

# NISRA CORONAVIRUS (COVID-19) OPINION SURVEY

## KEY FINDINGS FROM PHASES 1 TO 6

### Introduction

On 20 April 2020, NISRA launched a new Coronavirus (COVID-19) Opinion Survey designed to measure how the Coronavirus (COVID-19) pandemic was affecting peoples' lives and behaviour in Northern Ireland. The NISRA Coronavirus (COVID-19) Opinion Survey questionnaire was based on a similar survey that was being conducted by the Office for National Statistics (ONS) in Great Britain.

<https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/healthandwellbeing/bulletins/coronavirusandthesocialimpactsongreatbritain/previousReleases>

This report provides a summary of the key findings following the completion of Phase 6 of the NISRA Coronavirus (COVID-19) Opinion survey. Survey data from Phases 1 to 4 have been merged with survey data from Phases 5 and 6 to produce the information used in this report. Users should note that this analysis relates to addresses which were sampled in the first twenty four weeks of the survey. The results are based on 6,357 interviews carried out with members of the public in the period 21 April to 7 November 2020.

Additional findings are now included in this report on access to medical care, attitudes to the enforcement of COVID-19 regulations, buying essential and non-essential consumer goods, the StopCOVIDNI App, socialising and support bubbles. Further analysis is also provided by month of interview to show changes over time, where significant differences were found.

NISRA is currently planning to continue the survey until at least the end of March 2021. Further results from the survey will be published periodically as more data becomes available when fieldwork periods close.

All figures published in these Key Findings are weighted estimates. More information on the weighting applied to these results can be found in the Technical Report which accompanies this report.

Due to rounding, the percentages in the charts may not always add up to 100%. Where two or more categories are combined together the sum of the combined proportions may not equal the sum of the individual proportions in the charts or tables due to rounding. Any differences reported in this publication are statistically significant at the 95% Confidence Level.

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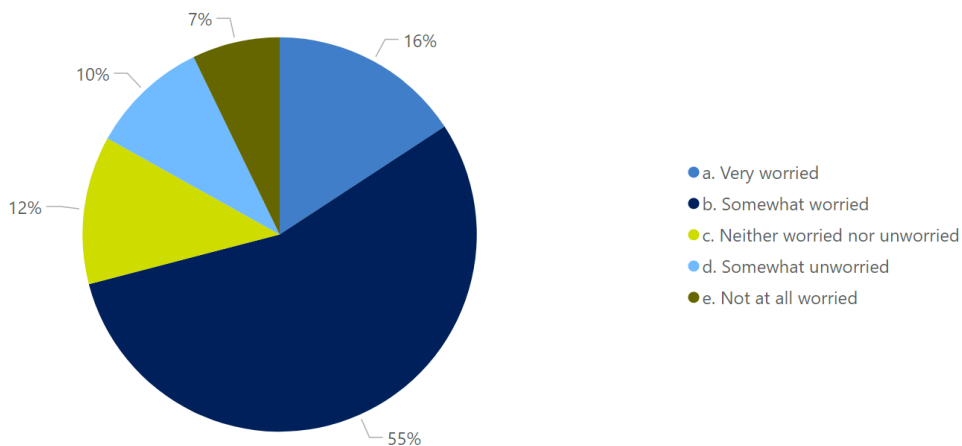
## Key Findings

### Concerns about the Coronavirus (COVID-19)

The survey continued to find high levels of worry among people regarding the Coronavirus (COVID-19). These levels of worry have increased after decreasing over the summer months.

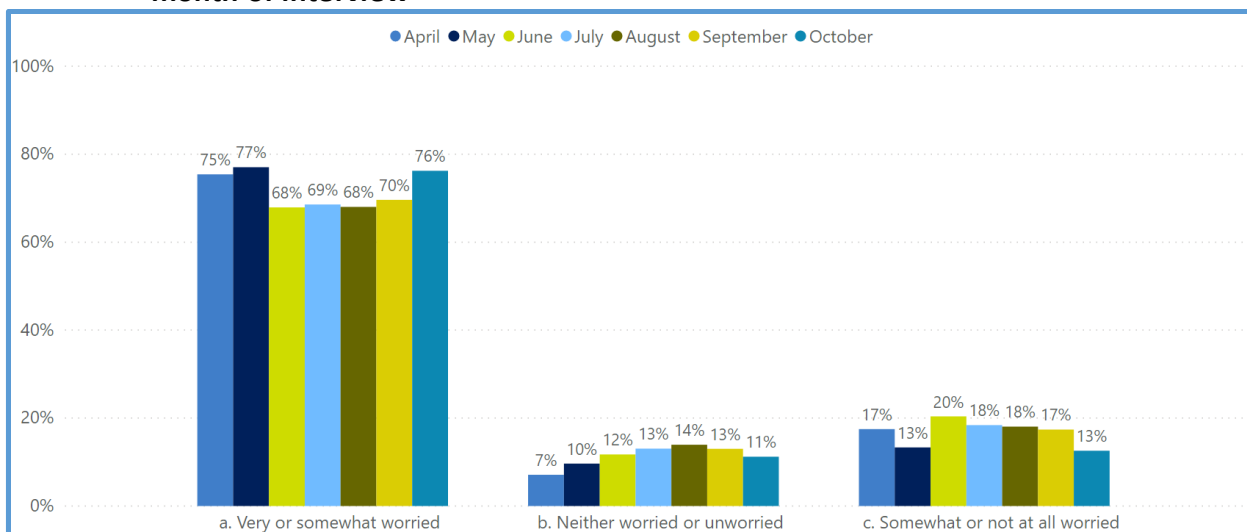
Overall, just over seven out of ten people (71%) said that they were very worried or somewhat worried about the effect the Coronavirus (COVID-19) was having on their lives (Figure 1).

**Figure 1: Levels of worry about the effect the Coronavirus (COVID-19) was having on their life**



In October, more than three quarters of people interviewed (76%) said that they were worried about the effect the Coronavirus (COVID-19) was having on their lives. This was an increase following the June to September period, when this proportion was in the range (68%-70%) and it was a return to the levels of worry reported in the months of April (75%) and May (77%)(Figure 2).

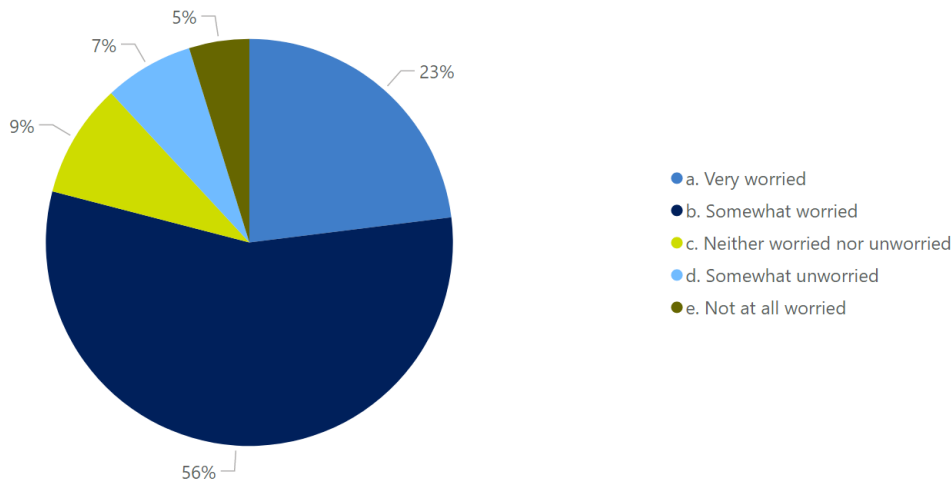
**Figure 2<sup>1</sup>: Levels of worry about the effect Coronavirus (COVID-19) was having on their life, by month of interview**



<sup>1</sup> The number of interviews carried out after 31<sup>st</sup> October 2020 are too low to report on separately in these results.

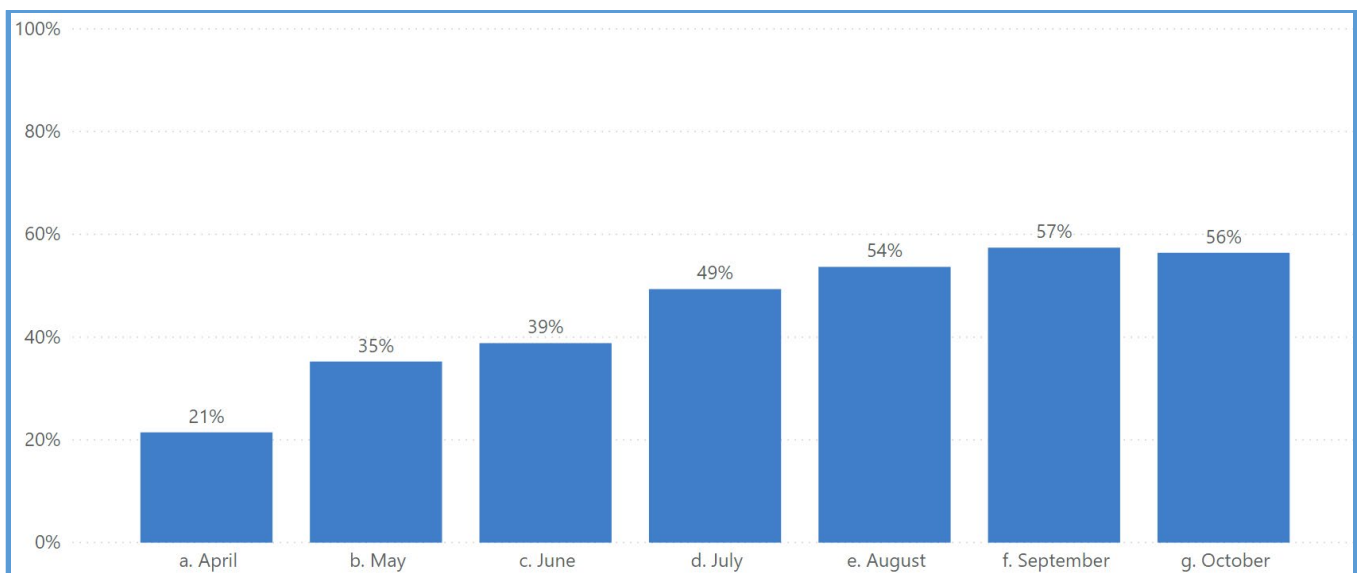
Most people (79%) also said that they were worried about how the Coronavirus (COVID-19) was affecting their family and friends (Figure 3).

**Figure 3: Levels of worry about how the Coronavirus (COVID-19) was affecting their friends and family**



Just under a half of people (49%) thought it would be more than a year before life returns to normal. A further 8% said that life would never return to normal. The proportion of people who said it would be more than a year before life returned to normal has increased from 21% in April to 56% in October (Figure 4).

**Figure 4<sup>1</sup>: Proportion of people who stated it would be more than a year before life would return to normal, by month of interview**



<sup>1</sup> The number of interviews carried out after 31<sup>st</sup> October 2020 are too low to report on separately in these results.

## Ways the Coronavirus (COVID-19) was affecting lives

Those people who said that they were worried about the effect the Coronavirus (COVID-19) was having on their lives were asked some additional questions about how it was affecting them.

The most common way that the Coronavirus (COVID-19) pandemic was affecting their lives was on their ability to make plans, with 55% saying this was being affected.

Of all the worries reported to the previous question, these people were asked to select their single biggest concern. The top ranking concern was that their wellbeing was being affected (15%).

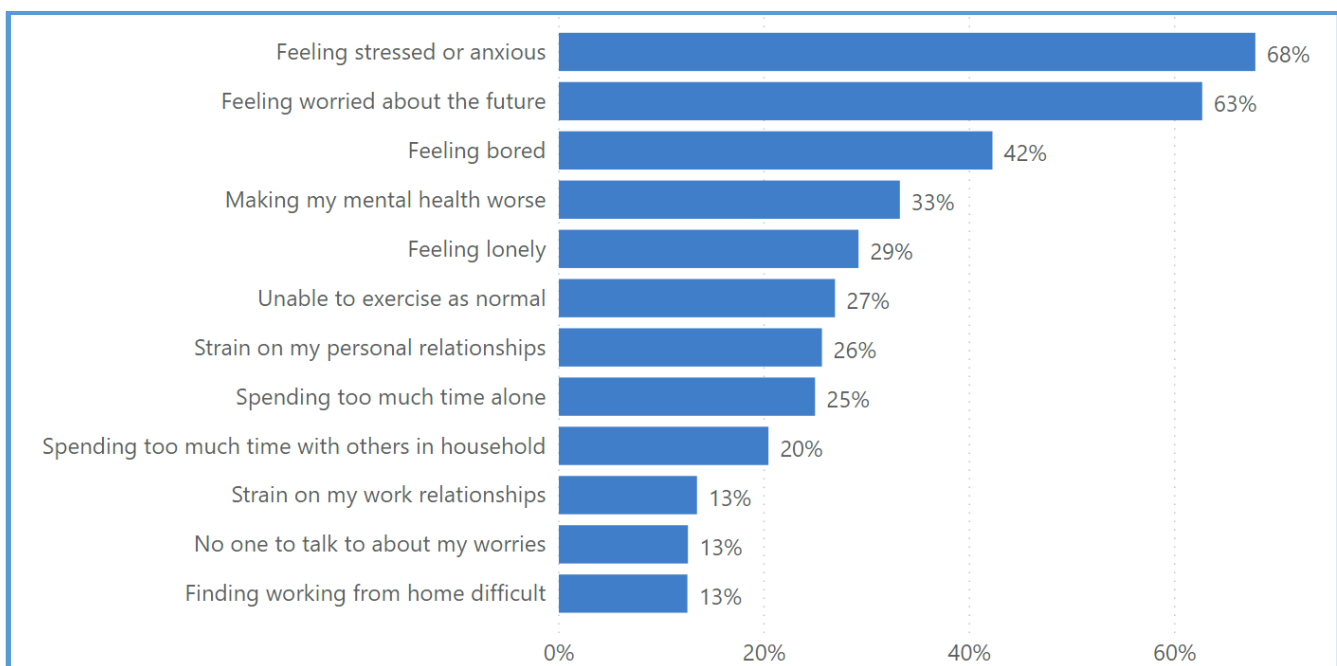
### Worries about Coronavirus (COVID-19) and Wellbeing

Over half of people (53%) stated that they were very worried or somewhat worried about the effect the Coronavirus (COVID-19) was having on their wellbeing.

These people were asked an additional question about how their wellbeing had been affected in the seven days prior to interview.

The most common ways their wellbeing had been affected was feeling stressed or anxious (68%), feeling worried about the future (63%) or feeling bored (42%) (Figure 5).

**Figure 5<sup>1</sup>: Ways in which the Coronavirus (COVID-19) was affecting wellbeing in the seven days prior to interview**



<sup>1</sup> Only asked of people who stated they were either very worried or somewhat worried about the impact Coronavirus (COVID-19) was having on their lives and that their wellbeing was being affected.

## Access to Medical Care

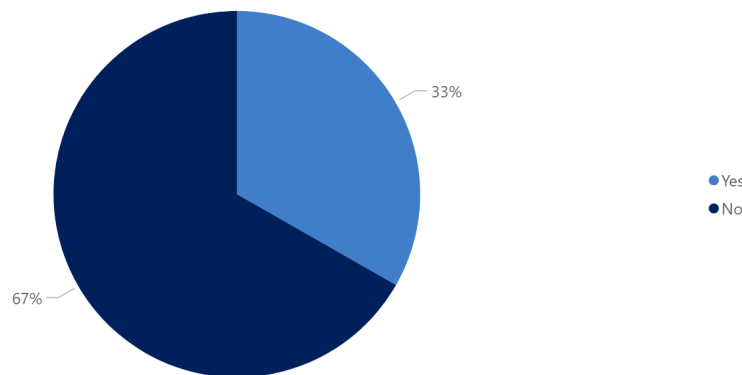
Those people who were interviewed in the period August-November 2020 were asked about access to medical care for existing health conditions.

One third of people (33%) interviewed in this period stated they were receiving medical care for a long-term mental or physical health condition, problem or illness prior to the Coronavirus (COVID-19) outbreak (Figure 6).

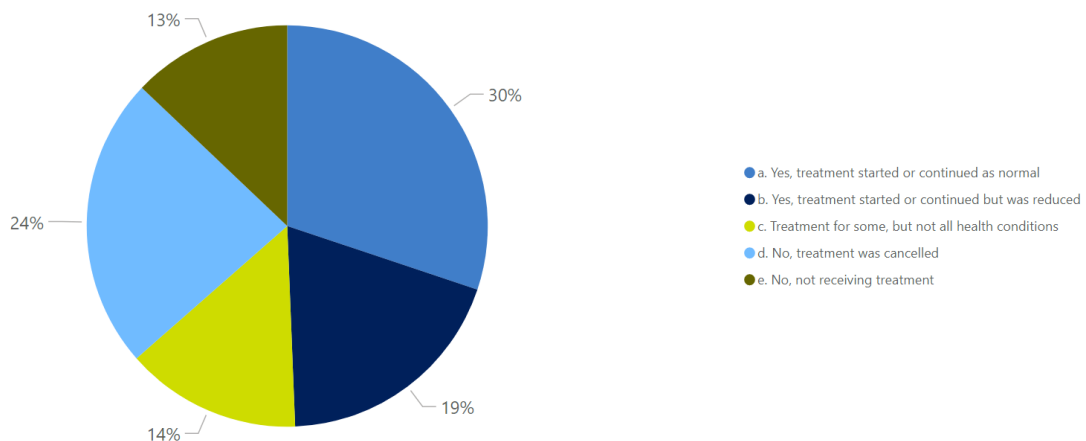
Following the Coronavirus (COVID-19) outbreak, almost a third of these people (30%) reported that their treatment had started or continued as normal (Figure 7).

