The mental health emergency

How has the coronavirus pandemic impacted our mental health?

June 2020

**mind**
for better mental health

Contents

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The coronavirus pandemic is having a huge impact on our mental health. Help us be there for everyone who needs us at this crucial time.
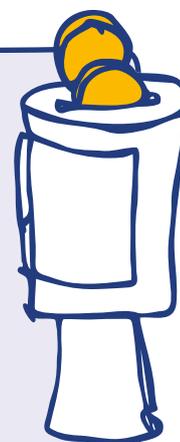
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Foreword

The coronavirus pandemic has caused exceptionally challenging and worrying times for each and every one of us. The effects of social distancing, lockdown, the loss of loved ones to the virus and the over-consumption of stress-inducing media reports is taking a huge toll on our mental health and wellbeing; and will continue to have lasting effects long after lockdown is over.

I believe it is important for Mind to understand and keep the voices of people with lived experience at the centre of their practices, and welcome this work to understand the impact of the pandemic on people with mental health problems. As things are changing so quickly, it can be difficult to know how best to provide advice and support. By listening to our experiences, Mind can start to understand how to support us. Whether it's sharing our experiences with policy makers, or using them to develop their information resources, our stories and opinions make their response stronger and ensure our voices are heard; and by sharing the stories and experiences of others, it helps us to know that we are not alone.

As a Bangladeshi woman, I have experienced the stigma that mental health issues carry within our South Asian communities. It is an immensely taboo subject, rarely spoken about and remaining very hidden. Black, Asian and Minority Ethnicity communities have been significantly and disproportionately affected by coronavirus and this will have an impact on mental health. Understanding the specific challenges and barriers that certain groups are facing will allow the mental health toll of the pandemic to be confronted.

Now more than ever, it's incredibly important to consult people with lived experience of mental health problems and use our experiences to shape the work Mind does in the future. In particular, working openly alongside people from diverse backgrounds and drawing upon their experiences will allow Mind to explore structural inequalities of mental health with action and accountability, to help drive further awareness and provide more equal and inclusive mental health support for everyone.

Habiba Khan
Mind member and lived experience consultant

Executive summary

I've always struggled with my mental health. I've been getting better over the past few years, but I'm deteriorating so quickly right now.

Survey participant, young person

The coronavirus (Covid-19) pandemic will leave a deep and lasting scar on the mental health of millions in this country. The devastating loss of life, the impact of lockdown and loneliness, and the inevitable recession that lies ahead will affect all of us.

Prioritising mental health has never been more critical than it is now. New mental health problems have developed as a result of the pandemic, and existing mental health problems have gotten worse.

To understand how we can best support people during this uncertain time, we carried out research to understand the experiences of people with pre-existing mental health problems, the challenges that they are facing, the coping strategies that they are using, and the support they would like to receive from us. We also wanted to enable people to learn from one another by sharing their advice on how to cope during this difficult period.

More than 16,000 people have shared their experiences of mental health during the pandemic as part of this research. More than two thirds of adults with mental health problems reported that their mental health got worse during lockdown. As a direct consequence of the pandemic and all that follows, many people who were previously well will now develop mental health problems.

Supported by these findings, we are urging the UK and Welsh Governments to put mental health at the very centre of their recovery plans. As we look to the future, those in power must make the right choices to rebuild services and support, and to ensure that the society that comes after the pandemic is kinder, fairer and safer for everyone experiencing a mental health problem.

Pre-existing inequalities have been worsened by the pandemic, and this report highlights how the pandemic's effects on mental health have been disproportionate. The following groups of people are more likely to report that their mental health has declined:

- Women
- People with disabilities
- Those living in social housing
- People with eating disorders, obsessive compulsive disorder, or personality disorders
- Frontline workers.

Systemic racism has resulted in people from Black, Asian and Minority Ethnic (BAME) communities experiencing much higher coronavirus death and infection rates.[1] Whilst our research did not find a significant difference in the overall rate of decline in mental health for people from BAME communities in comparison to White people, they did report that their mental health got worse. Mental health pressures – such as problems with housing, employment, and finances – also had a bigger impact on this group.

Whilst this research shows that the mental health of some groups has declined at a faster rate than others, we recognise that mental health inequalities existed before the pandemic. For example, we know that people from BAME communities are more likely to experience a

1. Office for National Statistics, Coronavirus (COVID-19) related deaths by ethnic group, England and Wales: 2 March 2020 to 10 April 2020. Available at: https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/deaths/articles/coronavirusrelateddeathsbyethnicgroupenglandandwales/2march2020to10april2020

mental health problem in any given week.[2] Although our research does not show that their mental health has declined disproportionately, it is likely to now be even worse than that of other demographic groups.

We have yet to reach the peak of the mental health crisis, and must continue to think long term. The lasting effects of trauma and severe economic pressures will be keenly felt by millions – those working on the frontline, people who haven't had an opportunity to grieve, those who have spent months alone and lonely, young people who had their support network taken away overnight.

Advice & support

Frontline workers

For more information about our work to support frontline workers, go to mentalhealthatwork.org.uk/ourfrontline/

Crucially, those surveyed reported that charity information and hearing others' stories is helpful and supportive. People would benefit from advice on how to manage their specific mental health problems during this time.

Essential learnings

- More than half of adults and over two thirds of young people said that their mental health has gotten worse during the period of lockdown restrictions, from early April to mid-May.

- Restrictions on seeing people, being able to go outside and worries about the health of family and friends are the key factors driving poor mental health. Boredom is also a major problem for young people.

- Loneliness has been a key contributor to poor mental health. Feelings of loneliness have made nearly two thirds of people's mental health worse during the past month, with 18–24 year olds the most likely to see loneliness affect their mental health.

- Many people do not feel entitled to seek help, and have difficulty accessing it when they do. 1 in 3 adults and more than 1 in 4 young people did not access support during lockdown because they did not think that they deserved support.

- A quarter of adults and young people who tried to access support were unable to do so. Not feeling comfortable using phone/video call technology has been one of the main barriers to accessing support.

Most common coping strategies

- Over half of adults and young people are over or under eating to cope.

- Nearly a third are using alcohol or illegal drugs, with 18–24 year olds using this coping strategy more than over-25s.

- A third of young people with existing mental health problems are self-harming to cope.

- Connecting with family and friends online is the most popular way to cope amongst both young people and adults.

2. NHS Digital, Adult Psychiatric Morbidity Survey: Survey of Mental Health and Wellbeing, England, 2014. Available at: https://webarchive.nationalarchives.gov.uk/20180328140249/http://digital.nhs.uk/catalogue/PUB21748

Introduction

I'm constantly feeling helpless and frustrated, and hate the idea of anyone around me being hurt or dying. The lockdown is the biggest problem because I rely on being able to see the people I love as a coping mechanism for my anxiety and depression.

Survey participant, young person

The restrictions designed to prevent the spread of coronavirus are having a profound impact on the way we live our daily lives, and in turn, on our mental health. There was already a mental health emergency before coronavirus, and the pandemic has only entrenched inequalities further.

To understand how we can best support people during this uncertain time, we carried out research to understand the experiences of people with pre-existing mental health problems, the challenges that they are facing, the coping strategies that they are using, and the support they would like to receive from us.

While we wanted to understand the experiences of those with existing mental health problems, our survey was open to anyone. Two thirds of young people and three quarters of adults who participated in the survey had personal experience of mental health problems. Of those who did not have experience of mental health problems, 1 in 6 had friends with mental health problems (17%), 1 in 4 had a family member with mental health problems (25%), and some were carers for someone with a mental health problem (4%), or worked in the mental health sector (6%).

Thank you so much to everyone who shared their thoughts and experiences with us by taking the survey, we have had complete responses from 16,338 people in total.

We carried out our survey with those over the age of 18 from 9 April – 18 May, and our survey with those under 18 from 9 April – 1 June. Therefore, the results provide a snapshot of people's experiences during the initial lockdown period and after the UK Government's first announcement about easing the restrictions on 10 May.

Alongside our survey, we worked with volunteer researchers from Revealing Reality to develop case studies that explored people's experiences in depth. They spoke to all participants once by video-call, and then followed up with four people to see how their experiences had changed throughout the lockdown period. Their stories are threaded throughout this report.

