

The Consortium on Practices of Wellbeing and Resilience in BAME families and communities

Children, Young People and their Families









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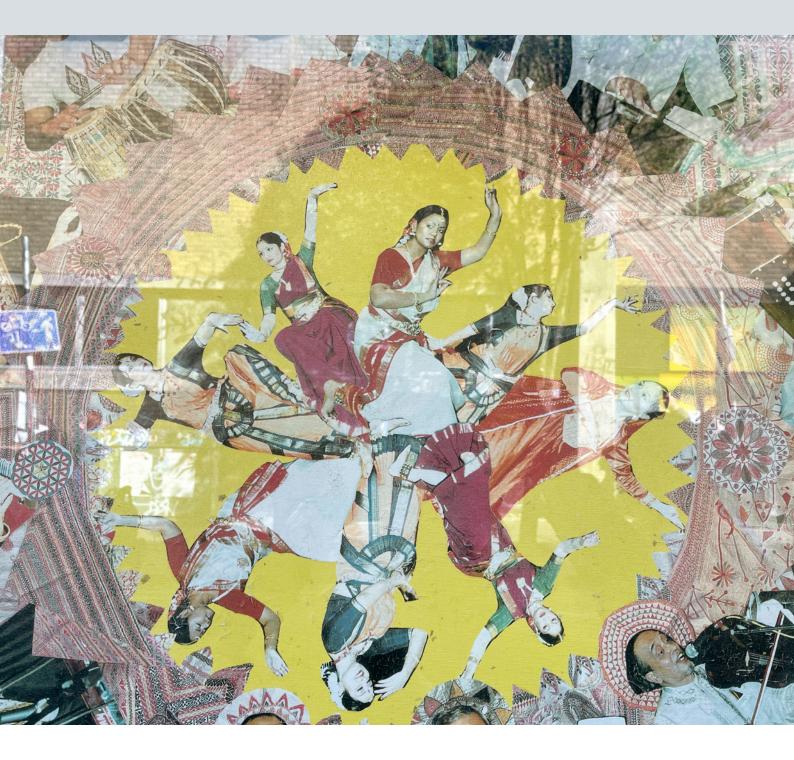


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We would also thank Kartik Sharma who produced the Photobook and virtual exhibition for WP2, and all our colleagues in the Co-POWeR project, especially the project management team - Prof. Iyiola Solanke, Dr. Shareefa Fadhel and Rebecca Wilding. Also thanks to Prof. Christopher Baker for reading and giving feedback on a draft of the report. Finally we would like to thank ESRC/UKRI for the funding provided for this project.

Terminology

We sometimes use the acronym **BAME** to refer to people of Black, Asian and minority ethnic origin. We recognise that this term is not the preferred option of many, but it was the term used in the funding call and project proposal to UKRI/ESRC.

Based on the 2021 Census ethnic groupings we use these categories for our research participants in the report:

BC – Black Caribbean

- BA Black African
- ME mixed ethnicity
- Al Asian Indian
- AP Asian Pakistani
- AB- Asian Bangladeshi
- SW social worker
- CW community worker
- YW youth worker



Co-POWeR – Children, Young People and Families

Project summary

This study explored the combined impact of the COVID-19 pandemic and racial discrimination on the lives of children, young people and families of Black, Asian and minority ethnic background (BAME). The study is part of a larger ESRC/ UKRI funded project *Co-POWeR - Consortium on Practices of Wellbeing and Resilience in Black Asian and Minority Ethnic Families and Communities*. The consortium began from the premise that two viruses were afflicting this part of the population – not only the COVID-19 pandemic but also racial discrimination. The pandemic exposed and amplified deeprooted structural inequalities and racial disparities in British society and there was significant evidence early on in the pandemic that Black, Asian and minority ethnic people were being impacted adversely by the pandemic compared to the rest of the population.

The overall aim of this study was to examine the factors that impacted the health, well-being and resilience of Black and Asian children, young people and families during the pandemic, and the coping strategies and support people were able to draw upon to overcome challenges.

The objectives were to:

- Engage with Black and Asian children, young people and their families, as well as professionals/practitioners within statutory and community services who supported Black and Asian children/ young people, and families during the pandemic to gain a further insight into their experiences.
- Work in partnership with young people and parents to co-develop creative outputs and formulate strategies for building resilience and promoting the health and well-being of Black, Asian and minority ethnic children, young people, and families during and beyond the pandemic.
- Provide recommendations for policymakers and service providers that outline how to 'build back better' in a culturally responsive way that meets the needs of Black, Asian and minority ethnic families.

Methods

Starting from a Critical Race Theory perspective, the qualitative research design and interview schedules used the WARM (wellbeing and resilience measure) framework (Bacon and Mguni, 2010) and socioecological approach to connect micro-meso-macro social interactions. The research methodology was framed by a collaborative approach, seeking to work creatively and in partnership with different groups. We worked throughout in partnership with a youth panel made up of 10 young people, aged 16-20, representing different racially minoritised groups. The panel were invited to provide advice and feedback on the research (for example interview questions) and creative outputs, such as the photobook, at various points during the project.

This qualitative study involved semi-structured interviews and focus group discussions with children (12 years+), young people, parents and other family members, and professionals from community and statutory organisations. In total there were 140 participants, 57% (n 80) were focus group participants and 43% (n 60) were individual interview participants.

% Participant group (n)	% Sub-group (n)
47% Children and young people (66)	21% aged 12 to 15 (29) 26% aged 16 to 19 (37)
39% Parents (55)	Five of these were also grandparents
4% Professionals (19)	Representation from youth groups, schools, charities, non- governmental organisations, pressure groups, social workers, academia who have supported children, young people and families

We chose Black and Asian and Black/Asian dual heritage families and communities for our sample as they are two of the largest visibly racially minoritised groupings in the UK. The category Black encompasses people from the Caribbean and African diasporas. Asian refers to people originally from the Indian subcontinent (Indian, Pakistan, Bangladesh, and Sri Lanka). We also included Black or Asian participants with dual heritage. Due to the recruitment of participants via community groups, we also had a small number participants from Arab and Roma communities. Approximately two thirds (n 88) preferred the pronoun 'she', with the remainder preferring 'he' (n 48) and one person preferring the pronoun 'they' (no data was collected from 3 participants). Our sample of participants were selected from several regions across England and Wales, including London, Yorkshire, the Midlands, Essex and south Wales.

Focus groups and interviews were conducted either online or in person. Illustrators from one of the other Co-POWeR work packages co-facilitated two focus group discussions in London, one with parents at a refugee network and one with young people at a youth centre, helping participants draw pictures while they talked about their experiences of the pandemic. Interviews and focus groups were recorded and transcribed, with the data analysed using stages outlined in the thematic approach of Braun and Clark (2006). Anonymised transcripts were also shared with artists from Co-POWeR work package 5 to produce creative outputs, including a documentary film and graphic narrative. We also worked with a photographer, Karthik Sharma, who used themes and quotes from the young people to create a photobook and a virtual photographic exhibition (**www.pahus.org/co-power**)

Findings

The findings highlight the multi-dimensional impact of the pandemic within the context of racism and intersecting inequalities and how these exacerbated the psychosocial adversity for Black and Asian children and their families. Children and young people spoke of the effects, many negative, but some positive on their emotional well-being, educational development and relationships with family, peers, and professionals. Many of their experiences were universal across all young people, but others highlighted how their race or ethnicity had an impact on the support received, and in turn they spoke of the strategies they utilised to cope with racism, bias and stereotyping. Young people also told us of the impact of the Black Lives Matter movement on racially minoritised young people and their friendships. Black Lives Matter gained much attention during the first lockdown and had considerable impact on the young people interviewed in our study.

The parents and other family members spoke of how they personally coped, how their children and families managed, their relationships with friends and wider family, the support services needed, and the type of support received. Many faced huge challenges linked to poverty and precarious incomes, systemic racism and cultural insensitivity, and restrictive immigration controls. Multiple bereavements here in the UK and abroad featured in many of the participants' lives. The professionals we spoke to were also from Black and Asian backgrounds, and many provided perspectives as both parents and workers. They highlighted the importance of intersectionality when deciding on policy and practice and provided insiders' perspectives on the need for nuanced understanding of cultural and religious beliefs and to move beyond Western Eurocentric ways of thinking and doing.

Five key themes that emerged from the analysis of the data were: Coping Strategies and Resilience; Young People's Support and Wellbeing; Parenting in a Pandemic; Social Support Networks; and Building Trust and Safe Spaces.

Coping Strategies and 'Resilience'

The narratives revealed the additional challenges and burdens that came about with the pandemic, further exacerbated by pre-existing racial and other structural inequalities, but also an array of coping strategies. These strategies were possible with wider support from families, friends and community groups. This 'cultural wealth' (Yosso, 2005) around many provided the much-needed safe and culturally sensitive support, often missing in wider systems and structures in society. These different ways of coping challenge perspecives of resilience that are rooted in a set of assumptions about individual agency placing the onus on individuals to adapt to their situation rather than placing emphasis on the role of structures and systems within society.

Young People, Support and Wellbeing

Young people told many stories of feeling disproportionately impacted by the pandemic which exacerbated vulnerabilities and negatively impacted their mental wellbeing. These included isolation and heightened anxiety about parents' employment and income, as well as dealing with bereavement and grief, separation from school and friends and conducting their lives online. For some living in cramped housing, no free school meals and lack of access to the internet and digital devices had an impact on their ability to stay engaged in education. Many expressed their concerns about inconsistencies in the policing of 'lockdown' rules, education and mental health support, within the context of being young and from Black or Asian backgrounds. The prominence of the Black Lives Matter movement and amplification of racial injustices during the first lockdown, encouraged many young participants to speak candidly about racial identity and belonging and their engagement in local, national and global activism aimed at tackling systemic racial discrimination.

Parenting in a Pandemic: Combating Structural and Societal Inequalities

This research has illustrated how the COVID-19 pandemic affected parenting on many different levels. Many of the issues families had to confront, such as housing conditions and low-paid, precarious jobs, are longstanding and rooted in systemic structural inequalities but were exacerbated during the pandemic. Many families subject to immigration controls were not able to access any financial support. Multigenerational homes could offer parents additional support, but also presented challenges of social distancing especially in overcrowded housing with home-working and home schooling. The parent participants, mainly mothers, spoke of experiences of racism and stereotyping when engaging with support services. Anxieties about their children's education were exacerbated by the digital divide and unfamiliarity with the education system. Unemployment and financial pressures led to tension in relationships on occasions resulting in domestic abuse. The findings highlight the critical importance of understanding the contexts and circumstances of families' lives and specifically, the ways in which multiple oppressions negatively impact experiences of parenting.

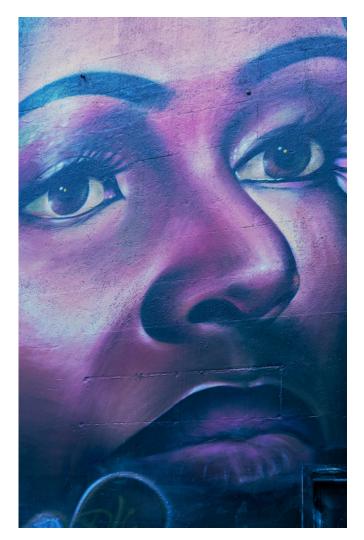
Executive summary

Social Networks and Community Support

Crucial support for children, young people and families came from within the community – extended family networks, community workers, youth groups, religious and community organisations, and local support services. These networks were a vital lifeline during the pandemic and in general provided empathetic, non-judgmental aid and guidance that was often lacking in the responses from health and social care services. Many families relied on practical help (for example food parcels and digital devices), and culturally appropriate advice and emotional support from community workers and religious organisations, mitigating the impact of the pandemic. Many of the participants were keen to highlight the assistance these groups provided despite being short on staff and resources. The findings demonstrated the importance of building community assets and strengths.

Building Trust and Safe Spaces

The need for safe spaces to support mental health and wellbeing was a consistent theme running through the young participants' accounts and was reinforced by the youth and



community workers. Many young people spoke of a deep mistrust of public services, including the police and children's social care, but also schools were not necessarily experienced as safe spaces. Lack of trust and fears of racist responses led to reluctance to engage with more formal support services. On the other hand, many young people described local youth services and sporting clubs as spaces of safety and belonging. A key message from this research is that creating environments where Black, Asian and minority ethnic children can feel valued and thrive will contribute to improving their mental health beyond the pandemic.

Recommendations for Policymakers and Service Providers

The legacy of the pandemic on the emotional, educational, and physical well-being of many Black, Asian and minority ethnic children continues as does the on-going impact of deeply entrenched structural inequalities. We make the following recommendations arising from the research for policy makers and service providers to address harm and promote resilience and well-being for children, young people and families:

- a. Children's services providers must adopt an intersectional approach for understanding and addressing how their policies and practices impact Black, Asian and minority ethnic children, young people, families and communities adversely.
- b. National and local government must ensure long-term and sustained investment in place-based community services, that offer early help, culturally appropriate support tailored to meet the needs of local Black, Asian and minority ethnic population groups.
- c. Youth services should be co-produced with young people, and include provision of safe spaces and community-based youth and mental health workers accessible to local Black, Asian and minority ethnic children and young people.
- d. Children and youth service providers should recognise the importance of and support grassroots level 'insider' workers with shared knowledge and lived experiences of the community that they serve.
- e. The police, as a key statutory safeguarding partner, should find innovative ways to actively engage with Black, Asian and minority ethnic children, young people and families to understand and address issues of racism for building trust in those communities.
- f. Children's social care, education and health services must engage with Black, Asian and minority ethnic children, young people and families to address racial discrimination and lack of trust experienced by many who use their services.

Chapter 1: Introduction

This study explored the combined impact of the COVID-19 pandemic and racial discrimination on the lives of children, young people and families of Black, Asian and minority ethnic backgrounds. The study is part of the CO-POWeR - Consortium on Practices of Wellbeing and Resilience in Black Asian and Minority Ethnic Families and Communities (BAMEFC) research programme. The CO-POWeR consortium involved five Work Packages focusing on different inter-connected themes:

- WP1: Emergency Powers investigated the COVID Act powers to understand their impact on practices of wellbeing and resilience across BAMEFC, with a focus on policing.
- WP2: Children, Young People and their families investigated the disproportionate socio-economic and psychosocial impacts on BAME young people and families and communities.
- WP3: Care, Caring and Carers explored the interaction of care, caring and carers within BAMEFC to investigate how to increase the well-being and resilience of older people, and paid and unpaid carers.
- WP 4: Physical Activity and Nutrition investigated improving resilience and well-being by tackling vulnerability to underlying health conditions (cardiovascular disease, obesity) in BAMEFC, which may have contributed to the disproportionately high severity of illness and deaths from COVID-19.
- WP5 Empowering BAMEFC through Positive Narratives channels research from WP1-4 was used to coproduce fiction and non-fiction materials tackling the vulnerability of BAMEFC to 'mis infodemics' (IOM 2020): multi-level misrepresentation, linguistic and cultural miscommunication, that undermines understanding of the public health crisis and marginalises BAMEFC.

A starting point for the Consortium was that two viruses were afflicting this part of the population – not only COVID-19 but also racial discrimination (Thomas-Bernard, 2020). The pandemic exposed and amplified deep-rooted structural inequalities and racial disparities in British society and there was significant evidence early on in the pandemic that Black, Asian and minority ethnic people were being impacted adversely by COVID-19 compared to the rest of the population.

Background

In the early days of the pandemic evidence emerged showing that the COVID-19 pandemic was disproportionately affecting those belonging to racially minoritised groups, in particular Black and South Asian communities (ADCS 2020; Blundell et al. 2020; Deivanayagam et al. 2020; Gidda, 2020; Platt &

Warwick, 2020; Public Health England, 2020; The Children's Society 2020). It was suggested that racially minoritised communities were adversely affected as a consequence of the disproportionate socio-economic, and psychosocial impacts on their families and communities (ADCS 2020; The Children's Society 2020). The early reports revealed concerning statistics regarding the greater vulnerability to the impact of COVID-19 pandemic, due to higher infection and death rates, which resulted in an increase in racism and discrimination aimed at racially minoritised people perceived as being potential spreaders of the virus (Doyle, 2020). Media often reported ethnic minorities' higher death rates with emphasis on factors such as living in close-knit, multigenerational households, rather than long-term systemic racism and discrimination which was found to be a crucial underlying reason for higher death rates among Black and Asian key workers in the NHS (Campbell, 2020; BBC, 2020). At the same time, reports emerged that lockdown regulations, limiting freedom of movement for example, were being disproportionately applied to racially minoritised people who faced higher rates of being questioned or fined by the police for breach of 'COVID rules' (Busby & Gidda, 2020). There was therefore significant evidence early on in the pandemic to suggest that racially minoritised people were being impacted differently by the COVID-19 pandemic compared to the rest of the population, both in terms of the direct impact of the virus as well as due to an apparent increase in racially motivated prejudice and discrimination. This study therefore sought to find out what the impact of the pandemic was on Black and Asian children, young people and families, and the kind of support available to cultivate and sustain these communities and groups.

