

Statistical bulletin

Coronavirus and the social impacts on Great Britain: 21 January 2022

Indicators from the Opinions and Lifestyle Survey covering the period 6 to 16 January 2022, to understand the impact of the coronavirus (COVID-19) pandemic on people, households and communities in Great Britain

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1 . Main points

Throughout the period 6 to 16 January 2022, based on adults in Great Britain:

- The majority of adults (95%) wore a face covering at some point when outside their home in the past seven days; this has remained stable since the beginning of December 2021 and is higher than the 18 to 28 November 2021 period (84%), prior to the reintroduction of mandatory face coverings in shops and on public transport in [England](#).
- Around 1 in 14 (7%) adults had been asked to show proof of coronavirus (COVID-19) vaccination or a recent negative COVID-19 test in the past seven days (excluding when travelling abroad), most commonly to attend a sporting event, or nightclub or bar; this was slightly higher in December.
- Around 6 in 10 adults (61%) said they had taken a rapid lateral flow test in the past seven days, rising from 42% in the period prior to Plan B measures (1 to 12 December 2021), with higher proportions of younger people taking one compared with older people.
- Around 1 in 5 (22%) adults said they had difficulty getting a rapid lateral flow test; among those, the most common places difficulties were experienced were the government website for delivery by mail (68%) and in pharmacies (60%).
- The proportion of working adults reporting they worked from home exclusively in the past seven days has increased since the implementation of Plan B measures, rising to 26% in this period from 14% during 1 to 12 December 2021; this follows a trend of general decline over the past year.

Estimates included in this release are based on data collected between 6 and 16 January 2022, following the introduction of new measures against the Omicron variant. The latest information and guidance in England, Wales, and Scotland can be found on the [gov.uk](https://www.gov.uk) website.

2 . Introduction

Following the emergence of the Omicron variant across Great Britain, each constituent country has introduced new measures aiming to control the spread and protect the NHS, while also accelerating the coronavirus (COVID-19) booster vaccination programmes.

This release provides our first estimates based on a full collection period since the introduction of these measures, using data from the Office for National Statistics (ONS) Opinions and Lifestyle Survey.

Estimates for England, Scotland, Wales, and regions in England can be found in the [data tables](#) accompanying this release.

Throughout this bulletin, we refer to "this period" (6 to 16 January 2022), the "previous period" (15 December 2021 to 3 January 2022) and the "period prior to Plan B measures" (1 to 12 December 2021).

3 . Impact of Plan B measures

In England, the [move to Plan B](#) was initiated on 10 December 2021. This introduced measures similar to those separately announced in [Scotland](#) and [Wales](#), including:

- mandatory use of face coverings in most indoor venues
- work from home guidance
- mandatory use of NHS COVID passes or proof of a negative test to attend venues or events
- advice encouraging use of lateral flow device testing

This section explores the social impacts following the introduction of these measures.

Figure 1: Impacts of introduction of preventative measures on behaviours

Percentage of adults practising preventative measures to slow the spread of coronavirus (COVID-19), Great Britain, January 2021 to January 2022

Notes:

1. Estimates in these charts are based on all adults aged 16 years and over, with the exception of “worked from home exclusively in the past seven days”, which is based on “working adults”.
2. Coronavirus measures referenced in annotations refer to those in England only, although the chart presents Great Britain estimates. Please note that similar measures were used in Wales and Scotland.

Download this chart

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Face coverings

The majority (95%) of adults across Great Britain wore a face covering at some point when outside their home in the past seven days. This remained higher than 84% in the period 18 to 28 November 2021, prior to the reintroduction of mandatory face coverings in shops and on public transport in [England](#). This followed a decline in the use of face coverings since coronavirus (COVID-19) restrictions were lifted in July 2021 across Great Britain.

Most adults (91%) reported they felt wearing a face covering was important or very important in slowing the spread of COVID-19 (85% in the period 18 to 28 November 2021). This proportion appeared to increase with age; 86% of those aged 16 to 29 years, 90% of those aged 30 to 49 years, 92% of those aged 50 to 69 years, and 96% of those aged 70 years and over reported this.

