"ALLOWED TO CARE": A NESTED CASE STUDY EXPLORING POSITIVE EXPERIENCES

OF PRIMARY AGED CHILDREN DURING THE COVID-19 PANDEMIC

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VOLUME ONE OF TWO

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ABSTRACT

The COVID-19 pandemic has had considerable and pervasive impact on children, and it is undeniable that many have experienced significant negative effects. Several long-term school closures resulted in children engaging with learning and teaching online or being among the small minority of children who remained able to attend school, due to having a 'key worker' parent or being classed as 'vulnerable'.

Review of the rapidly extending corpus of published research literature consistently indicates some cases in which children have been judged to have experienced relatively positive outcomes since the COVID-19 pandemic. Existing research in this area depends predominantly on surveys, with more emphasis on the negative impact of the pandemic.

My own nested case study aims to 'sift for gold' during this difficult time to find positive exceptions and learn what can be taken forward to inform provisions for these and similar children. Through semi-structured interviews, this research explores the perceptions of four nested cases, each comprising a triad of a child, one of their parents and a member of school staff, about the child's experiences during the pandemic and what was valued and beneficial within their educational and home experiences. Use of Reflexive Thematic Analysis (RTA) supports a deep understanding of both shared perspectives and individual differences among participants.

Key themes were identified across the case studies relating to the children's progress: improved wellbeing; self-development/personal growth; development of positive relationships; and greater engagement and progress with learning. Further themes were abstracted, relating to mechanisms that contributed to the recognised progress: a different school environment during

the closures; being at home during the closures; quality time, support, and attention from adults; structure, consistency, safety, and boundaries; development of positive relationships; and hobbies and enjoyable activities.

Key implications are therefore: creating a sense of safety through structure, consistency, and boundaries; prioritising spending quality time with children, enjoying activities and nurturing bonds; strengthening the curriculum's focus on wellbeing and social connections, while promoting greater flexibility in school practices, providing higher levels of adult support when needed, and nurturing parent-school relationships. EPs are well placed to support the implementation of approaches that align with these implications.

DEDICATION

To all the children, teachers and parents who took part in the study and shared their success

stories with me.

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Word/term	Acronym	Meaning (if needed)
Education, Health and Care Plan	EHCP	"EHCPs are for children and young people aged up to 25 who need more support than is available through special educational needs support. EHC plans identify educational, health and social needs and set out the additional support to meet those needs" (GOV.UK, 2023).
Autism Spectrum Disorder	ASD	"A Neurological and developmental disorder that affects how people interact with others, communicate, learn, and behave. People with ASD often have difficulty with communication and interaction with other people, and restricted interests and repetitive behaviours" (National Institute of Mental Health, 2023a).
Attention Deficit Hyperactivity Disorder	ADHD	"A condition that affects people's behaviour. People with ADHD can seem restless, may have trouble concentrating and may act on impulse" (NHS, 2023).
'Vulnerable children' who were allowed to	N/A	During the pandemic, the government classed 'vulnerable children and young people' as those who at least one of the following applies:

attend school during the school closures.		• Social care involvement. • An EHCP, • At risk of NEET (Not in Education, Employment or Training), • Living in temporary accommodation, • A young carer, • Care leaver, • "Challenging family circumstances such as drug and alcohol misuse, parental offending, adult mental health issues and domestic abuse" (Department for Education, 2022).
Post-Traumatic Stress Disorder	PTSD	"A disorder that develops in some people who have experienced a shocking, scary, or dangerous event" (National Institute of Mental health, 2023b).
Acceptance and Commitment Therapy	ACT	"An empirically-based contextual CBT that combines acceptance and mindfulness-based strategies to reduce the influence of fear and avoidance of difficult psychological experiences (e.g., thoughts, feelings, images, memories). Alongside this, ACT helps clients identify deeply held personal values and to use these to

		guide meaningful behaviour change" (British Association for Behavioural and Cognitive Psychotherapies, 2023).
Socio-economic status	SES	"Socioeconomic status is the social standing or class of an individual or group. It is often measured as a combination of education, income and occupation. Examinations of socioeconomic status often reveal inequities in access to resources, plus issues related to privilege, power and control" (American Psychological Association, 2022).
Adverse Childhood Experiences	ACEs	"Three specific kinds of adversity children face in the home environment—various forms of physical and emotional abuse, neglect, and household dysfunction. There is a powerful, persistent correlation between the more ACEs experienced and the greater the chance of poor outcomes later in life" (Center on the Developing Child, 2023).

1. CHAPTER ONE: INTRODUCTION

This chapter introduces the research project by presenting background and contextual information relating to the experiences of primary-aged children during the COVID-19 pandemic. A rationale for the remit and design of the current study is then outlined before providing an overview of the remaining chapters.

1.1 Contextual information

1.1.2 The COVID-19 pandemic

"Coronavirus disease (COVID-19) is an infectious disease caused by the SARS-CoV-2 virus" (World Health Organisation, 2022). The first cases of COVID-19 were reported in China in December 2019 (National Institutes of Health, 2022) and the first cases were reported in England in February 2020 (Government Digital Service, 2022). In March 2020, COVID-19 was categorised as a pandemic (World Health Organization, 2020) and was depicted as a "crisis like no other in modern times" (Sherr et al., 2021, p. 1). It has had a global impact, resulting in 98% of children being confined to the house during lockdowns and school closures in 194 countries (Sherr et al., 2020), and caused suffering for many, including illness, hospitalisation, social isolation, the loss of loved ones, loss of employment, financial hardship, and postponement of health care (Jalongo, 2021).

1.1.3 Previous pandemics, epidemics, and other crises

Although the COVID-19 pandemic has been the first of its kind in most people's lifetimes, there have been many previous global crises which have had detrimental effects on children and young people's (CYP) wellbeing and development (Sherr et al., 2021). The last major crisis in the UK that

significantly affected children's lives was the second World War (Hill, 2021; Longfield, 2020; Sample, 2020).

1.1.4 Impact of the COVID-19 pandemic on children's experiences

School closures in England resulted in children engaging with learning online or being among the small minority of children who remained able to attend school, due to having a 'key worker' parent or being classed as 'vulnerable' (Julius & Sims, 2020). Children were found to have lost roughly a third of the learning time in which they would normally be engaging during a school year (Major et al., 2021).

The pandemic was judged a highly challenging extended time for teachers, children, and parents (Howard et al., 2021). Within mainstream media and government documents, dominant discourses focus on the immediate and projected longer-term costs and damaging effects of the pandemic for children. For example, the Guardian newspaper published headlines such as "Pupils had futures blighted during the pandemic" (Hinsliff, 2022) and "Pandemic has delayed social skills of young children" (Hall, 2022). Government documents stated that "the pandemic has undoubtedly had a significant detrimental effect on many students' learning" (Leahy et al., 2021, p. 9), and that it had caused the most disruption to children's education since the Second World War (Timmins, 2021).

However, children's experiences of education were found to have varied widely during the pandemic, with no 'typical' experience (Soneson, 2022). While a large proportion of children were found to have struggled with the changes that the pandemic brought, with costs to their physical

and emotional wellbeing, social skills and friendships, and engagement and progress with learning, some were found to have thrived during this unusual period. For example, through conducting a literature review, it was indicated that for children at home, the reduction in daily demands and stimulation resulted in some cases reporting, or being described as feeling less tired, overwhelmed, stressed and anxious (Asbury & Toseeb, 2022; Council for Disabled Children, 2021; Greenway & Eaton-Thomas, 2020), with the time at home having led to more quality family time and stronger parent-child bonds (Kim et al., 2021a). Furthermore, for some, the online communication led to the development of new connections and more regular communication with loved ones (Asbury et al., 2021; Council for Disabled Children, 2021). In terms of learning, some children demonstrated improved engagement (Asbury et al., 2021) and progress (Greenway & Eaton-Thomas, 2020) and found learning more enjoyable (Sivers et al., 2020a).

This diversity, or multifinality of outcomes illustrates the complexities of understanding the range of influences on children, and that even when children appear very alike, and to have had similar experiences, life outcomes can be very different (Lunkenheimer, 2018). Conversely, a highly heterogeneous sample of children, exposed to widely divergent environmental influences for differing durations at differing times in their lives can experience very similar outcomes (equifinality). Systems theories highlight the complexities of circumstances, explaining how development is "a complex system of nested dynamics" (Thelen & Smith, 1998). More specifically, the Process-Person-Context-Time (PPCT) or bioecological model of human development model (Bronfenbrenner & Morris, 1998) provides a useful conceptual framework for integrating this complex interplay between children's individual characteristics, their distal and proximal

processes and interactions with their environment, and their outcomes, considering the direct and indirect effects of the COVID-19 pandemic. The current study therefore uses the PPCT model as an integrating conceptual framework for the design of the enquiry and interpretation of findings.

1.1.5 Impact of the COVID-19 pandemic on educational psychology practice

In my role as a Trainee Educational Psychologist (TEP) throughout the pandemic, I have been on supervised practice placement in Oakbury City Council (a pseudonym). The pandemic affected the practice of EPs, who had to adapt to supporting schools remotely and in different ways. From my own experience, although this brought challenges and barriers to communicating and building connections, EPs were able to develop flexibility and innovative skills and practice by utilising software such as Microsoft Teams and PowerPoint to adapt assessments, interventions, and consultations. Additionally, EPs drew on psychological knowledge to support school staff emotionally, such as sharing the "5 Key Principles of Recovery", developed by Nottingham Educational Psychology Service (Ruane, 2020), and an Acceptance and Commitment Therapy (ACT) resource for coping with COVID-19: "FACE COVID" (Harris, 2020). Furthermore, new opportunities arose to engage in training, multi-agency working and providing telephone support lines for parents. For example, EPs delivered the 'wellbeing for education return' programme to schools, a government-funded initiative to support school staff to respond to the emotional difficulties that some children faced during the pandemic (Department for Education, 2021a). Within Oakbury City Council, the Special Educational Needs and Disabilities (SEND) services engaged in more multi-disciplinary working, such as co-producing a 'recovery curriculum', a

repository of information and resources to support the mental health of CYP during the reopening of educational settings.

1.2 Research rationale and purpose

1.2.1 Opportunity to 'sift for gold'

The COVID-19 pandemic has had a pervasive impact on children's home and school lives, and it is undeniable that many have experienced significant negative effects. However, research consistently highlights cases in which children have experienced relatively positive outcomes since the COVID-19 pandemic and lessons can therefore be learnt from studying such minority experiences and harnessing this more nuanced understanding to support children in more diverse ways (Council for Disabled Children, 2021). Utilising the opportunity to 'sift for gold' during this unusual period is therefore judged beneficial in highlighting and informing understanding of the factors contributing toward such positive exceptions, and identifying what can be taken forward for such children during COVID-19 and beyond.

More specifically, this research aims to explore the experiences of children who appeared to demonstrate some kind of positive outcome or progress since the COVID-19 pandemic began in March 2020, in comparison to before the pandemic. By highlighting positive outcomes, the deficit model that focusses on how all children have been "damaged or delayed" is challenged, and instead, messages about how learning and development can be experienced in several alternative ways are emphasised (Hill, 2021).

The study's focus compliments the research priorities suggested by O'Connor et al. (2020), who emphasised the need to understand how the pandemic has affected family functioning, educational progress, and emotional wellbeing, factors that influence their outcomes and what alternative future approaches could be harnessed.

1.2.2 Rationale for methodology

Through conducting a literature review, I judged that the majority of research on the effects of the pandemic on children focused on gathering data from large sample sizes via online surveys. While some studies gathered both quantitative and qualitative data, the latter tended to be descriptive with a lack of in-depth understanding as it is not possible to check for meaning or ask for elaboration via surveys. These studies tended to seek population trends and demographic patterns as opposed to seeking a detailed understanding of subjective experiences. For example, two studies used surveys to gather quantitative and qualitative data from 6172 pupils (Popoola & Sivers, 2021) and 1758 pupils (Sivers et al., 2020c), and Asbury and Toseeb (2022) used questionnaires to gather qualitative data from 478 parents/carers of children with SEN.

While these nomothetic methodologies are beneficial in providing a broad picture of children's experiences of the pandemic, they are not able to provide insights into the unique circumstances, or the complex inter-play between facilitating factors (Soneson et al., 2022). In contrast, case study methodology offers more in-depth and meaningful understanding of the phenomenon and can enable participants' accounts to be captured and inform implications for future practice. The rationale for conducting qualitative research on this topic is suggested by O'Connor et al. (2020), and the importance of gathering children's views is recommended by Sherr et al. (2021).

1.2.3 Personal/professional rationale

Throughout my professional experience within educational psychology roles, I have drawn upon person-centred (Rogers, 1951), solution-focussed (De Shazer, 1982), and appreciative enquiry (Cooperrider & Srivastva, 1987) approaches and have seen the value of empowering children and their significant adults by supporting them to consider and build on positive exceptions. In my role as a TEP throughout the pandemic, I have been particularly interested in the common observation that some children thrived during the pandemic, despite the challenging circumstances that everyone was facing. I was therefore keen to explore this phenomenon by hearing these children's experiences and what seemed to be the facilitating mechanisms that could be acted upon and integrated in educational practice to improve their lives beyond the pandemic.

1.3 Structure

The remainder of this volume is structured as follows:

Table 1: Volume 1 Structure.	
Chapter/s	**Content**
2 and 3	Explore relevant literature on the impact of the COVID-19 pandemic on children (Chapter 2) and the factors that may have contributed to these experiences (Chapter 3).
4	Outlines the research design and methodology utilised.
5	Presents the findings of each of the four case studies.

| 6 | Provides a discussion of the key trends across the four case studies, before exploring the limitations of the study and its implications for practice. |

2. CHAPTER TWO: LITERATURE REVIEW I – THE COVID-19 PANDEMIC: EFFECTS ON EDUCATION

AND CHILDREN

This chapter outlines research accounts of the response to the COVID-19 pandemic, and how it has affected children's learning, family life, and emotional and physical wellbeing. Relevant literature was identified through academic databases including 'EBSCO' and 'Web of Science', Findit@bham, and Google Scholar, and snowballing[1]. The searches were conducted during my placement at Oakbury City Council, between October 2020 and June 2022. The write up of the study was unfortunately delayed due to a period of ill health and took place over a prolonged period between May 2022 and June 2023. See Appendix A for a more detailed research timeline. In reviewing the findings and original contribution to knowledge, I have referred to more contemporary literature in the discussion.

Reviewing literature relating to the COVID-19 pandemic and its impact on children is atypical and in relative infancy, due to the recency of the pandemic. Therefore, the majority of sources were published from 2020 onwards, and some, only available as 'pre-prints' which were yet to be peer-reviewed. Relevant sources were multidisciplinary and included a range of sources, comprising primary research studies, literature reviews, and documents from respected organisations, such as UNICEF (United Nations Children's Fund) and the British Psychological Society. While a handful of the studies identified had used qualitative research or mixed method designs, most had harnessed a quantitative design. It is important to acknowledge a limitation inherent in

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[1] Snowballing is when "the reference list (backward snowballing - BSB) and citations (forward snowballing - FSB) of relevant papers are reviewed to identify new papers" (Badampudi et al., 2015)

quantitative research, which relates to the depth of understanding of people's lived experiences. For example, many studies used questionnaires and surveys, which rarely allow participants to provide explanations or context for their responses. In line with my interpretivist research philosophy (Thomas, 2017) and reflexive method of analysis (Braun & Clarke, 2022), I continuously reflected on, and questioned my decision-making, whilst aiming to provide a balanced and relevant rationale for the current research study.

2.1 Context: Education and family life during the COVID-19 pandemic – the response and how it was experienced

This section briefly describes what happened during the COVID-19 pandemic on a global scale, including how education and family life was experienced by children, their families and school staff. Subsequently, this section focuses specifically on the experiences of the pandemic within England, in terms of the guidelines and policies the government put in place that affected education and family life.

2.1.1 International context: Education and family life during the pandemic

The COVID-19 pandemic has undoubtedly created an unprecedented and disastrous impact, on a global scale, with some countries suffering more than others. Between March 2020 and February 2021, at the height of the pandemic, schools were closed for "an average of 95 instruction days globally which represents approximately half the time intended for classroom instruction" (UNICEF, 2021a, p. 3). This significantly affected around 1.6 billion learners in over 190 countries at the peak of the pandemic, which is 94% of the world's students (UNESCO, 2020). In order to

continue providing education to children during the school closures, many schools swiftly introduced remote learning, mainly via online digital platforms (Stringer & Keys, 2021).

Many challenges with online learning were experienced across the world. Teachers struggled to quickly access and learn to use digital tools and adapt lessons to work effectively in a remote format and for a range of students' needs and found that the physical distance between them and the children created a barrier to communication (Rasmitadila, 2020; Trust & Whalen, 2020). Furthermore, many children did not have access to a computer, high-speed reliable internet access, or a quiet place to study (Ikeda, 2020), which is more likely within poorer households (Horrigan, 2015) or 'socio-economically disadvantaged'[2] schools and poorer countries (Ikeda, 2020, p. 5), indicating significant inequalities across and within countries. Pressure on parents to motivate their children to learn, and manage the demands of home and work was also apparent, with issues such as lack of time, structure, and professional knowledge being reported (Degli Espinosa et al., 2020; Del Boca et al., 2020; Dong et al., 2020).

2.1.2 Education in England during the pandemic

The COVID-19 pandemic involved lockdown measures and restrictions that were enforced by law (Brown & Kirk-Wade, 2021), including ordering people to "stay at home". See Figure 1 for more detail regarding lockdown measures during the COVID-19 pandemic, presented as a timeline.

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[2] For the purposes of the Organisation for Economic Co-operation and Development (OECD) research, "a socio-economically disadvantaged (advantaged) school is a school whose socio-economic profile (i.e. the average socio-economic status of the students in the school) is in the bottom (top) quarter of the PISA (Programme for International Student Assessment) index of economic, social and cultural status amongst all schools in the relevant country/economy" (OECD, 2020, p. 3).

March: *Prime minister announced 1st lockdown, ordering people to "stay at home" and schools closed.*

June: *Phased re-opening of schools and restrictions eased, including 'rule of six' for outdoor social gatherings, and non-essential shops reopening.*

July: *More restrictions eased-reopening of pubs, restaurants and hairdressers*

Sept: *Schools fully re-opened and new restrictions were introduced, including working from home and the 'rule of six' for indoor and outdoor social gatherings.*

Oct: *A 3 tier system of covid restrictions started*

Nov: *2nd lockdown*

Dec: *2nd lockdown ended and a stricter 4 tier system started*

2020 → MAR APR MAY JUN JUL AUG SEP OCT NOV DEC

Jan: *3rd lockdown and schools closed.*

March: *Primary schools reopened and phased re-opening of secondary schools. Step 1 of UK government's roadmap: 'rule of 6' or 2 households allowed for outdoor gatherings.*

April: *Step 2 of UK government's roadmap-non-essential retail reopened*

May: *Step 3 of roadmap: 30 people allowed to mix outdoors and 'rule of 6' or 2 households allowed for indoor gatherings.*

July: *Most restrictions lifted.*

Dec: *Face masks became compulsory.*

JAN FEB MAR APR MAY JUN JUL AUG SEP OCT NOV DEC

Feb: *No requirement for people with COVID-19 to self-isolate.*

2022 JAN FEB MAR

Figure 1: A timeline to show lockdown measures during the COVID-19 pandemic.

The pandemic resulted in two significant school closure periods, with the majority of children needing to transition swiftly to engaging in their education remotely from home, and teachers being forced to rapidly adapt to a new way of working (Luca et al., 2020). See Figure 2 and Table 2 for the key educational events that took place over the course of the pandemic.
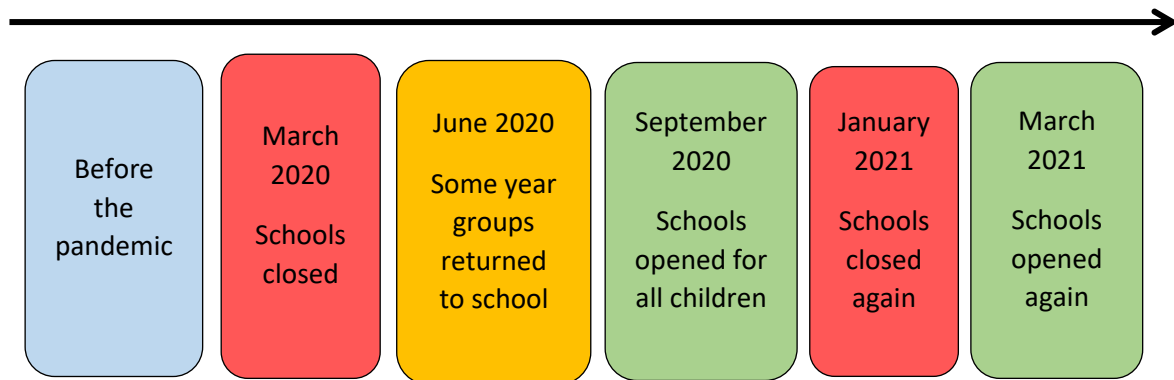
Figure 2: A timeline to show when schools closed and reopened in England during the COVID-19 pandemic, adapted from (Leahy et al., 2021).

2.1.2.1 Range of provision offered during the school closures for children who stayed at home

Some schools provided support to children and their families beyond the expectations outlined in the government guidance, such as food parcels, regularly checking in via phone calls, providing IT equipment, offering bespoke learning resources, and posting or delivering paper resources (Kim et al., 2021a; Longfield, 2020). It was reported that provision improved in the second school closure, in comparison to the first, in terms of the number of lessons per day increasing (Bono et al., 2021; Pensiero et al., 2021), and the strategies and approaches that were reported to improve pupil engagement (Nelson & Sharp, 2020; Ofsted, 2021b). For example, some schools used interactive approaches, such as 'pre-recorded lessons', 'live lessons', or 'online conversations' (Nelson & Sharp, 2020, p. 5).

Table 2: A timeline of key educational events that took place during the COVID-19 pandemic.	
Date	**Key educational events during the COVID-19 pandemic**
March 2020	• All schools closed (Institute for Government, 2021), although, they were asked to continue to provide on-site education for vulnerable children and children whose parents were keyworkers (for example, those working in health, public service, transport and food) (Julius & Sims, 2020). • Vulnerable pupils were classed as "those with an Education, Health and Care Plan (EHCP), a social worker, or identified as vulnerable by the local authority or education provider" (Julius & Sims, 2020, p. 6) . • The number of children physically attending school was low to begin with and increased over time (Department for Education, 2021a). • Although there were no specific government requirements to provide remote education at this time, guidance documents were provided (Ofsted, 2021b), such as 'Remote Education Good Practice' (Department for Education, 2020c).
June 2020	Schools invited some year groups back to school; Nursery, Reception, and Years 1 and 6 (Department for Education, 2020a).
September 2020	• Schools opened for all children (Timmins, 2021).

	• The government issued further guidance documents to support the reopening of schools, such as a 'Temporary Continuity Direction', which aimed to clearly outline that "schools have a legal duty to provide remote education for state-funded, school-age children unable to attend school due to coronavirus" (Department for Education, 2020d). • Further guidance outlined hygiene and cleaning practices, ventilation, self-isolation for any child with COVID-19 symptoms or a positive test, education recovery and pupil wellbeing (Department for Education, 2020e), how children should be in smaller classes (i.e., 15 children) with their desks far apart, and required to stay within their new class (Department for Education, 2020b).
January 2021	• A second lockdown was announced, along with the closure of schools. • Further government guidance was provided, such as 'Review your remote education provision', offering a framework to support schools to "identify strengths and areas for improvement in their remote education provision" (Department for Education, 2021b, p. 3).
March 2021	Schools reopened, while children's school experiences continued to be affected by the pandemic, such as the requirement to adhere to social distancing measures (Sharp & Skipp, 2022).

Others used their digital learning platform to facilitate communication between teachers and pupils, ensuring regular contact with pupils' families via a range of methods of communication (e.g., phone calls, emails, blog posts, social media), and monitoring parental engagement, offering support if parents had not been regularly accessing remote learning (Ofsted, 2021b). Some schools also developed their practice to enhance pupils' independence, aiming to minimise the burden on their parents. They did this by providing training on using the digital learning platforms, and planning tasks that required minimal adult supervision (Ofsted, 2021b).

2.1.2.2 Time spent on learning

Many concerns circulated in the media and within academic reports that the amount of time that children were spending on learning activities decreased during the school closures, in comparison to before the pandemic, having detrimental effects on their long-term learning outcomes (e.g., Shearing, 2022). For the majority of children, schools were closed for 110 days over the calendar year (March 2020 – April 2021), when typically children would be accessing 190 days in a typical period of one year (Major et al., 2021). Once home learning was taken into account, children were found to have lost an average of 61 days of learning time, which is roughly a third of the learning time that they would normally be accessing during a school year (Major et al., 2021).

Andrew et al. (2020b) found that the amount of 'learning time' (defined as "time spent on educational activities") (p. 11), was lower in the first lockdown (4.5 hours per day) compared to before the pandemic (6 hours per day), which is a 25% reduction. Pensiero et al. (2021, p. 8) found that the amount of time that children spent on 'schoolwork' (defined as "the sum of

synchronous and asynchronous online lessons and off-line assigned work") increased between the first school closure (2.3 hours per day) and the second (3.3. hours per day). The researchers claimed that a facilitating factor for this positive outcome was the improved remote learning provision (Pensiero et al., 2021). One reason for the variation in learning time during the two reported school closure periods (4.5 compared to 2.3 hours) may be that the higher number reported for the second closure period included all 'time spent on educational activities', comprising school-led learning, and also parent-led activities that were considered by parents to be 'educational', such as baking and reading.

2.1.2.3 Provision for vulnerable children and children of keyworker parents

There was very little literature reporting what provision was offered by schools for children attending their setting. Julius & Sims' (2020) conducted a national survey of 3054 teachers and senior leaders from 9% of primary schools and 20% of secondary schools in England. They reported that children experienced similar, and often better, provision compared to children offered only remote learning, with the main focus being providing a sense of safety, caring for the children and providing extra-curricular activities. However, conversely, Kim et al. (2021a) conducted interviews with 24 teachers across primary and secondary schools and they discussed how the inequality in provision offered may have been a disadvantage for the children at school, as they were spending less time on "curriculum-related activities" than their peers who were learning from home.

There were a limited number of children with SEND who were able to attend school in-person during the closures (Ashworth et al., 2021a), and for the children with SEND who stayed at home, it seems that varying amounts of home-schooling were engaged with. Greenway and

Eaton-Thomas (2020) recruited a sample of 238 parents of children with SEND and found that most (69%) parents reported engaging in home-schooling two hours or less per day, while 31% of parents engaged in three or more hours per day. Overall, the numbers of vulnerable children attending school during the second closure increased significantly over time (Department for Education, 2021a).

2.1.3 Summary of the context of the pandemic

The COVID-19 pandemic has created a disastrous impact on a global scale, with school closures leading to remote learning, mainly via online digital platforms (Stringer & Keys, 2021). As many did not have access to appropriate technology, significant inequalities were apparent across and within countries (Ikeda, 2020).

In England, there were three lockdowns and two school closures. The government instructed schools to continue providing on-site education for vulnerable children and children whose parents were keyworkers (Julius & Sims, 2020). Government guidance documents were provided, and schools offered support to children and their families in a range of ways, including food parcels (Longfield, 2020). Children were found to have lost roughly a third of the learning time that they would normally be accessing during a school year (Major et al., 2021). Children's experiences during the second school closure seemed to improve; more vulnerable children accessed school in-person (Department for Education, 2021a), there were improvements to remote learning provision (Ofsted, 2021b), and children spent more time on schoolwork (Pensiero et al., 2021). Since schools remained open, children's school experiences continued to be affected by the pandemic, such as the requirement to adhere to social distancing measures. The pandemic has therefore undoubtedly been a hugely

challenging and extended period of time for teachers, children and parents (Howard et al., 2021).

2.2 The impact of COVID-19 on children

This section describes the range of positive and negative effects and outcomes that children have experienced since the COVID-19 pandemic, by briefly describing the impact reported on an international scale, and then by exploring the findings within England in greater depth.

2.2.1 Impact on children: International scale

2.2.1.1 International: Negative impact of the pandemic on children

The narrative surrounding the impact of the COVID-19 pandemic on children is overwhelmingly negative. For example, UNICEF state that "COVID-19 is the worst crisis for children in UNICEF's 75-year history", explaining how there are 100 million more children living in poverty since 2019, how the gap between richer countries and poorer countries is widening, and predicting that it will take at least seven years for the child poverty levels to go back to pre-pandemic levels (UNICEF, 2021c, p. 4).

Some literature has emphasised how the COVID-19 pandemic has had an impact on every element of children's lives. UNICEF presented a framework to portray the impact of the pandemic, identifying six areas of life: "physical and mental health and wellbeing; economy and equality; learning and human capital formation; violence and conflict; family relationships; […] social networks," (Sherr et al., 2020, p. 9). Furthermore, UNICEF (2021b, p. 4) emphasised the impact of reduced freedom of movement and having fewer social interactions on wellbeing, finding higher levels in a range of areas when compared with pre-

COVID levels, such as "depression, fear, anxiety, anger, irritability, negativity, conduct disorder […] and sedentary behaviours".

Numerous studies report the negative impact of the pandemic on pupil attainment. For example, Engzell et al. (2021) studied the results from national assessments in The Netherlands, before and after their eight-week school closure, and the same period during the previous three years. Despite the Netherlands having a relatively short period of school closure, "an equitable system of school funding and the world's highest rate of broadband access", they found that students had made "little or no progress" (p. 1), and a learning loss of three percentile points was identified. These findings suggest that learning losses are likely to be higher in countries who experienced longer closures or have weaker educational access and resources (Engzell et al., 2021). In a review of international research, Stringer and Keys (2021) analysed the findings of studies who used assessment data, and found that, compared to previous cohorts, pupils were two to three months behind in terms of their milestones.

2.2.1.2 International: Positive impact of the pandemic on children

While UNICEF stresses the negative impact, the report also highlights the continuum of mental health, recognising that emotional responses to the pandemic are normal and do not necessarily result in long-term distress or trauma (Sherr et al., 2021). Some studies have recognised positive outcomes that support children's overall wellbeing, such as having more flexibility and time for spending quality time with family (Sherr et al., 2020; UNICEF, 2021b), practising positive coping skills (e.g., physical and enjoyable activities) (Sherr et al., 2020), and having respite from attending school, resulting in less academic pressures and bullying (UNICEF, 2021b). There were also benefits around the use of technology, providing social

connectedness, and facilitating the rapid development of a new way of providing education online (Sherr et al., 2020), which in some cases was found to be time-efficient and support retention of learning (Li & Lalani, 2020), with teachers demonstrating willingness to engage in learning to use technology for new ways of connecting and practicing (Reimers & Schleicher, 2020).

2.2.2 Impact on children: England

This section describes the range of positive and negative effects and outcomes that children have experienced since the COVID-19 pandemic in England. The structure reflects the findings from the relevant literature, discussing the impact on four key areas of a child's life: wellbeing, relationships, development of skills, and learning.

When consulting the literature, it was not always possible to determine how significant or lasting the identified impact or outcome had proved; therefore, all the potential effects mentioned within the literature are included. The link between contributing factors and outcomes is not always clear from the literature, and it is rarely possible to make causal inferences about what factors have led to a particular impact when examining human experiences. However, when a link has been stated in the literature, it is briefly referred to within this section, where appropriate. As this is a synthesis of the findings from relevant research, it has not always been possible to state the context of the study (e.g., the demography of the sample). However, the 'contributing factors' section further discusses how children's/families' characteristics contribute to the picture. Table 3 presents a summary of reported outcomes children have experienced since the pandemic, identified from relevant literature.

	Physical wellbeing	Emotional wellbeing	Relationships	Development of skills	Learning
Negative impact	• Fitness • Sleeping patterns. • Eating patterns. • Safeguarding concerns.	• Feeling unsafe and confused. • Loneliness • Stress • Depression • Distress and anxiety and (including social anxiety and separation anxiety).	• Not able to maintain friendships.	• Social development. • Independence • Self-regulation • Physical development.	• Engagement • Confidence • Progress

Table 3: Principal areas of impact on children from the pandemic in England.

		• Obsessive habits / compulsions. • Bereavements.			
Positive impact	• More sleep. • Less tired. • Less sensory overload. • Less headaches and seizures.	• Feeling safe. • Calmer and more relaxed. • Less obsessive habits / compulsions. • Enjoyment from hobbies. • Confidence • Resilience	• More regular communication with friends and family. • Maintained relationships. • New friends and connections. • Parent-child bonds strengthened.	• Independence • Life skills (e.g., using technology). • Speech skills.	• Enjoyment • Engagement • Confidence • Progress

			• Parents learnt how to support their child. • Parents and children value and prioritise family time.		

2.2.2.1 Emotional and Physical Wellbeing

The literature indicates that for many children, the pandemic had a negative impact on their emotional and physical wellbeing. In several large-scale studies, most parents and school staff reported perceptions that children's mental health deteriorated as a result of the pandemic (Ashworth et al., 2021b; Office for National Statistics, 2020; Sharp & Nelson, 2021; Skipp et al., 2021a; The Commission on Young Lives, 2022), and more children required support regarding mental health and safeguarding concerns (Ashworth et al., 2021b). From children's perspectives, there were narratives in the literature around feeling "stress, anxiety and feeling sad", and indicating that mental health was deteriorating; with reasons for this including appearance, identity, SEND and health needs (Popoola & Sivers, 2021, p. 28).

Children engaged in fewer routines and less physical activity during the pandemic, which negatively affected their emotional wellbeing (such as feelings of frustration and anxiety), fitness levels, sleeping and eating patterns (Council for Disabled Children, 2021), and caused them to feel 'drained' (Popoola & Sivers, 2021). For some children, particularly those with Attention Deficit Hyperactivity Disorder (ADHD), not being able to burn energy was detrimental and led to psychological distress or challenging behaviour (Asbury & Toseeb, 2022; Ashworth et al., 2021a; Council for Disabled Children, 2021). The lack of social contact caused feelings of loneliness and depression (Council for Disabled Children, 2021), ranging from lack of motivation and enjoyment, to suicide attempts (Asbury & Toseeb, 2022). Children also became overly reliant on parents to fulfil all caring roles and social interaction resulted in children developing issues such as separation anxiety (Council for Disabled Children, 2021).

There was a common theme of children experiencing feelings of uncertainty, confusion and worry regarding safety measures and concerns around whether school would be safe (Council for Disabled Children, 2021; Popoola & Sivers, 2021; Sivers et al., 2020b; Sivers et al., 2020c). For some children, high levels of anxiety were reported, such as obsessive handwashing, self-harm, stimming, not sleeping or eating (Asbury & Toseeb, 2022), and being reluctant to leave their homes (Asbury & Toseeb, 2022; Council for Disabled Children, 2021). Some children were also reported to be aware of the vulnerability of some family members and some experienced bereavements (Council for Disabled Children, 2021).

However, the literature commonly finds that for some children, particularly those with SEND, the different way of living during the lockdowns and school closures was beneficial and allowed them to thrive. The reduction of daily pressures and demands and having more time at home for resting, sleeping and processing information compared to a busy day and crowded school environment resulted in children feeling less tired, less physically drained and experiencing less feelings of sensory overload (Council for Disabled Children, 2021; Rogers et al., 2021; Sivers et al., 2020c). On top of this, children were reported to be less stressed (Greenway & Eaton-Thomas, 2020); less anxious or worried (Asbury & Toseeb, 2022; Popoola & Sivers, 2021); and more relaxed, presenting with fewer challenging behaviours, psychological distress (Kim et al., 2021a), obsessive and compulsive routines, seizures (Rogers et al., 2021), and headaches (Asbury & Toseeb, 2022). For some children, the flexibility of home learning allowed them to take breaks for physical health needs without feeling self-conscious (Council for Disabled Children, 2021) and one child expressed how going for walks with his family made his autism "fresher" (Rogers et al., 2021). Pets were also discussed as a contributing factor for a reduction in stress, offering non-judgmental listening, company, and

comfort, and giving children a sense of purpose (Council for Disabled Children, 2021; Sivers et al., 2020c). The reduced amount of social interaction during this time was enjoyable for some children, who often find navigating the social world difficult and overwhelming, and the reduction in experiences of bullying had a positive impact on mental health (Council for Disabled Children, 2021). The slower pace also contributed to some children gaining enjoyment from engaging in new hobbies and activities, on an individual level, with their families, and at school, such as creative activities, gardening, cooking, reading, dancing, listening to music, outdoor learning, and extra-curricular activities (Council for Disabled Children, 2021; Popoola & Sivers, 2021; Sivers et al., 2020b; Sivers et al., 2020c).

There was a theme of feeling a sense of safety and demonstrating an increase in confidence within the literature, with a range of contributing factors, such as having the opportunity to engage in more activities that suited their needs (Ludgate et al., 2022), supportive relationships with others (Popoola & Sivers, 2021), food-related activities (Sivers et al., 2020c), and being well informed about pandemic related protocols (Popoola & Sivers, 2021; Williams et al., 2021). There is some evidence that through building and maintaining connections during the pandemic, children were able to find comfort and support, which helped them to cope and built their resilience (Popoola & Sivers, 2021; Sivers et al., 2020a).

2.2.2.2 Relationships

Some children's peer relationships were adversely affected, as activities and clubs were not running and children therefore struggled to maintain their existing friendships via online communication (Ashworth et al., 2021a; Council for Disabled Children, 2021). However, many children embraced online communication (Sivers et al., 2020c); they found that they were

communicating more regularly with friends and family, maintaining their friendships via online gaming (Council for Disabled Children, 2021), and developing constructive relationships using online learning platforms (Asbury et al., 2021). Children also reported that they were able to make new connections and friendships at school during the pandemic, as they had opportunities to play with different children (Popoola & Sivers, 2021; Sivers et al., 2020a).

There is overwhelming evidence within the literature that by having more time to engage in quality family time, many children's bonds with their parents were strengthened and deepened (Council for Disabled Children, 2021; Kim et al., 2021a; Ludgate et al., 2022). Quantitative findings shared by the Children's Commissioner (2020) show that most parent-child relationships strengthened (around 31%) or stayed the same (around 64%) since the pandemic; however, they also found that 4% of relationships worsened. Parents expressed how they learnt more about their child's strengths, needs, and how they can support them better, particularly with their emotional wellbeing (Ashworth et al., 2021a; Ludgate et al., 2022). Both parents and children expressed that they now value their family relationships as they have enjoyed doing activities together (Council for Disabled Children, 2021; Popoola & Sivers, 2021; Sivers et al., 2020c) and parents are choosing to prioritise family time over work and clubs (Rogers et al., 2021).

2.2.2.3 Development/Skills

Children with SEND and their parents reported a negative impact on social skills and development (Council for Disabled Children, 2021), with interaction and friendship skills deteriorating (Ashworth et al., 2021b), a loss of confidence in abilities, and finding it difficult to read social dynamics and build connections with others (Council for Disabled Children,

2021). Headteachers within specialist settings reported some children being four months behind in their social development, independence, and self-regulation, and some children being around six months delayed in their physical development (Skipp et al., 2021a). However, some pupils were found to have gained independence (Popoola & Sivers, 2021).

Children, parents and teachers shared how having more time at home with their families gave children opportunities to learn new life skills, such as riding a bike, or creative skills (Kim et al., 2021a; Ludgate et al., 2022; Popoola & Sivers, 2021; Sivers et al., 2020b), and children were particularly proud of how they learnt to use technology to access online learning and connect with their friends and family in different ways (Council for Disabled Children, 2021; Sivers et al., 2020c). There was also some evidence for an improvement in children's speech skills (Rogers et al., 2021).

2.2.2.4 Learning

A report from the Education Endowment Foundation (2022) found that the disruption to learning negatively affected the attainment of all pupils, and almost all teachers in a large-scale national study reported that pupils were approximately three months behind learning expectations (Sharp et al., 2020). Several sources report that overall, a large proportion of children experienced a form of learning loss, while a small minority of children experienced a severe negative impact and a small minority benefitted from learning gains (Howard et al., 2021; Julius & Sims, 2020; Ofsted, 2021a).

Teachers and parents reported that pupils struggled with motivation and focus (Asbury et al., 2021; Council for Disabled Children, 2021; Kim et al., 2021a; Office for National Statistics,

2020; Ofsted, 2021b), resulting in disrupted academic progress for many (Ashworth et al., 2021b; Greenway & Eaton-Thomas, 2020; Kim et al., 2021b).

In terms of specifically supporting vulnerable children, school staff reported a lack of engagement with learning among pupils both at home and at school (Julius & Sims, 2020). These challenges may have contributed to many professionals (77% in one study) reporting an increase in requests for SEND support (Ashworth et al., 2021b). This has also been evident in Oakbury local authority; with the number of EHCP requests increasing significantly since the pandemic.

Children's views on engaging in online learning varied. Some children reported that they became less confident as learners, and worried about their learning, feeling the pressure to 'catch up' (Popoola & Sivers, 2021). In a survey of 1758 children in Nottingham and Southend areas, it was found that while 48% of children responded that they were pleased or happy about being at home during the closure, 30% said it was OK, and 22% indicated that they did not like it (Sivers et al., 2020c). In a few cases, teachers observed that since engaging in online learning, children's engagement with learning improved. For example, a couple of SENCOs reported that focus and concentration improved (Ashworth et al., 2021a), and a key finding from a small-scale study (n=24) indicated that teachers referred to some children as 'surprise stars' (Kim et al., 2021b). It was also found that eight parents of SEND children reported improved academic achievement (Greenway & Eaton-Thomas, 2020).

Many children who attended school during the school closures enjoyed the experience (Ashworth et al., 2021a), including working with different children (Sivers et al., 2020a). Sivers et al. (2020c) found that many children reported that they were pleased or happy about being

at school (86%), while 8% of children said it was "OK", and only 4% indicated that they did not like it. Furthermore, the small classes were reported to be "working better" (p. 4) for children with SEND (Ashworth et al., 2021a, p. 4; Council for Disabled Children, 2021).

Overall, there is data to suggest that some children enjoyed learning more during the school closures, whether they were at home or at school, as a result of spending more time being active outside (Sivers et al., 2020a), doing more creative activities, accessing blended learning, using technology, and doing independent research (Sivers et al., 2020c; Williams et al., 2021). Children also enjoyed learning at a more relaxed pace (Sivers et al., 2020c) and reported that their peers supported them to feel more confident with their learning (Popoola & Sivers, 2021).

2.2.3 Summary of the impact

The literature indicates that many children experienced a negative impact on their emotional and physical wellbeing, such as their fitness levels, sleeping and eating patterns, and children were worried and confused, specifically about theirs and others' safety in terms of COVID-19. It was also found that for some children, particularly those with SEND, the reduction of daily demands and stimulation enabled them to feel less tired and overwhelmed, resulting in less stress and anxiety. They also engaged in new hobbies and demonstrated increased confidence.

Despite the reduction of in-person social interactions during the pandemic, some children seemed to experience some improvements in the quantity and quality of relationships. Whilst some children struggled to maintain their peer relationships, many embraced online communication, made new connections at school, and enjoyed engaging in quality family

time. Furthermore, although the pandemic seemed to negatively affect the social skills of children with SEND, many children seemed to have more opportunities to learn new life skills.

Whilst some articles reported a negative effect on all pupil's attainment, others stated that although most were negatively affected, some experienced learning gains (Howard et al., 2021). Similarly, though some children were reported to be unmotivated, disengaged, and lacking confidence, others experienced improved focus and concentration and enjoyed learning more, whether they were at home or at school.

2.2.3.1 Concluding critical reflections

Overall, it appears that while children were found to have experienced highly heterogeneous outcomes as a result of the drastic changes in lifestyle that the pandemic brought, some common themes can be abstracted. A key challenge in conducting a literature review on this novel phenomenon is the recency of the pandemic and therefore the limited number of published research articles available at the time my own study was planned and implemented. In particular, any reported outcomes or effects associated with the pandemic were not susceptible to longitudinal monitoring. It is therefore difficult to determine the significance and durability of reported effects.

Through conducting the literature review, it was apparent that while there was a clear shared finding that there was a minority of children who experienced positive outcomes during the pandemic, there were very few studies that solely looked at the positive effects and none that used a nested case study design. The majority of relevant studies used a nomothetic approach, resulting in the complexities of individuals' experiences and outcomes often not being

identified or explored in-depth, despite the experiences of the pandemic for each individual being widely diverse.

Several studies stood out as being particularly relevant and significant to the current study, having gathered and analysed qualitative data, and interpreted the data using psychological theories. For example, Popoola and Sivers (2021) and Sivers et al. (2020c) reported the utilisation of Maslow's hierarchy of needs (1943) and Bronfenbrenner's ecological systems model (2001) to understand their themes in greater depth and illuminate the complexities of the effects of the pandemic. Popoola and Sivers (2021) used Reflexive Thematic Analysis (RTA) (Braun & Clarke, 2022), a collaborative and reflexive process, involving 23 colleagues. Although the large number of contributors could indicate good inter-rater reliability, 'groupthink'[3] (Janis, 1972) may have been present, as the researchers appeared to have used a deductive process. The Council for Disabled Children (2021), Popoola and Sivers (2021) and Sivers et al. (2020c) recruited large sample sizes of participants from a range of areas within the UK, aiming to be representative of the population. While this offers some level of generalisability, as they analysed the data qualitatively, it is difficult to determine the extent to which the themes identified are more widely representative.

While these instrumental studies have limitations, they served well as pragmatic research studies that were conducted in a timely manner and were therefore utilised during the pandemic in order to inform practice. Overall, trends in the reported research findings outlined in this chapter can be accepted with confidence, provided that the limitations

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[3] 'Groupthink' (Janis, 1972) is when group members tend to conform to the views of other members.

associated with their research designs are understood, in particular, the difficulties in studying

such a complex phenomenon in a nomothetic way.

3. CHAPTER THREE: LITERATURE REVIEW II – MEDIATING MECHANISMS FOR DIFFERENTIAL OUTCOMES

This chapter focusses on exploring what may have contributed to the divergent effects for different children, outlined in the previous chapter. Lessons learnt and practices that may be useful in post-pandemic education are then outlined, before concluding with evidence for the phenomenon explored in the current research: 'success against the odds'. The dynamics which have been found to have contributed toward sustained progress are presented and the value of focusing on positive exceptions is argued.

3.1 Mediating mechanisms for differential outcomes

As discussed in the previous chapter, while the narrative around the impact on children is largely negative, there have also been many positive outcomes reported. This section attempts to explore why there have been a range of outcomes for children by presenting and theorising a range of mediating mechanisms contributing to individual differences in adaption and outcomes since the COVID-19 pandemic.

3.1.1 Contributing factors: International scale

3.1.1.1 International research: factors that contributed to negative effects

The Centers for Disease Control and Prevention (2020) explains how certain conditions, known as social determinants of health, such as physical environment, education, economic status, and being at risk of discrimination, increase people's risk of being infected with COVID-19. These social determinants have also been found to impact children's engagement with education during the pandemic (Andrew et al., 2020b; Pensiero et al., 2021).

Children living in more affected areas or rural areas (UNICEF, 2021b; Xafis et al., 2020), children who are considered to be from a minority group (Sherr et al., 2021), having lower Socio-Economic Status (SES)[4] (Bono et al., 2021; Sherr et al., 2021; Singh et al., 2020; UNICEF, 2021b; Xafis et al., 2020), or having Adverse Childhood Experiences, such as family conflict or separation (UNICEF, 2021b) were more likely to experience adversity, or greater adversity, since the pandemic. More specifically, groups such as migrants, refugees, and indigenous people were more at risk of detrimental effects of COVID-19 (Sherr et al., 2021; Xafis et al., 2020). Aspects of having low SES that seemed to affect children's outcomes include parents having studied at a lower level of education (Engzell et al., 2021), and being less likely to have access to technology and the internet (Reimers & Schleicher, 2020).

Other contributing factors for experiencing negative effects include having pre-existing conditions or SEND, such as disabilities, mental health difficulties, and physical health issues (Sherr et al., 2021; Singh et al., 2020; UNICEF, 2021b; Xafis et al., 2020). For children with SEND, negative outcomes may have occurred due to their ability to understand the complex pandemic situation, their independence skills, and their tolerance for change and uncertainty (Singh et al., 2020). Also, without social interaction and specialist resources, they may be more likely to regress in their developmental progress (Singh et al., 2020).

Overall, younger children were most at risk of negative outcomes, such as disrupted sleeping, lack of appetite, and separation anxiety (Singh et al., 2020), as they are less able to access online learning, and are at a significant point in their development (Silverman et al., 2020).

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[4] Socioeconomic status is the social standing or class of an individual or group. It is often measured as a combination of education, income and occupation. Examinations of socioeconomic status often reveal inequities in access to resources, plus issues related to privilege, power and control. (American Psychological Association, 2022)

Females also seemed to be more at risk, demonstrating greater anxiety and depression, compared to males (UNICEF, 2021b).

3.1.1.2 International research: factors that contributed to positive effects

Higher SES, positive parenting, quality family time, physical activities, regular communication with friends and family, respite from academic stressors, and maintaining routines while having flexible schedules were found to be positively correlated with wellbeing in children during the pandemic (UNICEF, 2021b).

3.1.2 Contributing factors: England

To explore what contributed to positive or negative effects for children in England during the pandemic, it is useful to consider a framework (Figure 3) presented by UNICEF, which draws from Bronfenbrenner's (1994) socio-ecological model, with the theory that children are situated within their families, schools, and communities, which can contribute to vulnerabilities and levels of resilience (Sherr et al., 2020). The framework shows how children with pre-existing resilience were more likely to become more resilient, and children with pre-existing vulnerabilities were more likely to suffer with long term negative effects, which has unfortunately exacerbated inequalities.

Although previous literature identified contributing factors that led to more positive or negative experiences during the pandemic, the general picture in terms of contributing factors is truly complex and dynamic.
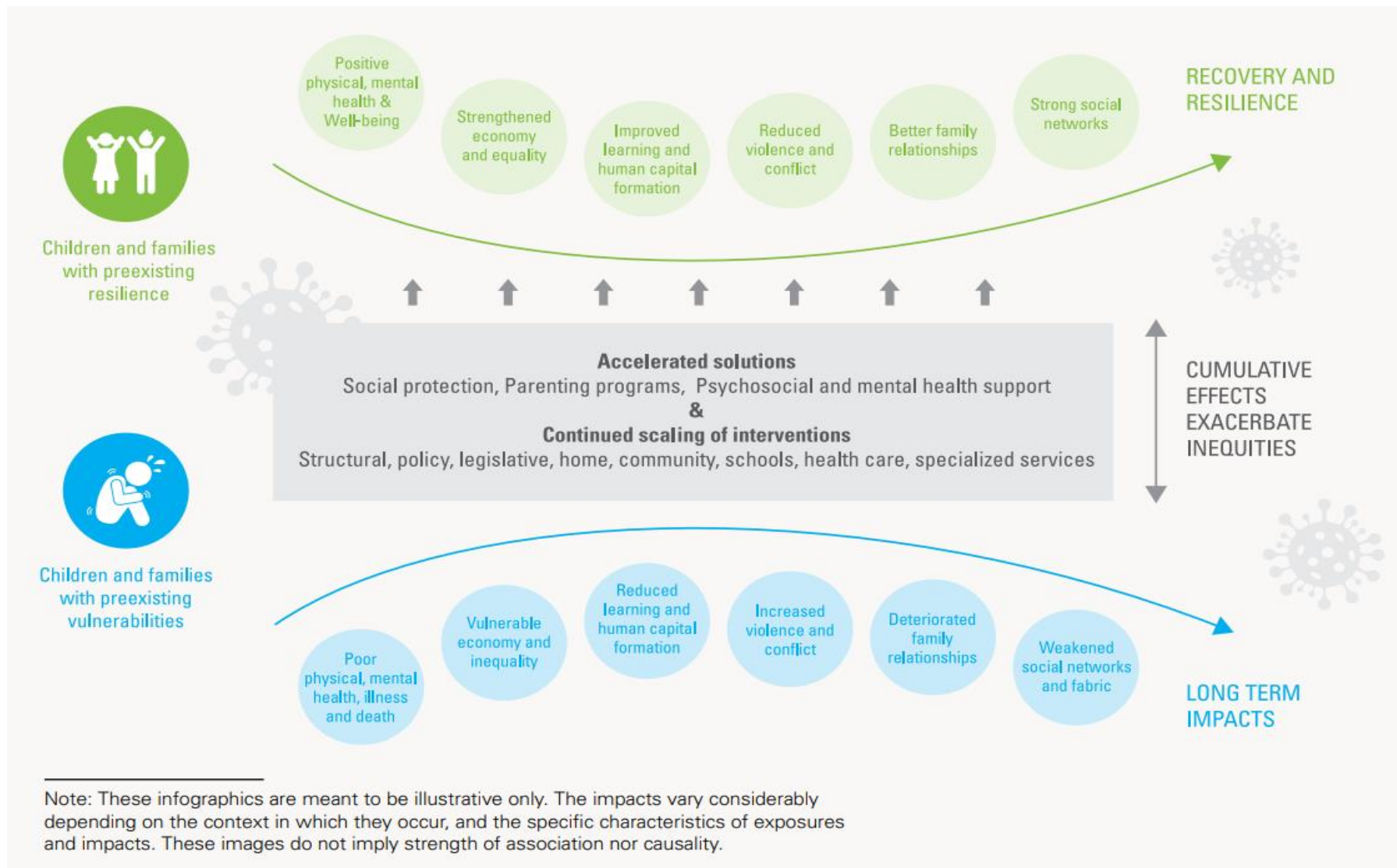
Figure 3: A framework showing "societal impacts of COVID-19 can contribute to inequalities in child well-being" (Sherr et al., 2020, p. 9).

As discussed in Section 1.1.4, development is "a complex system of nested dynamics" (Thelen & Smith, 1998), and it is important to acknowledge that each child's circumstances are unique, with many inter-linking aspects that contribute to their outcomes. It is therefore not within the scope of this literature review to consider the links between factors. Instead, this section aims to present a coherent structure, first outlining children's individual characteristics, then discussing their family circumstances and experiences, learning related experiences, and wider community context. Table 4 presents a summary of the findings of this review in terms of hindering and facilitating factors that children have experienced since the COVID-19 pandemic.

3.1.2.1 Children's Characteristics

Many characteristics have been identified as hindering or facilitating factors for children during the COVID-19 pandemic, such as their needs or abilities, mental health, ethnicity, language, age, gender, and levels of resilience.

3.1.2.1.1 Needs and abilities

Throughout the literature, there were findings regarding children with SEND being more severely affected by the pandemic compared to children without SEND, in terms of their learning and their mental health. For example, 58% of education professionals expressed how "pupils with SEND had been more negatively affected by the pandemic than pupils without SEND" (Ashworth et al., 2021b, p. 4), and staff from specialist provisions estimated their pupils to be around four months behind (Skipp et al., 2021a), compared with mainstream school staff estimating that children were around three months behind (Sharp et al., 2020).

	Individual characteristics	Family circumstances	School/ Learning experiences	Community context
Table 4: A summary of the hindering and facilitating influences on children associated with the COVID-19 pandemic.				
Hindering factors	• Ethnicity • Language • SEND, such as Autism Spectrum Condition (ASD) / communication needs, ADHD, or mental health difficulties. • Age • Gender	• Low SES • Lack of technology • Lack of parental support • Vulnerable or unwell family members and bereavements	• Traditional and unengaging teaching • Lack of social contact • Worries about missed learning and pressure to 'catch up' • Change in routines • Struggled with independent learning • Overwhelmed / drained by screen time	• Lack of clubs or groups • Lack of support from professionals • Remote support from professionals • Online communication

			• Decrease in confidence in learning	
Facilitating factors	• SEND • Age • Gender • Resilience	• More quality time with family • Creative, flexible and tailored home learning. • Support from siblings and pets	• Flexibility and more time to rest and reflect • Reduced pressures, stressors and demands. • Reduced social contact • Different activities (e.g., creative and physical activities). • Smaller classes, more individual support. • Relationships (child-teacher, child-peer, and parent-teacher).	• Remote support from professionals • Online communication

			• Being well-informed about measures and protocols.	

For the families with children with SEND, it was found that nearly 60% struggled with home-schooling (Andrew et al., 2020c). Parents of children with SEND within a small-scale study (*n*=10) reported how it was "extremely challenging, if not impossible" to access remote learning (Ashworth et al., 2021a, p. 3), and similarly, a key finding from a large-scale study (*n*=478) highlighted how parents reported that for many children, home learning was "completely unacceptable" and led to distress and challenging behaviour (Asbury & Toseeb, 2022, p. 195). Ofsted (2021a) found that a higher number of parents of children with SEND said that their child was disengaged (59%), compared to parents who did not have a child with SEND (49%), and teachers also reported how vulnerable children (including those with an EHCP) were typically less engaged than their peers (Julius & Sims, 2020). Many reported that the majority of children's mental health and wellbeing has deteriorated since the pandemic, and that for children with SEND, the impact has been exacerbated (Sharp & Skipp, 2022; The Commission on Young Lives, 2022).

Many reasons for this exacerbated negative impact have been suggested within the literature, mainly centred around how children had a range of unmet needs during the pandemic (Toseeb et al., 2020). For special schools, it was difficult to accommodate all their vulnerable pupils (including those with EHCPs) in the setting, as this applied to all of their pupils, with some being particularly vulnerable to infection (Sharp & Skipp, 2022). Children were therefore not able to access the specialist support and therapies that they would usually access, in line with their EHCP, for a prolonged period of time (Sharp & Skipp, 2022). Equally, it was more difficult for teachers to provide remote learning for children with SEND, and for the children to access it, whether they were enrolled at a special school or mainstream school (Sharp & Skipp, 2022). Ofsted (2021a, p. 33) reported that less than half of teachers stated that their (mainstream)

school provided "additional remote learning arrangements" for children with SEND, and staff absence was reported to be higher within specialist provision, which would have affected the level of provision they could offer (Skipp et al., 2021a; Skipp et al., 2021b). From parents' perspectives, remote learning was often not sufficiently differentiated and there was insufficient support and resources provided from school, such as "SEND-specific technology", which children would normally use to engage with learning (Andrew et al., 2020c; Ashworth et al., 2021a, 2021b). However, another paper found substantial disparity in parents' levels of satisfaction regarding the support offered, indicating that there was considerable variation in provision and inequality of support for children with SEND (Toseeb et al., 2020). A study on parents of children with SEND indicated that a key challenge was struggling to balance home-schooling with their existing commitments, and home-schooling multiple children (Greenway & Eaton-Thomas, 2020). However, this may have also been true for families without children with SEND (discussed in Section 3.1.2.2).

Children with ASD or social communication difficulties struggled in particular with aspects of the pandemic; they were reported to experience greater levels of psychological distress and/or low mood, compared to children with other SEND (Asbury & Toseeb, 2022). The sudden school closures meant an abrupt loss of routine, structure, and access to social activities, which was particularly detrimental for some children with SEND, resulting in negative effects, such as mental health difficulties, issues with sleeping and eating, more challenging behaviour, and difficulties with their social skills (Asbury & Toseeb, 2022; Ashworth et al., 2021a; Council for Disabled Children, 2021; Greenway & Eaton-Thomas, 2020). From children's perspectives, they felt that the change in routine and social contact with others exacerbated their communication difficulties and their health and wellbeing

(Ashworth et al., 2021a). The return to school was also a difficult change in routine for children with SEND (Asbury & Toseeb, 2022). Parents reported that children struggled (52%) and had a lack of support around their transition back to school (37%) (Ashworth et al., 2021a), while some remained at home (21%) (Ashworth et al., 2021b).

Children with ASD were reported to have a lack of understanding around the COVID-19 related changes, which resulted in distress in some children, while for others, the lack of understanding provided a protective factor, with parents reporting, "I don't think my child has any idea anything bad is happening" (Asbury & Toseeb, 2022, p. 8).

Children engaged in less routines and physical activity during the pandemic, which negatively affected their emotional wellbeing (such as feelings of frustration and anxiety), fitness levels, sleeping and eating patterns (Council for Disabled Children, 2021), and caused them to feel 'drained' (Popoola & Sivers, 2021). For some children, particularly those with ADHD, not being able to burn energy was detrimental and led to psychological distress or challenging behaviour (Asbury & Toseeb, 2022; Ashworth et al., 2021a; Council for Disabled Children, 2021)

Contrastingly, for some children with ASD, being at home and accessing remote learning was enjoyable and beneficial (Ashworth et al., 2021a). They did not have to endure stimulating and distressing aspects of their day, such as travelling to school or being in classrooms, and were able to concentrate and focus better on their learning, due to less environmental distractions and being able to use the chat function on the online learning platform (Ashworth et al., 2021a).

For the children with SEND who were able to access in-person learning during the closures, the smaller classes were found to have resulted in positive outcomes, such as more enjoyment

and engagement with learning (Ashworth et al., 2021a; Council for Disabled Children, 2021; Sivers et al., 2020a).

3.1.2.1.2 Ethnicity and language

Children of black and minority ethnic backgrounds are four times more likely to have 'no access to outdoor space' (no shared or private garden/balcony/terrace) in comparison to those from white backgrounds (Children's Commissioner, 2020), and with parks and playgrounds being closed during the lockdowns, children without a garden would have been particularly affected. For children with English as an additional language, they experienced a reduction in support to access their learning (Popoola & Sivers, 2021).

3.1.2.1.3 Age

While younger children (in both primary and secondary schools) were found to have spent less hours engaging in school work (Bono et al., 2021; Office for National Statistics, 2020), they were reported to have received more support from their parents, in comparison to older children (Bono et al., 2021). Both Asbury and Toseeb (2022) and Soneson et al. (2022) found that older children reported or presented with lower wellbeing compared to younger children.

3.1.2.1.4 Gender

While boys were found to have spent less time engaging with schoolwork, they were reported to have received more support from their parents, in comparison to girls (Bono et al., 2021). Whilst Asbury and Toseeb (2022) found that boys presented with lower levels of depression compared to girls, Soneson et al. (2022) found that girls reported lower wellbeing.

3.1.2.1.5 Resilience

Data gathered on children's views indicated that some children were self-aware and expressed how they were learning from the difficult pandemic experience and building their resilience and coping strategies, through relationships and hobbies. For example, one child said, "because of the pandemic I've learnt to be resilient and live during tough times" (Popoola & Sivers, 2021, p. 16), and another child expressed how future school holidays would "not seem so daunting, given their proven ability to get through" (Rogers et al., 2021, p. 1427).

3.1.2.2 Family circumstances

Many aspects of family context have been found to have affected children's experiences and outcomes during and since the pandemic, such as access to resources and parental support.

3.1.2.2.1 Socio-economic status

There is an overwhelming narrative within the literature that children from families with low SES struggled more than other children during the pandemic (Andrew et al., 2020d; Asbury et al., 2021; Holt & Murray, 2022). The schools considered to be the most economically deprived had lower levels of pupil engagement (Nelson & Sharp, 2020; Sharp & Skipp, 2022), and teachers expressed how their vulnerable pupils, which is likely to include children with low SES, were typically less engaged with learning compared to their peers (Julius & Sims, 2020). Children from poorer families experienced higher learning loss[5] (Major et al., 2021), for example, at primary level, children from poorer families were found to have spent 75 minutes per day less on educational activities, compared to their peers, which equates to 31% less time (Andrew et al., 2020d). Children attending schools considered to be the most economically

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[5] Learning loss: amount of "normal schooling hours lost per day when compared with a 6-hour school day for 5 days a week". (Major et al., 2021, p. 7).

deprived were estimated to be further behind academically compared to other schools, with teachers from those schools being "over three times more likely to report that their pupils were four months or more behind in their curriculum-related learning (53 per cent compared to 15 per cent)" (Sharp & Skipp, 2022, p. 2).

Children from families with low SES were also more likely to suffer in terms of their wellbeing and quality of parental relationships during the pandemic. School staff reported that pupils' wellbeing and mental health had deteriorated more so for children who were already vulnerable (Nelson et al., 2021; Sharp & Nelson, 2021), and children with low SES were 1.7 times more likely to experience a deterioration in their relationship with their parent (Children's Commissioner, 2020).

Multiple explanations have been discussed regarding this inequality, such as the impact of the lack of food that some poorer families experienced (Asbury et al., 2021; Children's Commissioner for England, 2020; Kim et al., 2021a; Sivers et al., 2020c), and the lack of access to outdoor spaces and suitable spaces to engage in schoolwork (Children's Commissioner, 2020). Teachers were also concerned about disadvantaged and vulnerable children's levels of safety and stimulation during this time (Asbury et al., 2021). Children in low SES families had less access to computers and other resources in order to access online learning, compared to other children (Andrew et al., 2020c; Pensiero et al., 2021; Sharp & Skipp, 2022), and the amount of parental support that children experienced with their learning was also lower (Andrew et al., 2020a; Julius & Sims, 2020; Pensiero et al., 2021; Sharp & Skipp, 2022). However, in one study, the amount of parental support was not associated with SES (Bono et al., 2021).

For special schools with the highest economic deprivation, pupil attendance was lower than in less deprived specialist settings, indicating that they had less time attending school and accessing specialist support and provision for their needs (Sharp & Skipp, 2022). This is an example of intersectionality, suggesting that children who have both SEND and low SES were more likely to suffer disastrous effects of the pandemic. However, in one study, no significant association was found between parents of children with SEND with low SES, and the belief that "their child had been disadvantaged" (Greenway & Eaton-Thomas, 2020, p. 524). Instead, they found that "parents' views on the resources, management and feelings surrounding their experiences during the pandemic were very similar", irrespective of their circumstances (Greenway & Eaton-Thomas, 2020).

3.1.2.2.2 Access to technology

Issues with accessing online learning due to lack of technology (i.e., a laptop and good internet access) was the case for many children, whether they were from families with low SES or not (Ashworth et al., 2021a; Council for Disabled Children, 2021; Kim et al., 2021b; Popoola & Sivers, 2021), and unsurprisingly, this was reported to have affected pupils' learning and progress (Asbury et al., 2021). Teachers highlighted how even families who were financially comfortable struggled, as they needed a laptop or computer per family member in order for them to access work or school remotely, whereas a lot of families only owned one laptop (Kim et al., 2021a). Teachers explained how although the government had "promised to provide laptops to all who needed them", this did not happen in a timely manner (Asbury et al., 2021). Children emphasised the importance of having suitable technology for home learning; with some expressing how it was a facilitating factor for coping with the lockdowns, and some sharing how technology did not seem to be prioritised by parents and professionals (Council

for Disabled Children, 2021). While a large-scale study of teachers views indicated that 49% of teachers selected 'lack of access to technology' as a key challenge in accessing online learning (Teacher Tapp, 2020), two other large-scale studies found that only 9-11% parents selected that access to technology was a key issue (Office for National Statistics, 2020; Ofsted, 2021b).

3.1.2.2.3 Parental support

From teachers' perspectives, parents are "pivotal in pupil success" (Kim et al., 2021a, p. 8), yet a key challenge they highlighted was a lack of parental support with learning and wellbeing (Kim et al., 2021b; Teacher Tapp, 2020).

Parents' level of involvement with their children's learning seemed to be dependent on other commitments and responsibilities, such as working, and having multiple children to support (Kim et al., 2021a). Many parents were forced to take on additional roles and responsibilities during the pandemic, struggling to juggle home and work responsibilities, as well as home-schooling, without any respite and reduced support systems (Ashworth et al., 2021a; Council for Disabled Children, 2021; Greenway & Eaton-Thomas, 2020; Rogers et al., 2021; Sharp & Skipp, 2022). Some parents and children described the parent-child relationship as becoming intense, and for some children, it resulted in separation anxiety, due to the high level of dependence (Council for Disabled Children, 2021). Parents' mental health was found to have deteriorated during this time, with feelings of stress, tiredness, anxiety, fear, hopelessness, powerlessness, reduced patience, loneliness, and a loss of purpose (Asbury & Toseeb, 2022; Ashworth et al., 2021a, 2021b; Council for Disabled Children, 2021; Ofsted, 2021a; Rogers et al., 2021; Sharp & Skipp, 2022); this consequently had an impact on children's mental health (Greenway & Eaton-Thomas, 2020; Sharp & Skipp, 2022; Skipp et al., 2021a).

Considering home-schooling specifically, parents expressed how they struggled to engage and support their child in learning (Andrew et al., 2020c), as children were not used to working at home (Kim et al., 2021a), and they reported feelings of doubt, guilt, and inadequacy (Asbury & Toseeb, 2022; Greenway & Eaton-Thomas, 2020; Ludgate et al., 2022; Rogers et al., 2021). Teachers identified other factors influencing parental support with learning, such as the parents' level of value placed on education (Kim et al., 2021a; Kim et al., 2021b), and their IT abilities (Ashworth et al., 2021a).

3.1.2.2.4 Quality family time, and creative and tailored home learning

As discussed in Section 2.2.2.2, many parents and children explained the positive impact of having more time at home with their family, engaging in quality time together while learning (Council for Disabled Children, 2021; Greenway & Eaton-Thomas, 2020; Kim et al., 2021a; Sivers et al., 2020c). Families expressed how much they valued having "unhurried space" to enjoy shared activities, such as arts and crafts, cooking, gardening, and going for nature walks (Council for Disabled Children, 2021, p. 17; Kim et al., 2021b; Rogers et al., 2021; Sivers et al., 2020c) and parents shared how they had time to "step back" and reflect on how they wanted to do things in the future (Rogers et al., 2021, p. 1427).

Some parents reported a positive experience of home learning, using a flexible approach to planning activities, involving their children in deciding the content and structure, utilising a range of self-initiated online resources, and tailoring the learning to their child's abilities (Ludgate et al., 2022). They creatively used real-life scenarios, games, and outdoor activities to 'disguise' learning (Greenway & Eaton-Thomas, 2020; Ludgate et al., 2022). Support also came from siblings (Popoola & Sivers, 2021) and pets, who provided children with non-

judgmental listening, company and comfort (Sivers et al., 2020c). Some believed that the quality family time had a wider positive impact on their child's stress levels, their academic progress, their confidence, and led to the development of new skills and hobbies (Council for Disabled Children, 2021; Greenway & Eaton-Thomas, 2020; Ludgate et al., 2022; Popoola & Sivers, 2021).

3.1.2.2.5 Vulnerable or unwell family members and bereavement

An aspect of family life that contributed to negative effects during the pandemic was around the health and vulnerability of family members. Some children were very aware, or confused, about the risk of transmission, and were therefore incredibly worried about vulnerable relatives becoming ill with COVID-19; this led to experiencing social anxiety and being reluctant to leave their homes (Council for Disabled Children, 2021). Other children experienced illness and death within their family (Asbury & Toseeb, 2022; Sharp & Skipp, 2022).

3.1.2.3 School experiences

For some, the change in school practices was challenging and led to negative outcomes. For others, the sudden shift was a welcome change, and they embraced the increased flexibility, reduced pressure and stimulation, and smaller classes. Relationships, routines, and being informed were other reported facilitating factors that supported children's wellbeing.

3.1.2.3.1 Home learning

As discussed in Section 2.2, many children struggled with home-schooling (Andrew et al., 2020c) and found it very difficult to be motivated and focused (Council for Disabled Children, 2021; Office for National Statistics, 2020; Ofsted, 2021b). For some, this appeared to lead to

negative outcomes. Teachers were concerned about having limited communication with some children, and reported a decrease in engagement with learning, suggesting that it may have been partly due to the online learning being "very traditional" and not engaging or fun (Kim et al., 2021a; Kim et al., 2021b, p. 251). See Table 5 for a synthesis of children's views on reasons why they found home-learning difficult.

