

RAPID RESEARCH IN COVID-19 PROGRAMME

Has social distancing made us healthier? Adoption, maintenance and sharing of positive changes

AIMS

COVID-19 national lockdowns have been the most profound, deep reaching, and significant public health interventions within living memory. Emerging evidence has highlighted the unintended negative effects of national lockdowns. Complementing this work, the CATALYST project aimed to examine the positive changes that were experienced. The project aimed to:

1. Examine what positive changes were made and who had made them.
2. Find out how people had made these positive changes and if they could keep them going.
3. Share this learning with other organisations in order to develop public-facing resources to support the initiation of positive health change for all.

KEY FINDINGS

- Participants experienced a range of positive changes across their social relationships (e.g. with their partner, children or local community) and health-related behaviours (e.g. physical activity and sleep).
- Some groups experienced more positive change than others. Those groups with higher levels of positive change were females, those from younger age groups, people who were married or living with their partner, those who were employed, and those reporting better health.
- The national lockdown led to changes in physical activity, sitting and sleep. From pre-lockdown to lockdown walking decreased, whereas moderate-to-vigorous physical activity (i.e. activities that increase heart rate and make you breathe faster than normal), sedentary behaviour (sitting) and sleep increased.
- Participants who changed one behaviour positively were more likely to report a positive change in another and around half of those who reported positive changes from pre-lockdown to lockdown maintained or improved even further when restrictions started to ease.

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- Those participants who had made positive changes told us that a number of things had helped them to do so. These included thinking about time and how one can use it more fruitfully, making plans and establishing a routine, connecting with nature in a new way, reaching out for support, linking in with neighbours and their local community, and incorporating physical activity in order to support their mental wellbeing.

WHAT DID THE STUDY INVOLVE?

- We carried out a two-wave survey and interviews with the Scottish public.

Who took part in our study?



Adults
aged 18+



Living in
Scotland



3342 completed Survey 1
2458 completed Survey 2

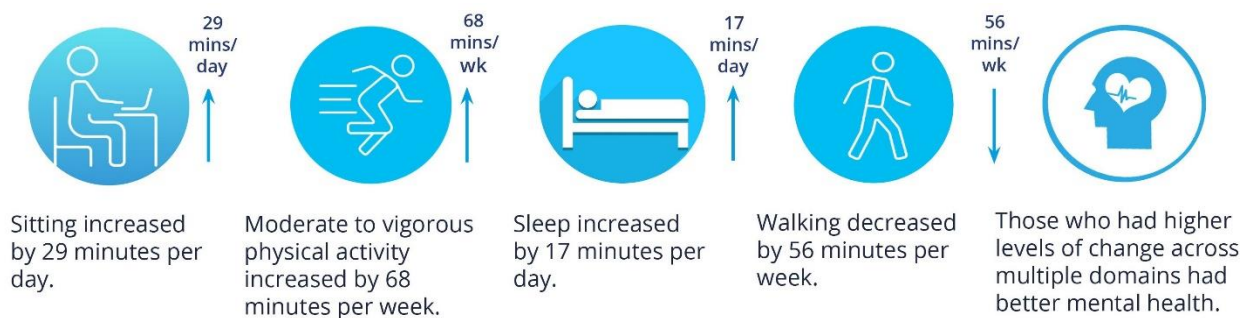


48 took part in
interviews

- The first survey was carried out during weeks 9-12 of national lockdown in May – June 2020 and was completed by 3342 people recruited via social media who wanted to share their experiences of making positive change (a purposive, non-representative sample). Of these participants, 2458 then completed a second survey in August 2020 when national lockdown restrictions were easing.
- The survey asked people to report on positive changes and collected key characteristics, such as gender, age and ethnicity. In addition, participants also reported on their levels of physical activity, sedentary behaviour (sitting), and sleep. They also provided a number of measures of psychological factors, including coping and mood.
- We carried out online and telephone interviews with 48 people. We selected these participants as they had reported high levels of positive change in the survey. Our sampling approach also ensured that we recruited a diverse sample of participants from key groups, including Black, Asian, and minority ethnic (BAME) groups, as well as those with lower income.
- We used an interview topic guide that allowed us to learn about how participants understood the positive changes they had made and we analysed the interviews for key themes.

WHAT WERE THE RESULTS AND WHAT DO THEY MEAN?

