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Practice Unit

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**Evidence Briefing #10: February 2021**

Delivery of the HeadStart  
programme during the  
coronavirus pandemic:  
**HeadStart staff  
perspectives**

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# Contents

<b>Executive summary</b>	<b>1</b>
<b>About HeadStart</b>	<b>3</b>
<b>Introduction</b>	<b>4</b>
<b>Methodology</b>	<b>5</b>
<b>Findings</b>	<b>6</b>
<b>Discussion</b>	<b>16</b>

## Evidence Briefing #10

# Executive summary

## Introduction

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### Background

Started in 2016, HeadStart is a six-year, £67.4 million National Lottery funded programme set up by The National Lottery Community Fund, the largest funder of community activity in the UK. HeadStart aims to explore and test new ways to improve the mental health and wellbeing of young people aged 10 to 16 and prevent serious mental health issues from developing. This briefing reports the findings from a study conducted as part of the national qualitative evaluation of HeadStart.

### Methodology

The aim of this study was to explore the perspectives of staff members working at the HeadStart partnerships on HeadStart delivery during the pandemic. Across the five partnerships that took part in this study, discussions took place with 1-5 HeadStart staff members at each partnership, including programme leads, strategic leads, local evaluation leads, and the leads of particular areas of HeadStart activity (such as co-production). The discussions took place between May and September 2020. A thematic analysis of the discussions was conducted.

## Findings

### Theme 1: A challenging time

Theme 1 consisted of three sub-themes, which all spoke to the challenges that the HeadStart partnerships had been facing during the pandemic: 1) Areas of scaled back provision; 2) Concerns about wellbeing; 3) Managing uncertainty.

### Theme 2: Flexing, adapting and responding to need

Theme 2 consisted of five sub-themes, which described how the HeadStart partnerships had been adapting their programmes in response to coronavirus restrictions and in light of the needs of young people, families and their local areas. These are: 1) Areas of increasing or new provision; 2) HeadStart as a conduit for information provision; 3) Making responsive changes to referral systems; 4) New activity, learning and adaptations to take forward; 5) The benefits and drawbacks of remote support delivery.

### Theme 3: Seizing opportunities

Theme 3 consisted of two sub-themes, which referenced the new opportunities that had arisen as a result of the pandemic for the HeadStart programme and for HeadStart staff. These sub-themes are: 1) Under the spotlight; 2) Working together.

## Discussion

### Conclusions and implications

Throughout the coronavirus pandemic it has been crucial for the HeadStart partnerships to be responsive, flexible and adaptive in terms of both their programme delivery and their priorities. Concern about the wellbeing of young people, families and staff has been a key factor underlying HeadStart programme delivery decisions during the coronavirus pandemic. HeadStart staff still have concerns about how to reach all young people and families who may be struggling, such as those who have previously disengaged with support or those who have difficulties accessing technology.

Overall, the findings provide insight into the ways in which preventive programmes like HeadStart can adapt during periods of major challenge, as well as highlighting the factors that can facilitate this and the opportunities that such challenging times can also bring for programmes like HeadStart. In particular, the potential increased prominence of HeadStart during the coronavirus pandemic may well have a positive influence on the sustainability and future of HeadStart.





# About HeadStart

Started in 2016, HeadStart is a six-year, £67.4 million National Lottery funded programme set up by The National Lottery Community Fund, the largest funder of community activity in the UK. HeadStart aims to explore and test new ways to improve the mental health and wellbeing of young people aged 10 to 16 and prevent serious mental health issues from developing. To do this, six local authority led HeadStart partnerships are working with local young people, schools, families, charities, community and public services to design and try out new interventions that will make a difference to young people's mental health, wellbeing and resilience. The HeadStart partnerships are in the following locations in England:

Blackpool; Cornwall; Hull; Kent; Newham; Wolverhampton.

The Evidence Based Practice Unit (EBPU) at the Anna Freud Centre and University College London (UCL) is working with The Fund and the HeadStart partnerships to collect and evaluate evidence about what does and does not work locally to benefit young people now and in the future. Partners working with the EBPU on this evaluation include the Child Outcomes Research Consortium (CORC) and the University of Manchester. This collaboration is called the HeadStart Learning Team. Previous partners in the HeadStart Learning Team include the London School of Economics (LSE) and Common Room.

# Introduction

Emerging evidence suggests that children and young people are facing continued challenges to their mental health, wellbeing and development as a result of the coronavirus pandemic, particularly with regard to anxiety, stress and depression<sup>a,b</sup>. Evidence also suggests that some young people have been disproportionately affected by the coronavirus pandemic and its mental health impacts, including: those with pre-existing health, education and social care needs; young carers; LGBTQ+ young people; and children and young people from some minority ethnic backgrounds<sup>b,c</sup>. Support providers, school staff and other practitioners have been working hard to find ways to adapt and to continue to support children and young people through this difficult time, while respecting social distancing and learning to operate in new and challenging conditions themselves.



