Impact of Covid-19 on older people’s mental and physical health: one year on
1. Introduction

This report explores the impact of the pandemic on older people’s physical and mental health eleven months after Covid-19 arrived and turned all our lives upside down. We might have hoped never to have to write it, had the pandemic gone away as quickly as had originally been hoped. As it is, this report is the second in a series we have written about the pandemic’s effects and is based on research from February 2021.

Our first report was published in October 2020 and drew on analysis carried out that summer, after the first wave of the virus had peaked and with some of the restrictions by then lifted. It concluded that while some older people had developed strategies to cope during the pandemic, a significant proportion experienced a heavy toll on their physical and mental health as they stayed at home to try to keep safe. We heard a huge range of experiences, with loneliness, lack of opportunity to grieve following bereavement, loss of confidence, and physical deconditioning increasing the risk of falls just some of the problems older people and their families told us about back then.

In that first report we asked, “with winter fast approaching, how are these older people feeling now, and how much worse will they feel in two- or three-months' time as the weather gets colder and the nights draw in.” This new report provides the answer and sadly makes for difficult reading.

In many ways this is unsurprising: we are all experiencing the impact of ongoing disruption to our daily routines and uncertainty about the future. Regardless of age, many of us will have found last winter hard to navigate, but the value of this report is that it documents the specific issues and concerns for older people at that time.

It is important to remember that many older people were already dealing with significant health challenges before Covid-19 was ever heard of. Unfortunately, the pandemic appears to have exacerbated some as well as bringing forward the emergence of others. It is telling, for example, to hear of older people who had successfully managed mental health problems for many years suddenly finding themselves overwhelmed by them while under the additional stress of the pandemic.

This report shines a clearer light than our first one on how the pandemic has impacted older people differentially according to the degree of inequality they are experiencing. It shows that like their younger counterparts, older people from ethnic minorities have been hit harder in various ways, as have older people who are living on low incomes. Tackling health inequalities is quite rightly high on the NHS’s agenda as we look to the future: this report provides the strongest possible evidence as to why this must be an all-age agenda that is fully inclusive of older people too.

Our findings are also a call to action to help all older people to sustain their current state of health and hopefully improve it now, whatever else the pandemic may throw at us later.

Caroline Abrahams, Charity Director, Age UK
2. Who have we spoken to?

Since the start of the pandemic, we have consulted with older people, their friends, partners, and families, to understand how their mental and physical health has been impacted. This report is the second in a series and seeks to explore how older people’s experiences have changed since we first conducted research in Summer 2020. The report is based on the following research:

- Representative online polling with 1,487 people aged 60+ across the UK, conducted by Kantar Polling in February 2021. Of the people polled, 40% were living with a long-term health condition, 17% had been advised that they were clinically extremely vulnerable to Covid-19, and 14% reported that they are an informal carer.

1. An online survey shared across our social media channels and with Age UK Campaigners in February 2021. The survey was completed by 14,840 people. Over 13,000 of respondents were older people, while the rest were friends, partners, relatives, or carers of an older person. Over 70% of older people who responded were aged 70 or above and more than 60% of respondents reported living with at least one long-term health condition.

- In-depth qualitative research conducted by Britain Thinks in March 2021 with people aged 60+ from less well heard communities, including older people who are digitally and socially excluded and older people from ethnic minority communities. This included older people who are South Asian, Black Caribbean, Black African, and White European.

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1. Research Express provides quick, reliable market research. Research Express is part of Kantar UK Ltd. The survey was conducted on the Research Express Online Omnibus amongst 1450 UK adults aged 60+ from 28th January – 11th February 2021.
3. Physical Health

The Covid-19 pandemic has made it harder for older people to look after their physical health. Not only have they had reduced opportunities to be physically active, but a significant number have also experienced delays in accessing healthcare and treatment. As a result, older people have told us they have ‘aged’, lost independence, and have a reduced ability to do the things they used to enjoy.

A. Mobility and fitness

While some older people have used the pandemic as an opportunity to do more exercise, others have struggled to remain active. Successive lockdowns and on-going social distancing measures, including the closure of community and leisure facilities, has severely disrupted the support networks and routines that many older people relied on to keep themselves as fit and well as possible. This has had a serious impact on mobility, movement, and fitness. A significant number of older people have told us that they feel slower, have become stiff, and are experiencing new aches and pains. Many have gained weight and are becoming easily breathless, with some older people now struggling to walk short distances or becoming reliant on walking aids.

