The mental health emergency

How has the coronavirus pandemic impacted our mental health?

June 2020

Wales summary report

mind Cymru
for better mental health
o blaid gwell iechyd meddwl

Contents

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Foreword

There has rarely been a more critical time for prioritising the mental health of the Welsh nation. The challenges posed by the coronavirus (Covid-19) pandemic will have a lasting impact on the mental health of many people in Wales. The devastating loss of life, the impact of lockdown and loneliness, being unable to seek support from friends and family and challenges in accessing other types of support has affected all of us.

To understand how we can best support people during this uncertain time, we carried out research to understand people's experiences, the challenges they are facing, the coping strategies being used, and the support they would like to receive. 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 across the UK shared their experiences of mental health during the pandemic as part of this research, including more than 900 people from Wales. This report looks at what we found about the mental health impact in Wales.

Overall, it paints a challenging picture of how the whole population's mental health has been impacted, but also highlights the disproportionate impact on some communities, particularly those with an existing mental health problem and people from Black, Asian and Minority Ethnic communities. There were already significant challenges facing the mental health system in Wales before the pandemic; the concern now is that pre-existing inequalities have only become further entrenched.

We have yet to reach the peak of the mental health impact, and whilst we must ensure we are not medicalising natural reactions to the unfolding situation over the last few months, we must continue to address short, medium and long-term need in order to ensure everyone can access support. The lasting effects of trauma and severe economic pressures will be keenly felt by thousands — those working on the frontline, people who have not had an opportunity to grieve, those who have spent months alone, and young people who had the security of their routine taken away overnight.

Supported by these findings, we are urging the Welsh Government to put mental health at the very centre of their recovery plans. As we look to the future, government and decision-makers must make the right choices with urgency, to learn from and understand the experiences of those of us with mental health problems, to rebuild services and support, and ensure that the society that comes after the pandemic is kinder, fairer and safer for everyone.
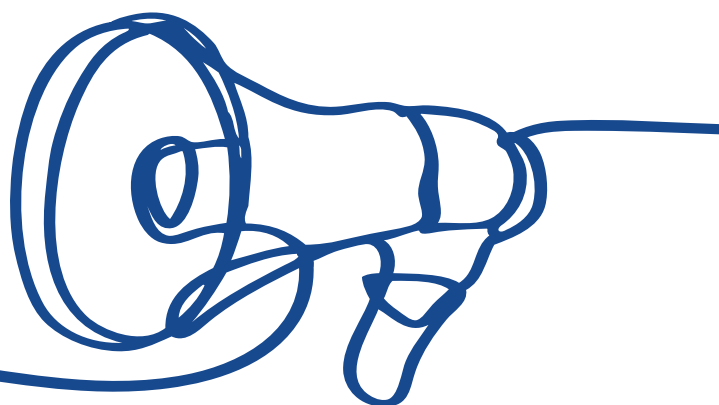
Introduction

We would like to thank everyone who took the time to complete this survey and provide us with their experiences. We recognise that some findings in this report may be upsetting as it deals with personal experiences and both positive and negative coping strategies. If you need help and support for your mental health you can access a range of information and advice on the [Mind website](#).

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.

Overall we found little difference between how coronavirus has impacted on the mental health of people in England and Wales, however we did find slight differences in how people are coping and how they accessed support. You can access all the survey findings for England and Wales in our report [here](#).

For clarity, throughout the report 'adults' refers to those aged 25 and over, while 'young people' refers to those aged 13–24.

Essential learnings

- More than half of adults (**60%** of those over 25) and three quarters of young people (**74%** of those aged 13–24) 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.

- Loneliness has been a key contributor to poor mental health. Feelings of loneliness have made nearly two thirds of adults' and over three quarters of young people's mental health worse during lockdown. 18–24 year olds are the most likely to see loneliness affect their mental health.