This briefing reports the findings from a qualitative study conducted as part of the Learning Team's national evaluation of HeadStart. The aim of this study was to explore the perspectives of staff members working at the HeadStart partnerships on HeadStart delivery during the pandemic. The Learning Team's discussions with partnership staff members were conducted between May and September 2020. Depending on when the discussions took place, interviewees reflected on their experiences during the initial national lockdown period in England and the school closures that begun in late March 2020, as well as on the subsequent relaxation of restrictions and for some, the tightening of restrictions locally over the summer of 2020.

By the time of publication, additional aspects of HeadStart delivery (beyond those described in this briefing) may have already been or will need to be adapted further in light of changing coronavirus restrictions.

The findings presented here are relevant for policymakers and preventive programme delivery teams who are interested in learning how HeadStart has been delivering support for schools, young people and families amidst the coronavirus pandemic.

<sup>a</sup> The Emerging Evidence series summarises evidence published during the coronavirus pandemic from around the world about the impact of the pandemic on children and young people's mental health: <https://www.annafreud.org/coronavirus-support/our-research/>

<sup>b</sup> Gilleard, A., Lereya, S. T., Tait, N., Edbrooke-Childs, J., Deighton, J., & Cortina, M. A. (2020). *Emerging evidence (Issue 3): Coronavirus and children and young people's mental health*. Evidence Based Practice Unit, London.

<sup>c</sup> Gilleard, A., Lereya, S. T., Tait, N., Edbrooke-Childs, J., Deighton, J., & Cortina, M. A. (2020). *Emerging evidence (Issue 4): Coronavirus and children and young people's mental health*. Evidence Based Practice Unit, London.

# Methodology

This study received approval from the UCL Research Ethics Committee (ID number: 7963/002). The Learning Team invited HeadStart partnership staff to participate in a video call discussion about HeadStart delivery during the pandemic.

Across the five partnerships that took part in this study, discussions took place with 1-5 HeadStart staff members at each partnership, including programme leads, strategic leads, local evaluation leads, and the leads of particular areas of HeadStart activity (such as co-production). The identities of the partnerships and participants have been anonymised throughout this report.

All discussions with the partnerships were conducted over Microsoft Teams, audio recorded and transcribed. Questions asked by the Learning Team focused on the following topics:

- How coronavirus restrictions have affected HeadStart delivery, priorities and planning.
- How HeadStart has been able to help young people and families during the coronavirus pandemic.
- Ways in which HeadStart delivery has been limited during the coronavirus pandemic.
- Plans for HeadStart delivery following the initial national lockdown period of the pandemic.

The discussions were on average 55 minutes in length. The Learning Team conducted a thematic analysis to explore themes across the discussions relating to partnership staff members' perspectives on HeadStart delivery during the coronavirus pandemic. Thematic analysis is a qualitative data analysis method that can be used to identify patterns or themes across interviewees' experiences and perspectives<sup>d</sup>.

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<sup>d</sup> Braun, V. & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology*, 3, 77–101.



# Findings

## Theme 1: A challenging time

### Sub-theme 1: Areas of scaled back provision

#### Key points:

- Some aspects of HeadStart delivery had stopped or continued in diminished form during lockdown.
- Staff and families had needed time to adapt to virtual delivery.
- Schools had also needed time to adjust to the major changes happening within their own contexts.

HeadStart staff described stopping delivery of particular types of activity altogether or delivering some activities in a diminished form during the initial national lockdown period of the pandemic<sup>e</sup>. For instance, young people's peer mentoring sessions could no longer take place in their usual format due to school closures. In addition, scheduled training sessions for school staff and other professionals had to be cancelled when community venues shut. The scale of diminished activity varied between partnerships, with only a minority reporting that all HeadStart provision had completely stopped in particular settings during lockdown.

*"We still offered the support to the vulnerable young people as well as online. And schools didn't really take that up at all, which was surprising. So, our schools delivery more or less came to a halt and we've only just started it up again."*

HeadStart staff felt that particularly during the early phase of lockdown, activity was forced to slow down to give people time to adapt to virtual delivery of support.

Not all staff and families had access to the equipment necessary to be able to engage with virtual delivery at that point. Moreover, not all young people wanted to engage with online or phone support.

