



Department  
for Education

# **State of the Nation 2021: children and young people's wellbeing**

**Research report**

**February 2022**

**Department for Education**



Government  
Social Research

# Executive Summary

## Children and Young People's wellbeing

This report is for all those interested in continuing to raise the wellbeing of children and young people in England as we emerge from the COVID-19 pandemic. It aims to provide a shared evidence base for everyone - in government, services, schools & colleges, parents & families, communities, and employers - to reflect and build upon to deliver better wellbeing outcomes for all children and young people.

Supporting the wellbeing of children and young people has been a focus of Government policy for a number of years. The impact of the coronavirus (COVID-19) pandemic has further emphasised the importance of supporting our children and young people's wellbeing, which is why it remains a central part of the Department for Education's plans for recovery.

Over the past year, the pandemic has continued to impact the lives of children and young people as they have adjusted to living with ongoing uncertainty and changes in restrictions when required. As the pandemic has progressed, the focus has shifted beyond the immediate impacts and towards recovery and the future. Issues ranging from the Black Lives Matter movement, increased reports of sexual violence towards women, ongoing focus on the environment and climate change, and media reporting on the challenging economic situation and future employment prospects are among the most reported concerns for children and young people at this time (Children's Commissioner, 2021; The Children's Society, 2021).

This is the department's third state of the nation report, which brings together a range of evidence sources to build understanding of children and young people's wellbeing over the past year. This year's report takes a forward-looking approach, focusing on trends in mental health and wellbeing over the 2020/21 academic year, when a range of recovery-focused activity was in place across Government, which included the Department for Education's education recovery programme.

As in previous years, this report follows the structure of the Office for National Statistics' domains of wellbeing for children and young people<sup>1</sup>. To support our aim to take a forward-looking recovery-focused approach in this report, we have chosen to focus on the subset of domains that are most relevant to recovery from the impacts of the pandemic and wider control measures. Reports have highlighted the importance of the home environment for engagement in remote education (Institute for Fiscal Studies,

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<sup>1</sup>See: [Children's Well-being measures](#) and [Young people's well-being measures](#). Current set of ONS children's wellbeing domains: Personal wellbeing, Health, Our relationships, Education and skills, What we do, Where we live, Personal finance.

2020a; National Foundation for Educational Research, 2020; Sutton Trust, 2020), for learning in general (Lehrl et al., 2020; Tamis-LeMonda et al., 2019) and for mental health and wellbeing (e.g. DfE, 2021d). There was further strong evidence that some groups, in particular those from low socio-economic groups, were disproportionately affected by disruptions to in-school teaching and wider pandemic controls (DfE, 2021d; Institute for Fiscal Studies, 2020b; National Foundation for Educational Research, 2020). As a result, the 2020 State of the Nation gave significant focus to the 'where we live' and 'personal finance' domains. While home learning environment and finance are likely to have continued to be drivers of wellbeing outcomes in 2020/21, we have decided to focus on recovery in 2020/21 as children returned to in-school teaching, as these domains have been covered in greater depth in the previous State of the Nation report, and elsewhere. While we, therefore, do not include separate chapters for 'where we live' and 'personal finance', we indirectly deal with issues related to these two domains by presenting trends by subgroups, particularly by economic disadvantage.

For the first time, the report this year provides data on children and young people's views about wider society and the future with a separate chapter which focuses on children and young people's concerns about self, society, and the future.

The data presented in this report draws upon published information from a range of government, academic, voluntary, and private sector organisations across the 2020/21 academic year, and therefore reflects the experience of children and young people during that time. The period of drafting this report coincided with the emergence of a new variant of SARS-CoV-2 which brought subsequent disruptions, including to schools and the school workforce. It was not possible to include any data contemporaneous to the recent resurgence and ongoing disruption.

This report is about children and young people aged between 5 and 24 years old in England, though many of the indicators, for pragmatic reasons, relate to children and young people across Great Britain or the United Kingdom. In general, data reported is of two types – longer term trend data which includes pre-pandemic time points as well as data collected during the 20/21 academic year, or data collected solely within the 20/21 academic year.

As with previous years' reports, this is not an exhaustive review of all available information about children and young people's wellbeing during this period. Findings are based only on the indicators selected to represent the different areas of children and young people's lives. Much of the available data are about children and young people on average and as a whole, which may overlook the experiences of subgroups and those outside the average. Where possible, we include the experiences of different groups of children and young people, in particular by age, gender, economic disadvantage, special educational needs and/or disability (SEN/D), and ethnicity. Further, we seek to present the variation that exists in the data, such as the proportion of those with particularly poor

outcomes. There are further quantitative data sources and qualitative evidence which can also provide very useful insights into the experiences of children and young people across the pandemic, many of which have been drawn on in other evidence reviews<sup>2</sup>.