However, 57% of people had their treatment reduced or cancelled after the Coronavirus (COVID-19) outbreak. Almost four out of ten of these people (39%) felt that their health had got worse as a result.

**Figure 6: Proportion of people receiving medical care for any long-term mental or physical health condition, problem or illness, before the Coronavirus (COVID-19) outbreak**



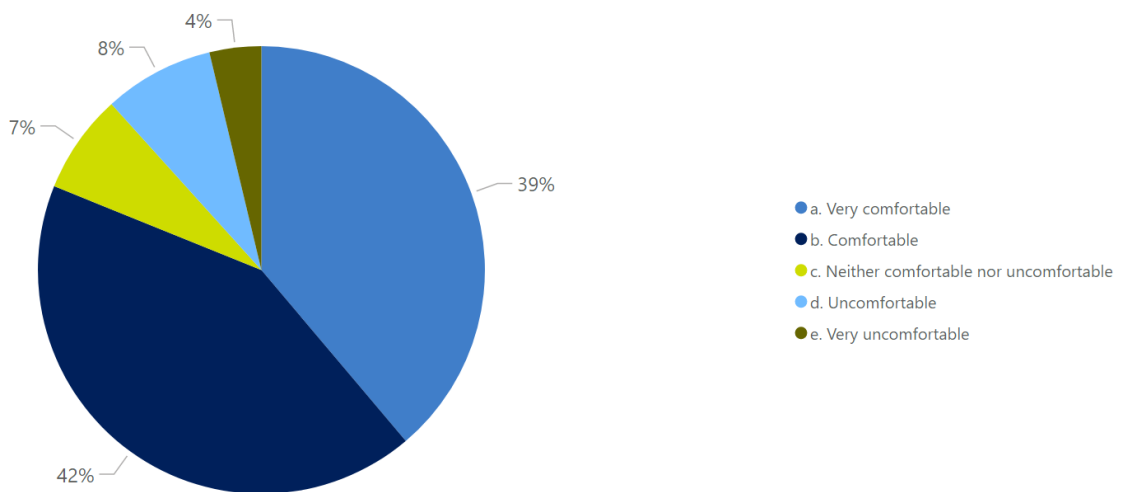
**Figure 7: Proportion of people able to receive the same level of medical care for any long-term mental or physical health condition, problem or illness, since the Coronavirus (COVID-19) outbreak**



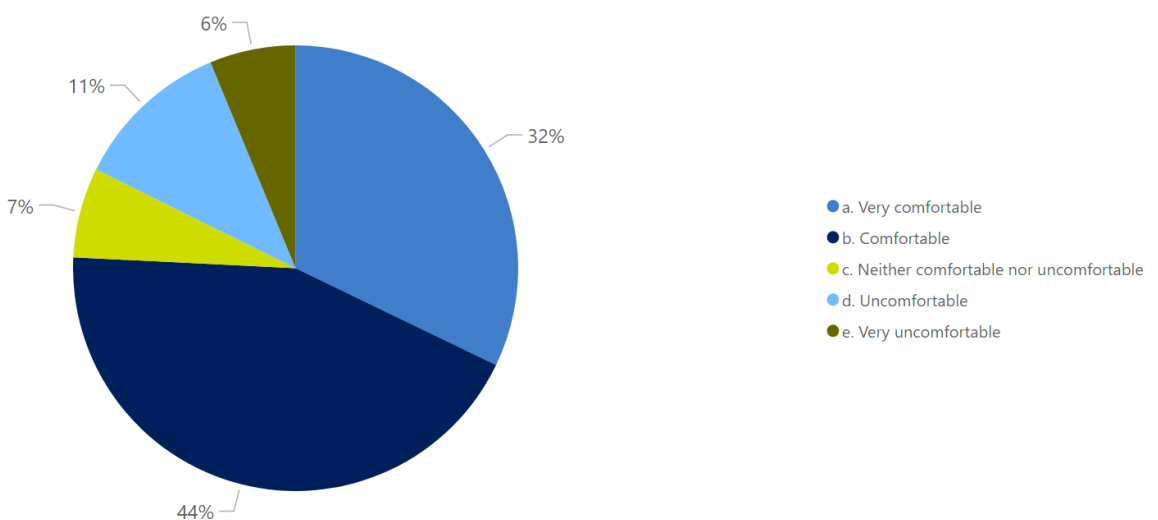
**Perceptions of using different healthcare services**

People interviewed in the period September-November 2020 were also asked about how comfortable or uncomfortable they would be about using different types of healthcare services at that time. Most people said they would be comfortable about seeking advice on the phone from a health professional (81%), attending an online appointment with a health professional (76%) or attending an appointment in person with a health professional (77%) (Figure 8, Figure 9, Figure 10).

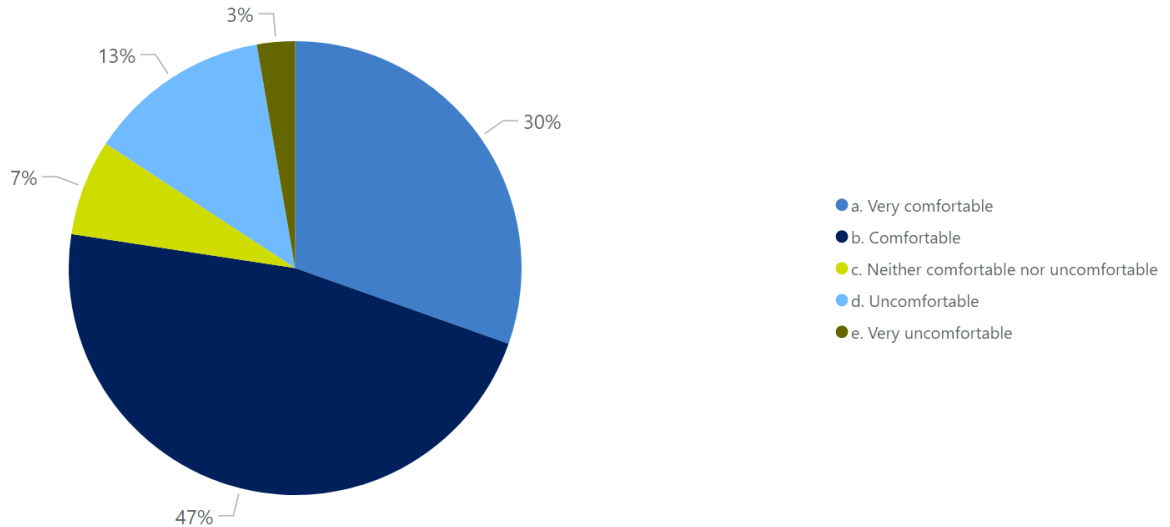
**Figure 8: Proportion of people who felt comfortable, neither comfortable or uncomfortable, or uncomfortable about seeking advice on the phone from a health professional**



**Figure 9: Proportion of people who felt comfortable, neither comfortable or uncomfortable, or uncomfortable about attending an online appointment with a health professional**

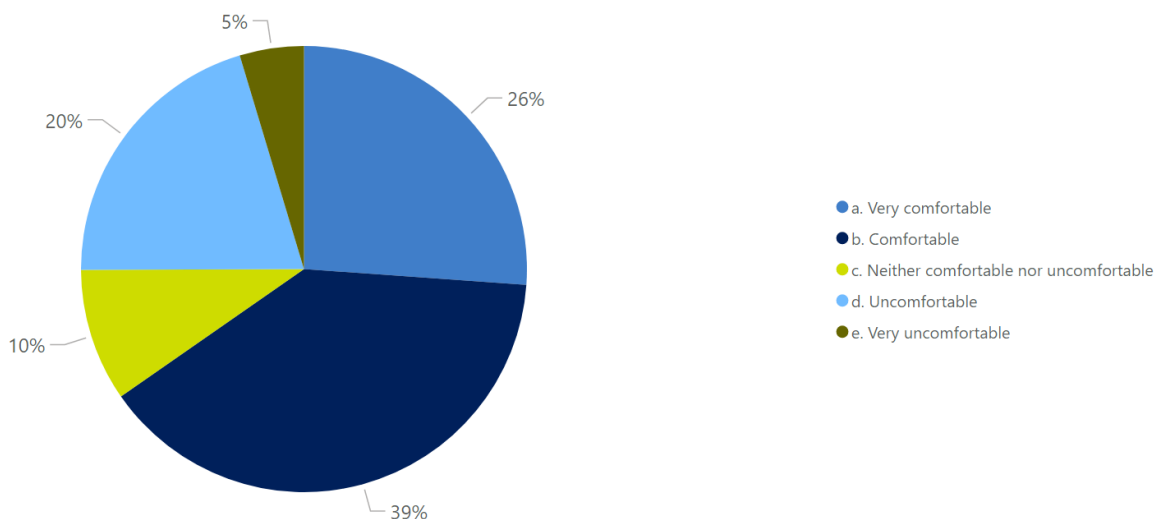


**Figure 10: Proportion of people who felt comfortable, neither comfortable or uncomfortable, or uncomfortable about attending an appointment in person with a health professional**



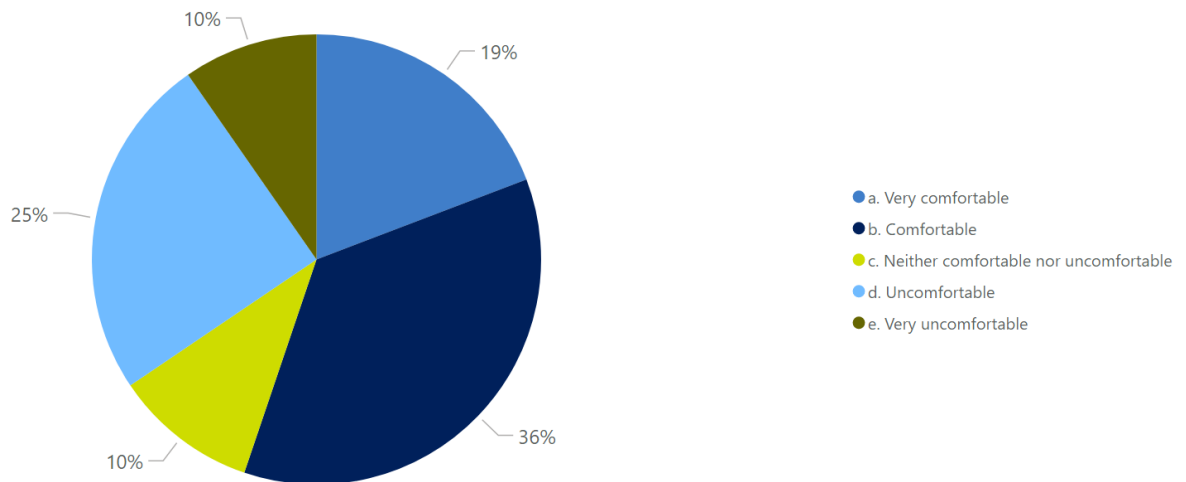
Not all people would be comfortable interacting with healthcare services in a hospital environment at this time. Whilst 65% of people said they would be comfortable attending a hospital appointment if their doctor asked them to, 25% stated that they would be uncomfortable with this request (Figure 11). Just over half of people (55%) said they would be comfortable attending Accident and Emergency (A&E) if they had an urgent health problem but 34% stated they would feel uncomfortable about having to do so (Figure 12).

**Figure 11: Proportion of people who felt comfortable, neither comfortable or uncomfortable, or uncomfortable about attending a hospital appointment if asked by their doctor**





**Figure 12: Proportion of people who felt comfortable, neither comfortable or uncomfortable, or uncomfortable about attending Accident and Emergency (A&E) for an urgent medical condition**



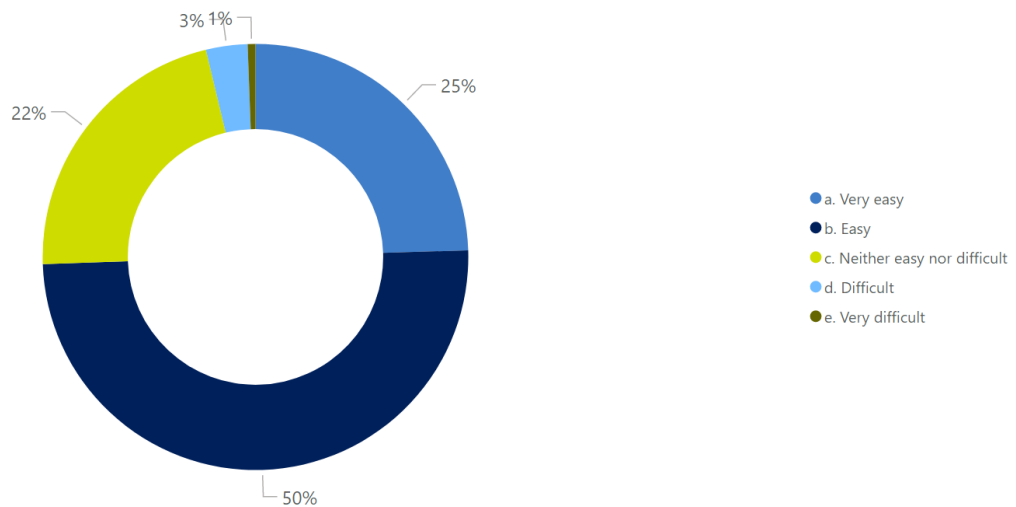
## Financial Concerns

People continue to have financial concerns as we progress through the Coronavirus (COVID-19) pandemic period.

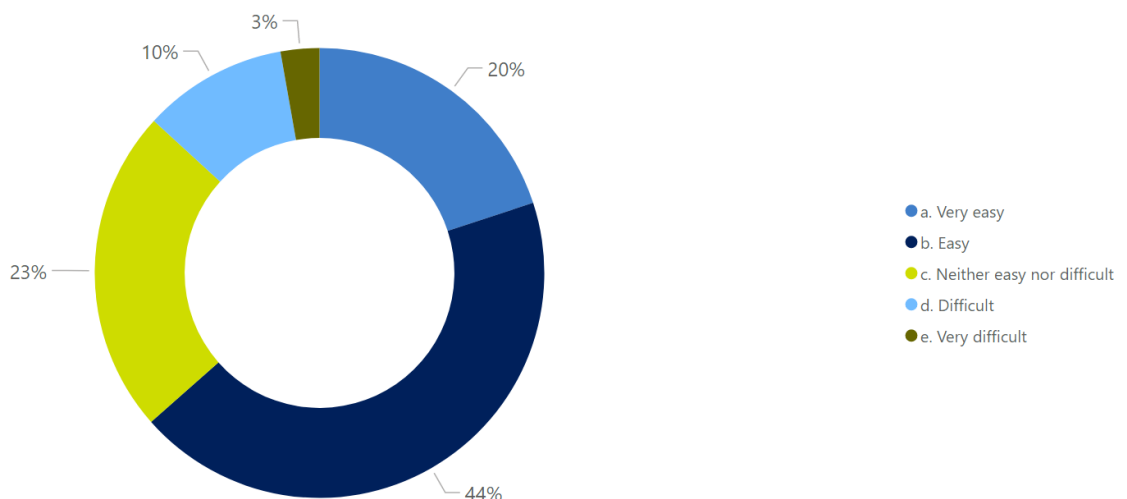
Almost three out of ten people (28%) expected the financial position of their household to get worse in the next 12 months. Some 61% expected their household financial situation to stay the same whilst 11% expected it to get better.

The proportion of people who reported that it was difficult to pay their usual household bills has increased from 4% to 13% since the Coronavirus (COVID-19) outbreak (Figure 13, Figure 14).