*"I think some of that was related to the home situation, so, you know, we know a lot of our young people don't always have their own bedroom, they don't have a private space. So, it's quite hard to do a counselling session when you haven't got that confidential space."*

HeadStart staff also indicated that schools needed time to get to grips with the major changes happening within their own contexts before they had the headspace to think about all that HeadStart could offer. This meant that schools' engagement with HeadStart had slowed down at the start of lockdown. Engagement, referrals and delivery of HeadStart support within schools then increased as schools adapted to coronavirus restrictions.

*"Schools weren't ready to start referring more young people onto it. They didn't know what day of the week it was, let alone, you know, what young people might need [...] and they had to put safeguarding first, so obviously kind of the preventative early work that we've always talked about so much was not going to be the priority."*



<sup>e</sup> Hereafter referred to as 'lockdown'.

## Sub-theme 2: Concerns about wellbeing

### Key points:

- HeadStart staff were concerned about the wellbeing of families, as young people's and parents' support needs escalated over the course of lockdown.
- There were also concerns about the wellbeing of HeadStart staff teams and school staff due to the burden of adjusting to coronavirus restrictions.

HeadStart staff reported that families' support needs had escalated over the course of lockdown. Many parents and carers, for example, had lost their informal support networks (such as grandparents) who might usually have supported them with caring for children with complex needs. Families were also facing the economic repercussions of the pandemic, such as job losses. The level of family conflict (including domestic abuse) that some young people, parents and carers were exposed to was also voiced by HeadStart staff as a concern. They noted that it was particularly difficult to keep in contact with very vulnerable families during lockdown.

*"Our biggest referral is schools, and with schools closing, about 70% of our referrals are from schools. So, we were a bit concerned no one had eyes on these young people."*

HeadStart staff also noted their concerns about the wellbeing of their own staff teams during the pandemic, as their workloads increased to keep up with the pace of change, their work and home lives merged, and they began to deliver support remotely. They described not wanting to put extra stress on their teams during this period and referred to the importance of setting realistic expectations for staff and service delivery partners (such as voluntary sector organisations), in terms of their workloads and outcomes.

*"We've got quite a significant number of staff with quite young children who weren't in childcare or in school. You can't be expecting people to be putting their all into their work in that time and space."*

HeadStart staff described having similar concerns about the wellbeing of school staff and stressed that they did not want to overburden schools during this difficult time. They mentioned that they had been proactively increasing and decreasing the frequency of their communications with schools, depending on their perceptions of the degree to which schools were coping over the course of the pandemic.

## Sub-theme 3: Managing uncertainty

### Key points:

- HeadStart staff identified difficulties around planning for an uncertain future.
- They recognised the value of maintaining virtual delivery as an alternative to in-person delivery, given ongoing uncertainty around when and to what degree coronavirus restrictions would ease.

HeadStart staff alluded to how challenging it was trying to plan for future HeadStart delivery without knowing what the future held in terms of the pandemic. For instance, it was difficult to know during lockdown whether referrals to HeadStart would dramatically surge when schools re-opened in September, and whether HeadStart had capacity to manage this.

*"It's kind of hard, there's nothing to compare it to, we haven't had a situation where everybody in the country has been affected. But it is about trying to use modelling tools to plan."*

HeadStart staff were also uncertain whether schools would allow external providers on-site to deliver support when they opened in September, or indeed whether it would be feasible to deliver any group interventions in indoor spaces for the foreseeable future. Consequently, staff recognised the value of maintaining virtual delivery at this stage as an alternative to in-person support.