Content warning
Some quotes from participants used in this report make reference to self-harm, panic and disordered eating, and suicidal feelings.
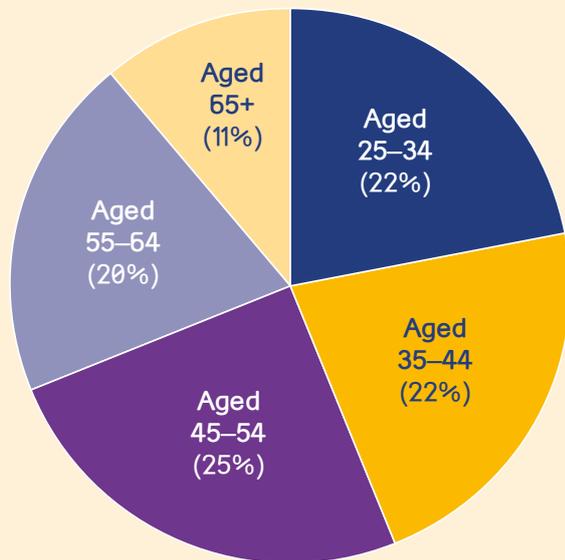
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The coronavirus pandemic is having a huge impact on our mental health. Help us be there for everyone who needs us at this crucial time.

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We surveyed 14,421 adults aged 25+

Aged 65+ (11%)

Aged 55–64 (20%)

Aged 25–34 (22%)

Aged 35–44 (22%)

Aged 45–54 (25%)

Over a third (40%) are homeowners, 13% live in privately rented accommodation, and 6% live in social housing or a housing association.

Three quarters (76%) of participants have personal experience of mental health problems, with over half having experience of either anxiety and/or depression.

Over a third (38%) have a long-term health problem or learning difference.

Three quarters (75%) of participants identify as women, just under a quarter (24%) identify as men, 1% identify as non-binary and 1% identify as transgender.

Just under 96% are White, and just under 5% are BAME – BAME communities are underrepresented throughout our adult sample.
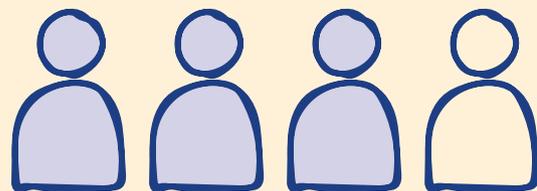
86% describe themselves as heterosexual/straight, 5% as gay or lesbian and 5% as bisexual.

7% are from Wales and 87% are from England.

Over half (59%) are in full or part-time employment and 16% are unemployed. 17% have seen their employment status change as a result of coronavirus.

Half (51%) have used mental health services before, 43% are family members of somebody who has experienced a mental health problem, 35% are friends to someone who has experienced a mental health problem, 9% are carers for someone with a mental health problem, and 7% work in the mental health sector.

Of those participants who reported not having personal experience of mental health problems, 44% have family with mental health problems, 28% have friends with mental health problems, 7% are carers for someone with a mental health problem and 10% work in the mental health sector.

We received 16,338 completed responses to our survey. Our sample focused on people's personal experiences of mental health problems and so it is not representative of the general public, and BAME communities are underrepresented throughout our sample.

We surveyed 1,917 young people aged 13-24

Aged 13–17 (41%)

Aged 18–24 (59%)
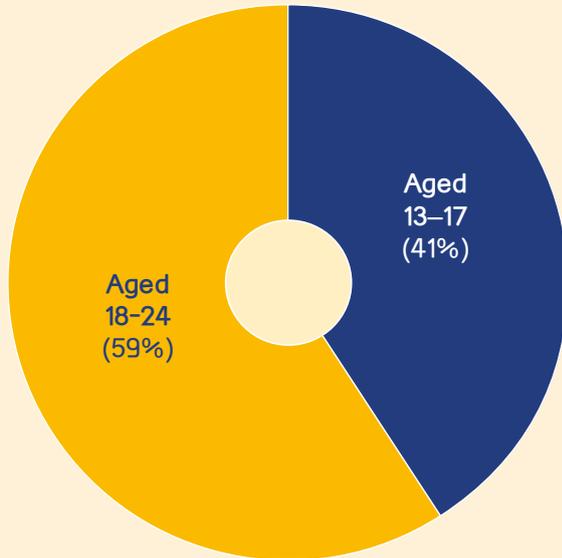
79% identify as female, 18% as male, just under 3% as transgender and just under 2% as non-binary.

67% identify as heterosexual/straight, 16% as bisexual and 5% as gay or lesbian.

11% are BAME and 89% are White.

85% are from England and 7% are from Wales.

Just under a third (31%) have a long-term health problem or learning difference.

Just under a third (31%) have a long-term health problem or learning difference.

13% of under-18s have received free school meals, and 1% of 18–24 year olds are living in social housing or a housing association. We are using free school meals and social housing as indicators of low income.

Just over two thirds (69%) have personal experience of mental health problems.
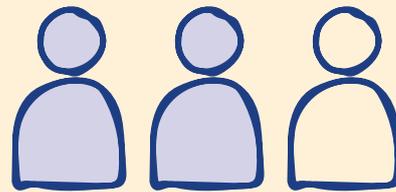
46% have used mental health services, 36% have family members with experience of mental health problems and 46% have friends with experience of mental health problems. 4% are carers to someone with a mental health problem

Amongst young people who reported not having personal experience of mental health problems, 20% have family with mental health problems, 29% have friends with mental health problems and 2% are carers for someone with a mental health problem.

We received 16,338 completed responses to our survey. Our sample focused on people's personal experiences of mental health problems and so it is not representative of the general public, and BAME communities are underrepresented throughout our sample.

Section 1: How has coronavirus affected our mental health?

The pandemic, and the subsequent restrictions designed to prevent its spread, are having a profound impact on the mental health of young people and adults. Some groups have been affected more than others. Our results show that:

More than half of adults (60%) and over two thirds of young people (68%) have said their mental health got worse during lockdown.

Young people are more likely to have experienced poor mental health during lockdown than adults.

People with experience of mental health problems are more likely to see their mental health worsen as a result of coronavirus restrictions.

Many without previous experience of mental health problems have experienced poor mental health during lockdown and have seen their mental health and wellbeing decline.

I normally have very good mental health... over the past month I've become more anxious about all sorts of things and also been crying about things, which I don't normally do. Some days I've slept very badly. I live alone and feel very lonely and isolated – not something that normally bothers me.

Survey participant, adult

Most people's mental health has got worse during lockdown

- Over a quarter (29%) of adults surveyed said their mental health has stayed the same, while just 12% said that their mental health has improved.

- Just over two thirds (68%) of young people said that their mental health had got worse during lockdown, with this rising to three quarters (74%) of people aged 18–24. A fifth (19%) said it stayed the same, while 12% said their mental health has improved.

- Two thirds (65%) of adults and three quarters (75%) of young people with experience of mental health problems said their mental health has gotten worse during lockdown. Over half of adults (51%) and young people (55%) without experience of mental health problems also said their mental health has got worse during this period.

Young people are most likely to say that the pandemic has worsened their mental health

- Under a third (29%) of adults described their current mental health during lockdown as poor, while 7% described it as very poor. 42% said that it's OK, and a further fifth (22%) of people said that it's good or very good.

- However, young people reported worse mental health, with nearly half (46%) saying that their mental health was poor or very poor during lockdown. Just over a third (35%) said their mental health was OK, while a fifth (19%) said it was good or very good.

- Over three quarters of young people had a lower than average wellbeing score, in comparison to two thirds (66%) of adults.

People with and without experience of mental health problems reported poor mental health and wellbeing during lockdown

- Those with experience of mental health problems were more likely to report poor mental health and wellbeing. Three quarters (75%) of adults and 88% of young people with experience of mental health problems had a lower than population average wellbeing score during lockdown.[3]

- Although they are less affected than those who have experienced mental health problems, more than one in five (22%) young people and adults who have not experienced mental health problems prior to the pandemic said that their mental health was poor or very poor during lockdown. Just over half of young people (57%) and adults (53%) without experience of mental health problems had a lower than average wellbeing score during lockdown.

How has your mental health changed in the past two weeks?

Much better (3%)
Better (9%)
Much worse (14%)
Same (29%)
Worse (45%)
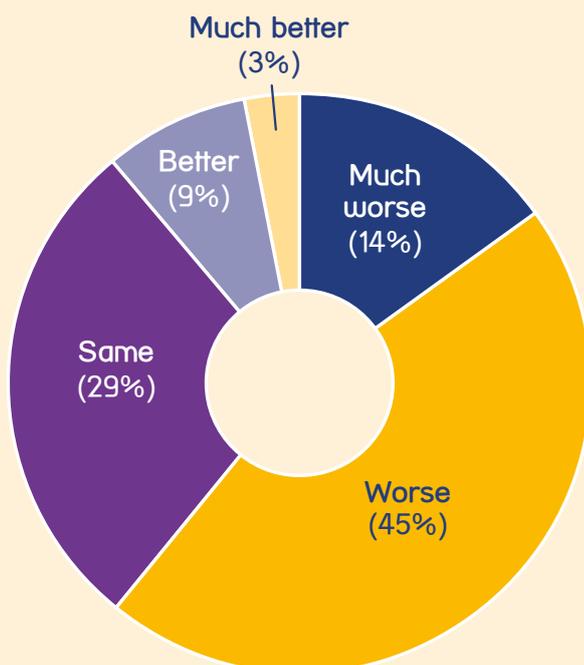
Survey participants, adults

3. SWEMWBS criteria was used to determine wellbeing score. Find out more about this criteria: https://warwick.ac.uk/fac/sci/med/research/platform/wemwbs/using/

- Almost half of young people (44%) and adults (43%) have not or rarely felt relaxed during lockdown. While over a third of adults without experience of mental health problems have not or rarely felt close to people (35%), this rises to nearly half (48%) of adults who have experienced mental health problems.

