



Healthwatch
Together

Blackburn with Darwen,
Blackpool, Cumbria and
Lancashire working
in partnership



How are you coping with the Coronavirus (Covid-19) pandemic?

Summary report 2

Overview of version 2 of survey

May - June 2020

About Healthwatch and Healthwatch Together

Healthwatch was established in April 2013 as part of the implementation of the Health and Care Act 2012.

Healthwatch England acts as the national consumer champion for all local Healthwatch organisations, enabling and supporting individual Healthwatch to bring important issues to the attention of decisions makers nationally.

A key role of each individual Healthwatch is to champion the views of people who use health and care services in their area, seeking to

ensure that people's experiences inform the improvement of services. Healthwatch are constantly listening, recording and reporting on the views of local people on a wide range of health and care issues, ensuring that people are able to express their views and have a voice in improving their local health and care services.

Healthwatch Together consists of Healthwatch Cumbria, Healthwatch Lancashire, Healthwatch Blackpool and Healthwatch Blackburn with Darwen, working in collaboration together.



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Rationale for research

This research project took place as a result of the Coronavirus pandemic (Covid-19) and the subsequent lockdown that took effect in England in March 2020.

Healthwatch Together (HWT) quickly created a survey in response to the pandemic, with the aim of finding out how the people of Cumbria and Lancashire were coping during this difficult time.

The survey was developed as a ‘temperature check’ designed to find out how people were feeling and coping during the initial first weeks of this unprecedented pandemic.

We wanted to tell people’s stories, their personal experiences.

The initial survey (v1) was launched on Survey Monkey on 23 March 2020 and ran until 26 April 2020.

A second version of the survey (v2) was launched on 27 April 2020 and ran until 19 June 2020. This report is based on the findings of the v2 survey.

Findings from v1 of the survey

Report 1 (published by HWT in May 2020) provides full details of the demographics and an explanation of the issues raised by v1.

In brief, results of the v1 survey showed that most people across Cumbria and Lancashire were coping with the impact of the pandemic. However there were a minority who were really struggling and appeared to be disproportionately affected. This group included:

- + **Those with mental health issues.**
- + **Those with pre-existing medical conditions.**
- + **Those with caring responsibilities (for children with learning disabilities and/ or elderly relatives).**

Public Health England have identified the negative impact of the pandemic on BAME communities¹. Unfortunately we only had a low percentage of respondents from BAME communities for v1. HWT resolved to tackle the lack of diversity among respondents during the promotion of v2.

Creating the questions for v2

Some of the original questions we developed were no longer relevant to the current stage of the pandemic. Other questions had provided us with such a wealth of data and feedback that we were able to move on to investigate the issues they raised.

Using the findings from v1 and working collaboratively with our partners in health and social care, we developed a new series of questions designed to find more detailed information about the groups who are disproportionately affected, the financial implications of lockdown and the increase in the use of video/phone consultations replacing face to face appointments.

Working with Dr Lewis Turner of LGBT Lancashire, we updated some of our demographic questions to account for the range of diversity within the LGBTQ community and in order to identify particular issues affecting them.

After identifying a possible safeguarding issue, we decided to include a section where respondents could leave their email address so we could contact them to provide signposting. We also included links to support organisations for domestic abuse, child abuse and homelessness.



Methodology & questions

Methodology

Anyone living in Cumbria or Lancashire was eligible to complete the survey online. A link to the survey was shared via Healthwatch websites, through social media and word of mouth and via a network of local contacts.

No personal data was collected, although respondents were given the option to leave their email addresses if they wanted us to contact them about a certain issue.

Respondents were assured of their anonymity, but were informed that we may use their (anonymous) quotes in our reports.

Questions

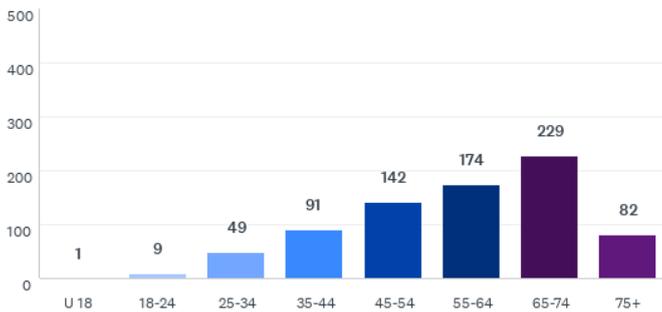
1. Where do you live?
2. How old are you?
3. Are you male/female/other/prefer not to say?
4. Is your gender identity the same as on your original birth certificate?
5. How would you describe your sexual orientation?
6. What was your employment status before the Coronavirus (COVID-19) pandemic?
7. Including yourself, how many adults (18+) live in your household?
8. How many children (0-17) live in your household?
9. What is your ethnicity?
10. How would you rate your mental health prior to the Coronavirus pandemic?
11. Have you been diagnosed with, or do you feel you suffer from any of the following?
12. What impact has the pandemic had on your mental health?
13. Have you been able to access support for your mental health?
14. What support have you accessed for your mental health?
15. Would you like to tell us more about this?
16. Has the pandemic affected you financially?
17. How?
18. Have you made any financial changes?
19. Would you like to tell us more about this?
20. Do you have an existing medical condition, including pregnancy, that requires treatment or care (not related to Coronavirus)?
21. If you answered 'yes', how has your medical treatment or care been affected by the pandemic (including treatment/care for pregnancy)?
22. Would you like to tell us more about this?
23. Have you had an appointment, either by phone or video consultation?
24. If you have, how was your experience?
25. Would you use the phone/video consultation service again?
26. Would you like to tell us a bit more about your experience?
27. Has your experience of social care services been affected by the pandemic?
28. How?
29. Are you a carer for someone else (either paid or unpaid)?
30. Before the pandemic what support did you receive as a carer?
31. What support are you receiving now, during the pandemic?
32. Would you like to tell us more about this?
33. We are aware that there has been an increase of 'hidden crime' in households due to the pandemic. Do you feel that your safety has been compromised due to having to stay at home?
34. Do you know how to get help?
35. Is there anything else you would like to tell us?
36. Have you had a positive experience as a result of the pandemic and lockdown that you would like to share with us?

