



Safely Managing COVID-19: Greater Manchester Population Survey

Survey 4 Report

March 2021

Based on fieldwork 11 – 25 Feb, while under national lockdown restrictions

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Introduction and methodology

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Background and methodology

Background

- Coronavirus (COVID-19) is having significant impacts on the lives of residents and the city region of Greater Manchester (GM) as a whole.
- The nature and extent of these impacts are not evenly experienced across the population. Residents are unequally equipped and empowered to stop the spread of the virus and its resulting impacts.
- Although there is extensive national research into these issues, particularly from during the earlier stages of the pandemic, relying on national surveys does not give the level of detail required on who within the GM population is being most affected, the issues they are facing, the support they need, and how communications and support may be best targeted and delivered.
- The focus of this research is therefore to provide regular ongoing insight on these issues and impacts across GM as a whole, and within its 10 Local Authorities, to:
 - help ensure communications and engagement activities are insight-led and appropriately delivered and targeted; and
 - support the behaviour change that needs to be inspired across the population to stop the spread of coronavirus and its unequal impacts.

Methodology

- BMG Research was commissioned to undertake monthly online and telephone (CATI) surveys, of at least 1,000 respondents of GM each time, with a sample of at least 100 respondents in each Local Authority.
- Quotas were set to ensure the sample broadly reflected the profile of respondents by gender, age, ethnicity and disability, with further consideration for wider protected and key characteristics.
- Weights have been applied to the data gathered to ensure the sample matches the population profile by these quota variables more precisely, and to ensure consistency between individual surveys.
- Each monthly survey should take 15 minutes on average for respondents to complete; however, due to the emotive nature of the topic interviews by telephone take longer than this.
- Four surveys have so far been completed. Details of responses are below.
- From survey 2 onwards the quantitative surveys are accompanied by deep-dive qualitative interviews, each with 10 respondents, investigating in more detail key issues or audiences of interest. Participants are selected from telephone survey participants who have consented to be contacted for a follow-up. During restrictions, these interviews are undertaken remotely, by video and telephone call.

Survey	Fieldwork start	Fieldwork end	Total respondents	Web respondents	Phone respondents
1	20 November 2020	2 December 2020	1016	707 (70%)	309 (30%)
2	18 December 2020	31 December 202	1007	751 (75%)	256 (25%)
3	14 January 2021	27 January 2021	1010	757 (75%)	253 (25%)
4	11 February 2021	25 February 2021	1003	753 (75%)	250 (25%)

Report contents and guidance

Report contents & guidance

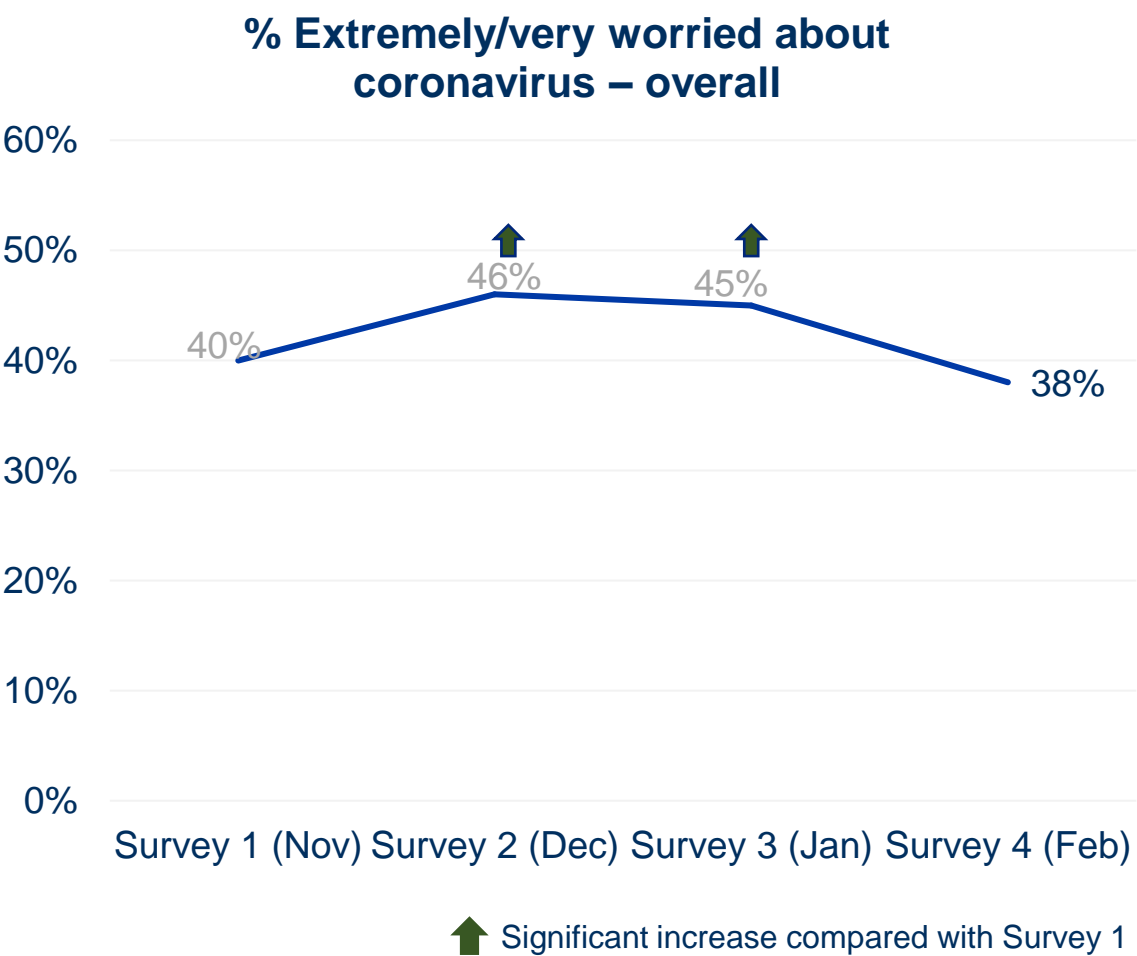
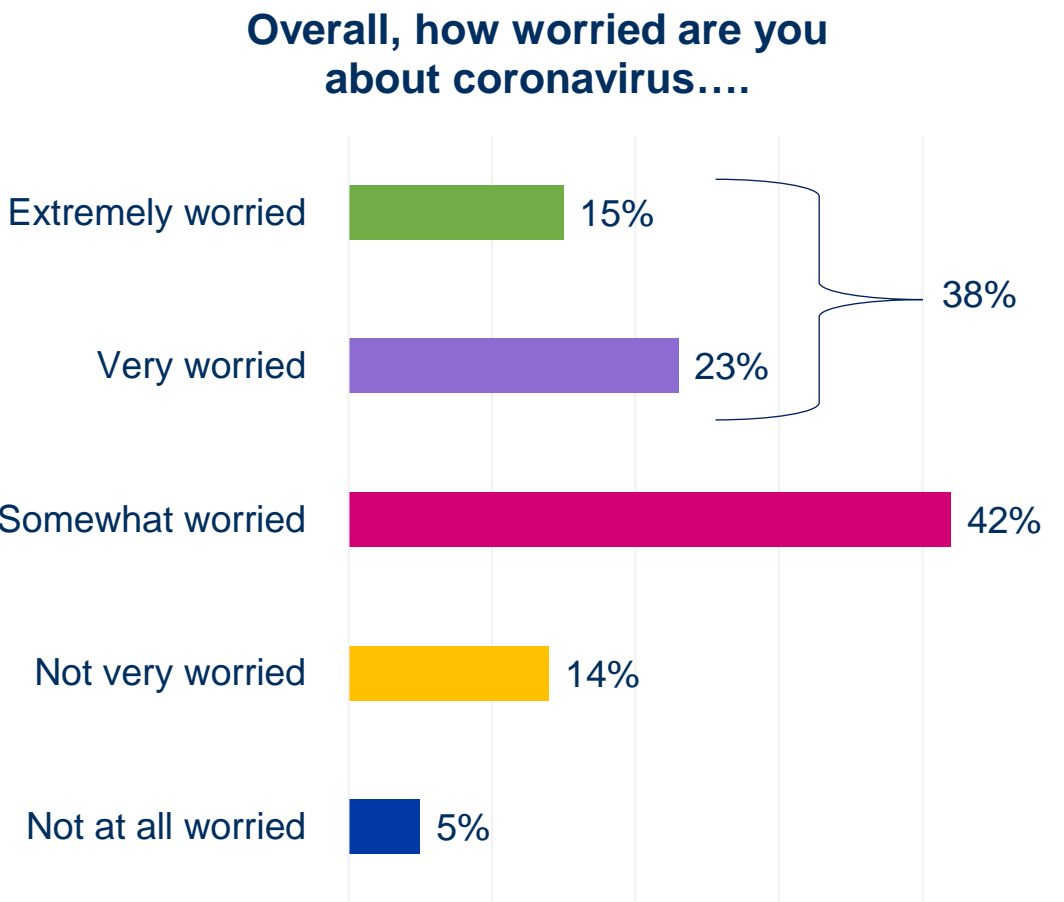
- **This report focuses on the findings from survey 4 (February)**, when Greater Manchester remained under the nationwide lockdown introduced on 5 January. As well as continuing to understand concerns and impacts of the pandemic among Greater Manchester respondents, and their attitudes and behaviours towards the restrictions and measures introduced in the latest national lockdown, survey 4 aims to understand more about the ongoing vaccination rollout, attitudes towards community / workplace coronavirus testing for people without symptoms, and future travel plans as lockdown restrictions begin to be eased.
- The report presents a range of tables and charts with accompanying narrative to highlight the key findings from each section of the survey among the 'total GM' sample i.e. all 1003 respondents. Where relevant, differences by local authority and other population characteristics are also reported. These differences are significantly different statistically (at the 95% level of confidence) compared with the 'total GM' figures i.e. the GM average.
- Where questions have remained consistent, the report provides comparisons with surveys 1 (undertaken in November), 2 (in December), and 3 (January); differences between the surveys that are statistically significant are indicated by up and down arrows.
- On some questions responses have been filtered on those who were asked relevant questions (e.g. those in work or with children), and bases may be lower than the full sample of 1003 in some instances. Where relevant, this has been noted on the slides, along with the unweighted base sizes. Any low bases with an unweighted base size below 50 have also been noted.
- The initial section provides a "highlights" summary of key findings; it is followed by more detailed survey findings for residents' feelings and concerns, coronavirus impacts, knowledge and understanding, and attitudes and behaviours. These are followed by analysis of the more detailed interviews focusing on people's experiences of self-isolation.



