



Office for
Statistics Regulation

Systemic Review Programme

Children and Young People Statistics in the pandemic Systemic Review

July 2021

Executive Summary

This report forms part of OSR's ongoing [cross cutting review of data and statistics related to children and young people](#).

We looked at a selection of the key published data available on children and young people during the COVID-19 pandemic, in order to explore the representation of children and young people in official statistics since March 2020. We sought to understand how visible children and young people have been in key statistics, if they have been given a voice, and if the experiences of the most vulnerable have been collected and analysed separately.

We found that a number of the key statistical outputs released during COVID-19 have made children and young people visible, including data on testing, infections and mental health. There are also good examples of separate analysis being conducted for children and young people in specific educational settings. However, in some cases, small sample sizes inhibit the ability for data to be broken down into detailed age categories or by demographic characteristics.

In some of the new statistical outputs produced during the pandemic, efforts have been made to separately identify the most vulnerable children in the data. Producers have also been transparent about the limitations in recording vulnerable groups where these exist.

In some instances, however, we found that vulnerable children can be excluded from official statistics, for example, if surveys are sampled on a household basis (hence excluding those in care) and where survey enrolment has to be completed online (potentially excluding those without consistent access to the internet).

A notable gap in the official statistics produced during COVID-19 is the lack of data on social outcomes that give a voice to children themselves. We found that much of the data that did give children a voice came from non-official sources, outside of official statistics. Organisations outside of government including charities and think tanks have often come up with creative ways to encourage young respondents to express their thoughts and feelings. They have also considered alternative methods of responding for children without access to electronic devices or the internet.

We will continue to work with users and producers to explore the levers and barriers to driving improvements in official statistics on children and young people that meet the needs of users. We aim to publish further findings later in 2021.

Introduction

As the UK's independent statistics regulator, we work to ensure that official statistics inform the public about social and economic matters and assist in the development and evaluation of public policy.

This means that we advocate for data that upholds public confidence in government decisions and supports transparency. Now more than ever, the existence of good quality and trustworthy data is vital as statistics continue to play an important and extremely visible role in all our lives.

At the Office for Statistics Regulation, we are conducting a cross cutting [review of how well official statistics reflect children and young people](#). Our work to date has identified three key lenses ('3Vs') which can support statistics producers to better meet user needs:

- **Visibility** - Whether children and young people are included in data collections and analyses relevant to them to enable informed decision making.
- **Vulnerability** - Whether the experiences of children and young people who are vulnerable to poorer outcomes are collected and analysed separately.
- **Voice** – Whether statistics reflect the views of children and young people and can be used by them.

Using COVID-19 as a case study

As part of our wider review, we have used the COVID-19 pandemic as a case study to explore how our '3Vs' approach can assist in understanding the extent to which the statistics system has been alert to the unique circumstances of young people during the pandemic. Given the universal impact of the pandemic, we felt it provided a pertinent opportunity to highlight the importance of considering children and young people's needs and voice during the design, collection, analysis and dissemination of statistics.

A spread of new outputs have been produced since the start of the pandemic in March 2020, ranging across areas from health to education, lifestyle and wellbeing.

We have looked at a selection of the key published data available on children and young people during the COVID-19 pandemic. This report is not an exhaustive account of all the published, and unpublished, data that has existed to assist in the development and evaluation of public policy during COVID-19. Instead, it looks at a selection of the new statistical outputs through our '3Vs' lenses, in order to explore the representation of children and young people in official statistics during the pandemic. We have also sought to identify any common themes that emerged in terms of gaps or limitations within the data we reviewed.

Our findings - Visibility

Children and young people are visible in key new outputs relating to the pandemic

A number of the key statistical outputs released during COVID-19 have made children and young people visible. The Office for National Statistics' (ONS) COVID-19 Infection Survey includes children as young as 2-year olds and all ages are also covered by the various sources of administrative data that exists on hospitalisations, testing and deaths.

There are also good examples of separate analysis being conducted for children and young people in specific educational settings. The ONS's School's Infection Survey and Student Impacts Survey both acknowledge the unique circumstances of these groups, and endeavour to provide separate analysis in light of this.

