

Lessons learnt: Responses to COVID-19 from the Early Years Sector in Wales from 2020 to 2023

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ABSTRACT

The purpose of this study was to understand how early childhood education and care (ECEC) practitioners in Wales view the impact of the COVID-19 pandemic on their sector; how these perceptions have changed over time; and what we can learn from these experiences to support future crisis recovery, and effective and context-responsive practice in ECEC settings. A three-phase research process was employed, consisting of two online surveys (November–December 2020, $n = 379$; February–March 2023 $n = 352$) and online focus groups (May 2023, $n = 12$). Overall, practitioners in 2023 perceived the impact of the pandemic as worse than those who completed the survey during the peak of the pandemic in 2020. This was explained by the negative impact on cohesive support services in the aftermath of the pandemic. Over one-third of the participants in both surveys said that their setting had struggled to remain viable, while focus group participants spoke about the ‘forgotten sector’ and felt undervalued in their roles. Practitioners discussed changes that had remained in place that were adapted as a result of COVID-19, which were seen as both opportunities and challenges emerging from the pandemic experience. These mostly centered around adapting the setting to the increased level of need that children in the setting were showing. The paper concludes by providing recommendations

for policy and practice and emphasises the need to utilise the COVID-19 pandemic as a learning opportunity for reflection and innovation in ECEC policy and practice both in Wales and globally.

Keywords: COVID-19, early years, early childhood education and care, best practice, Wales

Introduction

On the 5 May 2023 the World Health Organisation declared that COVID-19 was no longer a 'global health emergency', three years, three months and six days after it was declared as such on the 30 January 2020 (WHO, 2023). Yet, despite the global emergency ending, there is widescale acknowledgement of the longer-term impact that the pandemic has had on education systems globally (OECD, 2020; Hoffman and Secord, 2021; Wernerand and Woessmann, 2023; Poulain et al., 2021). This impact has been keenly felt in the early years sector (Pascal et al., 2020; Hobbs and Bernard, 2021).

While in the UK, some childcare settings for those under five are maintained by Government (maintained settings), there is a large private, volunteer, and independent (PVI) sector for which the mandatory closure, during COVID-19, raised questions about the viability of the sector (Hobbs and Bernard, 2021) – challenges that were exacerbated by the pandemic but also reflect longstanding issues with complex and often fragmented funding structures in early years education (Hobbs and Bernard, 2021, Tyrie et al., 2021; Araújo et al., 2021). Furthermore, there is a well-documented impact of the pandemic on the development of children (Penna et al., 2023; Sato et al., 2023; Barnett and Jung, 2021; Tyrie, Knight and Borrás, 2021) particularly those in disadvantaged groups (Gonzalez and Bonal, 2021; Mays et al., 2022, Hobbs and Bernard, 2021). Interestingly the impact of the COVID-19 pandemic on wellbeing was found by James et al. (2021) and Hampton and McAuley (2023) to be more positive (than negative) for younger children.

In Wales, UK, the Welsh Government launched the 'Recruit, Recover and Raise Standards' (RRRS) funding programme in 2020 in response to the COVID-19 pandemic. As a result, 2,452 full-time equivalent (FTE) staff were recruited to the

sector. While an evaluation of this programme has noted the benefits of the additional staff, concerns were raised about the training needs of new staff, and about how to support the sector longer term when the scheme comes to an end (Andrews et al., 2023). The report states ‘the experience of disrupted education will remain [...] children and the workforce will face continued disruption from COVID-19’ (Andrews et al., 2023, p. 8). This paper aims to understand how ECEC practitioners in Wales view the impact of the pandemic on their sector; how these perceptions have changed over time; and, importantly what we can learn from these experiences to both support COVID-19 recovery, and inform future practice in ECEC settings.

Background

The majority of young children in the UK now experience formal early childhood education and care before beginning primary school (GOV.uk, 2023; Wales.gov, 2018). The recognition of the importance of ECEC for children’s development is indisputable (Sylva et al., 2004). At its best, early years provision can be transformative for both children and their families (Hunkin, 2019). It provides opportunities for skilled early years professionals to nurture young children’s educational, emotional, social and physical development.

The impact of COVID-19 on Early Childhood Education and Care (ECEC)

The COVID-19 pandemic and the impact on the early years sector has fundamentally changed the context in which a generation of young children have grown and developed. The pandemic impacted the ECEC sector in a number of ways, including temporary and permanent nursery closures, and workforce challenges (UK Parliament, 2021), although, it should be noted prior challenges existed in the sector (Hobbs and Bernard, 2021).