Highlights

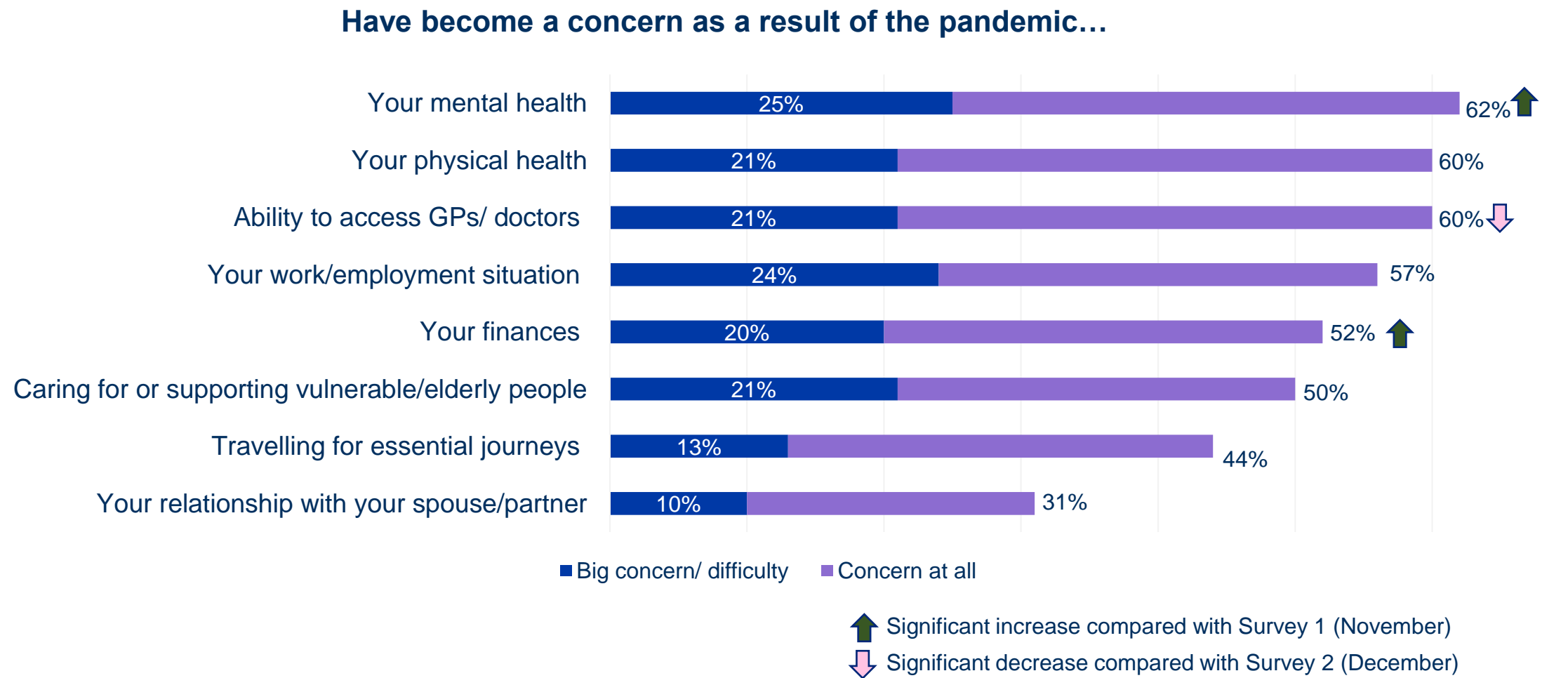
Concerns	pages 7, 8	Impacts on children	page 16	Vaccines	page 23
Financial impacts	page 9	Education	page 17	Asymptomatic testing	page 24
Experience of coronavirus	page 10	Bubbles	page 18		
Self-isolation	page 11, 12	National lockdown – attitudes and behaviours	pages 19-22		
Employment	pages 13-15				

Overall **levels of concern** about coronavirus have fallen, back in line with the November baseline. Around 2 in 5 (38%) respondents are now extremely or very worried.

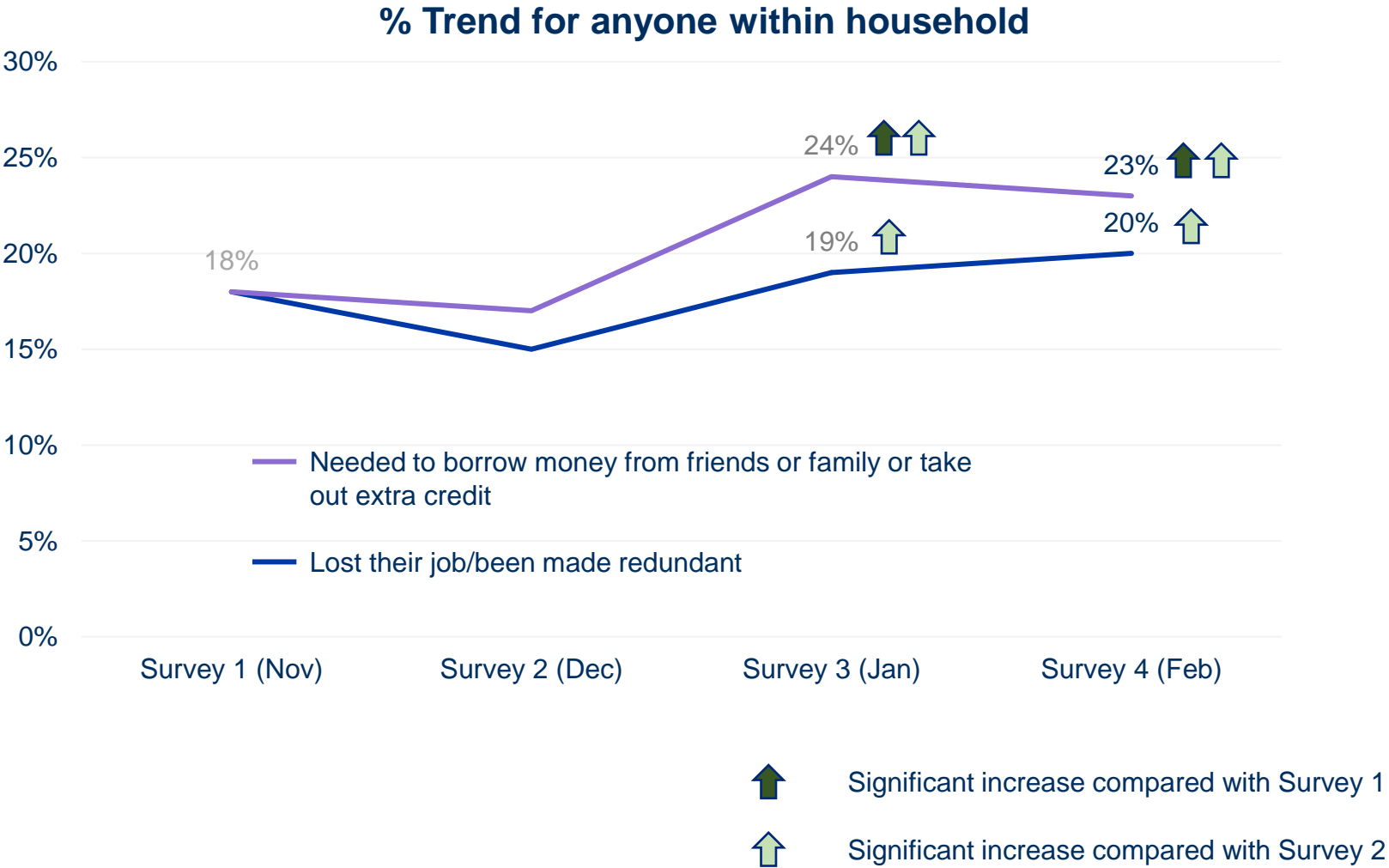


For further detail see “feelings and concerns”, [page 26](#), [page 27](#), [page 28](#) and [page 29](#)

Increased proportions of respondents have **specific concerns** for their mental health and finances than in November.

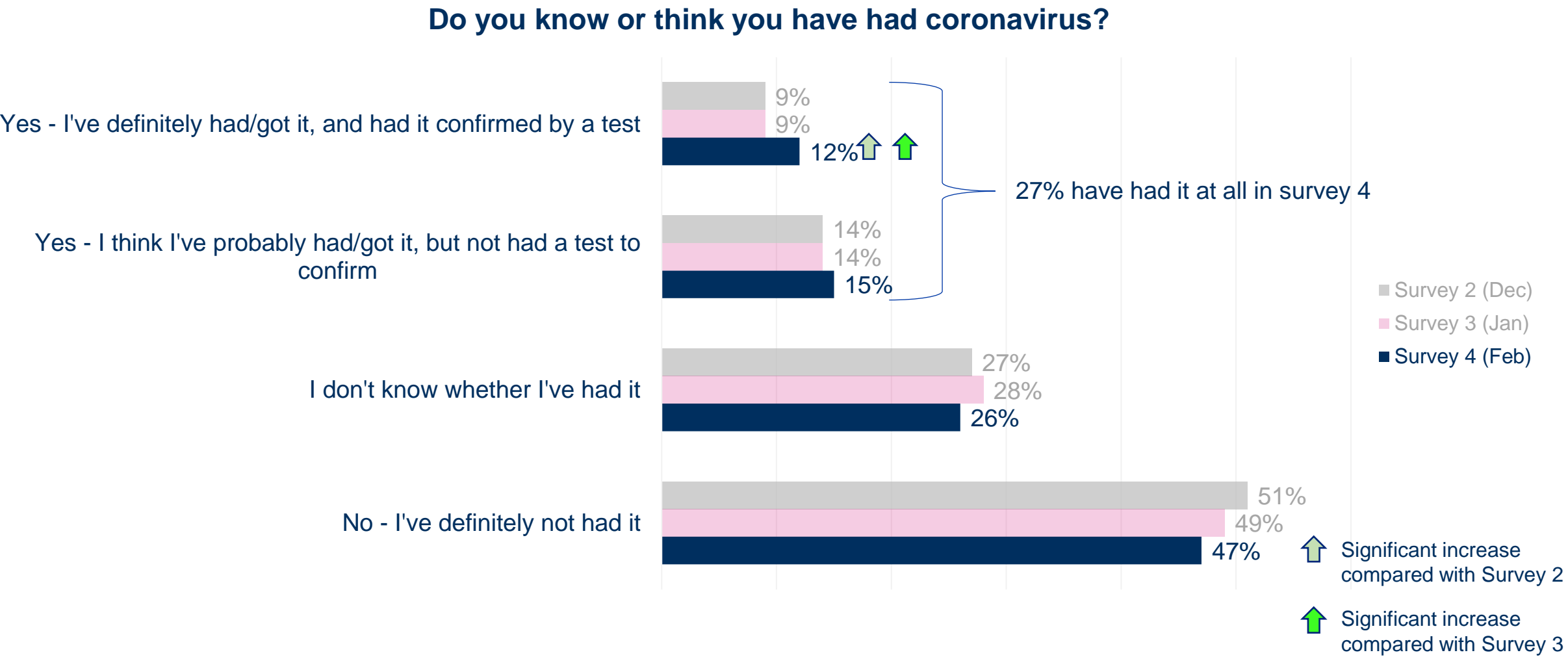


These feelings have been accompanied by a significant increase in **financial impacts** since December. Higher proportions say they or someone in their household has lost their job and/or needed to borrow extra money.