I feel at my lowest for the first time in a very long time. I feel hopeless.
Survey participant, adult

Mental health continued to decline throughout lockdown

People's mental health has continued to decline at the same rate throughout lockdown, since the beginning of April. Fewer people felt optimistic about the future in the week after the announcement of new restrictions on 10 May.

That said, this survey has not tracked individual participants over time, so we cannot see whether those who answered in early April have seen any changes in their mental health by the time the lockdown was eased in early May.

We all thought the lockdown would be over by now, and things would be getting back to normal. But it feels like the longer this lasts, the more hopeless everyone is getting. I've got nothing to look forward to, so what's the point in keeping going?
Survey participant, young person (May 2020)

People with eating disorders, OCD, PTSD and personality disorders are affected more than those with other diagnoses

- Nearly three quarters (73%) of those with an eating disorder, PTSD (72%) or OCD (72%) said their mental health got worse during the pandemic. This rises to over three quarters (77%) of people with a personality disorder. More than 4 in 5 people (83%) with eating disorders or OCD had lower than average wellbeing scores during lockdown.

[I've had an] eating disorder relapse due to lack of safe foods and exercise plan. Living alone means that no-one's checking my weight and mental health. It's really easy to slip.
Survey participant, adult

Case study

Anna

Anna is 17 and lives at home in Northamptonshire with her parents. Anna was diagnosed with OCD aged 11, and spent time in a psychiatric hospital three years ago to manage her eating disorder.

Despite not leaving the house to exercise during the pandemic, Anna was incredibly worried about catching coronavirus and passing it on to her family. While she wasn't that concerned about this at the start of lockdown, she felt her worsening OCD symptoms were making her overthink it, and that the constant stream of negative global news increased her anxiety.

Some demographic groups are facing greater challenges with their mental health than others

Those with disabilities, learning difference, or long-term illnesses:

Those with a long-term health condition (LTC) or learning difference are more likely to have had poor mental health during the pandemic, and to have seen it decline throughout lockdown.

- Half (50%) of this group reported their mental health as poor or very poor. Two thirds (67%) of this group saw their mental health get worse during the pandemic, in comparison to 56% of people without an LTC or learning difference.

- Three quarters (74%) of those who are unemployed due to disability said their mental health got worse during lockdown.

- Nearly 9 in 10 (89%) of this group had lower than average wellbeing scores and 67% said their mental health was poor or very poor.

Young people aged 18–24:

People aged 18–24 reported worse mental health and wellbeing during lockdown than all other age groups, and are more likely to have seen their mental health get worse during lockdown.

- Half (51%) said their mental health was poor, and three quarters (74%) have said that their mental health got worse during the pandemic.

- Over 4 in 5 (82%) had a lower than average well being score. University students followed a similar pattern; nearly three quarters (73%) of students said that their mental health declined during lockdown.

Being back at home after being at uni for a year is just taking me back to the mind set I was in a year ago. Before I went to uni I struggled with an eating disorder for about 3 years.

Survey participant, young person

BAME communities:

BAME communities have been disproportionately affected by coronavirus due to systemic racism in the UK and worldwide. However, BAME participants in our research described overall changes in their mental health in similar ways to White participants. These BAME participants did report some specific mental health challenges and coping strategies, which we expand on in sections 2 and 3.

Women and non-binary people:

Women and non-binary people were more likely to have poor mental health and to have seen their mental health get worse.

- 63% of women and 67% of non-binary people said their mental health got worse recently, in comparison to half (51%) of men.

Case study

Ally

Ally is 23, and identifies as non-binary. Lockdown began just as they had begun a new chapter; moving into a new flat in Manchester on their own and starting a new job. Ally has had OCD relating to self-harm and suicidal thoughts since they were 13.

Ally began lockdown with a 'go for it' attitude, downloading the 'Couch To 5k' app and starting to experiment with cooking. However, by week two things became more difficult – especially due to living alone. Ally was challenged by the lack of face-to-face contact, and despite regular Facetime calls with friends and family, it of course didn't quite match the benefit of seeing people face-to-face. Their job is not very social and Ally can spend 8 hours of the work day having not spoken to a single other colleague. Living on their own also means that Ally became more anxious about the new social rules, as they have no sounding board to bounce their thoughts and ideas off of.

People experiencing social deprivation:

People living in social housing (a proxy for social deprivation) were more likely to have poor mental health and to have seen it get worse during the pandemic.

- Over half (52%) of people living in social housing said their mental health was poor or very poor (vs 38% who said it was not poor or very poor) and over two thirds (67%) said that their mental health got worse during lockdown.

- Similarly, over half (58%) of under-18s who have received free school meals said their mental health was poor or very poor (vs 41% not), with nearly three quarters (73%) of this group saying that it got worse during lockdown.

I keep trying to be optimistic about the light at the end of the virus tunnel, but it seems to be a long way off and my personal life, what there is of it, is on long-term hold

Survey participant, adult (May 2020)

People experiencing unemployment and seeking work:

Those who were unemployed and seeking work during the pandemic were more likely to have lower wellbeing scores and worse mental health than those who were in employment.

- Nearly half (49%) of those who were unemployed and looking for work said their mental health was poor during lockdown, and four in five (81%) of this group had a lower than average wellbeing score.

- Two thirds (66%) said that their mental health declined during the pandemic, compared to 61% for those who were not experiencing unemployment.

People whose employment status changed as a result of coronavirus:

Those who were furloughed, changed jobs or lost their job due to coronavirus saw their mental health and wellbeing decline slightly more than those whose employment status did not change.

- Two thirds (65%) of those who had changed employment status said their mental health had gotten worse during the pandemic.

- Nearly three quarters (73%) of people whose employment status changed as a result of coronavirus had a lower than average wellbeing score in comparison to two thirds (66%) of those who experienced no employment change.

Case study

Ellis

Ellis, a Black male with bipolar disorder in his early fifties, spent the pandemic alone in the one bedroom flat in North London that he has been renting for nearly 20 years. Prior to lockdown, Ellis was working in sales for a local business, however he was since made redundant with no option of furlough. Left feeling unsure of where to turn, Ellis applied for Universal Credit and was forced to contemplate spending the next few months on an income which would 'barely cover rent and food bills' while looking for a new job. However, Ellis used his new-found extra time to do more DIY and exercise more than he normally would, which he said significantly helped him cope during this period.
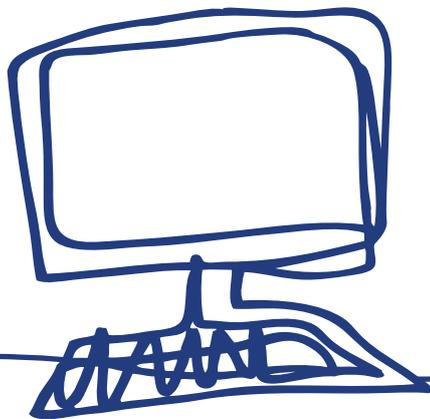
Section 2:
What is driving poor mental health during the pandemic?

We asked people about the challenges they faced due to the coronavirus pandemic, and the impact of those challenges on their mental health. Our results show that:

Not being able to see people (79%), not being able to go outside (74%) and anxiety about family and friends getting coronavirus (74%) were the main drivers of poorer mental health during lockdown.

Boredom was a major problem for young people; 83% said it had made their mental health worse.

Loneliness has also been a key contributor to poor mental health – particularly for young people. Just under three quarters of young people (72%) said loneliness had made their mental health worse.

I feel very trapped, I am unable to work so have constant worry and negative thoughts. Before I was able to challenge some of those negative thoughts but recently I get consumed by them and have no escape from them.

Survey participant, adult

Top five concerns for adults that made their mental health worse

① Being unable to see family, friends or partners that they didn't live with (79%)

② Feeling anxious about family or friends getting coronavirus (74%)

③ Not being able to go outside except for essential reasons (73%)

④ Feeling bored/restless (69%)

⑤ Feeling anxious about getting coronavirus (66%)

Top five concerns for young people that made their mental health worse

① Feeling bored/restless (83%)

② Not being able to see friends (80%)

③ Not being able to go outside except for essential reasons (76%)

④ Feeling lonely (72%)

⑤ Feeling anxious about family or friends getting coronavirus (64%)

Case study

Raj

Raj, 42, lives alone in a small flat above a corner shop in a rural part of Northumberland. He experienced anxiety symptoms for the first five months of 2020, which mostly manifested as a constant feeling of heartburn.