In Wales, on 18 March 2020, the Welsh Education Minister announced schools and ECEC settings would close for statutory provision with a minority of settings remaining open via the establishment of ‘hub systems’ for the children of key worker parents or for children classified as vulnerable. There was a phased re-opening of settings in June–July 2020. The beginning of the 2020/21 academic year (Sept. 2020) began with children in schools and ECEC settings although

'bubble' systems were in operation meaning individuals/ classes and year groups of children were isolated if a positive COVID-19 case was detected. There was a second national lockdown from January–March 2021 which saw the re-closure of schools, although some PVI early years provision remained open along with hub schools. This meant that early years practitioners had varying experiences of the pandemic - while some worked throughout, others were furloughed for large periods of time. Across the social care sector in Wales, research has reported a lack of support for practitioners outside of the national health service (NHS) during the pandemic (Cheshire-Allen and Calder, 2022; Vicary et al., 2020).

The impact of COVID-19 on children's development

There is evidence worldwide that many areas of child development have been impacted as a result of COVID-19, including children's speech and language (Chadd et al., 2021), cognitive (Deoni et al., 2021), social (Najamuddin et al., 2022) and physical development (Stanford, 2021), as well as their mental health and wellbeing (Hawrilenko et al., 2021). Evidence from the Ages and Stages Questionnaire completed at two and two-and-a-half years in England, shows that a smaller proportion of children were achieving an expected level of development across all five areas of measurement (Office for Health Improvement and Disparities, 2021).

Research from the English context suggests that the pandemic impacted transitions to school with stark evidence from teachers reporting that only half of their students who arrived to start reception year (age four to five in the UK) in 2021 were 'school ready' (Bakopoulou, 2022; YouGov and Kindred, 2022). Similarly, Tracey et al. (2022) reported in a large scale study of children (n=960) aged three to four that at the end of the reception year, the proportion of children who reached the expected levels of development in all areas had dropped from 72 per cent for the 2019 cohort to just 59 per cent in 2021. This difference was equivalent to, on average, three more children in every classroom not reaching the expected levels by the end of the school year (Tracey et al., 2022).

Also, in the English context, Platt (2021) found that COVID-19 has had a particularly detrimental impact for some disadvantaged and vulnerable young children. Inequality has deepened, with young children in ethnic minority families and in areas where poverty was already prevalent, more greatly affected

(Platt, 2021). Research from the UK and Australia suggests the way children learn and develop has shifted, with some types of online learning now seen as 'essential', exacerbating the impact of the digital divide between advantaged and disadvantaged families (Coleman, 2021; Seymour et al., 2020).

Prior research from both the Americas (Atiles et al., 2021) and the UK (Christie et al., 2021) found that the pandemic has exacerbated inequalities in the system with vulnerable families and children or those with additional learning needs (ALN) more likely to fall between the cracks – with an urgent need identified to change the way parents and careers are involved in their child's early education. In the English context, Morton and Adams (2022) state that during the pandemic there were less parental interactions with key early years professionals, fewer health visitor checks, fewer referrals to children's social care, and a growing gap between escalating need and available support.

While there is much less research around the impact of COVID-19 in Wales, than in England, the evidence base is expanding (Thomas et al., 2023, Waters-Davies et al., 2022, Marchant et al., 2022). Yet, the focus of the research available has centered around short term impacts of the pandemic rather than evaluation of what the longer term impact looks like from the practitioners' perspective. Tyrie, Knight and Borrás (2021) found that practitioners felt that 'children's social and emotional development' was the most negatively impacted by the pandemic with some demographic groups seen as more negatively impacted than others. Marchant et al. (2022) undertook research with 353 participants from 59 primary schools within 15 of 22 local authorities in Wales and reported that primary school staff found teaching challenging due to the COVID-19 restrictions, especially for younger learners and those with additional learning needs. A large-scale survey was undertaken by James et al. (2021) with 6,291 respondents aged 8–25 from 81 education settings across Wales which examined wellbeing during the pandemic in Wales. Overall, the study suggested that the younger the children were, the less impacted they felt their wellbeing was by the pandemic with a range of factors affecting their self-reported wellbeing.

