Literature review on the impact of COVID-19 on families, and implications for the home learning environment

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Executive Summary

- During COVID-19, regulations around social distancing have resulted in families spending more time at home, and many have enjoyed this quality time together. Research suggests, however, that there has been a marked difference between children who have spent enhanced quality time at home with their parents, and those who have been at home in more difficult circumstances.

- COVID-19 has exacerbated factors that can influence the prevalence of parental depression, including economic hardship and job insecurity, and those in low paid or insecure work, who had fewer resources to begin with, have been impacted more. Parenting is influenced by parents’ current lives - it is easier to parent more effectively when social and economic circumstances are favourable and when stress and anxiety are lower. For many parents the stress of financial insecurity has meant they have not been able to support their children’s learning as much as they would like.

- Poor parental mental health can impact on parents’ ability to develop a warm, sensitive and nurturing relationship with their child. This has implications for the home learning environment as the process by which children learn to think and understand occurs fundamentally through social interactions with others. The foundations of early language skills are laid when parents respond positively to the child’s expressions and vocalisations. When the parent fails to respond to a child’s communication with attention, gestures or speech, the connections in the child’s brain that support the development of communication and social skills do not form as they should.
• A positive early years home learning environment can predict higher levels of vocabulary, spelling and literacy in young children. However, parents from low-income backgrounds are likely to spend less time reading and playing with their children. As a result, there are significant differences in language development between children from rich and poor backgrounds that begin in early childhood. Because the impact of coronavirus is likely to be worse for those with lower incomes, the disparities in the quality of the home learning environments of children from disadvantaged families and others are likely to increase with the current crisis.

• What happens at home in the early years of a child’s life is not only key to their success in education, but their success in life. The early years period therefore presents a key opportunity to intervene to change the course of a child’s life and prevent families’ emerging issues from escalating, yet there are wide local and regional variances in support provided. The pandemic has also made it more difficult for parents to seek support: while many practitioners have provided virtual support to help families with home learning environment activities, research suggests that middle class parents were more likely than working class parents to receive online support, and many low-income families don’t have adequate access to a device or connectivity at home.

• When supporting parents with the home learning environment, acting early and supporting parents to engage with their child’s early learning is key to boosting children’s language skills and improving cognitive development. Successful initiatives are those that focus on developing a warm and positive relationship with the family. Parents like to be listened to, have their views taken seriously, and treated as active participants in supporting their children.

Introduction: the importance of the home learning environment

What happens in the early years of a child’s life has a profound impact on the rest of their life (Pordes Bowers et al 2012; Ipsos Mori 2020). This significant and influential phase in visual, language and emotional development lays the foundation for lifelong health, learning and earning potential (First 1001 Days; Pordes Bowers et al 2012; Asmussen et al 2016; Roulstone et al 2010; Irwin et al 2007; Early Years Healthy Development Review 2021; Marmot et al 2020). During this period, although early years practitioners provide essential support with a child’s development, parents have a greater influence on attitude and propensity for learning (FYT, NCB, NLT, People 2018; Pordes Bowers et al 2012). Children learn to investigate the world through everyday life and activities (Smees and Sammons; Law et al 2017), meaning that the home learning environment is extremely important to a child’s development. The more stimulating the early environment, the more positive connections are formed in the brain, and the better the child thrives in all aspects of his or her life (Irwin et al 2007).
A positive early years home learning environment can predict higher levels of vocabulary, spelling and literacy in young children (Smees and Sammons). For example, a longitudinal study commissioned by the Department for Education found that children who owned more books and were taken to the library more frequently at age two achieved higher scores in language and communication when entering primary school (Roulstone et al 2010). Vocabulary ability at the age of five is strongly associated with comprehension skills at age 11 (Finnegan et al 2015; Axford and Albers 2018): an analysis of the Millennium Cohort Study found that one in four children who struggled with language at age five did not reach the expected standard in English or maths at the end of primary school (Save the Children 2018). In addition, early language acquisition contributes to children’s ability to manage emotions and communicate feelings, to establish relationships and to think symbolically (Law et al 2017; Pordes Bowers et al 2012). Children with better early years home learning environments are better adjusted in terms of behaviour and wellbeing during both the primary years and secondary schooling (Smees and Sammons 2017).

There are a range of activities that parents undertake with pre-school children which have a positive effect on their development. Reading, teaching songs, painting and drawing, visiting the library, teaching the alphabet and taking children on visits are all associated with higher intellectual and social/behavioural scores (Sylva et al 2004). Some studies also show that interactive educational apps for children aged six and under have positive impacts on a child’s academic outcome (Griffith et al 2020; Finnegan et al 2015). Some research suggests that the amount of language children hear is important: the more they hear, the more time their parents spend talking with them, and the more types of words they are exposed to, the more they use (Cross 2009). Other studies suggest that it is the quality of interaction rather than quantity which is important (Centre for Education Policy and Equalising Opportunities 2020): when parents use infant-directed and responsive speech (i.e. gentle but exaggerated baby talk) this reinforces several key skills, including differentiating the sounds of words, associating words with emotional expressions, grasping the meaning of specific words and using language (Axford and Albers 2018). Children develop strong language skills when parents ask open-ended questions, ask children to elaborate and focus on topics of interest to the child, as well as respond positively to children’s attempts to communicate (Cross 2009; Finnegan et al 2015). In contrast, excessive use of negative language, closed questions or short instructions can limit a child’s confidence in developing more complex language skills (Finnegan et al 2015).

The link between the home learning environment and disadvantage

The home learning environment has an influence on a child’s intellectual and social development that is over and above family socio-demographic factors such as parental education, socioeconomic status and income (Melhuish 2010; Sylva et al 2004; Desforges and Abouchaar 2003). However, although a positive home learning environment has the potential to help children overcome some of the disadvantages of growing up in poverty, parents from low-income backgrounds are likely to spend less time reading and playing with their children (Richards et al 2016; Goodman and Gregg 2010), take their children to fewer out-of-home activities (Smees and Sammons 2017), and are less able to foster their
children’s potential for development and ability to thrive (Marmot et al 2020). Children growing up in low-income households on average hear far fewer words and are exposed to a more limited vocabulary than those in middle and higher income homes (Law et al 2017; Axford and Albers 2018; White 2018).

As a result, there are significant differences in language development between children from rich and poor backgrounds (Marmot et al 2020; Asmussen et al 2016). These disparities are apparent by the time children are nearing two years of age (Axford and Albers 2018; Marmot et al 2020) and can have an impact on later life opportunities. Children from socially disadvantaged families are more than twice as likely to be diagnosed with a language problem (Law et al 2017; Finnegam et al 2015), causing them to fall behind their peers in academic achievement at every stage of their education (Law et al 2017). If a child doesn’t learn to read well when young, they can struggle at school (Read On. Get On 2014).