Table 5: A synthesis of the literature relating to children's views on why home-learning was difficult.	
Reasons why some children believed they struggled with home learning	**Supporting references**
They missed social contact. Children had fewer opportunities to interact and play with their peers and socialise freely during break times. Many children were sad to be separated from peers and school staff and felt lonely. They expressed desires to connect, interact and build and maintain collaborative relationships with school staff.	Kim et al. (2021a); Ofsted (2021b); Popoola and Sivers (2021); Sivers et al. (2020c); Sivers et al. (2020a); Sivers et al. (2020b); Williams et al. (2021).
They were concerned about their learning. They expressed how they felt they were missing out on learning opportunities and experiences and were therefore at a disadvantage due to the school closures, particularly children who stayed at home. They reported feelings of stress and anxiety	Sivers et al. (2020a); Sivers et al. (2020c); Sivers et al. (2020b); Popoola and Sivers (2021).

around the pressure for them to 'catch up' (which may have been exacerbated by the media narrative of a 'catch up' curriculum), and about returning to school; worrying about the safety measures, how different school would be, and catching COVID-19.	
They missed their routines.	Sivers et al. (2020c); Kim et al. (2021a).
They missed in-person support and struggled with independent learning. They missed the sense of achievement they felt at school.	Sivers et al. (2020c)
They felt overwhelmed and drained by the amount of screen time.	Council for Disabled Children (2021)
They experienced a decrease in confidence in their learning.	Popoola and Sivers (2021)

As discussed in Section 2.2, many children found that home-learning was a positive experience that offered many benefits (Kim et al., 2021b). Table 6 offers a synthesis of reasons why home-learning was a positive experience for some children, found within relevant literature.

Table 6: A synthesis of the literature relating to reasons why home-learning was a positive experience for some children.

Reasons why home-learning was a positive experience for some children	**Supporting references**

They had more time and flexibility to rest, reflect, work at their own pace, and take breaks when they wanted to. For many, this helped them feel calmer and reduced feelings of stress and anxiety.	Council for Disabled Children (2021); Ludgate et al. (2022); Ofsted (2021a); Popoola and Sivers (2021); Sivers et al. (2020c).
They did not need to get up early, go on long journeys and spend their day within a busy, crowded environment. This reduction in daily pressures, stressors and demands enabled them to feel less tired, drained, and 'sensory overload'. Although this was most prevalent within the literature on children with SEND, the reduction in pressure and demands around learning was highlighted as a benefit within a study on a wider demographic of children.	Asbury and Toseeb (2022); Ashworth et al. (2021a); Council for Disabled Children (2021); Kim et al. (2021a); Ofsted (2021a); Rogers et al. (2021); Sivers et al. (2020c).
They found it easier to interact online due to the reduced pressure to read non-verbal communication and navigate social dynamics, and they did not have to deal with bullying. This led to increased confidence and positive behavioural changes in some children. However, some parents reported concerns about whether it was helpful for their child long term. Although this was a key narrative across the literature on children with SEND, it was also	Asbury et al. (2021); Council for Disabled Children (2021); Ludgate et al. (2022).

noted within a study of teachers in mainstream schools, that some children who did not usually thrive in the classroom environment were more able to learn and build constructive relationships online.	
They enjoyed different learning activities (e.g., online, creative, and active).	Sivers et al. (2020c)

3.1.2.3.2 Attending school during the pandemic

The limited research corpus reporting the school experience of the minority of children who attended during the school closures suggests that both children and teachers attending primary schools judged the changes to school practice as positive (Sivers et al., 2020a). Children enjoyed working and playing with different children, making new friends, doing lessons in different ways, doing physical activities outside (Sivers et al., 2020a), and both children and school staff reported how beneficial the reduced amount of children, smaller classes, and more individual support was, particularly for children with SEND (Ashworth et al., 2021a). Ofsted (2021a, p. 83) reported that children "flourished", and one child commented: "I'm getting more support in school because they aren't as busy as usual with there being less people in school (and) this helps with both work and my mental health" (Council for Disabled Children, 2021, p. 43).

Similarly, when schools reopened to all children, school practice involved more opportunities for children to engage with new and different activities, such as blended learning, independent research, using technology, and extra-curricular, creative and outdoor activities

(Popoola & Sivers, 2021; Sivers et al., 2020c; Williams et al., 2021). As many children appeared to respond so well to the different ways of schooling, teachers expressed how beneficial this was in helping them understand children's individual needs, and how they could provide a more holistic and rounded curriculum, such as incorporating more creative activities (Kim et al., 2021b).

3.1.2.3.3 Relationships, routines, and being informed

Maintaining contact and connections with friends and teachers was reported as being important for children (Sivers et al., 2020c; Williams et al., 2021), and children expressed how much they valued their positive relationships with caring, comforting, and helpful school staff who were available to talk to when they needed them (Popoola & Sivers, 2021; Williams et al., 2021). Teachers also highlighted the importance of relationships with pupils (Asbury et al., 2021), reporting how "small gestures and interactions" could be particularly useful in "encouraging engagement and boosting the wellbeing" of children (Kim et al., 2021b, p. 252). Children reported how support from peer relationships was another protective factor in providing someone to talk to about their feelings, a sense of comfort and safety, and helping them feel more confident (Popoola & Sivers, 2021; Sivers et al., 2020c; Williams et al., 2021).

Furthermore, children highlighted how important it was for them to be well-informed about the routines, protocols, and COVID-19 safety measures at school for them to feel safe; they expressed how they want their school environment to be "safe, pleasant and clean", and have security features and surveillance (Popoola & Sivers, 2021, p. 22; Sivers et al., 2020b; Sivers et al., 2020c; Williams et al., 2021).

Positive relationships between school staff and parents were reported to be a mediating factor in supporting children. Teachers reflected on their enhanced understanding of the value of parental engagement in increasing pupil participation, and shared how a partnership which involves regular communication can facilitate effective teaching practices (Asbury et al., 2021; Kim et al., 2021a; Kim et al., 2021b).

3.1.2.4 Community factors

Several wider community factors have been highlighted as contributing to the impact on children during the pandemic, such as lack of access to clubs, support from professionals, and communication being predominantly online.

3.1.2.4.1 Lack of clubs and groups

Some children with SEND highlighted the negative impact of clubs and groups being cancelled, such as riding, swimming, and other sports, and social activities, on their wellbeing; they missed the physical and social activity, felt disappointed and frustrated, and experienced a reduction in fitness levels (Ashworth et al., 2021a; Council for Disabled Children, 2021).

3.1.2.4.2 Support from professionals

The amount of support that children received from services such as social services, mental health services, therapy, and health care reduced during the pandemic. For example, 76% of families who were receiving support from social services pre-pandemic, were no longer receiving it during the pandemic (The Children's Commissioner's Office, 2020), school leaders reported how specialist support services were not accessible during this time (Nelson et al., 2021; Skipp et al., 2021a), and parents reported a sudden withdrawal of mental health support, resulting in distress and challenging behaviour (Asbury & Toseeb, 2022). Additionally,

parents of children with SEND reported that access to therapy and health care was reduced, such as Speech and Language Therapy (SALT) and physiotherapy (Ashworth et al., 2021a, 2021b). Parents shared that the lack of support services was particularly challenging due to home-schooling and having a lack of respite; they therefore had to do their best to support their child independently (Council for Disabled Children, 2021; Ofsted, 2021a). Some parents shared that they felt abandoned by services as they had been their primary source of support (Rogers et al., 2021). Professionals' reported an increase in demand for their services, which therefore increased workload and staff burnout (Ashworth et al., 2021a), and many professionals reported that one of their main concerns was around families having reduced access to support services (Council for Disabled Children, 2021).

3.1.2.4.3 Online support and communication

Many support services migrated to remote support, which had pros and cons for children and their families. Many children did not feel confident in online support regarding their physical health, and they preferred face to face support as communication and relationship building was easier (Council for Disabled Children, 2021). However, with review meetings, benefits were reported, such as reduced travel time and costs, feeling less intimidated and more relaxed, no need for childcare or coping with travel anxiety, and they could be recorded (Council for Disabled Children, 2021).

From professionals' perspectives, it was reported that although they found supporting children with SEND and their families to be challenging in some ways during this time, they tried to maintain support and provide reassurance. Their guidelines for operating were unclear and rapidly evolving, particularly around having direct contact with children, which

consequently raised safeguarding concerns as non-verbal communication and subtle cues are limited during remote meetings (Ashworth et al., 2021a). Many professionals reported that the support they provided was largely online which meant that they were not able to use their "interactive, tactile learning resources" and they struggled to continue to build relationships via 'ice-breaker' activities (Council for Disabled Children, 2021, p. 21). Benefits of online working were also reported by professionals, such as time efficiency and convenience, being easier to arrange multi-professional meetings, and being more accessible for some (Ashworth et al., 2021a; Council for Disabled Children, 2021).

For many children, the growth in online communication was useful in maintaining regular communication with those outside of their home, such as extended family and friends, and supported their resilience through a largely difficult period (Council for Disabled Children, 2021; Popoola & Sivers, 2021). For some children, the shift resulted in more communication with their family, and for others, online gaming became important in maintaining friendships and making new friends within online gaming communities (Council for Disabled Children, 2021). Communicating online was found to work well for some children, with reduced pressure to interpret non-verbal communication, and children feeling more able to be themselves (Council for Disabled Children, 2021). Other children struggled with the shift to online communication, and found it difficult to maintain their friendships (Council for Disabled Children, 2021).

3.1.3 Summary of the contributing factors

There is a complex picture of mediating mechanisms contributing to individual differences in adaption and outcomes since the COVID-19 pandemic. A key message throughout both the

international literature, and in England, is around how those who were already disadvantaged prior to the pandemic have suffered more so than others, leading to a wider inequality gap. It was also apparent that many of the identified factors were found to be beneficial for some children, while being detrimental for others, due to the complex dynamic of individual circumstances. For example, although many children with SEND struggled during the pandemic, some thrived due to the very different way of living. Similarly, while the change in schooling and communication was a hindering factor for some, for others, the sudden shift was a welcome change.

3.2 What approaches can be taken forwards?

Many studies and articles have reflected on the unusual circumstances that the pandemic brought and taken a growth mindset[6] approach, celebrating what has been achieved, considering lessons learnt and "exploring possibilities for an alternative vision" (Council for Disabled Children, 2021, p. 47), keeping elements that work well for some children, and therefore suggesting how education and children's home lives could change beyond the pandemic (Sivers et al., 2020a). For example, a teacher shared how school staff may "come out better because of it", as they will have gained "understanding and different ways that we can support children" (Asbury et al., 2021, p. 26). The lessons may indicate utility in prioritising time for relaxing, reflecting, spending quality time with family, exploring interests, and that some children may benefit from smaller classes, less sensory stimulation, the option of online learning (Council for Disabled Children, 2021), and a more relaxed and tailored routine

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[6] Growth Mindset is when someone believes that they can get better at something if they put in time and effort, and facing challenges are opportunities to grow and learn (Dweck, 2017).

(Ludgate et al., 2022). Table 7 summarises suggestions for school practice beyond the pandemic, suggested by consideration of the findings of the studies reported above.

Table 7: Key suggestions for educational practice beyond the pandemic, as determined from relevant literature.	
Suggestions for educational practice beyond the pandemic	**Supporting references**
Developing the curriculum to focus more on nurturing children's emotional wellbeing, life skills, and their relationships, instead of academic achievement being the focus. This includes ensuring that Maslow's (1943) hierarchy of needs are prioritised and addressed. Suggestions of changes in educational practice include: • Relational approaches, such as developing strong and trusting teacher-child relationships and providing opportunities and spaces for children to share their views and feelings. • Interactions and connections with the whole school community, such as peer-mentoring schemes or working with peers in other year groups and good communication with parents. • Ensuring a safe, welcoming, and inclusive environment, by communicating clear behaviour, bullying and equality	Council for Disabled Children (2021); Kim et al. (2021a); Popoola and Sivers (2021); Sivers et al. (2020c); Sivers et al. (2020a); Sivers et al. (2020b); Williams et al. (2021).

policies and making improvements to the physical environment.	
Children have enjoyed participating in more creative, physical, and outdoor activities at school and at home and it has therefore been suggested that this could be continued beyond the pandemic through developing the curriculum.	Kim et al. (2021a); Kim et al. (2021b); Lee and Wenham (2023); Popoola and Sivers (2021); Sivers et al. (2020a); Sivers et al. (2020b).
Children expressed a desire for learning that is relevant for their adult lives and securing good jobs, and some pupils were found to have gained independence. The development of a more meaningful curriculum was therefore proposed, that prepares children for 21st century life, rather than passing exams, and "places equal importance on academic, creative, and vocational learning experiences". One child stated, "less test = less stress, you can test our knowledge in different ways." The curriculum could include the following: • Focussing on knowledge, critical thinking, adaptability and innovation skills, metacognition, character qualities and values. • Using Information and Communication Technology (ICT) to learn literacy.	Li and Lalani (2020); Ofsted (2021b); Popoola and Sivers (2021, p. 49).

• Applying topics within core academic subjects to real life experiences.	
The more flexible, dynamic, and creative education provided during the pandemic was advantageous, particularly for children with SEND. It has therefore been suggested that a more equitable curriculum could be developed that provides more flexible learning opportunities for children who struggle to access the national curriculum. This could include teaching a range of vocational skills, a more nurturing approach, and giving pupils more independence and opportunities to develop their metacognition. Children expressed a desire for more agency and autonomy by having "more say in what they learn and how they are taught", such as having "more dynamic classrooms that enable rich debate and ask for pupil's opinions".	Council for Disabled Children (2021); Ofsted (2021b); Popoola and Sivers (2021, p. 48); Sivers et al. (2020c).
The accelerated use of ICT during the pandemic was beneficial and enjoyed by children, such as using Google classrooms, Zoom, and Microsoft Teams to facilitate online learning. It is therefore advocated for the continued use of these practices beyond the pandemic, and to keep ICT and technology at the forefront of teaching. A blended learning approach would be	Asbury et al. (2021); Council for Disabled Children (2021); Li and Lalani (2020); Ofsted (2021b); Sivers et al. (2020c); Sivers et al. (2020b).

beneficial, in which online learning is provided for some children, or in certain circumstances, for example: • Students who are anxious, absent, or excluded, whether they are at home, or within another area of the school. • Students who have thrived in the home environment. • Students with sensory sensitivities could engage in lessons remotely for part of their lessons. • Interventions for over- and under-achievement. • Accommodating more usual, short school closures such as snow days. • One child commented, "I think we should have a medium between online and in person school, perhaps (for example) every Tuesday we are online, then Wednesday we come in person to school". In order for this to work, all children would need access to technology and wi-fi at home.	
Food was a key theme during the pandemic and indicated that it is important for schools to be able to continue to support vulnerable families when children are not attending school. Furthermore, opportunities to engage with food in a social and engaging way is suggested as a supportive strategy, such as engaging in cooking and eating together.	Lee and Wenham (2023); Sivers et al. (2020c).

3.3 Success against the odds

Despite the challenges faced, the pandemic brought success and positive outcomes for some. In their research on home-schooling children with SEND, Ludgate et al. (2022) highlighted that while "positive success stories" were clearly apparent, they tended to be "hidden in the deficit narratives", and Asbury and Toseeb (2022) found that while some children clearly thrived, there was an overall message that the pandemic was very difficult for others.

The literature review offers key trends around how some children have had positive experiences during the pandemic. For some children at home, the reduction in daily demands and stimulation resulted in feeling less tired, overwhelmed, stressed and anxious, and the time at home led to more quality family time and stronger parent-child bonds. Furthermore, for some, the online communication led to the development of new connections and more regular communication with loved ones. For some children who continued to attend school, they enjoyed playing with different children, and benefitted from the smaller classes and more individual support. In terms of learning at home and at school, some children demonstrated improved engagement and progress and found learning more enjoyable, due to the focus on creative, physical, and outdoor activities.

Several mechanisms discussed in the literature were found to benefit some children, while being detrimental for others, due to the complex dynamic of individual circumstances, such as children with SEND, and the change in schooling and communication. Other facilitating factors included being from a family with higher SES, having access to technology, and having parents who prioritised quality family time, placed high value on education and had good IT

abilities. Furthermore, having positive relationships, clear routines, and being informed were found to be key contributing elements.

The value of focussing on positive exceptions within research and practice is evidenced through positive psychology (Seligman & Csikszentmihalyi, 2000), Appreciative Inquiry (AI) (Cooperrider & Srivastva, 1987), strength-based approaches (Rapp, 1998) and solution-focussed therapy (De Shazer, 1982)**.** The approaches have been researched and utilised by many EPs and have been applied to studying the impact of COVID-19. Positive psychology involves scientifically considering what enables happiness and quality of life and involves focussing on strengths as well as weaknesses and building on positives as well as repairing the difficulties (Seligman & Csikszentmihalyi, 2000). Several studies have applied the theory to the pandemic, focussing on aspects such as mental health (Yamaguchi et al., 2020), student engagement (Chu, 2022), and positive growth and collective wellbeing (Waters et al., 2021). The AI process is a "planning strategy that allows individuals to focus on strengths, possibilities, and successes" (Sriharan et al., 2021, p. 285); it has been utilised by many in the EP field (e.g., Morris & Atkinson, 2018), and by researchers reflecting on experiences during the pandemic and reimagining future practices (e.g., Sriharan et al., 2021). Strength-based approaches involve placing the "discovery and use of clients' strengths at the heart of their practice" and has been used within the EP field (Bozic, 2013, p. 18), and been utilised to reframe the challenges faced during the pandemic (e.g., Rashid & McGrath, 2020). Although these models were not applied within the current study, they have a shared theory underpinning them, that focussing on drawing out positive occurrences, instead of problems and deficits, can lead to positive futures.

3.4 Theoretical perspectives

The literature review indicates that there is evidence of teachers, parents and children expressing how some children made progress and experienced positive developments through the changes to their school and home lives during the pandemic. Furthermore, it is apparent that children were influenced by a complex and dynamic range of components. This view is supported by the PPCT or bioecological model of human development (Bronfenbrenner & Morris, 1998), which explains how a person's life circumstances and development can be affected by their own characteristics (such as age, understanding, maturity, personal agency and motivation), their interactions with their systems or environments (such as home, school, local and national community), and the period of time (such as historical periods and the COVID-19 episode). Furthermore, it emphasises how it is important to consider both personal and environmental factors (Jaeger, 2017), positioning the child as an active agent in interacting with and affecting their environment, as well as the environment or system affecting the child, indicating how multidirectional processes mediate and drive human development (Bronfenbrenner & Morris, 2006). The theory was therefore chosen as a relevant conceptual framework within which to position the thesis, and to provide a lens through which to interpret and organise its findings. Table 8 provides a detailed presentation of the key areas of the PPCT model, with corresponding examples from the literature review, drawing on the COVID-19 context.

The bioecological model highlights how individuals interact with their environments through *demand, resource, or dispositional* characteristics.

Table 8: Key areas within the bioecological model of human development, and examples discussed within literature relating to the COVID-19 pandemic.		
Area of the bioecological model of human development	**Explanation**	**Example of application to the COVID-19 context, drawing from the literature review**
Individual Characteristics (Person)	Demand characteristics (such as age, ethnicity, gender), resource characteristics (such as health, skills, and abilities), and force or dispositional characteristics (such as cognitive, social, emotional, and motivational factors).	For example, a child's abilities, ethnicity, age, gender, and level of resilience were identified as potential mediating influences in terms of how significantly the child was affected during the pandemic.
Microsystems (Process and Context)	Proximal contexts which the individual is an active member of, such as home, school, peer groups, and community groups. The child has close interactions with adults within these systems.	For example, family circumstances, school experiences, and community factors were highlighted as key influencing factors during the pandemic.

Mesosystems (Process and Context)	The intersection of microsystems, and how strong and frequent the interaction is between them.	For example, positive relationships between school staff and parents were reported to be a mediating factor in supporting children, with teachers sharing how regular communication can facilitate effective teaching practices.
Exosystems (Process and Context)	A system that the child is not part of, but it can still affect them.	For example, during the pandemic, some parents became more stressed as they needed to work from home, whereas other parents' jobs slowed down and they had more time to spend with their children.
Macrosystems (Process and Context)	National influences or practices, such as discrimination, which can affect microsystems, mesosystems and exosystems.	For example, the COVID-19 pandemic is an international influence that affected parents' jobs, family routines, and the way home and school interacted. It seems to have exacerbated discriminatory inequalities, such as how black children and those with low SES were

		more likely to have less access to resources during the pandemic.
Chronosystem (Time)	Historical and current periods of time.	For example, over the course of the COVID-19 pandemic, there was a range of government laws and guidelines put in place. Therefore, at different points during the pandemic, children experienced diverse outcomes (e.g., some children appeared to benefit from attending school during the closures).

Demand characteristics are personal attributes, such as age, ethnicity, gender, and physical appearance, which influence others' preconceptions and expectations about an individual, and therefore affects any interactions that may occur between them (Tudge et al., 2009). This can lead to enabling or compromising an individual's transactional opportunities and psychological growth (Bronfenbrenner & Morris, 2006).

Resource characteristics are "…biopsychological liabilities and assets", such as health, skills, and abilities, that can affect the extent to which an individual engages effectively with proximal processes (Bronfenbrenner & Morris, 2006, p. 812). For example, while SEND and poor health may be detrimental, skills, knowledge and abilities may act as facilitating. *Dispositional* or *force* characteristics, such as cognitive, social, and emotional factors, can

enable and sustain proximal processes (generative) or interfere with or prevent proximal processes (disruptive). While generative traits may include motivation, curiosity, self-regulation or sociability, disruptive traits include impulsiveness, distractibility, difficulties in emotional regulation or passivity (Bronfenbrenner & Morris, 2006).

The belief that motivation is a generative dispositional characteristic capable of either enabling and sustaining positive proximal processes, or conversely, reducing a child's positive transactions with potentially enabling forces, indicates that theories of motivation may also be relevant to the current study in understanding the findings. For example, Maslow's (1943) hierarchy of needs asserts that individuals' motivation and growth is dependent on certain needs being met, whilst Self-Determination Theory (SDT) (Ryan & Deci, 2000) suggests that individuals must have three needs fulfilled, autonomy, competence, and relatedness, to be motivated to act.

Bronfenbrenner's bioecological model of human development (Bronfenbrenner & Morris, 1998) aligns closely with key aspects of person-environment interaction theories. For example, the person-environmental fit model also places considerable emphasis upon the bidirectional interactions between an individual's characteristics and their environment, with the assumption that "the adequacy of this fit between a person and the environment can affect the person's motivation, behavior, and overall mental and physical health" (Holmbeck et al., 2008, p. 33). When the fit is optimum, the individual is likely to thrive, whereas, when the fit is poor, they may struggle and encounter difficulties. Furthermore, positive growth is facilitated when the "changes within the individual are matched with supportive change within [the] home, peer[s], and school" (Holmbeck et al., 2008, p. 33). Similarly, Rauthmann

(2021, p. 469) draws upon empirical evidence to support his argument that individuals with a high person-environment fit are more likely to be well-adjusted and "motivated to attain, and also monitor, specific fits to their environments".

In conceptualising and designing my own small-scale study, I was interested to understand more fully the principal characteristics of each child and of each child's environment, which had, from the perspectives of the child, a parent and a member of school staff who knew the child well, afforded a good 'fit' during the pandemic, and so have contributed toward improved or accelerated developmental progress and well-being.

3.5 Concluding critical reflections

As many research studies were discussed across both literature review chapters, the critical conclusions drawn for Chapter 2 are also applicable for Chapter 3. Therefore, as discussed in Section 2.2.3.1, the trends outlined in this chapter can be accepted with confidence, provided that the limitations associated with their research designs are understood. For example, the difficulties in studying such a complex phenomenon in a nomothetic way, and the lack of clarity around the extent to which the studies' themes were representative of the population.

The theoretical perspectives discussed in Section 3.4 support understanding of the complex and dynamic network of mediating mechanisms that may contribute to individual differences in adaption and outcomes. However, as Bronfenbrenner's bioecological model of human development (Bronfenbrenner & Morris, 1998) provides so broad and encompassing a theory, it could be argued that it contributes toward the analysis and understanding of many social phenomena, albeit with scope for additional psychological theoretical models to contribute to a more fine-grained analysis. Furthermore, while the bioecological model supports

understanding, it does little to establish generic practical implications, as the theory posits that there are many interconnecting factors that can influence each individual's level of success and progress at any one time. The person-environment fit theory (Holmbeck et al., 2008) is able to inform a more specific understanding of phenomena, providing a useful explanation of how a good 'fit' between the person and their environment can facilitate positive outcomes.

The current study sought to build on the trends identified within the literature, while facilitating a greater depth of understanding through focussing on a small number of cases, using an idiographic research design. The following chapter explains the methodology of the current study.

4. CHAPTER FOUR: METHODOLOGY

This chapter firstly presents the study's aims, philosophical orientation, and research design, before outlining ethical considerations and the rigour and quality of the research.

4.1 Research aims

The aim of this research is to explore the perceptions of children, their parent(s) or carer(s), and a member of school staff whom each child knows well, regarding the child's reported positive experiences and/or progress since the pandemic and what was valued and beneficial within their educational and home experiences. Based on this, the study's Research Questions (RQ) were identified and are outlined in Table 9.

Table 9: Research Questions.	
No.	**Research Questions**
1	In what ways have children made relatively positive progress since the COVID-19 pandemic, identified by themselves, their parents/carers, and their teachers?
2	How do children, their parents/carers and teachers explain what may have led to the positive progress?
3	What do children, their parents/carers and teachers believe would be helpful for the child beyond the pandemic?

4.2 Philosophical orientation

A researcher's philosophical stance holds important implications for the way focus phenomena are studied and therefore the methodology used (Cohen et al., 2017). Whilst

ontology is the consideration of the nature of existence and reality (Gray, 2014), epistemology is concerned with how we acquire knowledge about phenomena (Grix, 2004).

The current study is shaped by a relativist ontology, which recognises that multiple realities co-exist (Cohen et al., 2017; Denscombe, 2021; Thomas, 2017), and individuals' experiences are constructed or created through their own subjective interpretations (Neuman, 2014), with concepts such as symbols and words, and for each person, these will hold different meanings in different situations (Thomas, 2017). Therefore, in line with an interpretivist epistemology, knowledge cannot simply be observed or discovered, but requires close examination and exploration of specific situations (Thomas, 2017). Interpretivism complements research that is interested in people's 'lived experiences' (Denscombe, 2021, p. 43), the way people 'interrelate' within their social experiences (Thomas, 2017, p. 110), and tends to focus on specific issues or events, as opposed to aiming to find universal rules or truths (Denscombe, 2021).

The interpretivist paradigm influenced the methodology used within the current study, which explores children's experiences during the COVID-19 pandemic, by seeking the unique viewpoints of each child themselves, as well as a family member and a member of school staff. As contradictions between participants within each case are inevitable, they are acknowledged within the study. Additionally, interpretivists theorise that an individual's sense of reality is mediated by their social context, such as cultural and historical factors (Crotty, 1998; Gray, 2004; Willig, 2008); this led to the current study being interested in progression over time and involving participants with varying backgrounds and contexts.

The interpretivist paradigm regards it as impossible for researchers to study their chosen area of interest objectively, as the questions asked, methods used, and conclusions drawn are influenced by their positionality (such as their identity, experiences, and values) (Denscombe, 2021). Interpretivist researchers are therefore always "part and parcel of the world they wish to investigate" (Denscombe, 2021, p. 43), and the participants tend to help "construct the 'reality' with the researchers" (Robson & McCartan, 2016, p. 25). As a result, researchers aligned with an interpretivist paradigm must closely examine a phenomenon by immersing themselves in the research context (Thomas, 2017). Researcher positionality is therefore important to acknowledge and utilise, as it inevitably affects the social interactions within data collection and interpretation of the findings (Denscombe, 2021; Thomas, 2017). The current study's research design, informed by an interpretivist perspective, is now presented.

4.3 Case Study

A case study design was chosen for this research for several reasons. Firstly, the design can be embraced by an interpretivist philosophy, as case studies prioritise learning about something holistically, as the social world is complex and indivisible (Thomas, 2016). Thomas (2016) outlines how case studies are useful for exploring the uniqueness of something by looking at the 'case' within its specific context, which is made up of a variety of specific features. Secondly, the current research project has exploratory research questions that are not aiming to determine causal relationships between positive progress and contributing factors. A case study is therefore suitable as they aim to "explore subjects and issues where relationships may be ambiguous or uncertain" (Gray, 2004, p. 123). Thirdly, case studies allow a flexible approach to developing a rich picture or in-depth understanding that is informed by many

different insights (Thomas, 2016, p. 21), with its key purpose to inform professional practice or policy development (Simons, 2009).

Simons (2009, p. 21) offers a definition of a case study as an "in-depth exploration from multiple perspectives of the complexity and uniqueness of a particular project, policy, institution, programme or system, in a 'real life' context."

4.3.1 Case study design process

Once the case study design has been selected, it is important to determine the specific type of case study that will be carried out, in terms of the study's subject, purpose, approach and process (Thomas, 2016). Table 10 and 11 present the classifications that were identified for the current study.

Table 10: Types of case study, taken from Thomas (2016; p.114), with the current study's classifications underlined and in bold.				
Subject	**Purpose**	**Approach**	**Process**	
Special or outlier case	Intrinsic	Testing a theory		**Nested**
	Instrumental	**Building a theory**		**Parallel**
Key case			Single or	Sequential
	Evaluative	Drawing a	**multiple**	**Retrospective**
Local knowledge		picture,		**Snapshot**
case	**Explanatory**	illustrative		Diachronic
	Exploratory	Descriptive		

		Interpretative		
		Experimental		

Table 11: Case study classifications identified for the current study.	
Classifications	**Details**
Subject	The current research topic originated from discussions with school staff within my placement, regarding examples of children who had thrived during the pandemic, despite the undeniable detrimental impact that the pandemic had for many. This personal experience in which I discovered something interesting and unusual sparked my curiosity to find out more about children such as these; therefore, the subject for the current study is a **local knowledge case** (Thomas, 2016).
Purpose	The study is **instrumental, explanatory, and exploratory** in nature. The study is not simply intrinsic and curiosity-driven, there is a purpose in mind: to inform professional practice or policy development (Simons, 2009, p. 21). The study also attempts to explore and understand the experiences of children who have been identified to have experienced positive progress during and since the pandemic and what contributing elements may have led to this progress. Although the contributing elements identified are tentative and specific to individual contexts,

	potential explanations can be offered based on interrelationships between key findings (Thomas, 2016).
Approach	As the current study is inductive in nature and aims to build ideas, with no commitment to consider any pre-existing ideas in the process, the approach is to **build a theory** (Thomas, 2016). Within the current research, the 'theory' is more of an 'explanation' and describes the process of considering the findings in regard to the research questions; I am therefore building an explanation in response to the research questions. As mentioned in the previous section, the research also follows an **interpretative** approach.
Process	This research used a **nested case-study** design, with the experiences of primary-aged children within the local area comprising the overall case study, and each child, a family member, and their school SENCo being one nested unit within the wider connected context. Each child's case formed an integral part of the broader picture which enabled the identification of common factors of four primary-aged children's experiences since the start of the pandemic (Thomas, 2016). Additionally, the participants were asked to **retrospectively** reflect on their experiences during a specific period of time (or **snapshot**), from March 2020 to the day of the interview (Thomas, 2016).

It is important to consider the potential limitations and implications of the chosen research design. Table 12 presents key weaknesses of the case study design, presented by Aucott (2014), and how they may affect the current study.

Potential limitations of the case study design	Considerations regarding the current study
Table 12: Potential limitations of case studies and how these were addressed within the current study, adapted from Aucott (2014).	
Case studies can be time consuming; producing extensive amounts of data and analysis can be challenging.	This study has a small sample size, and the duration of each interview was less than one hour. The method of data analysis was structured and systematic, while offering flexibility; this facilitated an efficient approach to analysis.
Case studies may involve researcher bias, particularly when selecting and analysing data	RTA involves using researcher subjectivity as an asset or tool, as generating knowledge is fundamentally subjective and context dependent. According to Braun and Clarke (2022), researcher bias is therefore irrelevant when engaging in RTA.
Case studies are often criticised as they can generate findings that are not generalisable or transferable to others.	This study does not aim to produce generalisable findings. However, the research does seek to identify contributing mechanisms that led to positive outcomes for the focus children and learn what can be taken forward to inform provisions for these and similar children. It will therefore provide 'common-sense' generalisability in which the reader

	uses their judgement to ascertain if the study's context and the sample's characteristics are similar enough to their specific situation to apply the study's findings (Elliot, 2005).
Case studies have been criticised for being descriptive and having no purpose.	The key findings of the research will be shared with the participants and local Educational Psychologists (EP) in a clear and pragmatic way, which may inform their future practice.
Case studies have been criticised for lacking rigour.	Reflexivity is a disciplined approach of critically interrogating research practice (Braun & Clarke, 2022).

4.4 Participants

This study aimed to explore the reported positive experiences of, and outcomes for children since the COVID-19 pandemic. Table 13 outlines the criteria used for participant selection and the rationale for selection of these criteria.

4.4.1 Recruitment

A heterogenous sample of four primary school children was recruited to explore a range of experiences of children within different age groups, sexes, ethnicities, and children who attended school during the school closures and children who stayed at home. When harnessing the bioecological model as a conceptual framework, it is recommended to explore multiple case studies, carefully recruit a heterogenous sample, and consult with multiple microsystems (Bronfenbrenner & Crouter, 1983).

Table 13: Inclusion and exclusion criteria for participant recruitment, and rationale for selection of these criteria.		
Inclusion criteria	**Exclusion criteria**	**Rationale for selection of these criteria**
Primary aged children who have been reported by their teachers and parents as having experienced some kind of positive progress since the COVID-19 pandemic (since March 2020), in comparison to before the pandemic. For example: • An aspect of their emotional wellbeing may have improved (e.g., less outbursts, more settled or relaxed…). • An aspect of their social wellbeing may have improved (e.g., getting on	Secondary aged children. • Children who have only experienced negative effects since the COVID-19 pandemic (since March 2020). • Children who have not experienced any particular effects since the COVID-19 pandemic.	During the COVID-19 pandemic, I noted a narrative that some primary-aged children thrived during the pandemic, despite the challenging circumstances that everyone was facing. Review of research literature also consistently indicated some cases in which children were judged to have experienced relatively positive outcomes since the COVID-19 pandemic. Furthermore, through supervision with my placement supervisor, it was discussed that recruitment of participants from primary schools was more likely to provide logistic

with others, building relationships, a sense of belonging and connectedness). • Their self-esteem may have improved. • Their behaviour may have improved. • Their motivation to learn may have improved (e.g., participated or engaged more fully in their education). • They may have become more independent (e.g., in terms of their learning or self-help skills). • Their academic skills may have improved.		ease and would be more manageable within the time and word length constraints. This is because recruitment was more probable, due to the higher number of link primary schools within the EP service. It was also judged likely to be easier to gain a comprehensive view of the child as the school SENCo and class teacher are likely to have a holistic understanding of the child (due to a lower number of pupils attending a primary school and because pupils have one class teacher as opposed to a different teacher for each subject.)

Children who were perceived to be relatively emotionally stable and whose family lives were relatively stable (as judged by school staff).	Children who were perceived to be experiencing acute episodes of mental distress or family difficulties (as judged by school staff).	Ethical reasons: the BPS Code of Human Research Ethics states that harm to research participants must be minimised (Oates et al., 2021, p. 9).
Children who have had school engagement since the COVID-19 pandemic.	Children who are no longer on the school roll and are being solely home schooled.	The study aims to explore elements of both home and school that appeared to facilitate positive outcomes and identify what can be taken forward for such children during COVID-19 and beyond.

Participants were invited to take part via opportunity sampling within Oakbury Educational Psychology Service. A sampling frame was used to attempt to gain a heterogenous sample. As the response rate was low, all those who met the criteria, fit within the sampling frame, and were willing to participate were included. It should be noted that recruitment was fragmented as it was conducted during a time in which school staff were still struggling with the effects of the pandemic. See Figure 4 for the recruitment process.

4.4.2 Case overview

An overview of the four cases recruited to participate within the study is presented. Figure 5 shows each child with their parents/carers and core professionals as nested units within the wider connected context. Table 14 shows the location of each child's education during the two school closures and Table 15 presents a summary of participant information, gathered from the children's school SENCo and parent/carer.
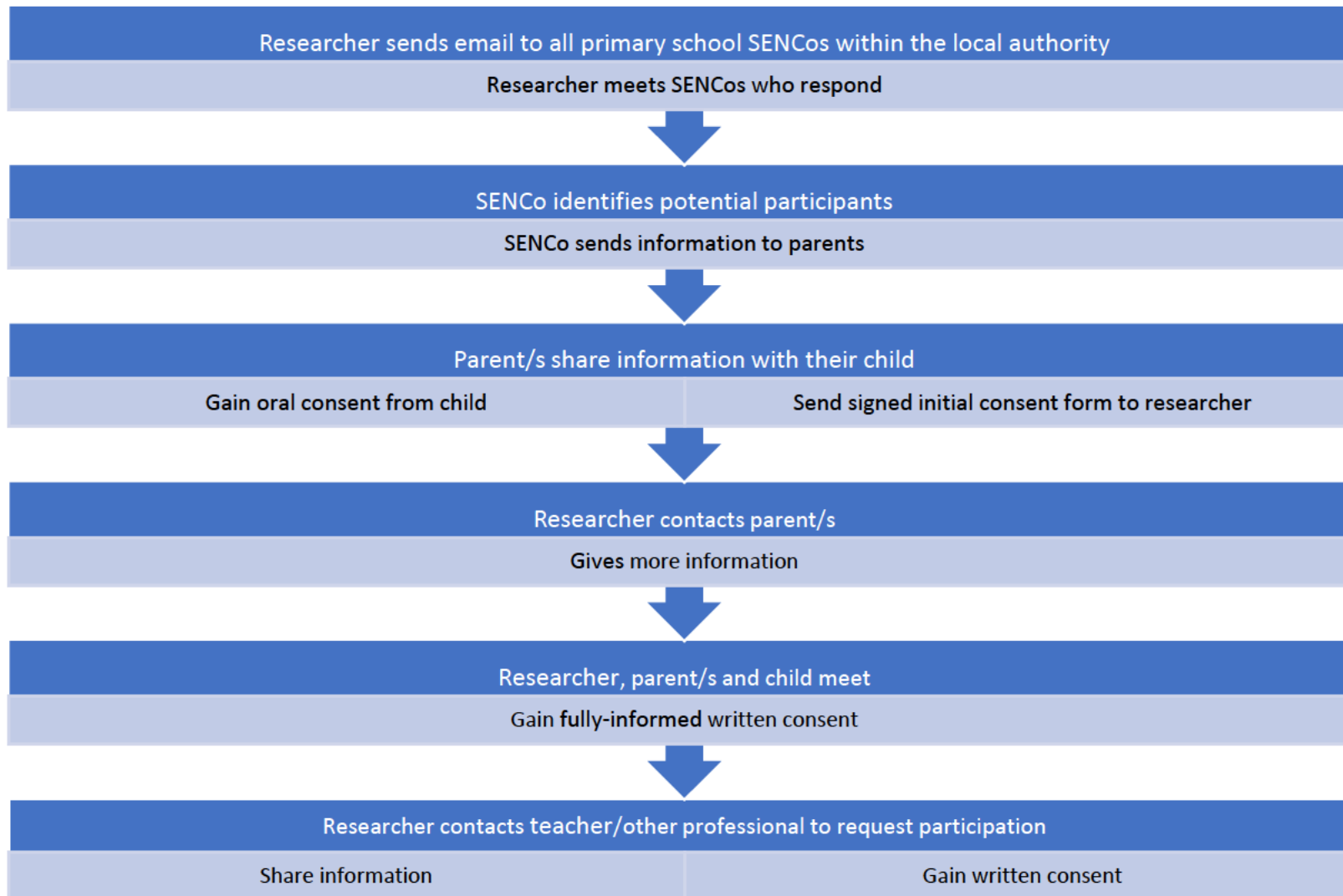
Figure 4: Recruitment process for the current study.

Overall case study of the experiences of primary-aged children within the local area

Case 1

<u>Jake</u>

Jake's mother

Jake's school SENCo

Case 2

<u>Roger</u>

Roger's mother

Roger's school SENCo

Case 3

<u>Rosie</u>

Rosie's mother

Rosie's school SENCo and safeguarding lead

Case 4

<u>Callum</u>

Callum's foster carer

Callum's school SENCo and safeguarding lead
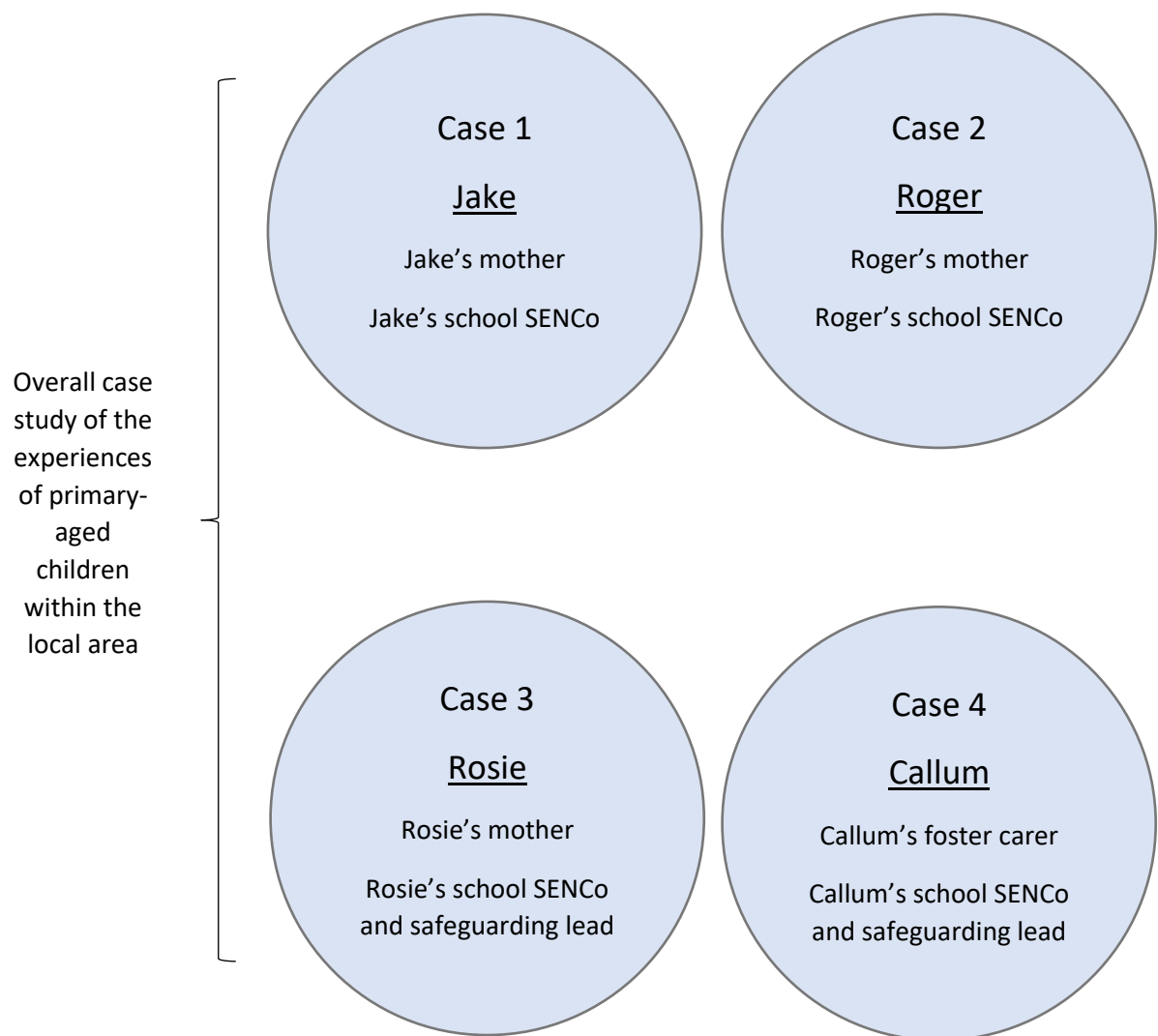
Figure 5: Participants within the four nested cases that make up the overall case study. N.B. Callum and Rosie attended the same school and therefore, the same two members of staff were interviewed from their school.

Pseudonym	Location during first school closure	The reason for attending school	Location during second school closure	The reason for attending school
	Table 14: Information regarding child participants' education during school closures. The school closure/s that participants indicated contributed to positive progress are highlighted in blue.			
Jake	Home	N/A	School	Key worker child
Roger	Home	N/A	Home	N/A
Rosie	Home	N/A	School	Key worker and vulnerable child
Callum	School	Vulnerable child	School	Vulnerable child

Table 15: Summary of participant information, gathered from the children's school SENCo and parent/carer.								
Pseudonym	**Sex**	**Age**	**Year group**	**Ethnicity**	**Contextual family information**	**Family member who participated in research**	**School staff member/s who participated in research**	**Length of time school staff knew child**
Jake	Male	6y 5m	Year 2	Black African	Lives with his mother and father.	Mother	School SENCo	Around six months prior to the pandemic.
Roger	Male	9y 5m	Year 5	White British	Lives with his mother (employed as a SENCo), father, and older sister.	Mother	School SENCo	At least one year prior to the pandemic.

Rosie	Female	8y 6m	Year 4	White British	Lives with her mother, father, and older brother.	Mother	School SENCo and Safeguarding Lead	At least one year prior to the pandemic.
Callum	Male	10y 5m	Year 6	White Czech	Since December 2020, he has lived with his foster carer, older sister, younger brother, and his carer's adult son and his girlfriend.	Foster carer (female)	School SENCo and Safeguarding Lead	At least one year prior to the pandemic.

4.5 Semi-structured Interviews

Denscombe (2017) advises that it is important to select a data collection method that is best suited for the specific purposes of the research, arguing that interviews are best suited to research which aims to "explore complex and subtle phenomena", such as understanding individuals' beliefs, feelings, and experiences in depth (Denscombe, 2017, p. 203; 2021). Cohen et al. (2017) concur that interviews can allow greater depth compared to other methods and De Groot (2002, p. 51) argues that they are a "very useful qualitative approach to inquiry into complex educational phenomena". Interviews are "a common form of data collection in case study research" (Hancock et al., 2021, p. 52) and a fundamental aspect of case study methodology in supporting the exploration of explanations of key aspects of the case study (Cohen et al., 2017; Yin, 2018). As they produce qualitative data, they align with the interpretivist paradigm of this research (Denscombe, 2021). Interviews were therefore used within the current study, in aiming to elicit rich, in-depth accounts of the unique viewpoints of each participant in terms of the child's experiences during the pandemic.

Interviews are flexible, in that they allow multi-sensory information to be gathered, such as verbal and written (Cohen et al., 2017). This was beneficial in the current study as I was able to supplement the verbal contributions with visual activities, including drawings, picture cards, and in one case, a child showed me a PowerPoint that he had previously created. However, interviews have some limitations; these are explained and addressed in Table 16.

Table 16: Limitations of interviews and how they have been addressed within the current study.	
Limitations of interviews, adapted from Cohen (2017) and Denscombe (2021).	**How I have addressed the limitations in the current study**
Expensive in time	I tried to keep the interview duration under one hour and tried to keep the interview focussed with a shared visual of key notes to avoid repetition and maintain concentration.
Interviewee fatigue	
Inconvenient for respondents	I offered to meet the participant at a time and location that was convenient and suitable for them, e.g., at school pick up time, and I offered to do it online.
Open to interviewer bias	I emphasised how I was genuinely interested in their views and engaged in the interview in an open and non-judgemental way.
Anonymity may be difficult	I gave the participants the option to conduct the interview at the child's school or virtually (which would have provided them with more anonymity).
Reliability (consistency is hard to achieve as the data is affected by the specific context and the specific individuals involved)	An interview schedule was used to maintain some consistency in terms of the content and order of the questions asked.

Another data collection method that was considered was focus groups, as they also allow the exploration of participants' beliefs, feelings and experiences (Denscombe, 2021). However, Lune and Berg (2016, p. 94) explain that focus groups do not tend to be used to gather data on 'events, behaviours, or feelings', and that interviews are more suitable in studying these phenomena. Additionally, the group interactions within focus groups are a central mechanism (Denscombe, 2021; Lune & Berg, 2016) and the participants are therefore shaping and constructing the data together, which results in a collective view (Cohen et al., 2017). In contrast, interviews allow participants to express their own interpretations of their experiences (Cohen et al., 2017). Furthermore, focus groups can be challenging to manage and confidentiality is a key issue.

4.5.1 Interview procedure

All the interviews were individual, apart from two paired interviews, in which the SENCo and Safeguarding Lead from the school that Callum and Rosie attend, contributed to the interview together. This was because in this instance, the children had both been involved with social care, and the SENCo indicated that the Safeguarding Lead would be able to supplement her knowledge of the children.

The interviews took place within the child's school, in a quiet and private room (Denscombe, 2021), apart from the interview with Roger's mother, which was conducted online via Microsoft Teams. Each interview lasted around one hour, which Robson and McCartan (2016) judge to be 'valuable', while not too time-consuming for interviewees.

To address any potential power imbalances (Division of Educational and Child Psychology, 2002) and support participants in feeling comfortable and confident to share their views and

experiences, I offered them a choice of where they would like to engage in an interview (e.g., in school, in their home, online), and prior to the interview, I had a conversation with them, to build rapport and inform them of the details of the research and the questions they would be asked. To support participants' understanding and ability to contribute effectively during the interview, I considered the guidelines from Denscombe (2021), summarised in Table 17.

Table 17: Guidelines for interviewers, adapted from Denscombe (2021; pp. 235-236).	
Interviewer skills	**Details**
Be sensitive to interviewees' feelings	Where interviewers are able to empathise with the informant and to gauge the feelings of the informant, they will be in a better position to coax out the most relevant information.
Tolerate silences	A slight pause can encourage the interviewee to reflect on things for a moment before developing their thoughts further.
Use prompts appropriately	Nudge the informant using suitably subtle prompts.
Use probes appropriately	An informant might make a point in passing which the researcher thinks should be explored in more detail. Some explanation might be called for, or some justification for a comment.
Use checks appropriately	The researcher can present a summary of what they think the informant has said, which the informant can then confirm as an accurate understanding or can correct if it is felt to be a misunderstanding of what has been said.

Respect the rights of the interviewee	Accepting if a person simply does not wish to tell you something and knowing when to back off if the discussion is beginning to cause the interviewee particular embarrassment or stress.

The structure of interviews can vary considerably, ranging from formal with a standardised structure, to informal with key topics being discussed in a conversational approach (Cohen et al., 2017); case study interviews tend to favour the latter (Yin, 2018). Semi-structured interviews involve open-ended questions that are adapted for each interviewee, in terms of the exact wording and the order of the questions (Cohen et al., 2017); and they support interviewees to elaborate on their ideas (Denscombe, 2021). Unstructured interviews are even more flexible and non-directive, in which the interviewer raises a topic and allows the interviewee to 'pursue their own train of thought' (Denscombe, 2021, p. 230). The current study adopts a method which is somewhere in between the two in order to maintain some consistency between the interviews, whilst retaining the flexibility necessary in sensitively attuned person-centred communication. Although each adult interview varied depending on the participants' responses, each interview followed a similar schedule, presented briefly in Table 18, with more detailed interview schedules located in Appendices O-Q. The approach used within the children's interviews is discussed in Section 4.5.2 and a detailed schedule is presented in Appendix Q.

Phase	Details	Rationale
Table 18: Brief schedule for adult interviews.		
Introduction	• Explaining purpose of the research, their right to withdraw, confidentiality, and how the data will be stored and used. • Rapport building. • Opportunities to ask questions.	• In line with ethical considerations (BPS Code of Human Research Ethics) (Oates et al., 2021). • To aim for the participants to feel comfortable in sharing their experiences.
Data collection	• Annotating a timeline of the school closures with key events (see Appendix R). • Discussion around the positive progress for the child and what may have contributed to those outcomes. A simple visual structure on an A3 sheet of paper was used to note these aspects. • Considering what may be useful for the focus child going forwards.	• Timeline activity and discussions were conducted during the pilot study and received positive feedback from the interviewee. • The visual structure was suggested by the adult participant following the pilot interview. • Discussions aligned with research questions.

Debrief	• Thanking the participant for taking part. • Informing them that they can get in touch with me with any questions.	• In line with ethical considerations (BPS Code of Human Research Ethics) (Oates et al., 2021).

A timeline activity was used to aid the interviewee's memory of the chronology of the school closures over the course of the pandemic and aid a discussion about any key events that occurred in the child's life during the pandemic. The timeline was annotated in order to act as an aide memoire during the interview, and a record of key information for the data analysis. The timeline is presented as Appendix R.

As the interview schedule and techniques (e.g., timeline) were used during the pilot study and received positive feedback from the interviewee, these remained unchanged in the main study. As explained in Section 4.6, the feedback from the pilot interview with a parent led to the creation of a visual structure to aid and structure discussion and act as a prompt. Furthermore, my reflections from the pilot interview with the child led to my creation of prompt cards (see Appendix S), which I also had available to use in the adults' interviews if needed. This is explained further in Section 4.6.

4.5.2 Interviews with children

In addition to the interview procedure explained in the previous section, it was important to address the communicative limitations that the child participants were likely to encounter. Hill (2005) discussed how there are three key differences between adults and children as research participants: verbal competence, power or status, and vulnerability. It was therefore

important to explore and consult a wide range of relevant literature to design a plan for the children's interviews. Table 19 presents a tabular summary of interview approaches and techniques to be considered when interviewing children, and how these were applied to the current research.

4.6 Pilot study

Conducting a pilot study is considered good practice in order to use the data collection tool in practice and identify areas that can be improved on, before conducting the 'real' research (Denscombe, 2017, 2021). Furthermore, I aimed to become more fluent in my interviewing skills, and to ensure that it was a comfortable experience for the participants.

Within the current study, two pilot interviews were conducted with an eleven-year-old child and their mother, both via video-conferencing, in line with interviewee preferences. The participants were recruited through convenience sampling, they met the inclusion criteria, and they were not included in my final sample. I conducted the pilot study while I was continuing to search and read literature on interviews with children, therefore, the pilot did not include all the approaches discussed in the previous section.

Table 19: Interview approaches to be considered when interviewing children and how they were applied within the current research.		
Area of interview technique/ approach	**Information found in relevant literature**	**Applications within the current study**
Introduction: explaining the research, building rapport, and addressing the power imbalance	• The student role may decrease the power imbalance as there is a shared role of 'learner' (Gibson, 2012, p. 149). • Explain the purpose of the study in a child-friendly way, that conveys that the interviewer is genuinely interested and that they do not have to participate, such as ''I'm hoping that you will let me ask you some questions about what it's like to…'' (Gibson, 2012, p. 154). • "Use ground rules to clarify the role that children will play in the interview process" (Gibson, 2012, p. 149).	• I introduced myself as a student/learner. • I planned a script to explain the purpose of the study: "I am interested to find out about children who have done really well during the pandemic, even though there have been some really hard things to deal with! Your teacher and your family told me how well you have been doing and that's why I've invited you to take part in this research! I'm hoping that you will let me ask you some questions about what it was like….'' • I planned some 'ground rules', such as: "There are no right or wrong answers."

	• Interviewers can explain that the interview will be recorded, by encouraging the child to explore the Dictaphone. The interviewer can demonstrate how to use it, and then allow the child to practice recording themselves and asking the interviewer a question before playing it back. This may strengthen the child's motivation to participate in the interview, and may reduce the power imbalance (Gibson, 2012, pp. 157-158). • Begin with simple, closed-ended questions to ease the child into engaging with the interview (Gibson, 2012; Irwin & Johnson, 2005). • The use of task-based activities, such as drawing, can help the child feel more relaxed and comfortable (Faux et al., 1988; Kortesluoma et al.,	• I showed children the Dictaphone, demonstrated how it worked, and then let them record themselves saying something/asking me something and then played it back. • I began with simple questions, such as: "How old are you? What year group are you in?" • I provided the child with paper and different coloured pens and encouraged them to draw and/or write.

	2003), and can reduce the power imbalance by taking the focus away from the interviewer, and allowing the child to participate in something somewhat autonomously (Aldiss et al., 2009; Coad, 2007; Lambert et al., 2013).	
Child-centred approach	• "Know the developmental level of the child. Allow the child to talk freely about their experiences even to the point of leading the interview. Be creative, playful, and childlike in interviews. More than one interview guide may be needed with questions that address the different developmental levels of the participants." (Spratling et al., 2012, p. 52) • "Strategies that can facilitate the development of a working relationship, enhance rapport, and,	• I spoke to the child's parents and school staff ahead of the interview to enquire about the child's developmental levels, communication skills, and what might facilitate their engagement with the interview. • I met with the child once prior to the interview in order to get to know each other (through playing games and asking each other questions, using picture cards), and to explain the research to the child.

	possibly, improve the quality of the data collected include (a) working with parents to learn about how the child prefers to interact and what might facilitate his or her comfort in an interview context; (b) using one or several pre-meetings to get to know the child before the research study begins" (Irwin & Johnson, 2005, p. 824).
	
	• Be "open to moving completely off topic (to one of interest to the child) to facilitate conversation and comfort" (Irwin & Johnson, 2005, p. 825).
	
	• Consider going with the flow and allowing things to happen naturally, as attempting to control the interview may not be the best way of gaining the child's authentic views and feelings (Irwin & Johnson, 2005).
		• I strived for a balance of following the child's lead and redirecting the child to more relevant topics. I always allowed the child to share anything they wished to tell me.
		
		• I adapted to the child's responses and flexibly used a range of approaches within the interviews:
		
		   • I asked the child to draw a picture of how things were before and after (giving more specific periods of time for each child, depending on when they made progress).
		
		   • I asked the child how were things before/after? (With use of visual prompt cards – Appendix S).

	• "Allow adequate time to actively engage with children through play, games and activities and show an interest in them and their lives other than merely collecting data for a study" (Lambert et al., 2013, p. 612).	• I encouraged children to draw while I asked them questions.
Individualised interviews using a toolkit of methods	• Use a toolkit of methods in a dynamic way for each child (Kutrovátz, 2017; Lambert et al., 2013; Teachman & Gibson, 2013). For example, photographs, sentence starters (Teachman & Gibson, 2013), drawing and writing (Gibson, 2012; Kutrovátz, 2017; Lambert et al., 2013; Punch, 2002). • "Use creativity and play to enhance the interview" (Spratling et al., 2012, p. 52).	• I adapted to the child's responses and flexibly used a range of approaches within the interviews: • I used visual prompt cards and sentence starter cards to facilitate discussion. • I provided the child with paper and different coloured pens and encouraged them to draw and/or write. For some children, I was able to ask them questions while they were drawing. Periodically, I would ask them what their drawing was.

Communicative style	• If a child struggles to answer a question, provide them with a 'shopping list' of terms to choose from (Irwin & Johnson, 2005, p. 821). • Encouragement, open-ended questions, and question requests ("can you tell me…?") provide rich data, whereas sequence of utterances (two or more consecutive statements/questions that the child cannot respond to with a single response) and closed-ended questions produce the less rich data (Ponizovsky-Bergelson et al., 2019). • "Open-ended questions allow children to describe their views in their own words, thus eliciting their subjective frame of reference" (Kortesluoma et al., 2003). • Interview strategies (Gibson, 2012, p. 149):	• When I asked a child how they felt at different periods, I showed them 'feelings cards' (each card had a word and a picture depicting a feeling). • I used words, noises, and non-verbal communication in order to communicate encouragement. • I asked open-ended questions and question requests, such as, "Can you tell me about what has been going well since the COVID lockdowns?" • I encouraged the child to provide more detail by using follow-up questions, prompts, and reflective statements, e.g., "What did you like about that?", "Ok, so you did art, you played football, you got to watch YouTube, what else did you do?", "Then you made friends?"

	"Primarily use open-ended questions. - Encourage detail by using follow-up questions and prompts. - Be patient, don't be too quick to redirect or jump to conclusions. - Refrain from providing cues or assistance answering a question. - Use reflective statements, summary statements, acknowledgment of feelings, and praise for engagement generously."	I tried to leave plenty of time for the child to respond.

I asked both participants for feedback on their interview experience. While both participants reflected on the interview positively and shared that they enjoyed the session, the adult participant also had some constructive feedback. They shared that it would be helpful to design a visual structure to aid discussion and act as a prompt, which would help keep the interview structured and ensure that everything is covered. I therefore created a simple visual structure on an A3 sheet of paper, with "Positive outcomes" on the right half of the page, and "Aspects of home/school that have led to the positive outcomes" on the left side (Appendices O and P).

From both interviews, I was able to reflect on my interviewing skills and the approaches used, noting that the flexible nature had been successful, and that it would be helpful if I allowed more time for the participant to talk. I also considered that it would be helpful to ask more questions that aimed to answer RQ2, thus aiding understanding of what may have contributed to the child's positive outcomes. These questions were therefore added to the children's interview schedule (Appendix Q): "What have you found helpful?", "What was it about that that you liked/didn't like?", and "What do you think helped you achieve that/feel like that?". Similar questions were added to the adults' interview schedules (Appendix O and P).

Additionally, as there was a lack of discussion about the child's learning experiences, I created some prompt cards to facilitate discussions about a range of topics (Appendix S). I also noticed a gap in the data gathered from the child's pilot interview; there was a lack of expression of the extent to which their experiences were positive. The child who participated in the pilot study did not have any additional needs or any known challenging circumstances and was older than the children in my sample. I therefore considered that the children in the sample

would likely have a lower level of emotional literacy and that it would be helpful to use feelings cards in order to aim to facilitate more in-depth discussions about how the children felt during the pandemic period.

4.7 Ethical considerations

Ethical approval to conduct this study was applied for and granted by the University of Birmingham's Ethical Review Committee (ERN_21-0108). The research plan was fully compliant with the BPS Code of Human Research Ethics (Oates et al., 2021). Table 20 outlines these considerations and the steps taken to address them.

Table 20: Ethical considerations of this research and how they were addressed.

Ethical considerations, drawn from the BPS Code of Human Research Ethics (Oates et al., 2021)	Steps taken
"Researchers should ensure that every person from whom data are gathered for the purposes of research consents freely and voluntarily to participation, having been given sufficient information to enable them to make an informed choice. They should be free during the data gathering	• Within the recruitment process, attendees were approached by the school SENCo and given an initial form that included brief information and asked for consent for me to contact them. • I had a telephone conversation with each adult participant to explain the study in greater detail and explain that their participation was entirely voluntary. I then emailed them with a more detailed information sheet. I confirmed that they

phase to withdraw or modify their consent" (Oates et al., 2021, p. 12).	had had a conversation with their son/daughter to determine if they wanted to take part. • I met with each child prior to the interview to explain the research in an appropriate way and I gained their informed consent to participate. • During each interview, I assured the participants that they were able to withdraw their consent at any time during the interview, or up to two weeks after the interview.
"Participants in psychological research have a right to expect that information they provide will be treated confidentially" (Oates et al., 2021, p. 21). "In the event that confidentiality and/or anonymity cannot be guaranteed, the participant must be warned of this in advance of agreeing to participate" (Oates et al., 2021, p. 21).	• As the participants within each case study knew each other, anonymity could not be guaranteed. • Participants were advised that their names would not be used within the research, and pseudonyms and their role would be used (e.g., Jake's mother).

"Harm to research participants must be minimised" (Oates et al., 2021, p. 9).	• Participants were asked to focus on positive experiences.
	
	• I adopted a sensitive, respectful, empathetic, and attuned manner towards participants, consistent with the therapeutic skills developed as part of the EP doctoral training course.
	
	• I was sensitive to the participants' body language and if they appeared to be distressed, I would have offered a break and either suggested continuing another time or withdrawing their involvement in the study completely.
	
	• I offered a debrief to participants when necessary:
	   o Listened to any concerns they had, using empathy and my knowledge of SEND procedures and processes.
	   o Asked if they would like their concerns passed to relevant professionals.
	   o Signposted to support within school or relevant agencies, e.g., parent advocacy group.
	   o Allowed time to ask questions.

	• Participants were given my contact details; in case they wanted to ask questions or make a complaint.
"A difference in power typically exists between researchers and participants, even if researchers seek to minimise it. Sensitivity is, therefore, essential, and caution is always necessary" (Oates et al., 2021, p. 9)	• I gave participants a choice of how they would like the interview to take place (i.e., time, location, and in person or virtual). • Participants were reminded that they have a right to withdraw.

4.8 Analysis

4.8.1 Analysis within each case

RTA was chosen to analyse the data within each of the four cases. Key considerations for the rationale in choosing this method were:

- RTA is a theoretically flexible method. I was therefore able to use an inductive, or 'bottom-up' approach, meaning that the analysis did not involve trying to fit the data into any existing theories. I was able to use an experiential framework, in which the "analysis aims to capture and explore people's own perspectives and understandings" (p. 10) and could explore meaning at both semantic (surface) and latent (underlying) levels (Braun & Clarke, 2022).

- RTA is suitable for highlighting both similarities and differences across a data set (Braun & Clarke, 2006) and can be used with a heterogenous sample (Braun & Clarke, 2020). This

fits with the current research, as I analysed interviews from a child, their parent/carer, and members of school staff to build a rich and detailed picture of the child's experiences, while noting any contradictions.

- RTA offers breadth rather than depth, in comparison to Interpretative phenomenological analysis (IPA) (Spiers & Riley, 2019), which aligns with the current research, as I wanted to attempt to include details across all participant interviews, as opposed to focussing in on unpicking specific issues (Spiers & Riley, 2019).

- RTA can provide pragmatic findings compared to IPA, such as facilitating factors, which can inform practice (Spiers & Riley, 2019).

- Many research studies that analysed data on the impact of COVID used TA (e.g., Council for Disabled Children, 2021; Ludgate et al., 2022; Popoola & Sivers, 2021; Rogers et al., 2021).

According to Braun and Clarke (2022), RTA is "a method for developing, analysing and interpreting patterns across a qualitative dataset, which involves systematic processes of data coding to develop themes" (p. 4). The method involves a six-phase process, such as familiarisation with the dataset, coding segments of the data, developing and refining themes, and writing a coherent and compelling story about the dataset that addresses the research questions. See Appendix T for a tabular summary of the six phases and the actions I took for each case.

Braun and Clarke (2022) explain that reflexivity is a fundamental characteristic of TA and increases the quality of research. It involves "a disciplined practice of critically interrogating what we do, how and why we do it, and the impacts and influences of this on our research" (p. 5). When engaging in RTA, researcher subjectivity is a valued tool as opposed to a problem

to be addressed, and researchers should therefore be aware of, embrace and interrogate their own personal and professional standpoints, such as their identity, and their values and assumptions (Braun & Clarke, 2022). To embrace reflexivity in the current research, I engaged in a task outlined within Braun and Clarke's (2022; p. 16-18) practical guide to RTA which involved considering my intersecting social positionings, life experiences, political views, professional identity and experiences, and positionings related to my specific topic of research. I was able to revisit and draw from this activity as I engaged in a reflexive journal, which supported my reflecting, questioning and decision-making throughout the project.

The key findings within each case are presented as a thematic map and a vignette. While the vignette provides a descriptive context, the thematic map provides a fragmented presentation of the themes. The two methods therefore have distinctive features and are also complementary, as each one offsets the limitations of the other. Additionally, a detailed case by case presentation of each theme and sub-theme for each nested case is presented in Appendix X; it was not possible to include this level of detail in the main body of the thesis due to word count limitations.

The vignettes present a narrative synthesis of the themes abstracted from the RTA process and my interpretations of the child's experiences, derived from the subjective perspectives of the focus child, their parent/carer and member/s of school staff. These vignettes aimed to provide the reader with a succinct and digestible 'story' of each child's unique context and experience, suggesting key attributes, experiences and proximal and / or distal processes which were judged to have led to the reported positive outcomes, in chronological order. Through an interpretivist approach, the vignettes endeavoured to represent the child's

autobiographical/biographical narrative, from the perspectives of all the participants within each nested case. The use of vignettes in qualitative research is supported by Reay et al. (2019) who suggest that vignettes capture "richness in an easily-readable and credible way" and engage the reader, while enabling researchers to combine data from various sources into one narrative.

4.8.2 Analysis across cases

To bring the four cases together and highlight some overall key patterns amongst all or most of the cases, which can be discussed as implications for practice, I used a combination of aspects of techniques suggested by Yin (2018) and Miles and Huberman (1994), outlined below.

Firstly, Yin (2018) suggests a cross case-synthesis which involves comparing "within-case patterns across the cases" (p. 196), while being aware of how comparable the individual cases are to warrant shared findings between them. Although the current sample was largely heterogenous, the cases all involved primary-aged children who lived in the local area and who were experiencing difficulties before or at the start of the pandemic.

Another technique proposed by Yin (2018) involves building explanations of a phenomenon by identifying patterns that fit all (or most) individual cases, while each case has unique details within them. It is suggested to use a partly deductive and partly inductive approach, whereby the researcher makes an initial, tentative hypothesis and then compares the data against the hypothesis (Yin, 2018). However, the current study involved a stronger focus on an inductive approach. Miles and Huberman (1994) discussed a similar approach for establishing patterns across cases to generate meaning. They suggest tying the findings within one case to

overarching explanations across cases by using an inductive approach, involving "establishing the discrete findings, relating the findings to each other, (and) naming the pattern" (p. 262).

In practice, my approach to analysing across the four cases involved creating a table and inputting key findings of each case for RQs 1 and 2, using colour coding to highlight patterns across the cases. I also printed the eight thematic maps (one for each case and RQs 1 and 2) and studied them altogether, while making notes. From these processes, meaningful, overarching themes emerged that enabled the creation of two thematic maps (for RQs 1 and 2).

4.8.3 Transcription

All interviews were audio recorded with a Dictaphone apart from Roger's mother's interview, which was video recorded via Microsoft Teams; I produced a transcript for each interview. The purpose of the transcripts was to interpret and generate meaning from the data (Halcomb & Davidson, 2006) and provide participant quotes within the write up. It was therefore most appropriate to use a form of 'intelligent verbatim', as 'full verbatim' was unnecessary and time-consuming, and so that the participants' quotes were easier to read and omitted repetitions or vocalisations such as "er" verbal fillers (McMullin, 2021). More specifically, I decided to produce a transcript in line with Henderson's (2018) creation of 'tidy transcription'; which focuses on content as opposed to structure, and only includes the complete words spoken that the researcher decides are necessary for the meaning of the particular comment. It also includes punctuation and grammar, such as commas and upper case letters where appropriate, to tidy the data (Henderson, 2018).

4.9 Research quality

Traditional concepts such as reliability and validity are not best suited to assess the quality of qualitative case studies, because with one overall case and the small sample size, it cannot be assumed that similar results would be found if the study was to be repeated (Thomas, 2016). Similarly, there is no way of determining the extent to which a study has found out what the researcher intended to find out, as within case study research, the researcher often does not know what they expected to find out (Thomas, 2016). This section therefore discusses the quality and trustworthiness of the current research in line with Yardley's (2015) framework which outlines the core principles of 'sensitivity to context', 'commitment to rigour', 'coherence and transparency' and 'impact and importance'. Table 21 presents Yardley's (2015) framework, along with considerations within the current study.