Among primary school children, higher wellbeing was seen for those who played with lots of others (rather than alone), were of Asian ethnicity (OR 2.17, 95% CI: 1.26 to 4.3), had a safe play area (OR: 2.4, 95% CI: 1.67 to 2.56) and had more sleep. To support their wellbeing young people reported they would like to be able to play with their friends more. (James et al., 2021)

ECEC Sector response

Lockdown measures reduced the opportunities for parents and early years staff to seek and give advice. Yet, Hobbs and Bernard (2021) argue that in the UK context the ECEC sector has responded imaginatively to the pandemic challenges by using innovative methods and social media to support children and their families. There were also remarkable examples where local support services adapted rapidly to provide digital support, greater collaboration, and better referral systems for new parents (Reed, 2021). In Wales, ECEC practitioners reported local strategies that were implemented during the pandemic, particularly focused around digital communication methods, with varying levels of success (Children in Wales, 2022). However, both in Wales (Tyrie et al., 2021) and across the UK (Ofsted, 2020; Hunnikin and Blackburn, 2020) research has also shown that many ECEC settings have reported struggling with viability, and staffing both during and in the aftermath of the pandemic, which arguably compounds the on-going workforce issues (Hobbs and Bernard, 2021). As a result, it is important to understand both the impact of the pandemic on the sector, and importantly, what we can learn from how settings responded to the pandemic that can inform ECEC practice in crisis recovery in the future.

Research Question

Therefore, this research aimed to address the following questions:

1. How do ECEC practitioners in Wales perceive the impact of the COVID-19 on the children and families they work with, and how has this changed over time?
2. How do ECEC practitioners in Wales perceive the impact of the COVID-19 pandemic on ECEC settings and staff, and how has this changed over time?
3. What do ECEC practitioners feel that they have learnt from the COVID-19 pandemic which will shape their practice in the future?

Overall, the project aims to reflect on the impact of the COVID-19 pandemic on the ECEC sector in Wales, and to consider how we can use this experience to shape ECEC policy and practice in the future.

Methods

In order to answer our research questions, we employed a three-phase research process, consisting of two online surveys administered via Qualtrics (November–December 2020 and February–March 2023) and online focus groups (May 2023). This longitudinal mixed-methods research design allowed for analysis of the statistical longitudinal trends in participants' perceptions, whilst the focus groups provided in-depth insights to further understand the experiences, perceptions, and emotions of the participants. Together, this three-phased approach, combining both quantitative and qualitative data, collected at different time points, has allowed us to examine how the sector has evolved and to identify trends, changes, opportunities and challenges over time, when experiences of COVID-19 were significantly different across the ECEC sector.

The target participant group for all three stages was practitioners working within ECEC settings (both maintained and PVI) in Wales. We were specifically interested in practitioners that worked, with children aged zero to eight. Within the surveys, those who did not meet these criteria were excluded from analysis post-hoc. Participants were selected for the focus groups based on these criteria. At the end of the second survey, participants were invited to volunteer for follow-up focus groups by leaving their email address. From those who expressed interest, a purposive sample was selected to ensure diversity in setting type (e.g., maintained and PVI) and geographical spread across Wales.

Ethical approval was obtained from the host institution of the first author+ for all three phases of data collection.

Phase 1: Survey, November–December 2020

The initial survey consisted of four sections: the first asked the participants for their demographic information, this was followed by three sections asking about changes settings have made in response to government guidance on COVID-19, the impact of COVID-19 on the children in the setting, and the impact of COVID-19 on the setting and its staff. A mixture of open- and closed-ended questions for each topic were included. The survey was open to participants for five weeks from 12 November 2020 to 19 December 2020. At this time in Wales, ECEC settings had reopened (since June 2020) with government guidance in place to avoid the spread

Table 1 – Survey respondent demographics

Variable	Category	Survey phase 1		Survey phase 2	
		n	%	n	%
Setting	Private nursery	69	19.6	82	21.8
	Pre-school	76	21.6	73	19.4
	School nursery	1	.3	11	2.9
	Primary School	32	9.1	66	17.6
	Wrap around care (breakfast / afterschool clubs)	34	9.7	21	5.6
	Holiday clubs	2	.6	6	1.6
	Childminder	124	35.2	80	21.3
	Other	14	4.0	37	9.8
Role	Setting manager /Headteacher	155	41.2	187	53.3
	Early years teacher/ leader	39	10.4	36	10.3
	Classroom teacher/ leader	29	7.7	11	3.1
	Childcare worker / practitioner	66	17.6	93	26.5
	Nursery nurse	13	3.5	3	.9
	Teaching assistant	19	5.1	1	.3
	Other	55	16.6	20	5.7

of the virus. Participants were recruited via non-probability convenience sampling by emailing settings and promoting the survey via social media. Following the removal of those who did not meet the demographic requirements for the target participant group, 379 responses were recorded. Table 1 shows the setting type and role of the initial survey respondents.

Phase 2: Survey, January–March 2023

The second survey consisted of three sections following a similar structure to the original survey. The section on responding to government guidance was removed as it was no longer relevant to the COVID-19 context in 2023. Key questions from the initial survey were kept consistent to allow us to make longitudinal comparisons. The survey was open to participants for seven weeks from 18 January to 8

March 2023. This data collection period was two years after the last period of setting closures in Wales (February 2021). As with the initial survey, participants were recruited via email and social media. There were 352 responses from the target population. Table 1 shows the setting type and role of the respondents from the second survey. This shows similar frequencies of responses to key demographics compared to the initial survey. While we do not know whether the same participants responded in phase 1 and phase 2, the similar proportions in response demographics allows us to make comparisons between each survey.