Researchers in both the UK and the US have noted a difference in how well prepared children are to start school between children from less advantaged and more advantaged backgrounds (Melhuish 2010; Axford and Albers 2018; Pordes Bowers et al 2012; Roulstone et al 2010), with the poorest children 11 months behind their better-off peers (Pascal et al 2020). In Scotland, one in five poorer children leave primary school unable to read well, four times higher than for children from the least disadvantaged backgrounds (Finnegan 2015). By the end of secondary school, disadvantaged children are on average 18 months behind their peers, and recent research suggests that this attainment gap has stopped closing for the first time in a decade (Hutchinson et al 2020).

Language difficulties not only predict problems in academic achievement but may also lead to problems in a child’s behaviour and mental health (Richards et al 2017; Cross 2009; Law et al 2017). Children with speech and language difficulties are more likely than their peers to find peer interaction and forming friendships difficult, putting them at risk of social isolation and low self-esteem (I CAN 2006). The impact of this can extend far into adulthood (Finnegan 2015): there is emerging evidence of a high incidence of speech, language and communication needs in those who have social, emotional and behavioural difficulties, and those who are socially excluded (Cross 2009). Low literacy is also prevalent amongst young offenders and the prison population: 48% of offenders in custody have a reading age at or below the expected level of an 11-year-old (Morrisroe 2014).

The impact of COVID-19 on the home learning environment

a) The impact of COVID-19 on families

For many families, the COVID-19 pandemic has been a challenging time. 65% of parents with young children at home were feeling stressed, worried or overwhelmed during the spring 2020 lockdown (Pascal et al 2020), while 33% of parents felt out of their depth (Action for Children 2020). Women are twice as likely to experience a negative impact on their mental wellbeing as a result of the pandemic, often due to increased family responsibilities (Etheridge and Spantig 2020) or a change in employment (Andrew et al 2020). Single parents are particularly vulnerable: research by the Women’s Budget Group found that 51%
reported having depression, bad nerves or anxiety, compared with 27% of couple parents (Clery et al 2020).

Research suggests that the pandemic has been particularly difficult for parents with very young children. A survey conducted by YouGov in 2021 found that over half (54%) of parents of under fives are struggling to cope (YouGov cited by Home-Start 2020). A study in the US which collected daily survey data from parents with a young child aged under seven found that the frequency of negative mood reported increased significantly from the start of the crisis (Gassman, Pines et al 2020), while a large-scale study of over 61,000 parents in South America found that 85% reported at least one symptom of distress, with mothers of young children particularly affected (Pena de Osorio et al 2020). The pandemic has also been challenging for new and expectant mothers: pregnant women assessed during the COVID-19 pandemic reported more distress and mental health problems than pregnant women assessed before the pandemic (Berthelot et al 2020), which may be due to the fact that parents have not had the usual range of maternity, birth and perinatal choices, have often had to attend appointments alone, and have had more limited opportunities to attend baby groups and spend time with extended family (Papworth et al 2021).

Conditions such as extreme stress and emergency situations can increase risks for mental health disorders (World Health Organization). Having control over one’s life is critical to an individual’s health and wellbeing (Marmot 2020; Brown et al 2020), but the pandemic has created uncertainty and instability: a survey by University College London in summer 2020 found that 50% of respondents didn’t feel in control of their future plans (Fancourt et al 2020). Social networks also have an important role in maintaining health and wellbeing (NHS Health Scotland 2017; Roberts et al 2013; Family Action 2021; Early Years Healthy Development Review 2021), but the social distancing imposed during the lockdowns has led to many people feeling disconnected and isolated (Papworth et al 2021). Loneliness has been one of the main drivers for worsening mental health during the pandemic (White and Van Der Boor 2020): one study found that parental stress and depression were elevated during the first lockdown, then reduced over the summer, but increased again between November and December, suggesting that periods when people have had less contact with others have been challenging (Shum et al 2021). Levels of loneliness during the spring 2020 lockdown were higher in people living with children (Fancourt et al 2020). Mental Health Foundation research found that almost a third of parents of children aged four and under reported loneliness (Mental Health Foundation 2020) while Royal Foundation commissioned research found that parental loneliness increased from 38% before the pandemic to 63% (Ipsos Mori 2020). The pandemic has also given rise to challenges like bereavement, and social distancing measures may have exacerbated grief-related trauma as families are unable to mourn together or attend funerals (ADCS 2020).

For some parents, mental health problems co-exist with substance misuse and domestic violence, and the pandemic has escalated these issues (Smith and Barron 2020; Buttle UK 2021; Reed and Parish 2021). Stress can lead to coping strategies that provide short-term relief, such as drinking (Donkin 2014; Smith and Barron 2020), and retail sales of alcohol grew during the first lockdown (Childhood Trust 2020). A survey of 3,000 adults in Canada found that parents were more likely to report increased alcohol consumption (Gadermann
et al 2020). Periods of prolonged confinement have led to heightened family tensions, and domestic abuse may be present in homes where it did not exist before, as a result of pressures such as job losses (Barnardo’s 2020). Refuge had a ten-fold increase in visits to its helpline website (ADCS 2020), while Women’s Aid reported that 61% of women said that abuse had worsened since the start of the pandemic (Davidge 2020). A survey of health workers in summer 2020 found that 96% were concerned about children in homes at risk of domestic violence and abuse (Conti and Dow 2020). The total number of serious incident notifications during the first half of 202021 increased by 27% on the same period in 2019-2020 (Gov.uk 2021). However, the closure of settings has resulted in disruption to safeguarding mechanisms (Wilson and Waddell 2020; Action for Children 2020; Smith and Barron 2020; Papworth et al 2021; Reed and Parish 2021): 57% of Barnardo’s practitioners were concerned about an increase in family conflict and stress, yet 45% reported a decrease in referrals (Barnardo’s 2020). A survey of front-line practitioners found that three-quarters were concerned that children were not being reached by external agencies (Action for Children 2021).

Children’s mental health may have been affected by COVID-19 as well. Children’s experiences of stress can affect the development of the brain (Axford and Albers 2018). Stressors that are short, and where children are supported by a trusted adult, do not have a significant impact on a child’s development, but stressors that are sustained and/or where a child does not have an adult to turn to, cause significant changes in their hormones and brain activity (Pordes Bowers et al 2012; Early Years Healthy Development Review 2021). The Babies in Lockdown survey, conducted by three children’s charities, showed that almost 7 in 10 parents felt the changes brought about by COVID-19 were affecting their unborn baby, baby or young child; a third said their baby’s interaction with them had changed during lockdown, and almost half reported that their baby had become more clingy (Saunders and Hogg 2020). Similarly, Sutton Trust research showed that 45% of parents of very young children reported a particularly negative impact on their child’s social and emotional development, particularly those who had been unable to attend their childcare provider (Pascal et al 2020).