- 27% of older people (around 4.3 million) can’t walk as far since the start of the pandemic.
- 37% of older people (nearly 6 million) have less energy since the start of the pandemic.
- 28% of older people (around 4.5 million) disagree that they have been able to keep fit since the start of the pandemic.

“I could walk for short periods, perhaps ten minutes on a good day, now I struggle to get from room to room.”

“We used to walk my dog around a field everyday together but since lockdown mum has stayed in the house. I have noticed now that she is shuffling when she walks rather than taking proper steps.”

“Confinement to house (shielding) has had an impact on my physical health. Lack of exercise especially earlier in the year has had an impact on how far I can walk now without joint pain or breathlessness.”
B. Balance and falls

Falls are one of the most common causes of hospital admissions amongst older people and can have serious consequences. Unfortunately, reduced activity over the course of the pandemic has had an impact on older people’s balance. Older people told us that they feel less steady on their feet, are falling more frequently, and have lost confidence to leave their homes for fear of falling.

• 17% of older people (around 2.7 million) agree they are less steady on their feet since the start of the pandemic.

“I have become wobbly and have fallen several times hurting my ribs on two occasions and my thigh on another occasion and I have hit my head on numerous occasions. The pain in my wrists and thumbs has become worse.”

“As she has not left the house or garden since March, her mobility is much more difficult. She has fallen twice at home, which she has never done before.”

“Mobility was not perfect prior to the lockdown but lack of activity has meant muscle wastage in the legs resulting in three falls recently, on two of the occasions being hospitalised.”

C. Reduced ability to do day-to-day activities

Our research suggests that older people have experienced a significant degree of deconditioning, with people reporting reduced muscle strength and poorer cardio-vascular health. This has impacted on their ability to look after themselves, making everyday tasks much more difficult in some circumstances. For those that were already struggling before the pandemic, life has become harder still.

• 42% of older people (around 1.2 million) who already found it difficult to get up and down the stairs report that this is even harder since the start of the pandemic.

• 36% of older people (around half a million) who previously found it hard to shower, wash, or have a bath say this is even harder since the start of the pandemic.

• 47% of older people (nearly 1 million) who previously found it hard to clean or tidy their house find this even harder to do since the start of the pandemic.
Meanwhile, some older people are experiencing a loss of independence for the first time.

- 10% of older people (around 1.6 million) who were previously able to get up and down the stairs now find it difficult to do.
- 8% of older people (nearly 1.3 million) who were previously able to clean their house now find it difficult.
- 12% of older people (around 1.9 million) have become less independent since the start of the pandemic.

D. Some older people are living in significant pain

Older people have told us that they are in more pain than they were before the pandemic, with some experiencing excruciating and debilitating pain daily. Many older people attributed this to a reduction in physical activity, which is leading to stiffness, joint pain, and aches. Others have had elective surgery delayed, such as hip and knee replacements, which has had a huge impact on their quality of life. Meanwhile, older people living with long-term conditions described having ‘flare-ups’, often caused by the stress of the pandemic or a reduced ability to manage their condition, increasing the pain they are experiencing. Regardless of the cause, amongst those older people affected increased pain is standing in the way of them taking part in the activities they enjoy and getting pleasure out of their lives.

- 25% of all older people (around 4 million) are living with more physical pain since the start of the pandemic.
- 45% of older people living with a long-term health condition (around 2.9 million) are living with more physical pain since the start of the pandemic.
“My fibromyalgia is in “flare up” and has been since my brother went into hospital in August. After his death it has been even worse. I hurt everywhere! It is like walking around with every muscle in my body cramping. I don’t know what I am saying half the time, I am shaking so much I can’t hold things properly and my balance keeps going, I am sure I am going to have a bad fall.”

“I am in constant pain - and I mean pain, not ‘aches & pains’, due to chronic osteoarthritis and osteoporosis. I have practically lost the use of my left arm, right wrist, my spine, neck, legs and feet are very swollen and painful.”

“My pain has got a lot worse, I do not get out and have put a lot of weight on. I am in my chair 24/7. Some days I don’t eat as in too much pain to be able to get up and make a meal. Virtually only get up when I need to go to the toilet.”

“I need knee surgery for osteoarthritis, this has been significantly delayed. My options for exercise are reduced which has led to me gaining weight, this in turn worsens my condition. The pain affects sleep which is affecting my mental health.”