Phase 3: Focus Groups, May 2023

The final phase of data collection was through focus groups with ECEC practitioners. At the end of the second survey, participants were asked to leave their email address if they wished to take part in a follow up focus group interview. All participants that met the target participant group criteria were invited to take part in an online focus group. Focus group questions followed a similar structure to the survey questions and were designed to offer more insight into the quantitative survey results. In total, four focus groups took place with twelve ECEC practitioners from a variety of ECEC settings including schools (3), childminders (2), private nurseries (4), and Flying Start settings¹ (3). Focus groups took place via Zoom, participants provided informed written consent and were asked to give verbal consent to record the interviews.

Analysis

Quantitative Data: Following initial univariate analysis of the questions in each survey, bivariate and multivariate analysis (t-tests, chi-square (X^2) tests and ANOVAs) were conducted to determine if there were significant differences between the two surveys.

Qualitative data: Each focus group was fully audio-recorded and transcribed verbatim. A thematic analysis approach (Braun and Clarke, 2006; 2022) was used. Coding followed an inductive process: initial codes were developed independently by two members of the research team based on recurring patterns in the data. The

¹ Flying Start settings are funded by Welsh Government and are available in disadvantaged areas offering childcare alongside boarder community support (Welsh Government, 2023).

researchers then met to compare and refine the coding structure, agreeing on a final set of themes through discussion. This approach recognises that themes are constructed by the researchers through interpretation, rather than simply 'emerging' from the data.

Results

Quantitative Results

The below sections outline the findings from both quantitative surveys with ECEC practitioners.

Responses to the pandemic

Participants in both surveys were asked 'Have you changed the spaces and places in which children play as a result of COVID-19?' A significant, moderate-sized association was found between whether the setting has changed the spaces and places and the time of the survey: $\chi^2(1) = 112.61, p < .001$, Cramer's $V = 0.44$. The majority of practitioners (79.8 per cent) reported that they had changed the spaces and places in Time 1, compared to 36.3 per cent in Time 2. This suggests that in 2020 more changes had been made to spaces and places children played compared to 2022.

Viability of settings

Participants answered the question 'Since the start of the COVID-19 pandemic, has your setting struggled to remain viable due to the impact of COVID-19?' in both surveys. Over a third (39.9 per cent) of participants said that they struggled to remain viable in Time 1, and this did not significantly differ from the 33.5 per cent who said that they struggled to remain viable in Time 2: $\chi^2(1) = 2.26, p = 0.14$.

Staff and child wellbeing

In Time 1, participants were asked about the impact of the changes brought about by COVID-19 on the physical, emotional and social wellbeing of both

**Table 2: Impact on areas of wellbeing reported in
Time 1 and Time 2 survey**

Group	Area of wellbeing	Survey	Question	Mean*	s.d.
Children	Physical	1) Nov – Dec 2020	1	6.54	2.66
		2) Jan – March 2023	2	4.80	2.14
		2) Jan – March 2023	3	4.57	1.78
		Combined		5.39	2.43
	Emotional	1) Nov – Dec 2020	1	5.78	2.78
		2) Jan – March 2023	2	3.99	2.34
		2) Jan – March 2023	3	4.02	1.97
		Combined		4.67	2.55
	Social	1) Nov – Dec 2020	1	5.60	3.00
		2) Jan – March 2023	2	3.78	2.49
		2) Jan – March 2023	3	3.84	2.09
		Combined		4.49	2.72
Staff	Physical	1) Nov – Dec 2020	1	5.60	2.50
		2) Jan – March 2023	2	3.97	2.01
		2) Jan – March 2023	3	4.31	1.64
		Combined		4.76	2.26
	Emotional	1) Nov – Dec 2020	1	4.62	2.64
		2) Jan – March 2023	2	3.19	1.82
		2) Jan – March 2023	3	3.87	1.70
		Combined		4.01	2.27
	Social	1) Nov – Dec 2020	1	4.35	2.81
		2) Jan – March 2023	2	3.20	1.91
		2) Jan – March 2023	3	3.95	1.77
		Combined		3.91	2.36

*0 – negative impact, 5 – no impact, 10 – positive impact

children and staff in the setting (question 1 in Table 2 and 3). In Time 2, participants were asked two similar questions: ‘On reflection, what impact did these changes have on children’s / staff’s wellbeing *at the time of the pandemic*’

