

NISRA CORONAVIRUS (COVID-19) OPINION SURVEY

KEY FINDINGS FROM PHASES 1 TO 8

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 8 of the NISRA Coronavirus (COVID-19) Opinion survey. Survey data from Phases 1 to 8 have been merged to produce the information used in this report. Users should note that this analysis relates to addresses which were sampled in the first eight months of the survey. In total, interviews have been carried out with 9,499 members of the public in the period 21 April 2020 to 21 January 2021. Users are advised that these results are based on some questions which have been asked in every phase whilst other questions have only been asked in certain phases.

Additional findings are now included in this report on alcohol consumption, the compliance of COVID-19 regulations and guidelines, concerns about children attending school and the handling of Coronavirus (COVID-19) outbreaks in schools. Further analysis is also provided by month of interview to show changes over time, where significant differences were found.

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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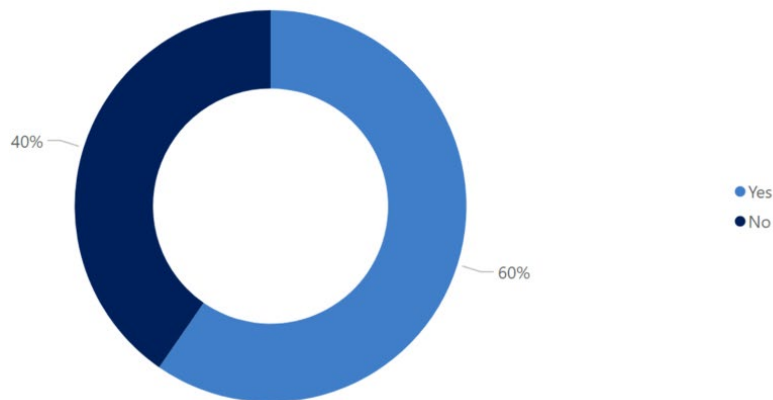
Key Findings

Compliance of Coronavirus (COVID-19) Regulations and Guidelines

The survey asked people interviewed in the period November 2020 - January 2021 if they felt like they had enough information about government plans to manage the Coronavirus (COVID-19) outbreak and about the extent to which they were personally following the Northern Ireland Executive’s regulations and guidelines on how to respond to the pandemic.

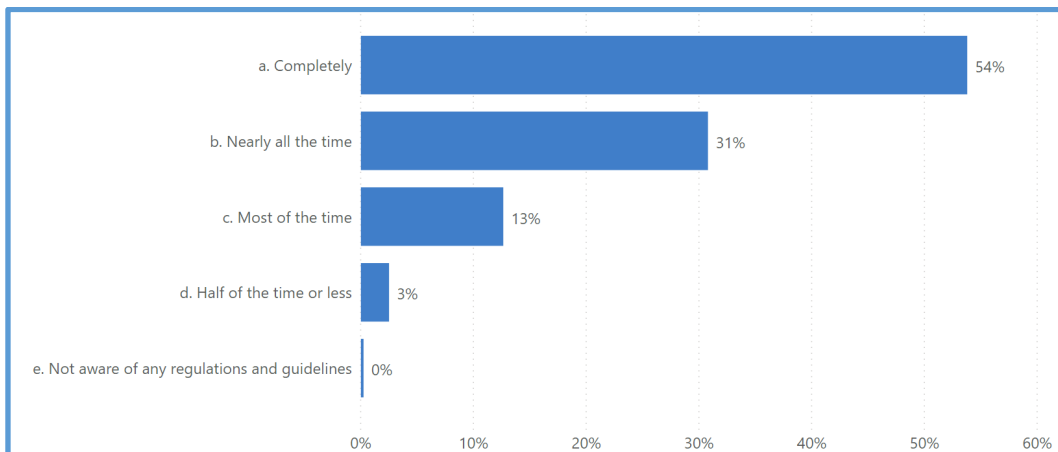
Six in ten people (60%) agreed that they felt they had enough information about government plans to manage the Coronavirus (COVID-19) outbreak (Figure 1).

Figure 1: Proportion of people who felt they had enough information about government plans to manage the Coronavirus (COVID-19) outbreak



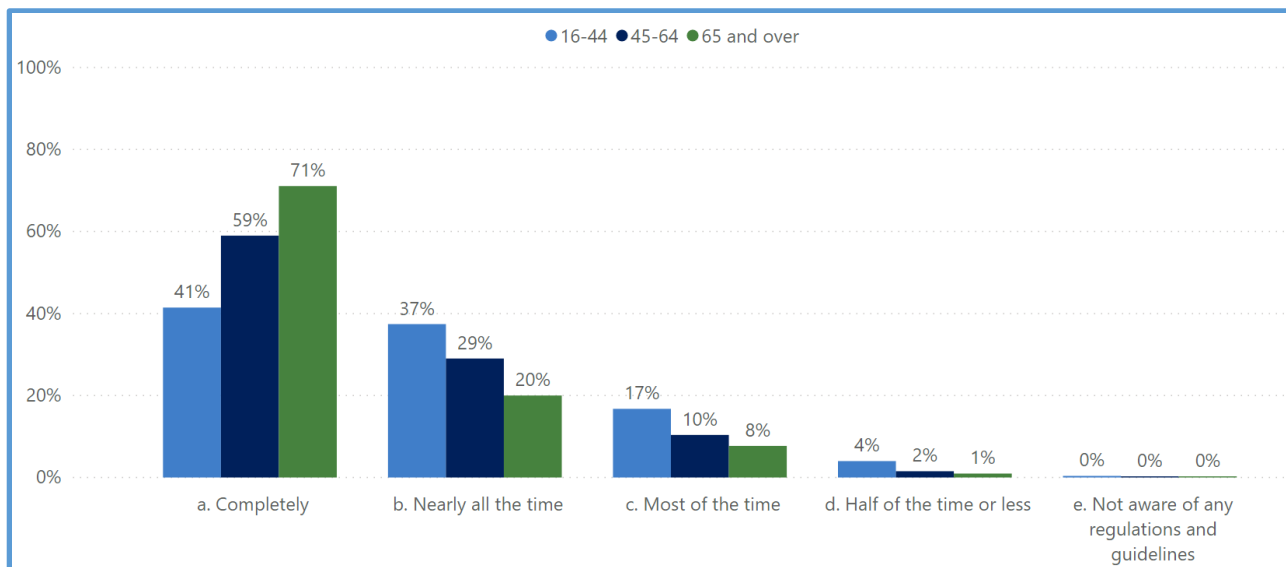
Just over half of people (54%) said that they were completely following the Northern Ireland Executive’s regulations and guidelines on how to deal with the COVID-19 pandemic. Some 31% stated that they were doing so nearly all of the time and a further 13% of people reported that they were following the regulations or guidelines most of the time (Figure 2).

Figure 2: Extent to which people reported following the Northern Ireland Executive’s regulations and guidelines on how to respond to the pandemic



Stricter adherence to the regulations and guidelines was associated with increasing age. Seven in ten people aged 65 and over (71%) reported that they were completely following the regulations and guidelines. This was significantly higher than for those aged 45-64 years (59%) and those aged 16-44 years (41%) (Figure 3).

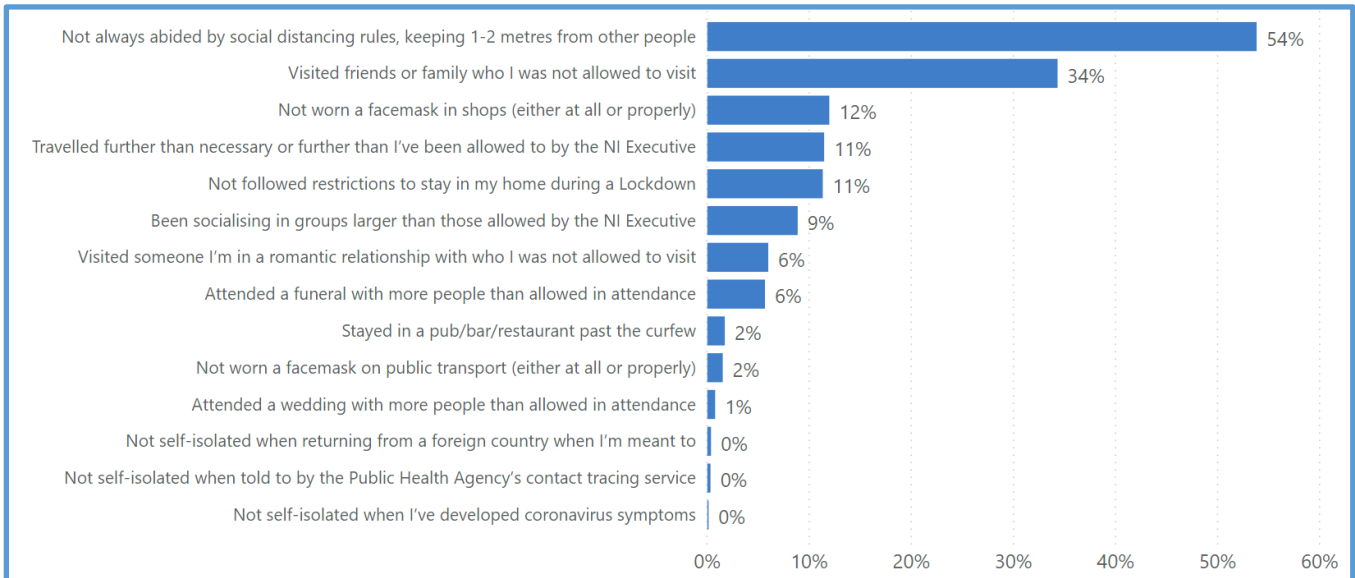
Figure 3: Proportion of people reported to have followed the Northern Ireland Executive’s regulations and guidelines, by age group



Those people who said that they were not completely following the regulations and guidelines were asked an additional question about the ways in which they had not done so.

More than half of these people (54%) said that they had not always abided by social distancing rules, keeping 1-2 metres apart from other people. Some 34% of people reported that they had visited family or friends when they were not allowed to do so. Approximately, one in ten people stated that they had not worn a face covering in shops (12%), travelled further than necessary or restrictions allowed (11%), not followed restrictions to stay at home during a Lockdown (11%) or socialised in larger groups than those allowed by the NI Executive (9%) (Figure 4).

Figure 4: Ways in which people had not followed the Northern Ireland Executive’s regulations and guidelines on how to respond to the pandemic

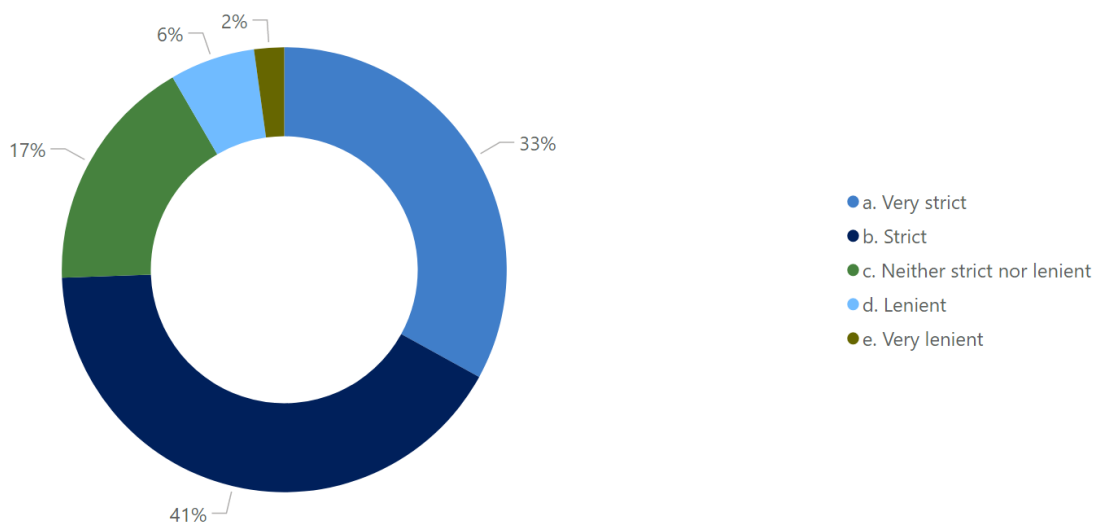


Enforcement of Coronavirus (COVID-19) Regulations

People interviewed in the period September 2020 - January 2021 were asked about the enforcement of rules to help slow the spread of Coronavirus (COVID-19).