## Theme 2: Flexing, adapting and responding to need

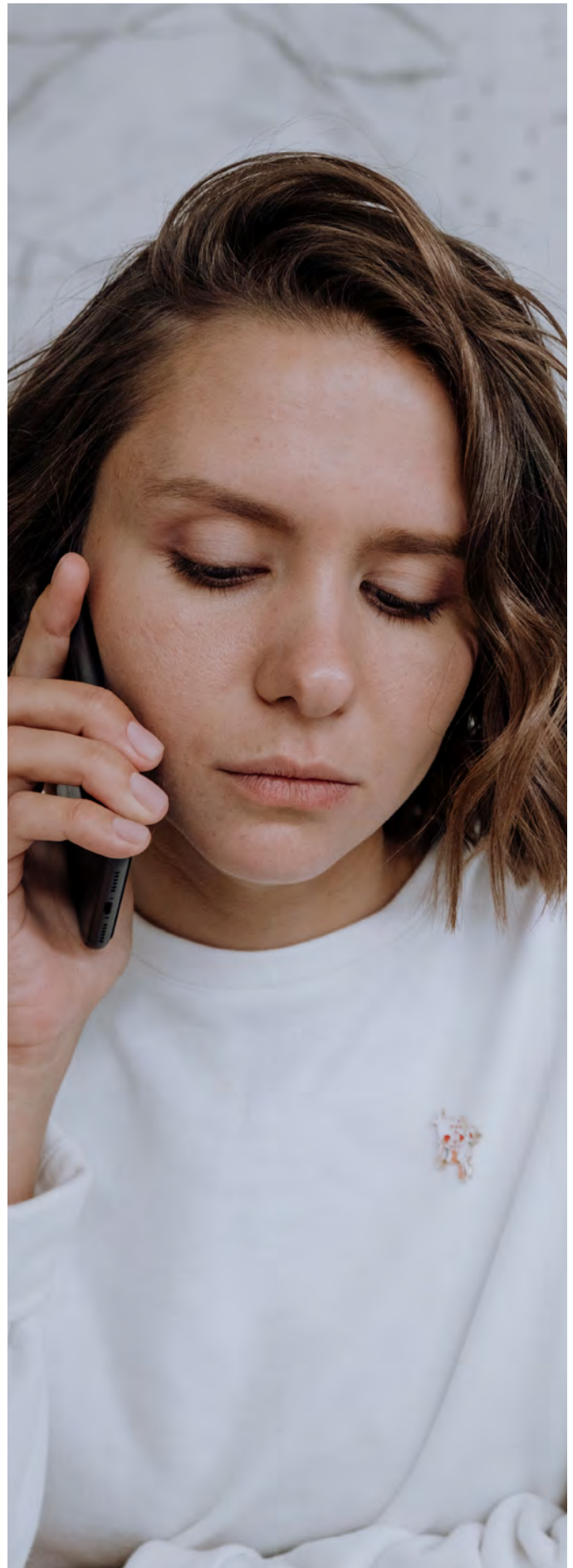
### Sub-theme 1: Areas of increasing or new provision

#### Key points:

- Staff had found that provision of some types of HeadStart support had increased through virtual delivery and through expanding delivery to new districts, schools and families.
- Additional activities were being delivered and new resources were being developed by HeadStart teams to meet new areas of need.
- The frequency of delivery of some interventions and activities had also increased, including meetings with young people involved in co-producing HeadStart programmes.

HeadStart staff described, where possible, adapting their existing interventions, resources and activities to be delivered or accessed virtually (such as via video calls, phone calls or online platforms) or in a socially distanced setting during lockdown. Staff had found that a key advantage of virtual provision was being able to increase the reach of their HeadStart programmes. For example, the provision of virtual training sessions had enabled HeadStart staff to train a higher number of school staff in whole-school approaches to supporting young people's mental health and wellbeing than had previously been possible. This included training for school staff from different locations who might otherwise have been unable to attend an in-person training session.

*"There's not enough hours in the day at the minute. Because we're trying to keep integrity of the programme, maintain the implementation of that, and at the same time look at the potential to convert it to meet need in the current situation."*



Staff described cascading some HeadStart services, resources and support provision (such as online counselling for young people) across more districts, schools and families within their local areas than previously. This had enabled HeadStart to reach a larger population during this time who could benefit from HeadStart support. Social media was reported as a facilitator to disseminating HeadStart resources and campaigns, as well as increasing the reach of HeadStart.

*“Where we lost our school work, we made up for it in kind of community work [...] because we broadened our reach in terms of the geographical areas, that did lead to an increase in the numbers [of referrals] as well.”*

HeadStart staff described delivering additional activities or developing new resources to meet new areas of need that had arisen as a result of the pandemic and its associated restrictions. Assessment of areas of need was achieved through consultations with young people, families and school staff, as well as through the development and dissemination of local area surveys to ‘temperature check’ how young people were feeling.

Areas of need identified included:

- ensuring that families had access to basic resources (e.g. food);
- mitigating feelings of isolation and loneliness among young people, such as through the provision of fun activities that young people could do at home during lockdown;
- supporting staff wellbeing;
- increasing the provision of support for parents and carers;
- creating new support resources or activities for disproportionately affected groups of young people and families.

*“Things like food parcels to vulnerable families, well we never thought of doing that, it was never in our project plan, so again it’s about having that flexibility and saying to our other local community organisations, ‘Yes you can do that, we’ll fully support you.’”*

HeadStart staff noted that some interventions had increased in terms of their frequency of delivery during lockdown, as staff had made the decision to deliver support during the summer holidays, for example, as well as during school term-time due to high perceived need. HeadStart staff also described having more frequent meetings (including with the young people co-producing their HeadStart programmes) during lockdown through video calling, as this removed the obstacle of arranging travel and a suitable location. Indeed, HeadStart staff acknowledged that saving time and budget on travel had meant that activities that they were previously unable to pursue – due to restricted resources – were now possible, such as creating new online resources or virtual toolkits.