E. Older people are struggling to manage their long-term conditions

Older people living with long-term conditions, such as diabetes, arthritis, COPD, and Parkinson’s are finding it increasingly hard to manage their condition and keep their symptoms under control. Activities which previously helped them to cope with symptoms, such as swimming or exercise classes, have not been available, while routine appointments have been limited or completely stopped.

The added stress of the pandemic has also exacerbated some long-term conditions. This has left older people experiencing more severe symptoms, in worsening pain, or seeing their health condition progress irreversibly.

- 18% of older people living with a long-term health condition (around 1.1 million) now find it harder to look after themselves than at the start of the pandemic.
- 21% of older people with a long-term health condition (around 1.3 million) agree they are less independent than at the start of the pandemic.
“I used to swim every day which helps dramatically with arthritis…. Am now crippled and need two new knees. Don’t know how this helps the NHS. Certainly doesn’t help me.” “My Parkinson’s Disease has progressed at an alarming rate. I have been unable to access my special Parkinson’s classes and forego my special Parkinson’s treatments. In all my well-being is much worse and my mobility has suffered enormously which at 92 is unlikely to return.” “I have fibromyalgia and lack of exercise along with stress has made it far worse. My hair has begun to fall out through stress.” “Being in lockdown I have had very little exercise which in turn has resulted in higher glucose readings when I have tested myself. My control is not as good as pre-lockdown and I worry about what effect it will have on my kidneys, eyes etc.”

F. Living with long Covid

We heard from older people who after catching Covid-19 are continuing to experience symptoms, including fatigue, breathing difficulties, muscle aches, weight loss, and ‘brain fog’. On top of this, older people living with long-term conditions explained how contracting Covid-19 has exacerbated their existing health problems. Unsurprisingly the stress of contracting Covid-19, combined with the impact of enduring physical symptoms, is taking its toll on many older people, who described feeling depressed, low, and angry.

“I had Covid last year and it’s left me in pain so I can’t walk as much and my asthma is worse.” “Having Covid-19 on top of fibromyalgia, hypothyroidism, arthritis and costochondritis has made it all worse.” “Since catching Covid-19, they are not the same person, health wise, as before. They now struggle to even walk small distances, daily self-care is a lot worse, and anger/mood problems now bad.” “After a mild case of Covid his Parkinson’s and dementia accelerated.” “He contracted Covid-19 and was taken into hospital. Since recovering he has suffered lots of pain, brain fog, got very depressed.”
4. Mental Health

Older people continue to tell us that the pandemic has left them feeling anxious, depressed, and fearful for the future. Some groups of older people have been particularly hard hit, including carers, older people who have been bereaved, and those who have been shielding.

Most notably in this round of research older people who felt they had managed during the first wave of the pandemic have reported that as time has passed, and the pandemic has gone on, they have started to struggle.

A. Older people living with pre-existing mental health conditions

Older people who were already living with a mental health condition told us that the pandemic has exacerbated their symptoms and robbed them of their usual coping strategies, such as socialising with friends and family, physical activity, hobbies, and other activities that provided routine. We heard how older people were struggling to cope and many have had to increase their medication as a result. Some older people who had been able to manage their mental health condition for many years, or even decades, told us that the pandemic had triggered a relapse in symptoms.

“Suffered with depression for years but since last March it’s got worse and my meds have been increased once already!! Can’t socialise or go out and meet friends. It’s so depressing!! Feel trapped and isolated, worried and scared about Covid.”

“I began taking Citalopram following the death of my husband of 47 years. At the start of the pandemic, I was reducing my medication with a view to stopping it. I have had to increase the dosage back up.”

“Return of my agoraphobia as to keep it under control I need to get out. The more I have stayed in during lockdown, the more difficult I find it to go out on my own for a short walk.”

“Her OCD has returned after 30 years of being okay. Plus, constant thoughts about starving herself to death. Again, a return of a problem that has been stable if not completely absent for years.”
B. Increased anxiety

The pandemic is continuing to cause high levels of anxiety. Many older people told us that fear of catching Covid-19 has left them too afraid to leave their home, even to sit in the garden or access health appointments. Others are experiencing anxiety related to delays in healthcare or treatment; financial concerns; or worries about friends and family. For some the anxiety is all-encompassing and leading to panic attacks, insomnia, and loss of appetite. Many are struggling to control their anxiety and anticipate that even after lockdown has ended, they will not be able to return to normality.