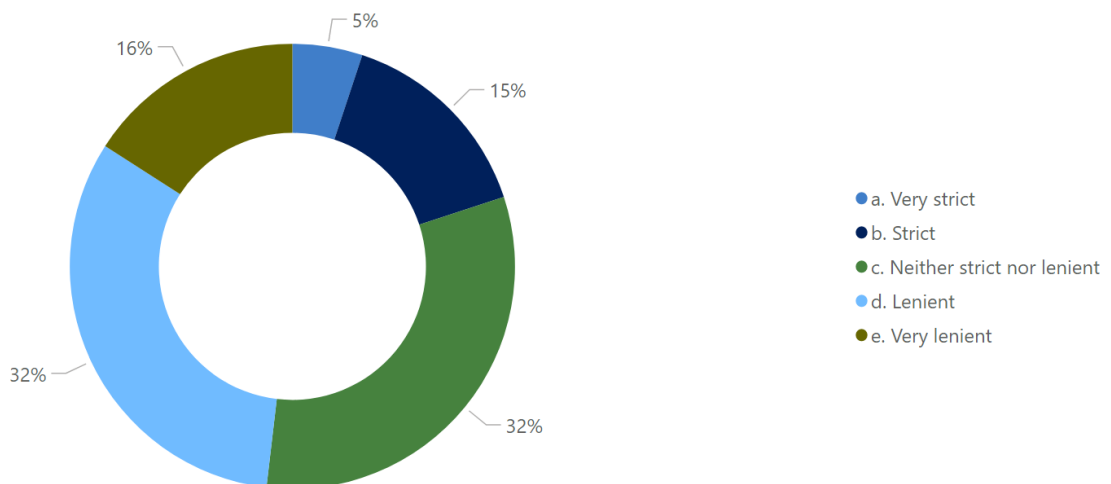
Almost three quarters of people (74%) said that police should be strict in enforcing rules to help reduce the spread of Coronavirus (COVID-19) but 8% said they should be lenient (Figure 5).

Figure 5: 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 just under half of people (48%) felt they were lenient (Figure 6).

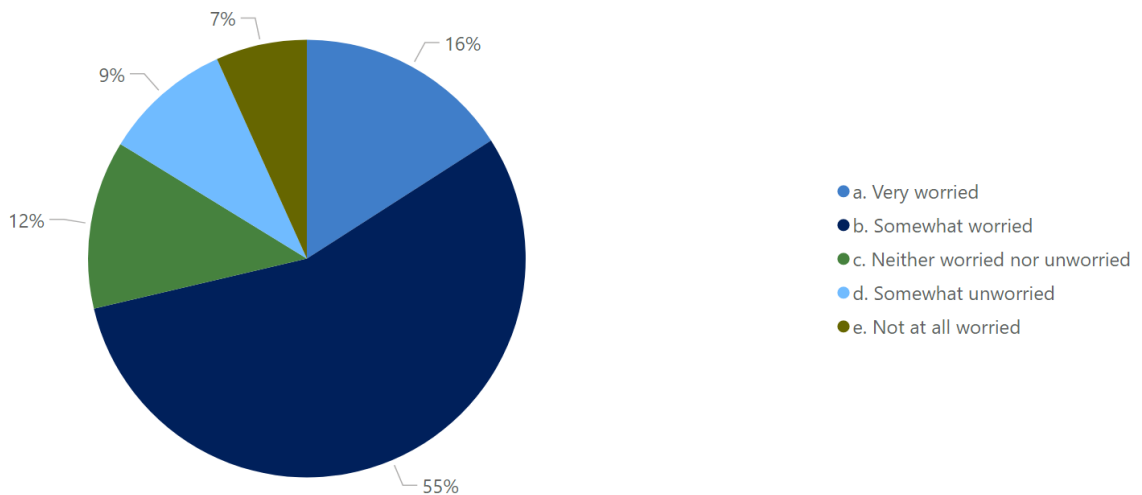
Figure 6: Proportion of people who thought how strict or lenient police are in enforcing rules to help reduce the spread of Coronavirus (COVID-19)



Concerns about the Coronavirus (COVID-19)

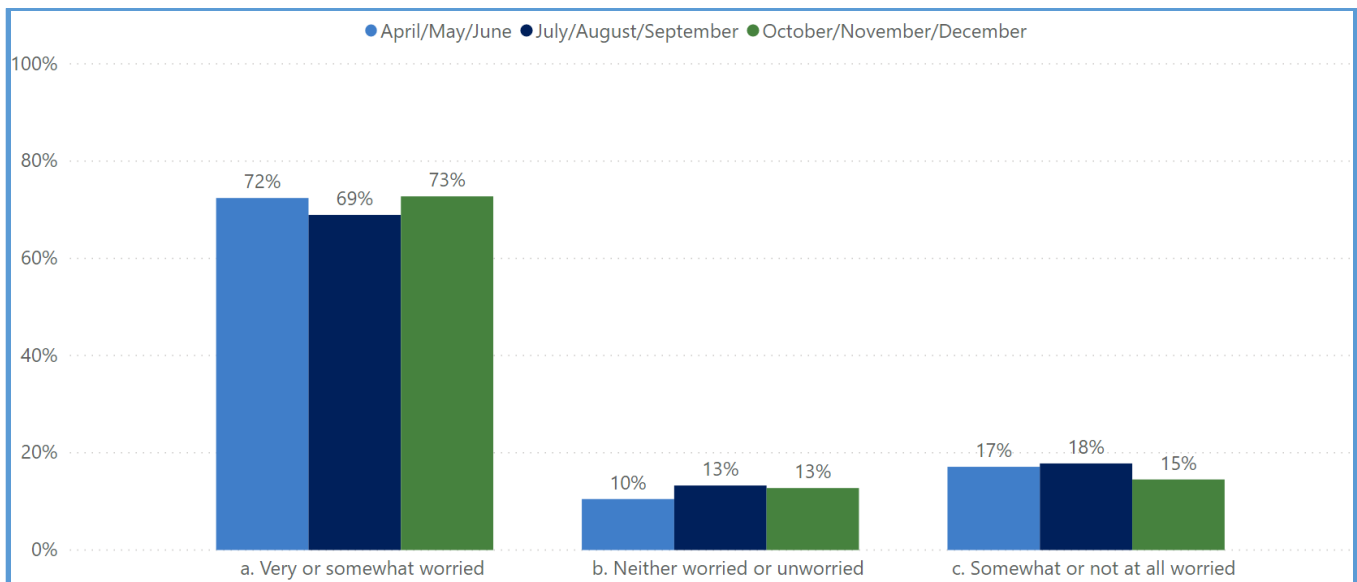
The survey continued to find high levels of worry among people regarding the Coronavirus (COVID-19). Overall, just over seven out of ten people (71%) said that they were very worried or somewhat worried about the effect the Coronavirus (COVID-19) was having on their lives (Figure 7).

Figure 7: Levels of worry about the effect the Coronavirus (COVID-19) was having on their life



Almost three quarters of people (73%) interviewed in the period October to December said that they were worried about the effect the Coronavirus (COVID-19) was having on their lives. This was an increase on the level of worry (69%) reported by people in the period July-September and a return to the levels of worry reported in the months April to June (72%) (Figure 8).

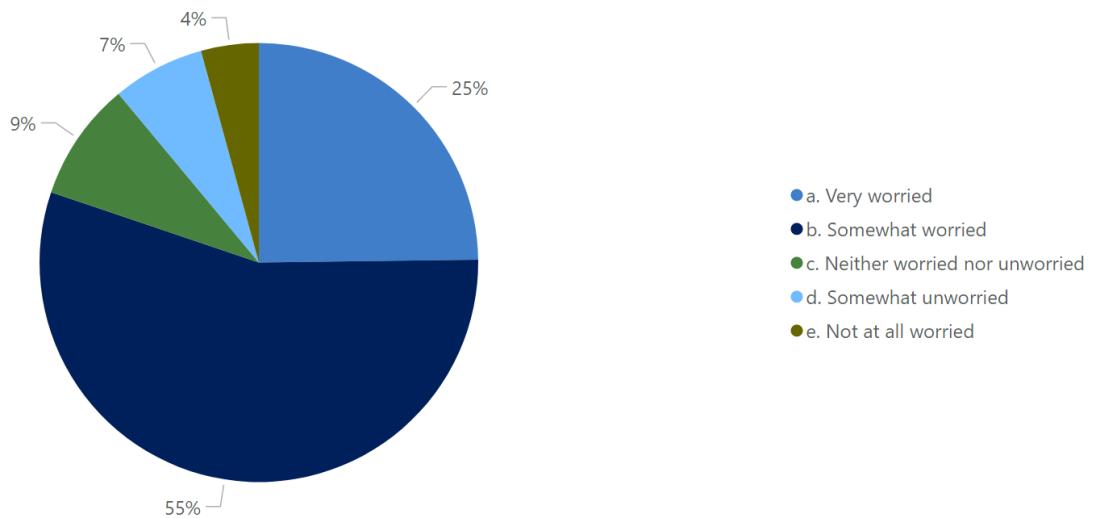
Figure 8¹: Levels of worry about the effect Coronavirus (COVID-19) was having on their life, by month of interview



¹ The number of interviews carried out after 31st December 2020 are too low to report on separately in these results.

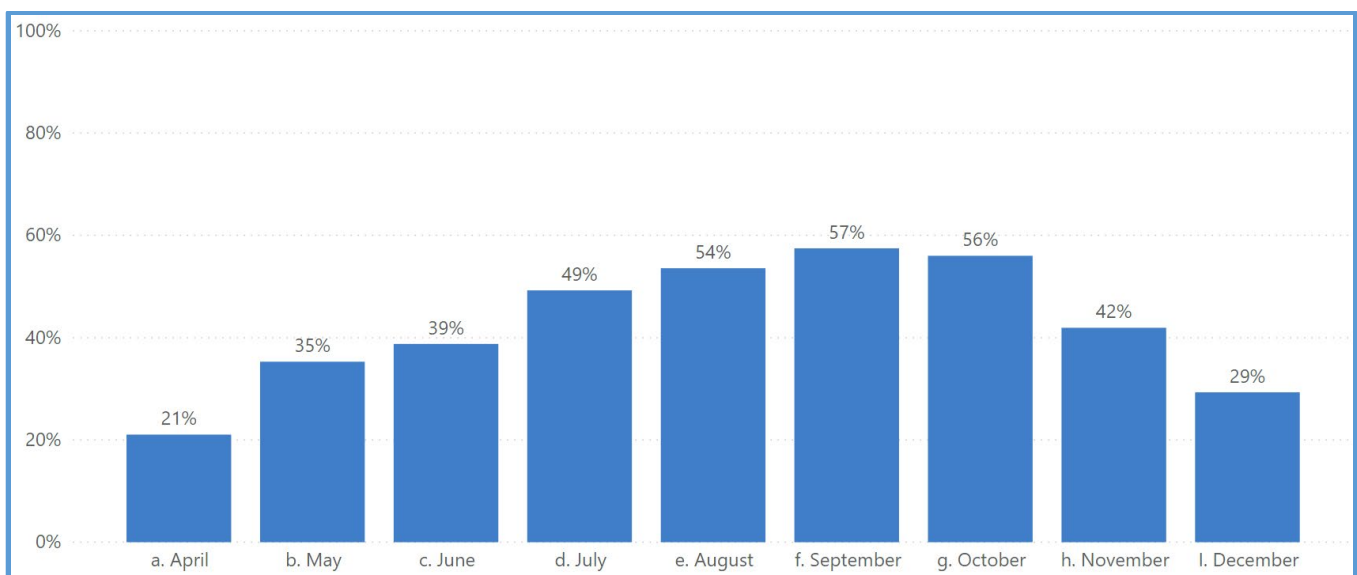
Most people (80%) also said that they were worried about how the Coronavirus (COVID-19) was affecting their family and friends (Figure 9).

Figure 9: Levels of worry about how the Coronavirus (COVID-19) was affecting their friends and family



There appears to be growing optimism that life might return to normal in the next twelve months or so. The proportion of people who said it would be more than a year before their life returned to normal has halved from a peak of 57% in September 2020 to 29% in December 2020 (Figure 10).

Figure 10¹: Proportion of people who stated it would be more than a year before their life would return to normal, by month of interview



¹ The number of interviews carried out after 31st December 2020 are too low to report on separately in these results.