Aims

The overall aim of this study was to examine the factors that impacted the health, well-being and resilience of Black and Asian children, young people and families during the pandemic, and the coping strategies and support people were able to draw upon to overcome challenges.

Objectives

- Engage with Black and Asian children, young people and their families, as well as professionals/practitioners within statutory and community services who supported Black and Asian children/ young people, and families during the COVID-19 pandemic to gain a further insight into their experiences.
- Work in partnership with young people and parents to co-develop creative outputs and formulate strategies for building resilience and promoting the health and well-being of Black, Asian and minority ethnic children, young people and families during and beyond the pandemic.

Chapter 1: Introduction

• Provide recommendations for policymakers and service providers that outline how to 'build back better' in a culturally-responsive way that meets the needs of Black, Asian and minority ethnic families.

As this research was concerned primarily with understanding what factors and processes affected resilience and wellbeing of Black and Asian groups, several theoretical frameworks underpinned the research. In particular, we utilised elements of cultural wealth theory to help identify knowledge, skills, abilities and contacts possessed by socially marginalised groups that often go unrecognised and unacknowledged (Yosso, 2005). An intersectional lens was also important because it recognises that racially minoritised groups could experience multiple forms of oppression and inequity (Crenshaw, 1989), as well as a socio-ecological approach to connect micro-meso-macro social interactions (Bronfenbrenner, 1979). We also drew on the three domains of the Well-being and Resilience Measure (WARM); individual, community and systems and structures, to help us identify neighbourhood and community-level assets for supporting resilience (Bacon & Mguni, 2010). Together, these approaches and frameworks were used to formulate the three overarching questions that guided the research.

- 1. What factors and processes affect Black and Asian children/ young people's vulnerability, health, wellbeing and resilience during the pandemic?
- 2. Drawing on a cultural wealth model, what are the strengths and opportunities to build on to develop resilience in Black and Asian families and communities?
- 3. How can statutory and third sector services promote children/young people's resilience and wellbeing?



Chapter 2: Methods



This study sought to explore the combined impact of COVID-19 and racial discrimination on the lives of Black and Asian children, young people and their families through a qualitative methodology. Our rationale for choosing a qualitative approach was to generate discussions about the topic that requires multiple perspectives. Therefore, a qualitative methodology was considered an appropriate approach to capture multiple and diverse perspectives. Specifically, we were interested in understanding the key issues arising for children, young people and families during the pandemic (See Appendix for interview guides).

Sample

The sample consisted of participants who identified as Black and South Asian and Black/Asian dual heritage. The category black encompasses people from the Caribbean and African diasporas which include Nigerian, Ghanaian, Zimbabwean, Somalian and North African participants. South Asian refers to people from the Indian diaspora and subcontinent which include Indian, Pakistani, Bangladeshi, and Sri Lankans. Within these categories we aimed to represent first, second and third generations, recent migrants and refugees. Due to the recruitment of participants via community groups, we also have a small number participants from Arab and Roma communities (See Table 1). Table 1 Summary of quota targets for each demographic and final participant numbers.

Target group	Participant quota (n)	Participants final (n)
Children and Young people	81	66
Parents	48	55
Professionals	18	19
Total	147	140

Table 2 Summary of participants' ethnicity

% Ethnic group (n)	Sub-group (n)	Not included
31% Asian (43)	Indian (5) Pakistani (10) Bangladeshi (12) Arab (6) Other Asian background (10)	Chinese Filipino
36% Black (51)	African (42) Caribbean (6) Other Black background (3)	
14% Dual heritage (20)	White and Black Caribbean (7) White and Black African (2) White and Asian (1) Any other dual heritage (10)	
1 White (1%)	Gypsy or Irish traveller (1)	
25 (18%) No data		

Using a combination of purposive sampling, opportunity sampling and snowball sampling (Patton, 2002) participants were recruited from a number of regions across England and Wales including, the Midlands, Yorkshire, Cardiff, London and Essex. The aim was to allow representation of Black and South Asian populations from different socio-economic and geographical regions with differing experiences of the pandemic and support during the period. Many of the participants were accessed through community groups, charities and organisations particularly working with ethnic minority populations. In total, 140 participants, involving 12 focus groups, and 75 individual interviews took part in the study. Out of the140 participants, 57% (n 80) were focus group participants and 43% (n 60) were one-to-one interview participants. Approximately two thirds (n 88) preferred the pronoun 'she', with the remainder preferring 'he' (n 48) and one person preferring the pronoun 'they' (no data was collected from 3 participants). Focus groups and interviews took place either online or in person depending on the preference of research participants, COVID-19 restrictions, and the advice of community connectors.

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Table 3 Summary of participants' location

% Region (n)	Area (n)
1% Buckinghamshire (2)	Milton Keynes (2)
6% Essex (9)	Tilbury (9)
52% London (73)	London (73)
2% Midlands (3)	Birmingham (3)
15% South Wales (21)	Cardiff (15) Newport (6)
21% Yorkshire (30)	Leeds (28) Rotherham (1) Sheffield (1)
1% no data (2)	

Children (12 - 14) and young people (15-19)

Our sample of children and young people were mainly aged between 12-18 with some 19 year-olds to allow for the different experiences and voices to come through in the narratives. This age range allowed us to speak to youngsters more dependent on families and teachers and those who were older and more independent, with different support relationships.

Parents and Carers

The parents who participarted in the study were not necessarily the parents of the young people who took part in the research. The parents' sample were accessed independently through community groups and organisations. This was to allow a wide range of different voices and experiences within our sample. There were also a small number of grandparents within the parents and carers' focus groups.

Professionals

We conducted one focus group and fifteen one-to-one interviews with professionals.

Table 3. Summary of participant groups

% Participant group (n)	% Sub-group (n)
47% Children and younpeople (66)	21% aged 12 to 15 (29) 26% aged 16 to 19 (37)
39%Parents (55)	Five of these were also grandparents
4% Professionals (19)	Representation from youth groups, schools, charities, non- governmental organisations, pressure groups, social workers, academia who have supported children, young people and families

Research in collaboration

The research methodology was framed by a collaborative approach, seeking to work in partnership with different groups. These groups are mapped in Figure 2, followed by a summary of their involvement to highlight important moments that informed research methods throughout the course of the project from June 2021 to July 2022.

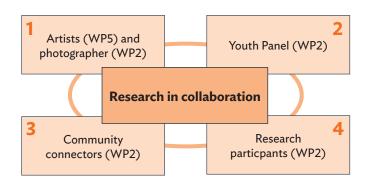


Figure 1 Research in collaboration with youth panel, creative team, community connectors and research participants

Artists

Working closely with the other four Work Packages in the CO-POWeR Consortium enabled us to identify synergy between the research teams. It was agreed that anonymised focus group and interview transcripts would be shared with artists, working in different mediums, to produce several outputs, including a 'graphic narrative' – similar to a graphic novel where pictures tell a story. Illustrators from WP5 were involved in focus group discussions in London, one with parents at a refugee network and one with young people at a youth centre. These focus group were co-facilitated with artists to help participants draw pictures while they talked about their experiences of the pandemic. Figure 2 shows how participant's drawings were re-worked by artists as part of developing a graphic narrative.





Participant's drawing at a focus group with young people at a youth group in London

Artist's sketch titled 'a day in March' based on focus group and participant's drawing

Figure 2 Example of how participant's drawings in focus groups with artists developed into a graphic narrative

Artists also joined an online interview with a single mother of two, based in Cardiff. By the end of the interview, the artist Edgar Lushaju, had created a sketch to illustrate her experiences (see figure 3).



Draft sketch drawn as participant spoke about her experiences

Images depicting impacts on wellbeing: a sense of feeling stuck (top left), juggling conficting roles (top right), relaxing in the evening with friends online with a hookah pipe (bottom left), problems experienced at her son's school (bottom right)

Figure 3 Artist's sketches while listening in on an interview with a parent in Wales.

Photographer

The research team also worked with a photographer hired with a remit to capture the experiences of children and young people during the pandemic. Preliminary research themes and quotes were given to the photographer and used to produce a photobook and online exhibition, with photos grouped together thematically according to the photographer's reimagining of different aspects of the research. For example, the theme of 'expression and suppression' was used to group together photos that conveyed how identity featured in young people's experiences (see figure 4). The overall idea was to create largely positive photos where meaning was enhanced with quotes; a strategic artistic choice to showcase young peoples' assets, skills and abilities, through photographs, and use quotes (rather than images) to convey negative impacts on wellbeing. (See also photographer's reflections on working with researchers **online - co-power.leeds.ac.uk/blog10_tp-ks/)**.



Figure 4 Example of how photos were grouped under thematic headings

Youth Engagement Panel

We developed a Youth Engagement Panel by partnering with a total of 10 Black and South Asian heritage young people aged 16-20, to advise the research team, provide feedback on the research and contribute to the development of the creative outputs at several points during the project. The Youth Panel members were recruited from schools and youth projects.

Community connectors

In total the research team contacted approximately 182 people to help connect researchers to stakeholders, gatekeepers, and potential participants. The community connectors provided guidance on where researchers should focus their efforts to ensure fieldwork included a diverse range of perspectives. Some community connectors were existing contacts of the research team (for example, social workers) but others were identified and 'cold called' based on a desktop review of their fit with the research scope. Community connectors were



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drawn from organisations including schools, youth groups, charities and government bodies.

Ethical Issues

Ethical approval was granted by the University of Leeds and Royal Holloway, University of London. Prior to consenting to take part in the research, participants were provided with full information about the aims of the research, explaining what their participation would involve, for people to make an informed decision about whether the project was something they felt able to participate in and/or was suitable for the members of the community they served. The participant information sheet and consent form were condensed and made available online.

For interviews and focus groups with young people aged 16-18, participants were encouraged to inform their parents that they were involved in research and what the project was about. For participants aged 12-15, consent from parents/ carers and assent from the children was sought and obtained. Due to participant recruitment being largely via community groups, gatekeepers with a duty of care (parents or teachers for example) sat in on some interviews and focus groups. This strengthened the researchers' confidence that participants felt able to withdraw their participation at any time. All participants confirmed their consent in different ways - a consent form online or email a consent form back to researchers. In instances where individuals needed help interpreting written text, recorded consent was obtained orally before interviews or focus groups took place. All of the participants were able to communicate in English.

Data-gathering

Participants were recruited using a combination of quota, purposive sampling, opportunity sampling and snowball sampling. These were variously employed depending on progress made towards fieldwork targets set in the proposal (147 participants – 12 focus groups of 6 people in each and 75 individual interviews). The data was gathered between July 2021 and March 2022 (see table 4).

Fieldwork phase: July 2021 – March 2022	Participants (n)
Focus groups	80
Semi-structured interviews/group interviews	60
Total	140

Table 4. Summary of qualitative fieldwork

The dataset encompasses research with 140 participants, 57% (n 80) were focus group participants and 43% (n 60) were individual or group interview participants. Focus groups and semi-structured interviews were conducted by researchers, with two co-facilitated by researchers and artists (see research

in collaboration). Interview guides were developed, piloted and refined (see Appendix). Depending on the depth of detail in participants' responses, researchers referred to a list of probes aimed at ensuring sufficient data was gathered about work, housing, education, food, relationships, health, wider support, and statutory services. After the pilot focus group, a question about the Black Lives Matter movement was added to the interview schedule. This was to focus attention on racialised experiences that might otherwise be overlooked by participants. Questions for professionals were similarly organised around aspects of family life but with more of a focus on support, pertaining to the promotion of resilience and wellbeing in different services.

The duration of interviews and focus groups varied from 15 minutes to two hours. These were recorded either using a digital voice recorder or using software built into online meeting platforms (Zoom/MS Teams). Sound files were transcribed verbatim, and the transcripts were then checked against the sound file, corrected, and anonymised. Anonymised transcripts were shared with the creative team to use as a foundation text for story boarding (see research in collaboration). Demographic information was requested from participants to track progress towards recruitment quotas and ensure representation from different groups. Most but not all participants gave this information. All participants names were replaced by numbers but, where we have demographic data, is accompanied by gender identity, ethnic heritage, age, and location.

Data analysis

The data was analysed using the procedures from thematic analysis (Braun and Clarke, 2006). The process started with data familiarisation which involved multiple readings of all the transcripts before starting any coding (Braun & Clarke, 2006). The transcripts were checked for accuracy against the sound files to make corrections and anonymise the text. The second round of familiarisation involved annotating transcripts to select sections of narratives in relation to concepts (wellbeing, resilience, vulnerability, cultural wealth, intersectionality); theories (socio-ecological theory, critical race theory); the impact of different factors (work, housing, education, food, relationships, health, support, racism). After developing a set of initial codes, we conducted a more detailed selective coding, after which a sample of transcripts (n=17), one quarter, was annotated. The annotated transcripts were imported into Nvivo software for data management to facilitate the qualitative analysis. The final stage of analysis involved more refinement of the coding, and breaking down of the codes into various subthemes, which were then organised into thematic categories, to explore their interrelationships (Braun and Clarke, 2006). Five key themes that emerged from the analysis of the data: (1) Coping Strategies and Resilience; (2) Young People's Support and Wellbeing; (3) Parenting in a Pandemic; (4) Social Support Networks; and (5) Building Trust and Safe Spaces.

This section of the report discusses the findings of the research and will be structured according to the three main groups within our sample – children and young people, parents, and professionals.

Children and young people

As mentioned earlier, interviews and focus groups were undertaken in different cities in the UK with a total of 66 young participants, aged between 12–19 who identified as Black, South Asian or mixed Black/Asian heritage The analysis of the data has provided rich insights into the combined impact of COVID-19 and racial discrimination on Black and Asian young people's everyday lives, and how they navigated change. The findings shed light on the interconnectedness of young people's relationships within their families and households, peers, teachers, and community support workers for sustaining wellbeing.

Wellbeing - emotional and physical

One of the key areas explored in relation to young people were their mental health and wellbeing throughout the pandemic and lockdowns, and how different aspects of their lives impacted their emotional and physical wellbeing. Some of the key areas mentioned included the anxiety, fear and nervousness around the virus; the sense of isolation; missing school and friends; and the inability to socialise. The positive aspects, however, included having time with family and siblings and opportunities to bond; thinking and reflecting on themselves and their identities; and expressing themselves through creative activities such as cooking, music and art. Many of their experiences were universal across all young people, but others highlighted how their race or ethnicity had an impact on the support received, and in turn they spoke at length about the strategies they utilised to cope with racism, bias and stereotyping.

Mental health

The data showed that many young people experienced feelings of anxiety, worry, uncertainty, shock, isolation and boredom during the pandemic. In interviews, they expressed feelings of isolation and loneliness due to being unable to leave the house, go to school and meet with friends or take part in sports and other group activities. As one young female participant stated:

'it's easy to just ruminate and think about all the bad things that could possibly go wrong' (ME, F,17, London).

Other participants highlighted the importance of face-to-face contact and how not having this resulted in isolation:

'I was so used to being outside socialisng with people and then all of a sudden I just had to be inside for months' (BA, F, 14, London) 'I'm someone who doesn't really like social media...before COVID even, like, I enjoyed meeting up with people. And so, I have this kind of attitude where I'm like, if I can't do it then I might as well not. So, I just didn't speak to any friends' (ME, M, 17, London).

Not being able to travel abroad to visit family members was hard for some of the participants:

'Last year, I felt like I was being suffocated so I wanted to go leave the country to spend time with family and stuff but, again, Corona made it very hard to travel' (BA, M, 14, London)

For some, the lack of routine often resulted in disruption to their schoolwork, irregular sleeping patterns and watching copious amounts of gaming, Netflix and television:

'[lockdown] messed up a lot of routines...going to sleep at like seven, eight am, and then sleeping throughout the whole day' (AI, F, 16, Leeds).

In some cases, these experiences during the pandemic resulted in the development or exacerbation of anxiety, depression and other mental health issues. Several participants described how the effects of the pandemic led to serious mental health issues in some of their peers. One participant, for example, described how not being able to see or speak to friends affected other young people:

'And they couldn't speak to friends, which was often like a coping mechanism for them and will help them release anxiety. So, I know a few of my friends did begin to self-harm in that time' (BA, M, 17, London).

The isolating effects of lockdown during the pandemic was often exacerbated by other issues and anxieties, such as school stress or difficult situations within the home, which further affected the mental health of children and young people:

'A lot of people like started to have like really bad mental health, especially when it came to like exams or like how grading was going to be and like the suicide rate especially went up and like domestic abuse and stuff, within the home. So I do know various people that were using them but I just don't know anyone closely affected.' (BC, F, 18, London).

