
How has Lockdown impacted on wellbeing and access to exercise



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Thanks to our research and report author Phoebe Dartnell - October 2021



Summary

It has been well documented by us and others that the pandemic has affected people's health and wellbeing and that many people's health has deteriorated.

'The lock down has led to a deterioration in maintaining independent living'.

Exercise is a known contributor to Health and Wellbeing, as access to regular exercise supports peoples emotional and physical health as well as being preventative.

Exercise has a recovery role in relation to many of the major disease categories such as Cancer. It is known that even short periods of moderate physical activity can help to improve health and fitness, and emotional wellbeing which means that the person feels more in control of their life.

This report compares pre-pandemic baseline survey data (100 responses) from August/September 2019 with post lockdown survey data (100 responses) during April 2021. These surveys asked West Sussex residents their views about access to exercise, their self-perception of their health and wellbeing and access to health and wellbeing services pre and post pandemic.

The pre-pandemic survey showed a strong relationship between the levels of exercise and self-perception of health and wellbeing across all age groups, which held in the post survey findings. However, post lockdown it was noted there was a significant drop in how positively individuals perceive their health and wellbeing, across all age groups and all levels of exercise.

The more exercise people did the greater their self-perception of health and wellbeing.

This information is important as we begin to recover from the pandemic and as our National Health Service¹, and Public Health are asking people to take more responsibility for their own health and wellbeing needs.

Key findings

- Less than half of respondents stated they are physically (n44) and mentally (n45) healthy post pandemic this is a decrease from (n67) and (n64) pre-pandemic.
- 30% of respondents reported physical and 26% mental health and wellbeing concerns.

¹ <https://www.england.nhs.uk/blog/what-does-self-care-mean-and-how-can-it-help/>



- Coming out of lockdown, 86 respondents reported they did some form of exercise every week (down from n96 pre-pandemic) with the majority, n59 (down from n68 pre-pandemic) doing more than 4 hours per week.
- Pre-pandemic only 4% of respondents did less than 1 hour (of exercise) this increased to 14% coming out of lockdown.
- Working Age respondents aged 26 - 49-years had a less positive perception of their health and wellbeing between the two timeframes.
- Many people reported that the lack of access to exercise during the pandemic had impacted on their social lives, which has negatively affected their mental and physical health.
- 65 respondents felt they are not doing as much exercise as they would like or feel they need to which is similar to pre-pandemic levels.
- 16% of respondents informed us that they have lost confidence to go out and exercise since the lockdowns.
- 22 respondents informed us that they have been unable to access health and wellbeing services of some kind during the pandemic.

Recommendations

The pandemic reinforced what is already known - restricting access to exercise quickly impacts on people's health and wellbeing. The Global Burden of Disease² statistics for Start Well and Live Well age groups suggest that approximately *60% of premature deaths could be positively impacted by sport and exercise.*

For the Age Well category, the impact of the lack of exercise on increases in *Falls and Frailty* is a significant factor - not due to other factors such as poor lighting, dizziness, poor vision.

As we learn and recover from the pandemic, we make the following recommendations to support self-care in all age groups:



Collaboration of organisations and professionals

To maximize the uptake of exercise opportunities, clear and appropriate links and consistent messaging is needed throughout healthcare -

² Institute for health metrics and evaluation (2017)



professionals, statutory services, care settings, social prescribers, and the community and voluntary sectors to reinforce these initiatives.

It is important to support the promotion and investment of local community and voluntary group exercise opportunities. One reported barrier is access to affordable local community transport, maybe financial subsidies for those on low income could be provided.

It is important that exercise opportunities continue during any future lockdowns and adequately promoted because of the emotional and mental health benefits for all age groups.



RECOMMENDATION

Raising awareness and informing the public

Effective engagement and information, to raise awareness, of appropriate exercise opportunities to enable individuals to take greater ownership and responsibility for their physical, mental health and wellbeing.



RECOMMENDATION

Communications

Our survey found that using language that is specific for the individual is vital. For example, people's interpretation of "prescribed" and "recommended", were different: One person stated: *they associate prescriptions with medicines only* another stated: *they felt "recommendations" were optional.*

The language used and communication methodology for this topic is important for the whole of society. Whilst a 'Hobby' sounds fun 'Sport and Exercise' may sound worrying to some people. The outcomes of being active are the same, whatever label they are given but the language needs to be appropriate.



RECOMMENDATION

Accessible and Achievable

Awareness momentum since the pandemic for exercise has grown and become more prominent in mainstream media. For example, ³Radio 4 "All in the Mind" programme highlighted the success of local community walking or jogging groups for people living with emotional and mental health issues. Additionally, several TV programmes, including Michael Mosley's "The Truth about Exercise" and the BBC's "Easy Ways to Live Well" explore the benefits of accessible language and setting goals that are achievable, as ways to increase confidence and motivation.

³ BBC Radio 4 All in the Mind downloads (2019)





Rethinking Social Care, Education and Leisure priorities throughout life

Our survey findings are reflective of other studies which have shown that exercise strategies advertised as a form of prevention or to support medical treatments reinforced with support from the wider social structures such as workplaces, schools and the community and voluntary sector are more likely to be accessed.

Examples from the surveys:

Considerable effort and emphasis are placed on antenatal classes, but much less on supporting families to cook well and how to exercise, which could have a longer lasting impact for the whole family.

Physical Education - some respondents felt they didn't get enough exercise in schools, particularly in the lead-up to exams when Physical Education lessons are often cut for extra academic study. Yet physical exercise could be beneficial for students experiencing stress and anxiety.

Food Technology lessons - Those in the 14 - 25 age categories stated they had 1 or 2 terms of exercise lessons in years 7 or 8 before having to drop the subject in favour of "academic" subjects, that would be looked upon more favourably by employers and universities. Most stated they enjoyed food technology, but it did not focus on how to cook and budget for healthy meals which could be useful in later life and better support their healthy eating behaviors in adulthood.

Term time issue - young people, even those involved in regular team sport found they struggled during school holidays when suddenly they have no exercise routines.

Accessibility for all - there has been an increase in the growth in "walking" sports such as football and netball, although still competitive, the emphasis is on exercise and social fulfilment. These walking groups are for mixed ages and abilities. Also, taster sessions for exercises people new to the topic, there are options for all types of need and interest from aqua natal to Paracise, indoor bowls and chair-based aerobics. There are simple schemes such as the nationally sponsored 'Couch to 5k'⁴ which can be accessed by almost everyone with little equipment and at no cost.