For further detail see “coronavirus impacts – finance, [page 41](#) and [page 42](#)

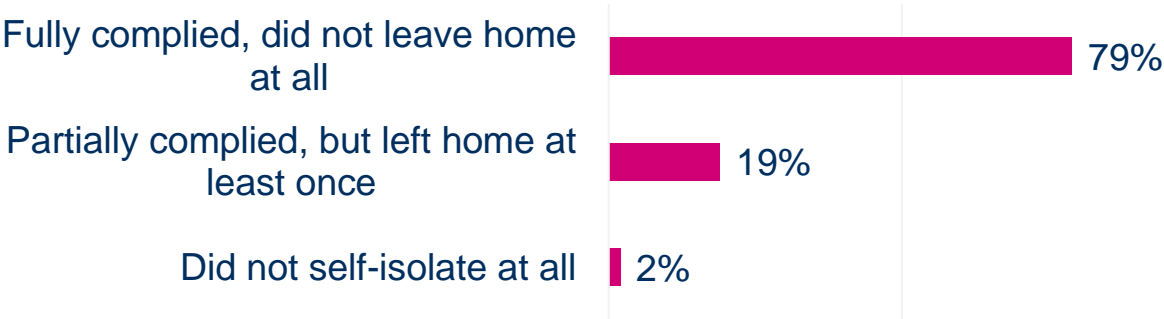
Around 1 in 4 (27%) respondents say they **have had coronavirus**. However, over half (54%) of this group have not had this confirmed by taking a test.



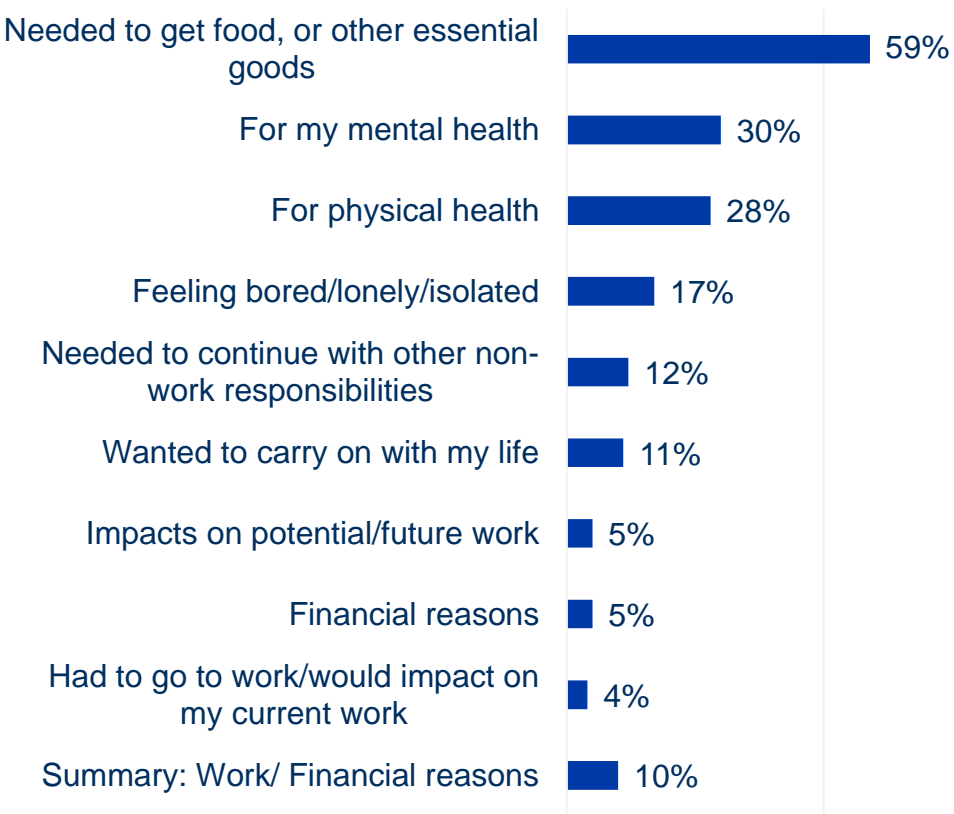
For further detail see “coronavirus impacts – experience of coronavirus”, [page 35](#) and [page 36](#)

In line with previous surveys, 1 in 3 (34%) respondents say they have **needed to self-isolate** at some point. While the majority of these say they fully complied, 1 in 5 (19%) left the house at least once during self-isolation. Just 2% ignored the instruction completely.

Compliance with self-isolation...

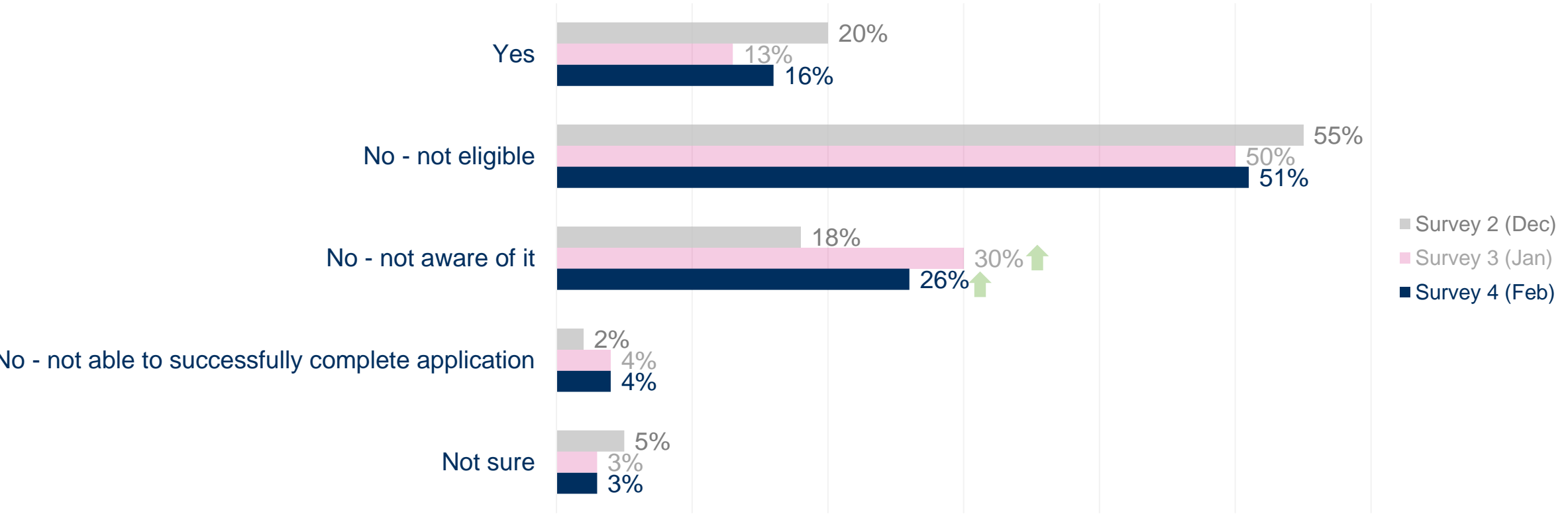


Reasons for non-compliance...



Only around 1 in 6 (16%) of those needing to self-isolate have been able to claim the **financial support** in place. Lack of perceived eligibility and awareness of the support payments are the main barriers to uptake.

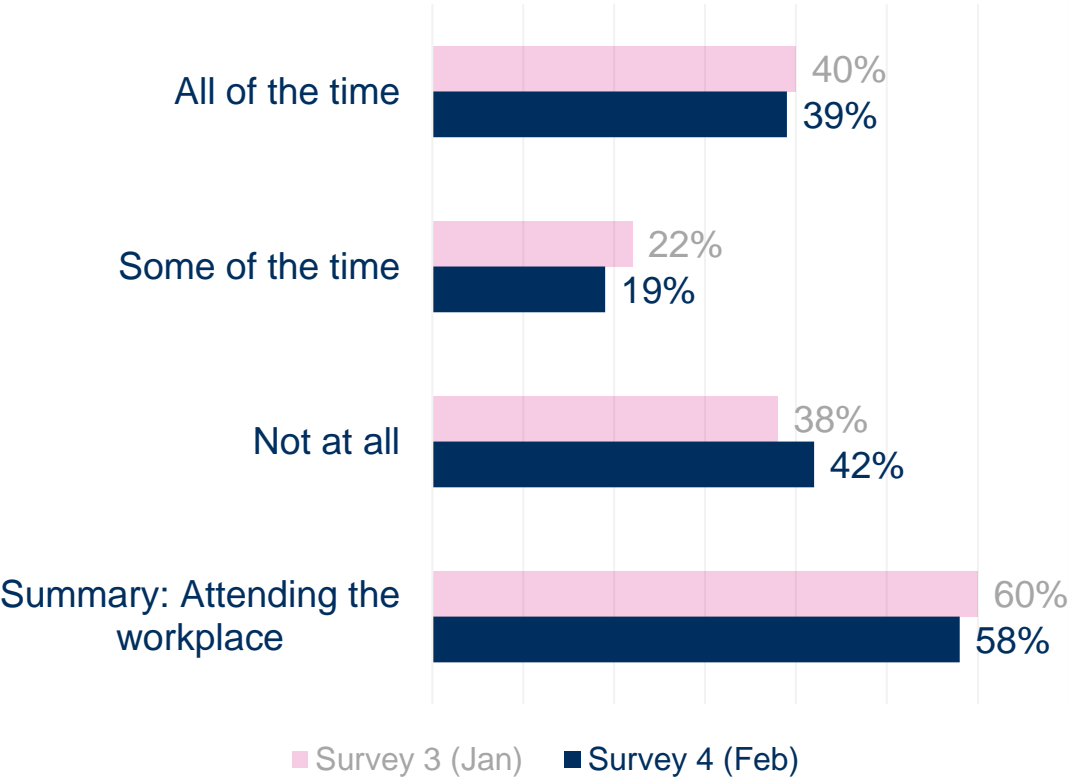
Did you claim the financial support payment available to some people during self-isolation?



