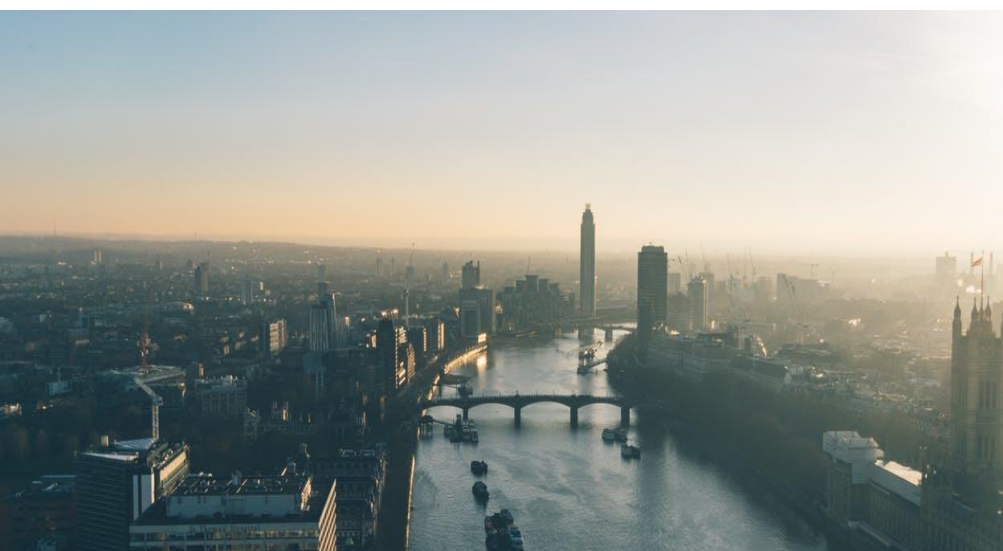
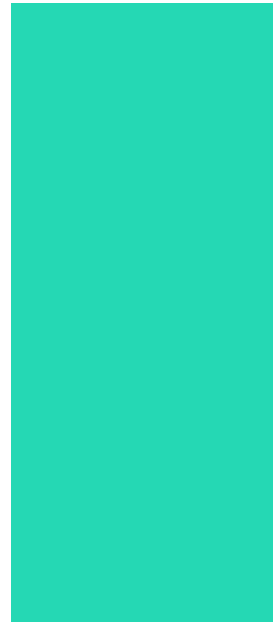




The impact of COVID-19 on Londoners' mental health and wellbeing:

Future Trends and Forecasting



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Future trends and forecasting

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 Fund¹ 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 Unit² 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.

The impact of the pandemic upon population mental health is already being seen. The number of NHS specialist mental health referrals reached a record high by the end of 2021, with 4.3 million people being referred for more specialist care for issues such as anxiety and depression, amongst many others. Just over a million of these were for children or adolescents, offering an indication as to how the disruption the pandemic has had on younger generations' experiences of growing up is manifesting as a growing mental health crisis.³

England in its latest stage of the pandemic: Living with COVID-19

As the pandemic continues, it is necessary to recognise that the nuances of how uncertainty surrounding COVID-19 and the restrictions in place have affected and will continue to affect Londoners' mental health and wellbeing in a way that is not necessarily straightforward or always obvious. Whenever new variants of concern are announced and restrictions are tightened or eased, any shift in areas for concern or promoted changes in behaviour will require people to adjust, adapt and overcome, which may be more easily and quickly done for some than others.

As the remainder of social restrictions are eased and requirements to wear masks, test regularly and self-isolate in cases of a positive COVID-19 test result are removed, Londoners are for the first time being asked to exercise personal responsibility in their day to day lives as a means of protecting themselves and others and to expect the same from those around them. For many this is a cause for celebration, however for many others this represents a source of anxiety and

¹ 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/>

² 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

³ BBC News (2022) NHS struggling with 'long tail' of pandemic mental ill health: <https://www.bbc.co.uk/news/health-60734769>

trepidation as they are forced to accept the very real possibility that they will come into contact with coronavirus at some point in the near future,

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 persists, a significant proportion of people will continue to live with the trauma of the pandemic, exacerbated mental health conditions and cumulative feelings of stress and worry which manifest as poor or deteriorating mental and physical health. The consequences and long-term implications will differ and fluctuate across communities, with disproportionate hardship and poorer outcomes anticipated from those worst affected, such as racialised and minoritised communities or health and social care workers working in high-pressure environments.

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 and reduced confidence in government, may mean that the voluntary and community response is not at the same scale as it was during the first national lockdown. If that is the case, it will impact London's most vulnerable the greatest.

Predicting who will get long-COVID

As infection rates remain continually high and constantly fluctuating, 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 mental health. The COVID-19 Symptom Study⁴ 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-

⁴ Covid Symptom Study (2020): <https://covid.joinzoe.com/>

COVID, to help target early interventions and direct research aimed at better understanding and treating this poorly understood phenomenon.

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.⁵ 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 Turn2Us⁶ have shown 34% of people nationally have incurred 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.

In research conducted by Turn 2 Us in late 2021, An estimated 15 million people (28%) in the UK have experienced at least one life event that was either 'very difficult' or 'not possible' to pay for, using their income and savings, during that past two years. This has impacted on feelings of worsened depression, stress, and anxiety, and has disproportionately impacted women, younger people, and people from ethnic minorities. As the U.K faces a cost of living crisis, whereby inflation is at its highest rate in over 30 years and households face significant increases in utility bills, transport costs, shopping bills and taxes, it is almost inevitable that those still struggling to recover from the financial impact of the pandemic will be hardest hit by these rising costs and will be part of the increasing proportion of the population forced to rely on loans in order to support themselves and their families. For more information on this topic please read our briefing paper on the mental health impacts from financial difficulties currently facing Londoners.

Broader challenges to population mental health

The coronavirus pandemic has represented one of the greatest challenges of recent years on an individual, collective, and systemic scale, and the mental health impacts of this crisis have been some of the most extreme and wide reaching, filtering

⁵ 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

⁶ 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>

through to all levels of society independent of age, gender, race, and socioeconomic background, amongst other factors.

However, as we move beyond the 2-year mark of the pandemic in an official sense, it is evident that coronavirus is just one of a series of broader issues in society that is having a real, tangible impact on the mental health of many Londoners, albeit a significant one. Issues such as Brexit, climate change, geopolitical conflicts and gender-based violence are all topics that have received significant attention in the media and mainstream culture in recent months, and many of these issues have equally been found to be a barrier to overall population wellbeing in terms of their ability to contribute to heightened levels of stress, anxiety, and depression, coupled with worn down individual and collective resilience in the face of this steady stream of crisis events.

We hope to shed light on these various challenges that have been and will continue to emerge in London, focussing on their impact on public mental health and how we can best respond to these crises as professionals and altogether as Londoners.

Forecasting

In England, the Centre for Mental Health⁷ 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 coronavirus 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 expenditure that will be required for mental health services is roughly equivalent to 8% of the NHS's annual budget.⁸

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.⁹

⁷ Centre for Mental Health (2020) Covid-19 and the nation's mental health: May 2021 [Covid-19 and the nation's mental health: May 2021 | Centre for Mental Health](#)

⁸ The Strategy Unit (2021) Mental Health Surge Model: <https://www.strategyunitwm.nhs.uk/mental-health-surge-model>

⁹ Centre for Mental Health (2020) Forecast Modelling Toolkit: <https://www.centreformentalhealth.org.uk/forecast-modelling-toolkit>

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)

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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