Demographics

785 people responded to the HWT survey over five weeks.

- 43% were from Cumbria
- 7% from Blackpool
- 2% from Blackburn with Darwen
- 46% from Lancashire (other)

Q2 How old are you?

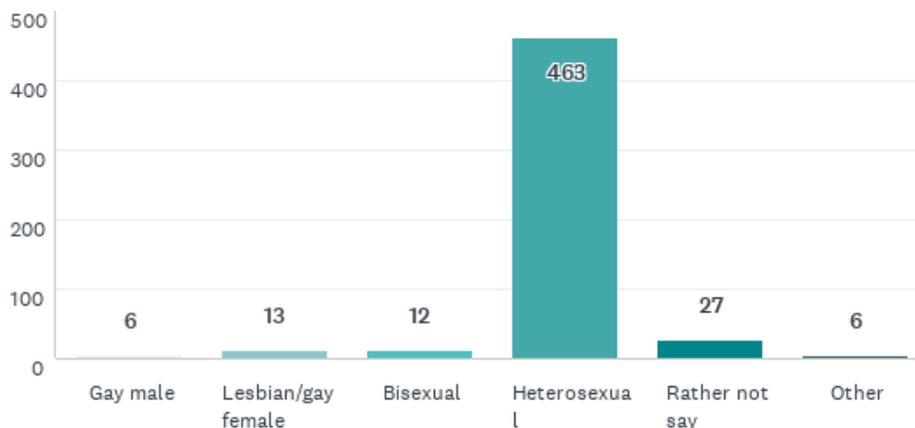


Older age groups were the best represented in this survey, with 29% of respondents aged 65-74 and 22% being 55-64. Only 1% were aged under 24 years.

Gender identity

- 67% of respondents identified as female, 31% as male.
- 98% told us that their gender identity was the same as on their birth certificate.
- 1% identified as 'other' (including non-binary and trans)

Q5 How would you describe your sexual orientation?





Demographics - continued

Work status

54% said that they were in employment (either full-time, part-time or self-employed).

39% were retired.

3% were disabled and unable to work.