The impact on families’ finances and how this has affected mental health

COVID-19 has exacerbated factors which can influence the prevalence of parental depression, including economic hardship and job insecurity (Institute of Health Visiting 2020). ONS research found that parents were twice as likely to report reduced income (ONS 2020), and over half of parents who responded to a Child Poverty Action Group survey said that they had had a change in financial circumstances as a result of the crisis (Child Poverty Action Group 2020). Over 3 in 10 people with children under 18 were facing redundancy last year, compared to less than 1 in 10 of those who don’t have children under 18 (Smith and McClosekey 2020). While earnings have fallen for households across the UK, single parents have faced particularly severe losses (Understanding Society 2020): in early 2020 they were already earning half as much as mothers in coupled households (Clery et al 2020), and are more likely to be in serious financial difficulty (Kempson and Poppe 2020). A third of single parents were working in shutdown sectors (Gustafsson and McCurdy 2020), and single parents were more likely to have been furloughed than coupled parents (Clery et al 2020). Many parents have had to reduce hours or stop work altogether to care for children at
home (Gustafsson and McCurdy 2020). Those working on zero-hours contracts, or with insecure or low wage jobs are at increased risk of losing their livelihood because of this, and many of these are single parents, primarily from black, Asian and ethnic minority backgrounds (Children’s Society 2020; Clery et al 2020).

Families have also faced additional costs associated with children being at home, including increased food and energy bills, investment in learning and play resources, and improved online connectivity (Child Poverty Action Group 2020; Smith and Barron 2020). A Family Action survey found that 52% of families had not been able to pay for essentials at some point over the last year (Family Action 2021). In Scotland, Children 1st Parentline reported a 158% increase in calls about finances and employment, including from many families who would not have previously sought their services (Scottish Government 2020). Many families have been unable to access food, support and items needed to engage in education, and these increased difficulties in accessing the basics have impacted wellbeing and mental health (Smith and Barron 2020). A survey of frontline practitioners found that 93% said families’ finances had deteriorated since the first lockdown, with families most worried about not being able to afford food (Action for Children 2021).

Those in low-paid or insecure work, who had fewer resources to begin with, have been impacted more (ONS 2020; First 1001 Days 2020; EPI 2020; Children’s Society 2020; Save the Children 2020; Social Metrics Commission 2020; Fancourt 2021; Johnson et al 2021; Bhattacharya and Shepherd 2020; (Parent Zone 2020). A survey of low-income families by Child Poverty Action Group in November 2020 found that around three-quarters of people were finding it ‘difficult’ or ‘very difficult’ to manage financially (Howes et al 2020). Over 30% of families have applied for universal credit since the start of COVID-19 (Smith and Barron 2020). 2.3 million children are living in households that have experienced food insecurity in the past six months, and many families have struggled to access support: lone parents have been particularly affected (Loopstra et al 2021) as well as parents working in shut-down sectors (Bhattacharya and Shepherd 2020). Usage of food banks by parents rose from 8% before the crisis to 11% since (Bhattacharya and Shepherd 2020). 6 in 10 families on Universal Credit and Child Tax Credits have been forced to borrow money since the start of the crisis, while 5 in 10 are behind on rent or other essential bills (Save the Children 2020). Levels of debt have increased (Buttle UK 2021; Loopstra et al 2021), and lower-income families are particularly likely to have increased use of credit cards and overdrafts, as well as turning to informal loans from friends and family (Bangham and Leslie 2020).

For many low-income families, an increase in household costs has coincided with a decrease in income (due to, for example, furlough, a pay cut or redundancy), at a time when they were already financially exposed, after a long period of weak living standards growth (Brewer and Patrick 2021), low wage growth, welfare benefits cuts and rising household costs (Action for Children 2020). Many families were already struggling before the crisis, with changes to the social security system making it harder to get support (House of Lords 2020; Block et al 2020). Child poverty was already rising rapidly before coronavirus (Hirsh 2020; Wickham et al 2018): around 4.5m children live in families that are more than 50% below the poverty line (Social Metrics Commission 2020). Poverty rates are particularly high for black and minority ethnic families: nearly half of all people living in families where the
household head is black are in poverty (Social Metrics Commission 2020). In Scotland, Aberlour reported a rise in applications to their Urgent Assistance Fund for financial assistance from black and minority ethnic families, in particular from asylum seeking families and those with no recourse to public funds (Scottish Government 2020). A survey by Mind found that existing inequalities in housing, employment, finances and other issues have had a greater impact on the mental health of people from ethnic minority groups than white people during the pandemic (Mind 2020). In addition, evidence suggests that minority ethnic communities are more at risk of contracting COVID-19, which may have an impact on mental health (Mental Health Today 2020).

Depression and anxiety levels have been higher in those with lower household incomes (Fancourt et al 2020; Shum et al 2021) who have been impacted more by the pandemic. Experiencing a transition from employment to joblessness is significantly predictive of poorer psychological wellbeing (Flint et al 2013), and debt is one of the major risk factors for mental health disorders (Meltzer et al 2013; NHS Scotland). The Babies in Lockdown survey found that 55% of parents with a household income of less than £16k reported feeling “a lot” more anxious compared with 32% of those earning the most (Saunders and Hogg 2020), while research from the Child Poverty Action Group found that 56% of low-income families were experiencing a mental or physical health problem (Howes et al 2020). A survey by Save the Children found that struggling to put food on the table or money on the electricity meter is having a negative impact on mental health: two-thirds of parents said that concerns about money had affected their mental health, with around a quarter reporting a severe impact (Save the Children 2020). Similarly, a Family Action survey found that among those facing financial difficulties, nearly half said they had lower levels of confidence and motivation compared to a year ago and are more likely to report deteriorating mental health (Family Action 2021). Living without a garden in an area of deprivation and in an urban area is associated with a higher level of poor mental health (Pordes Bowers et al 2012), and this may have been particularly challenging for disadvantaged families during lockdown.

b) The implications for the home learning environment

Benefits of social distancing regulations on the home learning environment

Regulations around social distancing have resulted in families spending more time at home. A significant number of early years settings were closed during lockdown periods: a survey by the EPI and NDNA found that 72% of early years settings in England and Wales were forced into full or partial closure between November 2020 and February 2021 (NDNA 2021). Even when restrictions were lifted, some parents chose to keep their children at home (Bowyer-Crane et al 2021): research by Coram found that in the vast majority of areas, use of childcare had decreased (Jarvie and Dali-Chaouch 2020). Many families have enjoyed spending this quality time together (ADCS 2020; Reed and Parish 2021), with more time to bond with their child, more time to play, and more opportunities to relax and prepare activities (Saunders and Hogg 2020). A Family Action survey found that 43% of parents said they had built up stronger relationships with their children, often as a result of having more time at home, without having to commute to work (Family Action 2021). Similarly, Royal
Foundation commissioned research found that 63% of parents said they had been able to spend more quality time with their child during the pandemic (Ipsos Mori 2020).