Table 3: Kruskal-Wallis H test of difference between surveys

Group	Area of wellbeing	Question*	Mean Rank	Kruskal-Wallis H	p
Children	Physical	1	503.38	111.85	<0.001
		2	342.58		
		3	320.82		
	Emotional	1	483.95	77.56	<0.001
		2	336.27		
		3	340.16		
	Social	1	472.39	67.31	<0.001
		2	332.45		
		3	342.74		
Staff	Physical	1	456.98	69.62	<0.001
		2	307.99		
		3	349.03		
	Emotional	1	435.63	45.05	<0.001
		2	307		
		3	391.24		
	Social	1	410.34	25.68	<0.001
		2	319.66		
		3	406.72		

(question 2 in Table 2 and 3) followed by 'On reflection, have there been *longer term impacts* of these changes on children's / staff's wellbeing' (question 3 in Table 2 and 3). These questions were also split into physical, emotional, and social wellbeing. For all three questions, participants were asked to rate their perceived impact on a scale from 0 'negative impact' to 10 'positive impact' with 5 labelled as 'no impact'. Table 2 shows the mean and standard deviation for each question at each time point. On average across all three questions, participants thought that physical wellbeing for both children ($M=5.38$, $s.d.=2.42$) and staff ($M=4.75$, $s.d.=2.26$) was least negatively impacted while social wellbeing for both children ($M=4.49$, $s.d.=2.72$) and staff ($M=3.91$, $s.d.=2.36$) being the most negatively impacted.

Initial analysis showed that these variables were not normally distributed (Shapiro-Wilk <0.05) and due to the ordinal nature of the variable, Kruskal-Wallis H tests were used to determine if there were statistically significant differences between each question. Table 3 shows significant differences were found between the mean ranks for each question in all areas of wellbeing for both children and staff. Post-hoc tests using pairwise comparisons showed that for each question, there was no significant differences in the mean rank found between question 2 (reflection on impact at time of the pandemic) and question 3 (reflection on long term impact). However, significant differences were found between responses in the questions at Time 1 (the impact at the time) and questions at Time 2 (reflections on the impact and the time and the longer-term impact). This was consistently significant across all questions and areas of wellbeing. This demonstrated that respondents in Time 2 (2023) were consistently more likely to report the impact of pandemic (both at the time and the longer-term impact) as more negative than those who completed the survey in Time 1.

Qualitative data

The qualitative data is presented around four key themes which emerged during the analysis of the focus group data; 1) the forgotten sector; 2) support services for children and families; 3) perceived impact of COVID-19 on child development and; 4) longer term changes as a response to the pandemic. The following section presents data for each theme using quotes from the survey and focus group participants.

‘The Forgotten Sector’

In the Time 1 survey, a participant described the ECEC sector as ‘the forgotten sector’. This is a theme that ran through both survey and focus group data. All four of the focus groups involved some conversations about feeling neglected, forgotten or having concerns about staff wellbeing during the pandemic. In two of the four focus groups, practitioners were notable in commenting about their feelings of being undervalued and had concerns about the stability in the early years workforce. This was connected to a concern about the viability of ECEC settings, with one ECEC manager suggesting ‘I made three staff redundant [...] which was not an easy decision to make [...] we’ve had a 95 per cent turnover of staff’ (Day

Care Setting Manager). This manager suggested that after the COVID-19 pandemic 'those that were there, felt like our sector wasn't recognised, like our job wasn't important or as important as other jobs' (Day Care Setting Manager). Furthermore, practitioners reported feeling that the sector as a whole was being forgotten and undervalued:

They felt undervalued as a workforce. I've always tried to do things in setting to promote positive mental health and supporting them, but throughout COVID, it was all about the key workers and health and care. When it matters, we don't fit into any category. We don't fit into education, and we don't fit into care, but they won't recognise childcare as a category. (Day Care Setting Manager)

Clear within this theme was the feeling that ECEC staff needed acknowledgement of their work both during the pandemic and in the aftermath, 'We're back at the bottom of the pecking order again' (Day Care Setting Manager). The issues of pay and conditions in the early years sector, compared to other sectors was raised:

Somebody like me doesn't get sick pay because I'm self-employed, so I'm not entitled to that. It's a lack of support, a lack of help. (Childminder)

Children's Development

A consistent theme was the impact of COVID-19 on children's development. The majority of practitioners felt that the group most affected were the children born during or just before the COVID-19 lockdown periods: 'the babies during the height of COVID, because they didn't get to go to the parent groups and things like that' (Flying Start Manager) while another felt that 'actually the impact on the children that were with us [ECEC] during the pandemic was quite minimal' (Pre-school Manager).

