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**The experiences of children and young people with special
educational needs and disabilities during the COVID-19
pandemic: A Reflexive Thematic Analysis.**

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Thesis submitted to the University of Nottingham for the degree
of Doctor of Applied Educational Psychology May 2022

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Abstract

COVID-19 (SARS-CoV-2) was declared to be a pandemic and health emergency by the World Health Organisation (WHO) in March 2020. It led to a series of worldwide 'lockdowns' where people were instructed to stay at home. Many children and young people (CYP) did not attend school during this time and COVID-19 has been described as an unprecedented disruption to education in the UK (The Nuffield Foundation, 2020). It is thought that CYP are likely to experience the impacts and consequences of the COVID-19 pandemic for many years to come (Thompson et al, 2021) and there is deepening concern about the shorter and longer-term impacts for those already identified as vulnerable, such as CYP with special educational needs and disabilities (SEND) (McCluskey et al, 2021). Every CYP has the right to express their views regarding all matters that affect them (UN General Assembly, 1989), however, as the world has responded to COVID-19 and extensive research is carried out, there is a notable lack of studies hearing directly from CYP about their experiences of COVID-19. To be able to understand a particular phenomenon within a vulnerable population, the perspectives of those with direct experience need to be listened to and understood (Prunty et al, 2012). The current research therefore asked the question: how are CYP with SEND experiencing the COVID-19 pandemic? It aimed to listen to, interpret and report the experiences of CYP with SEND during COVID-19. A qualitative methodology was utilised, and six semi-structured interviews carried out with secondary school aged participants, all with SEND. The data gathered was analysed and interpreted using Reflexive Thematic Analysis (TA) and findings presented according to this approach. The findings illustrated four main themes: government restrictions, learning in a pandemic, relationships and the 'new normal'. These are presented and discussed in light of theory, research and literature. Methodological considerations are addressed, particularly regarding the data collection process and the sample limitations. Findings are discussed in relation to the research goal which was to provide information and develop understanding for educational services, settings and communities about how best to support CYP with SEND during and following the COVID-19 pandemic. The potential implications for education settings, Educational Psychologists (EP), Local Authorities (LA) and the wider government are acknowledged. The findings also illuminate a number of suggestions for future research.

Acknowledgements

There are a number of people I would like to extend my thanks to for their continual support during my research project and throughout my doctoral training journey.

Firstly, to the young people who took part: thank you for giving your time and energy and sharing your experiences with me, you have been fundamental to this research. Thank you also to the parents/carers and the school staff who enabled me to meet with your amazing children/pupils.

To my university tutors, Dr Sarah Atkinson and Dr Victoria Lewis, thank you for your academic guidance and also for your emotional support, particularly through the difficult times in lockdown whilst home-schooling my children and writing research proposals. This would have been very difficult to do without your empathy, understanding and calming influence. Thank you also to the wider tutor and admin team at the university who have taught, guided and supported me in this journey.

To my cohort, you are all wonderful, and I feel privileged to have shared this vessel with you. Thank you for your friendship, humour and endless support.

To my Educational Psychology Service colleagues for facilitating my research and being a continued source of knowledge, encouragement and hope.

To my friends and family, for your love and support and for always listening and believing in me. Thank you for encouraging me to keep on going even when I did not believe I could. A special thank you to the sunshine ladies for always being there.

Finally, to my husband and children, thank you for your love and understanding and waiting so patiently for me. You are my greatest motivation. I love you all and cannot wait to have more time to spend together again.

1 Introduction

1.1 Focus and rationale for research

Children and young people (CYP) are the experts of their own experiences and offer true insight (Greig et al., 2013), however, CYP with special educational needs and disabilities (SEND) voices are often not heard within research (Harding & Atkinson, 2009; Franklin & Sloper, 2009; NFER, 2020). COVID-19 may likely further increase and intensify vulnerability for marginalised groups such as CYP with SEND (Scott, McGowan & Visram, 2021) and it is apparent that the views of CYP are limited in research being carried out into COVID-19, particularly those with SEND. The current and future provision and policy in education and for the eventual achievements and outcomes for CYP with SEND can be better planned for and understood by hearing and exploring their experiences during COVID-19.

1.2 Research approach

Semi-structured interviews were conducted with six young people aged between 11-17 years of age, all with SEND. The study adopted a Reflexive Thematic Analysis (TA) approach which captured and interpreted patterns across the data set to develop themes (Braun and Clarke, 2022). I felt that this approach would capture the participants' experiences of COVID-19 and allow them to be reported in a worthwhile and systematic way to develop the knowledge of others (Taylor & Ussher, 2001). Reflexive TA asks that I position myself within the research and recognise how my own views, experiences and feelings influence the research process and interpretation of data (Braun & Clarke, 2022). This will be carried out through outlining my positionality and motivation for the research in the following two sections. Both personal and functional reflexivity are explored in further depth in methodology (chapter 3), including how this was accounted for in the data analysis (section 3.6). Reflexivity boxes are provided throughout the findings (chapter 4) and retrospective reflexivity is discussed in chapter 5 (section 5.5). Additionally, my research journal allowed me to reflect on and interrogate my expectations, assumptions and research practices and the emotions and challenges I encountered. An example of a research diary extract can be seen in appendix 14.

1.3 Personal and professional interest and motivation

I am Trainee Educational Psychologist (TEP), carrying out a placement within a Local Authority (LA) Educational Psychology Service (EPS). Through my previous professional experience of working in both mainstream and special schools, I was already aware of how CYP with SEND are marginalised and often not listened to. Furthermore, I have always been driven by the importance of gathering the views of CYP and ensuring that their voice is heard, particularly those whose views may not often be sought, such as CYP with SEND. This feels influential in my life and in my role as a trainee EP where I regularly use a range of different approaches for eliciting the voices of CYP. My knowledge and experience have allowed me to build rapport and carefully consider how to word questions to support CYP through the process of the interviews in this research. Working previously with CYP with communication difficulties, I was able to ask questions in a way that made participants feel comfortable and express as much as possible.

My interest in COVID-19 arose out of my own experience of it whilst studying for my doctorate (it was the spring term of my first year when we first went into lockdown). I was aware of the struggles my own children faced with not going to school during lockdowns and this motivated me to find out more about how CYP with SEND were experiencing it. Additionally, I wanted to carry out research that had relevance on a wider level, including within my placement EPS, the wider LA and at a national level. My EPS and LA were invested in this research as they are looking for ways to continue to support CYP with SEND, their schools, families and communities during and following COVID-19.

1.4 Statement of positionality and researcher relationship with CYP with SEND

I have worked for over 20 years with CYP in both mainstream and special school settings. Before commencing educational psychology training, I was a teacher for children with complex SEND and a deputy head in a special school. I consider CYP with SEND to be marginalised in society, I hold great empathy respect for them and strive for a more inclusive education system and society. Before commencing my EP training, I was part of a team who developed one of the first inclusive learning campuses in the UK in Tottenham, London. I witnessed how a special school and mainstream school could be brought together so that CYP, with both those labelled as

SEND and those without could learn and flourish together. I experienced how, although challenging, it is possible to break down existing barriers created by a historical system of segregation. I therefore personally found using the term SEND difficult in this research as I was aware that I too may be further marginalising CYP who have been categorised as having SEND through making them a homogenous group for the purpose of this research. My rationale for using the term SEND and for focussing on the CYP I interviewed was that they have already been marginalised and labelled by a system I do not agree with and one that I hope to help change in my future role as an EP.

I recognise my position in this research as a white British 40-year-old female and although I have children myself, none have SEND so I am drawing on my professional rather than personal experience. However, it can be argued that special needs teachers develop close relationships with CYP and their families that feel personal in nature.

Braun & Clarke (2022, p14) state that research cannot be a “*value-neutral activity*”. Qualitative research such as this can be viewed as having social justice aims and therefore being enmeshed with left or liberal politics (Barnes, 2003). Throughout the current research I was aware of my own political stance and critical view of the current government and their handling of the COVID-19 pandemic. Additionally, I recognised my emotional thoughts, feelings and criticism towards the current government based on my previous experience as a teacher and working in a special school. I have witnessed the extent to which vulnerable CYP I have worked with have not benefited from austerity. Furthermore, I have professionally and personally experienced the feeling of the government not taking care of vulnerable and marginalised groups in society. I recognise that I hold the government responsible for the difficulties within the education system relating to inclusion and funding. Therefore, there may be times where the current research takes a political tone.

1.5 Overview of thesis

Chapter 1 – Introduction – will position the researcher and the research presented here in terms of its context, aims and professional relevance.

Chapter 2- Literature review will present the background information and research regarding COVID-19, with a focus on CYP, education and SEND. It will then move on to address the importance of gathering the views of young people. A systematic literature review of research that has explored young people's views about their experiences of COVID-19 will then be presented, which will lead onto the rationale for the present research.

Chapter 3-Methodology will detail the methodological approach adopted to carry out the present research, including the underlying philosophical position. The data collection and analysis procedures will be addressed, including ethical considerations and quality of the research.

Chapter 4- Findings- will present the findings of the Reflexive Thematic Analysis.

Chapter 5- Discussion - will discuss the findings in relation to the previous research and theory. Methodological considerations will be acknowledged before addressing potential implications for practice and suggestions for future research. A reflection upon the distinct contribution of the research is given.

Chapter 6- Conclusion- will conclude with a summary of the findings of the research.

2 Literature Review

2.1 Introduction

The purpose of this chapter is to provide an overview of research and pertinent information relating to COVID-19, with a focus on children and young people (CYP) with special educational needs and disabilities (SEND). The chapter will begin with contextual information about COVID-19 including the UK government response to it and consideration of the impact it has had on CYP and education. The focus will then move to the consideration of CYP with SEND during COVID-19, including the political and educational context of SEND over recent years. A discussion then follows about CYP with SEND and the implications for their mental health and well-being during COVID-19. Psychological literature, including three psycho-social frameworks which are relevant to COVID-19 and the psychological experience of it are then presented and discussed. Following this, information and a rationale are then provided for carrying out research utilising CYPs views with a focus on those with SEND. A systematic literature review is then presented to explore what current UK research tells us about CYPs views and experiences of COVID-19. Finally, the findings from the literature review will then lead to the rationale for the present research.

2.2 Background to COVID-19

The World Health Organisation (WHO) announced in January 2020 that a novel coronavirus had been identified, this virus is referred to as SARS-CoV-2, and the associated disease as COVID-19. Since WHO announced COVID-19 to be a pandemic in March 2020, the virus has left hardly any nation untouched (van Herwegen et al, 2020). As of 8th April 2022, 494,587,638 cases of COVID-19 have been diagnosed globally with 6,170,283 deaths. The UK has the sixth largest recorded number of COVID-19 deaths in the world, currently reported as 169,412 deaths with 21,508,550 confirmed cases to date (WHO, COVID-19 Dashboard, 2022). COVID-19 presents with a range of symptoms of varying severity and is primarily transmitted between people through respiratory and contact routes. Transmission risk is highest where people are in close proximity, therefore, precautions to prevent human-to-human transmission are being taken for both suspected and confirmed cases (WHO,

2020). The continued transmission of COVID-19 and the subsequent health emergency led to an unprecedented worldwide series of 'lockdowns', which have varied in stringency between and within countries. Lockdowns are described as government-imposed restrictive measures on work, education, leisure activities, business, and capacity for in-person social interaction (Morelli et al., 2020). In the UK, on 23rd March 2020, in response to COVID-19 and the need to protect vulnerable people and to not overwhelm the National Health Service (NHS), the UK Government imposed a population wide lockdown, including physical and social distancing measures (Cabinet office, 2020). Lockdown measures have been described as substantially affecting people's daily lives globally (Prati & Mancini, 2021) and have resulted in major social change, with subsequent significant consequences as to how people experience the world around them (Ogden, 2020; van Herwegen et al., 2020). Figure 1 illustrates a timeline of UK government COVID-19 lockdowns between March 2020 and June 2021.

Timeline of UK government coronavirus lockdowns



Source: Institute for Government analysis.



Figure 1. Institute for analysis (2021) Timeline of UK government COVID-19 lockdown

2.3 Children, Young People (CYP) and Education during COVID-19

During the three national government imposed COVID-19 UK lockdowns between March 2020-April 2021, schools were closed, apart from to key worker and vulnerable children (definition in section 2.4). Table 1. provides information on the key dates and brief context of lockdowns and school closures during the COVID-19 pandemic. Figure 2. Shows the national average of attendance in state funded schools and percentage of schools open as reported weekly by DfE.

For CYP who did not attend school during lockdowns, schools attempted to provide on-line learning and support for CYP and parents/carers, with mixed reports of perceived success (van Herwegen et al., 2020). The Nuffield foundation (2020) stated that the closure of schools to most CYP was an 'unprecedented disruption to education'. ASK (2021) reported, in May 2021, that following lockdowns CYP had 4-5 months' worth of 'lost learning' as a result of COVID-19 with an even greater loss for pupils living in disadvantaged areas. In addition, the Education Endowment Foundation (EEF) (2022) have provided an analysis of research around the impact of changes to practice in schools due to COVID-19; they report that there is growing evidence about the impact of school closures on learning outcomes. The research shows a consistent pattern that pupils made less academic progress compared with previous year groups and that the large attainment gap for disadvantaged pupils seems to have grown (disadvantaged pupils are defined by the DfE (2019/20) as being those eligible for free school meals within the last six years and those looked after by the local authority). A systematic review by Hammerstein et al (2021) also provides evidence of eleven international studies that reported the negative effects of school closures on pupil's achievement, particularly younger pupils and more disadvantaged pupils. Viner et al (2022) have recently reported on the harm school closures resulted in for CYP and questioned if school closures were an effective and proportionate response to the pandemic.

In addition to 'lost learning' research also suggests that the interruption to school and educational activity due to COVID-19 alongside other factors such as social isolation, family stress and uncertainty of the future exacerbated the emotional difficulties that

CYP faced at critical times in their emotional development (United Nations, 2020). Cluver et al (2020) stated the importance of protecting CYP through carrying out research into understanding how best to support and strengthen parents/carers and families during this time. Educational psychologists (EPs) have been providing research, training and advice to schools and families throughout COVID-19 about how best to support pupils learning and mental health, working systemically with schools to support CYP back following lockdowns (for example, Nottinghamshire EPS, 2020, 'returning to schools a graduated response to supporting emotional well-being' document).

Table 1. Key dates in education regarding COVID-19 (information from Timmins, 2021, Institute for Government)

Date	Education situation	Other relevant context information
Late February 2020	Schools start sending home pupils who have been in Italy for half term. Some close for a day for deep cleans as cases emerge.	WHO (2020) declare COVID-19 to be a public health emergency
18 th March 2020	Schools and other childcare and education settings close save for vulnerable CYP and keyworker children.	23 rd March first national lockdown begins (see Cabinet office, 2020 reference for further details).
April 2020	Difficulties getting out laptops and free school meal vouchers	
24 th May 2020	Prime minister announces which school years will return on 1 st June. Includes youngest children and Year 6. Not secondary age CYP.	
9 th June 2020	Government announces it will not be possible to get all CYP back to school by summer as once hoped.	16 th June Government U-turns on free school meals being withdrawn over the summer holidays.
September 2020	School pupils return	Test and trace overwhelmed and not enough tests in schools 30 th October- Prime minister announces month long lockdown to 'save Christmas'.
14 th December 2020	Mayor of London and group of Headteachers call for learning to go on-line in schools with high infection rates. Government threatens legal action to schools closing.	8 th December first UK person receives COVID-19 vaccine.
18 th December 2020	Government announces that secondary schools will teach on-line for first week of school after Christmas holidays to allow for mass testing in schools.	19 th December – one third of England put into highest level of restriction. Christmas is 'cancelled' by Prime Minister.
1 st January 2021	Government announces primary schools now to be closed too until at least 18 th January 2021	
4 th January 2021	Primary schools re-open in 100 councils but in evening PM announces all schools closed until at least 22 nd February.	22 nd February-Government releases 'road map out of COVID-19' to begin on 21 st June 2021
8 th March 2021	Primary schools re-open and phased re-opening of secondary schools. Secondary school pupils and staff to continue testing and wearing masks.	14 th June- lifting of restrictions postponed due to new variant of COVID-19. 19 th July- lifting of most COVID-19 restrictions

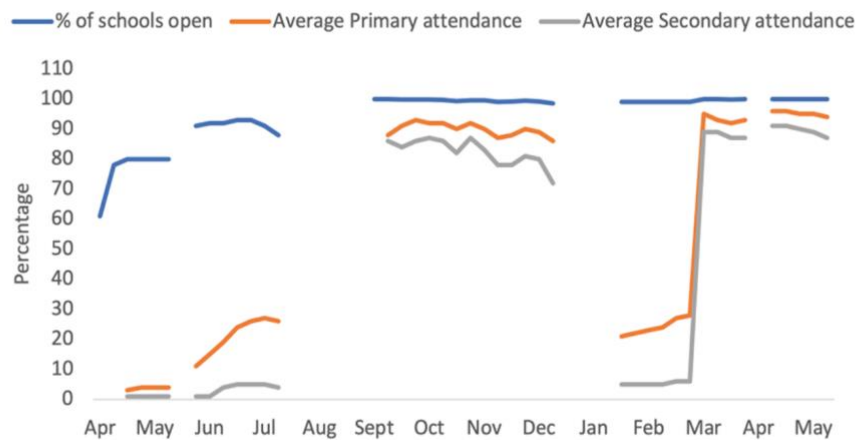


Figure 2. DfE (2021.) National average state funded school attendance rates and percentages of schools open as reported weekly by DfE from April 2020-May 2021.

2.4 CYP deemed to be ‘vulnerable’ during COVID-19

Vulnerable CYP during COVID-19 and lockdowns were defined by the government as those who were; supported by social care, looked after by the local authority, disabled and/or with an Education Health Care Plan (EHCP)¹. This definition did not include those receiving SEND support² without an EHCP (this accounts for approximately 1.1 million CYP in England). Therefore, many CYP with SEND were, like others, not able to go to school during the national lockdowns. Furthermore, possibly due to the fear of transmission of COVID-19 and/or staffing issues/risk assessments during COVID-19 lockdowns it is reported that many eligible children considered to be vulnerable did not attend school during this time (Ashbury et al., 2020, Ofsted, 2021). It was stated in a review, carried out by Ofsted (2021), that many parents/carers reported that during the first COVID-19 lockdown between 23rd March 2020 and 17th July 2020, CYP with SEND (both those with an EHCP and those without) had not been given any education at all, this meant that for many CYP with complex health needs, access to health

¹ An EHCP is a legal document which outlines the support a CYP will receive to meet their special needs and achieve positive outcomes across education, health and social care.

² SEND support is for CYP who have a learning difficulty or disability which calls for special educational provision to be provided.

services such as physiotherapy and/or speech and language therapy also ceased (Ofsted, 2021). This was supported further by ASK (2021) who carried out research between April and June 2021 and found that due to a deterioration in well-being, increased needs and difficulties with on-line learning, CYP with SEND experienced substantial losses in both academic progress and their wider development.

2.5 Background and political context for CYP with SEND

When considering the impact of COVID-19 on CYP with SEND it is important to discuss the background and context of SEND. SEND is a broad concept, which is defined as CYP who have significant difficulties with learning and need additional support from schools (DfE 2019/20a). One in six CYP are reported to have SEND, with most (84%) educated in state-funded primary and secondary schools (DfE, 2019/20a). The vast majority (91%) of pupils with SEND support attended state-funded mainstream schools. In contrast, just under half (49%) of pupils with an EHC plan attended state-funded mainstream schools, and 44% attended special schools (DFE 2019/20b). The DfE (2019/20a) also reported that;

- There has been a year on year reported increase in the number of CYP in state funded special schools/pupil referral units/alternative provision since 2006.
- CYP identified as having SEND are disproportionately from disadvantaged backgrounds (disadvantaged backgrounds is defined by the DfE as CYP eligible for free school meals within the last six years and CYP looked after by the local authority). More boys than girls are identified as having SEND. Boys make up 73.1% of all CYP with an EHC plan and 64.6% of CYP with SEN support.
- The most common type of primary need for CYP with an EHC plan is Autism. For CYP receiving SEN support, it is speech, language and communication needs.

The Lamb Inquiry (2009) called for a 'radical overhaul' of the SEND system due to children and family's needs not being met. A legal duty is set out in the Children and Families Act (2014) and the SEND Code of Practice 0-25 years (2015) policy provides statutory guidance for regarding the care and education of CYP with SEN and, set out

some key principles, stating the importance of 'co-production' with CYP and their families. Alongside this, there was a strong emphasis on different services such as education, health and social care working in a more joined up way to meet CYPs needs. The SEND Code of Practice stated that CYPs needs should be identified earlier, and that support would continue until the age of 25. A green paper looking into SEND is due in spring 2022.

The SEND inspection review (Ofsted, 2021) suggested that many local areas have struggled to implement the reforms successfully. Common weaknesses identified included:

- A lack of joint commissioning and unclear accountability for services and provision.
- No co-production or co-production that was not working properly.
- Poor-quality EHC plans.
- Problems with the identification and assessment of CYPs needs.
- Lack of ambition for CYP with SEND.
- Attendance at school for CYP with SEND remained below national averages and exclusions were often high.

2.6 Background and political context of SEND during COVID-19

Due to the long-standing issues in the SEND system that CYP and their families may have already been experiencing (detailed in section 2.5), it has been suggested that COVID-19 both highlighted and intensified these issues, deepening the effects that they have on CYP with SEND (Ofsted, 2021). There is evidence to suggest that COVID-19, and our response to it, may affect CYP with SEND and their families disproportionately to those without SEND (Ashbury et al, 2020). This is supported by research which illustrates how CYP with SEND, as a group, are much more likely to have risk factors present and protective factors absent (PHE, 2019; Anna Freud, 2020). CYP with SEND are reported to have poorer health and die younger and be three times more likely to live in poverty and claim free school meals than those without SEND (Emerson, 2012; PHE, 2015; PHE, 2019). CYP with SEND are thought to face multiple challenges, as they are more likely to witness abuse, experience family disharmony/breakup and face death and loss (Norfolk CC, 2017; Anna Freud Centre, 2020). Additionally, CYP with SEND are also considered to be at particular risk of

displaying behaviour that challenges (Oldfield, 2016), with DfE exclusion data stating that CYP with SEND as a group, make up almost half of fixed or permanent exclusion from schools (DfE 2019). A working paper by the Institute of Education (IOE,2014) found that CYP with SEND are also more likely to be discriminated against and are twice as likely to be bullied (Chatzitheochari, Parsons & Platt, 2014). Furthermore, research illustrates how CYP with SEND experience lower levels of self-esteem and mental well-being and are more at risk of depression/anxiety, suicide and self-harm (Norfolk CC 2017). This information and research allow the current research to consider CYP with SEND to be 'vulnerable' and use this as a term throughout.

A research and analysis report by carried out by Ofsted (June 2021) stated that CYP with SEND, their families and those who work with them have faced significant challenges during the pandemic, these are summarised below:

- CYP with SEND were often not receiving education and some important healthcare, such as physiotherapy which sometimes left CYP immobile and in pain. A lack of speech and language therapy, or communication devices not being available meant that some CYP were unable to communicate properly.
- Social care and health-funded respite provision for families had also not been available. Parents and carers reported frustration and exhaustion, and sometimes of their despair.
- By the time of the third national lockdown in spring 2021, there were even greater concerns from parents/carers with many reporting that life had become more difficult over time. The issues that were raised in the autumn term visits to local areas – such as a lack of health and care provision, inconsistent provision from schools, long waiting times for assessments – continued. Many parents expressed concerns about the now-evident impact of these issues on their children and on their own physical and mental health.
- CYP with SEND, particularly those who had moved to a new school or college in September 2020, were feeling isolated and lonely.

- The way in which areas in the UK responded to the pandemic in providing services for CYP with SEND corresponded with the quality of work with families before the pandemic.
- Families appreciated the support and care given to them by individual professionals. Even where systems seemed to be overwhelmed by the challenges of the pandemic, families praised some individuals from education, health, social care or wider children's services for the great efforts they had put into supporting them. Although more unusual, some parents/carers found that the relative calm of being at home through the first lockdown had been beneficial for their children.

The review concluded by suggesting that CYP with SEND are now even more vulnerable than they were before the pandemic due to delays in identifying needs, missed time learning in school and missed support for physical, health, communication and mental health needs, which, in some cases may have had a permanent impact. The report recommends that as part of the recovery from the pandemic, good-quality universal services for CYP with SEND across education, health and wider children's services is vital. It also suggests that further reform to the SEND system is more urgently needed now.

2.7 SEND, mental health and COVID-19

The evidence in the literature regarding the risk factors that CYP with SEND and their families are more likely to face, may put them at greater risk of experiencing poor mental health, and to be under considerably greater pressure, than less vulnerable families during COVID-19 (McStay et al., 2014; Ashbury et al., 2020; McConnell & Savage, 2015). It has been acknowledged that the social change that occurred due to COVID-19 happened abruptly and may be particularly profound for CYP with SEND. Some social changes are known to intensify existing mental health issues and create new ones, particularly some mental health difficulties known to affect CYP with SEND anyway, such as anxiety in Autism (van Steensel and Heeman, 2017). Not attending school and being at home during lockdowns was described by Ashbury et al (2020) as a uniquely stressful situation for CYP with SEND and their families, particularly as parents were being asked to teach, with normal routines changed and fewer support

networks. However, this study did not include a comparison group of neurotypical children and their families, so it is difficult to know if it was 'uniquely stressful'. Parents of CYP with SEND reported to feeling overwhelmed and concerned about their child's understanding and awareness of the situation (Ashbury et al, 2020). They also described experiencing worry and changes in mood and behaviour as a result of the sudden social changes due to COVID-19. However, a minority of parents/carers reported that COVID-19 has had little impact on their family's mental health and has even led to improvements.

van Herwegen et al (2020) international research (which included University College London from the UK) carried out a COVID-19 response survey for families of CYP with SEND (this included CYP with Autism, Attention Deficit Hyperactivity, Down syndrome and other genetic disorders). The results suggested that parents/carers of CYP with SEND had more concerns and required additional support to cope with the impact of COVID-19. The cause for most concern related to wellbeing with raised anxiety and lack of social connection. The research discusses potential longer-term mental health implications for CYP with SEND and the difficulties they may face with the 'new normal' post lockdown at school with new rules and routines such as social distancing. The research also makes suggestions based on their findings should future lockdowns occur, regarding support for parents/carers in terms of opportunities for them to talk to experts and to be offered respite, especially those who are single parents, keyworkers or have CYP with particularly severe needs. There is also discussion around other concerns parents reported, such as the difficulties they may face in supporting their child if they are hospitalised with COVID-19. It is important to consider that participant bias may have occurred in this research, as when parents volunteer to complete a survey, it could be the case that those participating may be the most adversely affected. The study noted that over half of the two hundred and twenty participants completing the survey had a university degree.

2.8 COVID-19 and psycho-social research, theory and frameworks

Psychologists use psychological theory and research to help understand behaviour and experience, it will, therefore, be helpful to look to psycho-social frameworks as an axis for understanding experiences of COVID-19. It is also possible to look back to previous research that supports psychological understanding of a crisis as COVID-19

has been described as a worldwide health, social and economic crisis (Lupton & Willis, 2021, Unicef, 2021). Previous research has estimated that up to 80% of those affected by a crisis will have mild distress, 20% to 40% a psychological disorder in the medium term, and up to 5% may be left with a long-term problem (Hunt & Greaves, 2017). Existing literature in epidemiology has reported how infectious diseases impact on people psychologically, for example, research carried out over 100 years ago into the Spanish flu pandemic summarised that it is not natural for people to be isolated, and that people often act as a danger to themselves and others (Soper, 1919). More recent research into the impact of previous epidemics, such as the most recent Ebola (Van Bortel et al., 2016) and Middle East respiratory syndrome coronavirus (MERS-CoV) (Al-Rabiaah et al., 2020) illustrate how these diseases adversely affected the quality of life and led to social, psychological, and economic difficulties in the areas of the countries affected. However, Prati & Mancini (2021) stated that drawing definitive conclusions about COVID-19 and the impact of lockdowns from previous research is problematic as the COVID-19 lockdowns have clear qualitative differences from those of previous pandemics, such as the greater degree of stringency, the variable nature of enforcement and the economic impact. Furthermore, as infectious diseases elicit a wide range of emotional responses, the emotional impact will be experienced differently by individuals (Khalid et al., 2016). Research to evaluate the psycho-social effects of COVID-19 has described the severe psychological impact that COVID-19 may be having on society; along with bereavement and health difficulties, it is reported that there has been the fear associated with transmission and potential illness and death, the impact of social isolation and the closure of education and business (Fardin, 2020; Raza, Haq & Sajjad, 2020). Bavel et al (2021) suggest that there are areas of social and behavioural science, such as threat perception, social context and stress and coping that can be used to help support thinking about people's experiences of COVID-19 and how to manage the impact. These areas can be better understood through the following three psychological frameworks which will be discussed now.

2.8.1 Framework 1: Maslow's Hierarchy of Needs (1943)

The Hierarchy of Needs model (Maslow, 1943) provides a visual pyramid structure (figure 3) which states that humans need their basic needs met, illustrated in terms of one's physiological and safety needs (at the base of the pyramid) to be able to

progress towards having their psychological needs met. This, in turn, enables working towards meeting higher level needs such as the self and intellectual achievement.

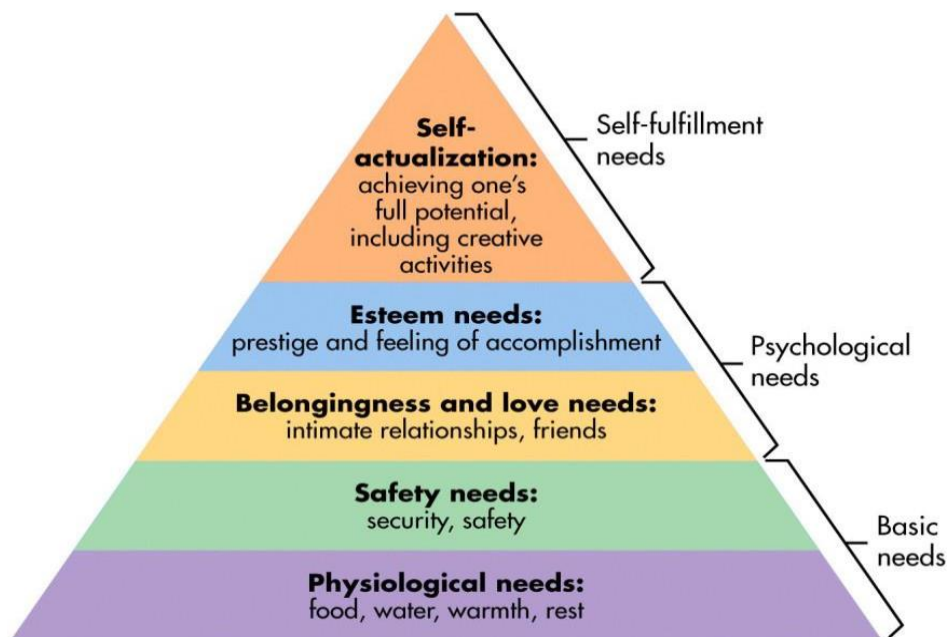


Figure 3. A visual representation of the Hierarchy of Needs (Maslow, 1943)

The following section will now detail how the psychological experience of COVID-19 can be mapped onto the Hierarchy of Needs (Maslow, 1943):

2.8.1.1 COVID-19 and basic needs (including physiological and safety needs)

During the COVID-19 pandemic, research has illustrated experiences of basic needs not being met, with those living in poverty and from lower income families being more at risk. A report by the children's society (2020) highlighted concerns about the impact of COVID-19 on already vulnerable CYP, who, due to schools being closed, were at increased risk of not having their basic needs met, such as being fed through free school meals. It was also suggested that CYP were more at risk of abuse and neglect during COVID-19 without the protection that schools provide. This is supported by

previous research into natural hazards, which showed that the those who are the most disadvantaged economically are most likely to be exposed to the hazard, most susceptible to harm from it and most likely to experience negative outcomes from it (Fothergill & Peek, 2004; Bolin & Kurtz, 2018). Bavel et al (2021) discussed how social inequality is responsible for some people/groups being at greater risk of infection, developing symptoms or dying. For example, those who have to use public transport and those who are in low wage work and cannot work remotely are thought to be more at risk, families in housing where it is more difficult to wash their hands frequently and people who are detained (for example, in prisons or refugee camps) may not have the space to implement physical distancing.

According to Maslow (1943), safety and security is a basic need, it can therefore be argued that feeling fearful threatens this basic need being met. The fear associated with COVID-19 is thought to have resulted in tension and anxiety, which has been reported to have led to psychological disorders such as acute stress disorder, posttraumatic stress disorder, depression and suicide in adults (Prati & Mancini, 2021;Shahyad and Mohammadi, 2020). Furthermore, there is research to suggest that CYP are also showing signs of mental illness (Spinelli et al., 2020., Xie et al., 2020; Jiao et al., 2020; The WHO, 2020a). It is possible that, if COVID-19 is considered a threat and/or trauma then there may be longer term psychological consequences on CYPs wellbeing, as this has been shown to be the case in previous research into traumatic events, such as the terror attack of September 11, 200, USA (Hoven et al, 2015).

Bomber (2020) proposed that due to the sustained presence and collective threat of COVID-19, society may be experiencing '*collective trauma*'. Bomber (2020) suggests that there are similarities between the 7 preconditions of trauma (Van der Kolk 2014), and COVID-19 experiences, which she states are:

- Lack of predictability.
- Immobility, fear and powerlessness.
- Loss of communication and connection.
- Numbing.
- Loss of sense of time and sequencing.
- Loss of safety.
- Loss of purpose.

The theory of collective threat and trauma can be seen as an appealing and simple way to understand the psychological impact of COVID-19; however, it can be criticised, based on the work of early behaviour theorists. Lewin (1935) suggested that behaviour is a function of our personality as well as environment and therefore, whilst one person's mental health may be compromised following trauma, another's may not, with the way in which a person attributes meaning to the traumatic event impacting upon how it is processed (Bomber, 2020). Cognitive behavioural science also suggests that people have either adaptive or maladaptive coping mechanisms based on the interactions that occur between their beliefs, feelings and thoughts in relation to a traumatic event and not just based on the event itself. Therefore, based on this critique, it is possible to think that whilst some people may have experienced trauma due to COVID-19 threatening their safety/security, others may have not. To suggest we have undergone a collective trauma can be considered a suggestion with limited scientific theory to support it.

2.8.1.2 COVID-19 & psychological needs: isolation, social distance, connectedness.

Considering the Hierarchy of Needs (Maslow, 1943) with regard to psychological needs during COVID-19, it is helpful to look to research which has reported how previous infectious disease epidemics have disturbed the psychology of a society (for example, Van Bortel et al., 2016; Al-Rabiaah et al., 2020; Fardin, 2020). These studies cited the lack of social connection created through quarantine and isolation as being the reason for poor psychological functioning. Beaumeister & Leary (1995) stated that humans, as a group, are thought to generally have an inherent instinct to socially connect with others and live in social clusters. Social connection is described as important in helping people to regulate emotions and to cope with stress and remain resilient during challenging times (Williams et al., 2018; Haslam et al 2018). Research has illustrated how having social connection through practical and emotional help decreases the risk of depression and other symptoms (Kessler & McLeod, 1985; Lakey & Orehek, 2011). By contrast, loneliness or social isolation, described as physical separation from others, has been reported to have negative psychological consequences, for example, increased experience of emotions such as anger and sadness and a decline in cognitive abilities, such as problem-solving and decision making (Cacioppo & Patrick, 2009). The feeling of social isolation has been shown to impact on immune functioning, sleep, and physical motivation which can lead to weight

gain and stress (Haslam et al., 2018; Cacioppo et al., 2002). Furthermore, feelings of social disconnection have been shown to lead to the emergence of stress, fear, suicidal ideation, and risks of early mortality (Holt-Lunsted et al., 2010). This, therefore, suggests that the need for social connection is a core human characteristic and one that may have been violated by COVID-19 lockdown restrictions.

Research during the pandemic raised concerns about COVID-19's impact on mental health due to social isolation (Farkhad & Albarracín, 2020; Riehm et al., 2020). Viner et al (2022) stated that mental health difficulties increased from being experienced by one in nine CYP before the pandemic to one in six during 2020 and 2021. They also reported that childhood obesity rates in 2021 were at least 20% above previous years. A survey carried out by University College London in March 2020 called 'checking in the voices of young people during lockdown' found that for 18–29-year-olds, a group who had a relatively low risk of becoming seriously ill from COVID-19, had the highest levels of abuse, depression and anxiety, thoughts of death or self-harm than in any other age group. Experiencing distress has been shown to affect the ability to self-regulate and therefore if COVID-19 has been causing or contributing towards psychological distress, then the ability to self-regulate may have been affected (Tillema et al., 2001; Scott & Cervone, 2002). This may also have an impact on regulatory emotional self-efficacy, which is thought to play an important role in relationships and behaviour (Bandura et al., 2003).

Although research has shown that the stress of lockdowns can affect psychological well-being (Brooks et al., 2020) and might also have longer-term effects (Liu et al., 2012), the psychological impact of COVID-19 lockdowns can be considered small in scale and highly heterogeneous. This suggests that lockdowns may not have consistently harmful consequences on mental health and that most people are psychologically resilient to their effects, however, it is not yet possible to draw longer term conclusions (Prati & Mancini, 2021). Throughout the pandemic, although people were physically distanced, it can be argued, those who had access to the internet may have been able to foster a sense of connection, as research has shown that both giving and receiving support on-line can bolster psychological well-being (Dore et al., 2017). It is a possibility, based on previous research into experiencing disasters (for example, Carter et al., 2015), that a shared sense of identity and concern for

others may have occurred during COVID-19, with humans attempting to gain the social connection they desire and need through different methods, for example, on-line work and socialising and community aid groups. The experience of collective threat has been shown to result in strengthened communities, with people co-ordinating to survive (Gelfand et al., 2017), it is therefore a possibility that this may have occurred during COVID-19 too. Furthermore, research into 'mindsets' has shown how it may be possible that having more adaptive mindsets boosts physiological and psychological functioning and increases the possibility of 'stress related growth' (Epel, McEwen & Lockovics, 1998). This therefore suggests that although a potentially stressful event, such as social isolation, may have an impact on mental health, it is also the mindset and appraisal of the situation that can potentially alter its impact (Crum, Jamieson & Akinola, 2020).

2.8.2 Framework 2: Systems theory

A system can be described as a circular process with each action interacting and impacting on the next, causing a cycle of behaviour or normality (Gorrell-Barnes, 1985). According to system theorists (for example, Bertalanffy 1968), parts of a system are interconnected and greater than the whole and therefore only studying 'one part' of the system in isolation, for example, a child, does not give a full picture. Miller & Leyden (1999) highlight this through illustrating CYPs experiences and behaviour through a 'psychosocial' system at school, where there are a set of recursive interactions primarily between pupil, teacher and parents/carers.

Ecological Systems Theory (Bronfenbrenner, 1979) (figure 4) states that there are different areas and levels of a system which have an impact on CYP's development, ranging from the individual and family (micro-system), neighbourhood and school environments (mesosystem) to national policy and culture (macro-system).