↑ Significant increase compared with Survey 2

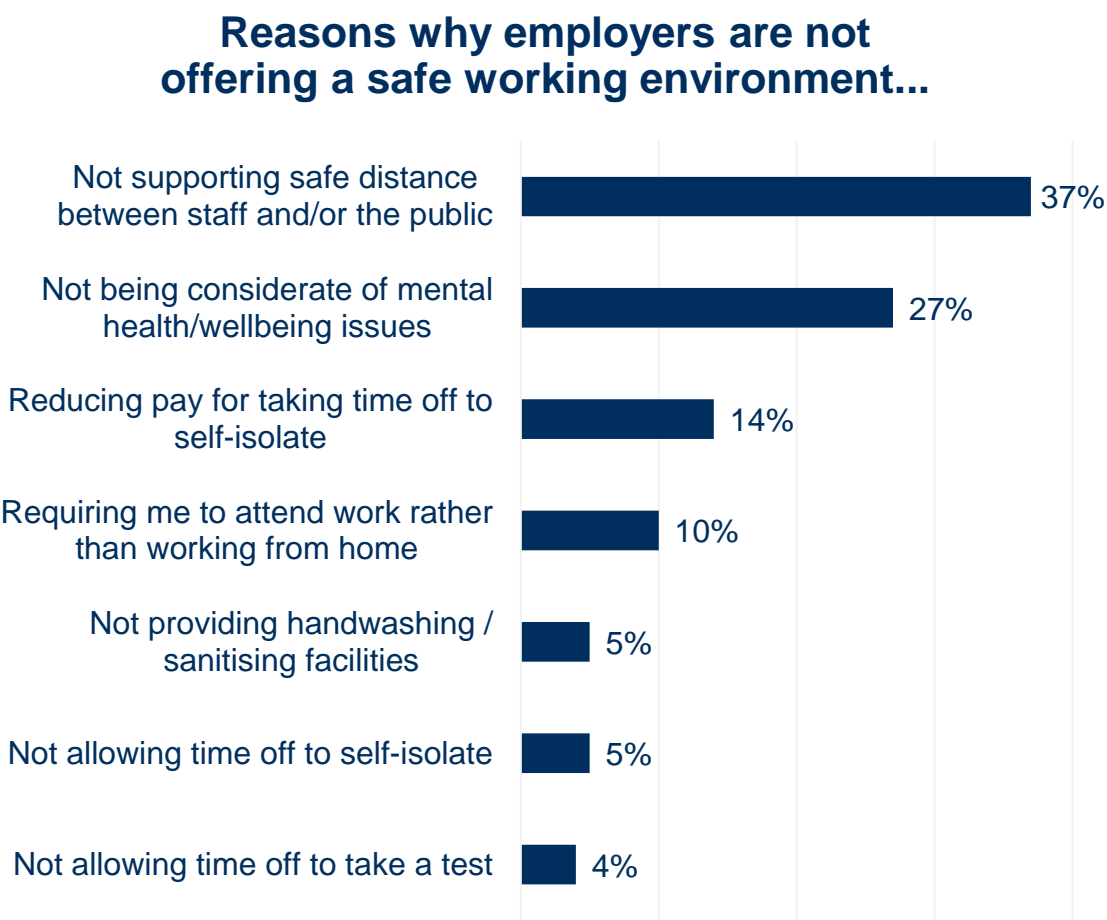
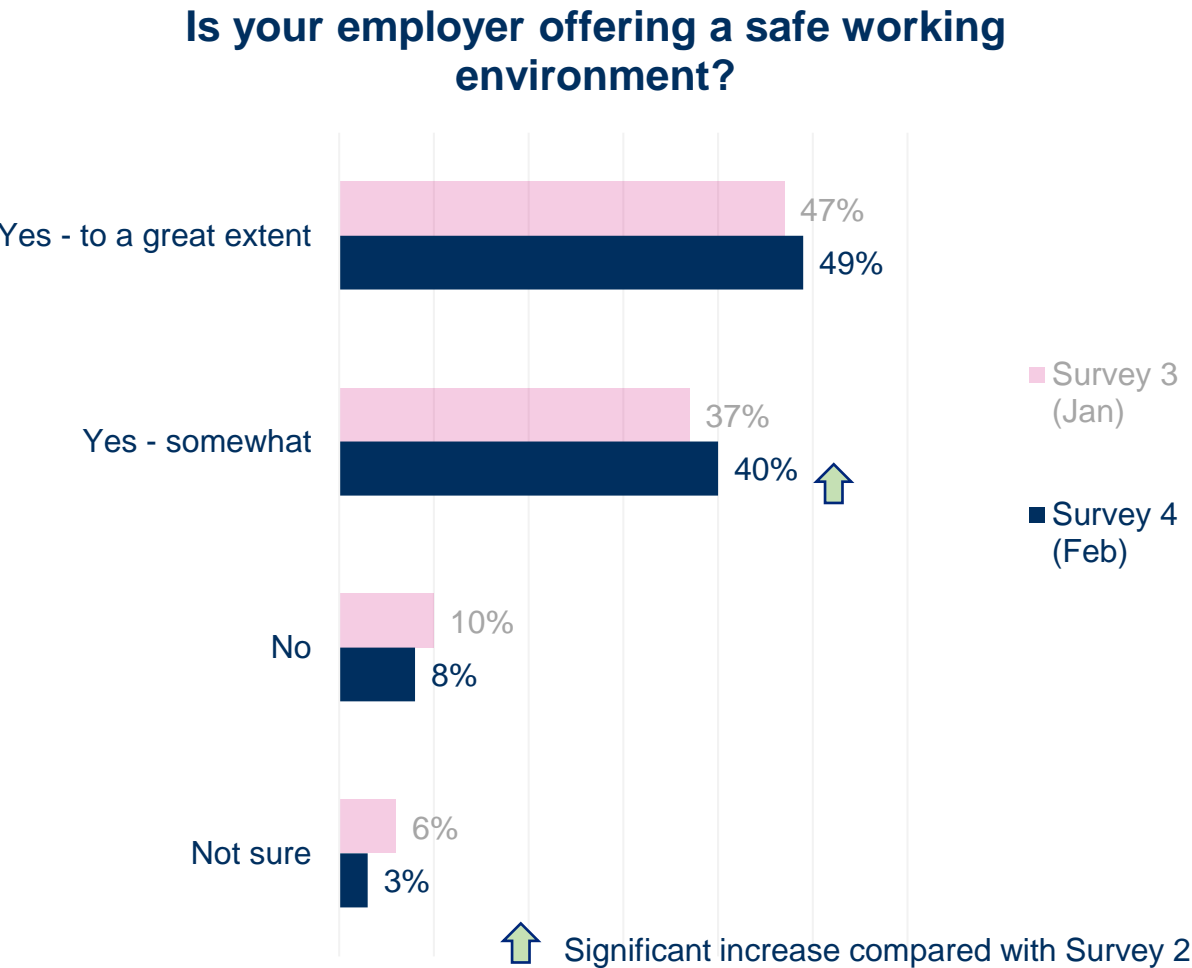
Despite people being advised to work from home during the national lockdown unless they cannot reasonably do so, 3 in 5 (58%) people in work are **still going into their workplace** at least some of the time.

Currently, how often are you working from home....



- Significantly more likely to be attending their workplace:
- Those working in
 - Wholesale/retail/distribution/personal services (64%)
 - Hospitality/arts/recreation (inc. those working in the food service industry) (62%)
 - Health & Social work (55%)
 - Those living in Wigan (59%)
 - Educated to below degree level (57%)
 - Part-time employees (51%)

The number of people still going into work who **feel their workplace is coronavirus-safe** has increased slightly since January. Where unsafe, lack of distancing or being considerate of mental health issues remain the most frequent concerns.

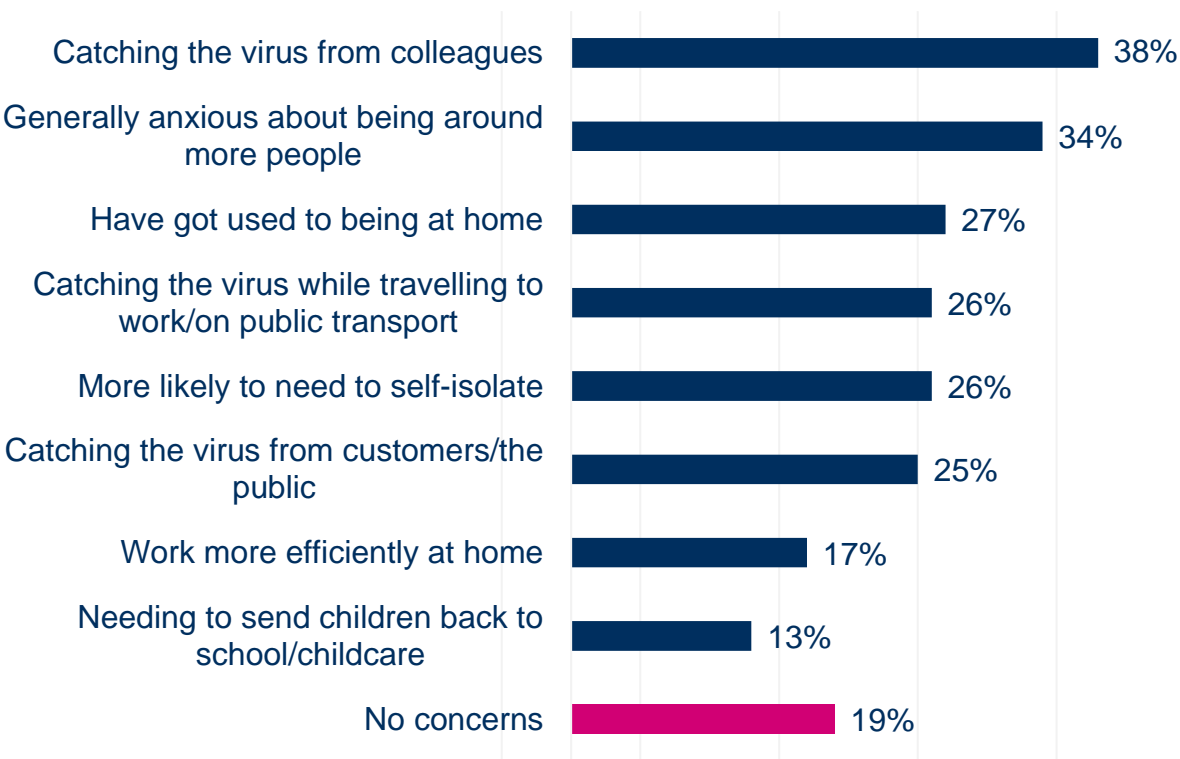


1 in 3 (33%) respondents expect to **return to their usual workplace** within the next 3 months. 4 out of 5 (81%) of those currently working from home have at least one concern about returning.