Several parents have accessed home learning environment resources: a survey by the Sutton Trust found 43% viewed television programmes like *The Baby Club*, while 37% reported using online resources like Hungry Little Minds, and 31% parenting mobile phone apps (Pascal et al 2020). National Literacy Trust research found that 32% of parents said they had been reading more since COVID-19, 36% said they had been chatting more, and 43% said they had been playing more (National Literacy Trust 2020). The Social Distancing and Development Study, led by Oxford Brookes University and other universities, found that 90% of families reported an increase in enriching activities during lockdown, such as chatting, playing and reading (Oxford Brookes University 2020), while a survey of over 7,000 parents in Germany found that parents engaged in more home learning activities with their children during the lockdown than they did before, with more time spent reading and playing together, both inside and outside (Oppermann 2020).

Some parents feel that increased time at home has had a positive impact on children’s development. Royal Foundation commissioned research found that relatively few parents thought the pandemic would have a negative impact on the brain and mind development of their child: 44% felt this would actually improve due to the pandemic, with more time spent learning, playing and talking in the home (Ipsos Mori 2020). The Sutton Trust survey found that 43% of parents felt their child’s progress had not been negatively impacted when it came to their language development, and 37% said there had been a positive impact (Pascal et al 2020). A study of the vocabulary of over 1,700 children across 13 countries found that children gained more words than expected during the first lockdown periods which may suggest that children benefited from greater interaction with the caregiver during this period (Kartushina et al 2021).

**Disparities in the home learning environment during COVID-19**

Research suggests, however, that there has been a marked difference between children who have spent enhanced quality time at home with their parents, and those who have been at home in more difficult circumstances, where the impact of coronavirus has been very disruptive (Pascal et al 2020; Children’s Commissioner 2020). The Royal Foundation commissioned research found that parents who have experienced financial difficulties during lockdown or who do not live with their partner are more likely than average to say they have spent less quality time with their child since the start of lockdown (Ipsos Mori 2020), while a survey of disadvantaged families by Buttle UK found that only 3% of families indicated there had been positives to the pandemic, including being able to spend more time together as a family (Buttle UK 2021). The Social Distancing and Development Study found that disadvantaged parents were less likely to engage in enriching activities (Oxford Brookes University 2020), and the survey of parents in Germany found that parents who were stressed and overwhelmed provided the least amount of learning activities (Oppermann 2020). A Child Poverty Action Group survey found that although a third of families were enjoying learning at home, these families were much less likely to report having money worries (Child Poverty Action Group 2020). Similarly, research by Parent Zone
found that 50% of parents earning over £55,000 reported a positive impact on their ability to educate their child, compared with 36% of parents earning under £20,000 (Parent Zone 2020).

Because the impact of coronavirus is likely to be worse for those with lower incomes, the disparities in the quality of the home learning environments of children from disadvantaged families and others are likely to increase with the current crisis (EPI 2020; First 1001 Days 2020). Some evidence suggests that the pandemic may have negatively impacted on young children’s development (Marmot et al 2020). Research commissioned by the Education Endowment Foundation found that 76% of schools reported that children who started Reception in autumn 2020 needed more support than children in previous cohorts, with children struggling in particular with communication and language, personal, social and emotional development, and literacy (Bowyer-Crane et al 2021). A survey by Ofsted found that almost all providers said that the first national lockdown had impacted on children’s language and development (Ofsted 2020). Another survey, by the Anna Freud Foundation, found that 42% of nursery staff said that children’s emotional wellbeing had been affected by the pandemic (Nelinger et al 2021), while a survey of teachers by Kindred2 found that 46% said that children starting Reception were not school ready, with 4 in 10 teachers saying that over half of children didn’t know how to listen properly or hold a pencil (Nicholls et al 2020).

During lockdown periods, practitioners provided virtual support to families, to help them with home learning environment activities. However, the nature and extent of this support varied considerably (Early Intervention Foundation 2020; Children England 2020) and there were stark disparities between disadvantaged parents and their more affluent peers in accessing this support (ACDS 2020). Sutton Trust and IFS surveys found that middle-class parents were more likely than working-class parents to receive online support from their provider, and parents with higher levels of education were more likely to have used online resources (Pascal et al 2020; Andrew et al 2020). Research commissioned by Parent Zone found that 85% of families in the top earnings bracket saw a benefit to technology during the pandemic compared to 71% from the lowest group (Parent Zone 2020). Many families living in poverty don’t have the right kind of devices to support their children’s learning and development, such as touchscreen tablets and laptops, and are less likely to have access to reliable and fast internet connection (Save the Children 2020; Centre for Education Policy and Equalising Opportunities 2020; Buttle UK 2021; Marmot et al 2020). Save the Children states that their partners have reported that in some communities up to 40% of families are experiencing digital exclusion (Save the Children 2020), while IPPR estimate that 1m families do not have adequate access to a device or connectivity at home (McNeil et al 2020). In addition, those with English as a second language may find it difficult to access parenting advice through online tools (Wilson and Waddell 2020; Early Intervention Foundation 2020).

Families who experience social disadvantage often have to contend with a multitude of stressors that can leave them feeling stressed, worried or lacking in confidence, making it harder for them to create early learning opportunities (Finnegan 2015; Save the Children 2020; Irwin et al 2007; Lexmond et al 2011) and interact effectively with children (Cross 2009; Utting 2007). Those experiencing economic adversity often focus their attention on
coping in the short term (Marmot et al 2020). Work pressures and work patterns or other family responsibilities may act as a barrier to engagement by reducing the amount of time available for home learning environment activities (Roberts 2009; White 2018); poorer parents are more likely to raise children alone or to work non-standard hours and have inflexible work schedules (Axford and Albers 2018). As outlined in the preceding section, parents from low-income households were more likely to have a difficult experience of lockdown (Saunders and Hogg 2020) which may have impacted on their ability to provide a good home learning environment. For many families during the pandemic, the stress of financial insecurity has meant they are not able to support their children’s learning as much as they would like (Save the Children 2020).