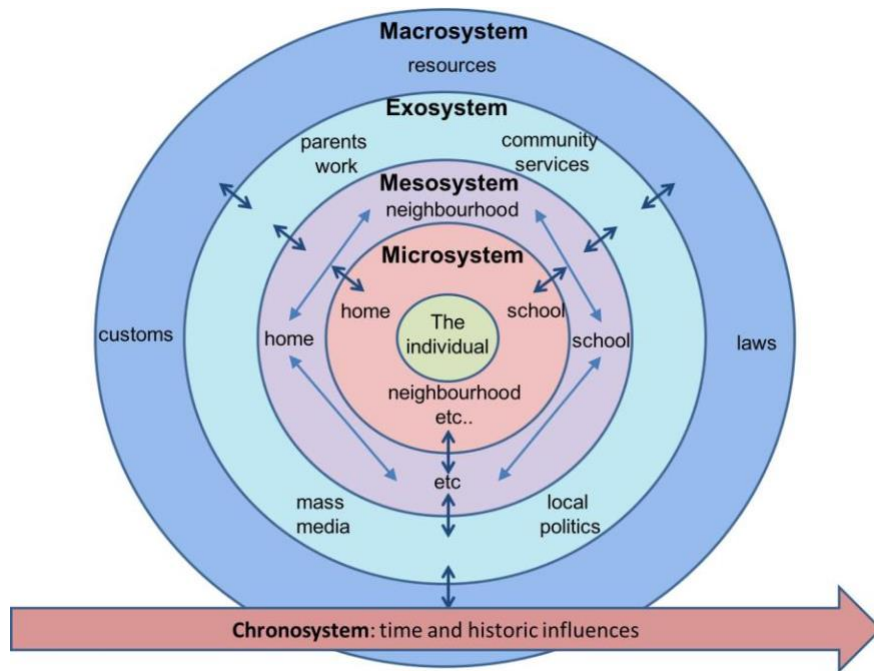


Figure 4. *Ecological Systems Theory model (Bronfenbrenner, 1979)*

Bronfenbrenner (1979) suggested that if the systems operating around a CYP are ineffective then there can be a detrimental impact on their psycho-social adjustment and development. The ecological systems model (Bronfenbrenner, 1979) emphasises the importance of studying CYP in multiple environments (the different ecological systems shown in figure 3), in the attempt to understand their development and experiences. This viewpoint is particularly important when considering CYPs experiences of COVID-19 as it could be argued that their experience of the pandemic has been and continues to be determined by the systems operating around them.

COVID-19 can be viewed as impacting on all ecological systems operating around a CYP for example, new laws have been implemented, media and politics have centred around COVID-19 and most children and family's education, work, sport activities and friendships/relational contacts have been affected (Morelli et al, 2020). Research during the early stages of the COVID-19 pandemic suggested that gaining a better understanding of family functioning promoted CYPs well-being (Wang et al, 2020). The majority of parents/carers were expected to home-school their children as well as work from home themselves or some had to manage looking after sick relatives or losing work. Parents/carers may have also suddenly become their child's only point of reference within their ecological system as access to other family members and social

groups was reduced. This pressure on parents/carers and the impact on CYP is described by the WHO (2020, a, b) as potentially having longer-term negative consequences on psychological well-being and mental health.

2.8.2.1 The role of parents/carers in CYP well-being

When considering the eco-system of a child it is helpful to reflect on the role of parents/carers in CYPs well-being. Research has highlighted the relationship between the stress that parents/carers experienced during lockdowns and their children's psychological well-being (Spinelli et al, 2020). This is supported by a study carried out during the H1N1 influenza (2009) which showed that social isolation increased parents' psychological distress and that, in turn had an impact on their children's well-being (Sprang & Silman, 2013). Further research suggested that CYP with parents/carers experiencing high levels of stress showed they were less emotionally regulated and displayed more externalised difficulties (Deater-Deckard & Panneton, 2017). Furthermore, it also been suggested that depression or lack of social support experienced by parents/carers, can negatively impact on parenting self-efficacy which is, in turn, related to children's adjustment and psychological well-being (Jones & Prinz, 2005). However, research has also shown that CYPs well-being, including emotional regulation and externalising behaviour, can be mediated by positive parenting strategies (Giallo et al., 2014) and good parenting self-efficacy (Stack et al, 2010; Eiseneberg et al, 2005). This was supported by earlier research in the COVID-19 pandemic which highlighted the protective role of parents in reducing their children's fear and stress during (Jiao et al 2020).

2.8.3 Framework 3: The Power Threat Meaning Framework and COVID-19

The Power Threat Meaning Framework (PTMF) (Johnstone & Boyle, 2018) is a psychological model that was co-produced with service users and developed as an alternative model for psychiatric diagnosis. It highlights the role of social justice and equality as a foundation for understanding people's experiences and aims to help people create more hopeful narratives or stories about their lives and the difficulties they may have faced or are still facing. The PTMF (Johnstone & Boyle, 2018) offers an alternative view to 'within person', 'deficit' narratives, instead helping to explain and understand difficult experiences and distress as being context-bound and influenced by society and culture.

The main aspects of the Framework are summarised in these questions, which can apply to individuals, families or social groups:

- 'What has happened to you?' (How is **Power** operating in your life?)
- 'How did it affect you?' (What kind of **Threats** does this pose?)
- 'What sense did you make of it?' (What is the **Meaning** of these situations and experiences to you?)
- 'What did you have to do to survive?' (What kinds of **Threat Response** are you using?)

In addition, the two questions below provide the opportunity to think about what skills and resources people might have, and how these ideas and responses can be combined together into a personal narrative or story:

- 'What are your strengths?' (What access to **Power resources** do you have?)
- 'What is your story?' (How does all this fit together?)

The PTMF (Johnstone & Boyle, 2018) has a potential role in understanding CYPs experiences of COVID-19, for example, Aherne & Aherne (2020) proposed that it can be helpful in viewing responses to and experiences of COVID-19 as an illness, particularly when thinking about mental health. They suggested that although COVID-19 is universal and something everyone has had to contend with in their own way, through reflecting on individual experiences of COVID-19 the PTMF offers a framework to consider community wide responses. Southend and Nottingham City Joint report (2020) used the PTMF (Johnstone & Boyle, 2018) in their report on 'pupil views on their education in the context of the COVID-19 pandemic'. The report suggested that it provides an opportunity to 'operate power to make a positive difference, embrace change and create new opportunities and narratives about education by working together and listening to the views of pupils we can create an equitable, robust and dynamic education system, where threat (e.g., the threat of falling behind; of not managing to 'catch-up'; of being less worthy on account of lower grades etc.) is reduced or ideally obliterated' (p23). The following section will now discuss pupil views/voice and how it can be used in research.

2.9 Definitions of pupil voice

Prunty et al (2012) stated that, to be able to understand a particular phenomenon within a vulnerable population, the perspectives of those with direct experience need to be listened to and understood. In education, the term 'pupil voice' refers to seeking to obtain the views of CYP and to elicit their perspectives on matters that impact upon them (Robinson & Taylor, 2007; Whitty and Whisby, 2007). Gathering pupil voice is often part of school improvement procedures used to convey a sense of inclusion (Fielding & Ruddock, 2006; Whitty & Whisby, 2007). Whilst motivation to obtain pupil voice stems from policy and human rights agenda (section 2.9.1, page 34), it is also used in research as it is thought strengthen validity as 'a situation may be seen as not fully understood without representation of the views of all stakeholders' (Lewis & Porter, 2004, p223).

Within the United Nations Convention on the Rights of the Child (1989), 'child' is used to refer to those under the age of 12 years, and 'young people' is used for those over the age of 12 years. Throughout the current research, 'voices' and 'views' will be used interchangeably as will 'pupils' and 'children and young people' (CYP). Robinson & Taylor (2007) state that, in educative terms, 'pupil' is an inclusive term as it encompasses CYP of all ages as opposed to those within a particular age range. Robinson & Taylor (2007) describe the four core functions of the pupil voice, stating that upholding these functions ensures ethical practice that corresponds with guidance issued by the British Psychological Society (2009) is maintained. These functions are:

- *"A conception of communication as dialogue.*
- *The requirement for participation and democratic inclusivity.*
- *The recognition that power relations are unequal and problematic.*
- *The possibility for change and transformation."* (Robinson and Taylor, 2007, p.8)

2.9.1 Policy on hearing the voices of CYP

The importance of listening to children and young people's voices is now well-established as it has been made apparent through the UN Convention on the Rights of the Child ("UN General Assembly," 1989) which states that every child has the right to express their views regarding all matters that affect them. Seeking out the pupil

voice has been described as a civil right that must be upheld (Lincoln, 1995). This has been reflected in educational policy and legislation, which includes the Children and Families Act (2014) and the Special Educational Needs and Disability Code of Practice (SEND CoP, DfE & Department of Health, DoH, 2015) (discussed in section 2.5, page 20) which both state the importance of CYP being involved in decision making. In addition to this, research has shown that gathering pupil voice is essential in having an inclusive education system (Messiou, 2002). In line with Ecological Systems Theory (Bronfenbrenner, 1979) and the SEND Code of Practice (DfE 2015), gathering the views of CYP should be at the centre of an EPs' work (Fox, 2015), this is because they are thought to be well placed to seek and represent the views of CYP and to ensure that positive change results from this (Farrell et al., 2006; Smillie & Newton, 2020).

2.9.2 Impact of the pupil voice in research and practice

CYP have unique knowledge and expertise about their own experiences and are therefore the most well-placed to suggest what works for them (Atkinson et al., 2019; Greig et al., 2012). This is reflected in educational policy and legislation (section 2.5, page 20). Lloyd-Smith & Tarr (2000) suggest practical, ethical and epistemological reasons for obtaining the views and experiences of young people:

'The reality experienced by children and young people in educational settings cannot be fully comprehended by inference and assumption. The meanings they attach to their experiences are not necessarily the meanings that their teachers or parents would ascribe; the subcultures that children inhabit in classrooms or schools are not always visible or accessible to adults' (p.61)

Research into pupil voice has highlighted the importance and impact of listening to CYP about a wealth of school-related matters (Demetrious, 2019), this is because CYP can provide an accurate account of their own learning processes and how classroom teaching practices these could be enhanced to improve their learning (Fielding & Bragg 2003). Furthermore, Toyne (2009) suggested that pupils can also give an insightful critique of educational systems which enhance adults understanding of the complexities, strengths, and limitations of current practice educational practice. As well as gaining systemic insight, the process of listening to CYP and valuing their

views indicates to them that their opinions matter, and more importantly, that they themselves matter (Demetriou, 2019). A consequence of this research has shown that the process of listening to CYPs views can impact positively on their self-esteem and experiences at school, including their learning and the development of effective relationships between teachers and pupils (Demetriou, 2019, Cook-Sather, 2006). The inclusion of the pupil voice is thought to promote more effective learning and positive behaviour in school and is beneficial for both pupils and staff (Cefai and Cooper, 2010). Sellman (2009) stated that pupil voice indicates to professionals working with CYP the need for positive relationships and successful communication. Furthermore, obtaining pupil voice has been described as helping to develop a more democratic society within schools which benefits both pupils and schools in promoting inclusion, pupil participation and empowerment and positively impacts on the mental and physical well-being of pupils and teachers (Cook-Sather, 2006; Fielding & Ruddock, 2006; Holt-Lunstad, Smith & Layton, 2010).

2.9.3 The challenges and critique of obtaining pupil voice

Robinson & Taylor (2007) criticised the term 'pupil voice', stating that it suggests a collective opinion of pupils and does not consider the variation of views and experiences between individuals. Another criticism of pupil voice is that there is little guidance around how to use views once gathered, meaning that it could be of little use and value in practice (Lewis & Porter, 2004). Robinson & Taylor (2007) also argue that teachers may not have the ability to use and apply the information obtained from pupil voice purposefully, resulting in it having little impact on practice. McIntyre et al. (2005) described how pupil voice can act as a catalyst for change in inclusion and classroom practices, however, teachers, who are most likely the implementors of the change may not welcome it. Flutter (2007) offers further criticism stating that, where there is too much attention and emphasis given to the pupil voice, teachers' views could risk being "*silenced*" (p.8).

Lewis, Newton & Vials (2008, p.26) state that a key challenge when gathering pupil voice is to ensure that dialogue is "*effective and authentic*" as it has been suggested that how pupil voice is gathered often lacks authenticity, credibility and reliability (Lewis, 2010). A possible reason for this could be due to the drive for obtaining the pupil voice often being led and influenced by school leadership, who can, according

to Whitty and Whisby (2007), choose to take a collaborative approach with an aim to improving pupil outcomes, however, due to the power imbalance with those in power seeking the views of those without, it can also be seen as adults inflicting “*radical empowerment*” (Lewis, 2010 p.17). Sewell (2016) described how research is needed to consider anti-oppressive practice to empower pupils when eliciting their views. Hart (1992) discusses the potential of ‘tokenism’ when seeking the pupil voice, which is described as when pupils are ‘given’ a voice, but the way in which a pupil communicates, and the appropriateness of the subject matter has not been given enough consideration. Nevertheless, Lundy (2018) stated that fearing tokenism should not prevent seeking children and young people’s views, as any information gathered from them can be seen as valuable.

2.9.4 The voices of CYP with SEND

The National Foundation for Educational Research (NFER) (2020) stated that some ‘vulnerable’ groups are often overlooked in research and are less likely to have their voices heard on issues that affect them. These groups are described as being those who are marginalised in society and includes but is not limited to, minority ethnic groups, looked after children (LAC), pupils at risk of exclusion from education and CYP with SEND (also described as those having additional needs). However, research has shown that CYP considered to be vulnerable are able to provide meaningful information about their direct educational experiences, offering insight that can potentially impact on decision making and legislative changes (Prunty et al., 2012). Davies (2005) suggested that hearing vulnerable pupil’s views is important, as without doing so, their negative experiences will be perpetuated. Hearing the voices of vulnerable pupils, such as those with additional needs, is thought to create an authentic and powerful difference, contributing towards an enhanced understanding and resolution of difficulties and can serve as an emancipatory experience (Cefai & Cooper, 2010). However, research has illustrated how CYP with additional needs are less likely to be asked for their opinions than other CYP (Harding & Atkinson, 2009; Franklin & Sloper, 2009). Whitty and Wisby (2007) argue that approaches to hearing pupil voice are needed that accommodate a wide range of abilities and disabilities so that the voices of all CYP can be heard, not just those who are most confident in expressing their views.

Barnes (2015, p2) stated that 'when a well-meaning system is put in place, such as pupil voice, it cannot always compensate for the variability in individual human features. There are potential challenges posed in gathering the views of CYP with additional needs which may offer an explanation as to why this group is less likely to be asked for their opinions (Harding and Atkinson, 2009), for example, the reliance on language when gathering views, can pose a challenge for some CYP with communication difficulties (Beresford et al., 2004; Ellis, 2017; Howard et al., 2019). Barnes (2015) described how it can be a challenge to engage with and obtain information from CYP with a range of conditions and developmental needs which may include a wide range of social and communication needs. Some CYP may have limited experiences, therefore, restricting their ability to comment upon what is in their best interests and some might find it difficult to make choices or to reflect and evaluate. Nevertheless, by giving information to CYP, which is meaningful and accessible, therefore allowing them to be an active participant means that they are much more likely to regard the process as enabling and empowering (Barnes, 2015). Research has illustrated that appropriate adjustments can be made to ensure that more CYP with additional needs are included in research, for example, the use of joint attention activities and visual methods such as using colour coded cards and utilising photographs or drawings has been suggested to promote the inclusion of CYP with Autism in interview-based research (Ellis, 2017; Scott-Barrett et al., 2019). Scott-Barrett et al. (2019) also suggested that taking time to build rapport with CYP prior to conducting an interview was found to be helpful, as was reducing power differentials between the researcher and the participant by ensuring that the participants felt they have control over their involvement in the interview. This included consideration of whether they would like to take part, as well as how they choose to share their views. The flexible nature of semi-structured interviews has been reported to offer participants a level of control of the interview process (Huws & Jones, 2015) and to promote rapport building between the participant and researcher (Cridland et al., 2014). In turn, empowering individuals to ensure their voices are heard (Humphrey & Lewis, 2008). Maintaining authenticity is not seen as an easy issue to solve, however, it has been suggested that continuing to pose the question as to how authenticity can be maintained is essential when working with CYP, particularly vulnerable ones (A New Direction, SEND network, 2019).

2.9.5 Pupil voice and COVID-19

The Royal College of Paediatrics and child health (RCPCH,2020) compiled research studies of CYPs views regarding COVID-19 which mostly included on-line survey studies such as the co-space study (2020) supporting parents, adolescents and children during epidemics and YouCope by Imperial college London and UCL (Sanchez et al, 2020) which looked at the mental health consequences experienced by young people aged 16-24 during the first months of the first lockdown. 'In our own words' (Barnados, 2020), a report on how COVID-19 has disproportionately impacted on the most vulnerable and marginalised CYP recommended that the government must listen to the voices of CYP and recognise the impact of the pandemic on the most vulnerable and ensure that mental health and well-being approaches prioritise prevention and early intervention. The report also stated that CYP do not feel listened to by the government and that too many are having to meet crisis point before getting the help they need.

Some educational psychology services (EPSs) have carried out surveys across the country to gain CYP views of COVID-19 (for example, Sefton EPS, 2020; Children's Commissioner in Wales, 2020; Phoenix Education, 2020). Research carried out by Southend and Nottingham City (2020) shared the views of CYP and the impact the pandemic had on them and their hopes for the future. The report stated that it is important that all experiences during COVID-19 are heard, accepted and validated and that factors such as age, social economic status and culture should be considered. It is suggested that a better education system can be built by listening to CYP and acting on what they tell us. The report also suggests a shift away from a dominant "catch up" narrative that is "permeating" the lives and beliefs of CYP in a way that "potentially puts a high level of pressure upon them, giving a sense of missed opportunities and creates risks for their mental health and well-being" (p23). The report instead advocates for a "recovery curriculum", a focus on emotional health and well-being and the enjoyment of, and motivation for, life-long learning. It also suggested that what was achieved during CYP during the pandemic needs to be explored and celebrated and that CYP can be helped to in the future by focussing on the skills used or developed. This is supported by the BPS (2020) who stated that, although there have been negative experiences of COVID-19, Post Traumatic Growth Theory

(Tedeschi et al, 2018) research emphasises the potential for positive growth and development as a consequence of trauma and challenging experiences.

All CYP in the UK have experienced the COVID-19 pandemic as individuals who are part of a wider system, and their experiences can be listened to. However, much of the research into COVID-19 presents and discusses CYPs experiences through the adults around them. In light of this, the current research will employ a systematic literature review (SLR) to identify research studies that have incorporated the views of CYP in the context of COVID-19. Specifically, the SLR will seek qualitative research on: CYP's reported experiences of COVID-19.

2.10 Systematic Literature Review

2.10.1 Definition of a Systematic Literature Review

A systematic literature review (SLR) identifies, appraises and synthesises research about a specific topic area (Pettigrew & Roberts, 2006). Research studies identified through a search strategy are considered individually to think about how they can collectively answer a specific research question and are then judged based on the relevance and quality of the evidence (Gough, 2007). An SLR, therefore, can help to establish what is currently known about a topic and how it is known (Gough, 2007). Furthermore, it facilitates the identification of where there may be uncertainty in a research area and where more research is needed (Pettigrew & Roberts, 2006). Evans, Harden & Thomas (2004) also suggested that SLRs can help to find methodological weaknesses, which as well as helping to refine the current research can also lead to improvement in future research.

2.10.2 Review Question

The focus of this SLR is to explore research studies conducted within the UK, which focus on hearing directly from CYP about their experiences of COVID-19. It aims to ascertain who has been asked about their experiences, how they have been asked and what they reported. Furthermore, it aims to identify any gaps in the current research. Therefore, the research question of this SLR is: *what does current UK research tell us about what CYP have reported about their experiences of COVID-19?*

2.10.3 Systematic Review Process

As the research question is seeking to identify and make meaning from individual lived experiences, it is likely that the research designs highlighted will be qualitative rather than quantitative (Petticrew & Roberts, 2008). For a qualitative research synthesis, a systematic search strategy is of key importance (Major & Savin-Baden, 2010), and this involves specifying an inclusion and exclusion criteria based on the aims and review research question (Table 2.)

Table 2. *Inclusion and exclusion criteria within the SLR*

	<i>Inclusion Criteria</i>	<i>Exclusion Criteria</i>
<i>Sample</i>	-Participants to include children and young people of school age	-Participants of non-school age. - Studies that only include professionals/parents/carers. -Studies that have not clearly defined their sample. -Studies exploring only medical conditions associated with COVID-19.
<i>Focus of study</i>	-Focus on CYPs experiences of COVID-19, ideally highlighting some educational aspects	-Studies that exclusively focus on the parent/carer and/professionals reported COVID-19 experience of the child or young person.
<i>Study design</i>	-Studies from any discipline or theoretical tradition that used primarily qualitative methods and where qualitative findings were reported. - Studies that utilised primary data and that had directly asked CYP to report on their experiences. -Data in the study focussed on the experience of CYP including narrative accounts and interview data.	- Studies with only quantitative data or secondary research. -No separation of participant voices where studies have included additional data from parents/carers/professionals.
<i>Research outcome</i>	-Rich qualitative data which is presented in a coherent way and ideally organised into themes. -Studies published in a peer-reviewed journals between 2020 and present day 2021	-Data is presented in an incoherent way. -Unpublished studies - Other publications (i.e., reviews, books, book chapters, theses)
<i>Type/date of publication/ Language</i>	Studies from the UK Studies written in English	-Research not in English -Research conducted outside of the UK.

2.10.4 Rationale for inclusion and exclusion criteria

Sample- Only CYP of school age were selected due to the aim of the overall research study.

Focus of study- Due to the nature of COVID-19 and the large quantity of research being carried out, it was decided that the focus of this SLR would be specifically based on studies that had gathered CYPs views and experiences of COVID-19, however, this needed to exclude specific hospital experiences or medical conditions and be about general experiences, including education, as the current research is in the domain of educational psychology.

Study design- Only qualitative or mixed methods research designs were included to ensure studies were relevant to the exploratory review question. Mixed method studies with a quantitative aspect such as a survey were included as these still gathered the views of children and young people, however, it was deemed essential that CYPs voices were presented in the research.

Research outcome- Studies were included where CYPs experiences had been explored and presented coherently and with thick description, this was to ensure the studies related to the review question.

Type/date of publication- Only research published in peer reviewed journals were included both for consistency and quality assurance purposes, which included the reduction of bias, as these publications were already subject to a strict review process. A decision was made to only include research carried out within the UK due to the range of contexts of both education and the varying degree of impact of covid in different countries.

Language- Only studies in English were included so that the researcher conducting the review could understand the content and make informed decisions as to whether it would meet the inclusion criteria and be relevant to the review question.

2.10.5 Search strategy and terms

To identify the included studies a systematic search strategy was employed following the Preferred Reporting Items for Systematic Reviews and Meta Analyses (PRISMA) approach (Moher et al., 2009) (figure 5). Between August 2021 and October 2021, systematic searches of the following databases were undertaken; SCOPUS, EMBASE and Web of Science and further searches using Nottingham university NU search. The search terms employed were; Children OR Young people AND views OR experience* AND Covid*. The search was set for abstract and title and the date for studies was set as 2020 to current. Reference harvesting from the retrieved papers was undertaken to ensure all relevant literature had been identified.

2.10.6 Search outcome and study selection

The initial search yielded 569 studies of which 557 were excluded after removing duplicates and screening titles and abstracts for relevance. The remaining 12 were analysed further utilising the inclusion and exclusion criteria (Table 2). Based on this, a further 7 studies were excluded at full text analysis due to not meeting the inclusion criteria (appendix 1 shows full details of the appraisal of studies based on the inclusion and exclusion criteria appraisal in SLR).

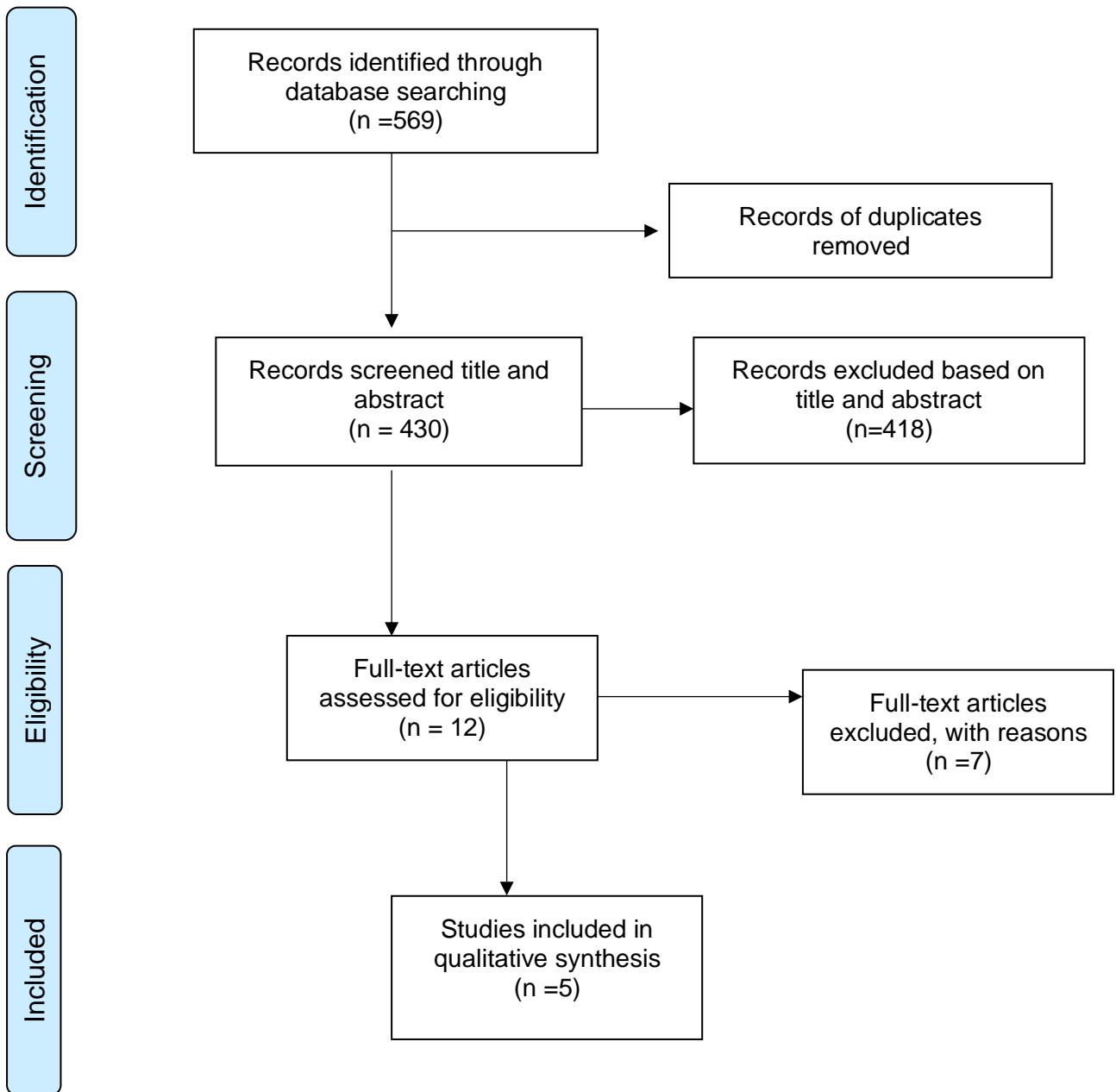
The reasons for the studies excluded after full text analysis included:

- The age group of participants, being either under or over school age.
- The country where data was collected.
- Unclear presentation of findings or children and young people's views being combined with adults/parents' views.

This gave a final number of 5 studies which could be included in the review and for which synthesis could take place.

Figure 5. Illustrates the process by which research studies were selected for review using PRISMA.

Figure 5. Moher et al (2009) PRISMA flow chart for current SLR



2.10.7 Appraisal of studies review process

Quality assessment and framework evaluation

The remaining papers (n=5) were assessed for methodological quality using the Critical Appraisal Skills Programme (CASP) (2018) screening tool for qualitative research. The tool offers ten appraisal questions under three subsets (appendix 2), this includes the consideration of the rationale, design and validity (trustworthiness) of the results. Studies were screened with a 'yes', 'no' or 'can't tell' rating being given to each question. The screening tool allowed the researcher to assess the quality of each study and to consider how it could form part of the synthesis. Appendix 2 illustrates the details and results of the CASP screening process for each study, including factors taken into consideration and responses for each study appraised. Table 3. shows the studies included in synthesis and gives information regarding research questions, sample, methodology and findings. Table 3 also indicates the CASP score for each study based on the screening (score indicates out of 10 how many times 'yes' was answered to the screening questions i.e., the more 'yes', the higher quality the study was considered by the researcher, appendix 2 shows the raw data and process for this).

Table 3. Details of included studies and overall CASP (2018) appraisal information (CASP appraisal scoring details appendix 2)

Author/Year/Country/Type of publication	Research aims /question(s)	Sample and Recruitment	Methodology	Key findings/Themes	Appraisal CASP /critique
Fisher, Lambert, Hickman, Yardley & Audrey(2021)	<p>Rapid qualitative study to examine the experiences of COVID-19 from the perspectives of young people. The specific objectives were to:</p> <ul style="list-style-type: none"> • Explore the social impact of the COVID-19 CYP. • Examine the extent to which CYP are implementing COVID-19 public health guidance. • Consider the acceptability of vaccination against COVID-19 among CYP. 	<p>21 young people (12–17 years).</p> <p>Purposive sample</p> <p>Study promoted by email/ social media associated with University of Bristol research and advisory groups.</p>	<p>Conducted June (2020)</p> <p>Topic guides were developed to explore young people’s experiences during the COVID-19 pandemic.</p> <p>Semi-structured interviews took place remotely either by a digital platform or telephone.</p> <p>Thematic Analysis was undertaken assisted by NVivo 12 software.</p>	<p>-Young people have experienced significant disruption to their education and social networks.</p> <p>-High levels of compliance to government public health guidelines were reported which suggested that young people willing to play their part in reducing transmission of COVID-19.</p> <p>-High levels of acceptability to be vaccinated were apparent.</p>	<p>Findings from this study may not be representative of those belonging to BAME groups or more deprived communities (socio-economic status or ethnicity of the participants were not taken).</p> <p>The study used a rapid qualitative design in order to enable findings to be delivered in a timely way. Presentation of findings took a broad approach, rather than focussing in-depth on a key issue.</p> <p>No ethics approval, parental and participant consent.</p> <p>CASP score 8/10</p>
Larcher, Dittborn, Lintic, Sutton, Brierley, Payne & Hardy (2020)	<ul style="list-style-type: none"> • How can young people get their views heard during a pandemic? • What do young people think about 	<p>15 young people (11–18 years)-members of the Hospital Young Peoples Forum at</p>	<p>Conducted in May, 2020</p>	<p>-Young people were concerned about their future, their family and broader society, consistent with a high</p>	<p>Participants an educated and informed group who had prior health issues treated at GOSH, study acknowledges it may not be generalisable to other CYP.</p>

	<p>the return to schools?</p> <ul style="list-style-type: none"> • What do young people think about the effects of the pandemic? 	Great Ormond Street Hospital	<p>Focus group discussion via Zoom video.</p> <p>Audio recordings were transcribed verbatim using NVivo Software and analysed using inductive Thematic Analysis.</p>	<p>level of moral development.</p> <p>-Young people wanted to be active participants in social recovery, including concepts around return to school but require appropriate information and a means by which their voices can be heard.</p>	<p>No ethics approval, parental and participant consent.</p> <p>CASP score 6/10</p>
<p>McCluskey, Fry, Hamilton, King, Laurie, McAra & Stewart (2021)</p>	<ul style="list-style-type: none"> • How do isolation, school closure and exam cancellation caused by COVID-19 affect the mental health and wellbeing of the generality of young people in Scotland? • Are there additional impacts on the mental health of groups of young people typically identified as vulnerable? • What do young people, as students, think would help address 	<p>45 young people (14-18 years)- Young people from rural, urban and suburban areas across Scotland. 15 different schools.</p>	<p>Conducted in August and September 2020</p> <p>Mixed method design. Two main methods: 1) a national online survey open to all senior high school students (15–18 years old) and 2) 4 online focus group semi structured interviews with young people, to allow in-depth exploration of emerging findings from the survey.</p>	<p>-Impact of isolation, home learning and exam cancellation on mental health of young people. Five key areas within this theme; the initial positive impact of lockdown on young people's mental health, the changes to everyday structure and habits, increased reliance on social media as a primary form of communication, the availability of support for mental health during lockdown, and</p>	<p>Study acknowledged that only 4/45 participants received in school support with learning.</p> <p>Data represents a snapshot in time. Study acknowledges that with a sample size of 45, and with data gathered from young people who cannot be said to fully represent all vulnerable students, and who, furthermore, were interviewed at one point in a uniquely challenging context, means there are clear limits to generalisability.</p> <p>CASP score 9/10</p>

	<p>their concerns about mental health in the context of the pandemic?</p>		<p>This paper's primary interest was in examining the qualitative data from these focus groups.</p> <p>Further information on online survey can be found in the preliminary report of early findings (McCluskey et al. 2020)</p> <p>Coding and Thematic Analysis adopted approaches from Braun & Clarke (2006) and Strauss & Corbin (2015).</p>	<p>the impact of exam cancellation.</p> <p>-The impact on the mental health of groups of young people typically identified as vulnerable. Strong agreement about the material impact of Covid 19 on those who were already known to be vulnerable and also where young people experienced new or additional vulnerability as a result of the pandemic.</p> <p>-Experiences of returning to school- Mental health impacts of returning to school described in both positive and negative ways. Overall, returning to school was seen as having a positive impact on wellbeing for most.</p> <p>Young people's views on what had helped,</p>	
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				or could help, their mental health and wellbeing- too little support for those who were particularly vulnerable, but also for the generality of students. Schools focused too much on 'getting back to normal' and offered too few opportunities for students to reflect on the impact of the pandemic, as they navigated the transition from lockdown to a full school timetable.	
Scott, McGowan & Visram (2021)	<p>The overall aim of this study was to examine young people in Northeast England's experiences of COVID-19 and associated control measures.</p> <p>Diary extracts followed up with semi structured interviews which aimed to explore:</p> <ul style="list-style-type: none"> • Diary extracts received over the course of this study. 	<p>31 young people (13-17 years)</p> <p>Participants all resided in Northeast England, which at the time of the study was marked as an area of 'high COVID-19 risk' and subject to strict social distancing restrictions since the implementation of localised tier</p>	<p>Conducted between July and October 2020.</p> <p>Data derived from broader longitudinal project focused on understanding young people's experiences of pandemic restrictions and the impact of restrictions on their mental health, wellbeing and education. This</p>	<p>Overall findings highlight acute mental health impacts (loneliness, isolation, anxiety) as well as longer-term repercussions from disrupted education (missed parts of curriculum, home schooling, cancelled exams, periods of isolation) on young people as a result of</p>	<p>Curation of diaries depended on young people's motivation to take part.</p> <p>Whilst the sample was mixed in terms of deprivation levels and captured experiences from a diverse set of young people, the study acknowledged the lack of voice of vulnerable or specifically marginalised young people which</p>

	<ul style="list-style-type: none"> • Whether young people had anything important to that they had not shared in diary. • How young people felt COVID-19 would impact on the next six months and beyond. 	<p>systems at the end of summer 2020. Efforts were focussed on the recruitment of young people in areas of deprivation. Participants were recruited from youth and community organisations, detached youth work schemes, and regional charitable and third sector organisations, as well as via social media.</p> <p>Young people were purposively sampled according to age (at date of recruitment), gender and socio-economic status (SES).</p>	<p>paper reports findings from the first exploratory phase of data collection, in the immediate aftermath of the first national lockdown.</p> <p>Digital, qualitative diary extracts were solicited specifically for the purpose of research for six weeks, followed up by a semi-structured interview. This time period allowed us to explore young people's thoughts and feelings following the end of 'Lockdown 1', during summer (where national restrictions were relaxed significantly in the UK) and upon their return to school.</p> <p>Diary extracts, verbatim interview transcripts and field notes were analysed using applied Thematic Analysis</p>	<p>the COVID-19 pandemic.</p> <p>3 central themes:</p> <ul style="list-style-type: none"> • Impact on young people's mental health and emotional wellbeing. • Disruptions and changes to education and school life. • Frustration, burden and responsibility. 	<p>prevented an intersectional approach.</p> <p>Study acknowledges the issue of digital exclusion or digital poverty which may have impacted on who could take part in study.</p> <p>CASP score 9/10</p>
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			techniques, following the principles of constant comparison to enhance internal validity.		
Thompson, Spencer & Curtis (2021)	<ul style="list-style-type: none"> What are the experiences and perspectives of children in relation to the COVID-19 pandemic and related restrictions on everyday life? 	<p>18 children from England and Wales (aged 7-11 years)</p> <p>The study was advertised on two parent support groups on the social media platform, Facebook</p>	<p>Conducted between May and July 2020.</p> <p>Six paired semi structured online interviews conducted with participatory drawings.</p> <p>Children shared their thoughts to some initial questions in a visual format. Some children simply preferred to talk about their experiences.</p> <p>Interviews were transcribed verbatim by a professional transcription company.</p> <p>Thematic Analysis</p> <p>Ethical approval The University of Sheffield.</p>	<p>Study found that young children offer insightful experiences during the first wave of the COVID-19 pandemic and recommends that CYPs perspectives be considered in future public health discourse.</p> <p>Three key themes;</p> <ul style="list-style-type: none"> A deadly global contagion. Fears and sadness. Social responsibility and opportunities to respond positively. 	<p>Study acknowledges the participants did not reflect a diverse group, especially those children who come from more marginalized and vulnerable circumstances and who are likely to experience more adverse impacts as a result of the pandemic.</p> <p>Study acknowledges methodological and ethical issues of conducting online research with, for example, challenges in angling cameras for the researcher to see drawings and the hindrance of being able to build rapport with children. Also, presence of parents may have impacted on some responses.</p> <p>CASP score 7/10</p>

2.10.8 Review outcomes

2.10.8.1 *Research settings and timing*

The studies were all based in the UK, with McCluskey et al (2021) conducting their research in Scotland and Scott, McGowan & Visram (2021) in the northeast of England. Larcher et al (2021) was conducted with young people who had previously received care and treatment at Great Ormand Street Hospital earlier in their lives. Predominantly, participants across all of the studies were of a secondary school age, however, Thompson, Spencer & Curtis (2021) participants were all primary aged pupils. All studies were carried out between May and September 2020, this was when secondary schools were all still closed (apart from to keyworker and vulnerable children) and primary schools had begun phased re-opening. All studies used methods to elicit CYPs voices, which included semi-structured interviews, drawing and diary analysis to explore experiences of COVID-19 during the first UK lockdown.

2.10.8.2 *Data collection*

All of five of the studies employed qualitative designs and utilised semi-structured interviews. Fisher et al (2021) was the only study to carry out individual interviews. Thompson, Spencer & Curtis (2021) carried out paired interviews whilst also asking participants to draw what they were talking about, whilst Scott, McGowan & Visram (2021) carried out interviews alongside analysing diary extracts. Both Larcher et al (2021) and McCluskey et al (2021) carried out semi structured interviews using focus groups, whilst McCluskey et al (2021) utilised a mixed methods design with a national survey alongside qualitative interviews. All studies interviews/focus groups were carried out online (on-line meeting platforms mentioned were zoom and MS Teams) and not in person, this was potentially due to the risks involved of COVID-19 transmission although none of the studies explicitly state this.

2.10.8.3 *Data analysis*

All of the research studies in the SLR used Thematic Analysis (TA) to analyse data. McCluskey et al (2021) also carried out a survey and analysed data from this in a separate study. Diary extracts in Scott, McGowan & Visram (2021) were analysed for themes alongside the interviews conducted and Thompson, Spencer & Curtis (2021) analysed the children's drawings alongside their interview transcripts and to reflect the

specific issues that the children were discussing at the time and developed themes from this.

2.10.9 Research findings, data extraction and synthesis

A qualitative review with the intention of gaining insight into experiences was carried out and therefore, qualitative data was extracted from the papers included in the review using a meta-ethnographic approach. This approach was selected as it is described as allowing for rigorous synthesising of qualitative research using a formalised method in the interpretation of studies (Noblit & Hare, 1988), furthermore, it is thought to develop new understanding of a concept through combining the outcomes of primary studies into a new whole (Noblit & Hare, 1988; Major & Savin-Baden, 2010; Cahill et al., 2018). In line with a meta-ethnographic approach, a multi-phase process was followed, beginning with extracting general details of the studies such as the research questions, sample and methodology (see Table 3, page 47). Findings of studies were extracted and based on the researcher's analytic interpretation of the results or data along with either a participant's voice or observation. Findings were identified through repeated reading of the text, with common themes being identified, the studies were found not to contradict one another and were reciprocal. A set of themes represented common and recurring concepts as a collection of findings from the studies, these were then categorised based on similarity of meaning and then considered together to form synthesised findings. Thomas et al. (2012) stated that a synthesis is not merely an account of the findings from each individual study, it involves a process of bringing the data from different studies together to form a connected whole. The synthesis, organised into themes, will now be discussed.

