young people's wellbeing	A report about children and young people's (aged 5-24) wellbeing. The report follows the structure of the Office for National Statistics' seven domains of wellbeing for children and young people. The data is from March 2020 to September 2020.
Disabled Children's Partnership (2020)	Left in lockdown: Parent-carers' experiences of lockdown	An online survey of parents (n=4868) of disabled children (aged under 25) looking at the impact of the coronavirus pandemic and lockdown on families with disabled children. The data was collected in May 2020.
Disabled Children's Partnership (2021a)	The longest lockdown: The experiences of disabled children and their families during lockdown 3	An online survey of parents (n=635) of disabled children (under 25) looking at the impact of the coronavirus pandemic and lockdown on families with disabled children in the third lockdown. The data was collected in January 2021.
Disabled Children's Partnership (2021b)	The loneliest lockdown: The Impact of the Pandemic on the Families of Disabled Children, their Parents and Siblings	An online survey of parents (n=547) of disabled children (under 25) looking at the impact of the coronavirus pandemic and lockdown on families with disabled children in the third lockdown. The data was collected in March 2021
Disabled Children's Partnership (2021c)	Left Behind: The Impact of the Pandemic on Disabled Children, their Parents and Siblings	An online survey of parents (n=290) of disabled children (aged under 25) looking at the impact of the coronavirus pandemic and lockdown on families with disabled children in the third lockdown. The data was collected in June 2021.

Author and date	Title	Short description of the nature of the evidence
Disabled Children's Partnership (2021d)	Disabled Children's Partnership (2021d)	This report amalgamates and builds upon the previous reports by the Disabled Children's Partnership (2020, 2021a, 2021b, 2021c, Bradley, 2021) and provides suggestions for central and local governments, charities and funders.
Family Fund (2021)	The impact of Coronavirus: A year in the life of families raising disabled and seriously ill children and young people	Online surveys of families (n=3,487) raising disabled and seriously ill children and young people (n=4,545) illustrating the impacts of the coronavirus pandemic on families raising, focussing on support, finance, and wellbeing. The survey had quantitative and qualitative elements and was completed at 5 points in time from March 2020 to February 2021.
Greenway and Eaton-Thomas (2020)	Parent experiences of home schooling children with special educational needs or disabilities during the coronavirus pandemic	An online survey of parents (n=238) of children with special educational needs and disabilities that looked at experiences of home schooling during the COVID-19 pandemic. Data was collected between June 2020 and July 2020.
ImpactEd (2021)	Lockdown Lessons: Pupil learning and wellbeing during the Covid-19 pandemic: Final report from ImpactEd's longitudinal study of over 60,000 pupils in England	An online survey with school pupils (n=62,254) aged 6-18 on factors affecting their learning and wellbeing during the pandemic. The study also used interviews and focus groups. The data was collected between May 2020 and February 2021.
National Autistic Society (2021)	Left stranded: The impact of coronavirus on autistic people and their families in the UK	An online survey with autistic people (n=1,810) and their families (n=4232) about experiences of coronavirus and lockdown. Participants could email the researchers with additional open-text data. The data was collected between June and July 2020.
Newcastle City Council (2020)	Results from parent/ carer survey May 2020	A snapshot of results from a survey of parents and carers (n=546) of children with SEND in Newcastle about their worries for their child with SEND during the COVID-19 pandemic

Author and date	Title	Short description of the nature of the evidence
O'Hagan and Kingdom (2020)	Experiences of children with special educational needs and disabilities and their families in the UK during the coronavirus pandemic	A paper highlighting the experiences of children with special educational needs and disabilities and their families during the COVID-19 pandemic. The paper draws upon research from 3 organisations working with families of children and young people with SEND (Reaching Families, Disabled Children's Partnership and Special Needs Jungle).
Pavlopoulou, Wood and Papadopoulos (2020)	Impact of Covid-19 on the experiences of parents and family carers of autistic children and young people in the UK.	A survey of 449 parents and carers of autistic children to understand how the COVID-19 pandemic, Coronavirus Act (2020), and the lockdown impacted on parents and carers of autistic children
Rogers et al. (2021)	The experiences of mothers of children and young people with intellectual disabilities during the first covid-19 lockdown	Interviews with mothers (n=8) of children with intellectual disabilities about how they coped during the first lockdown.
Special Needs Jungle (2020)	Coronavirus and SEND education	A survey of 953 parents/carers of children with SEND to find out what support was being provided to families during the Coronavirus lockdown. Data was collected in June 2020.
Toseeb et al. (2020)	Supporting families with children with special educational needs and disabilities during COVID-19	An online survey of parents (n=339) of children with SEND (aged 5 – 18) between March and May 2020. The survey was about the adequacy of support during COVID-19, and what support would be needed in the transition back to school.
Waite et al. (2020)	How did the mental health of children and adolescents change during early lockdown during the COVID-19 pandemic in the UK?	An online survey of parents and carers (n = 2,673) of children and young people (aged 4 to 16). The survey was about their child's mental health at two points in time between March and May 2020
Weddel (2020)	Points from the SENCo-Forum: Special educational needs in the coronavirus lockdown	A paper outlining issues relating to the COVID-19 pandemic for children with SEND raised by SENCoS on an internet forum.

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