The report is intended to help government, children and young people's services, schools, parents, and anyone interested in children and young people's wellbeing to understand their experiences of the pandemic, the measures put in place to reduce the spread of the virus, and the broader effects on society in the period covered by the data. Much of the evidence presented here has already informed the department's approach to supporting children, young people and their families and teachers and schools. It will, alongside other evidence, continue to be used in developing this further.

## Data Sources, methods, and limitations

This report draws on published information from a range of government, academic, voluntary, and private sector organisations. Key sources of data in this report include:

- Pupil and Parent Panel (PPP) - Department for Education (DfE)
- Mental Health of Children and Young People (MHCYP) - NHS Digital
- The Good Childhood Report (GCR) - The Children's Society
- The Longitudinal Survey of Young People in England 2 (LSYPE2)
- The Big Ask/Big Answer- The Children's Commissioner
- Co-Space Study - University of Oxford

The methodologies underpinning the findings are varied, including robust randomly-sampled cohorts, weighted representative online panels, and non-representative opportunity samples of children and young people and their parents; further, data sources include annual snapshot surveys, as well as more regular panel surveys with the same sample throughout 2020/21. While sources have been selected to provide the most robust assessment available, there are clear limitations in what can be concluded about children and young people's experiences and wellbeing during the 20/21 academic year. Future analysis on data collected in this time and following the progress of children and young people in years to come, particularly those that include a pre-pandemic baseline, will provide stronger evidence.

See the 'Introduction and methods' section for more information on how the indicators and measures included in this report were selected and 'Annex A- Data Sources and Methods' for more information on the methods used in the individual data sources.

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<sup>2</sup> For example, but not limited to, [The Anna Freud National Centre for Children and Families, Public Health England COVID-19: mental health and wellbeing surveillance report;](#)

## Key findings

### Personal wellbeing

The data presented in this report suggests that children and young people's subjective wellbeing showed signs of recovery in 2021, following a small reduction in 2020. Data from the Children's Society provided evidence for a small reduction in average wellbeing in April – June 2020 for life satisfaction and happiness, following a period of stability (The Children's Society, 2019, 2020b, 2021); these scores appear to have recovered to pre-2020 levels by April – June 2021.

Analysis of data collected regularly across 2020 and 2021 supports the idea that children and young people's wellbeing had changed rapidly in response to external events, in particular pandemic conditions and associated restrictions. Evidence from the PPP (DfE, 2021c) throughout the academic year 2020/21 suggested that reductions in wellbeing occurred most clearly for both primary and secondary pupils in February 2021, when schools were closed to the majority of pupils. Wellbeing also appeared to rebound following improvements in pandemic conditions, suggesting that downward trends in wellbeing might be reversed following relaxation of restrictions.

Nonetheless, there was evidence of substantial variation in wellbeing during this time. Among secondary pupils, female respondents reported consistently lower wellbeing than males across all four measures used (happiness, anxiousness, life being worthwhile, and life satisfaction), and there was some evidence of a widening of the gender gap in wellbeing over the course of the year. Other groups which may be thought of as vulnerable, such as children and young people with SEN, those of an ethnic minority, or those eligible for Free School Meals (FSM), demonstrated more mixed patterns of wellbeing over the course of the year.

### Mental and Physical health

While there were signs of recovery in personal wellbeing in 2021, evidence for a recovery in measures of mental ill-health was less clear-cut. Data from both the MHCYP (NHS Digital, 2021a) and LSYPE2 (in this report) suggested that rates of probable mental health disorders among children and young people remained higher in 2021 than they were before the pandemic. Importantly, however, it is unclear from this data the extent to which higher rates of probable disorders are attributable to pandemic effects, or might reflect a continuation of general increases in mental health problems among children and young people which had been reported before the pandemic (Collishaw, 2015; NHS Digital, 2018). Forthcoming analysis of the natural experiment created by the pandemic within the DfE funded [Education for Wellbeing](#) programme of school-based trials will provide more robust analysis that can control for some of these factors.

Nonetheless, while rates of probable mental disorders remain at high levels relative to before the pandemic, data across 2020 and 2021 suggests that rates of possible/probable disorder peaked during periods of lockdown and reduced in the later spring and summer months of 2021, coinciding with a decrease in prevalence of the virus in the general population and lessening of restrictions (Co-Space, 2021), within-year trends which mirror those for wellbeing.