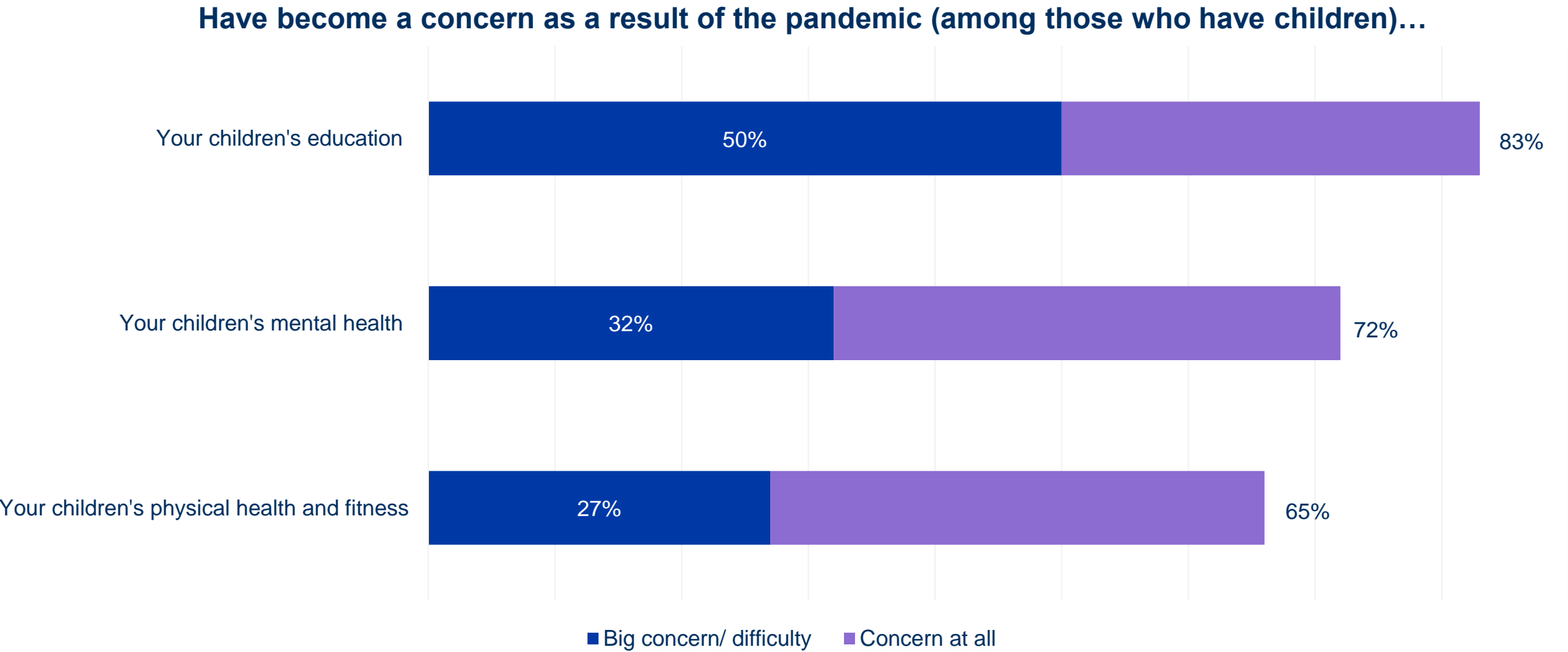
Expectation of return to the workplace...



Concerns about returning to the workplace...

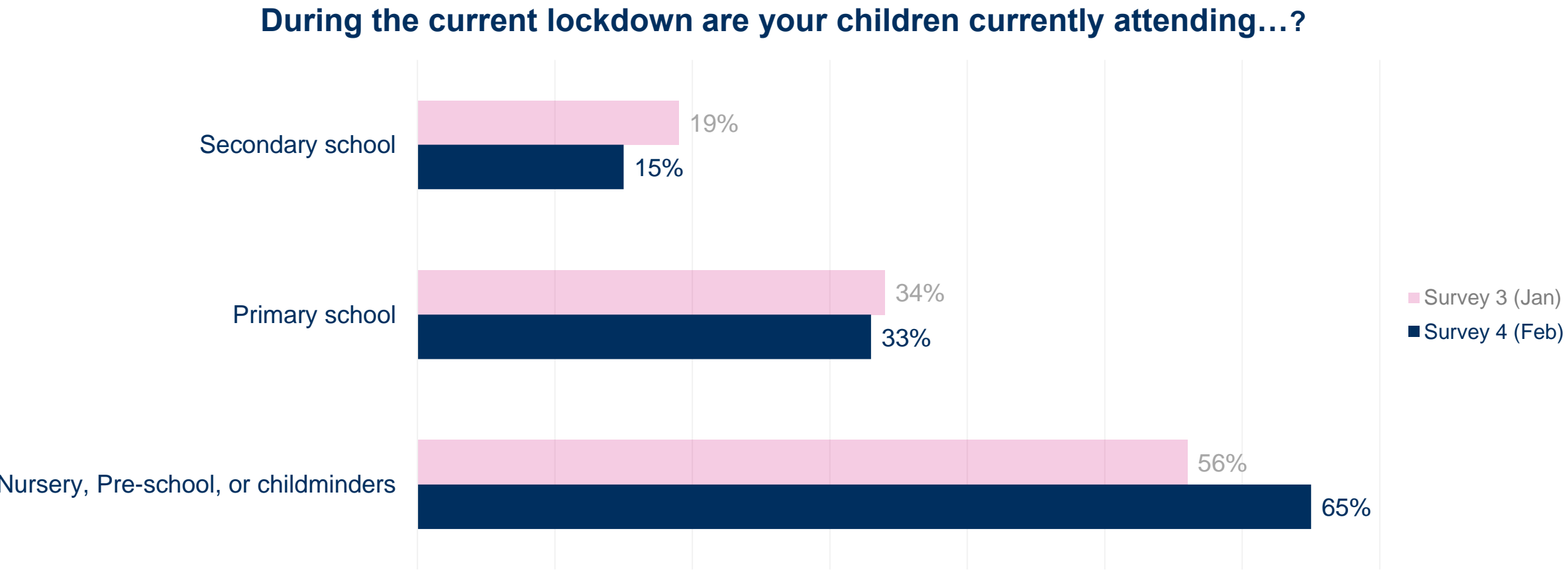


In terms of **impacts on children**, more than 8 in 10 (83%) respondents with children are concerned about their education. Half consider this a ‘big concern’. These proportions are broadly consistent with the last survey.



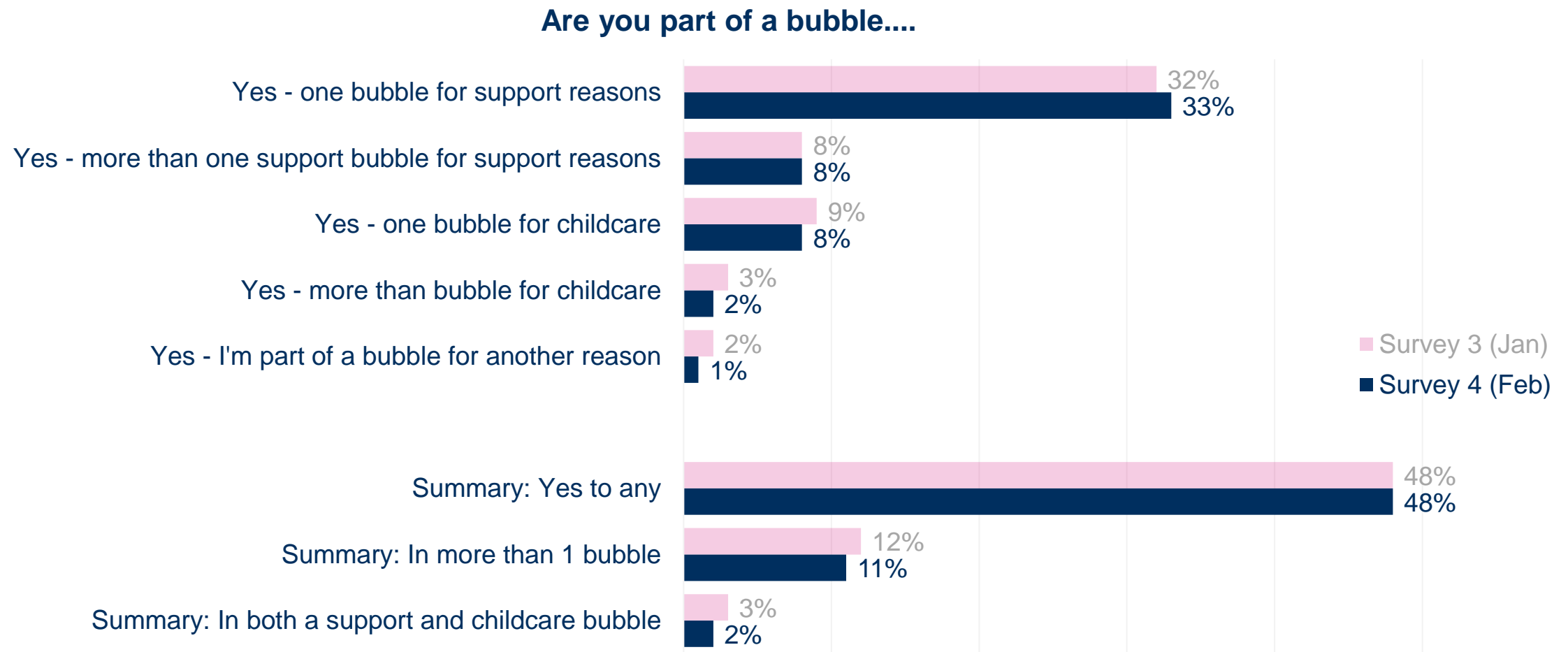
For further detail see “coronavirus impacts – children and education”, [page 46](#)

1 in 3 (33%) parents of primary and 1 in 7 (15%) of secondary pupils still **had children in school during the national lockdown**. As lockdown progressed, there was a large increase in the proportion sending their children to school/early years settings so they could attend work, even though not key workers (24%, up from 12% in January).