- 36% of older people (around 5.8 million) told us that they feel more anxious since the start of the pandemic.

   “I am now unable to go out at all as I am petrified of Covid, so I have only been out for three hospital trips since last March.”

   “Not sleeping well, I feel like gagging and being sick when I have to go out.”

   “I get panicky when I have to go out in public, I have nightmares about being out in a crowd and no-one is wearing a mask.”

   “Recluse since 17th March 2020; I have not gone out the door once and I think I never will again. A corpse will just be found here someday.”

   “After almost 80 years on the planet, I have started having panic attacks.”

C. Low mood and depression

Many of the older people we surveyed told us they feel depressed, have nothing to look forward to in their lives, and have lost enjoyment in the activities which used to give them pleasure. Low mood is leading to a lack of motivation for some, with older people telling us they have stopped washing, getting dressed, or getting out of bed. In the most severe cases older people told us they can longer see a point to living and have become suicidal.

- 43% of older people (around 6.9 million) feel less motivated do the things they enjoy since the start of the pandemic.
“I am now constantly depressed; I often sit and weep and wonder how I shall be able to carry on.”

“I have had suicidal thoughts and get upset even watching most films...I get about an hours sleep as I’m in a lot of pain and lately been having nightmares about ending my life. I woke the other day sweating and anxious after a bad nightmare. Due to the suicidal thoughts I am seeking counselling, I am waiting for someone to get back to me.”

“I just really hate waking up every day, don’t know how much more I can take.”

“Bad tempered, not wanting to get up on a morning, feeling extremely down at not seeing friends and family. Nothing to look forward to and feel like life is over.”

‘I am having to fight recurring bouts of depression caused by the feeling of being contained with little future when I am of an age when I haven’t got much time left.’

D. Reduced resilience

Older people explained to us that they are finding it hard to cope and feel as though everything is getting on top of them. Many told us that they find themselves crying, becoming angry, or panicked over small issues, which previously would not have bothered them. Minor setbacks or problems appear impossible to deal with and they feel they have lost the skills needed to solve problems and make decisions.

“Things are bothering me more. Feel I cannot cope if things go wrong.”

“I get very anxious and have burst into tears for no apparent reason, sometimes in the middle of the night.”

“What was just a little trouble, say if something goes wrong in the house, is now a major worry. I panic.”

“I lack concentration, tend to cry easily and panic at the smallest problem. All these issues are new to me. I worked for 50 years in pressurised environments and never became overwhelmed whilst balancing work and family commitments, I just got on with it. As I did when caring for my terminally ill husband.”
E. Isolation and withdrawal

After a year of limited social contact with others, some older people report that they have become withdrawn and fear they have lost the skills to socialise. The thought of spending time with others has become scary, leading to people avoiding speaking to friends and family. For these older people, the idea of restrictions ending and having to spend time with others again is daunting, and some question whether they will be able to manage it.

“It seems that I no longer have the ability to talk to people. I even find it hard to talk on the telephone.”

“I have become more insulated from the world. I’m happy to talk to friends by email but I don’t answer the phone if I can avoid it.”

“As a result of socially distancing and staying at home, I am now reluctant to talk to people - I don’t feel I have anything to say.”

“I’m getting used to being on my own/ withdrawn and dread the thought of company.”

“I have lost self-esteem and feel anxious about meeting people or joining in activities when it’s all over.”

F. Loss of confidence

The pandemic has transformed older people’s lives and prevented them from doing normal, day-to-day tasks. As a result, older people have reported losing confidence in their ability to take part in activities which were previously routine, such as going for walks, using public transport, or accessing health services. Some say they have become more dependent on others and feel worried about how they will return to their previous lives once restrictions begin to be lifted.

• 64% of older people (around 10 million) agree they are less confident using public transport since the start of the pandemic.

• 20% of older people (around 3.2 million) feel less confident going for short walks outside since the start of the pandemic.

• 18% of older people (around 2.9 million) feel less confident leaving the house by themselves since the start of the pandemic.

• 37% of older people (almost 6 million) feel less confident going to a GP surgery since the start of the pandemic.

• 54% of older people (around 8.7 million) feel less confident attending a hospital appointment since the start of the pandemic.
“Covid has sapped both my sense of purpose and my confidence.”

