

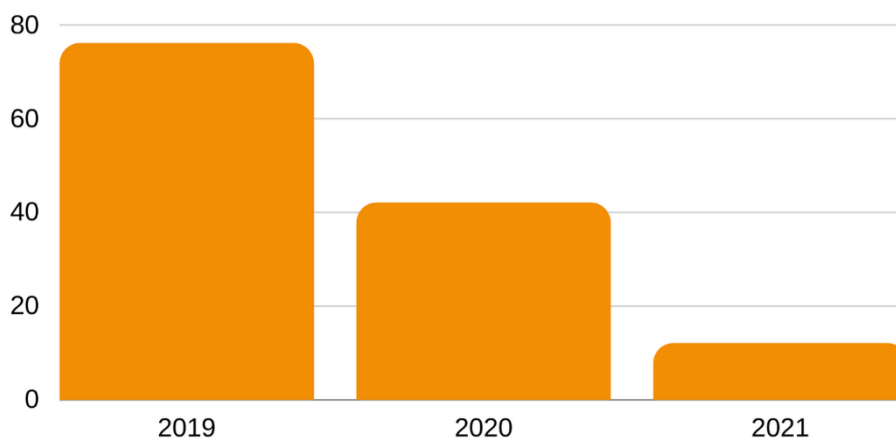


The Good Life: January 2022 Evaluation Update

The Good Life has faced many challenges since the start of the Covid-19 pandemic in March 2020. Here we look at the statistics collected during the project to find out more about what that means.



The Good Life
Project



Recruitment

Recruitment falls rapidly at the onset of the pandemic

There have been many challenges to the pandemic, and recruitment has been very difficult. The personal characteristics of people attending have changed too. Fewer men, fewer disabled people and fewer young and older people are taking part. This seems to be clearly linked to the groups who had the greatest risk factors during the pandemic, with the exception of younger people. It may be that the huge number of changes and closing and opening rules meant schools and colleges were unable to plan and participate in programmes and activities like The Good Life.

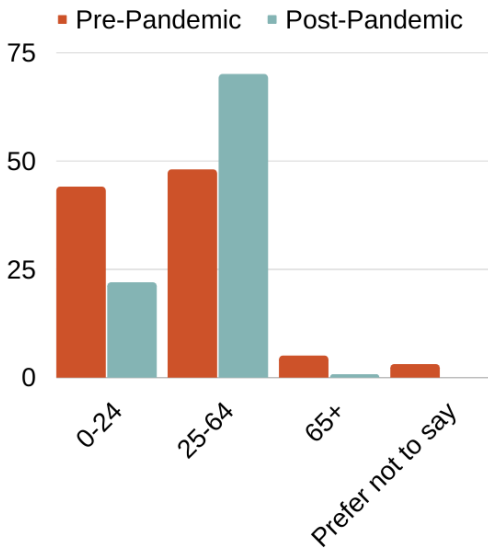
Despite ethnic minorities facing higher risks from the pandemic, the proportion of people from ethnic minority backgrounds increased significantly post pandemic.

Demographic Comparison



The Good Life Project

Age



Younger people are much less likely to take part after the pandemic, and adults over 65 years have stopped coming, almost completely.



Summary:
Fewer men, disabled people, young and older people are taking part.

Gender

Male attendance fell after the pandemic, from 70% of all participants before March 2020, to 57% after.

Sexual Orientation

Sexual Orientation remains broadly similar for people joining before March 2020 and after.

Ethnicity

Fewer white British people are taking part after the pandemic as the percentage of ethnic minorities taking part increases from 15% to 26%.

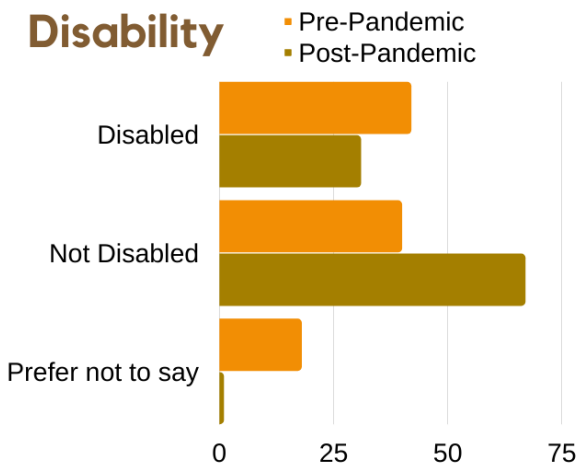


Religion

Religion has remained similar, 35% having no religion, 11% of participants are Muslim, although Christianity has fallen from 37% pre-pandemic to 25% post-pandemic.



Disability



Disabled adults are much less likely to take part post pandemic.

Measuring Wellbeing

Wellbeing is captured by the Warwick Edinburgh Scale of Wellbeing. Pre-pandemic, the national England average is 51, and anything less than 40 is highly indicative of poor mental health. At the time of joining the project, 37% people had a score of less than 40 – indicative of 'low mental wellbeing' in 2019. This dropped to just 12% in 2020, and increased to 50% in 2021.

