



COVID-19

How are we coping?

Follow on Report: Week 4
27th April - 3rd May 2020 Results

Overview of Week 4



Week 4 continues to see the survey attract a consistent number of the Lincolnshire public sharing their views and experiences. It should be noted that as the cohort returns weekly to share their views, this facilitates a more robust tracking of mood and behaviour differences.

Between weeks 1 and 4 we have seen fluctuating views, experiences and patterns of processing what is going on in people's day to day lives. We have learned that people, depending on their personal circumstances are experiencing very different challenges, whether that be as a key worker; not being shielded or protected as they feel they should be through to the patients who aren't getting the care they need to support their physical and mental health at this time.

The key features for Week 4 are:

Whilst there is a high degree of consistency when people are asked how they feel, there are also new emerging interests on the improved environment and drivers for localism and a change to negative media.

This week saw a decline in interest and inspiration from how others are adapting, whereas all other areas on the 'how are you feeling' barometer remain static. This could be interpreted as a plateauing in a week where the reality for most was more of the same in terms of access to services and restrictions. The following highlighted the key areas of interest.

- As with previous weeks, the key headlines remained, with respect to concern and worry about others who are more vulnerable, this included key workers.
- There were demonstrable risks shared with regard to the health and wellbeing of our population particularly those with serious health concerns. This further highlighted and queried the local perception of *how* 'open for business' are our local NHS services, when compared to the national message.
- Mental health services remained on the radar, with a clear link to the stain and anxiety COVID and its consequences were having on the local population.
- There were positive messages too around some of innovative tools being used to improve patient access, specifically 'AskMyGP', however this was not represented across the county, potentially where it hadn't been rolled out fully.
- Strong views and opinions on the negative, distorted and divisive nature of the media were also shared. Calls for control to be taken on the spreading of unhelpful scaremongering media headlines.

- There was a new focus this week which was more about ‘localism’. The public suggested that lockdown measures, information and support took a more localised perspective, not that of London, but that of Lincolnshire.
- In addition to the point above, the need to recognise that localism was reflected in easing lockdown measures. This again embraced the idea of localism, treating people with respect to act responsibly and recognising that, one size does not fit all.

These features will continue to be assessed for any changes which will support community infrastructure organisations, both local and national, in the here and now, and in the future.

Background and Rationale for the Research

As Healthwatch continues to deliver its core function of gathering the current public views and experiences of Lincolnshire residents, it shares in this document the feedback from week 4 of our campaign, asking how local people are coping during the coronavirus pandemic. Where appropriate it also shares comparisons with the preceding weeks to demonstrate any themes and trends.

The 13 week campaign aims to track how people are feeling week on week during the pandemic. The focus of the campaign is to understand how people are coping at different stages, what local people find helpful, but also what their biggest concerns are.

The on-going findings are being shared with the system and other interested partners whose services underpin the Lincolnshire and UK health and care infrastructure, this information will be crucial for future learning. The public voice will help them listen, understand and develop future crisis planning.

Healthwatch has participated in discussions with the Local Resilience Forum, contributed to the Health Select Committee’s inquiry into ‘*Delivering Core NHS Care and Care Services during the Pandemic and Beyond*’ and more recently had numerous contacts with other in the Healthwatch network sharing our methods of engaging with our local population when face to face engagement is impossible.

In week one of the campaign 340 responses were received, week two 331, week 3 358 and week 4 333 responses, at the current time of writing, in total, over 2300 responses have been logged and these are increasing daily.

Note to the reader.

In order to keep the main body of the report as concise and relevant as possible, we will only highlight the key findings. The methodology, survey questions (appendix 1), other representative charts and data can be found in the appendices. We intend ultimately, that this work will form one document where themes, trends and behavioural change can be easily mapped chronologically.

Refresher: Week One Key Findings:

- A concern above all else for those who were vulnerable and weak.
- A concern for peoples own wellbeing and that of their families and loved ones.
- Frustration at mixed and negative messages being given through fake news, media and local and government sources.
- Frustration and concern about the impact on new or existing health and care issues outside of COVID-19.
- Frustration and concern for the lack of support systems within primary care, secondary care and mental health.
- Mixed tolerance levels for how the community is reacting to lock down restrictions and how they are being enforced.

