

# Out of Sight?



## Vulnerable Young People: COVID-19 Response

April 2020

**NYA**  
National Youth Agency

This report highlights the scale and prevalence of young people's needs that are amplified by the pandemic. It draws on the latest data and vulnerability framework by the Office of the Children's Commissioner for England, with valuable insights from partners and young people from across the youth sector. Our thanks in particular to the Centre for Youth Impact, Young Minds, NCS Trust and the NYA youth work experts group convened in response to COVID-19, and for the continued support from colleagues at Public Health England, National Police Chiefs' Council, Local Government Association and Association of Directors of Children's Services.

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# Foreword

There is quite rightly a focus on older, more vulnerable people at health risk during the COVID-19 pandemic. However, unless we rally to assist young people through the crisis and support youth work as an essential service, the long-term damage will be unimaginable.

Our commitment as a nation must be young people to be safe and secure, and treated fairly. At a time of crisis and great uncertainty, we need to support young people now and to be confident in their future. All too often their needs are unseen and their voices unheard. Despite the valiant efforts by youth workers and youth services to innovate and adapt to the crisis, as a whole they are reaching only one-third of the young people they would normally support and just 5% of vulnerable young people eligible are currently attending school.

Youth work provides a safe space for young people to go to, things to do and someone to talk to who knows what is needed. This has been all but lost in many places and with the threat that one in five of youth clubs and services will not re-open. Too many qualified youth workers are being furloughed by youth charities or redeployed to other jobs from local authority youth services, and there are trusted adult volunteers who would normally be helping youth clubs and local groups which are closed. Youth services must be enabled, empowered and up-skilled to do more, not less, to meet the immediate needs of vulnerable young people and for sustained support as we emerge from the crisis.



Leigh Middleton  
CEO, National Youth Agency

Over two million children in England are living with a vulnerable family background and over half are at tricky stages in their adolescent lives. Many more have had their lives turned upside down by COVID-19 and are facing unprecedented challenges. Teenagers with poor mental health, living in cramped and overcrowded homes, without school and much of the other support normally in place can be isolated and at risk. That's why it's so important that youth workers are mobilised to reach out to vulnerable young people to provide support and an essential life line during these turbulent times.

Anne Longfield  
Children's Commissioner for England

During such unprecedented times for children and young people, many of whom are, at best unsettled, and at worst, being exposed to serious Adverse Childhood Experiences, it is vital that we take a child-centred approach and not one of unnecessarily criminalising young people who may also be struggling themselves. We want those young people who have been exposed to crimes, such as domestic abuse or have been exploited on-line, to have the trust and confidence in the police to talk to us whether directly or through third parties such as youth workers. We also want them to have the best possible chance of a productive, happy future.

DCC Jo Shiner  
National Police Chiefs' Council lead for children and young people



# Executive Summary

1. There are over **one million** young people with known needs that have been amplified by the pandemic and an estimated **two million** young people with emerging needs triggered or caused by COVID-19, and many more with hidden or unforeseen consequences from the pandemic.
2. There are up to 360,000 young people from vulnerable families who receive formal support. Yet only 5% of vulnerable children (29,000) known to be at risk by social services were in school before Easter. An additional 411,000 have an unknown or unclear level of support.
3. Of particular concern are over 448,000 young people from vulnerable families who are unknown to services, but many of whom are likely to be known by youth workers.
4. One million young people (8–19) have self-reported mental health issues. The youth suicide rate is already high, self-harm further normalised and the number of young people at risk of being exploited, threatened or abused through the pandemic will increase.
5. Approximately 700,000 young people (8–19) are persistently absent from school and not in education, employment or training.
6. Over a million young people face risks from any of the so-called 'toxic trio' of living in households with addiction, poor mental health and domestic abuse.
7. Self-isolation and social distancing are often not possible for many families who live in a overcrowded or shared bedroom accommodation and for homeless young people who are no longer able to 'sofa surf' at others' homes. Moreover there are 83,000 young people living in temporary accommodation while 380,000 are homeless or at risk of homelessness.
8. Evidence suggests children and families are not accessing medical advice and young people are at home without a safe space for trusted or confidential advice on subjects such as sexual health or unexpected pregnancies.
9. Young people are now in potentially unsafe environments, vulnerable to gang-related activity or exploitation and non-compliance of social distancing. The challenges for young people are likely to increase from the prolonged lockdown and the potential burst of activity by young people as we emerge from lockdown in stages by sector and age-groups.
10. Ultimately, as the next generation, young people will have to pay for both the economic and social costs of this crisis, facing its legacy of increased mental health, financial and employment concerns. As a nation we need a clear commitment for young people to be safe and secure, treated fairly, and confident in their future.

## Recommendations

- a. Youth services are a vital life-line to vulnerable young people. Youth work must be classified as an essential key service.
- b. NYA is calling for government guidance and clear plan to deploy youth workers and trusted adult volunteers in support of vulnerable young people, including wrap around support and activities in schools, detached/ outreach and digitised youth work.
- c. This requires significant investment in training and up-skilling in response to COVID-19, including safeguarding, trauma, bereavement and mental health.
- d. Young people have been separated from the services they had previously attended, as well as the social networks they had through school, youth clubs and other community groups. We must seek out and listen to young people's concerns, insights and challenges, with their voices heard and included in decision-making. A clear exit strategy from lockdown is needed for young people, more than simply schools being open.