“Loss of confidence in being out on my own, doubting my abilities in tasks that used to be conducted with ease and mental ability.”

“She is frightened and has lost all confidence about getting out and about on her own.”

“Has lost her self-confidence and is much more dependent on me to do everyday tasks that she was capable of doing before lockdown.”

G. Self-care and neglect

Low mood and depression have resulted in some older people neglecting themselves. This ranges from no longer cleaning the house or taking care of their appearance to not getting dressed, eating, or managing their medication and health conditions. This is having serious implications for their physical health, with older people reporting fatigue and weight loss.

“It is a struggle to get out of bed and I am not eating as I should. I am fighting to stay sane.”

“Some days very down, don’t bother to get washed and dressed, what’s the point.”

“Feeling isolated and lost the will to do anything, cooking, cleaning the house, whatever, who cares it will be there long after I’m gone.”

“I’ve eaten more and have lost some control over my diabetes. I was on a low carb diet and checked sugar levels but now I eat anything and don’t monitor levels.”

“She’s become withdrawn and shows no interest in trying to entertain herself. Just basically eats and sleeps all day. This has led to constant constipation and bladder infections. She wears incontinence pads but will not change them regularly as it’s too much of a chore.”
H. Unhealthy coping strategies

The pandemic has also led to some older people adopting unhealthy coping strategies, including comfort eating, drinking to excess, and smoking more.

“They are very lonely as they cannot attend local clubs that they used to attend and because they have to stay in they are not seeing many people... This has led to drinking alcohol which has led to falls and hospital stays.”

“I am depressed, I’m eating too much (boredom and that’s how stress takes me), so have put on weight, and drinking too much.”

“I am depressed, I’m eating too much (boredom and that’s how stress takes me), so have put on weight, and drinking too much.”

“I am depressed, I’m eating too much (boredom and that’s how stress takes me), so have put on weight, and drinking too much.”

“I have COPD and smoke and I have smoked more since lockdown as I haven’t been able to go out much.”

I. Cognitive decline

Prolonged periods of isolation, reduced social contact, and limited mental stimulation has left older people feeling forgetful and confused. Older people told us that they are finding it hard to remember names, to think of the right words, and to concentrate on activities or tasks. They report experiencing ‘brain fog’ and feeling that they aren’t as ‘mentally sharp’ or capable as they previously were.

Friends and family of older people have also told us they have noticed a decline in their loved one’s cognitive ability. This includes noticing that they are repeating the same conversation, struggling to find the right words, or forgetting to do vital day-to-day tasks such as taking medication or eating. For some older people, the decline in cognitive ability has been sudden and significant.

• 22% of older people (around 3.2 million) find it harder to remember things since the start of the pandemic.

“Memory loss, struggle to think of words and names....no stimulation... no travelling, no meeting friends... especially living on your own.”

“Cannot remember which day of the week! Cannot remember words but live by myself so no one to talk to.”

“Her memory is failing, she forgets whether or not she has eaten, what day it is and how to operate TV remote, coffee machine, has to be supervised to take meds.”

“Her mood is extremely up and down and most worrying is the huge deterioration in her memory - both short and longer term. This was not really an issue before the pandemic.”
J. Older people living with dementia.

Older people living with dementia have been severely impacted by the Covid-19 pandemic. Activities which help to maintain cognitive function, such as socialising with friends and family, attending support groups, and putting in place a routine, have largely been unavailable. This has resulted in some older people experiencing much quicker cognitive decline than expected, with friends and family explaining how devastating it has been to witness their loved one’s deterioration.

We have also heard from friends and family how difficult it has been to explain Covid-19 restrictions to their loved ones and support them to understand why they are unable to see people. In particular, older people living in care homes with dementia have been unable to understand why they aren’t receiving visitors and have been left feeling unloved, forgotten and abandoned. Not only has this been deeply distressing for the older person but also heart-breaking for the people who care about them.

“Vascular dementia has got much worse due to family being unable to visit...Her nursing home noticed a significant change in less than 48 hours.”

“Dementia has progressed to the point where she now cannot find her way around the house, and has wandered out without my knowledge, which involved the police.”

“Her Alzheimer’s rapidly increased because of zero support during the first lockdown necessitating moving into a care home where visits have not been allowed for months - resulting in further decline.”