Families with fewer economic resources are also less able to purchase items that can help provide enriched home learning environments, such as books or toys, as well as new experiences like visits to a zoo or a museum (Roulstone et al 2010; Law et al 2017; White 2018). A Child Poverty Action Group survey during lockdown found that low-income families were twice as likely to say they lacked all the resources they needed to support learning at home (Child Poverty Action Group 2020). A study run by five leading universities found that disadvantaged parents were less likely to engage in enriching activities during lockdown, particularly those that require access to outdoor space and access to books (University of Oxford 2020). 1 in 5 children in low-income households spent lockdown in an overcrowded home, and children from BAME backgrounds faced particular challenges: they were more likely to experience poorer indoor conditions than white children, and had less access to outdoor space (Judge and Rahman 2020). overcrowding can result in more limited opportunities for children to play, as well as a lack of quiet space for learning, and can impact on wellbeing (White 2018).

A good home learning environment requires much more than engaging in specific activities: it requires a stable home environment (Smees and Sammons 2017). Studies show that changes to the home learning environment can have an impact on children’s early learning (Finnegan et al 2015), and that children struggle in environments that are unpredictable or overwhelming (Asmussen et al 2016). Household chaos (e.g. noise, crowding, lack of structure and routine) adversely affect children’s ability to both express and understand language at 36 months, and this can have a long-term impact on cognitive development and social skills (Axford and Albers 2018). Children in chaotic households not only have poorer outcomes but also receive poorer quality home learning (Smees and Sammons 2017). During the lockdown, many parents have struggled to create routines for their children, particularly when they have been trying to manage several children and support different educational needs depending on the ages of the children in the home (Smith and Barron 2020).

Poverty is one of the most powerful causes of instability and chaos in the home, and there is evidence that financial stress undermines parenting and contributes to a more disordered and anxious parenting style (Lexmond et al 2011), which can impact on family relationships (Axford and Albers 2018; Lexmond et al 2011). Poverty can impact on the parents’ ability to develop a warm and nurturing relationships (Axford and Albers 2018; Moullin et al 2014; Donkin 2014; Cooper and Stewart 2013; Roberts et al 2013; Duncan and Magnusson 2013).
For example, it can make parents irritable, frustrated, less patient and lacking in the emotional resources needed for supportive and nurturing parenting behaviours (Cooper and Stewart 2013). While the majority of parents in poverty provide good parenting, some evidence suggests that sensitive and responsive parenting is associated with parents’ economic situation (Axford and Albers 2018; Parkes and Wright 2011; Katz et al 2007; Institute of Education), with one study showing that children from poor families scored significantly lower on measures of mother-child closeness (Goodman and Gregg 2010).

While many low-income families have been struggling financially during the pandemic, it is important to note that although some research shows that parents who move into poverty become depressed, which in turn causes disruption to parenting practices, this causal chain is not inevitable (Katz et al 2007). Many families are resilient even in the face of severe adversity (Katz et al 2007), and this resilience can improve children’s experience of a stressful environment (Moore and Vandivere 2000; Roberts et al 2013; Katz et al 2007). For example, certain factors such as perceived control over stressful events, the ability to regulate emotions, self-efficacy, and supportive family environments can act as buffers to decrease stress (Brown et al 2020; Gambin et al 2020). Parents who develop open, participative communication, problem-centred coping, confidence and flexibility tend to manage stress well and help their families to do the same (Utting 2007). For example, good parenting can play a protective role for children growing up in disadvantaged settings (Gutman and Feinstein 2010; White 2018). A study of boys who lived under the poverty threshold at some point between 18 months and five years showed that those with secure attachments at 18 months were two and a half times as likely as others to show positive adjustment including a lack of behavioural problems and above average social skills (Owens and Shaw 2003, cited in Moullin et al 2014).

How parental mental health impacts the home learning environment

Parenting is influenced by parents’ current lives (Pordes Bowers et al 2012). The quality of parenting and parent-child relationships reflects the impact of other stressors such as maternal mental health (Pryor and Rodgers 2001, cited in Mooney et al 2009). It is easier to parent more effectively when social and economic circumstances are favourable and when stress and anxiety are lower (Marmot 2020). Experiencing poverty is associated with a higher risk of mental ill health (Pordes Bowers et al 2012; Social Metrics Commission 2020; Axford and Albers 2018; Fryers et al 2005; NSCDC 2009; SAMH 2014; Marmot et al 2020). For example, poorer mothers are more likely to experience mental health problems than mothers from better-off backgrounds (Goodman and Gregg 2010; Donkin 2014; Maryatt and Martin 2010; FPH 2015). The risk factors that lead to poor mental health, such as lack of financial resources, low levels of social support and difficult relationships, are more prevalent in poorer socioeconomic groups (Pordes Bowers et al 2012), and are likely to have been exacerbated by COVID-19. As outlined in the preceding section, many families have been struggling financially during the pandemic, and research suggests that transitioning into poverty has an impact on maternal psychological distress (Wickham et al 2017).

Many parents with mental health issues will be able to parent perfectly well but the increased anxiety caused by COVID-19 sharpens the challenge (Children’s Commissioner
2020), and the stress of the crisis will have made it harder for some parents to provide safe, nurturing and responsive care (Institute of Health Visiting 2020; First 1001 Days 2020). One survey found that 74% of frontline practitioners had seen increases in difficulties in parent-child relationships during COVID-19 (Smith and Barron 2020), while a survey of pregnancy and 0-2s services conducted by the Isos Partnership found that 98% of respondents said the babies their organisation works with had been impacted by parental anxiety, stress and depression affecting bonding and responsive care (Isos Partnership 2020). If parents do not have the physical or emotional capacity to provide nurturing care then crises such as COVID-19 can have potentially significant and lasting impact on babies’ development (Saunders and Hogg 2020).

For a child, the most important and intensive relationship in the first few years of life is with their parents or primary carers (Finnegan et al 2015; Grossman and Grossman 2019; Pordes Bowers et al 2012; Children’s Commissioner 2020; Moullin et al 2014). Sensitive and loving caregiving and the development of a secure relationship are central to child development (Roberts 2009; Asmussen et al 2016; Smith et al 2020), because they give the child a secure base to explore the world around them and a capacity to learn (Action for Children 2016; Axford and Albers 2018; Moullin et al 2014; Irwin et al 2007). Sensitive and responsive parenting can also help children to regulate their emotions and behaviour, enabling them to develop confidence and self-reliance, and to function better in a range of later life situations (Axford and Albers 2018; Moullin et al 2014). A recent study in Poland found that parents who were attuned to their child’s emotions, and sensitive to their child’s mental states, had more positive experiences in child-parent relationships during COVID-19 (Gambin et al 2020).

