

Article

Coronavirus and social relationships and support for vulnerable groups: 2017 to 2018 and 2018 to 2019

A summary of social relationships and social support for vulnerable groups, including older adults and those with a self-defined disability or who are Equality Act Disabled.

Contact:
Eleanor Rees
qualityoflife@ons.gov.uk
+44 (0)1633 651814

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Table of contents

1. [Main points](#)
2. [Support for vulnerable people during isolation](#)
3. [Loneliness of vulnerable people and their interactions with neighbours](#)
4. [Coronavirus and social relationships data](#)
5. [Coronavirus \(COVID-19\) response: next steps](#)
6. [Glossary](#)
7. [Measuring the data](#)

1 . Main points

- Around one in seven UK parents who belonged to one of the [vulnerable](#) groups regularly received cooked meals from an adult child not living with them in the period 2017 to 2018.
- Over the same period, nearly three in ten UK parents aged 70 years and over with a self-defined disability (28.9%) got their shopping regularly from an adult child not living with them.
- People who were Equality Act Disabled were most likely to report feeling lonely “often or always” in England in 2018 to 2019 at 14.1%.
- In 2018 to 2019, those aged 65 years and over in England were most likely to feel “very comfortable” asking a neighbour to collect essentials for them if they were ill (40.4%).

Statistician's comment

“This report looks at how some people have supported one another before the coronavirus (COVID-19) outbreak, including providing meals and shopping and caring for children. It highlights how challenging the times we now find ourselves in could become for some people. The Office for National Statistics (ONS) has introduced new survey questions to monitor how we as a society are responding to the situation, including identifying where challenges are arising. We will be reporting on these regularly.”

Eleanor Rees, Head of Social Well-being Analysis Team, Office for National Statistics

2 . Support for vulnerable people during isolation

This release considers the ways in which [vulnerable](#) groups normally receive support from their family, friends and wider community, to understand how a period of isolation might impact those in need of extra support.

We have focussed on two of the three groups identified by the government that may be considered vulnerable. These are older adults and those with a self-defined disability or who are Equality Act Disabled (for more information on the definitions of disability and vulnerability, see the [Glossary](#)).

Data is at the UK level. Where this has not been possible, England-level data have been used. This analysis only comments on differences where they are statistically significant. UK data refer to 2017 to 2018. England data refer to 2018 to 2019.

At a UK level, parents were more likely to receive help from an adult child not living with them if they were in any of the vulnerable groups we analysed, when compared with the population aged 16 years and over as a whole. Parents within each of these vulnerable groups were more likely to receive help from their adult children shopping for them than the national average aged 16 years and over. This is most likely to be the case for those aged 70 years and over with a self-defined disability, where nearly 3 in 10 (28.9%) said they regularly received help with shopping from an adult child.

Parents within these vulnerable groups were also more likely to have an adult child providing or cooking meals for them than the national average aged 16 years and over. This was most likely among those aged 70 years and over who also had a self-defined disability, at 17.8%.

Figure 1: Grandparents with a self-defined disability were the vulnerable group most likely to look after their grandchildren, although this is still lower than the general grandparent population

Percentage of parents who regularly receive or give selected practical help from or to a child aged 16 years or over not living with them, UK, 2017 to 2018

[Download the data](#)

For more information on how “Self-defined disabled” is defined, see the [Glossary](#).

Over 4 in 10 grandparents (41.6%) in the UK provided regular or frequent childcare for their adult children not living with them. Grandparents within the vulnerable groups were less likely to regularly look after their grandchildren not living with them, with 25.9% of grandparents aged 70 years and over and 37.0% of grandparents with a self-defined disability providing this care. Note that this excludes any care provided to or received from adult children who live in the same household as their parents.