“He has dementia and at the start of lockdown was able to converse, walk the estate, hold conversations, dress and undress. Now cannot hold conversation, walks twenty yards with a walker, has carers in morning and evening. Has aggressive tendencies, medications have been added to his daily intake. He is difficult to understand, has to be prompted on everything from drinking to eating.”
5. Loneliness and isolation

Restrictions on going out and meeting others has left vast numbers of older people feeling lonely, isolated, and forgotten. Older people told us they go days without seeing or speaking to anyone and feel like prisoners in their own homes. Unsurprisingly this had a knock-on effect on their mood, with older people telling us they feel down, tearful, and doubtful that anybody cares about them.

“I cry every day for much of the day due to the loneliness.”

“Feel like a prisoner and long for someone to eat with and talk to face-to-face.”

“Being indoors for days at a time without seeing a living soul or not talking to someone is absolutely torture.”

“I live alone and am completely isolated. My 20-year-old cat was poorly and had to be put to sleep in March last year, the day before the first lockdown. I have had no company since then, and aside from house removers and tradesmen, I have not spent time with anyone at all.”

“He is very lonely... he says it was better during the war.”

Older people have needed Age UK’s support more than ever:

- At the beginning of the pandemic demand for Age UK’s services soared: the Advice Line peaked at almost double the usual number of calls
- Demand for Age UK’s Telephone Friendship Service trebled
- Demand for The Silver Line Helpline, which provides information, friendship and advice, increased by up to 31%
6. Loss, bereavement, and grief

A. Bereavement.

During the course of the Covid-19 pandemic, significant numbers of older people have lost partners, relatives, and friends. While losing someone is never easy, bereavement during this time has been particularly difficult, with many older people losing their loved ones in sudden, unexpected, or traumatic ways. The grieving process has also been disrupted, with older people telling us that they were unable to be with their loved one when they died, say goodbye, or attend funerals. After losing a loved one social distancing rules have also meant they have been unable to find comfort by surrounding themselves with friends and family. This has left older people feeling guilty, depressed, anxious, and lonely.

“I have lost three members of close family. Could not go to funerals. Especially devastated as my sister died very suddenly. Could not see her in her coffin or leave her Bible with her. Still badly grieving.”

“Lost my husband six months ago and feel like I am locked in a prison with no one allowed in the house and can’t go into anyone else’s homes... Feel hopeless like there is no end to it all. It’s like locked in and just waiting for the grim reaper to call as nothing else to make you positive that the future will see things any differently.”

“I lost my mum who I hadn’t been able to see in her care home and I feel so guilty as she was so distressed, and I firmly believe she gave up on life without her family.”

“Feelings of isolation. Dealing with a bereavement while living alone during the lockdown. Feelings of loss and grief having lost the person closest to me who died after four weeks in hospital while I was unable to visit him and found it almost impossible to reach him on the phone.”
B. Coping with previous bereavement

Covid-19 restrictions have also made life harder for people who lost someone before the pandemic. Older people who were previously bereaved told us that they had tried to rebuild their lives by putting in place coping strategies to help manage their grief and, in many cases, loneliness. Once these activities were stopped, older people were left reliving their grief and painful experiences.

“Was widowed 18 months before pandemic started and suffered enormously from grief and loneliness on losing my soul mate. I made a huge effort to join clubs and groups and was just starting to pick up socially and mentally when everything stopped. Now back to no stimulation and nowhere to go for company and conversation with my own age group.”

“My wife died over two years ago, and I still miss her. I was just beginning to go out and take part in new sporting activity when the virus struck and restricted these social events.”

“Since the death of my wife in June 2018, I was starting to come to terms at being on my own, but now with Covid restrictions...a phone or video call doesn’t do it for me.”

“I was widowed nearly 4.5 years ago and suffered panic attacks, they had subsided to practically nothing. But this latest lockdown I have been swamped, even waking up with them.”
C. Lack of available bereavement support

Worryingly, we heard from older people that bereavement support has not always been available for them when they have looked for it. This has left them feeling even more isolated and alone.

“Lost my son 15 months ago, tried for counselling however there is a long list due to Covid.”

“I lost my identical twin sister to Covid, this impacted me terribly. I had a couple of doctor calls, then nothing. My hospital occupational therapist had a Zoom meeting with me, she said she was writing to my GP, asking that they contact me, as she could see the state I was in! The call never happened!”

