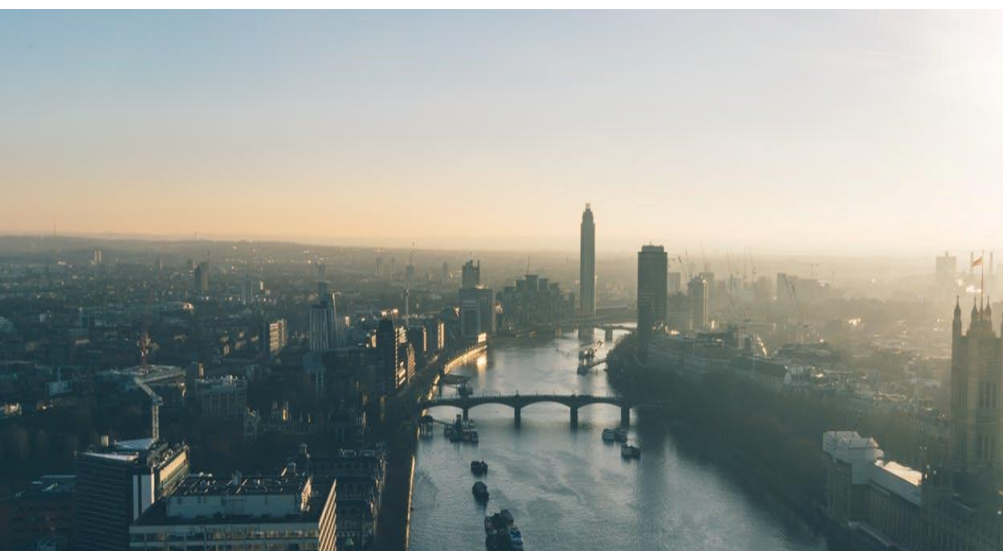
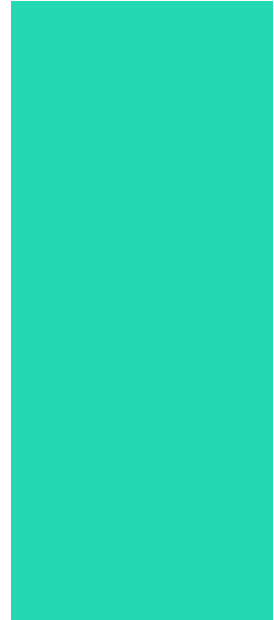




The impact of COVID-19 on Londoners' mental health and wellbeing:  
Future Trends and Forecasting



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## Future trends and forecasting

The detrimental impact on mental health is likely to last much longer than the physical health impacts. Various forecasting models indicate that the prevalence of poor mental health is expected to increase and that this could impact on demand for mental health services over the next three years. Research from the King's Fund<sup>1</sup> suggests that up to 75% of the population will experience distress that should resolve with the right support but could escalate if left unaddressed. The research goes on to suggest that 15-20% of the population will experience mild to moderate disorder and 3-4% severe disorder. Furthermore, research from the Strategy Unit<sup>2</sup> suggests there will be around a 33% increase in demand for mental health services over the next three years across the UK, which equates to an extra £1 billion a year or around 8% of annual NHS expenditure on mental health services.

## England and the lifting of social restrictions

As the pandemic continues, it is necessary to recognise that the nuances of how uncertainty surrounding COVID-19 and the restrictions in place affect Londoners' mental health and wellbeing in a way that is not necessarily straightforward or always obvious. As vaccinations continue to be administered and we transition to a new stage of freedom and normality following the shift to the lowest level of restrictions on 19 July, whereby the majority of legal Covid restrictions came to an official end and guidance began to emphasise personal responsibility, it must be recognised that not all people will adjust to this new normal on the same timescale. While cases remain high and rising, Londoners have been asked to continue to act carefully and remain cautious. For many, feelings of anxiety, stress or worry are entirely normal reactions to difficult circumstances. We must continue to focus on ensuring that Londoners who need help and support receive it, whilst being careful not to over-pathologise the natural process of how people adapt and cope with change.