Another participant indicated:

'a lot of my friends called a helpline. I had quite a few friends crying, being like everything's fallen apart and I had one friend who, her mental health it got really, really bad and she was pretty much ready to end it all, and I had to sit on the phone on the floor speaking to her and it was weird not just being able to like, you know, hop in a taxi and go to her house and make sure she was okay' (BC, F, 18, Birmingham).

As described in the quote above, some young people were able to receive help from helplines and peers or friends to help cope with the impact of the pandemic. However, participants also reported the difficulties of getting help for coping with mental health issues. The inability to meet friends in person to talk about any issues made one participant find it harder to deal with deteriorating mental health in the aftermath of a relationship breakup:

'I've spoken to a few friends about it but that was mainly after lockdown. I spoke to a few during, but again because of the lack of physical like, you know, the stereotypical shoulder to cry on, like literal definition, you just sort of want that but I wasn't able to have that and especially like my mental health was getting worse at that point too. I was having mood swings and that sort of thing, just like hopelessness and the usual suicidal thoughts' (BC, M, 19, Leeds).

Other participants mentioned how difficult it was to get mental health support from the NHS:

'A lot of people have a lot of mental health struggles but they can't reach out because of the NHS and-, I feel a lot of people have to get it done privately to actually get the help they need. And a lot of minorities don't have that accessibility or that money to go privately to get help or a therapist. So, I think there needs to be more help surrounding that.' (ME, F, 15, London).

The pandemic, and resulting experiences of isolation, hopelessness, and being stuck in the home, had a significant impact on the wellbeing and mental health of many young people. Participants had varying experiences regarding the kind of help they were able to access.

Policing

Most of the young people in the sample told stories of the policing they experienced during the pandemic. The common experience of being stopped and questioned by the police during lockdown affected participants' feelings of safety and often made them feel less able to go outside to exercise or get fresh air during the lockdown.

One participant reported that during the lockdown '*there was more police out*' and that he 'got arrested a couple of times' and that the police took his details (Arab, M, 18, Cardiff).

He went on to state:

'In the pandemic they'd give you an hour where you could go [out], then we'd get stopped by police anyways, they'll say you, young people running around, they'll just stop you and say 'why are you still out' and stuff. ...they wouldn't believe that [I was just doing exercise] [...] You just can't argue with them. It will make everything worse if you like argue and stuff (Arab, M, 18, Cardiff). Another participant told us about a time when he was followed by a police car for ten minutes when he was out jogging:

'You'd get stopped so quick. Even like, with me, I could barely make it around the corner, I would literally go around the corner and they would stop me straight away. [...] They would see me in my running shoes and running kit and still be like 'where are you going?' [...] You can't argue. They'll think you're lying. I remember one time, yeah, I told them I was going on a run, I thought they were going to be calm and then they were like 'oh yeah, go off, go on, do your run.' So I started running and I swear the car just followed me for 10 minutes. Because they thought I was lying. So they were just like, 'okay just go on your run' and then they trailed behind me for 10 minutes in their car.' (BA, M, 17, Cardiff).

Another spoke about being put in handcuffs and unfairly accused of stealing a bike:

'During the pandemic I suffered from anxiety and depression... I was very discriminated on this Saturday just because I was a Black male around 5'3", and some policeman came up to me and put me in handcuffs and they said that I was being a very bad boy and they accused me of stealing an electric scooter off a man and I wasn't in the wrong.... I felt very discriminated against and dehumanised- because I was just a normal kid walking on the street and ...' (BA, M, 13, London).

The constant police harassment experienced by these young people exacerbated the pressures and effects of the lockdown, making them feel unsafe when they left the house and discouraging them from going out to exercise.

Identity

The pandemic also became a time of self-discovery for some of the young people. Several participants described experiences of increased creativity or ways in which the pandemic helped them combat depression and anxiety and find out more about themselves.

One participant explained:

'I've just learned to enjoy my own presence. Because I've learned you're only stuck with yourself for the rest of your life. Not your friends or anything. So, you have to be happy with yourself first' (ME, F, 15, London).

One female participant talked about dealing with the anxiety of the pandemic through music which acted as an outlet for coping with isolation:

'So, I went to an all-white high school and it was Year 11 when the pandemic hit and, I think, when I was taken out of school, I was left with a lot of confusion. A lot of feelings. And I felt really isolated. I felt like I couldn't go to my friends about it. And so, I picked up the guitar. I went out there and I bought a guitar. just the fact that I could express myself and how I was feeling through music, I think that really helped me through the first summer of this pandemic. Definitely.' (ME, F, 17, Stafford).

Another participant found creativity a useful way to 'alleviate isolation and confinement':

'I have always liked craft stuff because my mum used to craft a lot when I was younger to keep, when she was manic because she's got bipolar so when she was really manic she would do loads of craft projects and then when her depression hit, it didn't make a massive difference, but she was happier knowing that she'd done something. So I was like, do you know what, mum used to craft to stop her feeling really anxious and really depressed, and I was like, I'm really anxious and it's a very depressing time' (BC, F, 18, Birmingham).

For others, self-image and racial identity were reconciled during the pandemic as the lockdown allowed them embrace their difference. One participant described how being outside of her usual everyday context at school helped her feel more positive about her self-image:

'People touched my hair a lot. ...It was really bad. I couldn't go a single day without feeling bad about my hair, which is why connecting with my hair throughout the pandemic, and being away from that constant harassment, was extremely different but it was also really helpful in terms of my selfimage' (ME, F, 17, Staffordshire).

Families

For several children and young people, the new experience of prolonged time spent with family inside the home was very positive. Several participants described how spending time together and doing things as a family was a good experience and that the lockdowns drew their families together in spite of hardship and restrictions. For example:

'So I think it has brought some positives. Like because now I have a more close relationship with my siblings' (Arab, F, 16, Leeds).

'When I was at home, my sister she taught me how to cook and bake and we used to bake different things like cakes and meals as well for the family' (BA, F, 12, London).

A participant spoke it being hard being suddenly forced to just socialise with family, but that it was important to be positive with each other: 'my main goal, my motto for the family is spread positivity' (BA, M, 14, London).

Another participant explained how she had a good support system within her family at home, where she felt able to talk through any issues she was having: 'I've got a very good support system at home but because of like mum's mental health, it's been something that if you need help you speak about and we could speak about mental health as a family. We'd be frequently checking, like my dad would come in every couple of days and just go, you alright, do you want to talk' (BC, F, 18, Birmingham).

However, several of the participants also described how they experienced anxiety and concern about the vulnerability of family members:

'I think that was the most worried thing, I was, like, obviously for my grandparents because they are vulnerable people' (ME, M, 18, London).

Several participants struggled with worry and anxiety about their family members who had to go out and work during the pandemic. One participant recalled the toll on his emotional wellbeing caused by being stuck at home while his parents went out to work. His concerns were further exacerbated by worries about how well parents were being supported at work. The death of Belly Munjinja from COVID-19 after being spat at while at work (Kale, 2020), especially resonated with the participant since his parents were key workers. He recalled that the transport company's reaction to Belly's case was different to that of a white worker and made him think that if the same thing happened to his parents, employers would not care. Reflecting on this difference, he told us:

"...that, kind of, put me in, like, a bad kind of frame of mind. Because they [my parents] would be out all the time. And I'd be at home just thinking, like, about their safety, or what could happen to them" (BA, M, 17, London).

Worry about parents and family members often negatively impacted the emotional wellbeing of children and young people during the pandemic. Concerns were often exacerbated by worry about parents being more likely to get ill if they could not work from home, fears over potential racial discrimination and abuse by the public, and concerns that managers would not respond to abuse against racially minoritised workers with the same degree of thoroughness as their white colleagues.

School and Education

For many children and young people, having to attend school online instead of in-person proved a major challenge for a range of reasons, including lacking the right digital devices, having to share limited devices at home, struggling with internet connections, and experiencing difficulties engaging online without face-to-face teaching. This disruption combined with the lack of routine, crowded spaces at home, and the inability to talk directly to teachers meant that many children and young people fell behind. Assessment instead of exams also concerned some of the students who had hoped to make up grades in exams.

Lack of adequate electronic equipment and access to internet made equal access to education hard for many participants:

'I haven't got any computers but some of my teachers let me lend them, but I didn't have no internet at the time .. I got, like, booklets' (ME, M, 12, Leeds).

'Basically, I got sent a lot of homework, I sent it to the ducks to do it in the canal. So, basically, I threw my homework in the canal. It was so hard to do.My computer was broken, it could not work on WiFi. That is why I couldn't work on the computer' (ME, M, 14, London).

One participant described her struggles with having to complete her schoolwork at home:

'I'm at uni now and not around all the time, but like when it was happening it was a bit stressful, a bit annoying and it felt like I was just, because I had to do school work as well, it was like I didn't feel, you know, I was really confused about what was happening and it was hard to kind of concentrate sometimes with my siblings coming in or because I'm at home, my parents would be like, you can do this now' (BA, F, 18).

Participants talked about various degrees of support from their schools. Many young people felt unsupported by their schools and teachers. One participant had this to say:

'I guess education wise, I wasn't revising or anything because my school didn't support us really. With other schools, the teachers were sending revision packs out but my school it was just silence. I haven't spoken to any of my teachers since.' (BA, M, 17, Cardiff).

Another young person felt particularly unsupported by their teachers:

'They weren't explained as well, so they'll just send you work without explaining anything to you. They will just say 'read the paper and do essays on it.' So you don't know what you're doing' (Arab, M, 18, Cardiff).

For one interviewee, their struggles with school during the pandemic resulted in them dropping out of school:

'It just kept getting topped up and it was just like, OK, so Monday we had one assignment, and then on Tuesday we got three, and it was just like so much, and it's just like how do you even like cope with that? Because some of the teachers weren't even there. It was just all over the place. ... Many dropped out halfway through and I was one of them. [...] And just mentally, it wasn't OK for me.so I think, yeah, that was my experience, it was just like a lot to handle.' (AB, F, 18, Cardiff).

Even when the student received some extra support, the difficulties of continuing education online during the pandemic were too much for them. The student felt that the type of support offered by the school was not sufficient, and did not address the emotional and mental health needs of the students in the face of the drastic situation:

'Yeah, I think mental support is the main thing. So yes, they mostly provided [us] with the whole like how to get your grades, books, laptops, they supported that. But I think mentally they gave no support We were like robots. So we weren't told why we should do it, how it benefits us, or also like, just talking about mental health like, 'how is everyone feeling with this?' We were never asked about our feelings' (AB, F, 18, Cardiff).

For many young people, difficulties related to school education continued after they returned to school following the lockdown:

'it was just very hard to get back into retaining information... I was quite alone for most of six months just doing nothing by myself, my mental health, kind of, receded quite a bit. So being around people was quite difficult as well' (Arab, F, 17, London).

'One thing was hard because I didn't learn anything, I did not learn anything for two years, I had to catch up' (BA, F, 14, London).

Friends and peer support

Most of the young people emphasised the importance of staying in touch with friends during the lockdown to support their wellbeing and mental health. One participant explained:

'Having friends made it a lot better. Because when you're stuck inside, you can't really go outside at all. It does affect your mental health a lot. But when you can speak to your friends, you can talk to friends you haven't spoken to in a long time, because you know that they're going to be free. It does make it a lot easier. And I suppose connections with new people. Like, I did make a lot of online friends during that time, like, people I'm going to meet this summer. So it was quite a good time to have, like, connect to people and connect with your new friends or your old friends' (BA, M, 17, London).

As the participant above describes, staying in touch with old friends was important and the internet was a forum through which young people were able to make new connections to alleviate the isolation of lockdown, for example through social media and gaming. Another participant explained the benefits for her of developing an online community during the pandemic:

'We couldn't trust people in our building. So, it was a strong sense of not being able to trust anyone and this was when I really started branching out to an online community. Because, again, my friends in person kind of detached themselves from me. And I started building myself up in an online community. And this was again when I was still experimenting with my natural hair and things like that. And so, to do that in a pandemic, to be inside all the time, not having to help-, these online communities I reached out to were extremely helpful' (BC, F, 18, Birmingham).

Many of the participants had also themselves provided support to classmates through regular contact. As one participant indicated:

'I think I had some friends with quite bad mental health. So, I think going into lockdown, it just made it even worse. But I was there for them as much as I could. Texting them, calling them when they needed, or giving them advice. And in the end, they got through and they were fine' (ME, F, 15, London).

However for participants coping with transition to secondary school maintaining contact with some friends was more difficult:

'I mean some of my friends are going to the same high school, so, like most of my friends went to other high schools so I couldn't really meet them. And some of them don't have phones and they don't have (inaudible), so I can't contact them or something (AP, M, 12, Leeds).

'Well when the, when Boris Johnson first said that we will be taking time off school I never really thought anything about it. I thought that we'll like go to school like in the next two weeks. But when it started getting longer, I got quite anxious and like worried because I wouldn't get to see my friends from my primary school again' (BA, F, 12, London)

Friendships, both old and new, based on in-person or online connections, constituted a major way in which young people supported each other and overcame the difficulties of isolation and stress during the pandemic.

Neighbourhoods and social networks

The neighbourhood participants lived in made a significant difference for many young people, with several describing the seemingly hostile or supportive neighbourhoods. For one young person, moving house to a diverse area had been one of the best things to happen for her during the pandemic. This was because she and her mother had felt isolated and unsafe in the small, majority white town they had lived in before:

'We lived in the town centre. So, we were surrounded by nine pubs and there was a lot of nightlife and we didn't really feel very safe in the building. Because again, there wasn't anyone there that we felt like we could-, if something were to happen...We couldn't trust people in our building. [Now] I'm just in love with this house. It feels very safe. ... And our landlords are Asian are as well.finding the landlords and being in this community now was the best thing. The absolutely best thing that came out of the pandemic. Definitely.' (ME, F, 17 Birmingham). Young people talked about the role that locally based networks and closeness of communities played in helping their family during times of financial hardship in the pandemic:

'We are both [him and his brother] quite lucky in the sense that we know quite a lot of shop owners as well. So we could buy things that are often cheaper prices maybe, because they like to help the community and so on. So, because of the links that we have, and I think this is true for many communities, like we live in a Tamil community, and we generally have a connection with all the Tamil people, and quite a lot of them do own shops. ... So connections with, like, friend groups, or families and stuff like that they really, really did help us' (AI, M, 17, London).

Another participant in London described how their community supported their family through a period of financial hardship due to the pandemic:

'My mum was made redundant. So she didn't get furlough, and she was made redundant from the get go. So that's half the income from the family gone. And my dad had a cut in his wages as well. So financially, it was harder, not hard, but harder. We had to cut on spending, definitely. But at the same time, I think in BAME communities, I might be wrong in saying this, but in BAME communities, we rely on the community more than institutions, I think. We have strong friend groups, you know, I don't think food will ever really be an issue because we have family friends who feed [us] and we have a very good network. But in terms of institutional help, yeah, I don't think there is the any for BAME - financial obviously' (ME, M, 17, London).

The participants reported that they often felt unable to access or receive help from the government and state institutions and felt that community and family networks were their primary source of potential support. However, these experiences were not ubiquitous among our research participants:

'I'm glad these guys have had communities that they've had, I would say that it does depend on where you live. Where I live, I didn't even talk to my neighbours. So I don't think I had, really had that sense of community that maybe others had. So I think it does, not to say that it doesn't exist, I'm sure there are plenty, it but it probably depends where, I personally, you know, things like sharing food, there was none of that where I live. So I think it just depends where you are' (AI, M, 17, London).

Children and young people in low-income households, and where parents were not entitled to furlough for example, experienced the pandemic differently depending on how much support they received from their community. Community in this context meant neighbours, friends, extended family, church groups, teachers, and neighbourhood shop owners.

The impact of Black Lives Matter on racial identity and friendships during the pandemic

While young people were physically isolated from their friends and classmates during lockdowns, most remained connected online. The Black Lives Matter movement was a common theme among interviewees who described how it impacted their social networks and their understandings of race and identity.

Heightened racial awareness among young people

The global coverage of the murder of George Floyd and resurgence of Black Lives Matter led to widespread debates on racism and race politics at the beginning of the pandemic in 2020. For many young people, ensuing discussions around race and identity on social media increased their awareness of racism and everyday microaggressions within school, friendship groups and wider society. Many of our participants from Black and Asian backgrounds felt anger or rage about their experiences, but also felt increasingly empowered to speak out and to reflect on the racism they face in their everyday lives. The timing of the resurgence of the Black Lives Matter movement during the first lockdown also enabled a farther global reach. Social media engagement with Black Lives Matter and the politics surrounding the murder of George Floyd constituted a point of connection and engagement for many young people, who had at the same time found themselves cut off from their former everyday lives during lockdown:

'I think the Black Lives Matter movement and the incident with George Floyd, I think it affected me and, actually, quite a lot of people around me. So, there was a movement going on social media, such as Instagram. They would just post awareness and information about the Black Lives Matter movement. And I think that affected me. I was actually quite involved with it for quite a long time' (ME, F, 15, London).