## For many vulnerable young people, youth services provide a life-line

There are over **one million**<sup>1</sup> young people with known needs that have been amplified by the pandemic and an estimated **two million**<sup>2</sup> young people with emerging needs triggered or caused by COVID-19, and many more with hidden or unforeseen consequences from the pandemic.

This report gives a particular focus on supporting and safeguarding vulnerable young people, particularly 8–19 year olds, through adolescence and key stages of transitioning to adulthood:

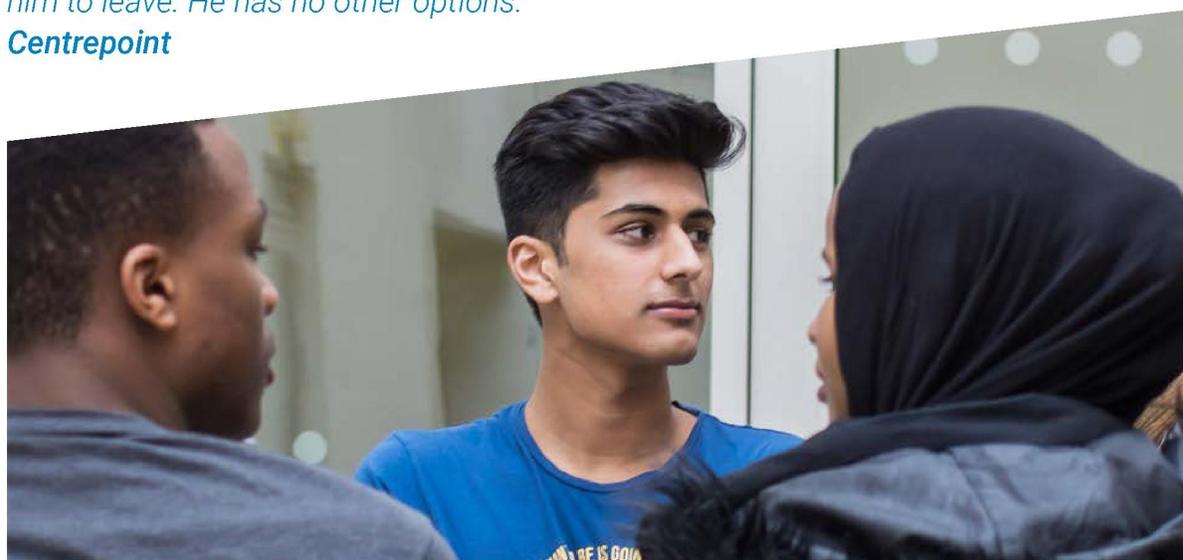
- Young people with 'known' vulnerabilities (amplified by COVID-19) who meet the statutory threshold
- Young people with 'at risk' vulnerabilities (exacerbated by COVID-19) who do not meet the statutory threshold
- Young people with 'emerging' vulnerabilities (caused or triggered by COVID-19)

There are also urgent concerns for young people as we come out of lockdown, such as the impact of gangs and county lines, exploitation and 'risky behaviours', and the need for effective engagement in public health education through youth work to prevent problems from escalating. There is a vital need to support the most vulnerable young people now, a need that will only escalate to include a larger number of young people as we head towards summer, with few places for young people to go to or things for them to do outside of their immediate family.

Youth work provides 'somewhere to go, something to do and someone to talk to (who knows what is needed)'. However, with youth centres and projects closed, many youth workers have also been redeployed or furloughed. Trusted adult volunteers normally supportive of youth work are also self-isolating or volunteering for wider community services during the pandemic. This is compounded by the anxiety that is being brought by COVID-19.

*"I had a boy who was staying with his aunt and uncle, but because his aunt was high risk they had to ask him to leave. He has no other options."*

**Centrepoint**



1 1.24 million children (8–17) living with a 'vulnerable family background'  
<https://www.childrenscommissioner.gov.uk/publication/childhood-vulnerability-in-england-2019/>

2 Additional young people including aged 18-19; see page 6, emerging vulnerabilities

## Overview

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This report identifies the nature of vulnerabilities and the scale of need of young people that have been amplified or caused by the COVID-19 pandemic. The report therefore includes young people known to statutory and formal services as well as those with emerging needs or who are at crisis point in order to inform a needs analysis, gaps in provision, advice and guidance, and investment. The volume, nature, and frequency of calls to targeted help lines, as well as insights from young people and youth workers, will be updated to ensure real-life experience and changes are tracked. Further research will look to exacerbated vulnerabilities across community groups in disadvantaged areas, including rural and family poverty.

Our age range for these purposes is 8–19 years old (or 11–18 where data is categorised in terms of secondary school age) as key stages of adolescent behaviour and vulnerabilities. The youth work response will also take into account young people in transition to adulthood at later stages, such as those aged 19 or over who are active in peer groups with young people under the age of 18.

### a) 'Known' vulnerabilities amplified by COVID-19

Only 5% of vulnerable children (29,000) known to be at risk by social services were in school before Easter<sup>3</sup>. With the emergency measures and so few vulnerable young people currently in school despite their eligibility, there is reduced or no contact during the crisis between already stretched professionals (e.g. teachers, social workers, youth workers) and vulnerable young people to identify or help with escalating needs as a direct result of COVID-19.