For the first time, we asked adults how likely they would be to go to an organised event if they had to wear a face covering. More than half (54%) of adults said they would be very or fairly likely to attend, while 23% said they would be neither likely or unlikely to attend, and 22% said they would be very or fairly unlikely to attend.

Among adults who left home to shop in the past seven days, 96% reported wearing a face covering often or always, while over two-thirds (68%) reported seeing everyone or almost everyone wearing a face covering when doing so (compared with 71% and 21% respectively in the period 18 to 28 November 2021).

Among adults who travelled on public transport in the past seven days, around 9 in 10 (89%) reported wearing a face covering for the whole journey, while around two-thirds (67%) reported seeing everyone or almost everyone wearing a face covering while doing so (compared with 70% and 19% respectively in the period 18 to 28 November 2021).

Among adults who had been inside a restaurant, café, or bar in the past seven days, over one-third (38%) reported often or always wearing a face covering when doing so. At the same time, around 3 in 10 (32%) reported seeing everyone or almost everyone wearing a face covering in these settings (compared with 23% and 19% respectively in the period 18 to 28 November 2021).

Location of work

Following the introduction of work from home guidance as part of Plan B measures there has been an increase in the percentage of adults working from home. This followed a decline in working from home since coronavirus restrictions were lifted in July 2021.

Among working adults:

- around 1 in 4 (26%) reported working from home only in the past seven days (14% in the period prior to Plan B measures)
- more than half (51%) reported travelling to work only in the past seven days (54% in the period prior to Plan B measures)
- around 1 in 10 (8%) reported both working from home and travelling to work in the past seven days (18% in the period prior to Plan B measures)
- one-third (33%) reported that, compared with before the coronavirus pandemic, they are more likely to work from home if they have a cold (37% in the period prior to Plan B measures)

Figure 2: Around 1 in 4 (26%) reported working from home only in the past seven days

Percentage of working adults, Great Britain, January 2021 to January 2022

Notes:

1. Coronavirus measures referenced in annotations refer to those in England only, although the chart presents Great Britain estimates. Please note that similar measures were used in Wales and Scotland.

Download this chart

[.XLSX](#)

COVID-19 vaccinations and boosters

The estimates presented here are based on self-reported responses from a sample of adults and may differ from [official administrative data](#) on the number of individuals, including children aged 12 to 15 years, who have received COVID-19 vaccines and booster vaccines in Great Britain and its constituent countries.

In November 2021, the UK government announced that all eligible adults in England aged 18 years and over would be [offered a booster vaccine by the end of January 2022](#). Similar announcements to accelerate the booster programmes were also made in [Wales](#) and [Scotland](#). Since then, there has been a large increase in the percentage of adults self-reporting that they have received two coronavirus (COVID-19) vaccinations and a booster.

Around 8 in 10 (82%) adults self-reported having received two COVID-19 vaccinations and a booster, compared with 45% in the period prior to Plan B measures, and a further increase from 24% at the beginning of November 2021 (3 to 14 November 2021).

Booster uptake was lower among younger adults. 48% of those aged 16 to 29 years said they had a COVID-19 booster, compared with 82% of those aged 30 to 49 years, 94% of those aged 50 to 69 years and 99% of those aged 70 years and over.

Around 9 in 10 (89%) adults said they thought that having the COVID-19 booster jab was very important or important in slowing the spread of COVID-19.

Among adults who have received two doses of a COVID-19 vaccine but not yet a booster, over 7 in 10 (72%) said they would be very likely or fairly likely to have a booster vaccine when offered to them. Meanwhile, 13% said they would be very unlikely or fairly unlikely to have a booster vaccine if offered.

Of all adults with a child aged 12 to 15 years living in their household, around 6 in 10 (61%) said the child had already received a COVID-19 vaccine (54% in the previous period, 15 December 2021 to 3 January 2022, and 50% prior to Plan B measures).

A further 22% reported the child would be very likely or fairly likely to receive a COVID-19 vaccine, while around 1 in 10 (13%) reported the child would be very unlikely or fairly unlikely to receive it.