- People do not feel entitled to seek help, and have difficulty accessing it when they do. 1 in 3 (**34%**) adults and 1 in 4 young people (**26%**) did not access support during lockdown because they did not think that they deserved support.

- Over a sixth of adults, and a third of 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.

- Around 1 in 8 adults (**12%**) and young people (**11%**) have said their mental health has got better during lockdown. These people may benefit from information and advice on how to continue positive habits after lockdown, or how to come out of lockdown, as Mind is [already providing](#).

What is driving poor mental health during the pandemic?

- Not being able to see family and friends, go outside, and anxiety about family and friends getting coronavirus are the top drivers for poor mental health amongst adults.

- Boredom, not seeing friends, and not being able to go outside are the top drivers for poor mental health amongst young people.

- Loneliness affects the mental health of young people more than the mental health of older people. While over three quarters (78%) of young people said that loneliness had made their mental health worse during lockdown, this rose to 85% of 18-24 year olds.

Top 5 concerns making young people's mental health worse:

1. Feeling bored/restless (87%)
2. Not seeing friends, family and partners outside of your house (85%)
3. Not being able to go outside (80%)
4. Feeling lonely (78%)
5. Feeling anxious about family and friends getting coronavirus (73%)

Top 5 concerns making adults' mental health worse:

1. Not being able to see family, friends or partners that don't live with you (78%)
2. Feeling anxious about family and friends getting coronavirus (75%)
3. Not being able to go outside except for essential reasons (73%)
4. Feeling bored/restless (70%)
5. Feeling anxious about getting coronavirus (66%)

Being unable to see my family, friends or partner and being isolated alone at home is having an extremely negative impact on my depression is impacting on me badly.

Adult survey participant, Wales

We all thought lockdown would be over 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?

Young person participant, Wales

How did people cope?

- Just over half of adults (59%) are over or undereating to cope.

- Over a third (39%) of adults are drinking alcohol or using illegal drugs to cope. In England it is mainly under-34s who are drinking alcohol to cope, however in Wales similar proportions of people from all age categories are coping in this way (38% of young people said they had coped in this way).

- Nearly one in three (31%) young people reported self-harming to cope. They are more than twice as likely as adults to cope in this way (12% of adults reported self-harming to cope).

Top five positive coping strategies used by young people:

① Connecting with friends or family online (83%)

② Watching TV/films (78%)

③ Spending time outside (69%)

④ Listening to music or the radio (67%)

⑤ Going on social media (65%)*

*This option was only given to under-18s.

Top five positive coping strategies used by adults:

① Connecting with friends or family online (77%)

② Watching TV or films (70%)

③ Doing household chores e.g. cooking and cleaning (67%)

④ Spending time outside (67%)

⑤ Listening to music or the radio (57%)

Advice & support

If you are struggling with self-harm, we provide information on how you can access treatment and support, including tips for helping yourself, and guidance for friends and family, which can be accessed here.

Case study

Julie

Julie is a 62-year-old woman from South Wales with experience of anxiety and depression. She has been finding that having previously spent time in therapy is helping her cope with lockdown. She finds that therapy has given her larger bank of coping strategies to draw upon. Julie sets a time for worrying at 7pm each day, and a time to go out into nature, both techniques she practiced with her therapist.

Could people access the support they needed?

- 16% of adults and 29% of young people tried to access mental health support during lockdown. Of these people, more than 1 in 6 (18%) adults were then unable to access the support they sought, which is a slightly smaller proportion than the 22% in England that were also unable to access support. More than 1 in 3 young people in Wales (39%) were unable to access the support they sought, which is higher than 23% of young people who could not access support in England.

- 8% of adults and 15% of young people did not access support because they did not know how to do so, which is slightly higher than the 5% of adults in England and 8% of young people who faced this difficulty.

- 1 in 3 (34%) adults and 1 in 4 young people (26%) did not access support during lockdown because they did not think that their issue was serious enough to deserve support.