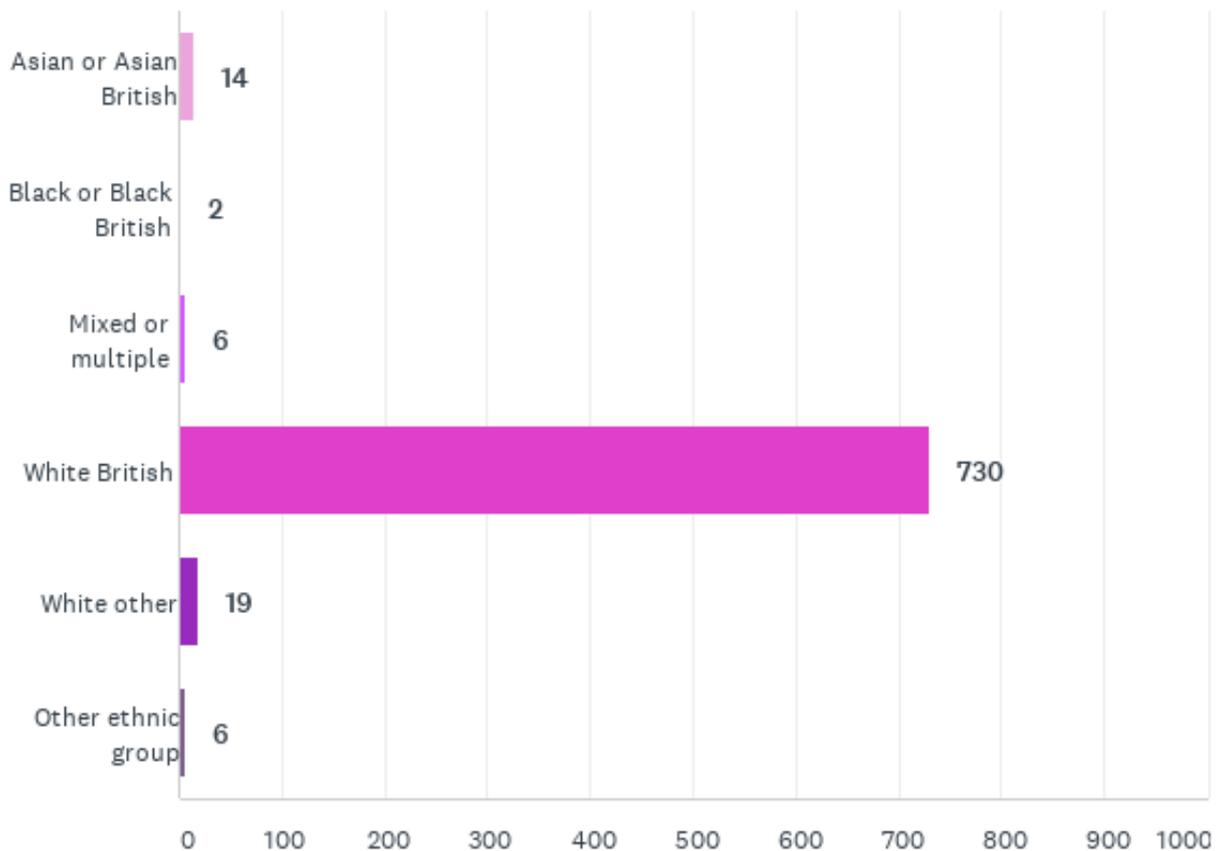
People living in household

20% are the only adult in the household

63% live with one other adult. 4.5% live with at least three other adults.

81% of respondents do not live with any children (under the age of 18).

Q9 What is your ethnicity?





The impact of the pandemic on mental health

”The risk of experiencing mental ill-health is not equally distributed across our society. Those who face the greatest disadvantages in life also face the greatest risk to their mental health”

mentalhealth.org.uk²

Concerns have been raised over the impact of the pandemic and lockdown on mental health³ in the UK media and this was supported by the findings from v1 of our survey.

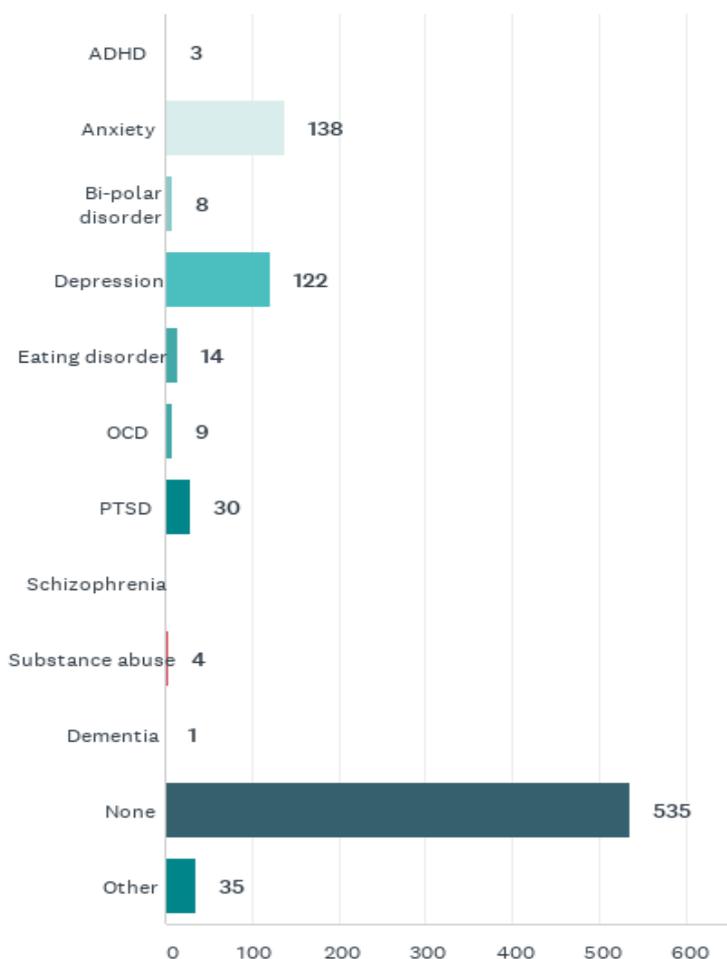
To investigate these concerns HWT asked respondents to rate their mental health both before and during the pandemic. The rating scale went from very poor (0) to very good (100)

The average rating for mental health score prior to the pandemic was 78, which is good to very good.

Examining the self-scoring for different demographics shows:

- Men rated their mental health as higher than women. On average men gave a score of 81, while women gave theirs 76.
- People who live on their own gave an average score of 73.
- Single parents gave an average score of 64.
- There were 19 people who scored their mental health as less than 25 (very poor.)

Have you been diagnosed with, or do you feel you suffer from any of the following:



Respondents were also asked to give a score to show the impact that the pandemic has had on their mental health. The rating scale went from no impact at all (0) to it has had a huge impact (100).

The average rating people gave for the impact of the pandemic on their mental health was 37 (not much of an impact).

Men tended to rate the pandemic as having less of an impact than women. The average score for a man was 28, while the average score for a woman was 41.

Single parents tended to rate the impact as having more of an impact than the average (46).

98 respondents gave a rating of 75+ to this question, suggesting they felt that the pandemic has had a huge impact on their mental health.