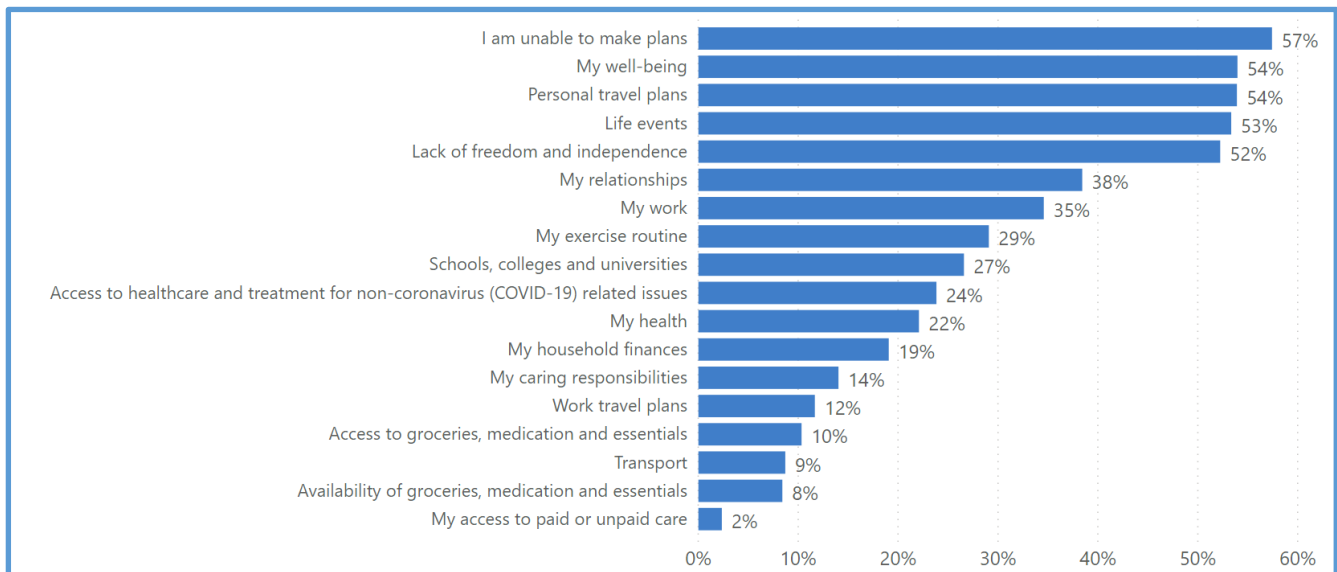
Ways the Coronavirus (COVID-19) was affecting lives

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.

In the period November 2020 – January 2021, more than half of people said the Coronavirus (COVID-19) pandemic was affecting their ability to make plans (57%), their wellbeing (54%), personal travel plans (54%), life events (53%) and creating a lack of freedom and independence (52%) (Figure 11).

Approximately, one quarter of people (24%) stated that access to healthcare and treatment for non-Coronavirus (COVID-19) related issues was being affected (Figure 11).

Figure 11¹: Ways in which the Coronavirus (COVID-19) was affecting lives



¹ 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.

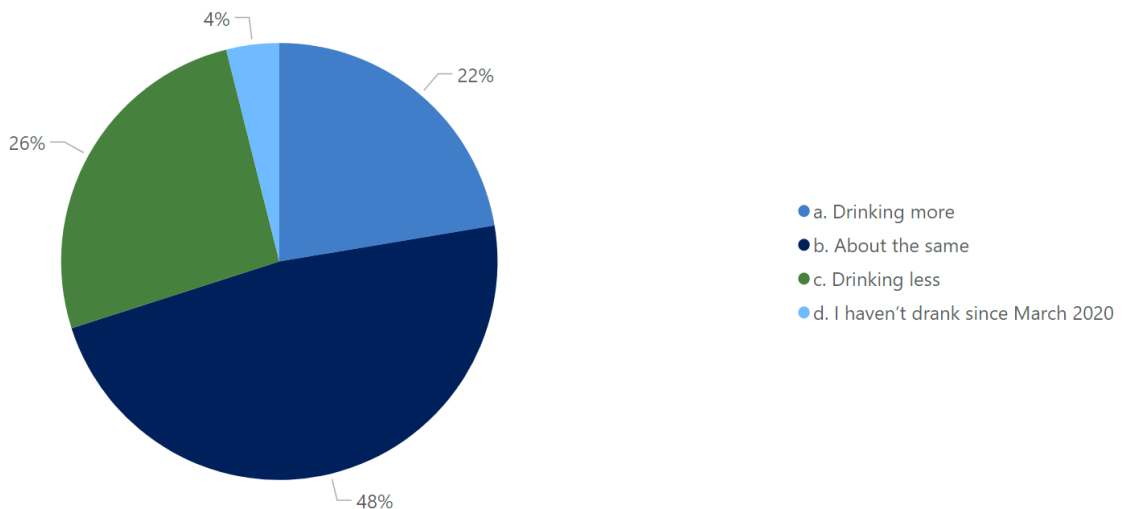
Alcohol Consumption

People who were interviewed in the period November 2020 - January 2021 were asked about their alcohol consumption since the outbreak of the Coronavirus (COVID-19) pandemic.

Over one quarter of people (27%) interviewed in this period stated that they do not drink alcohol at all.

Of those people who do drink alcohol, approximately one in five people (22%) said they were drinking more alcohol since the outbreak of the Coronavirus (COVID-19) pandemic. Almost half of people (48%) were drinking about the same, whilst just over a quarter of people (26%) said they were drinking less. A small proportion (4%) said that they had not drunk alcohol since March 2020 (Figure 12).

Figure 12: Proportion of people who reported drinking alcohol more, about the same or less, since the Coronavirus (COVID-19) outbreak

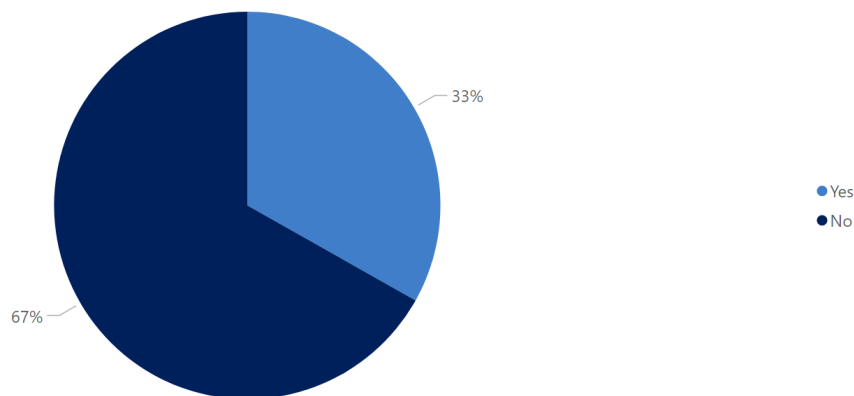


Access to Medical Care

Those people who were interviewed in the period August 2020 - January 2021 were asked about access to medical care for existing health conditions.

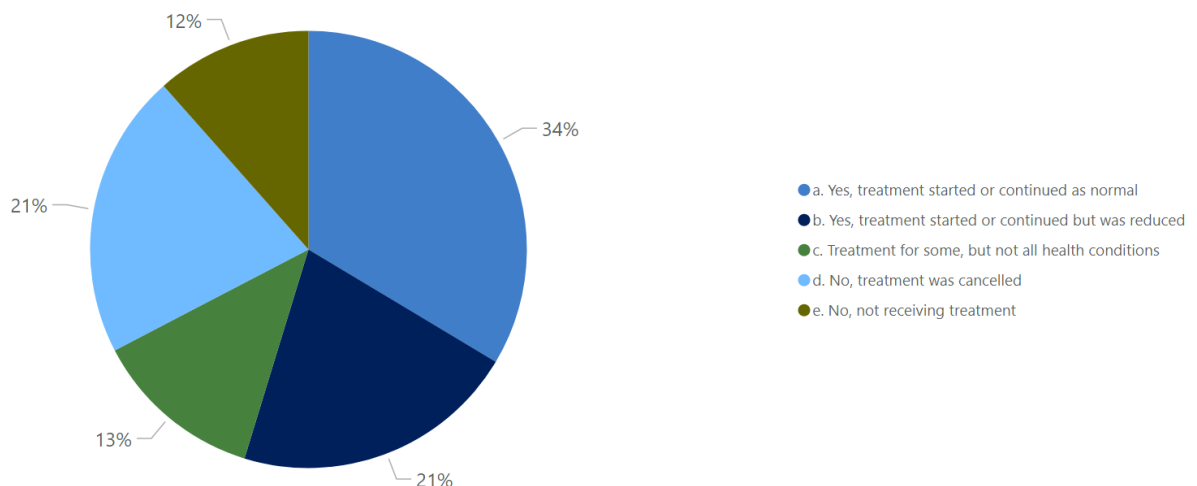
One third of people (33%) interviewed in this period stated they were receiving medical care for a long-term mental or physical health condition, problem or illness prior to the Coronavirus (COVID-19) outbreak (Figure 13).

Figure 13: Proportion of people receiving medical care for any long-term mental or physical health condition, problem or illness, before the Coronavirus (COVID-19) outbreak



Following the Coronavirus (COVID-19) outbreak, over a third of those people with a pre-existing health condition (34%) reported that their treatment had started or continued as normal (Figure 14). However, 55% of people had their treatment reduced or cancelled after the Coronavirus (COVID-19) outbreak (Figure 14). Four out of ten of these people (40%) felt that their health had got worse as a result.

Figure 14: 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 2020 - January 2021 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 (82%), attending an online appointment with a health professional (76%) or attending an appointment in person with a health professional (80%) (Figure 15, Figure 16, Figure 17).

Figure 15: Proportion of people who felt comfortable, neither comfortable or uncomfortable, or uncomfortable about seeking advice on the phone from a health professional

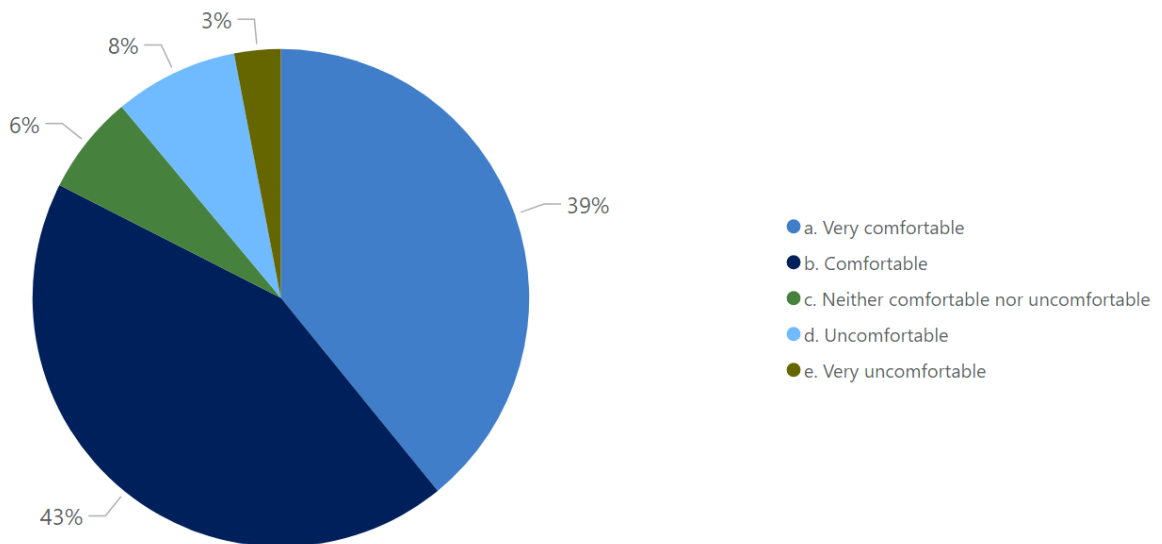


Figure 16: Proportion of people who felt comfortable, neither comfortable or uncomfortable, or uncomfortable about attending an online appointment with a health professional