Furthermore, focus group participants reflected on the impact of COVID-19 on particular areas of children's development, specifically speech and language development, social and emotional development and children with ALN, as one participant expressed:

Over two-year-olds who are coming in now who were born after the pandemic, but when things weren't back to normal, 90% of them come in with very little spoken language. They are not at a two-year-old level at all (Pre-school Manager).

Focus group participants discussed the reason for this as ‘they obviously weren’t able to go to parent and toddler groups, they’ve only had their parents or very close family at home’ (Flying Start Manager).

Focus group participants suggested that young children were impacted by the pandemic by missing out on social interactions and this has impacted their social and emotional skills:

Their social skills, so they haven’t mixed in the same way. There were a couple of families that were very aware of this, and the mum said, ‘I haven’t been able to take him anywhere, he doesn’t know how to mix, he doesn’t know how to share, he doesn’t know how to wait because I’m always there’. The demand on adult time is a lot more. (Pre-school Manager)

Furthermore, it was also noted that practitioners felt children presented at ECEC settings with more ALN than previously. This was explained by the issues raised previously about a lack of external support:

Most of the children are now coming in with additional needs (...) they’re coming in and starting here, and nobody has ever seen them, no health visitor, everything was over the phone, so they’re coming in with all these needs, and have never seen a professional. (Day Care Setting Manager)

I’ve been a childminder now for seven years, and this year is the first year that all of my children have got additional learning needs. (Childminder)

Support Services for Children and Families

The third theme related to the limited availability of support from support services outside the ECEC sector which was a prominent topic of discussion in all the focus groups. Participants reported a shift in education settings providing additional welfare support compared to previously, feeling that that this was exacerbated by the pandemic. As the practitioner below exemplifies:

I think the roles of staff, whether it’s in the school or in the childcare settings, the pastoral side of it has increased tenfold. They are the whole family support. We are a bit of everything now because of the level of need for the families. (Flying Start Manager)

Practitioners suggested this was both due to the absence of other services, due to increased waiting lists, and that ECEC staff are frontline professionals who have daily contact with families.

We gained more trust, didn't we? Because we were the only ones they were seeing. They come to us for the support and stuff. It's a good thing because we did build stronger bonds. I'm very close to a lot of the parents, and they come to me with their problems. We were the only ones there. (Day Care Setting Manager)

A lack of support was noted by participants from 'health visitors', 'doctors', 'speech and language therapists' and 'assessment and support for children with additional learning needs'. When asked what type of support children needed because of the pandemic one practitioner stated:

More doctors, more speech and language therapists to reduce the waiting lists and get the children seen, because that will have a knock-on effect to help us as well an investment in parenting. [There are] massive caseloads from the outside professionals. So, we just struggle to get any support unless they are high level and have got IDPs [individual development plans] in place, then we really struggle to get any support for any children. (Flying Start Manager)

Speech and language support was an area that practitioners felt many children needed additional support with: 'The speech and language list in our area is like a year to eighteen months, so if it wasn't for COVID, these children would be seen a lot sooner' (Childminder). Similar issues were raised around the access to support for children with ALN: 'We've got children two years on that still haven't had a diagnosis of ASD where they would have had a diagnosis in less than a year' (Pre-school manager).

Practitioners suggested that the lack of baby groups, toddler groups had a big impact on parents (particularly mothers) support and therefore parental mental health issues increased. Practitioners felt that, without peers to talk to and express concerns about their child's development, parents felt more isolated and anxious about their children:

People weren't able to attend groups, where normally families would be attending toddler groups, and learning from other parents and other staff, so they haven't had the role models either. (Flying Start Manager)

Is this a COVID-19 effect?

It should be noted that some practitioners did not think that the children who experienced COVID-19 as toddlers and infants were negatively impacted: 'I think there's a lot of children who really enjoyed it at the time. I dare say there's a lot of

parents who did. Some people came back and said they really enjoyed themselves.' (Childminder).

Practitioners also questioned if some of the above impacts observed by practitioners were a direct impact of COVID-19 or if other factors were in play, as the below quotes suggest, some practitioners were questioning if increases in ALN are due to COVID-19 or a more general trend:

It's easy to blame COVID, it was a big event, it was a global pandemic, oh, we'll blame it all on COVID. That's maybe not correct, because the children that had lived through COVID, they are not necessarily the ones we're seeing with SEN [ALN], it's the children coming in now who were born after. So, I think it's being careful but what we're trying to say is COVID is potentially a fallout of COVID and not a bigger picture of the world in which we live in now. (Pre-school Manager)

Longer term changes as a response to the pandemic

The final theme from the qualitative data centers around the changes that settings had made in response to the pandemic and are a reflection on the success of these changes. When asked what they changed as a result of the pandemic, practitioners discussed how they had adapted their setting and practice to meet changes in children's need. For example, in order to meet the social and emotional needs of their children, one setting has 'Engage[d] with the Paths Programme, which is Barnardo's, and it's about social and emotional development in childhood [...] It's embedded now' (Full Day Care Setting Manager).