2.10.9.1 *Theme 1: COVID-19, rules, regulations, and responsibilities*

A pertinent theme across all five studies was how CYP reported they felt a sense of responsibility or burden about their role in preventing the spread of COVID-19 and the need to protect others health, as well as their own, particularly older and more vulnerable (due to health issues) people. Throughout all studies, it was reported that there was a strong sense of adherence to government and school rules and high levels of compliance with COVID-19 restrictions by CYP. All studies, including even the primary aged group of participants in Thompson, Spencer & Curtis (2021), described

how CYP had knowledge of the key public health messages and government guidance about how to mitigate personal risks and the risk presented to others through social distancing, handwashing and rules about isolating.

A common theme across all studies was how participants described their sense of shared responsibility about following the rules imposed on them. Fisher et al (2021), Scott, McGowan & Visram (2021) and McCluskey et al (2021) reported how CYP felt negatively towards those not complying with rules, some described 'rule breakers' actions as risky and selfish and felt angry that this behaviour led to young people being unfairly blamed or labelled for spreading the virus. CYP in these studies also described the anger they felt, not only towards 'rule breakers' but also towards the government's policies and rules, which were described as non-sensical, for example, some of the rules at school around social distancing and not being able to play together after school after sitting in close proximity to and from school. There was also criticism directed at the government for delays in lockdown and implementing/easing restrictions at the wrong times.

Whilst some CYP described feeling tired, angry or frustrated at some of the rules, most described the rules as necessary to keep people safe. Scott McGowan & Visram (2021) and McCluskey et al (2021) reported that CYP expressed concerns about returning to 'normal life' too quickly and not feeling safe. Fisher et al (2021) participants stated that when lockdown eased and social distancing rules became more permissive they found it difficult to adhere to self-isolation if this meant they missed out on social opportunities, and, Scott McGowan & Visram (2021) described how when lockdown began to ease, CYP found that the rules were not always clear or easy to follow and that they felt vindicated in being responsible for the spread of COVID-19.

2.10.9.2 Theme 2: COVID-19 and sacrifices

A prevalent theme that ran throughout the studies was the idea of the sacrifices CYP felt they had made to keep other people safe during the pandemic, this included activities they felt they had previously taken for granted, such as sports, sleepovers, time with friends and loved ones and physical contact (Scott, McGowan & Visram, 2021; Thompson, Spencer & Curtis, 2021). Participants across all five studies

described the emotional repercussions linked to the pandemic and the sacrifices they felt they were making, children and young people described feeling sad, lonely, isolated and experiencing a sense of loss or grief for pre-pandemic life and missed milestones such as birthday parties, school trips and graduations. Three studies described children and young people reporting living with COVID-19 and lockdowns as 'the new normal' and the worries they held about whether things would ever return to 'normal' and what this would be like (Scott, McGowan & Visram, 2021; Fisher et al., 2021; Larcher et al., 2021). There were also concerns expressed by CYP about how the activities they felt they had sacrificed such as face to face contact with friends, music and sport were part of their life coping mechanisms (Larcher et al., 2021).

2.10.9.3 Theme 3: COVID-19 and mental health

A key finding across all studies was that CYP expressed frustration, sadness, anger, and disappointment, largely due to experiencing constant change, uncertainty and lack of control. Both studies by Scott, McGowan & Visram (2021) and Thompson, Spencer & Curtis (2021) described how the public health narratives and news about CYP losing people they love impacted on well-being. CYP reported feeling exhausted and operating at heightened emotional states due to having to engage with news updates on an unprecedented scale, and constantly having to be prepared and ready to adjust to changing guidelines and restrictions. CYP across the studies described fears and anxieties about the pandemic including contracting COVID-19 and the impact it might have on their health and the sense of the unknown, particularly not knowing when life would get back to normal. Scott, McGowan & Visram (2021) described how CYP with pre-existing mental health conditions or lived experience of difficulties described how these were exacerbated during lockdowns. A key finding across the studies was how participants described their mental health improving with the easing of the first lockdown and being able to return to school and see people in person again, however, anxieties were reported about returning to school, awareness of 'lost learning' and the possibility of another lockdown. CYP described how there had not been adequate support for supporting their mental well-being during lockdown and when they returned to school, they felt they were not given the time or support to reflect on what they had been through. Participants expressed although some individual teachers had been helpful, overall, they described how schools need specialised support for mental health and well-being, available to all. Participants stated that the

mental health advice offered by the government was too vague, for example, encouraging young people to 'go for a walk'. McCluskey et al (2021) participants stated they were particularly concerned for those who were already vulnerable and how mental health support felt like a 'postcode lottery'.

2.10.9.4 Theme 4: COVID-19 school and education

All studies reported that participants discussed the closure of schools and the change to 'home learning' and shared both the advantages and disadvantages of this. Fisher et al (2021) and McCluskey et al (2021) participants reported how learning at home was largely self-guided, with little or no additional input from teachers, even if requested. Some CYP reported that they preferred being able to independently self-direct their learning and described this sense of personal agency and autonomy positively, which led researchers in both studies to question the regular school structures and processes in place. The disadvantages about home-learning reported by participants, included feeling that the home environment was less conducive to learning than the classroom environment, due to factors such as needing to sustain motivation and to avoid being distracted, this led to some feeling worried about 'falling behind' with schoolwork. Anxiety about the uncertainty of learning at home was also reported, for example, how long would it be for and what would it mean for examinations. However, McCluskey et al (2021) and Scott, McGowan & Visram (2021) described school closures as beneficial for some of their participants, particularly during the first lockdown when some CYP described being able to do schoolwork at a 'pace' which suited them. Some participants across the studies expressed gratitude for individual teachers who had offered consistency and support and individual interaction (Fisher et al., 2021; Larcher et al., 2021).

Participants across the studies mentioned the immediate effects of the sudden and complete loss of social contact with peers and the switch to 'on-line' learning. Some participants in Larcher et al (2021) study described on-line learning as an overwhelming experience because of the lack of peer interaction for discussion and lack of support from their teachers. It was clear across the studies that there was variation across different local authorities and areas regarding digital connectivity and the access and provision of this. It was reported by participants that in some areas, schools already had well-developed online modes of communication with home, while

in others this was not the case, it seemed that in areas where systems were already in place, schools were able to adapt more readily to provide support for home teaching. The issues for homes where there was very limited access to devices were also noted specifically.

Another pertinent theme across the studies was the impact that COVID-19 had on testing and exams and the uncertainty regarding this. Fisher et al (2021) highlighted that there were mixed feelings reported by participants regarding national exams such as GCSE's and A-levels. Some participants expressed frustration over wasted effort towards their schooling, however, some stated they were relieved about not having to go through the stress of sitting exams. There was also recognition that assessment based on teachers' predicted grades could unfairly disadvantage young people who perform better in exams or do not have a good relationship with their teacher. Participants in Scott, McGowan & Visram (2021) study expressed similar experiences such as lack of closure about not having been able to sit exams or that their grades were somehow not real or 'not deserved'

Three studies, Larcher et al (2021), Scott, McGowan & Visram (2021) and Fisher et al (2021) all discussed how participants had talked about the 'return to school' after the first lockdown. Although some CYP expressed concern about being the first group to be in close contact coming out of lockdown, they did not really express being worried about contracting COVID-19 themselves. Participants discussed their concerns about the risks of going back to school and how they thought it would be difficult to control infection, even with one-way systems, social distancing, bubble groups and other safety measures. Participants expressed anxiety about these new rules and having to potentially isolate and miss more school. Additionally, they described the emotional strain of higher workloads and the impact that lockdown restrictions could have on their future. The majority of CYP were pleased/relieved to return to school and described excitement about being able to see friends face to face again and a sense of relief about returning to 'normal', however they also reflected on the dangers, stresses and strains going back signified. CYP described going back to school as a shock after six months away, as well as tiring, particularly because of 'catch up' on content that they had missed during lockdown. Some participants talked about rules that made school life a lot harder, examples given were being in the same classroom

for the whole day, restricted computer access and restricted interaction with friends and teachers. They were frustrated and confused about how rules were enforced, particularly when it came to what should be defined as 'close contact' and why they can see their friends inside, but not outside, of school.

2.10.9.5 Theme 5: Covid 19 and vulnerable groups

A key finding in all studies was that participants talked about their worries about COVID-19 and their concerns about how it might impact on loved ones and those more vulnerable than them. Participants in Larcher et al (2021) study recognised the difficulties that parents/carers faced potentially trying to work from home and support them with schoolwork too. CYP recognised that for some communication and staying connected may have been more difficult, for example, for elderly relatives who lack the skills to use on-line communication means and for those from under-privileged backgrounds who may lack the devices at home to access home schooling. Participants across all studies appeared to be aware of how the pandemic had impacted more on the socially disadvantaged. Participants in both McCluskey et al (2021) and Scott, McGowan & Visram (2021) studies often drew on examples from personal experience or from within their peer groups in considering vulnerability, those already known to be vulnerable and also where CYP experienced new or additional vulnerability as a result of the pandemic. They suggested a range of CYP for whom the impact of COVID-19 was felt most severely, examples included CYP with pre-existing mental health conditions; CYP who receive additional support with learning; those living in households where there is violence and abuse; young carers; those living in a family where someone had developed long COVID, and members of some minority groups, such as LGBT+.

2.10.9.6 Theme 6: COVID-19 and coping

A key finding across most of the studies was how technology had been helpful during lockdowns, enabling CYP to stay connected to friends and family remotely when they could not see them in person (Scott, McGowan & Visram., 2021; McCluskey et al., 2021; Fisher et al., 2021), this was described as helping them to maintain a sense of social connectedness with their friends and play remotely and synchronously (Thompson, Spencer & Curtis., 2021).

Scott, McGowan & Visram (2021) and Larcher et al (2021) described the resilience of CYP and how they had developed a range of coping mechanisms for being at home during lockdowns, for example, maintaining routines and keeping busy and trying new things such as a new activity/hobby. At a much broader, macro level, across all the studies, young people reported that they coped through reinforcing that sacrifices were needed in order to keep people safe.

2.10.9.7 *Theme 7: COVID-19 and positive experiences*

All five of the studies described some of the experiences CYP described as positive during COVID-19, for example, participants in Fisher et al (2021) and Thompson et al (2021) studies described how during lockdown, they had more time to pursue existing or new hobbies and extracurricular activities, particularly spending more time outside. CYP in most of the studies reported being more physically active than they would have been usually, going out for walks or runs with members of their household. There was improved confidence among some young people to cycle on roads when there was less traffic. In studies when participants spoke fondly about lockdown it was because of having more 'free time' and increased opportunities to spend time with family, for example, participants in both Thompson, Spencer & Curtis (2021) and Scott, McGowan and Visram (2021) studies described how COVID-19 resulted in them spending more time with the family they lived with and how family bonds felt strengthened because of this. There was a clear sense across all studies that most CYP enjoyed the freedoms afforded to them by not being in school and the opportunity of having 'free time'. Lockdown was described as providing a change of pace and for CYP, where school was a source of anxiety, lockdown provided them with a 'break' (Scott, McGowan & Visram, 2021). Thompson, Spencer & Curtis (2021) described how some CYP positively described their position of social responsibility and reflected their sense of pride at being part of a larger movement and time in history, this was also echoed in the studies by Larcher et al (2021) and Fisher et al (2021).

2.10.10 Critical review, summary and rationale for current research

Overall, the review identified a number of themes regarding CYPs reported experiences of COVID-19. It is important to acknowledge that there are likely to be

some issues with the trustworthiness and transferability of the SLR. The SLR was carried out solely by the author of this research, therefore, the search terms were individually devised, and the search and screening of the studies carried out individually. It is acknowledged in the current research that meta-ethnological approaches have been criticised for lacking clarity and comprehensiveness (France et al, 2019). Additionally, it is recognised that studies in the current SLR were carried out during the first COVID-19 lockdown and how CYP report their experiences of COVID-19 may now differ. Most CYP across these studies had access to on-line learning during lockdown, it did not include CYP who experienced digital poverty and exclusion to learning through this. All studies recognised that they are not representing the views of the most vulnerable CYP. It is important to note that the studies in the SLR did not clarify the use of the term 'vulnerable', however, the current research understands these terms as being relevant to people who are marginalised and at risk of social exclusion due to living in poverty, having disabilities and being from minority communities (Unicef, 2022). Additionally, as discussed earlier in section 2.4 (page 19) during COVID-19 the government defined CYP to be vulnerable and able to access education during lockdowns if they were supported by social care, looked after by the local authority, disabled and/or with an Education Health Care Plan (EHCP).

McCluskey et al (2021) noted concern following their research that the negative mental health impacts of the pandemic may be experienced more acutely and more severely by CYP who are already marginalised and more vulnerable to risk who were not included in their study. Furthermore, all of the SLR studies acknowledged that their participants did not represent those from vulnerable groups. Some studies excluded at the eligibility phase, for example, Kelly et al (2021), Roberts et al (2021) and Jones et al (2021) did investigate the experiences of vulnerable groups such as those leaving residential care during COVID-19 lockdowns and those who are trans or gender diverse, however, these participants were not of school age.

The current SLR illustrates a lack of research into the experiences of COVID-19 hearing the voices of vulnerable CYP, such as those with SEND. Larcher et al (2021) stated that the reason CYPs voices are not being considered in the pandemic response and recovery is unclear and there is a clear rationale to listen to them as CYP (increasingly termed the COVID-19 generation) are likely to experience the

impacts and consequences of the pandemic for many years to come (Thompson et al, 2021). McCluskey et al (2021) stated that there is deepening concern about the impact of COVID-19 on CYP in general and important questions have been raised about risks of shorter and longer-term impacts for those already identified as vulnerable. As discussed in section 2.9 (page 34), research, policy and legislation has recognised the importance of hearing the voices of CYP from vulnerable groups such as those with SEND and how such experiences and perceptions can impact education, well-being, and aspirations and the future. Therefore, the current research will aim to listen to, understand and report the experiences of CYP with SEND during COVID-19. The next Chapter 3, methodology, will discuss the research goal, aims and question in further depth.

3 Methodology

3.1 Introduction

This chapter presents the focused methodology for the current research and discusses its suitability from both philosophical and practical viewpoints. The chapter begins with an explanation of the research aims and discusses the paradigmatic, ontological, and epistemological position of the researcher. A detailed account of the research design is provided; this includes the rationale behind the choice of research design and the potential limitations. Following on from this, data collection methods and participant recruitment procedures are explained, alongside ethical implications arising from the research. Finally, consideration is given to the quality of qualitative research and the current design. The chapter then concludes by outlining the data analysis process of the adopted framework which prepares the reader for the findings in Chapter 4.

3.2 Research aims/goals

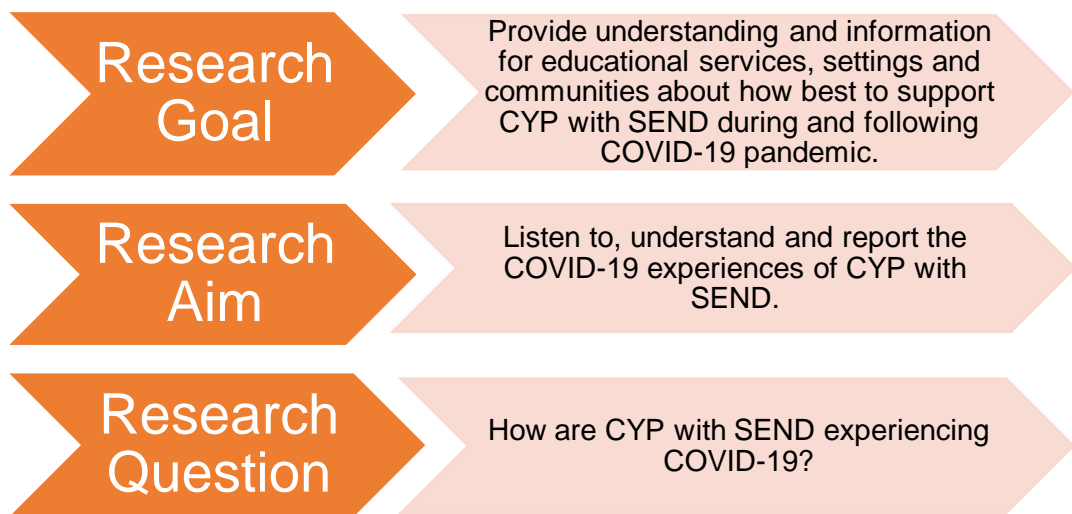
The current research aims were determined and developed through discussion with school SENCOs I worked with and the principal EP in my service. I decided to explore the experiences of children and young people (CYP) with special educational needs and disabilities (SEND) during COVID-19. Through the exploration of these experiences the research hoped to:

- Provide CYP with SEND, their families and communities with knowledge and understanding about their COVID-19 experiences. This intended to be through accessible research which also aimed to use the findings to form part of the 'recovery' process of COVID-19, whilst we potentially learn to live with it as an infectious disease.
- Give the participants the time and space to talk about their COVID-19 experiences and allow them to feel valued and heard.
- Present the reported experiences as part of research which describes a population of CYP who are potentially vulnerable (as defined in section 2.6 page 21) and have little opportunity to have their voices heard.

- Provide educational psychology services and education settings and services with a better understanding and appreciation of the experiences of CYP with SEND during COVID-19 to help inform practice and services moving forward.
- Support the implementation change within education systems through listening to and understanding the experiences of CYP with SEND during COVID-19.
- Add to the current research on COVID-19 as a review of the existing literature suggested that there was a lack of research hearing the voices and experiences of CYP with SEND.

Figure 6. uses a logic model to represent the research goal, aim and question to help explain the rationale of the current research.

Figure 1. *Logic Model Representing Research Goal to Research Question*



3.3 Methodological Orientation

3.3.1 Quantitative and Qualitative Research

Within psychological and educational research there are two methodological approaches; quantitative methodology, which takes a positivist approach and aims to objectively record and understand ‘truth’ through hypothesis testing. In contrast, qualitative methodology strives to generate contextualised and situated knowledge. It focusses on experiences and developing meaning (Mertens, 2015; Braun & Clarke,

2022). The nature of qualitative research, which aims to gain rich, in-depth understanding means that it typically has smaller numbers of participants than in quantitative research (Smith, 2008). The current research embraced the idea that knowledge comes from a position rather than a singular universal truth to be discovered (Braun & Clarke, 2021). Additionally, the research aims and question (illustrated in Figure 6 and section 3.2 page 63) sought to understand process of meaning over cause and effect, therefore, a qualitative methodology was most suited for the current research. Hardy & Majors (2017) stated that a strength of qualitative methodology is the diversity of the underpinning epistemologies and related research methods, this however means that trustworthiness (as discussed in section 3.5.1, page 82) about the chosen methodology is important. Therefore, the epistemological and ontological position of the research and how it impacts on the research process will now be considered.

3.3.2 Ontological and epistemological position

Psychological research requires a philosophical position to be taken with regard to the way in which the world is to be viewed as this influences the researcher's decisions and methodology (Mertens, 2015). This includes the researcher's views and understanding regarding the nature of what forms 'reality' (ontology) and how 'reality' is understood (epistemology). To ensure a robust research design there should be alignment with the research and the researchers own ontology and epistemology (Pouillot, 2007), which will now be discussed:

3.3.3 Research Paradigms

Guba and Lincoln (1998) state that researchers should begin enquiry by being clear about the paradigm which guides and informs their approach. A research paradigm has been defined as: *'the world view that is accepted by members of a particular scientific discipline which guides the subject of the research, the activity of the research and the nature of the research outputs'* (Pickard, 2013, p18).

The *positivist* and *post positive* paradigm is typically associated with quantitative research and for many years psychological/educational research has been established within this paradigm (Mertens, 2015; Creswell & Creswell, 2018). Positivism believes that there is a truth to be discovered through understanding the

direct relationship between the world and how it is perceived (Willig, 2013). The post-positivist paradigm looks to objectivity and generalisability in research, still believing in one reality but one that is understandable and based on probability, rather than direct causal relationships and certainty (Mertens, 2015; Robson & McCartan, 2016).

In contrast to the positivist paradigms, the *interpretivist* paradigm which is often associated with qualitative research believes that multiple realities exist and that there are individual interpretations of the world (Creswell & Creswell, 2018; Rehman & Alharthi, 2016). This is often referred to as the *constructivist* paradigm as it believes that reality is socially constructed and that different researchers bring with them their world view to the research (Rehman & Alharthi, 2016; Creswell & Creswell, 2018). Constructivism is described as having its roots in phenomenology, which focuses on the psychological and social experiences people have and the understanding they form (Smith, Flowers & Larkin, 2009), recognising that no version is more or less true (Guba & Lincoln, 1994).

This paradigm tends to take an inductive rather than deductive approach meaning that theories and themes are developed from the research data collected. The constructivist researchers aim can be viewed as exploring social constructions of meaning and knowledge through trying to understand lived experiences of people who are active in the research process (Mertens, 2010; Schwandt, 2000). As constructivist researchers aim to understand "...the world of human experience..." (Cohen, Manion & Morrison, 2007 p.36) this paradigm is appropriate for the current research as it aimed to explore the human experience of COVID-19 for CYP with SEND. Furthermore, the current research aims to gain an understanding of the subjective realities of participants. It acknowledges the individual experience and that multiple realities exist (Braun & Clarke, 2006).

3.3.4 Ontology

Ontology refers to the nature of reality and what there is to know (Guba & Lincoln, 2005; Mertens, 2015; Willig, 2013). Ontological positions tend to be of a *realist* or *relativist* nature (Willig, 2013). A *realist* ontology conceptualises a knowable reality, which can be found in an accurate and objective way (Braun & Clarke, 2021). In contrast, a *relativist* ontology does not subscribe to the notion that a singular reality

exists independently of human practices (Braun & Clarke, 2022) and believes that there are many interpretations that can be applied to any given situation (Willig, 2013).

Positivist paradigms tend to align with the realist ontological perspective, with positivism considered as being *naïve realism* and one form of post-positivism being *critical realism* (a position which retains the idea of truth, but that reality is never fully known (Braun & Clarke, 2022)). In contrast to this, constructivist/interpretivist paradigms believe that multiple realities exist and that they are socially constructed by different people (Rehman & Alharthi, 2016).

The current research assumed that individual participants construct their own reality and that multiple realities exist, i.e., how one young person is experiencing COVID-19 will be different to another. Therefore, it can be assumed that the current research takes on a relativist ontological stance.

3.3.5 Epistemology

Epistemology refers to the nature of knowledge and how it is produced (Guba & Lincoln, 2005; Mertens, 2015; Willig, 2013). The researcher's epistemological position determines the methodology and data collection used (Willig, 2013).

The positivist and post positive paradigm, in line with a realist ontological stance, search for 'truth' and view the researcher and participants as being independent of one another. This type of research aims to maintain a high level of objectivity by following rigorous procedures (Mertens, 2010; Creswell & Creswell, 2018; Robson & McCartan, 2016) and can be viewed as following an *objectivist* epistemology (Duberley et al., 2012). In comparison, research in the constructivist/interpretivist paradigm, in line with a relativist ontology, aims to follow a *subjectivist* epistemology (Denzin & Lincoln, 2018; Duberley et al., 2012). This type of research can be seen as an exploration of participants views and experiences, which is an interactive process between participant and researcher (Mertens, 2015; Creswell & Creswell, 2018). Lincoln, Lynham & Guba (2011) state that subjectivist epistemological assumptions '*are shaped by lived experiences, and these will always come out in the knowledge we generate as researchers and in data generated by our subjects.*' (Lincoln, Lynham & Guba, 2011, p104).

In the current study, there was an interactive link between the participants and the researcher through the interview process, therefore, knowledge was gathered through discussion and is socially constructed. The current research, therefore, takes a subjectivist epistemology, as it does not assume that one objective truth can be pursued, but that CYPs experiences of COVID-19, and the researcher's interpretation of these, are subjective, due to their individual constructs.

3.4 Design: Reflexive Thematic Analysis (TA)

TA is a method for '*developing, analysing and interpreting patterns across a qualitative dataset which involves systematic processes of data coding to develop themes*' (Braun & Clarke, 2022, p4). TA approaches are thought to offer more than just '*give voice*' (Braun & Clarke, 2006, p.7) as researchers are required to take an active role in analysis through selecting aspects of the participants' accounts, identifying themes and patterns across datasets and reporting these in a worthwhile and systematic way to develop the knowledge of others (Taylor & Ussher, 2001). Although a method in its own right, TA refers to a collection of approaches, each one determined by differing paradigm assumptions (Braun & Clarke, 2022). The different approaches are described as being on a continuum, at one end there is coding reliability approaches (Terry et al.,2013) and at the other end is Reflexive TA (Braun & Clarke, 2020).

Reflexive TA has been reconceptualised by Braun and Clarke from the original six step process (2006). It is an approach to analysing data which is fully embedded within the values of a qualitative paradigm and this research adopts this approach. Reflexivity enables a researcher to recognise their own position within the research and to consider their individual impact on interpreting data (Braun & Clarke, 2022) (this is further discussed in section 3.5.2 page 85).

3.4.1 Rationale for and critical evaluation of Reflexive TA

TA allows for theoretical and research design flexibility and means that multiple theories can be applied across a variety of epistemologies. Furthermore, TA is described as applicable to research questions that go beyond an individual's experience (Guest, MacQueen & Namey, 2012). Reflexive TA differs from some approaches TA which look for reliability and replicable knowledge and are situated within a more positivist paradigm. Reflexive TA states the importance of subjectivity

as a resource to develop knowledge (Burr & Dick, 2017). Reflexive TA, therefore, appeared to fit well with the interpretivist and subjectivist stance of this research as it can be used to explore the reality as constructed by the participant, but also considers the impact of the social context on these meanings (Braun & Clarke, 2006; Clarke & Braun, 2018). This approach also aligned with my values that knowledge is developed through immersion and continual thinking and reflection. Both my positionality statement in the introduction (section 1.4, page 11) and 'reflexivity' section 3.5.2 (page 85) provides further information on reflexivity and my personal reflexivity as a researcher in the current study.

The current research was exploratory, Reflexive TA takes an inductive approach which is described as allowing for 'theoretical freedom', meaning that it is not restricted by theoretical assumptions as some other qualitative data analysis methods are e.g., interpretative phenomenological analysis (Braun & Clarke, 2006). However, Braun & Clarke (2022) suggest that this 'theoretical freedom' can mean that Reflexive TA has limited interpretative power if it is not grounded in a theoretical base. Additionally, Braun & Clarke (2022) also acknowledge that researchers always make theoretical assumptions, and that good Reflexive TA needs explicit locating in terms of theory to give analysis more power and validity. It is thought that there is a risk that Reflexive TA could miss nuanced data if the researcher uses it in a theoretical vacuum (Guest, MacQueen & Namey, 2012). This was addressed in the current research by being transparent about the ontological and epistemological approach (section 3.3 page 65) and by making links between analysis, theory and research literature in Chapter 5. Another criticism of Reflexive TA is that it does not allow researchers to make technical claims about language usage (unlike discourse analysis and narrative analysis), this criticism is addressed in Chapter 5 (section 5.5, page 132). The current research took a collaborative approach with the key aim of sharing the research findings with educational settings, local authorities and educational psychology services (see section 3.2, page 63 research aims), this meant that the results needed to be accessible to wide audience, which Reflexive TA offered (Braun & Clarke, 2022).

Analysis was carried out in line with the six-step process proposed by Braun and Clarke (2006;2022). This is described in detail in the data analysis section 3.6 (page

86). To ensure quality in the Reflexive TA, the 15-Point Checklist of Criteria for Good Reflexive TA provided by Braun & Clarke (2022) was also utilised.

3.4.2 Consideration of other methodological approaches

Alternative qualitative methodologies, such as Interpretative Phenomenological Analysis (IPA), Discourse analysis and Grounded theory were considered as methodological approaches for the current research. The thought processes around disregarding them as an approach can be seen in appendix 3.

Due to similarities in aspects of their approach, I found it particularly challenging deciding what would be most appropriate between Reflexive TA and IPA. However, Reflexive TA was eventually selected as this research looks to explore CYPs perspectives across the data set, whilst acknowledging the wider socio-cultural context experiences are situated within (Braun & Clarke, 2022) (whereas IPA facilitates research which focusses on individual narratives). Furthermore, as the research question is not idiographic or based around language, Reflexive TA is a more suited to the research than IPA (Clarke et al., 2015).

3.4.3 Research participants and setting

3.4.3.1 *Context*

The research took place in a city within the East Midlands region. The city is one of the most deprived local authorities within the UK (Index of deprivation, Ministry of Housing Communities and Local Government, 2020) with many people who have English as an additional language and/or are refugee and asylum-seeking citizens and families. According to census data (2021) the city's population is made up of 45% White British, and 55% Black and Minority Ethnicity (BAME). The city has a total of forty-seven thousand three hundred and thirty five CYP in one hundred and sixteen schools: eighty three primary, twenty seven secondary and six specialist provisions. Seven thousand four hundred and eighteen (15.7%) are considered to have a SEND, which is higher than the National SEN support proportion (11.9%). The city LA review (2021) recognised the link between SEND and deprivation and stated that the most deprived wards in the city have higher levels of CYP with SEND. Forty- two thousand

of the city's CYP live in families where no adults work or where the household income is low. This is equivalent to 64.8% when England is 43%.

3.4.3.2 Definitions of terms used in the local authority where research took place

In line with the SEND code of practice (2015) the LA defines a CYP with *SEND* if '*they have a learning difficulty or disability which calls for special educational provision to be made for him or her*' (p15). Some CYP with SEND have an education health care plan (EHCP) which is '*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.*' (DfE, 2021).

Within the LA where the research took place High Level Needs Funding (HLN) is provided to support inclusive education practice through the access to funding and specialist resources without recourse to a formal EHCP assessment process. HLN funding is allocated to pupils with SEND and those with an EHCP who experience the most significant barriers to learning and participation. These pupils have ongoing involvement from external support services in planning and reviewing the provision they require that is additional to and different from quality first teaching. As of Autumn 2020, in the city where the research took place, eight hundred and eighty-one young people are in receipt of HLN funding, this is an increase from eight hundred and fifteen young people in 2019. Of these, six hundred and sixty-eight (75.82%) are supported at SEN Support, an increase from six hundred and fifteen young people in 2019; and two hundred and thirteen (24.18%) have an EHC plan, an increase from two hundred young people 2019. Census data (2021) shows the primary needs of children and young people with SEND in the city where data was collected as being the following:

Primary Need Total number and percentage	
Social, emotional and mental health	1756 23%
Moderate learning difficulty	1490 20%
Autistic spectrum disorder	1356 18%
Speech, language and communication needs	1273 17%
Specific learning difficulty	580 8%
Other difficulty	330 4%
Physical disability	234 3%
SEN support but no specialist assessment of type of need	155 2%
Severe learning difficulty	125 2%
Hearing impairment	121 2%
Profound and multiple learning difficulty	73 1%
Visual impairment	71 1%
Multi-sensory impairment	11 0%

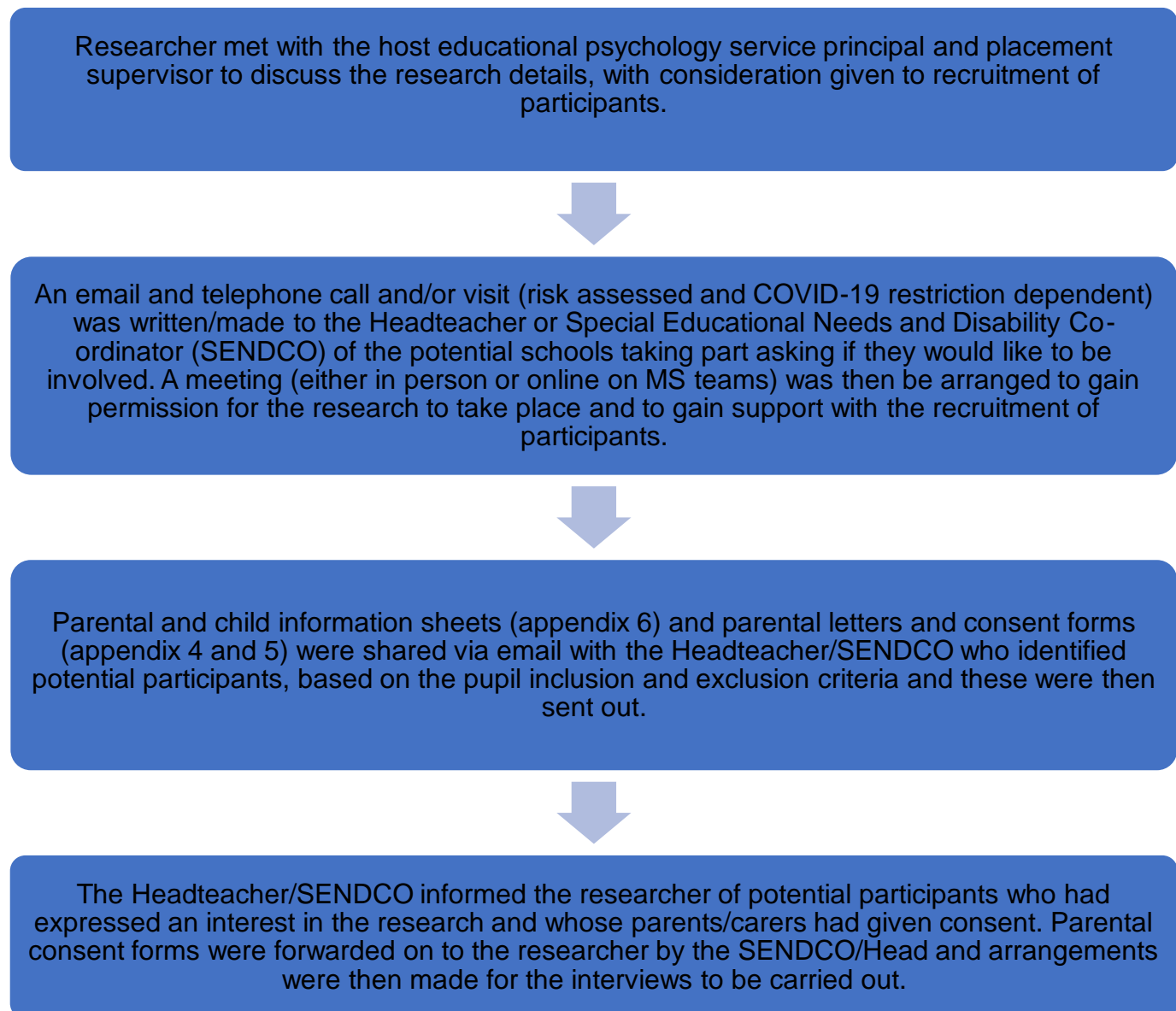
These numbers and proportions are very similar to those recorded in previous years in the city. Compared to national, these proportions are for the most part similar, although the city has a higher proportion of children with the need Autism than nationally (latest national figure was 12% in 2019/20).

3.4.3.3 Identification, selection and recruitment

Research suggests that to gain insight into specific experiences using qualitative methods, a purposefully selected sample is required (Smith et al, 2009). This means that rather than representing a population, the sample instead, represents a perspective. A non-probability, purposive sample was used in the current research, which aimed to ensure consistency with the research design.

Guidelines for sample size suggest that for the current research, six to ten participants are adequate (Braun & Clarke, 2013). At the time of the research, I was a trainee educational psychologist (TEP) within the local authority educational psychology service and was therefore able to identify, select and recruit participants within the local area. Figure 7. shows the process undertaken to identify and recruit participants.

Figure 7.



3.4.3.4 Inclusion criteria

Based on the research question, the participants required for this research were CYP who have SEND. Participants were selected using a set of inclusion and exclusion criteria which can be seen in Table 4.

Table 4. *Inclusion and exclusion criteria applied when selecting the sample of participants.*

Included	Excluded	Reason
CYP at secondary school	CYP in EYFS/KS1/KS2	CYP at secondary school were considered more likely to be able to access the length of interviews/type of questions being asked.
CYP with SEND, (determined through having an EHCP or being identified by the school as receiving HLN funding due to SEND).	Other CYP without specified SEND by the school.	Research question focuses on CYP with SEND.
CYP in mainstream schools/special schools and alternative provisions	CYP in residential schools.	Difficulties in researcher accessing residential settings.
Informed consent obtained from parent/carer and CYP	No consent from parent/carer and/or CYP.	Ethical procedure in place required parental and participant consent.
CYP has lived in the UK and attended the same school (or feeder primary school if in year 7) during the COVID-19 pandemic.	CYP has not lived in UK during COVID-19 pandemic.	

3.4.3.5 Stakeholder engagement

There are a number of key stakeholders who need to be acknowledged in the current research, in particular the CYP who took part and their parent(s)/carer(s) who allowed them to. The research was carried out by a trainee EP (TEP) as a required thesis as part of the doctorate in applied educational psychology training. TEP's have a placement in a host EP service, therefore, the university and host EPS were stakeholders in the current research. Stakeholder commitment was ensured through providing letters of information and gaining informed consent. I also accessed supervision, with both placement supervisor and university academic tutor to help guide research. My host EPS offered support as they had an interest in the research

and were therefore invested in allowing the researcher time to carry out the data collection. I had a 'patch' of schools, this allowed for a level of independence over practical arrangements with schools.

3.4.3.6 Final participant sample

All participants who signed consent forms for the research apart from one were interviewed for the research. The one who did not take part after signing a consent form was isolating due to COVID-19 symptoms at the time of data collection and had then left the school when I went back to offer an interview in the Autumn term of 2021.

The final sample for the study can be seen in Table 5, this details information around each participant to ensure their eligibility to take part. There were six participants from four different secondary schools in the LA (which included one Alternative Provision). All participants accessed additional help from teaching assistants both in class and in SEN units with the schools. *All participants accessed a combination of lessons with other pupils in mainstream classrooms and individual/small group lessons in the SEN unit. The age range of participants was eleven years and one month to seventeen years and four months. To protect the anonymity of participants, pseudonyms were given for names of people, places or any other information that was felt may lead to the identification of participants. I had planned adapted versions of the interview to provide those with communication needs ways of expressing themselves. This was done through taking objects that may be associated with COVID-19 such as: facemasks, lateral flow tests and symbols/pictures to use as prompts/communication tools if needed. I also asked SENCOs to ensure that participants bring their own communication tools they may use and that a teaching assistant be there to assist them if necessary. All participants were able to manage the speech and language demands of the interview.

When discussing the context linked to COVID-19 restrictions in Table 5, 'bubble groups' refer to groups CYP were put into at school- usually a form or a year group who moved around the school together and accessed lessons together but did not have contact with other bubble groups (in an attempt to reduce transmission).