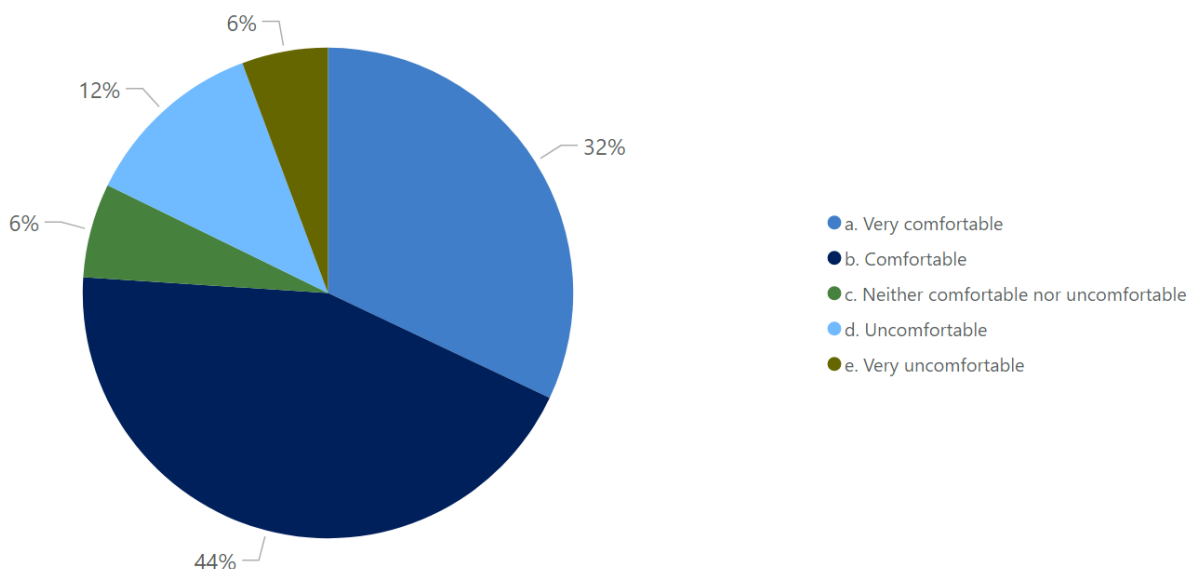
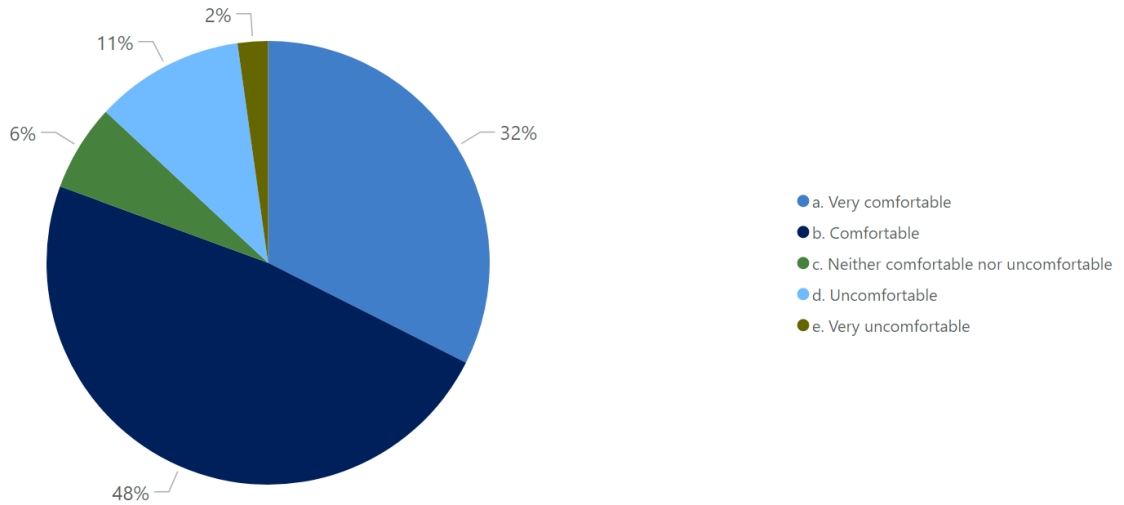


Figure 17: Proportion of people who felt comfortable, neither comfortable or uncomfortable, or uncomfortable about attending an appointment in person with a health professional



Not all people would be comfortable interacting with healthcare services in a hospital environment at this time. Whilst 67% of people said they would be comfortable attending a hospital appointment if their doctor asked them to, 24% stated that they would be uncomfortable with this request (Figure 18).

Just over half of people (56%) said they would be comfortable attending Accident and Emergency (A&E) if they had an urgent health problem but 35% stated they would feel uncomfortable about having to do so (Figure 19).

Figure 18: Proportion of people who felt comfortable, neither comfortable or uncomfortable, or uncomfortable about attending a hospital appointment if asked by their doctor

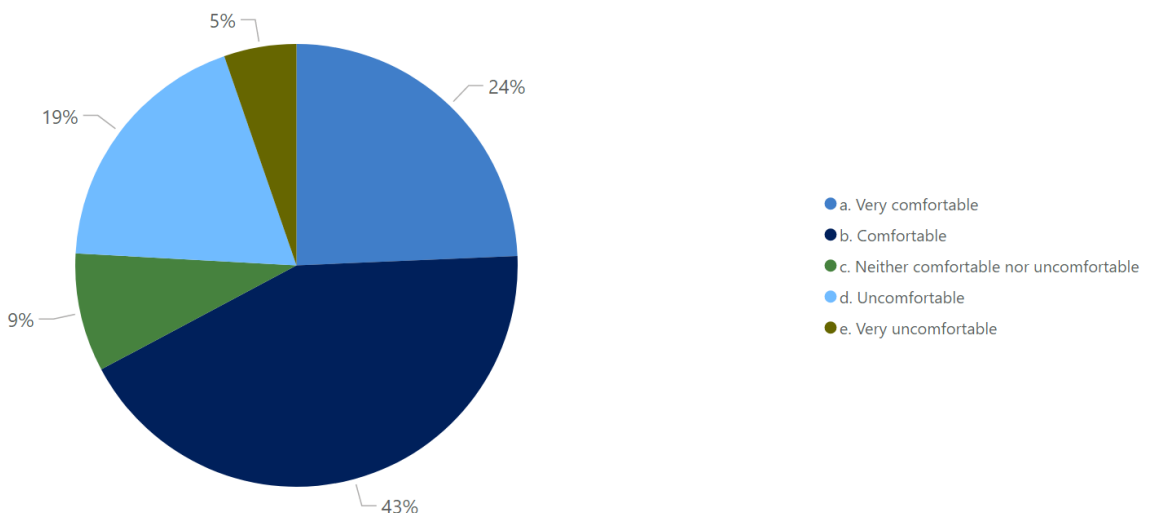
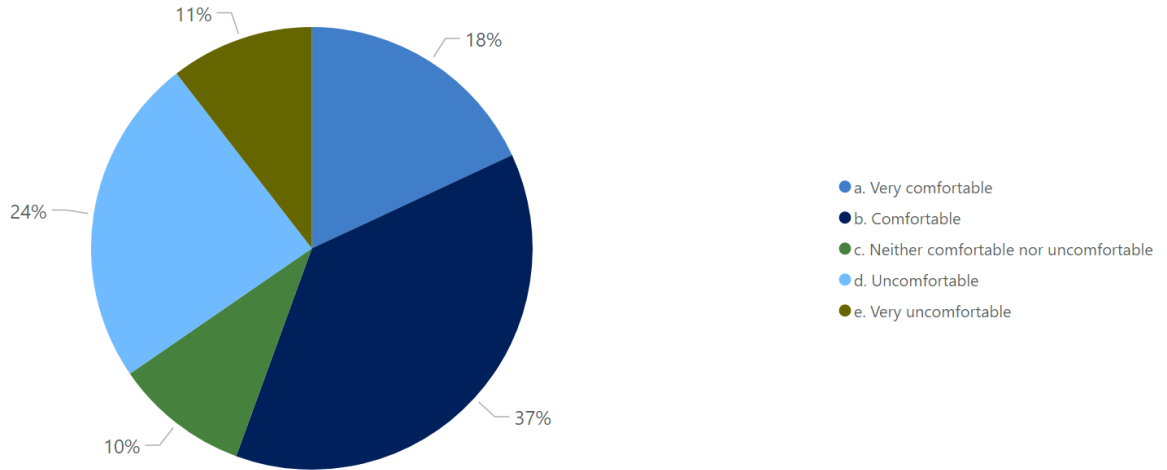


Figure 19: Proportion of people who felt comfortable, neither comfortable or uncomfortable, or uncomfortable about attending Accident and Emergency (A&E) for an urgent medical condition

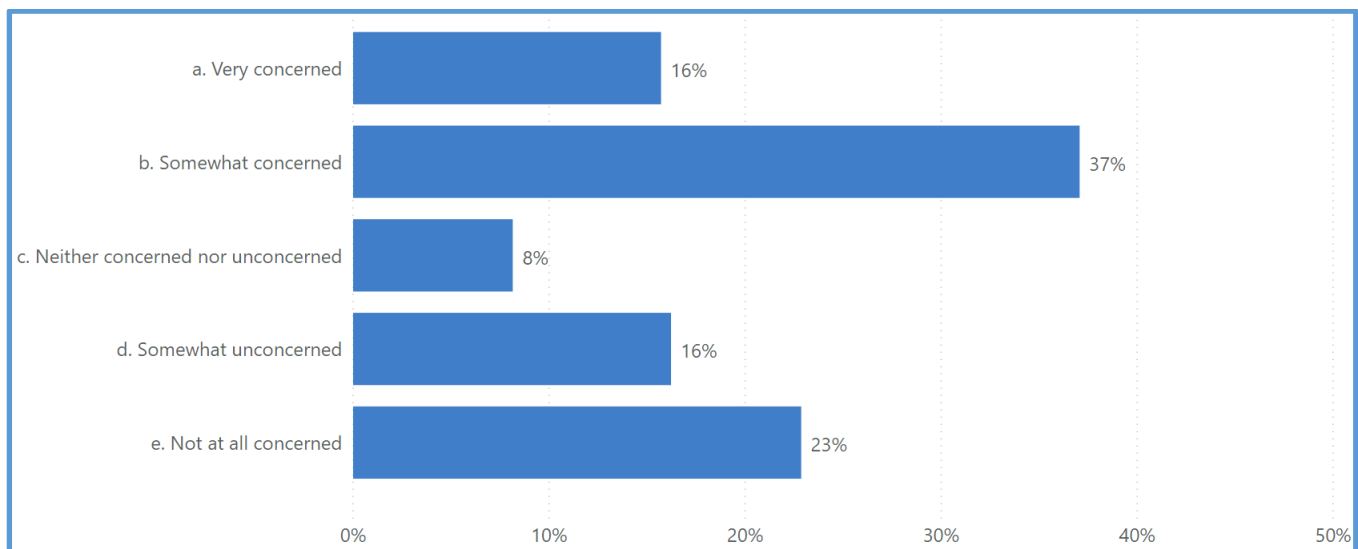


Concerns about Children or Young people attending School in the pandemic

During the months of September – December 2020, people with school aged children in their household were asked how concerned or unconcerned they were about them being back in school.

Just over half of these people (53%) were concerned about the children or young people in their household being back in school, whilst just under two fifths (39%) were unconcerned (Figure 20).

Figure 20¹: Proportion of people who were concerned about the child or young person in their household being back in school



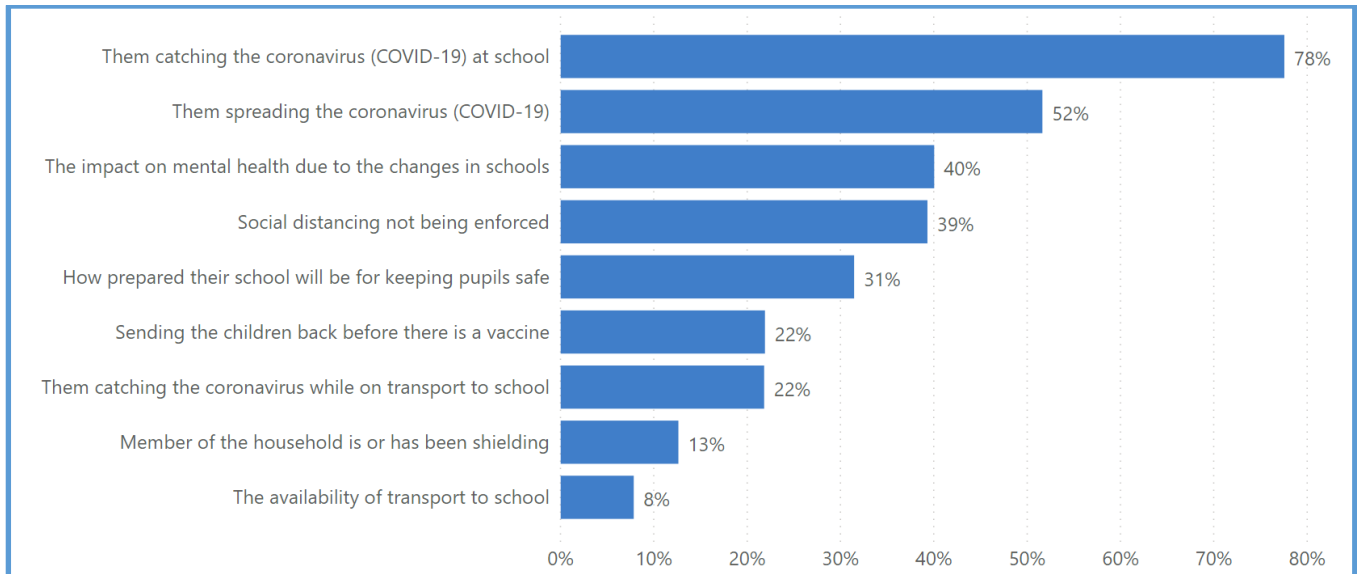
¹ Following school closures, a small number of interviews carried out during January 2021 have been excluded from these results

Those people who said that they were concerned about the children or young people in their household being back in school, were asked a further question about what those concerns were.