Government guidance encourages school attendance in the case of young people who have social workers, education and health care plans (EHC), as well as those who have been assessed as 'otherwise vulnerable'. The guidance states that "this might include children on the edge of care, in alternative provision or young carers, or others, at the education provider and/or local authority's discretion"<sup>4</sup>. There are up to 360,000<sup>5</sup> young people from vulnerable families who receive formal support and an additional 411,000<sup>6</sup> receive unclear support but who are likely to be known to teachers and youth workers.

Subject to appropriate risk assessments and training, youth workers should be working with young people alongside schools, police, and local authority resilience hubs. Active youth services and youth workers should be identifying and providing support to local young people who are vulnerable and at risk. For example, youth workers could provide additional capacity in schools for activities to engage and support young people, including after-school activities and outreach in community settings.

### b) 'At risk' vulnerabilities exacerbated by COVID-19

There are some young people that may get overlooked who would otherwise be covered by statutory provision. This includes excluded or not in education, employment, or training (NEET) children not in (or choosing not to go to) school; young people and families 'at risk' or on the edge of care; the homeless; those that require CAMHS; and young people vulnerable to gang-related activity or exploitation. Of particular concern are over 448,000 young people from vulnerable families who are unknown to services<sup>7</sup>, but many of whom are likely to be known by youth workers. Another significant worry is where the social isolation measures might escalate concerns for young people, such as children of addicts, physical and emotional abuse and exploitation, and risks of self-harm, loneliness and safeguarding. Youth work is an essential part of any public health approach to prevention and early intervention, including in the issues of violence, exploitation, and trauma.

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*"In the conditions created by lockdown, it is hugely concerning that young people may be trapped in dangerous domestic situations with violent, abusive or coercive family members or partners."*

**Brook**

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<sup>3</sup> 723,000 children who were known to children's social services in 2019 (Source: Department for Education)

<sup>4</sup> <https://www.gov.uk/government/publications/coronavirus-covid-19-guidance-on-vulnerable-children-and-young-people/coronavirus-covid-19-guidance-on-vulnerable-children-and-young-people>

<sup>5</sup> 214,000 receive statutory support (Children in Need; Child Protection Plan; Looked After Children) and 146,000 receive other formal support (Troubled Families) - Living in a vulnerable family background: (8–17) pro-rata on population share <https://www.childrenscommissioner.gov.uk/publication/childhood-vulnerability-in-england-2019/>

<sup>6</sup> Living in a vulnerable family background: (8–17) pro-rata on population share <https://www.childrenscommissioner.gov.uk/publication/childhood-vulnerability-in-england-2019/>

<sup>7</sup> *ibid*

<sup>8</sup> 1,062,475 8–19 year olds; source – prevalence data NHS England MH survey (2017), adjusted

<sup>9</sup> Coronavirus: Impact on Young People With Mental Health Crisis (2020); Young Minds survey 2,111 (13–25) [https://youngminds.org.uk/media/3708/coronavirus-report\\_march2020.pdf](https://youngminds.org.uk/media/3708/coronavirus-report_march2020.pdf)

One million young people (8–19) have self-reported mental health issues<sup>8</sup>. A Young Minds survey<sup>9</sup> of young people with existing mental health needs found 84% reported worse mental health following school closures, while 26% are no longer able to access mental health support. When asked 'what support would be most useful?', face-to-face and digital support were the most common responses, above self-help techniques or guidance.

The youth suicide rate is already high, and the number of young people at risk of being exploited, threatened, abused, or of self-harming through the pandemic will increase. Moreover, young people who attend specialist LGBT+ groups, young carers, mental health support, violent crime reduction activity, and many more are now also at significant risk, requiring the support of skilled and qualified youth workers.

Detached and outreach youth work should be encouraged to engage young people in the community. The partial opening of youth projects for outreach and drop-in or small group sessions in line with social distancing measures should also be considered, in particular when young people are not at school and a non-formal setting is more appropriate. Within this approach, there are challenges in regard to the suitability of digital alternative services (especially for those under the age of 13). Detached youth work remains subject to risk assessments, PPE provision and insurance for the youth workers.

### c) 'Emerging' vulnerabilities caused or triggered by COVID-19

Self-isolation and social distancing are often not possible for many families who live in a single or shared bedroom accommodation with shared kitchen and toilet facilities, causing overcrowding and inadequate outside space<sup>10</sup>; and for homeless young people who are no longer able to 'sofa surf' at others' homes.

There is increased anxiety about household harmony, as many young people are not abiding by the emergency measures<sup>11</sup>. Whilst breaches are still small, a third of fines go to those aged 18–24. In addition, we do not know

how many young people under the age of 18 (not subject to fines) are a public health risk. Police are adopting a child-centred approach of Engage, Explain, Encourage and Enforce as a final resort to give young people the best possible chance to make the right choices, so that they or their parents/carers are not criminalised.

Further evidence suggests children and families are not accessing medical advice<sup>12</sup>. As we approach summer with extended emergency measures, more young people will engage in 'risky behaviour' or relationships without a safe space for trusted or confidential advice on subjects such as sexual health or unexpected pregnancies.