Another young male participant, who initially saw the George Floyd murder as yet another case of police brutality towards Black men, was hopeful about the positive impact of social media in publicising globally the prevalence of police brutality rooted in racism:

'That's how I first saw it because before I saw it I thought it's just another really unfortunate thing that's happened, it's just another case of racism and there's not much we can do about it. But I seen the huge uproar that social media has given it and every one had seen it, it had been passed around globally, everyone was being notified about it, everyone was making a stand for it I thought that it's actually good because there is some sort of hope because it is horrible to just see someone that's treated just not as a human being as a piece of trash' (ME, M, 17, London). The Black Lives Matter movement was not only a moment of engagement and even hope for young people, but also impacted the way in which they thought about their own experiences of racism. In a focus group with young Muslim women in south Wales, for example, a participant linked reactions online about the murder of George Floyd and Black Lives Matter with her own experiences of racism from classmates before the pandemic:

'And many of them [friends] would call like me the "P" word and stuff like, I had a few white friends, and they were really nice people. They just, they used slurs that's all. But, I say that's all but it's very bad... But now it's like, it's more defensible, especially because like race is not talked about as much as we think...it's just little microaggressions, and like, sometimes many of us like look past that because we don't want to create a commotion' (AB, F, 17, Wales).

Participants experienced differing reactions from peers and their schools regarding the events surrounding Black Lives Matter in 2020. One Asian teenager in Newport explained that talking about race to peers was 'like arguing with a brick wall':

'It's like nothing goes through their head and it's just very hard to explain...people who argue that 'in the UK it's different... we're inclusive, we include everyone', it's like, 'no, you don't. Don't lie.' OK, compared to America, it's a big difference, but still, we still have racism here. It's just not as, like, I don't know, just here in the UK, it's very like on the low' (AP,F, 17,Wales).

Another participant talked about how conversations morphed into 'the oppression Olympics':

'It's like, who got oppressed more? It's like 'Well I got bullied for my freckles', but that's not the same...Because I got bullied for the colour of my skin, for wearing a hijab and stuff like that' (AP, F, 17, Wales).

Another spoke about responding when friends said 'all lives matter':

'And I was just saying to him that all lives do matter, but we're just putting the focus on Black Lives Matter because of the incident that has happened.... It was a very, very hard discussion, and I feel like it kind of turned into an argument, maybe, at some point. (ME, F, 15, London)

However, some participants also related positive experiences related to how Black Lives Matter was handled by their peers or in schools. For example, one participant who changed schools explained how her new school was more 'supportive and helpful' and promoted positive and productive approaches to conversations around race and ethnicity:

'People are diverse in, like, religion, which [name of previous school] wasn't because it's a Christian school, so it lets in only Christian people. But [current school] is completely diverse in religion, religious beliefs, and like, which evidently makes it more diverse then, like, people who are different races. But also, the teachers are still mostly white but there are few teachers who talk about their stories about being black or being Asian or like wherever they're from. And how that impacted them now and where they are now. It's more supportive and more helpful...My head of year called [teacher name], he does a Black Lives Matter reading club. And basically, you come and then you read different books by someone who is obviously black or of a racial minority. So we read Natives by Akala. Then we'll also talk about what's happening politically, because obviously there was a big thing with George Floyd and all the crazy things happening in America, so all the things happening here, and we'd talk about it' (ME, F, 17, London).

Another interviewee however was more critical of their school and the education system:

'I think that there are a lot of problems that pretty much stem from the education system where it's like, you aren't giving the options for people to have these talks, to discover certain things. You're avoiding teaching things about gender and race and ethnicity and sexuality and that's causing more problems' (BC, F, 18, Birmingham).

Undoubtedly the Black Lives Matter movement had a significant impact on many racially minoritized children and young people in the research, by providing a point of connection and engagement at the start of the pandemic which empowered them to think about and discuss their experiences of racism in new ways. While many participants encountered negative reactions to these discussions, productive approaches like the Black Lives Matter book club hosted in one of the schools demonstrate the positive impact that facilitating thoughtful engagement with race and racism in education settings can have.

Re-evaluating friendships

Young people reported an increased awareness about issues of race, which impacted their social networks and friendship groups. Reconfiguring friendships was a key process that affected how children and young people managed their emotional wellbeing during the pandemic. As a result of the unprecedented media engagement with racial justice issues, young people felt empowered to engage in discussions about identity politics. For some, their friendship circles expanded and contracted.

The process of evaluating friendships was a key theme in one focus group with male A-Level students in a London school. One participant explained how he ended friendships based on their responses to Black Lives Matter: 'People who said drastic viewpoints, I was able to drop them as friends. Even people who didn't say enough, in that sense. If you didn't speak out, at least a little bit, and show some solidarity, that was enough for me to understand what your viewpoint was' (ME, M, 17, London).

This process of shrinking networks of support was noted especially among participants aged 14–19. A range of behaviours were described by participants to justify ending friendships. These included friends who did not react at all and stayed silent about Black Lives Matter, reactions that showed they did not understand the premise of the Black Lives Matter movement, and statements disputing the extent of race discrimination in the UK. Friends whose reactions were seen as performative, gesture politics or virtue signalling were also at risk of being dropped. Black Out Tuesday was cited several times as an indicator of a friend's insufficient grasp of racism and inadequate response to it.

Some participants also had experience where they themselves were being subjected to the same process of being filtered out of friendship networks, and this extended beyond Black Lives Matter to other international political conflicts such as debates about Israel and Palestine:

'The more I was posting about it [racial politics], the more I was losing social-media-wise. And I was thinking, that's it. All of them. I just completely filtered out who I needed in my life kind of thing' (AP, F, 18, Newport).

One 17-year-old living in a mainly white town said she lost a lot of friends because, in her words:

'they weren't forced to deal with me in that school setting. And they had their all-white cliques and stuff. And it was a huge feeling of abandonment after the pandemic' (ME, F, 17, Stafford).

Conversely, another participant described how she increasingly felt more comfortable when she could spend time with friends from similar backgrounds:

'Being a mixed-race person, I have always kind of expected someone to say something about my skin colour or about the way I look...I have started hanging around with people who I have known for a long time they are, kind of, just a mixture of everyone. Like one of my really good friends is Pakistani and then one of my friends is Jamaican...and I feel much more comfortable in that group because I feel like I don't have to worry about anything because everyone is mixed as well' (ME, F,15, London).

Although some felt empowered by their decision to improve the quality of their friendships by filtering out unsupportive friends, for others the realisation that friendships had been shallow led to a double sense of loss:

'COVID plus Black Lives Matter made it very, very clear that it doesn't matter how long you've been friends with people.... If they're not willing to fight for ethnic minorities and, you know, queer rights and multi ... similar things, then there isn't the space for them. Because we were already socially distancing but they further distanced themselves from me. So it was a loss from a lot of things. There were people and a lot of young people who were losing family members but then they were also losing the friends that they thought they had' (ME, They, 18, Birmingham).

For some young people, the shrinking of networks merely meant unfollowing or unfriending on social media. For others, the decrease in online engagement also played out in person. Managing these tensions, which had otherwise remained hidden during everyday interactions with friends at school, placed an additional emotional burden on these young people. In some cases it became difficult for them to transition easily from home schooling back to classroom education and to switch from online to in-person interactions.

For many young people interviewed, experiences of isolation and support during the pandemic was closely connected to the political and social phenomenon of the Black Lives Matter movement which gained momentum at the beginning of the pandemic. This highlights how issues related to racial identity and politics have a tangible impact on the wellbeing of young people. Positive experiences of engagement with these issues in social groups and in the classroom have had a positive transformative impact. Although for some the phenomenon led to the loss of friendships and increased isolation, others found navigating through friendship groups and acquiring greater awareness about their racial identity as a positive. An increased awareness of racism led to many young people feeling more empowered and more able, for example, to call out behaviour they found unacceptable, thus solidifying relationships and strengthening friendships.

Wider support networks

The above sections have highlighted some of the key issues which affected children and young people during the pandemic, including struggles which they faced in the home and in education and the negative impact of isolation on wellbeing and mental health. The data also illuminated some of the ways in which young people were supported – for example through friendships and peer groups and by their families and local communities. In the following section, further examples of positive experiences of support described by interviewees, such as, from schools, churches, and youth groups will be discussed.

School support

A number of participants reported on their positive experiences of the support they received from their schools. For example, one participant in a focus group talked about how his teachers reached out to the students and their families in order to check up on their wellbeing:

'Our school as well, has done really, really, well. Like, um, they were like, the teachers called us, I don't know how many, how often, but they called us, like, our families a lot. Just to check on how we were, which was really, really, helpful.' (BC, 17, M, London)

Similarly, another participant of a focus group told us:

'On the mental [health] aspect... the school we go to definitely has a very good pastoral system for supporting students. Before, I used to think that it didn't, but from personal experience, and a lot of my friends, they did say actually, they didn't expect the kind of help that they got. But that might not be representative of other schools. I don't know what other schools are like, some schools, probably don't give pastoral support, but the school that we go to definitely does' (AI, M, 17, London).

Another participant described how his experiences of support during the pandemic changed his perception of his teachers:

'Yeah, I was probably a naughty kid. I didn't like the teachers, I didn't like the people around me, I just didn't like it. But probably after COVID, and probably my own self-maturity and stuff, I've gained so much respect for the teachers around me. I really understand where they come from, the help that they give. I can actually safely say that I really like the school, yeah, quite a lot. I think even stuff like [teacher name] her efforts. She started a diversity prefect. [...] Again, communities make change. Even stuff like school community, not even just race communities, school communities are very useful. But yeah, I think that's one of the good things from COVID, sort of, a feeling of unity.' (ME, 17, M, London).

Key to this participant's experience of feeling supported by his teacher was the fact that the school had introduced a diversity prefect, demonstrating how feeling supported is often connected to having the specific needs and perspectives of racially minoritised people acknowledged and respected.

Community versus government support

As described above, the local community including religious institutions provided support during the pandemic for many Black and Asian young people and families. For example, one interviewee told us:

'I feel like in my community, support came from the community itself, even in my family, because my parents are both key workers like I said. Like even though they were working and they were working full time, so my family and friends, like they came around at the beginning of lockdown. And they gave us like a whole bunch of food, because they work in a restaurant, and like they owned the restaurant, and so that helped. They did that for so many different people. My church came around like regularly, they gave like packs of food to everyone in the church, because I know that a lot of people in my church are from low economic backgrounds, and so they needed that support. So the, the support came from the community. And I feel like the majority support came from family and friends, like, mentally, a lot, like, the government can't support that. And I understand it can't really support our mental health as much as they [family and friends] can, because they have to sort out, like, economic issues. And that's understandable. But the support did come from friends mostly' (AI, M, 17, London).

He also mentioned the need for more communication between communities and the government:

'I will say that between the government and people, there needs to be a greater level of communication, because they should be working together to achieve a common goal. (AI, M, 17, London)

Other participants also felt much more supported by their communities than by the government. One interviewee felt that the government should be more involved in supporting community building:

'I find that institutions don't really understand the local environment, the local situation that well, they treat it quite generally to be honest. ... Whereas with community as well, it helps build relationships together. You understand your local area a lot more, it's just better for everyone as well. And I think that has been a problem with the government's response in general. They forget to realise often that community matters as well. So perhaps getting the community to do more, or helping with community centres and so on, building a sense of community in areas, that don't necessarily have as much community as they could. And this will help everyone regardless of race, even like BAME or white, like, regardless of anything, community is always important. So I feel like in general, the government should aim to build this sense of community in every, or everywhere to be honest.' (ME, 17, M, London).

One participant emphasised the crucial role played by Marcus Rashford's campaign for free school meals as key in improving the wellbeing of her family during the pandemic:

'Financially, it was, so my brother and I live in a low-income family. So initially it was quite a big struggle. Especially because my parents' jobs just weren't there anymore. So our regular stream of income was, again, quite minimal. But I would say that because Marcus Rashford did allow, did influence people to get free school meals is they were below a certain income bracket, I know for me and my mother, that really helped in terms of buying food. I know that that might not be relevant to everyone, but I think financially, the changes that he made did significantly impact how we managed our finances in the pandemic' (AI, M, 17, London). This quote emphasises that the interviewee felt support came from Rashford, who had campaigned for free school meals for vulnerable children in contrast to lack of government support. Young people and children identified local community and family networks as the primary source of support during hard times in the pandemic.

Youth clubs

Several young people also spoke about youth club support, including sports groups such as football and boxing, during the pandemic. For example, one interviewee described her experiences as a member of a horse-riding club in London, a charity partially funded by the government, an 'activity and youth centre where their aim is to provide a safe space for young people to come to and like give them an activity instead of like going on the roads and doing something that they shouldn't be doing' (BC, F, 18, London).

The participant praised the club's support during the lockdowns:

One thing that they really did well for me was that they kept in contact and they used like an app where they uploaded tasks that we could do or hosted games night and just really keep everyone together. It just felt like a really like close unit of people like coming together as one, because we all love to do the activity of horse riding and we love to like go into the stables or go to the horse club and be able to talk to the workers or the youth workers or the volunteers and the meeting was just great (BC, F,18, London).

Another participant emphasised the importance of more youth clubs supporting racially minoritised young people in general:

'I do feel like youth groups really help, like somewhere for, because there weren't any nearby at least not for me. I feel like an actual sort of youth club where people could go would be much better but also a lot of things shut down during lockdown too like the marketplace, which is like a mental health, it's like a drop in sort of centre thing' (BC,M,19,Leeds).

Similarly, another participant explained why they felt youth clubs are important and should be more invested in by the government:

'There's not the opportunity for people to succeed in the education system which means they don't get good jobs which means that they don't have a lot of money and turn to things like crime, which then puts them in prison. So there is a direct school to prison pipeline and people complain about youth violence, but if poor areas don't have the access to youth centres and they're not doing as well at school and their parents are having to work all the time and they don't have a lot of money, and someone goes, hey, I know this is

illegal but you know, you'll be able to put food in the fridge and look after your mum. People are going to go, I want to be able to do that, so I think it all needs to change but to do that, there has to be a change in government' (BC, F, 18, Birmingham).

The respectful relationships formed at the youth club were highlighted by another participant:

'I would like to say that throughout the days that the youth club is open, I really enjoy the bonding time between our fellow students and our staffwe get to meet new people and it's just very fun because there's a range of activities you can do here and the people are very respectful and they respect each other's choices and we often listen to each other and what we want' (BA, F, 14, London).

Youth clubs and centres were identified by these participants as crucial, not only to provide support and sense of community to young people, but also as an alternative to crime, which they felt was often perceived as the only option for struggling young people.

Therapy and counselling

As described above, many young people faced mental health issues during the pandemic. While some struggled to find adequate support, and others largely received support from their friends, others described positive experiences of gaining access to counselling and therapy services.

One participant explained how she received support for social anxiety following the return to school after lockdown:

So I'm seeing a counsellor at the moment for social anxiety that I have in big groups and stuff. I think it was noticed by my parents and by the school when we went back, even though it had been there beforehand and stuff. But then I actually got help for it when I went back and stuff, but I think I was told by my teachers when they came to speak to me about it that a lot of kids were struggling with social anxiety since being back. So I think that was one of the most difficult things. It [anxiety] definitely increased for being around that many people in school at a time. We have a safeguarding leader at our school. She was there for me a lot'. (ME, 17, F, London).

Another participant described their experience of receiving therapy, and emphasised the importance of having a counsellor with understanding of their own community:

'Because I've mainly had just white counsellors and therapists, I didn't really notice it until I started talking to more people who are black about mental health and that sort of thing. We had this sort of event at my college about three weeks ago, so pretty recently, and there were these therapists who were black and I was talking to them and I was like, they sort of understand where I'm coming from, I'm not having to explain myself, I'm not having to feel bad about what I'm saying, or like, it's like they don't, they won't understand and they get where I'm coming from, they get the difficulties of like the economic system and where I am at, they're passionate about it too and it's like that's what I, I never experienced that until that moment.' (BC, M, 19, Leeds).

This participant's positive experience of support through counselling was especially based on his experiences of talking to a black therapist who he felt was able to understand him, highlighting the importance of cultural competence and awareness within support services. These issues are further expanded upon in sections below which summarise findings based on our interviews with racially minoritised professionals, including counsellors and youth workers.