Proof of COVID-19 vaccination or negative lateral flow test

Around 1 in 14 (7%) adults had been asked to show proof of COVID-19 vaccination or a recent negative COVID-19 test in the past seven days (excluding when travelling abroad), a slight decrease compared with 9% in the previous period and 8% in the period prior to Plan B measures. This has remained relatively stable since these data were first collected at the end of October 2021.

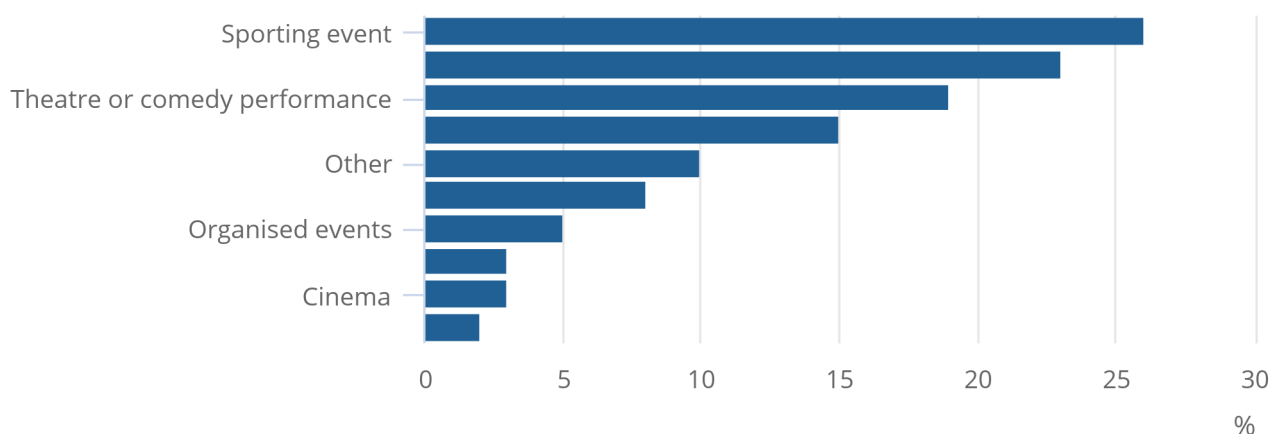
According to age, being asked to provide proof of vaccination or a negative lateral flow test was highest among younger people (14% of those aged 16 to 29 years) compared with older people (8% of those aged 30 to 49 years, 4% of those aged 50 to 60 years and 3% of those aged 70 years and over).

Figure 3: Sporting events were the most common setting where adults were asked for proof of vaccination

Percentage of adults who were asked to show proof that they have been vaccinated or had a recent negative coronavirus (COVID-19) test, Great Britain, 6 to 16 January 2022

Figure 3: Sporting events were the most common setting where adults were asked for proof of vaccination

Percentage of adults who were asked to show proof that they have been vaccinated or had a recent negative coronavirus (COVID-19) test, Great Britain, 6 to 16 January 2022



Source: Office for National Statistics – Opinions and Lifestyle Survey

Lateral flow testing

Around 6 in 10 adults (61%) said they had taken a rapid lateral flow test in the past seven days (57% in the previous period and 42% in the period prior to Plan B measures). This has increased, in line with the emergence of the Omicron variant, with the lowest levels reported when we started collecting these estimates at the end of October 2021 (36% of adults over the period 20 to 31 October 2021).

The most common reasons for taking a test were:

- before meeting family and friends (43%)
- before going to work or college (32%)
- doing so at regular intervals regardless of activity (22%)
- feeling ill or having cold- or flu-like symptoms (18%)
- being a close contact of a positive case and therefore required to take daily tests (18%)

During the period 6 to 16 January 2021, around 1 in 5 (22%) adults said they had difficulty getting a rapid lateral flow test in the past seven days. Among those, the most common places difficulties were experienced were the government website for delivery by mail (68%) and in pharmacies (60%).