One thing that Raj struggled with in lockdown was knowing his mother was all alone in Bradford. He was very worried about her health and they spoke multiple times a day. Raj had been keeping track of the number of days since he last saw his mother as well as keeping track of the daily coronavirus death rate.

Sadly, during the pandemic, one of his close friends passed away. As a result, Raj has stopped checking the death rate and now tries to avoid the news. In an attempt to avoid these stories, Raj had a 'social media free weekend' which he thought might make him feel better but in fact, just made him feel worse as he felt disconnected from others.

Case study

Halima

Before lockdown, Halima, 17, would get up at 7am every weekday. She'd then have school from nine in the morning until five-past-three in the afternoon. After that, she'd do her homework and eat before going out to see friends. She describes herself as extremely sociable, and she likes to be out of the house as much as possible. Needless to say, lockdown saw a dramatic change to her usual routine.

During lockdown Halima found it 'almost impossible' to stick to a consistent routine. She still tried to get up before 9am as she still has lots of work set by her school, but it's hard for her to stay motivated with such a monotonous and stifled daily routine. This meant that during the start of lockdown, her mental health deteriorated considerably. 'If 10 is the worst state of mental health, I was at 7,' she told us. She was struggling with not getting to go out and see her friends, and not seeing her beloved grandparents every day.

While people of all ages were affected by not being able to go outside and see those who didn't live with them, young people were more likely to be affected by boredom – more than four in five (83%) said this made their mental health worse. Both young people and adults were worried about family and friends getting coronavirus, but adults were more worried about catching the virus themselves than young people.

Loneliness is affecting the mental health of younger adults more than that of older adults

- The older you are, the less likely you are to report that your mental health has been negatively affected by loneliness.

- Although more likely to be shielding and more likely to live alone than other age groups, fewer than half of people aged 65+ (42%) said that loneliness made their mental health worse.

Advice & support

Are you under 25 and worried about how coronavirus is affecting your mental health?

Mind has put together advice for young people about their mental health and wellbeing during coronavirus, and how to cope with the changes in their lives, which can be accessed here.

We also have information for those supporting young people to manage their mental health and wellbeing during this time, which can be accessed here.

Does age change how loneliness impacted mental health during lockdown?

Percentage that said loneliness made their mental health worse

Age of participant	Under 18	18–24	25–34	35–44	45–54	55–64	65+
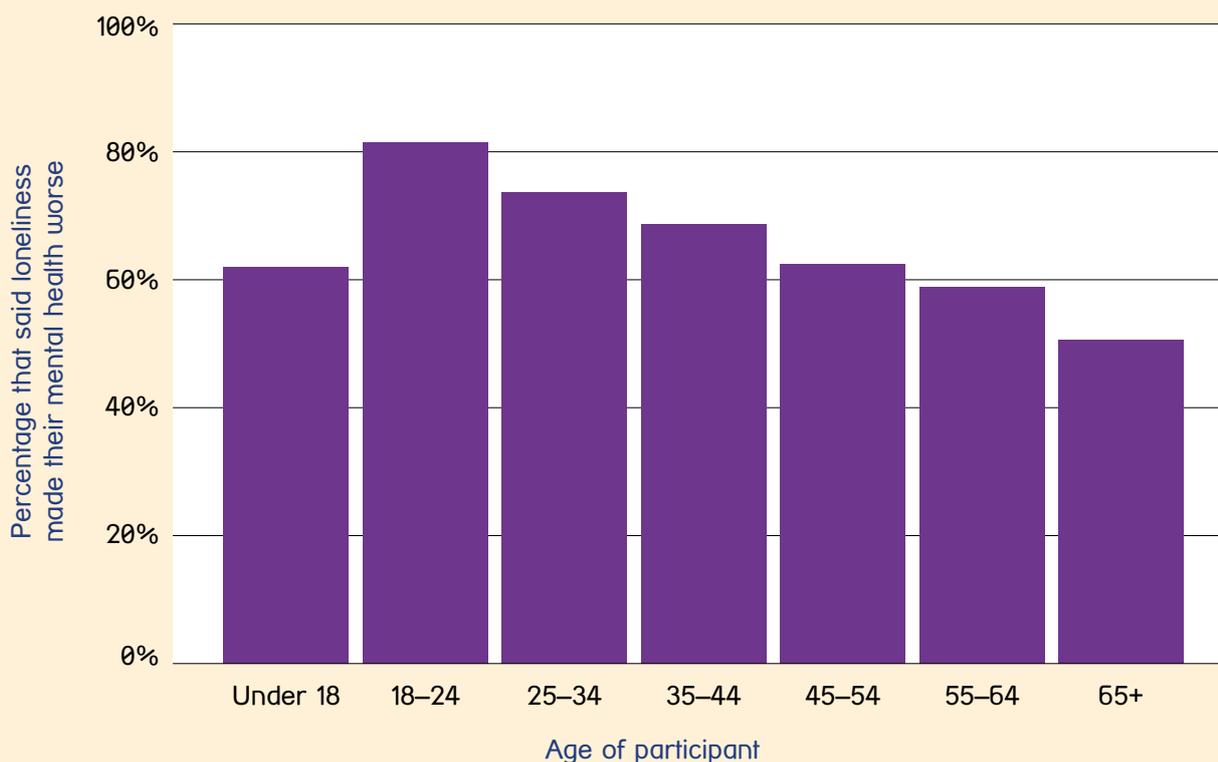
- In contrast, 62% of under 18s said that loneliness had made their mental health worse during lockdown.

- Over three quarters of 18–24 year olds (78%) said that feeling lonely made their mental health worse during lockdown. This compares to 59% of those aged 25 and over.

I live alone and always spend a lot of time alone, but being totally isolated is really hard and making me realise how much I actually need people and how much I miss touch. I really need a hug. I feel so lonely, and feel like this is going to put my agoraphobia progression back. It makes me feel like giving up. I am fighting so hard not to.
Survey participant, young person

People with poor mental health are more likely to be affected by loneliness and lack of contact with others

Loneliness severely affected people whose mental health was poor or very poor during lockdown:

- Not being able to see people who don't live with you negatively affected 86% of those with pre-existing mental health conditions (vs 79% overall).

- 79% were affected by loneliness (vs 61% overall).

- Among those who said that their mental health was very poor, 88% said not being able to see people who don't live with you made their mental health worse and 82% said that feeling lonely made their mental health worse.

As lockdown progressed, anxiety about catching coronavirus and going outside to buy food decreased

- Difficulties getting food and essential supplies was a greater worry for adults in early April (when 64% said this made their mental health worse) than a month later in early May (when 51% said this made their mental health worse).

- Anxiety about getting coronavirus or family and friends getting coronavirus decreased slightly between the first and second fortnights of lockdown. Young people continued to feel less worried by family or friends getting coronavirus in early May, however adults remained just as concerned as restrictions began to ease.

- In early April, more than two thirds (70%) of young people said that not going to school or college had made their mental health worse, in comparison to just over half (57%) in May.

Vulnerable groups were hit the hardest during the pandemic

People with eating disorders

- Those with eating disorders were severely affected by not being able to go outside – 81% of people with an eating disorder said this made their mental health worse, compared to 73% of those without, and 46% of those with eating disorders said it made their mental health much worse.

- People diagnosed with eating disorders were also more severely affected by loneliness (74% said loneliness made their mental health worse vs 59% without an eating disorder) and difficulties getting food and supplies (66% with vs 55% without).

Case study

Clara

Clara, 17, had previous experience of doing schoolwork from home, as she already took a couple months off school in 2020 to manage her eating disorder. Dealing with her relationship with food and eating was a challenge during lockdown. She is trying to get back into regular eating but, with many of the things she usually buys not available in the shops, she found it harder than normal. It was stressful to find delivery slots and to settle for new replacement food items that she hadn't before.

Being in her house all day meant she was closer to and almost felt surrounded by food, which became an additional source of anxiety on top of all the uncertainty caused by the virus.

People with experience of OCD

- 70% of those with OCD diagnoses said that their mental health suffered due to difficulties getting food and supplies (vs 55% of those without OCD). 51% of those with OCD also reported more difficulties accessing mental health support (vs 30% of those without OCD).

- 71% of those with OCD were negatively affected by anxiety about themselves getting coronavirus (vs 61% without) and 81% of people with OCD experienced anxiety about their friends and family getting coronavirus (compared to 73% of those without).