Table 21: Actions taken to enhance the quality and trustworthiness of the research, based on Yardley's (2015) framework.		
Core principle	**Explanation of principle**	**Considerations of principle within the current study**
Sensitivity to context	• Sensitivity to existing relevant literature. • Sensitivity to participants' perspectives and socio-cultural context and the	• Existing relevant literature was studied to support the development of research questions and the interpretation of findings. • A flexible interview structure and open-ended questions supported participants to communicate freely.

	extent to which they feel able to express themselves. • Analysis is sensitive to the data.	• Data analysis involved reflexivity and in-depth analysis and interrogation of the coding process and theme development, while recognising complexities and inconsistencies across the dataset.
Commitment to rigour	• Commitment to carefully recruiting participants who are relevant to the research questions. • Commitment to engaging thoughtfully and extensively with participants and data analysis.	• A heterogenous sample was recruited to explore experiences from a range of age groups, sexes, ethnicities and included both children who attended school and stayed at home during the closures. • Pilot interviews were conducted which resulted in adding visual aids to facilitate discussion and offer children options for their answers. • A reflexive approach to TA was carried out, while taking steps to ensure quality (e.g., reflexive journaling, discussing analysis with others, and spending a sufficient amount of time on analysis).
Coherence and transparency	• Coherence between the epistemology,	• The methodology and interpretation of data were in line with the interpretivist epistemology.

	methodology and interpretation. • The methodology is transparent. • Reflexive approach to analysis.	• The data collection methods are outlined in Section 4.5 and Appendices O-T. • The reflexive data analysis process is described in Section 4.8 and Appendices U-W.
Impact and importance	• The findings contribute to understanding of the phenomenon and the development of practice.	• Rationale for research is outlined in Section 1.2 and was informed by professional practice and relevant literature. • Findings will be communicated to the participating schools and the local Educational Psychology service to inform the development of practice. • Implications for school staff, families and EPs are presented in Section 6.6.

5. CHAPTER FIVE: FINDINGS

5.1 Findings for RQs 1 and 2

This section presents the findings that relate to RQs 1 and 2:

1. In what ways have children made relatively positive progress since the COVID-19 pandemic, identified by themselves, their parents/carers, and their teachers?

2. How do children, their parents/carers and teachers explain what may have led to the positive progress?

For each case, thematic maps are presented for each RQ. RTA was used to generate themes and sub-themes for each child's experiences in relation to RQs 1 and 2 separately; this is presented in Appendix X as a detailed case by case presentation of each theme and sub-theme, which many corresponding quotations. As the themes for RQ1 and 2 overlap and have many interrelationships, it is most useful to present and discuss the themes for both RQs together as a vignette: a collation and synthesis of my interpretations of the child's experiences, derived from the subjective perspectives of the focus child, their parent/carer and member/s of school staff. Section 5.2 highlights any instances where there is a lack of unanimity amongst the participants within a given case study.

5.1.1 Case 1: Jake

Participants within Jake's case generated a range of positive developments that Jake had experienced since the COVID-19 pandemic. Figure 8 depicts themes in relation to RQ1 and Figure 9 depicts themes to address RQ2.
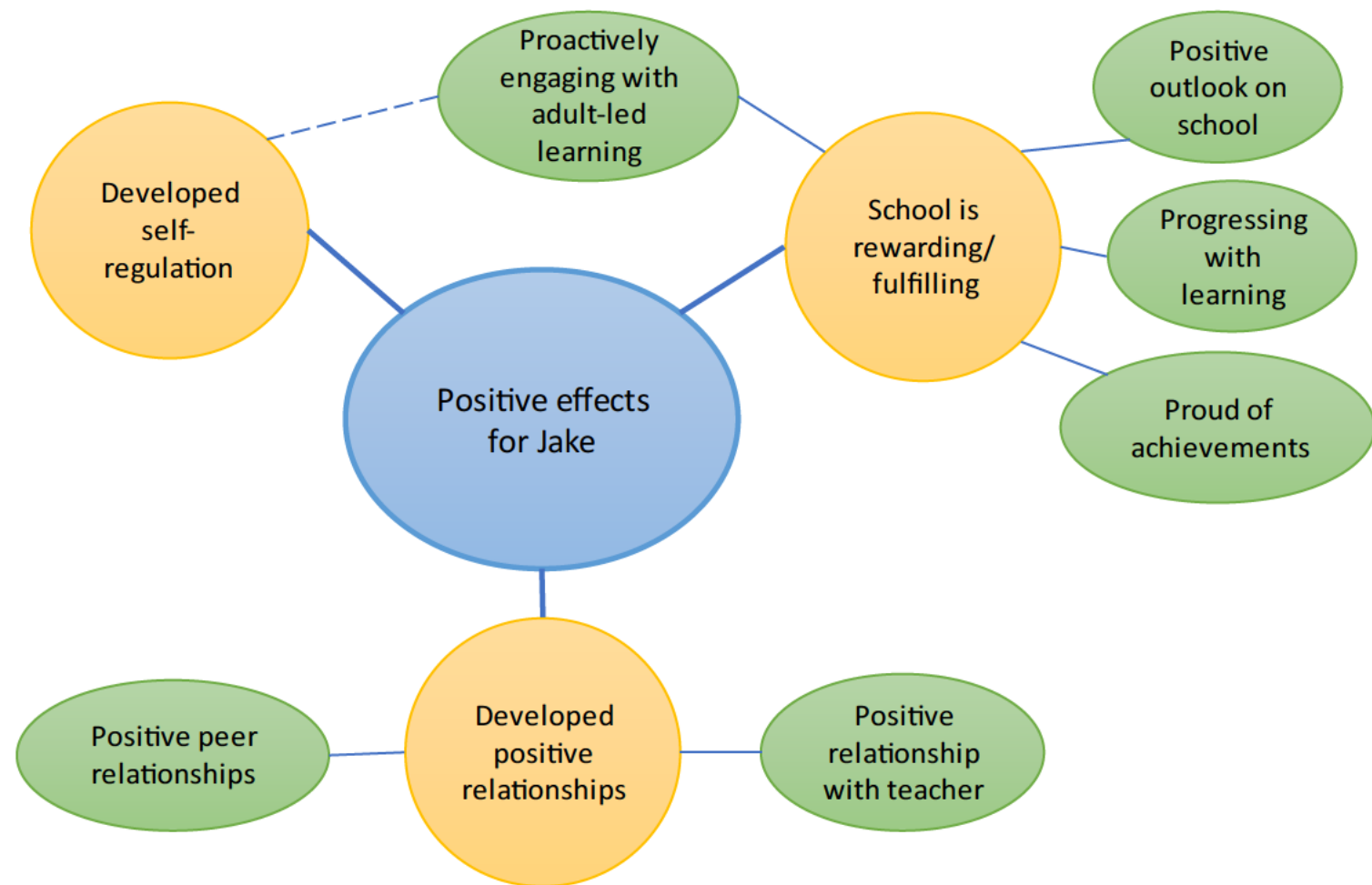
Figure 6: Themes and sub-themes related to RQ1 for Jake's nested case.
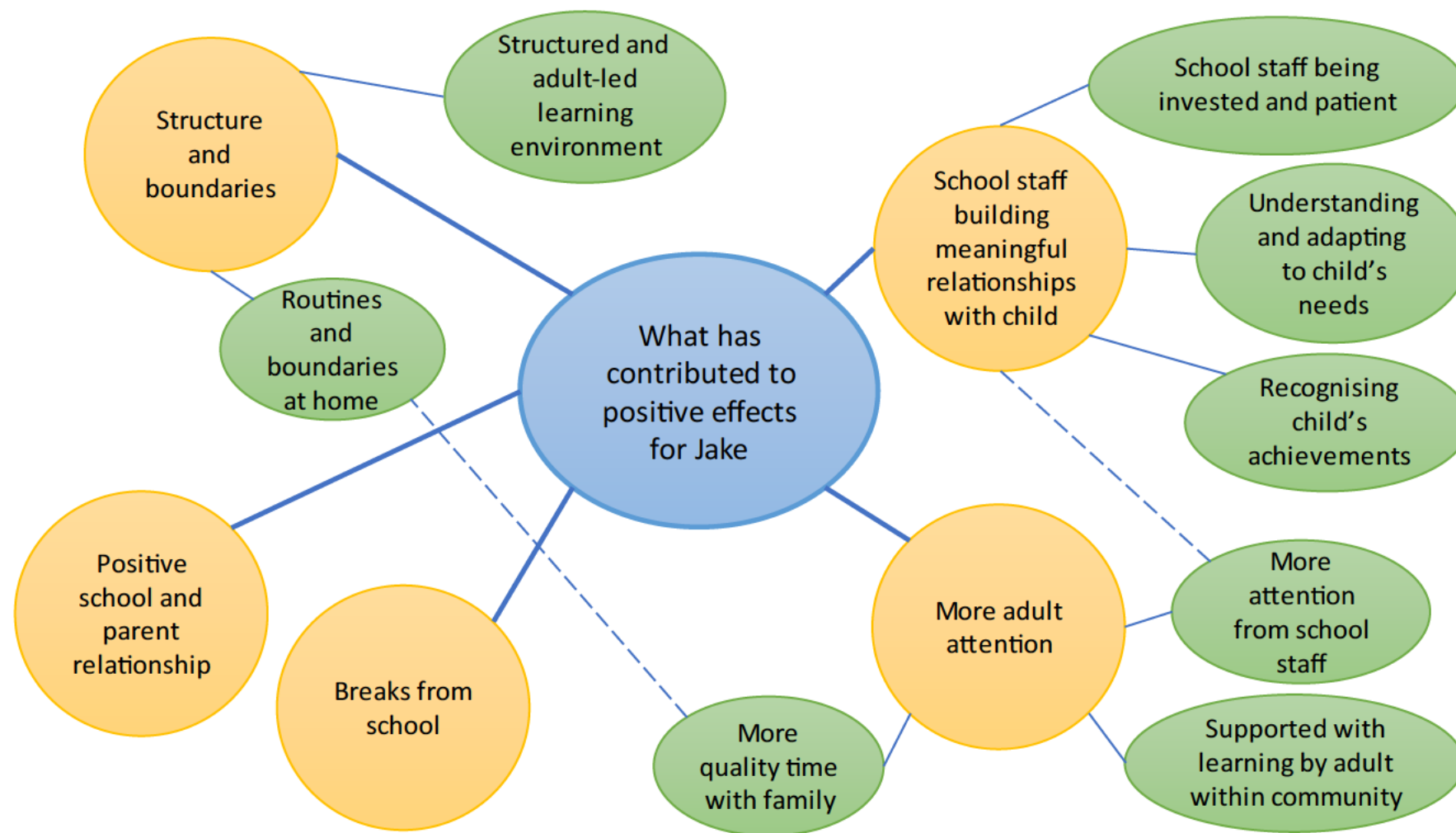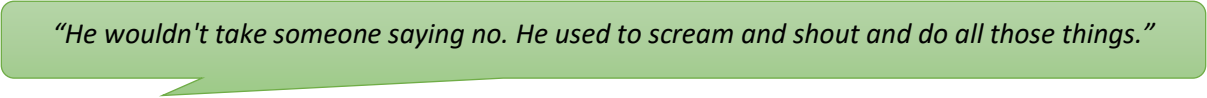
Figure 7: Themes and sub-themes related to RQ2 for Jake's nested case.
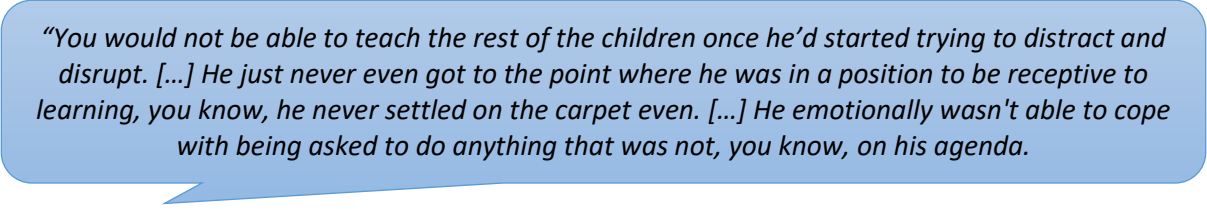
5.1.1.1 Jake's vignette

Before the pandemic, Jake was in his reception year. He presented with challenging behaviour at school and at home and engaged poorly with his learning. He regularly became emotionally dysregulated when adults tried to prevent him from following his own agenda or when there were changes in his routine. He screamed and shouted, crawled under the teacher's desk, and threw toys. He was removed from the classroom many times and received some fixed term exclusions.

> *"He wouldn't take someone saying no. He used to scream and shout and do all those things."*
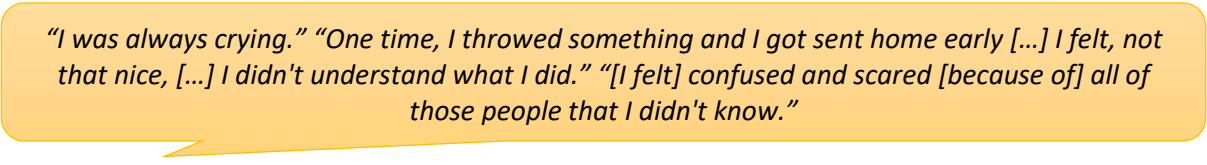
Figure 8: Extract from Jake's mother's interview.

> *"You would not be able to teach the rest of the children once he'd started trying to distract and disrupt. [...] He just never even got to the point where he was in a position to be receptive to learning, you know, he never settled on the carpet even. [...] He emotionally wasn't able to cope with being asked to do anything that was not, you know, on his agenda.*
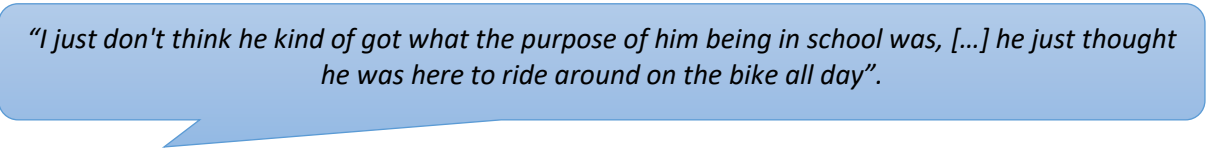
Figure 9: Extract from Jake's school SENCo's interview.

Jake often felt sad, confused, and scared at school, as he did not know anyone, and he did not like getting sent home early. Jake did not seem to understand why he was in school or why he could not simply play with toys all day.

> *"I was always crying." "One time, I throwed something and I got sent home early [...] I felt, not that nice, [...] I didn't understand what I did." "[I felt] confused and scared [because of] all of those people that I didn't know."*

Figure 10: Extract from Jake's interview.

> *"I just don't think he kind of got what the purpose of him being in school was, [...] he just thought he was here to ride around on the bike all day".*

Figure 11: Extract from Jake's school SENCo's interview.

It seems that Jake's expectations of school and school staff's expectations of Jake were poorly aligned and created friction, causing Jake to feel difficult emotions and act in socially inappropriate ways. Over this time, school staff showed patience and sustained commitment, and the relationship between school staff and parents was positive.

> "To be honest, […] the school have played a very very big role on him, […] they've been so patient with him, I'm telling you, if it was me, I would have kicked him out of school with the things that he was doing, […] they've been very good, they've been very supportive."

Figure 12: Extract from Jake's mother's interview.

During the first school closure, Jake stayed at home. He appeared to have had more quality time with his family and more routines and boundaries were put in place at home, which was reinforced by an Early Help plan.

> "I think he had a lot more quality time with his, I don't know if it was both parents, but definitely his mum. […] Having that change of approach that you know he wasn't just occupied, you know, they were physically spending time with him and doing activities together and yeah, they increased attention as well. […] They [parents] put into place the strategies that the early help plan was recommending and so like there was a lot of things about routines, […] and you know, if he woke up in the night he was returned to his bed and things like that."

Figure 13: Extract from Jake's school SENCo's interview.

He had one-to-one tuition from his neighbour, focussing on his reading and writing skills, and he was motivated to return to school to share his achievements with school staff.

> "and with […] the girl who was helping him to write, at least now coming to school, I'm sure he wanted to show the Head Teacher that "I can write", show Miss *** that I can do this, you know."

Figure 14: Extract from Jake's mother's interview.

Jake seemed to be bored and isolated from other children during this time and was therefore excited to return to school to play with other children. The break seemed to highlight, through their absence from Jake's life, positive features of school life, and therefore increased his appreciation of school.

> "Him being away and having to come back [to school], it's more exciting to him because he's going to have more children now than being at home on his own. […] At least it opened his mind, that "I don't want to be sitting at home like 24/7, I want to go out there"."

Figure 15: Extract from Jake's mother's interview.

When the schools reopened to all children at the start of Jake's Year 1, he returned to school, and was like a "different child". He had a positive outlook on school, and both at home and at school, he was more able to self-regulate, and was proactively engaged with adult-led learning.

> "He would wake up in the morning, "mummy am I going to school today? […] I miss my friends". […] He is more like looking forward to go to school now than before. […] He's more calm, he's more understanding, even when you tell him no, now he understands what no means. […] He understands when you say, "let's sit down and do homework", yeah, he sits down and do homework. […] He knows how to go upstairs to his room if he's feeling upset and all that instead of kicking everything and screaming."

Figure 16: Extract from Jake's mother's interview.

> "Certainly, within class he listens when he's supposed to listen, he does his work when he's supposed to do his work. […] He's very involved in the lesson, very proactively involved. […] Things are still will not be going his way or he's being required to do something that it's probably not his first choice to do, but he is able to cope with it now."

Figure 17: Extract from Jake's school SENCo's interview.

Some aspects that may have contributed to this change are how the Year 1 learning environment and approach was more structured and adult-led, and school staff learnt to

understand and adapt to his needs, such as his needs to be involved, feel valued, be close to

his teachers (in terms of his relationship and in proximity), and have a sense of responsibility.

> *"I don't know whether he responded better to being in a like a formal teaching situation rather than the informal reception situation. [...] The year 1 teacher was really good at sort of managing his needs and he settled down really, really well. [...] He said to me the other day that he really liked sitting at the front because he liked being close to miss so, [...] it's like he sort of needs to have that really close relationship with his teacher. [...] I think, just that he needs to have that little edge of responsibility."*

Figure 18: Extract from Jake's school SENCo's interview.

School staff also recognised how Jake enjoys sharing his achievements with school staff and

having positive recognition.

> *"This one time in Year 1, I was so happy, it's because in my book I did good learning and Mr **** [Head teacher] gave me a sticker [...] and then he got a trophy and he put it in Year 1. It's because of like the sounds, I was reading them and then he was proud."*

Figure 19: Extract from Jake's interview.

During the second school closure, the school remained open to a small number of children,

including Jake. As there were smaller class sizes during this time, Jake gained more attention

from school staff.

5.1.1.1.1 Summary of Jake's positive outcomes

The combination of facilitating elements within Jake's school and home environment were

judged to have affected him in many positive ways:

- School now constitutes a rewarding and fulfilling experience for Jake; he has a positive

  outlook on school (he feels excited to go to school, likes learning and seems to

  understand the purpose of school), he proactively engages with adult-led learning at

school and at home, he is progressing with his learning, and he is proud of his achievements.

- He has developed self-regulation skills at school and at home and is therefore able to cope when adults put in demands and boundaries, and with change. At home, he is calmer and goes to his room to self-regulate when he feels upset. He has also been more helpful to others; being eager to help his teacher by doing jobs for her and helping his parents with housework.

> *"I am going to help her (his teacher) do a job."*

Figure 20: Extract from Jake's interview.

> *"He does help to wash dishes at times, [...] he does help to hoover his room."*

Figure 21: Extract from Jake's mother's interview.

- He has developed positive relationships with his teacher; he really likes her and enjoys helping her.

- He has developed positive peer relationships; he talks about his school friends at home, he misses them when he is absent from school, and he has sleepovers with them. Jake is now more understanding of other children's feelings, and can share, indicating that he may have developed his theory of mind.

> *"He understands about other children's feelings now as well. […] He shares, yeah, we always have sleepovers in my house, some children coming, he can share, he looks after them, he acts like a big brother sort of. […] He made friends because at least now he will talk about so and so and so and so and so at home."*

Figure 22: Extract from Jake's mother's interview.
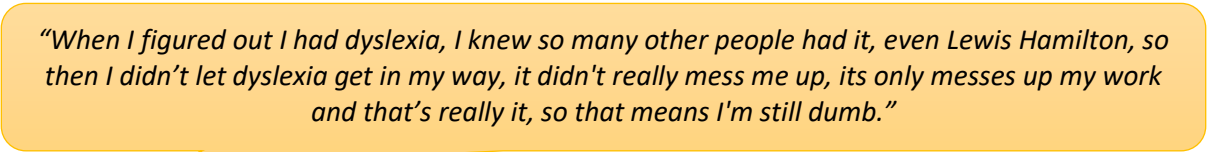
5.1.2 Case 2: Roger

Participants within Roger's case generated a range of positive developments that Roger had experienced since the COVID-19 pandemic. Figure 24 depicts themes in relation to RQ1 and Figure 25 depicts themes to address RQ2.

5.1.2.1 Roger's vignette
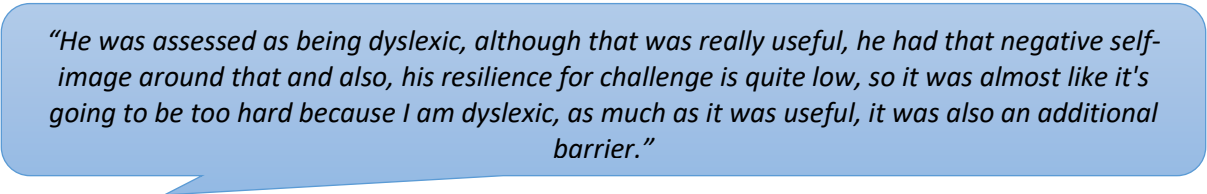
When Roger's school closed for the first time during the pandemic, Roger stayed at home and had individualised one-to-one learning support from his mother (a SENCo at a primary school); she consistently sat with Roger while he completed tasks, which adults later believed had not been helpful in developing his independence.

Roger received a dyslexia identification at this time, which appeared to support him in understanding his difficulties, provide him with a reason for finding schoolwork challenging, and motivate him to not let dyslexia prevent him from succeeding. It also simultaneously seemed to create an additional barrier to his learning as it negatively affected his self-efficacy and contributed to his low resilience to challenge.

> *"When I figured out I had dyslexia, I knew so many other people had it, even Lewis Hamilton, so then I didn't let dyslexia get in my way, it didn't really mess me up, its only messes up my work and that's really it, so that means I'm still dumb."*

Figure 23: Extract from Roger's interview.

> *"He was assessed as being dyslexic, although that was really useful, he had that negative self-image around that and also, his resilience for challenge is quite low, so it was almost like it's going to be too hard because I am dyslexic, as much as it was useful, it was also an additional barrier."*

Figure 24: Extract from Roger's school SENCo's interview.
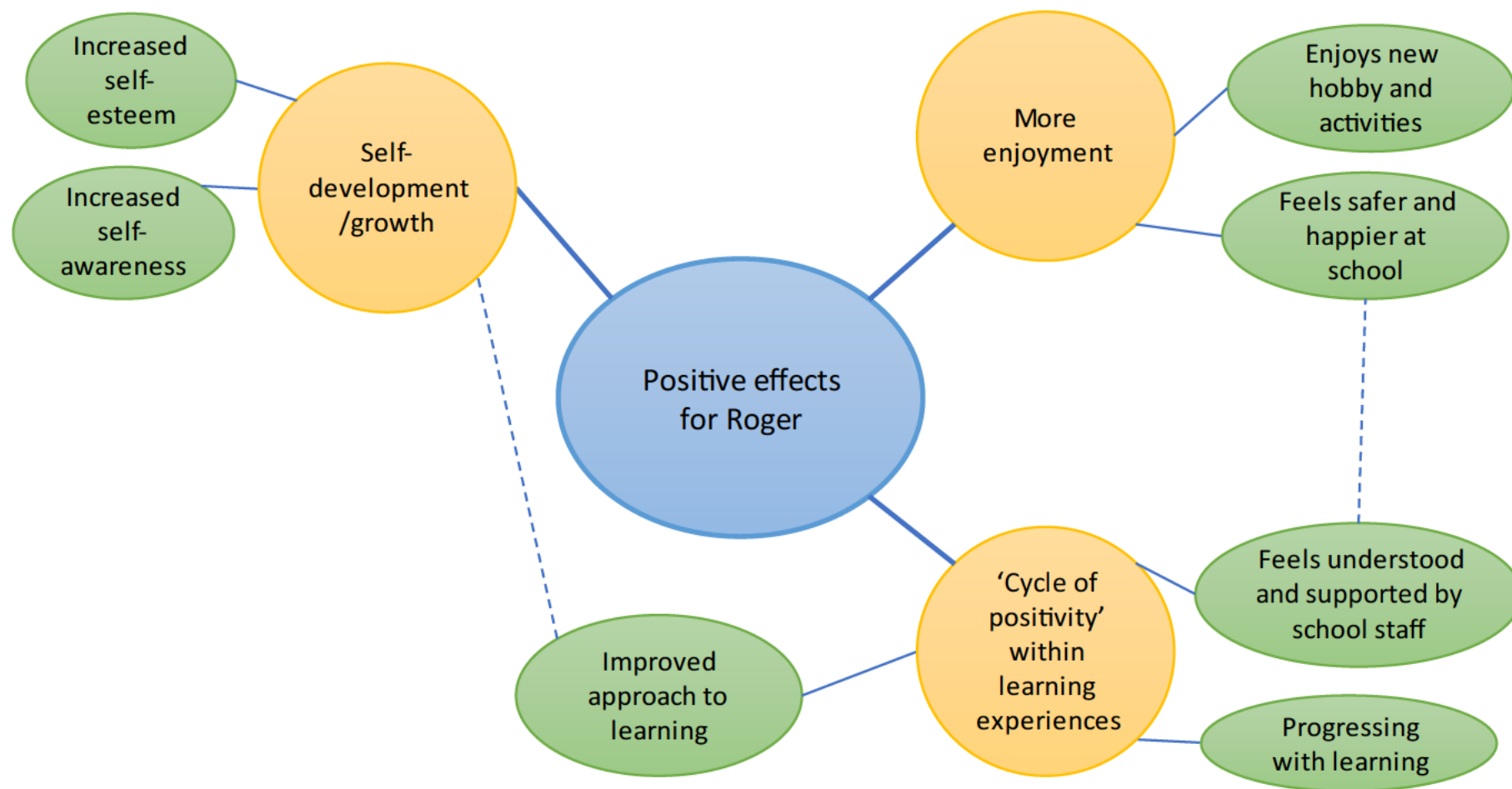
Figure 25: Themes and sub-themes related to RQ1 for Roger's nested case.
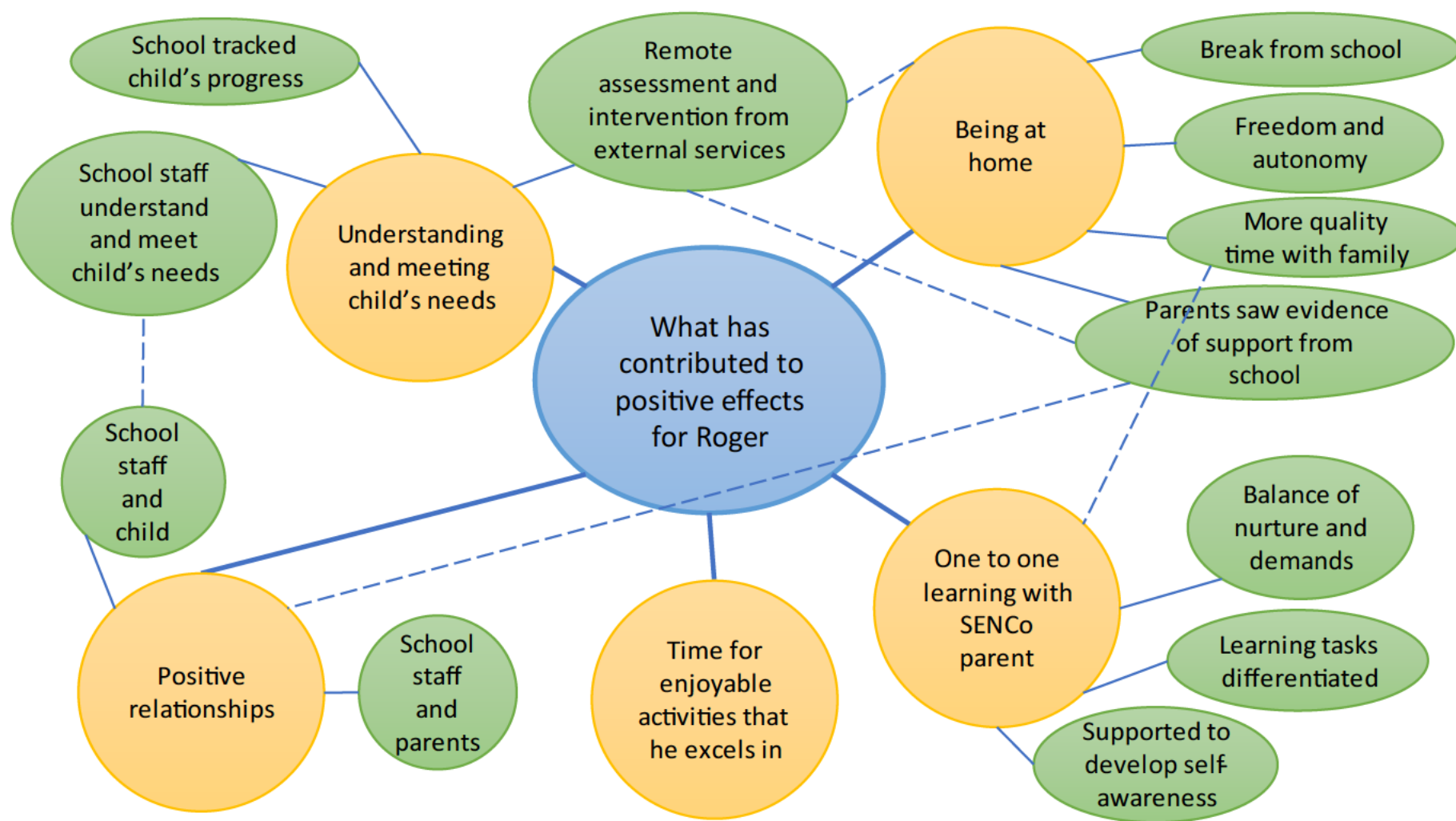
Figure 26: Themes and sub-themes related to RQ2 for Roger's nested case.

In between the first and second school closures, Roger was reported to find it difficult to return to school and was poorly engaged with learning; he felt anxious, felt like he had no opportunities to relax, and he wanted to go home.

> *"Coming back to school […], he found that really really hard to settle and became quite disengaged with learning, […] I think he'd become quite reliant on 1:1 […]. Whatever intervention we tried to put in place he would just shut it down and didn't want to engage with it.*

Figure 27: Extract from Roger's school SENCo's interview.

> *"I felt like I just wanted to go home all the time. I hated it. I felt like it was constant work, didn't have a chance to relax, just kept on telling me to do work."*

Figure 28: Extract from Roger's interview.

During the second school closure, Roger stayed at home again and had individualised one-to-one learning support from his mother. During this period, she:

- Discussed learning tasks with him until he fully understood and realised that he could do it, then left him to complete it independently.

> *"So, I was able to take the time, talk the work through with him. Help him understand the task and then when he fully understood it, he realised he could do it. I would log him on, get him started, and then I would walk away and leave him. So, he did do that working independently. So yeah, I think I think that amount of 1 to 1 time that lockdown gave us was another positive."*

Figure 29: Extract from Roger's mother's interview.

- Protected him from failure by suggesting learning tasks that took his difficulties into consideration, allowing him to complete the task fairly independently.

> *"He'd enjoyed home learning, what was really nice about home learning is that he kind of did his own thing, so he didn't really follow school lead, he followed mum's lead, which was obviously skilled because she is a schoolteacher, and it was very much at his point of learning."*

Figure 30: Extract from Roger's school SENCo's interview.

- Engaged him in overlearning of key skills, such as doing daily times tables tests independently.

- Supported him in developing his self-awareness by modelling, exploring why tasks may have been difficult, and promoting the theory of multiple intelligences.

> *"I do think it [1:1 home learning] benefited him in understanding his strengths and weaknesses. I think I'd probably understood the importance of him being able to speak up for himself and articulate it. And also, for him, like when he used to come out at school every day saying I'm dumb, I'm dumb, I'm dumb. I would really articulate that he wasn't dumb, and that there were reasons he found it difficult. And I've always spoken to him about different types of clever and what you do at school is 1 measure, but there are so many different styles and ways of being clever and actually here are some examples."*
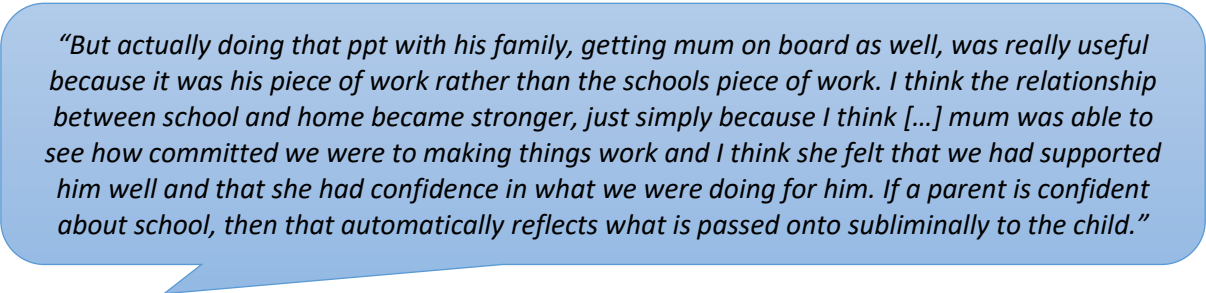
Figure 31: Extract from Roger's mother's interview.

- Firmly asked him to complete tasks, enabling him to realise that he could succeed, while providing him with love and comfort when he had a 'meltdown'.

> *"Some tough love and some nurture, we were able to build his self-esteem because when I would put my foot down and make him do something, he would realise he could and that built his self-esteem. Whereas in school he would just never give it ago and he would just sit down, and I get it. Their hands are tied, they're limited as to what they can do in that sense. Whereas as his mum I didn't have quite the same restraints on me. Equally I was able to give him the nurture and the love and the cuddles and the comfort that he needed. That again, they're not really allowed to do kind of thing."*
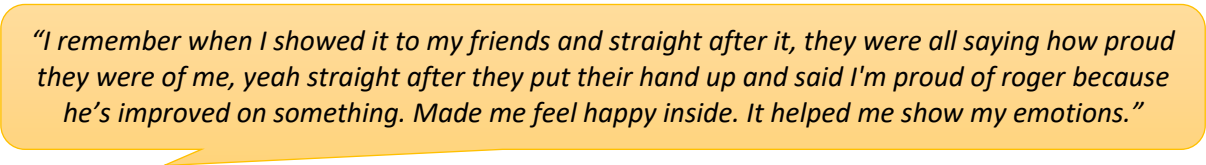
Figure 32: Extract from Roger's mother's interview.

During this time, school staff utilised external support services to assess, understand and support Roger's needs remotely; this was enabled by the school adopting an enhanced investment in supporting children with SEND. He had virtual counselling sessions, in which the counsellor was able to learn more about Roger due to him feeling more comfortable at home. A SEND support service used sensory questionnaires, delivered training on sensory needs to school staff, and supported Roger and his parents in a self-esteem building project, which involved creating a PowerPoint about his strengths, interests, difficulties and coping strategies. Presenting the PowerPoint to his class gave him positive feedback from his peers and boosted his self-esteem. Engaging with the project while he was at home with his family seemed to support his feelings of ownership of the project and being at home while receiving support from school staff was found to be helpful as parents were able to see how committed school staff were in supporting him. The relationship between school staff and parents therefore was reported to become stronger and seemed to contribute to Roger's confidence in school staff and his positive outlook of school.
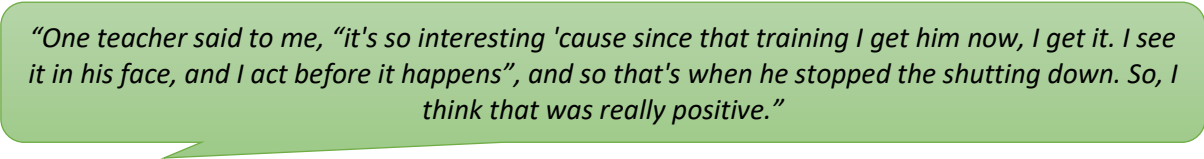
> "But actually doing that ppt with his family, getting mum on board as well, was really useful because it was his piece of work rather than the schools piece of work. I think the relationship between school and home became stronger, just simply because I think […] mum was able to see how committed we were to making things work and I think she felt that we had supported him well and that she had confidence in what we were doing for him. If a parent is confident about school, then that automatically reflects what is passed onto subliminally to the child."

Figure 33: Extract from Roger's school SENCo's interview.

> "I remember when I showed it to my friends and straight after it, they were all saying how proud they were of me, yeah straight after they put their hand up and said I'm proud of roger because he's improved on something. Made me feel happy inside. It helped me show my emotions."
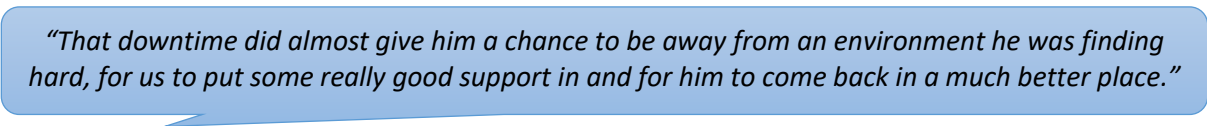
Figure 34: Extract from Roger's interview.

> *"One teacher said to me, "it's so interesting 'cause since that training I get him now, I get it. I see it in his face, and I act before it happens", and so that's when he stopped the shutting down. So, I think that was really positive."*
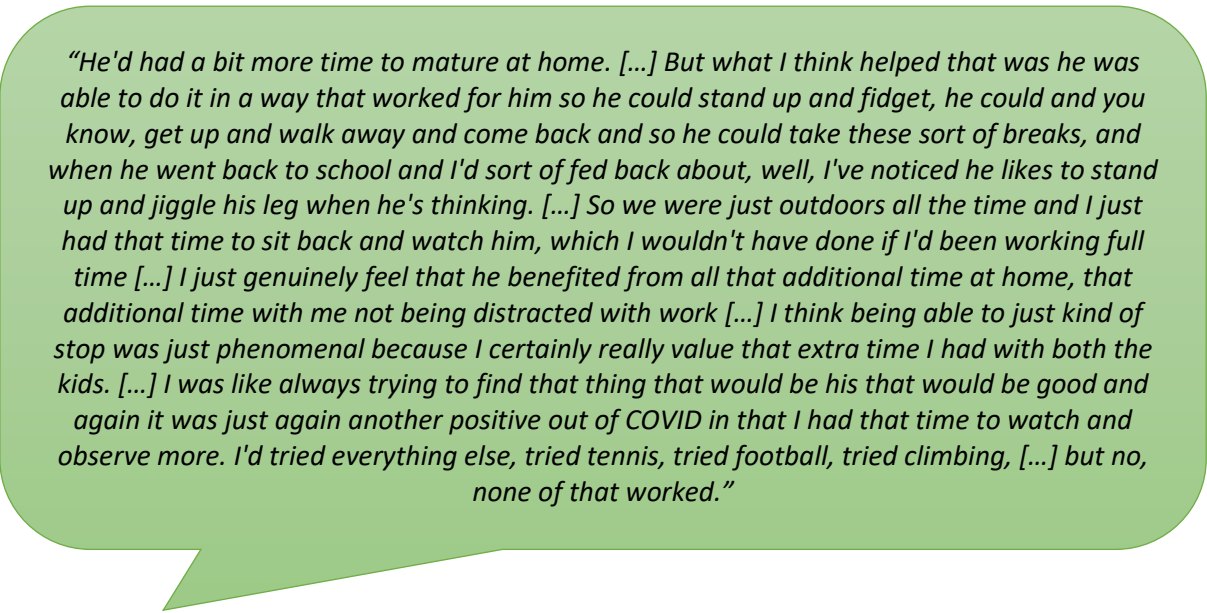
Figure 35: Extract from Roger's mother's interview.

Having more time at home during both the school closures was reported to be helpful for Roger, as he had time away from a difficult environment, time to mature, freedom to move, autonomy when accessing home learning, and more quality time with his family. As a result, his mother was able to pass on her observations to school staff regarding helpful strategies. Roger was able to spend more time outside doing physical activities and his mother had time to observe these interests, resulting in Roger joining a gymnastics club that he became very successful in and passionate about.

> *"That downtime did almost give him a chance to be away from an environment he was finding hard, for us to put some really good support in and for him to come back in a much better place."*

Figure 36: Extract from Roger's school SENCo's interview.

> *"He'd had a bit more time to mature at home. […] But what I think helped that was he was able to do it in a way that worked for him so he could stand up and fidget, he could and you know, get up and walk away and come back and so he could take these sort of breaks, and when he went back to school and I'd sort of fed back about, well, I've noticed he likes to stand up and jiggle his leg when he's thinking. […] So we were just outdoors all the time and I just had that time to sit back and watch him, which I wouldn't have done if I'd been working full time […] I just genuinely feel that he benefited from all that additional time at home, that additional time with me not being distracted with work […] I think being able to just kind of stop was just phenomenal because I certainly really value that extra time I had with both the kids. […] I was like always trying to find that thing that would be his that would be good and again it was just again another positive out of COVID in that I had that time to watch and observe more. I'd tried everything else, tried tennis, tried football, tried climbing, […] but no, none of that worked."*

Figure 37: Extract from Roger's mother's interview.

When Roger returned to school after the second school closure, school staff reportedly had a greater understanding of Roger's needs, including how his disengagement with learning indicated that he was emotionally dysregulated. They were able to use appropriate and preventative strategies to support Roger, such as a personalised sensory diet, and a balance of acknowledging his difficulties, while not singling him out from his peers.

"I think because we weren't necessarily realising that it was emotional dysregulation, we thought it was struggling to learn or to engage, our support didn't have these things, so we weren't meeting his needs so well, which meant he was stuck in that. […] He doesn't like being different, but equally he almost needs an acknowledgment of his difference to feel supported and it's a real balancing act to get that right and I think that's why relationships with teachers are so important for him."

Figure 38: Extract from Roger's school SENCo's interview.

"And when he then went back after they'd got these movement breaks and set like a sensory diet effect in place for him and I think that helped him massively. […] It genuinely was like a light bulb moment for them [school staff], but they were now meeting his other needs so that the barriers that could be removed came down."

Figure 39: Extract from Roger's mother's interview.

Through monitoring Roger's engagement with learning for a few weeks, school staff found that he was consistently open to learning and receptive to challenge. This appeared to help school staff and parents feel confident that the strategies were supporting him and subsequently supported Roger's confidence in school staff.

"When he came back, we were really keen to track how he was doing, to see if it had worked […], and what we found is that actually it was all really positive, […] it made everyone feel confident that the support was working."

Figure 40: Extract from Roger's school SENCo's interview.

5.1.2.1.1 Summary of Roger's positive outcomes

This combination of facilitating elements within Roger's school and home environment have affected him in many positive ways:

- Roger demonstrates a "cycle of positivity", as he feels more understood and supported by school staff, which enables him to manage his sensory and emotional needs, engage, succeed, and progress with his learning, be more receptive to challenge and more independent with his learning.

> *"All of this work made him feel that his needs were acknowledged, and once his needs were acknowledged and he felt we were all on the same side, he was much more receptive to challenge. He kind of needed to know that school knew that he wasn't not able to do something because he was being difficult, but that there was a cause, and that we could sort out that cause and he saw those exercises and strategies we put in, as a support blanket, which then meant he could face challenge. It was like a little cycle of positivity really."*

Figure 41: Extract from Roger's school SENCo's interview.

- He feels safer, happier, and more relaxed at school and is more willing to share his thoughts and feelings with school staff.

> *"Because he's more comfortable at school now, he's more willing to be open about how he's feeling. So yeah, again, I think that probably is a positive coming out of COVID that it points back to that thing of school being a safe place. And then he's safe to share his honest opinions now."*

Figure 42: Extract from Roger's mother's interview.

- He enjoys engaging in a gymnastics club and feels very proud of his achievements.

> *"There was once a time I felt most proud, at gymnastics when I got 3rd on vault, 2nd on floor, 1st on bars and there was an event and then they were doing who did the best and […] I got boy's champion."*

Figure 43: Extract from Roger's interview.

> *"In his own words, after he'd been at gymnastics for a couple of months, he said, "well, I think I found where I belong now". He said, "I think I found my thing. I found where I belong now"."*

Figure 44: Extract from Roger's mother's interview.

- He has greater self-awareness. He can articulate how it feels to need to move and how it feels when he is not allowed to move.

> *"My heart starts to pound, my tummy gets all sick, my brain gets all fuzzled and then I turn off."*

Figure 45: Extract from Roger's interview.

- His self-esteem has improved. He is more able to talk about his strengths and achievements.

> *"I think all of the work that had gone on made him feel quite special, special in a positive way. [...] He was much more positive about himself, [...] he was able to say, this was, after he came back, was that his writing had improved, [...] so he was much much more able to self-assess himself."*

Figure 46: Extract from Roger's school SENCo's interview.

5.1.3 Case 3: Rosie

Participants within Rosie's case generated a range of positive developments that Rosie had experienced since the COVID-19 pandemic. Figure 50 depicts themes in relation to RQ1 and Figure 51 depicts themes to address RQ2.
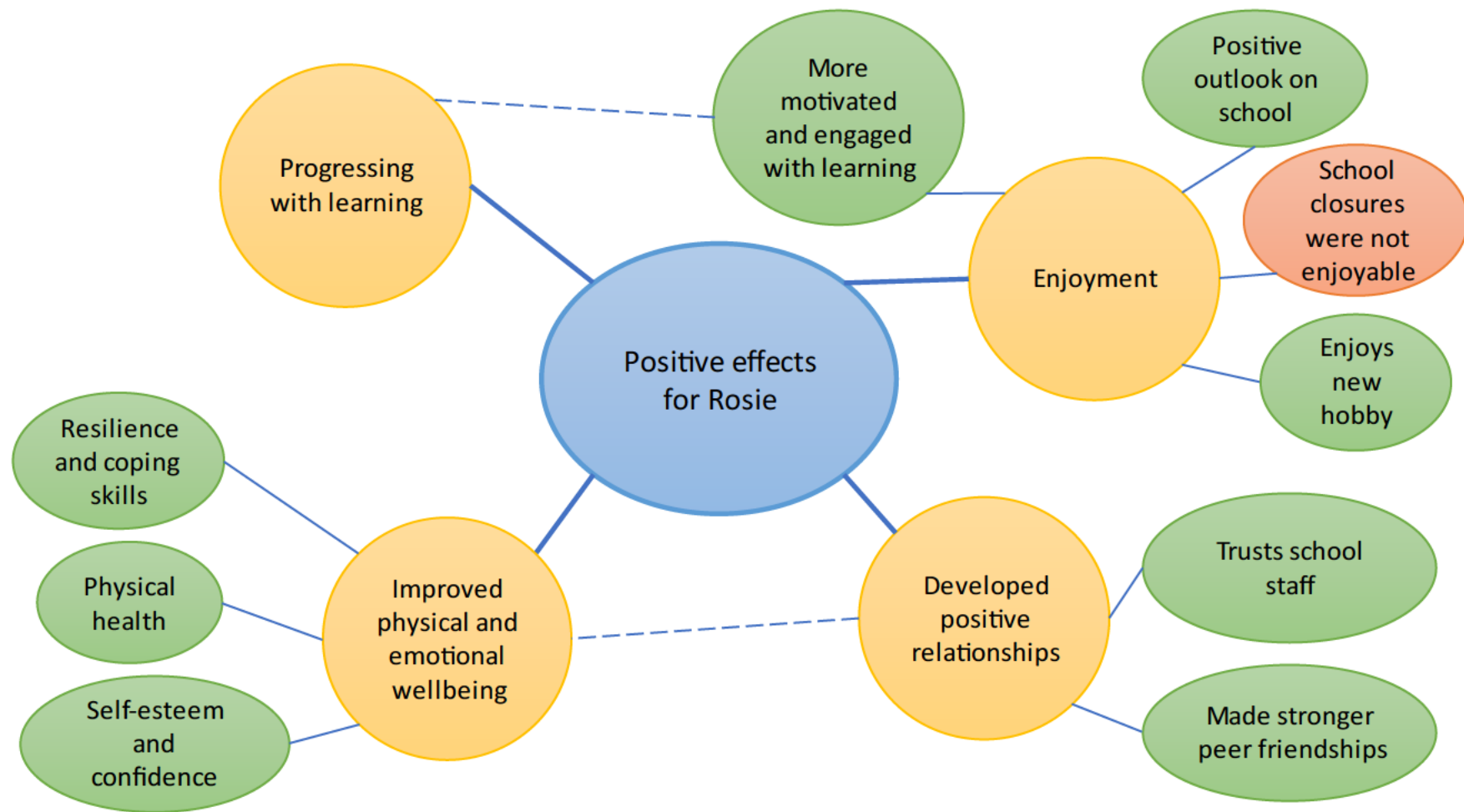
Figure 47: Themes and sub-themes related to RQ1 for Rosie's nested case.
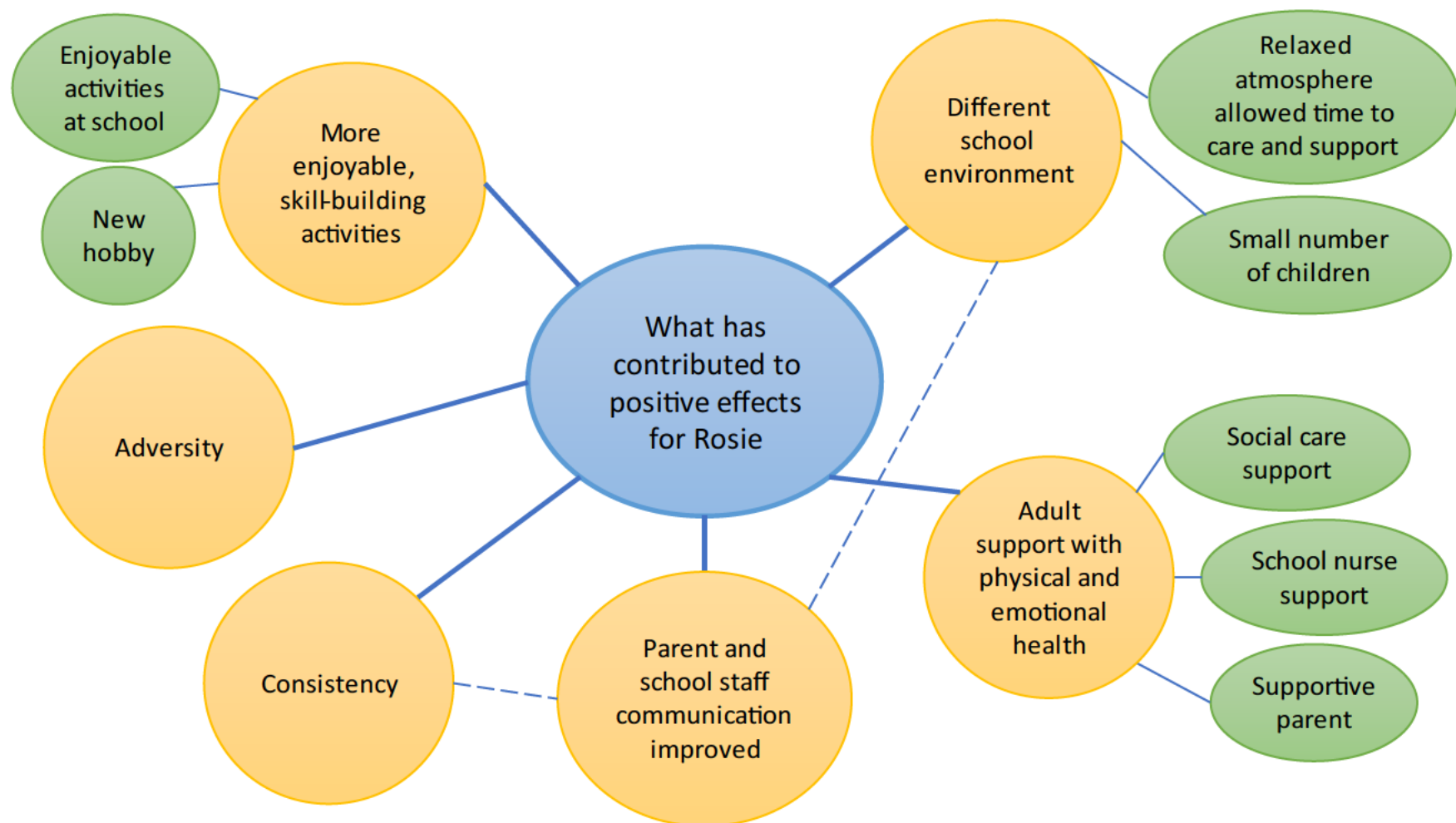
Figure 48: Themes and sub-themes related to RQ2 for Rosie's nested case.

5.1.3.1 Rosie's vignette

Before the pandemic, Rosie appeared to have low confidence and did not speak openly with school staff; she was a "closed book". She believed she was being bullied and had a small number of friends at school, she was often distracted and reluctant to engage in learning, and she was working below age related expectations.
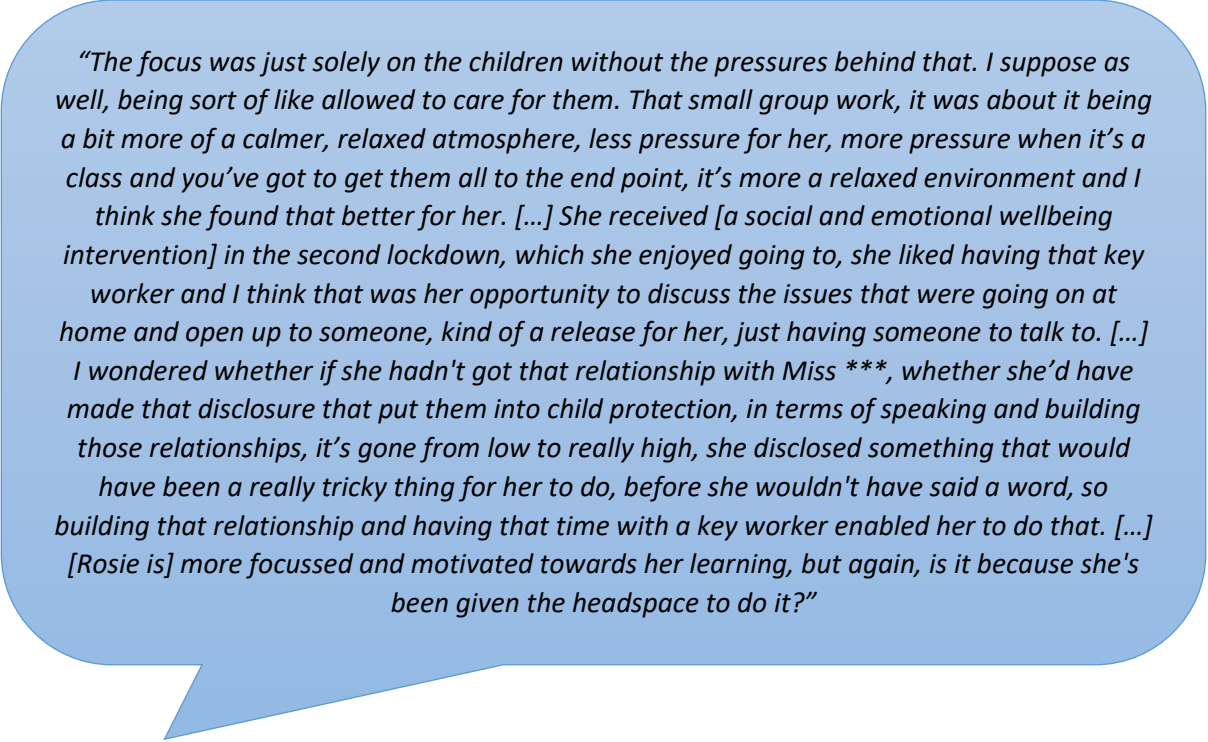
> *"She wasn't having a good experience in school to be quite honest, she was always coming home crying, and she would speak to teachers about being picked on by a certain lad and that was all going on before the pandemic."*

Figure 49: Extract from Rosie's mother's interview.

When her school closed during the pandemic, Rosie stayed at home. Although Rosie shared that she enjoyed drawing, watching TV and looking at books during the first school closure, on the whole, Rosie did not enjoy this period of time.

When schools closed for a second time, it remained open to a small number of children, including Rosie. The atmosphere was reported to be a lot more relaxed and calm as there was less pressure on school staff and they had more time; staff were therefore "allowed to care" about the children and their wellbeing.
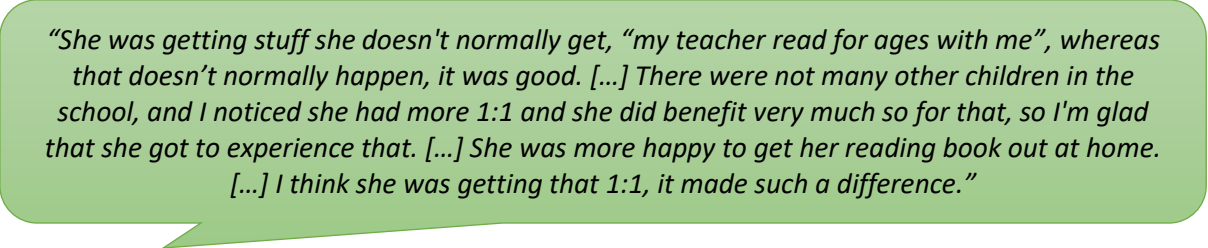
Rosie built a strong, trusting relationship with a key worker and had more opportunities to share her thoughts and feelings via a social and emotional wellbeing intervention (e.g., understanding emotions, building self-esteem, play and friendship skills). She consequently seemed to feel more able to share and she made a disclosure, which led to a child protection plan, and she became more focussed during learning activities, possibly as she had more "headspace".

"The focus was just solely on the children without the pressures behind that. I suppose as well, being sort of like allowed to care for them. That small group work, it was about it being a bit more of a calmer, relaxed atmosphere, less pressure for her, more pressure when it's a class and you've got to get them all to the end point, it's more a relaxed environment and I think she found that better for her. [...] She received [a social and emotional wellbeing intervention] in the second lockdown, which she enjoyed going to, she liked having that key worker and I think that was her opportunity to discuss the issues that were going on at home and open up to someone, kind of a release for her, just having someone to talk to. [...] I wondered whether if she hadn't got that relationship with Miss ***, whether she'd have made that disclosure that put them into child protection, in terms of speaking and building those relationships, it's gone from low to really high, she disclosed something that would have been a really tricky thing for her to do, before she wouldn't have said a word, so building that relationship and having that time with a key worker enabled her to do that. [...] [Rosie is] more focussed and motivated towards her learning, but again, is it because she's been given the headspace to do it?"
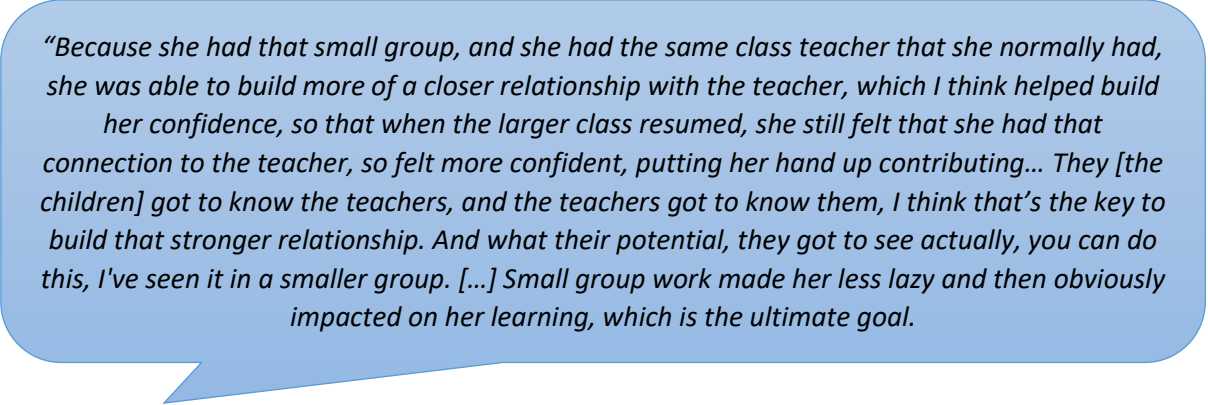
Figure 50: Extract from Rosie's school staff's interview.

Rosie built a positive connection with her teacher and had one-to-one and small group support with her learning; this seemed to support Rosie's motivation to learn, her confidence in contributing to class discussions, and her teacher became more aware of her learning potential.

"She was getting stuff she doesn't normally get, "my teacher read for ages with me", whereas that doesn't normally happen, it was good. [...] There were not many other children in the school, and I noticed she had more 1:1 and she did benefit very much so for that, so I'm glad that she got to experience that. [...] She was more happy to get her reading book out at home. [...] I think she was getting that 1:1, it made such a difference."
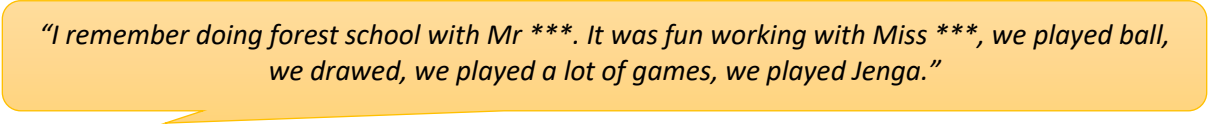
Figure 51: Extract from Rosie's mother's interview.

> *"Because she had that small group, and she had the same class teacher that she normally had, she was able to build more of a closer relationship with the teacher, which I think helped build her confidence, so that when the larger class resumed, she still felt that she had that connection to the teacher, so felt more confident, putting her hand up contributing… They [the children] got to know the teachers, and the teachers got to know them, I think that's the key to build that stronger relationship. And what their potential, they got to see actually, you can do this, I've seen it in a smaller group. […] Small group work made her less lazy and then obviously impacted on her learning, which is the ultimate goal.*
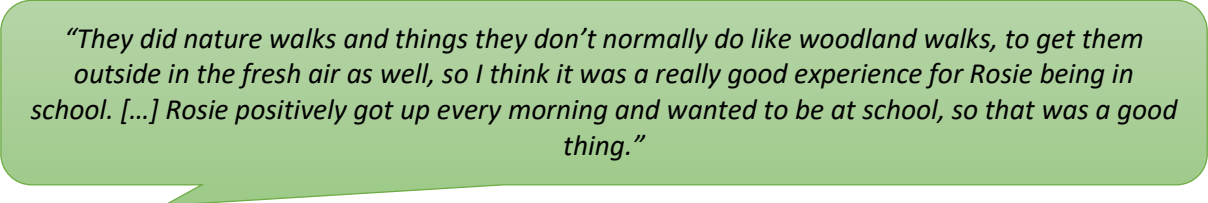
Figure 52: Extract from Rosie's school staff's interview.

During this time, Rosie engaged in more activities that she enjoyed, such as outdoor, physical, and creative activities and games, and she was more motivated to attend school.

> *"I remember doing forest school with Mr ***. It was fun working with Miss ***, we played ball, we drawed, we played a lot of games, we played Jenga."*
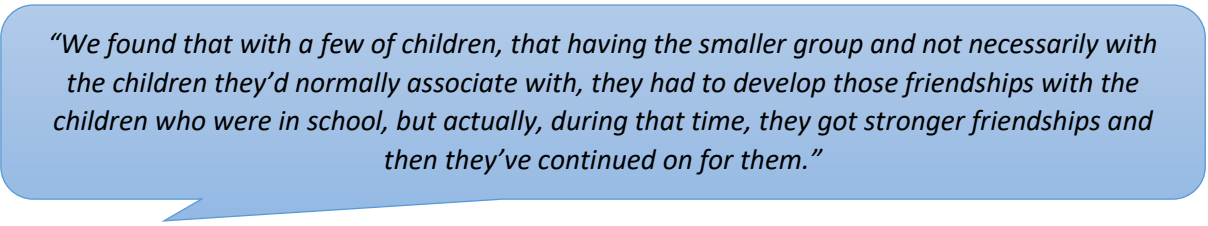
Figure 53: Extract from Rosie's interview.

> *"They did nature walks and things they don't normally do like woodland walks, to get them outside in the fresh air as well, so I think it was a really good experience for Rosie being in school. […] Rosie positively got up every morning and wanted to be at school, so that was a good thing."*

Figure 54: Extract from Rosie's mother's interview.

Having a small number of children in school during this time seemed to enable Rosie to develop strong friendships and develop her confidence as there were less children picking on her.
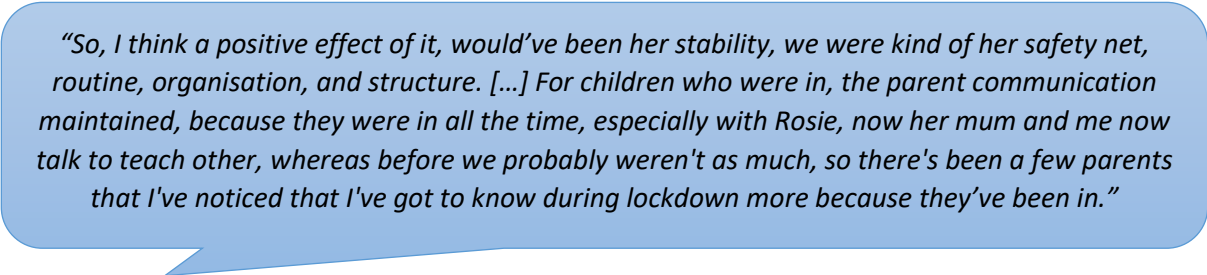
> *"We found that with a few of children, that having the smaller group and not necessarily with the children they'd normally associate with, they had to develop those friendships with the children who were in school, but actually, during that time, they got stronger friendships and then they've continued on for them."*

Figure 55: Extract from Rosie's school staff's interview.

She was also able to have a remote appointment with a school nurse regarding her diet and overeating, without being on a long waiting list.
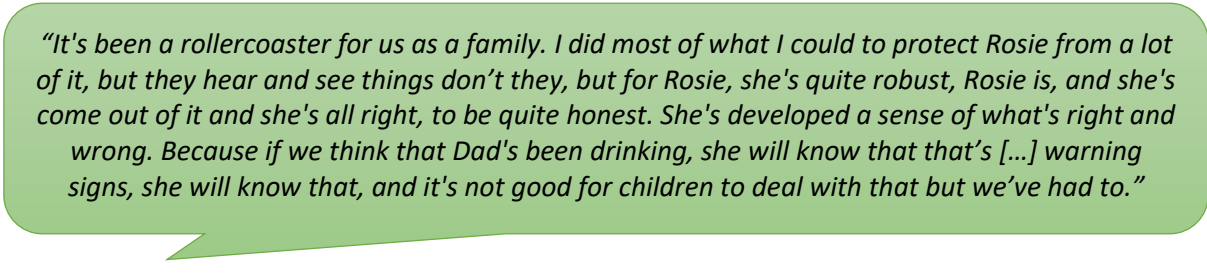
Since the second school closure, Rosie has continued to attend school and access support from consistent adults. Her routine and structure were maintained, enabling her to have healthier eating habits and providing stability and safety. Communication between school staff and parents was also maintained, leading to an increase in communication.

> *"So, I think a positive effect of it, would've been her stability, we were kind of her safety net, routine, organisation, and structure. […] For children who were in, the parent communication maintained, because they were in all the time, especially with Rosie, now her mum and me now talk to teach other, whereas before we probably weren't as much, so there's been a few parents that I've noticed that I've got to know during lockdown more because they've been in."*

Figure 56: Extract from Rosie's school staff's interview.

During the pandemic period, Rosie has experienced difficult situations at home, as her father has had poor mental health and an addiction to alcohol. Rosie seems to have learnt to adapt to this adversity and developed a sense of right and wrong in terms of recognising warning signs for her father's difficulties.

> *"It's been a rollercoaster for us as a family. I did most of what I could to protect Rosie from a lot of it, but they hear and see things don't they, but for Rosie, she's quite robust, Rosie is, and she's come out of it and she's all right, to be quite honest. She's developed a sense of what's right and wrong. Because if we think that Dad's been drinking, she will know that that's […] warning signs, she will know that, and it's not good for children to deal with that but we've had to."*

Figure 57: Extract from Rosie's mother's interview.

Since coming out of the lockdown periods, Rosie has enjoyed attending a drama club, which seems to have increased her confidence and self-esteem.

> *"I started her on a drama course, she goes once a week, one and a half hours, and that has really boosted her self-esteem, she's come out of herself a little bit, and now if boys are picking on her, she will bounce back and say, "well my face isn't like yours"."*

Figure 58: Extract from Rosie's mother's interview.

5.1.3.1.1 Summary of Rosie's positive outcomes

This combination of facilitating elements within Rosie's school and home environment have affected her in many positive ways:

- Rosie finds school more fun and enjoyable, she is more motivated to attend school and engage in learning at school and at home, and she enjoys her new hobby.

> *"Now she loves reading, she will quite happy get a book out."*

Figure 59: Extract from Rosie's mother's interview.

- She has closer and more trusting relationships with school staff and has developed her skills in building trusting relationships. She is therefore more able to speak openly to school staff.

> *"She's been able to defer those skills onto her TA, and actually she mentioned something yesterday and it's almost like because the TA doesn't work on a Monday or Tuesday, she's waiting to speak to her on a Wednesday, so she is building those relationships. [...] She spoke quite honestly the other day in reading rooms about having a social worker, yet back in the day she wouldn't have dared even share that, but she was quite open about that."*

Figure 60: Extract from Rosie's school staff's interview.

- She is more able to focus and concentrate on learning tasks and she has made accelerated progress with her learning, in particular, her reading skills. She is proud of her learning skills.

> Marina: *"What did you feel proud of?"*
>
> Rosie: *"Me."*
>
> Marina: *"What did you do?"*
>
> Rosie: *"A lot of work."*
>
> Marina:*" So, do you think you've got better in your learning? Your reading and writing, maths?"*
>
> Rosie: *Yeah.*
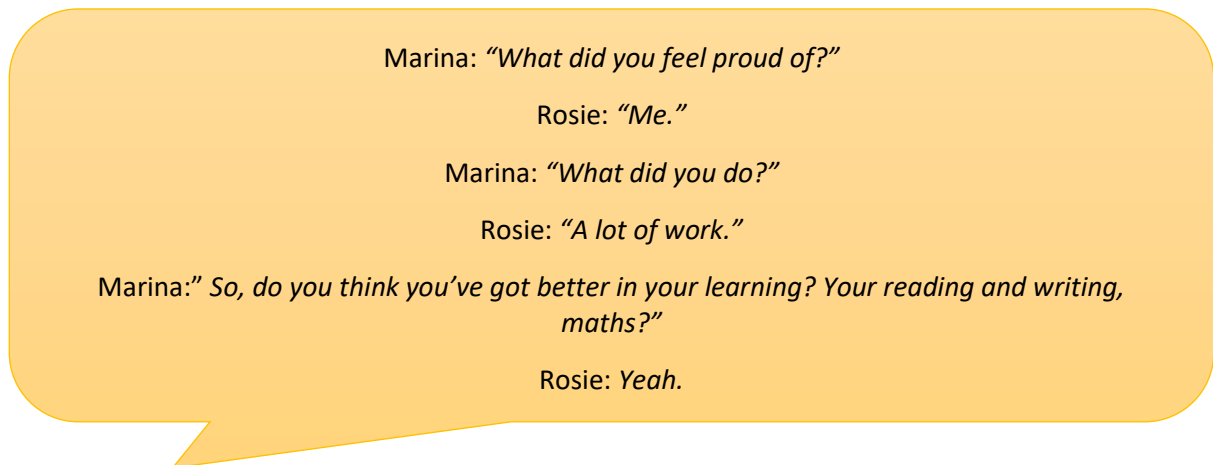
Figure 61: Extract from Rosie's interview.