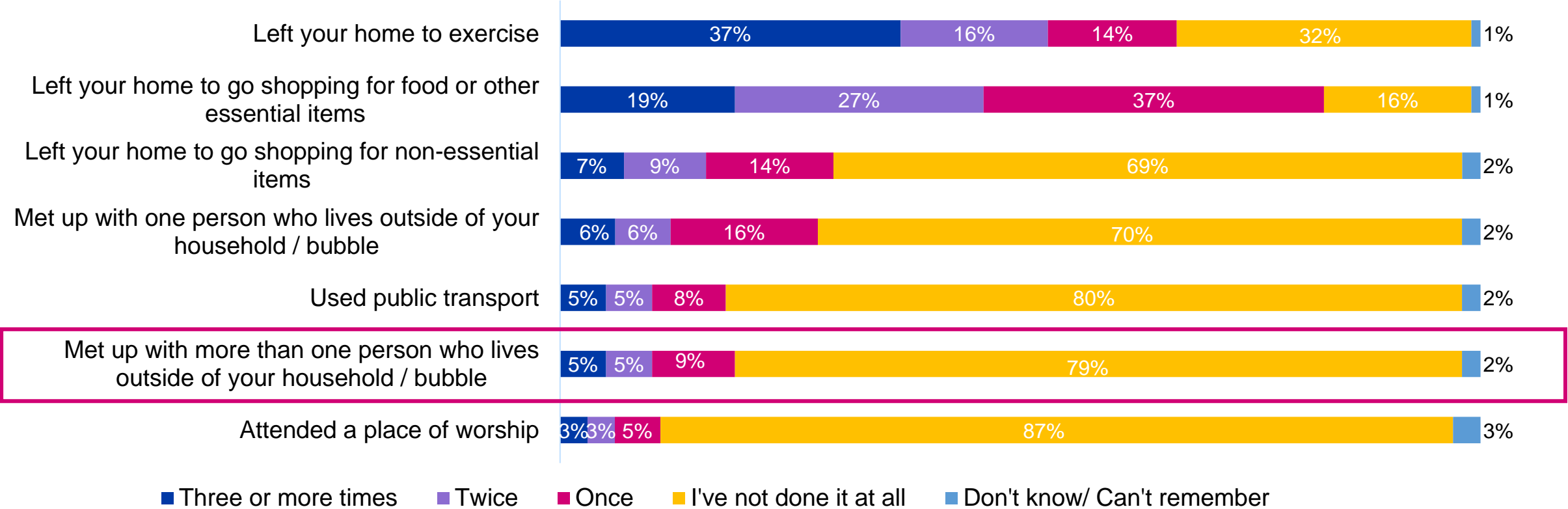
For further detail see “coronavirus impacts – children and education”, [page 47](#) and [page 48](#)

Consistent with January, around half (48%) of respondents are ‘bubbled’ with another household for childcare or support reasons. Although only 2% say they have both kinds of bubble, as permitted, 11% say they are in more than one bubble.



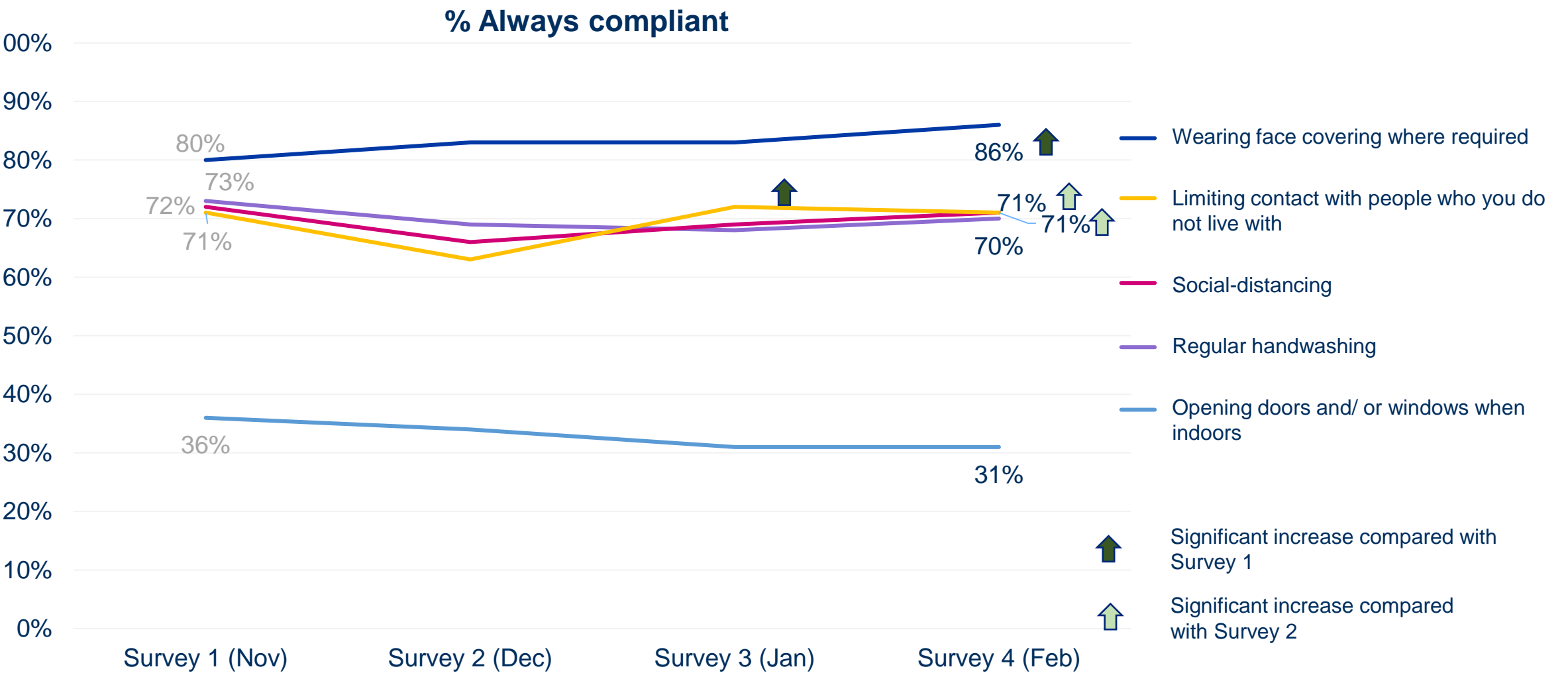
As with January’s findings, 1 in 5 (19%) respondents met up with more than one person from outside their household or bubble at least once in the last seven days – against the “stay at home” restrictions in place.

Reasons for leaving home in the last 7 days



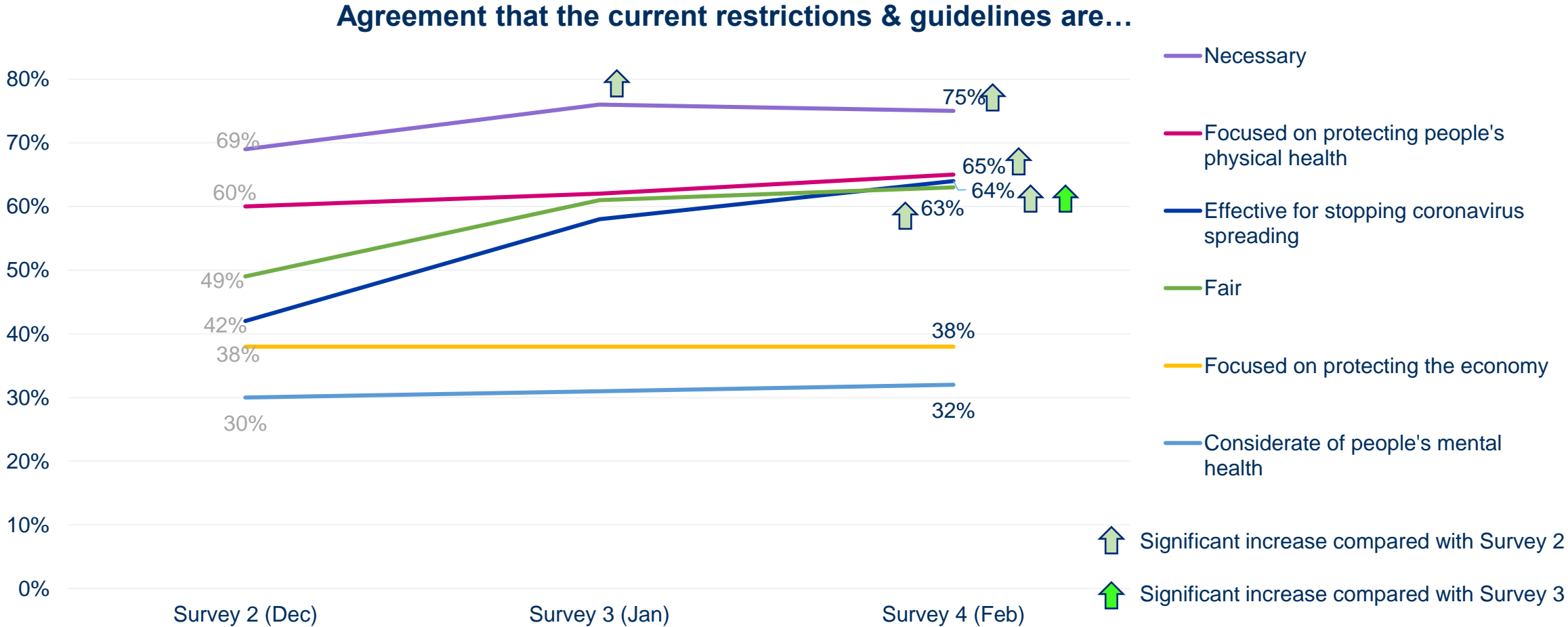
For further detail see “attitudes and behaviours – compliance with guidance”, [page 55](#) and [page 56](#)

Compliance with the public health guidelines for stopping the virus remains stable since the national lockdown was introduced. At least 7 in 10 respondents say they follow most of the restrictions all of the time.