Table 5. Participant Details

Pseudonym (interview number)	Sex	Age	School year	Educational provision*	Context of COVID-19 restrictions at school at time of data collection	Ethnic origin	Diagnosis(es)/Specified SEND	EHCP/HLN	Agencies currently involved
Immy (4)	Female	11.1	Year 7	Mainstream (SEN unit)	Year 'bubble groups' and limited school site access. Access to SEN unit.	White British	Autism (Asperger's) Social Emotional and Mental Health	EHCP&HLN	-CAMHS
Cat (2)	Non-binary	12.1	Year 7	Mainstream (SEN unit)	Year 'bubble groups' Access to SEN unit.	White British	Autism and Pathological Demand Avoidance Social and Emotional and Mental Health	HLN	-CAMHS -Social care
Kane (5)	Male	13.8	Year 8	Mainstream (SEN unit)	Year 'bubble groups' and limited school site access. Access to SEN unit.	White British	Moderate Learning Disabilities with Speech and Language Needs	HLN	Speech and Language Therapy
Tash (3)	Female	14.7	Year 9	Mainstream (SEN unit)	Year 'bubble groups' and limited school site access. Access to SEN unit	Black Caribbean	Global developmental delay and medical condition (cardio-vascular) Speech and language needs	HLN	-Speech and Language Therapy -Paediatrician
Jordan (1)	Male	15.5	Year 10	Alternative provision 3 days per week Mainstream 2 days per week.	Full access to alternative provision with masks.	White British	Autism, Social Emotional Mental Health Needs, Attention Deficit Hyperactivity Disorder, Global developmental Delay	EHCP&HLN	-CAMHS Child and adolescent mental health service) -Social Care
Hugh (6)	Male	17.4	Year 12 (sixth form)	Mainstream (SEN unit)	Access to school for lessons only.	White British	Autism (Asperger's) Social Emotional and Mental Health	EHCP&HLN	Private psychiatrist

3.4.4 Data collection/research process

3.4.4.1 *Identifying a suitable method*

In keeping with the qualitative research design and exploratory purpose of the current research, semi-structured interviews were chosen as the method of data collection. A semi-structured interview involves the researcher preparing a short list of flexible questions as a starting framework for discussion with the participant and then further questions can be asked to allow participants to clarify and elaborate on their response (Howitt, 2016; DiCicco-Bloom & Crabtree, 2006). Howitt (2016) described semi-structured interviewing as a commonly used technique in gathering qualitative data which can be applied with varying levels of flexibility and rigor. The rationale for selecting semi-structured interviews and the advantages and disadvantages of this approach are discussed in section 3.4.4.3, page 78).

The semi-structured interviews were framed to participants as an informal discussion, and I conducted them with individual participants in a room at their school or alternative provision. All interviews were audio recorded and lasted between a time of 35-50 minutes. Further information on the procedure and ethical considerations are provided in section 3.4.5 (page 79).

Smith et al (2009) suggests that researchers need to identify a range of topic areas underpinning the research question when developing interview schedules, therefore, the interview questions were designed following a comprehensive review of the literature which directed both the research aims and development of the interview questions to focus on particular areas for example, on-line learning and social and emotional mental health during COVID-19 lockdowns. I sought to develop questions that took both a narrative and descriptive approach, that were open-ended and expansive and phrased questions carefully to avoid leading responses (Smith et al., 2009). I acknowledge that it may not be possible to remove all biases from questioning yet endeavoured to do so to the highest degree. Additionally, the reflexive nature of the research design allowed for my input during the interviews. A balance was sought between structured and unstructured approaches to questions to both focus the research around identified gaps in the literature but also to allow participants knowledge to fill these gaps. The interview schedule can be seen in appendix 9.

3.4.4.2 Piloting semi structured interviews

The semi-structured interview schedule design was piloted with the first participant (Jordan). During the pilot interview, although all questions were asked, they did not necessarily follow the order they were set in, as the I found that some questions could be combined into one, for example, those that focused on on-line learning. The pilot interview allowed me to see that flexibility regarding the order of the questions was important in order to help structure participants' thoughts and answers in a smooth and natural conversational way. I made the decision, in conjunction with my supervisor, to keep the interview schedule the same but acknowledged that the questions would need to be used flexibly and may not all be answered fully. This supported Robson & McCartan's (2016) suggestion that although the researcher can use questions to guide the interview, these may need to be modified as deemed necessary throughout the interview, allowing more flexibility for the participants' responses. This was found to be applicable during the interviews in that it felt part of being responsive of each participants individual needs which the I felt was important, ethically. For example, some participants seemed more comfortable talking at length about their emotional state during the first wave of COVID-19 whereas others wanted to move on more quickly about this topic.

3.4.4.3 Rational for use of semi-structured interviews

Based on the inclusion criteria for the current research, all participants taking part had SEND and therefore the potential needs of the CYP needed to be carefully considered when choosing how to gather data. Semi-structured interviews were selected as they have been described as facilitating a more comfortable interaction between the researcher and participant over other designs with increased or decreased structures (Smith et al., 2009). As semi-structured interviews are thought to be a flexible approach, it is possible to adapt questions depending on the person's needs, through this they allow for a greater degree of control for CYP which can be empowering, particularly for children with Autism (Howard et al., 2019).

There are several methodological advantages as well as challenges to using semi-structured interviews in qualitative research. As discussed above, a semi-structured interview is thought to be advantageous for exploratory research as it gives the researcher flexibility and control and helps to give participants the opportunity to

provide detailed responses and descriptions, therefore giving a rich data set for analysis (Howitt, 2016; DiCicco-Bloom & Crabtree, 2006). However, semi-structured interviews are highly individual and have been critiqued due to concerns regarding their generalisability (Diefenbach, 2008). Potter & Hepburn (2005) highlighted how issues of internal and unconscious bias may impact on the interview process and lead to threats at both the data gathering and data analysis phase, for example, through asking leading questions and interpretations in favour of the researchers view. However, the chosen research design of Reflexive TA did not strive for generalisability and also recognised the researcher's reflexivity in the interviews. Smith et al (2009) described how semi-structured interviews can produce data which varies in quality as they can rely on the relationship between the researcher and participant. In the current research, I did not know the participants and therefore did not have a relationship with them, however, as a trainee EP, developing rapport and using consultation skills was an existing skill that I considered as beneficial. I was able to build rapport with all participants before the interview. The discussion in Chapter 5 (section 5.5, page 132) provides further information on methodological limitations of the current research.

3.4.5 Ethical consideration

The current research adhered to a range of ethical considerations, in line with guidance provided by the British Psychological Society (BPS) Code of Ethics and Conduct (2018); BPS Code of Human Research Ethics (2014); BPS Practice Guidelines (2017); and the Health & Care Professions Council Standards of Conduct, Performance and Ethics (2016). Ethical approval was granted by the University of Nottingham prior to starting the research study (see appendix 7 for approval letter). The nature of the research (i.e., involving young people, recalling experiences) meant particularly close consideration of key ethical guidance pertaining to informed consent, right to withdraw, confidentiality and reducing harm was required; these will now be discussed:

3.4.5.1 *Informed consent*

As mentioned in figure 7, all potential participants identified by school SENDCO's received an information letter and consent form (see appendix 4 for parent version and appendix 6 for young person version) and were asked to contact me/my supervisor if they had any further questions and to send the consent forms back to

school. In line with the guidance (BPS, 2014), consent was sought from both the CYP and their parents due to the CYP being aged under 16 years old. Signed consent forms were obtained prior to the interviews being conducted and checked again verbally before the interviews and afterwards to ensure that the participants still consented to their interviews being used for the research.

3.4.5.2 Right to withdraw

Participants were informed that taking part in the study was voluntary and they were reminded of their right to withdraw before, during and after their participation. Participants were also made aware that they did not have to provide a reason for their withdrawal from the research.

3.4.5.3 Confidentiality and data protection

Participants were all given assurance of confidentiality and anonymity. The audio recordings were stored on an electronic password protected file and deleted following transcription. All transcriptions were anonymised and also stored securely. Any identifiers, i.e., school name, teacher name and name of the participant and their family members were replaced with pseudonyms or omitted during transcription. All participants were made aware that safeguarding procedures were adhered to throughout the research, and that in circumstances where disclosures were made and the safety of themselves or others became a concern, that I would have to act on this information. This did occur in one interview and safeguarding procedures were followed.

3.4.5.4 Reducing harm to participants

The interviews were considered to be a minimal risk of harm to the participants within the study, however, I was aware that there may have been potentially sensitive topics discussed, due to the nature of COVID-19. This may have potentially provoked participants to feel upset or stressed through the recall and discussion of unpleasant memories. To account for this, I advised participants, prior to beginning the interview, that they could stop the interview at any time. Participants were also reminded of their right to withdraw, throughout the recruitment and data collection process. A debrief

was given to participants after each interview, including letting the participant know the researcher and research supervisor contact details.

3.4.5.5 COVID-19 risk assessment

Due to the risks posed by COVID-19, a risk assessment which took into account HCPC (2016) code of conduct and ethics was carried out regarding data collection and interviewing participants and submitted as part of the research ethics application (see appendix 7 for approval letter). All interviews were conducted in the summer term of 2021 and were able to take place in person. There was a back-up plan in place to carry out interviews by MS teams if they were not possible face to face. The interviewer wore a mask and let participants decide if they wanted to wear a mask themselves. Interviews took place in a ventilated room with a two-metre distance between interviewer and participant. A lateral flow test with a negative result for the interviewer was carried out before meeting participants. The school were given copies of the research COVID-19 risk assessment and school risk assessments were completed where required. Appendix 8 shows the COVID-19 risk assessment carried out as part of ethical approval for the research.

3.5 Trustworthiness in qualitative research

Quantitative research values objectivity and the control of bias in the search for truth and is therefore typically evaluated through the study and evaluation of its objectivity, reliability, and generalisability. In contrast, qualitative research values subjectivity with researcher subjectivity described as the 'primary tool for Reflexive TA' (Braun & Clarke, 2022, p8). Qualitative research therefore requires a different approach to evaluation which focuses on the experiences of individuals (Patton, 2002). The notion of researcher bias and the possibility of objective knowledge generation makes little sense within the interpretation of qualitative data and Reflexive TA which cannot be described as accurate but can be weaker or stronger. It is possible to have a framework of rigour which involves coding and analysis whilst working creativity and subjectively acknowledging one's own biases and viewpoints (Braun & Clarke, 2022). This section will discuss the challenges of evaluating qualitative research and its credibility in relation to the current research study.

3.5.1 Trustworthiness: challenges in evaluating qualitative research

There are numerous qualitative research methods available within the field of psychology and each method is based on differing philosophical understanding and assumptions (Yardley, 2015). Researchers understand and acknowledge that specific criteria are needed to assess the quality of research and evaluating qualitative research can be viewed as a challenge (Yardley, 2015). Evaluative frameworks have been developed for qualitative research including one by Yardley (2015) which is applicable to a wide range of qualitative methods and sets out four core principles to evaluate qualitative data, these are: sensitivity to context; commitment and rigour; coherence and transparency and impact and importance. These criteria are detailed below and are applied to the current research. This is referred to as part of the methodological considerations in the discussion in Chapter 5 (section 5.5, page 132).

3.5.1.1 *Sensitivity to context*

Sensitivity to context refers to the researcher's consideration of the theoretical literature, the socio-cultural context of participants and ethical issues. The details of how this has been considered in the current research are outlined below:

- Qualitative research should contribute to the existing theoretical and empirical literature (Yardley 2015), researchers, therefore, need to be aware of the existing research around their area of study and chosen methodology. To ensure that the current research is sensitive to the context it falls within, during the design phase of the current research, an extensive search of the existing literature on COVID-19 and CYP with SEND carried out as well as research into Reflexive TA. Gaps within COVID-19 literature regarding SEND and pupil voice were identified and this allowed for the aims of the research and the methodological approach adopted to be relevant to a specific population within the wider theoretical understanding of the impact of COVID-19 on CYP.
- Qualitative research needs to be sensitive to the socio-cultural contexts of the participants (Yardley, 2015). When considering socio-cultural influences in the current literature, the current policies within the UK relating to CYP with SEND were studied. This enabled a deeper understanding of the context of SEND within the UK. I had worked within the field of SEND so had a sensitive

understanding of the area. Additionally, current literature regarding COVID-19 and how it has influenced education and CYP's lives in a variety of contexts was drawn upon.

- Qualitative research requires the researcher to be ethically sensitive in how they engage with participants (Yardley, 2015). The current research was informed by ethical considerations specific to the participants. Given the perception of CYP with SEND constituting a marginalised and vulnerable group, a sensitive approach was adopted throughout. Participation in the interviews was voluntary and informed. The interviews were conducted in the participants schools. Empathy and rapport was built with participants throughout the process. Most participants reported afterwards how they felt good to have talked about COVID-19 and that it was nice to be asked and to be feel heard. More information regarding ethical process and sensitivity can be seen in section 3.4.5 (page 79).

3.5.1.2 Commitment and rigour

Commitment and rigour refer an in-depth engagement and interest with the topic and the participants (Yardley, 2015). Details of how this was demonstrated in the current research are listed below:

- There was a persistent engagement in the literature throughout the research process and through the recruitment of participants from a hard-to-reach population, thus elevating the unheard voices of those who had not yet been included in COVID-19 literature.
- Commitment to participants during interviews was shown through making them comfortable and listening attentively to their accounts. Where required, participant uncertainties were clarified as the flexibility of semi-structured interview schedules allow.
- The current research involved full immersion in the data, where I personally transcribed the interviews; therefore, listening to and hearing the transcripts multiple times.
- I had previously used TA in a systematic literature review so had some experience of the approach. I showed commitment by reading around the

area, attending external seminars by Braun & Clarke (2022) and learning more about the reflexive approach.

- I joined a group of other researchers using Reflexive TA to share knowledge and understanding throughout the research process. Additionally, I participated in regular research supervision with my research supervisor and other researchers to discuss interpretations of the data.
- I followed the processes of Reflexive TA data analysis as outlined by Braun & Clarke (2022). The process is detailed along with the specific steps undertaken in section 3.6 (page 86). I used the checklist devised by Braun & Clarke (2006) to evaluate the analysis process and determine whether analyses were 'good' (p,36). This ensured that the interpretations made, and the development of candidate themes, were thorough and reflected the accounts of participants.

3.5.1.3 Coherence and transparency

Transparency refers to readers being able to see a clear link between theory and method and how interpretation is derived from the data (Yardley, 2017). It acknowledges that the view of the researcher can never be value free (Denzin & Lincoln, 2011). Yardley (2015) states that the write up of the research needs to be clear and understandable and with a clear argument. Coherence refers to the research being understandable as a consistent whole (Yardley, 2008). Details of how both coherence and transparency in the current research were demonstrated are listed below:

- Consistency between the method and epistemological position was aimed for with the reasons and justifications for choices highlighted throughout the write up the research.
- Data collection and analysis procedures were clearly described in the research. To ensure descriptive validity (related to the accuracy of information gathered), individual interviews were recorded and transcribed verbatim.
- The recursive nature of Reflexive TA was also viewed as supporting the development of a consistent whole.
- Reflexivity is important to the transparency of qualitative research (Yardley, 2008) and this was closely considered (section 3.5.2 below).

3.5.1.4 *Impact and importance*

Impact and importance of research refers to how it generates knowledge that is useful and makes a difference i.e., in respect of practical utility, by generating hypotheses or changing how the world is considered (Yardley, 2017). Research can therefore have implications, theoretically, practically, and socio-culturally (Yardley, 2015). Details of how the impact and importance of the current research was considered are listed below:

- Through the current research adopting an exploratory, inductive methodology, it was hoped that the voice of CYP with SEND was promoted and contributed to improved understanding of their experiences of COVID-19 and what support they might benefit from.
- At a national level, the impact of COVID-19 is a current interest to the UK government and within my current LA setting, which emphasises the relevance of the current research.

3.5.2 Reflexivity

Braun & Clarke (2022, p294) define reflexivity as the '*process and practice of a researcher critically reflecting on how their disciplinary, theoretical and personal assumptions and their design choices shape and delimit the knowledge they produce*'. A researcher must therefore attempt to understand their own perspectives to have a good quality analysis. Willig (2013) stated that there are two types of reflexivity: epistemological and personal. Epistemological reflexivity is described as a researcher reflecting on how knowledge is understood and how their own assumptions and beliefs about the world can influence the research process (Willig, 2013). Personal reflexivity relates to a researcher reflecting upon how an individual's '*values, experiences, interests, beliefs, political commitments, wider aims in life and social identities have shaped the research*' (Willig, 2013, p10). Reflexivity is also about how the researcher(s) considers the power dynamics between themselves and participants and how they can strive to neutralise this. The researcher must also reflect on how the research may create change for the participants and researcher (Willig, 2013). I maintained reflexivity in the current research through having an awareness of how my beliefs and values potentially influenced decisions made at each stage of the research

process. This included the potential impact on the interview and analysis process and the interpretation of data (Willig, 2013). Reflexivity is a fundamental to Reflexive TA, which analyses and interprets the experiences of others. I kept a research diary which was used to reflect on factors which may have impacted upon the research process. An example of a reflexive account from the research diary can be viewed in appendix 14. Langdrige (2007) suggests that researchers should be transparent with readers through providing an outline of their position, perceptions, and relationship to the participant group. This is thought to enhance the credibility and validity of the research design and the reader's understanding of the research (detailed in section 1.4 page 11).

3.6 Data analysis process

Braun & Clarke (2022) outline six phases a researcher can undertake to carry out a structured and systematic approach to data analysis using Reflexive TA. This process was carried out in the current study and will now be discussed. It is important to note that a 'theme' is described by Braun & Clarke (2006) as something that depicts a prominent pattern within the data in relation to the research question(s). A theme, therefore, is dependent on researcher judgement and not necessarily on frequency. Additionally, it is also important to note that my constructivist analytic approach shifted during the process between more inductive and deductive modes. Inductive exploration is analysis where themes relate to the transcripts (Braun & Clarke, 2006). A deductive approach analyses data through a theoretical, "top down" approach (Braun & Clarke, 2006, p83). I also used both semantic and latent coding. Semantic coding identifies the overt meaning explicitly stated in the data whereas, latent coding involves exploring the more implicit and underlying meaning expressed by participants (Braun & Clarke, 2022). Numerous cycles of the phases were carried out before finalised themes were decided from candidate themes. Reflexive TA in this research was not a set of steps that were followed, it was very much a recursive process. Chapter 5 (section 5.5 page 132) discusses the methodology and the limitations encountered. The phases of analysis will now be described in further detail:

3.6.1 Phase 1: Familiarization with the Data

This phase involved me becoming deeply familiar with the data set by becoming both immersed in the data whilst retaining critical engagement (Braun & Clarke, 2022):

- For each participant, interview recordings were listened to multiple times to allow for immersion in the data whilst being transcribed verbatim and my reflections noted whilst transcribing.
- I noted down my initial feelings and reactions to the data which contributed to the reflexivity, a necessary aspect of the analysis process.
- Printed versions of the transcript were printed with wide margins to allow for me to record comments (see appendix 10 for an example).
- Line-by-line inspection of the printed version of the transcript took place where there was close examination by reading and re-reading transcripts a minimum of three times; at least twice whilst listening to the audio recording and a third and fourth time in isolation.
- Transcripts were re-visited in the following phases.
- Data familiarisation allowed for many points of possible analytic interest and initial coding in the data.

3.6.2 Phase 2: Coding

This phase involved me taking an engaged and systematic approach to developing codes and patterns of meaning in the data:

- An inductive, data-driven approach to data coding was initially adopted (Braun & Clarke, 2006) where I used comments to guide initial code development (see appendix 11 for an example). For each participant the entire data set was coded using open coding – i.e., codes were not predetermined but developed in response to familiarization with the data (Robson, 2002).
- Given the exploratory nature of this study, an initial data-driven approach was thought to reduce the likelihood of key ideas not already identified within a theory being overlooked. However, it is acknowledged that codes may be influenced by my role as interviewer and my theoretical knowledge. It is also acknowledged that coding may have become more deductive once connections to theoretical ideas were noticed.

- Coding was refined through various rounds and involved going through the data-set in different orders (Braun & Clarke, 2022). The process of coding and clustering of codes can be seen in appendix 12. The clustering of codes reduced them to a more workable number.
- I recorded my own reflexive thoughts, including my emotional responses which arose during this process and these were noted next to the codes (appendix 11). This formed part of the continuous process of questioning the data and assumptions I may make (Braun & Clarke, 2022).
- I chose not to use data-analysis software for TA such as Nvivo. I had carried out the six interviews and transcribed them myself and therefore already felt immersed in the data and had begun to start coding. Furthermore, I felt personally invested in the process as one which was slow, deep and engaged and which allowed for plenty of time for reflection and insight to develop. I therefore felt the claim Nvivo made for 'faster and easier data analysis' was at odds with the slow and complex process I was already engaged in in Phase 1.

3.6.3 Phase 3: Generating initial themes

In this phase, following initial codes being generated, the analysis shifted towards a broader focus whereby codes were clustered to create candidate themes. It is important to note the change within Stage 3 Reflexive TA approach (2022) compared to Braun & Clarke's (2006) original paper. This stage was initially named 'searching for themes' (Braun & Clarke, 2006), however in Reflexive TA it is now 'generating initial themes' (Braun & Clarke, 2022). This places me as the researcher in an active role in the construction and generation of themes (Braun & Clarke, 2019). My active role as researcher within the analysis involves me developing themes through my theoretical and disciplinary knowledge. This generation of meaning and knowledge can be associated with the interpretivist epistemology the research is situated within. During this phase:

- Key themes were described, as opposed to a description of all possible themes within the data.
- Meaning was explored both inductively and deductively. Codes at both the semantic and latent level were considered (definitions in section 3.6).

- Initial codes were colour coded and organised into themes and when visually organising these initial codes into candidate themes, duplicates were combined (appendix 11). This stage allowed for codes that appeared to be outliers to be set aside.
- The process outlined was repeated across data transcripts for each participant. The comments recorded that were pertinent to the previous data sets were noted so that links could begin to be formed between participants.
- Codes were clustered to formulate candidate themes and then candidate themes were given a draft name, one that was thought to best suit the cluster and which closely matched words used by the participants.
- Codes and initial themes were checked throughout the analytical process with my supervisor and Reflexive TA group of other researchers to ensure they reflected an effective interpretation of the participants' experiences.

3.6.4 Phase 4: Developing and reviewing themes

In this phase, the coding clusters and tentative themes were developed and reviewed through the following process:

- All codes within a theme were re-read as one to see if they fitted together and moved if they did not fit within the theme or seemed better suited within another theme. This process continued until I felt satisfied with the fit of the data (appendix 12 illustrates how codes were initially clustered and appendix 13 shows the process of mapping the themes).
- A thematic map related to the research question was created and the data set considered as a whole to see if the themes accurately depicted the data. This also allowed me to re/code any data that had been missed in the early stages of coding. Themes could be changed as they did not adequately fit within the question which led to a refinement of themes.
- A review was carried out of the contents of the candidate themes to ensure that the data offered an adequate level of evidence to support each theme.
- I kept returning to the original transcripts to ensure the extracts selected aligned with the developing themes.

3.6.5 Phase 5: Defining and naming themes

Braun & Clarke (2006) suggest that during this phase the researcher needs to consider the data set for each theme, with the aim of determining what the data within the theme conveys in relation to the research question. This was carried out through the following process:

- I began by revisiting and redrafting the names of cluster themes to accurately capture the essence of the data within and/or related to the research question. The tentative themes were re-considered to ensure they had a centrally organising concept and clear boundaries so as not to merge into one another.
- Various thematic maps were generated which pertained to each of the candidate themes and could be reviewed before analysis completion. Appendix 13 shows an example of a thematic map generated and the process of mapping themes over time. This was a recursive process and even returned to once the data report was being written in Phase 6.

3.6.6 Phase 6: Producing the report

- Findings were presented at two levels; themes, which represent multiple facets and patterned meaning of concepts within the data set, and sub-themes which represent themes within one overall theme (Braun & Clarke, 2006). The 'story' of each theme and related sub-themes are presented alongside extracts of verbal data from participant interview transcripts to evidence how what participants expressed created each theme.
- Appendix 11 shows how the themes/subthemes were initially mapped using the codes and candidate themes generated. Appendices 12 and 13 show final theme development.
- The findings of the Reflexive TA data analysis are presented in Chapter 4 and the findings are then discussed alongside relevant theoretical frameworks, literature, and research in Chapter 5.

4 Findings

4.1 Introduction

The aim of this chapter is to present the findings of a Reflexive Thematic Analysis (TA) that was carried out to answer the research question ‘How are children and young people (CYP) with special educational needs and disabilities (SEND) experiencing the COVID-19 pandemic?’

4.2 Overview of participants

Six participants, all with SEND were interviewed. They all attended secondary schools or secondary alternative provisions. Participant information can be viewed in Table 5, chapter 3 (section 3.4.3.6) and further context is provided in chapter 3 section 3.4.3 (page 70). Participants were all able to access the semi structured interviews and provided rich and meaningful data that was analysed and interpreted using Reflexive TA, as described in chapter 3.

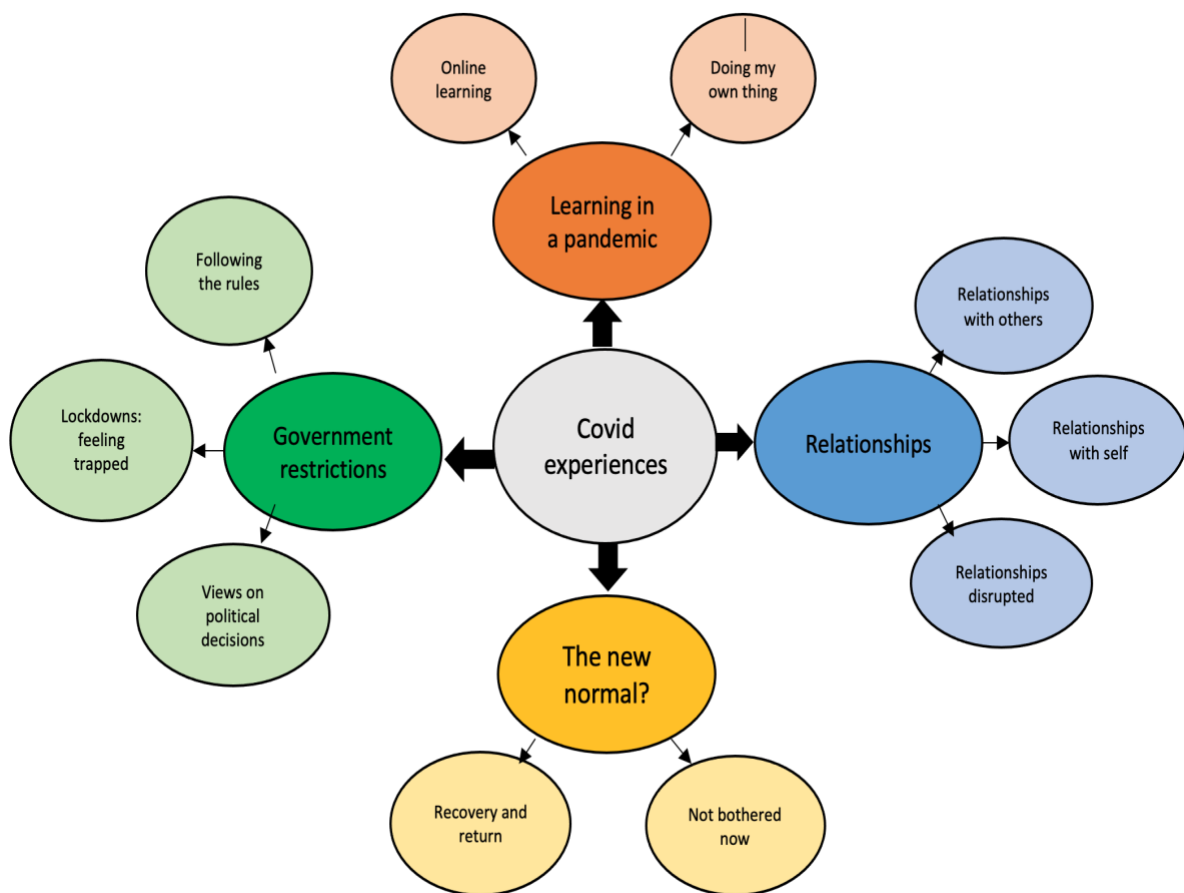
Reflexivity box 1.

Whilst arranging interviews in schools for my research I reflected on the notion and label of SEND and treating them as a homogenous group. I thought about how I feel uncomfortable using this term and spent time thinking about how I personally disagree with CYP being labelled as it creates marginalisation and a system of ‘other’ and ‘them and us’. Working in a special school I often felt like I was fighting for inclusion and for people to recognise our children as individuals rather than as their diagnosis or behaviour. My criteria for participants in this research was that they had an EHCP or HLN, however I knew from personal experience that all of the participants would probably have more differences than what they had in common. I reflected and decided that I was choosing to use the term SEND and interviewing CYP as this was a term that had been created by society that had resulted in the categorisation of a group (which may have been one the CYP may not have chosen for themselves). My job in this research I decided was to see the CYP I interviewed as individuals and then to look for meaningful patterns and themes that may exist because of the similar needs to these CYP, needs that may exist because of how they have been categorised as SEND and marginalised as a group. My purpose was not to separate but to hear the voices of those already separated by a system, a system which I feel critical of. Interestingly I noted in my research diary that most of the CYP I interviewed, when introducing themselves said their name and something about their disability for example, Cat’s transcript read ‘My name is Cat, I identify as gender neutral, I have Autism and PDA and some people think I have ADHD but I don’t’

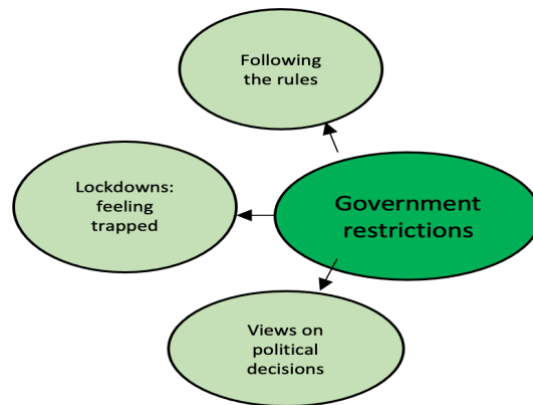
4.3 Thematic map

The main themes and the related sub-themes can be viewed in Figure 8, and they will be discussed in the following findings.

Figure 8.



4.4 Theme 1: Government restrictions



The first theme that was evident in the analysis of data has been identified as 'Government Restrictions'. All participants taking part in the research described their experiences of how COVID-19 government-imposed restrictions and lockdowns had affected their lives. The restrictions put in place by the government can be seen in the following reference (Cabinet office, 2020) and the timeline indicating when lockdowns occurred and the restrictions in place (Figure 1.) Within this theme, participants described experiences which sit within three separate sub-themes of:

- **1.1 Following the rules**
- **1.2 Lockdowns: feeling trapped**
- **1.3 Views of government**

4.4.1 Sub-theme 1.1: Following the rules

Participants all discussed the idea of 'following the rules' i.e., the restrictions that were put in place by the UK government during the COVID-19 pandemic, for example, staying at home and not seeing people other than those you live with, going out only once per day for exercise such as a walk and the wearing of facemasks. Participants spoke of the importance of everyone collectively 'following the rules' for the greater good and described how the breaking of the rules was detrimental to society as a

whole and meant that people would become ill or die if they did not follow rules. Participants described a connection they had made regarding people breaking the rules meaning that they did not care about others.

Jordan: "Don't go outside unless you need to or you're walking your pet in your garden..we need simple rules"

Tash: "It's been difficult. It's been upsetting. When people don't listen (to) the rules then they die they don't listen they spread it more then it's everywhere... they don't care about it"

Participants views on following the rules appeared to be linked to their understanding of what COVID-19 was and what they were being told about it through other people and the media. Participants discussed the role of the news and the media and how they knew of Boris Johnson (UK Prime Minister at the time of the COVID-19 pandemic) because of seeing him on the news or hearing him on the radio. Participants described how the news had informed some of their views in the importance of 'following the rules'.

Tash: "The news..wash your hands, wear facemask"

Kane: "It was on my TV..we watched it and it said it was covid and we needed to like stay safe."

Participants described how the rules were not always clear or well enforced and could sometimes be confusing. There appeared to be juxtaposition in participants thoughts in terms of stating that people 'just needed to follow the rules' as if it were a simple thing and then simultaneously describing how the rules were complicated and difficult to follow. Participants therefore seemed to be stating that people should follow rules, but that government needed to make rules simpler to follow.

Jordan: "To be honest the more rules they put on us the more us British people be confused but like yeah just put a simple rules at the time like wear a face mask, wash your hands"

Kane: "It was really hard...confusing" (to follow the rules)"

Hugh: "In some cases they were poorly enforced (the rules)"

4.4.2 Sub-theme 1.2 Lockdowns: feeling trapped

Participants described life at home during the government-imposed lockdowns when restrictions were in place (for details of restrictions: Cabinet office, 2020 and Figure 1 page 16). Participants described home as generally feeling like a safe place to be during lockdowns, however, they also all unanimously expressed the hardship they experienced of feeling 'trapped' or 'stuck' and at times expressed anger towards the government for how they had been treated. Jordan described feeling dehumanised by the experience.

Jordan: "We've been treated like animals being kept in a cage."

Similarly, Immie described the frustration of being 'trapped' at home and not seeing people or going anywhere.

Immie: "It sort of felt like erm we were sort of like I don't know how to explain it but sort of like being trapped like.. I couldn't.. we could only go for one walk a day we couldn't go and see people, we couldn't spark up our imaginations, it was really frustrating...we couldn't go as many places to spark up ideas and we were sort of stuck in the same environment."

As well as feeling trapped, participants also described a sense of boredom at the monotony of life in lockdown being 'stuck' at home.

Kane: "We need to just stay in home, it was boring."

Immie: "Work work work lunch work work work work then we'd go for our walk and then we'd have tea and then the same again... It goes around and around and around"

and round and round and round and round and round... I go to all the places nearby often and we aren't going anywhere"

Reflexivity box 2.

Whilst I was analysing interviews transcripts, I had learnt of politicians and senior advisors to the government breaking the rules that they had set. I felt emotional for the CYP I had interviewed, hearing how their mental health and creativity had been affected during this time because of feeling stuck and trapped in one place. I reflected on my own family's well-being at this time and how it felt so difficult feeling trapped at home and trying to work and home-school my own children. My participants helped me to reflect on what this experience was like for young people and that they experienced similar emotions to me. I felt angry knowing that those making the rules, rules which my participants considered so important, were broken by the people they spoke about as a power to follow and trust. I was aware that my political views and positioning will have influenced how I felt about the governments handling of COVID-19 and in turn influenced how I listened to and interpreted the participants' views.

4.4.3 Sub-theme 1.3 Views of political decisions

Although participants were not asked directly about political decisions and politicians, they discussed these factors as being intrinsically linked to following rules, possibly because they viewed the politicians as the ones making the rules. As well as participants reporting how Boris' (Boris Johnson, Prime Minister at the time of COVID-19 pandemic) rules and announcements were difficult and confusing to follow, they also described feeling like they were often put in a difficult and unfair position as young people and were blamed for spreading covid when they were doing what they had been told to do i.e., go back to school.

Hugh: "It was really unfair like when they blamed a bunch of university students for like 'oh you guys have really screwed up the covid pandemic, oh man you guys at school you suck' and it's like I don't know if you know this but you're the ones who opened up the schools like I have no choice but to be here unless I want to be fined £200 a day so arguably that's kind of your fault so.. like you're in a room with 100 other people, arguably one of them is gonna have covid like it's not really your fault"

Participants were aware of the prime minister, Boris Johnson as a power making decisions and controlling their day to day lives through making 'announcements'.

Participants expressed anger at hearing these announcements and what they meant for them personally.

Imogen: "When Boris Johnson made announcements me and my sister didn't like we were allowed to swear at the radio...that's like the only time we were allowed to swear, the only time..my Grandma doesn't like Boris Johnson she says he's too like Donald Trump"

Additionally, participants also described how they thought the pandemic had been handled poorly by the government and that they could have done a better job. Participants offered ways that they think the government could have handled things differently and suggested that it would be better if Boris Johnson was not prime minister.

Hugh: "Like people are gonna die you know and that's sad you know, and I think hmmm maybe you could have handled it a bit better." (The government)

Jordan: "Don't make Boris Johnson prime minister...Boris Johnson won't be prime minister anymore" (when asked how things could be better)

Immie: "If you ease the restrictions then yes cases are going to go up but you can't keep easing the restrictions going up and going up and then bringing us back into a lockdown... you've just got to accept the cases are going up... you've found a vaccine you've found ways to help people even though more people are getting it not as many are getting poorly you could just keep on just letting us be more free".

And when I asked what she would have done differently:

Immie: "I probably make it so that like the restrictions were eased like we came out of lockdown sooner than we did and that we had fewer lockdowns."

Participants did not seem to view politicians in a positive light, possibly holding them accountable for the experiences they had and the sense of powerlessness they felt.

Some participants also described the sense of unfairness of people and politicians not following rules (interviews were carried out before the full extent of politicians not following the rules was known). Hugh used a politician's name (Matt Hancock, Health Secretary at the time of COVID-19) to describe an action of not following the rules and behaving poorly.

Hugh: "I know people at school or whatever who have been out when they weren't meant to or and you know 'Hancocked' it up."

Participants had their views and theories on how COVID-19 had come to be and how the government had managed the situation. It is likely that these views were developed through their social experiences of exposure to the media and talking to others. There was a sense of some participants having been exposed to conspiracy theories and how the government could have acted on these theories. Participants also described how they thought that a similar virus to COVID-19 may have existed before. These ideas and theories that young people held are evidence for the subtheme 'Political Decisions' as they illustrate how the participants thought that the government could have been thinking about COVID-19 and managing the pandemic differently. The quotes below from participants provide evidence for this concept:

Cat: "I think people are dying from COVID, but they have been dying for years.... they put on his death certificate that he died of COVID, and he hadn't (talking about a family friend who died during the first wave of COVID-19)."

Immie: "I bet there was something as similar to this maybe not as epic but when the flu was first introduced, I bet something like this did happen...I bet you did keep like erm easing things up a bit and then when cases of the flu go up you go into a mad panic like you are now."

Jordan: "Just tell China don't make a virus if you know is going to depopulate the globe... I mean there are some theories about it, but it feels like that China did make a virus so that the world wasn't getting too populated."

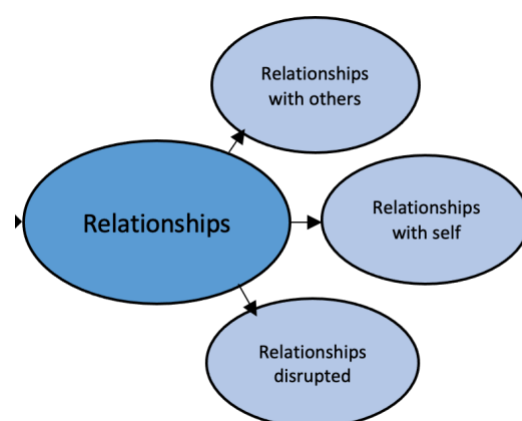
Hugh: Well, the virus is a lung functioning virus that came from what we assume is Wuhan, China but we're not actually that sure, it could have come from anywhere, we don't know actually ... it's just easier for people to blame people...a country that they already have a dislike towards, I guess."

Hugh: "They kind of... especially the western world, we kind of screwed up the whole thing, they kind of just assumed that nothing ever bad would ever happen to us cos we're all comfy up in here."

Reflexivity box 3.

When interviewing and hearing the influence the media had on CYPs experience of COVID-19 I was aware of how I too may have been influenced by the media during COVID-19. I considered how what I had experienced may have influenced how I asked questions, the data gathered and my interpretations. For example, I felt the need to continually check the news during lockdowns, possibly due to feeling under threat and needing information to stay safe. I was aware of the impact seeing how many people were dying had on me and was not surprised that the young people I spoke with brought up the news and media so much and as being linked to politicians.

4.5 Theme 2: Relationships



A theme that was evident within the data coding was the relationships participants had and how they experienced these during the COVID-19 pandemic. This included the relationships participants had with others, the relationship they had with themselves

and the relationships that were disrupted by COVID-19. The relationship's theme will therefore be divided into the three subthemes of:

- **2.1 Relationships with others**
- **2.2. Relationships with self**
- **2.3. Relationships disrupted**

4.5.1 Subtheme 2.1. Relationships with others

During COVID-19 lockdowns, most participants were at home with their close family members. Participants all discussed the relationships they had at home during COVID-19 lockdowns and the emotions they experienced with those people.

*Jordan: "We had our angry, sad and happy moments but yeah overall it was ok."
(talking about his Mum and being at home together during lockdowns)*

Cat: "She (Mum) tries to get me to come downstairs and I'm like, I don't want to."

Participants also described how they experienced the emotions of those they lived with during COVID-19, particularly the worry they felt about family members or how they felt their family members were feeling/behaving and how this made them feel.

Cat: "My Mum felt very stressed about COVID."

Hugh: "They were worried about Dad as well cos he's got an autoimmune disease...it was like arhh man I could die from this but at the same time I could kind of understand that it could upset my Mum."