> *"She was able to make accelerated progress, especially in her reading, she was able to close the gap with her peers, quite significantly, because she had that small group work in a small bubble."*
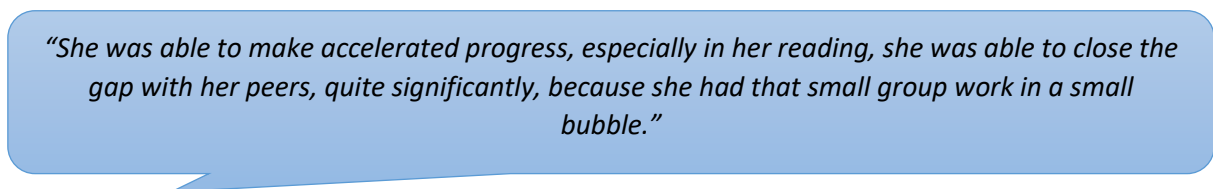
Figure 62: Extract from Rosie's school staff's interview.

- She has become more confident in contributing within lessons, with her peers in school, and when engaging with hobbies.

> *"She did gain confidence I think. […] Before covid started, she wouldn't stay out, she's very clingy, Rosie, don't like to stay away from home, and she's actually succeeded in doing a whole weekend of camping, this weekend, so that's a big thing for Rosie as well, and I was surprised she did, it, I was waiting for the phone to ring, but she thoroughly enjoyed it."*
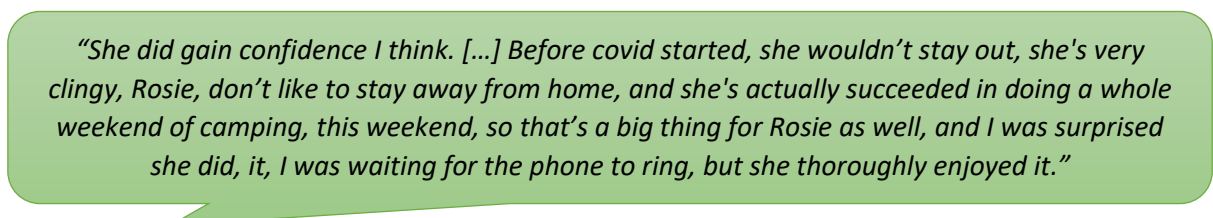
Figure 63: Extract from Rosie's mother's interview.

- She is more able to make friends, build and maintain stronger friendships, and more able to cope with bullies.

> *"She's now maintaining good friendships and they're becoming stronger. [..] She was less dependent on the one person she was friends with before. She always played with someone younger than her. She had got to know those 2 other girls in her own year group."*
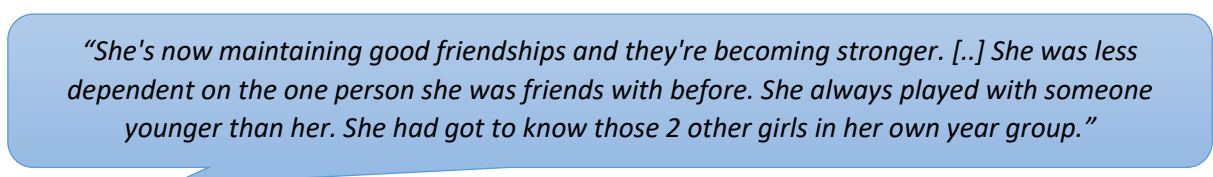
Figure 64: Extract from Rosie's school staff's interview.

- Her resilience and coping skills have improved.

> "She's still continued in a positive way at school and still wanted to remain focused, even though we've had another change go on at home, it doesn't seem to have impacted her emotional wellbeing at all."

Figure 65: Extract from Rosie's school staff's interview.

- Her physical health has improved as she has regained a healthier weight.

5.1.4 Case 4: Callum

Participants within Callum's case generated a range of positive developments that Callum had experienced since the COVID-19 pandemic. Figure 69 depicts themes in relation to RQ1 and Figure 70 depicts themes to address RQ2.

5.1.4.1 Callum's vignette

Before the pandemic, Callum was described as a quiet boy who enjoyed attending school and saw school as a safe place. He was reported to have speech and language difficulties and was significantly below age related expectations. At home, he experienced adversity; he had social care support in the form of a child protection plan.

> "He was quite tricky to understand. He was quite introvert before – he would be the quiet child in the class, not wanting to engage in classroom discussions or partner talk […], he wouldn't be the one that would put his hand up."

Figure 66: Extract from Callum's school staff's interview.
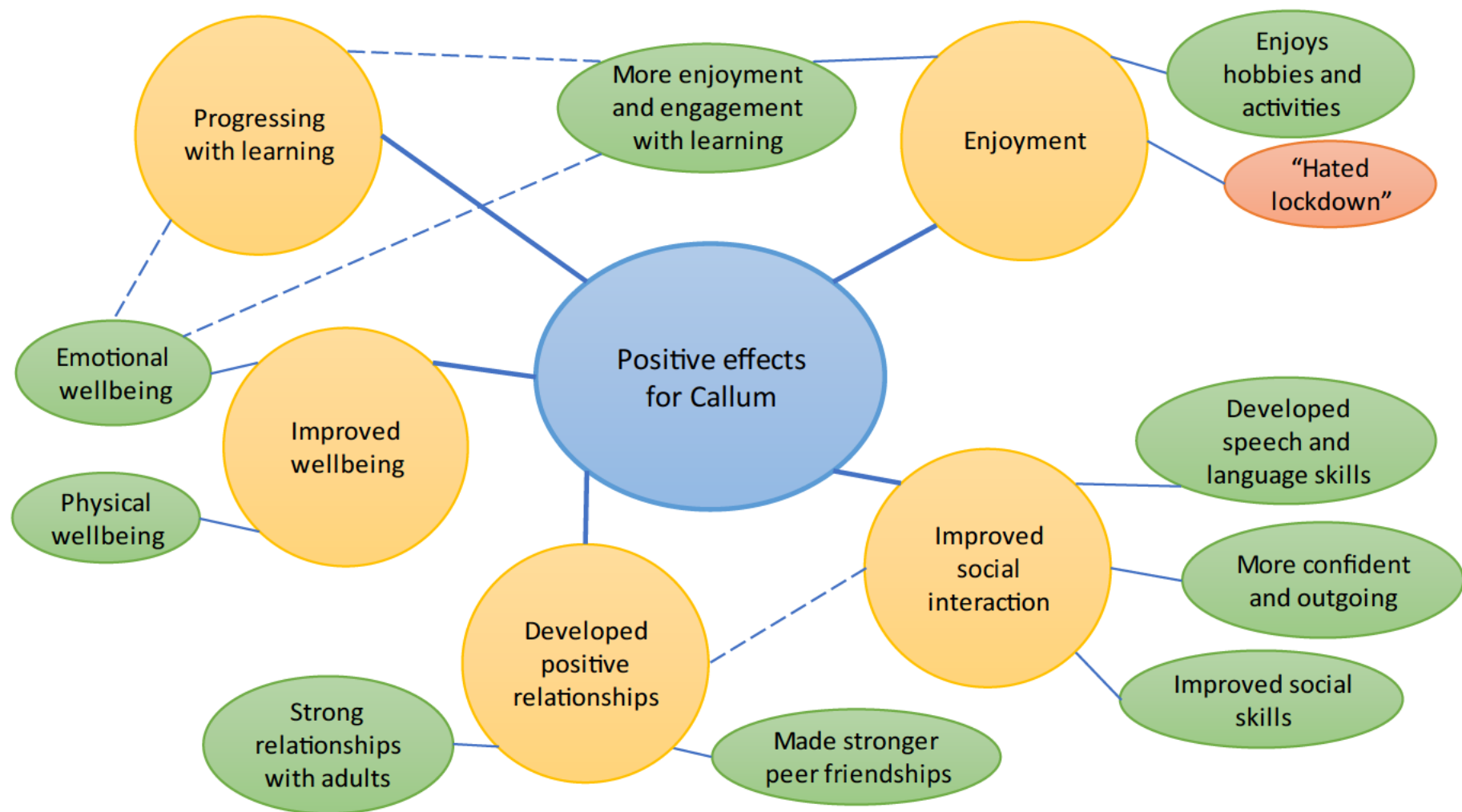
Figure 67: Themes and sub-themes related to RQ1 for Callum's nested case.
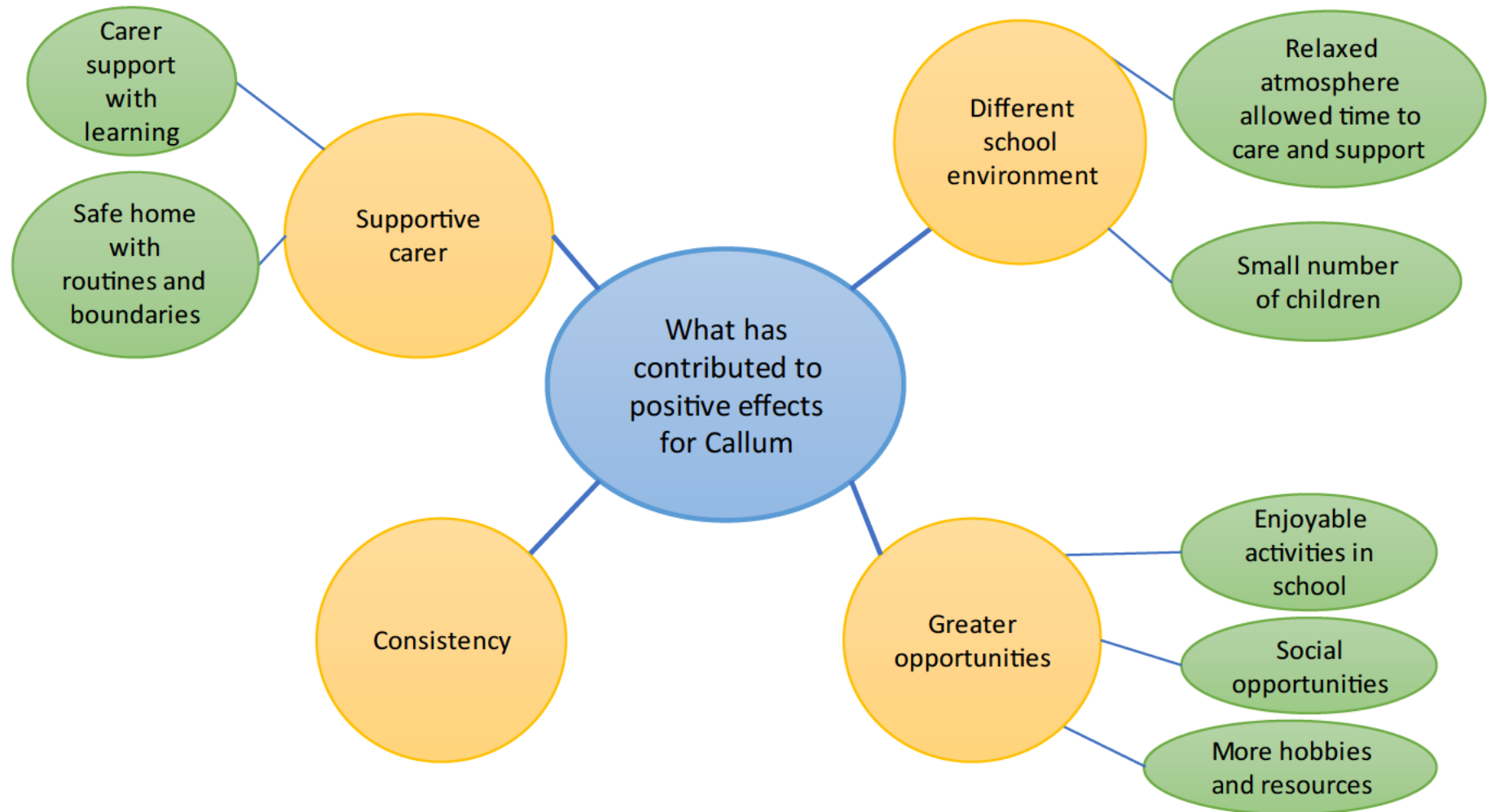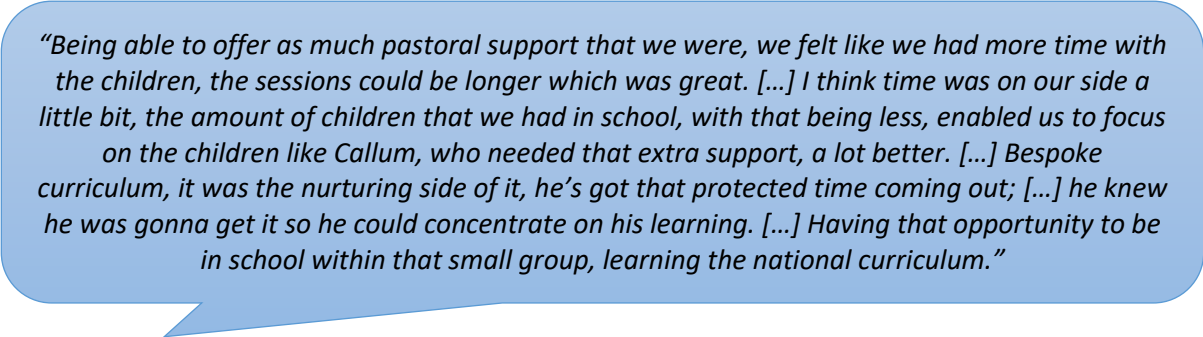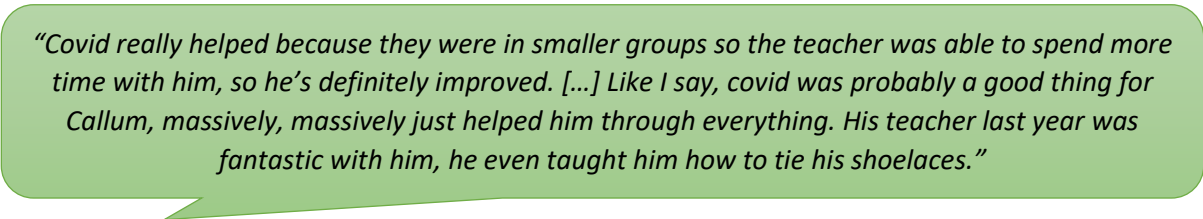
Figure 68: Themes and sub-themes related to RQ2 for Callum's nested case.

When his school closed during the pandemic, it remained open to a small number of children, including Callum. There was less pressure on school staff and more time for them to focus on the children. This resulted in Callum being appropriately fed, having greater opportunities to build connections with school staff, accessing a bespoke curriculum including small group and one-to-one social and emotional wellbeing interventions with his key worker, and small group support with his learning. This was believed to have supported him in many ways including his concentration and life skills.

> *"Being able to offer as much pastoral support that we were, we felt like we had more time with the children, the sessions could be longer which was great. […] I think time was on our side a little bit, the amount of children that we had in school, with that being less, enabled us to focus on the children like Callum, who needed that extra support, a lot better. […] Bespoke curriculum, it was the nurturing side of it, he's got that protected time coming out; […] he knew he was gonna get it so he could concentrate on his learning. […] Having that opportunity to be in school within that small group, learning the national curriculum."*
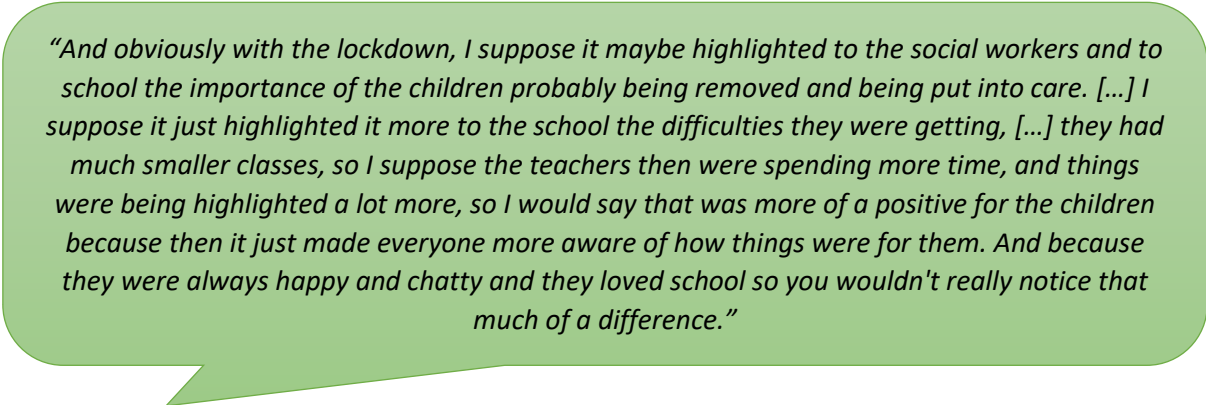
Figure 69: Extract from Callum's school staff's interview.

> *"Covid really helped because they were in smaller groups so the teacher was able to spend more time with him, so he's definitely improved. […] Like I say, covid was probably a good thing for Callum, massively, massively just helped him through everything. His teacher last year was fantastic with him, he even taught him how to tie his shoelaces."*

Figure 70: Extract from Callum's foster carer's interview.
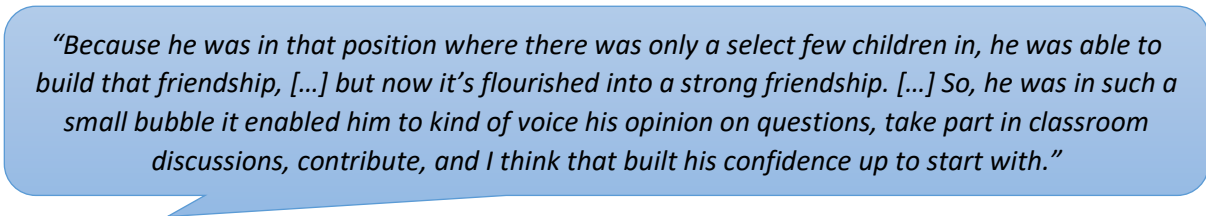
Having more time also may have enabled school staff to highlight safeguarding concerns about his home environment.

> *"And obviously with the lockdown, I suppose it maybe highlighted to the social workers and to school the importance of the children probably being removed and being put into care. […] I suppose it just highlighted it more to the school the difficulties they were getting, […] they had much smaller classes, so I suppose the teachers then were spending more time, and things were being highlighted a lot more, so I would say that was more of a positive for the children because then it just made everyone more aware of how things were for them. And because they were always happy and chatty and they loved school so you wouldn't really notice that much of a difference."*

Figure 71: Extract from Callum's foster carer's interview.

By having fewer children at school, Callum was able to develop his friendships and confidence.

Callum had mixed feelings about his time at school during the school closures. Although he engaged in more enjoyable and fun activities at school and he was pleased that it was less noisy, he also expressed feelings of frustration, confusion and being trapped. Although he initially felt lonely and embarrassed when he asked other children to play, he later felt positive feelings when he made friends.

> *"Because he was in that position where there was only a select few children in, he was able to build that friendship, […] but now it's flourished into a strong friendship. […] So, he was in such a small bubble it enabled him to kind of voice his opinion on questions, take part in classroom discussions, contribute, and I think that built his confidence up to start with."*

Figure 72: Extract from Callum's school staff's interview.

Just before the second school closure, Callum was taken into care and has since lived in a safe and calm foster home. His basic needs are being met, he has routines and boundaries in place, and his carer supports him emotionally and with his learning.

> *"It's like the hierarchy of needs isn't it, now his basic needs are being met for him, he can then progress and be really focused to learn. If he's really hungry, he's not going to have the concentration. If something has happened the night before at home, he would still come into school but he's not going to be focussed on his learning, because his brains occupied with what's going on at home, whereas he doesn't have that now, he's well fed, he's got a good home life, he can concentrate on his learning. […] I would definitely say on the second lockdown, when he had gone into care and he was still attending, this is where we'd seen a major increase in confidence, speech and language development improved, reading improved, because his carer reads with them as much as possible. […] The carer that he's with is very dedicated with their learning, she's keen for them to read at home. Homework as well, was never completed prior to him going into care, but homework is completed now, and with evidence of adult support."*

Figure 73: Extract from Callum's school staff's interview.

> *"They're safe, they're warm, they're fed. From what I can tell things really improved obviously being with me, I think because there was a lot of differences, it was calmer, it was safer, even though they didn't realise that it wasn't that safe you know at home. […] We read in the morning, […] it's a nice little routine for them and they love it, and like I say, it's the structure, so they enjoy it. […] Reading more, so would make a big difference on his confidence for his speech, and obviously with his speech, he's having to learn with words, you know, so people are understanding him now, because he's reading more, he's able to say different words. He wasn't reading at home so it would only be at school."*
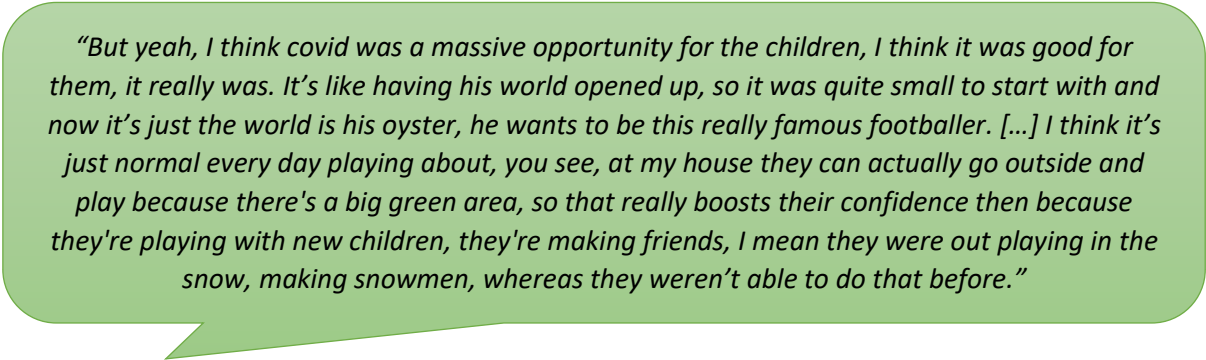
Figure 74: Extract from Callum's foster carer's interview.

Callum initially demonstrated some aggressive behaviours and has since learnt to manage his emotions by talking to his carer.

> *"He's a lot better and he knows how to manage his behaviour, when he gets angry, he comes to try and speak to me first, but now he doesn't tend to."*

Figure 75: Extract from Callum's foster carer's interview.
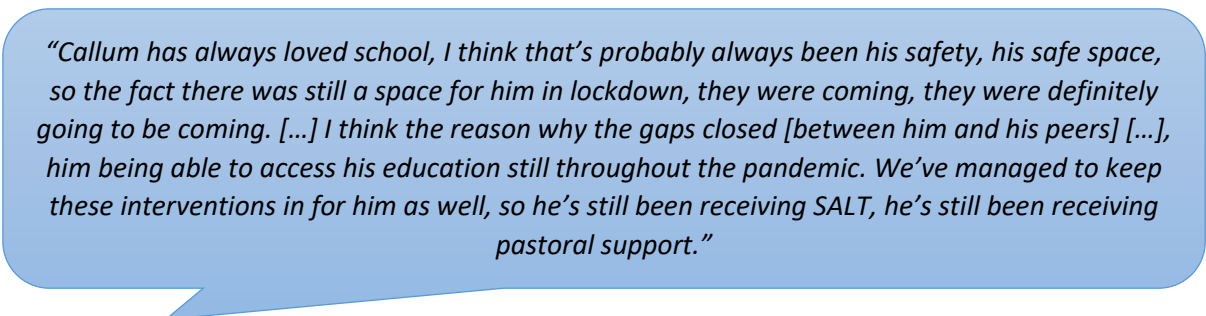
His world has opened up in that he has more opportunities to engage in a range of enjoyable activities and hobbies (e.g., football, playing Xbox), opportunities to play with lots of different children, and to see his friends outside of school.

"But yeah, I think covid was a massive opportunity for the children, I think it was good for them, it really was. It's like having his world opened up, so it was quite small to start with and now it's just the world is his oyster, he wants to be this really famous footballer. […] I think it's just normal every day playing about, you see, at my house they can actually go outside and play because there's a big green area, so that really boosts their confidence then because they're playing with new children, they're making friends, I mean they were out playing in the snow, making snowmen, whereas they weren't able to do that before."

Figure 76: Extract from Callum's foster carer's interview.

Since the pandemic began, Callum has continued to attend school ("his safe space"), access support with his emotional wellbeing and learning from consistent adults and continued to access support from SALT. He has also had consistent routines put in place in his foster home. This consistency seems to have maintained stability and structure for Callum and provided a sense of safety.

"Callum has always loved school, I think that's probably always been his safety, his safe space, so the fact there was still a space for him in lockdown, they were coming, they were definitely going to be coming. […] I think the reason why the gaps closed [between him and his peers] […], him being able to access his education still throughout the pandemic. We've managed to keep these interventions in for him as well, so he's still been receiving SALT, he's still been receiving pastoral support."

Figure 77: Extract from Callum's school staff's interview.

5.1.4.1.1 Summary of Callum's positive outcomes

This combination of facilitating elements within Callum's school and home environment have affected him in many positive ways:

- Callum's physical wellbeing has improved. His basic needs are being met, he has grown, and he has become more independent with self-care skills.

> "He's grown so much. […] When they get up in the morning, they have to change their pants, socks and put their uniform on, do their face and teeth, brush their hair, I suppose they're just guidelines. At first it was like trying to get them to brush their teeth at night was horrendous, smallest things, you know, now it's just a given, they are straight up, they don't argue going to bed any more, there's no fighting it."

Figure 78: Extract from Callum's foster carer's interview.

- He is happier, more settled, and as he is less occupied with his challenging home life, he therefore has the headspace to focus and concentrate on learning. He has developed his emotional regulation skills, and he is more resilient.

> "He is happy go lucky, chilled, and seems more relaxed. It's as if when they came to me, after a little bit, they became children, they weren't distracted, ya know."

Figure 79: Extract from Callum's foster carer's interview.

> "They [Callum and his siblings] almost had got the skill set to be ok with that [a member of school staff leaving]. I didn't know whether they may have had a bit of a lapse because she had been that solid person/attachment."

Figure 80: Extract from Callum's school staff's interview.

- He has expressed more enjoyment across a range of activities. For example, he shows more enjoyment and is more engaged with learning, and he participates in many hobbies, such as football, scouts and playing Xbox. During the school closures, he enjoyed doing more fun activities at school, such as outdoor, physical, and creative activities and watching YouTube.

> *"He loves reading and he will keep reading and reading. He tends to pick books like cartoony type books where they have speech bubbles and you can hear him starting to get into it and the different tones in, acting it out a little bit. [...] He loves football, he would only ever play it at school really with his friends. Now he goes to scouts, he's starting his after-school football after half term, goes and plays out with other kids and plays football, Xbox when he's allowed it. [...] But yeah, he loves it [scouts], absolutely loves it, they do stuff that they need to learn, like sewing and campfires and he gets involved with all that."*

Figure 81: Extract from Callum's foster carer's interview.

- His social interaction skills have improved. His speech and language skills and confidence have developed simultaneously. He is therefore more outgoing and talkative within lessons and with his peers. He is now able to build strong friendships and can interact with children and adults in socially appropriate ways.

> *"He just wants to speak to everybody because his confidence has grown so much with his speech. [...] He used to struggle being out playing with the children, but not so much now, he will go out and they all play. Just being comfortable with other children, and a lot of that was surrounding his speech."*
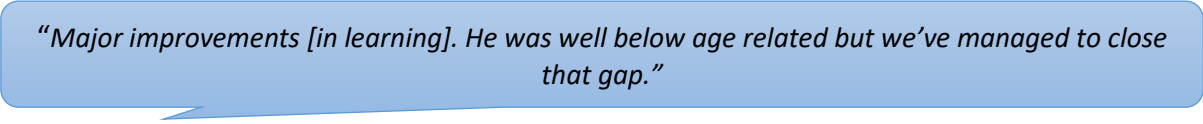
Figure 82: Extract from Callum's foster carer's interview.

- He has built a strong and caring friendship with a child at school and has developed positive relationships with his carer and his 'key adult' at school.

> *"They've got a lovely friendship now, actually, very caring towards each other. [...] A member of school staff joined his bubble in June. He got to know her, not as a 'you're going to work with me on my emotions', but it allowed those relationship foundations to be laid because she supported him academically. [...] Moving out of the home life situation and into the care situation and having that relationship with the carer."*

Figure 83: Extract from Callum's school staff's interview.

- He has progressed with his learning.

> *"Major improvements [in learning]. He was well below age related but we've managed to close that gap."*

Figure 84: Extract from Callum's school staff's interview.

5.2 Overall findings across cases

Having provided an in-depth description, exploration, and analysis of the unique experiences of each child, the key trends and any contradictions or discrepancies across the four case studies in relation to each research question are now discussed.

5.2.1 RQ1: In what ways have these children made relatively positive progress since the COVID-19 pandemic, identified by themselves, their parents, and their teachers?

This section draws on data across the four case studies to present and discuss key trends and any contradictions that relate to RQ1. Figure 89 presents a thematic map depicting the themes and sub-themes across all four cases in relation to RQ1.

5.2.1.1 Improved wellbeing

There is a common theme across all four cases, that children experienced and demonstrated improved wellbeing, in terms of their enjoyment and happiness, self-esteem and confidence, and their feelings of safety.

The children were found to have enjoyed aspects of the pandemic period, which led to them having a more positive outlook on school and learning and feeling happier in general. For example, Rosie and Callum enjoyed attending school during the closures, where they engaged in more fun, creative, physical, and outdoor activities, and since the pandemic they have enjoyed reading more. Rosie is also more motivated to go to school.

Figure 85: Themes and sub-themes across all four cases in relation to RQ1.

Although Roger was at home during the closures, he also enjoyed doing more outdoor, physical activities, and since returning to school, he has experienced the feeling of "panic" less frequently and feels more relaxed at school. Pre-pandemic, Jake often felt sad, confused, and scared at school, but since returning to school, he likes learning and feels excited to attend school. Furthermore, for Roger, Rosie and Callum, new hobbies and activities were a key source of enjoyment, such as gymnastics for Roger, drama club for Rosie, and football, scouts and playing Xbox for Callum. However, all of the children expressed how there were both positive and negative aspects of their experiences during the pandemic; this is discussed further in Section 6.2.3.

These findings align with aspects of previous literature, such as children feeling less stressed (Greenway & Eaton-Thomas, 2020), less anxious or worried (Asbury & Toseeb, 2022; Popoola & Sivers, 2021), and more relaxed (Kim et al., 2021a), with a large proportion of children reporting improved mental wellbeing (Soneson, 2022). However, there were also findings which indicated that the pandemic had a negative impact on children's wellbeing (e.g., Ashworth et al., 2021b). Previous literature also found that the slower pace contributed to children gaining enjoyment from engaging in new hobbies and activities (Council for Disabled Children, 2021; Popoola & Sivers, 2021; Sivers et al., 2020b; Sivers et al., 2020c).

For Callum, Rosie and Roger, there was a common theme of safety. Callum felt safer and more settled at home since moving into care and subsequently presented as more 'smiley' and cheeky at school, with more headspace to focus and concentrate on learning. For Rosie, the development of more trusting relationships with school staff allowed her to feel safe to speak openly, and making new friends and becoming less reliant on one friend provided her with a

sense of safety. Roger's mother expressed how he felt less anxious, safer, and more comfortable at school, and was more willing to share his thoughts and feelings with school staff. However, Roger shared that he still does not feel completely safe at school because he finds some schoolwork stressful.

Increased self-esteem and confidence was found to be a key trend across the four cases. For Rosie and Callum, they demonstrated more confidence in communicating with peers and proactively contributing to class discussions. More specifically, Callum was said to have found "his voice" and became very talkative and sociable, and Rosie was able to speak up for herself when her peers said unkind words to her. For Jake and Roger, they were found to have felt proud of their strengths and achievements at school, and Roger also felt proud of his gymnastics skills. However, Roger's mother and school SENCo believe that he continues to struggle with his self-efficacy. There was a theme of feeling a sense of safety and demonstrating an increase in confidence within the previous literature (Ludgate et al., 2022; Popoola & Sivers, 2021).

5.2.1.2 Developed positive relationships

There was a common theme across all four cases around the children developing positive relationships with adults and peers. More specifically, Rosie and Callum were found to have built strong, trusting relationships with school staff, and had protected time with them to discuss their feelings. Callum also developed a positive relationship with his carer. Jake expressed how he likes his teacher and enjoys helping her, and Roger felt that his needs were more understood and supported by school staff and felt more confident that school staff would support him. In terms of peer relationships, Jake, Callum, and Rosie have made more

friends. More specifically, Callum built a new friendship which flourished into a strong and caring friendship, and Rosie has built and maintained stronger friendships. Within previous literature, findings indicated that children's peer relationships were both positively (Popoola & Sivers, 2021; Soneson, 2022) and negatively (Ashworth et al., 2021a) affected by the pandemic. It was also found that children valued their positive relationships with caring, comforting, and helpful school staff who were available to talk to when they needed them during the pandemic (Popoola & Sivers, 2021).

5.2.1.3 Self-development/personal growth

Across all four cases, there was a common theme that children demonstrated self-development, in terms of their self-regulation, resilience, independence and social skills.

Jake, Roger, and Callum developed their self-regulation skills. Jake demonstrated emotional regulation when adults put in demands and boundaries, and at home, he did this by going to his room. Roger became more able to regulate and manage his sensory and emotional needs by articulating his feelings, self-assessing himself and recognising when he needs to use sensory strategies. Callum was able to manage his emotions and demonstrate socially appropriate behaviours by talking to his carer. Additionally, Callum and Rosie demonstrated enhanced coping strategies and therefore, resilience. Callum was able to cope with a member of school staff leaving, who he had formed a close, strong connection with. Rosie was able to continue to use her coping skills that she had learnt in the small class during the closures, and she learnt to adapt to changes in her difficult home life and developed a sense of right and wrong.

Roger, Rosie, and Callum demonstrated greater independence. While Roger was able to engage in learning activities more independently, Rosie succeeded in independently going on a camping trip with the cubs, and Callum became more independent with his self-care skills, such as getting ready for school and bed.

Callum's, Rosie's, and Jake's social skills improved, with Jake being more understanding of other children's feelings and being able to share, indicating that he may have developed his theory of mind. Callum's speech and language skills and confidence with his social skills developed simultaneously; he became more outgoing and was able to approach and interact with children and adults in socially appropriate ways and build strong friendships. In a similar way, Rosie became more outgoing and able to build and maintain stronger friendships; she was also more able to deal with bullies.

Previous literature found that some children developed their resilience and coping strategies through relationships and hobbies and gained independence (Popoola & Sivers, 2021). In a study by Girlguiding (2021), roughly half of the participants reported that they understood themselves better, and they had learnt new skills, including coping skills. However, it was also found that some children fell behind in terms of their social development, independence, and self-regulation (Skipp et al., 2021a).

5.2.1.4 Greater engagement and progress in learning

Across the four cases, there was a common theme that the children demonstrated greater engagement and progress with learning. Jake, Callum, and Rosie now proactively engage with adult-led learning at school and at home, in classroom discussions and reading activities. Callum and Rosie are more able to focus and concentrate on learning and Roger became more

open to learning and receptive to challenge. Across all cases, curriculum assessments demonstrated 'accelerated progress', or evidence of being closer to 'age related expectations'.

The message within the literature regarding children's engagement and progress with learning is divided, with most children facing negative impacts and some experiencing positive outcomes (Sharp et al., 2020). However, Soneson et al. (2022) found that a third of children reported positive wellbeing, including being able to manage their schoolwork better.

5.2.2 RQ2: How do children, their parents and teachers explain what may have led to the positive progress?

This section draws on data across the four case studies in order to present and discuss key trends and any contradictions that relate to RQ2. See Figure 90 for a thematic map depicting the themes and sub-themes across all four cases in relation to RQ2.

5.2.2.1 Quality time, support, and attention from adults

A key facilitating element that seemed to lead to positive outcomes across the four cases was quality time, support, and attention from adults.

5.2.2.1.1 Time with supportive family

During the pandemic, all four children seemed to benefit from time with their supportive family, which participants believed led to positive outcomes. Jake and Roger both were reported to have had more quality time with their families. This was partly because they were not working or working at home, due to the pandemic. Jake's family also had an Early Help plan, which involved doing more activities as a family, such as having meals together.
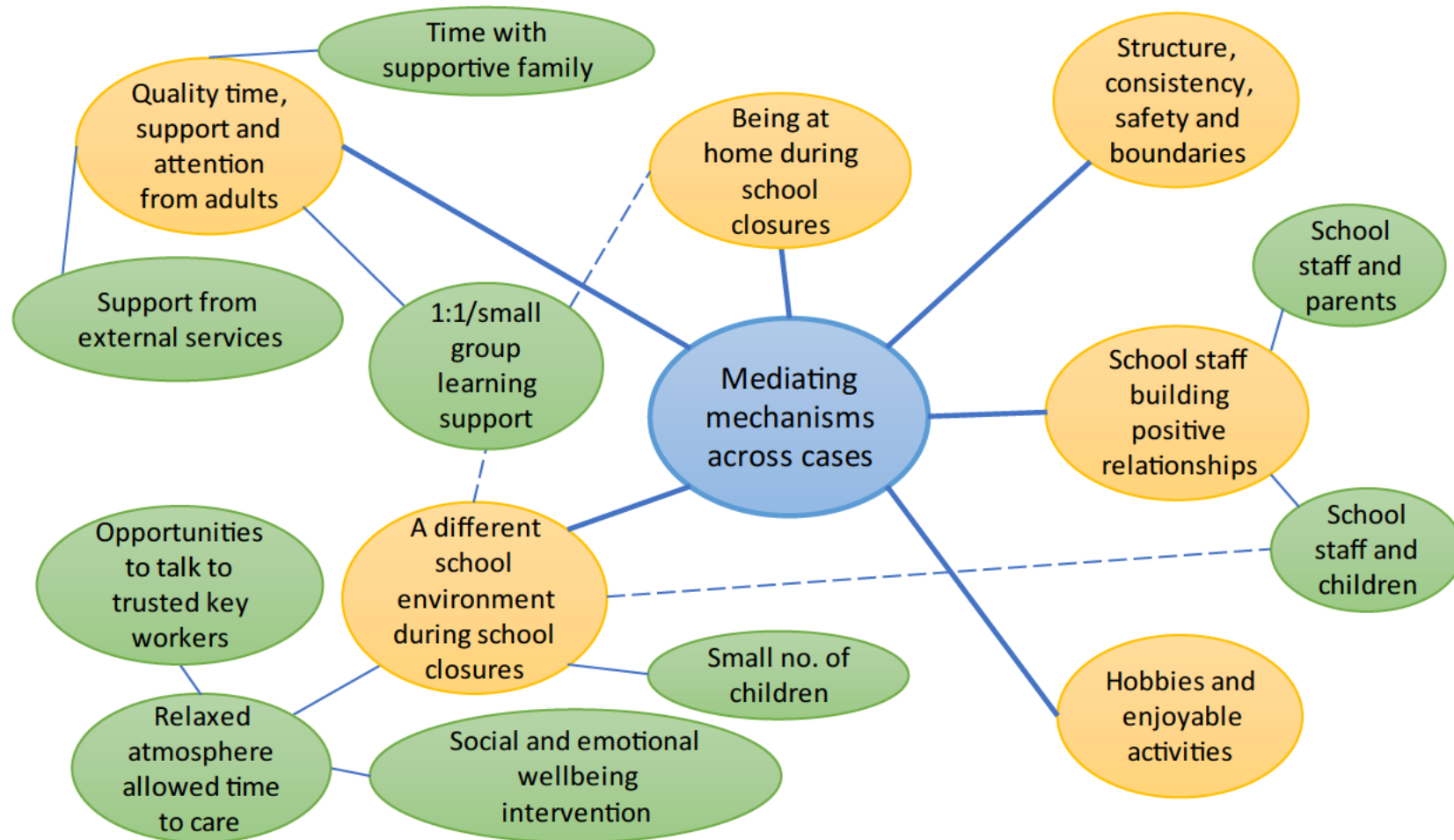
Figure 86: Themes and sub-themes across all four cases in relation to RQ2.

From Jake's school SENCo's perspective, it seemed to support Jake's ability to cope with demands placed on him. Roger's mother described how her and Roger's father were able to take their "foot off the pedal" and give Roger more of their time and attention. They observed Roger's interests, which subsequently supported his mother in discovering and introducing Roger to a gymnastics club that Roger became very successful in and passionate about. Roger's mother shared that she supported Roger in understanding and articulating his own strengths, difficulties, and coping strategies by modelling, celebrating individual differences, and promoting the theory of multiple intelligences (i.e., that there are many ways that someone can be clever, not just academically) (Gardner, 1983).

These narratives of having "unhurried space" for quality family time (Council for Disabled Children, 2021), time to "step back", reflect (Rogers et al., 2021), and gain greater understanding of their child's needs (Lee & Wenham, 2023; Ludgate et al., 2022), and placing a higher value on family time (Council for Disabled Children, 2021), was present in the previous literature. Having more time with family was also found to nurture and strengthen family relationships (Mental Health Foundation, 2020; Soneson, 2022) and facilitate positive social and emotional skills (Hanley et al., 2022). Parents and children were both found to have expressed their enjoyment and cherished the increased closeness (Hoskins et al., 2023; Lee & Wenham, 2023).

Within Rosie's and Callum's case studies, there was an emphasis on how their parent/carer was supportive. For example, Rosie's mother shared how her approach to supporting Rosie with her weight difficulties and her self-esteem may have contributed to her resilience and confidence in coping with children making unkind comments by being aware of the risk factors

for eating disorders, accepting her appearance, and trying to not make a big deal out of it. She also encouraged healthy eating habits at home, which may have contributed to her regaining a healthier weight. Callum's carer was found to have created a safe and calm home in which his basic needs are met, providing sufficient warmth, food, clothing, routines, boundaries and emotional and learning support. In a similar way, previous literature indicated the importance of supportive parents and having access to basic needs (Kim et al., 2021a), although the focus in the literature was specifically regarding the impact of these family circumstances on children's learning. Furthermore, supportive relationships (Popoola & Sivers, 2021) and engaging in more activities that suited children's needs (Ludgate et al., 2022) was found to contribute to feelings of safety and confidence.

5.2.2.1.2 One-to-one and small group learning support

Across the four cases, it was apparent that the children benefitted from receiving more intensive learning support, from a range of adults. Rosie, Callum, and Jake attended school during at least one of the school closures. During this time, they had small classes and more opportunities for one-to-one support and small group work. Rosie's mother expressed how the extra support seemed to contribute to Rosie's progress with reading and her motivation and enjoyment of attending school and reading at home. For Callum, the extra support at school and dedicated support with his homework from his carer was believed to have led to Callum's love of reading, and his progress with his learning, speech and language skills, and his confidence. In addition, the support from adults led to Callum learning key life skills, such as how to tie his shoelaces, from his teacher, and the months of the year, from his carer. In a similar way, previous literature indicated that children were reported to have more opportunities to learn new life skills, although this was believed to be the result of having

more time at home, as opposed to support from teachers (Council for Disabled Children, 2021).

Jake and Roger both received learning support from adults outside of school during the school closures. Jake accessed one-to-one tuition from one of his neighbours, which was believed to be helpful in boosting his reading and writing skills and motivated him to share his achievements with school staff. Since then, his neighbour has continued to support Jake with his homework. Roger received one-to-one, individualised support from his mother who works as a SENCo in a primary school. This included differentiating, ensuring he understood learning tasks, allowing him to complete tasks independently, supported him through a balance of nurture and demands, and overlearning of key skills. This may have protected Roger from failure, provided him with security and reassurance, and supported his self-belief that he could achieve.

These findings align with previous literature, that the reduced amount of children, smaller classes, and more individual support during the school closures was beneficial, particularly for children with SEND (e.g., Ashworth et al., 2021a). As mentioned in the previous section, the literature review highlighted the importance of supportive parents in facilitating children's learning (Kim et al., 2021a) and while some parents struggled with home-learning, some embraced it and used a flexible and creative approach, tailoring the learning to their child's abilities (Lee & Wenham, 2023; Ludgate et al., 2022).

5.2.2.1.3 Support from external services

Across the four case studies, the children received support from a range of external services, which participants believed may have led to their positive outcomes. Jake's family received

support from Early Help, and Rosie had support from the school nursing team, which may have contributed to her regaining a healthy weight. Both Rosie and Callum had support from social care; with Callum being taken into foster care, and Rosie's family being supported via a child protection plan. The aim of social care is to "ensure young people are safe, looked after and aren't suffering from abuse and neglect" (Childline, 2023, online).

Roger received remote assessments and interventions from multiple services. Firstly, he enjoyed the continuation of weekly virtual counselling sessions. Secondly, Roger had remote sensory assessments and interventions from a SEND support service, involving sensory questionnaires completed by parents and school staff, training for school staff, and a self-esteem building project, involving creating a PowerPoint about his strengths, interests, difficulties, and coping strategies. By sharing the PowerPoint with his class, Roger gained positive feedback from his peers, which boosted his self-esteem. The support also resulted in staff having a "light bulb" moment as they were using appropriate and preventative strategies, such as a personalised sensory diet, and he therefore felt that his needs were understood, acknowledged, and supported by staff, which supported his engagement and progress with learning. However, Roger's mother shared that more recently, staff wrongly assumed that he does not need the sensory diet anymore as he seems to be coping without it. Roger's mother believes that he appears to be coping without it because he wants to please his teacher.

Thirdly, Roger received a dyslexia identification, which was found to simultaneously support his understanding of his difficulties and hinder his self-efficacy, creating an additional barrier to learning. For example, while Roger's knowledge of a famous racing driver being dyslexic

motivated him to not let dyslexia prevent him from succeeding, he also shared his belief that dyslexia negatively affects his schoolwork and means that he is "dumb".

In contrast, the previous literature found that a lack of support from external services was a hindering factor (Council for Disabled Children, 2021), due to the move to remote working and the increased demand for services (Ashworth et al., 2021a). The remote working was found to have both pros and cons for children and their families, such as reduced travel time and costs, feeling less intimidated and more relaxed, and meetings could be recorded. However, they also found that communication and relationship building was more difficult (Council for Disabled Children, 2021).

5.2.2.2 A different school environment during school closures

Across Rosie's, Callum's and Jake's case studies, participants described how the school environment was different during the school closures. There were less children attending and there was a calmer and more relaxed atmosphere.

5.2.2.2.1 Relaxed atmosphere allowed time to care

Staff at the school Rosie and Callum attended shared that during the school closures they felt they had less pressure on them and more time to focus on the children; this enabled a calm and relaxed atmosphere, and they were "allowed to care" for the children. For Rosie, there was less pressure on her to complete learning tasks in a certain time frame, and for Callum, there was time to ensure he was appropriately fed. Callum's carer also believed that school staff had more time to notice how his home life was when he was living with his mother, which may have highlighted to school staff and social workers the importance of him being taken into care.

5.2.2.2.2 Opportunities to talk to trusted key workers

While Rosie was attending school during the second closure, she built a strong, trusting relationship with a key worker and had more opportunities to discuss her thoughts and feelings and anything that was troubling her. She consequently felt more able to share and made a disclosure, resulting in social care involvement. Since then, she has continued to share with her class teaching assistant. Similarly, Callum built relationship foundations with his key worker as he got to know her while she was supporting him in class.

5.2.2.2.3 Social and emotional wellbeing interventions

Rosie participated in a five-week social and emotional wellbeing intervention in a small group of children which aimed to develop coping skills. She continued to access this support via a lunchtime club. School staff shared that accessing this support contributed to Rosie becoming more resilient and provided Rosie with more headspace to focus on learning. Callum had a bespoke curriculum that focussed on his social and emotional wellbeing; this involved small group support for self-esteem, friendships, understanding emotions, learning play skills, and having protected time one-to-one with his key worker. When schools reopened, he continued to access this support via weekly sessions of 'reading rooms', involving Cognitive Behavioural Therapy strategies and characters.

Available evidence mirrors these findings, that the main focus was on providing a sense of safety, caring for the children, providing extra-curricular activities (Julius & Sims, 2020), with a greater focus on wellbeing (Soneson et al., 2022). Children and teachers were positive about how school was "a bit different to normal" and children enjoyed doing lessons in different ways and doing physical activities outside (Sivers et al., 2020a). Furthermore, Soneson et al.

(2022) found a correlation between children who attended school during the lockdowns and those who reported increased wellbeing, however, as the study was quantitative, it is not clear why this is.

5.2.2.2.4 Small number of children

The small number of children attending school during the closures seemed to be a facilitating aspect of the pandemic. Jake's mother and school SENCo recognised how Jake benefitted from attending school during the second school closure, when there were smaller class sizes, as he gained more attention from school staff. Jake's mother shared how Jake used to say, "it's nice at school because there's just a few of us now". For Rosie and Callum, the small number of children enabled them to develop their friendships and develop their confidence. Callum seemed to feel more comfortable voicing his opinions and contributing to class discussions, and Rosie's mother shared that having less boys attending the school during the closure enabled Rosie to develop her confidence as there were less children picking on her. Furthermore, the low numbers of children attending school site meant that Rosie was able to have a remote appointment with a school nurse without being on a long waiting list.

The previous literature also found that children benefited from more individual support from school staff (Ashworth et al., 2021a; Soneson et al., 2022) and the reduction in experiences of bullying (Council for Disabled Children, 2021; Soneson et al., 2022), and children enjoyed working and playing with different children and making new friends (Sivers et al., 2020a). Children reported how support from peer relationships was a protective factor in providing someone to talk to about their feelings, a sense of comfort and safety, and helping them feel more confident (Popoola & Sivers, 2021).

5.2.2.3 Being at home during school closures

Jake and Roger seemed to benefit from being at home for at least one of the school closures. However, they were for very different reasons. Jake's mother expressed how, during the first school closure and the summer holidays, Jake was isolated from other children and seemed bored; he was therefore excited to return to school to play with other children and show school staff his learning achievements. The break seemed to highlight, through their absence from Jake's life, positive features of school life, and therefore increased his appreciation of school.

Within Roger's case study, adults shared that Roger benefitted from having additional time at home, as he had time away from an environment that he finds difficult and had time to mature. He also enjoyed having autonomy and freedom to move and fidget during the periods of home learning, and his mother was able to identify helpful strategies and share these with school staff. However, it was also recognised by the SENCo, that Roger enjoying freedom during home-learning seemed to lead to Roger not wanting to return to school after the first school closure. Previous literature highlighted similar themes, such as how home-learning enabled children to experience "less stress and pressure" (Soneson, 2022), and have more flexibility to work at their own pace and take breaks when they wanted to (Council for Disabled Children, 2021). Parents therefore gained greater understanding of their child's needs (Ludgate et al., 2022; University of Cambridge, 2022), becoming more attuned and able to share their insights with school staff (Lee & Wenham, 2023).

Furthermore, Roger's school SENCo explained how Roger's engagement with external support services while he was at home with his family was beneficial. For example, he felt more

ownership of the self-esteem building project, his counsellor was able to learn more about Roger due to him feeling more comfortable at home, and parents were able to see how committed school staff were in supporting him.

5.2.2.4 School staff building positive relationships

5.2.2.4.1 School staff and children

Positive relationships between school staff and children was found to be a clear narrative amongst the four cases. For example, while Rosie was attending school during the second closure, her and her consistent teacher got to know each other and built a positive connection; Rosie was therefore more confident in contributing to class discussions and her teacher was more aware of her learning potential. This contributed to her making progress with her learning and these positive effects continued when the school reopened to all children. Callum also built positive relationships with school staff; he describes them as kind and his carer said that he talks about them positively.

Roger's school SENCo shared that since Roger returned to school after the closures, he has had a positive relationship with his teacher. She believed this to be an incredibly important factor in supporting Roger, as he needs a balance of acknowledging his difficulties, while not singling him out from his peers. Participants in Jake's case study indicated that school staff invested time and energy into building meaningful relationships with him by understanding and adapting to his needs and recognising his achievements. Jake's mother shared how school staff played a big role in supporting his progress, as they were very patient and supportive when Jake was presenting with challenging behaviour, indicating that school staff were invested and demonstrated unconditional positive regard towards Jake.

Similar themes were identified within the literature review, such as how caring and comforting relationships between school staff and children facilitated feelings of safety and developed resilience in children during the pandemic (Popoola & Sivers, 2021). Teachers also highlighted the importance of relationships with pupils (Asbury et al., 2021), reporting how "small gestures and interactions" could be particularly useful in "encouraging engagement and boosting the wellbeing" of children (Kim et al., 2021b, p. 252).

5.2.2.4.2 School staff and parents

A common facilitating element, raised across cases, was positive relationships between school staff and parents. During the second school closure, in which Rosie attended school, school staff reported increased communication with Rosie's mother, and Jake's mother and school SENCo both indicated that they had a positive relationship, with Jake's mother sharing how school staff were very supportive and patient. Roger's school SENCo shared how the relationship between school staff and parents strengthened during the pandemic, and that parents had become more confident in how school staff were supporting Roger. The SENCo believed that this contributed to Roger's confidence in school staff and facilitated his positive outlook of school. Roger's mother shared that she appreciated their support.

Previous literature also identified relationships between school staff and parents to be a mediating factor in supporting children. Teachers shared how a partnership which involves regular communication can facilitate effective and teaching practices (Asbury et al., 2021; Kim et al., 2021a; Kim et al., 2021b), and Lee and Wenham (2023) suggest that teachers could nurture effective partnerships with parents, harnessing their insights gained through educating their children in an alternative context.

5.2.2.5 Structure, consistency, safety, and boundaries

For Jake, Callum, and Rosie, structure, consistency, safety, and boundaries were identified as supportive elements during the pandemic.

For Callum and Rosie, consistency was judged to have been important. By attending school during at least one of the closures, their routine and structure was maintained, and they had continued access to a safe place with support from consistent adults, and interventions for their social and emotional wellbeing. This enabled Rosie to build closer relationships with school staff, have healthier eating habits, and facilitated an increase in communication between school staff and parents. Callum's speech and language therapy continued, and his carer provided consistency and safety (i.e., routines and boundaries) at home; the latter was believed to have alleviated some of his worries and resulted in Callum being able to focus more and progress with his learning.

Jake's school SENCo indicated how the introduction of more structure and boundaries at school and at home seemed to support Jake in his ability to self-regulate his behaviour and cope with adult's demands. She shared that prior to the pandemic, Jake's parents struggled to manage his behaviour at home, and he seemed to have a lack of routines and boundaries. The focus on routines, structure, and boundaries within the Early Help plan seemed to improve Jake's behaviour. Jake also seemed to benefit from the fully structured and adult-led learning environment of his Year 1 class, compared to balance of child-led and adult-led learning when he was in his Reception year, pre-pandemic.

A similar theme was identified in previous literature, such as how routines and being informed helped children to feel safe and increased their resilience (Popoola & Sivers, 2021). For

example, maintaining contact and connections with friends and teachers (Sivers et al., 2020c), and being well-informed about COVID-19 related routines at school (Popoola & Sivers, 2021).

5.2.2.6 Hobbies and enjoyable activities

Hobbies and enjoyable activities were common themes that were found to support Roger's, Rosie's, and Callum's wellbeing. By engaging in more enjoyable activities at school, Rosie developed a more positive outlook of school, and became more motivated to attend school and engage with learning. Also, by attending a drama club, her confidence and self-esteem increased, and she was able to speak up for herself in response to unkind comments from her peers. Roger's mother shared that Roger was able to spend more time outside doing physical activities during the lockdowns which enabled her to observe his interests and led to her suggesting that he could join the gymnastics club. As a result, Roger expressed that he has found "his thing", an activity that he excels in, and a club where he feels he belongs, which seemed to have had a positive impact on his self-esteem.

Within Callum's case study, there was a clear narrative that Callum had greater opportunities since the start of the pandemic period and had 'his world opened up'. He joined a football club, had an Xbox and a laptop, played outside with different children in the local neighbourhood, and saw his school friend outside of school. Callum also had more opportunities for enjoyable activities at school. The social opportunities supported Callum's confidence and friendships.

These findings align with previous literature, as children were found to have enjoyed new and different learning opportunities during the pandemic, such as blended learning, independent research, using technology, and extra-curricular, creative and outdoor activities (e.g., Soneson

et al., 2022; Williams et al., 2021). More specifically, Hanley et al. (2022) found that regularly playing outside or attending a club with peers supported children's social skills and friendships.

5.2.3 RQ3: What do children, their parents and teachers believe would be helpful for the child beyond the pandemic?

The thematic analysis for all participants' responses that relate to RQ3 was conducted separately, due to the participants' responses being minimal, and it was therefore feasible to analyse the data of all cases from the outset. Also, in comparison to RQs 1 and 2, responses from the school staff participants did not tend to be specific to the child's unique circumstances, and therefore, the case context was not as important to consider while analysing the data. A thematic map for RQ3 is presented (Figure 92), along with an explanation of each theme.

5.2.3.1 More adult attention

A common theme across the data was the belief that the children would benefit from more adult attention going forwards, such as having more quality time with their families and having more support with the learning from school staff.

5.2.3.1.1 More quality time with family

Across three participants from three separate cases, there were responses around prioritising quality time with family. While Jake's school SENCo emphasised how it had been helpful for parents being at home more during the pandemic, to reinforce the actions on the Early Help plan, Callum shared how he would like more opportunities to visit his family as this was something he really enjoyed.

More 1:1 or small group work

More adult attention

More quality time with family

Support from adults in the community

More time with friends

What would be helpful for some children beyond the pandemic?

Focus on emotional wellbeing

Inclusive classrooms

School practice

Being outdoors more

Remote support
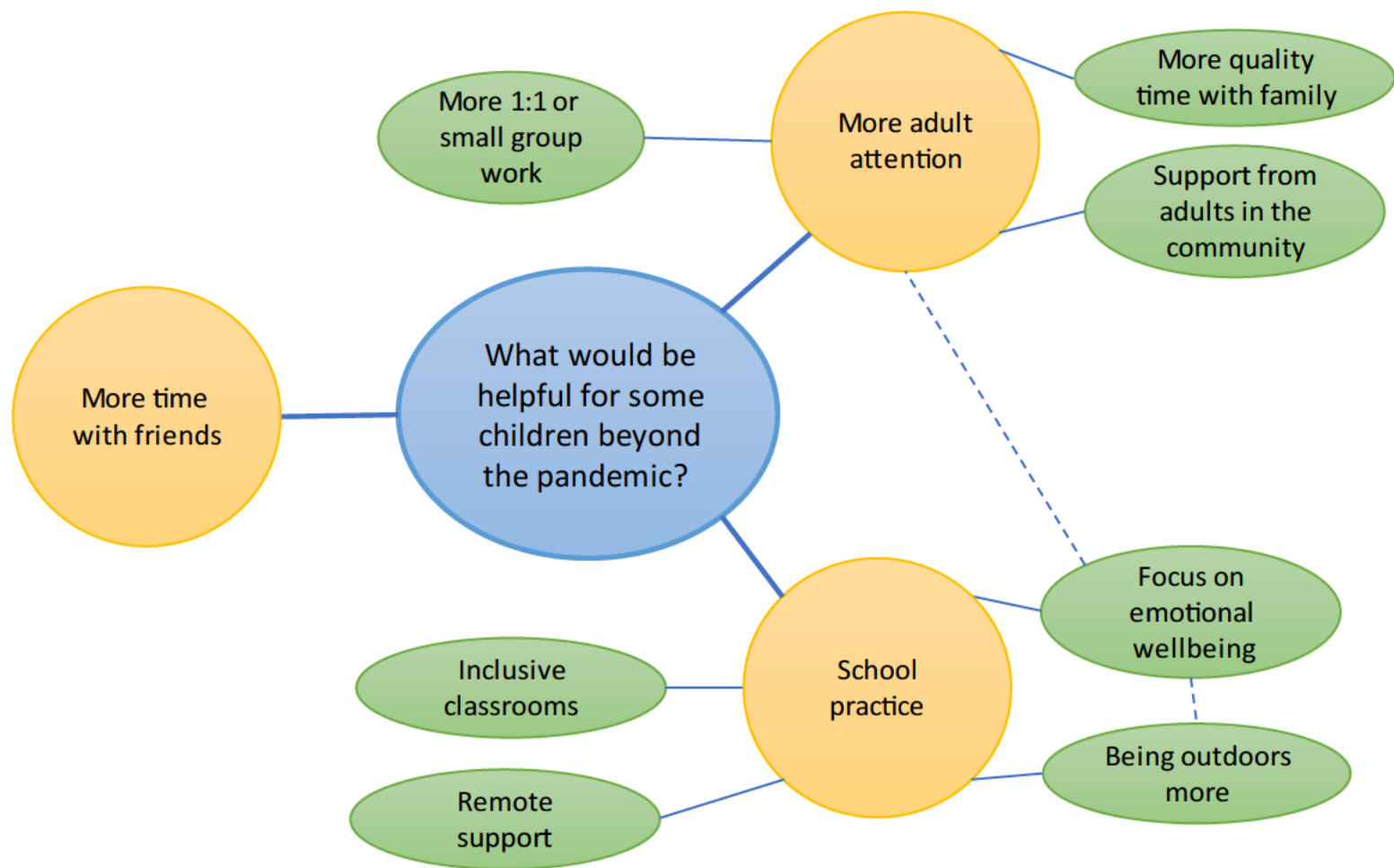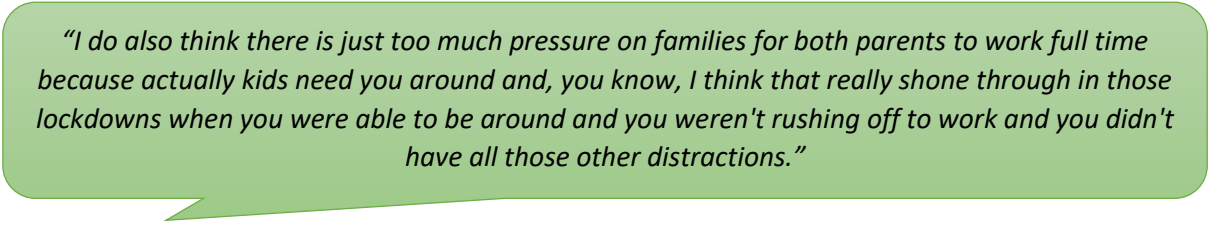
Figure 87: Themes and sub-themes across all four cases in relation to RQ3.

Roger's mother emphasised how much every member of their family benefitted from having more time at home together during the pandemic, and it was particularly helpful for Roger to have more quality engagement with more emotionally available parents. She also expressed how although there is societal pressure for both parents to work full-time, her and Roger's father were considering reducing their hours at work.

> *"I do also think there is just too much pressure on families for both parents to work full time because actually kids need you around and, you know, I think that really shone through in those lockdowns when you were able to be around and you weren't rushing off to work and you didn't have all those other distractions."*

Figure 88: Extract from Roger's mother's interview.

This was mirrored in previous literature, that having "consistent and high-quality social interactions" with family can strengthen children's social and emotional wellbeing during lockdowns (Hanley et al., 2022, p. 11), and going forwards, it would therefore be beneficial to prioritise time for relaxing, reflecting, spending quality time with family, and exploring interests (Council for Disabled Children, 2021).

5.2.3.1.2 More one-to-one or small group support

Across three cases, most parents and school staff advocated for the implementation of more one-to-one or small group support with learning for the children. Jake made significant progress in his learning from having one-to-one tuition from a neighbour, and Jake, Callum and Rosie benefited from attending school during the closures, in which school staff had less pressure on them and less visitors in school for them to coordinate; this enabled them to focus on children who needed extra support.

> *"Callum would benefit from a small teaching group until they caught up. That helped him to be able to spread his wings, being in that small group."*

Figure 89: Extract from Callum's foster carer's interview.

Although previous literature highlighted the benefits of more individual support during the pandemic, it was not explicitly identified as being helpful beyond the pandemic (Ashworth et al., 2021a).
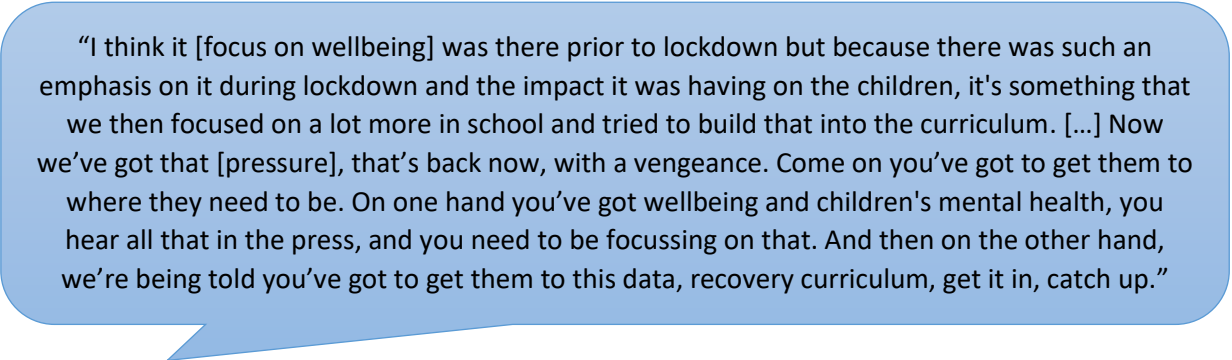
5.2.3.2 School practice

Another common theme across the data was around changes in school practice, with a greater focus on emotional wellbeing, being outside more, incorporating remote support, and facilitating more inclusive classrooms.

5.2.3.2.1 Focus on emotional wellbeing

The staff at Callum's and Rosie's school emphasised how the reduced pressure on staff and the reduction in visitors enabled them to focus on the children's emotional wellbeing during the pandemic, and they explained how they wanted to maintain and review aspects of this beyond COVID-19. For example, they described how they implemented a wellbeing curriculum (including wellbeing walks, being outside more, pastoral support, playing games), recruited a wellbeing lead, delivered lessons on growth mindset (Dweck, 2017), and organised staff training on emotional wellbeing and emotion coaching. For parents, they indicated the intention to run sessions on topics such as growth mindset, emotion coaching and self-esteem. However, staff also raised concerns that focus on wellbeing is likely to reduce, as the focus on being 'data driven' increases. Since the school reopened, staff report feeling the

pressure resume and feel conflicted about whether they should continue to focus on children's wellbeing and mental health, or their academic achievement.
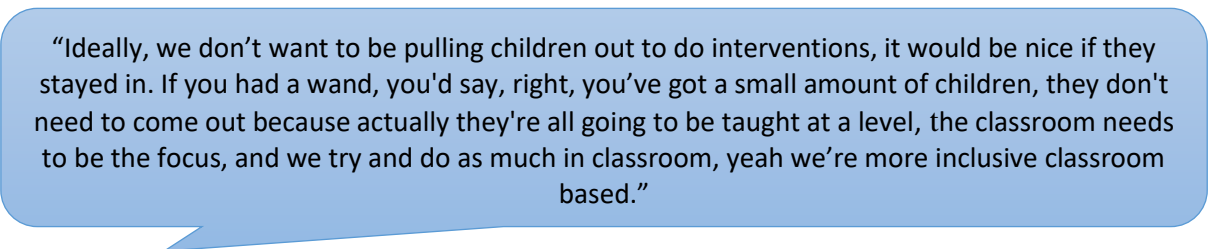
> "I think it [focus on wellbeing] was there prior to lockdown but because there was such an emphasis on it during lockdown and the impact it was having on the children, it's something that we then focused on a lot more in school and tried to build that into the curriculum. […] Now we've got that [pressure], that's back now, with a vengeance. Come on you've got to get them to where they need to be. On one hand you've got wellbeing and children's mental health, you hear all that in the press, and you need to be focussing on that. And then on the other hand, we're being told you've got to get them to this data, recovery curriculum, get it in, catch up."

Figure 90: Extract from Callum's and Rosie's school staff interview.

Several previous studies highlighted the importance of developing the curriculum to focus more on nurturing children's emotional wellbeing, life skills, and their relationships, instead of academic achievement being the focus; they suggested relational approaches, nurturing school and community connections, and providing a safe, welcoming and inclusive environment (e.g., Sivers et al., 2020a).

5.2.3.2.2 Inclusive classrooms

The staff at Rosie's school discussed how Rosie would benefit from a smaller class size going forward, as she is capable of accessing the mainstream curriculum, but benefits from greater support from staff. They described that in an ideal world, their school would have small classes in which all interventions are conducted within the classroom.
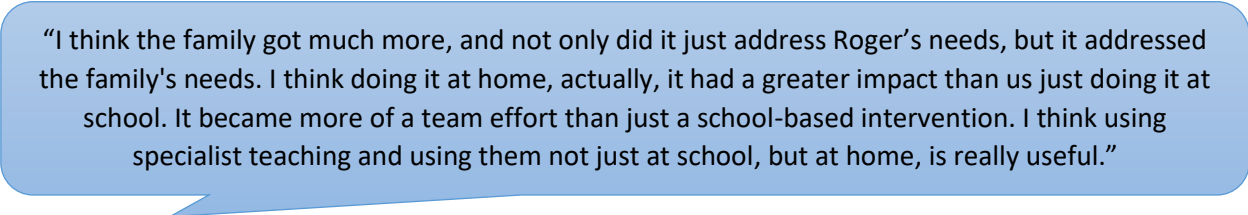
> "Ideally, we don't want to be pulling children out to do interventions, it would be nice if they stayed in. If you had a wand, you'd say, right, you've got a small amount of children, they don't need to come out because actually they're all going to be taught at a level, the classroom needs to be the focus, and we try and do as much in classroom, yeah we're more inclusive classroom based."

Figure 91: Extract from Callum's and Rosie's school staff interview.

This was mirrored in previous literature, suggesting that some children may benefit from smaller classes (Council for Disabled Children, 2021).

5.2.3.2.3 Remote support

Within Roger's case study, there was recognition of the benefits of remote support. The school SENCo identified that supporting Roger remotely via a specialist SEND service had a greater impact than supporting him in school for several reasons. It acknowledged the difficulties both at school and home, supported both Roger's and his family's needs, and fully involved Roger's parents, fostering a collaborative approach and leading to a more positive relationship between school and family. This experience led the specialist teacher and the school SENCo to believe that it may be helpful for specialist teachers to support children virtually within the home beyond the pandemic. Furthermore, Roger's mother raised how her, and her teaching colleagues, used their adaptive skills during the pandemic and found alternative ways of working that may be helpful in future, such as delivering a virtual phonics intervention.

"I think the family got much more, and not only did it just address Roger's needs, but it addressed the family's needs. I think doing it at home, actually, it had a greater impact than us just doing it at school. It became more of a team effort than just a school-based intervention. I think using specialist teaching and using them not just at school, but at home, is really useful."

Figure 92: Extract from Roger's school SENCo interview.