Within West Sussex each District Health and Wellbeing Team provide important links to other determinants, nutrition, health awareness, smoking and alcohol support and advice for example.

In summary, local communities and neighborhoods need to promote and enable participation in exercise to support local people's physical and mental health. As

⁴ NHS England - Get fit for free (2017)



stated by the Kings Fund⁵ *'many people could self-care if they are shown how to.'* As many chronic conditions benefit from a planned exercise routine.

Sports England suggests that the financial saving that access to *'regular participation in sport can save between £1,750 and £6,900 in healthcare costs per person.'*⁶ But the need is greater than purely health terms, as further academic research investment is also required. When one considers the higher quality of life benefits, it would be irresponsible not to support, more proactively exercise and health and wellbeing.

⁵ Kings Fund (2012)

⁶Sports England Active Lives Survey



Introduction

During 14-28 April 2021 one hundred (100) West Sussex residents aged 14 years and over completed a short survey. The survey looked at the impact of the pandemic lockdowns on people's access to exercise and the effect on their health and wellbeing.

The purpose of the survey was to understand from people if the pandemic lockdowns and restrictions had impacted on their:

- ability to exercise
- health and wellbeing
- access to health and wellbeing services.

The April survey mirrored questions used in August/September 2019, - again one hundred residents completed the survey, not necessarily the same people completing both surveys - which has been used as baseline data for comparison.

This report details the survey's findings and comparison between the two surveys of the impact of the pandemic on wellbeing and access to exercise.

Respondents were categorised using the West Sussex County Council's Health and Wellbeing Strategy Groups of Start Well (14-25), Live Well (26-49), Age Well (50+). Given the requirement for those aged over 70 years to shield, the Age Well category was broken down into two age groups 50-69 years and 70+ years.

We would like to say '*thank you*' to all who completed the surveys.



Why is access to exercise important?

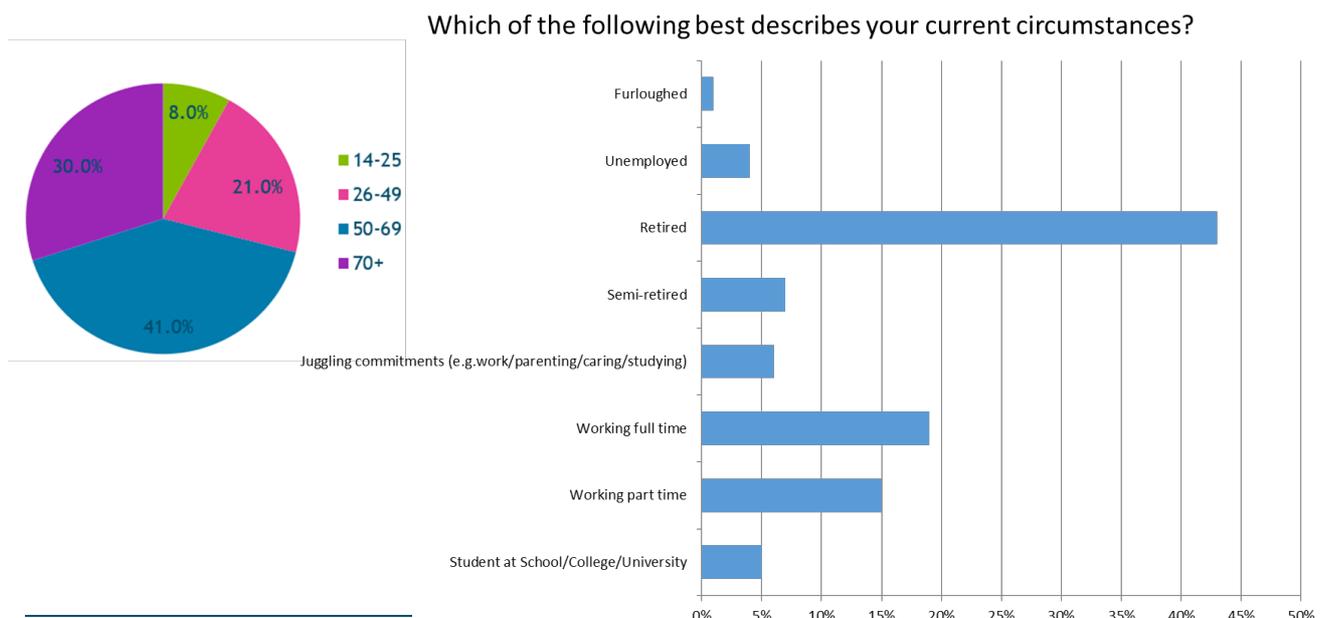
Exercise is potentially effective for general health as well as prevention, rehabilitation, and recovery from treatment for physical and mental illness.

Exercise helps to improve many health conditions such as heart disease, blood pressure, blood fat levels and helps to keep bones strong, for example. Exercise can support the right weight for a person when used with an appropriate eating plan. Regular exercise improves energy, confidence, lessen feelings of stress and anxiety and depression as well as improving sleep and relaxation. This is why exercise is so important for us all.

Individual resilience is also important right now especially as the wider health system recovers from the impact of the pandemic and begins to reengage and restore services. The focus of the NHS Long-Term Plan⁷ is towards **prevention**, self-care and personalisation supported by many health providers, Local Authority Wellbeing Teams, social prescribing, and community groups.

About the respondents

The survey was completed by residents of all ages and circumstances who shared their experiences.



⁷ NHS England - NHS Long Term Plan, (2019)



Several of our reports have documented that older people have been more hidden than ever during the pandemic, and this increases vulnerability. As those aged over 70 years of age believed or had been told to shield or self-isolate. A survey by Independent Age⁸ found that 43% of the respondents were wrongly self-isolating. Many in this group were physically well with or without underlying health issues. The impact of shielding for some has been an increase in Falls and Frailty.

Age UK⁹ promoted the survey to their network members alongside their *Couch to Confidence* program to support the return to exercise, for those who had been shielding and may have lost confidence or motivation to leave their home.

‘New Age UK analysis states that the experience of living through the fear, enforced isolation and inactivity caused by the pandemic has sharply accelerated the care needs of significant numbers of older people.’