As the pandemic evolves and elongates, it is important to reflect on the effects of coping with and responding to COVID-19. The London response during the first national lockdown was largely rooted in voluntary and community action, with swift and heroic efforts in March and April 2020 resulting in innovation and transformation at a scale and speed never seen before. Anecdotal insights suggest that the wellbeing and resilience of voluntary organisations and community groups has been worn down over time. That, along with changing public mood, may mean that the voluntary and community response is not at the same scale as it was during the first

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<sup>1</sup> The King's Fund (2021) Covid-19 recovery and resilience: what can health and care learn from other disasters? <https://features.kingsfund.org.uk/2021/02/covid-19-recovery-resilience-health-care/>

<sup>2</sup> The Strategy Unit (2021) Estimating the impacts of COVID-19 on mental health services in England [https://www.strategyunitwm.nhs.uk/sites/default/files/2020-11/Modelling%20covid-19%20%20MH%20services%20in%20England\\_20201109\\_v2.pdf](https://www.strategyunitwm.nhs.uk/sites/default/files/2020-11/Modelling%20covid-19%20%20MH%20services%20in%20England_20201109_v2.pdf)

national lockdown. If that is the case, it will impact London's most vulnerable the most.

## **Predicting who will get long-COVID**

As infection rates remain continually high, incidences of the condition referred to as long-COVID, whereby symptoms persist for weeks or months following the initial infection will pose a sustained challenge for public health and public mental health. The COVID-19 Symptom Study<sup>3</sup> has been able to build a model to predict the likelihood of developing long-COVID based on age, gender, BMI and the number and combination of symptoms experienced in the first week of illness.

Statistical tests showed that this model was able to identify more than two thirds (69%) of people who went on to get long-COVID (sensitivity) and was 73% effective at avoiding false alarms (specificity). This simple model suggests that it should be possible to predict using the app who is more likely to go on to suffer from long-COVID, to help target early interventions and direct research aimed at better understanding and treating this poorly understood phenomenon.

## **Impact on London businesses and trade**

COVID-19 is having a serious impact on all London business sectors and industries. All sectors have been rapidly adjusting to the changing needs of their people, their customers and suppliers, while navigating the financial and operational challenges of the pandemic. Using the GLA Economics' 38th London forecasting model<sup>4</sup>:

- London's real Gross Value Added (GVA) growth rate is forecast to be 5.4% this year due to the recovery from the COVID-19 crisis. This growth rate is expected to increase slightly to 6.9% in 2022 before moderating to 3.1% in 2023.
- London is forecast to see a fall in the number of workforce jobs in 2021 (-3.6% in annual terms) although this will recover in 2022 (2.9%) before accelerating in 2023 (4.2%).
- Similarly to GVA, London's household income and expenditure are both forecast to grow in all years of the forecast period.

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<sup>3</sup> Covid Symptom Study (2020): <https://covid.joinzoe.com/>

<sup>4</sup> The forecast is based on a recently updated econometric model built by GLA Economics. For more details see 'The new GLA Economics forecast models for London's economy, GLAE Working Paper n°98, June 2020'



## Impact of debt

Looking at just one area of financial hardship, a meta-analysis showed that being in debt increased the risk of mental disorders by threefold.<sup>5</sup> The Financial Conduct Authority estimated that 17% of Londoners were already over-indebted pre-pandemic, which means that they were struggling to keep up with regular payments. Findings from Turn2Us<sup>6</sup> have shown 34% of people nationally have had to use some form of debt to get by since March 2020. If we assume the number of Londoners over-indebted increases by 17%, then the prevalence of mental disorders due to debt will increase from 28% to 45% (Population attributable fraction; assuming causality). Applying this to a prevalence of 18%, then additional debt could result in 34,000 more working age adults in London suffering from poor mental health.

## Brexit

In addition to the pandemic, the departure of the UK from the EU on 31 December 2020 is already having a noticeable impact on the mental health and wellbeing of Londoners, particularly for the 1 million EU Londoners directly affected. One in three adults (31%) has reported worrying about Brexit, a rate only slightly lower than the proportion of adults who are worried about becoming seriously ill with COVID-19 (33%). The mental health impact of Brexit is most marked in young adults, with minor levels of stress related to Brexit (42%) exceeding minor stress levels for catching COVID-19 (32%) or becoming seriously ill with the virus (22%).<sup>7</sup>

## Forecasting

In England, the Centre for Mental Health<sup>8</sup> has predicted that up to 10 million people (almost 20% of the population) will need either new or additional mental health support as a direct consequence of the crisis. This equates to almost 2 million Londoners who will need support for the mental health in the coming months and years. Based on surge modelling carried out by The Strategy Unit, it is estimated that there will be around 11% more referrals to mental health services every year for the next three years, and this will increase associated costs by £1 billion annually. The