Some findings in the previous literature demonstrated benefits of remote support, however, these were not explicitly identified as aspects that would be helpful beyond the pandemic. For example, parents reported reduced travel time and costs, feeling less intimidated and more relaxed, and having the option to record the meeting (Council for Disabled Children, 2021). Professionals reported benefits such as time efficiency and convenience, being easier to

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arrange multi-professional meetings, and being more accessible for some (Ashworth et al., 2021a).

5.2.3.3 More time with friends

Callum, his carer and Rosie raised the importance of friendships; having more opportunities to make friends, maintain friendships and spend more time with friends. Although Rosie liked having smaller classes during the pandemic, she expressed a desire to return to bigger classes, as there are more children and more opportunities to make friends. Callum and his carer shared how important friends are for Callum going forwards, and his carer added that they help him feel confident.

Marina: *"So, you prefer having big classes?"*

Rosie: "Yeah."

Marina: *"With 30 children in?"*

Rosie: *"Yeah."*

Marina: *"Why?"*

Rosie: *"Because there are more children and I can make more, more friends."*

Figure 93: Extract from Rosie's interview.

"He feels really confident, you know, when he's got his friends, he just likes to joke and chat."

Figure 94: Extract from Callum's foster carer's interview.

Although peer relationships were not mentioned in the previous literature as being helpful beyond the pandemic, children did report how they were a protective factor during the pandemic, in providing someone to talk to about their feelings, a sense of comfort and safety and helping them feel more confident (Popoola & Sivers, 2021).

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5.2.4 Positive and negative experiences

Compared with the adults' perspectives, which often involved glowing accounts of the progress the child had made, the children's perceptions of their experiences were far less focussed on their positive developments. For the children who were at home during one or both of the school closures, there were both positive and negative aspects reported regarding their experiences during this time.

- Although all contributors to Jake's case study recognised how Jake made progress in many areas during the first school closure when he was at home, this period of time also involved some difficulties. Jake's mother reported that he was bored at home and was not able to play with many other children. Jake also commented that learning activities were "too long" when he received one-to-one tuition from his neighbour during this time.

- Again, although home-learning was predominantly a positive experience for Roger and led to positive outcomes, all participants within Roger's case study also indicated difficulties that arose from home-learning. Roger shared that he did not like it and it was "weird", his mother shared that he found the zoom lessons overwhelming, and his school SENCo shared that he was resistant to join some lessons. For parents, home learning was not enjoyable and juggling work and home responsibilities was difficult.

- For Rosie, the home-learning experience during the first school closure was overwhelmingly negative. All participants shared that Rosie did not access any learning via online school learning or paper versions and adults shared that Rosie's parents found it difficult to engage her in home-learning as she found it hard to understand

that she needed to do schoolwork at home. Rosie's mother shared that she faced difficulties accessing the school's online platforms and felt pressure; she shared how Rosie became frustrated, lacked motivation and she therefore engaged with alternative learning activities such as creative art. Rosie shared that she felt confused because she did not understand why she was not allowed to go to school. Rosie's mother shared that she was worried about Rosie getting COVID-19 and Rosie was therefore very isolated form her friends; Rosie shared that she felt trapped, upset, lonely because she did not have anyone to play with.

Similarly, for the children who were at school during one or two of the school closures, there were both positive and negative aspects reported regarding their experiences during this time.

- Callum described aspects of the school closures that he did not like, and expressed frustration because he "hated, hated, hated lockdown". He felt confused about the mixed messages from school staff about what he was allowed to do when he was inside compared to outside, and he felt trapped because he was restricted to where he could go in the school. As his friends were not able to attend school, he felt lonely and embarrassed when he asked other children to play. Furthermore, Callum's responses indicated that he preferred learning within typical schooling practices compared to school practice during the closures and he shared that there was "barely any learning".

- Rosie reported experiencing some difficult feelings; she felt frustrated, lost, and embarrassed, and shared that it was weird that the children had to "keep changing classes".

This pattern of children focussing more on negative aspects raises the question of whether school staff and parents are open and explicit with children regarding the progress that they make. Furthermore, it could be that adults do communicate with children about their progress, but children struggle with their self-esteem and self-efficacy, or they experienced negativity bias during the interview, which is a normal human tendency (Vaish et al., 2008).

Similar findings were also found in previous literature regarding children and parents finding home-learning difficult. This included missed social contact with others and feeling lonely (e.g., Popoola & Sivers, 2021), feeling overwhelmed by the amount of screen time (Council for Disabled Children, 2021), and parents struggling to juggle engaging their children with learning and other responsibilities (Council for Disabled Children, 2021), while facing issues of children not being used to working at home (Kim et al., 2021a), and finding it difficult to navigate the online learning platforms (Ashworth et al., 2021a).

Previous literature also found that children experienced feelings of uncertainty, confusion and worry, specifically regarding theirs and others' safety around COVID-19 (Council for Disabled Children, 2021; Popoola & Sivers, 2021; Sivers et al., 2020b; Sivers et al., 2020c).

6. CHAPTER SIX: DISCUSSION

6.1 Summary of key findings

Across the four case studies, analysis of the data suggests that the children experienced improved wellbeing, personal growth and greater engagement and progress with learning, having developed positive relationships with both adults and peers. A range of mediating mechanisms were believed by the participants to have contributed to the positive outcomes, suggesting the importance of relationships, structure, consistency, safety, and boundaries. Children appeared to benefit from reduced pressure, quality support from school staff for their learning and emotional needs, and a curriculum that focused on their wellbeing and enjoyable, motivating activities. Quality time with family members and a strong school-parent partnership were also found to be supportive mechanisms. It could be argued that some of these mechanisms were made possible due to the pandemic, particularly the quality time with family, and the reduced pressure and greater focus on wellbeing in terms of school provision.

However, it is also important to consider that the positive outcomes may have occurred due to normative child development. It could be argued that if the pandemic had not happened, the children may have made progress regardless, due to their levels of maturity developing over the period, combined with any protective or facilitating factors that they were already experiencing. Furthermore, the PPCT (Bronfenbrenner & Morris, 1998) and person-environment interaction (Holmbeck et al., 2008) theoretical models discussed in Section 3.4 emphasise that outcomes are influenced by an endlessly changing forcefield of factors, such as individual characteristics and interactions within different systems. Therefore, similar outcomes may have occurred under a wide range of conditions and children's progress cannot

be explained solely by the impact of the pandemic. Thus, while case study methods provide structured accounts of complex phenomena (Thomas, 2016), they cannot establish causality. Thomas (2016, p. 9) asserts that causality is not necessarily helpful in social sciences, as the connections are "multistranded and multidirectional".

The findings should be interpreted taking the limitations of the study's methodology into consideration, which are discussed further in Section 6.3. For example, the study was conducted within a narrow context (i.e., one area of England) and the sample was small and did not aim to be representative. There is therefore limited generalisability to the wider population. While case study methods and idiographic research provide detailed and specific accounts of complex phenomena, they cannot establish generalisability, and instead provide a basis to "take inferences and interpret these in the context of our personal knowledge" (Thomas, 2016, p. 19). The study therefore offers theoretical generalisation (Johnson, 1997) or analytic generalisation (Yin, 2009), in which the data is used to develop, rather than test theory, and make predictions about the probable legitimate transferability of findings from the current cases, based upon the theoretical analysis of the factors mediating outcomes and the effects on and of context. This study could be replicated with a greater sample size, in order to achieve some level of generalisation. However, the findings would nonetheless need to be generalised with caution, due to the complex interplay between a child's individual characteristics, and the range of influencing factors, such as their interactions with the systems they are part of.

6.2 Theoretical perspectives

Several conceptual frameworks are utilised to connect the current research to previous theory and knowledge and support the understanding and interpretation of the findings.

6.2.1 Process-Person-Context-Time or bioecological model of human development

The current study used the PPCT model (Bronfenbrenner & Morris, 1998) as an integrating conceptual framework for the design of the enquiry and interpretation of findings. As mentioned in Section 4.4.1, a nested case study design, with a heterogenous sample, and consultation with multiple microsystems is advised when harnessing the bioecological model as a conceptual framework (Bronfenbrenner & Crouter, 1983). Jaeger (2017) states that as long as the most salient inter-connecting factors are carefully considered, inferences can be made regarding the overall picture. Within the current study, it appears that distal and proximal processes and systems were found to be influential in contributing to the child participants' positive progress over time. As the four focus children were found to be disadvantaged in some way before the pandemic, it could be that the alternative practice and lifestyle they experienced during the pandemic was advantageous to the children at this particular time in their lives. Table 22 provides an overview of how the key findings from the current study integrate with the PPCT model.

Table 22: Applicability of the PPCT framework (Bronfenbrenner and Morris, 1998) to key findings derived from the four nested case studies.

Area of PPCT model	Findings from the current study
Process	Both distal and proximal processes were found to be influential in contributing to the child participants' positive progress. • All the children experienced quality time, support, and attention from adults, which seemed to lead to positive outcomes. This included more time with their families, one-to-one or small group learning, and support from external services. For example, Roger and his mother collaboratively discovered his hobby as they had more quality time together at home (proximal process), due to Roger's mother having time off from work (distal influence). This allowed Roger to engage in activities that he enjoyed, and his mother was able to observe and suggest possible clubs for him to join.

	• Across all case studies, school staff were found to have built positive relationships with children, which acted as a mediating mechanism for positive outcomes. For example, while Rosie was attending school during the second closure, she built a strong, trusting relationship with a key worker and had more opportunities to discuss her thoughts and feelings and anything that was troubling her. She consequently felt more able to share and made a disclosure, resulting in social care involvement.
Person	I recruited a heterogenous sample and gathered key information about the children, such as their age, ethnicity, sex, their family situation (i.e., who they live with), and SEND. I was cautious to gather further personal information about the children for ethical reasons. It was apparent from the information gathered that all four of the focus children were disadvantaged in some way. Two children were being supported by social care, and all the children were academically working below age related expectations pre-pandemic. It therefore could be that prior to the pandemic, typical school practice was not meeting their needs. Whereas the range in practice during the pandemic, such as home-learning and the smaller classes were advantageous to the children at this particular time in their school lives. This indicates that more flexible and adaptable school practices may benefit children who struggle with typical schooling. The participants' views tended to focus on environmental mediating elements rather than within-child aspects. However, Callum and Rosie were reported to have demonstrated enhanced coping strategies and resilience; Callum

	was able to cope with a member of school staff leaving, who he had had a close, strong connection with. Rosie was able to continue to use her coping skills that she had learnt in the small class during the closures, and she learnt to adapt to changes in her difficult home life and developed a sense of right and wrong. This may therefore indicate that Callum's and Rosie's resiliency was a mediating mechanism. However, it is difficult to determine whether the children had resilience as a characteristic prior to the pandemic, or whether they were only able to develop a sense of resilience due to the complex interplay of elements that they experienced during the pandemic.
Context	Microsystems and mesosystem: • For Jake, Callum, and Rosie, structure, consistency, safety, and boundaries seemed to be supportive elements during the pandemic. For example, for Jake, the introduction of more structure and boundaries at school and at home seemed to support Jake in his ability to self-regulate his behaviour and cope with adult's demands. • Hobbies and enjoyable activities were found to support Roger's, Rosie's, and Callum's wellbeing. For example, by engaging in more enjoyable activities at school during the pandemic, Rosie developed a more positive outlook of school, and became more motivated to attend school and engage with learning. Also, by attending a drama club, her confidence and self-esteem increased, and she was able to speak up for herself in response to unkind comments

from her peers. This demonstrates that she was able to develop her skills in one microsystem and apply them within another.

- Jake and Roger seemed to benefit from being at home during school closures. For example, Roger had time away from an environment that he finds difficult, enjoyed having autonomy and freedom to move and fidget, and his mother was able to identify helpful strategies and share these with school staff. This shows that the change in circumstances resulted in helpful information being shared from one microsystem to another.

- The school environment was reported to be different during the school closures and seemed to be a mediating mechanism for positive progress.

  o For Rosie and Callum, school staff shared how they felt there was less pressure and more time, enabling a calm and relaxed atmosphere. They were "allowed to care" for the children, having more time to nurture and support their social and emotional wellbeing. For example, Callum's teachers had more time to notice how his home life was when he was living with his mother, which may have highlighted to school staff and social workers the importance of him being taken into care. This demonstrates how the unusual school context led to school staff being more able to safeguard the child from an unsafe home environment.

	o The small number of children attending school during the closures seemed to be a facilitating aspect of the pandemic. For Rosie and Callum, the small number of children enabled them to develop their friendships and develop their confidence. Jake seemed to benefit as he gained more attention from school staff. • Across cases, positive relationships were strengthened between home and school during the pandemic, including increased communication, and school staff being supportive, and this led to positive outcomes for the children. For example, engaging with a project while Roger was at home with his family seemed to support his feelings of ownership of the project and presenting his PowerPoint to his class gave him positive feedback from his peers and boosted his self-esteem. Being at home while receiving support from school staff enabled Roger's parents to see how committed school staff were in supporting him, which increased their confidence in them. This facilitated Roger's confidence in school staff and his positive outlook of school. Therefore, the strength of this mesosystem appeared to facilitate many positive outcomes. Exosystem: • For Roger and Jake, their parents' change in employment circumstances appeared to be an influencing factor. As their parents stopped working or worked at home during the pandemic, Jake and Roger were reported to have more quality time with their families.

	Macrosystem: • The COVID-19 pandemic has affected lives on an international scale. It is the main focus of the current research and an overarching influence that has affected family routines, schooling, and the interactions between home and school.
Time	Participants were asked to retrospectively reflect on their experiences prior to and during the pandemic and at the time of the interview (October – November 2021). However, as the data gathered was retrospective and gathered at a single time point, any interpretations should be made with caution due to the reliance on participants' memory. Time appeared to be a mediating mechanism across all cases, as the children improved across many aspects of their lives, in comparison to how they were before the pandemic. Within Roger's and Rosie's cases, it was reported that they had presented differently at three separate time points. • Roger's mother rated his independence and self-esteem as 2 out of 10 before COVID-19, 0.5 out of 10 during the school closures, and 7-8 out of 10 at the time of the interview. It seemed that this was due to Roger struggling to return to school after the first school closure, with his teacher suggesting that this was because he had become reliant on one-to-one support from his mother. During the second school closure, school staff and parents provided

	different provision and interventions, which seemed to lead to Roger demonstrating improvements in many areas when he returned to school.
	- Rosie's confidence and reading engagement and ability was rated low before the pandemic and high during the pandemic. Participants suggested that this shift was likely due to Rosie attending school during the school closures and being able to build positive relationships with staff, receive more one-to-one support, develop strong friendships and develop her confidence as there were less children picking on her. She also began a drama club when restrictions had eased, which supported her confidence. However, when schools opened to all children, these positive outcomes were reported to have reduced slightly.

6.2.2 Person-environmental fit model

As discussed in Section 3.4, the person-environment fit model (Holmbeck et al., 2008) suggests that a good interactional fit between an individual's characteristics and their environment is likely to lead to growth, such as increased motivation and wellbeing. Furthermore, positive outcomes are more likely when self-development is combined with a supportive environment. Within the current study, it seems likely that all four children demonstrated a good interactional fit. It could be that the reported children's characteristics (e.g., self-development skills, such as resilience and coping skills), combined with the change in their environment (e.g., more quality time, support, and attention from adults) were a good person-environment fit and led to their progress and positive outcomes. However, as discussed in Section 6.2.1, Table 22, the participants' tended to focus on environmental mediating elements rather than within-child aspects, and it is difficult to determine whether the self-development skills were pre-existing characteristics, or whether they were only able to develop due to the complex interplay of elements that they experienced during the pandemic.

6.2.3 Enhanced motivation

Across all four cases, children appeared to demonstrate a greater sense of motivation and wellbeing; they developed a more positive outlook on school, demonstrated greater motivation to engage with learning, and they enjoyed new hobbies and activities. Furthermore, they demonstrated self-growth and the development of skills such as self-regulation, resilience, independence, and social skills. Two theoretical models of motivation are therefore discussed in terms of their thematic alignment to the findings of the current study.

6.2.3.1 Maslow's hierarchy of needs

Maslow's (1943) hierarchy of needs asserts that individuals' motivation and growth is dependent on certain needs being met. The needs are organised in a hierarchy, starting with physiological, then safety, love and belonging, self-esteem, and finally, self-actualisation. Although Maslow (1943) originally stated that more basic needs should be satisfied before complex needs, he later explained that the hierarchy was not intended to be rigid and could be adapted depending on individual differences and circumstances (Maslow, 1987). The current findings led to themes of safety, connection and relationships being both outcomes and facilitating elements, suggesting that before the pandemic, when the children accessed typical schooling, their needs were not being fully met. The model appears to be particularly applicable to Callum's case, as his basic, physiological needs were met during the pandemic and school staff referred to the hierarchy of needs to illustrate their point.

Furthermore, findings from several studies conducted by educational psychology services on children's experiences of the pandemic also aligned with Maslow's hierarchy of needs. For example Sivers et al. (2020c, p. 23) found themes of 'basic needs', 'preparedness', 'relationships and connectedness', 'learning and expectations' and 'opportunities', and they expressed that "to enable pupils to have a full capacity to learn we need to ensure all layers of the hierarchy (…) are addressed and met". Popoola and Sivers (2021, p. 56) found similar themes of 'physical environment', 'safety', 'relationships/inequalities', 'emotional wellbeing' and 'experiences of education', and emphasised that "we need to ensure that (the hierarchy) can achieved". The findings of Williams et al. (2021, p. 4) were also "understood through the lens of the hierarchy" and found themes of "emotional, relational and physical safety". The current and previous findings therefore indicate the importance of considering Maslow's

hierarchy of needs in supporting children, particularly during periods of disruption. Table 23 summarises how the key findings from the current study integrate with Maslow's hierarchy of needs.

Table 23: Alignment of key trends within the current study with Maslow's hierarchy of needs (Maslow, 1943)		
Maslow's hierarchy of needs	**Overall positive developments found within the current study**	**Overall facilitating elements found within the current study**
Self-actualisation – achieving full potential, development, creativity, growth **Self-Esteem** – respect, recognition, self-esteem, freedom N.B. Self-actualisation and self-esteem have been placed together, as they interact and overlap -e.g., 'progressing with	• Self-development/personal growth. • Greater engagement and progress with learning. • Improved wellbeing – self-esteem, confidence, and enjoyment.	• Hobbies and enjoyable activities. • Being at home during school closures (e.g., freedom and flexibility).

learning' and 'hobbies' support both self-esteem and growth.		
Love and belonging – friendship, family, connection	• Developed positive relationships.	• A different school environment during school closures (relaxed atmosphere allowed time to care). • Quality time, support, and attention from adults. • School staff building positive relationships.
Safety – security	• Improved wellbeing – feelings of safety.	• Structure, consistency, safety, and boundaries.
Physiological – food, shelter, sleep, clothing	For three case studies, it is assumed that the children had their physiological needs met prior and during the pandemic, as it was not discussed within the interviews. For Callum however, this was an important factor. Both adult participants within his case study highlighted how his basic needs were met since being taken into care, and this was both a facilitating factor and positive development.	

6.2.3.2 Self-determination theory

SDT (Ryan & Deci, 2000) also holds relevance in contributing toward understanding the mechanisms within the findings of this study. The theory suggests that individuals must have three needs fulfilled, autonomy, competence, and relatedness, to feel motivated. The mediating mechanisms highlighted within the case studies appeared to support the children in developing their competence, relatedness, and autonomy, which seemed to support them in other areas, such as motivation, wellbeing, and self-growth. Table 24 provides an overview of how the key findings from the current study integrate with the SDT (Ryan & Deci, 2000).

Although no UK studies that focussed on children's experiences interpreted their findings through a SDT lens, several international studies on secondary school students' experiences harnessed the model. For example, Ong et al. (2022) found autonomy and relatedness to be factors in contributing to students' happiness during online learning in the Philippines, and Chiu (2021) found the three aspects of self-determination to be important factors in supporting students with online learning in Hong Kong. Furthermore, Toste et al.'s (2021, p. 157) USA study of students with disabilities found that "eighty-six percent of students reflected on the role of self-determination in navigating the pandemic".

Table 24: Applicability of SDT (Ryan & Deci, 2000) to findings from the current study.	
Aspect of SDT	**Findings from the current study**
Competence	Across all four cases, achievements were celebrated within hobbies and learning activities.

Relatedness	Across all four cases, children were found to have more time with adults and opportunities to play with peers, and they built positive and strong relationships with adults and peers.
Autonomy	Across three cases, children were found to have developed confidence to do things independently. • Callum: When he first moved into care, he struggled with carrying out aspects of daily routines, such as picking up washing, putting shoes away, practicing good hygiene. He now goes to bed without any issues, whereas before, there were arguments. • Roger: His independence with learning activities increased and he enjoyed having greater flexibility and autonomy during periods of home-learning. • Rosie: She succeeded in going on a camping trip with the cubs.

6.3 Reflections on the conduct of the methodology and study

This study aimed to ensure in-depth exploration of the unique experiences of four children during the pandemic from multiple perspectives. The heterogenous sample included children that are often judged 'hard to reach' such as children who have a child protection plan or children in care. As explained by Robson and McCartan (2016), the semi-structured interviews enabled a flexible and responsive approach, while having certain questions prepared to ensure the interview

remined on topic. Table 25 presents key reflections regarding the challenges encountered while

implementing the methodology.

Table 25: Reflections on the challenges encountered while implementing the methodology.	
Reflection topic	**Details**
Participant sample	Although the sample was heterogenous and included a range of age, sex, ethnicities, and life circumstances, they were all disadvantaged in some way, making the sample less varied. The small sample size means that the study's findings are not necessarily generalisable to the wider population. Instead, the current study provided in-depth insights and understanding of the phenomenon within specific contexts and circumstances, at a specific period of time. It therefore focusses on being 'idiographic' as opposed to 'nomothetic', and can offer analytic generalisation (Yin, 2009), or theoretical generalisation (Johnson, 1997), or a 'common-sense' position of generalisability (Elliot, 2005), in which the reader uses their own professional judgement to ascertain if the study's context and the sample's characteristics are similar enough to their specific situation in order to apply the study's findings.
Interviews with children	Although rich and insightful data was gained from the children's interviews, the process of interviewing the children and analysing their data was challenging and required a great deal of flexibility and reflexivity, with some of the children's responses either being irrelevant in addressing the research questions or difficult to make sense of, particularly in terms of their timelines. This may have happened due to the

children not fully understanding what I asked them, and they may have found it difficult to remember different time periods retrospectively. For example, Callum wrote "family was stuck together", and with no elaboration on this point, it was difficult to determine what this meant to him and whether he perceived this as a positive or negative aspect of the pandemic experience. It therefore may have been helpful to conduct multiple interview sessions in which I could re-visit points made within the interview and attempt to gain some clarity.

As discussed in Section 6.2.3, children often focussed more on negative experiences during the pandemic. As the recruitment process relied on school staff initially identifying the children as having positive experiences, it could be that some of the children did not believe that they had experienced positive developments. This issue of discrepancies between views was addressed within the recruitment process via requesting parents to share the child-friendly information sheet with their children and gain their initial consent; I also met with the child prior to their interview to get to know them, explain the process, and determine if they consented to share their perspective of their positive experiences during the pandemic. Again, it could be that the children would have benefited from multiple interview sessions over a period of time, potentially with support from their parents or key members of school staff, in order to equip them

with more reflection time and greater support in remembering key experiences. In terms of the scope of the current research, this would not have been possible. However, I was able to utilise key aspects of the positive progress that the adult participants had reported in order to ask the children more specific questions; this enabled them to elaborate on their progress and positive experiences.

The children also often told me about their recent experiences, such as their phone being broken, or going on a school trip. This could have been an indication that they were not entirely consumed with the pandemic, and wanted to also share their everyday experiences (Popoola & Sivers, 2021). Additionally, this may have occurred due to the topics of discussion being too broad and encompassing (aspects of home, school, relationships, learning, and hobbies).

Interestingly, the pilot interview did not raise these issues. Although the child involved met the inclusion criteria, he did not have SEND and therefore may have more fully understood the purpose of the interview and found it easier to reflect on his experiences. Furthermore, the interview was virtual, which may have been a facilitating factor.

| Relationship with interviewees | 'Hawthorne effects' (McCambridge et al., 2014) or 'expectancy effects' may have occurred, in that participants may have adapted their responses to fit with their perception of my hopes for the outcome of the study. As I openly communicated that the aim of the current study was to determine children's progress and outcomes and that led to these, they may have felt obliged to share numerous positive examples and therefore may have exaggerated the extent of the progress. However, to moderate these effects, I engaged in active listening and reassured participants that their contributions were useful, whether their comments met my RQs or not. Furthermore, achieving positive outcomes was part of the inclusion criteria during recruitment, and participants did also raise difficult aspects of the pandemic, indicating that they did not feel compelled to only share positive aspects.

My status as a TEP and doctoral researcher may have had an impact on the participant's responses due to a power dynamic. As outlined in Chapter 4, I took steps to try and moderate the impact of any power imbalances by allowing participants to choose an interview setting, and prior to the interview, I had a conversation with them, to build rapport and inform them of the details of the research and the questions they would be asked. |
|---|---|

Data analysis	During the data analysis, there was a challenge in trying to clearly differentiate between aspects that were outcomes and aspects that were mediating mechanisms and therefore determine whether data was relevant to RQ1 or RQ2. This required substantial reflexivity in order to make decisions during the analysis process. For example, a code from Callum and Rosie's data was around children doing more enjoyable activities, which could be classed as a positive outcome, or considered to facilitate another outcome such as engagement and progress with their learning. It is important to note that the findings are based on my interpretations and offer one of many possible explanations of the data.
RQ3	There was significantly less data gathered that addressed RQ3. Participants, and especially the children, found it difficult to answer the relevant question within the interview; this may be because it came at the end of the interview, which had already lasted on average one hour. It also could be that the participants had needed more time to reflect and consider it further.

6.4 Implications

As many of the key findings are supported by previous literature, the current study offers analytical generalisability, and findings can be transferable to situations and contexts which are judged as similar to the current study's contexts. Implications for families, school staff, EPs and future research are therefore suggested.

6.4.1 Implications for families

The findings of the current study indicate that the children and their families benefited from quality time together during the pandemic. For example, they enjoyed having the opportunity to slow down, give each other more time, attention, and support, and engage in family activities. In Roger's case, his parents considered reducing their working hours to be more emotionally available in their children's lives, and therefore sustain these benefits post-pandemic. The findings therefore suggest that it may be beneficial for families to prioritise spending more time with each other where possible.

These findings are concordant with narratives consistently reported in other research literature, that families enjoyed having more time engaging in shared activities, and having the opportunity to slow down and reflect on how they want to do things in the future (Rogers et al., 2021). For many, this time facilitated stronger family relationships (Council for Disabled Children, 2021; Mental Health Foundation, 2020; Soneson, 2022) in which parents gained greater understanding of their child's needs (Lee & Wenham, 2023; Ludgate et al., 2022), and facilitated positive social and emotional skills (Hanley et al., 2022), resulting in both parents and children placing a higher value on family time (Rogers et al., 2021).

Structure, routines, consistency, and boundaries within the home context were found to facilitate the development of self-regulation skills for Jake, which aligns with many parenting approaches (Barnardo's, 2023; Centers for Disease Control and Prevention, 2019), such as Emotion Coaching (Emotion Coaching UK, 2023).

6.4.2 Implications for school staff

Findings from the current study suggest the desirability of school staff and policy-makers to take steps to strengthen the curriculum's focus on wellbeing and social connections; promote greater flexibility in school practices; provide higher levels of adult support when needed; ensure children have structure, consistency, safety, and boundaries; and nurture parent-school relationships. These implications are supported by trends within published research literature; see Table 26 for further details.

Table 26: Recommendations for school staff and policy developers, based on the findings of the current study and previous research.		
Recommendations	**Details**	**Supporting evidence**
1. Curriculum to strengthen its focus on wellbeing and social connections	• School staff to have time to care for children's wellbeing. • School staff to use relational approaches; developing strong and trusting teacher-child relationships and providing opportunities and spaces for children to share their views and feelings. • A curriculum that places equal importance on academic, creative, and vocational learning experiences, involving children learning key life skills and having ample opportunities to participate in hobbies and enjoyable, practical activities, including being outside and creative activities.	Council for Disabled Children (2021); Education Endowment Foundation (2023); Greenway and Eaton-Thomas (2020); Kim et al. (2021a); Kim et al. (2021b); Lee and Wenham (2023); Popoola and Sivers (2021); Williams et al. (2021); Sivers et al. (2020c); Sivers et al. (2020a); Sivers et al. (2020b).

2. Greater flexibility in school practices	• For children who find it difficult to attend school, time away from school may be beneficial in providing them with a break from stressors, more flexibility, and time to appreciate the benefits of attending school (such as social interactions). However, this should be monitored closely, as the return to school after a break can be difficult. • Children to have more agency and autonomy around what and how they learn, such as having freedom to self-regulate and move within the classroom as they need. Staff to support children to access learning independently. • Support from external services, which can be effective remotely.	Asbury et al. (2021); Council for Disabled Children (2021); Education Endowment Foundation (2023); Greenway and Eaton-Thomas (2020); Li and Lalani (2020); Ludgate et al. (2022); Ofsted (2021b); Popoola and Sivers (2021); Sivers et al. (2020c); Sivers et al. (2020b); Soneson (2022).
3. Higher levels of adult support when needed	• One-to-one or small group learning support for children who are below age-related expectations.	Ashworth et al. (2021a); Council for Disabled Children (2021);

		Higher adult to child ratios and supporting children within inclusive classrooms.	Greenway and Eaton-Thomas (2020); Ludgate et al. (2022).
4.	Structure, consistency, safety, and boundaries	• Support children by communicating clear and consistent routines, structure, and boundaries. • Ensure that school is a safe, welcoming, and inclusive environment.	Popoola and Sivers (2021); Sivers et al. (2020c); Sivers et al. (2020b); Williams et al. (2021).
5.	Nurture parent-school relationships	Nurturing parent-school partnerships through regular communication, and harnessing parents' insights (gained through educating their children in an alternative context) to facilitate effective and teaching practices.	Asbury et al. (2021); Education Endowment Foundation (2022); Kim et al. (2021a); Kim et al. (2021b); Lee and Wenham (2023).

6.4.3 Implications for EPs

EPs are well placed to support schools in implementing approaches and strategies, such as the ones outlined in the previous section. For example, EPs could support schools and/or policy holders in strengthening their focus on wellbeing and social connections, and supporting students through structure, consistency, safety, and boundaries, while being open to supporting students flexibly when needed. EPs could support the implementation of these approaches via consultation, supervision, training, or systematic interventions. Additionally, EPs could support the nurturing of parent-school relationships through facilitating collaborative meetings or training for parents.

Sivers et al. (2020c) express how EPs have strengths in innovative thinking, collaborating and making changes for children, their families and school communities, and Popoola and Sivers (2021, p. 56) suggest that EPs "can help provide safe spaces to promote thinking, sharing and containment to both school staff and pupils", such as supervision, training, Video Enhanced Reflective Practice, therapeutic work, and systemic interventions such as relational policies, growth mindset approaches (Dweck, 2017) and mediation (Feuerstein et al., 1980).

Furthermore, after finding that a substantial number of children in their study (one third) appeared to have improved emotional wellbeing during the pandemic, Soneson (2022) suggests that EPs and educational professionals have a responsibility to continue to reflect on CYP's experiences and consider why some benefitted from a different way of life during the pandemic, and how the positive effects could be maintained in the future to promote positive wellbeing.

6.4.4 Implications for further research

The current study found that an increased focus on emotional wellbeing and relational approaches during the pandemic was beneficial for the focus children. As these approaches are often advocated by EPs (e.g., Association of Educational Psychology, 2021; Babcock Learning and Development Partnership, 2020; Devon County Council, 2023; Wakefield Educational Psychology Service, 2023), it would be useful to explore this further.

Furthermore, the current study indicated that children benefitted hugely from attending school during the lockdowns and engaging with a very different school environment and curriculum. While previous literature supported this finding, this aspect of the phenomenon appeared to be under-researched. It would therefore be useful to learn more about the mediating mechanisms. Although these areas cannot readily be researched going forward, future studies could seek to replicate similar school settings for children (a small number of children in a relaxed atmosphere in which school staff have time to care, with social and emotional wellbeing interventions and opportunities to talk to trusted adults) and evaluate the effectiveness.

6.5 Conclusions

This exploratory case study supports a deep understanding of a small sample of children's positive experiences during the COVID-19 pandemic. By taking the opportunity to 'sift for gold' during this unusual period, the research aimed to support evidence-informed future practice for families and educational professionals beyond the pandemic by highlighting mediating mechanisms that can contribute toward positive educational and personal development outcomes for primary-aged children. While the sample was heterogenous and the four cases were unique in terms of their

individual circumstances, positive outcomes and the elements that facilitated their success stories, there were common trends, demonstrating equifinality. They all experienced improved wellbeing, personal growth and greater engagement and progress with learning, having developed positive relationships with both adults and peers. A range of mediating mechanisms were believed to have contributed to the outcomes, which suggests the importance of relationships, structure, consistency, safety, and boundaries. Children appear to benefit from reduced pressure, quality support from school staff for their learning and emotional needs, and a curriculum that focuses on their wellbeing and enjoyable, motivating activities. Quality time with family members and a strong school-parent partnership were also found to be supportive mechanisms.

As many of the key findings are supported by previous literature, the current study offers analytical generalisability, and suggests some implications. Prioritising time for strengthening bonds with children by enjoying activities together, offering emotional support, and creating a sense of safety through structure, consistency, and boundaries is advocated, for both the family and school context. For the school context, strengthening the curriculum's focus on wellbeing and social connections is suggested, while promoting greater flexibility in school practices, providing higher levels of adult support when needed, and nurturing parent-school relationships. EPs are well placed to support schools and families in implementing approaches and strategies that align with these implications, while continuing to reflect on CYP's experiences during the pandemic, considering why some benefitted and how the positive effects could be maintained in the future to promote positive wellbeing.

While each child had unique circumstances prior to the pandemic, they shared a commonality, in that they appeared to struggle with their engagement with school. This study therefore contributes to understanding some diverse conditions that can facilitate positive outcomes for children who appear to struggle with typical schooling.

7. REFERENCE LIST

Aldiss, S., Horstman, M., O'Leary, C., Richardson, A., & Gibson, F. (2009). What is important to young children who have cancer while in hospital? *Children & society, 23*(2), 85-98.

American Psychological Association. (2022). *Socioeconomic status*. Retrieved Feb 2023 from https://www.apa.org/topics/socioeconomic-status

Andrew, A., Cattan, S., Costa-Dias, M., Farquharson, C., Kraftman, L., Krutikova, S., Phimister, A., & Sevilla, A. (2020a). *Family time use and home learning during the COVID-19 lockdown*. The Institute for Fiscal Studies. Retrieved Feb 2023 from https://ifs.org.uk/sites/default/files/output_url_files/R178-Family-time-use-and-home-learning-during-the-COVID-19-lockdown-1.pdf

Andrew, A., Cattan, S., Dias, M. C., Farquharson, C., Kraftman, L., Krutikova, S., Phimister, A., & Sevilla, A. (2020b). *Inequalities in children's experiences of home learning during the COVID-19 lockdown in England*. The Institute for Fiscal Studies. Retrieved 07.06.2022 from https://ifs.org.uk/publications/14975

Andrew, A., Cattan, S., Dias, M. C., Farquharson, C., Kraftman, L., Krutikova, S., Phimister, A., & Sevilla, A. (2020c). *Learning during the lockdown: real-time data on children's experiences during home learning*. The Institute for Fiscal Studies. Retrieved 07.06.2022 from https://ifs.org.uk/publications/14848

Andrew, A., Cattan, S., Phimister, A., Krutikova, S., Kraftman, L., Dias, M. C., & Sevilla, A. (2020d). *Primary school closures created substantial inequality in time spent learning between pupils from poorer and better-off families - and re-opening schools may be the only remedy*. The Institute for Fiscal Studies. Retrieved 07.06.2022 from https://ifs.org.uk/publications/14976

Asbury, K., Fields, D., & Kim, L. E. (2021). *'It feels like I'm back to being a teacher': A longitudinal study of teachers' high, low and turning points during the first eight months of COVID-19 in England.* PsyArXiv. Retrieved Feb 2023 from https://doi.org/10.31234/osf.io/6d7ae

Asbury, K., & Toseeb, U. (2022). A longitudinal study of the mental health of autistic children and adolescents and their parents during COVID-19: Part 2, qualitative findings. [Advance online publication.]. *Autism: the international journal of research and practice*. https://doi.org/10.1177/13623613221086997

Ashworth, E., Kirkby, J., Bray, L., & Alghrani, A. (2021a). *The Impact of the COVID-19 Pandemic on the Education, Health and Social Care Provision for Children with Special Educational Needs and Disabilities (SEND): The Ask, Listen, Act Study. Evidence briefing 2: Qualitative interview data;*

Children with SEND, parent/carers and professionals' perceptions of the impact of the COVID-19 pandemic. https://www.ljmu.ac.uk/~/media/files/ljmu/research/centres-and-institutes/rcbb/qualitative-evidence-briefing.pdf?la=en

Ashworth, E., Kirkby, J., Bray, L., & Alghrani, A. (2021b). *The Impact of the COVID-19 Pandemic on the Education, Health and Social Care Provision for Children with Special Educational Needs and Disabilities (SEND): The Ask, Listen, Act Study. Evidence briefing: Children with SEND, parent/carers and professionals' perceptions of impact. Quantitative survey data.* https://www.ljmu.ac.uk/~/media/files/ljmu/research/centres-and-institutes/rcbb/quantitative-evidence-briefing.pdf?la=en

Association of Educational Psychology. (2021). *Written evidence submitted by the Association of Educational Psychologists*. https://committees.parliament.uk/writtenevidence/23310/pdf/

Aucott, C. (2014). *An exploration of pupils', parents' and teachers' perceptions of the causes of pupil non-attendance and the reasons for improvements in attendance.* [Doctoral thesis, University of Birmingham]. https://etheses.bham.ac.uk/id/eprint/5337/

Babcock Learning and Development Partnership. (2020). *Guidance for Developing Relational Practice and Policy*. https://cumbria.gov.uk/elibrary/Content/Internet/537/6381/6388/44573151759.pdf

Badampudi, D., Wohlin, C., & Petersen, K. (2015). *Experiences from using snowballing and database searches in systematic literature studies*. https://doi.org/10.1145/2745802.2745818

Barnardo's. (2023). *Routines and boundaries*. Retrieved 29.05.2023 from https://families.barnardos.org.uk/pre-school/routines-boundaries

Bono, E. D., Fumagalli, L., Holford, A., & Rabe, B. (2021). *Coping with school closures: changes in home-schooling during COVID-19*. University of Essex. https://www.iser.essex.ac.uk/files/news/2021/little-inequality-homeschool/coping-with-school-closures.pdf

Bozic, N. (2013). Developing a strength-based approach to educational psychology practice: A multiple case study. *Educational and Child Psychology, 30*, 18-29.

Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative research in psychology, 3*(2), 77-101.

Braun, V., & Clarke, V. (2020). Can I use TA? Should I use TA? Should I not use TA? Comparing reflexive thematic analysis and other pattern-based qualitative analytic approaches. *Counselling and Psychotherapy Research, 21*(1), 37-47.

Braun, V., & Clarke, V. (2022). *Thematic Analysis: A Practical Guide*. SAGE.

British Association for Behavioural and Cognitive Psychotherapies. (2023). *Acceptance and Commitment Therapy (ACT)*. https://babcp.com/Membership/Special-Interest-Groups/ACT#:~:text=Acceptance%20and%20Commitment%20Therapy%20(ACT%2C%20said%20as%20one%20word%20rather,feelings%2C%20images%2C%20memories).

Bronfenbrenner, U. (1994). Ecological models of human development. *International encyclopedia of education, 3*(2), 37-43.

Bronfenbrenner, U., & Crouter, A. C. (1983). Evolution of environmental models in developmental research. In P. H. Mussen (Ed.), *Handbook of Child Psychology* (Vol. 1, pp. 357-414). Wiley.

Bronfenbrenner, U., & Morris, P. A. (1998). The Ecology of Developmental Processes. In W. Damon & R. M. Lerner (Eds.), *Handbook of child psychology: Theoretical models of human development* (pp. 993–1028). John Wiley & Sons Inc.

Bronfenbrenner, U., & Morris, P. A. (2006). The Bioecological Model of Human Development. In *Handbook of child psychology: Theoretical models of human development, Vol. 1, 6th ed.* (pp. 793-828). John Wiley & Sons, Inc.

Brown, J., & Kirk-Wade, E. (2021). *Coronavirus: A history of 'Lockdown laws' in England*. https://commonslibrary.parliament.uk/research-briefings/cbp-9068/

Center on the Developing Child. (2023). *ACEs and Toxic Stress: Frequently Asked Questions*. Harvard University. https://developingchild.harvard.edu/resources/aces-and-toxic-stress-frequently-asked-questions/

Centers for Disease Control and Prevention. (2019). *Creating Structure and Rules*. Retrieved 29.05.2023 from https://www.cdc.gov/parents/essentials/toddlersandpreschoolers/structure/index.html

Centers for Disease Control and Prevention. (2020). *Risk of Exposure to COVID-19*. Retrieved Feb 2023 from https://www.cdc.gov/coronavirus/2019-ncov/community/health-equity/racial-ethnic-disparities/increased-risk-exposure.html

Childline. (2023). *Social Services*. Retrieved Feb 2023 from https://www.childline.org.uk/info-advice/home-families/family-relationships/social-services/

Children's Commissioner. (2020). *How lockdown has affected children's lives at home*. Retrieved Feb 2023 from https://www.childrenscommissioner.gov.uk/2020/08/22/how-lockdown-has-affected-childrens-lives-at-home/

Children's Commissioner for England. (2020). *Childhood in the time of Covid*. Retrieved Feb 2023 from https://www.childrenscommissioner.gov.uk/wp-content/uploads/2020/09/cco-childhood-in-the-time-of-covid.pdf

Chiu, T. K. F. (2021). Student engagement in K-12 online learning amid COVID-19: A qualitative approach from a self-determination theory perspective. *Interactive Learning Environments*, 1-14. https://doi.org/10.1080/10494820.2021.1926289

Chu, T. L. A. (2022). Applying positive psychology to foster student engagement and classroom community amid the COVID-19 pandemic and beyond. *Scholarship of Teaching and Learning in Psychology, 8*(2), 154.

Coad, J. (2007). Using art-based techniques in engaging children and young people in health care consultations and/or research. *Journal of research in nursing, 12*(5), 487-497.

Cohen, L., Manion, L., & Morrison, K. (2017). *Research Methods in Education*. Taylor & Francis Group. http://ebookcentral.proquest.com/lib/bham/detail.action?docID=5103697

Cooperrider, D. L., & Srivastva, S. (1987). Appreciative inquiry in organizational life. In R. W. Woodman & W. A. Pasmore (Eds.), *Research in Organizational Change And Development. Vol. 1.* (pp. 129–169). JAI Press.

Council for Disabled Children. (2021). *Lessons Learnt from Lockdown: The highs and lows of the pandemic's impact on disabled children and young people*. https://councilfordisabledchildren.org.uk/sites/default/files/uploads/attachments/Lessons%20Learnt%20From%20Lockdown_0.pdf

Crotty, M. J. (1998). *The foundations of social research: Meaning and perspective in the research process*. Sage.

De Groot, E. V. (2002). Learning Through Interviewing: Students and Teachers Talk About Learning and Schooling. *Educational Psychologist, 37*(1), 41-52. https://doi.org/10.1207/S15326985EP3701_5

De Shazer, S. (1982). *Patterns of brief family therapy: An ecosystemic approach*. Guilford Press.

Degli Espinosa, F., Metko, A., Raimondi, M., Impenna, M., & Scognamiglio, E. (2020). A Model of Support for Families of Children With Autism Living in the COVID-19 Lockdown: Lessons From Italy. *Behaviour Analysis in Practice, 13*(3), 550-558. https://doi.org/10.1007/s40617-020-00438-7

Del Boca, D., Oggero, N., Profeta, P., & Rossi, M. (2020). Women's and men's work, housework and childcare, before and during COVID-19. *Review of Economics of the Household, 18*(4), 1001-1017. https://doi.org/10.1007/s11150-020-09502-1

Denscombe, M. (2017). *The Good Research Guide: For Small-Scale Social Research Projects*. McGraw-Hill Education. http://ebookcentral.proquest.com/lib/bham/detail.action?docID=6212204

Denscombe, M. (2021). *The Good Research Guide: Research Methods for Small-Scale Social Research* (7 ed.). McGraw-Hill.

Department for Education. (2020a). *Attendance in education and early years settings during the coronavirus (COVID-19) outbreak – summary of returns to 11 June*. https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/892528/Attendance_during_the_coronavirus_COVID-19_outbreak__summary_of_returns_to_11_June.pdf

Department for Education. (2020b). *Coronavirus (COVID-19): implementing protective measures in education and childcare settings (withdrawn August 2020)*. https://www.gov.uk/government/publications/coronavirus-covid-19-implementing-protective-measures-in-education-and-childcare-settings/coronavirus-covid-19-implementing-protective-measures-in-education-and-childcare-settings#effective-infection-protection-and-control

Department for Education. (2020c). *Remote education good practice (withdrawn March 2022)*. https://www.gov.uk/government/publications/remote-education-good-practice/remote-education-good-practice

Department for Education. (2020d). *Remote Education Temporary Continuity Direction: explanatory note*. https://webarchive.nationalarchives.gov.uk/ukgwa/20210811171326/https://www.gov.uk/government/publications/remote-education-temporary-continuity-direction-explanatory-note

Department for Education. (2020e). *Schools COVID-19 operational guidance - February 2022 (withdrawn May 2022)*. https://www.gov.uk/government/publications/actions-for-schools-during-the-coronavirus-outbreak

Department for Education. (2021a). *The Department for Education's response to the COVID-19 pandemic*. Retrieved Feb 2023 from https://publications.parliament.uk/pa/cm5802/cmselect/cmpubacc/240/24006.htm#footnote-041

Department for Education. (2021b). *Review your remote education provision (withdrawn April 2022)*. https://www.gov.uk/government/publications/review-your-remote-education-provision

Department for Education. (2022). *Children of critical workers and vulnerable children who can access schools or educational settings*. Retrieved 30.05.2023 from https://www.gov.uk/government/publications/coronavirus-covid-19-maintaining-educational-provision/guidance-for-schools-colleges-and-local-authorities-on-maintaining-educational-provision

Devon County Council. (2023). *Quick guide to developing relational practice and policy*. https://www.devon.gov.uk/support-schools-settings/document/quick-guide-to-developing-relational-practice-and-policy/

Division of Educational and Child Psychology. (2002). *Professional Practice Guidelines*.

Dong, C., Cao, S., & Li, H. (2020). Young children's online learning during COVID-19 pandemic: Chinese parents' beliefs and attitudes. *Children and youth services review, 118*, 105440. https://doi.org/10.1016/j.childyouth.2020.105440

Dweck, C. (2017). *Mindset-updated edition: Changing the way you think to fulfil your potential*. Hachette UK.

Education Endowment Foundation. (2022). The Impact of COVID-19 on Learning: A review of the evidence. Retrieved Feb 2023, from https://d2tic4wvo1iusb.cloudfront.net/documents/guidance-for-teachers/covid-19/Impact_of_Covid_on_Learning.pdf?v=1652815530

Education Endowment Foundation. (2023). *Teaching and Learning Toolkit*. Retrieved 30.05.2023 from https://educationendowmentfoundation.org.uk/education-evidence/teaching-learning-toolkit

Elliot, J. (2005). *Using Narrative in Social Research: Qualitative and Quantitative Approaches*. SAGE.

Emotion Coaching UK. (2023). *What is Emotion Coaching?* https://www.emotioncoachinguk.com/what-is-emotion-coaching

Engzell, P., Frey, A., & Verhagen, M. D. (2021). Learning loss due to school closures during the COVID-19 pandemic. *Proceedings of the National Academy of Science, 118*(17). https://www.pnas.org/doi/abs/10.1073/pnas.2022376118

Faux, S. A., Walsh, M., & Deatrick, J. A. (1988). Intensive interviewing with children and adolescents. *Western Journal of Nursing Research, 10*(2), 180-194.

Feuerstein, R., Rand, Y., Hoffman, M. B., & Miller, R. (1980). *Instrumental enrichment: An intervention program for cognitive modifiability*. University Park Press.

Gardner, H. E. (1983). *Frames of Mind: The Theory of Multiple Intelligences*. Basic books.

Gibson, J. E. (2012). Interviews and focus groups with children: Methods that match children's developing competencies. *Journal of Family Theory & Review, 4*(2), 148-159.

Girlguiding. (2021). *Back in lockdown: Girls' and young women's hopes and fears for the future*. https://www.girlguiding.org.uk/globalassets/docs-and-resources/research-and-campaigns/back-in-lockdown-report.pdf

GOV.UK. (2023). *Children with special educational needs and disabilities (SEND)*. https://www.gov.uk/children-with-special-educational-needs/extra-SEN-help#:~:text=An%20education%2C%20health%20and%20care,support%20to%20meet%20those%20needs.

Government Digital Service. (2022). *2 Years of COVID-19 on GOV.UK*. Retrieved 30.10.2023 from https://gds.blog.gov.uk/2022/07/25/2-years-of-covid-19-on-gov-uk/

Gray, D. (2014). *Doing Research in the Real World* (3rd ed.). Sage.

Gray, D. E. (2004). *Doing Research in the Real World*. SAGE Publications. http://ebookcentral.proquest.com/lib/bham/detail.action?docID=354875

Greenway, C. W., & Eaton-Thomas, K. (2020). Parent experiences of home-schooling children with special educational needs or disabilities during the coronavirus pandemic. *British Journal of Special Education, 47*(4), 510-535.

Grix, J. (2004). *The Foundations of Research*. Palgrave Macmillan. https://books.google.co.uk/books?id=E9q4dDVwsGkC

Halcomb, E. J., & Davidson, P. M. (2006). Is verbatim transcription of interview data always necessary? *Applied Nursing Research, 19*(1), 38-42.

Hall, R. (2022). *Pandemic has delayed social skills of young children, says Ofsted chief*. The Guardian. https://www.theguardian.com/society/2022/apr/04/pandemic-has-delayed-social-skills-of-young-children-says-ofsted-chief

Hancock, D. R., Algozzine, B., & Lim, J. H. (2021). *Doing case study research: A practical guide for beginning researchers*. Teachers College Press.

Hanley, A., Symonds, J. E., & Horan, J. (2022). COVID-19 School closures and children's social and emotional functioning: the protective influence of parent, sibling, and peer relationships. *Education 3-13*, 1-12. https://doi.org/10.1080/03004279.2022.2154615

Harris, R. (2020). *FACE COVID - How to respond effectively to the Corona crisis*. Aspen Psychology Services. Retrieved Feb 2023 from https://www.aspenpsychologyservices.co.uk/uploads/1/1/4/8/11487073/face_covid_ebook_-_by_russ_harris_1.pdf

Henderson, H. (2018). Difficult questions of difficult questions: the role of the researcher and transcription styles. *International Journal of Qualitative Studies in Education, 31*(2), 143-157.

Hill, M. (2005). Ethical Considerations in Researching Children's Experiences. In S. Greene & D. Hogan (Eds.), *Researching Children's Experience: Approaches and Methods* (pp. 61-86). Sage.

Hill, V. (2021). *'The pandemic has highlighted the huge social divide that exists in the UK'*. British Psychological Society. https://www.bps.org.uk/psychologist/pandemic-has-highlighted-huge-social-divide-exists-uk

Hinsliff, G. (2022). *Pupils had futures blighted during the pandemic: now they are being cheated again*. The Guardian. https://www.theguardian.com/commentisfree/2022/mar/28/save-lost-generation-children-covid-school-closures-england

Holmbeck, G. N., Jandasek, B., Sparks, C., Zukerman, J., & Zurenda, L. (2008). CHAPTER 2 - Theoretical Foundations of Developmental-Behavioral Pediatrics. In M. L. Wolraich, D. D. Drotar, P. H. Dworkin, & E. C. Perrin (Eds.), *Developmental-Behavioral Pediatrics* (pp. 13-45). Mosby. https://doi.org/https://doi.org/10.1016/B978-0-323-04025-9.50005-2

Holt, L., & Murray, L. (2022). Children and Covid 19 in the UK. *Children's Geographies, 20*(4), 487-494. https://doi.org/10.1080/14733285.2021.1921699

Horrigan, J. B. (2015). *The numbers behind the broadband 'homework gap'*. Pew Research Center. https://www.pewresearch.org/fact-tank/2015/04/20/the-numbers-behind-the-broadband-homework-gap/

Hoskins, K., Thu, T., Xu, Y., Gao, J., & Zhai, J. (2023). Me, my child and Covid-19: Parents' reflections on their child's experiences of lockdown in the UK and China. *British Educational Research Journal, 00*, 1-21. https://doi.org/https://doi.org/10.1002/berj.3850

Howard, E., Khan, A., & Lockyer, C. (2021). *Learning during the pandemic: review of research from England*. https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/998935/6803-4_Learning_during_the_pandemic-_review_of_research_from_England.pdf

Ikeda, M. (2020). Were schools equipped to teach – and were students ready to learn – remotely? https://doi.org/doi:https://doi.org/10.1787/4bcd7938-en

Institute for Government. (2021). *Timeline of UK government coronavirus lockdowns and measures, March 2020 to December 2021*. https://www.instituteforgovernment.org.uk/sites/default/files/timeline-coronavirus-lockdown-december-2021.pdf

Irwin, L. G., & Johnson, J. (2005). Interviewing young children: Explicating our practices and dilemmas. *Qualitative health research, 15*(6), 821-831.

Jaeger, E. L. (2017). Negotiating complexity: A bioecological systems perspective on literacy development. *Human Development, 59*(4), 163-187.

Jalongo, M. R. (2021). The effects of COVID-19 on early childhood education and care: Research and resources for children, families, teachers, and teacher educators. *Early childhood education journal, 49*(5), 763-774.

Janis, I. L. (1972). *Victims of groupthink: A psychological study of foreign-policy decisions and fiascoes*. Houghton Mifflin.

Johnson, J. L. (1997). Generalizability in Qualitative Research excavating the discourse. In J. Morse (Ed.), *Completing a qualitative project: Details and dialogue* (pp. 191-208). SAGE.

Julius, J., & Sims, D. (2020). *Schools' responses to Covid-19: Support for vulnerable pupils and the children of keyworkers*. National Foundation for Educational Research. https://files.eric.ed.gov/fulltext/ED608651.pdf

Kim, L. E., Dundas, S., & Asbury, K. (2021a). 'I think it's been difficult for the ones that haven't got as many resources in their homes': teacher concerns about the impact of COVID-19 on pupil learning and wellbeing. *Teachers and Teaching*, 1-16. https://doi.org/10.1080/13540602.2021.1982690

Kim, L. E., Leary, R., & Asbury, K. (2021b). Teachers' narratives during COVID-19 partial school reopenings: an exploratory study. *Educational Research, 63*(2), 244-260. https://doi.org/10.1080/00131881.2021.1918014

Kortesluoma, R. L., Hentinen, M., & Nikkonen, M. (2003). Conducting a qualitative child interview: methodological considerations. *Journal of advanced nursing, 42*(5), 434-441.

Kutrovátz, K. (2017). Conducting qualitative interviews with children–methodological and ethical challenges. *Corvinus Journal of Sociology and Social Policy, 8*(2), 65-88.

Lambert, V., Glacken, M., & McCarron, M. (2013). Using a range of methods to access children's voices. *Journal of research in nursing, 18*(7), 601-616.

Leahy, F., Newton, P., & Khan, A. (2021). *Learning during the pandemic: quantifying lost time*. The Office of Qualifications and Examinations Regulation. https://www.gov.uk/government/publications/learning-during-the-pandemic/learning-during-the-pandemic-quantifying-lost-time

Lee, C., & Wenham, L. (2023). 'We just have to sail this sea all together until we find a shore': parents' accounts of home-educating primary-school children in England during COVID-19. *Education 3-13, 51*(2), 276-291.

Li, C., & Lalani, F. (2020). *The COVID-19 pandemic has changed education forever. This is how*. World Economic Forum. Retrieved 07.06.2022 from https://www.weforum.org/agenda/2020/04/coronavirus-education-global-covid19-online-digital-learning/

Longfield, A. (2020). *The impact of Covid-19 on the disadvantage gap. Children's Commissioner's for England written submission to the Education Select Committee.* https://committees.parliament.uk/writtenevidence/5866/pdf/

Luca, M., Nelson, J., & Sims, D. (2020). *Schools' responses to Covid-19: Pupil engagement in remote learning*. NFER. https://www.nfer.ac.uk/media/4073/schools_responses_to_covid_19_pupil_engagement_in_remote_learning.pdf

Ludgate, S., Mears, C., & Blackburn, C. (2022). Small steps and stronger relationships: parents' experiences of homeschooling children with special educational needs and disabilities (SEND). *Journal of Research in Special Educational Needs, 22*(1), 66-75.

Lune, H., & Berg, B. (2016). *Qualitative Research Methods for the Social Sciences, EBook, Global Edition*. Pearson Education, Limited. http://ebookcentral.proquest.com/lib/bham/detail.action?docID=5185992

Lunkenheimer, E. (2018). Dynamic Systems Theory. In M. H. Bornstein (Ed.), *The SAGE Encyclopedia of Lifespan Human Development*. SAGE Publications, Inc. https://doi.org/10.4135/9781506307633.n254

Major, L. E., Eyles, A., & Machin, S. (2021). *Learning loss since lockdown: variation across the home nations*. Centre for Economic Performance. https://cep.lse.ac.uk/pubs/download/cepcovid-19-023.pdf

Maslow, A. H. (1943). A Theory of Human Motivation. *Psychological review, 50*(4), 370.

Maslow, A. H. (1987). *Motivation and Personality* (3rd ed.). Pearson Education.

McCambridge, J., Witton, J., & Elbourne, D. R. (2014). Systematic review of the Hawthorne effect: new concepts are needed to study research participation effects. *Journal of Clinical Epidemiology, 67*(3), 267-277. https://doi.org/10.1016/j.jclinepi.2013.08.015

McMullin, C. (2021). Transcription and Qualitative Methods: Implications for Third Sector Research. *VOLUNTAS: International Journal of Voluntary and Nonprofit Organizations*, 1-14.

Mental Health Foundation. (2020). *COVID-19 Adolescent Study: Wave 1*. https://www.mentalhealth.org.uk/our-work/research/about-mental-health-pandemic-adolescent-study/wave-1-coronavirus-adolescent-study-findings

Miles, M. B., & Huberman, A. M. (1994). *Qualitative data analysis: An expanded sourcebook*. Sage.

Morris, R., & Atkinson, C. (2018). How can educational psychologists work within further education to support young people's mental health? An appreciative inquiry. *Research in Post-Compulsory Education, 23*(3), 285-313.

National Institute of Mental Health. (2023a). *Autism Spectrum Disorder*. https://www.nimh.nih.gov/health/topics/autism-spectrum-disorders-asd#:~:text=Autism%20spectrum%20disorder%20(ASD)%20is,first%202%20years%20of%20life.

National Institute of Mental health. (2023b). *Post-Traumatic Stress Disorder*. https://www.nimh.nih.gov/health/topics/post-traumatic-stress-disorder-ptsd#:~:text=Post%2Dtraumatic%20stress%20disorder%20(PTSD)%20is%20a%20disorder%20that,or%20respond%20to%20potential%20danger.

National Institutes of Health. (2022). *Overview of COVID-19*. National Institutes of Health,. Retrieved 06.06.2022 from https://www.covid19treatmentguidelines.nih.gov/overview/overview-of-covid-19/

Nelson, J., Lynch, S., & Sharp, C. (2021). *Recovery during a pandemic: the ongoing impacts of Covid-19 on schools serving deprived communities*. NFRE: National Foundation for Educational Research. Retrieved Feb 2023 from https://www.nfer.ac.uk/media/4614/recovery_during_a_pandemic_the_ongoing_impacts_of_covid_19_on_schools_serving_deprived_communities.pdf

Nelson, J., & Sharp, C. (2020). *Schools' responses to Covid-19: Key findings from the Wave 1 survey*. National Foundation for Educational Research. https://www.nfer.ac.uk/media/4097/schools_responses_to_covid_19_key_findings_from_the_wave_1_survey.pdf

Neuman, W. L. (2014). *Social Research Methods: Qualitative and Quantitative approaches* (7th ed.). Pearson.

NHS. (2023). *Attention deficit hyperactivity disorder (ADHD)*. https://www.nhs.uk/conditions/attention-deficit-hyperactivity-disorder-adhd/

O'Connor, D. B., Aggleton, J. P., Chakrabarti, B., Cooper, C. L., Creswell, C., Dunsmuir, S., Fiske, S. T., Gathercole, S., Gough, B., & Ireland, J. L. (2020). Research priorities for the COVID-19 pandemic and beyond: A call to action for psychological science. *111*(4), 603-629.

Oates, J., Carpenter, D., Fisher, M., Goodson, S., Hannah, B., Kwiatowski, R., Prutton, K., Reeves, D., & Wainwright, T. (2021). *BPS Code of Human Research Ethics*. British Psychological Society.

OECD. (2020). *Were schools equipped to teach – and were students ready to learn – remotely?* https://www.oecd-ilibrary.org/docserver/4bcd7938-en.pdf?expires=1677236546&id=id&accname=guest&checksum=A4358A18E7F452BC5FFB47CEE66BEF57

Office for National Statistics. (2020). *Coronavirus and homeschooling in Great Britain: April to June 2020. Analysis of homeschooling in Great Britain during the coronavirus (COVID-19) pandemic from the Opinions and Lifestyle Survey.* https://www.ons.gov.uk/peoplepopulationandcommunity/educationandchildcare/articles/coronavirusandhomeschoolingingreatbritain/apriltojune2020

Ofsted. (2021a). *The Annual Report of Her Majesty's Chief Inspector of Education, Children's Services and Skills 2020/21*. https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1038508/Ofsted_Annual_Report_2020_to_2021.pdf

Ofsted. (2021b). *Research and analysis: Remote education research*. https://www.gov.uk/government/publications/remote-education-research/remote-education-research#annex-methods

Ong, A. K., Prasetyo, Y., Paruli, M., Alejandro, T., Parais, A., & Sarne, L. (2022). Factors Affecting Students' Happiness on Online Learning during the COVID-19 Pandemic: A Self Determination Theory Approach. *International Journal of Information and Education Technology, 12*, 555-564. https://doi.org/10.18178/ijiet.2022.12.6.1653

Pensiero, N., Kelly, A., & Bokhove, C. (2021). *Learning inequalities during the Covid-19 pandemic. A longitudinal analysis using the UK Understanding Society 2020 and 2021 data*. University of Southampton. https://eprints.soton.ac.uk/450310/

Ponizovsky-Bergelson, Y., Dayan, Y., Wahle, N., & Roer-Strier, D. (2019). A qualitative interview with young children: What encourages or inhibits young children's participation? *International Journal of Qualitative Methods, 18*, 1609406919840516.

Popoola, M., & Sivers, S. (2021). *How children and young people experienced the ever-changing landscape of the Covid-19 pandemic - The return to school and onwards*. https://dochub.com/pupilviews/Xv7zYW5RnmqlNP0w2A9egx/how-children-and-young-people-experienced-the-ever-changing-landscape-of-the-covi?dt=6kNseNkiNCwzUyfFNs7b&pg=2

Punch, S. (2002). Research with children: The same or different from research with adults? *childhood, 9*(3), 321-341.

Rapp, C. A. (1998). *The strengths model: Case management with people suffering from severe and persistent mental illness*. Oxford University Press.

Rashid, T., & McGrath, R. (2020). Strengths-based actions to enhance wellbeing in the time of COVID-19. *International Journal of Wellbeing, 10*(4).

Rasmitadila, R., Aliyyah, R. R., Rachmadtullah, R., Samsudin, A., Syaodih, E., Nurtanto, M., Tambunan, A. R. S (2020). The Perceptions of Primary School Teachers of Online Learning during the COVID-19 Pandemic Period: A Case Study in Indonesia. *Journal of Ethnic and Cultural Studies, 7*(2), 90-109.

Rauthmann, J. F. (2021). Capturing interactions, correlations, fits, and transactions: A person-environment relations model. In *The handbook of personality dynamics and processes.* (pp. 427-522). Elsevier Academic Press. https://doi.org/10.1016/B978-0-12-813995-0.00018-2

Reay, T., Zafar, A., Monteiro, P., & Glaser, V. (2019). Presenting findings from qualitative research: One size does not fit all! In *The production of managerial knowledge and organizational theory: New approaches to writing, producing and consuming theory* (pp. 201-216). Emerald Publishing Limited.

Reimers, F., & Schleicher, A. (2020). *Schooling disrupted, schooling rethought: How the COVID-19 Pandeminc is Changing Education. Retrieved December*. Organisation for Economic Co-operation and Development. https://www.llse.org.uk/uploads/datahub/4567ceb%5E03in-03/2020-09-30-OECD%20-%20Schooling%20disrupted,%20schooling%20rethought.pdf

Robson, C., & McCartan, K. (2016). *Real World Research* (4 ed.). Wiley.

Rogers, C. R. (1951). *Client-centered therapy; its current practice, implications, and theory*. Houghton Mifflin.

Rogers, G., Perez-Olivas, G., Stenfert Kroese, B., Patel, V., Murphy, G., Rose, J., Cooper, V., Langdon, P. E., Hiles, S., & Clifford, C. (2021). The experiences of mothers of children and young people with intellectual disabilities during the first COVID-19 lockdown period. *Journal of Applied Research in Intellectual Disabilities, 34*(6), 1421-1430.

Ruane, K. (2020). *Recovery at its best: 5 key principles to support school following critical incidents*. edpsy.org.uk. Retrieved Feb 2023 from https://edpsy.org.uk/blog/2020/recovery-at-its-best-5-key-principles-to-support-school-following-critical-incidents/

Ryan, R. M., & Deci, E. L. (2000). Self-determination theory and the facilitation of intrinsic motivation, social development, and well-being. *American psychologist, 55*(1), 68.

Sample, I. (2020). *Covid poses 'greatest threat to mental health since second world war'*. The Guardian. https://www.theguardian.com/society/2020/dec/27/covid-poses-greatest-threat-to-mental-health-since-second-world-war

Seligman, M. E. P., & Csikszentmihalyi, M. (2000). Positive psychology: An introduction. *American psychologist, 55*, 5-14. https://doi.org/10.1037/0003-066X.55.1.5

Sharp, C., & Nelson, J. (2021). *Recovering from Covid-19: What Pupils and Schools Need Now*. National Foundation for Educational Research.

Sharp, C., Nelson, J., Lucas, M., Julius, J., McCrone, T., & Sims, D. (2020). Schools' responses to Covid-19: The challenges facing schools and pupils in September 2020. Retrieved Feb 2023, from https://www.nfer.ac.uk/media/4119/schools_responses_to_covid_19_the_challenges_facing_schools_and_pupils_in_september_2020.pdf

Sharp, C., & Skipp, A. (2022). *Four things we learned about the impact of Covid-19 on mainstream schools and special education settings in 2020 and 2021*. https://files.eric.ed.gov/fulltext/ED619062.pdf

Shearing, H. (2022). *Sats results: Standards slip in Year 6 tests*. https://www.bbc.co.uk/news/education-61980677

Sherr, L., Cluver, L., Tomlinson, M., Idele, P., Banati, P., Anthony, D., Roberts, K., Haag, K., & Hunt, X. (2020). *Beyond Masks: Societal impacts of COVID-19 and accelerated solutions for children and adolescents*. United Nations Children's Fund (UNICEF). https://www.unicef-irc.org/publications/pdf/UNICEF-Beyond-Masks-Report-Societal-impacts-of-COVID-19.pdf

Sherr, L., Cluver, L., Tomlinson, M., Idele, P., Banati, P., Anthony, D., Roberts, K., Haag, K., & Hunt, X. (2021). *Mind Matters: Lessons from past crises for child and adolescent mental health during COVID-19*. United Nations Children's Fund (UNICEF). https://www.unicef-irc.org/publications/pdf/Mind-Matters-Lessons-from-past-crises-for-child-and-adolescent-mental-health-during-COVID-19.pdf

Silverman, M., Sibbald, R., & Stranges, S. (2020). Ethics of COVID-19-related school closures. *Canadian journal of public health, 111*(4), 462-465. https://doi.org/10.17269/s41997-020-00396-1

Simons, H. (2009). Evolution and concept of case study research. *Case study research in practice*, 12-28.

Singh, S., Roy, D., Sinha, K., Parveen, S., Sharma, G., & Joshi, G. (2020). Impact of COVID-19 and lockdown on mental health of children and adolescents: A narrative review with recommendations. *Psychiatry Research, 293*, 113429. https://doi.org/https://doi.org/10.1016/j.psychres.2020.113429

Sivers, S., Wendland, S., Baggley, L., & Boyle, K. (2020a). *Pupil views around the Covid-19 pandemic: an opportunity for change in education?* https://edpsy.org.uk/features/2020/pupil-views-around-the-covid-19-pandemic-an-opportunity-for-change-in-education/

Sivers, S., Wendland, S., Baggley, L., & Boyle, K. (2020b). *What you told us: Thoughts shared by children & young people about their coronavirus experiences and what would help moving forward*. https://docs.google.com/document/d/1SAESxUOJVWtIYYnLSFRn1UlstbngOstd1hpclXnZnWk/edit

Sivers, S., Wendland, S., Baggley, L., Boyle, K., Popoola, M., & Looney, E. (2020c). *Pupil views on their education in the context of the COVID-19 pandemic*. Association of Educational Psychology. https://www.aep.org.uk/system/files/2022-02/Pupil%20views%20on%20their%20education%20in%20the%20context%20of%20COVID-19%20pandemic_July2020.pdf

Skipp, A., Hopwood, V., Tyers, C., Webster, R., & Rutt, S. (2021a). *The reported effects of the pandemic on pupils in special schools and colleges and what they need now*. National Foundation for Educational Research. https://www.nfer.ac.uk/media/4592/ask_research_specialschools_colleges.pdf

Skipp, A., Hopwood, V., & Webster, R. (2021b). *Special education in lockdown: The experiences of school and college providers and families of pupils with Education, Health and Care Plans (EHCPs)*. Nuffield Foundation. Retrieved Feb 2023 from https://www.nuffieldfoundation.org/wp-content/uploads/2021/02/FULL_Spec_Lockdown_Rpt_ASK-Research.pdf

Soneson, E. (2022). *'Happier during lockdown': positive experiences of COVID-19 lockdowns and how we can create positive change*. https://edpsy.org.uk/blog/2022/happier-during-lockdown-positive-experiences-of-covid-19-lockdowns-and-how-we-can-create-positive-change/

Soneson, E., Puntis, S., Chapman, N., Mansfield, K. L., Jones, P. B., & Fazel, M. (2022). Happier during lockdown: a descriptive analysis of self-reported wellbeing in 17,000 UK school students during Covid-19 lockdown. *European Child & Adolescent Psychiatry*. https://doi.org/10.1007/s00787-021-01934-z

Spiers, J., & Riley, R. (2019). Analysing one dataset with two qualitative methods: The distress of general practitioners, a thematic and interpretative phenomenological analysis. *Qualitative research in psychology, 16*(2), 276-290.

Spratling, R., Coke, S., & Minick, P. (2012). Qualitative data collection with children. *Applied Nursing Research, 25*(1), 47-53.