*“I think as a service, what we’ve had is space to address some of the things that are important to us, and things like actually co-production, we’ve had a space to really think about that in a different way, and really try and ensure that going forward.”*



## Sub-theme 2: HeadStart as a conduit for information provision

### Key points:

- HeadStart teams had taken a lead within their local areas in communicating information and resources relating to young people's mental health and wellbeing.
- They had created new HeadStart webpages or resources to address specific needs brought about by the pandemic.
- They had also been sharing key but concise information with schools to minimise burden.

HeadStart staff commented that HeadStart had taken a lead within their local areas in communicating information and resources relating to young people's mental health and wellbeing to families and schools. With a high volume of information being released from multiple sources (such as the Department for Education and Public Health England), HeadStart staff identified a need to collate relevant information in a single location. They therefore shared information through various channels, including their websites, email newsletters or a directory specifically created to collate useful information from different sources.

*"I think what we've provided is consistency and reliable information. So, one of the things that young people, parents and staff told us, not just staff in schools, is they felt bombarded and confused by all the information. So, we took the lead on the comms."*

HeadStart staff described trying to share key information with schools in a concise way, to prevent busy school staff from having to sift through lots of information themselves. They also mentioned creating new HeadStart webpages or resources that were specifically geared towards helping young people and parents and carers to cope with the stresses brought about by the pandemic.

*"Things like the bereavement support that we have here. Any of the training sessions that we knew might be going on. Links to online free resources etc, etc. So, trying to kind of [...] do some of the groundwork for schools so they didn't have to sift through so much that was out there."*



### Sub-theme 3: Making responsive changes to referral systems

#### Key points:

- Staff noted that there had been decreases in referrals to HeadStart at the beginning of lockdown, but referrals had then started increasing over the course of lockdown.
- They also reported increased flexibility around who was eligible for HeadStart support and how young people could be referred to HeadStart.

HeadStart staff noted that referrals had decreased for all or some interventions, particularly during the early stages of lockdown. Staff suggested multiple reasons for this, including:

- schools closing to most pupils;
- some young people potentially viewing the shift from school to home at the start of lockdown as being a positive change;
- young people, families and schools having other priorities, for example, adjusting to coronavirus restrictions.

*"I think everybody was so busy worrying about where they get toilet roll and what does lockdown mean and, and, you know, adjusting, and I think it was almost normal to be stressed then."*

However, HeadStart staff also noted that referrals to HeadStart had begun to increase over the course of lockdown for some or all interventions. Reasons for this suggested by staff included:

- the increased reach of their HeadStart programmes, e.g. as a result of offering support in additional districts within their local areas;
- a potential increase in young people's anxieties, such as those related to the prospect of returning to school;
- schools adjusting to coronavirus restrictions;

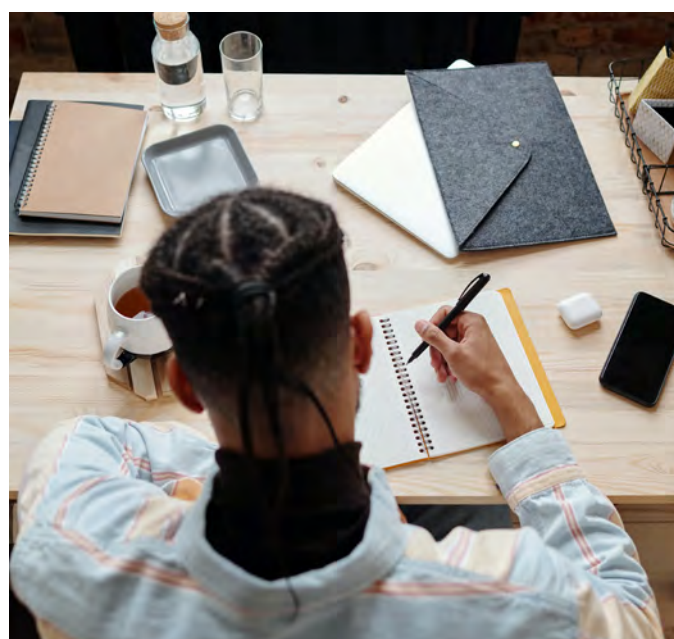
- challenges and vulnerabilities increasing during the pandemic, such as family financial difficulties and bereavement.

*"What we're anticipating is a surge in demand, as some of the relaxation of the restrictions progresses. But what we have seen in the last couple of weeks is referrals starting to come in again, but the level of need is much worse."*

HeadStart staff mentioned that they had changed their referral systems in response to coronavirus restrictions. For example, they described that when it was not possible to provide interventions in a socially distanced manner to lots of young people, they had scaled back delivery to focus on providing support for smaller numbers of young people who had particularly high levels of need.