**Figure 13: Proportion of people who thought it was easy, neither easy nor difficult, or difficult to pay their usual household bills, before the Coronavirus (COVID-19) outbreak**

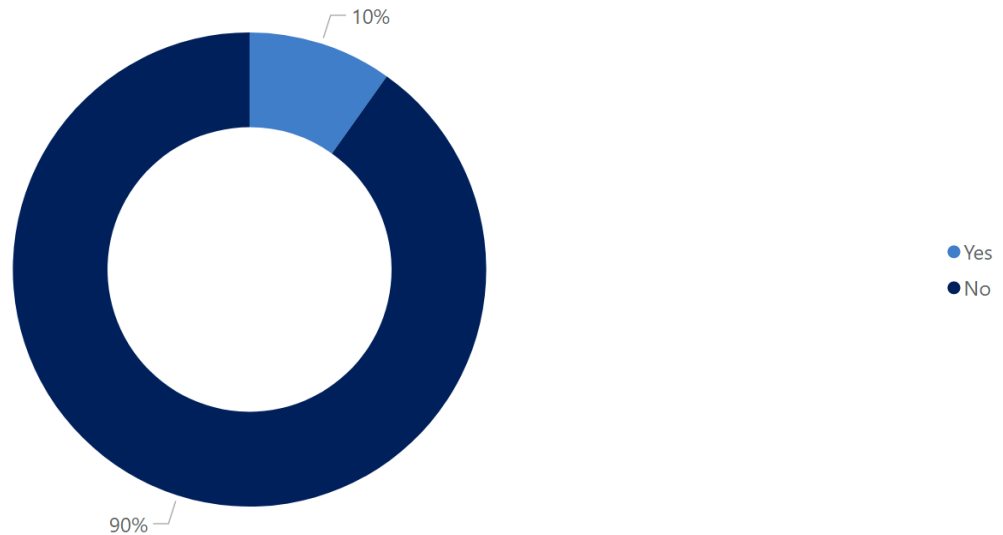


**Figure 14: Proportion of people who thought it was easy, neither easy nor difficult, or difficult to pay their usual household bills, since the Coronavirus (COVID-19) outbreak**

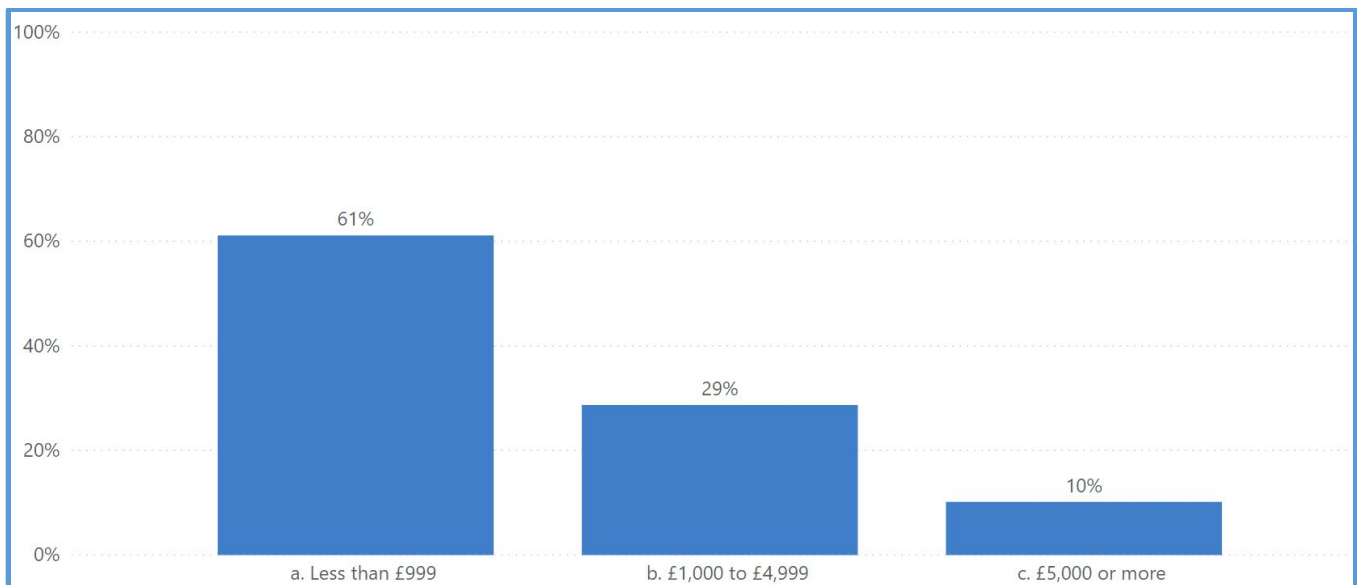


One in ten people (10%) interviewed in the period July-November 2020 said they had borrowed more money or used more credit than usual since the Coronavirus (COVID-19) outbreak (Figure 15). Most of these people (61%) had borrowed or used credit up to an additional £1,000 (Figure 16).

**Figure 15: Proportion of people who had to borrow more money or use more credit than usual since the Coronavirus (COVID-19) outbreak**



**Figure 16: Amount of money borrowed or spent by those who said they had borrowed more money or used more credit than usual since the Coronavirus (COVID-19) outbreak**

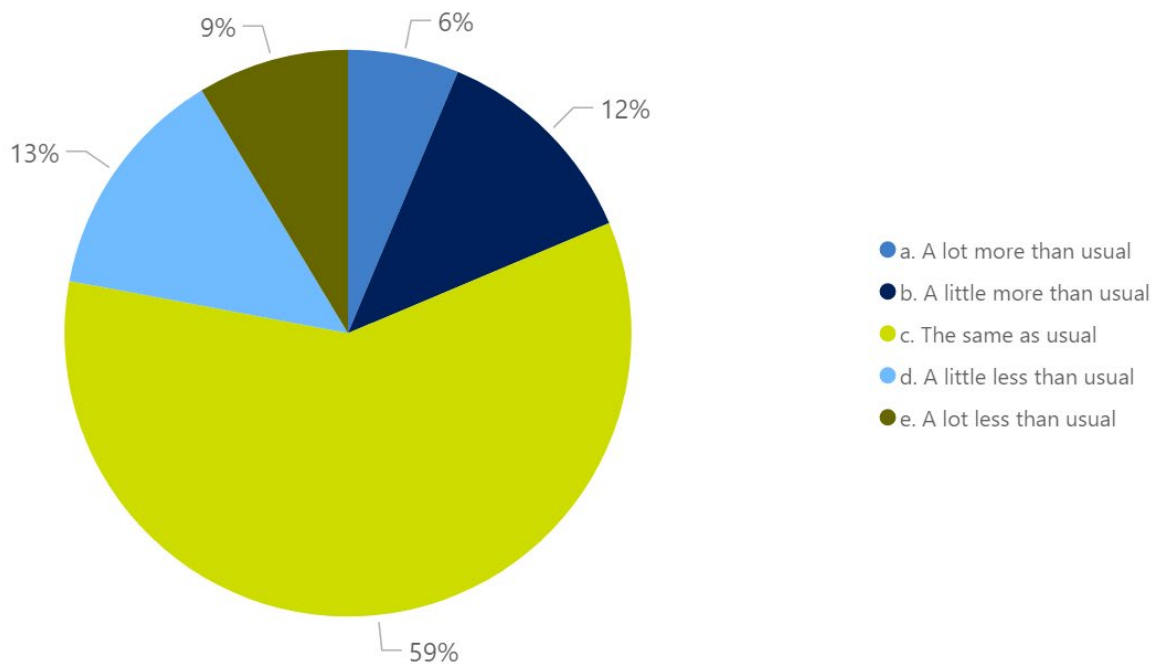


## Buying Consumer Products

In the period September-November 2020, people were asked if they had shopped around at different places because of the Coronavirus (COVID-19) pandemic to compare the price and quality of essential and non-essential items.

Almost one in five people (19%) reported that they had shopped around more than usual when buying items such as food and toiletries but a similar proportion (22%) said they had shopped around less than usual for these essential items (Figure 17).

**Figure 17: Proportion of people shopping around more, the same, or less than usual because of the Coronavirus (COVID-19) outbreak for essential items**

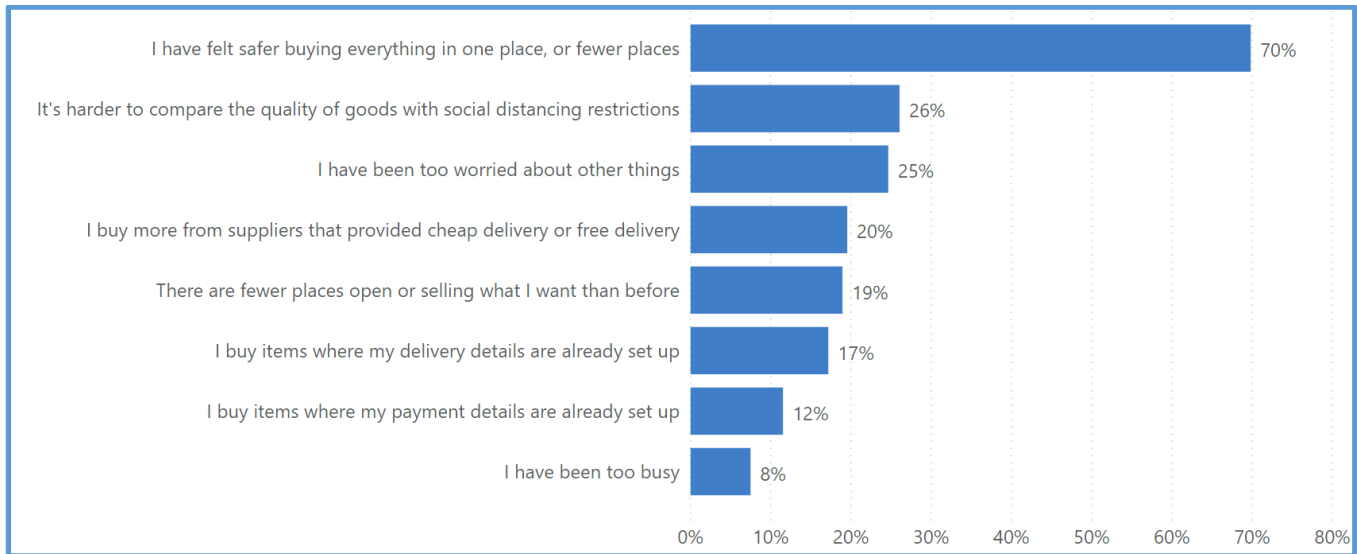


Those people who shopped around less than usual for essential items were asked their reasons for doing so.

Figure 18 ranks these reasons from highest to lowest based on the proportion of people stating each response. The top three highest ranking reasons provided were:

- When I have been going out to the shops I have felt safer buying everything in one place or fewer places (70%).
- It has been harder to compare the quality of goods with social distancing restrictions in place in shops (26%).
- I have been too worried about other things to think about shopping around as much (25%).

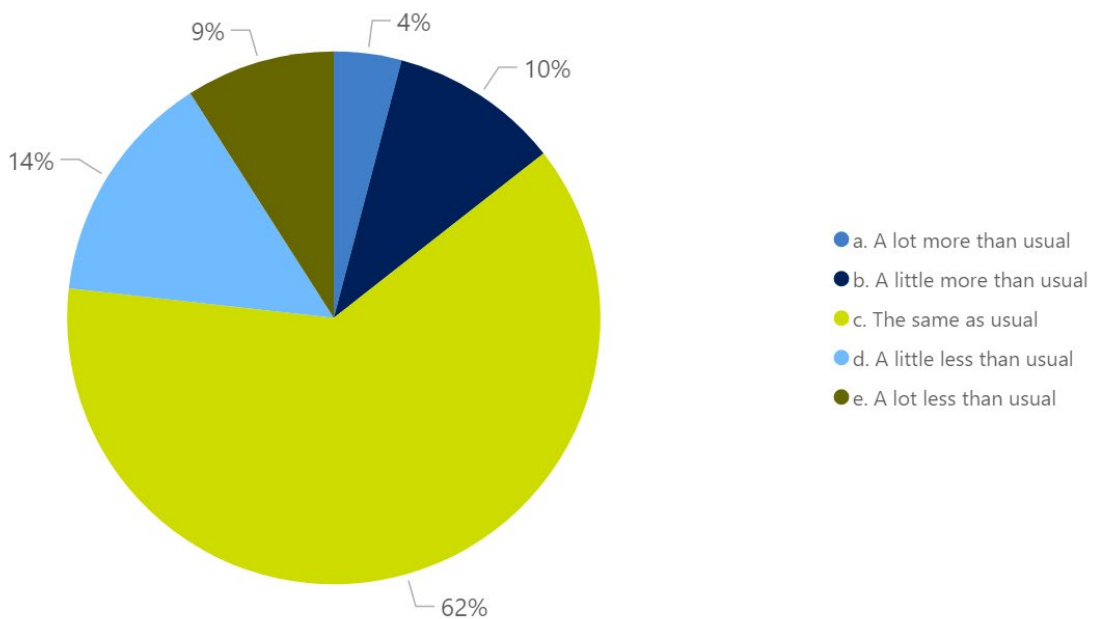
**Figure 18<sup>1</sup>: Reasons people shopped around to compare the price and quality of essential items less than before because of the Coronavirus (COVID-19) outbreak**



<sup>1</sup>Multiple responses allowed.

Some 14% of people reported that they had shopped around more than usual when buying non-essential items such as clothes and toys. One in four of people (23%) said they had shopped around less than usual for non-essential items (Figure 19).

**Figure 19: Proportion of people shopping around more, the same, or less than usual because of the Coronavirus (COVID-19) outbreak for non-essential items**



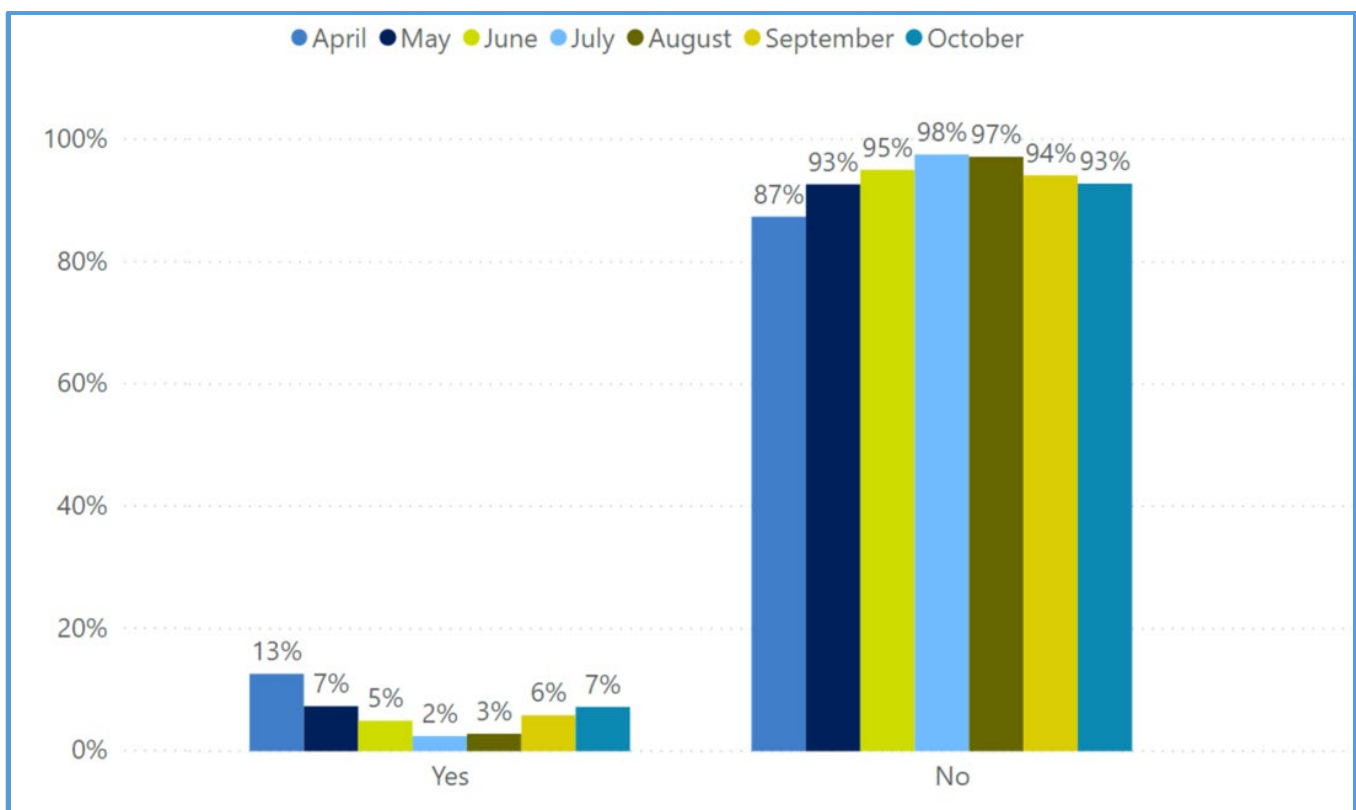
## Self-Isolation

People were asked about whether or not they had self-isolated in the seven days prior to interview. Self-isolation was defined as staying at home because they had symptoms or they had been in contact with someone who had symptoms of Coronavirus (COVID-19). People may have self-isolated at home for other reasons and the question refers to the seven days prior to interview, so the figures presented below should not be interpreted as estimates of all those with Coronavirus (COVID-19) symptoms or those diagnosed with Coronavirus (COVID-19).

Overall 5% of people interviewed had self-isolated at home, in the seven days prior to interview, because of the Coronavirus (COVID-19).

The proportion of those self-isolating at home in the seven days prior to interview, was highest in the peak of the pandemic in April (13%), decreased to 2% in July but increased to 7% in October (Figure 20).

**Figure 20<sup>1</sup>: Proportion of people who had self-isolated at home in the seven days prior to interview because of the Coronavirus (COVID-19) outbreak, by month of interview**



<sup>1</sup> The number of interviews carried out after 31<sup>st</sup> October 2020 are too low to report on separately in these results.