Figure 21 ranks these concerns from highest to lowest based on the proportion of people stating each response. The top four highest ranking concerns were:

- I am concerned about them catching the Coronavirus (COVID-19) at school (78%).
- I am concerned about them spreading the Coronavirus (COVID-19) (52%).
- I am concerned about the impact on mental health and well-being due to the changes in schools because of the Coronavirus (COVID-19) (40%).
- I am concerned about social distancing not being enforced (39%).

Figure 21¹: Reasons people were concerned about the children or young people in their household being back in school

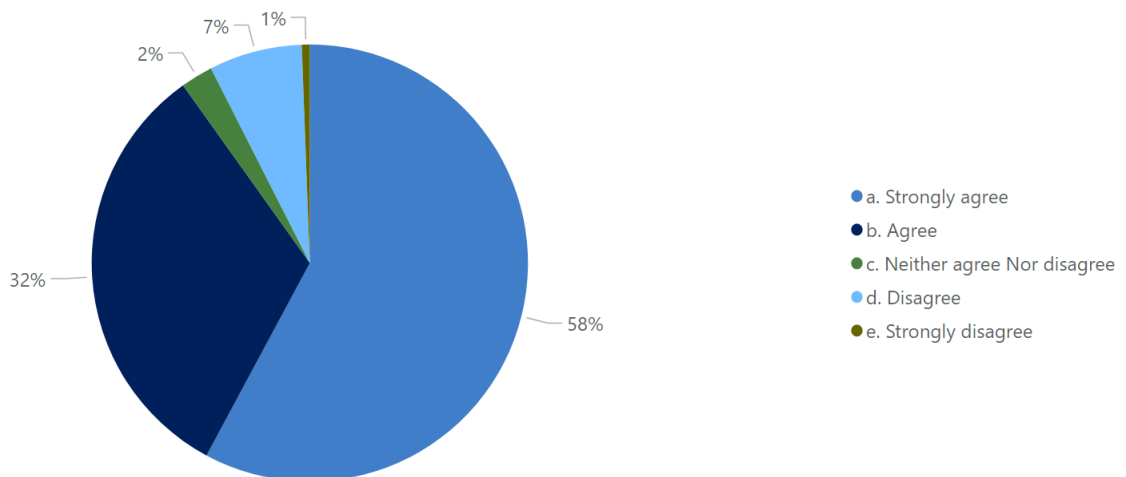


¹ Following school closures, a small number of interviews carried out during January 2021 have been excluded from these results

Those people, who said that there had been a Coronavirus (COVID-19) outbreak in the first term in the school their eldest child attended, were asked about how they thought the school had handled their Coronavirus (COVID-19) outbreak.

The vast majority of these people (90%) agreed that the school had done a good job in the handling of their Coronavirus (COVID-19) outbreak (Figure 22).

Figure 22¹: Proportion of people who agreed or disagreed that the school of the eldest child had done a good job in their handling of their Coronavirus (Covid-19) outbreak



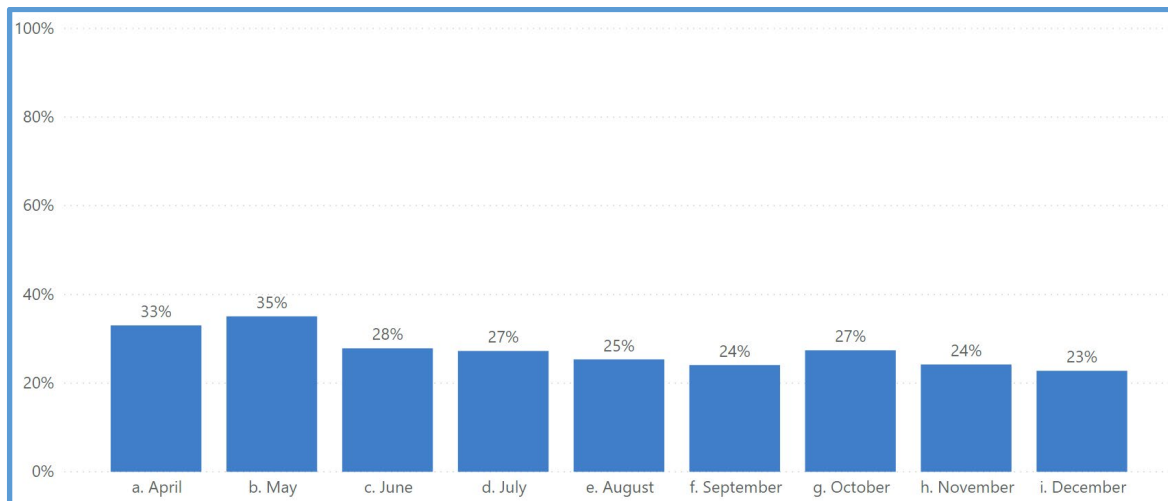
¹ Following school closures, a small number of interviews carried out during January 2021 have been excluded from these results

Financial Concerns

Overall, just over one quarter of people (26%) expected the financial position of their household to get worse in the next 12 months. Some 62% expected their household financial situation to stay the same whilst 13% expected it to get better.

Over time, these financial concerns appeared to have eased. The proportion of people, who expected the financial position of their household to get worse, was highest in the month of May 2020 (35%) but decreased to 23% in December 2020 (Figure 23).

Figure 23: Proportion of people who expected the financial position of their household to get worse in the next 12 months, by month of interview



The proportion of people who reported that it was difficult to pay their usual household bills has increased from 3% to 13% since the Coronavirus (COVID-19) outbreak (Figure 24, Figure 25).

Figure 24: 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

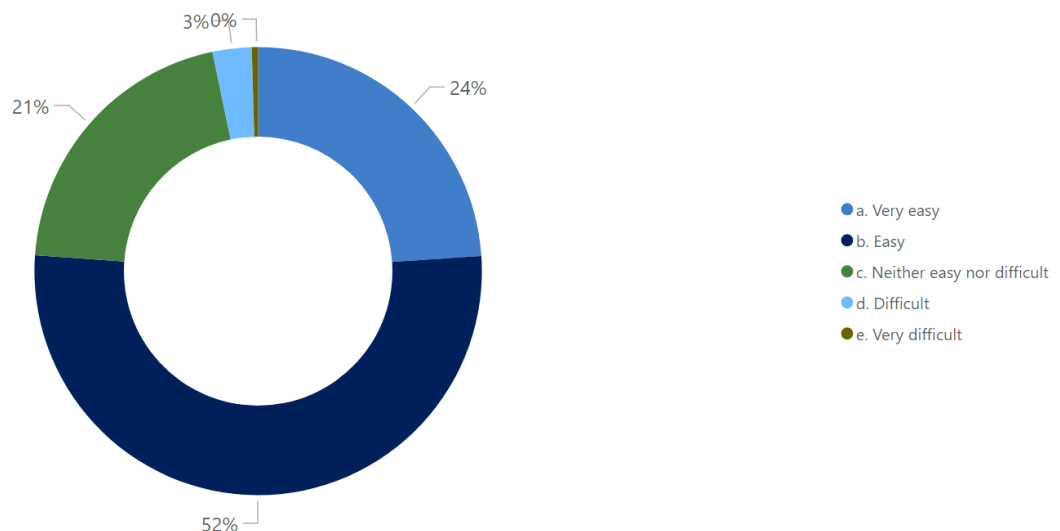
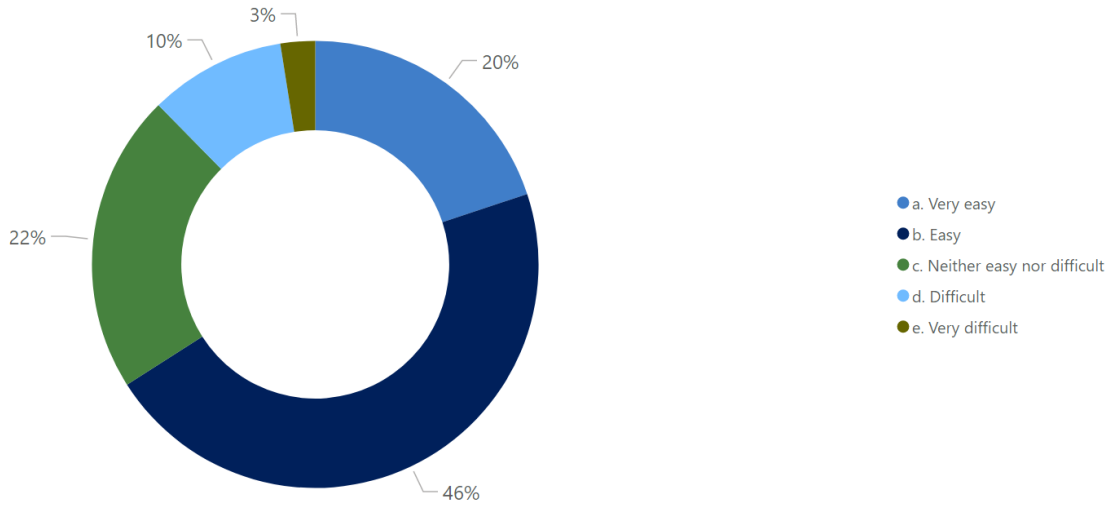


Figure 25: Proportion of people who thought it was easy, neither easy nor difficult, or difficult to pay their usual household bills, since the Coronavirus (COVID-19) outbreak



Approximately, one in ten people (9%) interviewed in the period July 2020 - January 2021 said they had borrowed more money or used more credit than usual since the Coronavirus (COVID-19) outbreak (Figure 26). Most of these people (61%) had borrowed or used credit of less than £1,000 (Figure 27).

Figure 26: Proportion of people who had to borrow more money or use more credit than usual since the Coronavirus (COVID-19) outbreak

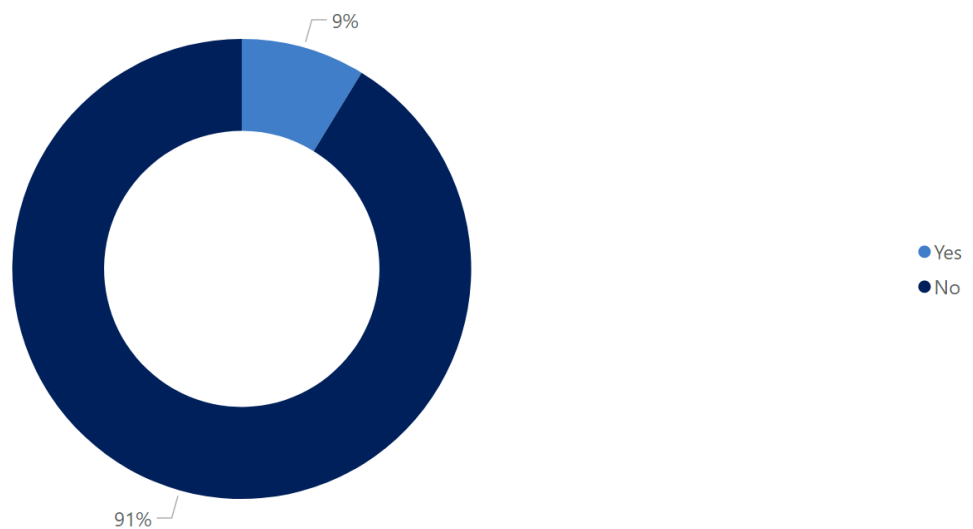
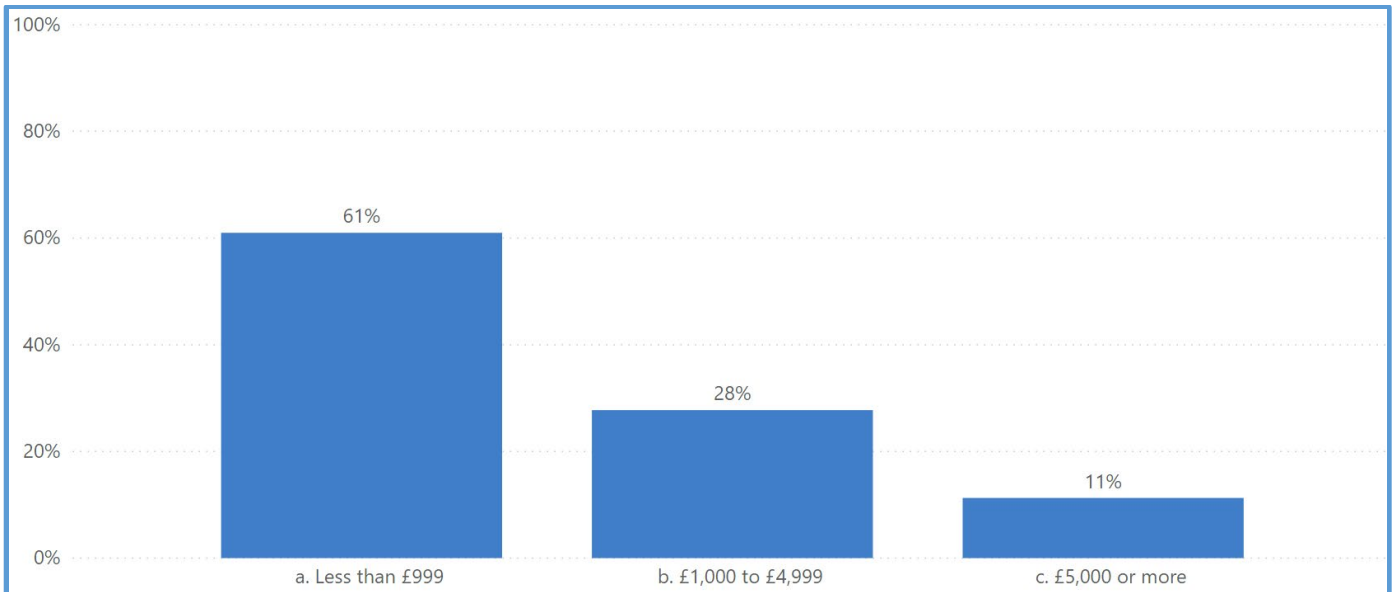