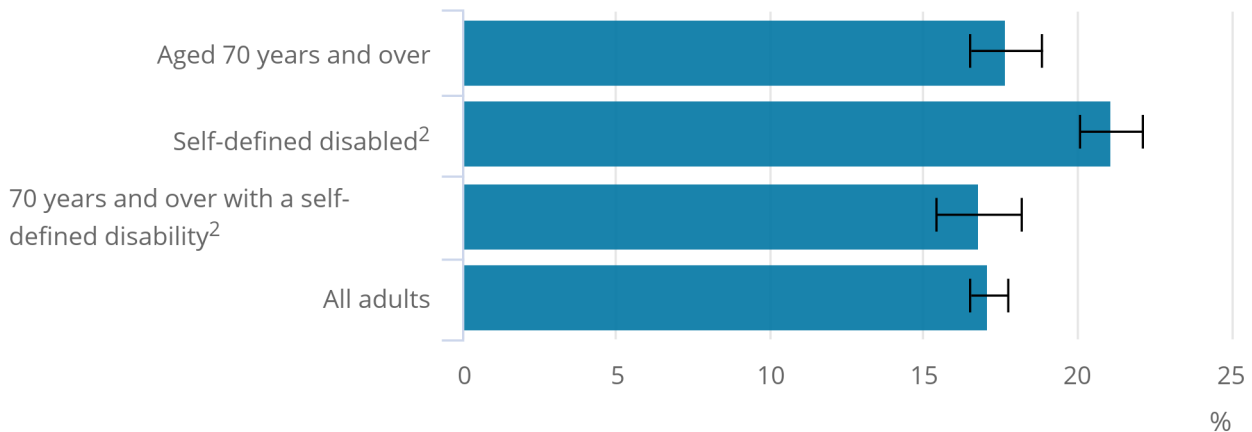
As well as being the vulnerable group most likely to be supporting younger family members outside the household, adults aged 16 years and over with a self-defined disability were also more likely to themselves be giving special help to at least one other sick, disabled, or elderly person living or not living with them at 21.1%.

Figure 2: People with a self-defined disability were more likely than the general adult population to care for other vulnerable people living or not living with them

Percentage of people who give special help to at least one sick, disabled, or elderly person living or not living with them, UK, 2017 to 2018

Figure 2: People with a self-defined disability were more likely than the general adult population to care for other vulnerable people living or not living with them

Percentage of people who give special help to at least one sick, disabled, or elderly person living or not living with them, UK, 2017 to 2018



Source: Understanding Society: The UK Household Longitudinal Study

Notes:

1. Adults aged 16 years and over were asked if there is anyone living with them who is sick, disabled or elderly whom they look after or give special help to (for example, a sick, disabled or elderly relative, husband, wife or friend) and if they provide some regular service or help for any sick, disabled or elderly person not living with them.
2. In Understanding Society: The UK Household Longitudinal Study, “self-defined disabled” has been calculated using the variable, health. This question asks: “Do you have any long-standing physical or mental impairment, illness or disability? By ‘long-standing’ I mean anything that has troubled you over a period of at least 12 months or that is likely to trouble you over a period of at least 12 months.” This question is able to be answered by proxy. In this question, a respondent decides to self-identify as disabled. This question is not the Government Statistical Service (GSS) harmonised principle for assessing long-lasting health conditions or illness.

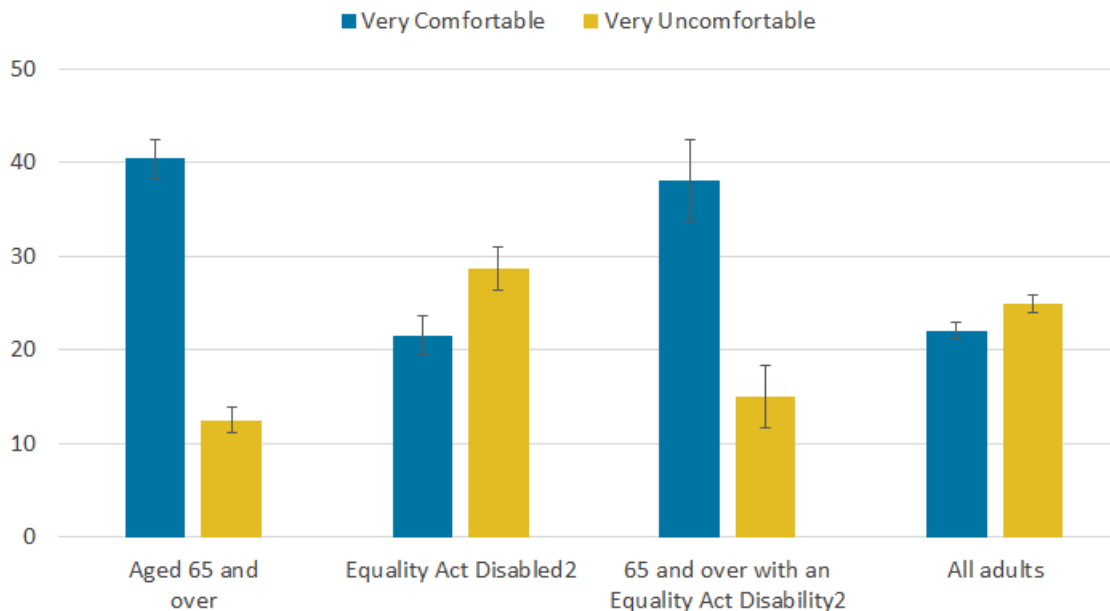
It is not only our families who provide practical support to us during times of need: this could also be provided within your community. In England, those aged 65 years and over were most likely to feel “very comfortable” with their neighbours collecting a few shopping essentials for them while they are ill at home.