Immie: (talking about her younger sister) "The energy was bottled up inside her for all the time which makes her a little bit grumpy and then finally when we were allowed to go out for our walk, we couldn't stay out for very long and we couldn't stop at the park to let out energy so she'd get home with only half her energy emptied..it was very frustrating because it meant that she had a shorter attention span and she already has a short attention span..ants in her pants."

Kane: "My brothers was just asking me all the time...can you play wrestlers, can you play wrestlers...it was annoying." (At home in lockdown)

In addition to participants describing the relationships with family members at home with them during lockdown, participants also reported how COVID-19 had impacted on how they felt about 'people'. These 'people' appeared to be those living outside of the participants homes. In addition to participants considering whether 'people' were doing the 'right thing' and 'following the rules', they also saw 'people' as a potential threat and the carriers of infection. 'People' were described as something to stay away from in order to keep themselves and their families safe from harm. This was potentially a new way of thinking about relationships with others. there appeared to be the drive and determination in participants to keep those that they love safe whilst also feeling helpless as they had no control over other people's actions. This appeared to create feelings of fear, anger and distrust towards people who were seen as 'other'.

Cat: "Stay in my bed and stay away from people like I don't like people no more they scare me... I'm afraid of people now... I became very scared of people for no reason. I don't want to be near people... I want to be near people I know but I want to stay away from people as much as I can just because I don't like them anymore it's just weird."

Tash: "It's been difficult, it's been upsetting... when people don't listen the rules then they die they don't listen they spread it more then it's everywhere...they (other people) don't care about it."

Although participants discussed these 'other people' outside of their house as being a concern for them in terms of spreading infection, participants also talked of people they knew personally or who they had seen on the news who had died after getting COVID-19 and/or people they knew who were poorly with it. It appeared that as well as participants viewing other people as a possible threat to their safety, they also showed great empathy for others too.

Hugh: "It kind of really kind sucks that people kind of died and people I know you know personally like sadly unfortunately someone I know passed away (and) there's

someone at school, not in my year but the year below who got covid really bad and it like totally screwed up their immune system and I mean they didn't die but at the end of the day they're not going to live a normal life now unfortunately"

Tash: "I feel like their families and cry about that, they're like crying about their family died ...they're crying about it... like people died from covid...and their family cry."

It therefore appeared to be that participants were feeling compassion and empathy for others whilst simultaneously seeing them as being a threat to their own safety and well-being.

Participants recognised that the relationships they had at home were important during lockdowns, relationships that had helped participants during lockdowns were discussed

Kane: "My family...they keep me motivated to just stay safe from covid."

Tash: "My Mum..my Mum helped me." (when she was feeling worried about what she was seeing on the news about COVID-19.)

As well as family members helping participants to feel safe, pets were also considered to be family members and featured in these discussions for those participants who had them.

Jordan: "I've got a staffy (dog) and three cats and that kind of helped me..and my mum, my friends and yeah my pets as well"

Cat: (about her dog) "Cos it's like I'm very lonely and a very clingy person and I need someone to cuddle at night and if I don't have someone I will cry..he knows when I'm upset, he comes to my door and jumps on my bed next to me."

Participants also described new methods of having relationships with people they could not see in person through the medium of on-line relationships, for example, through zoom and on-line chats functions on games. These methods of having

relationships appeared to offer connection to old friends and provided opportunity to make new friends, some in different countries who were in similar lockdown situations. Participants mostly welcomed having on-line relationships and having the opportunity to speak to people who were not living with them in lockdown. They did however, also acknowledge some of the difficulties with having on-line relationships, such as the technology difficulties, time differences and it not always feeling like a substitute for having relationships with people in person.

Jordan: "Yeah I mean I did talk to people online (on phone) and they're my friends yeah."

Cat: "My social media.. (has helped)...I speak to people in America..we've been talking for like 4 months now and I'm like we've just been talking back and forth and it's just really nice... it's nice to have someone to talk to..I've made many new friends."

Immie: "I was zooming to my Grandparents and Auntie R... really different (to seeing them in person) we zoomed them at a time when my hearing was so bad so I couldn't hear what they were saying."

It was evident within the data that participants enjoyed it when restrictions eased, and they could spend time with people again after having time apart

Immie: "I think those little bits where we got to see people." (helped during COVID-19)

4.5.2. Sub-theme 2.2 Relationships with self

A sub-theme identified within the overall relationships theme which was evident in participants descriptions of their experiences of COVID-19 was how they felt about themselves and how they experienced mental health. Lockdowns meant that, for most, more time was spent with those that they lived with and alone in bedrooms and less time was spent with friends and extended family and out in public. Participants described the emotions they felt about this, for example, most described feelings of sadness and feeling isolated and alone.

Tash: "It makes me feel sad (cries) it's been different."

Jordan: "The more I enjoyed it the more I realised it's just being alone all the time so it was like a win win but not a win in the end."

Cat: "I need to talk to people or I would be very very lonely."

Jordan: "Yeah I can't cope with more than this last year."

Participants described some of the emotions they experienced during COVID-19 and the impact it had on their emotional and mental well-being. Immie described her experience of COVID-19 as a 'roller-coaster' and as a 'seesaw', perhaps latently suggesting that she felt emotionally up and down and scared. Others described it as making them feel sad, angry, frustrated, and anxious.

Immie: "A seesaw like lockdown.. no lockdown.. lockdown ..no lockdown."

Immie: "With this rollercoaster so many children are having to isolate even if it's just a sore throat, there's so many people missing their tests."

Cat: "I have random little breakdowns and I cry all the time to myself and I will just like I'm very down my emotions are all over the place."

Kane: "Not that happy.. I was mad (about COVID-19).. I be happy when covid goes."

Participants described the difficulties they faced regarding the uncertainty about what was happening and feeling out of control of this. Participants examples of uncertainty included thinking something was going to happen, for example, schools re-opening. This hopeful thinking was possibly based on media and governmental reporting that COVID-19 cases were going down. Participants described the experience of feeling disappointment and worry again when they found out that cases of COVID-19 were rising again and knew their hopes of returning to normality was not going to happen.

Immie: "It's like you're going along in lockdown and the restrictions start to be eased slightly and you get more excited you get really excited and then it plummets again."

Participants spoke of keeping themselves safe and worrying about what would happen to them if they caught COVID-19, particularly those who had health difficulties or who had been ill before in the past. For example, Hugh described his fears of getting covid after having pneumonia when he was younger which had led to longer term chronic fatigue. Jordan also described his fears about having asthma.

Hugh: "But me personally I was kind of scared of getting it, so I followed the restrictions a lot cos arguably with a weaker immune system like it was a good chance it was not going to end very well for me."

Jordan: "If you like have asthma like that that means covid is going to take the upper hand against you with your white blood cells to be honest."

All participants, even those without underlying health issues, talked about their fear of getting COVID-19, they appeared to try and manage this fear through following government restrictions, such as wearing masks.

Jordan: "Frightening cause you know a 13-year-old boy got killed by it...what if this could happen to me... but ...so I wear every single mask that I bought for the pandemic."

4.5.3 Subtheme 2.3. Relationships disrupted

A sub-theme evident during analysis was how participants experienced disruption to usual relationships due to COVID-19, particularly during lockdowns. It was apparent through how participants talked about COVID-19 and relationships that all participants were aware of having fewer opportunities to speak to others and spend time with loved ones such as grandparents and friends. For example, Participants described how COVID-19 had created barriers with maintaining existing relationships and making new ones whilst being at home during lockdowns. This appeared to impact on

participants well-being as they described this aspect of covid and lockdowns as being 'hard'.

Immie: "One of the things that's been hard for me during covid is I love to talk, I talk to loads of people but because of coronavirus I couldn't socialise as much."

Kane: "Young people shouldn't be like this at the moment they should play with their friends and stuff and not be in their house like to play outside with their friends but covid has stopped them."

Cat: "No one wanted to talk to me (friends during lockdown)...they were saying they were busy... I just lost friendships."

Tash: "Hard. Didn't see my Grandma. Didn't go outside."

Missing grandparents and other family members was a theme that was evident across participants data. Participants described their experiences and feelings around not seeing their grandparent(s) during lockdowns and how they missed spending time with them. They also appeared to be aware of how much their grandparents missed them too.

Immie: "My Grandma.. she missed us so much.. me and my sister and my cousins (names x 2) um like so we'd like zoom them and phone them quite a lot. She really missed us and I missed seeing other people."

Tash: "Hard. Didn't see my Grandma. Didn't go outside...feel like my mum struggling with it (cries) she can't see my Grandma for a long time."

Researcher: I'm sorry, that is so hard. What did you do before?

Tash: "We used to go places my Grandma goes to my birthday and my brother's birthday and maybe my mums birthday and erm go to places, travel together I think and mean like go outside, have a walk, drive somewhere."

As Tash described above, as well as missing people such as grandparents and friends, participants also described the experience of having missed opportunities and

lack of connection with people due to COVID-19 restrictions. Participants described missing out on and not being able to do activities with the people they have relationships with, for example, holidays and water fights at school with friends.

Kane: "I don't like covid that much cos it ruined my holidays.. cos we was going to go to America but it was cancelled cos of covid and it just ruined our lifes."

Immie: "We missed out on the water fight (at school)."

Participants discussed COVID-19 and how it had disrupted friendships in different ways. Initially, missing the friendships that they already had and how restrictions continued to impact on these friendships even when they could see each other again.

Hugh: "I didn't see them (friends), I called a few of them, then when we were allowed to see people one on one, I saw a few people but I have a huge friendship group usually"

Kane: "Sad cos we wanted to talk to each other, play with each other." (about friend)

Kane: "I wanted to like play with my friends outside but I couldn't. We couldn't like go close to each other cos of 2 metres yeah it's been not really good."

Additionally, within the data and language being used by participants there was also the idea of friendships being 'lost' or 'fading away' and them not having the opportunity to make new friendships. Participants also described how lockdown had possibly adapted how young people were now navigating friendships.

Cat: "Very stressful especially when your friends they just like fade away like you just lose them after a while especially if you haven't seen them for a long time."

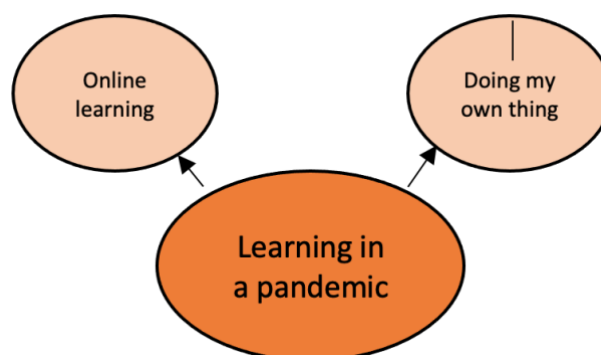
Kane: "I wanted to like play with my friends outside but I couldn't. We couldn't like go close to each other cos of 2 metres yeah it's been not really good."

Immie: "I haven't been able to see many friends. I don't really have friends in the school.. I still haven't made any proper proper friends" (Immie had transitioned from primary school to secondary school during lockdown)...It's kind of like they break away those old friendships but hang on tighter to those new friendships and are afraid to make new friends.. maybe a bit more cos (of covid) they haven't seen their friends over lockdown."

Reflexivity box 4

Whilst thinking about relationships that were disrupted for young people, I felt sad and angry for them on their behalf, for the sense of lost time and for them having to face more difficulties where relationships for some already felt quite tricky at times. I also felt overjoyed hearing of the re-unions young people had with loved ones, particularly stories of emotional reunions with Grandparents and being able to do normal activities such as play at the park again. It solidified my thinking about relationships being the key to most things in life and how covid restrictions had tested these relationships. I thought about the relationship I had with myself during lockdown and the relationships that were disrupted, my nieces being born and me not being able to hold them and my ageing parents who I was aware I had a limited time with. Hearing from CYP and the emotions they felt about missed relationships helped me in understanding my own.

4.6 Theme 3: Learning in a pandemic



The participants unanimously discussed what learning was like for them during the COVID-19 pandemic, particularly during lockdowns, with a focus on on-line learning and how they adjusted to this and felt about it. Participants also discussed how these new ways of learning, such as being on-line, meant that there was a sense of more

freedom for them to focus on their own interests and learning. Therefore, the analysis of data and findings for this theme means that it will be set within two sub-themes:

- **3.1 Online learning**
- **3.2 'Doing my own thing'.**

4.6.1 Sub-theme 3.1 Online Learning

All the participants who were interviewed for this research experienced online learning, including those with education healthcare plans who went into school during some of the lockdown as vulnerable/key children. Participants described the difficulties they had faced with on-line learning including the adjustment to it, managing technological difficulties and the difficulties their needs and disabilities presented for them learning in this new way.

Only one participant, Kane, described on-line learning as a positive experience. However, he was at school doing his on-line learning and had help from teachers. He explained that he liked this approach to teaching as there was less writing (which he usually found difficult) and more speaking (which he enjoyed). All other participants described the challenges they faced with on-line learning and lessons. Participants described not feeling emotionally well enough to learn, which was possibly due to being in stressful and uncertain times and being at home in lockdown. Jordan illustrates an example of this.

Jordan: "Except for my brain was er not functioning well to be honest"

Researcher: "Oh no, how come"?

Jordan: "Cause we've just been in the same place and you just forget what 2 + 2"

Participants described how they felt that learning was limited for them and that 'they did not learn much' through online learning methods and described how 'home is home' and somewhere to relax and not a place to do schoolwork all day. This possibly suggested the idea that the participants may compartmentalise places as having a certain purpose i.e., home to relax and school to work.

Cat: "We're going to go into lockdown and I was like fair enough and I wasn't bothered and then I realised wait we have to do online classes and I got really upset and thought I don't wanna do them so do you know what I did? I turned my screen off, turned my mic off went to bed, there's nothing to learn about, it didn't teach me anything even if I did keep my mic on."

Immie: "I don't like online learning..it was very stressful..where to begin?...first of all, my mind is like home is home, school is school, so I don't like doing homework because there are a few things to describe home like home is where you chill, watch television and enjoy yourself basically."

All participants accessed on-line lessons via the on-line platforms MS Teams or/and Zoom and reported struggling with the technological aspects of on-line learning. Participants all described situations and gave examples of times when they could not access lessons or where technology difficulties meant that they could not hear the teacher. There was also a sense from what participants reported that they did not feel able to ask for help in front of other pupils on-line.

Tash: "It's not easy..it's been hard you know I keep on.. have to ..I struggle with learning you know.. break up by the tutor (breaking up internet) I was tired I keep on forgetting what time the lesson."

Cat: "No nothing happened it was always like we can't hear you...(talking about teacher online)...sometimes it wouldn't work at all and they were like teams (MS Teams) isn't working we have to stop and I'm like why the hell isn't it working for you when it's working for us."

Immie: "Arrghh (sound and put head in hands) yeah... I did not like it. I do not like Zoom.. I don't do much on technology.. I just don't like zoom ... I can't hear no matter how many times they (teacher) repeat it, technology problems and stuff mean that it's harder to hear things...there were so many people using the computer (in on-line lessons) Uugghh yeah."

Reflexivity box 5.

I found it difficult hearing about experiences about on-line lessons and hearing how challenging this was for the participants in this research. I was aware of my own technological difficulties and having to adjust to learning on-line. My own frustrations may have influenced how I interpreted the data. I wondered about privileging the on-line learning theme and data as this seemed to me something really pertinent to CYP with SEND. I imagined my own difficulties with technology and how I might have felt with additional literacy or communication difficulties.

4.6.2 Sub-theme 3.2 Doing my own thing

In contrast to the negative feelings and experiences expressed by the participants about being at home and accessing online learning, participants also described the positive experiences of how not going to school allowed them more freedom and time to embark on their own learning, projects and hobbies, particularly during the first lockdown when it appeared there was not as much home learning/online learning.

Participants described work/projects that their parents set them or they set themselves as being an enjoyable experience.

Immie: "We didn't have any set learning (when at home in the first lockdown) so mum would set us learning.. so she knew what (sister name) was doing so she would set her up then she would set me work and make me write character descriptions and stuff and I liked that cos that was good then our routine started to get messed up and then the teachers would set us learning and then it started to go a bit wonky wrong"

Interviewer: "Oh dear, can you tell me more about that"?

Immie: "I like mums learning, so I remember I wrote up a beautiful character description about cowslip the pixie and I described cowslip the pixie in a whole page of description and then after that mum let me like draw her and colour her in and then decorate her and stuff and then the school learning didn't have any of that it was sort of work work work break work work."

Jordan: "I got a little bit done (schoolwork) but then did research and yeah... World war 2... used my phone like what type of ranks they had, it's just one of my hobbies to be honest, me and one of my science teachers like World War 2."

Participants also discussed having more time to spend on hobbies, for example, Cat described having more time alone to draw and more time with online friends to play games.

Cat: "I drew...I taught myself (shows me sketchbook).. I've been drawing since I was 2."

Interviewer: "That's amazing."

Cat: "Thank you. I taught myself."

Cat: "We did Minecraft and built this world called X during lockdown and it took us like 3 months to build.. it's massive."

Similarly, Hugh described having more freedom and time to volunteer outside and to get fit and enjoy exercise.

Hugh: "I did a lot of volunteering work during it cos we live near a wood, and we just contacted the people who run the wood and were like 'hey want us to clear all your brambles and plant flowers and stuff?'"

Hugh: I just did a lot of running and bike rides and exercise cos I had more free time...I've lost like a lot of weight during covid cos of actually having time to do exercise."

Although most participants were at home during lockdowns, some of the participants attended school for some of the time because their parent/carer had been able to request a place for them because they had EHCP's and were considered vulnerable. These participants spoke much more favourably about being at school than about being at home during lockdowns, they also described 'doing their own thing' at school and it being different to 'normal' school. Kane described how he enjoyed going to school to have a break from family members at home and Immie described how going

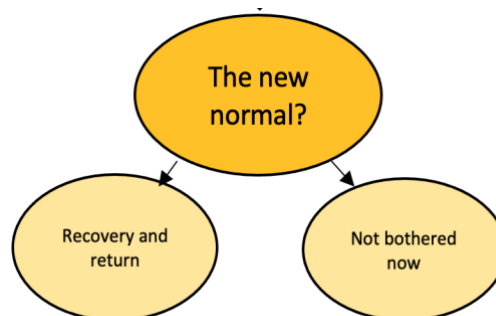
to school during the first lockdown whilst she was still in year 6 at primary school was fun as they had more free time to do what they enjoyed.

Kane: “Good to get away from brothers for a little bit (he had earlier told researcher how they wanted to play wrestling with him all of the time and he was not keen on this).”

Immie: “You’d come in and go on the iPads then you’d do a bit of work then you’d have a snack and play outside then you’d do a bit more work then in the afternoon it would be completely free time to go on the iPads, do cooking.. it was really really fun.”

School and learning and the changes participants faced due to COVID-19 were apparent in all of the interviews. Participants also discussed their feelings and experience of returning to school and this will be discussed as part of theme 4 “The New Normal”

4.7 Theme 4: The New Normal?



The ‘new normal’ was a colloquial term used alongside other terms such as ‘learning to live with covid’ which developed during the COVID-19 pandemic. At the time of data collection (July 2021) these terms were often being used in the media and in everyday conversation to describe how the pandemic had created a shift in reality and ways of living. Although the participants did not use this term explicitly, they did use the words ‘normal now’ and discussed this as a concept. This theme was evident in participant responses as they described different points within the pandemic, particularly when discussing the return of pupils going back to school after being at home in lockdown. A distinction was drawn between the ‘recovery and return’ and the idea of ‘not being

bothered now'. Whilst 'recovery and return' as a subtheme was developed through semantic coding, 'not bothered now' was evident through latent coding, both subthemes will now be discussed. The overall theme of 'the new normal' is therefore set out into two subthemes:

- **Recovery and return**
- **Not bothered now**

4.7.1 Subtheme 4.1: Recovery and return

Participants described part of their experience of COVID-19 as being about recovery and return in terms of going back to school and also in terms of how they felt. For example, participants described the initial fear and feelings of panic and anxiety they felt when COVID-19 was first reported in the UK (March 2020) and then described how it feels more 'normal' again now (interviews took place in the July 2021). Jordan talked about the panic he felt when he first learnt about COVID-19 and described feeling like his brain was not working but when asked about how he feels now by the researcher he described feeling more normal again now.

Jordan: "Arrh it's gone down gone down (feeling scared). It was panic now not panic"

Jordan: "Yeah but in the end my brain, it's working again now"

Participants described how they were pleased to be back at school and with friends again when it re-opened but that it was also a bit of a shock after being at home or in keyworker small groups at school for so long.

Tash: "I like being at school. Like being with friends"

Kane: "We can like talk to our friends now and like play together, it's ok now..happy, really happy" (about seeing friends again).

Immie: "It was a very big shock (other pupils coming back to school).. it was like being on a roundabout and then suddenly comes to a jolted stop and you get flown off... flown off and erm the routine is suddenly braked."

Additionally, participants also acknowledged that the 'new normal' was different, for example, 'bubble groups' (groups of pupils created by schools in an attempt to reduce spread of infection and where participants were not always with their friends) were discussed, as was having to wear face masks and taking lateral flow tests (other methods being used to reduce spread of infection). Participants also recognised that the 'new normal' at school was different to how it was before COVID-19 and reflected on how much school they had missed and the opportunities they had missed too.

Researcher: "And how is school now?"

Tash: "Not the same cos we can't be together still in tutor every day can't see friends in my lessons"

Immie: "I've only once been to the computer room in D block..I've been to the science lab once that was exciting they have methane taps"

Kane: "Oh my god I don't like facemasks cos I don't like wearing the facemasks"

Participants discussed the 'new normal' in terms of recovery and return as involving re-establishing relationships and seeing people who are important to them again. For example, Tash described how she was looking forward to doing 'normal things' with her Grandma again. However, participants also acknowledged that seeing people again in this 'new normal' was not the same as before COVID-19.

Tash: "Like seeing my Grandma, having good time"

Immie: "I remember the first time we saw them (Grandparents) after lockdown we weren't meant to do hugs and kisses but my grandma said I'm not going to see you unless we can do it...and she cried...we ran up and gave my Grandma a big hug and then we ran to my Grandad who swirled us round and then he said to me afterwards I was getting rather heavy"

Reflexive box 6.

I was incredibly impressed by young people adapting to new ways of living and being at school, for example, taking lateral flow tests and wearing masks at school. These were things that my own teenager struggled with, he said that wearing a face mask all day in lessons meant that he could not concentrate on what they were learning. I wondered how facemasks impacted on young people's communication and well-being. Lateral flow tests were uncomfortable for participants and yet they did them as they were being told to do so by people in more powerful positions. As I reflected on this 'new normal' for young people I considered how much choice young people had in all of this and wondered about the idea of consent, free will, power and COVID-19. My husband, who is a secondary school teacher told me that he felt like his job had become being an 'enforcer' more than ever, what once was asking pupils to constantly tuck their shirts in now became about asking them to put their masks on too. I reflected on teacher's roles in this 'new normal' and the changes that had taken place, not just in terms of learning but also the environment and the relationships within already complex systems.

4.7.2 Subtheme 4.2 'Not bothered now'

I interpreted the sub-theme of 'not bothered now' through participants descriptions and ideas about living with COVID-19. Whilst participants discussed living with COVID-19 and 'the new normal' in terms of COVID-19 being 'normal now', there appeared to be a sense of acceptance about COVID-19 as being something that had become part of the participants lives and something to live with now. Participants expressed hope for the future and their lives and hope that COVID-19 would be gone or finished.

Cat: "Feels like normal now" (covid)...(talking about future)..we won't care...we (her and her new online friends) will just be laughing on the plane"

Kane: "Not back to normal yet but I hope... it will be better I assume... it will be gone. I hope it does."

Immie: "I'm just hoping that it finishes soonish like I hope we don't spend the next three years going on that rollercoaster"

Whilst participants acknowledged that COVID-19 was still part of their lives and had resulted in the 'new normal' they reflected about the more difficult times and often

talked about COVID-19 as if it was in the past, for example, Immie talks about her mum making a 'COVID memories' photo album.

Immie: "Mum made us a lockdown album it's like full of memories of lockdown. It's got photos of me and my sister playing outside in the snow..Mum (who had COVID-19) sat on the doorstep watching us and me and my sister run around like mad in the snow.. the photo says me and (sister name) in the snow whilst Mum had COVID-19."

Participants hope for the future and acceptance of living with COVID-19 can be interpreted as them having resilience and moving forwards, and even possibly as post traumatic growth. It is also possible that children and young people with SEND are used to dealing with obstacles in life and overcoming them. For example, Cat described COVID-19 as being 'another thing' to deal with.

Cat: "Yeah I'm not really bothered about it, no one really is we're all like oh it's another thing."

An alternative interpretation, however, is that, considering the strength of feeling discussed regarding the fear and panic experienced when COVID-19 was first reported, it is also possible that participants are adapting and learning to live in the new normal by thinking that they should 'not be bothered now'. It is possible that they may have a level of fatigue and run out of energy to manage the worry they may still be feeling.

Jordan: "Arrh it's gone down gone down (feeling scared). It was panic now not panic."

Cat: "To be honest it's kind of getting boring that's why I never watch the news, I watch you tube instead."

The process of normalisation is described as the process of bringing or returning something to a normal condition or state. It is possible that, as COVID-19 became more normalised, participants felt they were 'not bothered now'.

Jordan: "Covid is normal now because people die to be honest, I think it's God's way of getting rid of people because of over population."

Immie: "I just kind of couldn't see the big deal."

Participants appeared to have developed an acceptance of the 'new normal' but did reflect on it and described life as being different now. Hugh reflected on the idea of the 'new normal' as being a 'sadistic idea' and described how normalisation has possibly led to not caring so much about people dying now.

Hugh: "I think ironically the new normal is quite a sadistic idea cos if it's just normal that extra people die a day, and nobody cares then it's like no one really cares but at the start when one person got it it was like oh, we've got to make sure that they're safe."

It is also possible that participants had become desensitised over time through watching the news and intensely hearing about COVID-19. Desensitisation is described as a condition where we are less likely to feel shock or distress at scenes of cruelty or suffering by overexposure to such images. Hugh reflected on this and described exposure to COVID-19 in terms of people watching violence on TV a lot and then it before less shocking through exposure.

Hugh: "Yeah, I think for a lot of people though again it's like seeing things through a TV screen like seeing someone get shot on TV...if you see it a lot it's normal."

Reflexive box 7.

I was aware that my own approach to working with CYP is a strengths based and solution focussed one. This may have influenced my interpretation of data as I may have been sub-consciously searching for the positive experiences that came out of COVID-19. This may have impacted on theme 3, with me interpreting new ways of learning as being positive and a strength. It may also have influenced my questioning, for example, asking how the things could be better and what has helped.

4.8 Chapter summary

This chapter sought to present the findings of this research following the completion of the semi structured interviews and data analysis which used Reflexive TA. Four central themes were identified from the data and presented in this chapter. These included:

- Government restrictions
- Relationships
- Learning in a pandemic
- The 'new normal'?

Each theme was discussed within the subthemes that were developed. The following Chapter 5 (discussion) will explore the study's findings alongside the relevant theoretical frameworks, literature and legislation.

5 Discussion

5.1 Introduction

The main aim of this chapter is to bring together the findings in order to answer the research question ‘how are children and young people (CYP) with special educational needs and disabilities (SEND) experiencing the COVID-19 pandemic?’ The themes identified in the findings will be discussed in relation to the literature and theory presented in Chapter 2. Due to the exploratory nature of this research, I aimed to respond to the research question in the context of the key findings arising from the data. These findings are presented as interpretations of the experienced reality and social constructions of the participants and can be considered in the context of the thematic map presented in Chapter 4 (section 4.3, page 92). The focus will then move on to address the methodological limitations of the research, including personal researcher reflexivity. The chapter will then conclude with the consideration of potential implications for practice and possible suggestions for future research.

5.2 Overview of key findings

The findings of this study highlight the impact COVID-19 has had on CYP with SEND, including the experience of powerlessness, isolation and disrupted relationships. A key finding is the experience CYP with SEND had regarding home-learning and the difficulties they faced with the switch to on-line lessons. The longer-term repercussions of these experiences along with disrupted education are not yet known, however, based on research such as this, it may be possible for steps to be taken to learn from the findings and mitigate the negative consequences which will be discussed later in the implications section of the discussion.

5.3 Discussion of themes in relation the literature

In the section that follows, the themes presented in the findings chapter are used to structure and answer the research question by discussing and summarising the findings and looking to supporting literature. As will now be discussed this study lends support to previous research and can be compared to other studies in numerous ways, however, appropriate caution is needed in making comparisons because of the changing nature and context of COVID-19.

5.3.1 Theme 1: Government restrictions (sub-themes: following the rules, feeling trapped, views on political decisions)

The findings of the current research illustrate that CYP with SEND have awareness of COVID-19 key public health messages and have experienced the impact of COVID-19 government guidance/restrictions. Despite the CYP with SEND in this study having knowledge of 'the rules' and stating that 'rules must be followed', it was also reported that the 'rules' were confusing. Additionally, there was anger and sadness expressed by CYP with SEND regarding other people choosing not to follow 'the rules'. These findings support previous research and provide further evidence that CYP experience the need to follow the COVID-19 rules dictated to them and feel negatively towards those not complying with the rules whilst being simultaneously confused about the rules themselves (Thompson, Spencer & Curtis, 2021). In addition to feeling angry towards 'rule breakers', the CYP with SEND in the current study also expressed anger towards the political decisions relating to COVID-19 being made on their behalf and were critical of government policy which adds to previous research (Fisher et al., 2021; Scott, McGowan & Visram, 2021 and McCluskey et al., 2021).

Ecological Systems Theory (Bronfenbrenner, 1979) can help to explain how CYP with SEND reported their experiences of political decision making, following rules and feeling trapped at home. COVID-19 involved the intense experience of political power and new laws and customs to abide by reported through the mass media, therefore, these experiences can be viewed as being influenced at the macrosystem and exosystem. According to Bronfenbrenner (1979) and as discussed in Chapter 2 (section 2.8.2, page 29), if the systems operating around CYP are ineffective then a detrimental impact on psycho-social adjustment for individual development can be experienced. In this study, CYP with SEND expressed confusion regarding the rules set for them by the government, therefore, the systems operating around them can be seen as ineffective, particularly as the participants described how the government's handling of the pandemic impacted on their well-being. CYP with SEND in this study recognised a feeling of powerlessness in their experience of COVID-19 and reported it as another thing being 'done to them'. This supports research discussed in chapter 2 (section 2.9.5, page 39) by Barnardo's (2021) which highlighted the importance of the government listening to the voices of CYP and recognising the impact COVID-19 has had on the most vulnerable.

The CYP with SEND in this study described feeling sad, trapped and lonely at home during COVID-19 lockdowns, this is in line with the findings of previous research where similar psychological consequences of quarantine and social isolation were reported (Cacioppo & Hawkley, 2009; Cacioppo et al., 2002). Furthermore, the findings also support previous research which suggests that social connection is important in helping people to regulate emotions, cope with stress and remain resilient during challenging times (Williams et al, 2018; Haslam et al 2018). The Hierarchy of Needs model (Maslow, 1943) proposes that belonging and love needs are a psychological need which are possible once basic needs have been met (physiological and safety needs). In the current research it appeared as if the basic needs of CYP with SEND were not being met as they reported feeling unsafe due to the fear of other people breaking the rules and the association of this with infection of COVID-19. Additionally, based on this research, social connectedness can be interpreted as a basic need as well as a psychological need, particularly as the experience of being in lockdown at home was reported as a dehumanising one which impacted on psychological and physiological well-being. This is supported by a recent statement in the British Medical Journal (Wise, 2022) presenting research by Viner et al (2022) which proposed that CYP, in particular those who are more vulnerable, have been harmed by lockdowns and school closures with regards to their mental health and wellbeing, their life chances, and their safety.

The current research suggests that CYP with SEND attempted to make sense of COVID-19 through developing their own theories as to why and how COVID-19 had come to be and what they were experiencing. This can be understood through the Power Threat Meaning Framework (PTMF) (Johnstone & Boyle, 2018) which suggested that when faced with a threat from a place of power, a threat response is to consider what sense it makes to you and the meaning of the situation and experience. Furthermore, it is possible that in trying to make sense of what was happening to them and to overcome what they felt was being done to them CYP with SEND found strength through developing coping mechanisms whilst at home during lockdowns, for example, maintaining routines, doing activities that interested them thus supporting Scott, McGowan & Visram, (2021) and Larcher et al (2021). It is important to note however, that the participants in these studies did not have SEND

and expressed their experiences of Covid-19 through writing diaries (Scott, McGowan & Visram, 2021) and focus groups (Larcher et al, 2021).

5.3.2 Theme 2: Relationships

(sub-themes:relationships with others, relationships with self, relationships disrupted)

The findings of the current research illustrate how CYP with SEND experienced relationships during COVID-19. This experience included the psychological impact of COVID-19 on the disrupted relationships experienced with others (such as with friends and grandparents) created through having limited physical and social contact during lockdowns. A theme described in the findings was the idea of the 'relationship with myself', this included how COVID-19 had affected mental health. The findings correspond with research carried out earlier in the COVID-19 pandemic which raised concerns about the impact of social isolation on mental health (Spinelli et al., 2020; Xie et al., 2020; Jiao et al., 2020; The WHO, 2020; Farkhad & Albarracín, 2020; Riehm et al., 2020). It is known that CYP with SEND are considered to be more vulnerable than most to having more pre-existing mental health conditions or lived experience of difficulties (Scott, McGowan & Visram, 2021). The current study illustrates that CYP with SEND did struggle with their mental health during the COVID-19 pandemic. However, the feelings expressed such as sadness, anxiety and fear can be described as a normal response to a threatening and unusual situation (Van der Kolk, 2014). The issue here may be that stressful situations such as this are often best navigated emotionally through having support, which may have been lacking due to being isolated from friends and extended family and not being in school. The findings of the current research do not provide enough evidence to suggest that CYP and their parents/carers did not receive adequate support for their mental health and well-being during lockdowns, as has been found in previous research (Scott, McGowan and Visram, 2021; van Herwegen et al 2020), however, participants in this study were not directly asked about the support they received.

CYP with SEND in this study described how the threat to their safety and well-being associated with COVID-19 led to anxiety and stress, this could be considered as a traumatic experience. A trauma is defined as by Van der Kolk (2014) as the current imprint of an event causing fear, living inside an individual. According to Van der Kolk

(2014) traumatic events leave us stuck in a state of helplessness and terror and result in a change in how we perceive danger. If we are to consider COVID-19 as a traumatic experience, then there may be longer term psychological consequences on wellbeing. It is not possible to say whether CYP with SEND have experienced collective trauma based on the findings of this study, although there is evidence to show that they have experienced some of the preconditions of trauma as defined by Van der Kolk (2014) and Bomber (2020), for example, immobility, fear and powerlessness, loss of communication and connection and loss of safety.

The current research findings described how CYP with SEND have experienced relationships with others during COVID-19 and it lends support to previous research by Ashbury et al (2020) which suggested that the social change that occurred due to COVID-19 is particularly profound for CYP with SEND. In the Ashbury et al (2020) study, parents/carers of CYP with SEND described how they experienced changes in mood and behaviour due to feeling overwhelmed and worried about their children not attending school and being at home during lockdown (Ashbury et al, 2020). The CYP with SEND in this research echoed these feelings about their own experience stating that they worried about people they love getting ill or dying from COVID-19 and about their psychological well-being, for example, being concerned about their parents being stressed. Eco-systemic theory (Bronfenbrenner, 1979) offers an explanation as to how CYP's experience of COVID-19 is influenced by relationships, particularly those within their microsystem who they likely spent more time at home with during lockdowns. The emotions of CYP with SEND in this study during COVID-19 appeared to be influenced by how their parents/carers and those within their microsystem were feeling. It is also possible that because of COVID-19 lockdowns, relationships within this microsystem became more intense due to spending increased amounts of time with those in this system at home and less time with those in the mesosystem (e.g., friends and school and wider family relationships). The current research suggests that this increased intensity and isolation within the microsystem may have led CYP with SEND to be more susceptible to and more easily affected by others emotional states and behaviour. This supports previous research that suggests social isolation increases parents' psychological distress and that, in turn has an impact on their children's well-being (Sprang & Silman, 2013). It also supports previous research which highlighted the relationship between the stress that parents/carers experienced

during lockdowns and their children's psychological well-being (Sprang & Silman, 2013 (H1N1 influenza); Spinelli et al, 2020 (COVID-19)).

The Power Threat Meaning Framework (PTMF) (Johnstone & Boyle, 2018) can be considered when thinking about what CYP with SEND did to 'survive' COVID-19 and how relationships were an important aspect of this. The findings of the current research illustrate how CYP with SEND attempted to find new ways to communicate to keep and develop relationships, for example, on-line friendships. This supports previous research which proposed that access to the internet can foster a sense of connection and bolster psychological well-being (Dore et al, 2017). It also supports research in the systemic literature review which suggested that technology had been helpful during lockdowns to maintain a sense of social connectedness (Thompson, Spencer & Curtis, 2021) and enabled CYP to stay connected to friends and family remotely when they could not see them in person (Scott, McGowan & Visram, 2021; McCluskey et al, 2021; Fisher et al, 2021). CYP with SEND in this study can be seen to be demonstrating resilience through attempting to replace or find alternative means of communication and connection to have relationships, for example, communicating with friends online and relying on pets for comfort when feeling stressed. This offers further support to the idea that human connection and relationships are a basic need when faced with challenging situations such as lockdowns.

When considering the Hierarchy of Needs (Maslow, 1943) in relation to how CYP with SEND experienced relationships, the current study suggests that this model is too simplistic to explain this psychological experience. It appears that COVID-19 has shifted systems and created unclear boundaries between physiological and psychological needs as usual relationships may be perceived to be a physiological threat to safety. Therefore, as well as relationships being disrupted physically by not being able to see people in the same way during lockdown, relationships were also psychologically disrupted. The PTMF (Johnstone & Boyle, 2018) also helps to explain how in the current research CYP with SEND may have seen 'other people' as a threat to be managed and as a risk with the potential to infect and spread COVID-19 to those they love and to themselves.

The present research supports and adds to previous research which described CYP experiencing a sense of loss for pre-pandemic life and missed opportunities (Scott, McGowan & Visram, 2021; Fisher et al 2021; Larcher et al, 2021). Participants in this study were aware of their 'relationships disrupted' (a sub-theme in the relationships theme) during COVID-19. Fewer opportunities to spend time with loved ones such as grandparents and friends were described, and this appeared to impact on participants well-being. Additionally, examples of missed opportunities, which could also be seen as a 'sacrifice', such as cancelled holidays and water fights at school that did not take place. This corresponds with a prevalent theme found in the systematic literature review about the idea of the 'sacrifices' CYP felt they had made to keep other people safe during the pandemic and the emotional repercussions linked to this (Scott, McGowan & Visram, 2021; Thompson, Spencer & Curtis, 2021).

5.3.3 Theme 3: Learning in a pandemic (sub-themes: on-line learning and 'doing my own thing')

The findings of the current research agree that COVID-19 has been an 'unprecedented disruption to education' (The Nuffield foundation, 2020). What was reported by the CYP with SEND in this study is in line with the report by Ofsted (2021) into the impact of COVID-19 on education which stated that CYP with SEND were isolated and lonely at home and did not receive the education and healthcare required. This also supports a report which found that pupils with SEND experienced substantial losses in academic progress and their wider development which was described as 'lost learning' (ASK,2021). Although the current study does not provide in depth or quantitative evidence on 'lost learning', the findings suggest that during COVID-19 lockdowns CYP with SEND had difficulties accessing on-line learning which is in line with research suggesting that more disadvantaged pupils, including those with SEND find on-line learning challenging (ASK, 2021; Ofsted,2021). The SLR in this research found that participants across all studies mentioned the immediate effects of the sudden and complete loss of social contact with peers and the switch to 'on-line' learning. Research such as ASK (2021), and Ofsted (2021) reported how some teachers in schools found it difficult to support pupils' (particularly those with SEND) learning remotely when they were not at school. The current research shows a reciprocity of this experience for CYP with SEND who found it difficult to access school learning, particularly the on-line lessons. Participants in this study found on-line learning an

overwhelming experience because of a lack of support from their teachers (Larcher, 2021) and because of technological difficulties with on-line lessons. Additionally they found their needs/disabilities not being taken into consideration (such as Immie who could not hear the lessons due to hearing issues).