57% of respondents said they were unable to access support for their mental health. Although not everyone in this 57% needs to access support.

Other category:

- Autism
- Borderline Personality Disorder
- Stress



The impact of the pandemic on mental health - continued

What support have you accessed for your mental health?

Type of support	Percentage of respondents
Friends and family	45%
Self-support	22%
Support services (phone or online)	6%
Other	6%
Online counselling	2%
N/A	46%

Other:

- Work colleagues.
- Psychologist.
- Support group.
- Medication.
- Phone apps.

The percentage for 'self-support' should be higher, as many people put activities in the 'other' category that should go under 'self-support'.

Respondents told us of a variety of ways that they have tried to manage their mental health:

"I have been in contact with family and friends more than before the pandemic particularly with those who live away and abroad."

"I have a psychiatric nurse who has kept me from suicide on several occasions."

"I felt I needed additional support and have engaged with CBT. Waiting time much reduced but telephone support only option."

"When I get 'low' I try to talk to a friend and go for a walk, but I am lonely."

"I am quite self sufficient and have lived alone for 7 years. I have good family & friends links. I also have links to the church & where I worked part time. I use websites & belong to different groups who have provided support e.g. WhatsApp, Zoom, Teams, Webnair etc."

"I found moving from ward to ward quite stressful, being expected to be in charge with poor support very stressful."

"Amazing how the impact of Corona has been on mental health, each day is different."



The financial impact of the pandemic

29% of respondents told us that they had been financially affected as a result of the pandemic.

Impact	Number of respondents
Someone in my household has been furloughed	61
I have been furloughed	32
I am self-employed, my business has closed	23
Someone in my household has lost their job	16
I have lost my job	6
My benefits have increased	5
I have had housing problems	3
My benefits have decreased	1
I am at risk of homelessness	1

“Four weeks unpaid leave taken from work. This was to protect myself.”

“The value of my savings has dropped by 30%”

“My husband has stood down from his job due to the risk (construction sites) therefore has received no income whatsoever during the last twelve weeks.”

“I have had to help out family members.”

“We have not spend anything like the normal outgoings.”

1/3 of people who responded said that they have made financial changes, as a result of the pandemic. These changes included:

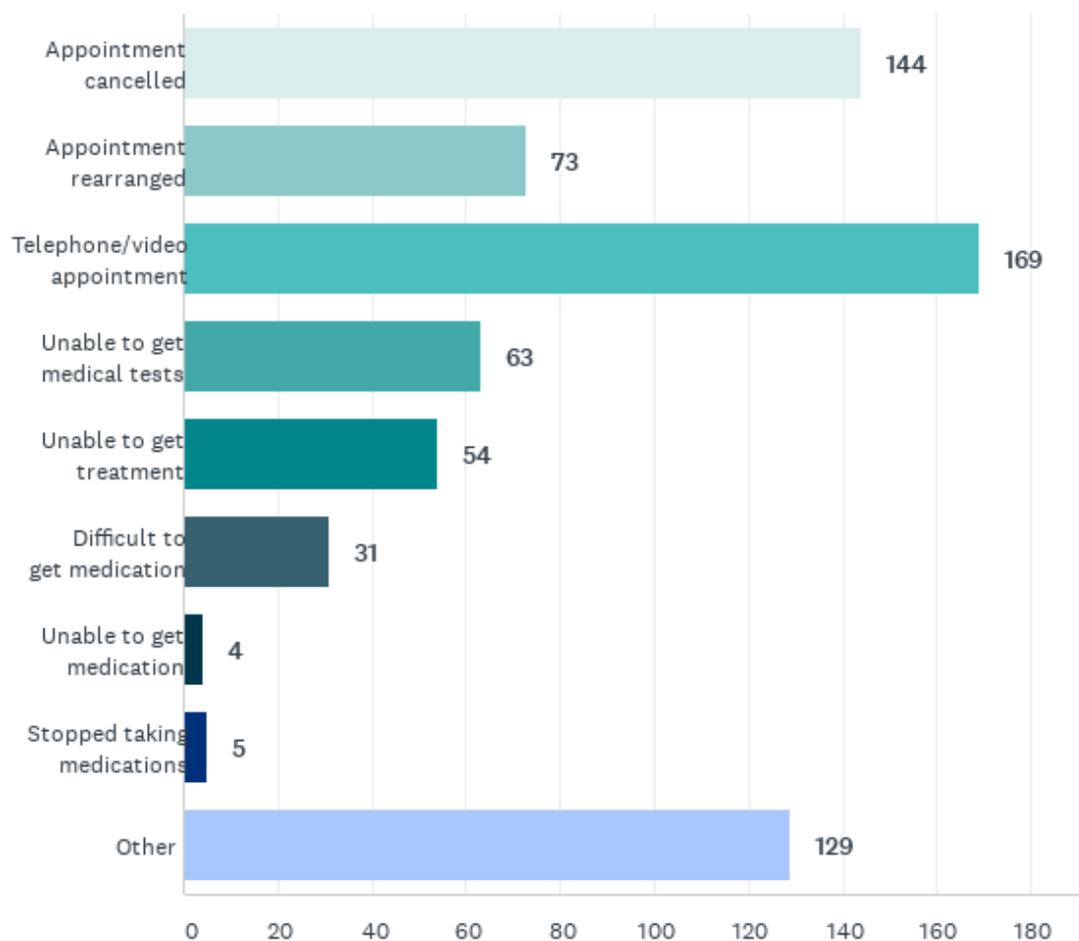
- Only spending on food, no extras.
- Not spending on leisure activities or holidays.
- Spending less overall (as not paying for petrol, eating out, clothes or children’s activities.)
- Having to use savings.
- Helping family out financially.
- Finding better deals for bills (broadband provider, gas, electricity, etc.)
- Taking a mortgage or credit card payment holiday.
- Giving more money to charity.