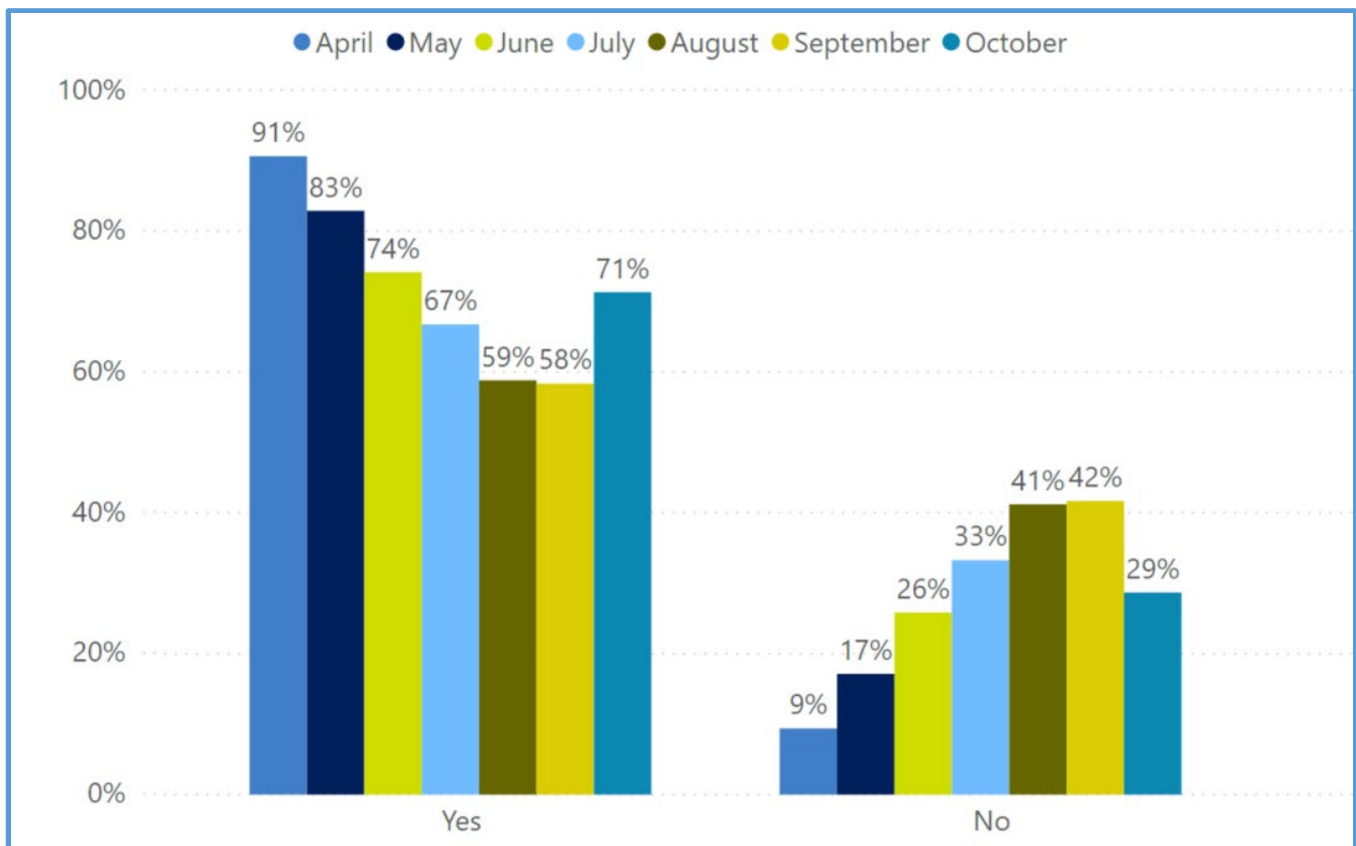
Overall some 5% of people reported that another member of their household had self-isolated at home because of the Coronavirus (COVID-19) in the seven days prior to interview.

## Protecting Older and Vulnerable People

Overall, almost seven in ten people (68%) said they had avoided contact with older people or other vulnerable people in the seven days prior to interview because of the Coronavirus (COVID-19) outbreak. This situation changed over time.

Nine out of ten people (91%) interviewed in April 2020 said that they had avoided contact with older or vulnerable people because of the Coronavirus (COVID-19) outbreak. This proportion consistently decreased each month, reaching its lowest level in September (58%) before increasing again to 71% in October 2020 (Figure 21).

**Figure 21<sup>1</sup>: Proportion of people who avoided contact with older people or other vulnerable people in the seven days prior to interview because of the Coronavirus (COVID-19) outbreak, by month of interview**



<sup>1</sup> The number of interviews carried out after 31<sup>st</sup> October 2020 are too low to report on separately in these results.

Over one in ten (13%) of those who had reported they had avoided contact with older or vulnerable people because of the Coronavirus (COVID-19) outbreak said that they had caring responsibilities for these people.

## Personal Wellbeing Indicators

This section contains estimates of reported life satisfaction, feeling that things done in life are ‘worthwhile’, ‘happiness’ and ‘anxiety’ for those people interviewed in the reporting period.

Personal wellbeing statistics are reported on in two different ways; (i) the average (mean) rating and (ii) the proportion of respondents scoring within each of the thresholds.

People are asked to respond to each question on a scale of 0 to 10, where 0 is “not at all” and 10 is “completely”. This means that a **higher score** indicates **better wellbeing** in relation to ‘life satisfaction’, ‘worthwhile’ and ‘happiness’, and a **lower score** indicates **better wellbeing** for ‘anxiety’.

### (i) Average (mean) Wellbeing ratings

The average (mean) wellbeing ratings across the four measures of personal wellbeing were:

- 7.57 out of 10 for ‘life satisfaction’
- 7.92 out of 10 for **feeling that what you do in life is ‘worthwhile’**
- 7.60 out of 10 for ‘happiness’ yesterday
- 3.27 out of 10 for ‘anxiety’ yesterday

The average (mean) wellbeing rating of people interviewed in the period April-November 2020 for ‘life satisfaction’ and feeling that things done in life are ‘worthwhile’ were significantly lower than that reported by NISRA for the 2019/20<sup>1</sup> year, signifying poorer wellbeing in these measures (Table 1).

Anxiety levels in the same period were also significantly higher than that reported by NISRA for 2019/20, which is indicative of poorer wellbeing in this measure (Table 1).

There were no significant differences observed in the wellbeing ratings for happiness when compared with that reported by NISRA for the 2019/20 year (Table 1).

**Table 1: Comparing Personal Wellbeing averages with the latest NISRA published data (2019/20)**

Average (mean)	Life Satisfaction	Worthwhile	Happiness	Anxiety
Phases 1 – 6 (April-November 2020)	7.57*	7.92*	7.60	3.27*
Personal Wellbeing in NI 19/20	7.86*	8.05*	7.68	3.00*

\*A significant difference has been observed

As we move through the pandemic period, ‘life satisfaction’ ratings initially increased between May and August, indicative of better wellbeing, but have continued to decrease since August. Similarly, ‘Anxiety’

<sup>1</sup>NISRA report on Personal Wellbeing in Northern Ireland 2019/20 <https://www.nisra.gov.uk/publications/personal-wellbeing-northern-ireland-201920>



decreased between May and August, indicative of better wellbeing, but has increased during September and October (when cases began to rise and new restrictions were introduced).

The average (mean) 'life satisfaction' rating of people interviewed when restrictions had eased in August (7.77) was significantly higher than that reported during the lockdown period in May (7.42). However, the average 'life satisfaction' rating of those interviewed during September (7.48) and October (7.38) was significantly lower than that reported during August. The average (mean) 'happiness' rating during October (7.37) was also significantly lower than that reported in August (7.74) and September (7.63) (Table 2).

In contrast, the average (mean) 'anxiety' rating was significantly higher during the lockdown period in May (3.50) than when restrictions had eased in August (3.05). Average (mean) ratings for 'anxiety' were significantly higher in October (when new restrictions were introduced) than they were in August, signifying poorer wellbeing (Table 2).

**Table 2<sup>2</sup>: Comparing Personal Wellbeing averages during the Pandemic**

Average (mean) rating by month of interview	Life Satisfaction	Worthwhile	Happiness	Anxiety
April 2020	7.64	7.81	7.44	3.27
May 2020	7.42**	7.85	7.48	3.50**
June 2020	7.66	7.93	7.66	3.19
July 2020	7.68	7.88	7.67	3.04
August 2020	7.77**	8.02	7.74**	3.05**
September 2020	7.48**	7.90	7.63**	3.33
October 2020	7.38**	7.96	7.37**	3.57**

\*A significant difference has been observed

\*\* A significant difference has been observed in between one or more categories (details in commentary)

Feelings of 'life satisfaction', what you do in life is 'worthwhile' and 'happiness' were significantly higher for people aged 65+ when compared to other age groups, however, there were no significant differences observed between people aged 16-44 and 45-64 for these measures. Similarly, feelings of 'anxiety' for people aged 65+ were significantly lower than those aged 16-44 and 45-64 (Table 3).

Females reported a significantly higher 'anxiety' score on average than males, which is indicative of poorer wellbeing in this measure. However, females also reported significantly higher feelings that things done in life are 'worthwhile' which indicates better wellbeing in this measure (Table 3).

People with a limiting longstanding illness reported significantly lower wellbeing averages for 'life satisfaction', 'worthwhile' and 'happiness' than those without. The average 'anxiety' score is higher for those with a limiting longstanding illness than those without (Table 3).

<sup>2</sup> Personal wellbeing estimates for the months of April to August 2020 have been recalculated following the weighting of the data to include the additional months of September and October. Estimates for these months presented here will therefore differ from the previous publication.

**Table 3: Variation in average personal wellbeing ratings by Gender, Age and Limiting Longstanding Illness**

Average (mean)	Life Satisfaction	Worthwhile	Happiness	Anxiety
<b>Gender</b>				
Male	7.60	7.84*	7.63	2.98*
Female	7.54	7.99*	7.56	3.54*
<b>Age-group</b>				
16 – 44	7.52**	7.90**	7.55**	3.30**
45 – 64	7.43**	7.83**	7.50**	3.37**
65 & over	7.89**	8.11**	7.84**	3.06**
<b>Limiting Longstanding Illness</b>				
Yes	6.90*	7.34*	6.90*	4.24*
No	7.79*	8.11*	7.82*	2.96*
<b>Overall</b>				
Overall Phases 1 – 6	<b>7.57</b>	<b>7.92</b>	<b>7.60</b>	<b>3.27</b>

\*A significant difference has been observed

\*\* A significant difference has been observed in between one or more age categories (details in commentary)

**(ii) The proportion of respondents scoring within each of the Personal Wellbeing thresholds**  
**Labelling of Thresholds**

**Life satisfaction, Worthwhile and Happiness scores**

**Anxiety scores\***

Response on an 11 point Scale	Label	Response on an 11 point Scale	Label
0 to 4	Low	0 to 1	Very low
5 to 6	Medium	2 to 3	Low
7 to 8	High	4 to 5	Medium
9 to 10	Very high	6 to 10	High

\* A lower score indicates better wellbeing for anxiety.

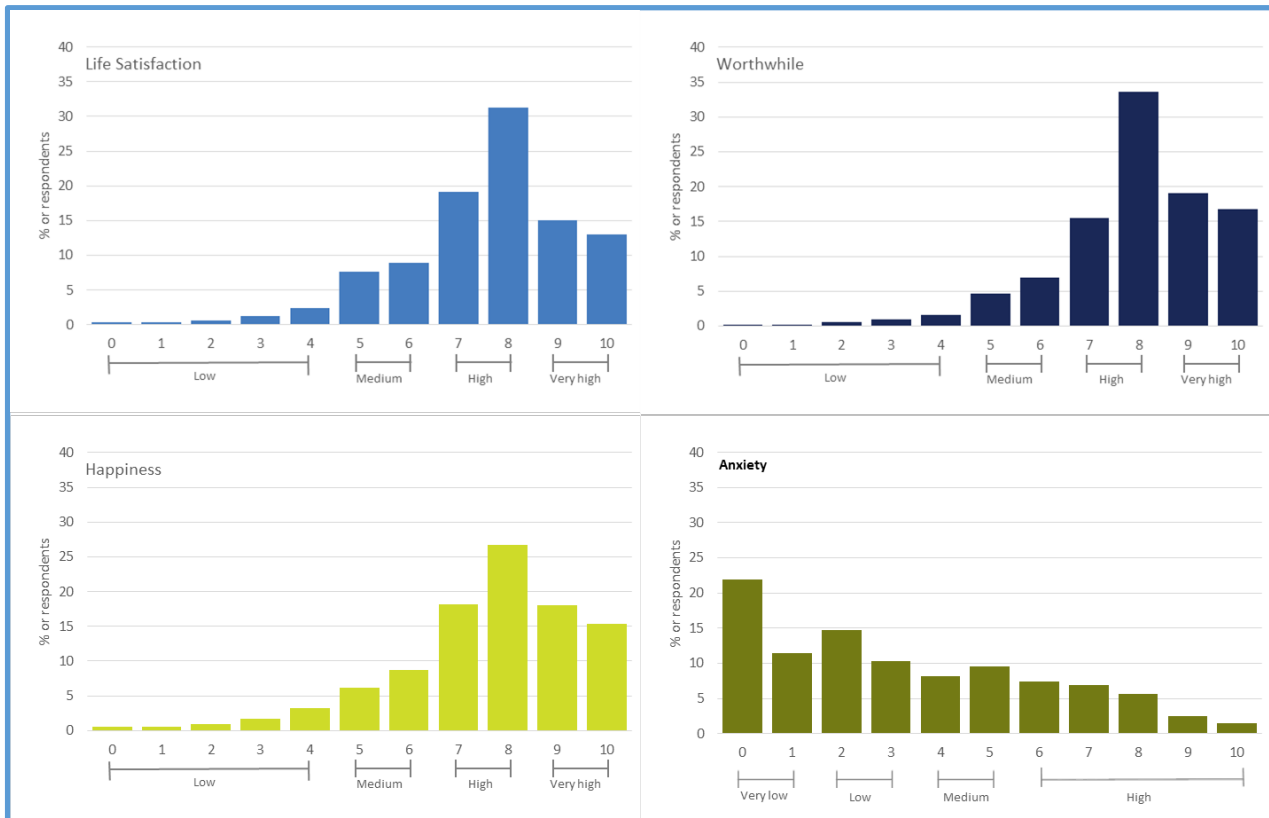
The proportion of people reporting 'Very high' (score of 9 or 10) levels of personal wellbeing, indicating better personal wellbeing was:

- 28% for 'life satisfaction'
- 36% for feeling that what you do in life is 'worthwhile'
- 33% for 'happiness'.
- 

In terms of 'anxiety', where a lower score indicates better personal wellbeing, 33% of people reported a 'Very low' score (0 or 1).

Figure 22 shows the distribution of scores for each personal wellbeing measure. All four personal wellbeing measures are skewed towards the positive end of the scale (note that a lower score in the anxiety scale represents better personal wellbeing).

**Figure 22: Proportion of respondents scoring 0 to 10 on each of the personal wellbeing scales**



For the period April-November 2020, the proportion of people reporting better personal wellbeing for ‘life satisfaction’, ‘worthwhile’ and ‘happiness’ were significantly lower than those reported by NISRA for the 2019/20 year, which indicates poorer wellbeing in these measures. (Table 4).

For the same time period, the proportion of people reporting better personal wellbeing for ‘anxiety’ (ie. those who reported a very low score of 0 or 1) was significantly lower than the 2019/20 figure, also signifying poorer wellbeing for this measure.

**Table 4: Comparing the proportion of people reporting better personal wellbeing with the latest NISRA published data for 2019/20**

	Very high (score of 9 or 10)			Very low Score (0 or 1)
Proportion of people reporting better wellbeing scores	Life Satisfaction	Worthwhile	Happiness	Anxiety <sup>#</sup>
Phases 1 – 6 (April-November 2020)	28%*	36%*	33%*	33%*
Personal Wellbeing in NI 19/20	36%*	41%*	39%*	41%*

\*A significant difference has been observed  
# A lower score indicates better wellbeing for anxiety.

## Loneliness

This measure asks people the question, ‘How often do you feel lonely?’ with the following 5 response options: ‘often/always’, ‘some of the time’, ‘occasionally’, ‘hardly ever’ and ‘never’. This question therefore measures the frequency with which people report feeling lonely, but not the level of loneliness they experience.

Some 5% of people interviewed in the period April to November 2020 reported feeling lonely ‘often/always’. This is the same as the NISRA published figure for 2019/20<sup>3</sup> (5%). However, the proportion of people reporting they ‘never’ feel lonely (27%) was significantly lower than the figure reported in the 2019/20 annual data (30%) (Table 5).