The current study adds to the existing research into COVID-19 and education as in addition to finding that CYP with SEND found on-line learning challenging, it also illustrated how they enjoyed having more 'free time'. This supports previous research which described how during lockdown, CYP reported having more 'free time' to pursue existing or new hobbies and extracurricular activities, particularly spending more time outside (Fisher et al., 2021; Thompson, Spencer & Curtis, 2021; Scott, McGowan & Visram, 2021). CYP with SEND in this study appeared to prefer self-directed learning during COVID-19 lockdowns, which is in line with previous research that reported that learning at home was largely self-guided and that some CYP preferred working at their own pace and being able to independently self-direct their learning (Fisher et al., 2021; McCluskey et al., 2021; Scott, McGowan & Visram, 2021). The sense of personal agency and autonomy over time described by participants in this study echoes previous studies which led researchers to question the regular school structures and processes in place (Mccluskey et al., 2021; Scott, McGowan & Visram, 2021). This will be discussed further in the implications section.

It appeared that CYP with SEND in this study, when faced with the challenges of on-line learning found new ways to learn, for example, learning tasks parents set for them or independently researched topics and interests. Participants described focussing on what they enjoyed, for example, independent writing and drawing. This self-directed learning will possibly not be accounted for on government statistics of 'lost learning'. This study proposes that although there may have been 'lost learning' based on school and government expectations of what learning is, there was possibly 'gained learning' for CYP with SEND who described having more time to do what they were interested in such as drawing and writing stories and playing on-line creative building games. This self-directed and creative learning may have provided some respite from difficult school on-line learning and can be seen as a way that CYP with SEND faced the threat of COVID-19 and responded to this (PTMF, Johnstone & Boyle, 2018). This research, therefore, supports Southend and Nottingham City (2020) study which found the

theme of 'opportunities' for CYP was evident during COVID-19 lockdowns which mirrored the esteem and self-actualisation layers of the Hierarchy of Needs (Maslow, 1943). These experiences were described as the strengths or resources that CYP have to manage the threat of COVID-19's impact. Despite the reported positive experience of having 'more free time', not attending school and being at home during COVID-19 lockdowns was a uniquely stressful situation for CYP with SEND and their families (Ashbury et al.,2020). Participants in this study described feeling stressed, their 'brains not working' and not being able to concentrate. This could be linked with the potential trauma response CYP may have experienced from COVID-19 (Van der Kolk, 2014; Bomber, 2020). If we are to consider COVID-19 as a trauma (chapter 2, section 2.8.1, page 25) it would help to explain why CYP with SEND in this study found learning during COVID-19 difficult. Whilst facing the technological difficulties with on-line learning, CYP with SEND may also have been experiencing a trauma response as COVID-19 was perceived as a threat to their safety. This can also be viewed through the Hierarchy of Needs (Maslow, 1943) which would suggest that it is not possible to learn when feeling basic safety needs are not being met. This, however, does not explain why and how participants found other creative ways of learning (which would actually be described as activities occurring in a self-actualised state). This research proposes that CYP have a basic need and natural desire to want to learn and when this need is not being met through others, they seek to find other ways to fulfil their needs, this can be explained through the PTMF (Johnstone & Boyle, 2018) as described above.

Participants in this study were able to give their views about on-line learning and changes to the education system due to COVID-19, this supports Toynbee (2009) who suggested that pupils can give an insightful critique of educational systems which can enhance adults understanding of the complexities, strengths and limitations of current educational practice. This research supports Southend and Nottingham EPS COVID-19 report (2020) which suggested that by listening to CYP and acting on what they tell us that we can build a better education system. The implications will be discussed later in the chapter.

5.3.4 Theme 4: The 'new normal' (sub-themes: Recovery and return and 'not bothered now')

Previous research analysed in the SLR in chapter 2 (pages 41-61) described how CYP reported living with COVID-19 and lockdowns as 'the new normal' and the worries they held about whether life would ever return to 'normal' and what this would be like (Scott, McGowan & Visram, 2021; Fisher et al 2021; Larcher et al, 2021). This research, however, goes further to illustrate how CYP with SEND felt that they were already living in the 'new normal'. Participants described how life was different and that in the 'new normal' there were aspects that they did not enjoy such as lateral flow testing and separate bubble groups at school. This supports the findings of the SLR which reported the concerns CYP held about going back to school and the new rules and stresses they faced. The current research also supports van Herwegen et al (2020) who discussed the potential longer-term mental health implications of COVID-19 for CYP with SEND and the difficulties they may face with the 'new normal' post lockdown at school with new rules and routines such as social distancing. An important part of the 'new normal' for CYP with SEND was the re-establishing of relationships and doing 'normal things' together again. This supports research carried out earlier in the COVID-19 pandemic which found that the majority of CYP expressed a sense of relief about returning to 'normal' and being pleased to return to school and see friends face to face again (Larcher et al., 2021; Scott, McGowan & Visram.,2021 and Fisher et al.,2021). When considering the 'new normal' through the Ecosystemic model (Bronfenbrenner,1979), it is possible that the CYP with SEND in this study were aware of the shifts occurring in the systems operating around them due to COVID-19. Whilst wanting to return to 'normal' i.e., the original function within the system before COVID-19, it was acknowledged that some of the shifts within the system may have adapted it in the longer term, examples of this are, hygiene measures, systems in place at school and still meeting grandparents outside.

This research illustrates how CYP with SEND may have a sense of acceptance of COVID-19 as part of their lives and something to live with now in the 'new normal'. The sub-theme of 'not bothered now' discussed in chapter 4, suggests that the idea of living with and accepting COVID-19 as part of life now as potentially being explained through desensitisation and normalisation. However, it may also be explained through literature relating to resilience and Post Traumatic Growth theory which emphasises

the potential for positive growth and development as a consequence of trauma and challenging experiences (Tedeschi et al, 2018). CYP with SEND in the current study described their experience of COVID-19 lockdowns as being in the past and expressed hope for the future that COVID-19 would be gone and that lockdowns would not happen again. The PTMF framework (Johnstone & Boyle, 2018) might suggest the way CYP with SEND in the current research discuss the 'new normal', as a hopeful narrative where the difficult societal context bound experiences have been faced and are behind them now. However, although expressing not being 'bothered now', it appeared to me that there was still much that CYP with SEND were 'bothered' about including what they had missed and had to 'catch up' on how different the 'new normal' at school is.

5.4 Retrospective researcher reflexivity

Reflexivity emphasises that researchers cannot be independent of their values and as such, research is a product of these (Mertens, 2015). Reflexivity was discussed previously in chapter 3 (section 3.5.2 page 85) when considering principles which support the evaluation of qualitative research. To add to the reflexivity account already detailed, it was found that a constructivist epistemology in the current research allowed for close collaboration between the participants and myself. I considered my own subjectivity and biases in relation to the conclusions drawn and aimed to be reflexive in my approach. Therefore, it is acknowledged that my previous experiences, beliefs and values may have influenced the interpretation of the findings. Regarding data collection, I was aware of my active role in the interviews meaning that they were collaboratively produced. It is important therefore to consider that what was said by participants in that moment may be just one portrayal of what they wished to represent (Abbot, 2012). It is also important to consider that how I responded to what was said in the moment, even non-verbally, for example if a participant commented on something political, will have influenced the data. It is hoped that the reflexive account provided in Chapter 1 (page 12) and the reflexivity provided throughout contribute to the transparency of the transcription and coding process provides insight into this.

The current study aimed to use Reflexive TA to do more than just 'give voice' (Braun & Clarke, 2006, p.7) to participants with the researcher taking an active role in analysis through selecting aspects of the participants' accounts, identifying themes and

patterns across datasets reporting these in a worthwhile and systematic way to develop the knowledge of others (Taylor & Ussher, 2001). I was aware of the potential power imbalance between CYP and adults when trying to encourage disempowered pupils to give their views (Smillie & Newton, 2020). Additionally, I was also aware of the complex process and key challenges when gathering pupil voice, such as ensuring that dialogue is effective and authentic (Lewis, Newton & Vials, 2008). The reflexive nature of the current research and my previous experience working with CYP with SEND allowed me to work collaboratively with participants. This felt like an anti-oppressive and empowering process; participants expressed after interviews that they had felt listened to and enjoyed the process. I was thankful for skills developed throughout Doctoral training which enabled me to effectively build rapport with participants and to support them to feel at ease within an interview situation, thus enabling collaboration. I was also thankful for the existing relationships I had with schools and noted that it was the schools that I had good relationships with who responded to my request for participants, thus highlighting both the importance of relationships and the potential difficulties of real-world research.

In order to contribute to the construction of knowledge in this research, I needed to have a continuous level of reflexivity to recognise my own values and experiences (Braun & Clarke, 2013). My own personal experiences of COVID-19 and working with CYP with SEND are likely to have influenced the analysis and interpretation of data, this however, is not a limitation of the study so needs to be considered separately before discussing the limitations of the research in the following section 5.5. My experience of COVID-19 mirrored that of the participants in feeling trapped, powerless and fearful. I was also aware of how COVID-19 impacted on my own mental health and how my relationship with myself and others changed. The difficulties the CYP in this study experienced with on-line learning resonated with me as my own children faced similar frustrations, this meant that I found the research interviews emotionally challenging at times. My view of schools being closed during COVID-19 as unnecessary and detrimental to CYP's well-being may have influenced how I interpreted what participants told me. I personally struggled with the name of the sub-theme the 'new normal' as I felt this was something constructed by the government that was put onto us. However, I decided to have it as a sub-theme as it captured what the participants were describing and the constructs they had.

My understanding and experience of the theory I used in this research will have influenced how participants responded to me and how I interpreted what they were saying. It is possible to look retrospectively at the frameworks used in this research and to consider my experience and understanding of them to think about how this may have influenced my interpretations. Reflecting on the Hierarchy of Needs (Maslow, 1943), I personally view this as a useful but over-simplistic model. However, within my role in an inner-city EPS I witness CYP's basic needs not being met, due to many reasons including poverty. Whilst this makes me feel sad and frustrated it also motivates me to try and be part of change. It is possible that my desire for societal change and improved systems and support for CYP may have influenced the interpretation of the data. Reflecting on the Ecosystemic model (Bronfenbrenner, 1979), the personal shifts I experienced in systems during COVID-19 such as my relationships and change to on-line working may have influenced both how I conducted the interviews and interpreted the data. The PTMF framework (Johnstone & Boyle, 2018) in this research allowed me to explore my feelings of being part of a system that could potentially be seen and felt as a threat and power to the CYP and families I work with (including those I interviewed for this research). Additionally, I drew on my personal experience of trying to find meaning as a teacher of CYP with SEND, often feeling threatened by the systems in place which did not always make sense to me.

5.5 Methodological considerations and limitations in the research

The aims of the current research were to give an in-depth account of the experiences of CYP with SEND during COVID-19 and to provide understanding and information for educational services, settings and communities about how best to support CYP with SEND during and following COVID-19 pandemic. As identified in the SLR in chapter 2, there are no studies to date which have taken a fully qualitative methodology and interviewed CYP with SEND to gain understanding and insight into their experiences of COVID-19. The real-world nature of the current research resulted in several challenges arising. Whilst some limitations of methodological choices made in this research were presented in Chapter 3, this section aims to acknowledge the limitations of the study more broadly. The evaluative framework for qualitative research by Yardley (2015) is discussed in Chapter 3 (section 3.5 page 81). This provides further detail of the core principles to evaluate qualitative data and considers the current research in

regard to: sensitivity to context; commitment and rigour; coherence and transparency and impact and importance. In this section of the chapter the limitations of the methodology and participant sample are discussed along with the ethical challenges that were faced. Where relevant, I will refer the reader to Chapter 3 in order to prevent repetition.

5.5.1 The use of Reflexive Thematic Analysis (TA) in the current research

In brief, Reflexive TA aims to analyse and interpret patterns across a qualitative data set to develop themes (Braun & Clarke, 2022). This was utilised in the current research as it was the most effective methodology in addressing the research question and suited the interpretivist and subjectivist stance of the research. The aim was to explore the reality of COVID-19 as constructed by participants and consider the impact of the social context on these meanings (Braun & Clarke, 2006). I appreciated both the systematic method of coding and interpreting of data coupled with the flexibility that Reflexive TA provided, however, with all methodologies there are strengths and limitations in the approach, and these will now be considered.

This research was inductive and therefore did not rely on theoretical assumptions, however as psychological frameworks and research were considered as part of the literature review, it is possible that the Reflexive TA used was somewhat theoretically located. I found having to separate findings into results and discussion sections problematic as it led to some repetition in the interpretative work carried out. Braun & Clarke (2022) suggested that this difficulty can be attributed to the traditional style of reporting data in a thesis which echoes an objective-scientist-ideal model of research, which Reflexive TA does not necessarily fit into. As a reflection for future research, I would possibly aim to combine these sections.

I found that I had what Braun & Clarke (2022, p270) describe as 'positivism creep' at times during the research, in particular during data collection and carrying out the interviews. I found that as conversation flowed with the CYP I had to fight the feeling that this was not a 'scientific method of data collection' and that I needed to follow the questions to ensure each interview was conducted in the same objective way. This illustrated to me how we are trained as psychologists to be objective and that working reflexively is both rewarding and challenging.

5.5.2 Data analysis limitations

Taking a constructivist approach meant that it was possible to examine the experiences as told by participants through the language they used and to consider the implications and meaning of experiences. Language used by participants influenced themes, for example 'feeling trapped', I was able to interpret this in terms of my understanding of what 'feeling trapped' means to me. However, it is important to acknowledge that these words will have a different meaning for each participant. Reflexive TA allowed me to make judgements of language and to make links between participants, however it did not allow for making technical claims about language which other methodologies such as discourse analysis might have offered.

I carried out this study as a relatively inexperienced Reflexive TA researcher. Although I had undertaken TA previously (as part of an SLR looking at the research into peer relationships of girls with Autism), this was the first time I had conducted semi-structured interviews in a research context. Due to my relative inexperience in conducting TA research, procedures were followed closely to facilitate understanding and enhance the quality of interpretations. However, as the process was unfamiliar, there may have been implications for the fluency of data analysis. I found the process of data analysis and generating initial codes from each data source overwhelming initially. Braun & Clarke's (2022) six phases were useful in guiding this process, analysing data in this way involved movement forwards and backwards between the entire data set and was therefore a recursive process. It was a process where I refined and revised codes, patterns and themes (appendices 11-13 illustrate this process). I found that discussing a sample transcript with a colleague and having similar ideas for initial codes gave me more confidence in carrying out data analysis.

A degree of member checking (Braun & Clarke, 2013) took place within the interviews, this was through clarification questioning to ensure I got an accurate understanding of the participant's response. Braun & Clarke (2022) question the logic of member checking as a validation tool within interpretive qualitative research. Therefore, additional member checking following data analysis and interpretation was not carried out, this was also due to the nature of COVID-19 and the rapidly changing restrictions, participants would have been in a different position within time and context and therefore may interpret and provide differing meanings to those presented during the

interview. All those involved in the research will be provided with a summary of the findings.

I was acutely aware of my own political views whilst developing theme 1 (political decisions) and ensured that I wrote reflexivity boxes based on research diary extracts. I did not ask political questions or express my political views in the interviews, however, I was aware during analysis that my responses to what CYP said in the interviews, for example, laughing at or nodding at something participants said may have influenced what was said next.

5.5.3 Data collection process

5.5.3.1 The use of semi-structured interviews

The semi-structured interview schedule was carefully constructed with my supervisor to ensure the research question was answered. Details relating to how questions were developed can be viewed in Chapter 3 (section 3.4.4 page 77) and the interview schedule in appendix 9. I sought to develop a semi-structured interview schedule with open-ended and expansive questions. Questions were phrased carefully to avoid leading responses (Smith et al., 2009) and steps taken to ensure rigour (chapter 3, section 3.4.4, page 76). However, it is acknowledged that conducting semi-structured interviews requires skill and practice (Barriball & While, 1994). The interview schedule keeps in mind that CYP with SEND, particularly those with ASD may find questions that are too open difficult to answer. It is acknowledged that in this research, on occasion questions could have been considered closed or leading; when it was felt that slightly more direct questions or giving choices or the use prompts was needed. In addition, I recognise that opportunities for probing and eliciting further information may have been missed on occasion, particularly in earlier interviews. This was a skill that developed as more interviews were conducted and I became more comfortable with silences and not moving onto the next question too quickly. I was aware that I at times experienced what Braun & Clarke (2022, p. 270) describe as 'positivism creep', particularly with the interviews and how I asked questions.

Prior to the interviews, I anticipated, based on my experience of working with CYP with SEND, that some participants may have difficulties with understanding and communication which may have impacted on the interview process. I was able to

adapt the interview and simplify questions where necessary, whilst keeping them as open as possible. The questions were not always asked in order as stated on the interview schedule as when a participant was speaking about one experience of COVID-19 this naturally led to another question. I checked that all questions had been asked at the end of the interview, however, I was aware that some interviews that some interviews felt more structured than others in terms of the order that questions were asked. I was initially concerned that where participants had more limited language and when interviews were shorter that there would be less data to analyse for codes and themes, however, it became clear through analyses that the quantity of language did not necessarily result in more data, participants who spoke less contributed to codes as much as those who said more. I found that some participants, particularly those with ASD sometimes went off the topic of COVID-19 to talk about subjects that interested them such as World War 2 (which is apparent in transcription). I had to take time to study transcripts and consider what was relevant to the research question when carrying out coding. Conducting six semi-structured interviews with CYP who appeared happy to talk at length to me, resulted in a large amount of rich and meaningful data. Interviews were time consuming to transcribe, code and analyse, particularly as I chose to not use any software (rationale for this in chapter 3, section 3.6 page 87).

5.5.3.2 Ethical considerations of data collection

The data collection process regarding the context of the interviews requires further discussion. The social constructivist epistemology underpinning the current research acknowledges that the interview location will have impacted on the participants' interviews. Participants were not given a choice of location as all interviews took place in rooms at their school/alternative provision. This context worked well as it allowed for consent, anonymity and privacy, all of which were given extensive consideration prior to the interviews. Issues in school settings that were noted during some interviews included the presence of and interruption of staff members and sometimes the noise of lesson changeovers. However, the participants appeared at ease and were able to continue with the interviews despite such circumstances. I was responsive to participant's body language and ensured that participants were aware they could stop the interview at any time. One participant became upset during an interview (whilst talking about missing her grandma), she was given time to cry and

comforted and asked if she would like to stop or see a teacher, she chose to carry on and ended the interview smiling and saying that she felt happy she had been able to talk about how she felt. One participant gave information considered to be a safeguarding disclosure and I followed the necessary safeguarding processes. An important point of discussion regarding data collection relates to ethical principles and concerns regarding confidentiality and anonymity. I adhered to all ethical guidelines and principles detailed in chapter 3 (section 3.4.5 page 79). I found that more work was needed than anticipated to ensure that all transcripts, codes and associated evidence (in the form of quotes) did not include information that meant a participant could be identified. This meant that some quotes could not be used or had to have parts removed. This did not seem to impact on the coding itself, however it may have reduced the amount of quotes available to illustrate codes in the findings.

5.5.3.3 Participant sample limitations

The epistemological and ontological position of the current research meant that generalisability of the findings was not sought. Reflexive TA does not aim to generalise findings but instead looks at the specifics of a data set to develop insight and understanding into subjective experience (Braun & Clarke, 2022).

The trustworthiness and transferability of the research can be considered by looking at the participant sample in the study. It is recognised that the methodology and time restraints of the current study allowed for a small sample of six participants to be recruited, however, this size of sample is considered appropriate for a TA methodology. The small sample size allowed for a detailed and rich analysis of individuals accounts to be conducted. However, limitations within the participant sample will now be discussed.

One limitation of the sample is how representative it is of the wider heterogeneous population of CYP with SEND. The method of data collection required that participants had a certain level of skill in verbal communication and cognitive understanding to access the interview. Furthermore, due to the voluntary nature of participant involvement, the participants who came forward to take part may not be representative of the wider SEND population as it is possible that those who felt more confident to share their experiences were more likely to participate. Therefore, their views may

differ from others in need. It is also a possibility that the parents/carers who agreed to their CYP taking part in the research may have felt more comfortable about them sharing their experiences of COVID-19. I noted that whilst recruiting participants, the school SENCOs suggested that there were more CYP who wanted to take part, but some felt too anxious to do so and some parents/carers did not agree to the interviews, particularly for those who may have had a more difficult experience at home during lockdowns. In addition, it is acknowledged that the participants' accounts of COVID-19 will have been influenced by contextual factors. The participants were all recruited from one local authority and were all aged between eleven to seventeen years old (details of the LA demographics can be seen in Chapter 3, section 3.4.3 page 70). Although participants were recruited from a range of schools/settings, they were all secondary school age and from mainstream schools/alternative provision settings so are not representative of primary age/those in further or higher education or those in settings such as special schools and residential schools. The participants did have a mix of class and ethnicity although there was a majority of white British participants which does not reflect the local authority ethnicity data (see chapter 3, section 3.4.3, page 70). Larcher et al (2021) found that there was variation across different local authorities and areas regarding digital connectivity and the access and provision of this. I acknowledge and am aware that all participants in this study had access to laptops/phones for on-line learning during COVID-19 which may not have been the case for other CYP with SEND in the local authority and across the country.

5.6 Potential influence of changes in restrictions and experience of learning

It is also important to consider how the changes in COVID-19 restrictions may have influenced participants experience of learning during COVID-19. All interviews were conducted in the summer term of 2021 when all participants were back at school learning face to face again. School guidance and restrictions were still in place and being regularly updated with the daily media still reporting of infection and death rates. However, during interviews participants were reflecting back on their on-line learning experiences, if they had been interviewed when still learning at home in lockdown they may have expressed different thoughts about it, for example, it may have been possible that over time on-line learning became easier/harder for some.

5.7 Tensions in philosophical positioning

It is important to discuss the tension I felt throughout the research in taking a relativist stance. As I take a constructivist view of the world, I attempted to not privilege one experience over another and acknowledged that shared experience is constructed and something to be interpreted and understood rather than uncovered. However, I considered that the exploratory nature of the research could be seen to have emancipatory and transformative elements which are usually positioned within a critical realist stance (Jupp, 2006). The transformative paradigm argues that socially constructed interpretations of the world need to be positioned within a social justice framework to focus on political issues and in turn confront social oppression by working side-by-side with participants. Mertens (2015) identified characteristics common to transformative research which can be seen in the current research, for example, emphasis is placed on the social lives and experiences of groups who may have been traditionally marginalized (in this case, CYP with SEND). There is exploration of the wider constraining factors (the impact of and difficulties CYP with SEND may have faced during COVID-19 lockdowns through decisions made by those who could be considered to be in more powerful positions in society i.e., politicians/scientists) and results of this social enquiry can be linked to politics and social action (see research goal figure 6 and research aims section 3.2 page 63). Emancipatory practices acknowledge the power imbalance between researcher and participants in research and aims to empower participants through seeking their views. As CYP from a marginalised and vulnerable group (pupils with SEND) were provided with a voice within the current research, there was an emancipatory element to it, however, the research does not wholly align with emancipatory research which would have involved participants supporting the research design (Robson & McCartan, 2011). It can instead be thought of as providing advocacy where consideration is given in how young people's voices are heard and presented (Cresswell, 2009).

5.8 Dissemination of Research Findings

I arranged with the participants and SENCO's that upon final completion of the research, findings from the study will be provided for them with an overall summary in an accessible format for the CYP who took part. This will also allow an opportunity for

a final debrief following their participation. In addition, the findings will be disseminated within my EPS and LA Education Service in which the research was carried out.

5.9 Implications

The current research has provided an opportunity for CYP with SEND to voice their experiences of COVID-19, however it is important to consider the question, 'what impact does voice have if no one is listening?' (Alexandra, 2015, p. 43). The following section will consider how the current research, despite the limitations described above, can provide a useful contribution to practice for educational psychologists and education professionals and for government policy.

5.9.1 Possible implications for Educational Psychologists (EPs)

EPs have a key role to play in supporting CYP with SEND and the staff in the education settings they attend, therefore, the current research will hopefully be of value. It is acknowledged that this research is based on the views of a small sample, however, it is hoped that the findings, alongside previous research, will develop EPs knowledge regarding how CYP with SEND have experienced COVID-19 and how they can best understand and support them. Educational psychology already recognises the importance of hearing CYP's views, particularly those who are considered to be more vulnerable (Davies, 2005; Cefai & Cooper, 2010; Fox, 2015). The current research offers EPs a framework (through the themes and sub-themes) for including the consideration and impact of COVID-19 on CYP with SEND in assessment work, for example, thinking about their learning and relationships. Additionally, it may help EPs in supporting schools to develop interventions to support CYP with SEND who may be experiencing a difficult time at school or where staff are struggling to meet their needs following the pandemic. Research shows that some CYP with SEND are struggling to return to school after COVID-19 lockdowns (van Herwegen et al, 2020; Ofsted, 2021; Larcher et al, 2021 & Scott, McGowan & Visram, 2021), this research could therefore be integrated with or used alongside emotionally based school avoidance frameworks.

The EP role is recognised as a systemic one and therefore this research could enable them in working with people who support CYP with SEND. For example, parents/carers in helping to explain the experience their child may have been through

and how they can support them at home. EPs could also deliver training within educational settings, services and communities to help to develop understanding of what COVID-19 has been like for CYP with SEND and what could be put in place to support them. There could also be a focus within current training delivered in schools by EPs such as trauma informed practice and emotion coaching which focusses on COVID-19 for CYP with SEND and their experiences. EPs could also offer staff supervision and develop and update systemic work which may already be part of practice such as the emotional literacy support assistant (ELSA) training as supporting the recovery from COVID-19. This research shows the impact COVID-19 has had on mental health and ELSA's are in a good position to support CYP in schools whilst being supervised by EPs.

The current research offers further support and the potential for EP guidance written earlier in the COVID-19 pandemic such as the British psychological society (BPS) (2020) 'Back to school: Using psychological perspectives to support re-engagement, recovery and return to schools guidance' and local EPS guidance such as 'Returning to Schools: A Graduated Response to Supporting Emotional Health and Well-being and SEND support in the Aftermath of a Pandemic' (Nottinghamshire EPS) to be updated to include return and recovery guidance for CYP with SEND. Another potential way to enhance EPs knowledge and skills could be through taught input regarding COVID-19 'recovery' as part of the doctoral training course.

5.9.2 Possible implications for schools

The current research has gained further insight into how schools can support CYP with SEND over the coming months and years following COVID-19. Previous research suggests that the potential difficulties CYP with SEND face can be lessened by having protective factors in place, such as seeing children as a whole rather than focusing on their disability or illness, having whole school inclusive environments, delivering social and emotional skills programmes which aim to build resilience, tackling bullying and being alert to early signs of escalating risk to mental health (Anna Freud centre, 2020). This study hopes to provide schools with empathy and understanding of CYP with SEND's needs given their experiences during COVID-19 which could act as another possible protective factor for them. Schools could offer debrief and reflective time about COVID-19, giving CYP with SEND time to reflect on what happened, particularly

on the decisions that were made on their behalf and why they were made and to think about their hopes for the future. As shown possible in this research, schools could listen to and learn from CYP with SEND about their experience of COVID-19. This research highlights the importance of in-person relationships and in-person teaching at schools for CYP with SEND. As on-line learning was found to be a particular challenge during lockdowns for CYP with SEND, schools could consider how this could be done differently if needed again, for example, if a CYP is off school and needs to access learning.

The findings of this research suggested that CYP with SEND enjoyed having more free time, autonomy and personal agency over their learning during COVID-19 lockdowns. Schools could therefore consider what it is about the current curriculum in place which may not be allowing CYP with SEND to feel they have this autonomy and personal agency. Regular school structures and processes in place for CYP with SEND can be questioned and replaced. COVID-19 has shown that it is possible for shifts in systems. Previous research and the current research provide schools with evidence that they can focus on a narrative centred around enjoyment of and motivation for life-long learning (Sivers et al 2020) and shift away from the dominant narrative of 'catch up'. The current research supports Southend and Nottingham city (2020) research, which proposed that emotional re-engagement and relational approaches to learning are needed in schools as CYP do not learn effectively if they do not feel a sense of belonging and safety in the relationships with others. The present study has shown the importance of relationships and how CYP with SEND's well-being is impacted by how others around them are feeling, therefore, the well-being of the school staff will need to be supported as they may have experienced challenges, personal losses and changes during the pandemic.

According to the current research there is a need for practical support in schools to continue to support with CYP with SEND transition out of lockdown and into the 'new normal'. Schools could consider that if a CYP with SEND is using the 'normal now' narrative and getting on with things, this does not mean they are not struggling. As discussed previously, some CYP with SEND may be feeling anxious about being back at school. Social anxiety, low confidence, fear of pressure and expectations may all contribute to emotionally based school avoidance and schools will need to seek

training from professionals such as EPS in how to support pupils who may not have come back to school or struggling with attending.

5.9.3 Possible implications for Local Authorities (LAs) and wider Government

It is hoped that the present research can provide LAs and wider government with information and insight into the experiences of CYP with SEND during COVID-19 so that they can understand how to offer the support needed. LAs could use the findings from the current research to inform their local support and guidance to education settings, families and communities. LAs could also consider offering support to parents/carers of CYP with SEND who may have faced and still facing difficult times with their children because of COVID-19.

Implications at a national government level based on this study relate to informing the development of policy and guidance regarding COVID-19 'recovery in education'. In particular, it may be of interest to the DfE when reviewing their guidance for LAs, specifically regarding CYP with SEND as there appears to be gaps in the existing guidance for this group of young people. In addition, it is hoped that the findings from this research can be of value at local and national policy level when thinking about the possibility of future lockdowns so that government and LAs are better prepared to support and manage the needs of CYP with SEND, particularly relating to on-line learning and social, emotional mental health. Relating to this, this research supports that it is important for the government and LAs to continue to acknowledge the issue of digital exclusion or digital poverty which became apparent during COVID-19 and is thought to be influenced by income, language, literacy, culture, and ethnicity (Scott, McGowan & Visram, 2021). Current government agenda such as the 'levelling up' agenda (Department for Levelling up, housing and communities, 2022) aims to reduce the imbalances, primarily economic, between areas and social groups in the UK. This can be seen as relevant to the current research; if the government are to consider disadvantaged communities being 'left behind'. The current research offers insight into the impact COVID-19 had on a disadvantaged group, CYP with SEND (who live in a city in the East Midlands).

Previous research has shown that CYP who are already isolated or on the margins are more vulnerable to the risk of the negative mental health impacts of the pandemic

(McCluskey et al, 2020). CYP with SEND in this study have reported the largely negative consequences of COVID-19 on their mental health and well-being and the longer-term consequences of this need to be considered and planned for by government with the right support in place for this vulnerable group. Going forward, this research suggests there is a need for government strategy on COVID-19 and education which places CYP with SEND at the heart of this plan. Additionally, it suggests that there is a need for mental health support for CYP with SEND, co-produced and adapted to post-pandemic life. Access to child and adolescent mental health services (CAMHS) for CYP with ASD vary by local area and I question what alternatives there are in terms of mental health support for this group of CYP. Research has shown that some CYP with SEND are not returning to school following lockdowns due to anxiety (ASK, 2021). This has been supported by this study as it found that CYP with SEND experienced issues with mental well-being during lockdowns and were anxious about returning to the 'new normal' at school. This suggests that mental health support needs to be made available and offers further support that mental health support is available to schools to support CYP with SEND by specialists such as EPs who can support CYP and schools with emotionally based school avoidance.

The current research has shown that CYP with SEND are able to provide meaningful information about their educational experiences, offering insight that can potentially impact on decision making and legislative changes (Prunty et al.,2012). It would be helpful for LAs and wider government to look to this research to consider how CYP with SEND felt about and were impacted by political decisions being made. They could consider how to make CYP feel more empowered through being listened to and involved in decision making in the future. A recognition of the value of the insights to be gained from listening to CYP themselves would be helpful. For example, in New Zealand during the pandemic there was a COVID-19 government youth group who were consulted about decisions and the prime minister held news announcements specifically targeted to CYP.

Teaching and learning in schools and the National Curriculum can be considered in relation to the current research; it is the government who states where CYP 'should be' in terms of academic progress. This research suggests that given the social,

emotional and learning obstacles CYP with SEND have faced during COVID-19 it is unhelpful to think about where they 'should be' in terms of academic progress. The government could instead encourage schools to take the approach of looking at where CYP with SEND are 'currently at' and celebrate what has been achieved rather than what has been missed (which may present as a deficit 'catch up' narrative).

5.10 Distinct contribution of the current research

The current research has presented an in-depth exploration of the experiences of COVID-19 for six young people with SEND. It has answered the research question 'how are CYP with SEND experiencing COVID-19?' and has contributed to the large and rapidly developing evidence-base around COVID-19. It has provided rich detail and unique insight into how CYP with SEND themselves experienced COVID-19. This has received little attention in previous research, as identified in the SLR in chapter 2, there are no studies to date which have taken a fully qualitative methodology and interviewed CYP with SEND to gain understanding and insight into experiences of COVID-19. The current research offers a distinct perspective into the constructions of the future, following experiences of challenge and provides unique understanding and information for communities about how best to support CYP with SEND during and following COVID-19 pandemic. Furthermore, it has important implications for schools and other education settings, EP practice and government policy. It suggests we should be questioning whether school closures were an effective and proportionate response to the pandemic and to consider that in any future pandemic they remain open alongside essential infrastructure such as power stations and hospitals (Viner et al, 2022).

5.11 Suggestions for future research

Future research could continue to look at life in 'the new normal' for CYP with SEND, particularly studies to consider the return to school and relationships following the removal of COVID-19 restrictions, a narrative inquiry methodology might be helpful. There is an opportunity now for research which specifically looks into COVID-19 and the mental health of CYP with SEND. Research also looking specifically into relationships for CYP with SEND for example, on-line relationships, relationships with pets and relationships disrupted by COVID-19 could be carried out. There is also scope for future research to look at school curriculums for CYP with SEND and to think

about how much autonomy there is over learning. An Appreciate Inquiry methodology (Cooperrider & Srivastara, 1987) working collaboratively with CYP with SEND and their schools could work well through. Future research which focusses into what specifically CYP with SEND found challenging about on-line learning would be of use if faced with further lockdowns or situations that may require online learning.

The current research broadly looked at SEND, future research could look at specific needs such as Autism. Future research could also consider different age groups experiences as the current research focused on Key stage 3 and 4. It would be particularly interesting to also consider other marginalised groups such as those in care. Different ages and stages could be looked into such as children in the early years or those who may have transitioned between settings during COVID-19. This study has opened up the possibility for future research to be carried out in specialist provisions such as special and residential schools where interviews may need to be tailored to individual need, however, this research has shown the possibility and power of hearing CYP with SENDs voices.

6 Conclusion

Research has shown that CYP provide true insight and are the experts about their own experiences (Greig et al., 2013), however, CYP with SENDs voices are often not heard within research (Harding & Atkinson, 2009; Franklin & Sloper, 2009). It was apparent that the views of CYP are limited in the research being carried out into COVID-19, particularly for those with SEND. It has been suggested that COVID-19 may likely further increase and intensify vulnerability for marginalised groups such as CYP with SEND (Scott, McGowan & Visram, 2021). The current research hopes to contribute knowledge to the developing research on COVID-19 and to mitigate the impact it has on CYP with SEND. Additionally, it hopes to have shown the importance of listening to and looking closely at the experiences of CYP with SEND; both lived experience and the impact and power of the wider systems (Bronfenbrenner, 1973). This study has shown how CYP with SEND have experienced COVID-19 and how its impact has shifted systems and can be seen and interpreted across all levels and layers of the Hierarchy of Needs (Maslow, 1954) and Eco-systemic model (Bronfenbrenner, 1979). This research shows how CYP with SEND have been impacted by COVID-19 in many ways, including disrupted education and relationships

and feelings of powerlessness and isolation. However, it also suggests that through listening to CYP with SEND it is possible to hear how there was strength and resilience whilst faced with the threat of COVID-19. Through considering this in the context of the Power Threat Meaning Framework (Johnstone & Boyle 2018) it is possible to see that there is an opportunity to learn from the experiences during COVID-19 and to create new opportunities and operate power to make a positive difference in education. The current research findings suggest that there are implications for Educational Psychology to help to create a positive difference through collaboration with CYP with SEND, their families and communities.

The use of semi-structured interviews and Reflexive TA in the current research resulted in authentic responses from the participants, reflected within the findings. The approach offered freedom for the participants, supporting them to explore and make sense of their experience of COVID-19. There are limits to the transferability of this research as the data gathered from the CYP with SEND cannot be said to fully represent all CYP with SEND, particularly as interviews took place at one point in time in a uniquely challenging context. However, the consistency of the views and experiences reported by the CYP with SEND in this study deserve to be taken seriously as they have offered valuable insight and raised important questions about the past, present and future provision and policy in education and for the eventual achievements and outcomes for CYP with SEND. Importantly this research can contribute to the planning for how to be better prepared for and manage potential future pandemics should they occur. Furthermore, it contributes to the discussion and reflection regarding school closures and lockdowns and if they were an effective and proportionate response (Viner et al, 2022).

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8 Appendices

Appendix 1. *Inclusion and Exclusion Criteria Appraisal in SLR*

Author(s)	Are participants children and young people of school age?	Does the study report rich qualitative data, presented coherently?	Does study include views expressed by children and young people (ideally highlighting some educational aspects)?	Has the study been published in a peer-reviewed journal between 2020 and present day 2021?	Has the study been conducted in the UK and written in English?	Study included or excluded
Bengtsson et al (2021)	✓	✗	✓	✓	✓	Excluded. Study is a 'special issue' report of other studies
Branquinho et al (2020)	✗	✓	✓	✓	✗	Excluded. Study carried out in Portugal and mean age of participants 19.1 years
Fisher et al (2021)	✓	✓	✓	✓	✓	Included
Jones et al (2021)	✓✗Some 16-25	✗	✓	✓	✓	Excluded. Mean age of sample 20 years and only 2 open ended questions on survey which

						were analysed only using content analysis
Kelly et al (2021)	x	✓	✓	✓	✓	Excluded. Age range 18-25
Larcher et al (2020)	✓	✓	✓	✓	✓	Included
McCluskey et al (2021)	✓	✓	✓	✓	✓	Included
Pascal and Bertram (2021)	x	✓	✓	✓	Some participants in UK but some also in New Zealand	Excluded Participants not school age (2-4 years) and some in New Zealand
Pellicano et al (2021)	✓	x	✓	✓	x	Excluded. Participants mainly in Australia (16) rather than UK (1) and data from young people combined with adults and parents in analysis.
Roberts et al (2021)	x	✓	✓	✓	✓	Excluded. Only 2 out of the 21 participants school age.
Scott, McGowan and Visram (2021)	✓	✓	✓	✓	✓	Included
Thompson, Spencer and Curtis (2021)	✓	✓	✓	✓	✓	Included

Appendix 2. CASP (2018) screening questions/information and results table for SLR

This illustrates the questions used to determine how appropriate the selected studies were for the synthesis. A description of the information used in making the decision is given next to the question.

CASP screening questions and information

Section 1

1. Was there a clear statement of the aims of the research? The goal of the research was considered and why it was important.
2. Is a qualitative methodology appropriate?
3. Was the research design appropriate to address the aims of the research? Consideration was given as to whether the researchers had given justifications for their design.
4. Was the recruitment strategy appropriate to the aims of the research? It was considered how participants were selected and if they were appropriate to the study
5. Was the data collected in a way that addressed the research issue? It was considered how clear the process for data collection was and if this was made explicit and if it was justified.
6. Has the relationship between researcher and participants been adequately considered? It was considered if the researcher had critically examined their own role for potential bias and influence.