The impact of the pandemic on pre-existing medical conditions

In answer to the question, do you have a pre-existing medical condition (including pregnancy) not related to Coronavirus: 50% said yes

We asked respondents which of the following they had experienced:



Under ‘other’ people told us:

- I’ve missed my annual check up.
- My dentist appointment has been cancelled.
- My operation has been delayed.
- I can’t get to see an optician.
- My x-ray has been cancelled.
- My post-operation check up has been cancelled.
- I can’t be accompanied to scans.
- I’m having to begin the referral process from the beginning again.

“Having to have a blood test done in a car park was strange rather than anything else.”

“It’s better organised than usual.”

We asked respondents if they would like to tell us any more about this and 287 people left a comment. This is just a very small selection:

“Needed anti biotics for urine infection. - no problem. Great system if you know and can describe situation clearly.”

“I am being monitored over possible prostate cancer and my appointments have been cancelled and the next one is now in August rather than June.”

People's experience of phone & video consultations

Have you had an appointment by phone or video consultation	Percentage of respondents
No	59%
Yes – I have had a phone consultation	37%
Yes – I have had a video consultation	3%
I was offered a phone/video consultation, but I didn't take it	1%
Other	5%

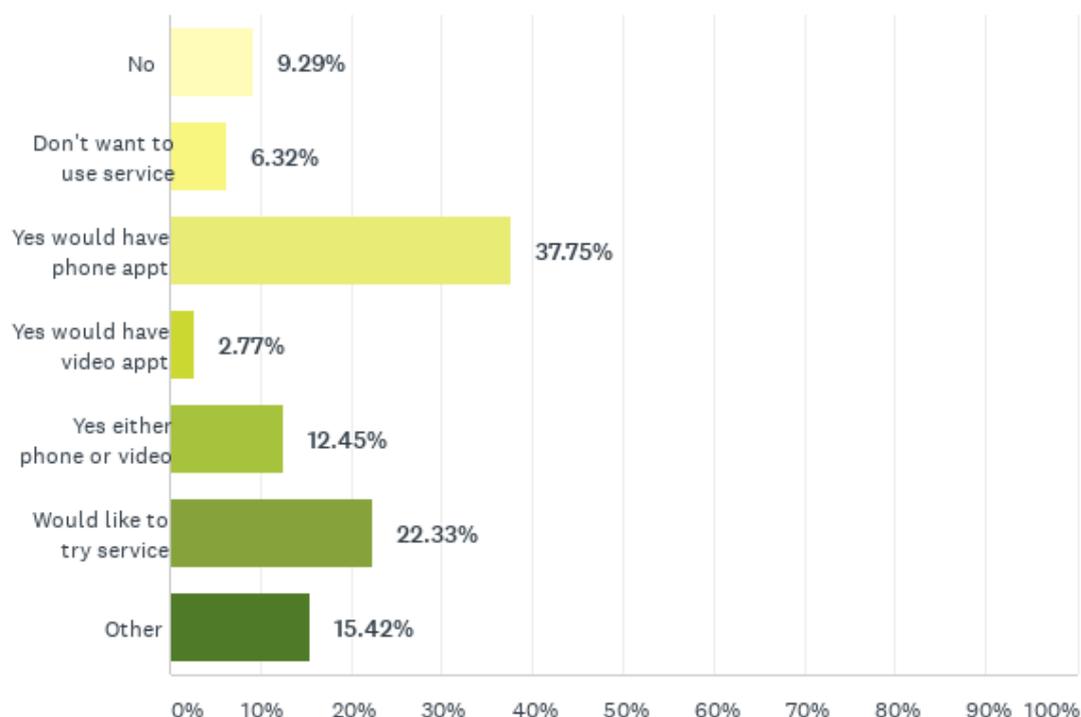
Most of the comments left under 'other' concerned future phone or video appointments which have not taken place yet.

When we asked respondents whether their experience of phone/video consultations had been positive or negative:

82% said it was a positive experience 7% said their experience had been negative.

10% said 'other' - it was ok, it was helpful, mixed feelings and it was difficult to sort out my problem without being seen in person.

Q25 Would you use the phone/video consultation service again?



Most comments under 'other' referred to the medical issue not being suitable for phone or video consultation, or people told us that they would just rather be seen face to face.



People's experience - in their own words

Positive experiences:

"I had a itchy skin rash on the backs of both hands, phoned surgery and the Doctor phoned me back, asked questions and asked me to take photos and sent me a link to send her the pics. She examined them and contacted the chemist to deliver a Steroid Cream. Used it as prescribed and it cleared up the rash within a few days."