Figure 27: Amount of money borrowed or spent by those who said they had borrowed more money or used more credit than usual since the Coronavirus (COVID-19) outbreak

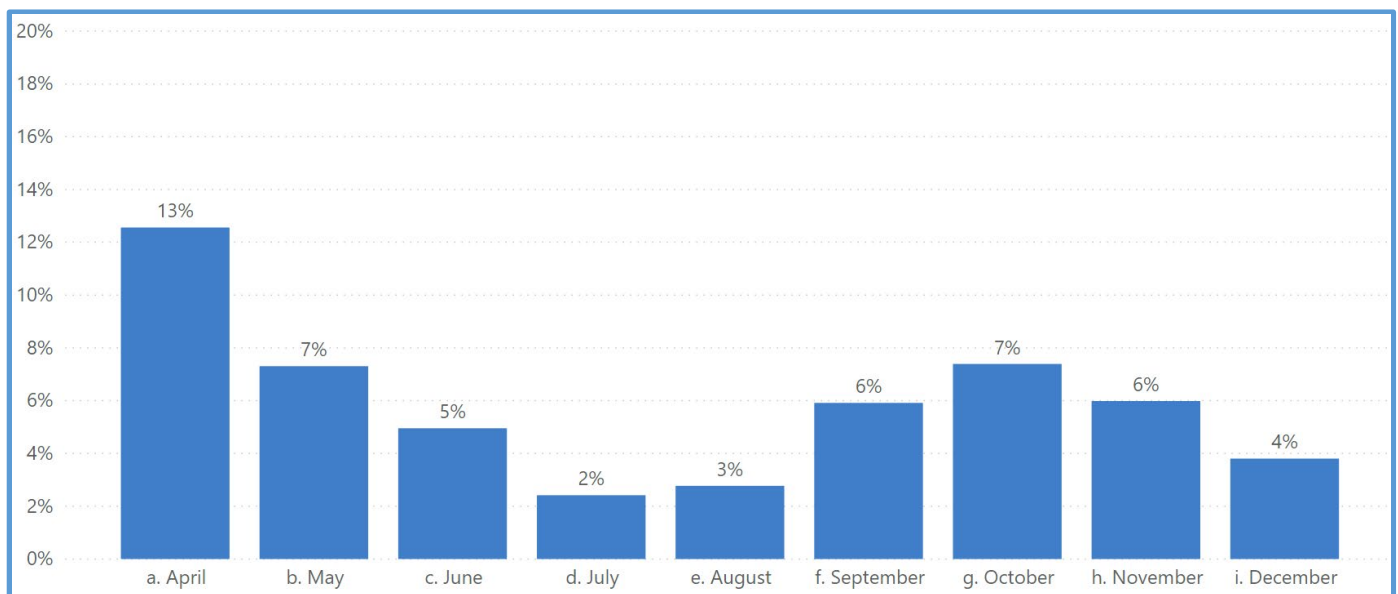


Self-Isolation

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).

The proportion of those self-isolating at home during 2020 in the seven days prior to interview, was highest at the beginning of the pandemic in the month of April (13%) and decreased to its lowest level of 2% in July. Since July, the proportion of people who were self-isolating at home in the seven days prior to interview increased to 7% in October before falling to 4% in December (Figure 28).

Figure 28¹: 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

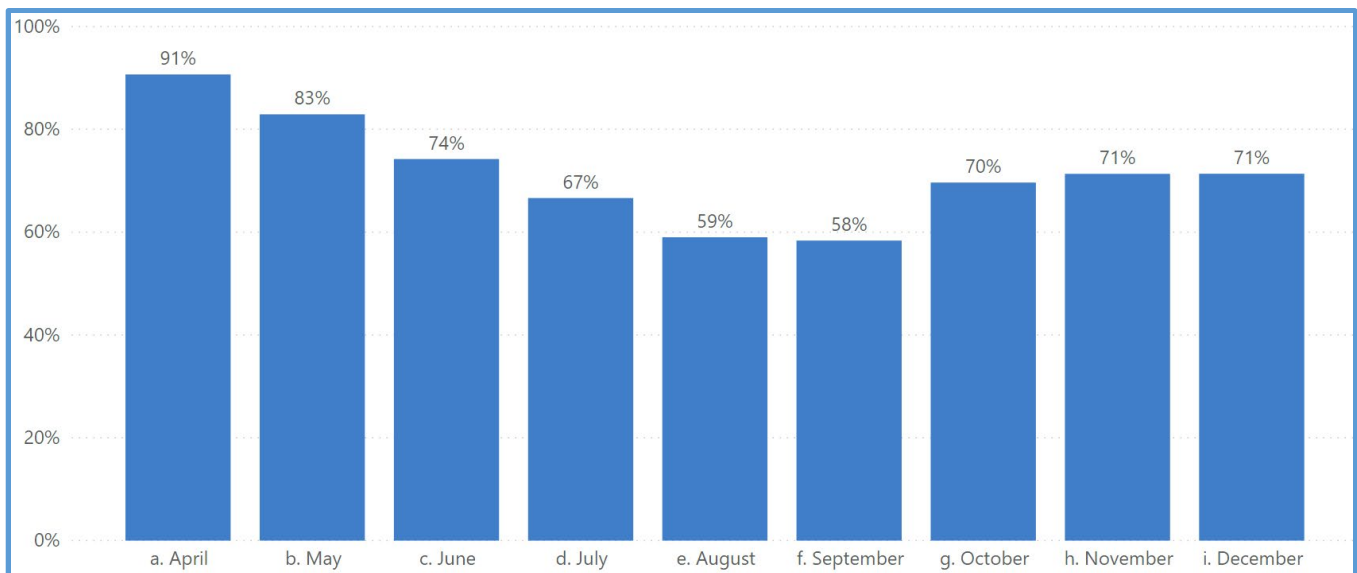


¹ The number of interviews carried out after 31st December 2020 are too low to report on separately in these results

Protecting Older and Vulnerable People

Approximately, 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 during September (58%) before increasing again to 71% in November and December 2020 (Figure 29).

Figure 29¹: 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



¹ The number of interviews carried out after 31st December 2020 are too low to report on separately in these results.

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:

- 7.47 out of 10 for ‘life satisfaction’
- 7.90 out of 10 for **feeling that what you do in life is ‘worthwhile’**
- 7.52 out of 10 for ‘happiness’ yesterday
- 3.31 out of 10 for ‘anxiety’ yesterday

The average (mean) wellbeing rating of people interviewed in the period April 2020 - January 2021 for ‘life satisfaction’ and feeling that things done in life are ‘worthwhile’ were significantly lower than that reported by NISRA for the 2019/20¹ 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 was no significant difference observed in the wellbeing rating 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 – 8 (April 2020-January 2021)	7.47*	7.90*	7.52	3.31*
Personal Wellbeing in NI 19/20	7.86*	8.05*	7.68	3.00*

*A significant difference has been observed

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

The average 'life satisfaction' rating of people interviewed when restrictions had eased in August 2020 (7.78) 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), October (7.32), November (7.24) and December (7.33) was significantly lower than that reported during August (Table 2).

The average 'happiness' rating of people interviewed when restrictions had eased in August 2020 (7.75) was significantly higher than that reported during the lockdown period in May (7.48). However, 'happiness' levels during October (7.38) and November (7.28) were significantly lower than that reported in August and September (7.63). Although levels of 'happiness' have shown an increase in December (7.45), they are still significantly lower than that reported in August, indicative of poorer wellbeing (Table 2).

The average 'anxiety' rating was significantly higher during the lockdown period in May 2020 (3.51) than when restrictions had eased in August (3.05). Average ratings for 'anxiety' were significantly higher in October (3.52) and November (3.46) than they were in August, signifying poorer wellbeing (Table 2). Although levels of 'anxiety' have shown a decrease in December (3.26), they are still significantly higher than the pre-pandemic 2019/20 figure.

Table 2²: Comparing Personal Wellbeing averages during the Pandemic

Average (mean) rating by month of interview	Life Satisfaction	Worthwhile	Happiness	Anxiety
April 2020	7.63	7.81	7.44	3.28
May 2020	7.42**	7.86	7.48**	3.51**
June 2020	7.66	7.92	7.66	3.19
July 2020	7.68	7.88	7.67	3.04
August 2020	7.78**	8.03	7.75**	3.05**
September 2020	7.48**	7.90	7.63**	3.33
October 2020	7.32**	7.90	7.38**	3.52**
November 2020	7.24**	7.83	7.28**	3.46**
December 2020	7.33**	7.89	7.45**	3.26

** 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).

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

Males reported significantly higher ratings of 'life satisfaction' than females. Similarly, males also reported a significantly lower 'anxiety' score than females. This is indicative of better wellbeing among males in these measures. 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).

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

Average (mean)	Life Satisfaction	Worthwhile	Happiness	Anxiety
Gender				
Male	7.52*	7.83*	7.55	3.03*
Female	7.43*	7.96*	7.49	3.58*
Age-group				
16 – 44	7.40**	7.88**	7.48**	3.32**
45 – 64	7.37**	7.82**	7.43**	3.39**
65 & over	7.78**	8.05**	7.75**	3.16**
Limiting Longstanding Illness				
Yes	6.78*	7.30*	6.81*	4.33*
No	7.70*	8.09*	7.75*	2.98*
Overall				
Overall Phases 1 – 8	7.47	7.90	7.52	3.31

*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.