Section 2

7. Have ethical issues been taken into consideration? Consideration as to whether ethical approval had been sought and gained from ethics committee.
8. Was the data analysis sufficiently rigorous? Consideration was given to how themes were chosen, and data extracted and if this was made clear by researchers.
9. Is there a clear statement of findings? Consideration was given to evidence both for and against researcher's argument and findings are made explicit and discussed in relation to the original research question

Section 3

10. How valuable is the research? Consideration was given as to how the researcher discusses the contribution the study makes to existing literature and identifies new areas where research is necessary.

CASP Appraisal (2018) raw data for studies

CASP section and question/Research study	Fisher et al (2021)	Larcher et al (2020)	McCluskey et al (2021)	Scott, McGowan and Visram (2021)	Thompson, Spencer and Curtis (2021)
1.Are the results valid?	Yes	Yes	Yes	Yes	Yes
2. Is a qualitative methodology appropriate?	Yes	Yes	Yes	Yes	Yes
3.Was the research design appropriate to address the aims of the research?	Yes	Yes	Yes	Yes	Yes
4.Was the recruitment strategy appropriate to the aims of the research?	Yes	Unsure	Unsure	Yes	Unsure Facebook
5.Was the data collected in a way that addressed the research issue?	Yes	Unsure	Yes	Yes	Yes
6. Has the relationship between researcher and participants been adequately considered?	Unsure	Yes	Yes	Unsure	No Not mentioned
7.Have ethical issues been taken into consideration?	Unsure (Parental consent but no ethical approval)	Unsure (parental consent but no ethical approval)	Yes	Yes	Yes

8. Was the data analysis sufficiently rigorous?	Yes	Yes	Yes	Yes	Unsure Coding unclear
9. Is there a clear statement of findings?	Yes	Yes	Yes	Yes	Yes
10. How valuable is the research	Yes	Unsure Participant group	Yes	Yes	Yes
Overall 'yes' screening score	8/10	6/10	9/10	9/10	7/10

Appendix 3. Consideration of other methodologies

Methodology	Interpretive Phenomenological analysis (IPA) *(further discussion below)	Discourse Analysis	Grounded theory
Distinguishing features	Collects participants subjective accounts and focuses on lived experience	Focuses on understanding the participants use of language	Focus on theory development which evolves during the course of the research
Strengths in relation to this research	Appropriate for homogeneous samples. Aims to understand lived experience	Analysing the participants choice and use of language could allow for deeper insight into experiences as well as wider sociocultural context.	Theories relating to the experiences CYP with SEND during COVID-19 limited.
Limitations to this research	Often used for smaller sample sizes, the current research aimed for a larger sample size between 6-12. Focuses on individual narratives before bringing them together. Idiographic.	The research question focuses on the experiences during COVID-19 rather than the nuances of language used. The research aimed to bring together and construct overview of experiences.	The aim of the current research is to understand experiences rather than develop theory. Concern about the recruitment of a large sample size needed to identify patterns of action.

Appendix 4. Parent/carer information letter



Hannah Gibson (Researcher)

Nottingham City Educational Psychology Service

Dragon Court,
1 Woolsthorpe Close,
Nottingham

NG8 3BP
Tel: 01158765829 / 07967660216

E-mail: hannah.gibson@nottingham.ac.uk

Dr Sarah Atkinson (Supervisor)

School of Psychology,

University of Nottingham, University Park Nottingham

NG7 2RD
Tel: 0115 846 7303
E-mail: s.atkinson@nottingham.ac.uk

Dear Parent/Carer,

I am a Trainee Educational Psychologists with the University of Nottingham. As part of my training, I am researching how pupils with special educational needs and disabilities/ additional needs are experiencing COVID-19.

The purpose of the research is the hope that the information gathered can develop understanding and help support this group of children and young people and educate those around them. It is also hoped that the information from this research will help inform the ways that educational psychologists can work with schools during the pandemic and following it too.

I am contacting you to ask your permission for me to invite your child to take part in this research. If your child participates, it will involve being interviewed by me, Hannah, with a trusted member of staff such as a TA with them or nearby. I work for Nottingham city educational psychology service and have full enhanced DBS clearance.

During the interview your child will be asked questions about their experiences during the COVID-19 pandemic. They will need to be interviewed once only and the interview will be recorded. All interviews will be recorded on a password protected recorder and stored securely and used for research purposes only. The recordings will be deleted once they have been transcribed by the researcher which will be within 3 months of the interview. Your child's participation in the research will be kept confidential and any distribution of the research will ensure their anonymity at all times, meaning that no one will be able to identify your child in the research.


The interview will take place in a location where your child feels comfortable talking, most probably at school. It is likely given the current COVID-19 restrictions that this may alternatively take place on-line through Microsoft teams or skype. The location will be in agreement with you and the school. If they wish, your child can have a parent or other trusted person in the room with them during the interview. For young people not wishing to take up this option, a parent or trusted person will be asked to remain nearby whilst the interview takes place and will be asked to make occasional visible checks to ensure the participant is comfortable. To facilitate this, the interview will only take place in a location where there is a room with a window panelled door available, where the door is able to be left open or where visible contact is able to be maintained across an open space (such as where the room has an internal window panel, or the interview takes place in an open plan area). The interview will be held at a time that suits you and your child and the interview will take no more than 45 minutes which will include a getting to know each other activity.

It is hoped that participation in this research will be a positive experience for your child. However, during the interview, they may raise sensitive and personal topics, which may produce feelings of worry or upset for them. There will be additional time made available following the interview to talk through any feelings that may have arisen for them during the interview. Therefore, their total participation time will be around 1 hour.

Should you agree for your child to participate in this research, participation is completely voluntary and you or your child can withdraw at any stage, up until the interview has been transcribed and anonymised, without there being any consequences to this.

The following link takes you to the University of Nottingham Data Protection Information Full Privacy Notice for Research Participants should you wish to read it <https://www.nottingham.ac.uk/research/groups/crme/documents/mifec-privacy-notice.pdf>

Thank you for considering my request. Please let me know if you need any more information or would like to discuss this research further.

Yours sincerely, 

Hannah Gibson (Trainee Educational Psychologist) E-mail: hannah.gibson@nottingham.ac.uk

Appendix 5. Parent/carer consent form



UNITED KINGDOM · CHINA · MALAYSIA

School of Psychology

Consent Form

Title of Project: 'An exploration of children and young people with special educational needs and disabilities experiences of COVID-19'

Ethics Approval Number: **S1312**

Researcher(s): Hannah Gibson hannah.gibson@nottingham.ac.uk

Supervisor(s): Dr Sarah Atkinson s.atkinson@nottingham.ac.uk

The participant should answer these questions independently:

- Have you read and understood the Information Sheet? Yes. No
- Have you had the opportunity to ask questions about the study? Yes. No
- Have all your questions been answered satisfactorily? Yes. NO
- Do you understand that you are /your child is free to withdraw from the study? (at any time and without giving a reason). YES/NO
- I give permission for my child's data from this study to be shared with other researchers provided that their anonymity is completely protected. YES/NO
- Do you agree for your child to take part in the study? YES/NO

"This study has been explained to me to my satisfaction, and I agree for my child to take part. I understand that I am/they are free to withdraw at any time."

Signature of the Participant (parent/carer):

Date:

Name of parent/carer and child (in block capitals):

I have explained the study to the above participant, and he/she has agreed for their child to take part.

Signature of researcher:

Date:

Appendix 6 CYP information sheet



UNITED KINGDOM · CHINA · MALAYSIA

School of Psychology

Child and Young Persons Information Sheet

Title of Project: **'A study exploring the experiences of children and young people with special educational needs and disabilities during the covid-19 pandemic'**

Ethics Approval Number: S1312

Researcher: Hannah Gibson

Supervisor: Dr Sarah Atkinson

Contact Details:

Hannah Gibson (Researcher)

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Dr Sarah Atkinson (Supervisor)

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Tel: 0115 846 7303

E-mail: s.atkinson@nottingham.ac.uk

This is an invitation to take part in a research study exploring the experiences of children and young people with special educational needs and disabilities during the covid-19 pandemic.

Before you decide if you wish to take part, it is important for you to understand why the research is being done and what it will involve. Please take time to read the following information carefully.

If you participate, it will involve being interviewed by me, Hannah Gibson, with a trusted member of school staff if you would like them to be there, this is up to you. The interview will take place in a location where you feel comfortable talking at school. The interviews can be held at a time that suits you and will take no more than 1 hour. If you do not wish to have a trusted adult member of staff with you in the room, a trusted person will be asked to remain nearby whilst the interview takes place and will be asked to make occasional visible checks to ensure you are comfortable. To facilitate this, the interview will only take place in a location where there is a room with a window panelled door available, where the door is able to be left open or where visible contact is able to be maintained across an open space (such as where the room has an internal window panel, or the interview takes place in an open plan area). In order to support the research, process the interview will be recorded. All information gathered will be stored securely on a password protected audio recorder and used for research purposes only. The interview will be deleted within 3 months, once it has been transcribed. When my research is written up, all those who took part will be made anonymous. This means that no-one will know that it is you.

This research seeks to provide an opportunity for you tell your story about your experiences of COVID-19 and it is hoped that the opportunity to have your voice heard will provide you with a positive experience. However, during the interview, you may raise sensitive and personal topics about how COVID-19 has affected you which may produce feelings of upset or worry. Time will be made available following the interview to talk through any feelings should they have arisen.

The whole procedure will last 1 hour or less, plus additional time to talk through issues raised if needed.

Participation in this study is totally voluntary and you are under no obligation to take part. You are free to withdraw at any point before or during the study without prejudice or detriment. All data collected will be kept confidential and used for research purposes only. It will be stored in compliance with the Data Protection Act.

If you choose to take part in this study, please fill in the consent form included with this letter and return to me at the address below.

If you have any questions or concerns, please don't hesitate to ask. I can also be contacted after your participation at the above address.

If you have any complaints about the study, please contact:

Stephen Jackson (Chair of Ethics Committee)

stephen.jackson@nottingham.ac.uk

[Simple summary of this letter for you;](#)

My name is Hannah and I am a researcher at the University of Nottingham. I would like to hear about how you have been during COVID-19 and hear about your experiences and feelings. This is to help adults understand what it has been like for you and other young people and to think about how best to help now and in the future. I hope that the interview will feel like us having a chat where I ask you some questions and use some pictures to help us.

Here are some things you need to know;

-You can have someone with you like a teaching assistant if you like.

-The interview will take about 45 minutes and will hopefully take place at a time where it won't be one of your favourite lessons. I hope that you enjoy our interview, however if you find talking about anything upsetting, we can talk afterwards about this.

-The interview will take place somewhere you are comfortable at school and you can have your key-adult with you or outside the room, it is up to you.

-You do not have to take part and if you do take part you can stop anytime if you want to. I will use a traffic light sign so you can tell me if you want to carry on or stop or pass on a question.

-I am interested to hear what you have to say, and you can ask me some questions too if you like.

-Although the interview will be recorded, everything you say will be kept confidential and your name will not be used not used for anything apart from my research and it will be deleted afterwards. I will only tell someone at your school about something you have said if I am worried about your safety.

Appendix 7. Ethical approval letter



UNITED KINGDOM · CHINA · MALAYSIA

School of Psychology

The University of Nottingham University Park Nottingham NG7 2RD

tel: +44 (0)115 846 7403 or (0)115 951 4344

SJ/tp

Ref: **S1312 Ethics Committee Review**

Tuesday 23rd March 2021

Dear Sarah Atkinson and Hannah Gibson,

Thank you for submitting an account of your proposed research 'A study exploring the experiences of children and young people with special educational needs and disabilities during the COVID-19 pandemic'

That proposal has now been reviewed and we are pleased to tell you it has met with the Committee's approval.

However:

Please note the following comments from our reviewers;

Reviewer One:

For S1312: Minor revisions (without further submission)

- *The parental information sheet needs more information about the recording and storage of data. The UoN privacy statement for researchers (or relevant parts of it) should be included or incorporated in the information sheet. Other information that should be included is reassurance that recordings are made on password protected recorders only accessible by the lead researcher, where/how the recordings will be stored securely if these are moved from the recorder for transcription process and the deadline for data withdrawal (2-weeks fits with the information about when the recordings will be deleted).*
- *If interviews are conducted via MS Teams, then interview recordings likely still need to be done via a separate audio recorder (and not via Teams record function). If researchers need to record using Teams, they should ensure Teams is suitable on GDPR compliance for this purpose and resubmit a chair approval request if procedures must alter significantly.*



Final responsibility for ethical conduct of your research rests with you or your supervisor. The Codes of Practice setting out these responsibilities have been published by the British Psychological Society and the University Research Ethics Committee. If you have any concerns whatever during the conduct of your research then you should consult those Codes of Practice. The Committee should be informed immediately should any participant complaints or adverse events arise during the study.

Independently of the Ethics Committee procedures, supervisors also have responsibilities for the risk assessment of projects as detailed in the safety pages of the University web site. Ethics Committee approval does not alter, replace, or remove those responsibilities, nor does it certify that they have been met.

Yours sincerely

Professor Stephen Jackson Chair, Ethics Committee

Appendix 8. COVID-19 risk assessment for research

Business Unit: School of Psychology	Location(s) of Activity: Nottingham City Educational Psychology Service WHERE IS YOUR DATA GATHERING ACTIVITY OCCURRING? In local schools in Nottingham city	Risk Assessment Ref:
Activity Title: <i>How are children and young people with special educational needs and disabilities experiencing COVID-19?</i>		
Activity Outline: <p>The proposed study will involve carrying out semi-structured interviews with children and young people to find out about their experiences of COVID-19. These will last for 45 minutes to 1 hour.</p> <p>The intention is for the researcher to carry out the interviews with the children and young people, individually, in their school or if this is not possible due to COVID-19 restrictions then on-line using Microsoft teams.</p>		
Those at risk / affected parties: Children and young people who are the participants in the study. -Participant numbers aim to be between 6-10 -Participants will be aged between 11-16 and have with an education health care plan or access higher level need funding. -Potentially at risk are the participant families and other adults/pupils in the schools due to infection spread.		
Risk Assessor Name: Hannah Gibson	Signature: 	Date: 15/01/21
Responsible person / Line Manager Name: Sarah Atkinson	Signature: 	Date: 03/03/21

Master Risk Assessment Reference where applicable:	Related procedure references or links:
Review Period: 1 year	

What are the hazards?	List the harm associated with the hazard	Risk Evaluation without controls in place High/Med/Low	What control measures are, or will be put, in place to control the risk? List all elimination, substitution, engineering and/or administrative controls	Risk Evaluation with controls in place High/Med/Lo w
COVID-19 infection	Illness/death	High	<p>Face to face individual semi- structured interviews with children and young people will only take place only if this is deemed to be safe by the child's school/parent and the researcher's service. An appropriate risk assessment (for both the school and the psychology service) would be carried out and consent gained from all involved.</p> <p>If face to face interviews are taking place, then relevant precautions in line with school/service protocol will be taken. E.g., personal protective equipment, washing of hands, positioning of</p>	Low

			<p>interviewer and interviewee (sat at a social distance of 2m), windows open, track and trace in place.</p> <p>If risk deemed to be too high at the time of data collection for face-to-face work, then an on-line interview will take place which will eliminate risk of infection. Educational psychology service protocol will be followed in this instance, for example the interview will take place in a communal area with a parent/carer nearby and the child and researcher will be appropriately dressed.</p> <p>The researcher has had her C-19 vaccination so is less likely to become severely ill or in need hospitalisation should she contract C-19.</p>	

Appendix 9. Semi-structured interview questions Interview Schedule

I will first begin by introducing myself and explaining that I am interested to find out about young people's experiences of COVID-19. I will go through the pupil information sheet (appendix 6) taking care to remind participants that the interview will be recorded but that I will keep the recording safe and delete it once I have transcribed it. I'll ask if they have any questions and if they are still happy to continue. I will also explain the systems in place about their right to stop/withdraw (see ethical consideration in methodology chapter)

General questions

- Can you tell me about COVID-19? What do you think about it?
- What has it been like for you since COVID-19 began?
- Can you tell me about what being a young person during COVID-19 has been like?

School and C-19

- Can you tell me about the lockdown and if you have been staying at home or going into school during COVID-19?
- What was this like? What has school and learning been like for you during COVID-19?
- Have you done any on-line learning during COVID-19? What was this like for you?

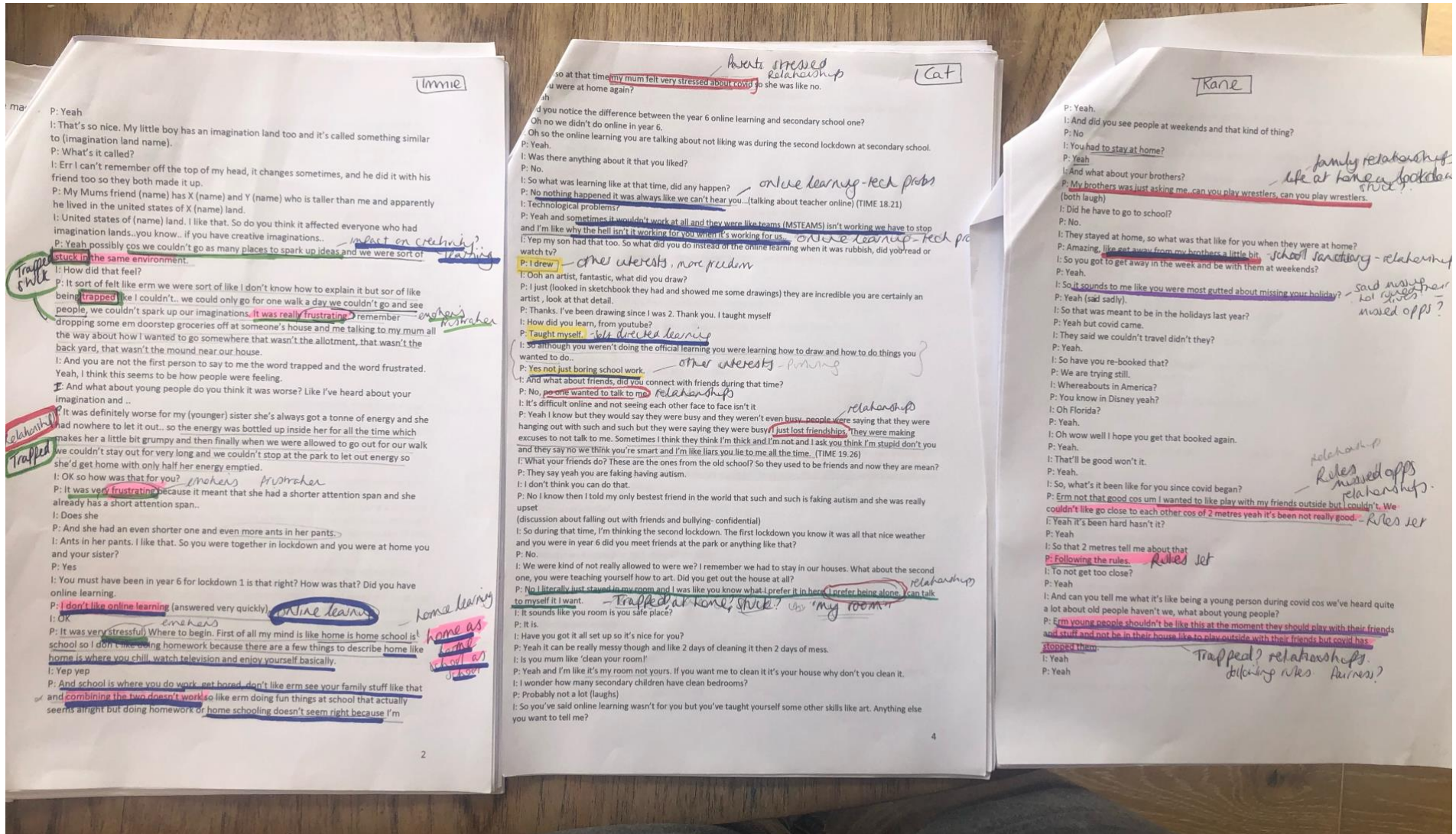
Social, Emotional, Mental Health and Relationships

- What has it been like with friends and family during COVID-19?
- Has anything or anyone helped you during COVID-19?
- Have you kept in contact with friends during lockdowns? If so, how?
- Can you tell me about how you've been feeling? (you can use some of these cards if you like *show emotion cards*)
- Can you tell me about what has been important to you during COVID-19?
- If you could make things better, what would you do?

Thinking ahead

- Are you thinking about the future and what it might be like? What do you think it will be like for you? Is there anything you are looking forward to?
- Is there anything more you want to tell me about COVID-19 and your experience of it?

Appendix 10. Example pages of 3 transcripts and initial coding carried out



Appendix 11. Phase 2 analysis: Generating Initial Codes table

Initial data analysis coding with candidate themes

Clusters/ Candidate themes	Codes (S=semantic, L=latent, R=reflexivity)	Key evidence (participant number)
Restrictions Being at home	Being stuck/trapped/cage/home as a prison (S)	“We were stuck in, I mean it's hard to be stuck in a place like for six months”(1) “Cause we've just been in the same place and you just forget what 2 + 2” (1) (link with hard to learn)
What I've missed	Monotony sameness ‘around and around’ (L) Home as safe place (L) Powerlessness/controlled (L) What I've missed /Missing exams/tests (S) Staying at home-good for some (S) R= I felt empathy for what participants were reporting. I too felt trapped in lockdowns and that although home was a safe place, I felt stuck.	“We've been treated like animals being kept in a cage” (1) “I literally just stayed in my room and I was like you know what I prefer it in here, I prefer being alone. I can talk to myself it I want” (2) “Well it was staying at home being outside...fresh air..going for walk” (3) “One of the things that's been hard for me during covid is I love to talk, I talk to loads of people but because of coronavirus I couldn't socialise as much” (4) link relationships “In (imaginary world name) lots of things there are sparked by things I see so I remember being on holiday once I saw some beautiful boats so I spent the rest of the holiday imagining the boats so because I couldn't go places it was like it was a bit shut off and that was kind of annoying” (4) “I go to all the places nearby often and we aren't going anywhere” (4) “We couldn't go as many places to spark up ideas and we were sort of stuck in the same environment” (4) (talking about her imagination lands) (4) “It sort of felt like erm we were sort of like I don't know how to explain it but sort of like being trapped like I couldn't.. we could only go for one walk a day we couldn't go and see people, we couldn't spark up our imaginations. It was really frustrating. (4)

“I remember dropping some em doorstep groceries off at someone’s house and me talking to my mum all the way about how I wanted to go somewhere that wasn’t the allotment, that wasn’t the back yard, that wasn’t the mound near our house” (4)

“The energy was bottled up inside her for all the time which makes her a little bit grumpy and then finally when we were allowed to go out for our walk we couldn’t stay out for very long and we couldn’t stop at the park to let out energy so she’d get home with only half her energy emptied..It was very frustrating because it meant that she had a shorter attention span and she already has a short attention span..ants in her pants”(4) talking about her sister also relationships

“Work work work lunch work work work work then we’d go for our walk and then we’d have tea and then the same again” (4) link to online learning

“It goes around and around and around and round and round and round and round and round” (4) talking about days at home and online learning

“There was America and meant to study Holes and do the Maya people and I didn’t get to do any of that” (4)

“We missed out on the water fight” (4)

“With this rollercoaster so many children are having to isolate even if it’s just a sore throat, there’s so many people missing their tests” (4)

“The good thing for that was that I didn’t have to do my SATS in year 6” (4)

“I don’t like covid that much cos it ruined my holidays.. cos we was going to go to America but it was cancelled cos of covid and it just ruined our lifes” (5)

“We need to just stay in home, it was boring” (5)

“Young people shouldn’t be like this at the moment they should play with their friends and stuff and not be in their house like to play outside with their friends but covid has stopped them” (5) link to friends

“Go outside to the park..yeah or go to the pub” (missed these) (5)

		<p>“I was kind of annoyed about some of the grades, but it wasn’t annoyance it was like you’ve clearly got that wrong. I got A *’s in my English’s, and they only gave me a B in the actual thing when all my mocks and I was like oh” it was unfair but at the end of the day so was everything so I was pretty apoplectic towards it. (6)</p> <p>“I think I had quite a good advantage too cos I’m really good at not talking to people unless I really have to” ... “for some autistic people I can imagine it’s pretty good(staying at home)”... “I’m quite good at making friends when it benefits me but then again erm because I couldn’t see them during lockdown or whatever it was more of just like a ‘ahah ok I don’t have to talk to you anymore’” (6)</p> <p>“There are some autistic people in school who are like ‘arr the lockdown is great I didn’t have to talk to anyone” (link to relationships/theories)</p> <p>“I had more freedom (to go running, write book) but at the same time it was kind of annoying not being able to go to the shop and buy something”(6) link freedom</p>
<p>Government restrictions Rules Decision making</p>	<p>Breaking the rules/ Following the rules (S) Collective responsibility (L) Rules are needed (L) Keeping safe (S) Others don’t care/are a risk (S) Simple rules (S) Confused (S)</p> <p>R= I heard how the rules felt so important and so confusing and reflected on how I felt the same way.</p>	<p>“Some people broke the rules and yeah I mean just to be outside and all that” (1)</p> <p>“To be honest the more rules they put on us the more us British people be confused but like yeah just put a simple rules at the time like wear a face mask, wash your hands”(1) (link politicians)</p> <p>“Don’t go outside unless you need to or you’re walking your pet in your garden..we need simple rules” (1)</p> <p>“So I did broke a rule, which is going out” (1)</p> <p>“Just clear rules and lockdown before it starts” (1) “there are tests now” (3)</p> <p>“It’s been difficult. It’s been upsetting. When people don’t listen the rules then they die they don’t listen they spread it more then it’s everywhere” (3) link to infection spread and emotions and media</p> <p>“They don’t care about it” (other people) (3)</p> <p>“Well yeah, wear your facemasks, wash your hands” (3)</p> <p>“Probably people follow rules more” (to make things better)(3)</p>

		<p>“I mean she does wear a facemask (about mum worrying about getting ill) (3)</p> <p>“When we not in our lockdown anymore hopefully when people following the rules we do. When people die and cases rise and could be that happening again so repeating it” (link to theories about future) (3)</p> <p>“It was really hard...confusing” (to follow the rules) (5)</p> <p>“In some cases they were poorly enforced (the rules)” (6)</p> <p>“Following the rules” (5) (when asked about what he meant about ‘2 metres from friends’)</p> <p>“But me personally I was kind of scared of getting it, so I followed the restrictions a lot cos arguably with a weaker immune system like it was a good chance it was not going to end very well for me” (6)</p>
	<p>Politicians and the government/Announcements (S)</p> <p>Imposed lockdowns (S)</p> <p>Making the rules (L)</p> <p>What I would do differently (S)</p> <p>R= I already felt anger towards the government myself so hearing how participants felt validated my feelings and increased my anger towards them.</p>	<p>“Yeah and the way Boris Johnson pronounces (announces?) and Matt Hancock” (1)</p> <p>“Yeah and if Boris Johnson knew the pandemic was getting worse breaking out from China then he really should like put a halt to airport travel so that, so there's no more cases to be honest” (1) (link spread)</p> <p>“I would be prime minister” (to make things better) (1)</p> <p>“Don't make Boris Johnson prime minister” “Boris Johnson won't be prime minister anymore” (when asked how things could be better) (1)</p> <p>“If you said something bad about Prime Minister he would find ya yeah” (1)</p> <p>“If you ease the restrictions then yes cases are going to go up but you can't keep easing the restrictions going up and going up and then bringing us back into a lockdown.. you've just got to accept the cases are going up.. you've found a vaccine you've found ways to help people even though more people are getting it not as many are getting poorly you could just keep on just letting us be more free” (4)</p> <p>“When Boris Johnson made announcements me and my sister didn't like we were allowed to swear at the radio. That's like the only time we were allowed to swear. The only time” (4)</p> <p>“My grandma doesn't like Boris Johnson she says he's too like Donald Trump” (4)</p>

		<p>“I probably make it so that like the restrictions were eased like we came out of lockdown sooner than we did and that we had fewer lockdowns” (4)“So that there weren’t so many I wouldn’t have missed so many stepping stones so that it wouldn’t have been stepping stone stepping stone stepping stone gap..maybe like just three gaps and not five gaps..Like even if there were just the small things like that that makes a difference” (4)</p> <p>“They kind of.. especially the western world, we kind of screwed up the whole thing, they kind of just assumed that nothing ever bad would ever happen to us cos we’re all comfy up in here” (6) link to theories</p> <p>“I know people at school or whatever who have been out when they weren’t meant to or and you know ‘Hancocked’ it up” (6) link to following rules</p> <p>“I don’t support everything that the government did during lockdown I don’t support it as a win it’s hard to argue cos we’ve never seen anything like this before I don’t think any political party would have handled it any better I mean it really arguably there are like some different ones that could have would have done it a lot better like in New Zealand or whatever they’ve got a more humanist people centred approach there” (6) link to theory</p> <p>“I think any political party that would have got in which is arguably just labour or the conservatives would have fucked it up equally as much and although it would have been really nice if the green party had got in and saved everything I also just don’t think this would have happened cos even if they had got in the economic plans around it are as complicated it doesn’t matter who you put in first it sucks that it’s stuck like that but you know that’s kind of the price you have to pay unfortunately for you know living in a democracy of this nature” (6) link to theory</p> <p>“Was really unfair like when they blamed on a bunch of university students for like ‘oh you guys have really screwed up the covid pandemic, oh man you guys at school you suck’ and it’s like I don’t know if you know this but you’re the ones who opened up the schools like I have no choice but to be here unless I want to be fined 200 pounds a day so arguably that’s kind of your fault so” (6) talking about government decisions.. Like you’re in a room with 100 other people, arguably one of them is gonna have covid like it’s not really your fault” (6)</p> <p>Like people are gonna die you know and that’s sad you know and I think hmmm maybe you could have handled it a bit better (the government) (6)</p>
	<p>Theories and conspiracy theories (link to government) Assumptions/Knowledge (L)</p>	<p>“Just tell China don’t make a virus if you know is going to depopulate the globe... I mean there are some theories about it but it feels like that China did make a virus so that the world wasn’t getting too populated.” (1)</p>

	<p>What is COVID-19 (S)</p>	<p>“I can see another pandemic but a different one or history might repeat itself one thing after another” (about the future) (1)</p> <p>“I think people are dying from covid but they have been dying for years.... they put on his death certificate that he died of covid and he hadn't”(2)</p> <p>“Covid is normal now because people die to be honest I think it's God's way of getting rid of people because of over population” (2) linked to ‘normal now, desensitisation’</p> <p>“I bet there was something to..something as similar to this maybe not as epic but when the flu was first introduced I bet something like this did happen..I bet you did keep like erm easing things up a bit and then when cases of the flu go up you go into a mad panic like you are now” (4) link to panic.</p> <p>“Well, the virus is a lung functioning virus that came from what we assume is Wuhan, China but we're not actually that sure, it could have come from anywhere, we don't know actually ... it's just easier for people to blame people...a country that they already have a dislike towards, I guess” (6)</p> <p>“In some ways, it's been like actually really good and also at the same time it's admittedly one of the worst things that's ever happened in the past 10 years as long as you don't count terrorist attacks or whatever”... it's quite weird to see especially here like there's kind of like been quite a lot of solidarity..there was a lot of solidarity especially in our community sort of like let's get through it together. (6)</p> <p>“It's nice to see people putting the good of humanity before profits” (6)</p> <p>“Some people have really, really suffered and some people haven't felt the effects of it at all...which I think is true for most things” (6)</p> <p>“I can't imagine it was great for the planet and stuff I mean there was some like ecological things like oh man there's dolphins in the canal yay now but then like imagine at other times everyone was buying everything off amazon that probably wasn't the best” (6) link to politics</p> <p>“We've already screwed up the planet so it's just kind of a matter of time til we see the repercussions of it (covid)” (6) link to politics</p>
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		<p>“People.. give the more expected answer like ‘oh it’s terrible people are dying’ but think ‘I’m ok so it’s alright’. Bo Burnham says erm, there’s this quote from him where he said, ‘oh man I hate all the suffering in the world, genocide, racism, sexism but the good thing is none of it happening to me’ and I think that’s what a lot of people feel” (6)</p> <p>“I think a lot of people assumed it would pass over in a month like be like an old meme or whatever... but I think for someone who has had pneumonia I was like this probably isn’t something that’s gonna go away immediately there’s probably going to be long term repercussions on this unfortunately.” (6)</p>
<p>Battle against Covid-</p>	<p>Infection/spread (S) Masks(S) Control (L) Battle against it (L)</p> <p>Having covid (S) Dying from covid (S) Covid sucks (S) People I know with covid (S)</p> <p>R= I felt sad hearing how scared participants were about COVID-19 and dying from it. I felt angry towards the media and government for making them feel so anxious.</p>	<p>“Some schools like were still open during the first wave of pandemic which I thought was a bad idea cause you never know if a teacher or student is infected and it can just spread which is a really stupid idea” (1)</p> <p>“Masks, yeah, there is obviously a gap on the top bit there which I don't know why would you make mask with a gap on it if you know you going to get infected so I feel like most people, I mean probably did, bought masks with a seal on. it’s more sensible. It can’t enter in (covid) (1)</p> <p>“It enters in your ear mouth and yeah” (1) “Cos it got closed down (secondary school) I don't know how many got infected”(1) “If you like have asthma or something like that that means covid is going to take the upper hand against you with your white blood cells to be honest” (1)</p> <p>“Germs. Like it’s everywhere” (3)</p> <p>“I know I know that people might think germs are just bits of like tiny droplets but it’s still everywhere, people poorly, and I know it’s hard for people but they need to follow the rules”(3) (link to rules)</p> <p>“I wasn’t that phased by it cos we’d all expected her to have it. But we were really..I was really annoyed. Christmas of all times to get covid” (4)</p> <p>“Just keep safe to keep safe and don’t spread it round again” (5)</p> <p>“Oh my god I don’t like facemasks cos I don’t like wearing the facemasks in restaurants and stuff, it’s annoying” (5)</p> <p>“It kind of really kind sucks that people kind of died and people I know you know personally like sadly unfortunately someone I know passed away” (6)</p>

		<p>“there’s someone at school, not in my year but the year below who got covid really bad and it like totally screwed up their immune system and I mean they didn’t die but at the end of the day they’re not going to live a normal life now unfortunately” (6)</p>
<p>Understanding Covid Emotions about Covid</p> <p>People we love</p> <p>Fearful of ‘others’</p>	<p>Fear/panic (link with emotions) (S)</p> <p>This could be me (empathy) (L)</p> <p>News/media (S/L)</p> <p>Linked events to covid in the media (L)</p>	<p>“Well frightening cause you know a 13 year old boy got killed by it” (1) (link media)</p> <p>“What if this could happen to me but so I wear every single mask that I bought for the pandemic” (1)</p> <p>“To be honest I think both were scared” (old and young) (1)</p> <p>“The news..wash your hands, wear facemask” (3)</p> <p>“Arrh it’s gone down gone down (feeling scared). It was panic now not panic” (1)</p> <p>“Yeah it’s usually covid covid covid” (news) (1)</p> <p>“You know how Prince Philip died?..Tom Moore gave a lot of pounds to the NHS” (1)</p> <p>“Like how black lives matter, it is important but at the same time you gotta think about the businesses what they damaged” (1)</p> <p>“Apparently killed a lot of people apparently it’s killed over 4 million or more” (2) linked to theory/infection.</p> <p>“To be honest it’s kind of getting boring that’s why I never watch the news, I watch you tube instead” (2) also normal now code</p> <p>“I just avoid the news and then don’t care about it” (2)</p> <p>“I feel like their families and cry about that, they’re like crying about their family died ..they’re crying about it... like people died from covid..and their family cry” (seen on news) (3)</p> <p>“My mum” (can talk to mum about what has upset her on news) (3) links to relationships code</p>

		<p>“I can see why people being.. do this.. and then like their families are sad about you know their you know their mum or their dad or someone else just try to break the rules then they died and then they can’t see them anymore you know it’s like they don’t care about it you know and then it hurts other people” (3) linked to rules.</p> <p>“Usually we watch our television programmes and then em sometimes Mum swears at the radio and Dad swears at the radio...they shut the kitchen door so that they can listen without me and (sister name) interrupting them and then sometimes when Boris Johnson made announcements me and my sister didn’t like we were allowed to swear at the radio. That’s like the only time we were allowed to swear. The only time” (4)</p> <p>“It was on my TV..we watched it and it said it was covid and we needed to like stay safe” (5)</p> <p>“It was like arhh man I could die from this but at the same time I could kind of understand that it could upset my mum” (6) link with covid sucks</p> <p>“They were worried about dad as well cos he’s got an autoimmune disease” (6) link with covid sucks</p> <p>“I mean I think we’re probably desensitised to violence already there’s a lot on social media see people like stabbing the actual shit out of someone or you see a policeman like crush someone’s head or whatever and it’s just like whatever, this is a Tuesday this is what happens now. I was like I saw thing the other day it was one of those Black Lives Matter riots which was like really good but then you see a child being tear gassed by somebody in a fumigation suit and it’s just like ‘cool’ (said sarcastically) I think like for a lot of typical people that’s quite difficult to see at first and then you build up resistance over time. I think the problem with dealing with autistic people is like (whispers) a lot of them just don’t care. As horrible as that is to say, if I don’t know someone I don’t mind that much” (6)</p> <p>“Yeah, I think for a lot of people though again it’s like seeing things through a tv screen like seeing someone get shot on TV” (6)</p> <p>“Everyone was crazy and then 200 people died” (at start of covid outbreak in UK) (6)</p> <p>“You don’t wake up in the morning and think ‘ooh there’s a bat in Wuhan and we’re all going to get a virus’. ...when I saw it had spread to France, I was like yeah this is probably going to fuck us” (6)</p>
<p>New normal</p>	<p>It’s been long (S)</p> <p>Normal now (L)</p>	<p>“It’s (covid) been so long” (1)</p> <p>“Yeah but in the end my brain, it’s working again now” (1)</p>

Recovery (L)

Going back to school (S)

Not bothered (latent-dissociation/normalising or adaptation and trauma growth) (L)

Memories of covid and it being part of experience/life/memories (S)

Future with covid and normal now together? (S/L)

R= participants gave me hope talking about the future. I was worried that they might not be able to imagine the future but their resilience surprised me.

“I feel like when covid is done then we could have playgrounds for kids with disorders like dislocated part of the body to feel human again make stuff for cheaper for people with amputated arms” (1) link to politics

“Feels like normal now” (2)

“They’re like me, not bothered about it now” (2)

“Yeah I’m not really bothered about it, no one really is we’re all like oh it’s another thing” (2) (talking about future) “we won’t care. We will just be laughing on the plane” (2)

“Going to be a hard one..for while cos of cases” (when asked about future)” (3) links to news

“No not back to normal yet but hope” (3)

“Vaccination..i feel like she might be a bit happier about it” (talking about her mum) (3)

(Talking about going back to school) “It was a very big shock. It was like being on a roundabout and then suddenly comes to a jolted stop and you get flown off.. flown off and erm the routine is suddenly braked” (4)

“For some reason corona virus didn't actually bother me and it was actually really odd, any other illness really bugs me but some reason coronavirus I wasn't phased by it but my sister who never had worries about it before suddenly got really paranoid about it. I just kind of couldn't see the big deal so we swapped positions” (4)

“It’s a bit better being back at school but the good thing about being at home was that it was home” (4) link to home being safe.