Case study

James

James, 30, is a police officer living in South Wales with his fiancé and two dogs. James has had OCD since he was 14 years old, but since lockdown began James experienced obsessive thoughts about the virus, alongside anxiety about catching it and spreading it to other people. As his job involves seeing lots of people, his anxiety about catching the virus was high. At the end of each work day James made sure he removed his clothes as soon as he was inside the front door, and took a long shower to feel clean and safe.

People with experience of a personality disorder

- Three quarters of people with a personality disorder (76%) said loneliness made their mental health worse (vs 59% of those without a personality disorder).

BAME communities

- 30% of BAME people said problems with housing made their mental health worse during the pandemic, compared to 23% of White people.

Concerns that negatively affected mental health	BAME people	White people
Employment	61%	51%
Finances	52%	45%
Getting physical health support	39%	29%
Caring for someone else	30%	23%

People experiencing social deprivation

- Those living in social housing were nearly twice as likely to experience worse mental health as a result of housing problems (40% compared to 23% of people who don't live in social housing), and not feeling safe in their homes (27% compared to 13% of others).

Parents:

- Over half (54%) of parents with children under 18 said that looking after children or family members in the home made their mental health worse. They were also more likely to be negatively affected by their work situation (60% with children vs 52% without) or their financial situation (53% vs 43%).

I'm a single parent with kids in a small flat, with limited amount of time outdoors as well as the pressure of trying to maintain my job from home. It's difficult and I'm fed up.

Survey participant, adult

Young people aged 18–24

- 18–24 year olds' mental health was disproportionately affected by concerns about work (65% of 18–24s vs 51% of all other age categories), difficulties accessing mental health support (49% vs 30%), loneliness (78% vs 59%) and not seeing friends or family (88% vs 73%).

New and soon-to-be parents:

- Being unable to see others who can help with a newborn baby, not knowing who can be in the delivery room, and anxiety around overcrowded hospitals and coronavirus were key concerns for people in the perinatal period.

I'm pregnant and feel so alone without my support network around me, and no face-to-face support from the Perinatal Mental Health Team. I have NO idea how I'm going to cope when the baby comes without being able to have people come in and help me.

Survey participant, adult

Case study

Jenny

Jenny is in her thirties and lives in West Sussex with her partner and two-and-a-half-year-old daughter. Taking care of her daughter is an important part of Jenny's day to day life. Jenny used to work as a sales manager but has not been in work for three years due to her mental health.

Things changed significantly for Jenny since the period of social distancing began. Before the lockdown, Jenny's childcare needs were supported by her partner's parents. While Jenny enjoyed spending more time with her daughter during lockdown, she found it hard without access to her usual support system, commenting that 'not having any childcare is really tough.' Jenny felt that lockdown put her into survival mode and explained how 'I find myself going very into all or nothing'. This can translate into either doing everything that needs to be done in the house or feeling unable to start anything.

Section 3:
How have people been coping?

We wanted to learn how participants coped during the pandemic and give them the opportunity to share advice on how to manage wellbeing during social isolation. Our results show that:

Speaking to family and friends online was the most common coping strategy.

Over half of young people and adults have been over or under-eating to cope, while nearly a third turned to alcohol or illegal drugs.

More than 1 in 4 young people were self-harming, which made them twice as likely as adults to cope in this way.

Those who sought advice and support for their mental health used significantly more positive coping strategies than those who did not.

People struggled to recognise positive wellbeing habits and behaviours as legitimate ways of managing their mental health symptoms and 'coping' with coronavirus.

Participants had thousands of great pieces of advice to share, encouraging others to practice self-compassion, speak to others, develop a routine, find distractions, and minimise the amount of news you consume to cope with coronavirus.

Keep talking to people, I have a daily 'coffee date' on FaceTime with my mum and sister which has added routine to my day and made me feel connected to them.

Survey participant, adult

Valuable advice from our participants

We asked people to share some advice with others about how to manage their mental health during difficult periods of uncertainty. We received thousands of responses, full of great ideas that most commonly focused on five key points:

1 Be kind to yourself – getting through each day is enough

"Too much advice can be anxiety inducing. Sometimes it is ok to step back or to just get through the day."

"Remember that your problems are valid, even if other things seem more important right now."

"It's okay to feel however you feel, people cope and react to things in different ways."

"Don't put pressure on yourself to use this time for 'self-improvement'. Just getting through is ok."

"Focus on things that make you smile, not your productivity."

"Be kind to yourself. Take it hour by hour – not even day by day."

2 Keep talking to others about how you're feeling

"Speak up – you might be surprised at the support you receive, for example from your workplace."

"Talk to people – it is worse if you hold it in. Email a teacher if something bad is happening to you and not to suffer in silence."

"Don't be afraid to reach out for help, reach to someone you trust, it can be anyone! If not, there are always helplines as well!"

3 Develop a new routine

"I try and start my day at the same time and do some yoga. It really helps me get into the right frame of mind."

"Try to keep to a routine as much as you can – eat and sleep at normal times if possible."

"Leave the house for 30 minutes after working, days or nights, either on foot, or on a bike, it tells your brain work time is over."

"Try and keep a record of how you are feeling on a daily basis, will allow you to see triggers or helpful factors."

"Your routine has changed and so may your mental health. Be patient and be kind while making a new routine."

4 Find activities that help to distract you

"Go for walks if you're able. Take photos of nature. Smile and say hello to passers-by"

"If you have a history of mental health problems, revisit old therapy work and revise. Now is the time to refresh your toolbox."

"I have found that being creative has helped me so much."

5 Limit how much news you engage with

"I find minimising watching bad news on the TV helpful"

"It's fine to tune out family members if they're trying to make you worry more."

"Minimise unhealthy social media and risk of fake news, try to focus on one day at a time."

Connecting with family and friends online was the most popular positive coping strategy among all ages

Top five positive coping strategies used by adults

1. Connecting with friends or family online (77%)
2. Watching TV or films (71%)
3. Spending time outside (67%)
4. Doing household chores (e.g. cooking and cleaning) (66%)
5. Listening to music or the radio (59%)

Top five positive coping strategies used by young people

1. Connecting with friends or family online (78%)
2. Watching TV or films (74%)
3. Spending time outside (66%)
4. Listening to music or the radio (66%)
5. Going on social media (61%)

Case study

Sameena

Sameena turned 21 just after the start of lockdown, and lives with her 17-year-old brother in a cul-de-sac in rural Yorkshire. She felt that self-isolating was made much easier by being lucky enough to live in "a house that has plenty of space and a nice garden" and keeping in touch with friends via video calls.

Sameena was in regular contact with other friends, family and neighbours during lockdown and felt that the shared experience brought her closer to the people in her life. For example, the previous week she had video called her cousin (who had recently given birth) – something she believes would "never have happened before". Although still sometimes feeling lonely, Sameena feels that her efforts to stay in touch virtually, helped her to deal with the isolation of being physically separated from friends and family, and strongly recommends talking to others about your worries as a strategy for supporting wellbeing.

"I talk to my friends more often and I appreciate them more."
Sameena

Social media can be both a positive and negative coping strategy

- "Knowing others were going through the same thing" was cited as a helpful strategy that made people feel less alone when they were facing mental health challenges during lockdown. Social media played a key role in enabling this.

- Reading others' stories on social media made people feel less alone and provided a sense of community and solidarity.

- However, some also cited social media as a negative trigger for their mental health as it often contained a lot of distressing news content. Those avoiding social media for this reason may have missed out on the same sense of community and advice being shared on these platforms.

Case study

Immy

Immy is 17 years old. During the pandemic she used social media to search #Y12 to see how others her age were coping.

"I'll type in a hashtag like #year12 and read all the posts… It makes me feel relieved to see that other people are going through the same thing."

Immy

Eating too much or too little and using alcohol or illegal drugs were the most common negative coping strategies

- Over half (56%) of adults and nearly three quarters (71%) of 18–24 year olds were eating too much or too little during lockdown.

- Over a third (36%) of adults and a third (34%) young people were drinking alcohol or using illegal drugs. This rises to 43% of 18–24 year olds.

Over a quarter of young people are self-harming to cope

- Young people are more than twice as likely as adults to have used self-harm as a coping strategy (28% of young people vs 11% of adults).

- Nearly a third (30%) of under-18s self-harmed to cope, with this rising to over a third (36%) of 16 and 17 year olds.

- One in three young people (33%) with experience of mental health problems self-harmed to cope during lockdown.

I have Autism, anxiety, anorexia and I self-harm. I am really struggling. I am eating a lot less and being sick more. I can't sleep. I feel unwell. I feel really panicky and can't go outside. I am hurting myself a lot more.