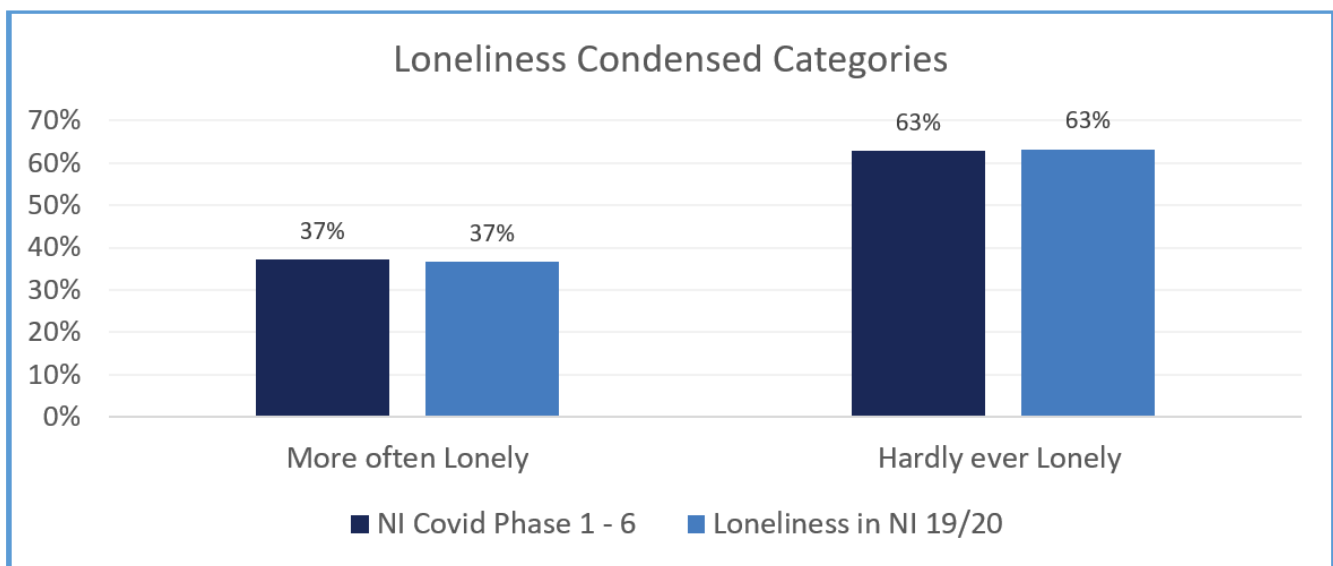
**Table 5: Frequency of loneliness in people aged 16+**

	Often/always	Some of the time	Occasionally	Hardly ever	Never
Total Phases 1 - 6	5%	14%	18%	36%	27%*
Loneliness in NI 2019/20	5%	12%	19%	33%	30%*

\*A significant difference has been observed

Some 37% of people reported feeling ‘more often lonely’ (condensed category<sup>4</sup>). This figure is the same as the 19/20 figure published by NISRA (37%) (Figure 23).

**Figure 23: Frequency of loneliness (Condensed Categories)**



<sup>3</sup> NISRA report on Loneliness in Northern Ireland 2019/20 - <https://www.nisra.gov.uk/publications/loneliness-northern-ireland-201920>

<sup>4</sup> For condensed categories responses ‘often/always’, ‘some of the time’ and ‘occasionally’ were grouped into a single category called ‘more often lonely’ and responses ‘hardly ever’ and ‘never’ were grouped into the category ‘hardly ever lonely’.

### Comparing the frequency of loneliness during the Pandemic

The proportion of people who felt ‘more often lonely’ during the lockdown period in May 2020 (43%) was significantly higher than when restrictions had eased in August 2020 (33%). Although the proportion of people who felt ‘more often lonely’ has risen between August and October (when new restrictions began), the difference is not statistically significant (Table 6).

**Table 6<sup>5</sup>: Comparing frequency of loneliness in people aged 16+ during the Pandemic**

Percentage of respondents feeling ‘More Often Lonely’ or ‘Hardly ever Lonely’ by month of interview	More often Lonely	Hardly ever Lonely
April 2020	36%	64%
May 2020	43%*	57%*
June 2020	39%	61%
July 2020	36%	64%
August 2020	33%*	67%*
September 2020	36%	64%
October 2020	39%	61%

### **Variation in frequency of loneliness by limiting longstanding illness**

Some 12% of respondents with a limiting longstanding illness reported feeling lonely ‘often/always’, this is significantly higher than those without a limiting longstanding illness (3%). In contrast 19% of those with a limiting longstanding illness reported ‘never’ feeling lonely, significantly lower than those without a limiting longstanding illness (30%) (Table 7).

**Table 7: Frequency of loneliness for people with and without a limiting longstanding illness**

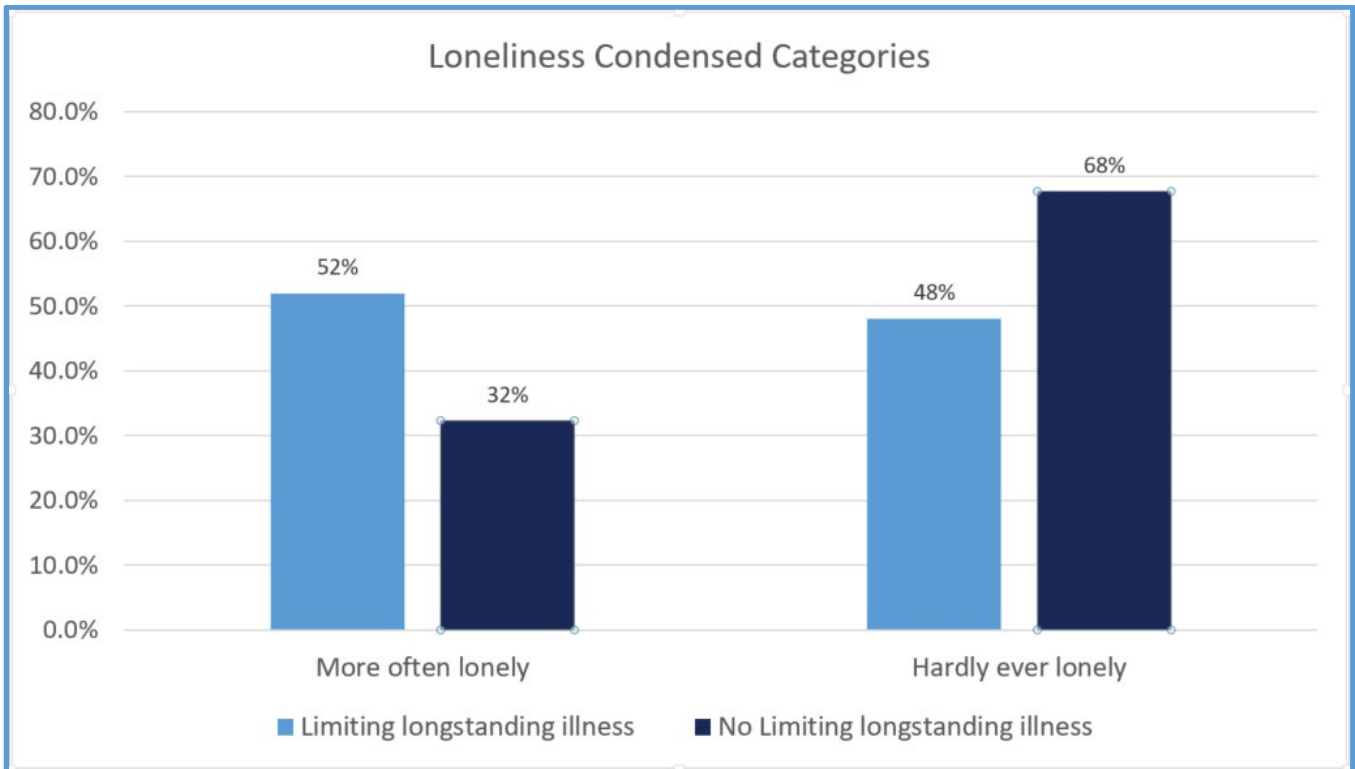
Frequency of loneliness	Often/always	Some of the time	Occasionally	Hardly ever	Never
With limiting longstanding illness	12%*	19%*	20%	29%*	19%*
Without limiting longstanding illness	3%*	12%*	18%	38%*	30%*
Total Phases 1 - 6	5%	14%	18%	36%	27%

\*A significant difference has been observed

Some 52% of respondents with a limiting longstanding illness reported feeling ‘more often lonely’, this is significantly higher than those without a limiting longstanding illness (32%) (Figure 24).

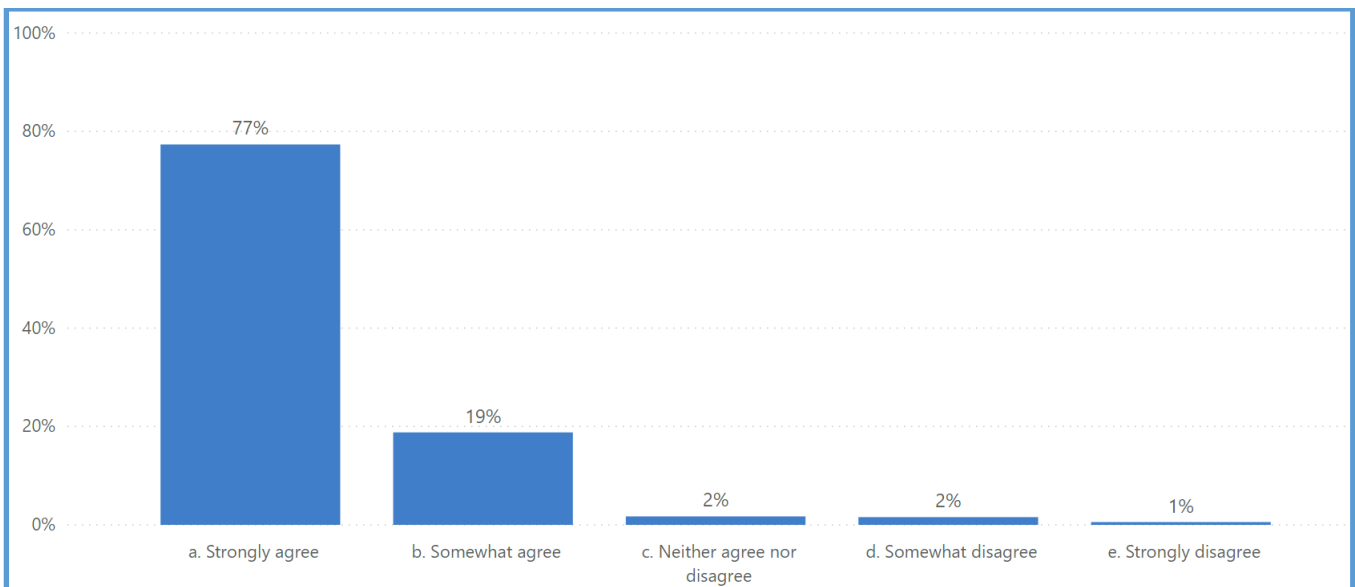
<sup>5</sup> Loneliness estimates for the months of April to August 2020 have been recalculated following the weighting of the data to include the additional months of September and October. Estimates for these months presented here will therefore differ from the previous publication.

**Figure 24: Estimated frequency of loneliness for people with and without a limiting longstanding illness (Condensed categories)**



Despite these feelings of loneliness, almost all people (96%) agreed that if they needed help, people would be there for them (Figure 25).

**Figure 25: Proportion of people who agreed or disagreed that if they needed help, people would be there for them**

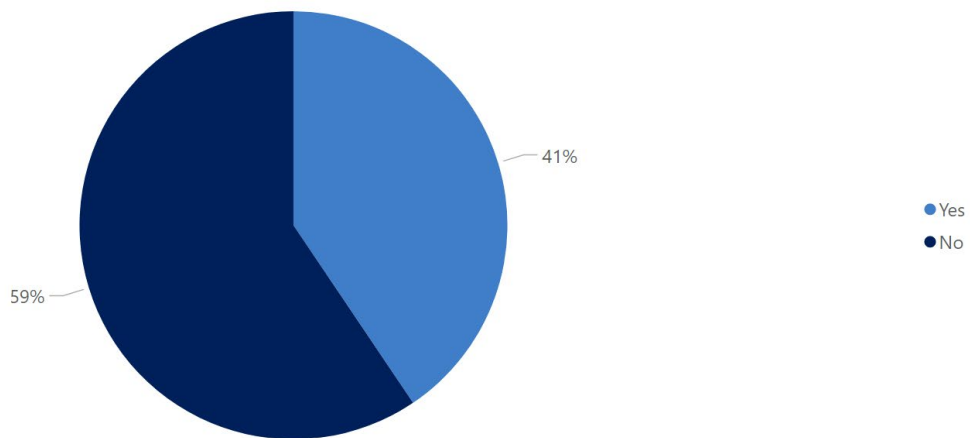


StopCOVIDNI App

In July 2020, the Department of Health Northern Ireland released an App called StopCOVIDNI to help contact tracing and stop the spread of Coronavirus (COVID-19). People interviewed in the period August-November 2020 were asked about this App.

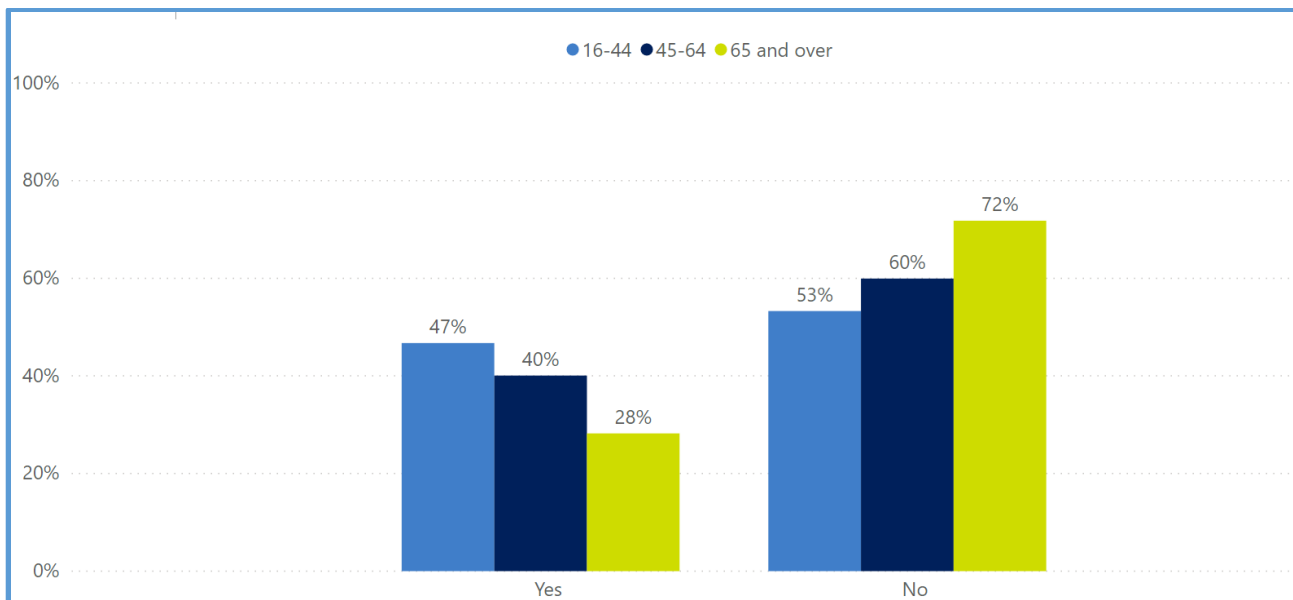
Just over two-fifths of people (41%) said that they had downloaded the StopCOVIDNI App at the time of interview (Figure 26).

**Figure 26: Proportion of people reported to have downloaded the StopCOVIDNI App**



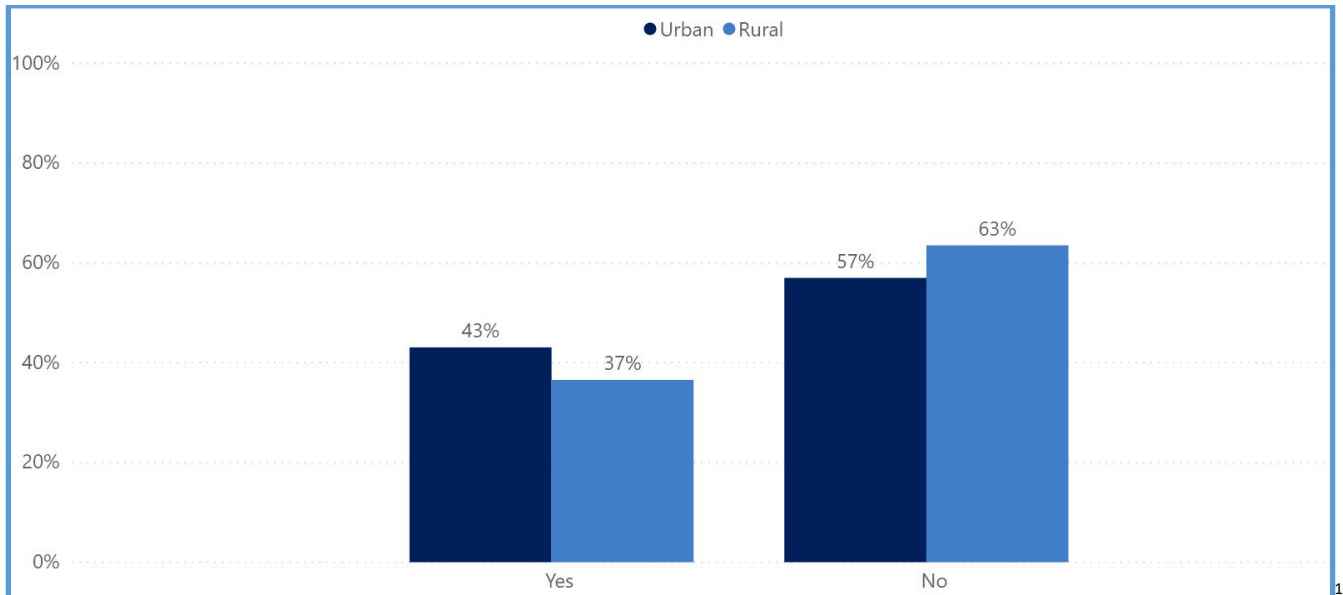
Additional analysis of the results showed that people in the younger age cohorts were significantly more likely to download the StopCOVIDNI App. Almost half of people (47%) aged 16-44 years had downloaded the StopCOVIDNI App. This was significantly higher than those aged 45-64 years (40%) and those aged 65 and over (28%) (Figure 27).