“Mum made us a lockdown album it’s like full of memories of lockdown. It’s got photos of me and my sister playing outside in the snow”(4) “Mum (had covid) sat on the doorstep watching up and me and my sister run around like mad in the snow.. the photo says me and (sister name) in the snow whilst Mum had covid 19” (4)

“I’m just hoping that it finishes soonish like I hope we don’t spend the next three years going on that rollercoaster” (4)

“We can like talk to our friends now and like play together, it’s ok now” (5)

“Good it will be better I assume.. it will be gone. I hope it does.” (5)

		<p>“I wish I’d been a streamer, like people erm who stream on games and get money and stuff. My second want is being a football player like being on a team for England” (5) future hopes</p> <p>“I had kind of done this before cos I’d had pneumonia for 6 months or something” (6)</p> <p>“I think ironically the new normal is quite a sadistic idea cos if it’s just normal that extra people die a day and nobody cares then it’s like no one really cares but at the start when one person got it it was like oh we’ve got to make sure that they’re safe” (6)</p>
<p>Life at school/not being at school/ Online learning?</p>	<p>Learning in a pandemic (S)</p> <p>Hard to learn (S)</p> <p>New ways of learning (L)</p> <p>Life at school in lockdown School as sanctuary in lockdown (L)</p> <p>Limited school experiences- movement around the schools and bubbles (S)</p>	<p>“Except for my brain was er not functioning well to be honest” (1)</p> <p>“It’s not easy” (3)</p> <p>“It’s been hard you know I keep on.. have to ..I struggle with learning you know.. have to break up by the tutor (means breaking up internet?) I was tired I keep on forgetting what time the lesson” (link to on-line lessons and learning) (3)</p> <p>“I think I did cos they want me to my mum was telling me like come in and we were in like computer room and we might do work on line then more people come in” (3)</p> <p>“Not the same cos we can’t be together still in tutor every day can’t see friends in my lessons” (3) link return to school</p> <p>“Bubble c was alright.. it was going a bit slower” (4). “You’d come in and go on the iPads then you’d do a bit of work then you’d have a snack and play outside then you’d do a bit more work then in the afternoon it would be completely free time to go on the iPads, do cooking.. it was really really fun” (4) first lockdown link</p> <p>“I’ve literally for the last two Fridays started using the art rooms in a block. I’ve only once been to the computer room in D block” (4)“I’ve been to the science lab once that was exciting they have methane taps” (4)</p> <p>“It was kind of like being erm on like stepping stones (uses finger on table to show jumping stepping stones) like going along foundation, year 1 year 2, year 3, year 4, year 5 and then year 6 stone was split in half so you’re on one stone then you jump a stone straight to year 7 then you jump a bit of year 7 and then you have go on skipping in little bits” (4)“suddenly it was like hold on there’s not a stone there and you have to go like that (action big leap with hands).. land on bubble C stone, one two oh no weeee massive leap so and when you start year 7 that’s alright getting used to it oh no another gap” (4) link to missing out?</p> <p>(Going to school meant) “Good get away from my brothers for a little bit” (5)</p>

<p>Relationships?</p> <p>Home (S) Loneliness (L) Fun but then boring (S)</p> <p>Family (relationships/community/pets) (S)</p> <p>Reunions and reconnecting after lockdowns (L)</p> <p>Pets (S)</p> <p>Friendships (S)</p> <p>Bubbles and impact on making relationships (L)</p> <p>What's helped (S)</p> <p>Remembering the time before covid (L)</p> <p>R= I found it difficult hearing about the participants worries about the people they love. I reflected that I might have been the first person they had spoken to about their worries.</p>		<p>“Being at home is my holiday cos I don’t like school!” (1) link to home/trapped/safe</p> <p>“The more I enjoyed it the more I realised it’s just being alone all the time so it was like a win win but not a win in the end” (1) link to home/trapped/safe</p> <p>“We do have ups and downs but yes we are okay” (about mum) (1)</p> <p>“Me and my mum we have friends in the block so yeah kinda makes it easy cause we know them for a long time, the first two really long time and the ones who live below us well he’s lived here about three years now but yeah we do get on yeah we had a pool set up, we’re having a BBQ” (1)</p> <p>“I’ve got a staffy (dog) and three cats and that kind of helped..just my mum, my friends and yeah my pets as well” (1)</p> <p>“I’m very distanced from my family now like I never come down to talk to my mum apart from when I come in from school when I will say how are you mum how was your day and just go upstairs and don’t come back down” (says she was always downstairs before covid)(2)</p> <p>“She (Mum) tries to get me to come downstairs and I’m like I don’t want to” (2)</p> <p>“Very stressful especially when your friends they just like fade away like you just lose them after a while especially if you haven’t seen them for a long time” (2)</p> <p>“My mum felt very stressed about covid” (2)</p> <p>“No one wanted to talk to me (friends in lockdown)... they were saying they were busy. I just lost friendships. They were making excuses to not talk to me” Sometimes I think they think I’m thick and I’m not and I ask you think I’m stupid don’t you and they say no we think you’re smart and I’m like liars you lie to me all the time. (2)</p> <p>(about dog)”Cos it’s like I’m very lonely and a very clingy person and I need someone to cuddle at night and if I don’t have someone I will cry” “he knows when I’m upset, he comes to my door and jumps on my bed next to me” (2)</p> <p>“Hard. Didn’t see my Grandma. Didn’t go outside” (3)</p> <p>“Been ok feel like my mum struggling with it (cries) she can’t see my Grandma for a long time (3)</p>
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“I like being at school. Like being with friends” (3)

“Like seeing my grandma, having good time (reuniting after lockdown)” (3)

“We used to go places my Grandma goes to my birthday and my brother’s birthday and maybe my mums birthday and erm go to places, travel together I think and mean like go outside, have a walk, drive somewhere” (3)

“My Grandma.. she missed us so much.. me and my sister and my cousins (names x 2) um like so we’d like zoom them and phone them quite a lot. She really missed us and I missed seeing other people.(4)

“Yeah I remember the first time we saw them after lockdown we weren’t meant to do hugs and kisses but my grandma said I’m not going to see you unless we can do it...and she cried” (4)

“We ran up and gave my Grandma a big hug and then we ran to my Grandad who swirled us round and then he said to me afterwards I was getting rather heavy” (4)

“I haven’t been able to see many friends. I don’t really have friends in the school” (4)

“I still haven’t made any proper proper friends but there’s people I reckon it’s sort of like eggshells like there’s some people I think I might be friends with but they just aren’t my friends yet” (4) (transitioned to secondary in lockdown-impact on friendships)

“It’s kind of like they break away those old friendships but hang on tighter to those new friendships and are afraid to make new friends.. maybe a bit more cos (of covid) they haven’t seen their friends over lockdown I find it easier to make friends with younger year groups or older year groups so like when the new year 7 group comes I can make friends with them or when we are allowed to mix with the older year group” (4)

“I think those little bits where we got to see people” (4) (helped during covid)

“My brothers was just asking me..can you play wrestlers, can you play wrestlers” (at home in lockdown)(5)

“I wanted to like play with my friends outside but I couldn’t. We couldn’t like go close to each other cos of 2 metres yeah it’s been not really good” (5)

		<p>“Sad cos we wanted to talk to each other, play with each other” (about friend) “Happy, really happy” (about seeing friends again) (5)</p> <p>“My family..keep me motivated to just stay safe from covid” (5) family have helped</p> <p>“I think in a lot of ways it’s made some families a lot closer although this isn’t generalised cos I know for some families like I’m sure if you lived in a family where someone hits you then it probably wouldn’t be the best time for you at the moment but some people have been able to spend time” (6)</p> <p>“I didn’t see them (friends), I called them then when we were allowed to see people one on one, I saw a few people” (6)</p> <p>“I would prefer for there to not be as much covid, I would prefer for there to not be you know more deaths. Because although I wouldn’t personally care I can imagine those families who are probably upset” (6)</p>
<p>Positives</p>	<p>Own learning/time/learning is different (1) ‘Finding the sweets in the pile of shit’ (looking for positives) (S/L)</p> <p>R= I wondered if my own strengths based solution focused approach may have been looking for ‘positives’</p>	<p>“I got a little bit done but then did research and yeah.. World war 2... used my phone like what type of ranks they had. it’s just one of my hobbies to be honest, me and one of my science teachers like World War 2” (1)</p> <p>“We had to sit in the corner. I had to sit in the corner with a laptop and do research if space travel is a good idea or not and so I did” (1)</p> <p>“I drew...I taught myself“ (shows me sketchbook) Thanks. I’ve been drawing since I was 2. Thank you. I taught myself (2)</p> <p>“Not just boring school work” (2)</p> <p>“We did Minecraft and built this world called X during lockdown and it took us like 3 months to build. It’s massive” (2) also online friendships</p> <p>“I know some people who have written books during lockdown, some people have sat on their bums and done nothing but although there are like a lot of negatives and they outweigh the positives it’s hard to argue there have been some tiny you know recessions in it’s like you’ve been given a heaping pile of shit but there’s a sweet somewhere in the big pile of shit and you can kind of find it if you want” (6)</p> <p>“I did a lot of volunteering work during it cos we live near a wood, and we just contacted the people who run the wood and were like ‘hey want us to clear all your brambles and plant flowers and stuff?’” (6)</p>

		<p>“I wrote like 400,000 words... like of a I don’t know how to explain it like a book essentially... did that. Sat around, called my friends, played on my PS4, did a bit of homework but I mean they weren’t focussing on us there wasn’t much” (6)</p> <p>“Just kind of oh great I’ve hit this amount of words and cleared out a whole section of the woods like saved a bird and cool” (6)</p> <p>“I just did a lot of running and bike rides and exercise cos I had more free time. I mean for some people; I know I keep saying this...but they were heavily depressed or bored or just didn’t know what to do with themselves or just you know spent their days doing what teenagers do” (6)</p> <p>“ I’ve lost like a lot of weight during covid cos of actually having time to do exercise” (6)</p> <p>“I think some people had it really unfair and some people had a great time. I know some people who just played x box” (6)</p>
<p>Mental Health</p>	<p>Emotions/mental health (S/L) Coping (L) Up and down rollercoaster (L)</p> <p>R= I felt worried and sad hearing how participants mental health had been impacted. I needed supervision following an interview with one participant when a safeguarding disclouse was made. I was aware the strength of my emotion for one or two participants may have impacted on how I interpreted what the other participants were saying.</p>	<p>“We had our angry sad and happy moments but yeah overall it was ok” (1)</p> <p>“Yeah I can’t cope with more than this last year” (1)</p> <p>“Obviously people did I think take their own lives.. they was killing themselves cos they had got covid.. and if people are feeling suicidal, they should speak up about it” (1) link media</p> <p>“Stay in my bed and stay away from people like I don’t like people no more they scare me”.. “I’m afraid of people now”.. I became very scared of people for no reason. I don’t want to be near people. I want to be near people I know but I want to stay away from people as much as I can just because I don’t like them anymore it’s just weird (2)</p> <p>“I have random little breakdowns and I cry all the time to myself and I will just like I’m very down my emotions are all over the place” (2)</p> <p>“I have my anger outbursts um as it is a sign I want help I write letters and I put them outside my door and they are usually very upsetting notes..it’s how I get my thoughts out. I scribble it all down and it helps- I want my thoughts out of my head”(2).</p>

		<p>“It makes me feel sad (cries) it’s been different” (3)</p> <p>“I’ve just come from seeing (name) from the mental health support team about that” (4)</p> <p>“It’s like you’re going along in lockdown and the restrictions start to be eased slightly and you get more excited you get really excited and then it plummets again” (4)</p> <p>“A seesaw like lockdown.. no lockdown.. lockdown ..no lockdown” (4)</p> <p>“Not that happy.. mad (about how covid made him feel).. happy when covid goes”(5).</p> <p>“ I need to talk to people or I would be very very lonely” (2)</p>
	<p>Being heard/having opinions (L)</p> <p>Awareness of needs not being met (L)</p>	<p>“Do give your opinion, opinions matter” (1)</p> <p>“I mean I mean back in the day before covid existed you were allowed to say anything about anything really” (1)</p> <p>“This century people really don’t care about your opinion and it is sad and sometimes you have to be exophobic (?)or racist or homophobic just to get your opinion out and get everyone’s reaction you know what I mean?” (1)</p> <p>“No matter how many times I tell them what I need they will be like you’ve got ADHD haven’t you and I’m like no I’ve told you over a hundred times now” (2)</p>
<p>On-line learning</p> <p>New ways of communicating</p>	<p>On-line learning (S)</p> <p>Technology problems (S)</p> <p>The first lockdown was better (not so much work more freedom-connects with free time code) (S)</p> <p>Switch to on-line hard but then got used to it-adjustment (S)</p> <p>On-line friends (S)</p> <p>Social media to connect (S)</p>	<p>“Yeah I mean I did talk to people online (on phone) and they’re my friends yeah” (1)</p> <p>“I remember the first time they said we are going into lockdown this and all of this is happening like it was in Hong Kong and then spreading through the world and then in the UK and like we’re going to go into lockdown and I was like fair enough and I wasn’t bothered and then I realised wait we have to do online classes and I got really upset and thought I don’t wanna do them so do you know what I did? I turned my screen off, turned my mic off went to bed, there’s nothing to learn about” (2)</p> <p>“There’s nothing to learn about it didn’t teach me anything even if I did keep my mic on” (2)</p> <p>“Like online chats but not on-line learning” (2)</p> <p>“No nothing happened it was always like we can’t hear you...”(talking about teacher online)(2)</p>

Disability that impacts on on-line learning (L)

R= I was surprised how little schools had taken children's disabilities into account for on-line learning. I had expected some children with autism to possibly say they preferred on-line learning but this was not the case.

"Sometimes it wouldn't work at all and they were like teams (MSTEAMS) isn't working we have to stop and I'm like why the hell isn't it working for you when it's working for us." (2)

(talking about what's helped) "Yes and my social media...I speak to people in America" "we've been talking for like 4 months now and I'm like we've just been talking back and forth and it's just really nice. It's nice to have someone to talk to" "I've made many new friends" (online) (2)

"I don't like online learning..It was very stressful. Where to begin. First of all my mind is like home is home school is school so I don't like doing homework because there are a few things to describe home like home is where you chill, watch television and enjoy yourself basically" (4)

"And school is where you do work, get bored, don't like erm see your family stuff like that and combining the two doesn't work so like erm doing fun things at school that actually seems alright but doing homework or home schooling doesn't seem right because I'm surrounded by all the things I enjoy. Like I would be doing my home learning and then I'd get my like 15 minute break after two of them erm and me and my sister we wouldn't be able to watch television or play and mum would help (sister's name) more because she's younger. So I had zoom calls. (corrects herself) No I didn't have zoom calls.. so the first lockdown was much better actually" (4)

"We didn't have any set learning so mum would set us learning.. so she knew what (sister's name) was doing so she would set her up then she would set me work and make me write character descriptions and stuff and I liked that cos that was good then our routine started to get messed up and then the teachers would set us learning and then it started to go a bit wonky wrong" (4)

"I like mums learning, so I remember I wrote up a beautiful character description about cowslip the pixie and I described cowslip the pixie in a whole page of description and then after that mum let me like draw her and colour her in and then decorate her and stuff and then the school learning didn't have any of that it was sort of work work work break work work" (4)

"arrghh (sound and put head in hands) yeah. I did not like it. I do not like zoom.. I don't do much on technology.. I just don't like zoom" (when asked if had on-line learning in second lockdown) (4)

"Me and my sister play games, we don't play games on technology like fortnight and Nintendo switch we play with our barbies and lego" (4) talking about why tech difficult

"We don't really do much on the computer and neither does my Mum or Dad, so, we were a bit like what are we meant to be doing, how does this work?" (4) why tech difficult

		<p>“It slowly got easier so I had my MS teams meetings and X (sister) had her class zoom calls, mum had zoom calls and work to do. Dad was up in the loft working from home” (4)</p> <p>“I was zooming to my Grandparents and Auntie R... really different (to seeing them in person) we zoomed them at a time when my hearing was so bad so I couldn't hear what they were saying” (4)</p> <p>“I can't hear no matter how many times they repeat it, technology problems and stuff mean that it's harder to hear things” (4)</p> <p>“There were so many people using the computer (in on-line lessons)Uuggghh yeah”(frustrated sound about tech problems) (4)</p> <p>“I did on-line learning in school like with the teachers.. Good I liked it.. I don't like writing in it but I like talking” (5)</p> <p>“Well like for the first 6 months there wasn't any online learning cos we'd finished school” (6)</p> <p>“We did have some learning in the second lockdown but in general it was easier cos it meant to be honest with you I just painted stuff during the lessons and then did the work afterwards cos it was just easier to do it like that” (6) links to other learning</p> <p>“They were live on teams although I just tended to do something else whilst they were doing it talking and then I did what I needed to do after cos I couldn't do it during”...yeah, I can do it I just did other things. I went for a run in one of them” (6) links to other learning</p>
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Coding notes/reflections

Home and trapped together?? Sub themes?

Participant 1- include media info about other things that happened at time of covid? Black lives matter? (page 4). Discussion point. Links to other events at the time of covid.

Noticed that some participants disclosed how upset they had been, mental health issues- hadn't made link possibly that it was covid 'I just don't want to see anyone anymore, I don't know why'. Then often stated that they are not bothered anymore. Trauma been internalised, has it been processed? Latent? 'oh it's another thing now' Do this group of young people face so many challenges that covid is just another one of these challenges?

Reflexivity-angry reading participant 3 crying about worrying about her mum not seeing grandma- recent revelations about government parties.

Latent interpretation- how parents feel impacts on kids- aware of their emotions- all participants noted their parent's emotions (links with lit review)

Empathy for what see on news- families crying..made them cry? Media intended this for compliance? Worked for most participants – linked how they felt to following the rules..if I follow the rules then this won't happen and I won't feel this was but they did still feel this way through watching it.

Reflection- some pupils who said the least said the most in terms of meaningful evidence about themselves-language diffs did not cause difficulties with getting data.

Home learning links with more free time code??

Theme .. new ways of learning- Link own learning/new learning/online learning and free time

Link between government and theories and media?? And panic??

Interesting didn't ask participants about Boris Johnson yet they all talked about him. How much are their views formed by parent's political views?

Theme about 'home is home, school is school' "the good thing about home is that it is home" (4)

Reflections- kids positive hopes for the future about it being ok. This has happened before etc. Resilience and hope.

Appendix 12. Phase 3 analysis: Developing initial themes- Finalised Themes and potential evidence quotes to use

Theme	Sub-theme	Quotes to use
Government restrictions	Following the rules	<p>“It’s been difficult. It’s been upsetting. When people don’t listen the rules then they die they don’t listen they spread it more then it’s everywhere” (3)</p> <p>“I know I know that people might think germs are just bits of like tiny droplets but it’s still everywhere, people poorly, and I know it’s hard for people but they need to follow the rules”(3)</p> <p>“It was really hard...confusing” (to follow the rules) (5)</p> <p>“In some cases they were poorly enforced (the rules)” (6)</p> <p>“To be honest the more rules they put on us the more us British people be confused but like yeah just put a simple rules at the time like wear a face mask, wash your hands”(1)</p> <p>“When Boris Johnson made announcements me and my sister didn’t like we were allowed to swear at the radio. That’s like the only time we were allowed to swear. The only time” (4)</p> <p>“Just keep safe to keep safe and don’t spread it round again” (5)</p> <p>“The news..wash your hands, wear facemask” (3)</p> <p>“I know people at school or whatever who have been out when they weren’t meant to or and you know ‘Hancocked’ it up” (6)</p>
	Views on political decisions	<p>“Yeah and if Boris Johnson knew the pandemic was getting worse breaking out from China then he really should like put a halt to airport travel so that, so there's no more cases to be honest” (1)</p> <p>“If you ease the restrictions then yes cases are going to go up but you can’t keep easing the restrictions going up and going up and then bringing us back into a lockdown.. you’ve just got to accept the cases are going up.. you’ve found a vaccine you’ve found ways to help people even though more people are getting it not as many are getting poorly you could just keep on just letting us be more free” (4)</p> <p>“Just tell China don't make a virus if you know is going to depopulate the globe... I mean there are some theories about it but it feels like that China did make a virus so that the world wasn't getting too populated.” (1)</p> <p>“I think people are dying from covid but they have been dying for years.... they put on his death certificate that he died of covid and he hadn’t”(2)</p> <p>“I bet there was something to..something as similar to this maybe not as epic but when the flu was first introduced I bet something like this did happen..I bet you did keep like erm easing things up a bit and then when cases of the flu go up you go into a mad panic like you are now”(4)</p> <p>“Well, the virus is a lung functioning virus that came from what we assume is Wuhan, China but we’re not actually that sure, it could have come from anywhere, we don’t know actually ... it’s just easier for people to blame people...a country that they already have a dislike towards, I guess” (6)</p> <p>“Obviously people did I think take their own lives.. they was killing themselves cos they had got covid” (1)</p> <p>“I probably make it so that like the restrictions were eased like we came out of lockdown sooner than we did and that we had fewer lockdowns” (4)</p> <p>“They kind of.. especially the western world, we kind of screwed up the whole thing, they kind of just assumed that nothing ever bad would ever happen to us cos we’re all comfy up in here” (6)</p> <p>“It was really unfair like when they blamed on a bunch of university students for like ‘oh you guys have really screwed up the covid pandemic, oh man you guys at school you suck’ and it’s like I don’t know if you know this but you’re the ones who opened up the schools like I have no choice but to be here unless I want to be</p>

		<p>fined 200 pounds a day so arguably that's kind of your fault so" (6) talking about government decisions.. Like you're in a room with 100 other people, arguably one of them is gonna have covid like it's not really your fault" (6)</p> <p>"Like people are gonna die you know and that's sad you know and I think hmmm maybe you could have handled it a bit better" (the government) (6)</p>
<p>Relationships</p>	<p>Relationships with others</p>	<p>"We've been treated like animals being kept in a cage" (1)</p> <p>"I go to all the places nearby often and we aren't going anywhere" (4)</p> <p>"It sort of felt like erm we were sort of like I don't know how to explain it but sort of like being trapped like I couldn't.. we could only go for one walk a day we couldn't go and see people, we couldn't spark up our imaginations. It was really frustrating. "We couldn't go as many places to spark up ideas and we were sort of stuck in the same environment" (4) (talking about her imagination lands)</p> <p>"We need to just stay in home, it was boring" (5)</p> <p>"Work work work lunch work work work work then we'd go for our walk and then we'd have tea and then the same again" (4)</p> <p>"One of the things that's been hard for me during covid is I love to talk, I talk to loads of people but because of coronavirus I couldn't socialise as much" (4)</p> <p>"Young people shouldn't be like this at the moment they should play with their friends and stuff and not be in their house like to play outside with their friends but covid has stopped them" (5)</p> <p>I feel like their families and cry about that, they're like crying about their family died ..they're crying about it... like people died from covid..and their family cry" (3)</p> <p>My mum felt very stressed about covid" (2)</p> <p>"We had our angry sad and happy moments but yeah overall it was ok" (1)</p> <p>"Yeah I mean I did talk to people online (on phone) and they're my friends yeah" (1)</p> <p>"Stay in my bed and stay away from people like I don't like people no more they scare me".. I'm afraid of people now... I became very scared of people for no reason. I don't want to be near people. I want to be near people I know but I want to stay away from people as much as I can just because I don't like them anymore it's just weird (2)</p> <p>"It kind of really kind sucks that people kind of died and people I know you know personally like sadly unfortunately someone I know passed away" (6)</p> <p>"It was like arhh man I could die from this but at the same time I could kind of understand that it could upset my mum" (6) link with covid sucks</p> <p>"They were worried about dad as well cos he's got an autoimmune disease" (6)</p> <p>"I've got a staffy (dog) and three cats and that kind of helped..just my mum, my friends and yeah my pets as well" (1)</p>

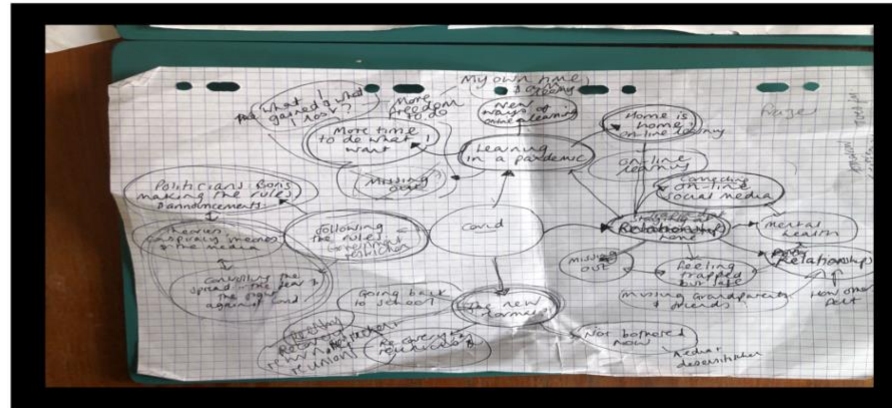
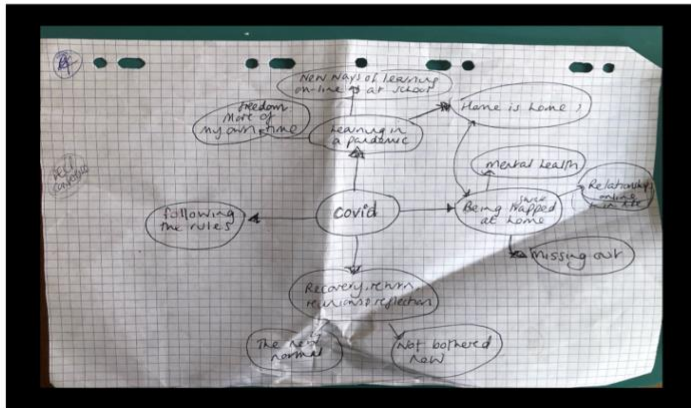
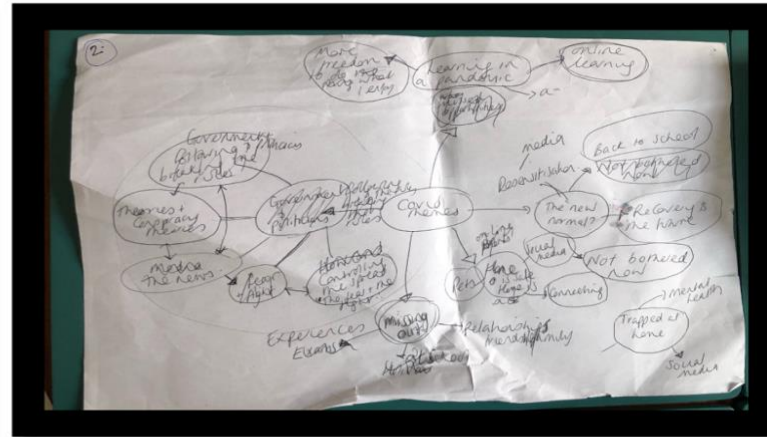
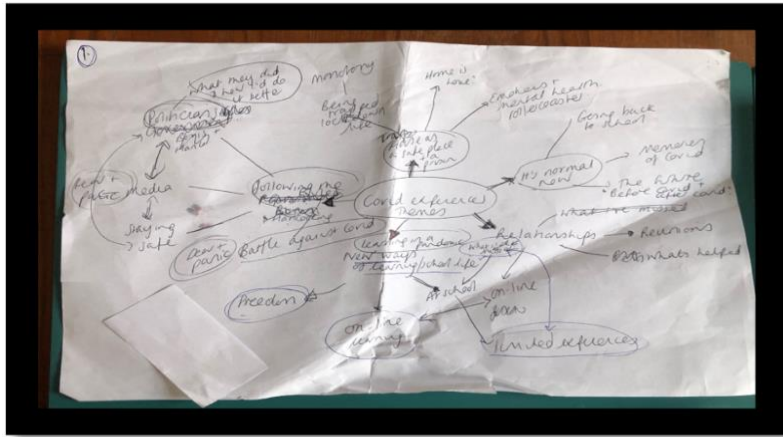
		<p>(about dog)“Cos it’s like I’m very lonely and a very clingy person and I need someone to cuddle at night and if I don’t have someone I will cry” “he knows when I’m upset, he comes to my door and jumps on my bed next to me” (2)</p> <p>“I’m very distanced from my family now like I never come down to talk to my mum apart from when I come in from school when I will say how are you mum how was your day and just go upstairs and don’t come back down” (says she was always downstairs before covid)(2)</p> <p>“She (Mum) tries to get me to come downstairs and I’m like I don’t want to” (2)</p> <p>No one wanted to talk to me (friends in lockdown)... they were saying they were busy. I just lost friendships. They were making excuses to not talk to me” (2)</p> <p>Hard. Didn’t see my Grandma. Didn’t go outside” (3)</p> <p>(talking about what’s helped) “Yes and my social media...I speak to people in America” “we’ve been talking for like 4 months now and I’m like we’ve just been talking back and forth and it’s just really nice. It’s nice to have someone to talk to” “I’ve made many new friends” (online) (2)</p> <p>“I was zooming to my Grandparents and Auntie R... really different (to seeing them in person) we zoomed them at a time when my hearing was so bad so I couldn’t hear what they were saying” (4)</p>
	<p>Relationships with self</p>	<p>“The more I enjoyed it the more I realised it’s just being alone all the time so it was like a win win but not a win in the end” (1)</p> <p>What if this could happen to me but so I wear every single mask that I bought for the pandemic” (1)</p> <p>“ I need to talk to people or I would be very very lonely” (2)</p> <p>“Yeah I can’t cope with more than this last year” (1)</p> <p>“It makes me feel sad (cries) it’s been different” (3)</p> <p>“It’s like you’re going along in lockdown and the restrictions start to be eased slightly and you get more excited you get really excited and then it plummets again” (4)</p> <p>“A seesaw like lockdown.. no lockdown.. lockdown ..no lockdown” (4)</p> <p>“Not that happy.. mad (about how covid made him feel).. happy when covid goes”(5).</p>
	<p>Relationships disrupted</p>	<p>“Very stressful especially when your friends they just like fade away like you just lose them after a while especially if you haven’t seen them for a long time” (2)</p> <p>“Hard. Didn’t see my Grandma. Didn’t go outside” (3)</p> <p>“Feel like my mum struggling with it (cries) she can’t see my Grandma for a long time (3)</p>

		<p>“My Grandma.. she missed us so much.. me and my sister and my cousins (names x 2) um like so we’d like zoom them and phone them quite a lot. She really missed us and I missed seeing other people.(4) Yeah I remember the first time we saw them after lockdown we weren’t meant to do hugs and kisses but my grandma said I’m not going to see you unless we can do it...and she cried” (4)</p> <p>“We ran up and gave my Grandma a big hug and then we ran to my Grandad who swirled us round and then he said to me afterwards I was getting rather heavy” (4)</p> <p>“I haven’t been able to see many friends. I don’t really have friends in the school” (4) I still haven’t made any proper proper friends”</p> <p>“I wanted to like play with my friends outside but I couldn’t. We couldn’t like go close to each other cos of 2 metres yeah it’s been not really good” (5)</p> <p>“Sad cos we wanted to talk to each other, play with each other” (about friend) “Happy, really happy” (about seeing friends again) (5)</p> <p>“I didn’t see them (friends), I called them then when we were allowed to see people one on one, I saw a few people” (6)</p> <p>“We missed out on the water fight” (4)</p> <p>“I don’t like covid that much cos it ruined my holidays.. cos we was going to go to America but it was cancelled cos of covid and it just ruined our lives” (5)</p> <p>“We used to go places my Grandma goes to my birthday and my brother’s birthday and maybe my mums birthday and erm go to places, travel together I think and mean like go outside, have a walk, drive somewhere” (3)</p> <p>“My Grandma.. she missed us so much.. me and my sister and my cousins (names x 2) um like so we’d like zoom them and phone them quite a lot. She really missed us and I missed seeing other people.(4)</p> <p>“It’s kind of like they break away those old friendships but hang on tighter to those new friendships and are afraid to make new friends.. maybe a bit more cos (of covid) they haven’t seen their friends over lockdown” (4)</p>
<p>Learning in a pandemic</p>	<p>On-line learning</p>	<p>“Cause we’ve just been in the same place and you just forget what 2 + 2” (1)</p> <p>“Except for my brain was er not functioning well to be honest” (1)</p> <p>“It’s not easy..It’s been hard you know I keep on.. have to ..I struggle with learning you know have to break up by the tutor (means breaking up internet?) I was tired I keep on forgetting what time the lesson” (3)</p> <p>“We’re going to go into lockdown and I was like fair enough and I wasn’t bothered and then I realised wait we have to do online classes and I got really upset and thought I don’t wanna do them so do you know what I did? I turned my screen off, turned my mic off went to bed, there’s nothing to learn about” (2)</p> <p>“There’s nothing to learn about it didn’t teach me anything even if I did keep my mic on” (2)</p> <p>“No nothing happened it was always like we can’t hear you...”(talking about teacher online)(2)</p>

	<p>“Sometimes it wouldn’t work at all and they were like teams (MSTEAMS) isn’t working we have to stop and I’m like why the hell isn’t it working for you when it’s working for us.” (2)</p> <p>I don’t like online learning..It was very stressful. Where to begin. First of all my mind is like home is home school is school so I don’t like doing homework because there are a few things to describe home like home is where you chill, watch television and enjoy yourself basically” (4)</p> <p>And school is where you do work, get bored, don’t like erm see your family stuff like that and combining the two doesn’t work so like erm doing fun things at school that actually seems alright but doing homework or home schooling doesn’t seem right because I’m surrounded by all the things I enjoy. Like I would be doing my home learning and then I’d get my like 15 minute break after two of them erm and me and my sister we wouldn’t be able to watch television or play and mum would help (sisters name) more because she’s younger. So I had zoom calls. (corrects herself) No I didn’t have zoom calls.. so the first lockdown was much better actually” (4)</p> <p>“We didn’t have any set learning so mum would set us learning.. so she knew what (sister name) was doing so she would set her up then she would set me work and make me write character descriptions and stuff and I liked that cos that was good then our routine started to get messed up and then the teachers would set us learning and then it started to go a bit wonky wrong” (4)</p> <p>“I like mums learning, so I remember I wrote up a beautiful character description about cowslip the pixie and I described cowslip the pixie in a whole page of description and then after that mum let me like draw her and colour her in and then decorate her and stuff and then the school learning didn’t have any of that it was sort of work work work break work work” (4)</p> <p>“arrghh (sound and put head in hands) yeah. I did not like it. I do not like zoom.. I don’t do much on technology.. I just don’t like zoom” (when asked if had on-line learning in second lockdown) (4)</p> <p>“Me and my sister play games, we don’t play games on technology like fortnight and Nintendo switch we play with our barbies and lego” (4) talking about why tech difficult</p> <p>“We don’t really do much on the computer and neither does my Mum or Dad, so, we were a bit like what are we meant to be doing, how does this work?” (4) why tech difficult</p> <p>“It slowly got easier so I had my MS teams meetings and X (sister) had her class zoom calls, mum had zoom calls and work to do. Dad was up in the loft working from home” (4)</p> <p>“ I can’t hear no matter how many times they repeat it, technology problems and stuff mean that it’s harder to hear things” (4)</p> <p>“There were so many people using the computer (in on-line lessons)Uugghh yeah”(frustrated sound about tech problems) (4)</p> <p>“I did on-line learning in school like with the teachers.. Good I liked it.. I don’t like writing in it but I like talking” (5)</p>
<p>Doing my own thing/different learning</p>	<p>“I got a little bit done but then did research and yeah.. World war 2... used my phone like what type of ranks they had. it’s just one of my hobbies to be honest, me and one of my science teachers like World War 2” (1)</p> <p>“We had to sit in the corner. I had to sit in the corner with a laptop and do research if space travel is a good idea or not and so I did” (1)</p> <p>“I drew...I taught myself“ (shows me sketchbook) Thanks. I’ve been drawing since I was 2. Thank you. I taught myself (2)</p> <p>“We did Minecraft and built this world called X during lockdown and it took us like 3 months to build. It’s massive” (2) also online friendships</p>

		<p>“I did a lot of volunteering work during it cos we live near a wood, and we just contacted the people who run the wood and were like ‘hey want us to clear all your brambles and plant flowers and stuff?’” (6)</p> <p>“I just did a lot of running and bike rides and exercise cos I had more free time” (6)</p> <p>“I’ve lost like a lot of weight during covid cos of actually having time to do exercise” (6)</p> <p>“We did have some learning in the second lockdown but in general it was easier cos it meant to be honest with you I just painted stuff during the lessons and then did the work afterwards cos it was just easier to do it like that” (6) links to other learning</p> <p>“They were live on teams although I just tended to do something else whilst they were doing it talking and then I did what I needed to do after cos I couldn’t do it during”...yeah, I can do it I just did other things. I went for a run in one of them” (6) links to other learning</p> <p>“I had more freedom to go running, write a book but at the same time it was kind of annoying not being able to go to the shop and buy something”(6)</p> <p>“You’d come in and go on the iPads then you’d do a bit of work then you’d have a snack and play outside then you’d do a bit more work then in the afternoon it would be completely free time to go on the iPads, do cooking.. it was really really fun” (4)</p>
The new normal	Recovery and return	<p>“Yeah but in the end my brain, it’s working again now” (1)</p> <p>“Not the same cos we can’t be together still in tutor every day can’t see friends in my lessons” (3) link return to school</p> <p>I’ve only once been to the computer room in D block” (4)“I’ve been to the science lab once that was exciting they have methane taps” (4)</p> <p>We can like talk to our friends now and like play together, it’s ok now” (5)</p> <p>“I like being at school. Like being with friends” (3)</p> <p>“Like seeing my grandma, having good time (reuniting after lockdown)” (3)</p>
	Not bothered now	<p>“Covid is normal now because people die to be honest I think it’s God’s way of getting rid of people because of over population”(2)</p> <p>“Arrh it’s gone down gone down (feeling scared). It was panic now not panic” (1)</p> <p>“To be honest it’s kind of getting boring that’s why I never watch the news, I watch you tube instead” (2)</p> <p>“Feels like normal now” (2)</p> <p>“They’re like me, not bothered about it now” (2)</p> <p>“Yeah I’m not really bothered about it, no one really is we’re all like oh it’s another thing” (2) (talking about future) “we won’t care. We will just be laughing on the plane” (2)</p> <p>For some reason corona virus didn't actually bother me and it was actually really odd I just kind of couldn't see the big deal (4)</p>

Appendix 13. Phase 4: Developing and reviewing themes with visual maps



Appendix 14. Extracts from research diary

25/06/21

I've had a heavy and emotional week with interviews this week, on Monday there was a safeguarding disclosure in an interview which felt difficult. Today I found the interview with X very emotional. Hearing how fragile her mental health may have already been before COVID and how it has really suffered because of it. Hearing how she knew that COVID was affecting her imagination and creativity and how there was nothing she could do felt upsetting. I felt angry at the government but I also felt inspired by how she could talk so freely about what had happened to her. I felt like she was trusting me with her precious thoughts. Her descriptions of being re-united with her Grandparents triggered feelings in me of how emotional I felt missing my own parents during lockdowns and how much my children missed them. I asked for supervision and it helped talking it through and helped me to see that these interviews are difficult but they feel difficult because young people are opening up to me and this is what it is all about.

02/02/22

Whilst coding today it feels important to write in here about codes that initially felt like they might become a theme but then didn't. I explored the idea of COVID-19 being linked to other things that were happening in the media at a similar time for example, Black lives matter and Prince Philip dying. This was the older 3 participants who talked about these concepts (I wondered if they were more likely to watch the news). I explored the latent code of media links with COVID-19 and how the other events became linked with concepts such as change, fear and death (e.g the murder of George Floyd). The other code I initially thought would become a theme was 'fear' as all participants spoke of feeling scared. Exploring the codes more led me to realise that 'fear' was not a stand alone theme with a clear boundary as it was evident across many code clusters. It made more sense for it to be part of 'relationship with self' and 'following the rules' as the latent code of fear was evident in the idea of people spreading COVID by not following rules and it is these people who represent fear, not just COVID itself.

25/04/22

I was interested to read the draft terms of reference for the government's COVID-19 inquiry which were published on 15 March 2022. They made no specific mention of CYP other than a single reference to "restrictions on attendance at places of education." Considering the timeline of events and the uncertainty CYP would have felt with many U-turns made by the government and research that I had read regarding the impact of school closure for CYP and their families, I felt surprised that there would not be a specific part of the inquiry into this. Personally, I remember the announcement being made on 4th January 2021, when my children had been back to primary school for one day that schools would be closed again. I remember how difficult this was for me and how difficult it was having to explain it them again. By this time home schooling felt exhausting whilst trying to work and the children missed school and their friends. I remember wondering at this point if the government knew how hard it was for CYP and their families.

Appendix 15. Timeline for research