The challenges for young people are likely to increase as we head towards and through the summer, as will the need for effective engagement in public health education through youth work. Issues will also surface from the prolonged lockdown, such as strains on young people and on the system/capacity of services to cope, the matter of summer activities when schools are closed, limited community activities, a lack of events/festivals/holidays, and a potential burst of activity when young people are 'released' from lockdown.

The closure of youth projects and drop-in sessions, as well as the lack of access to one-to-one or group work support, is having a devastating and profound impact for an estimated two million<sup>13</sup> young people who may need a safe social space for early help and prevention, or who may require critical support during the crisis. We also need an effective exit strategy for young people in regard to the emergency measures. Additional training will be needed to up-skill youth workers and related professionals in order to meet vulnerabilities as a result of the pandemic (e.g. trauma-related vulnerabilities, bereavement, escalating mental illness) and hidden vulnerabilities revealed in its immediate aftermath<sup>14</sup>.

<sup>10</sup> Shelter, Self-Isolation? Try it as a Homeless Family Living in One Room (Blog, 2020) <https://blog.shelter.org.uk/2020/03/self-isolation-try-it-as-a-homeless-family-living-in-one-room/>

<sup>11</sup> Young Minds Parent Helpline, calls from parents (March–April 2020)

<sup>12</sup> Royal College of Paediatrics and Children's Health will undertake data collection from April 2020

<sup>13</sup> 1.9 million is an illustrative figure drawn from a review of reports including: 350,000 (8-19) who self-report Mental Health problems with no formal support; 450,000 in gangs/groups of risky behaviour (6% of 10-19 population, based on Home Office Offending, Crime & Justice Survey 2004); 565,000 (8-17) SEND with no EHC plan; 540,000 (8-19) pro-rated without adequate access to a device or connectivity at home. There will be some overlap of young people with multiple needs and who have vulnerable family backgrounds; this makes it difficult to assess from formal data sources, but with the escalation of mental health problems in particular, as well as the unknown impact of COVID-19 on other groups, it is reasonable to project the scale of need for a youth work response at this level.

<sup>14</sup> The unknown impact of COVID-19 includes 900,000 (8-19) pro-rated lonely young people; access to specialist support groups for LGBTQ+ young people (183,500 self identify at 15-19); young people made homeless due to the pandemic not able to 'sofa-surf' with family or friends; increases in racism and xenophobia linked to accusations of causing COVID-19; increases in STIs and unexpected pregnancies with decreased access to sexual health/services, including coercion and exploitative relationships.

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*“The family are experiencing a range of problems with both parents currently out of work and the children, with autism, have been struggling as they are out of sync with their routines.”*

**OnSide Youth Zone**

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## Universal impact on young people

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Many young people lack a ‘safe’ space, with privacy often compromised whilst in their home and disruptions to existing signposting and referrals to services. Others have been ‘separated’ from services that they had previously attended, as well as the social networks they had through school, youth clubs, and other community groups.

This is especially relevant for young people ‘in transition’ between primary and secondary schools, between GCSEs and A-levels, or into further and higher education. It is also significant to their concerns over future employment prospects. This is compounded by a lack of guidance aimed at and for young people, wariness and confusion about where to go for trusted information, and a digital divide between those with access to the internet (and data) and those without.

Ultimately, as the next generation, young people will have to pay for both the economic and social costs of this crisis, facing its legacy of increased mental health, financial, and employment concerns.

Therefore, young people need to be treated fairly and equally, with their voices heard and included in decision-making. Without youth clubs and youth workers, far too many young people go unseen and unheard. Through the power of peer education and volunteering/social action, young people can be engaged to become ‘part of the solution’ during the pandemic and its aftermath.

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*“Help line calls have focussed on children’s anxiety increasing due to what they are hearing on the news, worrying about family members health, or obsessive compulsive symptoms increasing due to government guidance.”*

**Young Minds**



# Profile of young people's vulnerabilities



## 1. 'Increased mental health problems'

Over a million young people have self-reported mental health issues. There is a spike in concerns raised on Help Lines, with 84% reporting worse mental health following school closures and 26% being no longer able to access mental health support (Young Minds survey).



## 2. 'Missing from education'

Approximately 700,000 young people are persistently absent from school and not in education, employment, or training (NEETs). With schools only partially open and youth centres closed, as few as 5% of young people are currently engaged in school and have limited or no access to youth work.



## 3. 'At risk, at home'

Over a million<sup>15</sup> young people are at risk from any of the so-called 'toxic trio' of addiction, mental health, and domestic abuse, with some facing multiple risks. Despite this, child protection referrals have plummeted by 50% in some areas. A survey of providers by Women's Aid found that two-thirds are concerned there will be an increase in demand once lockdown measures are lifted.



## 4. 'Digital divide'

Approximately one million<sup>16</sup> children and young people, as well as their families, still do not have adequate access to a device or connectivity at home; and where there are safeguarding concerns for suitability of digital alternative services (especially to those under the age of 13). The government has announced a package of support for disadvantaged children. However, this package is only for disadvantaged secondary school pupils who receive social work support and care leavers.



## 5. 'Risky behaviours'

Young people are now in potentially unsafe environments. As well as the reported increase in isolation and loneliness experienced in young people, there are also emerging issues, such as sexual health/relationships, vulnerability to gang-related activity or exploitation, and non-compliance of social distancing under lengthy emergency measures. Evidence suggests that children and families are not accessing medical advice.