34 respondents worked full or part time with 6 people juggling work and care/study commitments and 5 people were furloughed or unemployed. West Sussex County Council Joint Strategic Needs Assessment¹⁰ 2019, states that *‘working age adults are the most difficult to engage and raise awareness with, and yet they often have their own health and wellbeing issues compounded by caring responsibilities for children and older relatives.’* They therefore often have less available time to engage with exercise and wellbeing.

Life stages and various related events have a significant impact on how much exercise a person does. The groups at particular risk, are those professionally active and unemployed people, aged 50-64 years without children, as well as retirees aged 65+ years. Biernat et al. (2018) informed *‘that those (in these groups) currently not active but if they did, they would start practicing sport.’*¹¹

Locality: Responses were received from across the County and ranged between 3 to 24 responses for each district with a notably lower response from Crawley (n3). The surveys were widely advertised in all districts.

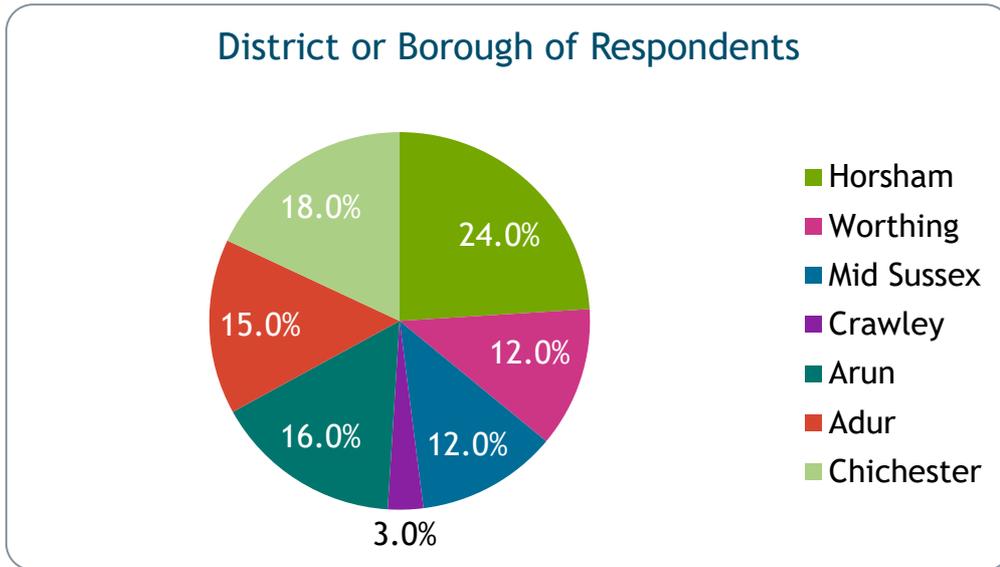
⁸ <https://www.independentage.org/>

⁹ <https://www.ageuk.org.uk/latest-press/articles/2021/new-analysis-finds-the-pandemic-has-significantly-increased-older-peoples-need-for-social-care/>

¹⁰ West Sussex County Council Joint Strategic Needs Assessment (2019) <https://jsna.westsussex.gov.uk/>

¹¹ Biernat., Piątkowska. *Clinical Interventions in Aging* (2018:13 1341-1352) Dove Press.

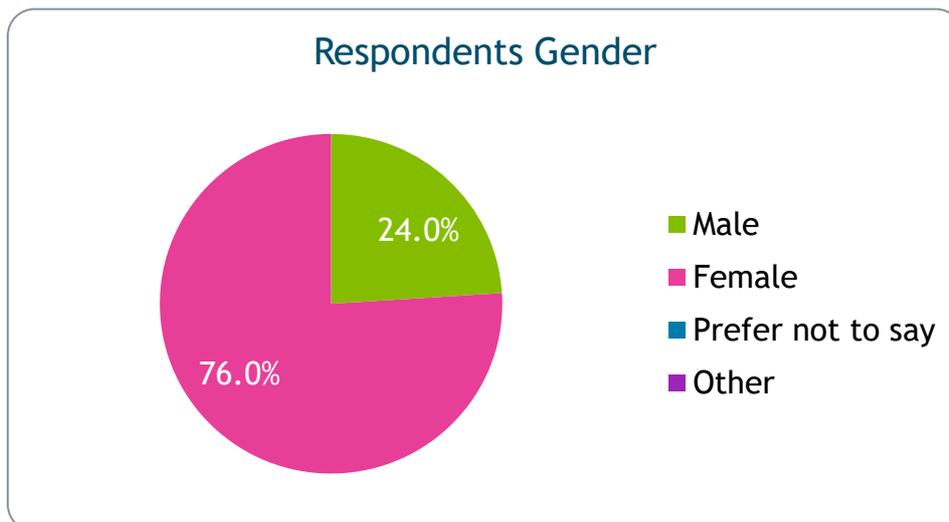




Gender identity - There were 76 responses from females and 24 from males, which is consistent with academic research as observed by ¹²Smith et al. (2018); *‘women are more likely to have a greater willingness to participate in online surveys than men.’*

These proportions reflect similar surveys: as noted by ¹³Ryan et al. (2019), who suggests; *‘there are complex barriers hindering male recruitment to health behaviours studies that may necessitate multi-faceted strategies including involvement of family and friends.’*

This is also representative of other surveys conducted by Healthwatch.



¹² Smith et al. (2018). Does gender influence online survey participation? A record-linkage analysis of university faculty online survey response behavior

¹³ Ryan et al. (2019) BMC Public Health.