Poor parental mental health can impact on parents’ ability to develop a warm, sensitive and nurturing relationship with their child (White 2018; NSCDC 2009; Smith et al 2020; Smith and Barron 2020; Waylen and Stewart-Brown 2010; Asmussen et al 2016). Attachment comes through attention and interaction (Pordes Bowers et al 2012), but this may be difficult for parents who face emotional insecurity (Moullin et al 2014). Maternal depression can limit the mother’s capacity to interact with or bond with her child (Roulstone et al 2010; Duncan and Magnuson 2013; Axford and Albers 2018; O’Higgins et al 2013) and is significantly associated with more disengaged and withdrawn parenting (National Research Council and Institute of Medicine Committee on Depression, Parenting Practices and the Healthy Development of Children 2009; Ipsos Mori 2020). Many young mothers experience higher degrees of stress related to parenting, and tend to be less responsive and more detached from their infants than older mothers (Moullin et al 2014). Poor mental health can make parents unpredictable or irrational (Pordes Bowers et al 2012), and parents who report high levels of stress tend to use harsher forms of discipline and are more inconsistent in their parenting style (Ipsos Mori 2020).

When infants interact with a hostile or irritable caregiver, this creates feelings of fear and anxiety in the child which may result in the increased production of potentially harmful stress chemicals that affect brain development (NSCDC 2009). For example, poor parental mental health has been linked to patterns of child brain activity associated with anxious and withdrawn emotions (NSCDC 2009). Evidence suggests that maternal mental health is
significantly associated with child development outcomes (Marryat and Martin 2010; Roberts et al 2013; Mooney et al 2009; FPH 2015; NHS England 2016; Stanley and Cox 2020; Ipsos Mori 2020), and while some behavioural and emotional difficulties can resolve over time, some continue and predict longer-term difficulties including delays in motor, cognitive and language development (Axford and Albers 2018), which can then impact a child’s transition to school and subsequent attainment (Action for Children 2016). Children with persistently depressed mothers are more likely to be doing less well in school and more likely to have behavioural problems (Hobcraft and Kiernan 2010). Half of all mental health conditions are established by the age of 14 (Kessler et al 2005), and are influenced by adversity and disadvantage, including poor parenting and parental mental health problems (NHS Scotland 2017; NHS Digital 2018).

Poor parental mental health has implications for the home learning environment. The process by which children learn to think and understand occurs fundamentally through children’s social interactions with more knowledgeable others, and the foundations of early language skills are laid when parents respond to the child’s expressions and vocalisations (Axford and Albers 2018). Children not only need to be engaged but they also need a relationship in which their interactions are responded to positively (Pordes Bowers et al 2012; Grossman and Grossman 2019; Donkin 2014). As mentioned above, there is consistent evidence that depressed mothers may be less responsive than mentally healthy mothers to their infants’ efforts to engage with them (Maryatt and Martin 2010; Roulstone et al 2010). When the parent fails to respond to a child’s communication with attention, gestures or speech, the connections in the child’s brain that support the development of communication and social skills do not form as they should (Harvard University 2009).

In contrast, when an infant babbles and an adult responds appropriately with attention, gestures or speech, this builds and strengthens connections in the brain that support the development of communication and social skills (NCSDC 2009). For example, maternal warmth can lead to greater improvement in infants’ communication and cognitive, social and emotional competence (Landry et al 2006; Taulbut and Walsh 2013): infants produce more syllabic, speech-like vocalisations when mothers smile and make eye contact with them (Axford and Albers 2018). When children have a secure relationship with the adults in their life, they are more likely to develop good language skills (Finnegan et al 2015). One study showed, for example, that mothers who had established secure relationships had children with the highest language scores (Murray and Yingling 2000), while another study demonstrated that child attachment was associated with the child’s executive function: children who had secure attachments did better on tasks involving working memory and cognitive flexibility (Bernier et al 2012).

**Supporting parents during COVID-19**

Royal Foundation research found that 73% of parents with children aged 0-5 said that being a parent is stressful, with 1 in 5 (19%) reporting that it is very stressful (Ipsos Mori 2021). Pregnancy in particular can be a challenging time for parents, and may cause or exacerbate mental health conditions (Early Years Healthy Development Review 2021). Mental health problems already affect the lives of 10-20% of women (Bauer et al 2014), and 10% of men in
the perinatal period (Paulson and Bazemore 2010). It is therefore vital that parents get the support they need. Studies show that parents who access help and support are less likely to report high levels of stress (Barlow and Coren 2017). For example, if not addressed or treated, perinatal mental health difficulties can result in poor outcomes for the mother, negatively impacting the care she provides to her baby (Joint Commissioning Panel for Mental Health 2012; Isos Partnership 2020).

Some research indicates there has been an increase in demand for mental health support from parents since COVID-19. One Parent Families Scotland reported a 300% increase in calls to their helpline and online chat (Scottish Government 2020), and Action for Children’s support service, Parent Talk, reported a 430% increase in the number of parents seeking advice online (Action for Children 2020). However, despite the prevalence of parental mental health issues, there was a reduction in mental health diagnoses during April 2020 (Carr et al 2020). Social exclusion, often linked to financial poverty, reduces an individual’s capacity to access support (SAMH 2014; Stanley and Cox 2020), and language and cultural differences can act as a barrier for women from ethnic minority backgrounds (Papworth et al 2021).

In addition, many parents may be reluctant to seek support: a survey undertaken in 2011 showed that half of women who had suffered from postnatal depression had not sought professional treatment, often due to a lack of awareness of the symptoms or a belief that their condition was not serious enough to need professional help (4Children, 2011). More recently, Royal Foundation commissioned research found that 1 in 5 parents would feel uncomfortable seeking help for how they were feeling (Ipsos Mori 2020). Some women hide the fact they have mental health problems because of fear and stigma from those around them (Papworth et al 2021). YouGov research found that 1 in 3 parents were worried they would be judged if they asked for support, and 57% felt too uncomfortable to ask for support (YouGov cited by Home-Start 2021). In addition, some services are not prioritising parental mental health: a recent survey by the NCT found that a quarter of new mothers are not being asked about their emotional or mental health at their six-week routine GP check-up, and that the focus of these appointments is on the baby (NCT 2021).