“Lost my Mum approximately three months ago and still grieving over her. Nobody to contact at surgery and still feel very down, lonely and isolated.”

“He is struggling with loneliness, bereavement, isolation. He was getting support from a Covid bereavement worker at the hospital, who made proactive contact after his wife died - but she was on secondment for a year and her secondment ended abruptly after only three months. That felt like another loss for him...Nobody checks to see if he’s OK except for me.”
7. Health Inequalities

A. Older people from lower social grades

Older people from lower social grades\(^1\) have continued to be worse hit by the pandemic. In particular we have heard how pre-existing long-term conditions, financial concerns, poor-quality housing and lack of access to outside space have exacerbated the mental and physical impact of lockdown. Older people with limited finances also told us how they could not afford extras to make life in lockdown more bearable, such as a TV license or access to entertainment.

Older people from lower social grades were significantly more likely to report both: that they had a long-term condition or were in poor health prior to the pandemic; and that the pandemic had had a negative impact on their health and ability to manage everyday tasks.

- 29% of older people from lower social grades are living in more physical pain since the start of the pandemic compared to 20% of those from higher social grades.
- 25% of people from lower social grades are finding it harder to remember things since the start of the pandemic compared to 18% of those from higher social grades.
- 31% of people from lower social grades can’t walk as far since the start of the pandemic compared to 21% of those from higher social grades.
- 47% of people from lower social grades feel less motivated to do the things they enjoy since the start of the pandemic, compared with 38% of those from higher social grades.

“I live alone and rely for pleasure on my TV and most of all the library service. The library has been closed since Feb/March 2020 and books are too expensive to buy and now they have taken our TV licence off us.”

“I live alone and apart from a brief visit from my daughter some days I see or talk to no one. I cannot even watch television now as I cannot afford the licence fee.”

“The environment in which I live is not conducive to exercise. There’s only so much moving around in a cramped flat.”

“Have lost a bit of weight as only able to afford to eat one meal a day.”

“Banned from going out so losing mobility. Not eating and can’t afford any heating or lighting so health is deteriorating.”

\(^1\) We asked respondents which group the chief income earner in their household belongs to. If the chief income earner is retired and in receipt of an occupational pension, respondents were asked to state what group they belonged to based on the income earner’s previous occupation. When referring to higher social grades we mean grades ABC1 and by lower social grades we mean grades C2DE.
Evidence shows that older people from ethnic minorities have been disproportionately impacted by the pandemic and are more likely to have experienced the worst consequences of Covid-19.

Older people from ethnic minorities may be more likely to catch Covid-19 for a range of reasons. Older ethnic minority pensioners are more likely than their white counterparts to have family who are in key worker roles, where the risk of contact with people with Covid-19 is higher. They are also more likely to be living in multigenerational households where there may be a greater risk of transmission. Less than 2% of white people aged 70+ live in multigenerational households, while 56% of Bangladeshi, 35% of Pakistani, 13% of Indian, 11% of Black African and 6% of Black Caribbean people aged 70+ do. Public health information about keeping safe during the pandemic and reducing risks has not always been easily accessible to older people from ethnic minorities if they do not have English as a first language.

Alongside greater exposure to Covid-19, we know that older people from ethnic minorities are at greater risk of becoming severely ill or dying. In particular, older people who are Pakistani, Bangladeshi, Black African, and Black Caribbean have experienced higher mortality rates and worse health outcomes. This can also be seen when looking at deaths in care homes, where between April and November 2020 31% of black care home resident’s deaths and 30% of Asian deaths were attributed to Covid-19, compared to 23% of white care home resident’s deaths. Increased death rate from Covid-19 is likely to be the result of health inequalities across the life course, with older people from these communities more likely to be living with long-term conditions, including obesity, diabetes and heart disease, which increase the chances of the worst outcomes from Covid-19.

As part of this research, we undertook a series of in-depth interviews with older ethnic minority people, as well as healthcare professionals and community group leaders working with a range of communities.

The interviews suggested that older Black African and Black Caribbean people are experiencing increased anxiety as a result of the additional risks they may face if infected with Covid-19. The research also indicates that older people from these communities have been more likely to avoid or postpone accessing healthcare over the course of the pandemic, for fear of catching Covid-19 or as a result of rumours that health services are not available.