- We found differences across socio-demographic groups in the amount of positive change being experienced. Males reported a positive change score that was 6.1% lower than females. The older age group (65+) had a positive change score that was 7.5% lower than the younger age group. Those who were married or living with a partner had a score that was 3% higher than those who were single. Those who were in very poor health had a positive change score that was 24.5% lower than those in poor health, and 29.4% lower than those in very good health.
- These results point to inequalities in the experience of positive change during national lockdown and adds to the emerging literature on the inequalities associated with adverse COVID-19 related experiences.
- The amount of time spent sitting increased by an average of 29 minutes per day in lockdown compared to pre-lockdown. Moderate-to-vigorous physical activity increased by 68 minutes per week, sleep increased by an average of around 17 minutes per day, and walking decreased by an average of 56 minutes per week.



- Those participants with the higher levels of positive changes across multiple areas were younger and were less likely to be in a COVID-19 high risk group. They also had better mental health (reporting lower symptoms of depression) and utilised adaptive coping styles that focused on positive reframing (e.g. turning a negative into a positive and finding the best in a situation) and active coping (e.g. seeking support or making a conscious decision to change your environment or solve problems).
- In the interviews, participants told us about a number of things that helped them make positive changes (shown in the table below). We have shared these findings in order to develop public-facing resources to help others make positive changes.

WHAT IMPACT COULD THE FINDINGS HAVE?

- We have worked with our project partners ([Actify](#), [Mind the Men](#), and [The Scottish Older People's Assembly](#)) to rapidly share the insights from our project and co-produce a range of public-facing resources. These resources include a range of short videos and infographics to be shared through our partners' websites and social media channels. The resources are designed to support others in achieving positive health changes during the continuing COVID-19 restrictions, and beyond. The resources can be found at <https://www.actify.org.uk/catalyst>
- The findings also provide a basis for further intervention development work aimed at facilitating positive health change in others.

Illustrative quotes from participants

Thinking about time and what to do with it

"It actually gave me the space, because I wasn't rushing around doing things, I was just walking from place to place, that I actually could listen to these things and start to reflect on how best to put practices into my life."

Making plans and establishing a routine

"I decided right at the start of lockdown to make sure that I was, that I had a routine. I don't know why I decided that, but yeah I decided to get a routine, so daily walks."

Connecting with nature in a new way

"We've been rediscovering simple pleasures like watching the blue tits in the bird box...I think, we, at least my family and I think others are becoming more attuned to nature and our immediate environment."

Reaching out for support

"I think what's happened is, people have become very isolated in themselves. Everybody's scared, so they have their own worries, and they don't really think about other people. Whereas I think what I've done is, I've taken control of our situation, and then tried to help other people."

Linking in with neighbours and local community

"We know far more about each other now than we ever did before. You know?, so – so I'm actually far closer now to people, to my neighbours and friends here than I ever was before, you know."

Incorporating physical activity to support mental wellbeing

"So that's where the walking really helped, very quickly I felt the mood was lifting by doing that and it was something to look forward to. And, actually, just getting the fresh air and, do you know what? I really enjoyed just discovering where we live."

HOW WILL THE OUTCOMES BE DISSEMINATED?

We have rapidly shared our emerging findings in several ways:

- Two papers based on the project's findings have been published in peer-reviewed scientific journals: [What have we learned about positive changes experienced during COVID-19 lockdown? Evidence of the social patterning of change](#) and [Changes in physical activity, sitting and sleep across the COVID-19 national lockdown in Scotland](#).
- We are planning to submit three further papers for publication. These papers will examine the initiation, maintenance and effects of positive change and we are presenting the findings at the UK Society for Behavioural Medicine annual scientific meeting in January 2021.
- We will prepare a briefing paper on the results for Public Health Scotland and the Scottish Government's COVID-19 advisory group.

CONCLUSION

- National lockdown in Scotland did lead to unintended positive changes for many people, including positive changes in relationships with others and in health-related behaviours. These positive changes were socially patterned with some groups being more able to take advantage of lockdown as an unexpected opportunity to make positive changes in their lives than others. In addition, many of these positive changes were maintained even when lockdown restrictions were eased.
- We learned that a number of things led people to be able to make positive changes. These included thinking about time and what you can do with it, making plans and establishing a routine, connecting with nature in a new way, reaching out for support, linking in with neighbours and their local community, and incorporating physical activity in order to support their mental wellbeing.
- We have shared this learning with our partner organisations to develop public-facing resources aimed at helping others to achieve positive health change. This learning will be useful in the current context of helping people make positive change in light of continuing COVID-19 restrictions, and beyond.

RESEARCH TEAM & CONTACT

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ADDITIONAL INFORMATION

This project ran from May 2020 to November 2020 with a total budget of £88,972.