Summary

Children and young people faced many challenges during the pandemic, including experiencing isolation and mental health issues, struggling with schoolwork, and experiencing the impact of the pandemic on low-income households which in some cases meant suffering food insecurity. While some young people felt that they did not receive adequate support, others emphasised the role of family, friends, community networks, churches, schools, youth clubs, and counselling services in helping them mitigate some of the negative effects of the pandemic. Such experiences highlighted the importance of government investment in supporting the future development of community support networks and youth clubs which constitute key sources of support for ethnic minority young people in Britain.

The Black Lives Matter movement had a significant impact on many of the children and young people in our study, for whom it constituted a key moment of engagement (during the pandemic) with matters related to race, racism, and their own identities. While many participants related distressing moments of the racism they had faced in school and in their neighbourhoods, for many this heightened engagement with and awareness of race issues constituted a moment of empowerment and re-negotiation of social networks.

Parents

This section of the report focus on the parents' perspectives and is divided into three sections. These home-related issues impacted on both the physical and emotional wellbeing of families, particularly the mothers. A number of sub-themes emerged, all interconnected in relation to the home, family, and housing – poor housing and overcrowding, homeschooling, and having to juggle multiple roles as mothers. First, we discuss the effects of the pandemic on the home life of parents. Second, we describe incidents and the effects of increased public racism during the pandemic. Third, we address issues related to the need for support during the pandemic and problems related to access to services and help experienced by parents.

COVID-19 lockdown within the home

The sample consisted mainly of mothers and for many of them, whether in paid work outside of the home or as full-time homemakers, the bulk of the work in the domestic sphere fell to them. The home therefore played a central role in their lives and was significantly impacted by the pandemic. Difficult living conditions within their homes, exacerbated by the pandemic and lockdowns, was a key topic of discussion.

Overcrowding

Issues of overcrowding in the home were mentioned by several participants. The cumulative effect of poor housing and overcrowding often also led to further problems with the authorities, exacerbating stress and anxieties experienced by parents:

'She is single and she had her first baby, second, third, fourth, fifth and two of them are disabled, so they have four claims and all they're at home, including her, there's seven. So, the neighbour has started complaining about the noise because they are all at home. And every night they used to call the police saying there's so much noise happening at this flat and when the police come and they advise them to be quiet, also they call the Social Services, they've been involved with Social Services and the mother, she was about to go mad because there's nothing she could do about it.' (BA,F, London)

This quote highlights the impact of overcrowding, resulting in noise, complaints, neighbours calling police and social services, and the resulting difficulties and anguish for the single mother. Overcrowding also has a knock-on effect on the education and motivation of children during the pandemic. A community worker speaking on behalf of a Somali mother, for example, mentioned the impact of overcrowding on the privacy, wellbeing and education of her children:

'And she's got 2 adult children aged 18 and 20 years old, a boy and girl and the girls sleep in her room and the mother sleeps in her room, so the boy who is 17 years old sleeps in the kitchen. So, now he hasn't got his space to study and that put him off education, he hates education because he says I don't have a private room to do things, everybody is getting up to use the kitchen' (BA, CW, London).

Home schooling

Many of the parents in the study, struggled with new responsibilities related to their children's education during lockdowns. For example, a single mother drew attention to the strains of home schooling and how mothers had to juggle a multiplicity of roles alongside supervising and assisting their children with schoolwork:

'I think they were asking a lot from parents because we can't be just teachers, we're also carers, we're parents, we're other things too. A teacher teaches for a certain amount of time without having to wash clothes, iron clothes, do the cooking. The dinner ladies do the cooking. But these teachers at home are, we also dinner ladies too. We're the midday meal supervisors. [...] So I felt that there was a lot that they overlooked when they said home school learning.' (BA, F, London).

A Bangladeshi single mother recounted how she found home schooling particularly challenging due to her difficulties with the English language, having no internet or laptop and not receiving adequate support from the school:

'It's really hard you know. Home schooling that was very hard. This time I cry sometimes because you know, home schooling children, you know, I don't know internet, I don't have internet, what can I do. I ask them, they give me one tablet, no internet, I've got the gift internet you know, but they gave us videos and to watch the video and then to write it. My son is crying, I cry as well. I say look I'm getting crazy now. You don't understand anything from the video, I don't know real English, now what can I do. I talk to his teacher. He just said don't worry, whatever he understood he needs to write it.' (AB, F, London).

Like some of the young people in the research, several parents felt that teachers were not supportive enough. For example, one Somali mother was critical of the online support provided, finding it more prescriptive than interactive:

'The teacher was always there teaching them, they were online, but they were not getting much support like they're used to, like asking for a question to have more time, online it was just do this, do that by the end of the day.' (BA, F, London).

The same mother goes on to talk about her anxiety about her son's GCSE exam results and whether the teacher's predictions would be tainted by biases about personality rather than ability:

'I was so worried, yeah I was so worried because he's a very polite child, he works very hard and I was expecting him to get a high grade when it comes to the exam and when I heard the teachers will predict, I said oh my god, they may predict him low because he's a very quiet child. They may see him you know, they may not see his talent. '(BA, F, London).

Caring responsibilities

Caring responsibilities also featured in many of the discussions, highlighting the pressure which many mothers felt to perform a variety of roles. For example, a single North African mother described the numerous caring responsibilities which impact on her day-to-day life:

'Up and down at the moment with-, two of my children have disabilities. They both have ADHD, dyslexia, auditory processing disorder and dyspraxia, so it's been a really big challenge for me ever since they've been young. I feel like I'm

constantly in a battlefield with the schools, trying to get them to understand their needs and trying to get them to support the needs, and help them develop as best as they can. So, yes, so that's been a struggle. I also care for my two parents who are living in the next block not that far from me, so they're in their 60s, 70s. They're both retired and homeowners, so I look after them, I look after my kids... All the responsibility falls on me being the oldest.' (BA, F, London).

Another mother described her difficulties when she had to care for her mother-in-law who has dementia and had a stroke at the beginning of the first lockdown:

'And there was no medical help, nothing. And somehow we brought her home. But it was like a nightmare from day and night. Because they couldn't help us. And all the housework too, it was quite hard. It was a really bad time that, last, nearly two years. (AI, F, Leeds).

Parents who had caring responsibilities, for children with disabilities or other family members such as parents, were under particular pressure during the pandemic to meet the needs of those they were responsible for in the face of less support from schools and other institutions, while also fulfilling their other responsibilities.

Gender roles

With regards to gender roles, the finding suggests that heteronormative assumptions about women's roles in the home left some mothers bearing the greatest burdens related to family during the pandemic leading to increased levels of stress.

One participant had this to say:

'... it's only the woman does the housework, most of the majority and the cooking, she is the one who runs the house, but now he's at home, it's been difficult. There's a lot of arguments.' (BA, CW, London speaking on behalf of parent).

Another participant made the following observation:

'But now he's at home, he's picking up everything, why the dishes are not clean, why the kitchen is empty, why the house is not tidy. What are you doing sitting here doing nothing? He's just picking up on everything and he has never seen it before' (BA, F, London).

Fear of going out

Another sub theme to emerge was around the fear of going out and exercising, which impacted hugely on participants' physical and mental wellbeing. This was exacerbated further by the sensationalised media coverage which emphasised the greater number of deaths in racially minoritised communities, portraying ethnic minorities as carriers of COVID-19 leading to stigma and stereotyping. As a result, many participants were afraid of leaving the house - because they were afraid of catching the virus and feared racial abuse or increased targeting by the police. One mother, for example, told us:

'No, we didn't go out to exercise, no exercise because we were so scared if we catch something'. (BA, F, London).

'When it was locked down, and they were showing on the TV, like, how many, they were telling us news about the cases. And they were saying people, the Asian and Asian community, like, they are really affecting, it scares us more, when we see the TV. I have personally, it's affected me as well.' (AP, F, Leeds).

Another told us about the sense of fear her and her family experienced during the pandemic:

'We were waiting, everyone was waiting. When are you going to die next? (BA, F, London).

'I was very, very scared, wasn't I? I wouldn't even let him [her husband] come near me. Because he works in a restaurant, this is how frightened I was, he works in a restaurant and obviously he's mingling with customers and he was going out and about and he was still seeing his family members...it was really scary and I was just really, really worried, maybe you could say, to an extreme.' (AB, F, Leeds).

'It actually really impacted on my everyday life because I used to walk every morning, every day, except Sunday mornings. I couldn't do that because I was so frightened to get out of the house and that really affected me, physically it affected me because that's a source of exercise for me to keep fit because I can't go on the bike or thing like that. Because of the fear of catching something if you get out of your house I couldn't do that so that really affected me both physically and mentally. (BA, F, Essex).

These quotes capture the fear around the virus which was exacerbated by the media reports around higher rates among ethnic minority communities, and their own personal experiences of bereavement.

Bereavement

Fears about going out and the negative impact of the pandemic were further intensified by the experiences of losing loved ones.

One mother said:

'I think, for me, I was scared but I was more scared for the family and especially my mum who is unwell. I think they started to release data about people from the BAME community dying off and having health issues, especially the elderly, so my mum was the one to go first. So actually, we were all very worried for her.' (AP, F, London).

Another had lost several family members to COVID-19:

'Yeah, my brother has died, my mother. Yeah, that's horrible here, COVID-19.' (BA, F, London).

In a joint interview with a father, mother and their child, the father shared his experience of bereavement during the pandemic:

'But it was profound change actually because I lost a very close uncle. He actually died of heart attack. He was worried. He didn't go to the hospital and finally when he did it was too late......And none of us could go... So he passed away and then seven months later his cousin passed away, another uncle. Again we couldn't go and at the beginning of that I had an uncle in Preston passed away, couldn't go, you know. So there were a lot of deaths in our village here and in Bangladesh where we couldn't gather to express our feelings.' (AB, M, Leeds).

As in the case of the father, many people from the Black and Asian communities experienced bereavement both within their local communities and their families and social networks abroad, often unable to travel to attend funerals.

Experiences of racism

Many of the parents interviewed described experiences of racism in their neighbourhoods and in public which they felt had increased during the pandemic, as well as the negative impacts of media portrayals of ethnic minorities during COVID-19 and government measures which they felt particularly targeted them.

'We, I know we black minority, black people and minority people we are not well treated during the COVID. [...] Like one professor said, that the black and the minority group, we are faced with two types of COVID, one is COVID the second one is discrimination.' (BA, F, Essex)

One participant described how she felt that she was being stereotyped because she was Asian, particularly due to the public narrative that the Asian community in Britain had higher rates of COVID-19 due to the prevalence of multigenerational households:

'On this one, not all the Asians live in extended family format. I did, up until I was 19. And then everybody just got married and off into their own houses, and to brush everybody with the same brush saying 'oh all the Asians live in extended families. Their fault.' I don't think that was very fair. Because I don't live in extended family. And to say that I was a threat or to count me as a higher threat because I'm Asian and in an Asian family therefore I am a higher risk, I don't think that was very fair to say. I did find that it was brushing everyone with the same brush. If you're Asian, you come from an extended family, therefore you're at a higher risk. But I didn't really agree with that.' (AP, F, Leeds).

Another participant in the same focus group also felt that she was being stereotyped:

'I did feel that they were targeting the Asian community. I mean, if you're going to catch it, you're going to catch it, regardless. I don't think it's anything to do with the colour of your skin. Like you say, the extended family, yes, it was thing. But if you go down, if you think about siblings, we all have our own homes. I mean, the families aren't as big as they were making out' (AP, F, Leeds).

Several participants also raised the way in which a lockdown coincided with Eid with no warning, feeling that this was a deliberate decision and that the government would have acted differently if the beginning of lockdown had coincided with a Christian holiday:

'Can I just say something that I felt, just before, just before when the families were all excited to celebrate Eid. And just, just the previous night it was announced that there was going to be a shutdown. And I just felt that was targeted towards us. [...] And it was quite different in Christmas, wasn't it? They had, like, you know, they opened it up. But then because of the pressure, Mr. Johnson had to do something. So he did still kept it open for three days or something. But the same rule wasn't applied to the Asians and the Muslims. So yeah, I was a bit, really disappointed. I mean, it was clearly, there were, it was like saying, 'yeah the Muslims, Asians are going to spread it, you know, let's do something here as soon as, you know, let's stop them from meeting families.' And it was like, almost like someone's telling us not to meet up. And the excitement went. I saw it in children's faces.' (AP, CW, Leeds).

The same participant also felt like the naming of the variants led to Asian communities being particularly targeted:

'And then the Indian variant, they kept saying the Indian variant, and that was like, you know you're separating communities here, because our community will be targeted, if you give a name, you know. And then they changed that to something, Delta variant, didn't they. But the damage by then was already done.' (AP, CW, Leeds).

'It all starts with, I think the media, because they are all bombarded with all that information, like whatever happened in India as well, because there were a lot of numbers. And here, after some time, they stopped showing the numbers. I don't know if you remember? They stopped showing the numbers as well. So they just targeted like Asian and Indians as well. If you know I mean. And people were looking at us as well or them, they the people, like from India, they brought it here, and you should stop them coming here and all that. That is like racism as well, at some point. But this, if you go out and they still look at you the same thing. 'Oh, you're not wearing masks. You were the people who brought it here.' (AI, F, Leeds).

While many of the children we interviewed felt positively about the Black Lives Matter movement which gained recognition during the first lockdown, one of the mothers interviewed described how it highlighted the hypocrisy of people like her colleagues – the way they reacted to the movement given their past dismissal of her own experiences of racism:

You know, my own son being kicked around by the police and he was in his school uniform and people don't want to hear any of that. Um, and people just jumping on the band wagon. [...] You know, my colleagues at work, some people at work would be doing, would be coming out with their children about Black Lives Matter and I just think, you know, you wouldn't speak to me when I was...when I was in the office so you know it's a bit of a hypocrisy.' (BC, F, London).

Access to support

Many participants described the increased financial struggles they experienced during the pandemic such as job loss or not receiving furlough, as well as difficulties experienced in accessing support from state institutions and employers.

Need for support

Many of the parents told us about their financial struggles during the pandemic, to the extent that they were sometimes struggling to pay for food and bills. In many cases, participants felt unable to access any support. Several parents spoke about job losses in their families which resulted in financial struggle:

A lot of people lost their jobs. Because if you are scared of going out to work then you stay at home, and it's not everyone that was on a contract. Some people were on zero-hour contracts. Zero-hour contract is when you are home, you're not earning anything. Pay as you go. You come into work, they pay you, you're not coming in, you're not getting anything. I was kind of, that's, I was like zero-hour contract, that category. And my husband is a construction worker, which, they shut them down. But I had to keep going because the bills had to run, we had to eat, we had to, not because it was fantastic.' (BA, F, Essex).

'But during that time we were trying, we are tight on money, and it was so bad because I lost my job. My job, I lost my job, it couldn't, it wasn't, I couldn't afford to pay bills, my phone was broken, I couldn't contact anybody. I could not call anyone.' (BA, F, Essex).

A Bangladeshi mother, a refugee, mentioned food shortages and having to fight for free school meals for her child. She felt that racial discrimination, based on her accent and inability to communicate well in English, compounded these difficulties:

'You know like by force I tell them, look I'm entitled. I'm getting universal credit, everybody getting this, everybody getting the free school meal, please. After they are just realised, yes, I'm getting it. After that they say sorry, oh we don't know. I say look, I'm a single mother, I need more help. Some people they don't need help. They have family, they have husband, they are working, but they're getting the benefit and for me, no, why? Because I don't know English very well, that's why it's a problem. (AB, F, London).

Another mother we interviewed described her struggles and need for support during the pandemic:

Normally when we are able to go to church there are people contribute, you know they bring in stuff like, not perishable, like tinned foods, soups and things like that so those were, like vegetable oil and things, people really needed rice so you go there and pick, you just have to sign your name, but we couldn't do that because church wasn't opened. We couldn't go to church and then you were losing family members every day and I lost so much, so many people went [died] my family members. But what could I do. And that really depressed me. (BA, F, Essex).

Pandemic-related employee support

For many families their household income was reduced due to COVID-19, often disproportionately impacting ethnic minority people who were often denied furlough or access to workplace modifications to protect. Participants described this as discriminatory and found the process of accessing support frustrating. They felt they were being treated differently to their white colleagues in relation to the type of support they were offered.

For example, one woman working in a public facing role was not given a screen to prevent transmission of COVID-19 between staff and customers, unlike her white colleagues. When she pointed out this different treatment, her employer dismissed her complaint:

'They [the employer] now intentionally refused me to see customers at the screened desk, so I see customers without the screen and face-to-face...But, someone, there are two people actually, in the same position as me, asthmatic everything...But guess what, person is white, those two are white, I'm Black, and they get to see their customers through the screen. I brought it up, '[name] don't start with your racism thing, we are not being racist'. Yes, that's what I was told' (BA, F, Essex).