Survey participant, young person

People may not have recognised habits and behaviours that support their mental health as 'coping strategies'

- Many of those we spoke to described strategies for managing their mental health but they did not recognise these as 'coping strategies'. For example, when one participant was asked what a 'good day' looked like, they mentioned things such as going for a walk, doing coursework, playing guitar and doing art – which all had a positive impact on their mental health. However, when asked, they did not list these as coping strategies.

- The language and framing of advice around 'coping strategies' doesn't resonate with everyone – terms used to describe wellbeing tips and support could be more inclusive.

The strategies people used to cope remained very similar over time

- Generally, coping strategies among all age groups remained constant throughout the entire lockdown period.

- Over three quarters of people (77%) were regularly connecting with family and friends online early April, which fell to 67% during the first weeks of May.

Case study

Natasha

Natasha is 20 and lives with her parents in East London. Five years ago she was diagnosed with borderline personality disorder. Although Natasha initially enjoyed lockdown and felt like she was coping well, she now feels anxious about losing touch with her friends in the future, as she finds that communicating online can be quite stressful.

Some people coped well during lockdown, but may find it difficult to adjust as restrictions are lifted

- Around one in eight (12%) of both adults and young people said their mental health has improved since the beginning of lockdown. Some participants spoke about how lockdown provided a nice break from day-to-day life and an opportunity to focus on health and fitness, research new career options or learn a new language. These people may benefit from guidance on how to continue these positive habits after lockdown.

- A few participants have developed coping strategies or learned behaviours during lockdown which may negatively affect their ability to adapt when restrictions are lifted. For example, some participants were concerned about becoming much more reclusive after enjoying isolation, and how this might set their recovery back when lockdown is over.

- Those with OCD, social anxiety or health anxiety symptoms may experience particular difficulties when lockdown is lifted. For example, one participant said she is unwilling to resume her previous routine until the number of coronavirus cases in the UK hits zero.

Case study

Paula

A big worry for Paula is now the idea of coming out of lockdown. Routine is important to her, particularly because of her autism. Having finally adjusted to a new normal in lockdown, Paula is keen to stick to what she has been doing for the past two months long after lockdown is lifted. She is keen that her routine continues until it is known that no one has the virus.

- Some people are also experiencing anxiety around going back to their jobs, after working from home or not working for so long. They would like more guidance on how to deal with this transition back to work.

[Mind should] start helping people to think about going back to work and when the world becomes a busier place. I have spent the entire lockdown worrying how I will function when this is over and that I will lose my job because I won't be able to do it. No one has provided any support for those worries and feelings.
Survey participant, adult

Advice & support

Are you worried about coming out of lockdown?

Mind has put together some information explaining feelings you might have about lockdown easing. It also provides tips on managing these feelings and where to get more support and can be accessed here.

Trix

Trix describes herself as a "40-year-old trans-woman living in North Yorkshire. Living with anxiety, autism and gender dysphoria." Trix prefers to stay inside when she can, and is enjoying lockdown. She used to dread having to attend a pub quiz every Thursday and would spend days rehearsing potential conversations. Trix felt relieved to not be going out during lockdown. However, Trix worries that staying inside all the time and not confronting her fears may set her recovery back, and she may struggle with resuming social contact and reaching the goals she set herself at her local Mind, once lockdown is over.

Coping strategies varied between social groups

Under-34s:

- Nearly half (45%) of 18–34 year olds coped by drinking alcohol or taking illegal drugs, in comparison to 33% of those aged 35 and above.

BAME communities:

- BAME people were more than twice as likely to pray or practice other religious worship to cope – a quarter (25%) of BAME people have done so (vs 11% of White people).

Gender:

- Women and non-binary people were more likely to over or under eat to cope – nearly two thirds (61%) of women and over two thirds (69%) of non-binary people coped in this way, in comparison to 46% of men. Trans people were more than twice as likely to self-harm than people who have never identified as trans (29% of trans people are self-harming to cope vs 13% of people who have not identified as trans).

- When it comes to under-18s, girls were more likely to spend time on social media (71% of girls vs 59% of boys). Boys are more likely to have met up with people who they don't live with (25% of boys vs 17% of girls) and drink alcohol or use illegal drugs to cope (27% of boys vs 19% of girls).

People experiencing social deprivation:

- Adults living in social housing or a housing association were more likely to smoke (27% in social housing vs 15% in all other living situations), self-harm (19% vs 13%) and over/under eat (64% vs 55%). On top of this, they were less likely to exercise (33% vs 57%) or spend time outside (50% vs 66%).

- Under-18s who have received free school meals (another proxy for social deprivation) were more likely to be drinking alcohol or taking illegal drugs (32% received FSM vs 18% who have not) and self-harming (48% vs 29%), and less likely to exercise (41% vs 62%), do schoolwork (47% vs 60%) and spend time on social media (51% vs 72%).

People with personal experience of mental health problems:

- Those who had sought support for their mental health used significantly more positive coping strategies than those who did not. However, they were also considerably more likely to be eating too much or too little to cope (62% of people with personal experience vs 44% of those without).

Case studies

Julie & Natasha

Julie and Natasha have both previously spent time in therapy and thus had a larger bank of coping strategies to draw upon. Julie set a time for worrying at 7pm each day, and a time to go out into nature, while Natasha practiced techniques learned in DBT e.g. radical acceptance.

Advice & support

Are you worried about accessing mental health treatment and support during the pandemic?

Mind has information how coronavirus is affecting services, with tips for accessing the support you need here.

Section 4:
Have people been able to access the support they need?

We wanted to find out whether people were still able to access essential support during lockdown and to explore the main barriers that they faced in doing so. Our results show that:

One in four people of all ages who tried to access mental health support during lockdown were not able to do so.

A third (32%) of adults and just over a quarter (28%) of young people did not access support because they did not think that their issue was serious enough.

Young people were more likely to find it difficult to access mental health support, and less likely to feel comfortable accessing mental health support over the phone or on a video-call.

The key challenge is to ensure people who want to access services know that they deserve support, and that services are still available for them.

I don't want to cause problems as the NHS is already struggling. From prior experience, not much help is available without waiting for months anyway.

Survey participant, adult

James

Although finding that lockdown was heightening his OCD symptoms, James did not contact his GP straight away as he didn't want to give them any more work than he felt they were already doing – particularly with the coronavirus pandemic. However, after a few weeks and a quick call with his doctor, James was prescribed a higher dose of medication for lockdown and began to do a lot better.

I feel that I should be able to cope and allow other people access to services I might want to use because their need is greater than mine.
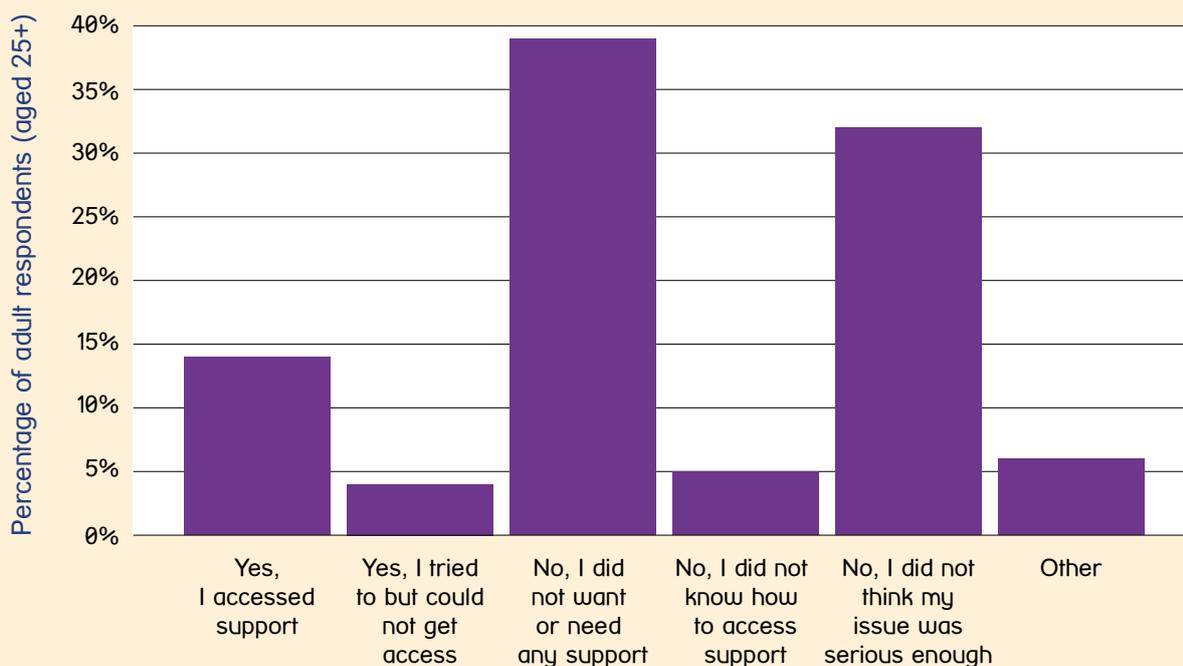Survey participant, adult

During lockdown, many people did not access services because they felt that they didn't deserve support

- A third (32%) of adults and over a quarter (28%) of young people did not seek mental health support during lockdown as they did not think that their issue was serious enough.