## 6. 'Without a home'

Many families under self-isolation are living in a single bedroom or shared accommodation with inadequate space. Moreover, 83,000 young people are living in temporary accommodation or are sofa surfing, while 380,000 are homeless or at risk of homelessness. Fears have also been raised over the impact of moving foster care placements and the closure of children's homes on vulnerable young people.



## 7. 'Self-harm and suicide'

The latest figures have shown a steep rise to 188 suicides recorded for 10–19 year olds (2018)<sup>17</sup>; with a marked increase around the time of the economic downturn (2008–10). Thus, there are fears for vulnerable young people in regard to COVID-19. Research shows that bereavement, abuse, neglect, self-harm, and mental ill-health are common risk factors for suicide among young people. Suicide-related internet use was found in 26% of deaths in those under the age of 20. Self-harm has become further normalised as a way to cope with emotional distress, and as an indicator of an increase in future suicides.

<sup>15</sup> 1.16m young people (8-17) are in a household affected by any of the 'toxic trio' issues - 'Estimating the prevalence of the toxic trio' Vulnerability Report Children's Commissioner (2018). Pro-rated based on population we estimate young people (8-19) living in households with an adult suffering severe mental health problems (1,124m); with domestic abuse (480,859); whose parents use substances problematically (294,720)

<sup>16</sup> Nominet: Digital Access for All (2019)

<sup>17</sup> ONS statistics (2019)

## The scale of needs

The tables below provide data sources for the scale and prevalence of young people's vulnerabilities through the pandemic [Table One], and youth work practice [Table Two].

**Table One: prevalence data**

Vulnerability	Prevalence/ Caseload data	Data that CCO can provide	Source	Age range of original estimate	Estimate available in source	Time period of estimate	Estimated number of 8-19 yr olds (based on mid-2018 population estimates)	Assumptions in 8-19 yr old estimate
<b>Existing poor mental health</b>	Prevalence data	NHS England estimates of children with self-report MH issues	NHS England MH survey	11-16	9.5% (5-10) 14.4% (11-16 yr olds) 16.9% (17-19)	2017	1062475	Prevalence assumed to be 9.5% for 8-10 yr olds
	Prevalence data	CCO estimates of children living in households with an adult suffering severe mental health problems	CCO Vulnerability report: Estimating the prevalence of the 'toxic trio'	6-15	14.50%	2018	1124589	Prevalence for 8-19 yr olds assumed to be the same for 6-15 year olds
	Caseload data	CYP in contact with CAMHS during the year	NHS England MH bulletin	6-19	691,188	2018/19	624438	8 to 10 year olds assumed to be distributed as per population amongst those in contact with CAMHS
	Caseload data	Children with mental health identified as a factor at CIN assessment	CCO analysis of DfE CIN census 2018/19	8-19 (age at 31st march 2019)	93357	2018/19	93357	Directly calculated from source data
<b>Domestic abuse</b>	Prevalence data	CCO estimates of children living in households with domestic abuse	CCO Vulnerability report: Estimating the prevalence of the 'toxic trio'	6-15	6.20%	2018	480859	Prevalence for 8-19 yr olds assumed to be the same for 6-15 year olds
	Caseload data	CIN where Domestic Abuse identified as a factor at assessment	CCO analysis of DfE CIN census 2018/19	8-19 (age at 31st March 2019)	80611	2018/19	80611	Directly calculated from source data

Vulnerability	Prevalence/ Caseload data	Data that CCO can provide	Source	Age range of original estimate	Estimate available in source	Time period of estimate	Estimated number of 8-19 yr olds (based on mid-2018 population estimates)	Assumptions in 8-19 yr old estimate
<b>Poverty</b>	Prevalence data	Numbers of children in poverty	Households below average income	5-19 (based on age of youngest child in household)	23% (17-19 yr olds) 25% (11-16 yr olds) 27% (5-10 yr olds)	2018/19	1942532	England rate assumed to be the same as UK Rate amongst 8-10 year olds assumed to be same as rate for 5-10 yr olds
	Prevalence data	Numbers of children in severe low income and material deprivation	Households below average income	5-19 (based on age of youngest child in household)	3% (11-19 yr olds) 4% (5-10 yr olds)	2018/19	246524	England rate assumed to be the same as UK Rate amongst 8-10 year olds assumed to be same as rate for 5-10 yr olds
	Prevalence data	Numbers of children in families falling behind with mortgage payments	CCO bleak houses report	0-17	2.70%	2017/18	209406	Rate amongst 8-19 yr olds assumed to be the same as rate for 0-17 yr olds
	Caseload data	Citizens Advice sessions from parents	Citizens advice bureau	0-17	30,600 households with children having advice about council tax arrears 3,170 mortgage or secured loan	Q1 2019/20	N/A	Note: count is of households not children and families can have multiple issues so figures cannot be added
	Caseload data	Number of children in temporary accommodation	MHCLG: homelessness statistics	0-17	127890	Sep-19	82971	Rate of 0-17 year olds assumed to be the same as rate for 8-19 yr olds
	Caseload data	Children eligible and claiming free school meals		8-19	832484	Jan-19	832484	Directly calculated from source data