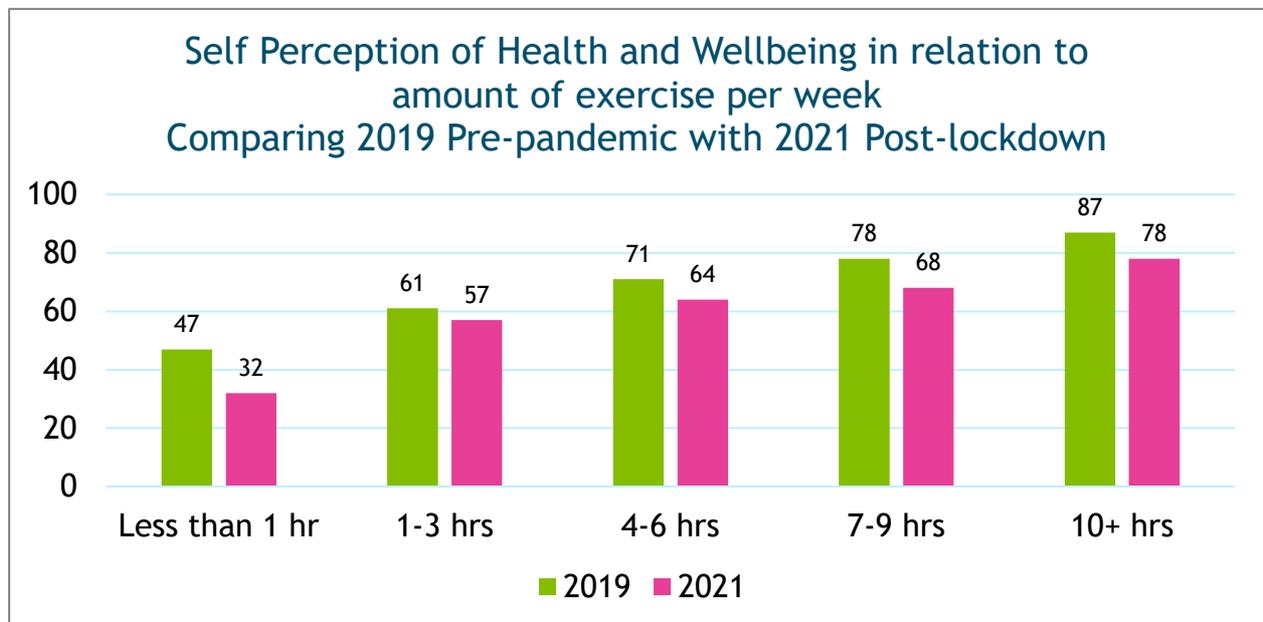
Self-perception of health and wellbeing

In everyday life, people observe other people’s actions and behaviors and make judgments about others based on what they observe.¹⁴ For example, if a person is interested in cycling, they may, as a result, buy the right cycle equipment and go out on rides. The person’s attitudes and self-perception towards their health and wellbeing has influence on their behavior.

In our survey we asked respondents to self-rate their health and wellbeing on a sliding scale of 0-100, (0 not good and 100 very good). The pre-pandemic 2019 data gave an average response of 71 to this question, however, this dropped post-pandemic to 59. We were informed of several access barriers (see also Appendix A)

- *Leisure centre closures and stay-at-home restrictions, prevented long walks etc.*
- *The closure of the outdoor gyms.*
- *Personal problems of chronic migraines, sever lower back problems, acute anxiety, panic attacks and depression.*
- *Community classes closed.*

The pre-pandemic research indicates a strong correlation between the levels of exercise and self-perception of health and wellbeing for all age groups and this held post lockdown. However, a significant drop in how positive individuals perceive their health and wellbeing for all age groups, and all exercise levels, was noted.



¹⁴ <http://psychology.iresearchnet.com/social-psychology/social-psychology-theories/self-perception-theory/>



The data suggests for all age groups, that the *more exercise achieved the greater their self-perception of health and wellbeing was.*

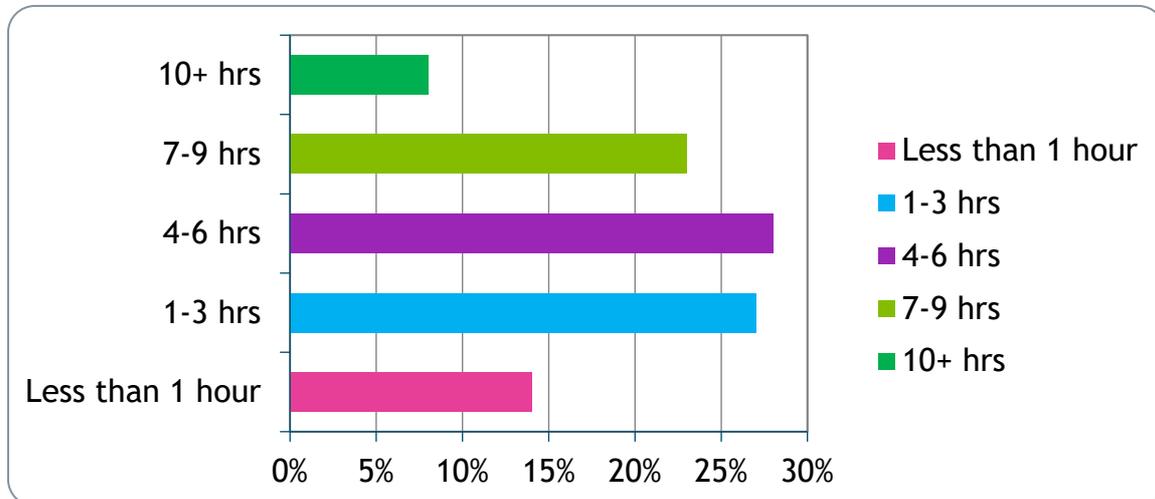
When looking at the relationship between age and perception of health and wellbeing, pre-pandemic, the youngest age group had the more consistent positive perception with an average of 75, this dropped to an average of 59 in the 2021 post lockdown survey.

Comments received include:

- *I find it hard to motivate myself to exercise at home as I do not like zoom type classes.*
- *Unable to attend exercise classes with an instructor who gave me confidence.*
- *Gym closures are a serious barrier to exercise/healthy lifestyle.*

Levels of exercise

We asked respondents in a typical week during lockdown, how many hours was spent exercising. These questions included exercise at home, sport, recreational exercise, walking to and from work/school/college/shops etc.



It was encouraging that 86 respondents reported they did some exercise every week, this is down slightly from the 2019 survey from 96. The majority, 59 responders (down slightly from 68 respondent's pre-pandemic) reported doing more than 4 hours exercise a week.

Pre-pandemic only 4 respondents did less than 1 hour, this more than tripled to 14 post-lockdowns.