- The top three barriers to accessing support for adults were:
  1. Feeling unable/uncomfortable using phone or video-call technology (23%)
  2. Difficulty getting in contact with GP/ community mental health team (21%)
  3. Appointments cancelled (20% of adults).

- 52% of young people said that difficulty getting mental health support made their mental health worse, making them almost twice as likely as adults to experience this concern (30% of adults said this made their mental health worse).

> My therapy has been suspended and this has hit me very hard. I still have support over the phone, but the timing of this loss couldn't have come at a worse time and that cannot be over stated.

Adult survey participant, Wales

> I suffer with OCD and BPD and I'm finding it really difficult to manage in the current circumstances. Although I am in contact with my CMHT through phone, I am finding not having access to meet ups with my social worker and occupational therapist and other support services difficult.

Adult survey participant, Wales

> My anxiety and depression has gotten worse and the only therapy sessions available cost unreasonable. I believe there should be more free help for those struggling mentally as a financial issue can leave individuals feeling lonely and isolated.

Young person participant, Wales

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.

How did people access mental health information?

- A quarter of people of all ages went to charities for information about how to manage their mental health, with the large majority (82% of adults and young people) finding charity information helpful.

- While social media was a popular means of accessing mental health information, just under half (47%) of adults and just over a quarter (27%) of young people found social media helpful.

- Both adults and young people said that they would benefit most from advice on how to manage their wellbeing during this time (40% of adults and 69% of young people) and how to manage specific mental health problems during this time (36% of adults and 56% of young people). We are already providing information on both of these topics, which can be accessed here.

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

1. Friends and family (52%)
2. Official government guidance (40%)
3. Social media (38%)
4. TV (27%)
5. Charities e.g. Mind (25%)

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

1. Friends and family (60%)
2. Social media (43%)
3. Official government guidance (37% of 18-24 year olds)
4. Internet searches (29% of under-18s)
5. Charities e.g. Mind (25%)

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. 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 has been having to see whether anyone else was also having the thought.

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

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.

Adult survey participant, Wales

Who might need additional support as a result of the economic impact?

People who have seen their employment status change as a result of coronavirus

- Nearly three quarters (72%) of those whose employment status has changed as a result of coronavirus say their mental health has got worse, (vs 58% of those who have seen no change to their employment status). Nearly half (43%) of those who have seen their employment status change currently say that their mental health is poor (vs 31% no change).

- People who have seen their employment status change are twice as likely to not know how to access support (13% vs 6%), and more likely to believe their issue does not deserve support (40% vs 32%). Only a quarter said that they did not want nor need mental health support during lockdown (vs 41%).

- More than 8 in 10 people who have seen their employment status change have said that financial concerns (81% vs 35% who have seen no change) and work concerns (89% vs 44%) made their mental health worse. Nearly three quarters said that feeling lonely (72% vs 57%) has made their mental health worse.

- They are more likely to say that telephone counselling (26% vs 16%), information about how to access mental health services (28% vs 18%) and advice about money and benefits (23% vs 13%) would help support their mental health and wellbeing.

I feel very down about the whole situation. [I'm] worried whether I will have a job if the furlough continues for longer.

Adult survey participant, Wales

People who are not currently in work

- While around a quarter (27%) of people in full or part-time employment say their mental health is currently poor or very poor, this rises to 64% of people who are not working due to disability or illness and 48% of people who are unemployed and seeking work.

- Nearly three quarters of those who are not working due to disability or illness said their mental health got worse during lockdown because they felt lonely (72% vs 59% of people in FTE and 63% unemployed and seeking work).

- 8 in 10 of those unemployed and seeking work (81%) say that their financial situation has made their mental health worse (vs 43% in FTE and 37% not working due to disability).

Self-employed

- Nearly three quarters (72%) of those who are self-employed said work concerns made their mental health worse during lockdown, vs 60% of people in full-time employment.