The pandemic has also made it more difficult for parents to seek support. The Babies in Lockdown survey found that 6 in 10 parents shared significant concerns about their mental health in the spring 2020 lockdown, but only around 3 in 10 were confident that they could find help for their mental health if they needed it (Saunders and Hogg 2020). Some parents have been unwilling to attend routine appointments for fear of contracting the virus (Ipsos Partnership 2020). Others have found that services have been significantly reduced. 50% of services supporting children under two said they were only able to provide information online (Reed and Parish 2021). In some areas of England at least 50% of highly skilled health visitors were redeployed into other health services in the spring 2020 lockdown (Institute of Health Visiting 2020). Maternity services were stripped back, during a time when parents were unable to draw on wider family support due to restrictions (ADCS 2020; Wilson and Waddel 2020). Traditional face-to-face family support services have often been suspended due to a lack of reliable access to PPE supplies and social distancing measures (ADCS 2020; Children England 2020; Children’s Society 2020). 65% of families raising disabled or seriously
ill children said their access to formal support services had declined (Family Fund 2020), while another survey found that 80% of those previously receiving support from services had this support stopped or postponed (Waite et al 2020). This is likely to impact on mental health: 79% of parents of disabled children said their emotional and mental health was worse, with many parents reporting an increased caring load as a result of the support they would normally receive being suspended (Disabled Children’s Partnership 2020).

Many practitioners embraced the use of social media to offer advice and support to families (Papworth et al 2021; Reed and Parish 2021), and some found that the move to virtual and digital support meant capacity to deliver help increased (Early Intervention Foundation 2020), with more families who were previously on waiting lists now receiving support (Wilson and Waddell 2020), as well as new ways of thinking about how to reach families (Reed and Parish 2021). Some families have engaged well in virtual contacts as there are fewer costs and barriers to attendance than face-to-face services (First 1001 Days 2020; Action for Children 2020; Reed and Parish 2021). However, those experiencing poverty have often lacked the devices and data to engage with virtual support services (Saunders and Hogg 2020; First 1001 Days 2020; Action for Children 2020; Papworth et al 2021; Reed and Parish 2021), and working remotely can also make it hard to build and maintain trusting relationships with families, especially if they haven’t had contact before (First 1001 Days 2020; Children’s Society 2020). It can be difficult for practitioners working with families solely online to replicate the long-term relationships they can achieve through face-to-face support (Action for Children 2020; Papworth et al 2021; Reed and Parish 2021). In addition, not all providers have the right technology to enable effective virtual work with families, and it can be difficult to assess parent-infant interaction through telephone or video contact (First 1001 Days 2020).

Families with low socioeconomic status are likely to experience multiple stressors in their daily lives (Pote et al 2019; Stanley and Cox 2020) and may require multiple strands of support (Smees and Sammons 2017). Taking a whole person approach (i.e. identifying and addressing other problems that parents may be facing) is key to achieving positive outcomes for the whole family (Roberts 2009; Cabinet Office 2007; Smith et al 2020; Donkin 2014). Improved collaboration between services and integrated working can help with this, and some evidence suggests that partnership working has improved during COVID-19. An Action for Children survey found that many new partnerships were formed during the pandemic, as organisations have had to adapt to a more flexible and innovative way of working (Wilson & Waddel 2020), while ADCS found that a renewed ‘common purpose’ has galvanised partnership working in many areas, with better information sharing and quicker responses from agencies (ADCS 2020). However, although there is a strong evidential basis for joined-up working between a range of services, and evidence that there has been an improvement in collaboration and multi-agency working over lockdown (Reed and Parish 2021), help is still often fragmented (Early Years Healthy Development Review 2021), and when there isn’t a single point of access for families, some parents miss out (Children’s Commissioner 2020).

It is important to intervene early to change the course of a child’s life and prevent families’ emerging issues from escalating, yet wide local variances mean that one family can get a very different experience and offer of help than another (Children’s Commissioner; Reed
In addition, family and parenting support contrasts greatly across the four nations: in Wales, the focus is on prevention through the Flying Start programme, which aims to provide intensive support services for children and families, focusing on language, social and emotional skills; while in Northern Ireland there is a focus on ensuring that all families have the right to receive support through the Families Matter strategy, which offers early intervention family support services on a universal offer (Smith et al 2020). In Scotland, the National Parenting Strategy helps families build better lives for themselves (Smith et al). In England, children’s centres - which provide early help services to parents – have seen a 62% cut in funding since 2010 (Action for Children 2019), with around 1000 closing in recent years due to cuts in funding (Smith et al 2018). Concerns have been raised about increasingly limited availability of early help services (Smith et al 2020), which are often vulnerable to the impact of austerity, with long-term funding challenges likely to be exacerbated as a result of the pandemic (Reed and Parish 2021). Lockdown is also likely to have significantly damaged the finances of many childcare providers, particularly those who are reliant on income from parent fees (Blanden et al 2020): an Ofsted survey found that a third of providers were worried they would have to close (Ofsted 2020).

**Supporting parents to create a good home learning environment**

Acting early and supporting parents to engage with their child’s early learning is key to boosting young children’s language skills and improving their cognitive development and educational achievement (Finnegan et al 2015; Melhuish 2010). Increasing family access to resources is unlikely to be sufficient: studies show improving families’ financial circumstances is not predictive of improvements in parenting (Waylen and Stewart-Brown 2010; Katz et al 2007). Interventions should therefore support the parent-child interaction (Law et al 2017) and show parents how to engage in home learning activities (Roulstone et al 2010). Families from deprived backgrounds are more likely to say that they need more information and advice about how best to support their child’s early learning (Roulstone et al 2010). Early years settings therefore play an important role in supporting parents’ engagement with their children’s learning. An evaluation of the National Literacy Trust’s Early Words Together, in which nursery staff support parents to engage with their child’s development, found that 78% of parents were more confident in singing songs and sharing stories after the programme, while Bookbug in Scotland, which enabled practitioners to help parents talk, sing and share books with their children, resulted in an increase in the number of families reading daily with their children (Blake Stevenson). In the US, an evaluation of the Early Head Start programme, in which practitioners helped parents provide developmentally enriching caregiving, found that children involved in the programme performed better in cognitive and language development (Love et al 2005).

Successful initiatives are those which focus on developing a warm and positive relationship with the family (FYT, NCB, NLT and People 2018; Pordes Bowers et al 2012; Roberts 2009; Pote et al 2019; Utting 2007). Parents like to be listened to, have their views and knowledge taken seriously (FYT, NCB, NLT and People 2018) and be treated as active participants in meeting their children’s needs (Roberts 2009). Focusing on existing strengths can help empower parents and avoid creating stigma by labelling families as ‘problem families’ (Roberts 2009). For practitioners, that might involve working in partnership with parents to
recognise their existing skills, supporting them to build up aspirations and capabilities, and empowering them to shape the package of support they receive, make decisions about their own lives and agree their own responses to challenging circumstances (Cabinet Office 2007). Interventions are likely to be most effective when parents have been involved in the design and implementation of interventions (Pote et al 2019; Utting 2007).