"Actually found it less daunting than a face to face meeting."

"It was a personal conversation which I found less embarrassing over the phone."

"Positive experience with a video call. Would prefer this to driving to the hospital, parking, waiting in a queue etc. etc."

"I have always thought that phone appointments could be used more widely, especially for post operative check ups, test results etc. It seems ridiculous to travel miles just to be told the results of tests."

Issues with phone and video consultations:

"Would prefer face to face consultation then you can show doctor where the pain is coming from instead of doctor guessing."

"I felt as though my phone consultation was very rushed and that they wanted me off the phone ASAP."

"I prefer face to face contact and for certain treatment interaction is important."

"It was an NHS specialist appointment for my daughter, it was pointless and ended in her being discharged, despite the doctor saying she couldn't answer my questions without seeing her!"

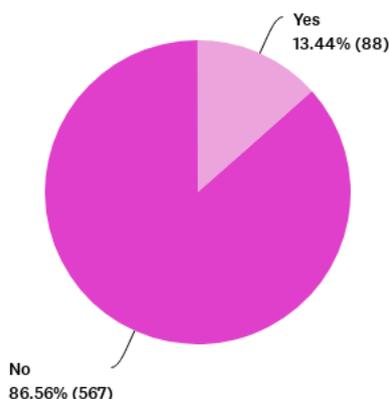
"Ridiculous, how can blood samples be taken over phone, or blood pressure and temperature?"

"Maternity appointments have been over the phone. This is fine apart from not being able to listen in on the baby to get reassurance everything is ok."



People's experience of social care services during the pandemic

Q27 Has your experience of social care services been affected by the pandemic?



We asked people to tell us more about their experience of social care at this time. Their responses centred on issues with access and support:

- Unable to visit relative in care home.
- Delay in getting elderly relative into a care home.
- Unable to have a carer or cleaners come to my house.
- Can't access specialist support services, such as ADHD support, foster carer support or day care centre.
- Assessments are taking longer.
- Difficulty getting to speak to a social worker.
- Social care workers reported that they are having to adapt the way they work, for example by provided phone or video support.

“My brother died in a Nursing Home under lockdown although he had not got the virus so I couldn't visit and the funeral held in a Crematorium was quite harrowing. The family are going to have a memorial service for him when it is all over. My remaining sister lives in her own home in Bristol living at home under lockdown so I doubt if I'll get over to see her.”

“We had to arrange for my brother-in-law with dementia to go into a care home as providers would not guarantee to visit him as necessary to keep him safe.”

“Some services have been cut, or decision made by client not to accept help.”

“I work in social care, the demands on the sector have been huge.”

“We have brought our learning disabled son back to live with us from his supported living house as not seeing us would have been detrimental to his mental health and would have been upsetting for him.”

“I was unable to be with my mother when she died in a care home.”

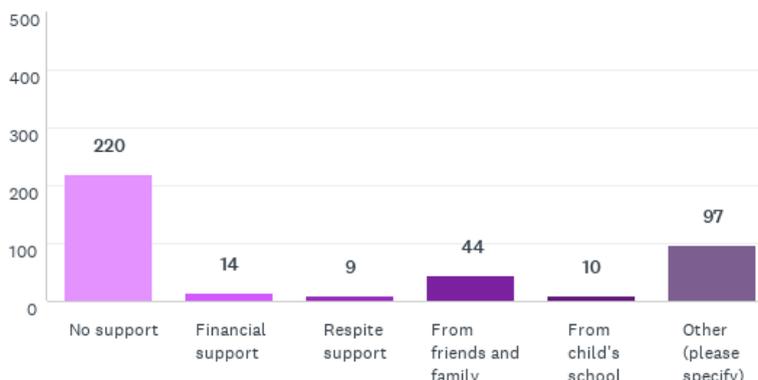


The experience of being a carer during the pandemic

1/4 of respondents to our survey feel that they are carers for at least one other person.

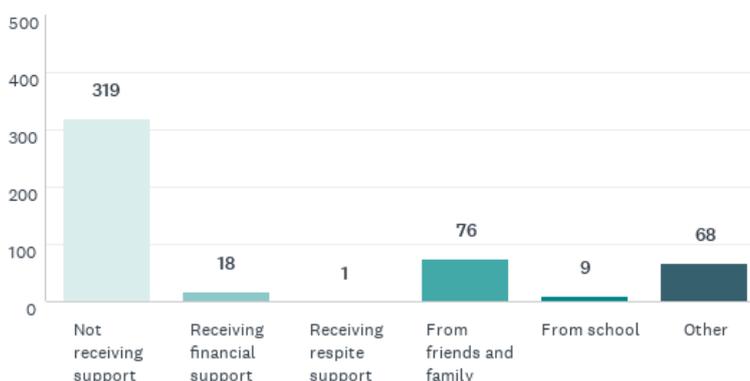
- 6% care for a partner
- 8% care for a parent/s
- 3% care for a child with physical or learning disabilities
- 4% care for an elderly relative
- Community support worker/support worker/ social care worker.
- Foster carer
- Care for a sibling
- Care for an adult with physical or learning disabilities

Q30 Before the pandemic what support did you receive as a carer? Please tick all that apply



Some who answered ‘no support’ also have no caring responsibilities, as a result the graph does not provide an accurate representation of people who are carers but have no support available to them. Under ‘other’ for both q30 and q31, most people answered n/a. However, some said that they were supported by the care agency that they worked for, while others received support from specialist charities such as the MS Society.