NHS Digital and Department for Health and Social Care (DHSC) also commissioned a "Mental Health of Children and Young People Survey" in 2020 to understand the mental health impacts on children during the pandemic. This study was conducted by the ONS and NatCen Social Research and provides population level estimates of the pandemic's effects on children and young people in England.

Age breakdowns are provided, but they can sometimes have a broad range

In the ONS's COVID Infection Survey (CIS), a degree of granularity is given in the data, with three age category breakdowns made across the 2-24 age range. However, some of these age categories can be broad. For example, one of the age categories in the data is 'year 12 - age 24'. This could encompass young people with extremely varied circumstances; including high school pupils, university students and individuals no longer in education.

In the ONS's Opinions and Lifestyles Survey (OPN), 'young people' in the headline bulletins and underlying data tables refers to those between the ages of 16 and 29. The relatively small sample size for young people in this survey inhibits the ability for a more granular breakdown.

In many cases more granular age breakdowns would enhance the value of statistics; providing a better understanding of the impact of the pandemic on children and young people. We consider that producers should be alert to the usefulness of age category breakdowns in their data and endeavour to understand whether or not they are serving the needs of their users. Where small sample sizes limit the ability of the data to be broken down further, producers should ensure that this is made clear in statistical bulletins.

Small sample sizes in surveys can inhibit the granularity of analysis

As well as limiting the capacity of data to be broken down by age, small sample sizes can also inhibit more granular breakdowns by other demographic characteristics. For example, we found that small sample sizes in a number of the official statistics we

looked at limited the ability for any meaningful breakdowns by factors such as sex, ethnicity, economic disadvantage or LGBTQ status.

Small sample sizes have also impacted the availability of reliable data on the impact of the pandemic on students. The ONS's Student Insights Survey had extremely low response rates, with the [most recent iteration](#) receiving a response rate of just 1.1% (1110 responses). In addition, [earlier releases of the survey](#) identified that a large proportion of the respondents were older than 30, which is not what most people would expect when they think of a 'student'. Although this caveat is included towards the end of the bulletin, there is a risk that people could be misled by the data.

Our findings - Vulnerability

There are some examples of statistics on the most vulnerable children

Some of the new statistics outputs produced during the pandemic have made efforts to separately identify the most vulnerable children in their data. NHS Digital's Mental Health for Children and Young People Survey included breakdowns by whether a child was unlikely to have a mental disorder, possibly had a mental health disorder or probably had a mental disorder. This allows for a degree of analysis of outcomes for more vulnerable groups of children.

The Department for Education's statistics on school attendance in England also included some vulnerable groups. In a [rapid review of these statistics](#), which we conducted last year, we commended the treatment of vulnerable children in the data. Since our review, statistics on the attendance of children eligible for free school meals (FSM) and the attendance of students at further education colleges have been included. There are also breakdowns for pupils with an Education, Health and Care Plan (EHCP) and those with a social worker.

The limitations in recording vulnerable groups are acknowledged

In both of these examples producers also made efforts to highlight the limitations associated with reporting on vulnerable groups.

In the NHS Digital Mental Health Survey, there is a good degree of transparency regarding the limitations associated with the higher non-response rate identified amongst children and young people who were at a greater risk of mental disorders. A non-response adjustment was introduced to account for this, but the report still acknowledges that the estimates of mental disorders given may be an underrepresentation of the actual rates.

Our rapid review of Department for Education's statistics found their bulletin to be transparent around the possible undercounting of vulnerable children. More detail has since been added on the limitations of counting children with a social worker, who are likely to be overestimated in the attendance figures.

Official statistics sometimes risk excluding the most vulnerable

A number of official statistics surveys are sampled on a household basis, which means they exclude children in care, or those not living in private households. This risks excluding children who are at higher risk of being vulnerable from the statistics.

The ONS Schools Infection Survey excludes special schools, pupil referral units and further education colleges due to the purpose of the study and the potential difficulties in administering it in these institutions. However, these are institutions where vulnerable children and young people are likely to be overrepresented. In addition to this, enrolment for both the pupil and parent surveys was only available online. Whilst email is often the main method of schools communicating with parents, this approach risks excluding vulnerable children who do not have full access to digital technologies outside of the school environment.