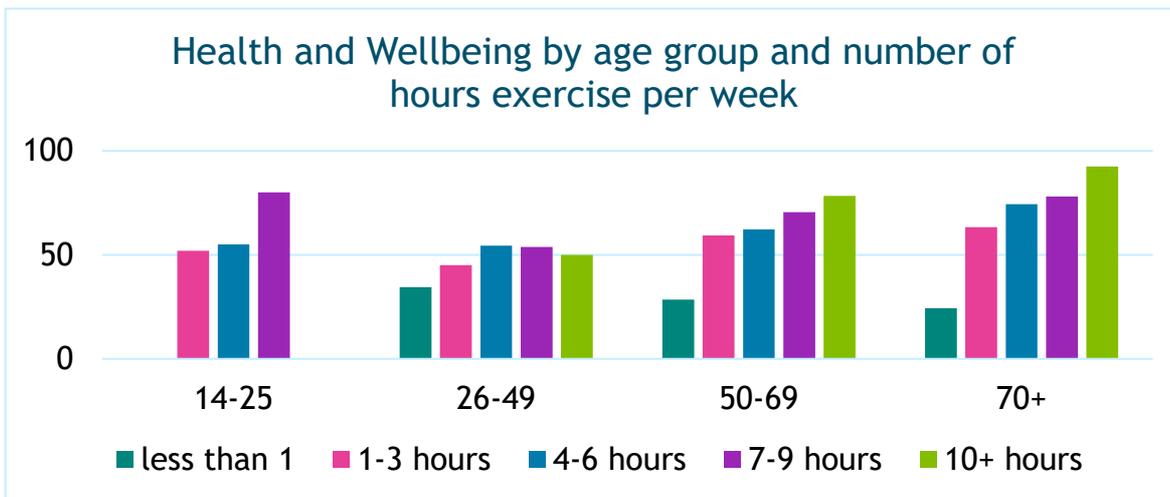
The following are comments received:



- *Just went for a walk with my neighbour*
- *Exercised at home*
- *I improved my mental health with 4-5 mile walks each day.*

This reinforces the link between self-perception of what health and wellbeing needs to be - *as going for a walk is often not seen as exercise but going to a gym would be.*

The working age (26 - 49 year) respondents had a less positive perception of their health and wellbeing. **Several statements showed that lockdown had put a huge pressure on many - trying to work from busy homes, supporting children with remote learning, supporting elderly relatives with food shopping etc. - all reduced their ability to exercise and increased their mental health concerns.**

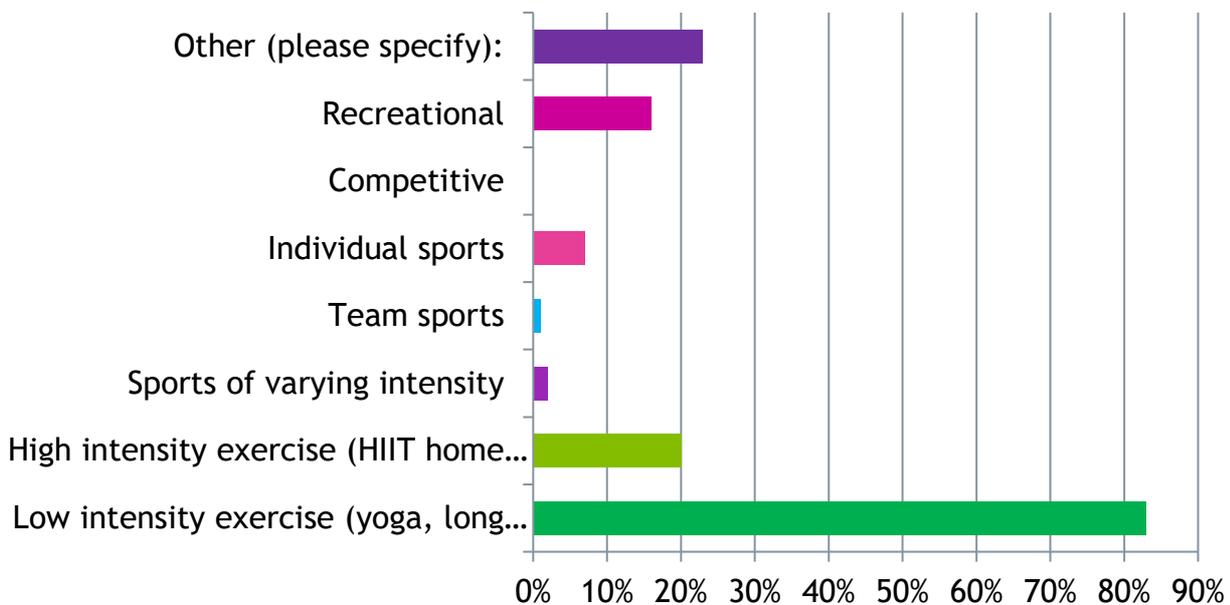


Exercise format availability and choices

Clearly choice and availability of exercise was restricted during the lockdowns. Many commented about missing the social aspects of team and competitive sports and the negative impact this had on their mental health and physical health.

- *Missed the opportunity to swim, which have been doing as a form of therapy to recover from injury or illness.*
- *Missing yoga class could do at home but found it harder to motivate myself.*
- *Not able to exercise due to increases in demand at work.*

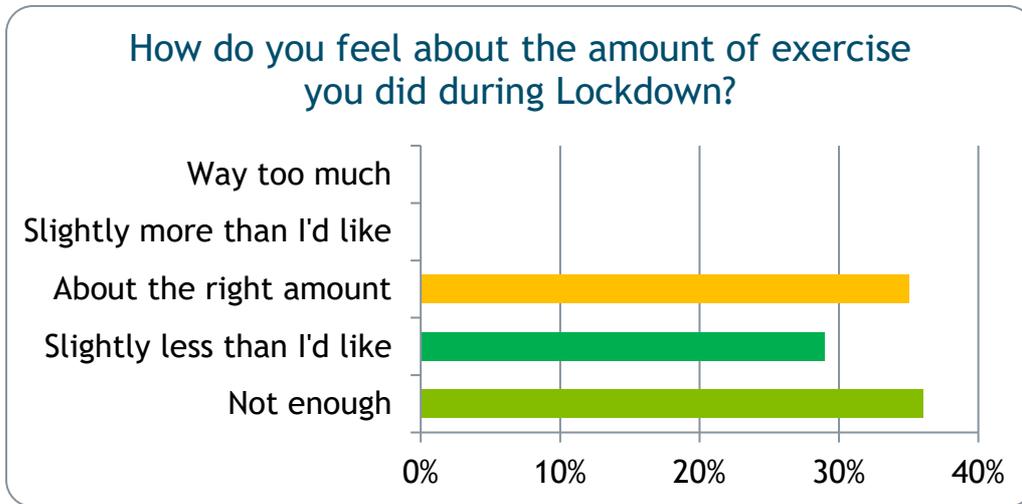
Types of exercise taken part in during Lockdown?