They also described being more flexible about who was eligible for HeadStart support, including accepting referrals from a broader range of geographic areas or settings, and promoting the range of ways in which individuals or organisations could refer young people to HeadStart, such as encouraging self-referral among young people.

*"I was contacting young people by phone to check in on them [...] as long as the school had referred them [to HeadStart]. And I think that's kind of grown organically as we went through to then opening that offer to say we'll contact any young person that you think needs support."*



## Sub-theme 4: New activity, learning and adaptations to take forward

### Key points:

- There was a new acceptance of different forms of delivery, primarily virtual (online or phone) delivery, as viable alternatives to in-person delivery.
- HeadStart teams had new plans to boost their community or school support offers as a result of the pandemic driving higher levels of need.
- They also described branching into new areas of support provision going forward, such as helping young people to cope with bereavement.

HeadStart staff felt that this period had been a learning curve and commented that it had stimulated acceptance of different forms of delivery, primarily virtual (online or phone) delivery, as viable alternatives to in-person delivery.

Virtual delivery can be more easily accessible for some people, such as busy parents and carers or school staff. Moreover, HeadStart staff believed that it would continue to be relevant over the course of the pandemic, particularly if schools were unable to allow external visitors on site to deliver support. Some young people may also prefer to continue engaging online (e.g. with co-production meetings or counselling sessions), as this negates the need for travel and may be a more socially acceptable way of accessing mental health support.

*“Some parents have always struggled to engage with services because they may work shifts and things like that. So, actually having some pre-recorded, little training videos and then having maybe like a webinar they can come into, is another way of delivering.”*

HeadStart staff described how their programme models were changing in response to their newfound ability and capability to deliver support online, with the potential for delivering a mix of

online and in-person support going forward. They also spoke about new plans to boost their community or school support offers, as a result of the pandemic driving higher levels of need.

*“We’ve changed our workforce offer to reflect that additional support to the teachers, to the young people, to parents and to the community organisations as well, so things like having a, mental health first aiders for the community. That’s now being introduced.”*

HeadStart staff also described seeking to branch into new areas of support provision going forward, in response to specific needs brought about by the pandemic. This included boosting support provision around school staff wellbeing and delivering support for young people and families with a focus on managing such issues as bereavement and anxiety.



## Sub-theme 5: The benefits and drawbacks of remote support delivery

HeadStart staff described the benefits and drawbacks, from their perspective, of delivering support for young people, families and school or community staff remotely, including online or over the phone.

Perceived benefits	Perceived drawbacks
Busy parents and carers struggling to engage with services may find it easier to engage with a webinar or pre-recorded videos.	Challenges associated with video call meetings, such as computer crashes or limitations of software.
Accessing support remotely, rather than in school, means that young people's classmates do not need to know that they are receiving support.	Adjusting to new ways of working, including putting in place new safeguarding procedures.
More regular meetings can take place, such as with young people from different parts of the local area, without the travel barriers of in-person meetings.	Not all types of HeadStart support or activity can be adapted to be delivered online or by phone.
More frequent communication can occur within HeadStart staff teams due to the increased availability of and access to communication tools.	Not all young people, parents and carers, and staff want to or can engage with online support, e.g. if they do not have access to technology or a private space at home.
Being able to reach a wider population of young people, families and school staff.	Merging of home and work spaces for staff can lead to difficulties in managing both work and home lives.