People aged 65 years and over were almost twice as likely as the general population to say they felt “very comfortable” with neighbours collecting a few shopping essentials for them (40.4% compared with 22.0%).

Looking at the wider population, almost one in four adults aged 16 years and over (24.9%) said they would feel “very uncomfortable” asking for this help from their neighbours. This proportion was higher among those who were Equality Act Disabled (28.7%).

Figure 3: Older people were most comfortable with neighbours collecting their shopping for them

Percentage who would feel “very comfortable” or “very uncomfortable” with neighbours collecting a few shopping essentials for them, England, 2018 to 2019



Source: Department for Digital, Culture, Media and Sport – Community Life Survey

Notes:

1. Adults aged 16 years and over across England were asked, “If you were ill and at home on your own, and needed someone to collect a few shopping essentials, how comfortable would you feel asking a neighbour to do this for you?”. The answer options were: “very comfortable”, “fairly comfortable”, “fairly uncomfortable” and “very uncomfortable”.
2. In the Community Life Survey, “Equality Act Disabled” was defined based on the Great Britain Equality Act 2010 using the variable Zdill, which is a combination of dill and dill2. These are: “Do you have any physical or mental health conditions or illnesses lasting or expected to last for 12 months or more?” and “Does your condition or illness/do any of your conditions or illnesses reduce your ability to carry out day-to-day activities?”. These are the Government Statistical Service harmonised questions for measuring disability.
3. The chart excludes respondents who answered, “don’t know”, and those with missing answers.

3 . Loneliness of vulnerable people and their interactions with neighbours

With everyone being asked to stay at home as much as possible – and those most at risk of severe illness from the coronavirus (COVID-19) encouraged to avoid all face-to-face contact for 12 weeks – many people are reliant on social support to help with feelings of loneliness.

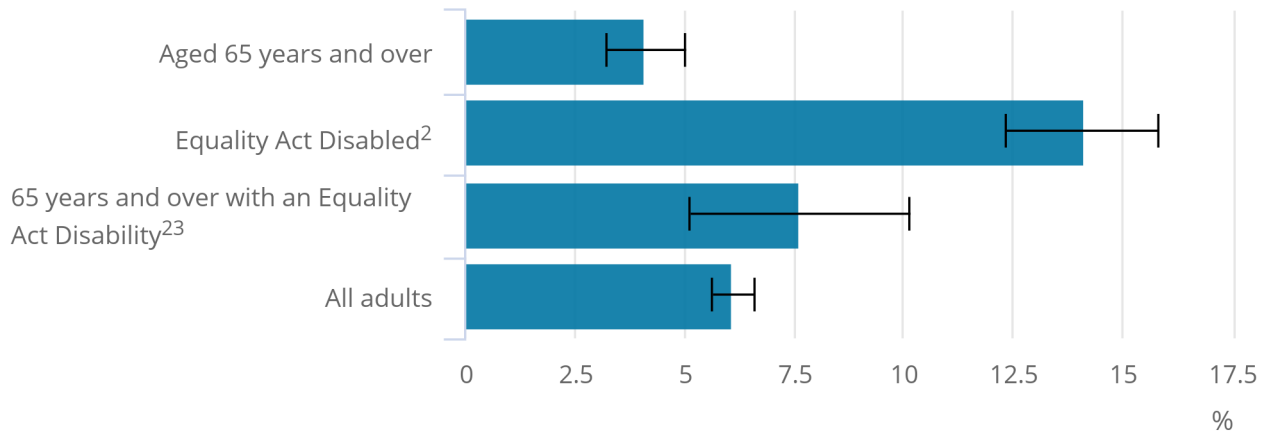
Loneliness is more likely to affect people who are [Equality Act Disabled](#) than the general population. In the period 2018 to 2019, 14.1% of the Equality Act Disabled reported feeling lonely “often/ always”, compared with 6.1% of the general population aged 16 years and over.