Among those who experienced difficulties getting a lateral flow test, 85% said it did not stop them from doing anything they had planned.

4 . Other social impacts of coronavirus (COVID-19)

Self-isolation

1 in 10 adults (10%) reported self-isolating because of coronavirus (COVID-19) in the past seven days, an increase from 7% in the previous period and 5% in the period prior to Plan B measures. This followed a general decline in self-isolation since coronavirus restrictions were lifted in July 2021.

Increases in the percentage of adults self-isolating were seen among all age groups.

Figure 4: Higher proportions of younger adults reported they had to self-isolate in the past seven days compared with older adults

Percentage of adults, Great Britain, May 2021 to January 2022

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The main reasons adults self-isolated were:

- having tested positive for COVID-19 (51%)
- having been in contact with someone who had tested positive for COVID-19 (25%)
- having COVID-19 symptoms (23%)

For the first time, we also asked respondents if they would be able to self-isolate for 10 days if required to. Most adults (90%) said they could self-isolate for this period. Among those who said they would be unable to self-isolate, as well as those who said they did not know or preferred not to say, the main reasons were:

- they could not afford to miss work (45%)
- they need to leave the house to buy essentials (39%)
- it would negatively affect their mental health (37%)

Social distancing

Less than half (44%) of adults reported they always or often maintained social distancing when outside their home in the past seven days (43% in the previous period and 40% in the period prior to Plan B measures). This slight increase follows a decline in social distancing since coronavirus restrictions were lifted in July 2021.

According to age, the proportions of those reporting they always or often maintained social distancing were higher among older adults compared with younger adults: 65% of those aged 70 years and over, 57% of those aged 50 to 69 years, 37% of those aged 30 to 49 years, and 19% of those aged 16 to 29 years.

Overall, most adults (87%) reported they felt social distancing was important or very important in slowing the spread of COVID-19 (86% in the previous period and 87% in the period prior to Plan B measures).

When asked how likely they would be to go to an organised event if they had to socially distance, 44% of adults said they would be very or fairly likely to attend, while 29% said they would be neither likely or unlikely, and 28% said they would be very or fairly unlikely to attend.

Physical contact outside

Almost two-thirds of adults (64%) reported they avoided physical contact with others outside their home in the past seven days (63% in the previous period and 57% in the period prior to Plan B measures). This increase follows a decline in those avoiding physical contact when outside their home since coronavirus restrictions were lifted in July 2021.

As in previous periods, this proportion appeared to increase with age: 76% of those aged 70 years and over, 70% of those aged 50 to 69 years, 62% of those aged 30 to 49 years, and 47% of those aged 16 to 29 years reported this.

Socialising

Around 6 in 10 (62%) adults met up or socialised indoors, while around 4 in 10 (41%) met up or socialised outdoors with others outside their household in the past seven days (excluding for work or education).

This has fallen following increased reporting of socialising over the Christmas and New Year periods; between 15 December 2021 and 3 January 2022, 69% met with others outside their household indoors and 47% met outdoors. This is also lower than in the period prior to Plan B measures at 68% and 46% respectively. This latest decrease follows an increasing trend in socialising both indoors and outdoors since coronavirus restrictions were lifted in July 2021.

A higher proportion of younger adults met up or socialised outdoors with others outside their household (54% of those aged 16 to 29 years) compared with older adults (42% of those aged 30 to 49 years, 36% of those aged 50 to 69 years, and 35% of those aged 70 years and over). Among those who met up with others indoors, there were fewer differences across age groups.

When friends and family had come into their home, the most common actions adults reported taking to help reduce the spread of COVID-19 were:

- washing hands regularly (34%)
- opening windows or doors (24%)
- maintaining social distancing (21%)
- cleaning touch points (16%)

Around 4 in 10 adults (42%) reported friends and family had not come into their home in the past seven days, a slight increase from the previous period (38%) but a slight decrease from the period prior to Plan B measures (45%).