Sriharan, A., Smith, T., Shea, C., & Berta, W. (2021). Using Design Thinking and Appreciative Inquiry to Modernize Curriculum and Transform Student Learning. *Journal of Health Administration Education, 38*(1), 285-296.

Stringer, N., & Keys, E. (2021). *Learning during the pandemic: review of international research*. https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1000352/6803-5_Learning_during_the_pandemic-_review_of_international_research.pdf

Teacher Tapp. (2020). *Who could return to school? (If it were possible...)*. Retrieved Feb 2023 from https://teachertapp.co.uk/articles/who-could-return-to-school-if-it-were-possible/

Teachman, G., & Gibson, B. E. (2013). Children and youth with disabilities: Innovative methods for single qualitative interviews. *Qualitative health research, 23*(2), 264-274.

The Children's Commissioner's Office. (2020). *Supporting children with special educational needs and disabilities to return to school*. Retrieved Feb 2023 from https://www.childrenscommissioner.gov.uk/2020/08/31/supporting-children-with-special-educational-needs-and-disabilities-to-return-to-school/

The Commission on Young Lives. (2022). *Heads Up: Rethinking mental health services for vulnerable young people*. Centre for Mental Health. https://www.centreformentalhealth.org.uk/sites/default/files/coyl_mh_report_final.pdf

Thelen, E., & Smith, L. B. (1998). Dynamic Systems Theories. In W. Damon (Ed.), *Handbook of Child Psychology: Vol. 1. Theoretical Models of Human Development* (5th ed., pp. 563–633). Wiley.

Thomas, G. (2016). *How to do your case study* (2nd edition. ed.). SAGE.

Thomas, G. (2017). *How to Do Your Research Project* (3 ed.). SAGE Publications.

Timmins, N. (2021). *Schools and coronavirus: The government's handling of education during the pandemic.* Institute for Government.

https://www.instituteforgovernment.org.uk/sites/default/files/publications/schools-and-coronavirus.pdf

Toseeb, U., Asbury, K., Code, A., Fox, L., & Deniz, E. (2020). *Supporting Families with Children with Special Educational Needs and Disabilities During COVID-19.* PsyArXiv. Retrieved Feb 2023 from https://psyarxiv.com/tm69k/

Toste, J. R., Raley, S. K., Gross Toews, S., Shogren, K. A., & Coelho, G. (2021). "Eye Opening and Chaotic": Resilience and Self-Determination of Secondary Students with Disabilities Amidst the COVID-19 Pandemic. *Journal of Education for Students Placed at Risk (JESPAR), 26*(2), 157-183. https://doi.org/10.1080/10824669.2021.1906248

Trust, T., & Whalen, J. (2020). Should Teachers be Trained in Emergency Remote Teaching? Lessons Learned from the COVID-19 Pandemic. *Journal of Technology and Teacher Education, 28*(2), 189-199.

Tudge, J. R., Mokrova, I., Hatfield, B. E., & Karnik, R. B. (2009). Uses and misuses of Bronfenbrenner's bioecological theory of human development. *Journal of Family Theory & Review, 1*(4), 198-210.

UNESCO. (2020). *UN Secretary-General warns of education catastrophe, pointing to UNESCO estimate of 24 million learners at risk of dropping out*. https://en.unesco.org/news/secretary-general-warns-education-catastrophe-pointing-unesco-estimate-24-million-learners-0

UNICEF. (2021a). *COVID-19 and School Closures: One year of education disruption*. https://data.unicef.org/resources/one-year-of-covid-19-and-school-closures/

UNICEF. (2021b). *Life in Lockdown: Child and adolescent mental health and well-being in the time of COVID-19*. I. R. R. (2021). Life in Lockdown: Child and adolescent mental health and well-being in the time of COVID-19, UNICEF Office of Research - Innocenti, Florence Office of Research. https://www.unicef-irc.org/publications/1227-life-in-lockdown.html

UNICEF. (2021c). *Preventing a Lost Decade: Urgent action to reverse the devastating impact of COVID-19 on children and young people*. https://www.unicef.org/media/112891/file/UNICEF%2075%20report.pdf

University of Cambridge. (2022). *One in three young people say they felt happier during lockdown*. https://www.cam.ac.uk/research/news/one-in-three-young-people-say-they-felt-happier-during-lockdown#

Vaish, A., Grossmann, T., & Woodward, A. (2008, May). Not all emotions are created equal: the negativity bias in social-emotional development. *Psychol Bull, 134*(3), 383-403. https://doi.org/10.1037/0033-2909.134.3.383

Wakefield Educational Psychology Service. (2023). *Relate to Educate*. https://www.wakefieldscp.org.uk/wp-content/uploads/2023/11/Relate-to-Educate-Relational-Guidance.pdf

Waters, L., Cameron, K., Nelson-Coffey, S. K., Crone, D. L., Kern, M. L., Lomas, T., Oades, L., Owens, R. L., Pawelski, J. O., & Rashid, T. (2021). Collective wellbeing and posttraumatic growth during COVID-19: How positive psychology can help families, schools, workplaces and marginalized communities. *The Journal of Positive Psychology*, 1-29.

Williams, H., Moore, L., & Park, J. (2021). *What is school like for you? Thoughts shared by children & young people in Telford & Wrekin about their experiences of education during and after lockdown*. https://edpsy.org.uk/blog/2021/what-is-school-like-for-you-experiences-of-education-during-and-after-lockdown/

Willig, C. (2008). *Introducing qualitative research in psychology : Adventures in theory and method* (2nd ed.). McGraw Hill Open University Press.

World Health Organisation. (2022). *Coronavirus disease (COVID-19)*. Retrieved 06.06.2022 from https://www.who.int/health-topics/coronavirus#tab=tab_1

World Health Organization. (2020). *WHO Director-General's opening remarks at the media briefing on COVID-19 - 11 March 2020* https://www.who.int/director-general/speeches/detail/who-director-general-s-opening-remarks-at-the-media-briefing-on-covid-19---11-march-2020

Xafis, V., Schaefer, G. O., Labude, M. K., Zhu, Y., & Hsu, L. Y. (2020, Jun). The Perfect Moral Storm: Diverse Ethical Considerations in the COVID-19 Pandemic. *Asian Bioeth Rev, 12*(2), 65-83. https://doi.org/10.1007/s41649-020-00125-3

Yamaguchi, K., Takebayashi, Y., Miyamae, M., Komazawa, A., Yokoyama, C., & Ito, M. (2020). Role of focusing on the positive side during COVID-19 outbreak: Mental health perspective from positive psychology. *Psychological Trauma: Theory, Research, Practice, and Policy, 12*, S49-S50. https://doi.org/10.1037/tra0000807

Yardley, L. (2015). Demonstrating validity in qualitative psychology. In J. A. Smith (Ed.), *Qualitative Psychology: A Practical Guide to Research Methods* (3 ed., pp. 257-272). SAGE Publications.

Yin, R. K. (2009). *Case Study Research: Design and Methods* (Vol. 5). Sage.

Yin, R. K. (2018). *Case Study Research and Applications* (6 ed.). SAGE Publications.

8. APPENDICES

Appendix A: Research timeline

Action	Date completed
Submission of AER	February 2021
Ethical approval received	April 2021
Emails first sent to prospective schools	May 2021
Recruitment of nested case studies	September – November 2021
Interviews	October – November 2021
Reflexive Thematic Analysis	December 2021 – May 2022
Literature review – searches and write up	October 2020 – June 2022
Write up of remainder of study	June 2022 – June 2023

Request for focus school for research project:
Exploring the positive experiences of primary aged children during the COVID 19 pandemic

My name is Marina Limniotis and I am a Trainee Educational Psychologist studying for a doctorate in Applied Educational and Child Psychology at the University of Birmingham. I am carrying out a research project to explore the experiences of children who have experienced some kind of positive effect since the COVID 19 pandemic.

<u>Why have you received this letter?</u>
My aim is to recruit one or two focus schools that will be able to identify a sample of 2-3 children who:
- have had school engagement since the COVID 19 pandemic,
- are relatively emotionally stable and whose family lives are relatively stable (i.e. family have not been in crisis),
- and have experienced some kind of positive effect since the COVID 19 pandemic began (March 2020), in comparison to before the pandemic. For example, this could be in relation to an aspect of their:
    - emotional wellbeing (e.g. less outbursts, more settled or relaxed);
    - social wellbeing (e.g. getting on with others, building relationships, a sense of belonging and connectedness);
    - self-esteem;
    - behaviour;
    - motivation (e.g. participated or engaged more fully in their learning);
    - independence (e.g. in terms of their learning or self-help skills);
    - academic skills.

The views of the children, a member of their family, a member of school staff and possibly another significant professional will be listened to via interviews in order to gain a range of perspectives, with the intention of building a rich and holistic picture of the child's experiences. The aim is to find out what has been going well for each child since the pandemic began, and what aspects of school practice and home life may have led to these positive outcomes. The interviews can be virtual or face to face, and the child's interview will be individualised to suit their communication skills, giving them the opportunity to participate fully with the interview. All the information shared will be confidential and anonymised.

<u>What are the benefits?</u>
- As the research will be conducted solely in your school, the analysis will take into account your school's ethos, culture and practices, and therefore the findings will be highly relevant and useful for the consideration of future practice.
- Each child's case study will involve an in-depth analysis, which will allow a deep understanding of the shared perspectives and individual differences among participants. This will enable the identification of key themes around school practice that has been beneficial during the pandemic.

- The findings of the research will be shared with the members of each case study (i.e. the child, parent/s and member of school staff) and with the whole school or key members of school staff.
- The research project is a great opportunity for children to learn research skills as well as allow them to share their positive experiences.

<u>What criteria does your school need to meet to participate?</u>

A mainstream primary school which:

☐ teaches reception to year 6

☐ has delivered some form of home education throughout the COVID 19 pandemic

☐ is able to identify a sample of 3-5 children who have experienced some kind of positive effect since the pandemic (see above for examples)

☐ is willing to make initial contact with parents and support the arrangement of meetings and interviews within the school

☐ is willing to provide me with information about your school (e.g. demographic, ethos, online learning procedures)

☐ is an open, engaging, receptive and willing school

<u>What next?</u>
If you would like to participate in this research or wish to discuss this further, please get in touch with me via email or telephone.

Thank you for taking the time to read this information. I hope to hear from you soon.

Kind regards,
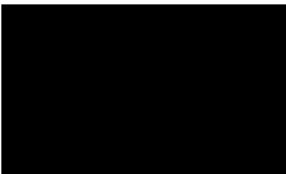
Marina Limniotis
Postgraduate Researcher at the University of Birmingham
Trainee Educational Psychologist at Coventry Educational Psychology Service

Phone
Email:

Would your school like to benefit from participating in research?

Find out what your school did well during the pandemic.

Although the school closures have been disastrous for many, some children have surprisingly thrived through this very different approach to education, and I would like to find out which features were enjoyable and helpful for them. I am conducting my doctoral research project on:

Exploring the positive experiences of children during the COVID 19 pandemic

How do you know if your school meets the criteria?

A mainstream primary school which:

- ✓ is willing to make initial contact with parents and support the arrangement of meetings and interviews within the school
- ✓ is able to identify a sample of 3-5 children who have experienced some kind of positive effect since the pandemic, this could be in relation to an aspect of their:
  - emotional wellbeing (e.g. less outbursts, more settled or relaxed);
  - social wellbeing (e.g. getting on with others, building relationships, a sense of belonging and connectedness);
  - self-esteem;
  - motivation (e.g. participated or engaged more fully in their learning);
  - independence (e.g. in terms of their learning or self-help skills);
  - academic skills.

What are the benefits?

- Each child's case study will involve an in-depth analysis and will enable the identification of key themes around school practice that has been beneficial during the pandemic.
- The analysis will take into account your school's ethos, culture and practices, and the findings will therefore be highly relevant and useful for the consideration of future practice.
- The findings of the research will be shared with the participants and the whole school.
- It is a great opportunity for children to learn research skills as well as allow them to share their positive experiences.

What does the research involve?

The views of the children, a member of their family, and a member of school staff will be listened to via interviews in order to gain a range of perspectives, with the intention of building a rich and holistic picture of the child's experiences. All the information shared will be confidential and anonymised.

Who am I?

My name is Marina Limniotis and I am a Trainee Educational Psychologist studying at the University of Birmingham.

What happens next?

If you would like to take part or find out more, please contact me at
mil908@student.bham.ac.uk

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Did your child do surprisingly well with <u>home learning</u> during school closures?

Although the school closures have been disastrous for many, some children have surprisingly thrived through this very different approach to education, and I would like to find out which features were enjoyable and helpful for them. I am conducting my doctoral research project on:

Exploring the positive experiences of children during the COVID 19 pandemic

How do you know if your child meets the criteria?

Your child will have been at home for one of the periods of time when schools were closed, and experienced some kind of positive effect since the pandemic, this could be in relation to an aspect of their:

- emotional wellbeing (e.g. less outbursts, more settled or relaxed);
- social wellbeing (e.g. getting on with others, building relationships, a sense of belonging and connectedness);
- self-esteem;
- motivation (e.g. participated or engaged more fully in their learning);
- independence (e.g. in terms of their learning or self-help skills);
- academic skills.

What are the benefits?

- It is a great opportunity for your child to learn research skills.
- It will allow your child to share their positive experiences, providing school staff with insights into beneficial teaching practices for some learners during the pandemic and may facilitate change beyond the pandemic.
- I will feedback a summary of the findings from the overall study to you, your child and school staff.

What does the research involve?

I would like to interview your child, a member of their family and a member of school staff in order to get a full and rich picture of your child's experiences during the pandemic.

All the information shared will be confidential and anonymised.

Who am I?

My name is Marina Limniotis and I am a Trainee Educational Psychologist studying at the University of Birmingham.

What happens next?

If you would like to take part or find out more, please contact me at <u>mil908@student.bham.ac.uk</u>

Hi my name's Marina

I'd like to invite you to take part in my research

Why have you been invited to take part?

You are being invited to take part because your teacher said that you have been doing well since the Coronavirus pandemic, maybe you have been enjoying school more or trying harder in your lessons, or maybe you have been happier in general!

I would like to hear about...
- How you have been doing well since the Coronavirus pandemic.
- What's been really good about school and home since the pandemic?

What would you have to do?

If you would like to take part we will meet 2 times.

Session 1 - I will meet you and your parent/carer to explain my research and you can ask me any questions. You can then decide if you would like to take part.
This will take around 20 minutes.

Session 2- Either face to face in school or via video call, I would like you to tell me how you have been doing well since the pandemic, and what has been going well at school and at home. The session will be recorded so I can remember what you say. This will take around 45-60 minutes.

What else do you need to know?

- Hopefully, you will find the session fun and interesting!
- I will try to plan our session together so that it is at the right level for you – not too hard!
- There are no right or wrong answers – I just want to hear what you think.
- If you decide you don't want to talk to me anymore, you can stop at any time – you won't get in any trouble.
- You get to pick a name that I can use when I write about you so no one will know it was you.
- If you tell me something that makes me worried about you or someone else, I will share this with another adult.

Do you have to take part?

No! You do not have to speak to me if you don't want to.

If you say yes, and then change your mind later, that is ok too, just let your parents or carers know.

What happens next?

If you would like to take part let your parents or carers know.
They will then tell me and we can arrange a time to meet in school.

Appendix F: Parents' initial information sheet and consent form

Request for participants - Exploring the relatively positive experiences for children during the COVID 19 pandemic

Dear Parent/Carer,

My name is Marina Limniotis and I am a Trainee Educational Psychologist studying for a doctorate in Applied Educational and Child Psychology at the University of Birmingham. I am carrying out a research project to explore the experiences of children who have experienced some kind of positive effect since the COVID 19 pandemic.

Why have you received this letter?
Because your school SENCo has identified your child as someone who has experienced some kind of positive effect since the COVID 19 pandemic, in comparison to before the pandemic, and may be willing to take part. For example:

- An aspect of their emotional wellbeing may have improved (e.g. less outbursts, more settled or relaxed…)
- An aspect of their social wellbeing may have improved (e.g. getting on with others, building relationships, a sense of belonging and connectedness)
- Their self-esteem may have improved
- Their behaviour may have improved
- Their motivation to learn may have improved (e.g. participated or engaged more fully in their education)
- They may have become more independent (e.g. in terms of their learning or self-help skills)
- Their academic skills may have improved

In order to gain a holistic view of your child's experiences, I would like to interview your child, a member of their family, a member of school staff, and any other professional who has been working closely with your child since the COVID 19 pandemic. In order to determine who will participate in the research, I will ask your child to identify members of their family and school staff who they feel close to. The interview with your child will be individualised to suit their communication skills, giving them the opportunity to participate fully with the interview.

What are the benefits?
- It is a great opportunity for your child to learn research skills.
- It will allow your child to share their positive experiences, which will provide school staff with an insight into the teaching practices that have been beneficial to some learners during the pandemic and may facilitate change beyond the pandemic.
- I will hold a meeting for the members of each case study (your child, a family member, and a member of school staff) in order to feedback a summary of the findings from the overall study.

What next?

Please read the child's information sheet with your child, and if you and your child would like to take part, then please sign the attached consent form and email it to me at ▮▮▮▮▮▮▮▮▮▮▮▮ by__. I will then contact you directly to discuss the project in more detail, and arrange a time for your child and I to meet in person, so that I can explain the nature and purpose of the research in an appropriate communication style for your child. If your child would like a parent/trusted adult to accompany them to the meeting, they are welcome to do so.

Thank you for taking the time to read this information. I hope to hear from you soon.

Kind regards,

Marina Limniotis
Postgraduate Researcher at the University of Birmingham
Trainee Educational Psychologist at Coventry Educational Psychology Service

Phone: ▮▮▮▮▮▮▮▮
Email: ▮▮▮▮▮▮▮▮▮▮▮▮▮

Initial Consent from Parents

My child and I have read the information provided and are willing to take part in Marina Limniotis's research study.

I agree to be contacted by Marina to make arrangements to discuss the project details and gain consent from myself and my child to participate in the research interview.

Sign: _____

My contact details are:

Name: _____

Child's Name: _____

Phone Number: _____

Email address: _____

Best day/time to contact me: _____

Please complete and return this form via email to ▮▮▮▮▮▮▮▮▮▮▮▮ **by:**

Information sheet – Exploring the positive experiences for children during the COVID 19 pandemic

Thank you for agreeing to take part in my research. Here is an information sheet to give you some more information about the research.

My name is Marina Limniotis and I am a Trainee Educational Psychologist studying for a doctorate in Applied Educational and Child Psychology at the University of Birmingham. I am carrying out a research project to explore the experiences of children who have experienced some kind of positive effect since the COVID 19 pandemic, for example, this could be in relation to an aspect of their:

- emotional wellbeing (e.g. less outbursts, more settled or relaxed);
- social wellbeing (e.g. getting on with others, building relationships, a sense of belonging and connectedness);
- self-esteem;
- behaviour;
- motivation (e.g. participated or engaged more fully in their learning);
- independence (e.g. in terms of their learning or self-help skills);
- academic skills.

What does the research involve?
In order to gain a thorough and holistic view of your child's experiences, I will interview your child, yourself, a member of school staff, and any other professional who has been working closely with your child since the COVID 19 pandemic. I would like to gain different perspectives on what has been going well for your child since the pandemic, and what aspects of school practice and home life may have led to these positive outcomes. The interview with your child will be individualised to suit their communication skills, giving them the opportunity to participate fully with the interview. Your child can decide whether the interview takes place face-to-face in school, or via a video call. All interviews will be recorded so that I have an accurate record of our conversation (audio if face-to-face and video if via video call).

What are the benefits for you and your child?
Involvement in this research will provide a great opportunity for your child to learn research skills as well as allow them to share their positive experiences. It is anticipated that these positive experiences may give school staff an insight into the teaching practices that have been beneficial to some learners during the pandemic and may facilitate change beyond the pandemic.

What if you or your child change your minds during the study?
Yours and your child's participation in the research is entirely voluntary so you and/or they will have the right to stop or withdraw from the project before, during or after the final interview, without having to give a reason and without any consequence. Withdrawal time after the final interview will be limited to

two weeks as after this time data analysis will be underway so it will not be possible to remove participants' data during this stage.

Will the information you share be confidential?
- Yes! Anything that you and your child shares during the session will be treated as confidential. A pseudonym will be used rather than your actual names, meaning that you will not be identifiable at any point during the data collection, analysis or write up stages.
- Anonymity cannot be guaranteed due to interviews being conducted face-to-face, however I will be the only person who has direct contact with each participant.
- Any names of children, family members, teachers or other professionals that are mentioned during the interviews, either orally or in written format will not be reported and will be replaced with pseudonyms or general labels, e.g., mum/teacher/friend, to protect identifiable details.
- If for any reason I am concerned about yours, your child's or others' safety and/or well-being during the interviews, I am obliged to follow Coventry Educational Psychology Service's Safeguarding Policy, and report such information, but I would inform you and your child before doing this.

What will happen to the information shared during the interviews?
- The audio-recorded data or the video from the video call will be saved onto my password-protected laptop and the files themselves will also be password-protected; they will be deleted once the transcripts have been created.
- The transcripts will be recorded into a word document which will be password-protected. It will be saved onto my laptop which is also password-protected.
- Each transcript will be labelled with a code (pseudonym) that only I will know. A record of which code applies to which participant will be stored separately from the data in a password-protected file on the University of Birmingham BEAR Research Data Store to ensure that data is stored securely and can be withdrawn on request. Once the point of withdrawal passes, I will delete the document.
- In accordance with university research policy, the transcripts will be stored on the Research Data Store for 10 years after completion of the project; a 10-year expiry date will be set.

How will the research be reported?
- Doctoral Thesis report - This research study will be written into a 25,000 word doctoral thesis report for the University of Birmingham, which will be published, in full, online on the e-theses database. The report will include quotes, but it will all be anonymised to ensure participant confidentiality.
- After the final analysis has been conducted, I will hold a meeting for the members of each case study (you, your child and a member of school staff) in order to feedback a summary of the overall research findings. I will explain how your information will be shared and how your experiences will help school staff and Educational Psychologists.
- I will offer a brief session to your child's school as well as Coventry Educational Psychology Service, to feedback the findings and conclusion of the study overall, however, individual participants will not be identifiable as pseudonyms will be used.

Contact details
Here are my contact details if you would like to get in touch with me for any reason:

Marina Limniotis

Postgraduate Researcher at the University of Birmingham
Trainee Educational Psychologist at Coventry Educational Psychology Service

Phone: ██████████
Email: ████████████████████████

Information sheet – Exploring the positive experiences for children during COVID 19 pandemic

Dear Sir/Madam,

My name is Marina Limniotis and I am a Trainee Educational Psychologist studying for a doctorate in Applied Educational and Child Psychology at the University of Birmingham. I am carrying out a research project to explore the experiences of children who have experienced some kind of positive effect since the COVID 19 pandemic. For example, this could be in relation to an aspect of their:

- emotional wellbeing (e.g. less outbursts, more settled or relaxed);
- social wellbeing (e.g. getting on with others, building relationships, a sense of belonging and connectedness);
- self-esteem;
- behaviour;
- motivation (e.g. participated or engaged more fully in their learning);
- independence (e.g. in terms of their learning or self-help skills);
- academic skills.

Why have you received this letter?

A child who you have been working with has agreed to participate in this research and in order to gain a holistic view of the child's experiences, I would like to interview the child, a member of their family, a member of school staff and any other professional who has been working closely with the child since the COVID 19 pandemic. I am therefore inviting you to participate in an interview in order to gain your perspective on what has been going well for the child since the pandemic, and what aspects of school practice or home life may have led to these positive outcomes.

What are the benefits for the participants?

Involvement in this research will provide a great opportunity for the child to learn research skills as well as allow them to share their positive experiences. It is anticipated that these positive experiences may give school staff an insight into the teaching practices that have been beneficial to some learners during the pandemic and may facilitate change beyond the pandemic.

How will the research be reported?

- Doctoral Thesis report - This research study will be written into a 25,000 word doctoral thesis report for the University of Birmingham, which will be published, in full, online on the e-theses database. The report will include quotes, but it will all be anonymised to ensure participant confidentiality.
- After the final analysis has been conducted, I will hold a meeting for the members of each case study (the child, their family member, and a member of school staff) in order to feedback a summary of the final research findings. I will explain how your information will be shared and how your experiences will help school staff and Educational Psychologists.

- I will offer a brief session to your school as well as Coventry Educational Psychology Service, to feedback the findings and conclusion of the study overall, however, individual participants will not be identifiable as pseudonyms will be used.

What if I change my mind during the study?

Your participation in the research is entirely voluntary so you will have the right to stop or withdraw from the project before, during or after the final interview, without having to give a reason and without any consequence. Withdrawal time after the final interview will be limited to two weeks as after this time data analysis will be underway so it will not be possible to remove participants' data during this stage.

Will the information we share be confidential?

- Yes! Anything that you share during the session will be treated as confidential. A pseudonym will be used rather than your actual name, meaning that you will not be identifiable at any point during the data collection, analysis or write up stages.
- Anonymity cannot be guaranteed due to interviews being conducted face-to-face or via video call, however I will be the only person who has direct contact with each participant.
- Any names of children, family members, teachers or other professionals that are mentioned during the interviews will not be reported and will be replaced with pseudonyms or general labels e.g. mum/teacher/friend to protect identifiable details.
- If for any reason I am concerned about yours, the child's or others' safety and/or well-being during the interviews, I am obliged to follow Coventry Educational Psychology Service's Safeguarding Policy, and report such information, but I would inform you before doing this.

What will happen to the information shared during the interviews?

- The audio-recorded data will be saved onto my personal laptop and will be password-protected; they will be deleted once the transcripts have been created.
- The transcripts will be recorded into a word document which will be password protected. It will be saved onto my personal laptop which is also password protected.
- Each transcript will be labelled with a code (pseudonym) that only I will know. A record of which code applies to which participant will be stored separately from the data in a password-protected file on the University of Birmingham BEAR Research Data Store to ensure that data is stored securely and can be withdrawn on request. Once the point of withdrawal passes, I will delete the document.
- In accordance with university research policy, the transcripts will be stored on the Research Data Store for 10 years after completion of the project; a 10-year expiry date will be set.

What are the next steps?

- If you have any questions regarding the research, please do get in touch.
- If you are willing to participate, then please sign the consent form attached and return it to me via email at ████████████████████

Thank you for taking the time to read this information. I hope to hear from you soon.

Kind regards,

Marina Limniotis

Postgraduate Researcher at the University of Birmingham
Trainee Educational Psychologist at Coventry Educational Psychology Service
Phone: 0███████████
Email: ███████████████████████

UNIVERSITYOF
BIRMINGHAM

<u>Information sheet - Exploring the relatively positive experiences for children during the COVID 19 pandemic</u>

Thank you for agreeing to take part in my research! Here is an information sheet to remind you of the details of the research.

My name is Marina Limniotis and I am a Trainee Educational Psychologist studying for a doctorate in Applied Educational and Child Psychology at the University of Birmingham. I am carrying out a research project to listen to children's experiences. I would like to find out how some children have been doing well during the COVID 19 pandemic, how they have been enjoying school and being at home and what was useful about school.

Why have you been invited to take part?
You were invited to take part because your teacher said that you have been doing well since the COVID 19 pandemic. It might be that you have been more settled and relaxed, getting on better with other people, enjoying school more or trying harder in your lessons.

What does the research involve?
I would like to interview you, someone from your family, someone from school, and any other person who you have been working with since the COVID 19 pandemic. This will help me get a really good idea of what has been going on for you. I would like you to help me decide who I interview by telling me the top 3 people at home and at school who you have the closest relationship with.

During the interview, you can choose what you tell me and you don't have to talk about anything you don't want to. You can choose whether we meet face-to-face in school or whether we meet via a video call. I will record this session so I can remember what you say. This will take around 45-60 minutes.

What are the benefits for you?
- It will be a great opportunity to learn research skills.
- You will be able to share your positive experiences.
- What you share may help your teachers understand what can be useful for some learners and they may make changes at school to help you and other children.

What if you change your mind about taking part?
You can change your mind before the interview, during the interview and 2 weeks after. Just let me or your parents/carers know, you don't have to give a reason why.

Will anyone find out about what you say in the interview?
- No! You get to pick a name that I can use when I write about you so no one will know it was you.
- The only reason I will have to share what you tell me is if you tell me something that makes me worried about you or someone else.

What will happen to the information shared during the interview?

- It will be stored in a password-protected file on a password-protected laptop or secure online data storage.
- I will write a very long (25,000 words!) report that will be published online on the e-theses database, and I will use some of the things that you say, but don't worry, I won't be using your name, I'll be using the name you choose.
- After I have looked at all the information that the participants have shared with me, I will meet you, your parent/s or carer/s and someone from school to let you know what I found in my research. You will also be able to ask me any questions.
- I will share what I have found from my research with your school, but don't worry, I won't be using your name, I'll be using the name you choose.

Contact details
Here are my contact details if you would like to get in touch with me for any reason:

Marina Limniotis
Postgraduate Researcher at the University of Birmingham
Trainee Educational Psychologist at Coventry Educational Psychology Service

Phone: ███████████
Email: ████████████████████

Appendix J: Parents' consent form

Parents'/Carers' consent form

✓ If you agree to participate in the research, please tick to indicate that you are happy with the following statements and sign below to give your informed consent:

I have read and understood the information sheet provided and understand the nature of Marina's research.	
I consent to taking part in this research regarding the experiences of children who have had relatively positive outcomes since the COVID 19 pandemic.	
I understand that this project forms part of Marina's doctorate in Applied Educational and Child Psychology at the University of Birmingham and her findings will be written up for her thesis.	
I understand that me and/or my child can withdraw from the research before, during, or up to 2 weeks after the interviews and this will mean that information provided will be removed from the project and erased.	
I understand that the information that I and/or my child shares will be confidential, meaning that we will not be identifiable in the data collection, analysis or write up stages and instead pseudonyms will be used.	
I understand that my interview will be recorded for the purposes of the research.	
I understand the limits of confidentiality such that if I mention something that suggests that either myself or someone else is at risk of harm then this information will have to be reported to a member of school staff.	

Child's Pseudonym: **Child's school:**

Initials: **Relationship to child:**

Signed: **Date:**

Parents' consent form for child

- ✓ If you agree for your son/daughter to participate in the research, please tick to indicate that you are happy with the following statements and sign below to give your informed consent:

I have read and understood the information sheet provided and understand the nature of Marina's research.	
I consent to my son/daughter taking part in this research regarding the experiences of children who have had relatively positive outcomes since the COVID 19 pandemic.	
I understand that this project forms part of Marina's doctorate in Applied Educational and Child Psychology at the University of Birmingham and her findings will be written up for her thesis.	
I will support my child if they want me to be present in the interviews, but if they are happy to engage by themselves, I will also be available for the duration of the interviews in case I am needed.	
I understand that me and/or my child can withdraw from the research before, during, or up to 2 weeks after the interviews and this will mean that information provided will be removed from the project and erased.	
I understand that the information that my child shares will be confidential, meaning that they will not be identifiable in the data collection, analysis or write up stages and instead pseudonyms will be used.	
I understand that my child's interview will be recorded for the purposes of the research.	
I understand the limits of confidentiality such that if my child mentions something that suggests that either they or someone else is at risk of harm then this information will have to be reported to a member of school staff.	

Child's Pseudonym: **Child's school:**

Initials: **Relationship to child:**

Signed: **Date:**

Appendix L: Professionals' consent form

Professionals' consent form

✓ If you agree to participate in the research, please tick to indicate that you are happy with the following statements and sign below to give your informed consent:

I have read and understood the information sheet provided and understand the nature of Marina's research.	
I consent to taking part in this research regarding the experiences of children who have had relatively positive outcomes since the COVID 19 pandemic.	
I understand that this project forms part of Marina's doctorate in Applied Educational and Child Psychology at the University of Birmingham and her findings will be written up for her thesis.	
I understand that I can withdraw from the research before, during, or up to 2 weeks after the interviews and this will mean that information provided will be removed from the project and erased.	
I understand that the information that I share will be confidential, meaning that I will not be identifiable in the data collection, analysis or write up stages and instead pseudonyms will be used.	
I understand that my interview will be recorded for the purposes of the research.	
I understand the limits of confidentiality such that if I mention something that suggests that either myself or someone else is at risk of harm then this information will have to be reported to a member of school staff.	

Child's Pseudonym: **Child's school:**

Initials: **Role/relationship to child:**

Signed: **Date:**

Child's Consent Form

✓ If you agree to participate in the research, please read and tick *(✓)* the boxes to indicate that you are happy with the following statements and sign below to give your consent:

I have read (or listened to) and understood the Information Sheet about Marina's project.	
I would like to take part in this project about children who have had some positive outcomes since the COVID 19 pandemic.	
I understand that my parent/carer can be present in the session if this would make me feel more comfortable.	
I understand that I can stop being involved without having to give a reason and this is ok.	
I understand that my session will be recorded so that Marina can remember what is said.	
I understand that I do not have to answer any questions during the session that I do not want to.	
I understand that no one will know exactly what I say because my name or the name of my school will not appear in the report.	
I understand that if I say anything that makes Marina think that I or someone else is at risk of harm then she will have to tell a member of staff in the school.	
I understand I can contact Marina by speaking to my parent or the SENCo at school.	

Child's Pseudonym: **Child's school:**

Signed: **Date:**

Appendix N: Demographic information form

Child's Pseudonym	
Gender	
Age	
Year Group	
Ethnicity	
First Language	
Brief description of Special Educational Needs (if applicable)	
Family Information, e.g. who lives at home	
Involvement from other professionals and support received since the COVID 19 pandemic	
Any additional information that is shared / anything important to share with me?	

Appendix O: Interview schedule for parents

Starting / Overview:
- Introduce self to interviewee - thank you for coming to speak with me today and for agreeing to take part in my study.
- Explain purpose of the interview and timings.
- I will record the interview using a voice recorder or Zoom and explain why.
- Explain that the recording will be stored safe so only I have access to it.
- I will type the interview up but will not use interviewee's real name or the name of the school or any teacher's real names (anonymous).
- Explain that if there is any question that they do not want to answer, they can just say so and we will move on. If they do not wish to continue at any point then they can just leave without an explanation.
- Ask whether they are happy to carry on and if they have any questions.

Use a timeline (see Appendix R) to aid the interviewee's memory of the school closures over the course of the pandemic. Discuss key events that occurred in the child's life over this period, while annotating the timeline.

Use A3 paper to record a visual of their responses:

Ending and debrief:
- Listen to any concerns they have, using empathy and my knowledge of the SEN education sector.
- Ask if they would like me to pass on their concerns to relevant professionals.
- Signpost to support within the school or relevant agencies, e.g. a parent advocacy group.
- Summarise the key points from the interview.
- Ask whether they have any questions about our chat today / research generally.
- Explain what will happen next (including how I will share the findings).
- Remind them of their right to withdraw and confidentiality.

- Thank them for speaking with me today.

Topic	Possible questions	Possible prompts and follow up questions	Probes
Positive effects	1. Since the pandemic, what has been going well for your child? **Use prompt cards**	How about their: • Emotional wellbeing? (e.g., less outbursts, more settled or relaxed…) • Social wellbeing? (e.g., getting on with others, building relationships, a sense of belonging and connectedness) • Motivation to learn? • Self-esteem? • Independence? • Behaviour? • Academic skills?	Can you tell me more? What was that like? How do you think the child felt? What do you mean by…? Do you think that was important for them?
	2. Are there any specific positive outcomes you have noticed in your child since the pandemic?		

School and home life	3. What aspects of your child's home or school life do you think may have led to the positive outcomes that your child has experienced?
	Use prompt cards
		How about:
		• Home/online learning
		  o More flexibility/freedom
		  o Less sensory overload
		  o Being in a safe place
		• School learning
		  o More routine
		  o Smaller groups
		• Home:
		  o More family time
		  o Family members are less stressed
			What was it about that that they liked/disliked?
			
			Anything else?
			
			Tell me more. And…?
			
			Can you tell me more?
			
			Anything else?

Looking forward –	4. Thinking about what we have discussed today so far, what do you think would be helpful for		

what would be helpful?	your child beyond the pandemic? What parts of lockdown do you think were good/helpful that you would you like to keep for them?		
Opportunity for elaboration	5. Is there anything else you would like to tell me?		
	6. Is there anything else you would like to know from me?		

Appendix P: Interview schedule for professionals

Starting / Overview:
- Introduce self to interviewee - thank you for coming to speak with me today and for agreeing to take part in my study.
- Explain purpose of the interview and timings.
- I will record the interview using a voice recorder or Zoom and explain why.
- Explain that the recording will be stored safe so only I have access to it.
- I will type the interview up but will not use interviewee's real name or the name of the school or any teacher's real names (anonymous).
- Explain that if there is any question that they do not want to answer, they can just say so and we will move on. If they do not wish to continue at any point then they can just leave without an explanation.
- Ask whether they are happy to carry on and if they have any questions.

Use a timeline (see Appendix R) to aid the interviewee's memory of the school closures over the course of the pandemic. Discuss key events that occurred in the child's life over this period, while annotating the timeline.

Use A3 paper to record a visual of their responses:

Ending and debrief:
- Listen to any concerns they have, using empathy and my knowledge of the SEN education sector.
- Ask if they would like me to pass on their concerns to relevant professionals.
- Signpost to support within the school or relevant agencies.
- Summarise the key points from the interview.
- Ask whether they have any questions about our chat today / research generally.
- Explain what will happen next (including how I will share the findings).
- Remind them of their right to withdraw and confidentiality.
- Thank them for speaking with me today.

Topic	Possible questions	Possible prompts and follow up questions	Probes
Positive effects	1. Since the pandemic, what has been going well for (insert child's name)? **Use prompt cards**	How about their: • Emotional wellbeing? (e.g. less outbursts, more settled or relaxed…) • Social wellbeing? (e.g. getting on with others, building relationships, a sense of belonging and connectedness) • Motivation to learn? • Self-esteem? • Independence? • Behaviour? • Academic skills?	Can you tell me more? What was that like? How do you think the child felt? What do you mean by…? Do you think that was important for them?
	2. Are there any specific positive outcomes you have noticed since the pandemic?		

School practice	3. What aspects of (insert child's name)'s home or school life do you think may have led to the positive outcomes that they have experienced?
	
	Use prompt cards
		How about:
		• Home/online learning
		  o More flexibility/freedom
		  o Less sensory overload
		  o Being in a safe place
		• School learning
		  o More routine
		  o Smaller groups
		• Home:
		  o More family time
		  o Family members are less stressed
			What was it about that that they liked/disliked?
			
			Anything else?
			
			Tell me more. And…?
			
			Can you tell me more?

Looking forward – what would be helpful?	4. Thinking about what we have discussed today so far, what do you think would be helpful for your child beyond the pandemic? What parts of lockdown do you think were good/helpful that you would you like to keep for them?		Anything else?
Opportunity for elaboration	5. Is there anything else you would like to tell me?		
	6. Is there anything else you would like to know from me?		

Appendix Q: Interview schedule for children

Initial meeting with children and introducing the research:
- Rapport building – games like dobble, treasure deck cards, would you rather questions
- Introduce myself as a student/learner
- "I am interested to find out about children who have done really well during the pandemic, even though there have been some really hard things to deal with! Your teacher and your family told me how well you have been doing and that's why I've invited you to take part in this research! I'm hoping that you will let me ask you some questions about what it was like…." Praise the children –make them feel special!! Celebrate how well they have done!! Draw them a diagram like this to explain why they were chosen and what I want to know about:

> Good
>
> Before covid | covid | Now
>
> Not so good

- Set expectations – I will see you 1 more time….
- Show children the Dictaphone, demonstrate how it works, and then let them record themselves saying something/asking me something and then play it back.
- Explain confidentiality and ask them to choose a pseudonym: ''All your answers are confidential, which means that they are private and will not be shared with anyone else. We won't put your name on your answers, so when we look back at them later we won't even know that you were the one who said it." Or ''I won't tell anybody what we talked about''
- Explain what will happen to their information:
  - saved on my laptop – password protected
  - I will analyse your views and a few other children's and write it in a long report
  - It will take me a long time but I will feedback the findings – maybe next year sometime: with you and your family and your school and my work team
- I will also interview your family (ask who they would like to participate) and school staff.
- Ask children to bring objects/photos that will help them tell me about their life during covid compared to their life before covid.
- Give them the prompt sheet to take away with them?
- Check they still want to take and ask them to sign the consent form.
- Give them the information sheet about the research to take away with them if they want.
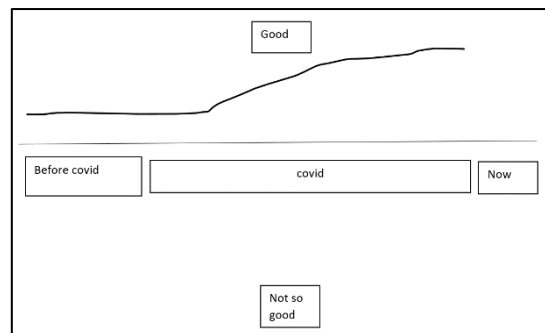
Interview:

Go with the flow! Be adaptable and flexible; allow things to happen naturally in the interview!

Ground rules to clarify their role/introduction:
- First, I will ask you to tell me about how things have been going well for you since the covid lockdowns… And then afterwards I will ask you to tell me about how things were before the pandemic happened… I have got lots of picture cards in case you need some things to jog your memory!
- There are no right or wrong answers and I'm really looking forward to hearing your ideas . . .

- Take time to think before you answer if you need to.
- Tell me if you think I'm not understanding you or if you don't understand me.
- You can say ''pass'' if you don't want to answer my question.

Topic	Possible questions	Possible prompts and follow up questions	More leading questions if necessary
Questions that can be answered with a brief, easy response	7. What year are you in now?		
	8. Timeline – When did you go to school? When were you at home?		
Form a general story of covid/lockdowns	9. Tell me about what has been going well since the covid lockdowns? I'd like you to tell me about people, places, feelings, learning, health, free time…. (Give them more structure if needed by asking them to talk about 1 aspect at a time) (Use visual prompt cards if needed)	What was that like? How did that make you feel? Can you tell me more about that? Was that important for you? What have you found helpful? What was it about that that you liked/didn't like? What do you think helped you achieve that/feel like that?	• Have you felt more relaxed or settled? • Have you had less outbursts? • Have you been getting on with your friends/family/teachers better? • Have you felt more of a connection to the school? Do you feel more like you belong? • Do you feel more excited or motivated to learn? • Have you become more independent with you learning or with other things at home? • Have you felt more confident in your schoolwork or with your friends? • Have you been getting in less trouble at school? • Have you been getting good feedback from your teachers about
	10. What were you doing? At home? At school?		
	11. What have you enjoyed?		
	12. What happened when you were at home/school…		

			your behaviour or your schoolwork? • Have you been doing well in your schoolwork?
Form a general story of <u>before</u> covid/lockdowns <u>**Use a timeline**</u>	13. Tell me about how things were <u>before</u> the covid lockdowns? You can tell me about what things were like when you first started school if you like? I'd like you to tell me about people, places, feelings, learning, health, free time….	What was that like? How did that make you feel? Can you tell me more about that? Was that important for you? What have you found helpful? What was it about that that you liked/didn't like? What do you think helped you achieve that/feel like that?	
	14. What were you doing? At home? At school?		
	15. What happened when you were at home/school…		
Comparing before and during covid	16. Think about what things were like before the covid lockdowns and then during the covid lockdowns: • General feelings- happy/sad • School/learning • Home • People/relationships • Hobbies • Health		

	• Anything that the child has talked about, e.g., confidence		
Looking forward – what would be helpful?	17. Now that we are a bit more back to normal and we don't have lockdown rules anymore… what would you like your home and school life to be like? What parts of lockdown do you think were good/helpful that you would you like to keep?		
Opportunity for elaboration	18. Is there anything else you would like to tell me?		
	19. Is there anything else you would like to know from me?		

- Be patient, don't be too quick to redirect or jump to conclusions - "you can take your time, I will wait until you are ready"
- Offer a "shopping list" of terms for them to select from if they are struggling with something... (e.g. feelings cards)
- Use reflective statements, summary statements, acknowledgment of feelings, and praise for engagement generously.
- Be open to moving completely off topic (to one of interest to the child) to facilitate conversation and comfort.
- Some children might best be interviewed as they walk, play, or are enjoying outdoor spaces, in what we refer to as kinetic conversations. Be open to walking around if that's what helps the child!

End:
- Take photos/photocopies if the child wants to keep drawings
- Debrief:
  - Tell them who they can talk to if they what to talk anymore about the things we talked about today.
  - Explain what will happen next – e.g. interviews with parents/staff, I will analyse their views and write it in a long report! It will take me a long time but I will feedback the findings – maybe next year sometime
  - Any questions?
  - Thank you! Stickers?

Appendix R: Interview visual – Timeline
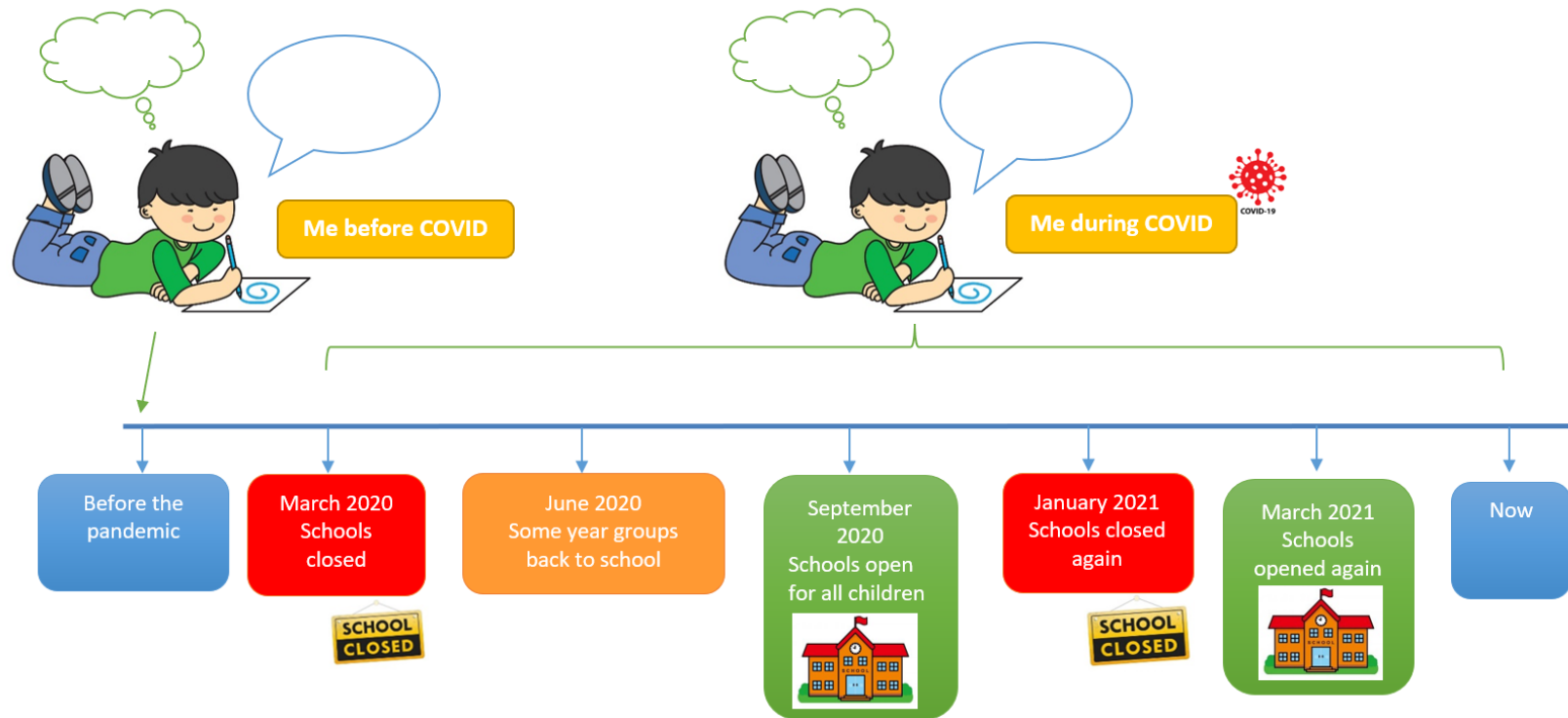
Appendix S: Interview visual – Prompt cards

People
Friends   Family
Teachers

Places
School   Home
Park

Learning
Support   Independence
Progress

Health
Sleep   Eating
Physical activity

Hobbies

Before
COVID-19

During
COVID-19

Appendix T: Data analysis and theme development

Adapted from Braun and Clarke (2021; p. 35).

Six phases of Reflexive Thematic Analysis	Process of analysis for each case
1. Familiarising yourself with the dataset Immersion with the data via listening to recordings, producing transcripts, reading and re-reading data, and making brief notes.	• I listened to each recording multiple times in order to produce a transcript. • I read the transcript multiple times and made brief notes.

2. Coding
Going through the entire dataset, identifying segments of the data that are meaningful and relevant to the research questions and labelling them with codes.
	• For each case, I created a table in which the left column contained transcript data, and the right column contained corresponding codes.
	• Braun and Clarke (2021) say that there is no absolute test for whether coding is good enough, but they suggest a "take away the data" exercise, to test whether the code labels do a good job of capturing the meaning. "You imagine you have lost your dataset and question if they provide you with a summary of the diversity of meanings and richness of meanings contained in the dataset, and whether they provide some indication of your analytic take on things." (p.71-72)
	    ○ I found that often, I was looking at the codes and thought to myself "I'm sure I remember the interviewee saying ***, where is that? Why isn't there a code for it?" so I then went back to the transcript and often created a new code.
	    ○ I found this activity particularly difficult to do with the children's data, as so much of what they had shared with me was not relevant to my research questions.
	• (See Appendix U for an example)

3. Generating initial themes	• I engaged in this phase by analysing each case separately. For example, for Jake's case, I began by printing a list of all the codes from Jake's, his

Linking together codes that share core ideas and may provide meaningful 'answers' to the research questions.	mother's and his school SENCo's data. I colour coded the text so that I could distinguish which participant the code was from. I cut out the codes so that they were all separate and laid them out onto a large table. • I began to position codes together that seemed to share ideas in answer to research questions 1 and 2. I used post it notes to add potential theme and sub-theme names for clusters of codes. • While engaging in phase 3, I also dipped into phase 4 and phase 2, as I often found that the codes did not have enough detail or context and so I often checked the transcript (phase 4) in order to remind myself of the meaning of the code. I often changed the code (phase 2) as I felt it did not reflect the transcript accurately or I added a code as I found that there was more meaning to be gleaned from the data extract. • (See Appendix V for an example)
4. Developing and reviewing themes Assessing whether the initial themes make sense when re-visiting the coded extracts and the full dataset. Asking yourself questions such as: • "Does each theme tell a convincing and compelling story about an important pattern of shared meaning related to the dataset?" • "Collectively, do the themes highlight the most important patterns across the dataset in relation to your research question?" • What are the relationships between the themes, existing knowledge, and practice in the research field?	• I carried out phase 4 and 5 simultaneously. • With all the codes still laid out on the table, I created a thematic map for research question 1 and research question 2 on Microsoft PowerPoint. I then used both the paper codes and the thematic map to reflect on the existing themes and consider whether any revisions would be beneficial. • I re-visited the thematic maps, the codes and the data multiple times over a few months and continued to make revisions. • I shared my thematic maps during peer supervision to share my thoughts and reflections and gain other's perspectives. Sometimes I found that just talking about each theme out loud gave me some clarity on how convincing and compelling the story of the theme was. For example, I spent some time reflecting on some original themes relating to Roger's hobbies, such as 'more positive about hobbies'. I interrogated the themes and decided that the positive effect was that he was 'enjoying his new hobby' and could be a sub-theme under an overall theme of 'more enjoyment'. Another positive effect linked to his hobby was his 'increased

	self-esteem', which became a sub-theme under an overall theme of 'self-development/growth'. In terms of contributing factors, I decided that it was time that supported him to engage in enjoyable activities that he excels in, which became a stand-alone theme.
5. Refining, defining and naming themes Fine-tuning of analysis by making sure that each theme is built around a central organising concept. A concise and informative name needs to be decided and a brief description of each theme needs to be written.	• At this stage, I reflected that as my familiarity with the transcripts grew and my experience in conducting analysis with the dataset grew, I was able to notice key parts of the transcript that I had previously dismissed as irrelevant. For example, I initially had not focussed on creating codes for how things had been before the pandemic, as it did not seem to answer my research questions. However, I later considered that it was important to highlight in order to see the stark contrast in how things were before the pandemic compared to during/now.
6. Writing up Informal reflexive journaling starts from phase 1. More formal analytic writing can begin in phase 3. The aim is to tell a "coherent and persuasive story about the dataset that addresses the research question". This should involve data extracts.	• I kept a reflexive journal throughout the process. • During phase 4 and 5, I wrote descriptions of each theme and sub-theme with related data extracts. This supported my reflections on how convincing and compelling the story of each theme and sub-theme was.

Appendix U: Phase 2 – Coding

Transcript extract *(T=Teacher/SENCo, M=Marina, **Bold**=coded extracts)*	Codes
T: Yeah, a lot is expected of them, and I suppose all those little quiet ones that are compliant and you know, just do whatever they're told and it's a bit like they're looking around as if say, "what's going on here?", but with those two, oh I remember ****, I used to give him this (lanyard) to play with and he used to sit there and fiddle with this and then, but then, if somebody else hadn't got this, you know, "you've given that to ****, but I haven't got anything", then they would start playing up. So anyway, there was one time when we said "everybody's going to assembly today apart from the two really high needs children" and those three said "well, I'm not going", and we kind of got into that situation where they had to be occupied while they weren't in assembly, and so they used to build with bricks or make something and we just got to the stage where it was, I think they thought "well, I've got to stay here and play if I don't go to assembly", so it did really get like difficult to manage and they still really haven't been to assembly, because then we haven't had assemblies since they came back in, you know, whenever it was, September 20, we weren't allowed to mix the whole school together, so, I don't know when it is they'll be going to an assembly, I think **he's coping better with change now** and **they've been on a couple of trips this half term and from what I understand, his behaviour has been good**, you know, out of school, and, oh, I went with them in the summer to Warwick Castle and he was fine, just very excited and you know. T: I mean I'm not saying like he's never involved in any sort of trouble anymore, there might be altercations on the playground and things like that, nothing too major, but certainly **within class he listens when he's supposed to listen**, he does his work when he's supposed to do his work, he just really is like any other member	He is coping better with change now. He has been on school trips and his behaviour was good. He listens in class now.

of the class, I think, just that he needs to have that little edge of responsibility so that he, like he's got little jobs that he is, you know, specifically for him and he likes to be, you know he'll be the first up if the teacher asks or "can somebody do this" and he'll be "oh, I'll do it for you Miss" and he likes that sort of responsibility. And **he's always very eager to engage in conversation, you know, if you just walk past him in the corridor, "hello, Miss ***", you know, and then like tell you a little bit of information about something, very sort of engaging child to have a, you can really have a good conversation with him** and yeah, he had really good insults, you know, when we were having to remove him in reception he would say things like I hate you, I'm telling my mum and dad of you, you're ugly, your breath smells, just like (laughing), so it would usually be me and the nursery nurse because the teacher wasn't trained in team teach, so you couldn't ask him to do the physical handling and we'd just try and do the ignoring bit until he'd calmed down. He did really struggle a lot and he was quite physical, but **once he'd calmed down then he'd like really engage in a conversation then,** it was so strange.

M: So, he's quite, would you say he's **quite articulate, quite good language skills?**

T: **Yeah, yeah, he's very, sort of, quite mature, I suppose for his age, he's quite, sort of, streetwise** as well, he knows all about cars, his dads a car dealer and he knows, oh, you know "Mr *** got a Mercedes, what car have you got?", all that kind of thing, you know.

M: OK, yeah, I mean that's just amazing, isn't it, he's just, like you said, he's just a different child, wow. Yeah, anything else to add, in terms of how different he is, like what are his strengths now that he didn't have before. I mean, there's loads here, so don't feel like you've got to try and think of something.

T: Yeah, I mean he, I think **he just didn't really get why he was in school before, you know, when he was in reception, you know, most children would sort of like, they don't like question when the teacher says you need to come and sit on the**

He is eager to engage in conversations with school staff.

In reception, he could engage in conversations after he had calmed down.

He has good language skills. He is articulate. He is mature for his age. He is streetwise.

Before COVID, he didn't understand the purpose of school. He didn't understand why he couldn't just play with toys.

carpet now, that's what they do, but he, it was like, well, you know, "why are you telling me to do that because I've got all these toys I'm going to play with, so why should I come and sit on the carpet?", I just don't think he kind of got what the purpose of him being in school was, whereas now it's just, you know, he's proud of his work and he understands that he needs, I mean we don't get any complaints about him from the teacher, she does quite often phone down about a couple of the other children, one in particular, but she's not phoning down about him for any reason, and he's quite, he's not a model student, but you know he just does what he needs to do now and we've always had good relationships with the parents, you know.

M: So, what about in terms of his academic skills, how's he getting on?

T: At this stage, they tend to sort of be working towards like where they should be still at the moment, but he's not below that, so he's just like just working towards the age-related expectation, so yeah, he's, well, I don't know, I would say he probably doesn't need to be on the special needs register anymore, just thought, he is still at the moment, just like a legacy from that year, but he isn't getting any extra intervention so I don't think we can really justify having him on the list as such.

M: No, I mean, surely you could always, if things do change, like he can come back on.

T: Oh yeah, we can just put him back on but, oh no, tell a lie, I'm just thinking we did do a referral to the early help intervention pathway, you know for ASC so that will probably get followed up at some point, they can only work with one child at the school at a time, so they've just finished with one and then I think there's somebody else next, so I think he's the next person after that, but I don't know, I really don't know about the autism traits, because sometimes you think, "oh yeah, that does sort of fit", but then other times you know, everything else, he's got really good

	Now, he is proud of his work. Now, he understands what he needs to do at school.
	School have always had a good relationship with his parents.
	He is working towards age-related expectations.
	He does not need to be on the special needs register anymore.

social relationships with his friends and with adults, you always get eye contact off him, he seems to get like things, you know, if you sort of, when you have a conversation with him, it's not like, he doesn't take things literally and he's easy to talk to, so it is really weird. The only aspect of it was some kind of, you know, just him wanting his own way, and if he couldn't have his own way, but then, was that learned behavior because of people you know, letting him do whatever he wanted to do, and then he couldn't understand "well, I'm not going to be able to do that all the time", so that was different when he came to school and that's the thing that he found hard to adjust to, I think. M: Yeah, yeah, but yeah, you don't, you just don't know do you. Sorry, you know you were saying about working towards, saying that like all of the children in his class are all like working towards... T: Yeah, yeah, so **he would be with the majority**. I mean I think there would be a few that are sort of more on track or who will reach age related before him, but he's certainly not, **he's sort of like average I would say and I wouldn't have said that when he was in reception, he missed so much teaching time,** especially read write inc... Yeah so, but him doing that one to one with that student from across the road, I think really sort of boosted him with that and you know just his letter formation and sort of reading and things, so **he came back not too far behind**. **I mean the whole class basically is at a disadvantage,** but he wasn't sort of too far behind.	He is working at an average level, when compared to his peers in his class. In reception, • he was not average compared to his peers in his class. • he missed so much teaching time. In September 2020, he came back and was not too far behind his peers. The whole class is at a disadvantage, and most are working towards age-related expectations.

Appendix V: Phase 3 – Generating initial themes

UNIVERSITY OF BIRMINGHAM

Application for Ethics Review Form

Guidance Notes:

What is the purpose of this form?

This form should be completed to seek ethics review for research projects to be undertaken by University of Birmingham staff, PGR students or visiting/emeritus researchers who will be carrying out research which will be attributed to the University.

Who should complete it?

For a staff project – the lead researcher/Principal Investigator on the project.
For a PGR student project – the student's academic supervisor, in discussion with the student.

Students undertaking undergraduate projects and taught postgraduate (PGT) students should refer to their Department/School for advice

When should it be completed?

After you have completed the University's online ethics self-assessment form (SAF), **IF** the SAF indicates that ethics review is required. You should apply in good time to ensure that you receive a favourable ethics opinion prior to the commencement of the project and it is recommended that you allow at least 60 working days for the ethics process to be completed.

How should it be submitted?

An electronic version of the completed form should be submitted to the Research Ethics Officer, at the following email address: aer-ethics@contacts.bham.ac.uk.

What should be included with it?

Copies of any relevant supporting information and participant documentation, research tools (e.g. interview topic guides, questionnaires, etc) and where appropriate a health & safety risk assessment for the project (see section 10 of this form for further information about risk assessments).

What should applicants read before submitting this form?

Before submitting, you should ensure that you have read and understood the following information and guidance and that you have taken it into account when completing your application:

- The information and guidance provided on the University's ethics webpages (https://intranet.birmingham.ac.uk/finance/accounting/Research-Support-Group/Research-Ethics/Ethical-Review-of-Research.aspx)

- The University's Code of Practice for Research (https://www.birmingham.ac.uk/Documents/university/legal/research.pdf)

- The guidance on Data Protection for researchers provided by the University's Legal Services team at https://intranet.birmingham.ac.uk/legal-services/What-we-do/Data-Protection/resources.aspx.

Section 1: Basic Project Details

Project Title: A nested case study exploring the relatively positive experiences of primary aged children during the COVID 19 pandemic.

Is this project a:

University of Birmingham Staff Research project   ☐
University of Birmingham Postgraduate Research (PGR) Student project ☒
Other (Please specify below)   ☐
Click or tap here to enter text.

Details of the Principal Investigator or Lead Supervisor (for PGR student projects):

Title: Mrs
First name: Sue
Last name: Morris

Position held: Honorary Senior Lecturer: Applied Educational and Child Psychology
School/Department School of Education

Telephone: ███████████
Email address: ██████████████████

Details of any Co-Investigators or Co-Supervisors (for PGR student projects):

Title: Dr
First name: Collette
Last name: Soan

Position held: Academic and Professional Course Tutor
School/Department School of Education

Telephone: ███████████
Email address: ██████████████

Details of the student for PGR student projects:

Title: Miss
First name: Marina
Last name: Limniotis

Course of study: Doctorate in Applied Child and Educational Psychology
Email address: ████████████████████

Project start and end dates:

Estimated start date of project: 01/02/2021
Estimated end date of project: 01/07/2022

Funding:

Sources of funding:

Section 2: Summary of Project

Describe the purpose, background rationale for the proposed project, as well as the hypotheses/research questions to be examined and expected outcomes. This description should be in everyday language that is free from jargon - please explain any technical terms or discipline-specific phrases. Please do not provide extensive academic background material or references.

Purpose:
To explore the experiences of children who have experienced some kind of positive effect or impact since the COVID 19 pandemic began in March 2020, in comparison to before the pandemic. For example:
- An aspect of their emotional wellbeing may have improved (e.g. less outbursts, more settled or relaxed…)
- An aspect of their social wellbeing may have improved (e.g. getting on with others, building relationships, a sense of belonging and connectedness)
- Their self-esteem may have improved
- Their behaviour may have improved
- Their motivation to learn may have improved (e.g. participated or engaged more fully in their education)
- They may have become more independent (e.g. in terms of their learning or self-help skills)
- Their academic skills may have improved

See Figures 2 and 3 for examples of the progress that a child may have made during 2020.
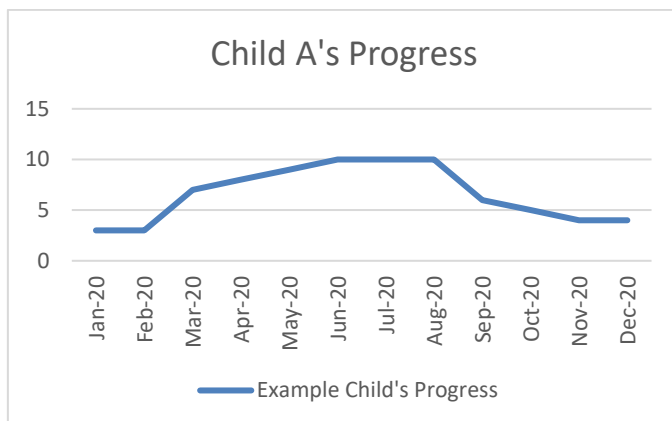
Figure 2. A graph to illustrate an example of how a child may have progressed during 2020
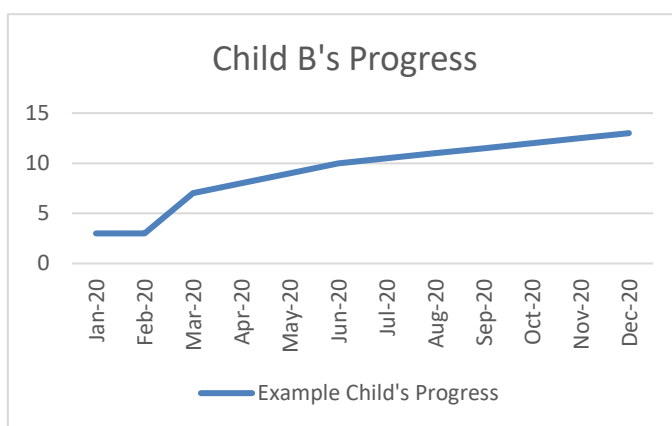
Figure 3. A graph to illustrate an example of how a child may have progressed during 2020

The views of the children, a member of their family, a member of school staff and potentially a core professional will be listened to in order to gain a range of perspectives, with the intention of triangulating their views and building a rich and detailed picture of the child's experiences. The aim is to explore what positive effects the children have experienced, what they value within their educational and home experiences and why. This will allow the consideration of potential theories as to why the children have made progress over the pandemic. It will also be interesting to make observations about any shared characteristics these children may have (e.g. the children may have Autism).

Rationale:
The COVID 19 pandemic has had a huge impact on the country and has completely changed everyone's daily lives. It is undeniable that many people have experienced significant negative effects, in particular, there have been long term school closures; see figure 1 for a timeline showing the closing and reopening of schools over the course of the pandemic to date. During my recent contact with schools and within the literature, I have noticed that there have been some cases in which children who have been judged by their parents or teachers to have experienced relatively positive effects or outcomes since the COVID 19 pandemic, for example, some have become more independent (possibly due to the home learning), some have built close relationships (possibly due to the reduced amount of children in schools), some are coping better with the school processes (possibly due to the more stringent routine). As schools are typically a 'one size fits all' model, I believe it will be interesting to explore the experiences of children who have experienced reduced expectations to fit into this model.

<u>Figure 1. A timeline to illustrate the closing and reopening of schools</u>

March 2020	June 2020	September 2020	January 2021
Schools closed to all children apart from children of key workers, and vulnerable children. Most children learnt from home with contact from their teacher.	Primary schools began to open for Nursery, Reception, years 1 and 6. Secondary schools reopened for years 10 and 12 but were advised to primarily educate pupils at home.	Schools open for all children.	Schools closed to all children apart from children of key workers, and vulnerable children.

In the current research proposal, I would like to seek out a range of children within one focus primary school who have experienced some form of positive impact since the COVID 19 pandemic, in order to explore their experiences. I believe that it would be valuable to take this opportunity to 'sift for gold' during this difficult time in order to find positive exceptions and learn what we can take forward for these children, during COVID 19 and beyond.

In terms of previous research on this area, there appears to be a vast amount of surveys that have been conducted on this topic, but a lack of qualitative, in-depth research, which seeks meaning.

<u>Research Questions:</u>
Research questions will be further refined following my more comprehensive engagement with relevant professional, policy, theoretical and research literature. A systematic review of this literature will be conducted to critique key studies relevant to the current study.

1. In what ways do children, their family and their teachers believe they have had relatively positive effects since the COVID 19 pandemic?

2. What do children, their family and their teachers believe has contributed to these relatively positive effects?

<u>Expected outcomes:</u>
This research may reveal how certain aspects of school practice or the home environment can have positive effects on children, which could offer ideas for future practice in schools, within a pandemic and beyond.

Section 3: Conduct and location of Project

Conduct of project

Please give a description of the research methodology that will be used. If more than one methodology or phase will be involved, please separate these out clearly and refer to them consistently throughout the rest of this form.

Research Design:
This research project will use a nested case-study design, with the experiences of children in one primary school being the overall case study, and each child with their family, teachers and potentially a core professional being one nested unit within the wider connected context. Each child's case will form an integral part of a broader picture and will enable me to find common and contrasting factors, in order to gain an in-depth understanding of the participants' experiences during the pandemic.

During an initial meeting, I will gather some key information about the participants, using the 'Demographic and background information sheet' (Appendix 13).

Data collection for adult participants:
Individual semi-structured interviews will take place with the adult participants (a member of the child's family, a member of school staff and potentially another professional who may have been working closely with the child). The interviews will be approximately one hour, and the participants will be asked to choose to participate in the interviews face-to-face (recorded via Dictaphone) or virtually (video recorded via Zoom). (Please see Appendix 15 and 16 for the adult interview schedules.)

Data collection for child participants:
The method of data collection for the children will be individualised to accommodate the child's social and communicative skills. Knight, Clark, Petrie, and Statham (2006) undertook a comprehensive literature review into the methods and approaches used to obtain the views of children with learning disabilities. They found that there was no single method advised, and they suggest that in order to determine which strategy would work best for the child, it would be important for the practitioner to familiarise themselves with the way the child communicates. I plan to do this via discussions with the parents/carers and teacher and by meeting the child myself prior to the interview. Some examples of potential methods are included in Appendix 17. If it seems that the child has limited communicative skills, their views could be gained by asking them to rank picture cards that I create based on the adult participants' views. Alternatively, I could ask parents/carers to answer questions from the child's perspective. The participants will be asked to choose to participate in the interviews face-to-face (recorded via Dictaphone) or virtually (video recorded via Zoom).

Pilot case study:
One initial pilot case study will take place in order to reflect and potentially adapt the interviews and process for the remaining participants. The pilot will involve the data collection from one nested unit (one child, their parent/s or carer/s, a member of school staff, and potentially another professional who has been working closely with the child).

Geographic location of project

State the geographic locations where the project and all associated fieldwork will be carried out. If the project will involve travel to areas which may be considered unsafe, either in the UK

or overseas, please ensure that the risks of this (or any other non-trivial health and safety risks associated with the research) are addressed by a documented health and safety risk assessment, as described in section 10 of this form.

The project and all associated fieldwork will be carried out in the focus primary school. However, if the participants choose to, or if there are any restrictions due to the COVID 19 pandemic, some virtual interviews may take place.

Section 4: Research Participants and Recruitment

Does the project involve human participants?

Note: 'Participation' includes both active participation (such as when participants take part in an interview) and cases where participants take part in the study without their knowledge and consent at the time (for example, in crowd behaviour research).

Yes   ☒
No   ☐

If you have answered NO please go on to Section 8 of this form. If you have answered YES please complete the rest of this section and then continue on to section 5.

Who will the participants be?

Describe the number of participants and important characteristics (such as age, gender, location, affiliation, level of fitness, intellectual ability etc.). Specify any inclusion/exclusion criteria to be used.

The study aims to recruit participants from one mainstream primary school within a medium sized City Council. The primary school will need to meet the following inclusion criteria:
- Teach year groups 1 to 6.
- Have a heterogenous sample of children who meet the inclusion criteria listed below.
- Have delivered home education throughout the COVID 19 pandemic.
- Be willing to make initial contact with parents and support the arrangement of meetings and interviews within the school.

