



A briefing paper for Playgroups, Children's Centres, early years activity providers and venues

The last year has been a difficult and confusing time for those running early years provision. Government guidelines have often been difficult to understand and hard to apply. For some, the additional demands have been overwhelming. The result has seen an uneven national picture, with some groups and facilities staying open, others closing temporarily, and many shutting permanently.

We are a campaign group of parents who believe that children's interests should be put first in any decision impacting them. Children aged 0-5 years have been disproportionately affected by the pandemic response whilst the Department for Education have made clear that 'the risks within early years settings for children and staff are lower because young children are generally less susceptible to the virus and play a lesser role in transmission'¹.

There is a building consensus among children's health experts that play and social interaction are vital for under 5s. We also know that parent and child groups can be a lifeline for parents who have suffered from increasing loneliness, isolation and mental health issues since the start of the pandemic.

We hope that the Government's 'Roadmap' now gives providers/group leaders the opportunity to re-open these vital services from April 12th, 2021.

What the law says:

The Government's '[Covid 19 Response Spring 2021](#)' ('Roadmap') document sets out the next steps for easing lockdown restrictions. The document makes clear that **Parent and Child groups can reopen (with up to 15 attendees, not counting under 5s) outdoors from 29 March and indoors from 12 April. From 12 April all children's activities will reopen as will libraries, community centres and outdoor attractions.**

We know that one of the key questions for early years providers is **how to reopen**. It is our firm belief that groups and activities for children should not only follow guidance on covid-19 safety measures but also take account of the needs of children.

The key piece of [guidance](#) (updated on 15 March 2021) covering **playgroups, children's centres, early years activity providers and venues** requires adherence to the following:

- 15 participants - children aged under 5 are not included in the 15-participant limit and nor are staff
- Social distancing between adults who do not live together and who are not in the same bubble
- Good hand hygiene; participants should clean their hands as they arrive and as they leave
- A risk assessment is completed prior to groups and activities taking place
- Groups and activities take place separately to areas being used at the same time by registered children attending an Ofsted registered setting
- The areas used are well ventilated (see section on ventilation)
- Any rooms used by groups are cleaned after each use
- A record of all visitors to the setting is kept
- The 'System of Controls' is followed.

There is no requirement for children or adults to wear masks (although the 'System of Controls' does state that where social distancing isn't possible, for example in corridors, adults should wear masks - unless exempt).

There is no requirement for children to social distance when attending groups and there is no ban on sharing toys.

These regulations are taken from the Government Guidance available at this link: [Actions for early years and childcare providers during the coronavirus \(COVID-19\) outbreak](#)² and focus on the section *Parent and child groups*, defined as 'Groups organised by a business, a charitable, benevolent or philanthropic institution, or a public body and that meet in community spaces, such as in a place of worship, community centre or library'.

The Early Years Alliance have also compiled a [useful summary of the guidelines and FAQs](#).

Why do the early years and these groups/activities matter?

Those working with young children will already know that physical touch, play, and social interaction are essential to a young child's cognitive, social-emotional, and linguistic development.

Research suggests that age 0-5 years is a critical period in which skills and brain structures rapidly develop, setting foundations for the future. Beyond those five years, even the presentation of similar opportunities do not enable the same developmental outcomes³. Therefore, delays in the provision of opportunities such as being able to play, socialise and touch, need to be very carefully considered.

Experts in child development and child psychiatry agree that children are experiencing multiple harms as a consequence of play deprivation.

Dr Helen Dodd, Professor of Child Psychology (University of Reading): 'For social and emotional wellbeing, children need opportunity for all types of play, including play with their peers and physical outdoor play, both of which have been and, to some extent, continue to be restricted'.

We are particularly concerned about the adverse effect that current restrictions and continued closure of many parent and child groups is having on the following areas:

Core Skills

Specifically, in early years childcare settings, there has been a noted decline in communication, literacy, and language skills across the ages since the start of the pandemic. A recent Ofsted report highlights difficulty in phonetics as a direct impact⁴. In some cases, developmental regression has been noted.⁵

Recent studies on mask-wearing have highlighted the impact on communication and empathy and point to heightened anxiety and stress for the mask wearer and those trying to communicate with a mask wearer⁶. Some authors state that up to 93% of all human communication is non-verbal⁷, emphasising the importance of facial expressions. Masks cause an impairment of non-verbal communication via the blocking of facial expressions and difficulties in areas such as emotion recognition⁸, which are crucial for multiple aspects of social interaction.

Masking of facial expressions can cause distress.⁹ Covering the face can lead to a sense of social isolation, anonymity and changes in social dynamics such as increased distrust and aggression¹⁰.