- Nearly three quarters (72%) also said that financial concerns made their mental health worse (vs 38% of those in FTE).

Where has there been a disproportionate impact on the mental health of the population?

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

- Over three quarters of people with an eating disorder (77%), just under three quarters of people with PTSD (74%) and more than four in five people with a 'personality disorder' (85%) said their mental health had got worse during lockdown.

- Although in England 70% of people with OCD said that their mental health had got worse during lockdown, in Wales this fell to 66% of those with OCD.

- People with eating disorders were more likely to say that not being able to go outside (83% with eating disorders vs 72% without), feeling lonely (74% with vs 59% without) and difficulties buying food and essential supplies (70% with vs 54% without) made their mental health worse.

Black, Asian and Minority Ethnic communities

Historically people from Black, Asian and Minority Ethnic (BAME) communities have struggled to access mental health support services in a timely and effective way. The issues relating to this pre-date the pandemic, however the situation in the last few months has sharpened the focus on these inequalities. We recognise that these populations are underrepresented throughout our sample, however we felt it important to provide the analysis below to reflect some of the experiences of these communities. These findings reflect data collected from participants

in England and Wales who were aged 25+ and idenified as BAME (just under 5% of 14,421 adults who completed our survey). Whilst the 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, it 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:

- Problems with housing (30% of BAME people said this made their mental health worse vs 23% of White people), their job (61% vs 51%) their financial situation (52% vs 45%), difficulty getting physical health support (39% vs 29%) and caring for someone else in the house (30% vs 23%) disproportionately affected mental health for BAME people.

- BAME people are 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).

- BAME people are much more likely to want 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 want 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%).

We received responses from 801 adults in Wales aged 25+

Aged 65+ (9%)

Aged 55–64 (18%)

Aged 25–34 (21%)

Aged 35–44 (24%)

Aged 45–54 (28%)
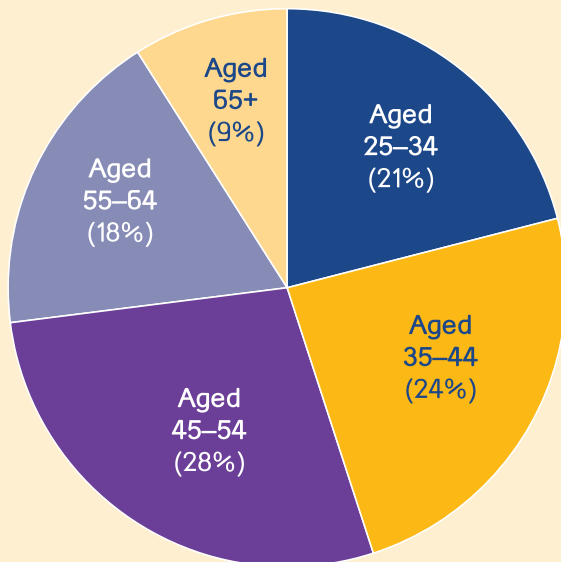
Three quarters (75%) of participants have personal experience of mental health problems, with over half having experience of either anxiety and/or depression.
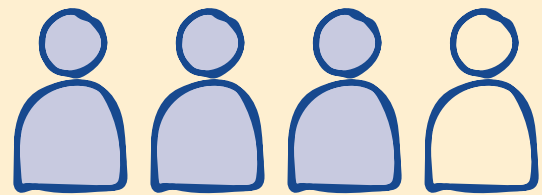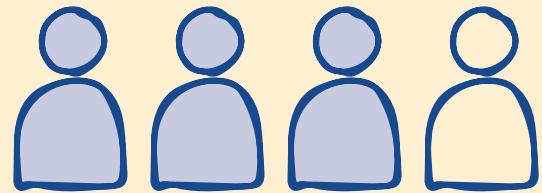

Over a third (37%) have a long-term health problem or learning difference.