## Theme 3: Seizing opportunities

### Sub-theme 1: Under the spotlight

#### Key points:

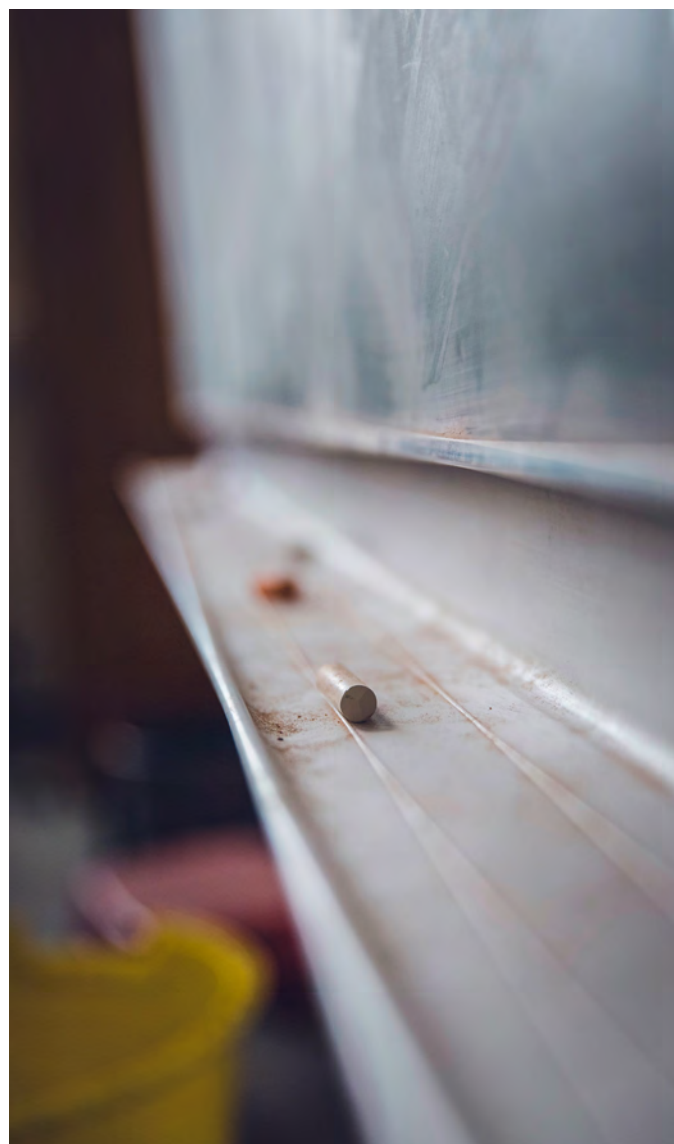
- Staff felt that HeadStart had achieved increased prominence within their local areas due to the programme's expertise in supporting schools and the mental health and wellbeing of young people and parents and carers.
- They also felt that HeadStart skills and resources were in demand during this period of crisis, such as participation workers' skills in working with young people to co-produce new initiatives.

Staff felt that HeadStart had become more prominent within their local areas during the pandemic because of the support it was able to offer schools during this difficult period. Another reason for HeadStart's increased prominence was the expertise HeadStart partnership teams could offer in relation to supporting young people's and parents' and carers' mental health and wellbeing, which had arguably become even more of a priority as a result of the pandemic. HeadStart's increased prominence during this period was perceived by HeadStart staff as helpful for their sustainability planning. For instance, some HeadStart staff felt that increased visibility might help them to procure additional funding sources further down the line, or help cement the programme's legacy in their local areas.

*"We're going to be in a position to really reinforce a whole school approach and how important emotional support and mental health is for both children and young people and school staff. So, yeah, it's positioned the programme in a way that hopefully means the legacy conversations are going to be easier."*

Staff referred to HeadStart as being a key aspect of wider strategies within their local areas to support the mental health and wellbeing of young people, families and schools during the pandemic. Staff felt that HeadStart skills and resources were in demand during the pandemic, such as participation workers' skills in working with young people to co-produce new initiatives, as well as HeadStart's accessible resources (such as booklets or webpages), which could be disseminated widely to families and schools.

*"There was a Covid response across [local area], not just a HeadStart response. So, there was a lot of activity going on that our commissioned providers in their local communities were aware of and involved with in some way, shape or form."*



## Sub-theme 2: Working together

### Key points:

- HeadStart staff felt that relationships between HeadStart and other services within their local areas had become stronger.
- They also described experiencing improvements in communication within their own staff teams and mentioned the positive responses that they had received from their service delivery partners during this difficult period.

From HeadStart staff members' perspectives, being a key part of the wider local authority's strategy during the pandemic had strengthened relationships between HeadStart and other services within the local authority, such as the educational psychology service and the Clinical Commissioning Group (CCG). HeadStart staff also described consulting with schools and working closely with young people as co-production partners to discuss new ideas and troubleshoot areas of potential challenge during the pandemic, such as how to facilitate young people's access to virtual delivery and how to engage school staff in webinars.

*"Thinking about more than ever, actually, if we're talking about what young people need in response to Covid, who are we to be the only ones who are sat round a table discussing that?"*

HeadStart staff spoke about the good relationships that their partnership teams had formed with schools over the duration of the programme so far, which had facilitated their continued contact with schools during lockdown. HeadStart staff also commented that virtual working had increased and strengthened their communication with one another, as virtual meetings overcame geographical barriers and provided staff with a new space to meet with each other.

Finally, HeadStart staff praised the positive response of their support delivery providers in willingly adapting and flexing to the new demands of the coronavirus pandemic.

*"Now we're sort of virtual we've actually been able to get together a lot more and share a lot more ideas and be quite creative with what we're doing."*





# Discussion

## Key messages

**Key message 1: There is an ongoing need for HeadStart to be responsive, flexible and adaptive as a programme.**

Throughout the coronavirus pandemic, it has been crucial for the HeadStart partnerships to be responsive, flexible and adaptive in terms of both their programme delivery and priorities. This will be an ongoing process for the HeadStart partnerships for the foreseeable future as the pandemic continues.