Not being able to exercise with neighbours, friends and family was repeatedly mentioned alongside the detrimental impact of lockdown in terms of loneliness, isolation and how this manifested in lack of confidence and motivation to exercise alone. Many felt that they could have continued to exercise as before in a safe way even with the pandemic restrictions in place.



Are you doing enough exercise?



65 respondents felt they did not do as much exercise as they would have liked or feel they needed; this is similar to pre-pandemic levels. A third of responses felt they were doing about the right amount of exercise.

Why do you exercise?

There are many reported reasons why people exercise, besides maintaining physical and mental health conditioning.



83 respondents stated they *took part in sport and/or exercise to stay healthy* with 47 people noting the *enjoyment they got from exercise*. 63 respondents stated that exercise helped to relieve stress and anxiety, an increase from 58 in 2019. 41 respondents stated the *social, emotional, and mental health benefits*.

11 respondents stated *they had been prescribed or recommended exercise for medical reasons* this was double the rate from the 2019 survey.

Other reasons stated:

- *To lose weight*
- *Take time out from caring for others*
- *To benefit mental health*
- *To cope with other medical treatments such as Cancer.*

“ I was very low in mood last summer and during lockdown, exercise has really helped.

Other findings

- 44 respondents stated they exercise for physical health and (n45) mental health, this is down from 67% and 64% pre-pandemic.

I took early retirement because of health issues...found it very difficult to adjust to a new way of life during COVID-19.

- 30 respondents reported physical health concerns.

Chronic migraines, severe lower back problems.

- 26 respondents reported mental health and wellbeing concerns.

I can't tell you how much I have missed sport and exercise. I feel useless and lonely. One of my friends committed suicide. He was so sporty. I can't think about it I just need to do exercise to stop these feelings”

- 45 respondents stated they would do more exercise if they had the opportunity.

Due to increased demands at work during lockdown I have had difficulty increasing the amount of exercise I would like to have done as I have worked longer hours and been too tired when I get home.



- 42 respondents stated they would do more exercise if COVID-19 restrictions had allowed.

I swim 5 times a week normally. I have been unable to swim. I find this very restricting.

- 13 respondents stated they would do more exercise if they had more money.

Lockdown and the removal of council funding removed my access to health facilities.

- 16 respondents stated they have lost confidence to go out and exercise since Lockdown.

I lost confidence and my fitness levels to do sports activities I used to do before lockdown

- 11 respondents stated they were shielding and anxious about exercising and 14 were able to go out but felt nervous.

Confusing and changing requirements to shield made me and others stop walking as we could not go alone and was not confident to go alone.

- 7 respondents stated they would like advice on exercise but didn't know who to ask.

Before the first Lockdown in March 2020, I regularly attended classes at Westgate Leisure Centre specifically designed for people who have had chemotherapy. These have not resumed at all. I really hope that the classes can restart, for both my physical and mental health.

- 6 respondents stated had been prescribed or recommended exercise by a clinician, for treatment of a physical illness - 6 respondents for a mental illness, 4 had been prescribed low intensity exercise and 1 monitored exercise for heart rate and breathing.

- 5 respondents stated that the physical effect of contracting COVID-19 had prevented them from exercising as they would have normally.

Nervous about catching COVID-19 or transferring the virus.

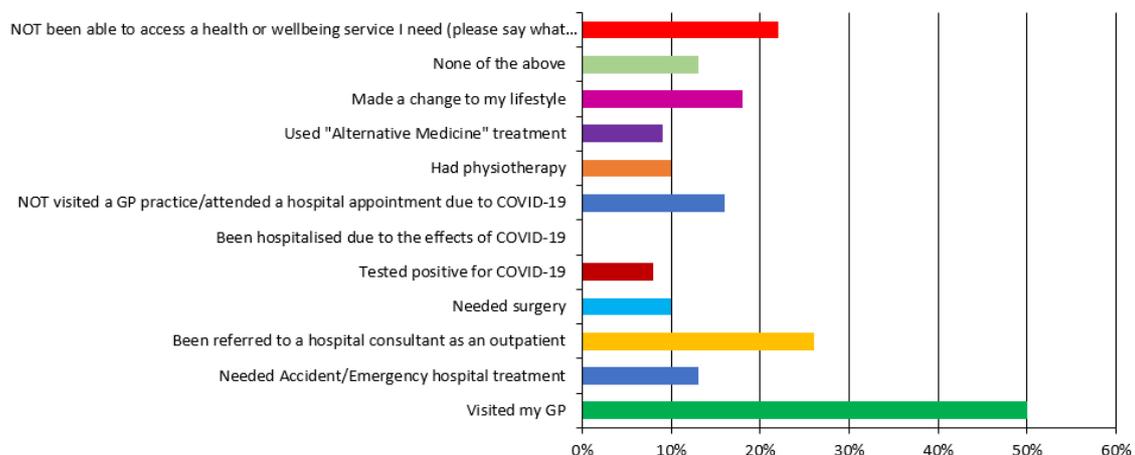


Pandemic impacts

Comparison of how the pandemic has impacted on respondents pre and post survey:

- 50 respondents had visited or accessed their GP since the start of the pandemic a decrease from 74 pre-pandemic.
- 26 respondents had been referred to hospital a decrease from 30 pre-pandemic.
- 10 respondents had Physiotherapy a decrease from 16.
- 13 respondents needed emergency care, an increase from 11 and 10 needed surgery, an increase from 7.
- 9 respondents have used alternative medical treatments an increase from 7.
- 18 respondents had consciously made changes to their lifestyle in the 12 months since the start of Lockdown.

Since the start of the pandemic or during lockdown I have:(Tick all that apply)



22 respondents have not been able to access health and wellbeing services of some kind due to the pandemic.

Comments received:

- Still waiting for specialist consultant out-patient appointment.
- Waiting for Cataract surgery.
- I would have had blood-pressure and cholesterol checked on a regular basis at the GP surgery if it was not for lockdown. Appointments and checks are hard to access.