An October [2020 research report by the Department for Education](#) identified that there have been substantial gaps in the evidence base for how experiences of remote education have varied for children and young people with particular characteristics including sex, ethnicity, LGBT and economic or social disadvantage.

Since then, research commissioned by the Department for Education has provided some initial analysis of lost learning by pupil characteristics (such as eligibility for free school meals, and pupil ethnicity). By comparing results achieved in assessments by pupils in the first half of the 2020/21 autumn term to pupils in previous years, the research was able to provide an estimate of the level of learning loss. More recent results have also covered assessments carried out in the second half of the autumn term in 2020/21, in order to provide an initial indication of whether pupils had started to make up for the 'lost learning' identified in the first report. This research was based on commercially available assessments, rather than statutory ones, and will not have been completed by all schools.

Our findings - Voice

Where children are given a voice, this has largely been through organisations outside of official statistics

A notable gap in the official statistics produced during COVID-19 is the lack of data on social outcomes that give a voice to children themselves. The ONS's Opinions and Lifestyle survey for example, notably only includes young people aged 16 and over. Therefore, questions on things like 'worries about return to school and college' and experiences of home-schooling have relied on the perspectives of adults answering on behalf of dependent children, rather than being answered by children themselves.

However, outside of official statistics, there have been a number of examples of organisations surveying children and young people across a much broader age range. These surveys have endeavoured to understand how children have been impacted by the pandemic, by asking questions about their worries during the pandemic, their experience of remote learning, mental health and social interaction.

Various publications, which are not classed as official statistics, referenced in Annex A of this report, have used creative and original methods to help young respondents express their thoughts and feelings, such as encouraging children to respond with

drawings and pictures and varying the wording of questions to account for differences between age groups.

There are also examples of where organisations have considered alternative methods for responding for children without access to electronic devices or the internet. Some non-official statistics have also included coverage of those living in foster care, children's homes, hospitals, young carers and gypsy and traveller children, as well as those with special needs or those identifying as LGBTQ+. We did not find evidence of these kinds of breakdowns within the official statistics we looked at.

Non-official sources of data and research have an important role to play in contributing to the wider evidence base on children and young people in the pandemic. In some cases, they provide important insight on areas that would not be appropriate for official statistics to replicate. However official statistics producers should consider whether these data highlight weaknesses in existing official statistics that should be addressed.

Summary

We found a lot to commend in the visibility of children and young people in the key statistical outputs we looked at. Clear attempts have been made to understand the impact of the pandemic on children and young people, separately to that of adults.

However, we found that analysis of outcomes for vulnerable children was lacking, and much of the data that did give children a voice came from non-official sources. We believe this to be broadly reflective of the wider landscape of statistics on children and young people.

We also found that there are some specific barriers to meeting user needs for statistics on children and young people, such as the impact of sample sizes on granularity.

We have highlighted where improvements can be made, for example, around the surveying of children and young people's voice directly in official sources.

Our next steps

We will continue to work with users and producers of official statistics to further develop our '3 Vs' lenses. In particular, we will outline our expectations around statistics on children and young people and explore the levers and barriers to driving improvements in official statistics to meet the needs of users. We aim to publish further findings later in 2021.

Annex: Some of the statistics we looked at

This annex includes a selection of the published statistics that we looked at during this review. It is not an exhaustive account of all the published, and unpublished, data that has existed to assist in the development and evaluation of public policy during COVID-19.

Statistics and data related to lockdowns

Throughout the pandemic, governments across the UK have frequently made the decision to impose 'lockdown' restrictions on society, including on retail, travel and socialising. Data has been used to inform these decisions, including data on the prevalence of the COVID-19 virus amongst the UK population, hospitalisation figures, death rates and data on social and economic impacts.

[COVID Infection Survey \(ONS\)](#). The COVID-19 Infection Survey (CIS) produced by the ONS reports on the percentage of the population testing positive for COVID-19 and whether they have symptoms or not. The CIS surveys approximately 150,000 people across the UK who are tested every fortnight. The survey covers all age categories, including children as young as 2 years old with parental permission.