Week 2

Refresher: Week Two Key Findings:

- Concerns for others was still the highest concern but had decreased.
- Increasing impatience to resume a normal life increased by 7%.
- The negative impact on safety and quality of care was highlighted again.
- This week saw the influence of the media when highlighting key issues.
- Growing concerns around mental health in terms of anxiety, depression, the impact on independence of long term lockdown and ultimately the lack of services to support people.
- An intrinsic link between how lockdown measures were imposed and maintained, and the public's perception of how these impacted on their health and wellbeing was evident.

Week 3

Refresher: Week Three Key Findings:

- As with previous weeks, the key headlines remained with respect to concern and worry about others who are more vulnerable; impatience to get back to normal life; concern about the negative impact of new or existing health conditions; and the consistent and growing concerns related to mental health.
- What was significantly different in week 3 was the need of the population to share views and opinions on the lock down restrictions, this dominated much of question 7 with 25% of responses focussed solely around this item. The individual comments clearly providing the expanse of issues that were impacting on people's lives, these ranged from the stress of home schooling, to not being able to get essential supplies, delays in getting back to work and the fear of another outbreak as a result of non-compliance with restrictions, the list was extensive and insightful.



Results from the Survey

The following section reviews the results of the survey and draws out the key features within the narrative, where public free text comments are relevant, these have been included to add depth and richness to the data. This is based on the 333 responses during the week 27th April to the 3rd May 2020.

Demographics

The amount of respondent's is deemed to be of a satisfactory trajectory with the majority of respondents returning week after week. This is a positive level of response with opportunity to obtain a real time view of any behavioural shift.

However that said, as identified in previous weeks there are limitations to the sample which are acknowledged. Nonetheless, the focus remains on the consistency of population so comparative analysis can be identified at the end of the campaign period. *The demographic data related to week 1 through to week 4 can be found in appendix 2.*

There is no significantly variance at this time to determine any age segmentation related findings, with the 55+ age group accounting for 74% of responses. It is intended that final campaign conclusions will consider any notable differences in response by age.

As in weeks 1-3 we see a disproportionate amount of female to male respondents, it is reasonable to make an assumption that this is normal respondent behaviour (based on previous experience) and shows perhaps the inclination of the female population to share more readily health and care related views and experiences than the male population. However in the commentary the reader gets a sense of what is going for some of the male population told from the female perspective as well as that of other age groups not represented in the sample group. The perspective is often focussed on worry and concern for the partner, family member or friend that they are not getting the right mental or physical help and support.

Within in the geographic data for week 3, Boston saw a dip in respondents, week 4 saw a 7% decline in East Lindsey respondents. What we are not able to ascertain is the reasons for this decline and will watch in future weeks for continuing trends.

However on the whole, this is an acceptable variance to representation values of our population as we are still able to retain tracking and patterns of behaviours within a predominantly set sample group.

The following section provides an overview of the main body of questions where public mood is evaluated.

*NB. There was no notable change in those responding in terms of whether they have had tested **positive** or had been tested at all for COVID (1%), and on average those reporting COVID symptoms account for 17% of respondents.*

*Cited on the Office of National Statistics website the latest *Coronavirus (COVID-19) Infection Survey pilot: England, 14 May 2020 stated that any given time between 27 April and 10 May 2020, it is estimated that an average of 0.27% of the community population had COVID-19.*

**<https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/conditionsanddiseases/bulletins/coronaviruscovid19infectionsurvey/england10may2020>*

Question 2 - What best describes how you are feeling?

This question wanted to understand how people were ‘feeling’, what was their core focus and noting any areas that may highlight shifts in behaviours, continuing trends, or ongoing concerns that aren’t being met.

The most common answer in week 4 was still that respondents were most concerned for others perceived as vulnerable or weak, after dropping in importance in weeks 2 and 3 this buoyed slightly, however the next descriptor that people focused on was the positive environmental changes, both of which are ‘positive’. Other less positive descriptors stayed static around the anger of restrictions, loneliness and impatience to get back to normal.