Figure 4: People who were Equality Act Disabled were most likely to report feeling lonely

Percentage reporting loneliness often or always, England, 2018 to 2019

Figure 4: People who were Equality Act Disabled were most likely to report feeling lonely

Percentage reporting loneliness often or always, England, 2018 to 2019



Source: Department for Digital, Culture, Media and Sport – Community Life Survey

Notes:

1. The chart excludes respondents who answered "don't know" and those with missing answers.
2. In the Community Life Survey, "Equality Act Disabled" has been defined based on the Great Britain Equality Act 2010 using the variable Zdill, which is a combination of dill and dill2. These are: "Do you have any physical or mental health conditions or illnesses lasting or expected to last for 12 months or more?" and "Does your condition or illness/do any of your conditions or illnesses reduce your ability to carry out day-to-day activities?". These are the Government Statistical Service harmonised questions for measuring disability.
3. Estimate should be treated with caution because of the low sample size (<50).
4. Adults aged 16 years and over across England were asked how often they felt lonely, where the options were "often/always", "some of the time", "occasionally", "hardly ever" and "never". Those reporting feeling lonely "often/always" is used as the indicator.

Staying at home and avoiding face-to-face contact has a huge impact on social interaction, particularly among certain groups who rely on talking to neighbours as a form of social contact.

Those aged 70 years and over (and those aged 70 years and over with a [self-defined disability](#)) in the UK were the most likely to agree or strongly agree that they regularly stop and talk to their neighbours, at 78.0% (and 74.8% respectively).

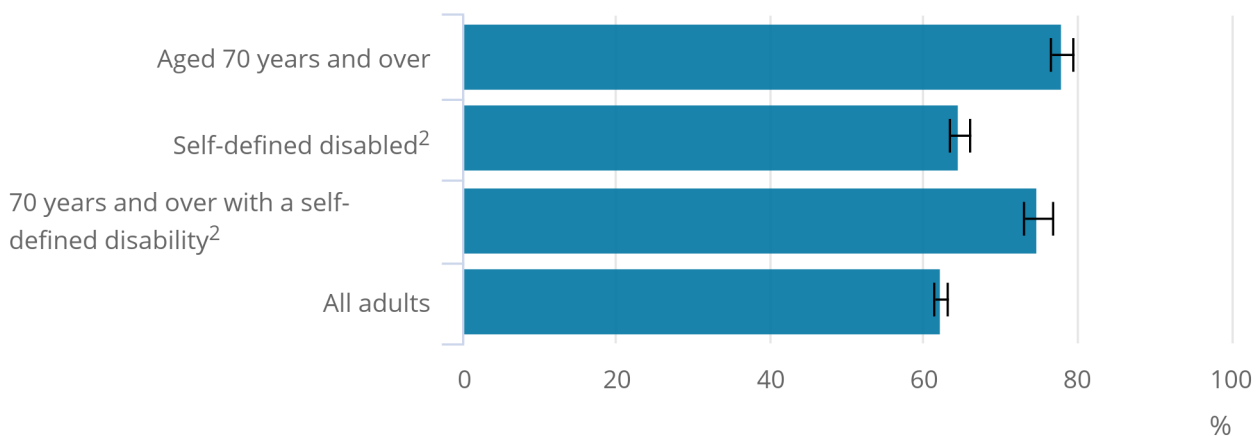
Among those aged 70 years and over, stopping and talking to their neighbours was higher in Wales (85.0%) and Scotland (83.3%) than in England (76.9%).