**Figure 27: Proportion of people reported to have downloaded the StopCOVIDNI App, by age group**



Over four in ten people (43%) living in urban areas reported that they had downloaded the App at the time of interview. This was significantly higher than those living in rural areas (37%) (Figure 28).

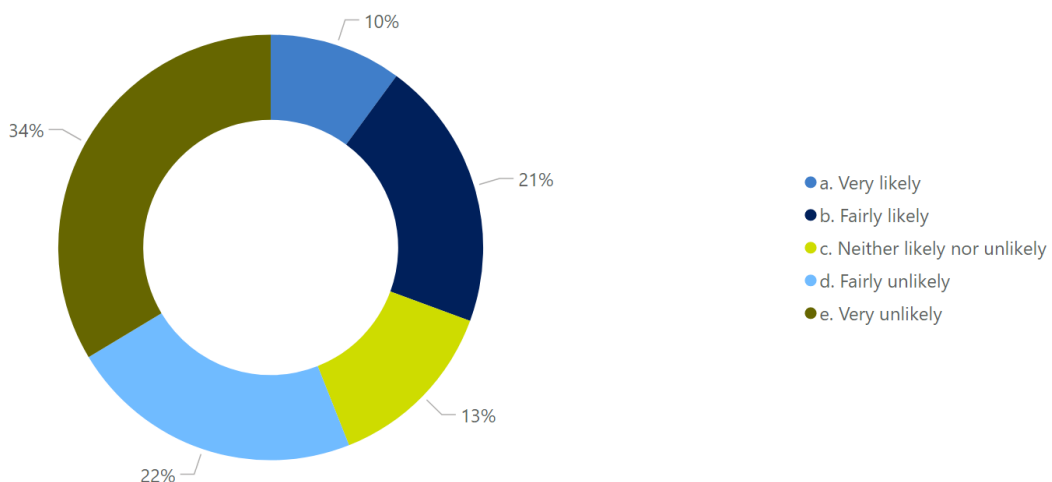
**Figure 28<sup>1</sup>: Proportion of people reported to have downloaded the StopCOVIDNI App, by urban/rural classification**



<sup>1</sup>The Urban/Rural analysis included is based on the 2015 NISRA Urban/Rural classification. Further information regarding urban/rural classification can be found on the NISRA webpage at; <https://www.nisra.gov.uk/support/geography/urban-rural-classification>.

Those people who had not downloaded the StopCOVIDNI App at the time of interview were asked a further question about how likely or unlikely they would be to download the StopCOVIDNI App. Just over half (56%) stated that they would be unlikely to download the StopCOVIDNI App, whilst 13% reported being neither likely nor unlikely to do so but 31% said they were likely to download the app (Figure 29).

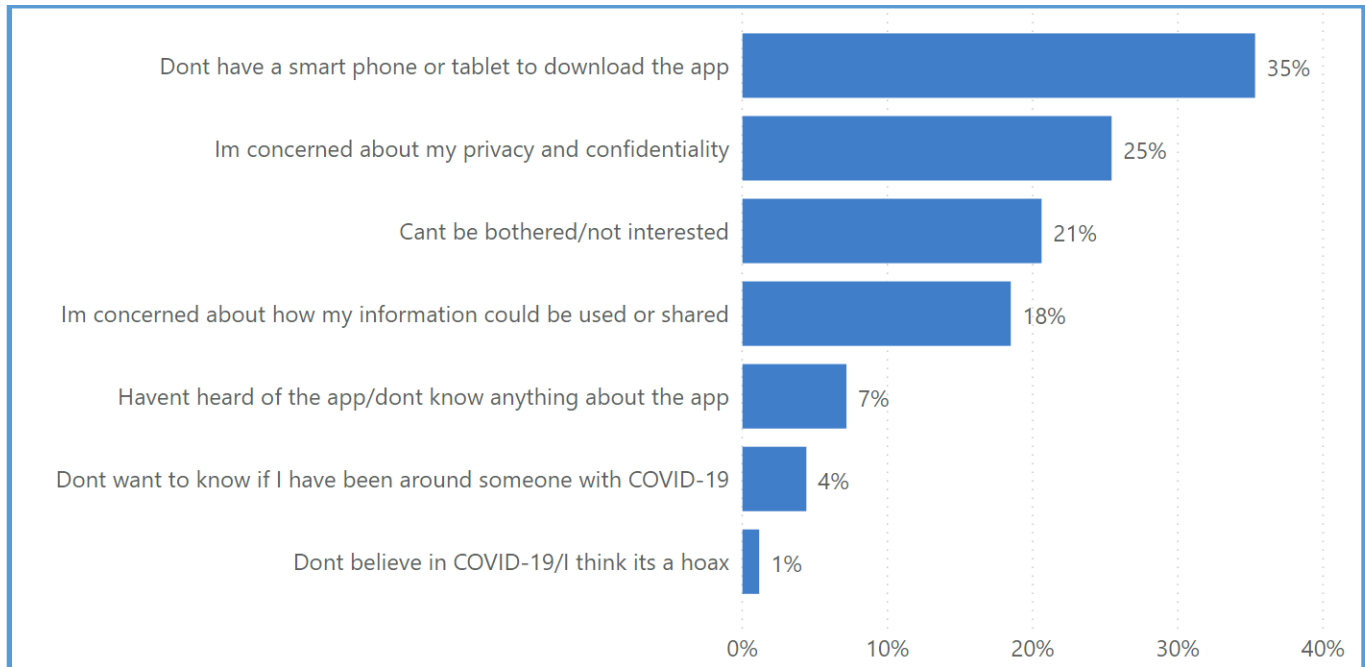
**Figure 29: Proportion of those people who had not downloaded the App at time of interview who would be likely or unlikely to download the StopCOVIDNI App**





The most common reasons given by those people who said they were unlikely to download the StopCOVIDNI App were they didn't have a smartphone or tablet (35%), concerns about their privacy and confidentiality (25%) or they could not be bothered or they were not interested (21%). (Figure 30).

**Figure 30<sup>1</sup>: Reasons people are unlikely to download the StopCOVIDNI App**



<sup>1</sup>Multiple responses allowed.

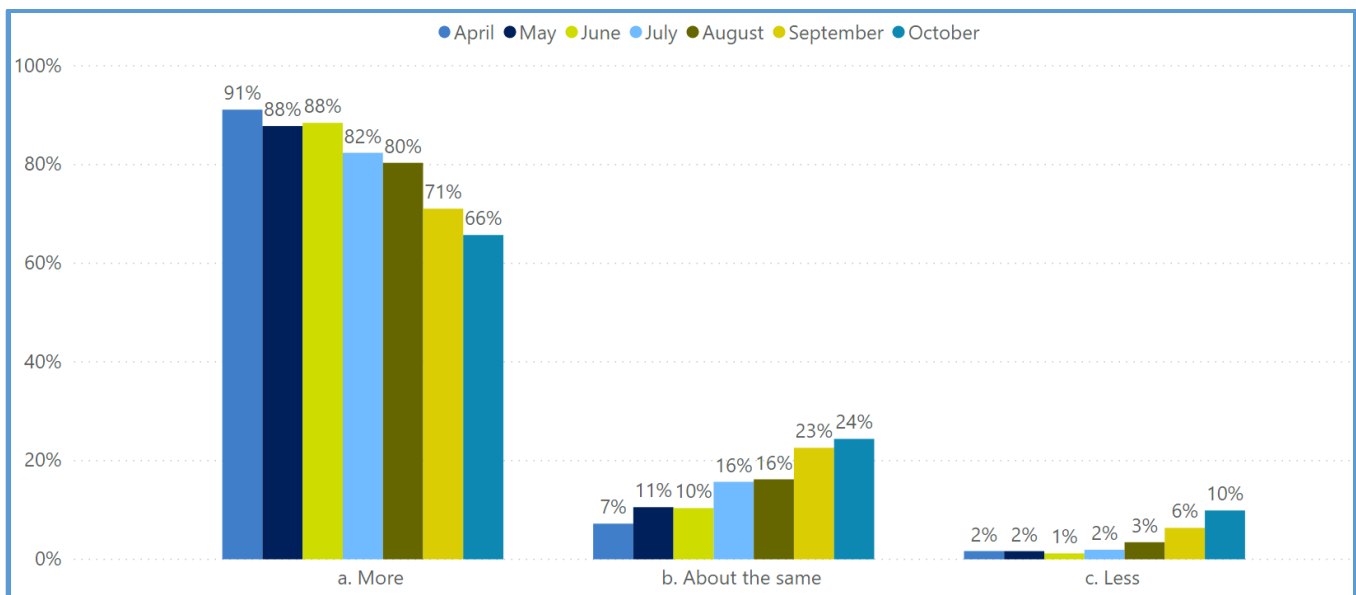
## Community Support and Safety

There was a general good feeling amongst people that there would be a high degree of community support if they needed it because of the Coronavirus (COVID-19) outbreak.

Just under eight out of ten people (79%) agreed that if they needed help, other local community members would help them during the Coronavirus (COVID-19) outbreak.

The proportion of people who said that people were doing more to help others during the Coronavirus (COVID-19) outbreak decreased over the pandemic period from 91% in April to 66% in October (Figure 31).

**Figure 31<sup>1</sup>: Proportion of people who think people are doing things to help others more, about the same or less since the Coronavirus (COVID-19) outbreak, by month of interview**



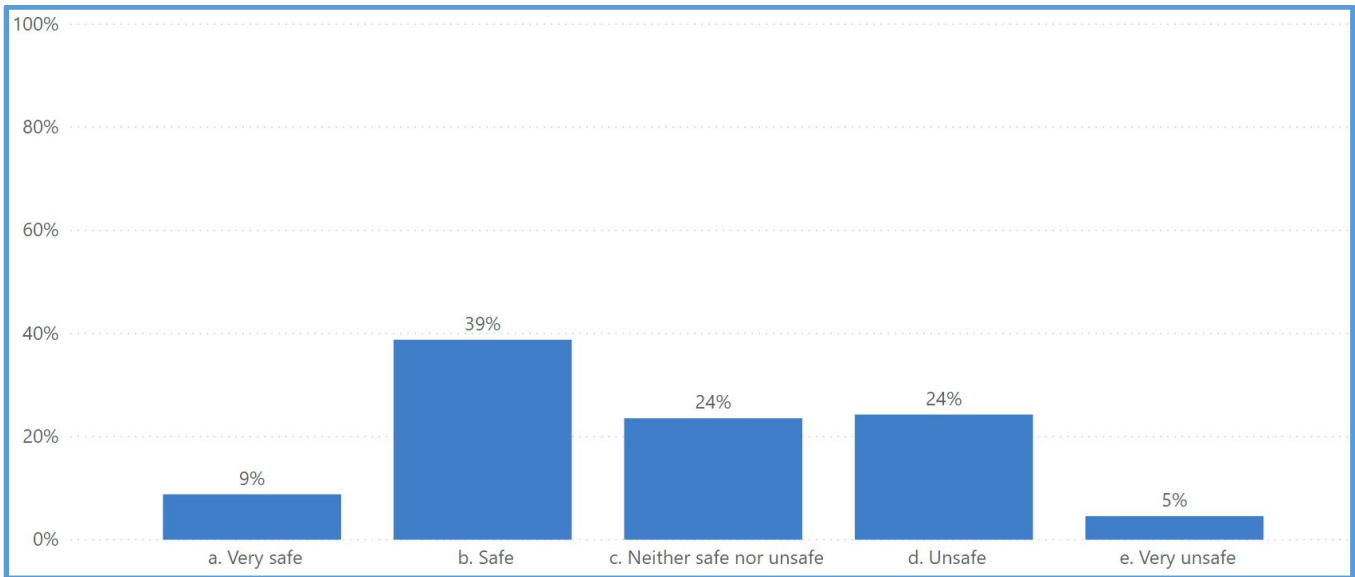
<sup>1</sup> The number of interviews carried out after 31<sup>st</sup> October 2020 are too low to report on separately in these results.

People interviewed from June-November 2020 were asked about how safe or unsafe they felt inside and outside of their homes.

The vast majority of people (97%) reported feeling safe in their home since the Coronavirus (COVID-19) outbreak.

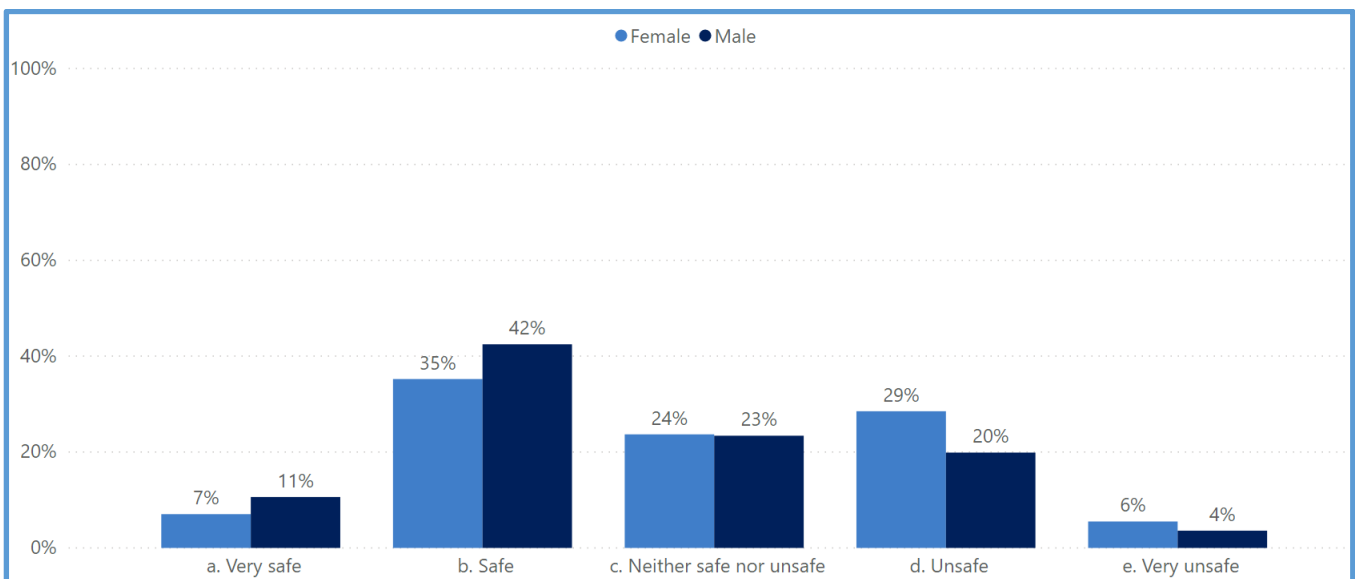
Just under half of people (48%) said they felt safe outside their home since the Coronavirus (COVID-19) outbreak, but more than one quarter (29%) reported they felt unsafe (Figure 32).

**Figure 32: Proportion of people who feel safe or unsafe outside their home due to the Coronavirus (COVID-19) outbreak**



The proportion of men who said they felt safe outside their home since the Coronavirus (COVID-19) outbreak (53%) was significantly higher than the proportion of women reporting the same (42%) (Figure 33).

**Figure 33: Proportion of people who feel safe or unsafe outside their home due to the Coronavirus (COVID-19) outbreak, by sex**



Information and Advice

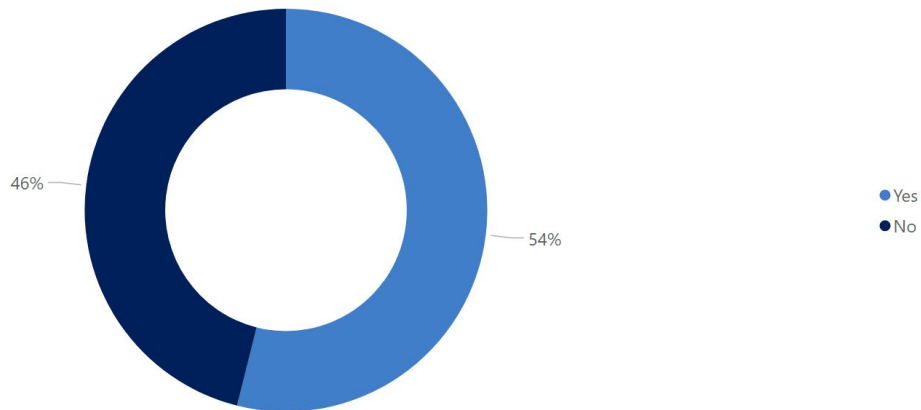
Practically all people (95%) felt they had received enough information on how to protect themselves from Coronavirus (COVID-19).

**Easing of stay-at home measures**

People who were interviewed in the period June-November 2020 were asked some questions about the easing of restrictions and whether or not they supported the easing of stay-at-home measures.