[COVID Opinions and Lifestyle Survey \(ONS\)](#). ONS's COVID Opinions and Lifestyle Survey (OPN) is based on a sample of 6,025 adults (although varying response rates mean the actual number is often closer to 4000) aged 16 years and over in Great Britain. It asks various questions on attitudes to lockdown, wellbeing and compliance with lockdown rules. Questions are regularly adapted to account for the changing circumstances of the pandemic.

The ONS produced one ad hoc release in 2020 - '[Coronavirus and the social impacts on young people in Great Britain](#)' - which provided an in-depth analysis of the results of the OPN for 16-29 year olds between April and May of 2020. The release looked into the impacts of the pandemic across areas such as work, education, finances and well-being. There has also been a specific release on [Coronavirus and homeschooling](#).

[Mental Health of Children and Young People in England 2020 \(NHS Digital\)](#). In 2020, NHS England surveyed trends in child mental health in order to describe the circumstances of 5- to 22-year-olds and their families during the coronavirus pandemic. The 2020 survey followed up on face-to-face interviews of 7885 children conducted in 2017. The 2020 sample covered 3570 of the original respondents. Results from the study were published in October 2020, within three months of completing data collection.

[Workless Households \(ONS\)](#). The economic impact of lockdown, and in particular the impact on unemployment, has been widely reported on throughout the pandemic. Most of the official household surveys and statistics on income-based poverty are produced with a significant time lag, which means they cannot yet provide any analysis of the impact of the pandemic. However, ONS does produce quarterly statistics on 'working and workless households' with only a 3-month time lag.

The statistics describe the economic status of households in the UK and the people living in them, where at least one person is aged 16 to 64 years, using data taken from

the Labour Force Survey. As part of this, ONS release data tables on the number and percentage of children living in workless, working and mixed households, where 'children' are defined as being under 16 years old. There is little official data on the economic impact of the pandemic on children beyond this.

Administrative data on hospital admissions and deaths

As part of its suite of statistics on hospital activity related to COVID-19, NHS England produces an analysis of [hospital admissions by age group](#) for England on a monthly basis. These provide breakdowns by age categories including 0-5, 6-17 and 18-54.

NHS England also produce [administrative data on daily and weekly deaths](#) from COVID-19 in hospitals in England (not including deaths that happen in the community), which include a 0-19 age bracket.

Official administrative deaths data with relevant age breakdowns are also available for [Scotland](#), [Wales](#) and [Northern Ireland](#).

ONS also release provisional counts of the [number of deaths registered in England and Wales, by age category](#) on a weekly basis. The age categories are given at 5-year breakdowns.

Statistics and data related to school closures

On a number of occasions over the last 15 months, governments in the UK have taken the decision to close schools and other early years settings to most children in an attempt to limit the spread of coronavirus. Timely statistics were needed to understand the impact of these decisions.

[COVID-19 Schools Infection Survey \(ONS\)](#). The COVID-19 Schools Infection Survey, run by ONS, aims to investigate the prevalence of coronavirus infection and the presence of antibodies to COVID-19 among pupils and staff in sampled primary and secondary schools in England, measured at half-termly intervals during the school year.

The NHS also produce [Test & Trace Weekly Statistics](#) using administrative data. They include breakdowns by 'phase of education', which provides an indication of the number of positive tests reported in different educational settings.

[Attendance in education and early years settings during the coronavirus \(COVID-19\) outbreak \(DfE\)](#). The Department for Education has published data on attendance in education and early years settings in England over the course of the pandemic. We conducted a '[rapid review](#)' of these statistics in 2020 to assess their compliance with the Code of Practice for Statistics. In this review, we commended the rapid development and publication of these data to support understanding of the impact of COVID-19 on school attendance in England.

Similar data are also available in [Wales](#), [Scotland](#) and [Northern Ireland](#).

Statistics and data related to university closures

During the COVID-19 pandemic, significant restrictions have been put on higher education institutions. Face-to-face teaching has been cancelled for many courses where it is not deemed to be essential, students have been asked not to return to

university campuses after holidays and university facilities have seen various extents of long-term closures.

[Student COVID-19 Insights Survey \(ONS\)](#). In an attempt to understand the attitudes and behaviours of the UK's student population during the pandemic, the ONS launched the Student COVID-19 Insights Survey and have published the results of this in a number of iterations of the 'Coronavirus and higher education students' publication.