Developing healthy relationships

Developing healthy attachments is widely accepted as important for long-term positive psychosocial outcomes¹¹. This development relies upon processes such as learning to recognise loved ones, reading and mirroring facial expressions, and hearing intonation of voice. It has been suggested that mask-wearing by caregivers is potentially detrimental to the neurodevelopment of babies and crucial early bonding^{12,13}. This phenomenon is likely to remain relevant well past infant development, as human interaction and attachment develop throughout life.

Fear

An increase in fearful messaging, and therefore levels of individual fear, will reduce children's sense of safety, impacting their ability to thrive and learn¹⁴. Measures such as distancing, increased hand washing, the use of temperature guns, signs and symbols are all contributing to a child's sense of a world in which other people and themselves are unsafe. This sense of fear and unease is likely to be exacerbated by the lack of consistency, routine, and predictability of everyday life, which would otherwise provide a sense of stability and safety. This is even more important for vulnerable children.

Long-term harm

Although there are already evident short-term outcomes demonstrating the harms these measures are causing to children, it is crucial to recognise that many of the detrimental outcomes from the topics discussed will not yet be in a form which can be easily reported. This does not mean they are not occurring. For example, children develop beliefs about themselves, others and the world based on their environment and interactions. Without specific intervention, these beliefs stay with people throughout their lives.

Beliefs about people being dangerous and the world being a scary place often lead to negative long-term psychological outcomes¹⁵. The longer the referenced measures are in place for, especially in child-focused settings, the increased likelihood of occurrence and severity of negative psychosocial consequences.

To address these potential short and long-term harms, we are urging groups to follow the guidance as set-out by the government. Additionally, to ensure risk assessments actively seek to facilitate free play and the sharing of toys, we also call upon groups to remove any mandate on parents and staff wearing masks during sessions.

Please note, the rules for Parent and child groups, as set out above apply across all venues in which early years groups are held*, overriding venue-specific guidance.

*not in private homes

References

- ¹[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/963639/DfE_Evidence_summary_COVID-19 - children_young_people_and_education_settings.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/963639/DfE_Evidence_summary_COVID-19_-_children_young_people_and_education_settings.pdf) (p.19)
- ²<https://www.gov.uk/government/publications/coronavirus-covid-19-early-years-and-childcare-closures/coronavirus-covid-19-early-years-and-childcare-closures#parent-and-child-groups>
- ³ Pallier, 2007
- ⁴ Ofsted, October 2020. Covid 19 Series Briefing on Schools October 2020
- ⁵ Ofsted, October 2020. Covid 19 Series Briefing on Schools October 2020
- ⁶ Saunders, Jackson and Visram (Nov 2020), 'Impacts of face coverings on communication: an indirect impact of COVID-19' <https://www.tandfonline.com/doi/full/10.1080/14992027.2020.1851401>
- ⁷ Mehrabian, A. (1971). Silent messages. Belmont: Wadsworth Pub. Co
- ⁸ Carbon, C. C. (2020). Wearing face masks strongly confuses counterparts in reading emotions. *Frontiers in Psychology*, 11, 2526.
- ⁹ Giusti, L., Provenzi, L., & Montiroso, R. (2018). The Face-to-Face Still-Face (FFSF) paradigm in clinical settings: Socio-emotional regulation assessment and parental support with infants with neurodevelopmental disabilities. *Frontiers in Psychology*, 9, 789.
- ¹⁰ <https://www.tandfonline.com/doi/abs/10.1080/00224540309598458>
- ¹¹ Child Care and the Growth of Love. John Bowlby. 1953. Pelican Books, England)
- ¹² Sullivan R., Perry R., Sloan A., Kleinhaus K., Burtchen N. Infant bonding and attachment to the caregiver: insights from basic and clinical science. *Clin. Perinatol.* 2011;38(4):643–655
- ¹³ Green J., Petty J., Bromley P., Walker K., Jones L. COVID 19 in babies: knowledge for neonatal care. *J. Neonatal Nurs* 2020;26(5):239–246
- ¹⁴<https://developingchild.harvard.edu/wp-content/uploads/2010/05/Persistent-Fear-and-Anxiety-Can-Affect-Young-Childrens-Learning-and-Development.pdf>
- ¹⁵ Beck, A.T. (1979) Cognitive Therapy and the Emotional Disorders. New York: Penguin.

About UsforThem

UsforThem believe children and young people are the pandemic's forgotten victims. We are people from all walks of life who care about children. We are parents, grandparents, teachers, paediatricians, psychologists, lawyers – and many more besides. We have tens of thousands of members across the UK. We are independent, apolitical, keen to work with others who have the same concerns and only interested in putting the needs of children first.



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