Vulnerability	Prevalence/ Caseload data	Data that CCO can provide	Source	Age range of original estimate	Estimate available in source	Time period of estimate	Estimated number of 8-19 yr olds (based on mid-2018 population estimates)	Assumptions in 8-19 yr old estimate
<b>Food poverty</b>	Prevalence data	CCO estimates of children experiencing food insecurity	CCO estimates based on Brazier (2017)	0-14	1959431	2017	1498014	Rate for 0-14 yr olds assumed to be the same as rate for 8-19 yr olds
	Caseload data	Children eligible and claiming free school meals		8-19	832484	Jan-19		Directly calculated from source data
<b>Young carers</b>	Prevalence data	Number of young carers	Family Resources survey	5-17	102000	2017/18	91903	Rate for 5-17 yr olds assumed to be the same as for 8-19 yr olds
	Caseload data	Number of young carers supported by LAs	CCO young carers report	5-17	33500	2016	30184	Rate for 5-17 yr olds assumed to be the same as for 8-19 yr olds
<b>Addiction</b>	Prevalence data	CCO estimates of children whose parents use substances problematically	CCO vulnerability report	6-15	3.80%	2017/18	294720	Rate for 6-15 yr olds assumed to be the same as for 8-19 yr olds
	Caseload data	Children whose parents are in substance misuse treatment	PHE: Adult treatment statistics	0-17	49680	2018/19	32231	Rate for 0-17 yr olds assumed to be the same as for 8-19yr olds
<b>Housing / homelessness</b>	Prevalence data	CCO estimates of children at financial risk of homeless; approaching LA for homelessness support; or hidden homeless	CCO bleak houses report	0-17	585000 homeless or at risk of homelessness	2016/17	379530	Rate for 0-17 yr olds assumed to be the same as for 8-19yr olds
	Caseload data	Children living in temporary accommodation	MHCLG: homelessness statistics	0-17	127890	Sep-19	82971	Rate of 0-17 year olds assumed to be the same as rate for 8-19 yr olds

Vulnerability	Prevalence/ Caseload data	Data that CCO can provide	Source	Age range of original estimate	Estimate available in source	Time period of estimate	Estimated number of 8-19 yr olds (based on mid-2018 population estimates)	Assumptions in 8-19 yr old estimate
<b>CCE/youth violence</b>	Prevalence data	CCO estimates of children in gangs / on edge of gangs	CCO: Keeping kids safe report	10-17	60000 identify as a gang member or know a gang member who is a relative	Mar-18	N/A	
	Caseload data	Arrests of 10-17 year olds for possession of weapons/ drugs/violence offences	Home Office: Arrests statistics 2018/19	10-17	Weapons - 3884	2018/19	N/A	Note: number is number of arrests rather than number of children so possible for children to have multiple arrests in a year
	Caseload data				Drugs - 6540		N/A	
	Caseload data				Violence - 15933		N/A	
<b>Children not meeting threshold for social care</b>	Caseload data	Children with a CIN referral during the year but no CIN plan	CCO analysis of Children in Need Census 2018/19		106372	8-19 (age at 31st March)	106372	Directly calculated from source data
<b>Children with SEND or physical health issues</b>	Prevalence	Children with a limiting longstanding illness	Health survey for England 2018		8-10 years 7% 11-12 years 11% 13-15 years 11%	10-15	777614	Rate for 16- 19 yr olds assumed to be the same as 13-15 yr olds
	Caseload data	Children with identified SEN	DfE SEN statistics 2018/19		826829	8-19	826829	Directly calculated from source data
<b>Care leavers/older children in care</b>	Caseload data	Former relevant/ qualifying children	DfE Looked After Children statistics 2018/19	17-18	11260	2018/19	11260	Directly calculated from source data
<b>Children missing from education</b>	Caseload data	Children excluded	DfE exclusion statistics 2017/18		7397	2017/18	7397	Directly calculated from source data
	Caseload data	Children persistently absent	DfE Absence statistics 2018/19	National curriculum yr 4 and above	573624	2018/19	573624	Directly calculated from source data
	Caseload data	NEETs	NEET statistics annual brief 2019	16-18	133000	Dec 2019	133000	Directly calculated from source data
	Caseload data	Children in PRUs/AP	Schools pupils and their characteristics January 2019	8-19	40253	Jan 2019	40253	Directly calculated from source data