Particular groups of concern for poorer mental health outcomes were those with SEN, those eligible for FSM, and those with long-term physical health conditions (Co-Space, 2021; NHS Digital, 2021a). Rates of probable eating problems were particularly high among older (17- to 19- versus 11- to 16-year-olds) and female respondents. While around half of all children and young people reported that they were concerned about the effects that the pandemic had had on their mental health, this figure was higher for girls than boys.

Supporting the idea that children and young people's mental and physical health could have changed in response to their personal pandemic experience, respondents' subjective assessment of their coping during the pandemic, as well as parent-report measures of disruptions to family life, were associated with greater worry about their mental and physical health for the future (The Children's Society, 2021). Further, reductions in mental health as measured in the LSYPE2 were more pronounced for those who reported that Covid-19 had negatively impacted their lives.

Considering children and young people's physical health in 2021, there was evidence that physical health among children and young people had declined in recent years. Obesity rates increased substantially between 2019/20 and 2020/21 among both reception and Y6 age children, accelerating a trend which has continued for at least the previous 15 years (NHS Digital, 2021b). Children and young people most likely to be obese in 2020/21 were those in Year 6 compared to those at reception age, boys compared to girls (at Year 6 but not reception age), and Black and Asian children compared to white children (NHS Digital, 2021b).

## **Education and Skills**

Education is an aspect of life that has continued to be disrupted by the pandemic through the 2020/21 academic year. Reflecting this disruption, both school- and self-reported trends in attendance fluctuated in line with pandemic restrictions and prevalence of the virus.

While happiness with life at school measured in April – June 2021 remained consistent with previous years, on average (The Children's Society, 2021), a persistent minority of children and young people reported low scores in happiness with school, which represented the highest proportion of low scores among a list of ten specific aspects of

their lives that children were asked about. Among subgroups, other sources indicated that older respondents (9- to 17- versus 6- to 8-year-olds) were more likely to report unhappiness with their education (Children's Commissioner, 2021), and female respondents reported having a lower connection to school on average than boys (PPP, 2021).

Supporting a link between attendance and wellbeing, pupils with higher wellbeing ratings were more likely to have regularly attended school (DfE, 2021b); further analyses showed that this link remained when controlling for demographic factors such as gender, year group, free school meal eligibility, SEN-status, and ethnicity.

Pupils' wellbeing was also linked to their experiences at school: in October 2020, pupils with higher happiness ratings and lower anxiousness ratings found it easier to concentrate in class, were less concerned about catching-up on their learning and were happier to be back at school than those with lower happiness and higher anxiousness scores (DfE, 2021a).

## Relationships

Respondents indicated high happiness with their family relationships on average, which was consistent with results from previous years. Nonetheless, there was evidence for a small reduction in average happiness with friends between 2019 and 2020, before scores recovered in 2021 (The Children's Society, 2021), all measured between April and June in their respective year. Another source suggested that 9- to 17-year-olds were more likely than 6- to 8-year-olds to indicate that they were unhappy with their relationships with their family and friends (Children's Commissioner, 2021).

Evidence from regular surveys of secondary pupils through the 2020/21 academic year suggested that rates of loneliness were highest in February 2021, when schools were closed to the majority of pupils (DfE, 2021b). Feelings of loneliness also appear to have been greater among older respondents (17- to 22 versus 11- to 16-year-olds; NHS Digital, 2021a), and female respondents (compared to males). This gender difference was observed both when considering snapshot surveys in 2020 and 2021 (NHS Digital, 2021a) as well as responses across the 2020/21 academic year (DfE, 2021b).

Importantly, correlational evidence suggested a link between poorer social relationships, in particular loneliness, poorer family connectedness, and problems with family functioning, and mental health problems in children and young people (NHS Digital, 2021a).

Finally, bullying was more likely to be reported as being experienced by SEN than non-SEN pupils (at both primary and secondary age), trends which had been observed in previous years (DfE, 2019a). Those eligible for FSM were also more likely to report

having been bullied in 2021 (at primary age but not secondary age) as were white pupils compared to those of an ethnic minority (at secondary age but not primary age).

## **‘What we do’**

Rates of engagement in physical activity have remained relatively consistent in recent years, with the percentage of children and young people reported to have engaged in 60 or more minutes of physical activity per day at similar levels in 2020/21 to 2017/18, though slightly lower than in 2018/19 (Sport England, 2021). However, there was evidence for significant ongoing variation in physical activity levels, with 44.6% of 5-16 year olds reporting engaging in 60 or more minutes of physical activity per day, indicating over half do less than this recommended amount.