Figure 5: People aged 70 years and over and those with a self-defined disability were more likely than the general population to regularly stop and talk to their neighbours

Percentage of people who regularly stop and talk with people in their neighbourhood, UK, 2017 to 2018

Figure 5: People aged 70 years and over and those with a self-defined disability were more likely than the general population to regularly stop and talk to their neighbours

Percentage of people who regularly stop and talk with people in their neighbourhood, UK, 2017 to 2018



Source: Understanding Society: The UK Household Longitudinal Study

Notes:

1. Adults aged 16 years and over were asked to what extent they agree that they regularly stop and talk with people in their neighbourhood, where the options were: “strongly agree”, “agree”, “neither agree nor disagree”, “disagree” and “strongly disagree”. Those reporting “strongly agree” and “agree” is used as the indicator.
2. In Understanding Society: The UK Household Longitudinal Study, “self-defined disabled” has been calculated using the variable, health. This question asks: “Do you have any long-standing physical or mental impairment, illness or disability? By ‘long-standing’ I mean anything that has troubled you over a period of at least 12 months or that is likely to trouble you over a period of at least 12 months.” This question is able to be answered by proxy. In this question, a respondent decides to self-identify as disabled. This question is not the Government Statistical Service harmonised principle for assessing long-lasting health conditions or illness.

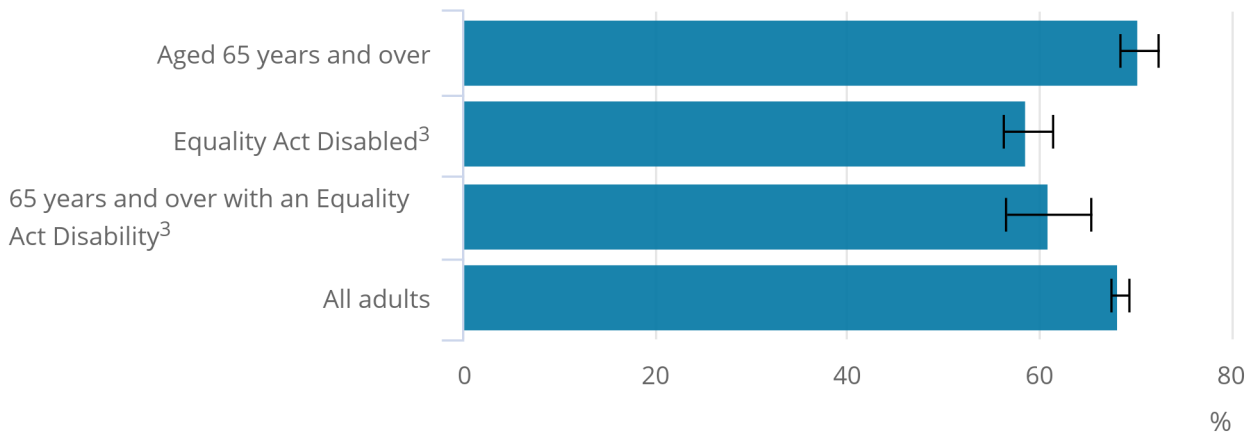
However, while UK analysis showed that people in [vulnerable](#) groups were more likely to talk to their neighbours regularly, data for England show that people who were Equality Act Disabled were less likely than the general population to feel they had people who would be there for them. Also, for people aged 65 years and over, there was no significant difference from the adult population.

Figure 6: Those who were Equality Act Disabled were less likely to feel like they have someone there for them if they needed help

Percentage of people who have people who would be there for them if they needed help, England, 2018 to 2019

Figure 6: Those who were Equality Act Disabled were less likely to feel like they have someone there for them if they needed help

Percentage of people who have people who would be there for them if they needed help, England, 2018 to 2019



Source: Department for Digital, Culture, Media and Sport – Community Life Survey

Notes:

1. Adults aged 16 years and over in England were asked to what extent they agreed or disagreed that if they needed help, there are people who would be there for them, with answers ranging from “Definitely agree” to “Definitely disagree”. Those reporting “Definitely agree” is used as the indicator.
2. The chart excludes respondents who answered, “don’t know”, and those with missing answers.
3. In the Community Life Survey, “Equality Act Disabled” has been defined based on the Great Britain Equality Act 2010 using the variable Zdill, which is a combination of dill and dill2. These are: “Do you have any physical or mental health conditions or illnesses lasting or expected to last for 12 months or more?” and “Does your condition or illness/do any of your conditions or illnesses reduce your ability to carry out day-to-day activities?”. These are the Government Statistical Service harmonised questions for measuring disability.