**Table Two: youth work practice**

Vulnerability	Needed youth work practice response
<p><b>Poor mental health</b></p>	<p>Known: ensure contact is maintained with service if connected, or provide a referral and emergency 'in' to support crisis teams at CAMHS with identification and connectivity.</p>
	<p>Emerging: Identification of and dynamic risk assessment to refer young people into acute or emerging MH services, provide low level wellbeing advice and guidance through connectivity, mindfulness and emotional education support.</p>
<p><b>Domestic abuse</b></p>	<p>Identification of those at additional risk, detached service likely to pick up those avoiding home as a place of non-safety. Provide safety tips and a point of emergency contact.</p>
<p><b>Poverty</b></p>	<p>Deprivation: distribution of resources to support families (gas and electric keys etc)</p>
<p><b>Food poverty</b></p>	<p>Food poverty: identification of those who would not be FSM but are experiencing food poverty due to employment situation caused by COVID.</p>
<p><b>Young carers</b></p>	<p>Known: maintain support networks that were pre-existing via phone and digital. Early identification of risk factor increase, and early intervention to build new protective factors through relationships.</p>
	<p>New: create support networks and link into counselling services for those affected due to Covid or new health concerns.</p>
<p><b>Housing/homelessness</b></p>	<p>Impact on care leavers, young people in housing poverty or becoming homeless during this crisis and not being able to access services to get housing – youth workers can be conduit and support by linking into services and doing initial assessment/referral work.</p> <p>Youth workers could work directly with housing associations to provide support to young people/high risk young people to maintain tenancy and access support.</p>
<p><b>Addiction</b></p>	<p>Moving to an outreach model of services for needle exchange, advice, guidance, harm reduction. Potential increase in this due to mental health, boredom and home stress factors.</p>
<p><b>Substance misuse</b></p>	<p>Experimentation with new or recreational substance misuse and no harm reduction mechanisms in place or preventative informal education. This further risks accidental overdose and a diversification of substance misuse due to additional pressures/access issues. e.g., move from smoking cannabis to edibles (and emerging drug patterns such as Lean). With an increase in substance misuse due to boredom and an increase in poor mental health, up-skilled outreach and digital youth workers are needed to for young people on social media platforms and in spaces young people are operating.</p>
<p><b>Exploitation</b></p> <p><b>Child criminal exploitation</b></p> <p><b>Child sexual exploitation</b></p>	<p>Young people at risk and situations identified through detached and digital youth work, existing relationships with trusted adults (youth workers) to provide support, informal education and provide protective behaviours support. Youth workers to refer on to MASH and highlight risk to police when CCE – potential increase of time spent in digital spaces through lockdown will increase risk. This includes digital 'money mules', bitcoin fraud and hacking; as well as sharing of sexualised images.</p>
<p><b>Youth violence</b></p>	<p>High risk young people and situations identified through detached and allowance of ongoing relationships in safe public places to minimise risk to young people from elders/gang masters/organised criminals. Work with police, Social Care/VRU/Housing to co-ordinate responses and minimise pressure on other services.</p>

<b>Racism/xenophobia</b>	There are reported increases in racism and xenophobia for those labelled as 'Asian' origin; and social media posts showing evictions of African people in China linked to accusations of causing the virus. These are beginning to circulate in the UK and will raise community tensions. Provide emotional support and referrals through existing trusted relationships. Connecting into wider support mechanisms housing/police where needed.
<b>Sexuality</b>	Provide emotional support and referrals– young people who may experience prejudice or bullying at home as a result of this.
<b>Gender identity</b>	Provide emotional support and referrals to specialist youth work providers – young people who may experience prejudice or bullying at home as a result of this.
<b>Sexual health/ reproductive rights</b>	Young people may find out they are pregnant / have STIs whilst at on lockdown. Decreased access to sexual health /medical/pharmaceutical services and appropriate information and support to signpost. Provide emotional support and trusted relationships (existing). Rapid referral to support (medical and psychosocial).
<b>Lockdown non-compliance</b>	Identification of risk factors and hot spots, minimise disruption and pressure on emergency services by engaging with young people to share information and send home those that can be safely sent home/refer on. Youth workers to connect into Covid-Mutual Groups to work in higher risk areas where volunteers may not wish to engage.

As the national body for youth work in England (Professional, Statutory and Regulatory Body) NYA will publish a new curriculum for youth work, summer 2020, for qualifications and training, and contextual practice, advice and guidance.



# The role of youth work and youth services

Youth services are a vital life-line to vulnerable young people, joining in activities without stigma but able to access support, talk to a trusted adult or disclose a problem for help. Youth workers engage young people in non-formal education, out-of school activities, and information, advice and guidance; with targeted or specialist work for vulnerable young people including those at risk on the edge of care, gangs or poor mental health, for example.

However youth centres remain closed under emergency measures in response to COVID-19 and, for now at least, many areas have also ended outreach or street-based youth work. There are dire warnings that nationally one in five youth clubs will not re-open<sup>18</sup>, more in some regions<sup>19</sup>, and a threat hanging over non-statutory youth services should austerity measures return post-pandemic. Many youth clubs and services are rapidly adapting their work to go digital, with activities, groups and support moving online. Yet youth workers have largely been redeployed for wider community response to the pandemic, or have been furloughed. Trusted adult volunteers who might otherwise be supporting youth clubs and summer-activities can also be mobilised but will require training, including safeguarding, in response to vulnerabilities arising from COVID-19.

NYA is calling for clear guidance and up-skilling to deploy youth workers for schools-outreach and street-based youth work; and actions to close the digital divide (access to and use of technology). Greater clarity and guidance is needed to:

1. Confirm that youth workers are classified as 'essential key workers'; this also ensures insurers recognise their work and provide cover.
2. Provide support to the most vulnerable young people and work alongside other statutory services and local authority resilience hubs to meet the need of young people.
3. Encourage local engagement of youth worker professionals alongside schools. For example, activities in schools and outreach working with school colleagues in the community to safeguard young people.

4. Encourage detached youth work to take place in our parks and open spaces as an adjunct to policing to engage, educate and encourage young people to social distance.
5. Encourage digital youth work subject to risk assessments – employers and local authorities should provide youth workers with the tools to engage young people.
6. Recognise the importance of youth work and services to encourage training and up-skilling as services adapt their support for young people, including safeguarding.
7. Include young people in the evidence, decision-making and response to the challenges of COVID-19.