- More than 1 in 6 (18%) of adults and a quarter (25%) of young people tried to seek help during lockdown, and 1 in 4 (24%) of adults and more than 1 in 4 (28%) of young people were then not able to access the mental health support that they sought.

- 6% of adults and 9% of young people did not seek mental health support as they were not sure how to do so. This rises slightly to 10% of 18–24 year olds, making them almost twice as likely as over-25s to not have accessed support because they did not know how to.

I thought my issue was too trivial and selfish given the current situation.
Survey participant, adult

'Have you accessed (or tried to access) any services for your mental health during lockdown?'

Bar chart — Percentage of adult respondents (aged 25+):
- Yes, I accessed support: 14%
- Yes, I tried to but could not get access: 4%
- No, I did not want or need any support: 39%
- No, I did not know how to access support: 5%
- No, I did not think my issue was serious enough: 32%
- Other: 6%

As time went on, slightly more people felt that their issue was not serious enough to deserve support

- Amongst under 18s, there was an 11% increase in people feeling that their issue was not serious enough to get support from the first fortnight of lockdown in early April to the first two weeks of May. There was a 5% increase from people over 18 during the same time period.

- The number of cancelled appointments declined slightly over time. However, other difficulties including feeling uncomfortable speaking over the phone, having difficulty getting in contact with your GP or community mental health team, and the types of services accessed e.g. phone and video call support via the NHS, remained constant.

Advice & support

How do I go about getting support for my mental health at the moment?

Our advice on how to seek help for a mental health problem provides information about where to go to get support.

Our Find the Words campaign also provides practical advice on how to talk to your GP about your mental health.

Speaking to a counsellor or therapist over the phone was the most popular way to access support

While the majority of participants surveyed had not accessed mental health support, there were clear patterns among those participants who did:

- Around half (44% of over 18s) spoke to a counsellor or therapist over the phone, while around a quarter spoke to their GP (25%) or a counsellor or therapist over video call (22%).

- Half (50%) of people over 18 who accessed support did so via the NHS while a quarter (24%) did so through a private provider.

- More than half (57%) of those in employment were offered mental health support by their employer. Half (51%) said it was quite or very useful, and a fifth (19%) said it was not useful.

Remote services are adapting well, but need to be aware of differences in experiences and continue adapting accordingly

- Many support groups moved in-person meetings to online meetings via videoconference, and many individuals who were receiving 1-1 therapy or counselling have continued to receive this via video-call or over the phone.

- A surprisingly small proportion – less than a fifth in almost all cases – of those who tried to access support reported facing any barriers. The real challenge to overcome is in making people feel that their problems deserve support, and letting them know that support is available online or over the phone when in-person services are not possible.

- Those taking part in remote groups or therapy sessions were doing so since the beginning of lockdown, or tended to have frequently accessed services before lockdown. This might make it harder for those who weren't already accessing therapy or support groups to do so.

- While some have preferred remote support, others struggled to connect without being face-to-face. The quality and content of virtual services also varied – participants said sessions tended to be shorter, and less varied, with fewer opportunities for communication and spontaneity.

Top three barriers that both adults and young people faced

1. Feeling unable or uncomfortable using phone or video-call technology
2. Appointments cancelled
3. Difficulty getting in contact with GP or community mental health team

Case study

Ally

Ally's therapist moved their sessions over to Zoom, a video-call platform, at the beginning of the lockdown period. Ally said that the advice of their therapist via Zoom has been easing their worries about the virus and they feel content with the amount of support they are getting during lockdown, albeit over video-call rather than in person.

Young people are more likely to feel uncomfortable using phone or video-call technology

- Although it might be assumed that younger people are more comfortable with technology, they are actually nearly twice as likely to say that they feel uncomfortable using phone or video-call technology to access mental health support.

- Almost a third of young people (30%) who accessed or tried to access support said that the technology was a barrier to doing so, in comparison to 17% of adults. Concerns about privacy appear to be a particular issue for young people.

I'm struggling a lot with depression and feel like it's getting worse. I'm worried about going back to school. I don't want to go back. I'm having panic attacks. It's so hard to get support, lots of services are busy and it can take up to an hour to get a reply. I don't like making phone calls because my parents will hear me
Survey participant, young person

Difficulties accessing mental health support affected young people more than adults

- Half (49%) of 18–24 year olds said that difficulties accessing mental health support made their mental health worse, including just under half of university students.

- We heard in our qualitative research that students particularly struggled with moving back in with parents, being isolated from friends and university mental health support.

- Less than a third of adults (30%) said that difficulties getting help for their mental health made their mental health worse, in comparison to nearly half of young people aged 13–24 (44%).

The isolation from not only family and friends but from my pastoral manager at school has taken a toll. I was on the list for counselling and now I have no one to talk to.
Survey participant, young person

Most participants were not accessing other support services. However, those who did reach out often faced difficulty in doing so

- Over two thirds (68%) of adults over 18 did not try to access banks, the Department for Work and Pensions (DWP), local authorities, utility providers or legal support.

- People out of employment due to disability or illness and people living in social housing were more likely to have accessed support from the DWP or local authorities.

- A larger proportion of people faced difficulty accessing these services than they did accessing mental health services.

- The most common difficulty in trying to access these service providers was not being able to get through on the phone – 41% of people who tried to access service providers faced this difficulty.

> [I was] constantly being given the option of calling or writing to them [the DWP]. I'm deaf, I hear less than 50% of a phone conversation. Phone calls can be a nightmare. We are in 2020 now, every business and Government department should offer email or online chat by default.
>
> Survey participant, adult

Some groups tried to access more support and faced more difficulties than others

People with poor mental health:

- Nearly two thirds (60%) of those who said that their mental health was poor also said that difficulty accessing mental health support made their mental health worse (vs 30% overall). This rises to more than two thirds (67%) of those who said that their mental health was very poor.

Parents:

- A quarter (24%) of parents with children under 18 who tried to access services said that they faced difficulties balancing accessing support with additional responsibilities. They were eight times more likely to experience this difficulty than those without children under 18.

Case study

Jenny

Jenny's partner's parents would look after her daughter when she attended one of the weekly groups or sessions that she normally attends to manage her mental health. When she had to look after her daughter all the time she could no longer attend these sessions.

People experiencing social deprivation:

- People living in social housing reported that they needed support more than other groups. They are more likely to have tried to access support (28% of people living in social housing vs 18% who do not), and also more likely to have not been able to do so.

Girls:

- Girls under 18 were more than twice as likely to have accessed support when compared to boys of the same age (22% of girls have accessed support vs 10% of boys).

People with experience of a personality disorder:

- People with personality disorders are more than twice as likely to be negatively affected by difficulties accessing mental health support (70% with vs 28% without) and difficulties getting physical health support (51% with vs 28% without).

People unable to work due to disability:

- People unable to work due to illness or disability were more than twice as likely to have tried but been unable to access mental health support. They were also significantly more likely to face most difficulties experienced in trying to access mental health support.

Section 5:
How have people been accessing mental health information?

We asked people where and how they were accessing information and advice to manage their mental health during the pandemic, and what kind of support they would benefit from most while coronavirus restrictions were in place. Our results show that:

While the most common source of information is family and friends, those with poor mental health are less likely to go to their family or workplace for mental health information and advice.

Around a quarter of people of all ages went to charities for information about how to manage their mental health, with the large majority finding charity information helpful.

Although over a third of adults and young people are using social media to find mental health information, under half of those adults and around a third of young people said it was helpful.

Both adults and young people would benefit from information on how to manage their wellbeing during coronavirus – young people particularly felt that this information would be useful.

People with mental health problems would benefit from tailored information on how to manage specific mental health problems beyond universal wellbeing tips.

The top five most popular sources of information and advice for adults were:

1. Friends and family (52%)
2. Official government guidance (41%)
3. Social media (37%)
4. Charities e.g. Mind (28%)
5. TV (25%)

The top five most popular sources of information and advice for young people were:

1. Friends and family (54%)
2. Official government guidance (33% of 18–24 year olds)
3. Social media (36%)
4. Charities e.g. Mind (25%)
5. Internet searches (25% of under-18s)

Adults with poor mental health are less likely to have gone to family and friends for advice about their mental health

- Over half (58%) of adults with poor mental health went to family and friends for advice about their mental health, in comparison to the two thirds (66%) of those who did not rate their mental health as poor or very poor during lockdown.