It was noted that the inspiration felt at the actions of others had dropped quite sharply from previous weeks, maybe because the initial nervousness of the unknown, and personally not knowing how to adapt made that feeling of inspiration stronger. As the weeks progress we see the decline as it could be interpreted as people just adjusting to a new normal, and what was ‘amazing’, is just now part of everyday life.

The respondent’s shows compassion throughout, specifically towards those who are suffering with their health as a direct consequence of the virus, whilst still keeping an eye on the end game and looking for the exit route out of COVID-19.



Media Spotlight

The Independent Headlines on 28 April 2020

Operations cancelled for Covid-19 to be restored

NHS hospitals across Britain are to start restoring non-urgent treatments for conditions like cancer and heart disease today as experts grow increasingly confident that the first peak of coronavirus infections is passing.

Question 3. Have you found it easy to find clear and understandable information about what to do to keep yourself and others safe during the coronavirus/COVID-19 pandemic? and Question 4 - Do

you feel the information and advice given around COVID-19 has helped you adapt to the changes imposed on your day to day life?

Questions 3 and 4 have been identified as having links in terms of the perspectives of the public, where people feel that they have been able to hear and find clear and understandable information about COVID, they have been able to use that information to adapt their day to day life.

Question 3	Yes	No	Question 4	Yes	No
Week 1	96%	4%	Week 1	89%	11%
	298	13		296	35
Week 2	92%	8%	Week 2	83%	17%
	288	25		269	57
Week 3	90%	9%	Week 3	85%	15%
	321	35		299	53
Week 4	91%	9%	Week 4	86%	14%
	301	29		285	46

During the weeks there have been high percentages of respondents satisfaction both in receipt of clear and understandable information (between 90-96%) and also noted is the high number of those that feel able to adapt to day to day life because of it (between 83-89%). The range varies week on week in terms of levels of satisfaction but the changes are marginal, they can be influenced by a media news story, or a daily briefing, but what is noted is that the ability to apply the information to day to day life is always fractionally lower than the satisfaction that information is out there and accessible. As mentioned in previous weeks this may be as a result of information and guidance not being a 'one size fits all' package and people struggling to make it fit their personal circumstances.

There are of course limitations in the interpretation of this data, because even though people might feel they know how to adapt from the information being given, this does not mean to say that there is blanket compliance.

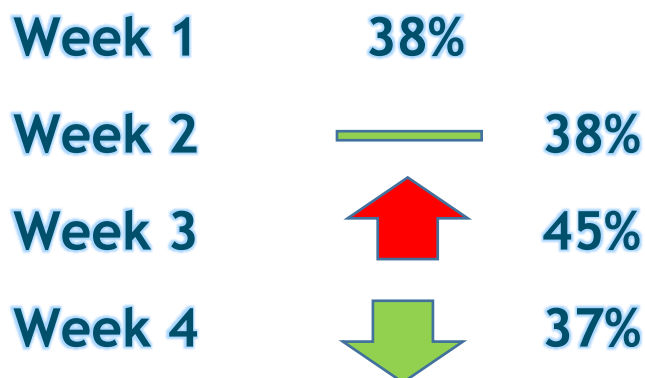


On the 28th April, it was reported that Lincolnshire police had provided a breakdown of COVID related fines, the majority of which were given for group gatherings. At that point, 131 fixed penalty notices have been issued suggesting for a very small number of Lincolnshire residents the ability to apply the restrictions to their personal circumstances was challenging. Public frustrations from these breaches in compliance is evident within respondent responses.

“More policing of people obviously not following the guidelines in place re lockdown.”

Question 5. Do you feel that you or your loved ones quality and safety of care (not related to COVID-19) is being affected?

Quality and safety is being negatively affected.



The question sought to understand how people felt health and care was being affected outside the COVID medical condition. The question gave respondents an opportunity to share how they felt the care for themselves, their family and loved ones was being impacted by the pandemic. A decrease from 45% back down into the 30's was noted in this week. This was also reflected when asked how people were feeling, where people reported their anxiety for their own health lower than at any other point.