4 . Coronavirus and social relationships data

[Coronavirus and social relationships and support for vulnerable groups](#)

Dataset | Released 8 April 2020

A summary of social relationships and support for vulnerable groups, including older adults and those with a self-defined disability or who are Equality Act Disabled.

5 . Coronavirus (COVID-19) response: next steps

This report looks at how some people have supported one another before the coronavirus (COVID-19) pandemic, including providing meals and shopping and caring for children. In response to the COVID-19 pandemic, the Office for National Statistics (ONS) has introduced new survey questions to monitor how we as a society are responding to the situation, including following government advice and guidance, indicators of concern, well-being, and community support. The results of these questions will be published on a weekly basis starting from tomorrow (9 April 2020).

6 . Glossary

Self-defined disability

In [Understanding Society: The UK Household Longitudinal Study](#), a “self-defined disability” has been defined using the variable, health. This question asks: “Do you have any long-standing physical or mental impairment, illness or disability? By ‘long-standing’ I mean anything that has troubled you over a period of at least 12 months or that is likely to trouble you over a period of at least 12 months.” This question is able to be answered by proxy. [This question is not the Government Statistical Service \(GSS\) harmonised principle for assessing long-lasting health conditions or illness.](#)

Equality Act Disabled

In the [Community Life Survey](#) (England only), “Equality Act Disabled” has been defined using the variable Zdill, which is a combination of dill and dill2. These are: “Do you have any physical or mental health conditions or illnesses lasting or expected to last for 12 months or more?” and “Does your condition or illness/do any of your conditions or illnesses reduce your ability to carry out day-to-day activities?”. This is the [GSS harmonised question for measuring disability.](#)

Vulnerable

We have identified as vulnerable those the [government has highlighted](#) as being more at risk. These are individuals who are aged 70 years or over, have an underlying health condition, or who are pregnant. For more information, see [Measuring the data.](#)

7 . Measuring the data

Geography

We have aimed for data in this release to be at the UK level. Where this has not been possible, data for England have been used and we have highlighted where this is the case.

UK-level data have been taken from [Understanding Society: The UK Household Longitudinal Study](#).

England-level data has been sourced from [Community Life Survey](#) by Department for Digital, Culture, Media and Sport (DCMS).

Data from these two sources cannot be compared directly because of differences in geography and methodology.

Definition of vulnerable

As explained in the [Glossary](#), in this release we have identified as vulnerable those the [government has highlighted](#) as being more at risk.

However, we were unable to select those aged 70 years and over from the [Community Life Survey](#) and so we have analysed those aged 65 years and over. This means we have included those younger than the government's classification.

We were unable to accurately identify those respondents who were pregnant at the time of the interview, so we were unable to include them in this analysis.

Assessment of differences

The measures analysed in this release are sourced from self-reported survey data. These sources use samples of the total measured population to produce estimations. Given this, measures for given groups have only been assessed as higher or lower than the comparison group if the difference between groups is [statistically significant](#) using 95% [confidence intervals](#). If a difference is said to be statistically significant, it is unlikely that it could have occurred by chance.

Social capital in the devolved administrations

The UK's devolved administrations also collect and publish data on social capital.

Scotland's social capital index is a national indicator that forms part of Scotland's National Performance Framework. It monitors aggregate changes in levels of social capital since 2013 through the four domains of social networks, community cohesion, community empowerment and social participation. More information can be found on the [National Performance Framework website](#).

In Wales, measures of loneliness, volunteering and feeling able to influence decisions affecting the local area are included within the [national indicators](#) to demonstrate progress towards Wales' seven well-being goals. Further data relating to social capital at a Wales level are collected through the [National Survey for Wales](#).

[Northern Ireland](#) publishes data on social capital from its [Continuous Household Survey](#). This includes data on perceptions of the local area, trust in people in the area and action taken to solve problems affecting local people.