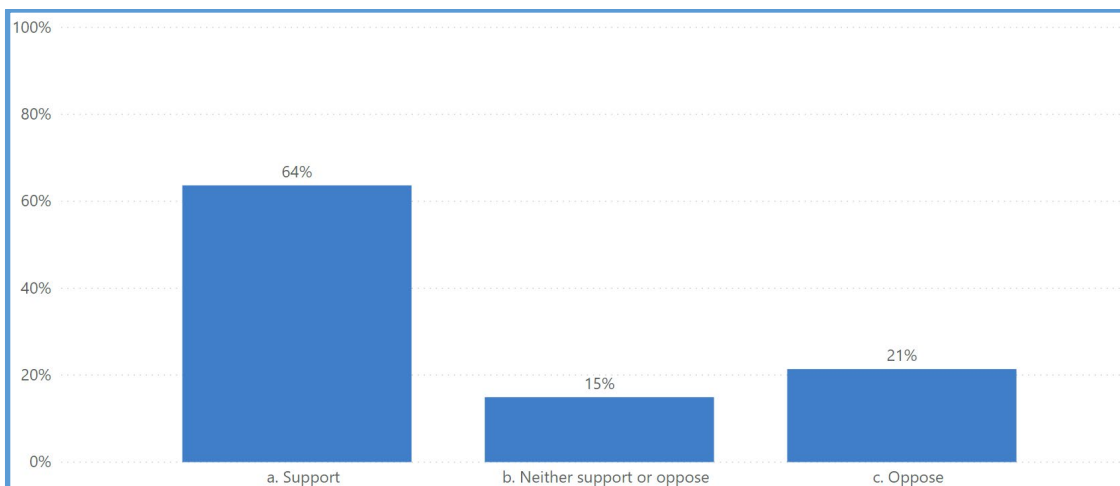
Just over half of people (54%) said that they had enough information about Government plans for the easing of restrictions due to the Coronavirus (COVID-19) outbreak, but 46% felt they did not (Figure 34).

**Figure 34: Awareness of government plans for easing restrictions due to the Coronavirus (COVID-19) outbreak**



Two thirds of people (64%) supported the easing of stay-at-home measures put in place in Northern Ireland, but over one in five people (21%) did not (Figure 35).

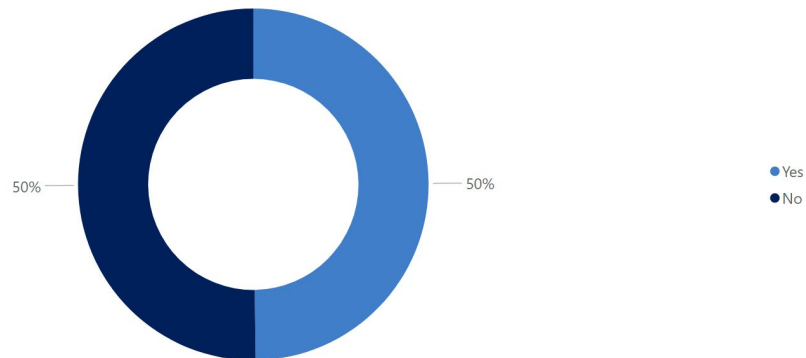
**Figure 35: Proportion of people who supported or opposed the easing of stay-at-home measures put in place in Northern Ireland**



Socialising and Support Bubbles

In the period August-November 2020, people were asked about socialising with family and friends at home. One in two people (50%) interviewed in that period reported having family or friends visit them at home in the seven days prior to interview (Figure 36).

**Figure 36: Proportion of people who reported having had friends or family visit them at home, in the seven days prior to interview**

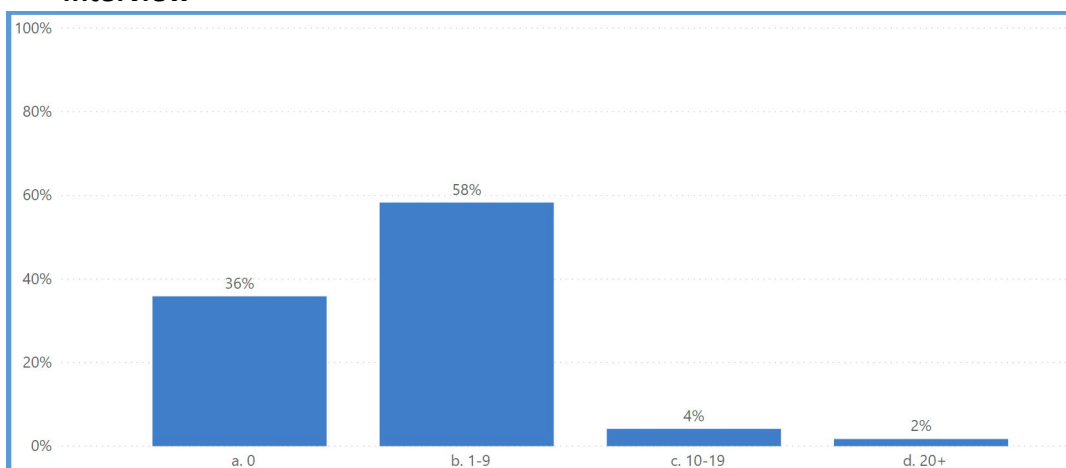


Additional analysis of the results showed that 59% of those age 65 and over had family and friends visit them at home. This was significantly higher than those aged 16-44 years (49%) and those aged 45-64 years (45%).

The proportion of people who reported having had family or friends visit them at home decreased from 66% in August to 36% in October.

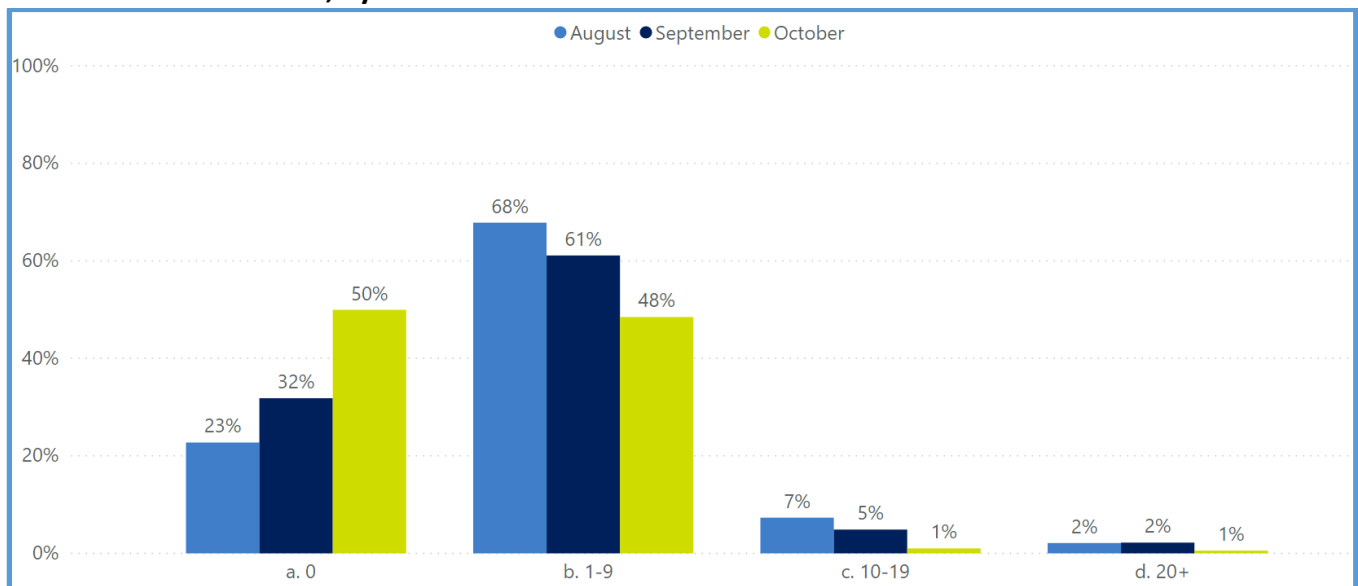
People were then asked how many people in total they had met up with to socialise in the seven days prior to interview. This could be in an indoor or outdoor environment. Just over a third of people (36%) had not met up with anyone, 58% had met up with 1-9 people, 4% met up with 10-19 people and 2% said they had met up more than 20 people to socialise (Figure 37).

**Figure 37: Proportion of people who met up with others to socialise, in the seven days prior to interview**



The proportion of people who reported not meeting up with anyone to socialise, in the seven days prior to interview, was significantly higher in October (50%) compared to August (23%) and September (32%) (Figure 38).

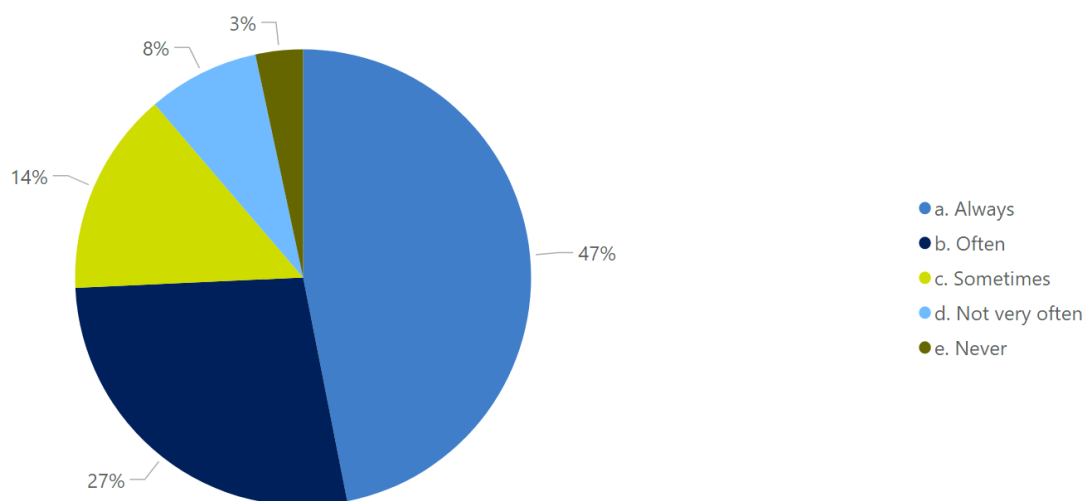
**Figure 38<sup>1</sup>: Proportion of people who met up with others to socialise, in the seven days prior to interview, by month of interview**



<sup>1</sup> The number of interviews carried out after 31<sup>st</sup> October 2020 are too low to report on separately in these results.

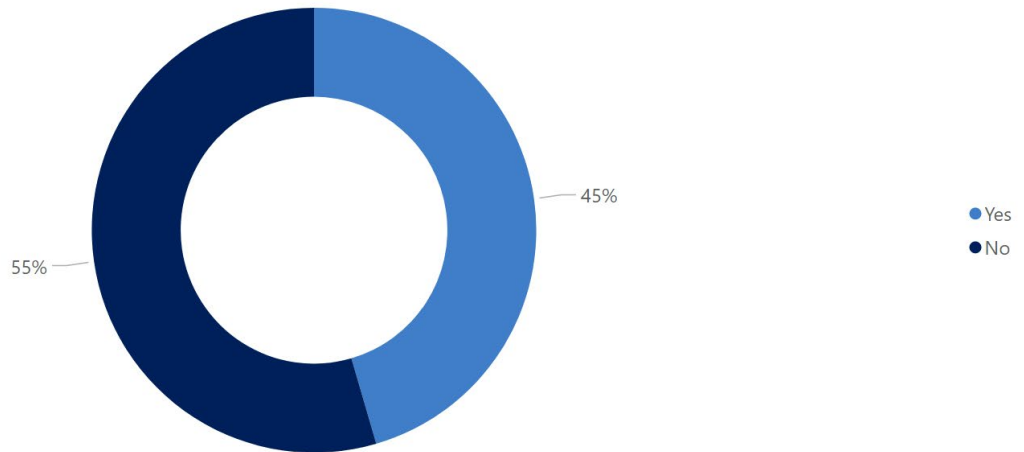
Almost three quarters of those people (74%) who met up with others to socialise said that they maintained social distancing always or often when they did so. However, just over one in ten people (11%) stated that they did not maintain social distancing at all or not very often when they met up with others to socialise (Figure 39).

**Figure 39: Proportion of people who maintained social distancing when meeting up with others to socialise, in the seven days prior to interview**



Those people interviewed in the period September-November 2020 were also asked about forming a support bubble with another household. Slightly less than half of people (45%) reported having formed a support bubble with another household, whilst over half (55%) had not (Figure 40).

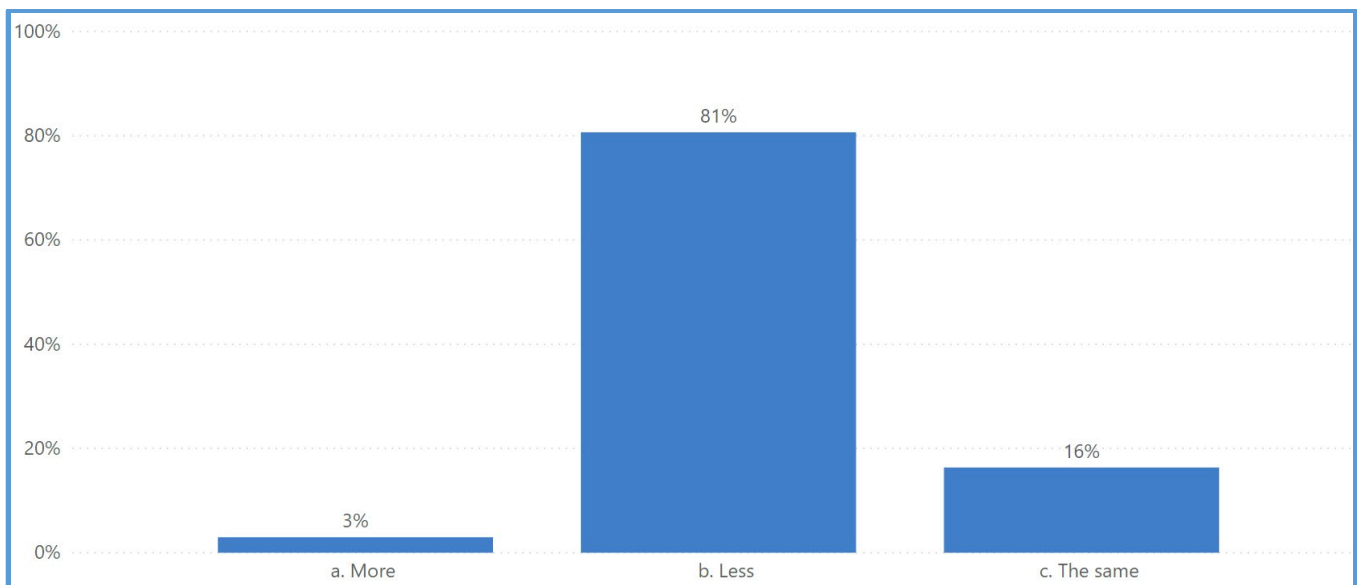
**Figure 40: Proportion of people who formed a support bubble with another household**



Respondents were asked some questions about whether they were seeing or visiting people outside of their household more, less or about the same as they did before the Coronavirus (COVID-19) outbreak.

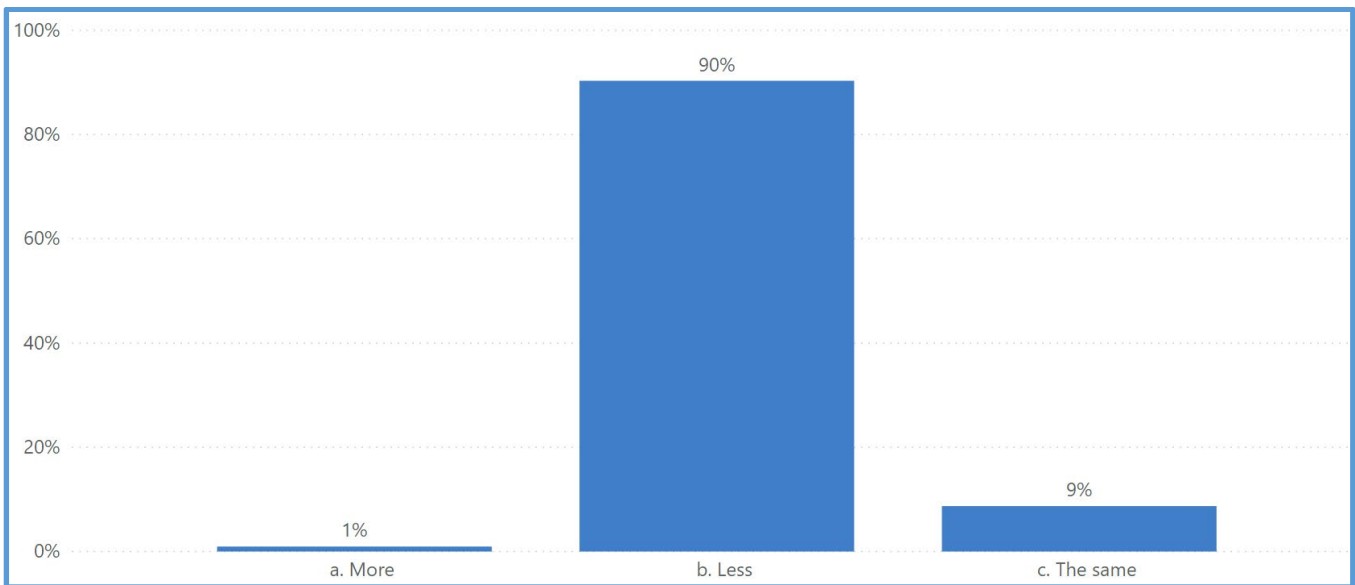
The vast majority of people (81%) reported seeing or visiting family members, living outside their household, less than they did before the Coronavirus (COVID-19) outbreak (Figure 41).