We are publishing this work in order to better identify vulnerable young people who need help both during the lockdown and once the crisis has passed. It further highlights the need for **a national census of youth services** – from statutory and voluntary providers – in order to level-up youth work provision in the aftermath of COVID-19 and the 'new normal' landscape of schools, social care and public health.

A new Ten Year Vision for youth work to be published by NYA in September 2020 will also support revised guidance on what is 'sufficient' youth work, newly framed in the context of COVID-19 as we emerge from the pandemic and its legacy for young people and youth services.

<sup>18</sup> The impact of COVID-19 on young people & the youth sector. UK Youth, April 2020

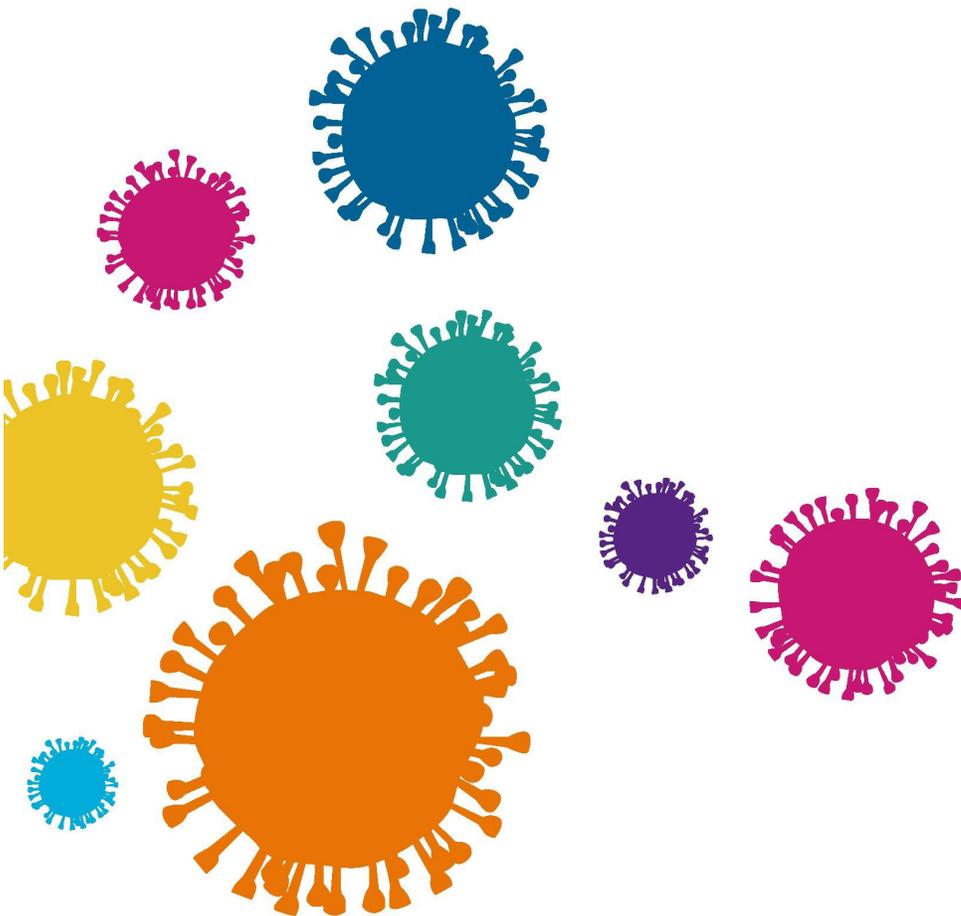
<sup>19</sup> Young Manchester survey: 49% of youth and play sector organisations at the risk of closure, April 2020

# Conclusion

This report draws from the latest data from the Children's Commissioner for England and builds on local area profiles of child vulnerability '[We Are All In This Together?](#)'<sup>20</sup> as well as desk research and a qualitative review of others' reports, to inform a response for youth services and youth work in support of vulnerable young people through the pandemic and in its aftermath.

Our recommendations are for a cross-departmental response from Government to recognise youth services as an essential key service, and to encourage local authorities, children's services and academy trusts to engage, deploy and up-skill youth workers in support of young people.

Further work will be carried out by NYA and in support of the Children's Commissioner and partner organisations including a profile of need for rural areas, family poverty, young adults (19-24), young people and policing, youth work and schools, and international insights in support of young people as we emerge from lockdown.



<sup>20</sup> Children's Commissioner for England, 'We are all in this together?' 25 April 2020

# Appendices

- a. [Generic guidance for youth work](#)
- b. [Detached youth work guidance](#)
- c. [Safeguarding online youth work](#)
- d. [Introduction to Detached Youth Work during COVID-19](#) – NYA Academy

# About National Youth Agency

NYA is the national body for youth work in England (Professional, Statutory and Regulatory Body), as the lead partner for Government, Local Government Association, national youth organisations and non-government bodies (teaching, policing, social care).

Contextualised advice and guidance is published and regularly updated in response to COVID-19 to support youth work - <https://youthworksupport.co.uk> (in partnership with The Mix and UK Youth)

[NYA Youth Covenant](#) is 'a promise from the nation' for all young people to be safe and secure in the modern world, and treated fairly; supporting young people in the present and ambitious for their future:

- Skilled and equipped to learn and earn
- Positive health and wellbeing
- Active members of their communities
- Happy and confident in their future.

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