This reflects the findings of our polling where older ethnic minority people were consistently more likely to tell us that they had lost confidence in doing routine activities and accessing health services since the start of the pandemic.
27% of older people from ethnic minorities feel less confident going for short walks outside since the start of the pandemic, compared to 19% older people from a white background.

26% of older ethnic minority people feel less confident leaving the house by themselves since the start of the pandemic, compared to 17% of older people from a white background.

55% of older ethnic minority people feel less confident letting professionals into their home (e.g. carers, cleaners etc.) since the start of the pandemic, compared to 45% of older people from a white background.

Older ethnic minority people also told us about other factors that have made living through the pandemic harder. For example, we heard how difficult it has been for older people whose family live in different parts of the world, and who they have not been able to visit during this period. The move to remote services has also made life more challenging for older people who do not have English as a first language and may have relied previously on family or friends for translation.

“My eldest daughter lives in Singapore. I have not seen her for 14 months. I think I may not see her until 2022. It feels a long time and she feels far away.”

“My family is overseas including my 91-year-old mother. I feel so lonely sometimes and feel she may die before I can see her again. It’s been nearly 3 years since we were together. I keep it to myself. I don’t want to upset my husband or my children.”

“My Gran cannot speak much English so requires interpretation which the family used to provide on such occasions but as per the government guidelines there was no visit allowed when she was in hospital.”
Over the course of the pandemic older carers have seen their caring responsibilities increase while the support which was previously available has been seriously diminished. Many of the usual services carers relied upon to help them with their caring role stopped or were not able to function in the way they previously had. Some carers were also reluctant to allow paid professionals into their home due to the risk of infection. Carers have also told us that the pandemic has prevented them from accessing informal forms of support from families and friends, leaving many managing without any form of respite.

- 47% of older carers (around 1 million) told us that they were less confident letting paid professionals into their home since the start of the pandemic

At the same time, many older carers have seen the health of their loved one deteriorate and faced the pressure of keeping their loved one safe from Covid-19, with many older carers looking after someone who is clinically extremely vulnerable to the virus. Unsurprisingly this has taken its toll on older carer’s mental health with many telling us that they feel anxious, depressed and overwhelmed.

“Loneliness, isolation and caring for husband 24/7 single handed without visitors for months on end has led to depression and feeling helpless and hopeless.”

“My husband has been housebound for 7 years and uses a wheelchair. Outside of him the only person I see week to week is the Asda delivery man... Some mornings I get up and burst into tears... This is existing it is not living.”

“I am exhausted and exasperated providing full-time care for my husband.... He has deteriorated greatly in the past year so now needs constant supervision to keep him safe. I feel lonely and sad all the time.”

“All [my wife’s] needs, health, physical and emotional have been completely sublimated in looking after me. She never gets a break, and I am frequently irrational and irritable with her because I am so unhappy and frustrated.”

“I need respite from looking after my partner with dementia. Everything is shut down and the occasional phone call asking if I’m okay (I’m not!) does nothing practical to help.”
The increase in caring responsibilities has also forced many carers to deprioritise their own physical health. For example, we have heard how carers have been unable to leave their loved ones alone, meaning that they have not been unable to go outside to exercise or attend their own healthcare appointments. The demands of caring have also taken their toll, with older carers reporting that they have less energy, are experiencing more pain, and do not have time to look after themselves.

- 49% of older carers (around 1.1 million) have less energy since the start of the pandemic.
- 35% of older carers (nearly 800,000) cannot walk as far since the start of the pandemic.
- 38% of older carers (nearly 860,000) are in more physical pain since the start of the pandemic.

“Lack of exercise because I cannot leave my husband on his own. He has both vascular dementia and Alzheimer’s. This had advanced a lot during lockdown.”

“I am the sole 24/7 full time carer for my husband who has Alzheimer’s and is incontinent. I have had no help in looking after my husband. I have to get up at least twice every night and I am exhausted. My rheumatoid arthritis is much more painful and my left foot and ankle have become agony all the time so severely limiting my mobility.”

“I have more carer responsibilities with the added difficulties of trying to sort out hospital and GP problems. I do not have the time or energy to look after myself properly.”


ii. ONS (2020), ‘Which occupations have the highest potential exposure to the Coronavirus (Covid-19)?’. Available at: https://www.ons.gov.uk/employmentandlabourmarket/peopleinwork/employmentandemployeetypes/articles/hoccupationshavethehighestpotentialexposuretothecoronaviruscovid19/2020-05-11