2020 was an unusual year for the project, and you can see from the average score below that the 2020 cohorts had a higher wellbeing than we would have expected. We have looked into the reasons behind these scores and most people did join before the pandemic and subsequent lockdown began in 2020. After talking to the staff teams, we were able to identify that the 2020 cohort was significantly skewed as more than half were aged under 24, attending from a local college with support workers and having learning disabilities. We checked our statistics and could reveal that the 2020 cohort did have a disproportionately high number of young people but there was little change in disability. Without more information, we can't adequately explain why this cohort was so different to the usual, but we could speculate possible reasons such as:

- Support workers did not consider learning difficulties as a disability
- Some of the questions were lost in translation
- Answering on behalf of others may have even strayed into satisficing¹

Warwick Edinburgh Scale of Wellbeing	2019	2020	2021	Average across all
Sample size	76	42	12	130
Score	44.1	51.5	36.6	44.0

Measuring Isolation

We have used our own isolation scale for this:

Do you agree or disagree with the following statements? (Please circle one answer for each question)

Statement	Disagree Strongly	Disagree	Don't Know	Agree	Agree Strongly
I get out of the house as much as I want to	1	2	3	4	5
I keep in touch with friends and family	1	2	3	4	5
I am not lonely	1	2	3	4	5
There is always someone I can talk to about my day to day problems	1	2	3	4	5
There are many people I can trust completely	1	2	3	4	5
I am content with my friendships and relationships	1	2	3	4	5

¹ In statistics, satisficing could be attributed when a survey respondent picks random responses, what they perceive to be socially acceptable responses, or the same response for all questions.

In the scale above 6 is the lowest possible score, representing someone who is 'very isolated' and 30 is the highest possible score which represents someone very well connected and supported.

Isolation	2019	2020	2021	Average across all
Sample size	76	42	12	130
Score	18.6	24.5	13.8	19.0

Again, people who join the project in 2020, are different to usual but we can see people who joined in 2021 are feeling very isolated. It is not surprising that people are feeling more isolated after the pandemic.

Measuring Socialising

In addition, we asked people how many times a week do you socialise? The average answer here was 3.4, but this masks a huge variation, where 20 people answered 'none' and 15 people answered 'seven'. We suspect that this could be due to different approaches to the definition of socialising. Some people may consider playing online games or instant messaging as socialising, whereas others may only consider face-to-face meetups as socialising.

Socialising	2019	2020	2021	Average across all
Sample size	76	42	12	130
Score	2.9	3.3	3.9	3.4

Here we no longer see the large changes in the 2020 group, although socialising was largely prohibited during large stretches of the pandemic.

Measuring physical health

We measured physical health through a few different measures: number of GP visits, Physical activity levels and healthy eating.

GP Visits

How does this compare to the UK as a whole? Pre-pandemic, the average patient visited their GP just over five times a year. This is very similar to the data we have collected so far, which indicates trustworthy data. (If we apply the 1.4 every three months to the whole year, our 2019 participants see a GP 5.6 times a year). (Source: NHS England, General Practice; A Call to Action).

GP Visits	2019	2020	2021	Average across all
Sample size	76	42	12	130
Score	1.4	1.6	1	1.3

We may expect to see a reduction in GP visits during the pandemic for some individuals and an increase for others as life got a bit harder and mental health, wellbeing, anxieties and COVID-19 itself all may increase the likelihood of visiting the GP.

Physical activity

We asked people 'On average how many sessions of physical activity do you do per week?'

Physically active days	2019	2020	2021	Average across all
Sample size	76	42	12	130
Score	2.9	3.2	3.5	3.2

We can see that over time participants increased the number of times they engaged in physical activity per week which is bringing them closer to the NHS recommended exercise guidelines of 75 minutes of activity a week spread over 4-5 days.² This could also be attributed to the pandemic, where shops and restaurants were closed meaning that people had fewer options for outside leisure and so engaged in more exercise as a result.

Healthy Eating

We asked people how healthy their diet was, with a score of 1 indicating very unhealthy and a score of 10 indicating very healthy.

Healthy eating	2019	2020	2021	Average across all
Sample size	76	42	12	130
Score	4.9	5.9	6.1	5.7

Pre-pandemic does have lower healthy eating scores than during. This could be due to many reasons including; spending more time at home makes it easier to eat better, many junk food outlets were closed during the pandemic and people may have lost the habit of eating poorly, lower likelihood of having to commute may have meant people had more time to prepare and eat healthy food, or maybe people were actively trying to increase their overall health in relation to the pandemic.

To sum up:

The Good Life works with some of the most vulnerable people in society, with more than a third being disabled. These groups have had a particularly poor pandemic experience, with their risk factors being significantly higher than the average population, (it is estimated that the mortality rate for people with learning disabilities was 3.6 times higher than the general population during covid.³)

It is positive to see that there has been an increase in ethnic minorities accessing support for their mental health (ethnic minority participation has increased from 15% to 26%). There is a stigma in the Muslim

³ <https://www.gov.uk/government/publications/covid-19-deaths-of-people-with-learning-disabilities/covid-19-deaths-of-people-identified-as-having-learning-disabilities-summary>

community which may have prevented members from seeking support⁴, so we can see that The Good Life is helping to overcome barriers and provide support to those who need it.

Also, 28% of people who joined the project had wellbeing scores indicative of mental ill health. A study has shown that the pandemic had a clear negative impact on wellbeing, with younger individuals being the most affected – the average score in 2019 was 50.3 which was reduced to 41.2 in 2020⁵, but all age groups saw a definite reduction in their wellbeing scores. As stated above, a wellbeing score lower than 40 is indicative of poor mental health, so it is clear that these groups are going to need more support and help in the coming future.

⁴ <https://quod.lib.umich.edu/i/jmmh/10381607.0007.102/--mental-health-stigma-in-the-muslim-community?rgn=main;view=fulltext>

⁵ <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7686842/>