[Coronavirus \(COVID-19\) Reporting in Higher Education Providers \(DfE\)](#). This ad hoc publication from the Department for Education provides a summary of confirmed COVID-19 cases known to higher education providers (HEPs). It reports on weekly breakdowns of confirmed cases along with numbers of students known to be self-isolating. The statistics provide tailored insight that it would not be possible to obtain from the [weekly testing figures](#) produced by NHS England.

There were 237 HEPs in scope of the data collection, out of 420 registered with the Office for Students – primarily due to the exclusion of further education colleges from the data. Response rates have generally been high – with most recent figures putting them between 76% and 78%.

Although the publication covers only HEPs in England, similar data is produced by the [Welsh Government for HEPs in Wales](#).

Statistics and data related to learning loss

In light of the school closures that have taken place throughout the pandemic, most children and young people have had to make the difficult transition to remote-learning. Governments have also taken the decision to cancel end of year examinations for young people, in light of the lost learning they have suffered over the pandemic and the difficulties in running the exams.

['Understanding progress in the 2020/21 academic year' \(DfE\)](#). The Department for Education commissioned research by the Education Policy Institute and Renaissance Learning to understand the extent of lost learning during the pandemic. The first release in January 2021, compared results achieved by pupils in commercially available (non-statutory) assessments in the first half of the 2020/21 autumn term to pupils in previous years, in order to provide an estimate of the level of learning loss.

An [additional report published in June 2021](#), linked the findings with data held by DfE in the National Pupil Database in order to provide analysis by pupil characteristics (such as eligibility for free school meals, and pupil ethnicity). The new analysis also covered assessments carried out in the second half of the autumn term in 2020/21, to provide an initial indication of whether pupils had started to make up for the 'lost learning' identified in the first report.

Non-official statistics

In addition to the official statistics and data on children and young people produced or commissioned by government departments, there are also a wealth of non-official data produced by research bodies, academic institutions and think tanks over the pandemic.

This [resource](#) published by the Royal College of Paediatrics and Child Health provides a list of the wide range of data sources on the impact of the pandemic on children and young people. This list includes examples of a number of organisations, which are predominantly outside of government, who have produced detailed, timely and robust data on the social impacts of COVID-19, lockdowns and school closures on children and young people:

[‘Coronavirus and me’ – Children’s Commissioner for Wales.](#) This consultation captured 23, 700 children in Wales between the ages of 3 and 18. The report describes its purpose as being to ‘make sure that children and young people experience their right under the UNCRC to express their view and participate in decisions and affect their lives’.

The survey asked children and young people – amongst other things - about their worries during the pandemic, their experience of remote learning and what has impacted them most. Alternative methods for responding were offered for children without access to electronic devices or the internet and children aged 3-7 were encouraged to respond with drawings and pictures, to increase the accessibility of the survey for younger age groups.

The report also included children living in foster care, children’s homes, hospitals, young carers and gypsy and traveller children.

[‘How are you doing?’ – Children’s Parliament \(Scotland\).](#) This report, based on a survey carried out by the Children’s Parliament (and supported by Public Health Scotland and the Scottish Government) assessed social outcomes for 8-14 year-olds in Scotland, asking them about learning at home, family and peer relationships, health and wellbeing, and their general worries.

The survey was carefully designed in order to make it accessible for younger age groups. It is made up of 31 statements with a 5-point scale to respond – from strongly agree to strongly disagree. There are final questions where children can identify what they are worried about and what helps them feel good.

This report compares results from different stages of lockdown - combining April, May and June responses, and comparing these with a fourth survey conducted in September/early October. Response numbers ranged from 2000 to 4000.

["My Health, Our Future - At home" \(healthwatch Suffolk\).](#) This study of approximately 3000 children aged 6-25 explores the mental health and emotional wellbeing of young people (as well as their parents/ guardians and education staff) during the coronavirus pandemic.

The wording of questions was varied to account for differences between age groups. The sample also included children with special needs or who identified as LGBTQ+, as well as encompassing a variety of ethnic backgrounds and mental health difficulties. The survey asked questions about mental health, social interaction and remote learning from the perspective of children themselves.