**Figure 41: Proportion of people seeing or visiting family members, living outside their household more, less or about the same as before the Coronavirus (COVID-19) outbreak**



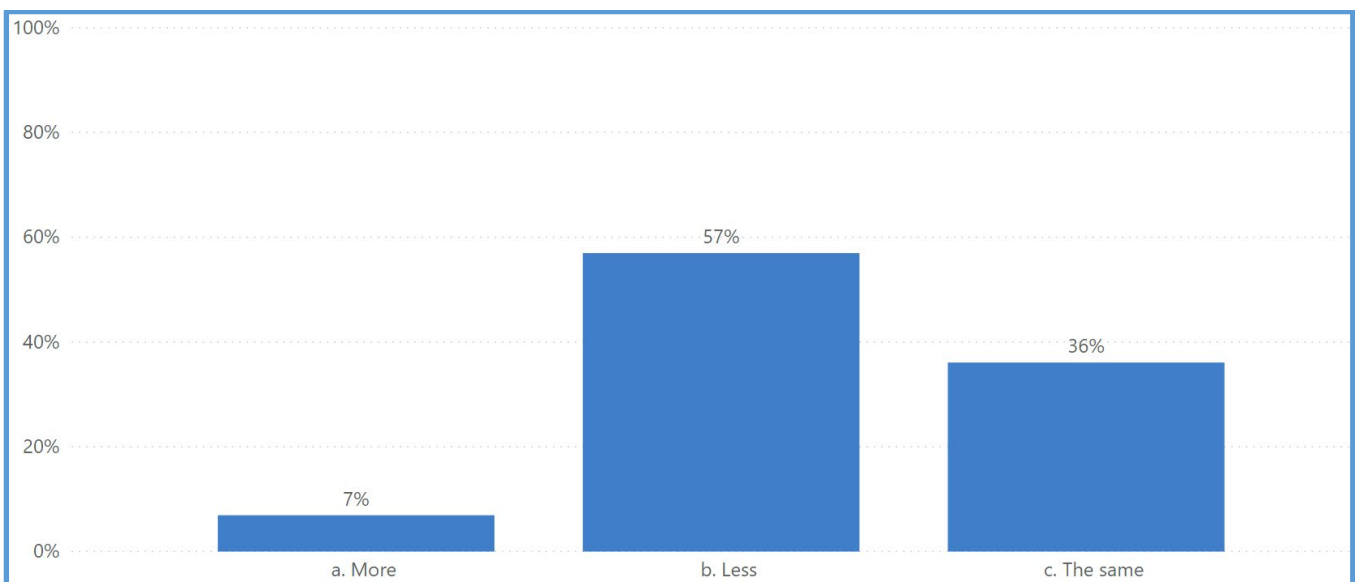
A higher proportion (90%) reported seeing or visiting friends less than they did before the Coronavirus (COVID-19) outbreak (Figure 42).

**Figure 42: Proportion of people seeing or visiting friends more, less or about the same as before the Coronavirus (COVID-19) outbreak**



Some 57% of people reported seeing or visiting neighbours less than they did before the Coronavirus (COVID-19) outbreak (Figure 43).

**Figure 43: Proportion of people seeing or visiting neighbours more, less or about the same as before the Coronavirus (COVID-19) outbreak**

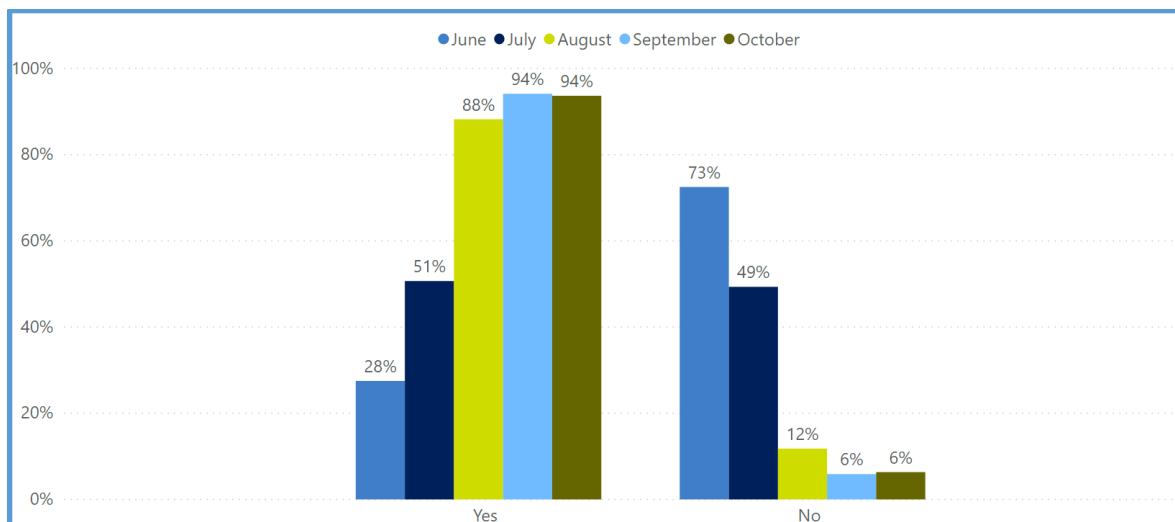




## Face Coverings

In the period June-November 2020, people in the survey were asked about using face coverings outside their home to help slow the spread of Coronavirus (COVID-19). The use of face coverings outside the home has increased significantly from 28% in June to 94% in October (Figure 44).

**Figure 44<sup>1</sup>:** Proportion of people, who had used a face covering when outside their home to help slow the spread of Coronavirus (COVID-19) in the seven days prior to interview, by month of interview

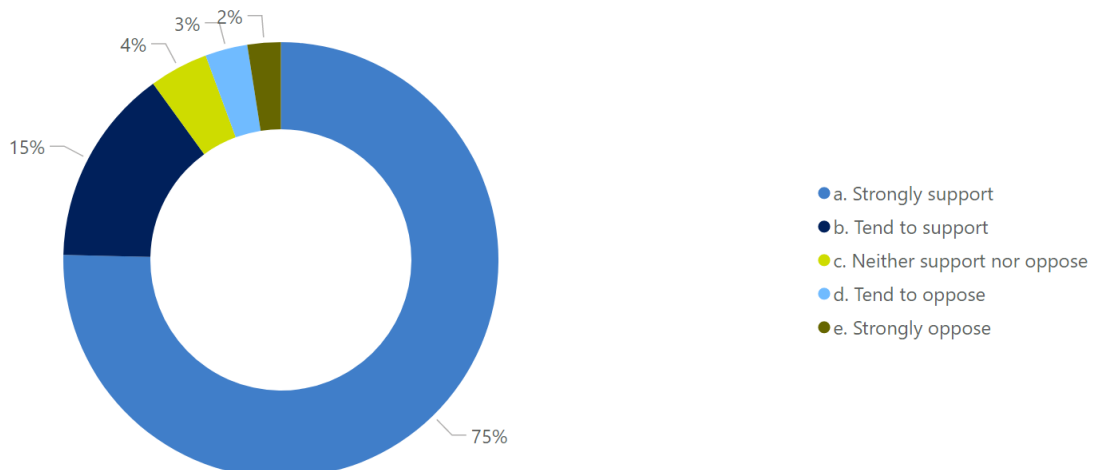


<sup>1</sup> The number of interviews carried out after 31<sup>st</sup> October 2020 are too low to report on separately in these results.

Those people who were interviewed in the period August-November 2020 were also asked about supporting or opposing rules making it mandatory to wear face coverings in shops and supermarkets.

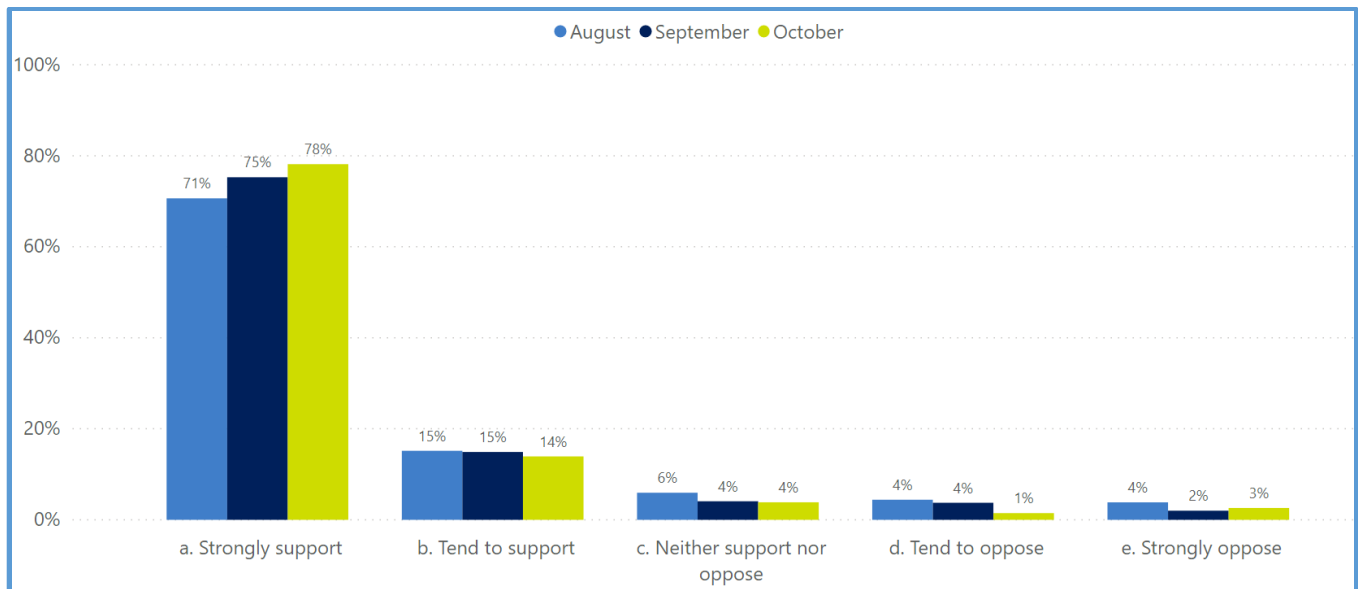
Overall, 90% said they supported the rules making it mandatory to wear face coverings in shops and supermarkets (Figure 45).

**Figure 45:** Proportion of people who supported or opposed rules making the wearing of face coverings in shops and supermarkets mandatory



Support for the mandatory use of face coverings in shops and supermarkets increased from 86% in August to 92% in October (Figure 46).

**Figure 46<sup>1</sup>: Proportion of people who supported or opposed rules making the wearing of face coverings in shops and supermarkets mandatory, by month of interview**



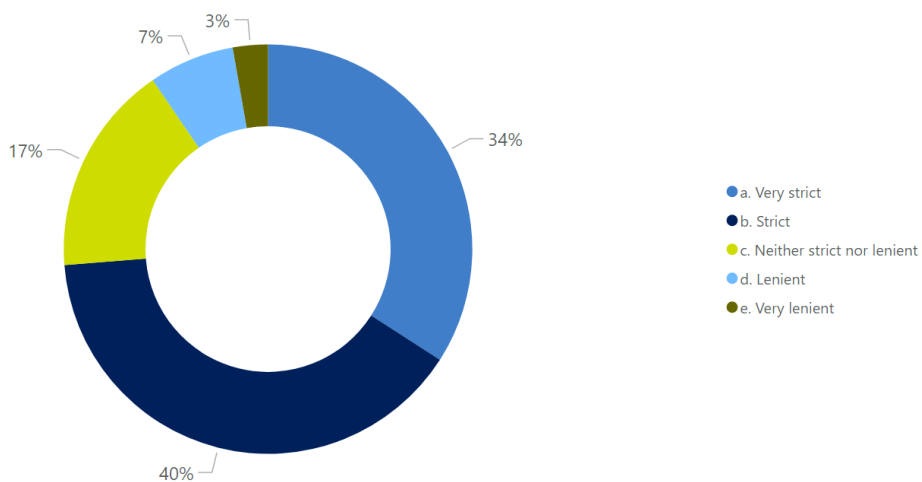
<sup>1</sup> The number of interviews carried out after 31<sup>st</sup> October 2020 are too low to report on separately in these results.

Enforcement of Coronavirus (COVID-19) Regulations

People interviewed in the period September-November 2020 were asked about the enforcement of rules to help slow the spread of Coronavirus (COVID-19).

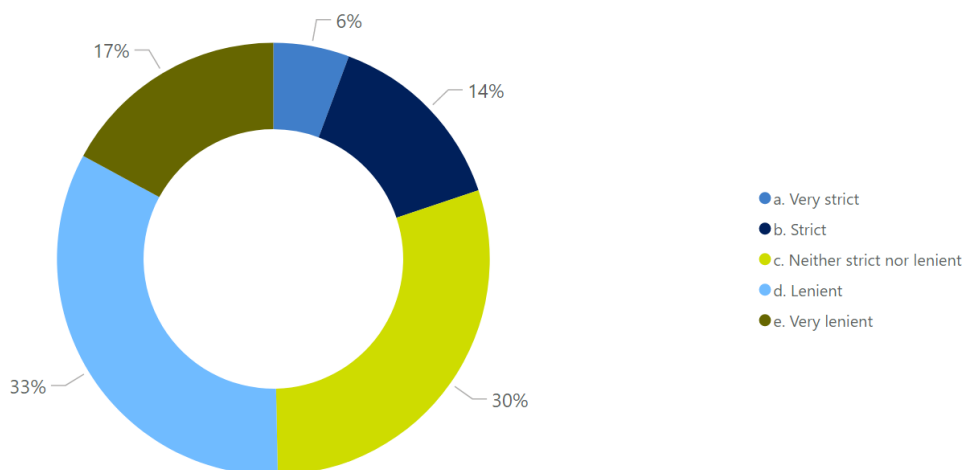
Almost three quarters of people (74%) said that police should be strict in enforcing rules to help reduce the spread of Coronavirus (COVID-19) but one in ten people (10%) said they should be lenient (Figure 47).

**Figure 47: Proportion of people who thought how strict or lenient police should be in enforcing rules to help reduce the spread of Coronavirus (COVID-19)**



One in five people (20%) thought that police were strict in enforcing rules to help reduce the spread of Coronavirus (COVID-19) but half of people (50%) thought they were lenient (Figure 48).

**Figure 48: Proportion of people who thought how strict or lenient police are in enforcing rules to help reduce the spread of Coronavirus (COVID-19)**



## [Further Information](#)

NISRA would like to thank the survey interviewers and members of public who collected and provided the data for this report.

## [Results and Tables](#)

Each chart in the report is also supported by an excel spreadsheet which provides confidence intervals for each estimate. Additional tables for other variables asked in Phases 1-6 have been also been published in this release, where validated data is of a sufficient quality to release. A visual representation of these findings can also be found at the following webpage:

<https://www.nisra.gov.uk/publications/nisra-coronavirus-covid-19-opinion-survey>

## [Technical Report](#)

The technical report includes further details on the sampling method, data collection mode, respondent selection, fieldwork, weighting, sampling error, confidence intervals, significant differences and strengths and limitations of the survey:

<https://www.nisra.gov.uk/publications/nisra-coronavirus-covid-19-opinion-survey>

## [Previous Publications](#)

Previous publications of the NISRA Coronavirus (COVID-19) Opinion Survey Key Findings are available at:  
Phase 1:

<https://www.nisra.gov.uk/publications/nisra-coronavirus-covid-19-opinion-survey-phase-1-results>

Phases 1 and 2:

<https://www.nisra.gov.uk/publications/nisra-coronavirus-covid-19-opinion-survey-phases-1-and-2-results>

Phases 1 to 4:

<https://www.nisra.gov.uk/publications/nisra-coronavirus-covid-19-opinion-survey-phases-1-4-results>

## [Related Links to Coronavirus \(COVID-19\) Statistics](#)

The latest data and analysis on Coronavirus (COVID-19) in Northern Ireland and its effects on the economy and society can be found at the following link:

<https://www.nisra.gov.uk/statistics/ni-summary-statistics/coronavirus-covid-19-statistics>

## [Further Research](#)

NISRA is currently working with research partners on the Northern Ireland Coronavirus (COVID-19) Infection Survey. The household study will help provide a better understanding of the Coronavirus and help the government work out how to manage the pandemic better moving forward. The latest findings for Northern Ireland from the Coronavirus (COVID-19) Infection Survey can be found at: <https://www.health-ni.gov.uk/publications/covid-19-infection-survey>

Further results from the NISRA Coronavirus (COVID-19) Opinion Survey will be published periodically as more data becomes available when fieldwork periods close.

## [Contacts](#)

We welcome feedback from users. For more information about the data used in this publication, please contact the following:

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