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<sup>5</sup> Richardson et al. (2013) The relationship between personal unsecured debt and mental and physical health: A systematic review and meta-analysis:

[https://eprints.soton.ac.uk/359763/1/\\_filestore.soton.ac.uk\\_users\\_thr1g10\\_mydesktop\\_debt%2520meta.pdf](https://eprints.soton.ac.uk/359763/1/_filestore.soton.ac.uk_users_thr1g10_mydesktop_debt%2520meta.pdf)

<sup>6</sup> Turn2us (2020) Weathering the storm: How covid-19 is eroding financial resilience:

<https://www.turn2us.org.uk/T2UWebsite/media/Documents/Communications%20documents/Weathering-the-storm-How-Covid-19-is-eroding-financial-resilience-Full-Report-Final.pdf>

<sup>7</sup> University College 2021 (2021) COVID-19 Social Study: <https://www.covidsocialstudy.org/results>

<sup>8</sup> Centre for Mental Health (2020) Covid-19 and the nation's mental health: October 2020

<https://www.centreformentalhealth.org.uk/publications/covid-19-and-nations-mental-health-october-2020>

expenditure that will be required for mental health services is roughly equivalent to 8% of the NHS's annual budget.<sup>9</sup>

The Centre for Mental Health has devised a toolkit for local areas to calculate a forecast of additional demand for mental health services as a result of the COVID-19 pandemic. It has been a collaboration between NHS Trusts, NHS England and The Centre for Mental Health. The precise impact is unknown, and predictions are difficult, but these estimates have been produced to aid further consideration of the specific demographics of communities and to determine the services that may be required.<sup>10</sup>

### **Anxiety & depression**

- Over 1 million Londoners without pre-existing mental health conditions are predicted to develop moderate to severe anxiety, with 25% requiring access services (293,400 people)
- Over 1.5 million Londoners without pre-existing mental health conditions are predicted to develop moderate to severe depression, with 25% requiring access services (401,400 people)
- Over 1.2 million Londoners with pre-existing mental health conditions are predicted to develop moderate to severe anxiety, with 49.9% requiring access services (605,387 people)
- Over 1.5 million Londoners with pre-existing mental health conditions are predicted to develop moderate to severe depression, with 61% requiring access services (621,214 people)

### **Children & young people**

Over 3.5 million Londoners are under the age of 25:

- Approximately 700,000 will experience depression, with 35% requiring access services (242,440 children & young people)
- Approximately 200,000 will experience post-traumatic stress, with 35% requiring access services (69,624 people children & young people)

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<sup>9</sup> The Strategy Unit (2021) Mental Health Surge Model: <https://www.strategyunitwm.nhs.uk/mental-health-surge-model>

<sup>10</sup> Centre for Mental Health (2020) Forecast Modelling Toolkit: <https://www.centreformentalhealth.org.uk/forecast-modelling-toolkit>

## **Health & social care workers**

Of the estimated half a million health and social care workers in London:

- 75% have reported worsening mental health throughout the pandemic, a rate higher than the national average for this group (66%).
- It is estimated therefore that over 150,000 will experience burnout, with 30% requiring access services (38,000 people)
- Over 60,000 will experience post-traumatic stress, with 25% requiring access services (17,250 people)
- Over 200,000 will experience high psychological distress, with 25% requiring access services (56,125 people)

## **People recovering from severe COVID**

Assuming that 7,000 Londoners are currently experiencing persistent symptoms for weeks and months:

- Over 2,500 Londoners will experience anxiety, with 25% requiring access services (718 people)
- Over 2,000 Londoners will experience depression, with 25% requiring access services (516 people)
- Over 1,600 will experience post-traumatic stress, with 25% requiring access services (403 people)

## **Bereavement**

Assuming that 96,415 (approx. 19,283 deaths x 5) Londoners are bereaved by COVID-19 or experiencing persistent symptoms for weeks and months:

- 9,449 Londoners will experience prolonged grief disorder, with 25% requiring access services (2,362 people)
- 13,498 Londoners will experience post-traumatic stress disorder, with 25% requiring access services (3,375 people)
- 17,740 will experience depressive symptoms, with 25% requiring access services (4,435 people)

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