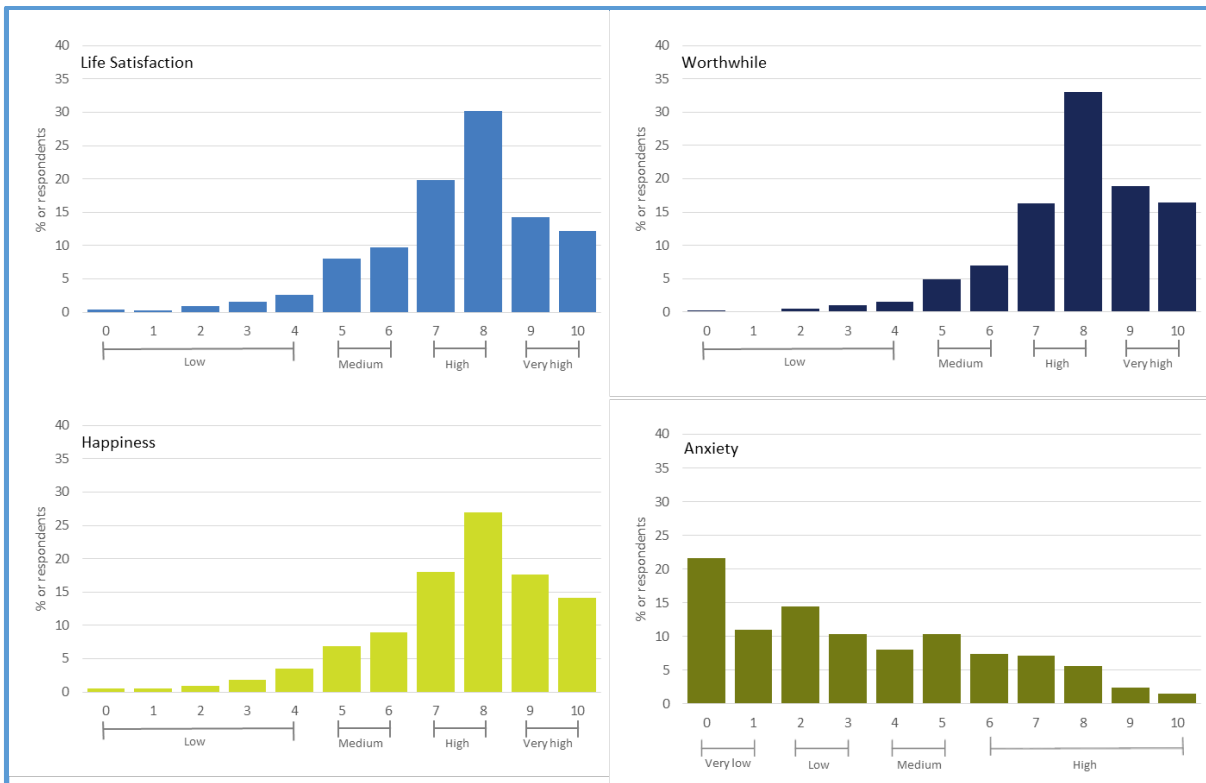
The proportion of people reporting 'Very high' (score of 9 or 10) levels of personal wellbeing, indicating better personal wellbeing was:

- 27% for 'life satisfaction'
- 35% for feeling that what you do in life is 'worthwhile'
- 32% 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 30 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 30: Proportion of respondents scoring 0 to 10 on each of the personal wellbeing scales



For the period April 2020 - January 2021, 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 [#]
Phases 1 – 8 (April 2020-January 2021)	27%*	35%*	32%*	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 2020 to January 2021 reported feeling lonely ‘often/always’. This is the same as the NISRA published figure for 2019/20³ (5%). However, the proportion of people reporting feeling lonely ‘some of the time’ (14%) was significantly higher than the 2019/20 figure (12%). In comparison, the proportion of people reporting they ‘never’ feel lonely (27%) was significantly lower than the figure reported in the 2019/20 data (30%) (Table 5).

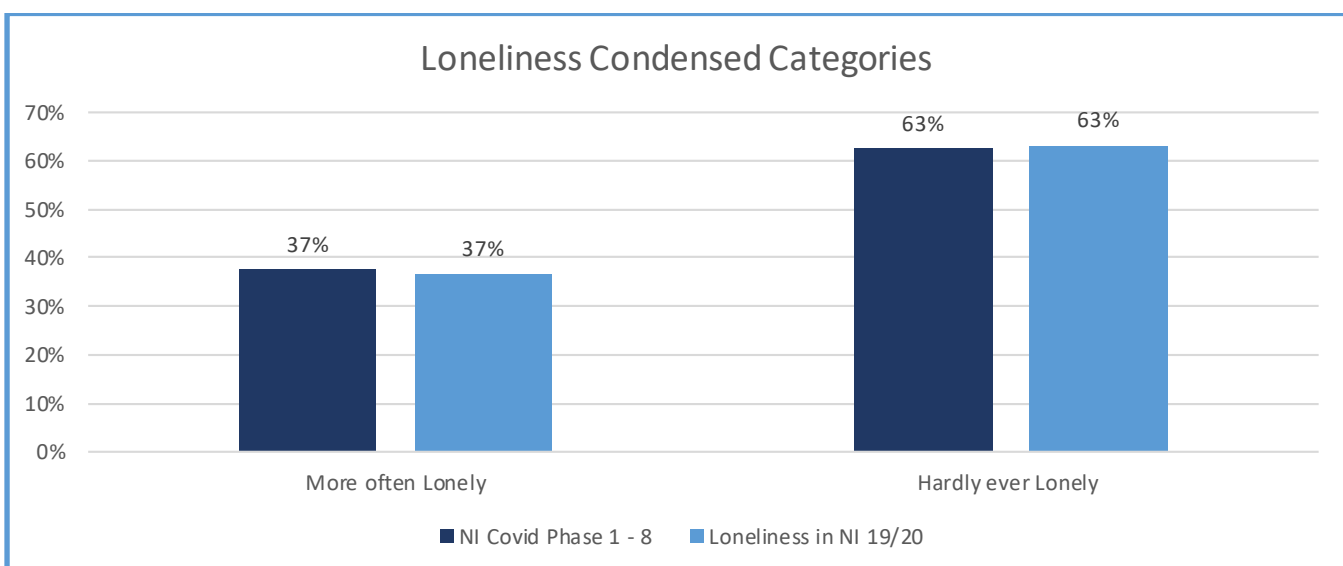
Table 5: Frequency of loneliness in people aged 16+

	Often/always	Some of the time	Occasionally	Hardly ever	Never
Total Phases 1 - 8	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 category⁴). This figure is the same as the 19/20 figure published by NISRA (37%) (Figure 31).

Figure 31: Frequency of loneliness (Condensed Categories)



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

⁴ 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 (33%) and September (36%). Although the proportion of people who felt ‘more often lonely’ increased in October and November (when restrictions were in place), the differences are not statistically significant (Table 6).

Table 6⁵: 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%
November 2020	39%	61%
December 2020	36%	64%

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

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

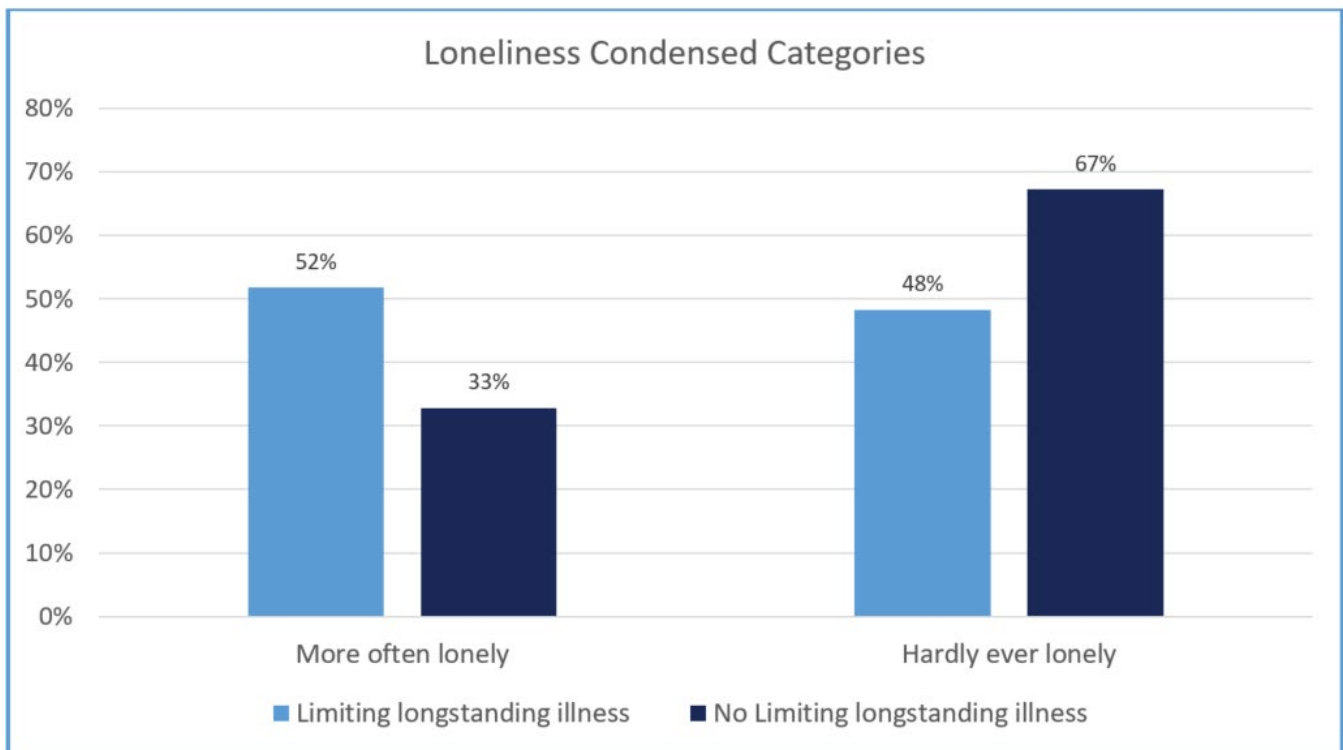
Frequency of loneliness	Often/always	Some of the time	Occasionally	Hardly ever	Never
With a limiting longstanding illness	12%*	19%*	20%*	29%*	19%*
Without a limiting longstanding illness	3%*	13%*	18%*	38%*	30%*
Total Phases 1 - 8	5%	14%	18%	36%	27%

*A significant difference has been observed

⁵ Loneliness estimates for the months of April to October 2020 have been recalculated following the weighting of the data to include the additional months of November and December. Estimates for these months presented here will therefore differ from the previous publication.

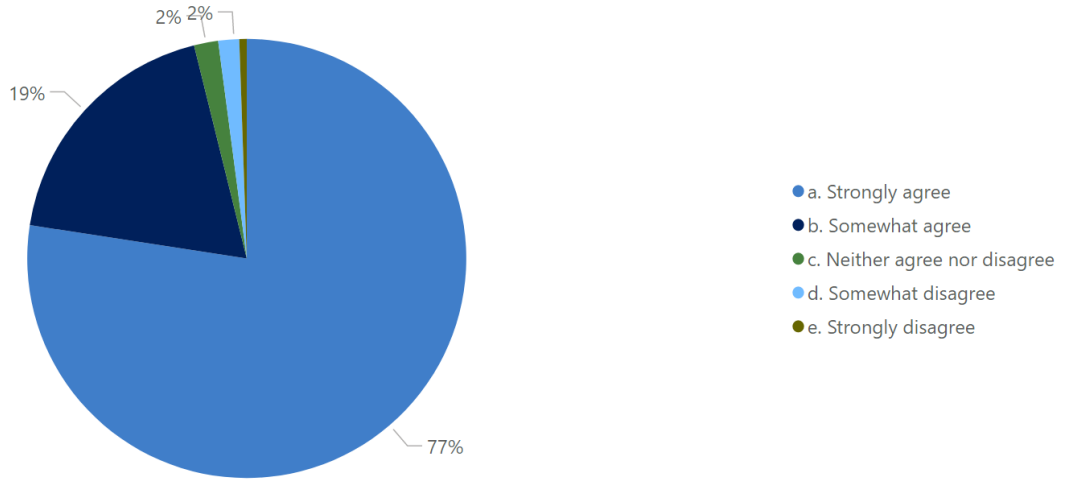
Some 52% of respondents with a limiting longstanding illness reported feeling ‘more often lonely’, this is significantly higher than those without a limiting longstanding illness (33%) (Figure 32).

Figure 32: 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 33).

Figure 33: Proportion of people who agreed or disagreed that if they needed help, people would be there for them

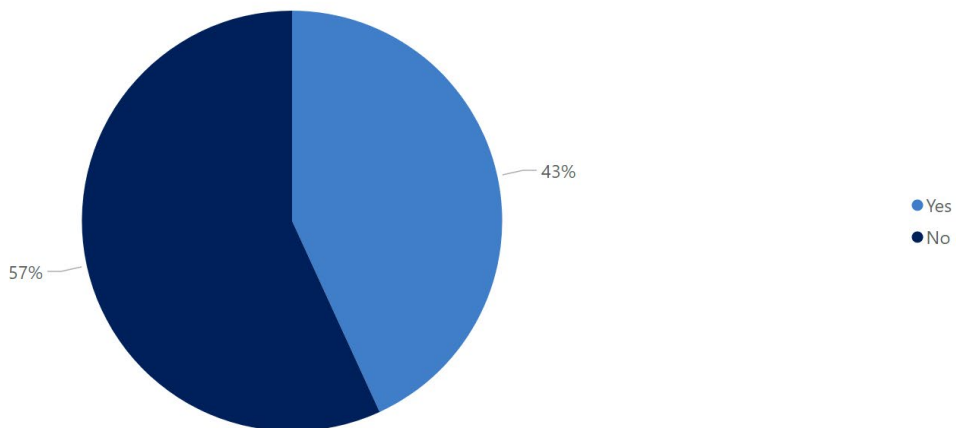


StopCOVIDNI App

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 2020 - January 2021 were asked about this App.