As seen in the public comments below, despite reassurances that people should seek medical help for new or existing problematic conditions and, that people should be able to access condition critical services, there is demonstrable evidence across the health sector that people are simply not getting the care needed.

know NHS want blood tests sent However health extremely happen medication told fear
 GP surgery health conditions leaving risk contact GP routine people medical able services
 Wait struggling concerned symptoms contacted Delayed will day now ask
 surgery work husband call back feel treatments need worse
 GP best hospital see doctor going due worry
 appointments cancelled see put doctors us appointments cancelled
 Also monitored phone even help without weeks telephone mental health s one
 easier daughter Dental appointments time difficult call elderly month Covid normal missed today
 issues safe lockdown

There were 128 free text comments which related to the impact of quality and safety of care. The comments mainly focussed on issues related to ‘access’ to primary care (GP’s, Dentist, Optician, Pain Clinics etc.), fear of being referred to hospital where the COVID risk of infection was seen as much higher risk. Also the ongoing theme of mental health and some significant and worrying cases where patients were left ‘in limbo’ and not receiving support for ongoing conditions.

In the same comments there were also positive feedback related to informing others that they should contact GPs, that some urgent appointments for diagnostic scans had been carried out quickly and that ‘AskMyGP, telephone, text and email triage in place by some GP practices was working well.

The following are just a sample of the comments for questions 5.

Accessing GP surgeries

“We feel we can call the doctor if we feel it was really necessary”

"Ask my GP' is a very positive innovation"

"Call and get a call back from GP"

"Not myself, but older members of my family are anxious about visiting the GP. I have encouraged them to telephone"

"My husband is struggling with being unable to see his Dr"

"G.Ps don't want any patients right now. Tried to ring one and they didn't give any advice and tried to get me off the phone as fast as possible. Dentist exactly the same!"

"Don't feel I can contact GP unless it's an emergency, I need help but not sure if I should. Also, husband waiting for heart specialist for next step, cataract removal and minor surgery on nerve damage"

Mental health

"Ongoing medical/mental health conditions not being treated/monitored effectively"

"I'm unable to visit my severely autistic son which is causing him stress"

"My anxiety is ten times worse through the pandemic"

"90 year old mother, unable to visit her. Having negative effect on us both. She can't do electronic mail or operate a mobile device so phone calls only"

"Normal services Mental Health put on hold for Virus sadly"

"LET ME OUT!!"

"More depressed and feeling more isolated. My anxieties have led me to disassociate from others who share same house"

"Anxiety is much higher than it was.."

"All of us are having anxiety dreams, trouble sleeping, anxiety attacks; but we wouldn't ask for help as the fear of leaving the safety of our home and catching the virus outweighs everything else"

Serious health conditions

"My husband has had his cancer operation cancelled which is very worrying. The consultant has said it will not take place for three or four months at least.....If we need to contact the doctor we use the Ask My GP app which is excellent and we get a response within half an hour"

"Ongoing health issues with appointments cancelled.....I am only 11 weeks post op so it's been a tricky time"

"I have cervical dystonia and I was due to have my injections so my symptoms are getting worse"

"I need the Pain Clinic to be up and working again. 15 months since I had relief from pain in lower spine and when finally got an appointment for high frequency nerve ablation in March it was cancelled due to corona virus. I do not want to increase pain medication any higher even if I could"

"My Dad was told in February that he needed urgent surgery on 3 femoral hernias, and that it would be arranged within the next 3 weeks. The unit where he should have had the surgery is currently closed, and his surgery is on hold indefinitely, despite him suffering considerable pain"

My dad had a stroke on Monday and I feel this was handled differently than his last stroke in September. It's left us worried and scared he isn't getting the same help as before"

"My husband is awaiting cancer surgery in Birmingham. His operation was due on April 15 but was cancelled for the foreseeable future"

"My sister in law died last week as chemo was not available. She was 50"

Question 6 - What are your biggest concerns?

Core reasons for anxiety and concern for everyday health and care are summarised below. Where people were asked to select their highest priorities, their top 3 responses fell under the following categories:

- **56% Concern for own/families' health and well-being**
- **38% People not following the rules**
- **33% Concern for the vulnerable including Key Workers**

Some of the public comments and themes are shared below with the intention of demonstrating the variety of concern within the top themes. It is here where we recognise the breadth of views but also the wider implications and concerns that the pandemic has unearthed.