Once the primary school has been identified, I will aim to recruit between four and six children as participants, as well as a member of their family, a member of school staff and potentially another professional who may have been working closely with them since the pandemic. The table below outlines the inclusion and exclusion criteria that will be used in order to recruit the child participants.

Inclusion Criteria	Exclusion criteria
Primary aged children who have experienced some kind of positive effect since the COVID 19 pandemic (since March 2020), in comparison to before the pandemic. For example: • An aspect of their emotional wellbeing may have improved (e.g. less outbursts, more settled or relaxed...)	Secondary aged children. Children who have only experienced negative effects since the COVID 19 pandemic (since March 2020).

• An aspect of their social wellbeing may have improved (e.g. getting on with others, building relationships, a sense of belonging and connectedness) • Their self-esteem may have improved • Their behaviour may have improved • Their motivation to learn may have improved (e.g. participated or engaged more fully in their education) • They may have become more independent (e.g. in terms of their learning or self-help skills) • Their academic skills may have improved	Children who have not experienced any particular effects since the COVID 19 pandemic.
Children who are relatively emotionally stable and whose family lives are relatively stable.	Children who are currently experiencing acute episodes of mental distress or family difficulties.
Children who have had school engagement since the COVID 19 pandemic.	Children who are no longer on the school roll and are being solely home schooled.

How will the participants be recruited?

Please state clearly how the participants will be identified, approached and recruited. Include any relationship between the investigator(s) and participant(s) (e.g. instructor-student). Please ensure that you attach a copy of any poster(s), advertisement(s) or letter(s) to be used for recruitment.

Focus school:
- As part of their routine work with schools, my Educational Psychologist (EP) colleagues will be aware of some local primary schools in which multiple students have shown a positive effect since the pandemic.
- The EPs will nominate a small number of schools that meet the criteria and are willing to participate. In order to support this process, the EP will share an information sheet with the SENCo/Headteacher (Appendix 1). I will meet with each school SENCo/Headteacher in order to discuss the research. The participating school will be selected based on their suitability against the inclusion criteria.

Children:
- The Special Educational Needs Co-ordinator (SENCo) will be asked to identify children who they believe meet the inclusion criteria.
- The SENCo will contact the parents/carers of the identified children via email, attaching an information sheet/initial consent form (Appendix 3) for the parent and an information sheet for the child (Appendix 4). A video will also be attached to the email which will involve myself presenting a PowerPoint regarding the research.
- Once the parents/carers have shared the information sheet with their child, checking for their understanding and agreement to take part, they will send their signed initial consent form to me via email.

- The parents or family members approached for recruitment will be based on the child's recommendations. I will ask the child to identify three family members who they have the closest relationship to and have supported their learning (Appendix 14).
- If a family member does not consent to participating, I will approach another family member.

School staff and any other core professional:

- The school staff and professionals approached for recruitment will be based on the child's recommendations. I will ask the child to identify three teachers or professionals who they believe they have the closest relationship with (Appendix 14).
- If someone does not consent to participating, I will approach another identified professional.

EP service nominates small number of primary schools	
Researcher meets SENCos	Researcher decides most appropriate school

SENCo identifies potential participants
Sends information to parents

Parent/s share information with their child	
Gain oral consent from child	Send signed initial consent form to researcher

Researcher contacts parent/s
Gives more information

Researcher, parent/s and child meet
Gain fully-informed written consent

Researcher contacts teacher/other professional to request participation	
Share information	Gain written consent

Figure 3. A flow chart to show the recruitment process

Section 5: Consent

What process will be used to obtain consent?

Describe the process that the investigator(s) will be using to obtain valid consent. If consent is not to be obtained explain why. If the participants are under the age of 16 it would usually be necessary to obtain parental consent and the process for this should be described in full, including whether parental consent will be opt-in or opt-out.

In order to obtain valid, freely-given, fully-informed consent, the relevant guidelines will be followed, such as the British Psychological Society (BPS, 2018), the British Educational Research Association (BERA, 2018) and The University of Birmingham Code of Practice for Research.

<u>Headteacher:</u>
- Once a suitable primary school has been selected, an information sheet and consent form will be given to the headteacher to complete (Appendix 2 and 8).

<u>Children:</u>
- Once I have received a completed initial consent form, I will contact the parents/carers to further explain the nature and purpose of the research, to clarify that the child meets the inclusion criteria, and to discuss any queries they may have regarding the research. I will then gain signed parental consent for the child to participate (Appendix 10).
- I will arrange a meeting with the child (and an accompanying adult if the child chooses) in order to introduce myself and explain the nature and purpose of the research in an individualised communication style to accommodate the child's social and communicative skills. I will also ask the child if they believe they have had a relatively positive effect since the pandemic.
- Once it seems that the child understands the purpose of the research, I will ask for voluntary participation. At this stage I will reiterate that they have the right to withdraw from the study at any time and that data will be confidential and will be stored securely. If the child indicates that they understand the information and agree to be involved in the research, I will then ask them to sign the 'Child's Consent Form' (Appendix 9).
- I will then ask the child to complete the 'Choosing Adults Activity' (Appendix 14).
- I will give the child a tailored information sheet based on their communicative competence. The 'Child's simple information sheet' (Appendix 4) and the 'Child's detailed information sheet' (Appendix 5) are examples. These will act as a reminder of the details of the research.

<u>Parents/Family members:</u>
- Once the child has completed the 'Choosing Adults Activity', I will approach a member of their family in order to provide them with information about the research (Appendix 6), answer any questions and gain written consent (Appendix 11).
- However, if they do not consent to participating, I will then approach another member of their family.

<u>School staff and any other core professional:</u>
- Once the child has completed the 'Choosing Adults Activity', I will approach a professional in order to provide them with information about the research (Appendix 7), answer any questions and gain written consent (Appendix 12).
- However, if they do not consent to participating, I will then approach another professional.
- If the child has chosen a professional who is not a member of school staff, I will approach them in addition to a member of school staff.

<u>Interviews:</u>
At the beginning of each individual interview, I will talk through the information sheet, (Appendices 4, 5, 6, 7) which will include information about the study, the study's aims, and what participants will be asked to do. There will be an opportunity for participants to ask questions. Once all questions have been answered and participants agree that they understand all of the information provided, they will be asked to confirm orally that they still consent to participating.

Please be aware that if the project involves over 16s who lack capacity to consent, separate approval will be required from the Health Research Authority (HRA) in line with the Mental Capacity Act.

Please attach a copy of the Participant Information Sheet (if applicable), the Consent Form (if applicable), the content of any telephone script (if applicable) and any other material that will be used in the consent process.

Appendix Number	Appendix Title	Page
Appendix 4	Request for participants/child's simple information sheet	24
Appendix 5	Child's detailed information sheet	25
Appendix 6	Parent/family's information sheet	27
Appendix 7	Professional's information sheet	29
Appendix 8	Headteacher's consent form	31
Appendix 9	Child's consent form	32
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Note: Guidance from Legal Services on wording relating to the Data Protection Act 2018 can be accessed at https://intranet.birmingham.ac.uk/legal-services/What-we-do/Data-Protection/resources.aspx.

Use of deception?

Will the participants be deceived in any way about the purpose of the study?

Yes ☐
No ☒

If yes, please describe the nature and extent of the deception involved. Include how and when the deception will be revealed, and the nature of any explanation/debrief will be provided to the participants after the study has taken place.

N/A

Section 6: Participant compensation, withdrawal and feedback to participants

What, if any, feedback will be provided to participants?

Explain any feedback/ information that will be provided to the participants after participation in the research (e.g. a more complete description of the purpose of the research, or access to the results of the research).

I will hold a meeting for each nested case study in order to feedback a summary of what was found from the overall case study analysis, and I will explain how their information will be

shared. Children will also be given the opportunity to ask any questions they have so they are fully informed about all aspects of the research.

A brief information session and summary record will be offered to the focus school and Leabury* Educational Psychology service in order to share the results of the study and consider implications for future practice.

N.B. * *Leabury is a pseudonym for the medium-sized city in the Midlands in which the research will take place.*

What arrangements will be in place for participant withdrawal?

Describe how the participants will be informed of their right to withdraw from the project, explain any consequences for the participant of withdrawing from the study and indicate what will be done with the participant's data if they withdraw.

Participants will be able to withdraw from the project which will be stated in the information sheet and consent forms. Participants will be reminded of this at the beginning of each interview. Participants will be given my contact details (my phone number and student email address) to use if they wish to withdraw from the study. There will be no consequences for the participant if they withdraw from the study and all their data will be immediately destroyed.

Please confirm the specific date/timescale to be used as the deadline for participant withdrawal and ensure that this is consistently stated across all participant documentation. This is considered preferable to allowing participants to 'withdraw at any time' as presumably there will be a point beyond which it will not be possible to remove their data from the study (e.g. because analysis has started, the findings have been published, etc).

Participants will be free to withdraw from the project before, during, or up to two weeks after their interview takes place. After this time data analysis and synthesis will be in progress and I will be unable to withdraw their data.

What arrangements will be in place for participant compensation?

Will participants receive compensation for participation?

Yes ☐
No ☒

If yes, please provide further information about the nature and value of any compensation and clarify whether it will be financial or non-financial.

N/A

If participants choose to withdraw, how will you deal with compensation?

Click or tap here to enter text.

Section 7: Confidentiality/anonymity

Will the identity of the participants be known to the researcher?

Will participants be truly anonymous (i.e. their identity will not be known to the researcher)?

Yes   ☐
No   ☒

In what format will data be stored?

Will participants' data be stored in identifiable format, or will it be anonymised or pseudo-anonymised (i.e. an assigned ID code or number will be used instead of the participant's name and a key will kept allowing the researcher to identify a participant's data)?

As the study involves face-to-face interviews, true anonymity cannot be offered to participants.
In order to ensure that participants are aware of this, the method of data collection will be explicitly described in the information sheet.

The greatest care will be taken to ensure that the identity of no participant could be ascertained from reading the thesis. Participants' names, schools, staff, pupils etc will not be used and that any other identifying information will be removed from all interview transcripts. Pseudonyms will be used to aid readability and some information about the participants (e.g. their age, their educational needs) and the school they attend (e.g. number of classes per year group) will be gathered and included to provide contextual and background information. Quotes from interview transcripts will be included in the final write-up of the research project, and participants will be made aware of this.

If a disclosure was made regarding a potential risk of harm to the participants or others, or regarding illegal activity, the confidentiality agreement may need to be broken in order to follow safeguarding procedures. This will be stated in the information sheet along with links to school and local authority policy and regulations.

Will participants' data be treated as confidential?

Will participants' data be treated as confidential (i.e. they will not be identified in any outputs from the study and their identity will not be disclosed to any third party)?

Yes   ☒
No   ☐

If you have answered no to the question above, meaning that participants' data will not be treated as confidential (i.e. their data and/or identities may be revealed in the research outputs or otherwise to third parties), please provide further information and justification for this:

N/A

Section 8: Storage, access and disposal of data

How and where will the data (both paper and electronic) be stored, what arrangements will be in place to keep it secure and who will have access to it?

Please note that for long-term storage, data should usually be held on a secure University of Birmingham IT system, for example BEAR (see
https://intranet.birmingham.ac.uk/it/teams/infrastructure/research/bear/index.aspx).

The audio-recorded data and the videos of the Zoom call will be saved onto my personal laptop and will be password-protected; they will be deleted once the transcripts have been created.

The transcripts will be recorded into a word document which will be password protected. It will be saved onto my personal laptop which is also password protected. Each transcript will be labelled with a code (pseudonym) that only I will know. A record of which code applies to which participant will be stored separately from the data in a password-protected file on the UoB BEAR DataShare to ensure that data is stored securely and can be withdrawn on request. The data is therefore confidential but not anonymous. Once the point of withdrawal passes, I will delete the document.

Data retention and disposal

The University usually requires data to be held for a minimum of 10 years to allow for verification. Will you retain your data for at least 10 years?

Yes   ☒
No   ☐

If data will be held for less than 10 years, please provide further justification:

N/A

What arrangements will be in place for the secure disposal of data?

In accordance with university research policy, data will be stored on BEAR DataShare for 10 years after completion of the project. A 10-year expiry date will be set for the electronic data stored on BEAR DataShare.

Section 9: Other approvals required

Are you aware of any other national or local approvals required to carry out this research?

E.g. clearance from the Disclosure and Barring Service (DBS), Local Authority approval for work involving Social Care, local ethics/governance approvals if the work will be carried out overseas, or approval from NOMS or HMPPS for work involving police or prisons? If so, please provide further details:

I already hold enhanced Disclosure and Barring Service (DBS) clearance.

For projects involving NHS staff, is approval from the Health Research Authority (HRA) needed in addition to University ethics approval?

Yes ☐
No ☒

Please include a print out of the HRA decision tool outcome with your application.

Section 10: Risks and benefits/significance

Benefits/significance of the research

Outline the potential significance and/or benefits of the research

- As the research will be conducted solely in one school, the analysis will take into account the school's ethos, culture and practices, and therefore the findings will be highly relevant and useful for the consideration of future practice in the focus school.
- The in-depth analysis of the case studies will allow a deep understanding of the shared perspectives and individual differences among participants. This will enable the identification of key themes around school practice that has been beneficial during the pandemic.
- A great opportunity for children to learn research skills.
- Gives children, their parents and their teachers an opportunity to share their positive experiences during the pandemic.
- Case studies offer unique information.
- Not a great deal of previous qualitative research in this area.

Risks of the research

Outline any potential risks (including risks to research staff, research participants, other individuals not involved in the research, the environment and/or society and the measures that will be taken to minimise any risks and the procedures to be adopted in the event of mishap.) ***Please ensure that you include any risks relating to overseas travel and working in overseas locations as part of the study, particularly if the work will involve travel to/working in areas considered unsafe and/or subject to travel warnings from the Foreign and Commonwealth Office (see*** https://www.gov.uk/foreign-travel-advice)***. Please also be aware that the University insurer, UMAL, offers access to RiskMonitor Traveller, a service which provides 24/7/365 security advice for all travellers and you are advised to make use of this service (see https://umal.co.uk/travel/pre-travel-advice/).***

The outlining of the risks in this section does not circumvent the need to carry out and document a detailed Health and Safety risk assessment where appropriate – see below.

The British Psychological Society (2018) and British Educational Research Association (2018) ethical guidelines were consulted when taking into consideration potential risks to the

researcher, research participants and other individuals not involved in the research. See table 1 for the potential risks with the measures that will be taken to minimise these risks.

University Health & Safety (H&S) risk assessment

For projects of more than minimal H&S risk it is essential that a H&S risk assessment is carried out and signed off in accordance with the process in place within your School/College and you must <u>provide a copy of this with your application</u>. The risk may be non-trivial because of travel to, or working in, a potentially unsafe location, or because of the nature of research that will carried out there. It could also involve (irrespective of location) H&S risks to research participants, or other individuals not involved directly in the research. Further information about the risk assessment process for research can be found at https://intranet.birmingham.ac.uk/hr/wellbeing/worksafe/policy/Research-Risk-Assessment-and-Mitigation-Plans-RAMPs.aspx.

Please note that travel to (or through) 'FCO Red zones' requires approval by the University's Research Travel Approval Panel, and will only be approved in exceptional circumstances where sufficient mitigation of risk can be demonstrated.

Section 11: Any other issues

Does the research raise any ethical issues not dealt with elsewhere in this form?

If yes, please provide further information:

N/A

Do you wish to provide any other information about this research not already provided, or to seek the opinion of the Ethics Committee on any particular issue?

If yes, please provide further information:

N/A

Table 1. A table to outline a risk assessment of the research

Risk	Risk level	Mitigation	Residual risk
Physical harm to the **researcher**	Low	Interviews will be conducted in the school setting, with other professionals in the vicinity.	Minimal
Emotional and psychological harm to the **researcher**, which could be evoked by the emotive nature of some of the areas of discussion.	Low	Regular supervision will be used to reflect on and consider the impact of the research.	Minimal
Emotional and psychological harm to the **participants,** which could be evoked by the emotive nature of some of the areas of discussion.	Low	- Researcher will ask participants to focus on positive experiences. - Researcher will adopt a sensitive, respectful, empathetic and attuned manner toward participants, in line with the therapeutic and counselling skills training received as part of the doctoral course. - Researcher will be vigilant and sensitive to any apparent changes in body language or mood, and will offer a break, continuing with the session at another time or withdrawing from the research entirely if the participant appears to be distressed. - If the child's interview is via Zoom, an adult will be asked to be in the same room as the child in order to observe their changes in body language or mood. - Researcher will offer a debrief to participants: - Listen to any concerns they have, using empathy and my knowledge of SEN procedures and processes. - Ask if they would like their concerns passed to relevant professionals. - Signpost to support within school or relevant agencies, e.g. parent advocacy group. - For a participant who is a child, mediate contact with a trusted adult. - Allow time to ask questions. - All participants will be provided with contact details of the researcher and university research supervisor, should they wish to ask questions or make any complaint.	Minimal
Someone may access the Zoom video call and this would breach	Low	An ID and password will be required to access the video call and the researcher will be the host who has control over who can attend the meeting.	Minimal

confidentiality for the **participants.**			
Interviews could gather information that could identify the school and may present the school or local authority in a negative light.	Low	The researcher will ensure any identifiable information is excluded from the final report, so the school remains anonymous. If information is provided which may present a risk to organisational reputation, advice will be sought through research supervision regarding the inclusion and communication of this data.	Minimal

Section 12: Peer review

Has your project received scientific peer review?

Yes ☐
No ☒

If yes, please provide further details about the source of the review (e.g. independent peer review as part of the funding process or peer review from supervisors for PGR student projects):

N/A

Section 13: Nominate an expert reviewer

For certain types of project, including those of an interventional nature or those involving significant risks, it may be helpful (and you may be asked) to nominate an expert reviewer for your project. If you anticipate that this may apply to your work and you would like to nominate an expert reviewer at this stage, please provide details below.

Title: Click or tap here to enter text.
First name: Click or tap here to enter text.
Last name: Click or tap here to enter text.
Email address: Click or tap here to enter text.
Phone number: Click or tap here to enter text.

Brief explanation of reasons for nominating and/or nominee's suitability:

Click or tap here to enter text.

Section 14: Document checklist

Please check that the following documents, where applicable, are attached to your application:

Recruitment advertisement ☒
Participant information sheet ☒
Consent form ☒
Questionnaire ☐
Interview/focus group topic guide ☒

Please proof-read study documentation and ensure that it is appropriate for the intended audience before submission.

Section 15: Applicant declaration

Please read the statements below and tick the boxes to indicate your agreement:

I submit this application on the basis that the information it contains is confidential and will be used by the University of Birmingham for the purposes of ethical review and monitoring of the research project described herein, and to satisfy reporting requirements to regulatory bodies. The information will not be used for any other purpose without my prior consent. ☒

The information in this form together with any accompanying information is complete and correct to the best of my knowledge and belief and I take full responsibility for it. ☒

I undertake to abide by University Code of Practice for Research (https://www.birmingham.ac.uk/Documents/university/legal/research.pdf) alongside any other relevant professional bodies' codes of conduct and/or ethical guidelines. ☒

I will report any changes affecting the ethical aspects of the project to the University of Birmingham Research Ethics Officer. ☒

I will report any adverse or unforeseen events which occur to the relevant Ethics Committee via the University of Birmingham Research Ethics Officer. ☒

Please now save your completed form and email a copy to the Research Ethics Officer, at aer-ethics@contacts.bham.ac.uk. As noted above, please do not submit a paper copy.

Appendix X: Detailed findings – An explanation of each theme and sub-theme within each case study

Nested case 1: Jake

Research Question 1: Positive effects since the COVID 19 pandemic

Theme 1: School is rewarding/fulfilling

All participants shared how positive his current experience of school is. Their shared views led to the generation of the theme that he has found school rewarding and fulfilling since returning to school following the first school closure. He has been in a positive cycle of engaging with adult-led learning, realising that he could learn, achieve and progress; enabling him to be proud of his achievements, have a sense of satisfaction and fulfilment, and he has therefore felt positive and excited about school, motivating him to engage in more adult-led learning.

Proactively engaging with adult-led learning

Jake's school SENCo shared that before the pandemic, Jake did not engage with much adult-led learning and was on a part-time timetable. Since he returned to school after the first school closure, he has been proactively involved and engaged with adult-led learning; he listens and answers questions. Similarly, his mother has found that Jake did not previously engage with learning at home but is now willing to.

School SENCo:	*Before the pandemic:* *I mean, he just never even got to the point where he was in a position to be receptive to learning, you know, he never settled on the carpet even.*
School SENCo:	*Since the first school closure:* *He'd be sitting there like doing his work, not protesting about having to do the lesson, and I was just sort of saying to (class teacher), (laughing) "what have you done?", "what have you done to Jake, he's doing what he's supposed to be doing", and she went "no, he's fine".* *Certainly, within class he listens when he's supposed to listen, he does his work when he's supposed to do his work, he just really is like any other member of the class.* *Jake is right at the front and he's kind of in that like "miss I'll do that for you, miss I want to answer that", you know, he's very involved in the lesson, very proactively involved.*
Mother:	*He'll sit down now even at home and do his schoolwork, homework, he'll do the reading, which are things that he never used to do.*

Progressing with learning

Jake's school SENCo shared that before COVID, Jake was working at a 'below average' level compared to his peers. Jake's learning ability has improved, and he is now working at an 'average' level compared to his peers and no longer needs to be on the SEN register. Jake's mother also shared how his writing has improved.

School SENCo:	*So he would be with the majority. I mean I think there would be a few that are sort of more on track or who will reach age related before him, but he's certainly not, he's sort of like average I would say and I wouldn't have said that when he was in reception.*
School SENCo:	*I would say he probably doesn't need to be on the special needs register anymore, just thought.*

Proud of achievements

Jake and his school SENCo recognised how he is now proud of his learning achievements and enjoys showing his Headteacher and SENCo and receiving stickers and trophies.

Marina:	*How about the work that you do at school? All your schoolwork …. are you proud of it? Are there some parts of your work that you like showing people and saying "look, this is what I can do"?*
Jake:	*Yes, one time, this one time in year 1, I was so happy, it's because in my book I did good learning and Mr **** (Head teacher) gave me a sticker and put my sticker in a book and then he got a trophy and he put it in year one.*
Marina:	*Wow, what did you get the trophy for?*
Jake:	*It's because of like the sounds, I was reading them and then he was proud.*
School SENCo:	*Oh, he's really proud, yeah, 10 I would say, he's so happy to show off what he's been doing and get a head teacher sticker.*

Positive outlook on school

Jake's positive outlook on school is a shared sub-theme identified by all participants. Jake shared how before COVID, he often felt sad, confused, and scared at school, as he did not know anyone, and he did not like getting sent home early. Jake shared that he now likes learning, he sometimes feels really excited to attend school, and understands that the purpose of school is to learn. Jake's school SENCo shared that before COVID, Jake did not seem to understand why he was in school and why he could not simply play with toys all day. It seems that Jake's expectations of school and school staff's expectations of Jake were conflicting and creating friction, causing Jake to feel difficult emotions and act in socially inappropriate ways. Since Jake returned to school after the

first school closure, he seems to understand the purpose of school and what is expected of him, and he is proud of his work. This indicates that Jake's and school staff's expectations became aligned and Jake's experiences within school were therefore more positive. Jake's mother also shared that he is now excited and looking forward to going to school.

Marina:	So I was wondering if we could have a look at this chart with all the smiley faces on, and you could tell me what number it was when you were in reception.
Jake:	Number zero
Marina:	Number zero, OK.
Jake:	I was always crying.
Marina:	You were always crying?
Jake:	Yes

Jake:	Because one time, I throwed something and I got sent home early.
Marina:	You threw something?
Jake:	Yes, and I got sent home early.
Marina:	So, what was it like then? What did you think of school? How did you feel about school?
Jake:	I felt, not that nice.
Marina:	Not that nice?
Jake:	I get sad and sometimes I don't like it and sometimes I don't like getting sent home.
Marina:	So, you didn't like getting sent home? You threw something?
Jake:	Yes, and then it nearly hit my friend.
Marina:	Nearly hit your friend?
Jake:	Yes, I was riding on a bike, and it nearly hit him and then two teachers came in and grabbed me, Miss **** and someone else.
Marina:	How did you feel?
Jake:	I felt, I was just saying, "what did I do? What did I do?"
Marina:	Aww, did you say "what did I do" because you did not understand what you did? Or was it because you…?
Jake:	I didn't understand what I did.

Marina:	What about your lessons? Do you like learning in your lessons?
Jake:	Yes
Marina:	And do you feel excited to come to school?
Jake:	Sometimes
Marina:	So sometimes, you feel really, really excited to come to school?
Jake:	Yes

Marina:	So you feel really, really excited to come to school now, what about when you're in reception? How did you feel about coming to school?
Jake:	Scared
Marina:	Scared to come to school? So you didn't feel excited at all? So where were you on this on these pictures? (J pointing) Which one? The number one?
Jake:	This ones confused, I'm confused and scared, so I don't know where scared is though.
Marina:	I think scared is definitely down here, so I'll put Reception, scared. So can I ask you what made you feel scared?
Jake:	All of those people that I didn't know. People I didn't know.
Marina:	The people you didn't know?
Jake:	Yeah
Marina:	Ah, who was that then? Your teachers or the children, or both?
Jake:	Both

Mother:	Yeah, when the school closed for the summer holidays, that as well helped, it helped because when they open, he was excited to come to school, yeah.
Mother:	I remember when there was a time he was not well, we thought he had COVID, he had temperature and all that, they had to send him, and he was like, "oh, I want to go back, I want to go, but I don't want to be here now, I want to go back, when am I going to school?". He would wake up in the morning, "mummy am I going to school today?" and I'll be like "no, because we're still waiting for the results, so no, you can't go", "mummy, am I going today? Mummy am I going today? I miss my friend, I miss my friends", yeah so he is more like looking forward to go to school now than before.
School SENCo:	I just don't think he kind of got what the purpose of him being in school was, whereas now it's just, you know, he's proud of his work and he understands that he needs… Not a clue when he was in reception. He just thought he was here to ride around on the bike all day.

Theme 2: Developed positive relationships

All participants recognised that Jake has developed positive relationships.

<u>Developed positive relationship with teacher</u>

Jake and his school SENCo recognise that Jake really likes his teacher and enjoys helping her. Jake's school SENCo shared that Jake enjoys sitting at the front of the classroom as he likes to be near her.

Marina:	And how about your teacher? Do you like your teacher?

Jake:	Yes
Marina:	What's she like?
Jake:	Nice
Marina:	Do you help her sometimes? With jobs?
Jake:	I am going to help her do a job.
Marina:	Are you? Do you like helping her?
Jake:	Yeah
Marina:	What job are you going to help her do?
Jake:	I'm sharpening pencils.

Marina:	How about how much you like your teachers? So if we think about now, how much do you like your teachers? Which smiley face? That one? (pointed to 10)

School SENCo:	He said to me the other day that he really liked sitting at the front because he liked being close to miss so, and I said, "oh, you like Miss ***", "oh yeah, I do, I really like her and I like being next to her or near her", it's like he sort of needs to have that really close relationship with his teacher, I think.

<u>Developed positive peer relationships</u>

Jake's mother shared that since Jake returned to school after the first school closure, he has made friends at school; he talks about them at home, misses them when he is absent from school due to being unwell and he has sleepovers with them. Jake is now more understanding of other children's feelings, and is able to share, indicating that he may have developed his theory of mind.

Mother:	He understands about other children's feelings now as well.
Marina:	So, how does he show you that? How do you know he understands other children's feelings? Does he share more?
Mother:	He shares, yeah, we always have sleepovers in my house, some children coming, he can share, he looks after them, he acts like a big brother sort of.
Mother:	He made friends because at least now he will talk about so and so and so and so and so and so at home.

Theme 3: Developed self-regulation skills

Jake's mother and the school SENCo highlighted that over the course of the pandemic, Jake's self-regulation skills developed. Before COVID, Jake regularly became emotionally dysregulated when school staff put in demands and boundaries, and when there were changes in his routine. He screamed and shouted, crawled under the teacher's desk, and threw toys. School staff struggled to manage Jake's behaviour and he had a risk assessment in place as his behaviour was dangerous.

He was removed from the classroom many times and had some fixed term exclusions. Jake's school SENCo highlighted how, prior to the pandemic, Jake's parents also struggled to manage his behaviour at home.

Since he returned to school after the first school closure, Jake has been "like a different child". He is now more able to self-regulate when adults put in demands and boundaries and is able to cope with change. At home, he is calmer and goes to his room to self-regulate when he feels upset. He has also been more helpful to others; being eager to help his teacher by doing jobs for her and helping his parents with housework.

School SENCo:	*You would not be able to teach the rest of the children once he'd started trying to distract and disrupt and you know he would be crawling under the teachers desk, he'd be shouting, if you've asked him to stop or told him off, he would start crying really loudly so you couldn't talk, he wrecked the whole classroom and the outdoor area several times like just grabbing everything he could grab and throw it and at people as well, you know, we'd never had a child like him, we just didn't know what hit us, really.* *When he came back here (after the first school closure), he just didn't do that anymore, it was like it was a different child.*

School SENCo:	*Yeah, he is, because like things are still will not be going his way or he's being required to do something that it's probably not his first choice to do, but he is able to cope with it now and so it just seemed like before he just wasn't able to do anything or he emotionally wasn't able to cope with being asked to do anything that was not, you know, on his agenda. It's like, "well, I want to play with the cars so".*
School SENCo:	*I think he's coping better with change now and they've been on a couple of trips this half term and from what I understand, his behaviour has been good.*
School SENCo:	*I think he would be OK now, I think he would just sort of, not question going to assembly now.*

Mother:	*He's more calm. He's more understanding, even when you tell him no, now he understands what no means, which is something that he never used to do, he wouldn't take someone saying no. Yeah, so he do understand now. He understands when you say let's sit down and do homework, yeah, he sits down and do homework. He used to scream and shout and do all those things but he's more...*
Marina:	*Yes, it's like he can, like regulate himself now (yeah, yeah), he's not kind of really like heightened emotions (no, no) like all the time, like he's calmed down, he's able to rein it in (yeah, yeah) and yeah.*

Mother:	Yeah, he knows how to go upstairs to his room if he's feeling upset and all that instead of kicking everything and screaming, so he is more calmer than he was

Mother:	He does help to wash dishes at times, even though he mess everywhere but he helps. He does help to hoover his room, yeah, but he has to be in a good mood, like I told you that sometimes he's in a good mood, sometimes he's not.

Research Question 2: Factors that may have contributed to the positive effects

Theme 1: Breaks from school

Jake's mother shared that during the school closure and the summer holidays, Jake was bored and isolated from other children and was therefore excited to return to school to play with other children and he wanted to show school staff his learning achievements. The break seemed to highlight the unfavourable impact of the absence of school for Jake and therefore increased his appreciation of school.

Mother:	No, I think the break on its own because he is the only child in our house so it can be like a week without him playing with anyone, just us. So, him being away and having to come back (to school), it's more exciting to him because he's going to have more children now than being at home on his own.
Mother:	Because, with him staying at home for that long and having to come back, I think it was positive because, like I'm saying, at least it opened his mind, that I don't want to be sitting at home like 24/7, I want to go out there, you know, and with the lady, the girl who was helping him to write, at least now coming to school, I'm sure he wanted to show the Head Teacher that "I can write", show Miss *** that I can do this, you know.

Theme 2: Structure and boundaries

Jake's school SENCo indicated how the introduction of more structure and boundaries at school and at home seemed to support Jake in his ability to self-regulate his behaviour and cope with adult's demands.

Structured and adult-led learning environment

Jake's school SENCo shared how, prior to attending the school's reception class, Jake attended a private nursery which involved mainly child-led play and a minimal structure. Here, he was able to choose his activities and be in charge. From Jake's comments about his experiences of reception, it seems like he wanted to attend school to play on his own terms and began to find

school boring when he was asked to do schoolwork. Equally, based on the school SENCo's comments about Jake's presentation when he was in reception ("he emotionally wasn't able to cope with being asked to do anything that was not, you know, on his agenda"), it seems that Jake found it hard to adjust to the balance of child-led and adult-led learning in reception.

In contrast, Jake's school SENCo shared that when Jake began year 1 after the first school closure, he was more able to cope when adults put in demands and boundaries and with change. She wondered whether he responded better to the fully structured and adult-led learning environment. Another facilitating factor that she highlighted was having a less exciting classroom without toys.

School SENCo:	*The only aspect of it (his presentation that indicated that he may have ASC) was some kind of, you know, just him wanting his own way, and if he couldn't have his own way, but then, was that learned behaviour because of people you know, letting him do whatever he wanted to do, and then he couldn't understand "well, I'm not going to be able to do that all the time", so that was different when he came to school and that's the thing that he found hard to adjust to, I think.*
Jake:	*In reception:* *I just wanted to play by myself only.* *That's when I started not liking school because it gets boring when you do schoolwork.*

School SENCo:	*I don't know whether he responded better to being in a like a formal teaching situation rather than the informal reception situation because the parents were always saying things like, that in his nursery, so he didn't come to our nursery, he went to a private nursery, and he was the eldest one there and he, because he'd been there so long, you know, since he was about one, I think, he was kind of in charge and like you know if he wanted to do something then he would just do what he wanted to do. It's not the same, I don't think, at a private setting, as it is in our school nursery that we have quite a fixed routine and so we could see in his books, 'cause his parents showed us his learning journals and then so the nursery nurse had written something like, "oh I asked Jake to come and do a jigsaw with me, he said no, so I went to him and we did this sticking activity together", so it was kind of, it was really on his terms a lot and they didn't do that enforcing "right, we're all going to sit down now and do this". It was very much I think, yeah, just child led learning really, which is lovely, and we kind of have a balance of that in our nursery, but there is that, you know, quite structured routine of like "well, now it's teaching, adult led teaching time, or now it's group time, or now it's snack time", and everybody is expected to do what, you know, follow the rules.*

Marina:	It's funny isn't it, how it's like he didn't do well with the middle, it's like he either wants to be able to do what he wants, or, have a very structured day where he doesn't get much say at all so.
School SENCo:	Yeah, that does seem to be the case.

School SENCo:	I think he would be OK now; I think he would just sort of, not question going to assembly now. I mean there'd be nothing exciting to do in the classroom now that he's not got all the reception toys so I can't, I mean, obviously I can't say for sure, but I can't see that being a problem for him now.

Routines and boundaries at home

Jake's school SENCo highlighted how, prior to the pandemic, Jake's parents struggled to manage his behaviour at home, and he seemed to have a lack of routines and boundaries. For example, if Jake woke up in the night, he got in his parent's bed, and his parents would often allow Jake to be self-directed, such as helping himself to food.

During the pandemic, his parents engaged with an Early Help plan, which focussed on routines, structure, and boundaries, such as eating as a family, having a consistent bedtime, and returning him to his own bed if he got up in the night. This approach seemed to improve Jake's behaviour.

School SENCo:	(Parents) did say things like, "so if we go to a supermarket and then he might start having a meltdown, we have to just leave the trolley and take him out of the supermarket", or they'd put locks on the kitchen cupboards because he would just go in and help himself and, you know, they needed to have some control so we did start to understand that there was things at home, but they really got on board with this early help plan and they sort of put in place the suggestions from the school nurse and from the early help coordinator and things did really start to improve.
School SENCo:	They (parents) put into place the strategies that the early help plan was recommending and so like there was a lot of things about routines, like he would not sleep or wouldn't stay in his own bed and eating as well, you know he's just very fussy, but it turns out they would, like I said before, they were not eating as a family, so they were just like making him something and then putting it down, I think he had, from what I remember, like a little low table, a child sized table and he was just sitting there eating it by himself and it was about them sort of starting to do things together and have a family meal and bedtime routines were talked about so that he went to bed at a reasonable time and you know, if he woke up in the night he was returned to his bed and things like that 'cause they were saying that he would just get out of his bed and go and get in with them and things so

	it's about establishing, "right? OK, you've woken up, we're still here, but you've got to go back to your own bed", and things like that. *There's the right thing to do and then there's the easy thing to do, and you sometimes you know what the right thing is, but you're just so tired that you're not functioning properly, and you just think, "oh, just leave it this once" but it does lead to inconsistencies and then him not being sure of what the boundaries are.*
School SENCo:	*He'll sort of like want things his own way, and a lot of the time, I think parents were giving into that because it was, but I guess it was easier you know. But then at school, he just, because he just couldn't do that, he would tend to have like real big meltdowns.*

Theme 3: More adult attention

All participants highlighted how Jake has received more adult attention since the start of the pandemic and how this has been a facilitating factor for his positive outcomes. For example, he has had more quality time with his family, and been supported in school, and by an adult within the community.

<u>More quality time with family</u>

Jake's school SENCo shared how his parents (particularly his mother), spent more quality time with Jake, and gave him more attention, which seemed to help improve Jake's behaviour (his ability to cope with demands placed on him). This occurred due to his mother stopping work at the start of the pandemic as she was worried about COVID, and part of the Early Help plan being around spending more time together as a family, doing activities such as having family meals together. It could be that the parents had more time at home with Jake to reinforce these actions from the plan.

School SENCo:	*I think the main difference was that mum stopped her job, that was the main, and she was there for him and he had that attention, I guess, that he was seeking.*
School SENCo:	*I think he had a lot more quality time with his, I don't know if it was both parents, but definitely his mum, 'cause she was working in care and she told me she'd packed up her job because she was so worried about COVID at the time and so he was having a lot more attention from his mum than he had been having because what she was working night shifts so he'd get home from school, and then she'd only be there for a short time and then she'd go to work and then when she came back in the morning he would be coming off to school and she would want to go to bed really so his dad did quite a bit of the caring and you know, picking up and dropping off and we did really feel that when she stopped the job, it improved, his behaviour improved.*

School SENCo:	(He was getting) a lot of quality time with mum that he hadn't been getting before that.
School SENCo:	But I think, you know, having that change of approach that you know he wasn't just occupied, you know, they were physically spending time with him and doing activities together and yeah, they increased attention as well.

School SENCo:	Yeah, yeah. I mean, I think the early help plan, like working with the, you know, the hub, the early help lead was good. I mean, that, we would have done that pandemic or no pandemic really, I guess, but.
Marina:	But I guess they were at home more to be able to...
School SENCo:	Yeah, to reinforce the actions, yeah.

Supported with learning by adult within community

All participants recognised how during the first school closure, Jake accessed one-to-one tuition from one of his neighbours. Jake's mother and school SENCo shared how helpful this was in boosting his reading and writing skills and Jake's mother highlighted how motivated he was to share these achievements with school staff. Since then, his neighbour has continued to support Jake with his homework.

Mother:	Oh, another thing I forgot to tell you, with the first lock down, our neighbours opposite, there's a girl there who's in her 20s, they like him so much, so what I decided, because there was no school, nothing, I decided for her to help him do some schoolwork with the writing with the reading with what not. So, I remember when Mrs *** came to drop some books, I showed her the things that he was doing which was so helpful. So, he was starting to write his name, he was starting to write his name with the lady, with the girl, and even on the street, they had crayons and things that you don't just write on the streets. Yeah, yeah, so it did help in a way.
Mother:	… and with the lady, the girl who was helping him to write, at least now coming to school, I'm sure he wanted to show the Head Teacher that "I can write", show Miss *** that I can do this, you know.
School SENCo:	He, they (the family) formed a relationship with, I don't know who she was, but, a neighbour, who, I think she was a student, and, whether or not it was an official arrangement, like as in they paid her or not, I don't know, but he was going over there and having some one-to-one tuition with this lady, just like really basic skills, letter formation and you know, reading and writing, and so he was getting one-to-one tuition, you know.

School SENCo:	Yeah so, but him doing that one to one with that student from across the road, I think really sort of boosted him with that and you know just his letter formation and sort of reading and things, so he came back not too far behind.

Marina:	And Jake, do you have a neighbour, or did you have a neighbour before who helped you do your schoolwork?
Jake:	No. Oh yes, I did!
Marina:	So, what did they help you with?
Jake:	The girl that makes that spider look real, that's the girl that helps me do the homework, and she's a teacher too.

Marina:	And does he still see the neighbour?
Mother:	Yeah, yeah, yeah.
Marina:	But they don't do tutoring necessarily?
Mother:	They do, they still do (…) sometimes with the homework, he goes there to them, and they help with the homework, they still do, yeah.

More attention from school staff

Jake's mother and school SENCo recognised how Jake would have benefitted from attending school during the second school closure, when there were smaller class sizes, as he gained more attention from school staff. Jake's mother shared how Jake used to say, "it's nice at school because there's just a few of us now".

Marina:	How about when he was in school during the school closures, when there were small amounts of children in, do you think some of that was helpful for him, having a smaller group?
Mother:	Yeah, I think it was, I think it was, having a small group. He used to say, "it's nice at school because there's just a few of us now" and I think he was getting more attention because there's few of them. Yeah, so he was getting more attention, yeah.

School SENCo:	Yeah, oh, and I mean, I suppose because when he had the second lock down, he did come in for that one and it was probably about half a class so he would have benefited from that, I guess, the teaching, he had a good relationship with that teacher as well.

Theme 4: School staff building meaningful relationships with child

All participants indicated that school staff invested time and energy into building meaningful relationships with Jake, by understanding and adapting to his needs and recognising his achievements.

School staff being invested (unconditional positive regard?)

Jake's mother shared how the school staff have played a big role in supporting his progress, as they were very patient and supportive when Jake was presenting with challenging behaviour, indicating that school staff were invested and demonstrated unconditional positive regard towards Jake.

Mother:	*To be honest, I think the school as well, the school have played a very very big role on him, yeah, they have, they've been so patient with him, I'm telling you, if it was me, I would have kicked him out of school with the things that he was doing, with the stuff that he was doing, yeah, they've been so patient, they've been, yeah, they've been very good, they've been very supportive.*

Understanding and adapting to child's needs

Jake's school SENCo recognised how, since Jake returned to school following the first school closure, school staff have understood and adapted to his needs, such as his needs to be involved, feel valued, be close to his teachers (in terms of his relationship and in proximity), and have a sense of responsibility. For example, he sits at the front of the classroom, and he is given jobs that are specifically for him.

School SENCo:	*He just doesn't get that "it's not my turn" and you know he always wants to be first and if he isn't chosen or if he isn't first in the line and things like that, you know there might be issues, but the year 1 teacher was really good at sort of managing his needs and he settled down really, really well.*
School SENCo:	*I think, just that he needs to have that little edge of responsibility so that he, like he's got little jobs that he is, you know, specifically for him and he likes to be, you know he'll be the first up if the teacher asks or "can somebody do this" and he'll be "oh, I'll do it for you Miss" and he likes that sort of responsibility.*
School SENCo:	*So, Jake is right at the front and he's kind of in that like "miss I'll do that for you, miss I want to answer that", you know, he's very involved in the lesson, very proactively involved (…) it's like he sort of needs to have that really close relationship with his teacher, I think.*
School SENCo:	*Yeah, yeah, but I think he does really enjoy that close relationship with the adult who is in charge and, I don't know, maybe that's what's different.*

Recognising child's achievements

All participants highlighted how Jake enjoys sharing his achievements with school staff and having positive recognition. He often goes to see the Headteacher or SENCo to show them his work and he has received lots of stickers and a trophy for his achievements. Jake recognises that school staff are proud of him, which makes Jake feel happy.

School SENCo:	*He quite often comes down or gets sent down to show his good work because I think, he just needed that reinforcement really.*
Mother:	*I'm sure he wanted to show the Head Teacher that "I can write", "show Miss *** that I can do this", you know.*
Mother:	*Yeah, they always say he's getting, he got a golden certificate last week. Since he started, he's had maybe 2 golden certificates and the stickers.*

Theme 5: Positive school and parent relationship

Jake's mother and school SENCo both indicated that there is a positive relationship between school staff and parents. Jake's mother shared how school staff are very supportive and very patient.

School SENCo:	*We've always had good relationships with the parents.*
School SENCo:	*Parents have always been really on board with, you know, anything that we've asked them to do and, I mean, I know they were really bewildered and when he was having all these, you know, meltdowns and trashing the place and getting sent home, it was like, you know, "we're at a loss as well".*

Nested case 2: Roger

Research Question 1: Positive effects since the COVID 19 pandemic

Theme 1: 'Cycle of positivity' within learning experiences

All participants highlighted how Roger's learning experiences have improved. It was referred to as a 'cycle of positivity' by Roger's school SENCo, as he feels more understood and supported by school staff, which enables him to manage his sensory and emotional needs, effectively engage, succeed and progress with his learning, be more receptive to challenge and more independent with his learning.

Feels understood and supported by school staff

Roger and his school SENCo indicated how, since the school reopened after the school closures, Roger has felt that his needs are more understood and supported by school staff. Roger identified

how, prior to the school closures, "they kept on giving me year 2 work, so they basically treated me like I was dumb", whereas now, his teachers try to help him and give him age-appropriate work, which supports Roger in feeling that he is not 'dumb'.

Roger's school SENCo shared that Roger feels that his needs are acknowledged by staff, and they recognise how they affect his ability to engage in a learning task; this demonstrates that he was not "being difficult" and that him and his teachers are on the "same side". He is open to the strategies that staff have been supporting Roger with because they are appropriate in supporting his emotional and sensory regulation needs, and as the strategy supports him, he is then able to engage in a learning task effectively. He therefore feels confident that his needs will be supported.

School SENCo:	*All of this work made him feel that his needs were acknowledged, and once his needs were acknowledged and he felt we were all on the same side, he was much more receptive to challenge, and doing things. He kind of needed to know that school knew that he wasn't not able to do something because he was being difficult, but that there was a cause, and that we could sort out that cause and he saw those exercises and strategies we put in, as a support blanket, which then meant he could face challenge.*
School SENCo:	*Because we had a strategy that wasn't linked to the learning, but to a need that he understood, he was open to that, would do that, and then he would come back ready to learn and be able to do a task that before he would refuse to do, because he felt his needs had been met, he'd been given a strategy that worked, which meant then he would have success, so it was like a little cycle of positivity really, that made him able to do that.*
Roger:	*I hated it because we used to do a test and we used to do like 4 and then we used to do tests and then everybody else got a year 4 sheet, which was the top thing to have because we were in year 4, but they kept on giving me year 2 work, so they basically treated me like I was dumb, so that's when I knew I was dumb … still am....*

Roger:	*In year 5 they try and help me, (…) in year 5 they didn't treat me like I was dumb.*
Marina:	*How do you know they don't think you're dumb anymore?*
Roger:	*Because at the test that I did today, its wasn't a year 2 or year 4, it was a proper year 5 one.*

Improved approach to learning

All participants indicated that Roger's approach to learning improved; this included factors such as his self-regulation, engagement, independence, and receptiveness to challenge. He shared that when he returned to school in between the school closures, he thought that school was pointless and boring, and he felt like he was not able to learn anything.

Roger's school SENCo shared that when Roger returned to school in between the school closures, he did not seem to want to return to school and became disengaged with learning; he was resistant to interventions as he did not want to be different from his peers. Roger's school SENCo believed that this was due to Roger having become reliant on one-to-one support during home learning, and because school staff did not realise that he was emotionally dysregulated and needed support with this.

Roger's school SENCo shared that when he returned after the second school closure, Roger was more open to learning, engaged in learning tasks, and more receptive to challenge. She shared how Roger has been more able to regulate and manage his sensory and emotional needs by self-assessing himself and recognising when he needs to use sensory strategies. He is therefore now coping better in the school environment.

Roger's mother highlighted how, in between the school closures, his ability to work independently had diminished and, when he returned after the second school closure, his independence increased significantly.

Roger:	*I felt like I wouldn't be able to learn anything, and I thought school was pointless. I felt like it was boring, and I felt like, I just wanted to go home all the time.*
School SENCo:	*In between school closures:* *The coming back to school was a negative for him, and that was quite tricky for him, and he found that really really hard to settle and became quite disengaged with learning, and he'd put up a real barrier to learning, I think he'd become quite reliant on 1:1 support and all of those things.* *Whatever intervention we tried to put in place he would just shut it down and didn't want to engage with it, we tried to put in lots of 1:1 support in lessons, wouldn't listen to the advice and so he was very very closed to learning.* *He had this real resistance, so he used to do precision teaching, but you could tell he wasn't really engaging in it, because he didn't like being different, and feeling different from the other children, so he didn't like that he was doing that.* *Before he would've put a barrier up, saying, "no no no I can't do it".* *I don't think we necessarily realised it was emotional dysregulation, and I think that was more that he was resistant to any form of learning, so he wasn't throwing chairs or anything but he was really closed, and I think because we weren't necessarily realising that it was emotional dysregulation, we thought it was struggling to learn or to engage, our support didn't have these things, so we weren't meeting his needs so well, which meant he was stuck in that.*

School SENCo:	After school closures: That positive place for learning is now almost now there rather than him being shut down and closed to learning. We did some engagement and learning monitoring, so we just scored it to see what was working, how he was engaged, and what we found is that actually it was all really positive. He would come back ready to learn and be able to do a task that before he would refuse to do. He was much more receptive to challenge. Self-assessment (is) part of being able to know when he needed sensory support. He was ready to learn all the time, that linked into the emotional regulation. He's coping much better in school.

Mother:	In between school closures: That's when he'd kind of completely lost that ability to work independently. He could never really achieve anything independently.
Mother:	During home learning: But I'd say right, and as we go through the whole, make sure he knew, and once he knew, so say if it was maths, once we've done like the first like one or two questions and he got what he was doing. I would sit in the room doing my emails or something. So I was physically there, but he was pretty much working independently. He got to a point where he could do them independently so he would do his zoom. Then he would do his beat. I think we called them beat the clocks 'cause that's what they call them at school. And then he'd come to me to say, well, I've done that, and I've done that. So, we were sort of building that independence. I would log him on, get him started, and then I would walk away and leave him. So he did do that working independently.
Mother:	After school closures: I feel that his independence really improved when he went back.

<u>Progressing with learning</u>

All participants indicated that Roger has made progress with his learning since the pandemic. Roger and his mother highlighted how his handwriting has improved. His school SENCo reported how he had made progress in curriculum tests and is much closer to age expected levels of achievement.

Marina:	*Do you feel like your writing has got better?*
Roger:	*Yes, because I writed 2 pages once, I think that was the most I've ever wrote.*

Mother:	*He went from doing like this much writing to whole pages of writing and like the teachers couldn't, they could not comprehend it and they were like bringing the work to me to show me on the like the one day a week I did pick him up and they'd be like look at this look what he's done. Look what he did two weeks ago. Look what he's doing now.*
School SENCo:	*He achieved well in this lockdown (second).* *(When he returned to school after the closures, we) started to see more academic progress.*
School SENCo:	*During a follow up phone call:* *He is now closer to age expected. He is now comfortably in the key stage 2 band but wasn't before. (He is in year 5 and key stage 2 is year 3-6).*

Theme 2: Enjoyment

All participants described that Roger is experiencing more enjoyment when he is at school, and Roger and his mother highlighted how he is enjoying engaging in gymnastics.

<u>Feels safer and happier at school</u>

All participants indicated that there has been a shift in Roger's feelings of happiness when he is at school.

Roger's mother shared that in between the school closures, Roger felt anxious and unsafe at school. Roger shared that he used to hate school and felt like he wanted to go home. He felt that he was constantly doing schoolwork and had no opportunities to relax.

Roger's mother believes that he now feels less anxious, safer, and more comfortable at school, he is more willing to share his thoughts and feelings with school staff and is more able to be independent. Roger reported that he now experiences the feeling of "panic" less and feels more relaxed and happier at school.

Roger:	*In between school closures:*

	I felt like, I just wanted to go home all the time. I hated it. *I felt like it was constant work, didn't have a chance to relax, just kept on telling me to do work.*
Mother:	*In between school closures:* *I think he was in such a high state of anxiety at school because school wasn't a happy, safe place for him, and because it was a place where he had to be away from me, I think he was always in such a high state of anxiety, that that produced a natural barrier to learning on top of his underlying barriers to learning.*
Mother:	*After school closures:* *We went to Bonfire Night on Saturday at school and we were walking and it was dark and so Roger was like looking over his shoulder every two minutes and he just said outta nowhere, "well, it'll be alright when we get to school 'cause I know that I'm safe at school, 'cause school's a safe place", and I could have cried 'cause I just thought, "that's huge for you, you know you've never, ever felt like school is safe place, so for you now to say that is massive." And I think because he feels safe, he's now able to be more independent.* *Because he's more comfortable at school now, he's more willing to be open about how he's feeling. So yeah, again, I think that probably is a positive coming out of COVID that it points back to that thing of school being a safe place. And then he's safe to share his honest opinions now.*
School SENCo:	*After school closures:* *So, he was a much happier boy and because he was happier, he was learning more.* *Yeah, he was positive about himself and about school.*

Enjoys new hobby and activities

Roger and his mother shared how Roger enjoyed being outside doing physical activities during the school closures, and how he enjoys his new hobby. He joined a gymnastics club in between the school closures and has continued to attend; he feels very proud of his achievements.

Mother:	*So, during lockdown one, obviously, like I say, he had much more opportunity to move, and we're fortunate we've got a nice big garden. He was able to be outdoors a lot and he was just doing lots of cartwheels and lots of handstands. (…) So, he loves climbing trees, climbing trees is a massive thing for him.*
Mother:	*In his own words, after he'd been at gymnastics for a couple of months, he said, "well, I think I found where I belong now". He said, "I think I found my thing. I found where I belong now".*

| Roger: | *There was once a time I felt most proud, at gymnastics when I got 3rd on vault, 2nd on floor, 1st on bars and there was an event and then they were doing who did the best and (…) I got boy's champion.* |

Theme 3: Self-development/growth

All participants highlighted that elements of Roger's intrapersonal skills have developed since the pandemic. He is more aware of his strengths and needs, and his self-esteem has improved.

<u>Increased self-awareness</u>

Roger and his mother indicated a shift in his understanding of his own strengths, difficulties and needs and his ability to articulate these. His mother reported that he is now able to articulate how it feels to need to move and how it feels when he is not allowed to move.

Within a presentation that Roger created about himself, he included sound clips to demonstrate how he can articulate his feelings, he said "my heart starts to pound, my tummy gets all sick, my brain gets all fuzzled and then I turn off." Another section of the presentation demonstrates that he knows what helps him to feel ready to learn when he is stressed; "moving, being with my friends, doing gymnastics, being upside down, being told one thing at a time, having thinking time to clear my head and brain food." He explains the impact of the coping strategies, "it clears my brain out, it makes me calm and it gets me ready to do my work".

Mother:	*I think he was always in such a high state of anxiety, that that produced a natural barrier to learning on top of his underlying barriers to learning and staff, didn't fully understand that, so it was this vicious cycle, and he could never, he could never articulate it.*
Mother:	*I feel like he is quite good at articulating his own challenges and his own coping strategies (…) I'm quite impressed with how he's able to articulate things.*
Mother:	*Genuinely hand on heart what's on those slides is I typed up his own words and I knew that they wouldn't necessarily believe they were his own words so I also audio recorded and put some audio clips in because they genuinely were his own words and he was able to explain how his need to move is like: It starts as a small ball in his tummy and it builds and it builds until it's all he can think about. And but he knows he's not allowed to move so he has to stay still, and that's all he can think about. But now that he's allowed to move, it clears his head, and then he's able to think about work again.*

<u>Increased self-esteem</u>

All participants indicated that Roger's self-esteem has improved since the pandemic. Roger shared how he feels proud of his achievements in gymnastics, and his confidence has improved,

such as during his performance in his school play. He shared that he felt happy when his friends said that they felt proud of him and his school SENCo highlighted that this boosted his self-esteem.

Roger's mother shared that his self-esteem seems to have improved since his achievements in gymnastics, and her firm teaching approach within the second school closure that enabled him to realise that he could succeed. Roger's school SENCo shared that he feels special in a positive way within school and is more able to talk about his strengths and achievements.

Roger:	*I remember when I showed it to my friends and straight after it, they were all saying how proud they were of me, yeah straight after they put their hand up and said I'm proud of roger because he's improved on something. Made me feel happy inside.*
School SENCo:	*He shared that he was dyslexic, but the children weren't interested in that, they were interested in his gymnastics, so they were able to bolster his self-esteem.*
Mother:	*So, in terms of the self-esteem, finding something that he's successful at and actually something that his mates can't do 'cause they can't walk on their hands and they can't do the hand stands and they can't do the cartwheels. That's been huge for his self-esteem.*
Mother:	*I think, uh, so some tough love and some nurture, we were able to build his self-esteem because when I would put my foot down and make him do something he would realise he could and that built his self-esteem.*
School SENCo:	*Those things had made him feel quite special, I think, all of the work that had gone on made him feel quite special, special in a positive way.*
School SENCo:	*He was much more positive about himself, (…) we record their pupil voices, and he was able to say, this was, after he came back, was that his writing had improved, practicing my spellings, he was also saying, rather than saying that he wasn't good at reading and saying what he was doing wrong in his reading, so he was much much more able to self-assess himself.*

Research Question 2: Factors that may have contributed to the positive effects

Theme 1: Understanding and meeting child's needs

All participants highlighted how school staff were able to utilise external support services to assess and understand Roger's needs and effectively support him. Roger's mother shared how this was enabled by the school adopting an enhanced investment in supporting children with Special Educational Needs (SEN). Roger's school SENCo shared that by monitoring Roger's engagement with learning, school staff and parents felt confident that they were meeting his needs effectively.

Remote assessment and intervention from external services

All participants identified the impact of remote assessment and intervention from external services, this included remote sensory assessments and interventions, counselling sessions, and a dyslexia identification. Roger's mother shared how this was enabled by the school adopting an enhanced investment in supporting children with Special Educational Needs (SEN). She shared that during the second school closure, a new headteacher started at Roger's school, who has taken steps to support all pupils with SEN, including Roger.

Mother:	*There are some other contributing factors such as (…) a new head teacher which has a much better ethos for SEN.*
Mother:	*It is well acknowledged and accepted within the local authority that the old head did not address SEN and (…) is trying to push things forward.*

All participants described the impact of remote sensory assessments and interventions from a SEND support service in supporting Roger's, his parents', and school staff's understanding of his needs and how adults can support him. The SEND support service analysed sensory questionnaires completed by parents and school staff, delivered training on sensory needs to school staff, and supported Roger and his parents in a self-esteem building project, which involved creating a PowerPoint about his strengths, interests, difficulties and coping strategies and sharing this with his class. Roger expressed how the project helped him to show his emotions and the progress he had made, which resulted in his friends' expressing how proud they were of his achievements and Roger feeling happy.

Roger's school SENCo explained how Roger engaging with the self-esteem building project while he was at home with his family, supported his feelings of ownership of the project, and Roger presenting the PowerPoint to his class gave him positive feedback from his peers and boosted his self-esteem. She also expressed how the remote involvement from the SEND support service resulted in staff understanding that Roger can become emotionally dysregulated and staff using more appropriate and preventative strategies, such as a personalised sensory diet, which was ready to use when he returned to school after the second school closure. This resulted in Roger feeling that his needs were understood, acknowledged, and supported by staff, which supported his engagement with learning.

Roger:	*I remember when I showed it to my friends and straight after it, they were all saying how proud they were of me, yeah straight after they put their hand up and said I'm proud of roger because he's improved on something. Made me feel happy inside, and I was hiding my face.*
Marina:	*So, a bit embarrassed as well?*
Roger:	*Yeah*
Marina:	*So, doing that ppt and sharing it with your class, how do you think doing the ppt helped you? Or do you not think it helped you?*

Roger:	*It helped me show my emotions.*

School SENCo:	*So, not only did putting the worker in with Roger help Roger, it helped mum and it helped the relationship with school, and I think if it had just been in school, then it would have just helped Roger. So, I think doing it at home, actually, it had a greater impact than us just doing it at school.*
School SENCo:	*But actually doing that ppt with his family, getting mum on board as well, was really useful because it was his piece of work rather than the schools piece of work.*
School SENCo:	*He shared his pictures of me, not only with teachers, he also shared it with his class, he got all that personal reinforcement, he shared that he was dyslexic, but the children weren't interested in that, they were interested in his gymnastics, so they were able to bolster his self-esteem.*
School SENCo:	*I don't think we necessarily realised it was emotional dysregulation, and I think that was more that he was resistant to any form of learning, so he wasn't throwing chairs or anything but he was really closed, and I think because we weren't necessarily realising that it was emotional dysregulation, we thought it was struggling to learn or to engage, our support didn't have these things, so we weren't meeting his needs so well, which meant he was stuck in that.*

Roger's school SENCo also highlighted how Roger enjoyed the continuation of weekly counselling sessions throughout the school closures, via a virtual platform. She reported that Roger looked forward to them and the counsellor was able to learn more about Roger due to him feeling more comfortable at home.

School SENCo:	*He loved his school counselling at home, so he was having it in school face to face, but then we were able to do an online offer and he had that on a weekly basis, and I think that was really positive that that kept going, and I think he used to look forward to that, and I think that gave her an insight into Roger that was different than the child she saw at home. I think sometimes they can be a bit closed, but I think he was much more open with her at home. and she learnt things about him, they do change at home, and I also think sometimes the school can be a place that children find quite overwhelming, and they like to put on a bit of a mask, "I'm this particular person", so I think sometimes away from school they don't have to have that mask, because they are a different person at home, and they are more open about their difficulties because they know that whatever they do, they are gonna to be accepted, whereas at school, they have got to confirm.*

All participants reported that Roger's dyslexia identification supported him in a positive way and both Roger and his school SENCo identified how the identification has also hindered his self-efficacy. Roger's mother believes that the identification helped Roger understand his difficulties

and it provided him with a reason for finding schoolwork challenging. Roger shared how knowing that a famous racing driver is dyslexic motivated him to not let dyslexia prevent him from succeeding, and also shared how he believes that dyslexia negatively affects his schoolwork and means that he is "dumb". Roger's school SENCo believes that the dyslexia identification was useful, and simultaneously created an additional barrier to his learning as it negatively impacted his self-efficacy and contributed to his low resilience to challenge.

Mother:	*There are some other contributing factors such as understanding his own challenges better with that label. I was able to help him understand that most of the things he was finding hard were linked to his dyslexia and that wasn't his fault. I would really articulate that he wasn't dumb, and that there were reasons he found it difficult. And obviously once he was diagnosed dyslexia, it was much easier to give him a concrete example of that.*
Roger:	*When I figured out I had dyslexia, I knew so many other people had it, even Lewis Hamilton, so then I didn't let dyslexia get in my way, it didn't really mess me up, its only messes up my work and that's really it, so that means I'm still dumb.*
School SENCo:	*He was assessed as being dyslexic, although that was really useful, he had that negative self-image around that and also, his resilience for challenge is quite low, so it was almost like it's going to be too hard because I am dyslexic, as much as it was useful, it was also an additional barrier, so he had this low resilience to challenge, "you know I'm dyslexic, so I'm definitely not going to be able to do it"*

School staff understand and meet child's needs

Roger's mother and school SENCo indicated that there has been a shift in school staff's understanding of Roger's needs and consequently, their ability to meet those needs and reduce Roger's barriers to learning. Staff are using preventative strategies to support his engagement with learning, including a sensory diet. Roger identified how his teachers try to help him and "don't treat him like he's dumb", by giving him age-appropriate work.

Roger's mother reported that staff seemed to have a "light bulb" moment as they were meeting his needs, and he was consequently engaging and progressing with his learning. Roger's school SENCo shared that Roger feels that his needs are being acknowledged by staff, feels more understood, and feels confident that his needs will be supported. She also described a "cycle of positivity", in that he is open to strategies because they are appropriate in supporting his emotional and sensory regulation needs, and because the strategy supports him, he is then ready to learn and engage in a learning task effectively and succeed within the task. The feeling of succeeding may then increase his motivation to engage with challenging learning tasks, which continues the positive cycle.

Mother:	And when he then went back after they'd got these movement breaks and set like a sensory diet effect in place for him and I think that helped him massively. One of his things is he's very vestibular seeking, so loves walking upside down on his hands, uh handstands, that kind of thing, and they, understandably, they weren't that comfortable with him doing that. But they did the downward dog positions where his head was getting below his hips, and so you know, they did really take it on board, and he had two teachers there, but they were both part time and the one teacher said to me, "it's so interesting 'cause since that training I get him now, I get it. I see it in his face, and I act before it happens", and so he that's when he stopped the shutting down. So, I think that was really positive.
Mother:	I think he was in such a high state of anxiety at school because school wasn't a happy, safe place for him, and because it was a place where he had to be away from me, I think he was always in such a high state of anxiety, that that produced a natural barrier to learning on top of his underlying barriers to learning and staff, didn't fully understand that, so it was this vicious cycle and he could never, he could never articulate it and he could never really achieve anything independently, because those barriers were all stacked up.
Mother:	It genuinely was like a light bulb moment for them (school staff), but they were now meeting his other needs so that the barriers that could be removed came down.
School SENCo:	All of this work made him feel that his needs were acknowledged, and once his needs were acknowledged and he felt we were all on the same side, he was much more receptive to challenge, and doing things. He kind of needed to know that school knew that he wasn't not able to do something because he was being difficult, but that there was a cause, and that we could sort out that cause and he saw those exercises and strategies we put in, as a support blanket, which then meant he could face challenge.
School SENCo:	Before he would've put a barrier up, saying, "no no no I can't do it". Because we had a strategy that wasn't linked to the learning, but to a need that he understood, he was open to that, would do that, and then he would come back ready to learn and be able to do a task that before he would refuse to do, because he felt his needs had been met, he'd been given a strategy that worked, which meant then he would have success, so it was like a little cycle of positivity really, that made him able to do that.
School SENCo:	He felt that everyone was on the same side.

Roger:	I hated it because we used to do a test and we used to do like 4 and then we used to do tests and then everybody else got a year 4 sheet, which was the top thing to have because we were in year 4, but they kept on giving me year 2 work,

	so they basically treated me like I was dumb, so that's when I knew I was dumb … still am....

Roger:	*In year 5 they try and help me, (…) but in year 5 they didn't treat me like I was dumb.*
Marina:	*How do you know they don't think you're dumb anymore?*
Roger:	*Because at the test that I did today, its wasn't a year 2 or year 4, it was a proper year 5 one.*

School tracked child's progress

Roger's school SENCo shared that when Roger returned to school after the second school closure, school staff monitored Roger's engagement with learning for a few weeks. They wanted to determine whether the support that had been put in place for Roger was having a positive impact and whether there were any patterns of lessons he found more/less difficult. They found that Roger was engaging with learning well and it helped school staff and parents to feel confident that the strategies were supporting him.

School SENCo:	*When he came back, we were really keen to track how he was doing, to see if it had worked, to what we did was, so we just scored it to see what was working, how he was engaged, and what we found is that actually it was all really positive, and we didn't do it for very many weeks, but it was all there and we'd invested so much time in it and it's not something you can measure from assessments, we just wanted to see, was this working, and I think because sometimes he could be a little bit half full, we thought he'd had a good day, and he would go home and say I've had a really bad day, so what we wanted to be able to do, because I think mum when he does that, rightly so, gets very anxious herself so what we wanted to be able to do, because she was worried about him coming back, actually look we've been carefully tracking this, actually, he's doing really well, and it made everyone feel confident that the support was working, and we were thinking that there would be a pattern of there was always going to be one session that he didn't like or something, but there was no pattern, he was ok.*

Theme 2: One-to-one learning with SENCo parent

Roger's mother and school SENCo believed that a key contribution to the positive effects was Roger having one-to-one individualised support from his mother while he was engaging in home learning during the school closures. His mother, who works as a SENCo in a primary school, was able to spend time with Roger, discussing the learning until he fully understood the task and realised that he could do it. Roger's mother identified how she learnt from the first school closure that continuously sitting with Roger during home learning was not helpful in developing his

independence. During the second school closure, Roger's mother supported him in starting his work and then left him to complete it independently.

Mother:	*So, I was able to take the time, talk the work through with him. Help him, understand the task and then when he fully understood it, he realised he could do it. So yeah, I think I think that amount of 1 to 1 time that lockdown gave us was another positive, yeah.*
Mother:	*So, I learned my lessons in the first lockdown. So, in the second lockdown, and genuinely in the second lockdown, I was busy here as well because schools in general were a bit more prepared. So, I would log him on, get him started, and then I would walk away and leave him. So, he did do that working independently.*

Learning tasks differentiated

Roger's mother and school SENCo highlighted that Roger benefitted from having learning tasks differentiated for him by his mother. She was able to suggest learning tasks that took his difficulties into consideration. For example, as Roger finds writing difficult, his mother suggested that instead of writing about something he is unfamiliar with, he could write instructions for something he is familiar with, such as baking fairy cakes. Roger was then able to do the task fairly independently. Roger's school SENCo suggested that this protected Roger from failure.

School SENCo:	*He'd enjoyed home learning, what was really nice about home learning is that he kind of did his own thing, so he didn't really follow school lead, he followed mum's lead, which was obviously skilled because she is a schoolteacher, and it was very much at his point of learning.*
Mother:	*He did engage with the work, they tried to differentiate it, but it was a bit tricky, so sometimes we would do our own thing like I'd kind of follow what they were doing. An example of that is they had to write instructions, they were learning about Egyptians and they had the write instructions on how to mummify a tomato. So, we done the practical experiment of the mummifying of the tomato at home, which is what was what they asked us to do. And then the next task was to write the instructions well. Because it wasn't something that Roger was familiar with, and because obviously being dyslexic, writing is a real challenge. He found that really, really difficult, but what he was really good at was making fairy cakes and he knew that like the back of his hand, and he can do that fairly independently. So, I adapted it so that he wrote instructions for the fairy cakes, so he'd still done this kind of scientific part of the mummification, but when it came to the literacy part, I tweaked it to be something that where he wouldn't have to keep thinking back about the process and could focus on the literacy skill of the writing of the instruction. So yeah, and teachers were fine with that. I think they just sort of were grateful that I was kind of able to change it to meet his need really so.*

Balance of nurture and demands

Roger's mother shared that, as his parent, she had freedom to support Roger through a balance of nurture (giving love and comfort) and firmly putting appropriate demands on him. She was able to provide him with security and reassurance when he had a 'meltdown' and could be firm when asking him to complete tasks, enabling him to realise that he could succeed. Roger's school SENCo shared that during home learning, Roger's mother engaged him in overlearning of key skills, such as doing daily times tables tests independently, and he was able to achieve a lot. When Roger returned to school, he continued to engage in those learning activities, which seemed to support his confidence and belief in himself that he could achieve.

Mother:	*Some tough love and some nurture, we were able to build his self-esteem because when I would put my foot down and make him do something, he would realise he could and that built his self-esteem. Whereas in school he would just never give it ago and he would just sit down, and I get it. Their hands are tied, they're limited as to what they can do in that sense. Whereas as his mum I didn't have quite the same restraints on me. Equally I was able to give him the nurture and the love and the cuddles and the comfort that he needed. That again, they're not really allowed to do kind of thing.*
School SENCo:	*Mum really did some overlearning of some key skills, which gave him some confidence.*

School SENCo:	*When he came back, there were a few things that he would do regularly at home like times tables tests that we brought into the classroom and he did that as morning work, so we knew that it was pitched at the right level.*
Marina:	*So, did that make him more motivated would you say? To do times tables?*
School SENCo:	*Yeah, I think he was motivated and confident that he could achieve, whereas perhaps in the past he felt demotivated and that he wouldn't achieve, so he was motivated and confident to do that.*

Supported to develop self-awareness

Roger's mother shared that she was able to support Roger in understanding and articulating his own strengths, how it feels when he finds things difficult and how coping strategies help him. She understood the importance of developing his self-awareness skills and supported him by modelling the articulation of his difficulties and coping strategies, celebrating individual differences, and promoting the theory of multiple intelligences (that there are many ways that someone can be clever, not just academically). She also discussed why a task may have been

challenging for him (e.g., because he has dyslexia) and that he was not struggling because he was "dumb", as he called himself.

| Mother: | I do think it (1:1 home learning) benefited him in understanding his strengths and weaknesses, and I was only focusing in on him, so I was able to take the time, talk the work through with him. |
| Mother: | I think I'd probably understood the importance of him being able to speak up for himself and articulate it. And also, for him, like when he used to come out at school every day saying I'm dumb, I'm dumb, I'm dumb. I would really articulate that he wasn't dumb, and that there were reasons he found it difficult. And obviously once he was diagnosed dyslexia, it was much easier to give him a concrete example of that. And I've always spoken to him about different types of clever and what you do at school is 1 measure, but there are so many different styles and ways of being clever and actually here are some examples. |

Theme 3: Being at home

Adults identified that having more time at home during the school closures was helpful for Roger, as he had time away from a difficult environment and time to mature, freedom to move, autonomy when accessing home learning, and more quality time with his family. It was also raised that Roger being at home while receiving support from school staff was helpful as parents were able to see how committed school staff were in supporting him. This may have supported the relationship between parents and school staff.