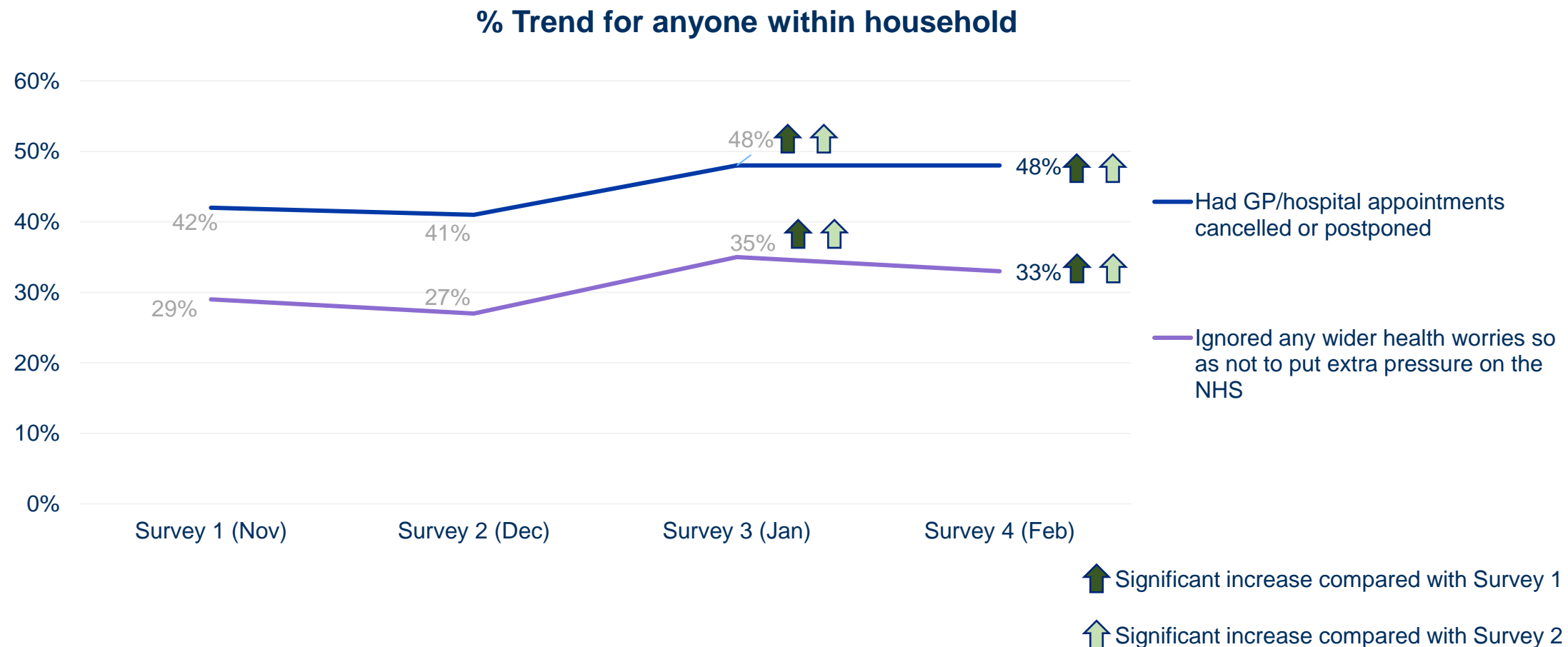
For further detail see “attitudes and behaviours – compliance with guidance”, [page 53](#) and [page 54](#)

Since January, there has been a significant increase in those feeling the current **restrictions are effective**. This builds on the increase seen between December and January, and shows respondents feel the national lockdown is having an effect.



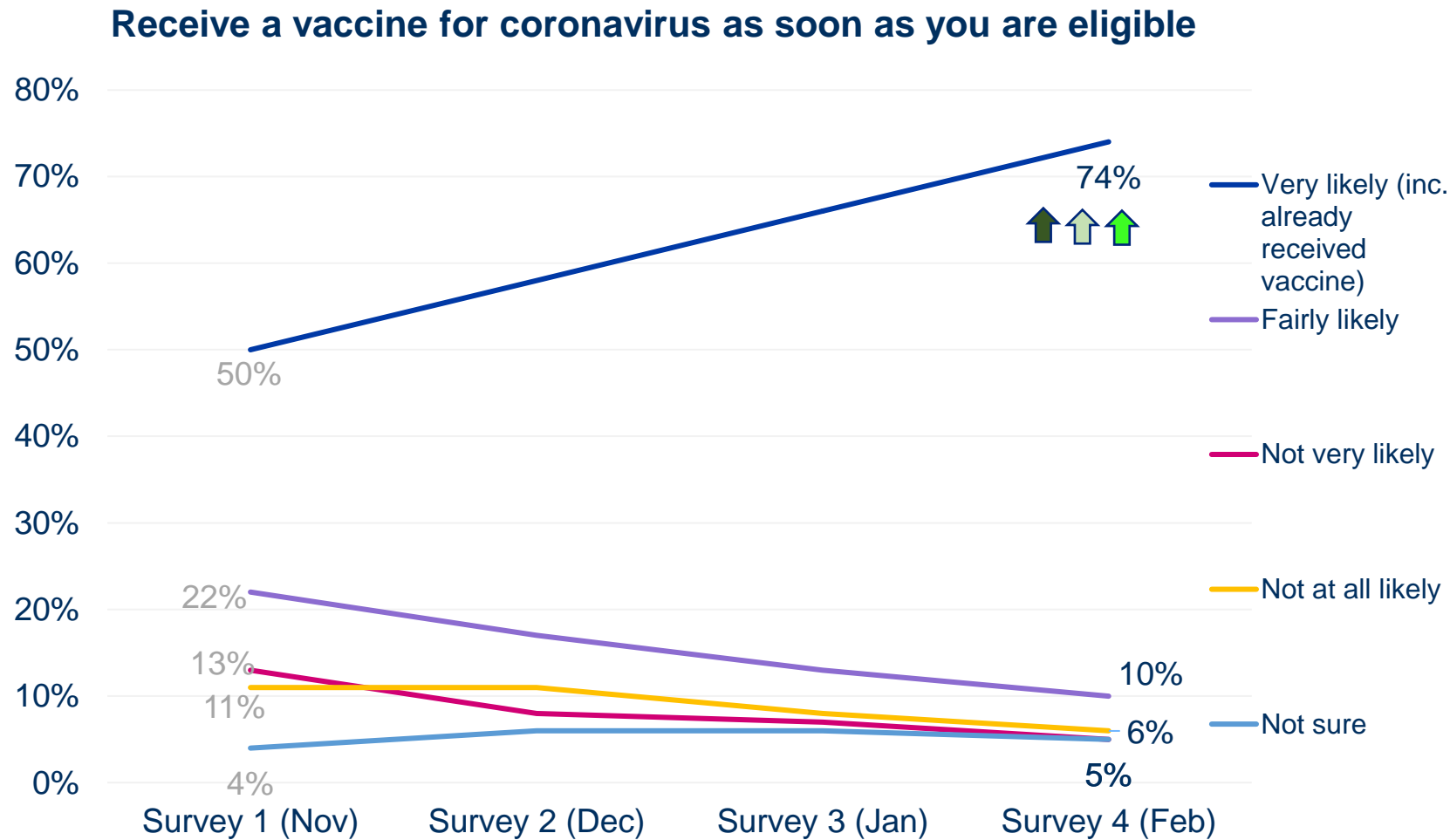
For further detail see “attitudes and behaviours – attitudes to restrictions”, [page 52](#)

The proportion of respondents **ignoring health concerns** or having medical appointments cancelled has levelled off since January, but remains significantly above the November baseline. This could suggest an unintended consequence of the “Stay Home, Protect the NHS” message.



For further detail see “coronavirus impacts – indirect health impacts”, [page 40](#)

84% of respondents now say they have already or **would receive the vaccine**. This is significantly higher than any previous survey.



More respondents from the following groups are not very/not at all/not sure about getting the vaccine (compared to 16% average among all respondents):

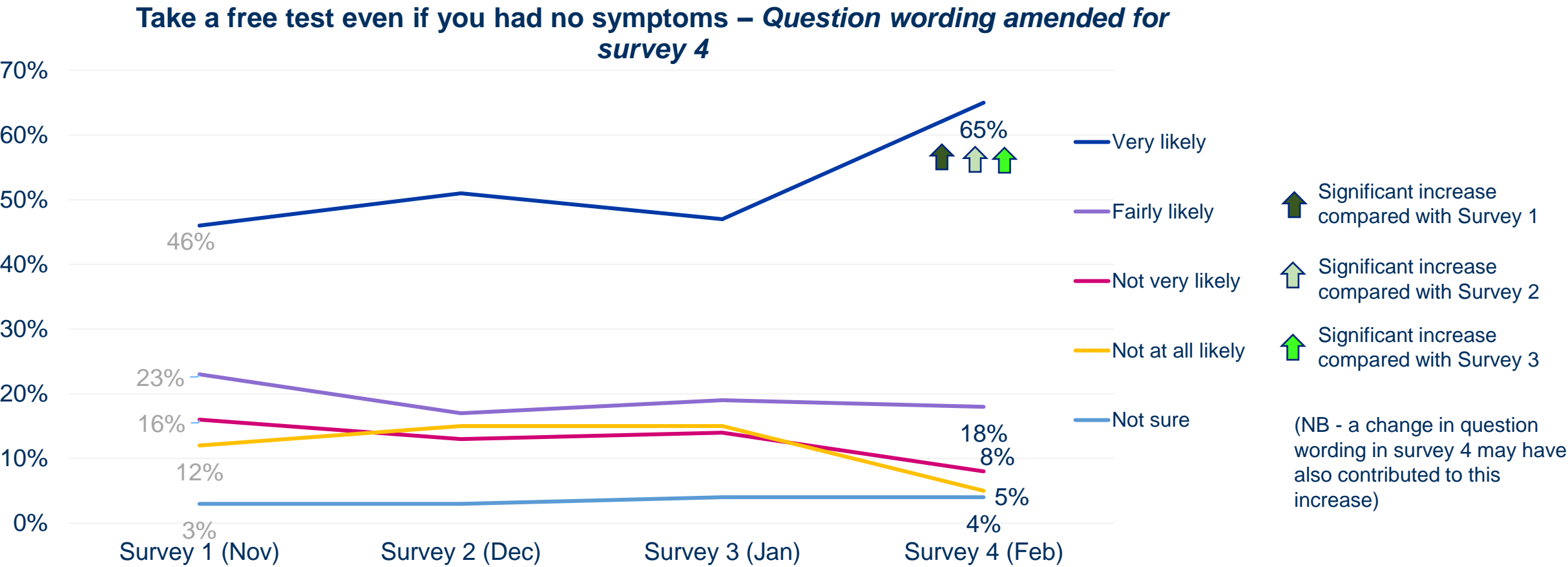
- Black respondents (41%)
- Aged 16-24 (35%)
- Those who have English as an additional language (33%)
- Muslim respondents (29%)
- Those who believe they've had coronavirus, although not had it confirmed by test (23%)
- Those living in the most deprived areas (21%)