- Just under half (45%) have used mental health services before, 40% are family members of somebody who has experienced a mental health problem, 30% are friends to someone who has experienced a mental health problem, 9% are carers for someone with a mental health problem, and 6% work in the mental health sector.

- Three quarters (75%) of participants identify as women, just under a quarter (24%) identify as men, 0.3% identify as non-binary and 0.5% identify as transgender.

- 99% are White and 1% are BAME - BAME groups are underrepresented throughout our adult sample.

- 87% describe themselves as heterosexual/straight, 3% as gay or lesbian and 5% as bisexual.

- Over half (60%) are in full or part-time employment and 16% are unemployed. 16% have seen their employment status change as a result of coronavirus.

- Nearly half (45%) are homeowners, 13% live in privately rented accommodation and 3% live in social housing or a housing association.

- Just under a third (31%) have children under the age of 18.

- Just under a quarter (23%) are carers for a friend or family member.

We received responses from 123 young people in Wales aged 13-24

Aged 13–17 (28%)

Aged 18–24 (72%)
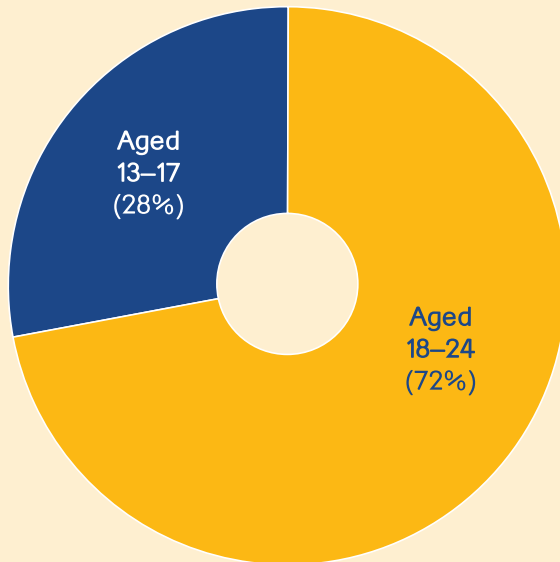
Nearly **three quarters** (74%) of participants have **personal experience of mental health problems.**

43% have used mental health services, 36% have family members with experience of mental health problems and 43% have friends with experience of mental health problems. 4% are carers to someone with a mental health problem.

- 79% identify as female, 20% as male and 1% as transgender.

- 78% identify as heterosexual/straight, 7% as bisexual and 5% as gay or lesbian

- 2% are BAME and 97% are White.

- 7% of the overall adult sample are living in Wales. Within this, 19% are from North Wales and 81% are from South Wales.

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

- 18% of under-18s have received free school meals, and 2% 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.

Next steps

It is clear that the pandemic has taken a toll on both the physical and mental health of the Welsh population and that some communities have experienced worse outcomes during the initial lockdown period. As policy makers take action to manage the situation, they must learn from people's experiences and 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 and the Welsh Government must waste no time in planning for the recovery of services, not only to where they were before the coronavirus pandemic but in preparation for an increase in the number of people seeking support.

We should be ambitious about building support for mental health into everything we do as a society, confronting and dismantling the inequalities that the pandemic has accentuated. Whether that is improving support for Black, Asian and Ethnic Minority communities, enhancing access to support for people with existing mental health problems, investing in support for young people or ensuring frontline workers are supported to process their experiences of the last few months, mental health has to be a central priority for post-pandemic action in Wales.

We will continue to use these findings to guide our work, sharing them with decision-makers to ensure that they prioritise mental health and understand that the impact of the pandemic on mental health will be long-lasting. Working in partnership, we are committed to ensuring that the opportunity to develop and deliver a clear and transformative vision for mental health over the long-term is achieved.

With thanks to Revealing Reality for the research they undertook in a voluntary capacity, helping us to collect in-depth accounts of people's experiences. These are featured as case studies in the report.

REVEALING REALITY

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