<u>Break from school</u>

Roger's mother and school SENCo shared that Roger benefitted from having additional time at home, as he had time away from an environment that he finds difficult and had time to mature.

| Mother: | Once they (school staff) had that training, and the sensory things (sensory diet) were in place and he'd had a bit more time to mature at home, I feel that his independence really improved when he went back. |
| School SENCo | That downtime did almost give him a chance to be away from an environment he was finding hard, for us to put some really good support in and for him to come back in a much better place. |

<u>Freedom and autonomy</u>

Roger's mother and school SENCo shared that Roger enjoyed having freedom and autonomy during the periods of home learning. His mother referred to Roger's freedom to move and fidget during his learning, and the strategies that helped him; she was then able to pass on her observations to school staff. The SENCo referred to Roger enjoying freedom and autonomy with

his learning and that Roger not wanting to return to school after the first closure may have been because Roger had become comfortable with home learning.

Mother:	*But what I think helped that was he was able to do it in a way that worked for him so he could stand up and fidget, he could and you know, get up and walk away and come back and so he could take these sort of breaks, and when he went back to school and I'd sort of fed back about, well, I've noticed he likes to stand up and jiggle his leg when he's thinking.*
School SENCo:	*The first one (school closure), I think he liked it at home, but he liked it almost too much and liked the freedom of being able to dictate what he was doing.*

More quality time with family

Roger's mother described how Roger benefitted from more quality time at home with his immediate family due to school closures and his parents having time off from work or working from home. His parents were able to "take their foot off the pedal" and give Roger more of their time and attention. His parents had time to support Roger with one-to-one home learning and time to observe Roger's interests, which subsequently supported his mother in discovering and introducing Roger to a gymnastics club that Roger became very successful in and passionate about. Roger also seemed to enjoy having his family close to him and knowing that they were all safe.

Mother:	*It did come out of COVID because the weather in that first lockdown was so nice as well, wasn't it? So we were just outdoors all the time and I just had that time to sit back and watch him, which I wouldn't have done if I'd been working full time (…) I just genuinely feel that he benefited from all that additional time at home, that additional time with me not being distracted with work (…) I think being able to just kind of stop was just phenomenal because I certainly really value that extra time I had with both the kids.*
Mother:	*I was like always trying to find that thing that would be his that would be good and again it was just again another positive out of COVID in that I had that time to watch and observe more.*
Mother:	*And that is another positive out of COVID 'cause I probably wouldn't have thought of gymnastics. I'd tried everything else, tried tennis, tried football, tried climbing, (…) but no, none of that worked.*
Mother:	*I do think that having us around permanently, not being able to go anywhere or do anything and just all being together all the time really suited his, I don't know if needs or preferences or wants. I don't quite know what the right answer is there, but linking to that attachment style thing. Having us all there, and knowing we were all safe.*

Parents saw evidence of support from school

Roger's school SENCo shared that Roger being at home while receiving support from school staff was helpful as parents were able to see how committed school staff were in supporting him. For example, school staff arranged remote sensory assessments and interventions from a SEND support service.

School SENCo:	*I think the relationship between school and home became stronger, just simply because I think we were able to, certainly through this process and putting that support in, mum was able to see how committed we were to making things work and I think she felt that we had supported him well and that she had confidence in what we were doing for him.*
School SENCo:	*I think that time of us not being there but putting lots of things in, I think mum was able to appreciate how much we were trying to get it right, and even if we didn't always get it right, it wasn't through lack of trying. So, I think our relationship improved.*

Theme 4: Time for enjoyable activities that he excels in

Roger's mother shared that Roger was able to spend more time outside doing physical activities during the COVID lockdowns. This enabled his mother to observe his interests and led to her suggesting that he could join the gymnastics club. As a result, Roger feels that he has found "his thing", an activity that he excels in, and a club where he feels he belongs. This has had a positive impact on his self-esteem.

Mother:	*And again, like I say, it did come out of COVID because the weather in that first lockdown was so nice as well, wasn't it? So, we were just outdoors all the time and I just had that time to sit back and watch him (…) He had much more opportunity to move, and he had the time to do more of what he liked, and we're fortunate we've got a nice big garden (…) He was just doing lots of cartwheels and (…) handstands, and I was saying, "oh you're quite good at that Roger, would you like to do gymnastics when clubs start again?"*
Mother:	*He's always struggled, so he's not into football like his mates, he's always struggled (…) and anyway, joined a gymnastics club (…) and they did their club competition and (…) he got, a bronze or silver and gold, and then he (…) got a golden a trophy for being overall boys' champion. So, (…) finding something that he's successful at and actually something that his mates can't do 'cause they can't walk on their hands and they can't do the hand stands and they can't do the cartwheels, that's been huge for his self-esteem (…). In his own words, (…) he said (…) "I think I found my thing. I found where I belong now".*

Theme 5: Positive relationships

Adults highlighted how relationships have become more positive between Roger, his parents and school staff since the pandemic. Roger's parents have become more confident in how staff are supporting Roger, which has subsequently facilitated Roger's confidence in school staff, as well as his more positive outlook on school. Roger's relationship with his teacher is also more positive, as school staff have discerned what approaches are important to Roger in supporting his needs.

Positive relationship between school staff and parents

Roger's school SENCo shared how the relationship between school staff and parents has become stronger, and parents have become more confident in how school staff are supporting Roger. The SENCo believes that this has contributed to Roger's confidence in school staff and has facilitated Roger in having a positive outlook of school. Roger's mother shared that the relationship between school staff and parents is reasonably positive, and she appreciates and acknowledges their support.

School SENCo:	*I think the relationship between school and home became stronger (…) I think our relationship improved which, if a parent is confident about school, then that automatically reflects what is passed onto subliminally to the child, so I think that was really positive as well.*
Marina:	*So, it's almost like Roger's relationship with school has improved as well?*
School SENCo:	*Yeah definitely, he was positive about himself and about school.*

Mother:	*(The relationship between parents and school staff) is reasonably positive, and I always make sure that I thank them for everything they've done, and, you know, acknowledge when things are going well.*

Positive relationship between school staff and child

Roger's school SENCo shared that since Roger returned to school after the closures, he has had a positive relationship with his teacher. She believes that this is a really important factor in supporting Roger, as he needs a balance of acknowledging his difficulties, while not singling him out from his peers. He also benefits from having a teacher who has a good sense of humour and is clear and direct in their approach. This also links to the sub-theme of 'school staff understand and meet child's needs'.

School SENCO:	*He's kind of returned to his year 3 teacher who he had a really positive relationship with (…). It's a male teacher, and I think he really responds to that, and I think often with a male teacher there's no nonsense approach and I think he gets that, and likes being in that alpha male sort of situation, and it's interesting but we do find with*

	some of the children, they really respond to male teachers and it sounds weird but it's less touchy feely and less sensitive to needs in a way, but actually the black and white, they know where they stand and they like the sense of humour and those things.
School SENCO:	*I think he does sometimes struggle with relationships with adults, with teachers, so he needs to feel that you are on side (…). He doesn't like being different, but equally he almost needs an acknowledgment of his difference to feel supported and it's a real balancing act to get that right and I think that's why relationships with teachers are so important for him, because when you're on a tight rope to get him in that place to learn and if you fall off either side, it all comes, well in year 4, certainly, it all came crashing down.*

Nested case 3: Rosie

Research Question 1: Positive effects since the COVID 19 pandemic

Theme 1: Enjoyment

All participants shared that Rosie has experienced more enjoyment since attending school during the second closure; she finds school more fun and enjoyable, she is more motivated and engaged in learning, and she enjoys her new hobby. Although Rosie shared that she enjoyed drawing, watching TV and looking at books during the first school closure, on the whole, Rosie did not seem to enjoy her time at home.

Positive outlook on school

Rosie shared that when she attended school during the second closure, she found school more fun and enjoyable, and since then, she has felt more positive about school. She said she felt happy, excited, loved, safe, and confident and she shared the activities that she enjoyed doing (forest school, played ball, drawing, and games such as Jenga).

School staff shared that during the second school closure Rosie enjoyed attending a social and emotional wellbeing intervention and having time to share her thoughts and feelings with a key worker. Since then, she has enjoyed accessing similar support via a lunchtime club and she has continued to share with her class teaching assistant.

School staff:	*She received a (social and emotional wellbeing) intervention in the second lockdown, which she enjoyed going to, she liked having that key worker.*

More motivated and engaged with learning

Adults shared that since attending school during the second closure, Rosie has been more motivated to attend school and engage in learning, although this has dipped slightly since the school reopened to all children. School staff shared that before the second closure, she was reluctant to engage in learning and became distracted. Since then, she is more able to focus and concentrate with her learning. Her mother shared that before the second school closure, she was very reluctant to read books at home. Since then, she has enjoyed reading more and has been motivated to read at home.

School staff:	*(Rosie is) definitely more motivated, to start with, when I say lazy, she just daydreams, she would quite happily just turn round and talk while you're talking and then you have to bring her back again, and then when you have to complete the work, she wouldn't know what was coming up, and she'd just sit there, then she needed someone to come over to explain it to her again. She'd do one question and lose her concentration again. It was constant(ly) bringing her back, but that's less now, it's still there to a degree but it's less, more focussed and motivated towards her learning, but again, is it because she's been given the headspace to do it?*
School staff:	*She was lazy, a lazy learner, very needy, wanting somebody to do the work for her a lot, from a class teacher's point of view, I had her for a short period of time and she would wait there to be told what to do, or needed prompting constantly, but then building on that confidence and having that small group work made her less lazy and then obviously impacted on her learning, which is the ultimate goal.*
Mother:	*She hated her books, she said I'm not her teacher, I can't get her books out, whereas now she loves reading, she will quite happy get a book out.*

School closures were not enjoyable

When Rosie was at home during the first school closure, participants expressed that she did not enjoy it, and that lots of difficulties occurred during this time. All participants shared that Rosie did not access any learning via online school learning or paper versions and adults shared that Rosie's parents found it difficult to engage her in home learning as she found it hard to understand that she needed to do schoolwork at home. Rosie's mother shared that she faced difficulties accessing the school's online platforms and felt pressure. She shared that Rosie became frustrated, lacked motivation and she therefore engaged with alternative learning activities such as creative art. Rosie shared that she felt confused because she did not understand why she was not allowed to go to school.

Rosie's mother shared that she was worried about Rosie getting COVID due to an underlying health condition; Rosie was therefore very isolated form her friends. She shared that she felt trapped, upset, lonely because she did not have anyone to play with.

Although Rosie mainly enjoyed attending school during the second school closure, she also felt some difficult feelings; she felt frustrated, lost, and embarrassed. She shared that it was weird that the children had to keep changing classes.

Mother:	*I came up to the school, I found it really difficult to be honest, I'm not going to lie, because I'm not very computer literate, I just couldn't get onto the portal that they were setting up, so I did come into the school to collect certain bits of work, but she wasn't really willing, or she'd do a little bit and then she'd get frustrated, I mean I'm not a teacher and Rosie is not the easiest to teach to be quite honest. They think it's one big holiday at home, they don't think they've got to do schoolwork, they were looking at me bizarre, thinking I'm not going to school. For me to be able to say, "you've got to do the schoolwork otherwise mummy's going to get into trouble", it was just horrendous, the pressure bit and in the end, I rang the school and said, "I can't put myself through this anymore, I just can't do it".*
Marina:	*And then the schools closed again, but you were in school, weren't you? Do you remember that?*
Rosie:	*R: We kept changing classes.*
Marina:	*M: You kept changing classes? What was that like?*
Rosie:	*R: Errr it was weird.*

<u>Enjoys new hobby</u>

Adults shared that since the pandemic, Rosie has been enjoying attending a drama club.

Marina:	*And does she enjoy it (drama club)?*
Mother:	*Yeah, she does.*
School staff:	*I asked her about it (drama club), she went "yeah, I go on a Saturday, I really like it".*

Theme 2: Progressing with learning

All participants shared that since attending school during the second closure, Rosie has progressed with her learning, in particular, her reading skills. Rosie shared that she has feels proud because she has done lots of work. School staff shared that she has made accelerated progress with her learning and her mother noticed that her reading improved.

Marina:	*What did you feel proud of?*
Rosie:	*Me*
Marina:	*What did you do?*
Rosie:	*A lot of work*
Marina:	*So, do you think you've got better in your learning? Your reading and writing, maths?*

Rosie:	Yeah
School staff:	*She came in and it was in that time that we noticed a big difference in her just by attending school in the second lockdown. And she was open to social care during that time, which was very difficult for her, she was needier, clingy to the class teacher, attention seeking, refusing (...) daydreaming, she was a daydreamer (...) this was to start with. And then she slowly picked up and then she was able to make accelerated progress, especially in her reading, she was able to close the gap with her peers, quite significantly, because she had that small group work in a small bubble.*
Mother:	*Her reading got better.*

Theme 3: Improved physical and emotional health

Adults communicated that since the pandemic, Rosie's health and wellbeing has improved. Emotionally, she has become more confident in class, with her peers in school and when engaging with hobbies, and she has developed her coping skills in class and at home. Her physical health has also improved in terms of regaining a healthier weight.

<u>Self-esteem and confidence</u>

Adults shared that since attending school during the second closure, Rosie's self-esteem and confidence has increased. School staff shared that Rosie is more confident in raising her hand and contributing to class discussions, however, since the school has returned to typical schooling (bigger classes and less support), her confidence has dipped slightly. Rosie's mother shared that Rosie has become more confident in speaking up for herself when her peers say unkind words to her. She also shared that Rosie has succeeded in going on a camping trip with the cubs, showing greater confidence and independence.

School staff:	*We saw a lot of confidence when she was in the small bubble, and now she's using those skills again, but not quite the confident Rosie that we saw, because more children are back in and also home life, it's completely changed (…), it's knocked her confidence, she's also not in that small (social and emotional wellbeing group), or the key worker person.*
School staff:	*She got to know the teachers a bit better. She was able to build more of a closer relationship with the teacher, which I think helped build her confidence, so that when the larger class resumed, she still felt that she had that connection to the teacher, so felt more confident, putting her hand up contributing.*
Mother:	*She did gain confidence I think, because there wasn't so many boys in the school. She had a lot of run-ins with boys at school (…) It was a lot better since the second lockdown, starting back in September, I've had no… I think she's said a few things some lads have said to her, but she can confront it now and speak for herself a little bit so she's learnt to deal with it a lot better, so I think she's doing all right.*

Mother:	*Before covid started, she wouldn't stay out, she's very clingy, Rosie, don't like to stay away from home, and she's actually succeeded in doing a whole weekend of camping, this weekend, so that's a big thing for Rosie as well, and I was surprised she did, it, I was waiting for the phone to ring, but she thoroughly enjoyed it.*

Resilience and coping skills

Adults shared that Rosie's resilience and coping skills have improved since she attended school during the second closure. School staff shared that she developed coping skills when she had a small class, and she has continued to use these skills. For example, she is able to cope when teachers ask her to do her work, even when things are difficult at home. Her mother shared that she has learnt to adapt to changes in her difficult home life, such as her father's poor mental health and alcohol addiction. She has developed a sense of right and wrong in terms of recognising warning signs for her father's difficulties.

School staff:	*If I encouraged her to concentrate, "come on you need to get back onto your learning", floods of tears within an instant. Second school closure, that small group work, it was about it being a bit more of a calmer, relaxed atmosphere, less pressure for her (…) and I think she found that better (...) And she's still continued in a positive way at school and still wanted to remain focused, even though we've had another change go on at home, it doesn't seem to have impacted her emotional wellbeing at all.*
Mother:	*My husbands had a mental health breakdown and (…) sunk into depression, then he was depending on alcohol, and Rosie has had to live though all that (…) which has not been good to be quite honest. It's been a rollercoaster for us as a family. I did most of what I could to protect Rosie from a lot of it, but they hear and see things don't they, but for Rosie, she's quite robust, Rosie is, and she's come out of it and she's all right, to be quite honest.*
Mother:	*She's developed a sense of what's right and wrong. Because if we think that Dad's been drinking, she will know that that's (…) warning signs, she will know that, and it's not good for children to deal with that but we've had to.*

Physical health

Rosie's mother shared that since Rosie attended school during the second closure, Rosie has regained a healthier weight.

Mother:	*I have to watch Rosie with her weight and stuff, and we've come back to school and she was eating back at lunch time, so her weight came back down again, so for health wise it was better for her to be at school.*

Adults highlighted how relationships have become more positive between Rosie and school staff, and Rosie and her peers.

<u>Trusts school staff</u>

School staff shared that prior to the second school closure, Rosie did not speak openly with school staff and was a "closed book". She now has closer and more trusting relationships with school staff and has developed her skills in building trusting relationships, as she's been able to build trusting relationships with multiple members of staff. She is therefore more able to speak openly to school staff and was able to make a disclosure, which resulted in social care involvement.

School staff:	*She liked having that key worker and I think that was her opportunity to discuss the issues that were going on at home and open up to someone, kind of a release for her, just having someone to talk to.*
School staff:	*I wondered whether if she hadn't got that relationship with Miss ***, whether she'd have made that disclosure that put them into child protection, in terms of speaking and building those relationships, it's gone from low to really high, she disclosed something that would have been a really tricky thing for her to do, before she wouldn't have said a word, so building that relationship and having that time with a key worker enabled her to do that. She spoke quite honestly the other day in reading rooms about having a social worker, yet back in the day she wouldn't have dared even share that, but she was quite open about that.*
School staff:	*She's been able to defer those skills onto her TA, and she does *** club (lunchtime club which aims to support social and emotional wellbeing), so she's got quite consistent adults still, and actually she mentioned something yesterday and it's almost like because the TA doesn't work on a Monday or Tuesday, she's waiting to speak to her on a Wednesday, so she is building those relationships.*

<u>Made stronger peer friendships</u>

All participants shared that since Rosie attended school during the second school closure, she has felt more positive about her friendships. Rosie shared that she played with different children in the second school closure and built new friendships. Her mother shared that she has been included more by other children and has not been picked on so much. She is therefore enjoying playing with different children, more able to make friends and more able to deal with bullies. School staff shared that her friendships have improved; she is more able to make friends, and she can build and maintain stronger friendships. She became less reliant on one friend and made friends with two children in her year group, which provided her with feelings of safety.

School staff:	*She struggled before, she was dependent on that one girl that was in a lower year, she's now maintaining good friendships and they're becoming stronger.*

School staff:	*She always felt that she was being bullied before. And really struggling with friendships, now the class teacher said that actually her friendships were better and she was playing with other people and she was less dependent on the one person she was friends with before. She always played with someone younger than her. She had got to know those 2 other girls in her own year group, it's almost like a safety blanket, at break and lunch times, she had someone from her year group.*
Mother:	*She mixed with children, it goes on in all schools, where you've got some kids that don't play with some kids, and then some of the girls that she was playing with, normally wouldn't play with Rosie, wouldn't normally interact with Rosie. She said "ooh *** playing with me today, she never plays with me" because there was a limited amount of people to play with, so she was included a lot more, at play times, a lot of positives came out for Rosie to be quite honest.*
Mother:	*She wasn't having a good experience in school to be quite honest, she was always coming home crying, and she would speak to teachers about being picked on by a certain lad and that was all going on before the pandemic. It was a lot better since the second lockdown, starting back in September, I've had no… I think she's said a few things some lads have said to her, but she can confront it now and speak for herself a little bit so she's learnt to deal with it a lot better, so I think she's doing all right.*

Research Question 2: Factors that may have contributed to the positive effects

Theme 1: Different school environment

All participants described how the school environment was different during the school closures. There was a calmer and more relaxed atmosphere and therefore school staff were "allowed to care" for the children. This resulted in Rosie having greater opportunities to share her views and feelings with trusted adults, access social and emotional wellbeing interventions, and access one-to-one and small group support with her learning. By having fewer children at school, Rosie was able to develop her friendships and confidence.

Relaxed atmosphere allowed time to care and support

School staff shared that during the school closures they felt they had less pressure on them and more time to focus on the children; this enabled a calm and relaxed atmosphere and there was therefore less pressure on Rosie. They said that they were "allowed to care" for the children and they were therefore able to build strong, trusting relationships with Rosie, support her with her social and emotional wellbeing and provide her with greater opportunities to share her views and feelings with trusted adults. Rosie also had more one-to-one and small group support with her learning.

School staff:	The focus was just solely on the children without the pressures behind that. I suppose as well, being sort of like allowed to care for them rather than having all like, as you say, the pressures of …
School staff:	That small group work, it was about it being a bit more of a calmer, relaxed atmosphere, less pressure for her, more pressure when it's a class and you've got to get them all to the end point, it's more a relaxed environment and I think she found that better for her.

Social and emotional wellbeing intervention:

School staff shared that while Rosie was attending school during the second closure, Rosie participated in a five-week social and emotional wellbeing intervention in a small group of children which aimed to develop coping skills. She continued to access this support via a lunchtime club. School staff shared that accessing this support contributed to Rosie becoming more resilient and provided Rosie with more headspace to focus on learning.

School staff:	She received (a social and emotional wellbeing intervention) in the second lockdown, which she enjoyed going to, she liked having that key worker and I think that was her opportunity to discuss the issues that were going on at home and open up to someone, kind of a release for her, just having someone to talk to.
School staff:	(Rosie is) more focussed and motivated towards her learning, but again, is it because she's been given the headspace to do it?

School staff:	We've had another change in home life for her, and she's still continued in a positive way at school and still wanted to remain focused, even though we've had another change go on at home, it doesn't seem to have impacted her emotional wellbeing at all.
Marina:	So, she's more resilient I guess then? Even though somethings going on, she's actually able to cope with it OK?
School staff:	Yeah, yeah, and I would say that that's through the work that she did with *** (social and emotional wellbeing intervention).

Opportunities to talk to trusted key worker:

School staff shared that prior to the second school closure, Rosie did not speak openly with school staff and was a "closed book". While Rosie was attending school during the second closure, she built a strong, trusting relationship with a key worker and had more opportunities to discuss her thoughts and feelings and anything that was troubling her. She consequently felt more able to share and made a disclosure, which resulted in social care involvement. Since then, she has continued to share with her class teaching assistant.

School staff:	*She was a closed book to start with, she wouldn't say anything at all, I wondered whether if she hadn't got that relationship with Miss ***, whether she'd have made that disclosure that put them into child protection, in terms of speaking and building those relationships, it's gone from low to really high, she disclosed something that would have been a really tricky thing for her to do, before she wouldn't have said a word, so building that relationship and having that time with a key worker enabled her to do that.*

Connection with teacher:
School staff shared that while Rosie was attending school during the second closure, her and her consistent teacher got to know each other and built a positive connection. Rosie was therefore more confident in contributing to class discussions and her teacher was more aware of her learning potential. This also contributed to her making progress with her learning and these positive effects continued when the school reopened to all children.

School staff:	*Because she had that small group, and she had the same class teacher that she normally had, she was able to build more of a closer relationship with the teacher, which I think helped build her confidence, so that when the larger class resumed, she still felt that she had that connection to the teacher, so felt more confident, putting her hand up contributing… They (the children) got to know the teachers, and the teachers got to know them, I think that's the key to build that stronger relationship. And what their potential, they got to see actually, you can do this, I've seen it in a smaller group.*

One-to-one and small group support with learning:
Rosie and her mother shared that while Rosie was attending school during the second closure, she received more support with her learning. Her mother shared that she had more opportunities for one-to-one support with her learning, such as reading with an adult. This contributed to Rosie's progress with reading and her motivation and enjoyment of attending school and reading at home.

Marina:	*Did you feel like you got more help with your learning? Because there were less children and more teachers?*
Rosie:	*(Drawing/writing)*
Marina:	*Oh, what does that say? Yes?*
Rosie:	*Yes.*

Mother:	*She was getting stuff she doesn't normally get, "my teacher read for ages with me", whereas that doesn't normally happen, it was good.*

Mother:	There were not many other children in the school, and I noticed she had more one to one and she did benefit very much so for that, so I'm glad that … she got to experience that. Rosie positively got up every morning and wanted to be at school, so that was a good thing.
Mother:	Her reading got better. And she was more happy to get her reading book out at home. But now she's gone back to normal now, if she gets hold of her phone or tablet, it's all out the window, whereas before that, she was getting a book out, because I think she was getting that 1:1, it made such a difference.
School staff:	Small group work made her less lazy and then obviously impacted on her learning, which is the ultimate goal.

Small number of children in school

All participants shared that having a small number of children in school during the closures enabled Rosie to develop her friendships. School staff explained that it enabled children to develop friendships with the children who were in school, and they developed strong friendships which have continued. Rosie's mother shared that having less boys attending the school during the closure enabled Rosie to develop her confidence as there were less children picking on her.

Rosie:	(Rosie wrote 'made friends').
Marina:	Did you feel like you made friends? You did?
Rosie:	Yeah.
Marina:	Was that easy or was it hard?
Rosie:	Easier, because I played with them.

School staff:	Now the class teacher said that actually her friendships were better, and she was playing with other people, and she was less dependent on the one person she was friends with before. She always played with someone younger than her. She had got to know those 2 other girls in her own year group, it's almost like a safety blanket, at break and lunch times, she had someone from her year group.
School staff:	We found that with a few of children, that having the smaller group and not necessarily with the children they'd normally associate with, they had to develop those friendships with the children who were in school, but actually, during that time, they got stronger friendships and then they've continued on for them.
Mother:	She mixed with children, it goes on in all schools, where you've got some kids that don't play with some kids, and then some of the girls that she was playing with, normally wouldn't play with Rosie, wouldn't normally interact with Rosie. She said, "ooh *** playing with me today, she never plays with me", because there was a limited amount of people to play with, so she was included a lot more, at play times, a lot of positives came out for Rosie to be quite honest.

Mother:	*She did gain confidence I think, because there wasn't so many boys in the school. She had a lot of run-ins with boys at school, so I had none of that, and I had none of coming home, and there was no arguing, because Rosie gets a bit moody and stuff, so she was a lot happier when there was less people at school, I have to say. It was a lot better since the second lockdown, starting back in September, I've had no... I think she's said a few things some lads have said to her, but she can confront it now and speak for herself a little bit, so she's learnt to deal with it a lot better, so I think she's doing all right.*

Theme 2: Consistency

Adults have shared that consistency seems to be a key factor in contributing to Rosie's positive effects since the pandemic for three main reasons. Firstly, school staff shared that while Rosie was attending school during the second closure, she had support from consistent adults within school, which enabled her to build closer relationships with her key worker and her class teacher. Secondly, school staff shared that by continuing to attend school during the school closure, Rosie's routine and structure was maintained and provided her with stability and safety. Her mother shared that Rosie thrives on routine and it enables her to have healthier eating habits. Thirdly, school staff shared that as Rosie continued to attend school, communication between school staff and parents was maintained, leading to an increase in communication.

School staff:	*Because she had that small group, and she had the same class teacher that she normally had, she was able to build more of a closer relationship with the teacher… She does jelly club, so she's got quite consistent adults still.*
School staff:	*I think being in school as well, going back to her wellbeing and mental health. If she hadn't been at school during that time, especially with everything that was going on at home, would significantly have impacted her and we wouldn't have seen that progress in her learning. So, I think a positive effect of it, would've been her stability, we were kind of her safety net, routine, organisation and structure.*
Mother:	*I don't really know really, I think the thing is with Rosie, it was because she was in the first lockdown as well, I have to watch Rosie with her weight and stuff and we've come back to school and she was eating back at lunch time, so her weight came back down again, so for health wise it was better for her to be at school. Rosie is a very routine person, and she thrives on routine, and it kept her in that, where before, on the first lockdown, there was nothing and it was quite horrendous to be honest. (…) For Rosie, luckily for her, it was just normal living for her, it was normal to come to school, whether the school was full or empty.*
School staff:	*For children who were in, the parent communication maintained, because they were in all the time, especially with Rosie, now her mum and me now talk to teach other, whereas before we probably weren't as much, so there's been a few parents that I've noticed that I've got to know during lockdown more because they've been in.*

Theme 3: Adult support with physical and emotional health

Adults communicated how Rosie had support from adults during the second school closure. She had a child protection plan with social care in order to protect her from harm. She also had support for her diet, weight and self-esteem from her mother and the school nurse.

Social care support

School staff shared that during the second school closure Rosie had support from social care in the form of a child protection plan. The aim of social care is protecting children from harm.

School staff:	*She came in and it was in that time that we noticed a big difference in her just by attending school in the second lockdown. And she was open to social care during that time, which was very difficult for her, so we did notice lots of changes in her behaviour, she was still able to make accelerated progress.*
School staff:	*(During the second school closure), she came in as a keyworker child to start with and then it was during that time that she opened to social care.*
School staff:	*I wondered whether if she hadn't got that relationship with Miss ***, whether she'd have made that disclosure that put them into child protection.*

Supportive parent

Rosie's mother shared how her approach to supporting Rosie with her weight difficulties and her self-esteem may have contributed to her resilience and confidence in coping with children making unkind comments by being aware of the risk factors for eating disorders, accepting her appearance, and trying to not make a big deal out of it. She has also encouraged healthy eating habits at home, which may have contributed to her regaining a healthier weight.

Mother:	*A lad at dinner time kept calling her a pig because she was putting stuff in her mouth, but she's got to a point now where those things don't hurt her now, she will say something back and walk away, but before she was really taking that to heart and "I don't want to go to dinners", and it's very hard because it can trigger things in the mind, like eating disorders and stuff like that, I said to her "there's nothing wrong, you are the way you are", and I do try and keep her healthy as much as I can, at home with her eating, but it's very difficult to not make a problem out of a problem that's really is not a problem, until it becomes a problem, it's really difficult.*

School nurse support

School staff shared that Rosie received support from the school nurse regarding her diet and overeating, which may have contributed to her regaining a healthy weight. As Rosie was attending school during the second school closure, when a small number of children were attending school,

Rosie was able to have a remote appointment with a school nurse without being on a long waiting list.

School staff:	*And we did a school nurse referral as well for her, while she was coming in during lockdown, because mum was worried about her diet and obviously overeating, so we managed to tap into the school nurse as well. It was good because it meant that they had such an influx of referrals when they opened back up so it was good that we managed to get some of ours referred during the lockdown so they could support … and obviously we could offer it remote, if they're in school and they wanted an appointment, we could offer it via the laptop, teams. It was a lot quicker and now it's a long list to wait.*

Theme 4: Greater opportunities for fun, skill-building activities

All participants indicated that since the second school closure, Rosie has had more opportunities for fun and skill-building activities both in school and within her free time. For example, physical, outdoor and creative activities and a drama club.

Enjoyable activities at school

Rosie and her parent shared that while Rosie was attending school during the second closure, she engaged in more activities that she enjoyed, such as outdoor, physical and creative activities and games, and she was more motivated to attend school. For example, she participated in forest school, nature walks, playing with a ball, playing Jenga and drawing. This may have been a contributing factor for Rosie's more positive outlook of school and her increased engagement and motivation with learning.

Rosie:	*I remember doing forest school with Mr ***. It was fun working with Miss ***, we played ball, we drawed, we played a lot of games, we played Jenga.*
Mother:	*They did nature walks and things they don't normally do like woodland walks, to get them outside in the fresh air as well, so I think it was a really good experience for Rosie being in school.*
Mother:	*Rosie positively got up every morning and wanted to be at school, so that was a good thing.*

New hobby

The adults shared that Rosie has been enjoying attending a drama club, which has increased her confidence and self-esteem; for example, she has been able to speak up for herself and respond to unkind comments from her peers.

Mother:	I started her on a drama course, she goes once a week, one and a half hours, and that has really boosted her self-esteem, she's come out of herself a little bit, and now if boys are picking on her, she will bounce back and say, "well my face isn't like yours".
School staff:	She has started a new hobby, she's doing drama. Mum, since coming out of lockdown, mums put her into a drama club, because mum was worried about her self-esteem, (…) she likes to do drama, so she's popped her in (…). Mum was hoping it would boost her self-esteem.

Theme 5: Adversity

Rosie's mother shared that since the pandemic period, Rosie has experienced difficult situations at home, as her father has had poor mental health and an addiction to alcohol. Rosie has learnt to adapt to this adversity and has developed a sense of right and wrong in terms of recognising warning signs for her father's difficulties.

Mother:	My husbands had a mental health breakdown and (…) sunk into depression, then he was depending on alcohol, and Rosie has had to live though all that (…) which has not been good to be quite honest. It's been a rollercoaster for us as a family. I did most of what I could to protect Rosie from a lot of it, but they hear and see things don't they, but for Rosie, she's quite robust, Rosie is, and she's come out of it and she's all right, to be quite honest. She's developed a sense of what's right and wrong. Because if we think that dad's been drinking, she will know that that's not (…) warning signs, she will know that, and it's not good for children to deal with that but we've had to. And she's quite alert is Rosie, and she knows what she wants, what's right, what's wrong, and it's not a bad thing really.

Theme 6: Parent and school staff communication improved

School staff shared that since the second school closure, their communication with Rosie's mother has increased.

School staff:	For children who were in, the parent communication maintained, because they were in all the time, especially with Rosie, now her mum and me now talk to teach other, whereas before we probably weren't as much, so there's been a few parents that I've noticed that I've got to know during lockdown more because they've been in.

Nested case 4: Callum

Research Question 1: Positive effects since the COVID 19 pandemic

Theme 1: Improved wellbeing

Since the pandemic began, Callum's physical and emotional wellbeing has improved. Since he moved into care, his basic needs have been met, he has grown, and he has become more independent with self-care skills. He is happier and more settled, he has developed his emotional regulation skills, and he is more resilient.

<u>Physical wellbeing</u>

Callum's foster carer and school staff reported that Callum's physical wellbeing has improved since he moved into care. His basic needs (physiological and safety needs) are being met, as he is warm, appropriately fed, and safe at home. His carer added that he used to ask about dinner before he had eaten breakfast, and used to eat anything, whereas now, he will tell his carer if he does not like something. She believes that this is because he is now more comfortable in the knowledge that he will have enough to eat, and also because he now knows that his carer will not tell him off. He has also grown considerably since he has been living with his carer.

Callum's foster carer indicated that Callum has become more independent with self-care skills and has adapted to the routines of the house. For example, Callum now independently gets ready for school and gets ready for bed.

School staff:	*He was in care (…) in the December (2020; just before the second school closure).*
School staff:	*Moving out of the home life situation and into the care situation and having that relationship with the carer.*
School staff:	*It's like the hierarchy of needs isn't it, now his basic needs are being met for him, he can then progress and be really focused to learn. If he's really hungry, he's not going to have the concentration. If something has happened the night before at home, he would still come into school but he's not going to be focussed on his learning, because his brains occupied with what's going on at home, whereas he doesn't have that now, he's well fed, he's got a good home life, he can concentrate on his learning.*
School staff:	*When they were going home in this situation (before going into care), it wasn't a happy environment and they would rather had stayed at school. (…) Whereas now, he hasn't got that home life worry, and he can focus more, which is then impacting on the progress of his lessons. (…) We (school) were that safety net for him, and he knew he was safe, he knew he wasn't going to be hearing things, facing things.*
Foster carer:	*They're safe, they're warm, they're fed, and you can tell the difference, more so with their eating, it used to be sometimes before breakfast, they'd say, "what's for dinner?" so they're already thinking what they're getting later, but I don't get that so much now.*
Foster carer:	*He's grown so much.*

Foster carer:	It's like rules as well, we are dealing with them as the situation comes. They struggle a little bit with some things, but we are getting there. Certain rules like pick your washing up and put it in the wash bag or bring the washing down.
Foster carer:	When they get up in the morning, they have to change their pants, socks and put their uniform on, do their face and teeth, brush their hair, I suppose they're just guidelines. At first it was like trying to get them to brush their teeth at night was horrendous, smallest things, you know, now it's just a given, they are straight up, they don't argue going to bed any more, there's no fighting it.

Foster carer:	He's a lot more comfortable knowing that he's got enough to eat so he's ok to say that he doesn't like it (food).
Marina:	And also, maybe that you aren't going to get angry with him.
Foster carer:	Tell him off, yeah.

Emotional wellbeing

Callum's carer and school staff described Callum as happier and more settled since moving into care. He is less occupied with his challenging home life and is therefore worrying less. His carer expressed how he is more relaxed and 'happy-go-lucky', and how him and his siblings 'became children'. School staff described Callum as more 'smiley' and cheeky and indicated that he now has the headspace to focus and concentrate on learning.

Callum's carer explained how Callum initially demonstrated some aggressive behaviours and has since learnt to manage his emotions by talking to his carer.

School staff acknowledged how Callum demonstrated greater resilience, when he was able to cope with a member of school staff leaving, who he had had a close, strong connection with.

School staff:	More happier in himself, more of a smiley child, getting a little bit of personality, a little bit cheeky.
Foster carer:	He is happy go lucky, chilled, and seems more relaxed. It's as if when they came to me, after a little bit, they became children, they weren't distracted, ya know.
Foster carer:	He loves being at home and coming to school.
School staff:	Home life probably would've impacted on the amount he was engaged in the classroom, because he would've been thinking other things, not necessarily the learning, but now he hasn't got that home life worry, and he can focus more, which is then impacting on the progress of his lessons.
School staff:	He is not worrying so much, so he can concentrate on studies, not worrying about what he's going to face when he goes home.

School staff:	Because like we said, yes, he enjoyed coming to school and yes, he was present, but whether or not his mind was present was different, whereas now, his emotional side of things, his wellbeing has got better because of the work we've put in, so then his concentration has improved.

Foster carer:	When he first came, he was a little bit aggressive, like on the first day, he got violent towards my granddaughter, he tried to strangle her, and she was only 7 at the time. But we chatted about it and he's a lot better and he knows how to manage his behaviour, when he gets angry, he comes to try and speak to me first, but now he doesn't tend to.
Marina:	So that's an improvement in terms of his behaviour, he's not showing any violent behaviours anymore? That was just at the beginning?
Foster carer:	No, no, at the beginning, yep.

School staff:	They (Callum and his siblings) almost had got the skill set to be ok with that (a member of school staff leaving). I didn't know whether they may have had a bit of a lapse because she had been that solid person/attachment.

Theme 2: Enjoyment

All participants shared how Callum has expressed more enjoyment across a range of activities. For example, he shows more enjoyment and is more engaged with learning, and he participates in many hobbies, such as football, scouts and playing Xbox. Callum communicated mixed feelings about his time at school during the school closures. He enjoyed doing more fun activities and was pleased that it was less noisy. Although he initially felt lonely and embarrassed when he asked other children to play, he later felt positive feelings when he made friends. He also expressed feelings of frustration, confusion and being trapped.

<u>More enjoyment and engagement with learning</u>

Callum's carer and school staff have noticed how engaged Callum is with learning at home and at school, and Callum's carer shared that Callum has been enjoying reading and maths. For example, at home, he reads every day, and at school, his focus and concentration has improved, and he now participates in classroom discussions and partner talk.

Foster carer:	We're reading nearly every single day and he will just sit, and he loves reading and he will keep reading and reading. He tends to pick books like cartoony type books where they have speech bubbles and you can hear him starting to get into it and the different tones in, acting it out a little bit.
Foster carer:	He loves maths, he enjoys math. (…) He's flying through the books.

School staff:	His concentration has improved (…), he can concentrate on his learning.
School staff:	Home life probably would've impacted on the amount he was engaged in the classroom (…), he can focus more, which is then impacting on the progress of his lessons.
School staff:	He would be the quiet child in the class, not wanting to engage in classroom discussions or partner talk.

Enjoys hobbies and activities

Callum and his carer shared how Callum has enjoyed many hobbies and activities over the pandemic period. Callum expressed his enjoyment of school during the school closures; he shared how it was fun because he played and did not do much work; he did art, P.E., and watched you tube on an iPad. He also enjoyed it because it was less noisy and because he enjoyed making new friends; he felt happy, excited, relaxed, confident, safe, and loved.

Callum and his carer expressed how Callum enjoys more hobbies and activities outside of school, such as playing on his Xbox and playing football. His carer added how Callum now goes to scouts and plays outside with children in the neighbourhood, whereas before, he mainly watched television.

Marina:	So, I was wondering about school, what did you like about school? What was it like when you came in (during the school closures)?
Callum:	(We did) art, P.E., it was fun, I got to play, it wasn't that noisy, we didn't have to do that much work (…), we watched you tube on iPad.

Callum:	And then I got friends with them (children that he attended school with during the closures).
Marina:	Which feeling did you feel when you started to become friends?
Callum:	Relaxed, confident, safe, loved, excited, happy. (He pointed to the picture cards, and I read them out.)

Marina:	When did you start playing football? Since the pandemic, since some time in year 4?
Callum:	Yeah (…) In November I'm going to go football training.

Callum:	I got my Xbox.
Foster carer:	And then obviously Callum loves his Xbox, he got that for Christmas.

Foster carer:	He loves football, he would only ever play it at school really with his friends. He used to play with his brother's Xbox, but I think that was a few years ago, he said he used to enjoy doing that, but a lot of things got broken, stolen, so they didn't really do a lot, used to just watch tele (…). Now he goes to scouts, he's starting his after-school football after half term, goes and plays out with other kids and plays football, Xbox when he's allowed it.
Foster carer:	But yeah, he loves it (scouts), absolutely loves it, they do stuff that they need to learn, like sewing and campfires and he gets involved with all that.

"Hated lockdown"

Callum described aspects of the school closures that he did not like, and expressed frustration because he "hated, hated, hated lockdown". He felt confused about the mixed messages from school staff about what he was allowed to do when he was inside compared to outside, and he felt trapped because he was restricted to where he could go in the school. As his friends were not able to attend school, he felt lonely and embarrassed when he asked other children to play.

Callum:	People were like not allowed people to like get, like near in lockdown, yeah, but when we went outside to have like a break, yeah, we were able to go near each other, so, confused.
Marina:	So, when you were inside the school building, you had to stay far away from each other and then when you went outside, you could be really close to them, is that what you're saying?
Callum:	Yes
Marina:	So, that's why you were confused. Why were you embarrassed? Do you remember why you picked that one?
Callum:	Because I didn't know that much people there, (…) even though I was there for my entire life, when I was like five (…). The people there was playing with the other kids, and I didn't know them so that makes me like embarrassed to ask them if I can play.
Marina:	Ok so because you didn't know the children very well, you had to ask to play?
Callum:	Yip
Marina:	How about lonely, what made you feel lonely?
Callum:	I had some friends who had to be at home, so I only had one or two friends there at school.
Marina:	Ok so that made you feel lonely. How about frustrated?
Callum:	Because I hated, hated, hated the lockdown.
Marina:	And trapped?
Callum:	Because I actually like stayed behind doors in school.

Theme 3: Progressing with learning

Callum's carer and school staff reported that Callum's learning ability has improved, particularly his reading and writing skills. Before the pandemic began, Callum was significantly 'below' age related expectations, whereas now he's 'working towards'.

School staff:	*Major improvements (in learning).* *Reading and writing has improved.* *(He) was significantly 'below', now he's 'working towards'.* *He was well below age related but we've managed to close that gap.* *He's done all of his priority reading work.*
Foster carer:	*He was behind when he first come to me (…), he's definitely improved.* *(He's) definitely progressing with his learning, from what the teachers have said.*

Theme 4: Improved social interaction

Callum's carer and school have indicated how Callum's social interaction skills have improved. His speech and language skills and confidence have progressed and improved simultaneously, and he is therefore more outgoing and talkative within lessons, with children at home and at school, and with strangers. His social skills have developed, as he is able to build strong friendships, and can interact with children and adults in socially appropriate ways.

Developed speech and language skills

Callum's carer and school staff highlighted how Callum's speech and language skills and confidence have progressed and improved simultaneously and he is now easier to understand.

School staff:	*The more his confidence has built, he's speaking more, and using the targets and therapy (speech and language therapy) that have been put in place and they have progressed together (…) he was quite tricky to understand. His speech and language improved on targets set by *** therapy.*
Foster carer:	*Speech seems, I don't know if it's maybe because I understand him better, he talks more. He just wants to speak to everybody because his confidence has grown so much with his speech.*
Foster carer:	*He would be very quiet when he spoke so that was even harder to understand him. Now (…) you can't get him to shut up, he speaks to everybody.*

More confident and outgoing

Callum's carer and school staff reported that Callum's confidence in communicating with others has grown and he is therefore more outgoing. At school, he has found 'his voice', he is proactively contributing to class discussions, and he is more confident in approaching other children and building a strong friendship. At home, he is very talkative and sociable, even with strangers.

School staff:	*Confidence was always a factor that was always brought out by the class teacher, it was "he won't contribute to class discussion" and they thought it was around his speech and language as well, but it wasn't, it was him not having the confidence to put his hand up and answer.*
School staff:	*He was chatting to people, it wasn't an issue (his social skills), he wasn't a recluse and wouldn't socialise, it was on the other child's part to approach him, but now he's probably more confident to approach them and build a stronger friendship.*
School staff:	*He was quite introvert before – he would be the quiet child in the class, not wanting to engage in classroom discussions or partner talk. Class teacher said last year that he would be one of those children that if you said, "Callum" and asked the question, he'd be able to answer it, but he wouldn't be the one that would put his hand up, whereas now he's putting his hand up, not being targeted by the class teacher saying, "Callum, what is it", he's putting his hand up and doing that himself. He is building his confidence and self-esteem; (he is) so much more confident within class. He is finding his own voice which is nice.*
School staff:	*He's contributing confidently to that (reading rooms - using text and then they use CBT strategies with the children but using the characters), whereas, if we rewind to here, he would've just sat there quiet, you would never have got anything like that from him.*
Foster carer:	*He would be very quiet when he spoke so that was even harder to understand him. Now he's definitely a 9/10. Some days you can't get him to shut up, he speaks to everybody, in school, they will probably tell you that he's really getting involved.* *He's a lot more confident, and I'm pretty sure the school have seen a massive difference in his confidence.* *I think last year, his teacher said he wasn't getting involved in groups because he didn't wanna speak, now he doesn't shut up, he just chats all the time and I think he's doing really well.* *We could be driving down the road or walking down the road and he will say hello to someone, that's how his confidence has grown.*

Improved social skills

Callum's carer and school staff noticed how Callum's social skills have improved, and Callum shared how he was able to make friends by asking other children if he could join their play. School

staff shared how he now has the skills to approach other children and build strong friendships. Callum's carer highlighted how he initially demonstrated some aggressive behaviour and struggled to understand what constitutes socially appropriate play behaviour. For example, when children in the local neighbourhood tried to play fight with Callum, it was rougher than he was used to, which resulted in Callum 'lashing out' to protect himself. He has since become more comfortable in playing with those children and no longer shows any aggressive behaviour.

Callum's carer also noticed that Callum's social interaction skills with adults are less 'intense', as he used to seek lots of attention from visitors and call his carer's name a lot.

Callum:	*The people there was playing with the other kids, and I didn't know them so that makes me like embarrassed to ask them if I can play.*
Marina:	*Ok so because you didn't know the children very well, you had to ask to play?*
Callum:	*Yip (…) And then I got friends with them.*
Marina:	*Then you made friends?*
Callum:	*But one of the people left because they were in year 6 and they were moving to year 7.*
Marina:	*Ahhhh… so that was really brave what you did, when you were asking if you could play with them.*
Callum:	*Mmhhmmm*
Marina:	*So did it make you feel good at all when you started to become friends with them?*
Callum:	*Yeah*
Marina:	*Which feeling did you feel when you started to become friends?*
Callum:	*Relaxed, confident, safe, loved, excited, happy. (He pointed to the picture cards, and I read them out.)*

School staff:	*It was on the other child's part to approach him, but now he's probably more confident to approach them and build a stronger friendship.*
Foster carer:	*With the other kids that lived in the close, they were getting to know each other, and he was just struggling I suppose, (…) the other kids could be a bit heavy handed, a bit rougher than what he knew, (…) he wasn't used to that kind of play fighting, (…) so yeah, he would have that kind of lash out, I suppose he was protecting himself. I suppose children see things differently to what we do, things just get mixed up differently to what it really is. They don't understand the social etiquette when they're in social circles, playing with other children, what's acceptable, what's not acceptable, they just don't understand how to interact socially.*

Foster carer:	*He used to struggle being out playing with the children, but not so much now, he will go out and they all play. Just being comfortable with other children, and a lot of that was surrounding his speech.*
Foster carer:	*When they first came, it was "oh my god", people used to dread coming to mine or me going to them, because they were on ya, you know, just chat, chat, chat, you know, want to talk to ya, want to get loads of attention, very intense, but that's really died down now, the more they've settled in. Even with me, it would be a constant "***, ***, ***" (calling her name).*

Foster carer:	*When he first came, he was a little bit aggressive, like on the first day, he got violent towards my granddaughter, he tried to strangle her, and she was only 7 at the time. (…) But now he doesn't tend to.*
Marina:	*So that's an improvement in terms of his behaviour, he's not showing any violent behaviours anymore? That was just at the beginning?*
Foster carer:	*No, no, at the beginning, yep.*

Theme 5: Developed positive relationships

All participants shared how Callum developed positive relationships with others over the pandemic period. Callum has built a strong and caring friendship with a child at school and has developed positive relationships with his carer and his 'key adult' at school. He also speaks highly of a range of members of school staff when he is at home.

Made stronger peer friendships

Callum and school staff recognised how Callum made new friends during the pandemic. Callum shared how the new friendships evoked positive feelings (relaxed, confident, safe, loved, excited, and happy). School staff shared that Callum has built a new friendship which has flourished into a strong friendship in which they are very caring towards each other.

Callum:	*And then I got friends with them (children that he attended school with during the closures).*
Marina:	*Which feeling did you feel when you started to become friends?*
Callum:	*Relaxed, confident, safe, loved, excited, happy. (He pointed to the picture cards, and I read them out.)*

School staff:	*Now it's probably the quality of that friendship (that has improved).*
School staff:	*(He's) now in a class with someone he wasn't necessarily friends before, lovely friendship now, very caring towards each other. (…) (He's) always been a child*

	who can speak to everyone if they spoke to him but wasn't able to form a strong friendship or keep close friends. (…) He was able to build that friendship (and) now it's flourished into a strong friendship.

Positive relationships with adults

Callum's carer and school staff have highlighted how Callum has developed strong relationships with school staff. His carer reported how he regularly talks about a lot of teachers and lunchtime supervisors in positive ways when he is at home. School staff discussed how he built a strong relationship with his 'key adult', who he had protected time with to focus on his social and emotional wellbeing. They also indicated that Callum has developed a positive relationship with his carer.

Foster carer:	*He mentions his teachers all the time, every teacher, there's so many of them, he loved being in his last class, he loves his class now, he loves the dinner ladies.*
School staff:	*A member of school staff joined his bubble in June. He got to know her, not as a 'you're going to work with me on my emotions', but it allowed those relationship foundations to be laid because she supported him academically.*
School staff:	*And having that hour of protected time a week, he knew he was gonna get it so he could concentrate on his learning (…) if they've got that hour and they know that that's protected time with their key adult, it really supports.*
School staff:	*She (key worker) picked up small group work/1:1 self-esteem work, sibling relationships, friendship skills, (…) understanding emotions, a lot of nurturing.*
School staff:	*Moving out of the home life situation and into the care situation and having that relationship with the carer.*

Research Question 2: Factors that may have contributed to the positive effects

Theme 1: Different school environment

All participants described how the school environment was different during the school closures. There was less pressure on school staff and more time for them to focus on the children. This resulted in Callum being appropriately fed, having greater opportunities to build connections with school staff, accessing a bespoke curriculum including small group and one-to-one social and emotional wellbeing interventions with his key worker, and small group support with his learning. Callum's carer added that school staff had more time to notice how things were at home for Callum, when he was living with his mother, which may have highlighted to school staff and social workers the importance of the children being taken into care. By having fewer children at school, Callum was able to develop his friendships and confidence.

<u>Relaxed atmosphere allowed time to care and support</u>

School staff shared that during the school closures they felt they had less pressure on them and more time to focus on the children. Staff were therefore able to ensure that Callum was appropriately fed, and they provided him with a bespoke curriculum that focussed on his emotional wellbeing.

All participants shared how Callum had small group support with his learning, and that he was able to build positive connections with members of school staff.

Callum's carer suggested that school staff had more time to notice how things were at home for Callum, when he was living with his mother. This may have highlighted to school staff and social workers the importance of the children being taken into care. She added that it would have been difficult for school staff to notice the difficulties at home in a typical schooling environment with thirty children in a class, because he was always happy and chatty and loved school.

School staff:	*Being able to offer as much pastoral support that we were, we felt like we had more time with the children, the sessions could be longer which was great.*
Marina:	*So, what was involved in those sessions?*
School staff:	*Boomerang, anxiety, self-esteem, more time to play some games, when you've only got 45 mins, the icebreaker sessions were quite short, whereas you could spend more time, you didn't feel like you were clock watching. I suppose we had a bit of pressure of us in a way. Our jobs kind of died down, not died down, it was a different kind of pressure wasn't it, because we had to find a different way of working but there were less visitors for us in school which gave us more time to be with the children.*

School staff:	*Their emotional wellbeing was definitely our priority during that lockdown period.*
School staff:	*Just working on his emotional wellbeing first and then the academic side of things afterwards, and it's just kind of worked well hasn't it, together and we've got to that point.*
School staff:	*We did have a problem with feeding, not having breakfast, not having food, so we were able to make sure that that was all right because he was at school, not at home, we felt there was more of a risk being at home.*
Foster carer:	*And obviously with the lockdown, I suppose it maybe highlighted to the social workers and to school the importance of the children probably being removed and being put into care. (…) Because they were still coming to school, even though they were with mum, they were allowed to come to school because they were so far behind, I suppose it just highlighted it more to the school the difficulties they were getting, because obviously they haven't got 30 kids in each class to look at, they had much smaller classes, so I suppose the teachers then were spending more*

	time, and things were being highlighted a lot more, so I would say that was more of a positive for the children because then it just made everyone more aware of how things were for them. And because they were always happy and chatty and they loved school so you wouldn't really notice that much of a difference.

Social and emotional wellbeing intervention with key person:
School staff shared that while Callum was attending school during the closures, he had a bespoke curriculum that focussed on his social and emotional wellbeing. This involved small group support for self-esteem, friendships, understanding emotions, learning play skills, and having protected time one-to-one with his key worker. He has continued to access this support via weekly sessions of 'reading rooms'; this involves Cognitive Behavioural Therapy strategies and characters, and he really enjoys it.

School staff:	*But since having the opportunity to be in school and having that bespoke curriculum.*
School staff:	*Bespoke curriculum, it was the nurturing side of it, he's got that protected time coming out that he could do, we follow ****, self-esteem, friendships, understanding emotions, sibling time, there were coming out to learning simple skills of how to play together.*
School staff:	*And she (his key worker) did self-esteem work, sibling relationships, friendship skills, she did aspects of boomerang, understanding emotions, she did a lot of nurturing with this family.*
School staff:	*On a Tuesday, we now do reading rooms, which is using text and then they use CBT strategies with the children but using the characters, and he's doing that with his brother and they do really enjoy it and he comes up with some really good ideas. And I think through doing that feelings work with ***, that helped him with the CBT questions.*

Opportunities to talk to trusted key worker:
School staff shared that while Callum was attending school during the closures, he built relationship foundations with his key worker as he got to know her while she was supporting him in class. He was subsequently supported by her through small group work, and an hour of protected weekly one-to-one time, focussing on social and emotional wellbeing. This allowed Callum to concentrate on his learning.

School staff:	*So, all the way through… she went into his bubble, so he kind of got to know her not as 'you're going to work with me on my emotions', but it allowed those relationship foundations to be laid because she supported him academically. So then when we came back in September, she picked up small group work with them. But again, because she'd just been accessible in the classroom, he could form those relationships. And when ** was giving that to him then, again not all*

	children were in, so it was more on a 1:1 basis rather than a group intervention, so that helped too. And credit to her really.
School staff:	*And having that hour of protected time a week, he knew he was gonna get it so he could concentrate on his learning (…) if they've got that hour and they know that that's protected time with their key adult, it really supports.*

Connections with school staff:

All participants indicated that Callum built positive relationships with school staff; he says that they are kind and his carer said that talks about his teachers in positive ways when he is at home. His carer also expressed that his teachers are brilliant, and they encourage him. School staff shared that he feels comfortable to approach the safeguarding lead for a chat.

Marina:	*What was it like with the teachers? (During the school closures)*
Callum:	*They were kind.*

Foster carer:	*He mentions his teachers all the time, every teacher, there's so many of them, he loved being in his last class, he loves his class now, he loves the dinner ladies.*
Foster carer:	*Obviously, the teachers here are brilliant with him, and they encourage him.*

Marina:	*And does he access, like you said he comes to you for chats, does he come to you…*
School staff:	*Yeah, I mean he does, if I'm around school, he will often come and find me.*

Small group support with learning:

All participants indicated that during the school closures, Callum had more support with his learning from school staff through small groups. This supported Callum in progressing with his learning. Callum's carer added that Callum's teacher even taught him how to tie his shoelaces.

Callum:	*Did you get lots of support? You're about to point at support? (Callum nods) Yes. Okay.*
School staff:	*Having that opportunity to be in school within that small group, learning the national curriculum.*
School staff:	*I think time was on our side a little bit, the amount of children that we had in school, with that being less, enabled us to focus on the children like Callum, who needed that extra support a lot better.*
Foster carer:	*He was behind when he first come to me, and then I think as well covid really helped because they were in smaller groups, so the teacher was able to spend more time with him, so he's definitely improved, but he's still got a way to go.*

Foster carer:	*Covid really helped because they were in smaller groups so the teacher was able to spend more time with him, so he's definitely improved. (…) Like I say, covid was probably a good thing for Callum, massively, massively just helped him through everything. His teacher last year was fantastic with him, he even taught him how to tie his shoelaces.*

Small number of children in school

Callum and school staff indicated that having a small number of children in school during the closures enabled Callum to develop his friendships. School staff explained that it enabled children to develop friendships with the children who were in school, and they developed strong friendships which have continued. They also highlighted how the small number of children enabled Callum to voice his opinions and contribute to class discussions, which built his confidence and self-esteem.

Marina:	*Embarrassed because…*
Callum:	*Because…. The people there was playing with the other kids, and I didn't know them so that makes me like embarrassed to ask them if I can play.*
Marina:	*Ok so because you didn't know the children very well, you had to ask to play?*
Callum:	*Yip.*
Marina:	*So that made you feel a bit embarrassed?*
Callum:	*And then I got friends with them.*

School staff:	*In the second lockdown again, we had more children in, but each class had a very small number of children.*
School staff:	*Because he was in that position where there was only a select few children in, he was able to build that friendship, probably I would say, facilitated more from the other child to him because of the quietness of the start, but now it's flourished into a strong friendship.*
School staff:	*The friendship that he got, he's now in a class with somebody who he wasn't necessarily overly friends with prior, but this time he was, and they've got a lovely friendship now, actually, very caring towards each other.*
School staff:	*So, he was in such a small bubble it enabled him to kind of voice his opinion on questions, take part in classroom discussions, contribute, and I think that bult his confidence up to start with.*
School staff:	*Having that opportunity to be in school within that small group, learning the national curriculum, building his confidence and self-esteem.*

Callum's carer and school staff have described how supportive Callum's new carer is. He now has a safe home in which he receives support with his learning; this has contributed to Callum's increase in confidence and improvement in his speech and language and reading skills. His carer added that her home is calmer, and she meets his basic needs by providing sufficient warmth, food, clothing, routines and boundaries.

School staff:	*I think the reason why the gaps closed (between him and his peers) (…) is obviously home life changing.*
School staff:	*Moving out of the home life situation and into the care situation and having that relationship with the carer.*
School staff:	*I would definitely say on the second lockdown, when he had gone into care and he was still attending, this is where we'd seen a major increase in confidence, speech and language development improved, reading improved, because his carer reads with them as much as possible.*
Foster carer:	*I was a bit worried when I first came because I thought, what am I going to say, but there's loads to say, when you sit down. You don't really think about what they've achieved over this past almost year, and it's nice to know I'm actually doing something right.*

Safe home with routines and boundaries

Callum's carer and school staff discussed how Callum moving into care has provided him with a safe home, which has alleviated some of his worries and has resulted in Callum being able to focus more and progress with his learning. His carer gave an example of how Callum is safer; he is no longer left alone with his older sibling, who was previously aggressive towards him. His carer added that her home is calmer, and she meets his basic needs by providing sufficient warmth, food, and clothing. Callum is therefore now comfortable to vocalise that he does not like certain foods, as he knows that he will get enough to eat, and Callum is no longer scared to play football in case he damages his shoes.

His carer shared how she provides routines and boundaries for Callum and his siblings, such as reading every morning before school, personal hygiene routines, not tolerating violent behaviour, and enforcing rules such as not being allowed in other people's houses without telling her.

Callum's carer shared how she has supported him with managing his angry behaviour, and she expressed how they have been 'growing together', in that she has been struggling just as much as Callum and his siblings in adapting to their new living situation.

| School staff: | *When they were going home in this situation (before going into care), it wasn't a happy environment, and they would rather have stayed at school. (…) Whereas now, he hasn't got that home life worry, and he can focus more, which is then* |

	impacting on the progress of his lessons. (…) We (school) were that safety net for him, and he knew he was safe, he knew he wasn't going to be hearing things, facing things.
Foster carer:	*They're safe, they're warm, they're fed.*
Foster carer:	*From what I can tell things really improved obviously being with me, I think because there was a lot of differences, it was calmer, it was safer, even though they didn't realise that it wasn't that safe you know at home, so...*
Foster carer:	*It's just loads of differences. It's just the smallest of things that you don't actually realise, it's just normal for us, its normal day life, but when he was at home, even though they didn't see anything wrong, I think it's a lot of its subconscious. That's normal life so to him there's no difference, even though when they've come to me, it's things like they've probably got more food, (…) I'm there all the time, they're not left alone with older siblings; an older sibling was quite aggressive towards him, so he hasn't got that, because I don't tolerate that kind of behaviour in the house. (…) One of his brothers was quite, it wasn't like a rough and tumble, it was direct violence, I think he tried to put a cigarette out on his arm and he would lock him outside. So, there wasn't that usual rough and tumble play in football, rolling over, playing wrestling, it was literally at home it was a direct violence I think there's quite a difference isn't there with the playing, he wasn't used to that kind of play fighting.*
Foster carer:	*He's a lot more comfortable knowing that he's got enough to eat so he's ok to say that he doesn't like it (food).*
Foster carer:	*He loves playing out in the playground, playing football, the amount of shoes we went through with him playing football, getting holes and ripping them, the fact that he was comfortable being able to do that, that he wasn't scared to play football in case he damaged his shoes.*
Foster carer:	*We read in the morning, drop the oldest one off, she goes to senior school, so we drop her off and then we sit outside for about 15-20 minutes and then the 2 boys will read. It's a nice little routine for them and they love it, and like I say, it's the structure, so they enjoy it.*
Foster carer:	*They didn't know months of the year, so we've been singing that through on the way to school*
Foster carer:	*When he first came, he was a little bit aggressive, like on the first day, he got violent towards my granddaughter he tried to strangle her, and she was only 7 at the time. But we chatted about it and he's a lot better and he knows how to manage his behaviour, when he gets angry, he comes to try and speak to me first, but now he doesn't tend to, he's very happy go lucky and chilled.*

Foster carer:	*Certain rules like pick your washing up and put it in the wash bag or bring the washing down. (…) I say rules, they are not really…*

Marina:	Yeah, like house guidelines?
Foster carer:	Yeah guidelines, and then they've got stricter rules, like when they play out they're only allowed to go to a certain point, not to the grass because that the road and it gets quite busy, they're not allowed past that fence, they are not allowed in people's houses without telling me, not allowed to go anywhere else without telling me, guidelines like they're supposed to put shoes away, things like the Xbox and they've got laptops, they are not allowed to add people that they don't know, and we are just dealing with that stuff as we are moving along, things like they have to brush their teeth every night before they go to bed, when they get up in the morning, they have to change their pants, socks and put their uniform on, do their face and teeth, brush their hair, I suppose they're just guidelines. At first it was like trying to get them to brush their teeth at night was horrendous, smallest things, you know, now it's just a given, they are straight up, they don't argue going to bed any more, there's no fighting it.

Foster carer:	It's been just as much a struggle for me as it has been for them three, I think that's probably helped all of us.
Marina:	So, it's like you can empathise with them because you're also going through a transition?
Foster carer:	Going through the same thing, yeah, yeah, so we're kind of growing together I expect.

Carer support with learning

Callum's carer and school staff highlighted how Callum now receives support with his learning at home. School staff expressed how dedicated his carer is and how she supports him with reading by listening to him and making corrections and she supports him with his homework; he has therefore progressed in his reading. His carer added that they read together nearly every single day and he now loves reading and has started to 'get into it' by using different tones and acting it out. She believes that this has impacted on his speech and language skills, including his vocabulary and therefore his confidence in talking. She also teaches Callum and his siblings topics such as the months of the year.

School staff:	The carer that he's with is very dedicated with their learning, she's keen for them to read at home. Homework as well, was never completed prior to him going into care, but homework is completed now, and with evidence of adult support.
School staff:	Callum probably went from taking his reading book home and reading it because he knew we wanted him to read, to now, that being more supported, so he's progressed in his reading, because he has got that adults support, listening to him read making corrections.

Foster carer:	*Reading more, so would make a big difference on his confidence for his speech, and obviously with his speech, he's having to learn with words, you know, so people are understanding him now, because he's reading more, he's able to say different words. He wasn't reading at home so it would only be at school.*
Foster carer:	*He's always wanting to read, we read in the morning, drop the oldest one off, she goes to senior school, so we drop her off and then we sit outside for about 15-20 minutes and then the 2 boys will read.*
Foster carer:	*We're reading nearly every single day and he will just sit, and he loves reading and he will keep reading and reading. He tends to pick books like cartoony type books where they have speech bubbles and you can hear him starting to get into it and the different tones in, acting it out a little bit.*
Foster carer:	*He just gets excited about stuff, the last couple of days, they didn't know months of the year so we've been singing that through on the way to school, and I'm like keep going over and over in your head what it is, so hopefully now that will stick. It's just silly little things like that, they would've gone through life…*

Theme 3: Consistency

Callum's carer and school staff have shared that consistency seems to be a key factor in contributing to Callum's positive effects since the pandemic. By continuing to attend school during the school closures, Callum had a consistent safe place with routine, structure, and access to interventions for his social and emotional wellbeing and speech and language therapy from consistent adults. His carer has also provided consistency in terms of routines and boundaries.

School staff:	*Callum has always loved school, I think that's probably always been his safety, his safe space, so the fact there was still a space for him in lockdown, they were coming, they were definitely going to be coming.*
School staff:	*I think the reason why the gaps closed (between him and his peers) (…) him being able to access his education still throughout the pandemic. We've managed to keep these interventions in for him as well, so he's still been receiving SALT, he's still been receiving pastoral support.*
Foster carer:	*We did have another lockdown (in January), but they were still able to come to school which was really good because it still gave them the structure.*

Theme 4: Greater opportunities

All participants indicated that Callum has had greater opportunities since the start of the pandemic period. His carer shared that the pandemic was a 'massive opportunity' and 'his world opened up'. All participants indicated that Callum has had more opportunities for hobbies, social activities, and resources, such as football, playing Xbox, playing outside with different children in

the local neighbourhood, seeing his school friend outside of school, and having a laptop, so that he could access online learning if he had to isolate. The social opportunities have supported Callum in making friends and increasing his confidence.

Callum and school staff shared how Callum had more opportunities for enjoyable activities during the school closures, including outdoor activities.

Foster carer:	*But yeah, I think covid was a massive opportunity for the children, I think it was good for them, it really was.*
Foster carer:	*It's like having his world opened up, so it was quite small to start with and now it's just the world is his oyster, he wants to be this really famous footballer.*

Enjoyable activities in school

Callum and school staff shared how Callum had more opportunities for enjoyable activities during the school closures, including outdoor activities. Callum added that he enjoyed doing P.E., art and watching you tube.

Marina:	*So, I was wondering about school, what did you like about school? What was it like when you came in (during the school closures)?*
Callum:	*(We did) art, P.E., it was fun, I got to play, it wasn't that noisy, we didn't have to do that much work (…), we watched you tube on iPad.*

School staff:	*We were outdoors a lot, first lockdown was so nice weather, the kids were outside, and that automatically boosts obviously how they're feeling.*

Social opportunities

Callum's carer and school staff highlighted how Callum has had more social opportunities since the pandemic. His carer shared how he has been able to play outside with new children in the local neighbourhood, which has enabled him to make friends and has increased his confidence. School staff highlighted how Callum has been able to see his school friend outside of school, which has strengthened their friendship.

School staff:	*But again, if you think about the aspects of home there, I'm sure he's seen him outside of school, so that will make that friendship stronger.*
Foster carer:	*I think it's just normal every day playing about, you see, at my house they can actually go outside and play because there's a big green area, so that really boosts their confidence then because they're playing with new children, they're making friends, I mean they were out playing in the snow, making snowmen, whereas they weren't able to do that before.*

<u>More hobbies and resources</u>

All participants indicated that Callum has had more opportunities for hobbies and resources. Callum shared how he is playing more football and Xbox, and his carer added that as the lockdowns encouraged people to go outside more, Callum has engaged in more outdoor activities, such as playing outside and going to the park. School staff highlighted how Callum was given a laptop from the local authority, so that he could access online learning if he had to isolate.

School staff:	*They had laptops from local authority that went home, so they could access the school's online learning platform, so if they ever did have to isolate during that time, yes, they had a place in school, but if they had to go home to isolate, that whole transition was seamless because they didn't miss out on that learning, it just continues at home. And they do work on that platform at school sometimes, so it wouldn't be alien to them when they did have to isolate because they knew how to log on.*
Foster carer:	*And then obviously Callum loves his Xbox, he got that for Christmas.*
Foster carer:	*He loves playing out in the playground, playing football, the amount of shoes we went through with him playing football, getting holes and ripping them.*

Marina:	*When did you start playing football? Since the pandemic, since some time in year 4?*
Callum:	*Yeah (…) In November I'm going to go football training.*

Foster carer:	*I actually think lockdown was very good for them because obviously they came to me and we still did things, we went to parks and stuff like that, that they didn't have before, so I suppose it's being able to play out.*
Marina:	*So, the focus on going outside as opposed to staying in?*
Foster carer:	*Yeah, I think they more had a lockdown before lockdown, if you know what I mean, I think with lockdown, it makes people want to be outdoors more, being out in the fresh air, you know, I know it did for me.*