Other women shared similar experiences of work-place race discrimination. A participant described receiving only one month of furlough payment after contesting the company's initial decision to give her none, while a much younger white colleague with the same health condition (diabetes) received 4 months of furlough payments:

'A 39-year-old somebody, to somebody of 73 years. So we are not well treated, and we are not equally treated, there is racial discrimination, and it was this COVID that opened the

face of everybody to this. And there is a lot more government should do. They are just saying 'equal rights, equal rights' no. The Black people and the minority groups, we are not having equality. They are just using us and there is a lot the government has to do' (BA, F, Essex).

Participants' experiences of receiving insufficient support at their places of work exacerbated negative experiences during the pandemic and sometimes left them with reduced incomes. Participants often felt that their lack of support was based in racial discrimination, based on being treated differently from their white co-workers.

A Black employee working as a carer also described how Black carers were being treated differently by the employer during the pandemic:

'I know so many white girls that refused to go to work during that period, they never got a query, they never got sick notes, they stayed at home even if they don't get paid, there was no fuss on them but all the black girls were threatened to be sacked if they don't work and if they worked they don't keep them on their normal duties, they pushed them where you know [...] How can a Black girl leaves home every day to go to work and she's crying, because of fear of what she's going to experience at work, it's not healthy. [...] There is one rule for the Blacks and there is another rule for the whites. (BA, F, Essex)

She goes on to describe how Black colleagues were being forced into unsafe situations where they contracted the virus and died:

'They pushed the Black girls there and the white girls would go to where they feel it's more safe of the COVID and then most of, so many of the Black girls died. They died. A few of my friends were on the news that died'. (BA, F, Essex).

Accessing health services

For many participants the pandemic made accessing health support even more difficult. All face-to-face health services were removed due to COVID-19 which meant that GPs implemented a telephone triage to allocate appointments based on urgency. Many participants felt that telephone assessments differently impacted people who have English as a second language, and gatekeepers asked questions about ethnicity if the caller's accent did not sound like they were white British.

One participant's baby accidently ingested air freshener liquid during lockdown. She called 999 and was asked a series of questions. She went on describe how she felt the focus on her ethnicity rather than dealing with the problem at hand was a racial discrimination:

"It's [discrimination] a little bit like our everyday life, it's a fact, it's a reality, racism is upon us. So yes, it's more difficult

for us because we have black skin...So you are different. And that difference is like, I don't know, I don't know how express it that...Sometime in our life, we always feel like discrimination. It's difficult because maybe you know, maybe you see everybody with the same eyes, but the thing is, it's not possible to make everybody behave as you. But like I said, it's difficult, difficult to manage when the institutions like the police, or council or clinical or GP, they use this one [skin colour]... When racism comes from institutions, it's a little bit more difficult to understand (BA, F, Cardiff).

For some interviewees there was a fear around accessing support services due to previous negative experiences of discrimination, and impacts on residency applications, or the possibility of losing their children to social services. The importance of advocacy for racially minoritised families who feel intimidated was underlined by a mother at an empowerment group that she had joined:

...think of someone who cannot fight like I will, you will just be there, unemployed, suffering and everything. And there was a time things were very rough and people advised me 'go to job centre, go and meet them, tell them you need help or Citizens Advice.' What they told me they said, 'we can't help you because the visa you have says no recourse to public funds. But we can take your children away from you.' I said 'Are you insane?... I say 'you know what, I better stay on the streets and beg for food than you take my children away from me...You are just clearly intimidating me and taking advantage of my colour, and doing all sorts of things, which is very wrong'. Like she [other focus group participant] has said, this [racism] will never stop, it will keep going if we don't have voices to speak for us, if we don't have people to back us up. There were stories, I've heard of worse stories than this, of things that happened" (BA, F, Essex).

Many parents were unsure about accessing support that they were entitled to because they were worried about the judgements that would be made about their parenting. This was echoed in an interview with a social work academic who reflected on her time supporting BAME families in Wales:

"So there are so many barriers, there are individual, structural, there are barriers in terms of confidence, people are scared to access social work support because they don't always realise that it's not just about removing your children" (AP, F, Cardiff).

One participant described how her friend who was at home caring alone for twins, one of whom was disabled. She had no contact with anyone other than phone calls, which she stopped answering. Although worried, no one was able to visit in person due to the lockdown rules. The only visit she had was from the police, by which time one of the children had died. The mother was charged with manslaughter, detained at an undisclosed location, and the surviving child placed in care.

"I think that is still one part of the pandemic that will never leave me. At the end of the day, I didn't get to see her. I didn't get to hear anything until the police came and they told me everything. But because I'm not family, I'm just a friend, they didn't allow me to get involved at all... I understand the fact that one of her greatest fears was the police or Government or anybody not to take the kids away from her" (BA, F, Cardiff).

For many of the participants there was a hesitancy around approaching statutory services based on past interactions that variously involved overt racism, microaggression, false assumptions and fear tactics which made some parents feel that they were not entitled to services.

Positive community support networks

For many of our parent participants most of their support came from the community; they were appreciative of the more selfless, non-judgemental and empathetic support received from community and religious networks at grassroots levels.

This participant was grateful for being introduced to a black women's group:

And I was told I can't get vouchers to feed the children. And there were a few people in that situation. So these are the things that happens on a daily basis to us. Thank God for [the] Black community that we support each other, thank God. I for one if [CW2 name], if my lady here (other participant) did not introduce me to [CW2] I think I would have suffered a lot during lockdown. I would have suffered a lot. Because my employer refused to pay me, for 3 months, no, not for three months, from August to November. (BA, F, Essex).

She also mentions the work the founder of the group did around vaccine take up:

So she, we had, she had a few talks advising them, letting them know the consequence of not getting it and, not forcing anybody but just educating them about it and after that I know every single woman there, very few have not taken their vaccination but the majority of them have gone to get their vaccine. I've got my second one.

Another mother mentioned her Church's support:

Well, I won't lie to you, because I wasn't working, my daughters all managed to pick up little shifts here and there, but they couldn't because of the pandemic so the church members, women in the church do some shopping and they'll drop it by the door (BA, F, Essex)

One participant mentioned how she volunteered to help people out with shopping during the lockdowns:

I was doing shops for people, shopping for other people. So for me, I was I was going out, I was walking a lot. And sometimes if I was doing shopping people would put on Facebook, can you do me a shop? and then I would go back, go out. So I was meeting people and talking, and some of them weren't able to leave their homes. So for me I was, I was out and about more, myself personally during lockdown, then I would have been. ... (AP, F, Leeds).

Another participant described how local people were willing to break the rules to support family and neighbours with food and connections:

And we were not allowed to see each other but some of, people, they broke the rule, they made food for each other and they're leaving it outside the doors, on the doorsteps. It was nice. It was nice to look after other family members. That's how we just connected with each other. And on other hand, I've seen a few of my family friends, they have extended family, but they have family troubles as well between lockdowns. Families are separated. Arguments, domestic, all those things happened. Good things happened as well in our families. They get together more than before, but domestic happened at the same time. And families, a few families they are separated in the lockdown. So that effect on people, how people moved in that way (AP, F, Leeds).

Summary

For many of the parents in our sample the pandemic was particularly difficult for them because of having to juggle many different roles in unprecedented circumstances. Many of their everyday struggles were compounded by the lockdowns. Racism and racial discrimination were often described in relation to accessing support – be it food, health, employers, social services or schools. For many the racism was amplified in the pandemic situation. The most support came from within their communities, wider family and friendship networks.

Professionals

In this section we discuss the findings from interviews with Black and Asian professionals and practitioners working with children and families in community, education or social care settings. The professionals we spoke to highlighted the importance of intersectionality when deciding on policy and practice. They called for 'moving beyond Western Eurocentric way of thinking, white privileged way of doing things' to constantly questioning knowledge and assumptions - doing 'more active listening and hearing' in order to enhance 'crosscultural competences'. The professionals drew attention to a number of areas of concern that had been further exacerbated by the pandemic. Detailed below are some of the overarching themes. Linked sub-themes have been created to further highlight the numerous areas within which inequalities and social injustices arise. There is a constant cross-cutting of themes between the sections, which act as a reminder of the multi-layered and nuanced nature of inequality and racism.

Stigmatisation and Stereotyping: Discrimination in terms of race, ethnicity, religion, gender

This section shows how on many different levels the support and services that Black and Asian people receive is tainted by biases and stereotypes which are deep-rooted in systemic racism. The various sub-themes highlight some of the key areas mentioned in relation to stereotyping and stigmatisation.

COVID-19 and the pandemic

As a result of the existing inequalities in society, many Black and Asian families were hugely impacted by the pandemic – lower socio-economic status and/or the nature of their work meant many were key frontline staff who worked on transport, in hospitals, in care homes, having to go out and mix with others, unable to claim furlough – often without adequate PPE or protection at the workplace. In many cases, poor housing and overcrowding meant if one person caught the virus it was impossible to isolate and prevent the spread, leading to increase in deaths and bereavement. This however was often translated by the media as due to a high prevalence of multi-generational families and people not adhering to the lockdown rules, leading to many blaming ethnic minorities for the spread of the virus.

'It was just a stigma thing it was the way this thing was racialized, particularly at the beginning, which wasn't really acknowledged anywhere...' (BC, SW, London).

'and then also the way the Muslim community was vilified I'm going to say, during the first lockdown, you know. We were vilified, seen as the super spreaders. I mean do you remember those messages for Eid......exactly! But then the white native people who were going to the seaside or the pub, they were not seen.' (BA, CW, London).

'Because I know I was getting a sense of, you know, in the early part of the pandemic, I suppose, there was almost a sense that because the figures were high in terms of the death rates for Black and Asian communities in particular there were sometimes a sense that people were fearful of the Black and Asian community, again...' (BA, CW, London).

These quotes illuminate the ways that Black and Asian people were racialised and 'othered' largely due to media coverage during the pandemic. Misinformation around ethnic minority communities led them to being victimised and seen negatively among wider society. They also draw to the fore discussion around whiteness, and the privilege of being invisible whereas Black and Asian people, by virtue of visible difference, become the easy target.

Adultification of Black children and young people

This sub-theme also draws on the racist stereotyping rooted in colonialism and slavery that exists around Black children and young people, particularly young Black men and institutional perceptions of them as adults.

The sections below focus on some of the key areas mentioned – for example within policing and within the education system and schools, where social and academic marginalisation takes place and achievement is low. This racial and gender stereotyping was further exacerbated during the pandemic, particularly in relation to stop and search and issuing fines under the emergency COVID-19 regulations.

Policing

These professionals working with Black and Asian young people highlighted how police treatment and stereotyping of young people particularly Black young males has become normalised within the community:

'They just clash all the time. We're trying to break that down. But it was discussed and I think a lot, especially our older ones, in terms of police brutality, I think it's come to a stage where they just normalise it now. When you bring things up such as George Floyd, they're like, yeah, that's just the police, that's just how they are. So, we try to challenge them and try and engage them, hold on, this is not normal, this is not how people should behave' (BA,YW, London).

'But we've known for many, many decades that it's been going on, we've just put our hands up to it because I think we've normalised it. There's a lot of people that haven't normalised it or even understand it. If I said to some people today that when I was younger, I got stopped every five minutes or I used to get stopped regularly, they're like, oh my goodness, woah, I've never been stopped. No, because maybe privilege or you're not seen, you're invisible but I'm not.' (BA, SW, London).

This professional highlights the issue of adultification – racist practice that means Black children are often treated as if they are older, less innocent; treated differently from others in their age cohort.

'only other thing I was going to raise was that, you know, now we are opening up a little bit there's still, and there has been even before the lockdown, the issues around stop and search for young black people and particularly what I've also noticed here in terms of working with some of the social workers is the adultification of Black and mixed heritage youth in particular in that, you know, I don't know, a 14-year-old person recently got arrested in the Shopping Centre for, shouldn't have done it but, the reason he'd done it wasn't explored enough' (BC, SW, Sussex).

This practitioner also talks around the difficulties of being from a racial minority group, fear around policing and the double standards based around race:

'one of the things that I've noticed is that isolation of teenagers who can't be part of their social group anymore, you know, that happened in January/February/March, right some didn't really get much attention, right, particularly and actually at the sharp end you're part of BAME group as well when you being out and about has a different meaning to maybe a white child being out and about as a teenager.'

What these quotes highlight are the police attitudes towards young black men and the way it has now been normalised by the community; how the expectations of this demographic of young people are formulated and the cumulative destructive nature of this victimisation.

School environment

Many professionals felt that schools needed to make changes to tackle the stereotypes and biases around certain ethnic minority students.

One Black female teacher problematised the stereotypical assumptions made about ethnic minorities and their coping mechanisms:

'and you have to remember typically the stereotypes of the Black, and Asian people is they're strong, they can get on with it, they can get by. So it might be that consideration hasn't even been made because well they're alright anyway, or they're used to putting on a brave face so.. ...we can't even tell if they're okay. Yeah. They might be struggling, but we don't know, because that is a stereotype and we're living up to it now.' (BC, teacher, London).

The same teacher also drew attention to the intertwining of poverty and race, or classism and racism and how this impacted a child's ability to progress particularly during situations like the pandemic:

"Yeah, and so this is where I think the debate gets confused in terms of whether racism has an impact. I think it's more classism and those two are always intertwined. The poorest people tend to be the minorities. Look at that, what is the issue for that, because the people who were in independent schools were thriving. They...all the children were sent home with an iPad or had their own. So it's like they didn't lose out because they already had what they needed at home to continue, essentially, a normal curriculum. Whereas everybody else we had to make allowance for the fact that the government said they were going to give computers and still some schools are waiting for those computers. Even though we've gone back to school they haven't had their allocation. So, they are behind because they are poor' (BC, teacher, London). One practitioner mentioned working with social workers and had noticed an increase in exclusions over the pandemic:

'I would say what I've also seen there's been an increase, if you like, of issues brought to my attention about black mixed heritage children in particular which is where I am right now, being excluded from school, particularly where there are new diversity issues and I personally am having discussions about if there were similar behaviours with white children why are they remaining and Black children of mixed heritage are being excluded' (BC, SW, Sussex).

This draws on the stereotyping and double standards in both education and among services working with Black children.

One male social worker working mainly with ethnic minority fathers, mentioned how schools needed to change to incorporate more inclusive practices:

'I think school has an important role to play and some of the schools when it comes to ethnic minority groups the culture within the school does not reflect the ethnic minority groups that attend the school and that is very obvious and again sometimes school staff and teachers and Head Teachers often treat ethnic minority people as they've got nothing to do with the school or their child's life in the school...' (Arab, SW, London)

Double standards

What this section highlights is the deep-rooted institutionalised racism that values life, loss and trauma in one group as more significant than in others – the lack of universal empathy for all hardship as being equal. It adds to the discussion around stereotyping and historical racism rooted in racial superiority and the colonial mentality.

Trauma, loss and bereavement

With the high numbers of deaths and bereavement in Black, Asian and minority ethnic families over the pandemic many professionals were struck by the lack of any mental and emotional support provided by the services for these communities over the period:

'there has to be a little bit more listening so I think one of the things that needs to happen here is we need to hear more of the voices a bit more about what's happening because it's just like come on, you know, if that amount of people died, with any group of people, you know, I've hardly seen anything, anywhere, where you get a sense of how people are managing and how they're coping with that... they've lost their grandparents, they've lost their parents... they've lost seven people in their family' (BC, SW, London). 'I don't think anyone's properly looking, I mean, I can say maybe it's the same for white families, but I think when you get a Black family I don't think services - whether it be Police, Children's Social Care, Health, whatever it is, is looking in the same way at the trauma experienced by Black and Muslim and other diverse ones but particularly the Black and Muslim and Asian families'. (BC, SW, Sussex)

'Assessment has to change. Need a bit more listening. Especially hearing voices in relation to bereavement over the pandemic'. (BC, SW, London).

The views expressed by a number practitioners highlight what they perceive to be double standards that exist within the various systems and structures in society. The dearth of help, support and mental health care needed during the pandemic, particularly by groups of Black and Asians who suffered many losses within a family, was missing and non-existent.

Healthcare

The double standards in terms of healthcare provision were also highlighted as deeply problematic, often rooted in wider stereotyped rather than treating people on an individualised basis.

'Services for Black and Asian Muslim families are not looking at the relevant issues in the right way – for example, a white mother is offered therapeutic services but a Black mother will be offered drugs for.....' (BC, SW, Sussex)

She explains further:

'We don't...it's as if we...we can maybe see there's a problem but we kind of almost dismiss it - this person's aggressive or they're bad, or well they're Black and they've got mental health problems, just give them this, or there was a fear around working with Black communities at times particularly where there might have been domestic violence or aggression.' (BC, SW, Sussex)

Mental health/wellbeing and breakdown of relationships

Some of the professionals who worked closely with families mentioned the impact of the pandemic on family relationships, which sometimes led to domestic abuse and violence. The factors contributing to this were often financial difficulties, overcrowding within the home with the whole family at home, distinct gendered roles and cultural difference:

One social worker stated:

'He hadn't worked for about six or seven months so there's a lot of financial pressures, I was having to give them food bank vouchers and there was a limit to how much I could give them so that...there's an element of being quite embarrassed culturally, so they were from a Bangladeshi background so not being able to ask for support and being quite embarrassed asking for food bank vouchers. So there's a lot going on there but there's like full blown domestic abuse going on in that scenario because they've just been at home, the two of them and her mental health became worse because she was very isolated, not able to go out, he's not working, he's got financial pressures.' (AP, SW, London).