- Struggled to access GP - managed to get LIVI appointment but not able to access my own GP.
- Need to have my broken ankle looked at and possibly re-broken and reset?
- Foot clinic for chiropody.
- Dental treatment.
- Regular sports massage which helps to keep me active.
- I have not been able to attend yoga and Pilates classes at the studio during lockdowns, helpful for both mental and physical health. However, they have provided online classes and now put measures in place to be COVID-19 safe when they re-open.

Comparison to national data

It is recognised that this is a small sample size to be regarded as statistically viable but when combined with our previous surveys and reports it does provide an indication of where effort is needed in the short to medium term to best support people to access exercise and wellbeing services.

It is also noted that the survey did not examine the social, cultural, or environmental factors such as income, ethnicity, and sexuality. However, there are several useful reports that have.

Waitrose¹⁵ and YouGov¹⁶ nationwide survey found that 27% considered a limited budget to be a barrier to a healthier lifestyle. The same survey found that 22% reported they are time limited in the amount of sport and exercise they access.

The British Medical Association report¹⁷ identified the limiting factors to sport and exercise participation: people who live in **more deprived areas** are less likely to be physically active due to financial costs, for example gym memberships, and affiliation fees, or not having enough time due to working multiple jobs. The report also highlighted that those with no nearby facilities - more rural areas - compared to those living in an urbanised area was also a factor.

“In 2016/17, 34% of adults in the most deprived areas of England were classified as inactive, compared to the national average of 23%.”

¹⁵ Waitrose and partners, Rees, Morgan - solving the puzzle of better health (2019)

¹⁶ YouGov (2019)

¹⁷BMA (2019)



Close

Involving people in more exercise and sport could be a cost-effective way to improve and promote healthier lifestyle and greater responsibility for one's own health, through self-care initiatives, which could reduce demand on primary (GP), secondary and emergency (hospital and outpatient) care.

The surveys have shown that emotional, mental health and physical health can be improved by partaking in sport and exercise. Several studies have demonstrated the benefits of exercise during and after ¹⁸Cancer treatment. Additionally exercise aids recovery and also helpful for those living with long-term conditions.

Recent reports including those from Public Health England¹⁹ find that clinicians prescribing exercise to suit the patient is helpful to combat physical inactivity. This might be a cost-effective way forward given the increase and impact of falls and frailty due to not being able to exercise during the pandemic in the Age Well groups.

¹⁸ Macmillan (2018)

¹⁹ Public Health England (2021)



Footnote links

No	Title	Webpage
1	NHS England	https://www.england.nhs.uk/blog/what-does-self-care-mean-and-how-can-it-help/
2	Institute for health metrics and evaluation (2017)	http://www.healthdata.org/sites/default/files/files/policy_report/2019/GBD_2017_Booklet.pdf
3	BBC Radio 4 All in the Mind downloads (2019)	https://www.bbc.co.uk/programmes/b006qxx9/episodes/downloads
4	NHS England - Get fit for free (2017)	https://www.nhs.uk/love-well/exercise/get-running-with-couch-to-5k/
5	Kings Fund (2012)	www.kingsfund.org
6	Sports England Active Lives Survey	https://www.nhs.uk/live-well/exercise/
7	NHS England - NHS Long Term Plan, (2019)	https://logtermplan.nhs.uk/online-version/
8	Independent Age	https://www.independentage.org/
9	Age UK	https://www.ageuk.org.uk/latest-press/articles/2021/new-analysis-finds-the-pandemic-has-significantly-increased-older-peoples-need-for-social-care/
10	West Sussex County Council Joint Strategic Needs Assessment (2019)	https://jsna.westsussex.gov.uk/
11	Biernat., Piątkowska. Clinical Interventions in Aging (2018)	Clinical Interventions in Aging (2018:13 1341-1352) Dove Press.
12	Smith et al. (2018). Does gender influence online survey	https://www.researchgate.net/



	participation? A record-linkage analysis of university faculty online survey response behavior	
13	Ryan et al. (2019)	Open University http://oro.open.ac.uk/66194/1/Ryan%20et%20al%202019%20NM.pdf
14	Self-Perception Theory	http://psychology.iresearchnet.com/social-psychology/social-psychology-theories/self-perception-theory/
15	Waitrose and partners, Rees, Morgan - solving the puzzle of better health (2019)	Magazine autumn, pp. 46-48
16	YouGov (2019)	https://yougov.co.uk/
17	British medical Association (BMA), (2019)	Get a move in - steps to increase physical activity levels in the UK
18	Macmillan (2018)	Coping with fatigue - a practical guide to living with and after cancer.
19	Public Health England (2018) Physical activity guidelines for adults	https://www.nhs.uk/live-well/exercise/



Appendix A - Lockdown barriers to exercise and issues accessing health/wellbeing services

Respondents shared the following issues of accessing health and wellbeing services during the pandemic. Which included: GP access concerns (via zoom/LIVI or in person), chiropody services, surgeries, mental and physical health support groups, and massages/aqua treatments, gyms, and swimming pools.

Detailed comments include:

- Reluctant to contact the GP to discuss some emerging health issues.
 - I feel that they are not important in the big scheme of things.
 - I am put off by the message on GP telephone about importance of only contacting if urgent and lack of face-to-face appointments.
 - I don't feel that a GP can fully see/understand the problem over the phone or via video call.
- Confusing and changing requirements to shield made me and older neighbours stop walking as we couldn't go together, and I wasn't confident to go alone.
- Since the beginning of lockdown, I have been struggling with my depression and haven't felt that I had support from MIND, which I would like to have and have lots of worries coming up.
- I had a follow up appointment in December 2020 to see an Eye Consultant at East Surrey Hospital as I may have Glaucoma. This was cancelled and I do not know when I will be given a further appointment.
- I saw a Physiotherapist at Horsham Hospital MSK Department in January 2020 with severe pain in my right shoulder caused by playing tennis. After an x-ray, she suggested I have a steroid injection (cortisone) in March, but this did not happen as the department was closed. I am pleased to say I am having this injection on 20 April.
- At the beginning of the first lockdown, I was advised to shield, due to long term health issues. As it was the start of summer and I am lucky enough to have a garden, I was able to spend hours at home looking after my garden.