THEMES

COVID Specific Health Advice: confusion and mixed messages

Media: negative and divisive press coverage

COVID Restrictive Practice Advice: Societal beliefs and behaviours

Acceptance

COMMENTS

COVID Specific Health Advice

“I’m in Chris Witty’s list announced on the news, those that are male with comorbidities, cardiovascular problems and have a 90% chance of dying in 3 weeks if I get the virus. Heard nothing by letter, no contact and no help”

“Coronavirus may keep coming back”

“I am confused by conflicting advice regarding shielding or not. Yes from my COPD nurse. No by my doctor. I also have an autoimmune liver disease and a neuromuscular disease. Very worrying!”

Media

“The negative messages coming from media very unhelpful”

“Mainstream media have not been any help in this crisis”

“The media are disgusting pushing for lockdown to be lifted”



COVID Restrictive Practice Advice

“Inability of my house sale to progress”

“Returning to work” - if, when, how?

“Children being sent back to school too early, they should be the last to go back”

“People interpreting advice wrongly”

“Rise in intolerance of others behaviours” (sanctimonious)

Acceptance

“It is as it is”

“I’m not overly concerned - just chugging along - I know there will be no certainty for some time”

Question 7 - Tell us what ‘action’ local or national, would most help you at this time with those concerns?

In week 4, beginning the 27th April, we saw newspaper headlines with public feedback reacting in different way to the national print as the nation entered its 5th week in lockdown.

This week’s focus for the nation was a continuation of lock down with a variety of news headlines which gave hope but also distracted with the news of a new baby for Boris and his fiancé.



Locally we saw the emergence of a new theme which shouted loud and clear ‘localism’. Up to now there has been a national community, but now the responses start to tell a different story on what is best for me, and what is best for us locally. This is likely to stem from the realisation that the impact in Lincolnshire and other parts of the country has not realised the same devastation as seen in other localities (whilst acknowledging

that even a few is too many), with this in mind an impatience to see localised advice, information, action and possibly easing of localised restrictions as a consequence.

In context:

This week had some of the vibe of the previous weeks in that easing lockdown measures too early could be disastrous and therefore implored the nation to carry on in that the hope that the virus could be beaten. The governments driver would now be to give the nation what they wanted and needed, ‘an exit strategy’.



The media attention focussed on not only the story of Boris’ new baby, but some might consider also fuelling hope by headlines that ramped up the facilities for millions to be tested for the virus, and that the nation was finally past ‘the peak’ of the virus outbreak.

The following sections share the free text comments and experiences shared by the people responding to the campaign.

Local information/support

A new theme in week 4, more talk about the need for localised actions which would benefit the Lincolnshire community.

“More information about local situation and risk.”

“Local parish councils could be proactive in communicating to residents.”

“Local info about the effects of covid19.”

“Funding for town already struggling.”

“Maybe a localised daily bulletin like central government. We need to know more about our daily updates and plans locally for when we move forward as planned.”

Mental Health

A focus on the needs and requirements for those of the population impacted by mental health.

“Suicide prevention and Mental Health.”

“Mental health plan.”

“Continuation with scientific advice, but taking mental health into consideration.” “More testing for all.”

As with Question 6 it is notable that negative comments with regard to the media are also highlighted within question7. The following highlights some of these, with no positive media messages included in this week’s public feedback, despite the national press reporting more testing, the nation passing the peak of the virus and

focus on exit planning and easing restrictions. This just perhaps demonstrates the fatigue of the public with limited and sensationalised 'news' coverage.

Media Coverage

"Stop the constant negative information given out by the media, reinforce positive messages to bolster morale..."

"Close down scaremongering distorted media reporting in fact stop media reporting and leave it to the covid information site."

"Just wish the media would stop winding people up...."

"Less spin from the media...facts reported as facts not the media interpretation."

"For goodness sake sort the media out."

"More positive approach from the media. Less scaremongering. Less criticism and blame."

"Consequences for publishing fake news."