Q31 What support are you receiving now, during the pandemic? Please tick all that apply



There are slightly more people receiving financial support, though almost all respite support has gone. People are also getting more help from friends and family, only one person told us they are not receiving any support from their child’s school.



The experience of being a carer - continued

We are fortunate that people have shared their experience of being a carer during this period. Unfortunately we can't share every story, but below are a selection of what people have told us:

"My daughters have done all the care for my mother instead of me doing a share, one moved in with her for 10 weeks."

"My husband stumbles and falls sometimes, so I mostly have to accompany him when he goes anywhere even though I am disabled myself and I also fall sometimes. But we just have to get on with it as nobody cares."

"My husband has diabetes type 2 and he has just gone on insulin. He also has kidney failure and prostate cancer. He is quite frail but I have never asked for help as my son lives with us and helps as much as he can. He works 6 days a week at Tesco so hasn't a lot of time to help but does shopping for us."

"My main support for caring for my son was from my family. However, I have had this support completely removed during the pandemic. As my son is due to transfer from primary to secondary school this September, the pandemic has affected this transition massive and I have had no support with this and am struggling to access support."

"I am supporting my mother who is shielded, and my elderly aunt and uncle. Work is flexible and supportive but I can thankfully manage their needs around my work, although it is an anxious time."

"Weekly phone calls from school to see how my son is doing. He has ADHD and ASD."

"Despite having an EHCP for my youngest daughter, she isn't able to attend school due to lack of staffing issues. My older daughter cannot attend her adult day placement as the center is closed. Both our adult and child overnight respite providers have limited or no working staff and are not accessible."

"As a single parent I relied on my sister for help with child care - but she has had to shield herself due to underlying health conditions and we cannot have any contact with her. I am therefore looking after my daughter with special educational needs full time on my own, trying to work part time from home so we continue to have an income."

"My partner had moved into sheltered housing, he decided to come back home during the pandemic and is still here, This has caused all sorts of problems."

"Lots of friendly phone calls."

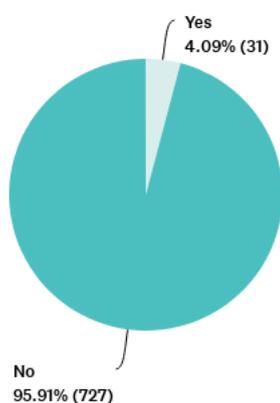


'Hidden crime'

The UN has estimated that domestic violence has increased by 20%, with victims trapped in lockdown with their abusers⁴. Concerns over the risk of abuse for vulnerable children during lockdown has also been highlighted by the media⁵.

This is a very sensitive subject but we felt that we needed to investigate this issue within Cumbria and Lancashire.

Q33 We are aware that there has been an increase of 'hidden crime' in households due to the pandemic. Do you feel that your safety has been compromised due to having to stay at home?



31 people told us that they felt their safety had been compromised. We did not ask for further details of this, but the survey provided links to support services for domestic and child abuse. We also gave people the option of leaving their email address so we could contact them and offer support and signposting.

Of these 31 people, five said that they did not know how to get help. All five people were from Lancashire. No one left their contact details. One person said:

"It is impossible to report crime online I have tried repeatedly to sign up it does not work. 101 is a joke."



Is there anything else you would like to tell us?

Concerns about:

- Domestic violence.
- Over-reliance on the internet.
- Illegal activities (including poaching, selling drugs, trespassing and scams).
- Closure of A&E at Chorley & South Ribble Hospital.
- An elderly relative who is “petrified” to leave the house.
- Exhaustion, from looking after young people with special needs, without any support.

“I am sick of Zoom, FaceTime, Skype, MS Teams and WebEx!!”

Difficulties with:

- Getting an appointment with a doctor.
- Partner stuck in hospital.
- Finding support for children.
- Not being able to support daughter through a mental health crisis.
- Getting information from the hospital about a relative’s care.
- Being isolated.
- Not having facilities open for exercise.

“I feel lonely. I miss my friends and family contact. I don't use social media. I miss my gym and swimming. I feel frightened doing necessary shopping. I don't drive - I miss the freedom public transport gives me.”

“I feel I am invisible.”

“I've fallen through all the gaps. I feel lonely, forgotten, unimportant, insignificant..”

Positives:

- Being able to continue working.
- Being able to cook, grow vegetables and get regular exercise.
- Enjoying the peace.
- Hopefully seeing positive changes to working practices.

“Hope the positives continue after we emerge from covid.”

“I recently acquired a stray tom cat. He has moved in and quite taken over my life my home and my favourite chair. I've never had a cat before and I absolutely adore him. Its lovely to have someone to look after. I don't know where he's come from but he turned up just after lockdown began. I hope he stays.”

“The care staff who are with my adult child have been wonderful.”



Have you had a positive experience you would like to share?

Although there is no denying that the pandemic has caused upheaval and affected almost everyone in some way, people have also taken positives from this experience.