Around 4 in 10 (42%) adults reported that over the next two weeks they are very or fairly likely to open windows or doors if they have a visitor coming to their home, while 11% said they were neither likely nor unlikely. Among those who were unlikely or unsure, the most common reasons they reported for this were:

- that the house would get too cold (86%)
- it would cost more to heat their home (46%)
- it would be bad for the environment to heat their home more (20%)

Personal well-being

The personal well-being measures during this period have declined. Similar declines in personal well-being were found [this time last year](#). However, all personal well-being measures in the latest period had improved compared with a similar period last year. In the latest periods these were:

- life satisfaction: 6.8 - a slight decrease compared with 7.0 in the period prior to Plan B measures (6.4 in a similar period last year, 7 to 10 January 2021)
- feeling that the things done in life are worthwhile: 7.2 - a slight decrease compared with 7.3 in the period prior to Plan B measures (7.0 in a similar period last year)
- happiness: 6.8 - a slight decrease compared with 7.0 in the period prior to Plan B measures (6.5 in a similar period last year)
- anxiety: 4.1 - a slight increase compared with 4.0 in the period prior to Plan B measures (4.6 in a similar period last year)

Return to normal

Around one-third of adults (35%) reported they expect life to return to normal in more than a year. This has decreased slightly from 39% in the period prior to Plan B measures but has increased from 24% in a similar period last year: 7 to 10 January 2021.

Around 1 in 10 (12%) adults said they never expect life to return to normal, compared with 14% in the period prior to Plan B measures, and 4% in a similar period last year.

Around 1 in 14 (7%) adults reported they expected life to return to normal in less than six months (unchanged from the period prior to Plan B measures, and down from 24% in a similar period last year), while around 1 in 20 (4%) felt their life had already returned to normal.¹

Impact on life

Among all adults, around 6 in 10 (61%) were very or somewhat worried about the effect that the coronavirus pandemic is having on their lives (66% in the previous period, 56% in the period prior to Plan B measures, and 78% in a similar period last year during 7 to 10 January 2021). Meanwhile, over 1 in 10 (14%) reported that they are somewhat unworried or not worried at all about the impact on their lives (12% in the previous period, 16% in the period prior to Plan B measures, and 8% in a similar period last year).

Notes for: Other social impacts of coronavirus

1. This response option was not available prior to the 15 December 2021 to 3 January 2022 survey period.

5 . Goods shortages

In this period, we continued to ask adults whether they had experienced shortages of any goods at any time in the past two weeks. Around 3 in 10 (31%) adults reported experiencing shortages (32% in the previous period).

Food

Fewer than 1 in 5 (16%) adults reported they had not been able to buy essential food because it was not available, similar to the previous period (15%). When food shopping, around 6 in 10 (59%) reported experiencing some difficulty compared with usual. The most reported differences were:

- less variety in the shops (39%)
- spending more than usual to get what I normally buy (19%)
- items needed were not available, and a replacement could not be found (18%)
- items needed were not available, but a replacement was found (17%)

Medicine

In this period, 1 in 20 (5%) adults reported they were unable to buy medicine because it was unavailable. 3 in 10 (30%) adults who had tried to buy medicine or get a prescription reported experiencing some differences compared with usual (26% in the previous period). The most commonly reported differences were:

- having to wait longer for their prescription (17%)
- having to go to more pharmacies to find what they needed (7%)
- items needed were not available, and a replacement could not be found (7%)
- items needed were not available, but a replacement could be found (5%)

6 . Social impacts on Great Britain data

[Coronavirus and the social impacts on Great Britain](#)

Dataset | Released 21 January 2022

Indicators from the Opinions and Lifestyle Survey (OPN) to understand the impact of the coronavirus (COVID-19) pandemic on people, households, and communities in Great Britain. Includes breakdowns by age, sex, and region.

[Coronavirus and the social impacts on Great Britain: Personal experience of shortage of goods](#)

Dataset | Released 21 January 2022

Data from the Opinions and Lifestyle Survey (OPN) on whether people experienced shortage of goods such as food, medicine, and fuel when shopping, covering the period 6 to 16 January 2022.