The following demonstrates the views and perceptions of Lincolnshire people. There is distinct feeling of localism, with a need to move away from national hype to what Lincolnshire needs to function effectively in the short, medium and longer term. The areas of focus were:

- **Localised perspective of NHS delivery** – This was related to the perceptions of what the local reality is when the public are repeatedly told, 'the NHS is open for business'.
- **Exit Strategy** - When and how?
- **Stronger enforcement of lockdown measures** – Moving from previous week's where there was a support for lockdown measures, through to this week which is more accurately described as the need for stronger enforcement of the lockdown measures.
- **Easing lockdown measures**

Localised perspective of NHS delivery

"Better information from GP surgeries as to their working practice. Clarity and proof of NHS resuming the treatment of other patients. I'm hearing it from government but not seeing it happen."

"Actually deliver what the government is promising. The NHS is not open for normal business."

"A reassurance that other health issues are being addressed and treatments ongoing."

"Doctors who don't make you feel like you're an inconvenience."

"We need to be told what to do about existing health conditions, there has been no advice at all."

"Hospitals/GPs beginning to carry out routine health clinic even if over the phone."

Exit Strategy

"Knowing the plans for the future to get 'back to better'."

“Knowledge of the plans for lifting lockdown would be helpful to have a proposed end date- most people are sensible enough to know that there may be changes in the future plans.”

“Show how we can stay safe when lockdown is eased.”

“Some clarification about how long this will go on for.”

“Setting out an exit plan which we can understand.”

“A pathway to normality.”

“More information and timescales about plans for lifting lockdown.”

Stronger enforcement of lockdown measures

“Stricter penalties for those not following the rules.”

“Harsher penalties for people flouting the rules.”

“Just more or better policing of rules.”

“Make people follow the rules of not visiting others outside of their own home. I’m following the rules, why can’t others?”

“Better policing for people ignoring the restrictions.”

“More policing of people obviously not following the guidelines in place re lockdown.”

This week, we have noted the local public wishes on easing lockdown and moving from a one size fits all approach, to a more measured approach which reflects the public’s ability to act reasonably and responsibly.

Easing lockdown measures

Specific things people would like

“Increased social contact with family.”

“Allowing me to decide to go for a walk/drive, to give advice on how I could visit my family safely.”

“Ability to visit family who live a distance away.”

“Even just to be able to play tennis as it can be done with distancing would be immense.”

Finally

The first 4 weeks of the campaign have provided a fascinating insight into the perspectives and mind-set of some Lincolnshire people, the limitations of the sample size are acknowledged and actions will continue to address these issues. The aim is to be able to identify and share where a 'mood and behaviour' is at any given point, and to report any notable changes which will support the whole community infrastructure meet the needs of Lincolnshire residents.

Watch out for the highlights over the coming weeks and if you want to share or get involved you can do so by simply following this link to take part:

<https://www.surveymonkey.co.uk/r/VBTW2PB>

Appendix 1. METHODOLOGY AND SURVEY QUESTIONS

Methodology

Week one of the survey was launched digitally on the 6th of April 2020 with responses captured through Survey Monkey. The survey is distributed every Friday afternoon through the Healthwatch network to members and stakeholder organisations. In addition, Facebook advertising has been utilised to target the wider Lincolnshire population.

The survey consists of 12 questions including 5 demographic questions, 3 of the questions provide an opportunity for the respondents to give more detail about their experiences through free text comments, some of which are shared within this document.

The questions posed are given below:

Questions from the survey

Q1. Have you had coronavirus/COVID-19? - Multiple choice

Q2. What best describes how you are feeling today? - Multiple choice

Q3. Have you found it easy to find clear and understandable information about what to do to keep yourself and others safe during the coronavirus/COVID-19 pandemic? - Multiple choice

Q4. Do you feel the information and advice given around COVID-19 has helped you adapt to the changes imposed on your day to day life? - Multiple choice

Q5. Do you feel that you or your loved ones quality and safety of care (not related to COVID-19) is being affected? - Multiple choice with free text comment field

Q6. What are your three biggest concerns? (Please select 3 ONLY) - Multiple choice

Q7. Tell us what 'action' local or national, would most help you at this time with those concerns - Free text comment field

Q8. Please include your Email address as we would like you to complete this survey weekly - Free text comment field

Q9. What is your age? - Multiple choice

Q10. Gender - What gender group are you in? - Multiple choice

Q11. What was your employment status before the Coronavirus (COVID-19) pandemic? - Multiple choice

Q12. What district area do you live in? - Multiple choice

Appendix 2. DEMOGRAPHIC DATA, WEEK BY WEEK COMPARISONS

Total number of respondent's week on week.