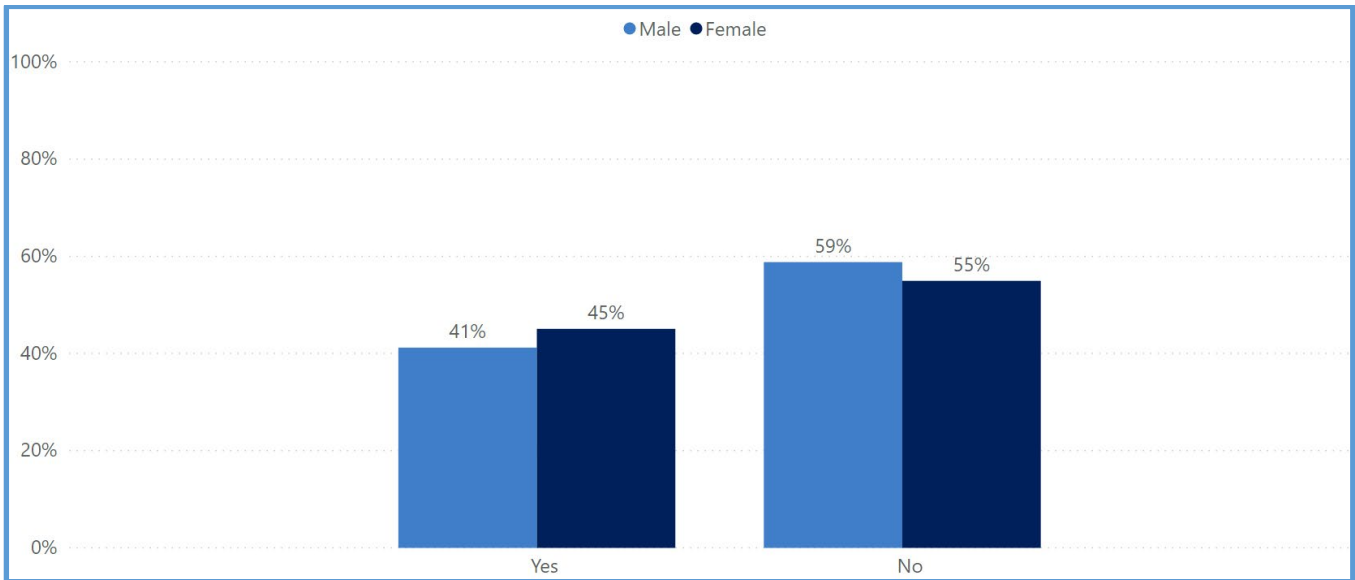
Just over two-fifths of people (43%) said that they had downloaded the StopCOVIDNI App at the time of interview (Figure 34).

Figure 34: Proportion of people reported to have downloaded the StopCOVIDNI App



The proportion of females who downloaded the app (45%) was higher compared to males (41%) (Figure 35).

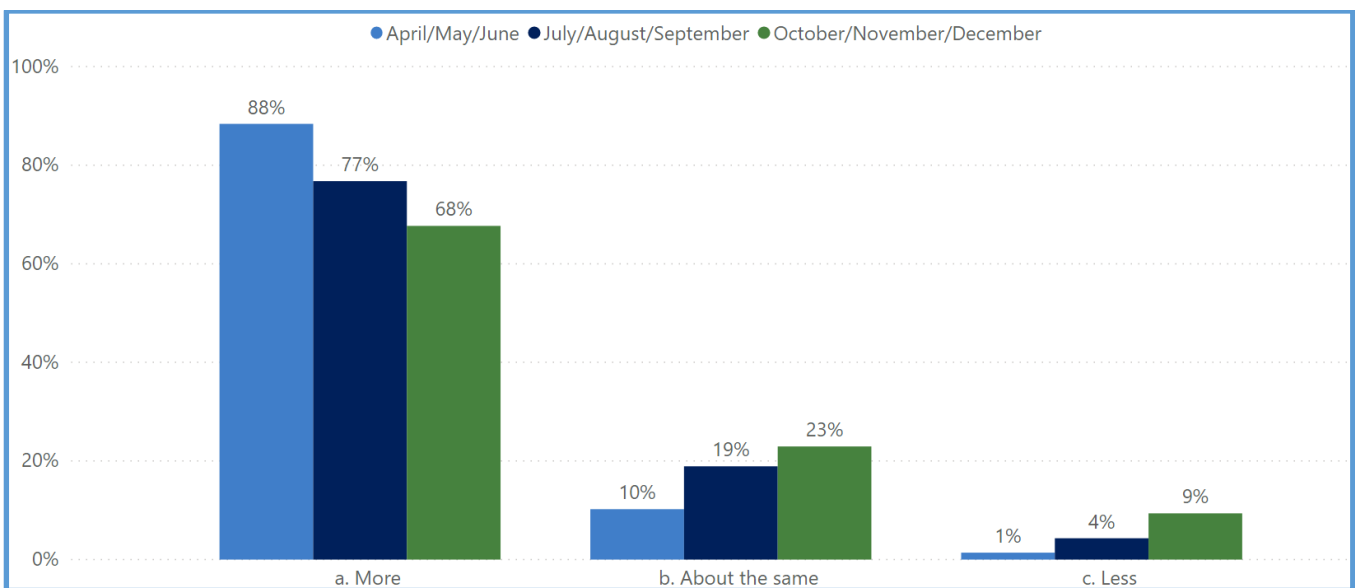
Figure 35: Proportion of people reported to have downloaded the StopCOVIDNI App, by sex



Community Support

The proportion of people who said that people were doing more to help others during the Coronavirus (COVID-19) outbreak decreased significantly over the pandemic period from 88% in the period April-June 2020 to 68% in October-December (Figure 36).

Figure 36¹: 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

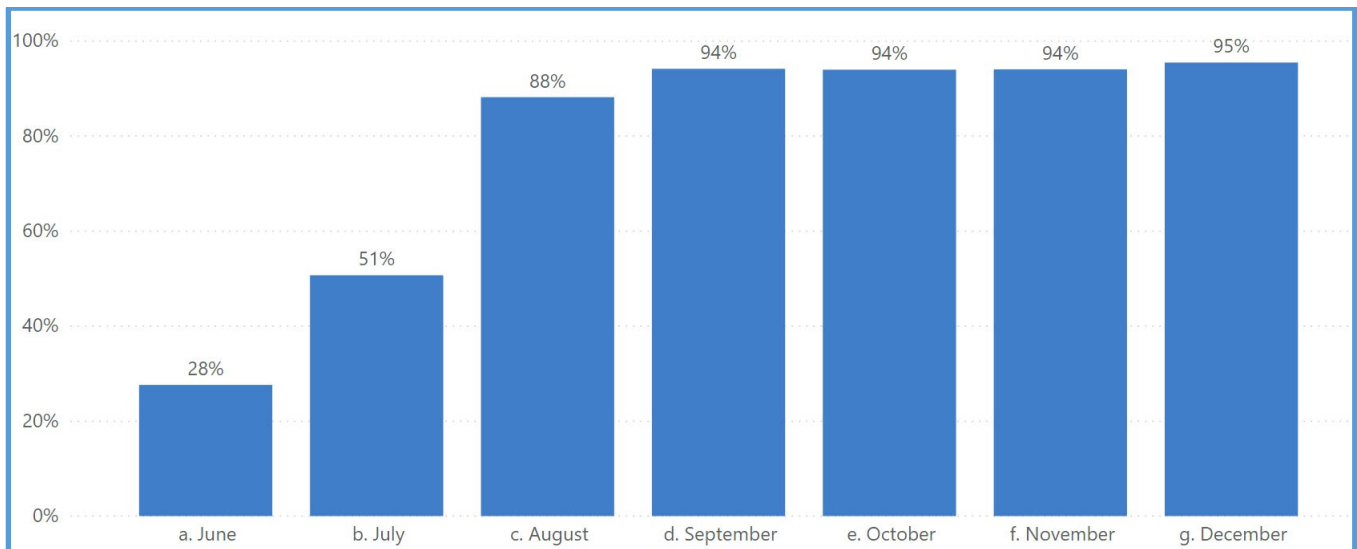


¹ The number of interviews carried out after 31st December 2020 are too low to report on separately in these results.

Face Coverings

In the period June 2020 - January 2021, 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 2020 to 95% in December (Figure 37).

Figure 37: 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

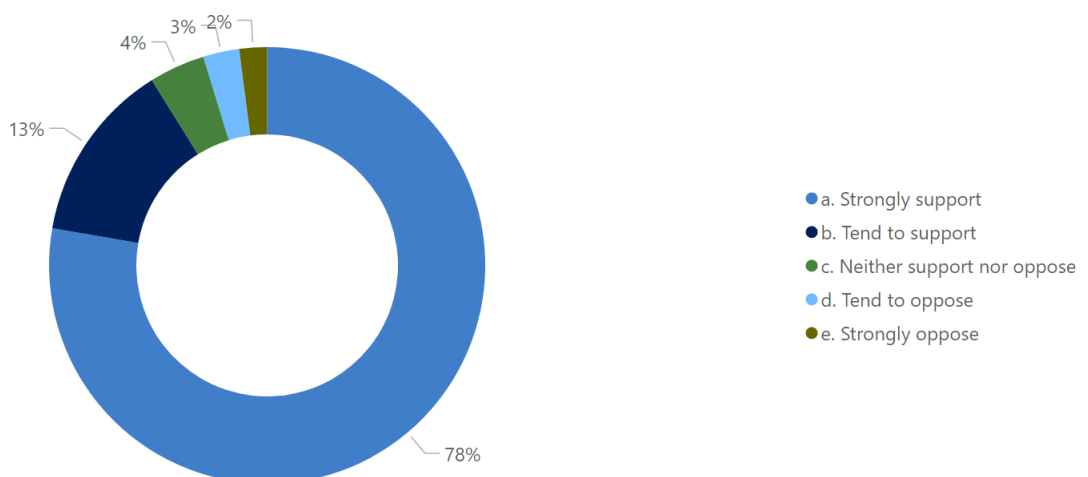


¹ The number of interviews carried out after 31st December 2020 are too low to report on separately in these results.

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

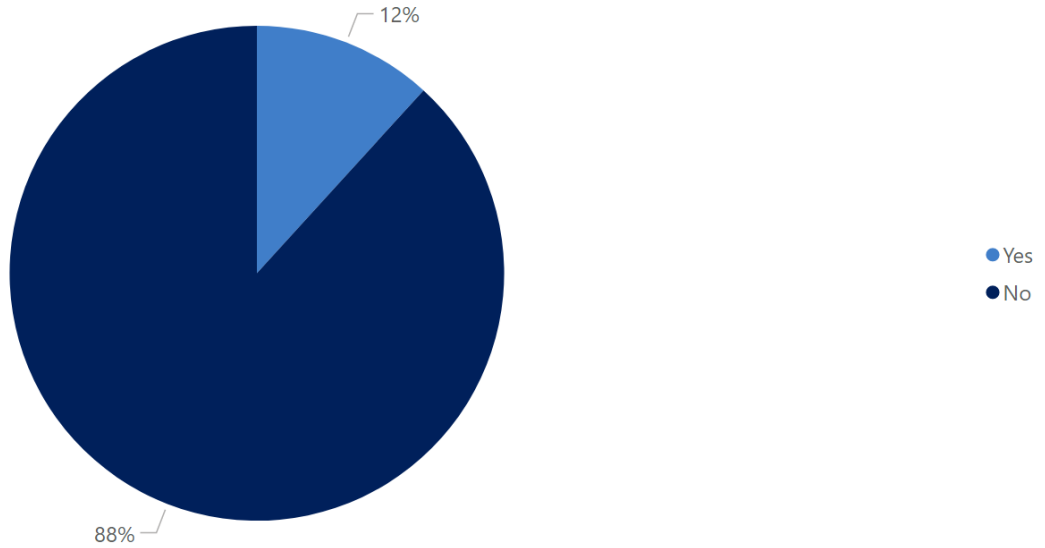
Overall, 91% said they supported the rules making it mandatory to wear face coverings in shops and supermarkets (Figure 38).

Figure 38: Proportion of people who supported or opposed rules making the wearing of face coverings in shops and supermarkets mandatory



In the period November 2020 - January 2021, people were asked whether or not they are exempt from wearing a face covering, even when it is mandatory to do so. Over one in people (12%) said that they were in the category of people who did not have to wear a protective face covering (Figure 39).

Figure 39: Proportion of people who self-reported they do or do not have to wear a face covering when it is mandatory



[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 1-8 have 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>

Phases 1 to 6:

<https://www.nisra.gov.uk/publications/nisra-coronavirus-covid-19-opinion-survey-phases-1-6-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/articles/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.

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