Another community worker mentioned the strains mothers in her group were facing:

'The kids were at home. Mums were like constantly cooking, cleaning, constantly, no break whatsoever.Mums even said to us you know, even for the husbands to be home is even harder. I mean normally the husband would have a certain time and they would go to work.'....And you know, the wife would have the house with the kids and stuff, but there was none of that space either, so everything was just cramped up and constantly cooking, cleaning was happening, so there was a lot of pressure on the female. I mean because there were some arguments happening because, over finance as well because they were running out of money, they were running out of money because the husbands weren't earning any money and stuff like that. (AB, CW, London).

Another community worker also spoke about support provided for vulnerable women including those subjected to domestic violence. Providing food bags that they had to collect in person, giving them an emergency code and starting an online course assisted them cope during the lockdowns:

'Then because there were so many food banks, what we done is just concentrate on vulnerable women. They don't have to go to the food bank and queue for hours, so we had our criteria. With no access to public funds, woman who are suffering with domestic violence, we knew there were cases of domestic violence and woman who were also waiting for the universal credit money to come through, so we said if we prioritise those three groups....

She further explains:

'For the mother who was suffering from domestic violence, she had to come in. private space so husband or partner who will happily let her out to bring back the food. She will come to xxxxx (name of org) then she can have access to everything. Private space, support, emotional, financial, whatever she needed.' (BA, CW, London).

In all these instances the professionals had close contact with the families and in many cases provide food and emotional support where other government agencies failed. They provided more culturally sensitive, empathetic and often empowering support.

Improving cross-cultural competence in support and practice

As insiders and practitioners of colour, all of our interviewees highlighted the urgency around change within support services. Some of the key areas mentioned were:

- recognising individuals' needs and circumstances on a caseby -case basis
- importance of cultural sensitivity
- tackling stereotyping and unconscious bias/racism
- stepping in to fill the gaps between the home and access to services and support from social/welfare services.

Many of the practitioners and professionals who worked closely with Black and Asian groups spoke of the need to tackle the biases, stereotyping and stigmatisation of these groups within the existing support systems and structures which had exacerbated the impact of the COVID-19 pandemic on many different aspects of their lives.

This professional was keen to highlight the need for each case to be look at on an individual basis – to find the root cause and not treat it as an issue or behaviour framed by a stereotype:

'often there has been a real big focus, particularly when you're working with Black and Asian families, on the issue, the behaviour, and not enough on the cause, not enough on why the...these issues are arising and that's kind of a bit part of my role as anti-racist lead is also to get the social workers to not just basically to focus on what sometimes are the stereotypes on Black and Asian and Muslim families but think about why some of these things are happening.' (BC, SW, Sussex).

Again, a Black social worker raised the issue of stereotyping and racism surrounding groups of ethnic minorities and the lack of person-centred judgements and solutions:

'So, there's a stark gap between legislation, policy, procedures and the reality. Something is disconnected so, the people who produce the legislation and people's rights and responsibilities are in legislation. Policies and services great, great, great but then on the ground, it all goes crazy. They're resorting to outdated stereotypes, making assumptions based on stereotypes, they're not adopting a person-centred approach to assessment and looking at that particular citizen's situation. (BA, SW, Wales). As one practitioner mentioned what lies at the heart of many of the problems is the white privileged, Eurocentric approach to dealing with people, often with different cultural needs and cultural differences:

'need to re-educate workers to move beyond Western Eurocentric way of thinking, white privileged way of doing things.' (BC, SW, Sussex).

And the need to listen:

'there has to be a little bit more listening so I think one of the things that needs to happen here is we need to hear more of the voices a bit more about what's happening because it's just like come on, you know, if that amount of people died, with any group of people, you know, I've hardly seen anything, anywhere where you get a sense of how people are managing and how they're coping with that... they've lost their grandparents, they've lost their parents... they've lost seven people in their family' (BC, SW, London).

These quotes highlight the points mentioned above in terms of changing the mindset and moving away from a white Eurocentric approach, providing more tailored and empathetic support and dismantling existing stereotypes around different groups within society. What all of them recommended was the need for a more intersectional approach to better understand Black, Asian and minority ethnic communities and support their needs. Also of importance was a greater understanding of differences within and between cultural groupings, religious belief systems and values: culturally responsive approaches. In addition, a constant questioning of knowledge and assumptions through active listening and hearing.

What the interviews with the Black and Asian professionals also showed was the level of empathy understanding and support provided by the youth, social and community workers throughout the pandemic. With an insider knowledge often of the cultural differences and needs of the communities they served, they were able to assist and empower their service users. In many instances their support at grassroots level delivered the services that government structures and systems failed to do.

Chapter 4: Discussion & recommendations

Discussion of findings

The study was conducted to explore the combined impact of COVID-19 and racial discrimination on the lives of Black and Asian children, young people and their families. Specifically, the perspectives of children, young people and parents, as well as statutory and community service providers, were gathered to further understand the challenges and experiences of supporting families during the pandemic. Findings suggest that the impact of the pandemic within the context of racism exacerbated the psychosocial adversity for Black and Asian children and their families. Most importantly, the results have brought into sharp relief the centrality of intersecting inequalities in worsening the problems that COVID-19 gave rise to for the participants (The Children Society, 2022). This section of the report, which brings together various elements of the research, and is structured around five key themes, drawn from the analysis of the data namely Coping Strategies and Resilience; Young People's Support and Wellbeing; Parenting in a Pandemic; Social Support Networks; and Building Trust and Safe Spaces.

Coping Strategies and Resilience

In terms of coping and resilience, the research provides new evidence of positive input from families, friends, and community groups. The study highlighted that many of the children and young people were living in chaotic and stressful environments which had a strong bearing on their coping strategies. As mentioned earlier, the data showed how the digital divide, particularly when home schooling, increased feelings of stigma and shame, which meant that they had to develop an array of coping strategies to navigate the challenges that arose, and that their coping strategies were significantly related to the forms of support, particularly emotional support they received from families, peers, and professional helpers. The findings also suggest that for some, the lack of supportive relationships impacted their wellbeing and coping strategies, thus contributing to poor well-being.

We draw on key elements of Yosso's (2005) cultural wealth theory, specifically aspirational and navigational capital to probe participants' narratives of their self-coping and coping strategies. Aspirational capital refers to the hopes, dreams and aspirations that individuals may have despite persistent inequities, whilst navigational capital is concerned with the skills and attributes needed to navigate unsupportive and hostile environments. A key tenet of the cultural wealth notion when discussing resilience and recovery is the centrality of the assets, resources and capacities Black and Asian people bring to any situation. In essence, techniques from cultural wealth theory provided a means for us to search for non-deficit ways of understanding how individual, family, community and environmental factors impact how participants nurture their emotional resources, in an environment where their self-esteem and self-worth is constantly undermined by

racism (Yosso, 2005). Because a cultural wealth lens allows for an intersectional analysis, it therefore gave us the scope for engendering a more nuanced understanding of the factors that promote resilience in racially minoritised children and young people. At the same time, it helped us to make sense of the coping strategies participants employed to overcome toxic stress and adversity. This conceptualisation affords a sensitivity to the ways in which perspectives of resilience that are rooted in a set of assumptions about individual agency place the onus on individuals to adapt to their situation rather than placing emphasis on the role of structures and systems within society (van Breda, 2017). Our findings point directly to the importance of recognising that intersecting racial, ethnic, and cultural factors are crucial protective factors for nurturing Black and Asian children's resilience for coping with the effects of the COVID-19 pandemic. Ultimately, this study indicates the need for children services' professionals to have the relevant skills and knowledge to engage with racially minoritised young people by using relationship-based interventions that build on their strengths.

Young People, Support and Wellbeing

Regarding support and well-being, the data has yielded meaningful information about the significance of young people's relationships with parents, supportive extended families, peers, teachers, and community support workers for maintaining mental wellbeing. Young people told many stories of feeling disproportionately impacted by the pandemic which exacerbated vulnerabilities and contributed to poor well-being, including isolation and heightened anxiety, as well as dealing with bereavement and grief, separation from school and friends and conducting their lives online, as well as the impact of social media, which all negatively impacted their mental health. This finding resonates with the Children's Alliance's (2021) review of the mental health of children and young people during the pandemic, where they identified the disproportionate difficulties experienced by ethnic minority children.

The findings also revealed how young people experienced the psychological impact of racism on their coping strategies to recover from stressful events and navigate their daily lives. As discussed in the findings many of the participants had strong opinions about the ways in which their lives were impacted by stereotyping, racism, microaggressions and inequality. It was evident that the prominence of Black Lives Matter movement during the first wave of the pandemic in 2020 and amplification of racial injustices during the pandemic encouraged young people to speak about racial identity and belonging, as well as racism, friendships, and peer support, amongst other topics. By engaging with the issues that the Black Lives Matter gave rise to, the young people demonstrated their capacity for hope, and indeed some of the young people underwent a transformation. Additionally, with Black and Asian families already disproportionately

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impacted by health and economic disparities, children and young people have been doubly exposed to emotional and psycho-social trauma (Barnardo's 2020; Maddison, 2020). These findings resonate with other research that highlights the policing of young Black and Asian backgrounds during the pandemic undermined trust and contributed to trauma (Deivanayagam et al. 2020; Gidda 2020; Harris et al. 2020, 2022). At the same time, feeling over-surveilled through stop-and-search and under-supported by services became an overwhelming concern for many young people (Hodgkinson et al. 2021) which caused sustained impact on their well-being. Some participants expressed concerns about inconsistencies in the policing of 'lockdown' rules, as well as discrepancies in education, health, mental health support, within the context of being young and from Black or Asian backgrounds (Deivanayagam et al. 2020). Our findings also support previous research, which found that engaging in political activism, like the Black Lives Matter may buffer stress and isolation and act as a protective factor, because it has positive outcomes for psychological well-being (Audet et al. 2022). The findings add weight to the argument that the changing landscape of inequality and disadvantage, exacerbated by the pandemic, will play a significant role in children and young people's recovery.

Parenting in a Pandemic: Combating Structural and Societal Inequalities

Crucially, the research has illustrated how the pandemic affected parenting on many different levels. Many of the issues families had to confront, such as housing conditions, and low-paid, precarious jobs, are longstanding and rooted in systemic structural inequalities but were further exacerbated by the pandemic restrictions (Dona, 2021; Marmot, 2020; PHE, 2020). Many who worked in low-paid precarious jobs or were key workers faced being sacked if they did not go to work. For those in multigenerational households, whilst there are many benefits of kinship, the challenges of social distancing and isolating in cramped and overcrowded households while working from home were enormous. Furthermore, living in multigenerational households heightened the risk of death from COVID-19 (Nafilyan et al. 2021). Due to their unsettled immigration status, some families had additional challenges such as no recourse to public funds. As indicated in previous studies child welfare inequalities disproportionality impact racially minoritised families from low-income households (Blundell et al. 2020; Bywaters et al. 2015), and Black, Asian and minority ethnic households are more likely to be in relative poverty (Edmiston, 2022; Edmiston et al. 2022; GOV. UK, 2020; Hu 2020). There is also some noteworthy research that shows that repeated exposure to racism is linked to health disparities and poor health outcomes (Katikireddi et al. 2021; Teece et al. 2021). Consistent with existing research, our findings suggest that the pandemic laid bare and intensified these inequalities.

In many cases, caring for other relatives intensified the worries and gender role attitudes influenced mothers in specific ways in the study. This was evident in the mothers' situation who had an all-encompassing role within the family, which had an impact on their emotional state and undoubtedly made parenting more difficult. In many ways, they had certain exposure to differential and stereotypical assumptions when engaging with services to access support. For example: from the health services, food banks, accessing free school meals, applying for welfare benefits, multigenerational families living in over-crowded households, with larger families and husbands now unemployed due to the pandemic. Furthermore, some also experienced domestic abuse perpetrated by their husbands and partners, and described how the constant arguments created adverse parental well-being. Specifically, they reported that factors including the financial strain created when husbands were out of work, meant the pressures on families in the domestic space were enormous and traditional gender role attitudes led to tension on the relationships, often resulting in domestic abuse. This finding is consistent with other research that found widespread experiences of domestic abuse during lockdown and difficulties in finding culturally-appropriate professional support (Abdelshahid & Habane, 2021).

Indeed, it was evident from the data that in some situations the emotional labour necessary for holding and processing their children's emotional difficulties impacted some mothers' capacity to be emotionally present for their children at all times. Taken together, our findings suggest that parental and family stressors meant that some parents struggled to meet the needs of their children because levels of anxiety multiplied. It is therefore critically important to understand the contexts and circumstances of their lives and specifically, the ways in which multiple oppressions negatively impact experiences of parenting (Maestripieri, 2021; Mayor & Pollack 2022). In such environments, the pandemic amplified many of the obstacles they were forced to counteract in their daily lives and essentially impacted some's capacity to parent well during the pandemic. As such, it is important to understand that parents must navigate many kinds of complexities involving resilience, resourcefulness, and perseverance to effectively parent during the pandemic (Brown et al. 2020).

Social Support Networks

As our research illustrates, there was evidence of the significant value of culturally sensitive support. As previously discussed, much support came from extended family, friends, and community groups. Many relied on food parcels, digital devices, advice and guidance from community workers and religious organisations such as churches or mosques to provide culturally appropriate support and empathy. Participants stressed the benefits of extended family networks, community support workers, religious and community organisations, and local support services. These community networks were

a vital lifeline during the pandemic, providing empathetic, non-judgmental aid and guidance, elements that were most often amiss in wider statutory health and social care systems. For some families, their cultural assets and knowledge thus mitigated the impact of the pandemic. highlighting the importance of building community assets and strengths.

Building Trust and Safe Spaces

The need for safe spaces to support mental health and wellbeing was a consistent theme running through the young participants' accounts. They powerfully articulated their challenges by foregrounding issues concerning justice and fairness and the ways in which their experiences were impacted. Importantly, their narratives elucidated a deep mistrust of public services, including the police, the justice system, and social services; most worryingly, schools were not necessarily experienced as safe spaces. The costs of this mistrust means that young people were often reluctant to voluntarily access and engage with services. Consideration of these issues can contribute to improving our understanding of the extent to which Black and Asian children and young people have been impacted by the pandemic. Thus, a key message from this research is that creating environments where Black and Asian children can thrive will contribute to improving the mental health beyond the pandemic. These findings fit with prior work that emphasised the importance of creating safe and inclusive spaces for children to give voice to their views and lived experiences (Driscoll et al. 2021).

Limitations

Whilst the study has shed light on some of the issues that influence black and Asian children and families' experiences of COVID-19 we should, however, note that the findings should be interpreted with several limitations in mind. In particular, the sample is small and self-selecting so therefore cannot be considered as demographically representative of all Black and Asian children and families, therefore we cannot generalise to all racially minoritized families. A limitation in our sample is that the number of children with long-term health problems or disabilities who took part in the study was small. Also, most of the parents who participated in the study were mothers, with very few fathers taking part, and there were no parents who were in a same-sex relationships. One of the key ethical issues that we had to be mindful of was ensuring that the individuals and settings were not identified. It is important to highlight that careful consideration was given to issues of confidentiality which can be sensitive, particularly in focus group discussions. With regards to group discussion methods, one limitation is that they did not provide as much time for participants' individual perspectives as they would have for those who had a one-to-one interview. A further limitation is the possibility that group dynamics may mean that the more dominant individuals in the group may have silenced some children and young people from expressing their true feelings for fear of being judged negatively (Krueger & Casey, 2014). It is possible, too, that there may have been instances where some participants may have withheld from speaking about difficulties because of their experiences of shame and stigma. It is also possible that researcher interaction could significantly affect participation in the interviews and focus groups. Careful consideration was therefore given to how these matters present potential for bias and affect participant responses (Smithson, 2000; Tausch & Menold, 2016). Despite these limitations, the focus groups in particular, opened a dialogic space for children and parents who valued the opportunity to reflect on their experiences and sharing their views on child rearing and parenting.