- Over a third (37%) of adults who rated their current mental health as poor or very poor went to charities for mental health advice and information, in comparison to under a third (31%) of those who did not rate their mental health as poor.

Young people with poor mental health are more likely to speak to friends and teachers, but less likely to speak to family

- Over half of young people (52%) who said their mental health was poor or very poor went to friends or boyfriends/girlfriends for mental health advice, in comparison to 42% of those did not say their mental health was poor. Just under a quarter of those who said their mental health was poor or very poor went to teachers for mental health advice (24% vs 15%).

- However, those with poor mental health were less likely to get advice from their family about mental health (29%) than those without poor mental health, 41% of whom went to their families for mental health advice and information.

Most sources of information were helpful, with social media and internet searches being the least helpful

- More than two thirds of both adults and young people said that the information or advice they received from charities, their workplace, family and friends, their GP, helplines, TV or radio was very or quite helpful.

- Charities were more helpful than any other source, with over three quarters of adults (79%) and just under three quarters of young people (73%) who used them saying they were very or quite helpful.

- 42% of adults and just over a third (35%) of young people who used social media said that it was very or quite helpful, with only 9% saying that it was very helpful. 39% of under-18s who got information or advice from an internet search said that it was quite or very helpful.

- Although fewer people found social media helpful as a source of information, we saw previously in section three that it can be helpful in providing a community where people can share experiences with others.

Case study

Jenny

Jenny was seeing second hand news on social media and was annoyed people were sharing things about coronavirus that weren't true. She is now trying to avoid social media.

Top 5 information needs for adults during the pandemic

1. How to support their wellbeing during this difficult period (Mind's information on this topic can be accessed here)
2. Advice about ways to manage specific mental health problems e.g. health anxiety or OCD during this period (Mind's information on this topic can be accessed here)
3. Mindfulness or meditation online (Mind's information on this topic can be accessed here)
4. How to support family and friends (Mind's information on this topic can be accessed here)
5. What mental health services are available and how to access them during this period (Mind's information on this topic can be accessed here)

Tailor made resources for people with existing mental health problems would be useful. I would have liked to have been able to access information regarding how to deal with strong social anxiety provoked by having to use Zoom/Facetime etc.
Survey participant, adult

Top 5 information needs for young people during the pandemic

1. How to support their wellbeing during this period (Mind already provides specific coronavirus mental health advice for children and young people which can be accessed here)
2. Advice about ways to manage specific mental health problems e.g. health anxiety or OCD during this period
3. Information about mental health problems and symptoms
4. Information about how to support family and friends during this period (Mind's information on this topic can be accessed here)
5. Mindfulness or meditation online

Case study

James

James would have loved more information on the sorts of obsessive thoughts other people with OCD have so he could feel like he wasn't suffering alone. He sometimes googled a thought he had to see whether anyone else was also having the thought.

"It's nice feeling that it's not just me."
James

Anna

Anna saw a lot of content promoting exercise as a positive strategy for maintaining good mental health. For her, though, as someone with experience of an eating disorder, exercise can be dangerous, and this broad wellbeing advice for everyone didn't help her to cope.

Young people are more likely to want extra support to help manage their mental health

- With the exception of meditation and mindfulness, young people are more likely than adults to want Mind to provide all forms of support.

- They are more than twice as likely to want Mind to provide peer support services.

- Nearly one in three young people, and more than one in three (38%) of 18–24 year olds would like information about how to access mental health services, in comparison to one in five adults.

- Over a quarter would find telephone or video-counselling helpful, which rises to a third of 18–24 year olds, in comparison to a fifth of adults.

Connecting with other young people online is so valuable, it helps you feel less alone, everyone can relate to how you are feeling and you can post a message anytime to get a reply from someone.
Survey participant, young person

Different groups are using different sources to access information

- **Young people aged 18–24** were more likely than any other group to use social media as a source of mental health information – nearly half (45%) of 18–24 year olds did so. They were also most likely to use charities, a third (34%) went to charities for information or advice about managing their mental health during the pandemic.

- **Women** were more likely to speak to family and friends for advice than men (65% women vs 50% men). This was also true for under-18s; over half of girls surveyed went to their friends for mental health advice, vs just over a third (37%) of boys. However, just under half (46%) of both boys and girls went to their families for advice.

- **Women** were also more likely to use charities (35% of women vs 28% of men), with girls being nearly three times more likely than boys to use charities (17% of girls vs 6% of boys).

Natasha

Natasha regularly accesses a lot of online sources for support, including: Mind; YoungMinds; NHS; Mental Health Foundation; and Rethink Mental Illness. She recently found the Mental Health Foundation's *Coping with coronavirus* guide, and has found this to be particularly helpful due to its interactive exercises.

- **BAME** people were much more likely to need advice about money and benefits (40% BAME vs 24% White) and housing (19% BAME vs 10% White) to help manage their mental health. They are also more likely to need telephone and video-counselling services (49% vs 31%), and guidance on their legal rights (31% vs 19%).

- **BAME** people are nearly twice as likely to be using online communities to get information and guidance about their mental health (19% vs 10%) but are slightly less likely to use charities (29% vs 34%).

Mind's work: how we're making use of the findings

While there is still so much more to achieve, this research has already made an impact by highlighting how coronavirus has affected mental health, and enabling people to support one another through this challenging period.

- Some of the advice and tips that people shared in the survey formed part of our Mental Health Awareness Week campaign, helping people to learn from each other.

- Statistics from our survey have been used in policy consultations and committee evidence in England and Wales to highlight the mental health impact of coronavirus, and its disproportionate impact on certain groups.

- We have used the findings to shape our planning for our new strategy, which will begin in 2021. The research has focused our attention on the groups who need the most support and helped us better understand what people with mental health problems would like us to offer in the future.

- Many newspapers have written about our survey findings, raising awareness of the impact that coronavirus and its restrictions are having on people with mental health problems.

- We have developed new online information to provide advice and support on the topics that matter to you.

Advice & support

Our resources offer advice on how to look after your mental health during this period, and what we can to do to protect our wellbeing while staying at home and self-isolating or if we have to keep going to work: mind.org.uk/coronavirus

- We have developed guidance for local Minds to help them adapt their services, with many local Minds running telephone helplines with extended hours and others moving to use online platforms and video conferencing.

- We have used the research findings to prioritise the grants we have been making through the Coronavirus Mental Health Response Fund, that we are administering on behalf of the Department of Health and Social Care.

Next steps

We will continue to use these findings to guide our work, sharing them with those in power to ensure that they prioritise mental health and understand that the impact of the pandemic on mental health will be long-lasting.

As policy makers take action to manage the situation, they must make the right choices to protect our nation's mental health.

Our health and social care services are and will continue to be under pressure like never before. The devastating loss of life, the impact of lockdown, and the inevitable recession will have deep and lasting consequences on all our lives. We must now rebuild services and support to help make sure the society that comes after the pandemic is kinder, fairer and safer. This can only be achieved if the UK Government meets our five tests for putting mental health at the heart of the new normal:

1. Invest in community services
2. Protect those most at risk
3. Reform the Mental Health Act
4. Provide a financial safety net
5. Support children and young people.

Now more than ever the nation's mental health needs to be prioritised. Read more about this work at mind.org.uk/fivetests

In Wales, we will continue to use the findings from this research to support our influencing work to ensure the voices of people with mental health problems are heard, aligning them with our campaigning priorities, and highlighting key issues that the Welsh Government need to take action on. Find out more about our work in Wales.

We will continue to develop our online information to help you look after your mental health and provide advice and support on the issues that matter to you.

We will work with our local Minds as they adapt the way that they work now and in the future, following government and NHS advice.

Advice & support

If you need support where you live – or if you already use the services of a local Mind, it's best to contact your local Mind directly. You can find your nearest local Mind using our online map.

Campaign with us

Mind campaigners work with us to campaign for a better deal for people with mental health problems. Join us to find out more about our work and how you can get involved.

Click here to become a Mind campaigner today

If you would like to see the overall responses to each question we asked, they are available here:

- Adults (18+)
- Young people (13–17)

Please note that these include some incomplete responses that were filtered out of the results in our final analysis. This may mean that some frequencies may not be identical to those included in the report.

If you are a researcher who is interested in finding out more detail about the research and the data we have collected, please contact research@mind.org.uk

Try to remember, nothing lasts forever. You can get through this difficult time.

Survey participant, adult

We're Mind, the mental health charity. We won't give up until everyone experiencing a mental health problem gets both support and respect.

This is a mental health emergency – we need your help right now.

The coronavirus pandemic is having a huge impact on our mental health. Help us be there for everyone who needs us at this crucial time.

Click to make a donation today

REVEALING REALITY

mind
for better mental health