[Coronavirus and the social impacts on Great Britain: Household finances](#)

Dataset | Released on 21 January 2022

Data from the Opinions and Lifestyle Survey (OPN) on the ways in which people report the coronavirus pandemic has affected their household and personal finances, covering the period 6 to 16 January 2022.

[Coronavirus and the social impacts on Great Britain: Likelihood to attend events](#) Dataset | Released on 21 January 2021

Data from the Opinions and Lifestyle Survey (OPN) on the likelihood to go to an organised event if required to wear a face covering or socially distance, covering the period 6 to 16 January 2022.

7 . Measuring the data

This release contains data and indicators from a module being undertaken through the Office for National Statistics' (ONS) Opinions and Lifestyle Survey (OPN) to understand the impact of the coronavirus (COVID-19) pandemic on British society.

Breakdowns by age, sex, region and country, including [confidence intervals](#) for the estimates, are contained in the [Coronavirus and the social impacts on Great Britain dataset](#).

Where changes in results from previous weeks are presented in this bulletin, associated confidence intervals should be used to assess the [statistical significance](#) of the differences.

Sampling and weighting

In the period between 6 to 16 January 2022 we sampled 4,494 households. These were randomly selected from those that had previously completed the Labour Market Survey (LMS) or OPN. The responding sample contained 3,293 individuals, representing a 73% response rate.

Survey weights were applied to make estimates representative of the population (based on June 2021 population estimates). Further information on the survey design and quality can be found in the [Opinions and Lifestyle Survey Quality and Methodology Information](#).

8 . Related links

[Coronavirus \(COVID-19\) latest data and analysis](#)

Web page | Updated as data become available

Latest data and analysis on coronavirus (COVID-19) in the UK and its effects on the economy and society.

[Coronavirus \(COVID-19\) latest insights](#)

Web page | Updated as data become available

A live roundup of the latest data and trends about the coronavirus (COVID-19) pandemic from the Office for National Statistics (ONS) and other sources.

[Coronavirus and self-isolation after testing positive in England: 29 November to 4 December 2021](#)

Bulletin | Released 23 December 2021

Behaviour of individuals required to self-isolate after testing positive for COVID-19, from the COVID Test and Trace Cases Insights Survey. Includes information on the impact of self-isolation on well-being and finances. Experimental Statistics.

[Coronavirus and behaviour of the vaccinated population after being in contact with a positive case in England: 25 to 30 October 2021](#)

Bulletin | Released 18 November 2021

Behaviour of fully vaccinated individuals not required to self-isolate after being in contact with a positive case of COVID-19, from the COVID Test and Trace Contacts Behavioural Insights Survey. Experimental Statistics

[Coronavirus and changing attitudes towards vaccination, England: 7 to 16 September 2021](#)

Bulletin | Released 9 November 2021

Changes in uptake and attitudes towards the coronavirus (COVID-19) vaccines, amongst adults who previously reported vaccine hesitancy.

[Eight in ten adults think social distancing is important – but four in ten actually do it](#)

Article | Released 22 October 2021

Data and analysis on the percentage of adults in Great Britain practicing preventative measures to slow the spread of coronavirus and how important these measures are considered to be.

[Economic activity and social change in the UK, real-time indicators: 20 January 2022](#)

Bulletin | Released 20 January 2022

Early data and analysis for UK economy and society. Includes activity and change in business, spending, travel and jobs using rapid-response surveys, novel data sources and experimental methods.

[Coronavirus and depression in adults, Great Britain: July to August 2021](#)

Article | Released 1 October 2021

Analysis of the proportion of the adult population of Great Britain experiencing some form of depression in summer 2021, based on the Opinions and Lifestyle Survey. Includes analysis by age, sex and other characteristics and comparisons with early 2021, 2020 and pre-coronavirus estimates.

[COVID-19 Question Bank](#)

Webpage | Updated frequently

This page provides a bank of questions from multiple Office for National Statistics (ONS) surveys related to COVID-19 to be used in other surveys to further support harmonisation and questionnaire development. This bank also provides users with an understanding of what data ONS have in relation to the coronavirus pandemic.