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Conclusion

In summary, this research makes an important contribution to the knowledge of the barriers Black and Asian children and their families faced during the pandemic. The research highlights the need for fundamental change in the health and welfare services capacity to engage and with and effectively support racially minoritised groups and communities. When looking at the combined impact, the effects of racism and the pandemic produced cumulative stressors in all areas, for example, in access to well-being support, and in fostering trust in local and national government, as well as their encounters with health and welfare services; furthermore their engagement with arts, culture and community and education were all disproportionately negatively impacted. The experiences captured within this research brings to light how Black and Asian families who are multiply disadvantaged by the adverse effects of structural inequalities, faced additional challenges to mitigate the damaging impact of the pandemic. The research therefore contributes knowledge of the psychosocial needs that necessitates urgent attention in the levelling up policy agenda for building back better post-pandemic (Marmot et al. 2020). We suggest that an intersectional approach offers a way to draw attention to these issues and provides tools to address the social determinants of social and emotional well-being which resulted in marked differences in the pandemic's impact on Black and Asian communities (Berkhout & Richardson, 2020; Bernard, 2022; Featherstone et al. 2021). Whilst at this stage we do not know what the long-term effects of the pandemic will be on Black and Asian children, the findings have several policy and practice implications for the delivery of services to families who are most affected.

Recommendations for Policymakers and Service Providers

The legacy of the pandemic on the emotional, educational and physical well-being of many Black, Asian and minority ethnic children continues as does the on-going impact of deeply entrenched structural inequalities. Recommendations arising from this research for policy makers and service providers to address the harm and promote resilience and well-being are:

- a. Children's services providers must adopt an intersectional approach for understanding and addressing how their policies and practices impact Black, Asian and minority ethnic children, young people, families and communities adversely.
- b. National and local government must ensure long-term and sustained investment in place-based community services, that offer early help, culturally appropriate support tailored to meet the needs of local Black, Asian and minority ethnic population groups.
- c. Youth services should be co-produced with young people, and include provision of safe spaces and community-based youth and mental health workers accessible to local Black, Asian and minority ethnic children and young people.
- d. Children and youth service providers should recognise the importance of and support grassroots level 'insider' workers with shared knowledge and lived experiences of the community that they serve.
- e. The police, as a key statutory safeguarding partner, should find innovative ways to actively engage with Black, Asian and minority ethnic children young people and families to understand and address issues of racism for building trust in those communities.
- f. Children's social care, education and health services must engage with Black, Asian and minority ethnic children, young people and families to address racial discrimination and lack of trust experienced by many who use their services.

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i Percentages are rounded to the nearest whole number

ii In some circumstances it was not possible or not appropriate to ask participants to fill in a demographic information form (For example, participants who are suspicious of having their data collected for fear that it will be used to inform the authorities about their complaints which will harm applications to UK Visa and Immigration).

iii Organisations are not named to protect the identity of participants

Appendix: Interview Guides

Interviews with Children (12-14)

(Complete a short Questionnaire (age group/gender/ethnicity/ religion/family composition etc) and Informed Consent Form with children before interview/focus group).

1. Home:

- Tell me about your family/home setting? How many of you live together?
- Do you have brothers and sisters? How many? Do you enjoy spending time together?
- Do you have any extended family staying with you?
- Do you look after someone in your house every day?
- Were your parents/guardian working/ unemployed/ furloughed?
- Did they have to go out to work? Did their work/lack of work affect you?
- Did you worry/feel anxious?
- Did you worry about shortage of food/heating/essentials?
- Did you get free school meals, help from foodbanks/ community groups/neighbours etc?
- How was it spending so much time together? Good/bad? Explain.
- Have relationships with your family changed during the pandemic got better/worse?
- Do you have your own room or do you share? Did you have enough space/privacy?
- Do you have access to a garden?

2. School:

- How did you find home schooling? Was it easy?
- What about remote learning? Did you have laptops/ devices to work from home? Did you have to share? Did your parents/carers home school you at all? How was the whole experience?
- How has it been when you are back at school? How have you found any changes?
- Did you get time to start a new hobby or do something different you hadn't done before eg. sew, play an instrument, write, cook, become a carer/mentor?

3. Friends/relationships:

• What about your friends? Did you manage to keep in touch with them? Did you use WhatsApp/Skype/Xbox, Play Station, TikTok, SnapChat/Instagram/Zoom/phone? What was the best way to communicate?

- How different was it from being at school with them? How did it make you feel?
- Did you keep in touch with other extended family/ cousins/aunties and uncles and friends here in England and abroad? Were you able to talk openly with some of them and tell them how you were feeling? Did they help? Can you give examples where someone helped you.
- Did you use any chat rooms or help lines for support? Can you tell us if they were helpful? And maybe why?
- Did you personally provide support/help/comfort to your friends/peers/siblings? Could you describe how?

4. Health and wellbeing:

- How do you think the pandemic affected your health and your family? Was anyone close to you affected by COVID-19?
- In terms of keeping healthy and doing exercise, what did you do?
- What were you eating? Did your parents/you cook? Did you get to have takeaways?
- How do you think you coped?
- What would have made the last year easier?
- During the pandemic there was a lot of (social) media coverage of the George Floyd murder and Black Lives Matter, protests and policing; the disproportionate impact of COVID-19 on Black and Asian ethnic minority groups; stigma attached to ethnic minority people living in areas with higher COVID-19 levels etc – Did this affect you? If so how?

5. Community and statutory services:

- Did you keep in touch with clubs/youth centres/mentors/ sports teams/community groups you are part of? Did they contact you? How useful was that? Did you get to talk about how you were coping with the pandemic/ lockdown?
- Did you have any contact with social workers, youth workers or the police during the pandemic? What was this about and was it helpful or not helpful?

6. Conclusion

So finally, we are coming to an end of this discussion, is there anything you want to talk about in terms of COVID-19, the pandemic and lockdown that we haven't talked about?

Anything that made you particularly happy, sad, anxious, angry?

Interviews with Young people (15-18)

(Complete a short Questionnaire (age group/gender/ethnicity/ religion/family composition etc) and Informed Consent Form before interview/focus group).

1. Home:

- Tell me about your family/home setting? How many of you live together? Do you live at home with parents?
- Do you have brothers and sisters? How many? Do you enjoy spending time together?
- Do you have any extended family staying with you?
- Do you have any caring responsibilities?
- Do you have any pets?
- Do you study/go to college/work? If so, were you working/ furloughed/unemployed?
- Were your parents/guardian working/ unemployed/ furloughed?
- Did they have to go out to work? Did their work/lack of work affect you?
- Did you worry/feel anxious?
- Did you worry about shortage of food/heating/essentials?
- Did you get free school meals, help from foodbanks/ community groups/neighbours etc?
- How was it spending so much time together? Good/bad? Explain.
- Have relationships with your family changed during the pandemic for better/worse?
- Do you have your own room or do you share? Did you have enough space/privacy?
- Do you have access to a garden?

2. School:

- How did you find home schooling? Was it easy?
- What about remote learning? Did you have laptops/ devices to work from home? Did you have to share? Did your parents/carers home school you at all? How was the whole experience?
- How has it been when you are back at school? How have you found any changes? Have you been affected by the changes in GCSE/ A level examinations? If so can you explain.
- Did you get time to start a new hobby or do something different you hadn't done before eg. cook, sew, knit, make music, play an instrument, write, cook, become a carer/ mentor?

3. Friends/relationships:

 What about your friends? Did you manage to keep in touch with them? Did you use WhatsApp/Skype/ SnapChat/Instagram/Zoom/phone? What was the best way to communicate?

- How different was it from being at school with them? How did it make you feel?
- Did you keep in touch with other extended family/ cousins/aunties and uncles and friends here and abroad? Were you able to talk openly with some of them and tell them how you were feeling? Did they help? Can you give examples where someone helped you?
- Did you use any chat rooms or help lines for support? Can you tell us if they were helpful? And maybe why?
- Did you personally provide support/help/comfort to your friends/peers/siblings? Could you describe how?

4. Health and wellbeing:

- How do you think the pandemic affected your health and your family? Was anyone close to you affected by COVID-19?
- In terms of keeping healthy and doing exercise, what did you do?
- What were you eating? Did your parents/carers/you cook? Did you have takeaways?
- How do you think you coped?
- What would have made the last year easier?
- During the pandemic there was a lot of (social) media coverage of the George Floyd murder and Black Lives Matter, protests and policing; the disproportionate impact of COVID-19 on Black and Asian ethnic minority groups; stigma attached to ethnic minority people living in areas with higher COVID-19 levels etc – Did this affect you? If so how?

5. Community and statutory services:

- Did you keep in touch with clubs/youth centres/mentors/ sports teams/community groups you are part of? Did they contact you? How useful was that? Did you get to talk about how you were coping with the pandemic/ lockdown?
- Did you have any contact with social workers, youth workers or the police during the pandemic? What was this about and was it helpful or not helpful?

6. Conclusion:

So finally, we are coming to an end of this discussion, is there anything you want to talk about in terms of COVID-19, the pandemic and lockdown that we haven't talked about?

Anything you want to add.

Anything that made you particularly happy, sad, anxious, angry?

Or inspired and motivated you?

Or anything you managed to achieve/do that you have never done before?

Appendix: Interview Guides

Interviews with Parents

(Complete short Questionnaire (age group/gender/ethnicity/ religion/children/ work etc) and Informed Consent Form for completion before interview/focus group).

- When you first heard about the COVID-19 pandemic, the infection rates, deaths and lockdown how did you feel?
- Generally, how do you think the lockdown itself has impacted on their child/ren?
- Have you and your family had any personal, direct experiences of COVID-19?

So, always thinking in terms of COVID-19 and relating it to you and your family -

1. Work:

- In terms of work, were you working/furloughed/ made redundant/unemployed and/or on benefits? Did you experience a loss of income? How did this impact on your family?
- Did you feel supported employer/ social services/ local authority/ community networks and organisations/family/ neighbours/friends and family?
- Could you give examples either positive or negative of any challenges you faced and how they were overcome or not.

2. Home/Housing:

- Can you tell us about your home do you own it/ rent/ temporary accommodation? Is it a house/ flat/ Bed & Breakfast?
- How many people do you live with/ How many family members and children? Could you describe in terms of age and relationship? Do you or any of the children have any specific caring responsibilities?
- How did you cope in terms of space and privacy? Do you have a garden? Do you and your children have easy access to safe outdoor spaces?

3. Home schooling:

- With children, how did they manage to do their schooling? Did you have the right devices, space and technology to allow them to study? Do you have access to consistent wi-fi?
- Did you/family member help with home schooling? Was it easy/difficult?
- How have your children managed the return school and changes to examination arrangements?

4. Food:

• In terms of food, did you find lack of school meals a problem? Did you receive any support instead of school meals? If so how were these alternatives?

 How did you manage in terms of access to food? Supermarkets, local shops, foodbanks, community/ religious organisations, friends and family. Did you feel you coped? If you got support from relevant organisations
please could you elaborate.

5. Friendship/relationships (parents and children):

- How did you manage without meeting up with friends/ family/ community and social networks? Were there particular regular meetings that you missed/that are part of your daily/weekly life? Please elaborate.
- Are you computer confident? Did you use WhatsApp/ Skype and Zoom to communicate and keep in touch with people? Give examples.
- What about your children? Were you worried about your children spending so much time online on devices? Did they talk about trolling or cyber bullying?
- Were they in touch with their friends and peers? Or did they have little access to friends? How did they cope? Did they express loneliness? Did you notice a difference in their behaviour? Give examples.
- Have your and your children's relationships within your family/ household changed in positive and/or negative ways during the pandemic?
- Have your and your children's relationships with your family/ friends abroad changed in positive and/or negative ways during the pandemic?

6. Health:

- In terms of physical health how did the pandemic affect you and your family? For example, in terms of exercise, fitness, walks, weight and diet. Give examples.
- Did you experience bereavement during the pandemic? How do you think this has affected your children and family?
- What about mental health anxiety/ concern/ arguments/loneliness/ happiness and strength in being together as a family?
- Did your children present with changes in their behaviours, including eating/sleeping patterns, signs of agitation, nightmares, depression? If so, what do you think helped them?

7. Wider support:

- Could you talk about the support you have received over this period – from employer/services/family/friends/ neighbours/community and religious networks/strangers?
- Could you give some examples of how you were assisted/ helped?
- Or alternatively, how you felt forgotten/neglected/ discriminated against?

8. Statutory services:

• Have you or your children had contact with statutory services, such as Children's Social Care, the Police or the Home Office during the pandemic? How have you or children experienced your contact with these services?

9. Conclusion:

• So finally, is there anything you would to like to comment on further in relation to the COVID-19 pandemic and

your day-to-day life and how it has affected you as an individual and as a parent? Issues that may have made you particularly anxious, angry, vulnerable or happy.

• Perhaps we could try and end on a positive – name one good thing that has emerged from this coronavirus pandemic? Something that you feel has made you a stronger person?



Appendix: Interview Guides

Interviews with Professionals

(Complete a short Questionnaire (age group/gender/ethnicity/ profession etc) and Informed Consent Form for completion before interview/focus group).

1. Could you tell me about the organisation you work in?

How does it support children/young people, parents and families?

- 2. Within the context of COVID-19 and the pandemic over the last year, could you:
 - Elaborate on how it has impacted on the work of your organisation?
 - Describe how it has generally affected the lives of the children and families you support?

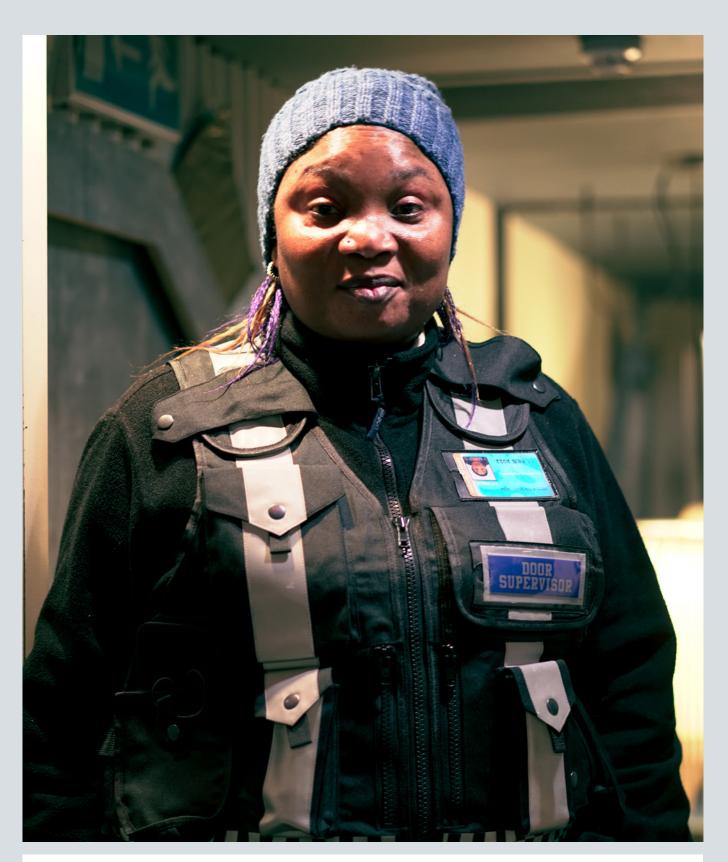
3. Thinking more specifically on the groups of people you support -

- a. How from your perspective has the pandemic affected Black, Asian and minority ethnic **parents** with children two parent/single parent/teenage parent?
 - What do they need help with? What do they need advice on? Social, economic, emotional, physical, psychological support? Eg. employment/housing/ benefits/family and children, food/healthcare/ loneliness/mental support/bereavement?
 - Could you provide some examples of the hardships they suffer? Explain.
 - How have you supported them? Elaborate.
 - Similarly, can you provide examples that reflect their resilience and ability to cope with circumstances brought about by the pandemic? More positive aspects

- b. How has it affected **children**?
 - What kind of support/advice do they require?

For e.g. discussions on parents and carers/siblings/home life, parents' jobs/money shortage/ food scarcity, being carers, school/ lack of resources, friends, online interactions, loneliness, mental health and anxiety, abuse, self-harm.

- How have you provided support? Give some examples.
- Could you also give examples that show the resilience of children and how they have managed to cope with the challenging circumstances and unexpected changes.
- c. The effect of the pandemic on **young people** (15-18)?
 - For e.g. discussions on parents and carers/siblings/their home life, own or parents' jobs/money shortage/ food scarcity, being carers, school/ lack of resources, friends, online interactions, loneliness, mental health and anxiety, abuse, self-harm. Examples.
 - How have you provided support? Give some examples.
 - Could you also give examples that show the resilience of young people and how they have managed to cope with the challenging circumstances and unexpected changes:
 - Have they provided support/become carers/acted as mentors for peers?
 - Any positive effects on family life and their general wellbeing for eg. day to day family life, activities, schooling, and wider relationships with support networks - community organisations, religious organisations, neighbours.



All the photographs were taken by Kartik Sharma (kartik@pahus.org). The Photobook and virtual exhibition can be accessed at: **co-power.leeds.ac.uk/outputs/**