Subgroups of children and young people less likely to have been engaging in 60 or more minutes of physical activity per day in 2020/21 were secondary-age children and those in years 3-6 compared to infant children, and Black and Asian children compared to white and mixed ethnicity children (Sport England, 2021). A convergence of male and female activity rates between 2017/18 and 2020/21 appear to be better explained by a reduction in male activity levels over this time, rather than an increase in female activity rates.

There was also some evidence that rates of participation in extra-curricular activities in school were substantially lower in summer term 2021 compared to early 2018 (DfE, 2018, 2021c, 2021b), which may be indicative of pandemic disruptions to school extracurricular offers.

In August 2021, 41% of parents reported that their child seems happier when they have spent time outside (Natural England, 2021b). Further, 30% of parents reported a wish that their child could spend more time outside to support their mental health, while 27% of parents believed that their child was spending too much time indoors.

## **Self, Society, and the Future**

While children and young people’s happiness with the things they own, their appearance, and their future has remained stable in recent years, including during the pandemic, average happiness with one’s sense of choice in life had slightly reduced in April-June 2020, though had recovered by April-June 2021 (The Children’s Society, 2021).

In April-June 2021, a significant minority of children and young people were worried about having somewhere to live (25%), having enough money (33%), and finding a job (31%) in future (The Children’s Society, 2021). In July 2021, female respondents and those eligible for FSM were more likely than male respondents and those not eligible for FSM to be concerned about the impact of the pandemic on their job or career prospects (DfE, 2021b).

Thinking about wider society and its future, in April-June 2021 children and young people were most likely to be worried about the environment (40%) and the potential for new illnesses or pandemics (42%; The Children's Society, 2021). In another survey, older respondents were more likely to report being worried about a range of factors, including about a career, healthy environment and planet, and fair treatment (Children's Commissioner, 2021).

Those who reported coping less well during the pandemic, as well as those who reported experiencing more pandemic impacts on their family, were more likely to report being worried about a range of things related to the future for themselves and society, including finding a job, the environment, homelessness, and crime (The Children's Society, 2021).

## **General discussion**

Taken together, the results presented in this report suggest that children and young people's mental health and wellbeing had, on average, reduced during the pandemic, particularly during periods of school closures. Both wellbeing and mental health appeared responsive to the course of the pandemic, including perhaps pandemic restrictions, with suggestions that downward trends in wellbeing may have mostly reversed following relaxation of restrictions. Rates of probable mental health disorders among children and young people remain higher in 2021 than they were in 2017, though this may have been influenced by the timing of MHCYP data collection, which occurred during and shortly after the periods of lockdown restrictions in early 2021.

The data presented here also indicated potential pandemic impacts on other measures of health and wellbeing, including increased loneliness and poorer physical health as measured by obesity rates. Evidence was also found for a link between family connectedness, problems with family functioning, and mental health problems in children and young people, suggesting that disruptions in one domain could lead to poorer outcomes in another.

Among the subgroups included for analysis, older respondents and females were more likely to indicate poorer outcomes than younger respondents and males on a range of the outcomes across domains. Differences among other subgroups, including SEN, FSM, and ethnicity were inconsistent and differences in these groups appear instead to be related to more specific measures (See the 'Wellbeing trajectories vary for different subgroups' section for a more detailed breakdown of subgroup trends).

Importantly, any general and subgroup differences should be seen in the context of pre-pandemic trends to establish whether they reflect emerging differences or rather a continuation of persistent differences over time as, for example, have previously been shown for wellbeing differences by gender (e.g. Bradshaw & Keung, 2011; What Works Centre for Wellbeing, 2017) and age (e.g. DfE, 2019). Further research and analysis,

including the application of more appropriate techniques for tracking outcomes in the same populations over time, such those with longitudinal designs, are therefore required to understand whether any group differences have widened or narrowed, and the role that the pandemic may have played in this. Further, interpretation of the findings presented within this report should also be informed by each data source's methods and limitations, which have been set out in the main report and its annexes.

With ongoing pandemic uncertainties, it remains as important as ever to continue to monitor children and young people's mental health and wellbeing, both to build our understanding of pandemic recovery, and to understand whether there are certain groups at risk of ongoing poorer mental health and/or wellbeing. The further analysis of existing data and continuation of key studies such as MHCYP, the Study of Early Education and Development (SEED), LSYPE2, Understanding Society and the regular data collections in the PPP will be key to this.



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