Practitioners should be given the confidence and skills to work creatively to engage families who are reluctant to accept support: parents in the most deprived neighbourhoods are less likely to turn to professionals and local services for advice (Pordes Bowers et al 2012; Finnegans et al 2015; Smith et al 2020; Pote et al 2019), which may be due to a lack of trust, past experience of discrimination, or fear of being judged as a failing parent (Roberts 2009; Bowes et al; Early Years Healthy Development Review 2021; Papworth et al 2021). Early Intervention Foundation suggests there are three key barriers to accessing early years support: awareness barriers such as lack of knowledge or lack of recognition of the need for support, accessibility barriers such as time, cost and location of interventions, and acceptability barriers such as feelings of personal failure and stigma (Pote et al 2019).

Families from black and ethnic minority communities face a number of barriers accessing services: a study of Home-Start family support services found that access was a particular problem for Asian women who were isolated by factors including problematic family relationships and a poor grasp of English (Utting 2007).

Maintaining frequent contact with parents is important, particularly during COVID-19 (First 1001 Days 2020), so organisations should provide staff with the skills and time to engage families (Pote et al 2019). Parents from disadvantaged backgrounds are likely to need more intensive and sustained approaches to support their engagement in learning (Axford and Albers 2018), and practitioners who are proactive and persistent have had considerable success in engaging some of the most excluded families (Cabinet Office 2007; Roberts 2009). However, targeting specific families can be problematic because it can leave families feeling stigmatised and therefore less willing to ask for help: it is important to sensitively encourage parents to seek support (Early Years Healthy Development Review 2021).

Tailoring services to parents’ needs, level of knowledge or circumstances is important (Roberts 2009; Pordes Bowers et al 2012; Pote et al 2019): it has been argued that some parenting programmes apply white middle-class values that do not automatically recognise cultural differences (Utting 2007). Services should be provided in flexible ways and at flexible times (Roberts 2009; Utting 2007): disadvantaged families are less likely to attend activities or services outside their own area (Smees and Sammons 2017). Effective programmes are often offered in welcoming environments such as an accessible and calming community spaces (Smith et al 2020; Pote et al 2019). Parents are more likely to feel most welcome and comfortable in playgrounds and public/green spaces (Ipsos Mori 2020). Recruiting practitioners who come from comparable backgrounds to parents can be beneficial (Pote et al 2019) and some programmes, including A Better Start, have found Parent Champions (parent volunteers who provide support) to be effective in increasing take-up of services and boosting parents’ confidence (Smith et al 2020).
Having a good social network can boost wellbeing (Maryatt and Martin 2010; NHS Digital 2018) and moderate the impacts of poverty (Institute of Education) and this has an impact on the home learning environment: one study showed, for example, that mothers with more extensive social networks had more positive interactions with their infants than mothers with less extensive networks (Gutman et al 2009). Similarly, a series of studies in the US showed that parents who had a strong marital relationship or other forms of social support were less likely to be affected by the stress of economic hardship, which had a positive impact on their children (Katz et al 2007). Local community-based programmes can play an important role in bringing people together and helping them to create a good social network (Public Health England). Programmes that incorporate peer-to-peer support often lead to positive benefits: when parents are amongst peers with common experiences, this can create increased trust that can boost engagement and accelerate the process of change (Smith et al 2020).

**Recommendations**

**Recommendations for government**

- Create a cross-government strategy for improving outcomes for all children, focusing on the earliest years of a child’s life. The strategy should include evidence-based commitments to closing the literacy gap between disadvantaged children and their peers.

- Continue to fund the national Hungry Little Minds campaign, which has helped to raise awareness of the home learning environment and supported low-income parents to develop skills and confidence to support their children’s language development.

- Continue to support locally delivered place-based programmes like the Hungry Little Minds local projects that bring together local organisations and services to improve outcomes for disadvantaged families. Place-based programmes can be effective in engaging disadvantaged families with the home learning environment, by tailoring activities to specific groups, working in partnerships to distribute resources to those who need them the most, addressing some of the barriers to carrying out activities in the home, and working together to meet parents’ needs in a more joined-up way. Locally delivered programmes can also help bring parents together and improve personal support networks, thereby impacting on parental wellbeing.

- Ensure all families have digital access to support children’s learning by expanding the laptop scheme. As stated in this review, many families living in poverty don’t have the right kind of devices to support their children’s learning and development, such as touchscreen tablets and laptops, and are less likely to have access to reliable and fast internet connection. Although the government has been providing free laptops and tablets to children who receive support from a social worker, and to care
leavers, many children without digital access won’t be eligible, and will miss out on this support.

- Ensure the early years’ workforce has access to quality-assured training to develop skills to support parents with the basics of early language. A study commissioned by the DfE, which looked at what early years settings could do better to support parents, showed that a third of early years practitioners felt they needed more help and information in engaging parents in early home learning (Hunt et al 2010). Other research has found that a lack of practitioner confidence and skills to work effectively with parents is a barrier to engagement (Roberts 2009). Supporting practitioners to engage effectively with parents around the home learning environment is important, particularly when many early years practitioners are trained to work with children rather than parents. Evidence suggests that having skilled and supported staff building relationships with parents is critical for success (Moullin et al). Potential actions in this area might involve ensuring that early education courses include modules on the home learning environment.

- Commission research on what works in supporting parents with home learning environment activities in early years settings. The Education Select Committee found that there was a lack of evidence on what type of interventions can support parents and families in creating a positive home learning environment (Education Select Committee 2019). Further research in this area would be beneficial in helping practitioners to support parents effectively.

- Create a forum for early years practitioners to share best practice examples in supporting parents effectively. As above, this would be helpful in improving practitioners’ knowledge and confidence in supporting parents to create a positive home learning environment.

- Encourage health visitors and midwives to provide information to parents on home learning environment activities. This would be beneficial in reaching disadvantaged parents who may not be in contact with education and childcare services, and would also help to create a more joined-up and consistent message on the importance of the home learning environment across multiple sectors.

Recommendations for practitioners

- Support parents to talk to babies from birth onwards. Evidence suggests that acting early is key to boosting young children’s language skills and tackling entrenched underachievement in reading (Finnegan 2015). Programmes should start early, before children enter pre-school and before children are two years old (Law et al 2017).

- Focus on parents’ wellbeing in home learning environment programmes. Evidence suggests that good wellbeing can help parents create a good home learning
environment. There are a number of ways in which programmes can focus on parents’ wellbeing, including:

- Bringing parents together through group sessions or peer support/parent champion models. Evidence suggests that programmes can be effective when they incorporate a peer support model, in which people share knowledge, experience and practical help (Nesta and National Voices 2015). Positive social support is strongly associated with better parental mental health and better parenting (Moore and McDonald 2017).

- Developing confidence and self-esteem by focusing on parents’ existing skills and strengths and highlighting their achievements within the home learning environment.

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