Some settings had restructured their provision as a result of the changes in the level of need of the children:

We've had to change as a setting for the lower development levels they're achieving [...] so we've had to adapt our sessions with the younger ones in the morning and the older ones in the afternoon, but we don't do it on age, we do it on development. So our morning session is run more like a tweeny room in a day nursery [...] In the morning now we can't have things like chalks and things like that, because they're still at the level of mouthing and chewing them. (Flying Start Manager)

In a number of ECEC settings participants reported that practical changes have been made and maintained. Some of the reoccurring changes were: parents not entering the building (this was popular with nurseries and childminders), improved or increased cleaning regimes, shifts to online paperless systems for communication with parents; and the increased use of the outdoors.

In some settings, transition practices and general communication to parents that were set up during the pandemic have continued, for example “When we had enquiries from families [...] I sent photographs of the setting [...] that’s carried on” (Pre-school Manager). One practitioner also reported large scale pedagogical changes which have had a positive impact on their provision ‘On a positive a result of COVID, it gave me time to research some things, and we discovered ‘in the moment planning’[...] it’s been the best thing we’ve ever, ever done, and we’ll never go back’ (Flying Start Manager).

Discussion

The discussion will bring together the quantitative and qualitative data with the existing academic literature to address each of the research questions in turn before outlining the recommended lessons learnt for policy and practice. While the findings present overarching trends across the sector, it is important to note the diversity within ECEC provision in Wales. Experiences, opportunities and challenges varied between different types of ECEC settings. For example, Flying Start managers reported more consistent engagement with families during the pandemic due to pre-existing structures, while private nurseries faced greater viability concerns. This diversity highlights the need for targeted support rather than one-size-fits-all solutions. Furthermore, claims of impact should be considered within the broader body of evidence on child development and trauma recovery, including recent post-2020 literature (e.g., Harkins et al., 2023; Stanford et al., 2021), which suggests that long-term outcomes may depend on sustained, multi-agency support.

Research question 1: How do ECEC practitioners in Wales perceive the impact of the COVID-19 on the children and families they work with, and how has this changed over time?

There is evidence that the COVID-19 pandemic negatively impacted children’s speech and language, cognitive, social and physical development (Chadd et al., 2021; Araújo et al., 2021; Tyrie et al., 2021), as well as their mental health and wellbeing (Office for Health Improvement and Disparities 2022). In Wales, Tyrie et al. (2021) found that ‘social and emotional development’ was reported as the most negatively impacted by

the pandemic. This is also evidenced within the data from the 2023 survey, presented in this paper, which found that children's social wellbeing and emotional wellbeing were reported as being the most negatively impacted by the pandemic. However, interestingly, the findings suggest that the practitioners in the survey in 2023 perceived the impact of the pandemic as worse than those who completed the survey during the peak of the pandemic in 2020. Possible reasons for this can be found within the qualitative focus group data. While practitioners felt that children's development was negatively impacted, most discussions about developmental impact were focused on the lack of support within the system for babies and young children and their families both during the pandemic and since, which in turn, they believed, impacted children's development. The impact of the lack of support services and long waiting lists may not have been felt so keenly during the initial lockdown period where everyone was in 'crisis management'. The impact of the lack of support services on child development has been shown in the literature (Harkins et al., 2023; Morton and Adams, 2022). This extends beyond the support within ECEC settings to families and the community with Hope et al. (2022) finding that mothers in Wales had a more negative experience of pregnancy and birth for children born in 2020 due to the lack of support available for them at the time. Furthermore, Knight et al. (2023) found that support for families was a key area to support COVID-19 recovery. This lack of support during pregnancy and a child's first months might explain why focus group participants believed that there was a higher level of need for children born during in the pandemic compared to those children who were in ECEC settings at the time of the COVID-19 restrictions being in place. This further explains the significant differences between the 2020 and 2023 surveys.

Research question 2: How do ECEC practitioners in Wales perceive the impact of the COVID-19 pandemic on ECEC settings and staff, and how has this changed over time?