**Key message 2: Managing unprecedented change and uncertainty has been challenging.**

HeadStart delivery during the coronavirus pandemic has waxed and waned in line with the impact of coronavirus restrictions, and fluctuating levels of need and capacity to engage with HeadStart among young people, families and school or community staff. Concern about the wellbeing of young people, families and staff (including staff within HeadStart teams) has been a key factor underlying HeadStart programme delivery decisions during the coronavirus pandemic.

**Key message 3: Despite the challenges of this period, hard work and good relationships have facilitated adaptation.**

The changes that the coronavirus pandemic has brought, while challenging, appear to have been manageable for HeadStart staff. This is due to hard work from HeadStart staff teams, and good communication and relationships within staff teams and with the local authority, as well as with families, school staff and community providers. These factors have enabled HeadStart support provision to continue in varying forms throughout the coronavirus pandemic.

However, HeadStart staff still have concerns about how to reach all young people and families who may be struggling, particularly during lockdown, such as those who have previously disengaged with support or those who have difficulties accessing technology. Recent findings from the Understanding Society Covid-19 study in the UK have shown that 4% of young people do not have any access to a computer, laptop or tablet and 51% of young people have access to shared devices<sup>f</sup>.

**Key message 4: HeadStart has a key role in local area responses to the pandemic.**

From HeadStart staff members' perspectives, the coronavirus pandemic seems to have played a role in emphasising the importance and prominence of HeadStart within their local areas, whether that is through wider support provision (e.g. through delivering services over larger geographic areas to meet more need) or changes in support provision (e.g. ensuring that families have access to basic resources, such as food, or becoming a conduit for information provision around young people's mental health and wellbeing). This could potentially have a positive influence on the sustainability and future of HeadStart.



## Strengths and limitations

This briefing provides an illustration of what delivery of the HeadStart programme has been like during the period of unprecedented upheaval and change that the coronavirus pandemic has brought. The findings presented in this briefing represent the perspectives of a self-selecting sample of HeadStart partnership staff members (at five of the six partnerships). It may be that additional themes would be identified with a larger or alternative sample of HeadStart staff members, or a sample composed of alternative stakeholders, such as school staff, service delivery partners, local authority representatives, young people,<sup>9</sup> and families.

## Conclusions and implications

The findings of this study show what HeadStart support looks like and how the programme has been implemented, from HeadStart staff members' perspectives, during the coronavirus pandemic.

HeadStart is a test and learn programme, and the HeadStart partnerships have been given the flexibility to adapt their delivery to their local contexts, which has included adaptation in response to the pandemic. Thus, the findings provide insight into the ways in which preventive programmes like HeadStart can adapt during periods of major challenge, as well as highlighting the factors that can facilitate this and the opportunities that such challenging times can also bring for these programmes.

<sup>f</sup> [https://www.understandingsociety.ac.uk/sites/default/files/downloads/general/ukhls\\_briefingnote\\_covid\\_homeschool\\_final.pdf](https://www.understandingsociety.ac.uk/sites/default/files/downloads/general/ukhls_briefingnote_covid_homeschool_final.pdf)

<sup>9</sup> [https://www.ucl.ac.uk/evidence-based-practice-unit/sites/evidence-based-practice-unit/files/a3\\_poster\\_headstart\\_young\\_people\\_coronavirus\\_updated\\_publication.pdf](https://www.ucl.ac.uk/evidence-based-practice-unit/sites/evidence-based-practice-unit/files/a3_poster_headstart_young_people_coronavirus_updated_publication.pdf)

The findings of this study have the following implications for HeadStart and other programmes like it:

1. There is a need to further invest in training, preparation and access regarding virtual delivery of support services, with effective preventive programme delivery likely requiring a mixed model of in-person and remote support provision going forward. The HeadStart partnerships have been adapting their delivery to offer a blended approach to delivery where this is possible. For example, HeadStart Hull are offering walk and talk counselling and HeadStart Newham have developed their All About Me Journal for young people, which helps youth practitioners to get to know young people through their phone/online befriending service.
2. It is important to recognise the potential additional need for support provision around staff wellbeing during the coronavirus pandemic, as staff wrestle with uncertainty and the merging of their work and home lives, and as their workloads increase to keep up with the pace of change.
3. While many young people and families are being reached who would most benefit from support, others may not be, due to challenges around accessing support exacerbated by coronavirus restrictions. While the HeadStart partnerships have been making significant adaptations to their approach to best meet the needs of young people, there remains a need for programme delivery teams to trial and share learning with each other about the effectiveness of different ways of managing such challenges to ensure that support is reaching everyone who needs it.
4. The potential increased prominence of HeadStart during the coronavirus pandemic may well have a positive influence on the sustainability and future of HeadStart, for instance in terms of cementing its legacy.



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