Week 1 - between 6th April and the 12th April 2020	340
Week 2 - between 13th April and the 19th April	331
Week 3 - between 20th April - 26th April	358
Week 4 - 27th April - 3rd May	333

Age Segmentation week on week.

	Under 18	18 - 24	25-34	35-44	45-54	55-64	65+
Wk1	0%	1%	2%	8%	20%	32%	37%
	0	3	8	28	66	106	126
Wk2	0.3%	1%	3%	6%	19%	34%	36%
	1	4	11	19	63	113	119
Wk3	.28%	.56%	1.97%	5.06%	21.63%	35.96%	34.55%
	1	2	7	18	77	128	123
Wk4	0.3%	2%	2%	7%	16%	35%	39%
	1	7	5	22	50	110	123

Gender breakdown week on week.

	Male	Female	Other
Wk 1	17%	83%	0%
	56	278	0
Wk 2	15%	84%	1%
	50	277	3
Wk 3	17%	83%	0%
	62	293	0
Wk 4	19%	81%	0.3%
	60	258	1

Appendix 2. DEMOGRAPHIC DATA, WEEK BY WEEK COMPARISONS

Employment status before COVID-19.

No notable shift as at the moment the same respondents are sharing their views week on week.

Status	Week 1 No.	Week 2 No.	Week 3 No.	Week 4 No.	Week 1. %	Week 2. %	Week 3 %	Week 4 %
Retired	116	118	141	133	34	36	39	41
Employed Full time	80	79	85	65	24	24	24	20
Employed Part time	51	57	49	55	15	17	14	17
Disabled/unable to work	28	28	28	25	8	9	8	8
Self Employed	19	20	20	16	6	6	6	5
Caring Responsibilities	18	10	15	11	5	3	4	3
Other	16	9	15	9	5	3	4	3
Unemployed	5	6	2	5	1	2	.5	2
In Full time Education	4	1	1	3	1	.3	.5	.9

Location of Respondents by District

	East Lindsey	South Kesteven	South Holland	North Kesteven	Boston	West Lindsey	Lincoln	Out of area
WK 1	25%	18%	14%	12%	8%	8%	7%	8%
	85	62	47	39	28	27	24	27
WK 2	25%	17%	12%	11%	11%	10%	5%	9%
	82	57	41	37	35	33	16	29
WK 3	23%	15%	11%	14%	7%	10%	10%	10%
	82	52	40	49	26	34	37	35
WK 4	18%	20%	15%	18%	7%	8%	7%	8%
	58	65	48	59	24	25	24	28

Q1 - Have you had coronavirus/COVID-19?

	Yes - I been tested	Possibly- Has symptoms, but not been tested	No - Not had symptoms
WK 1	1%	17%	82%
	3	58	274
WK 2	1%	16%	83%
	2	54	274
Wk 3	1%	20%	79%
	1	73	284
Wk 4	1%	16%	276
	4	53	83%

Question 2. What best describes how you are feeling?

	Concerned for those who are vulnerable or weak	Curious about how this is impacting the world	Inspired by how people are adapting	Anxious about my health	Happy to spend time with family	Hopeful to see how the environment is improving during this time	Lonely	Impatient to get back to normal life	Angry about the restrictions on my freedom
WK 1	53%	29%	28%	27%	25%	24%	14%	13%	3%
	183	97	94	91	83	80	47	13	10
WK 2	41%	24%	27%	27%	22%	24%	13%	20%	5%
	137	80	90	90	73	79	44	69	15
Wk 3	40%	22%	24%	21%	24%	26%	12%	25%	5%
	141	77	84	75	85	94	41	88	16
Wk 4	44%	23%	21%	22%	20%	28%	13%	23%	5%
	148	76	71	74	66	92	44	76	18

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Proud to deliver

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