Respondents told us about the positive experiences they will take away from this period of lockdown.

The most frequently mentioned was the 'community spirit' that people noticed and appreciated - neighbours being friendly and helpful, people supporting each other and people just generally being nicer to each other.

Spending time with family

- Bringing everyone closer together.
- Better quality relationships.
- Appreciating the importance of friends and family.
- ***"A conscious effort being made to keep connected."***

Having extra time

- To tidy up the house and garden.
- To do some gardening.
- To establish a better work/life balance.
- For regular exercise.
- For hobbies, interests and online courses.
- ***"To focus on myself."***
- ***"To get to wear our velvet lounge suits all day."***
- For more sleep.
- To prepare and cook healthy food and eat better as a result.

Appreciating

- The peace and quiet.
- A slower pace of life.
- Not feeling obliged to go out and socialise.
- What you have.
- New found freedom.

Being able to spend time outside

- ***"Finally it is great to have time and to enjoy nature and a slower pace of life."***
- Listening to bird song.
- Appreciating nature.
- Going for long walks outdoors.
- Noticing the clear skies.



Positive experiences - continued

Working and 'schooling' from home

- Not having to use public transport.
- No school run and morning stress.
- Less pollution, traffic and noise.
- Improved mental health.
- Child with learning disabilities coping better by doing his school work at home.

Financial benefits

- Companies being flexible about when bills can be paid.
- Saving money.
- Spending less.

Other

- Learning how to use new technology.
- The hospitals coping well - not having to queue or wait and free parking.
- Positive changes to working practices.

Finally - people wanted us to know how much they appreciate:

GP's, doctors and nurses.

Social care workers.

Post Offices and postal workers.

Delivery drivers.

Local businesses.

Local Community Groups .

Northern Fells Group - for their support.

Preston City Council Community Hub - for being so welcoming.

Royal Preston Hospital - for looking after me so well & excellent A&E care.

Chorley Hospital - a wonderful 24 hr service.

Lancs. County Council Social Work Dept. - for their support.

Morecambe Bay Hospital - exemplary care.

Rosendale Hub - for "getting their act together quickly & impressively."

Whitworth Town Council - for their help.



Summary

Demographics

The response to this version of the survey was split almost 50/50 between people from Lancashire and people from Cumbria. 80% were aged 45+ (with 40% being over 65). 67% were female. 54% were employed and 39% retired. 80% had no children living at home. 93% were white British.

Mental Health

On average people gave their mental health prior to the pandemic, a score of 78, which is good/very good. Men tended to give a higher score than women, with female single parents giving an average score of 64. The average score for the impact of the pandemic on mental health was 37, which translates as 'not much of an impact'. Again women seem to be more affected, as they gave a higher average score than men.

It seems fair to say that the majority are coping ok, but a minority are really struggling and not always able to access the support they might need. Of those who have been able to get support, most rely on friends and family followed by 'self-support'.

Financial impact

1/3 of respondents have been affected financially, with being furloughed or job losses being the main cause. This does suggest that 2/3 have not been affected and some people did tell us that they are actually currently financially better off, as a result of spending less.

Pre-existing medical conditions

50% have an existing medical condition (this could be a result of an older demographic). They told us about their cancelled and postponed check ups and operations, as well as a few cases of people having cancer detection and treatment delayed. This is an issue that has been raised nationally, with concerns over a backlog of cases within the NHS.⁶

Phone & video consultations

82% of people who had either a phone or video consultation felt it was a positive experience and 53% would use it again. They told us that they liked the convenience, timeliness, simplicity and that you could speak to your regular GP. The disadvantages centred mainly on its unsuitability for some issues.

Carers

A quarter of respondents have caring responsibilities for at least one other person. Most carers relying on help from family and friends, which has been difficult to access during lockdown.

Violence & abuse

There is concern over people who have reported they are at risk of violence, but are not able to get the help that they need. This is another serious issue that has been raised at the national level. Although the survey provided links to support services, we are aware that people may still not be able to access this support.



Conclusion

These experiences are an historical record of what life was like for people living in Cumbria and Lancashire during these unprecedented times.

HWT would like to say thank you to all those people who took the time to complete our survey, to share their stories with us and to contribute to this valuable piece of social research.

As a Healthwatch it is important not just that we gather this data and record people's experiences and stories, but also that we do something with them. As one respondent pointed out, there *"...seems to be a lot of questionnaires about people's experiences and thoughts during these pandemics but no actions from it."*

We are working in together with the University of Cumbria to gather as much information as we can about people's lived experience during this time. As well as HWT producing a series of reports, we also share our findings with representatives from the local CCGs, County Councils and other relevant agencies and service providers. They are then able to use this feedback as we all move into the next stage of the pandemic and begin the easing of lockdown restrictions.

It is positive that so many people told us about the 'community spirit' that they have experienced during this time. This group behaviour has been referred to as 'collectivising the issue'⁷ of Coronavirus, with people supporting each other and indulging in less individualistic thinking as the most effective way for us to all get through the pandemic and protect the vulnerable. That so many people have told us they have observed it, and have themselves acted in this way, can give us hope that the community spirit will go some way towards mitigating the negative effects of the pandemic.



References

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