In the recent lockdown as it was the winter, I was not able to do this, and it very badly affected my mental wellbeing. I felt very lonely and isolated, and I was very tearful a lot of the time. I always try to stay positive, but the last lockdown was very hard indeed for me. Not being able to see my friends was terribly hard.



- I have been shielding so it has not been possible to keep to my usual routine.
- I enjoy weights and swimming at the gym, due to COVID-19 no gyms have been open. I'm nervous to go back to the gym and to be around people again.
- Closure of gyms and pools.
- I need team exercise - it has been part of my life 3/4 times a week since age 3. Turning it off has been horrendous. We could have trained outdoors whatever the weather.

Just seeing each other even from a distance would have helped. I worry some people will have gotten out of the habit and we may not get a team going again. We should do more to support our volunteer coaches - we need them, and I don't think I realised how much of a difference they make until it wasn't there.

- I am disappointed my previous exercise classes for older people have been discontinued.
- Not technically personally, but we faced barriers in my 3-year-old daughter accessing health services. We did receive good support from our local healthy child team though, who we are incredibly grateful for.
- I have had early retirement because of health issues and the risks related to COVID-19 and found it extremely difficult adjusting to the new way of life, many plans I had for retirement have had to be postponed or cancelled together with the difficulty of accessing and the experience of the Lockdowns making for a very difficult and challenging period of my life.
- Lockdown has affected my depression severely. I miss my MIND group to chat with similar people.
- Last summer I couldn't visit a dentist when I had a tooth infection. She prescribed antibiotics remotely however and it cleared up. It was a worry at the time as normally I would have gone to the dental surgery and had it examined.

I also have chiropractic for scoliosis regularly and for 3 months last year had none, but luckily my condition didn't worsen, and they have reopened since last summer. I would have taken longer walks last spring but was afraid I'd set off my back if I had to struggle with rough ground.

- Leisure Centre being closed and stay at home restrictions, preventing long and social walks etc. Could the leisure Centre have done more outdoors instead?
- No local outdoor gyms.
- Time. Working and parenting a toddler leave me time poor. Working from home is a static event which concerns me - I understand how important for health and well-being it is to keep moving.
- Just not many things available where I live - Pulborough/Storrington.



- I would like to swim to help my fitness, financially I cannot afford a membership and do not think general public swimming will be available again for a long time as centres will look after members first. I would be nervous of swimming in a pool and catching COVID-19 transferring the virus in such a public arena. **Positive outcome: I recently signed up to the Activ8 Adult Fitness sessions across Worthing to Southwick at my local park. This has been brilliant to help get back to exercise and build some confidence and meet people.**
- Personal barriers of chronic migraines, severe lower back problems, acute anxiety, panic attacks and depression.
- It seems as if my GP Surgery took the COVID-19 pandemic as a means of avoiding patients. I am not alone in this opinion. When I feared a recurrence of H. Pylori infection, I contacted my G.P. surgery but when I attended my appointment, I found myself being interviewed by a trainee doctor. Very pleasant young man but he had to leave the room several times to speak with whoever was supervising him. Eventually, I was told I would have to supply a faecal sample. I did so and indeed I did have the H. Pylori bacteria. Once the GP Surgery had supplied the required medication, I didn't even receive a follow up phone call to find out if I was okay. At 75 years of age. I think I can expect better.
- Swimming pools were closed.
- I haven't been able to see my sports massage therapist to help with muscle problems or my reflexologist to help with sleep and digestive issues caused by my cancer treatment.
- Unable to attend exercise classes with an instructor who gives me confidence I am exercising safely and adjust exercise to suit me which I need at my age.
- I find it hard to motivate myself to conduct exercise at home. I don't like the zoom type exercise class.
- I prefer GP appointments in person to phone calls. I have been having occasional visits to the wellbeing service since the time I needed to lose weight and have now not been for something like two years. I would go now if it were available, as there are one or two issues I would like to check at some point.
- Gym closures are a serious barrier to exercise/healthy lifestyle.
- It has been impossible to pool swim. I swam in the sea in the summer but could not do my usual mile /45-minute swim. Muscle strength in my arms and shoulders has diminished. Swimming helps my mental health in ways walking and running don't (Unless I run for a long distance).
- No swimming - a really useful low impact exercise I usually use 3 times a week. GP access - been a real fight to even talk to a GP who implied it is unlikely that we will go back to face-to-face appointments as digital is working so well (it doesn't feel like that from my perspective).



- I have regular (3 monthly) outpatient appointments for a long-term condition and have had to have most of these as telephone consultations. These are OK but a hospital consultation is much better and reassuring. I would not want telephone consultations to continue any longer than is absolutely necessary.
- I have been sorry not to be able to visit my doctor in person (though I understand why) as there were aspects of my medical situation which really demanded personal presence. I did speak to her on the phone, and she was helpful.
- I didn't feel it was right to bother the NHS in the light of the pandemic.
- No physical sessions of cardiac rehabilitation just online after an initial assessment. Cold wet weather is a barrier for me.
- I was unable to have a trainer with me to help with weight training, which for my health and wellbeing is crucial due to a TBI suffered a few years ago. I did cycle locally instead and found even in lockdown it was dangerous being on local roads in Chichester as traffic (including, especially, the buses) does NOT leave enough space when passing. I stopped cycling in June 2020 for this reason.
- The only assistance given was from pharmacy delivery. No well-being. Neighbours both sides doing very noisy and smelly house improvements. Fence erected by developers, back of house. Now feel I am in a prison camp.



Talk to us

If you have questions about the content of this report, please either call 0300 012 0122 or email helpdesk@healthwatchwestsussex.co.uk

How this insight will be used?

We recognise that all health and care services are under pressure at this time and have had to adapt their ways of working. We will share this report with the local NHS, local Government, and other providers to help them understand where things are working well and services are adapting to meet peoples' needs, and to help them identify any gaps. We see this as a continuation of discussions taking place and will use this insight with all stakeholders to learn lessons and support future service development.

For help, advice, and information or to share your experience.

We are the independent champion for people who use health and social care services. We're here to find out what matters to people and help make sure their views shape the support they need.

We also help people find the information they need about health, care and community and voluntary health and care support services in West Sussex.



Here to help you on the next step of your health and social care journey

We have the power to make sure that the government and those in charge of services hear people's voices. As well as seeking the public's views ourselves, we also encourage services to involve people in decisions that affect them.



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