As seen in the quantitative data, over one third of the participants in both surveys (39.9 per cent in 2020 and 33.5 per cent in 2023) said that their setting had struggled to remain viable. It might have been expected that this percentage would have decreased following the pandemic as the system returned to normal, although, there was no significant difference in the responses. A number of sources have reported temporary and permanent nursery closures and workforce challenges in the UK

over the last three years (Dayal and Tiko, 2020; UK Parliament, 2021). Together these have implications for the sustainability of the sector with early years practitioners in this research reporting significant concerns about their professional lives. Participants discussed the negative impact of the pandemic on staff wellbeing, quality of care and it was commented on that the sector feels undervalued and forgotten by society. The quantitative data showed a lower average impact on staff's physical, social and emotional development than children across both surveys highlighting the large negative impact that practitioners felt staff have experienced as a result of the pandemic. As with children's development, the perceived impact of the pandemic on reflection and in the longer term (reported in 2022) was significantly more negative than at the time of the pandemic (reported in 2020). This is perhaps surprising given that the Welsh Government has funded the recruitment of 2,452 FTE staff in ECEC settings, and the Minister for Education reported on the success of this programme (Miles, 2023). Yet, practitioners in the focus groups spoke about the struggle to hire and retain qualified staff and the overall fatigue within the system three years on from the official end of the pandemic.

Research question 3: What do ECEC practitioners feel that they have learnt from the COVID-19 pandemic which will shape their practice in the future?

While in 2020 the majority (79.8 per cent) of ECEC settings had changed the spaces and places in their setting as a result of COVID-19, this fell to 36.3 per cent in 2022. This suggests that while changes were put in place in response to COVID-19 restrictions, the majority of respondents in 2022 were not retaining the changes made. Nonetheless, practitioners in the focus groups discussed several changes that had remained in place that were adapted as a result of COVID-19. They mostly centred around adapting the setting to the increased level of need that children in the setting were showing. This was particularly around the social and emotional and speech and language skills which were felt to have been negatively impacted by COVID-19. Furthermore, the ways in which the settings interacted with families was reported to have changed, with more reliance on digital methods of communication (reported in the literature by Levickis et al., 2022, and Wilinski et al., 2023), and many settings reporting that parents and carers were no longer entering the setting daily. Reported changes also included the move to more outdoor time for children and improved or increased cleaning regimes.

Also, important to note, is that some practitioners reported a positive impact of COVID-19 for those in their setting. It was mentioned that some children may have benefited from the increased time with their families, and that there may be longer term positive benefits for settings due to the learning and professional development that took place during the pandemic. This reflection strengthens the general argument for the importance of using the pandemic as a learning opportunity to inform future practice in ECEC.

Lessons Learnt

While the pandemic has led to a significant increase in need within the sector, settings have adjusted their practice in ways to support the staff, children and families that access them. Using the data, we make the following recommendations for policy and practice in Wales.

The value of the sector

A key recommendation is to ensure that ECEC practitioners, and the sector, feels valued. Despite the Recruit, Recover and Raise Standards' programme in 2020 by the Welsh Government (Miles, 2023), practitioners reported feeling unrecognised in their efforts to supporting young children both during and post-COVID-19. In 2023, 33.5 per cent of settings participating in our study still reported struggling to remain viable despite the global pandemic officially ending. Both national and local government should consider not only financial support for settings, but also a system level acknowledgement of the contribution of the workforce in supporting young children and families through this challenging and unprecedented time.

Joined up support service delivery

ECEC practitioners conveyed a feeling of being at the forefront of delivering support, not just for the children in their settings but also for their families. Therefore, a key recommendation from this research is that social support services are embedded into ECEC settings. Clark, Cahill and Ansel (2022) discuss the benefits of integrated services at 'neighbourhood hubs': 'The idea of local hubs resonates with the interconnected nature of neighborhoods and homes, which

encourage relational, flexible responses that are capable of partnering with families in their efforts to scaffold their children's development and learning' (p. 13). While this approach has begun to be used in Flying Start Centers in Wales, consideration of this approach in wider ECEC settings should be considered.

Recognition of effective and context-responsive practice

Finally, it is clear that settings have developed innovative and effective practice in response to the challenges that COVID-19 created. Settings should be provided with an opportunity to reflect about their successes during this time and to consider how what they have learnt can be implemented to effective and context-responsive practice in the future.

Conclusion

In conclusion, the findings presented shed light on the multifaceted impact of the COVID-19 pandemic in Wales. The evidence aligns with global concerns, indicating that children's social and emotional well-being and overall development have been particularly affected (Araújo et al., 2021; Chadd et al., 2021; Office for Health Improvement & Disparities 2022; Tyrie et al., 2021). Furthermore, the findings foreground the lasting impact on ECEC settings, and sector as a whole, with some practitioners still questioning the viability of their settings over three years since the onset of the pandemic. The study's emphasis on utilising the pandemic as a learning opportunity reinforces the need for ongoing reflection and innovation in ECEC policy and practice both in Wales and globally. By leveraging insights from the pandemic, the ECEC sector can reflect upon what has been learnt to support a stronger foundation for the generations to come.

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