- ▲ Significant increase compared with Survey 1
- ▲ Significant increase compared with Survey 2
- ▲ Significant increase compared with Survey 3

(At time of fieldwork, vaccines were available to priority groups 1-4: care home residents and staff; frontline health and social care; aged 70+; clinically extremely vulnerable).

For further detail see “attitudes and behaviours – vaccines”, [page 59](#), [page 60](#) and [page 61](#)

2 in 3 (65%) respondents are very likely to **take a test when showing no symptoms** of coronavirus. This is up significantly across all previous surveys, potentially reflecting the increased activity in community / workplace asymptomatic testing.



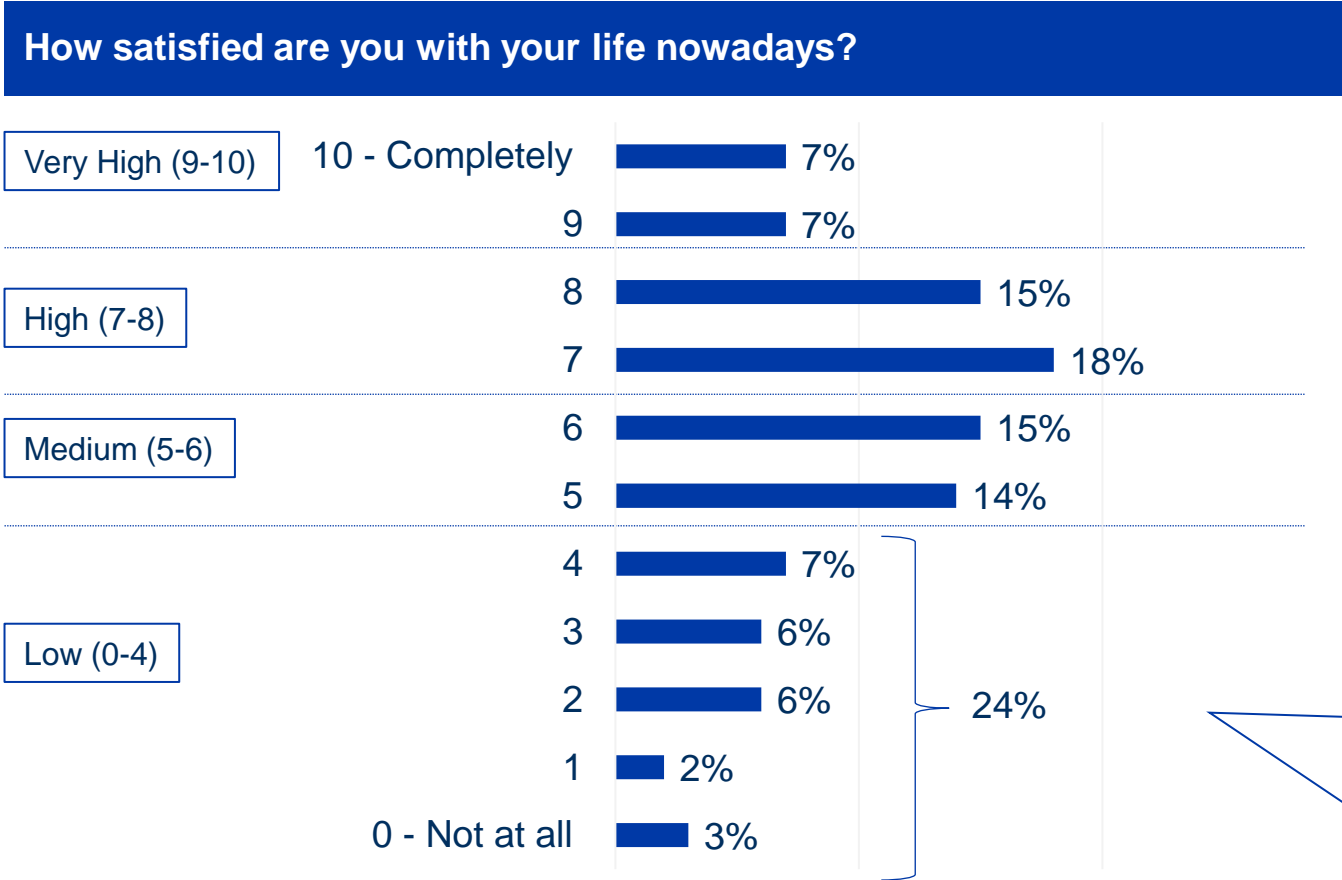
For further detail see “attitudes and behaviours – asymptomatic testing”, [page 62](#) and [page 63](#)



Feelings and concerns

Life satisfaction	page 26
Anxiety	page 27
Levels of worry	pages 28 29
Risks of coronavirus	page 30
Specific concerns	pages 31-33

The proportion of respondents with ‘low’ levels of **life satisfaction** continues to be above the November baseline. Women, those out of work, and those with a disability continue to have lower levels of satisfaction than others.



	Survey 1 (Nov)	Survey 2 (Dec)	Survey 3 (Jan)	Survey 4 (Feb)
% with 'low' levels of satisfaction (0-4)	16%	19%	22%	24%
Mean score	6.56	6.21	6.11	5.97

- % 'low' is significantly higher among:
- Respondents out of work (39%), in particular due to ill health** (49%)
 - Respondents who are looking after the home (47%)
 - Respondents with a disability (40%) particularly a mental health illness (53%) or a mobility disability (46%)
 - Single adult households (34%)
 - Females (28%; 20% of males)

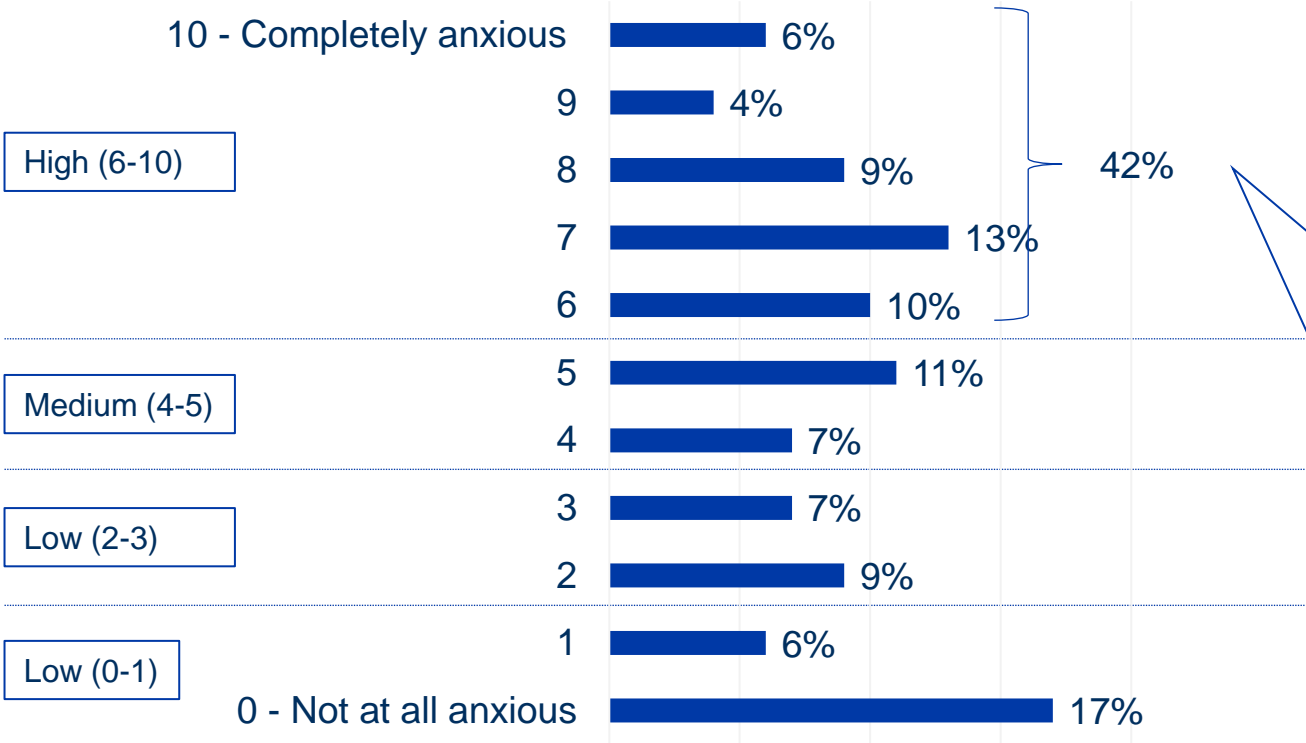
Significant increase compared with Survey 1

Significant increase compared with Survey 2

A1. Where 0 is “not at all” and 10 is “completely”...
Unweighted base: 1003 (All respondents from Survey 4) **Base below 50

2 in 5 (42%) respondents report ‘high’ levels of anxiety, consistent with previous surveys.

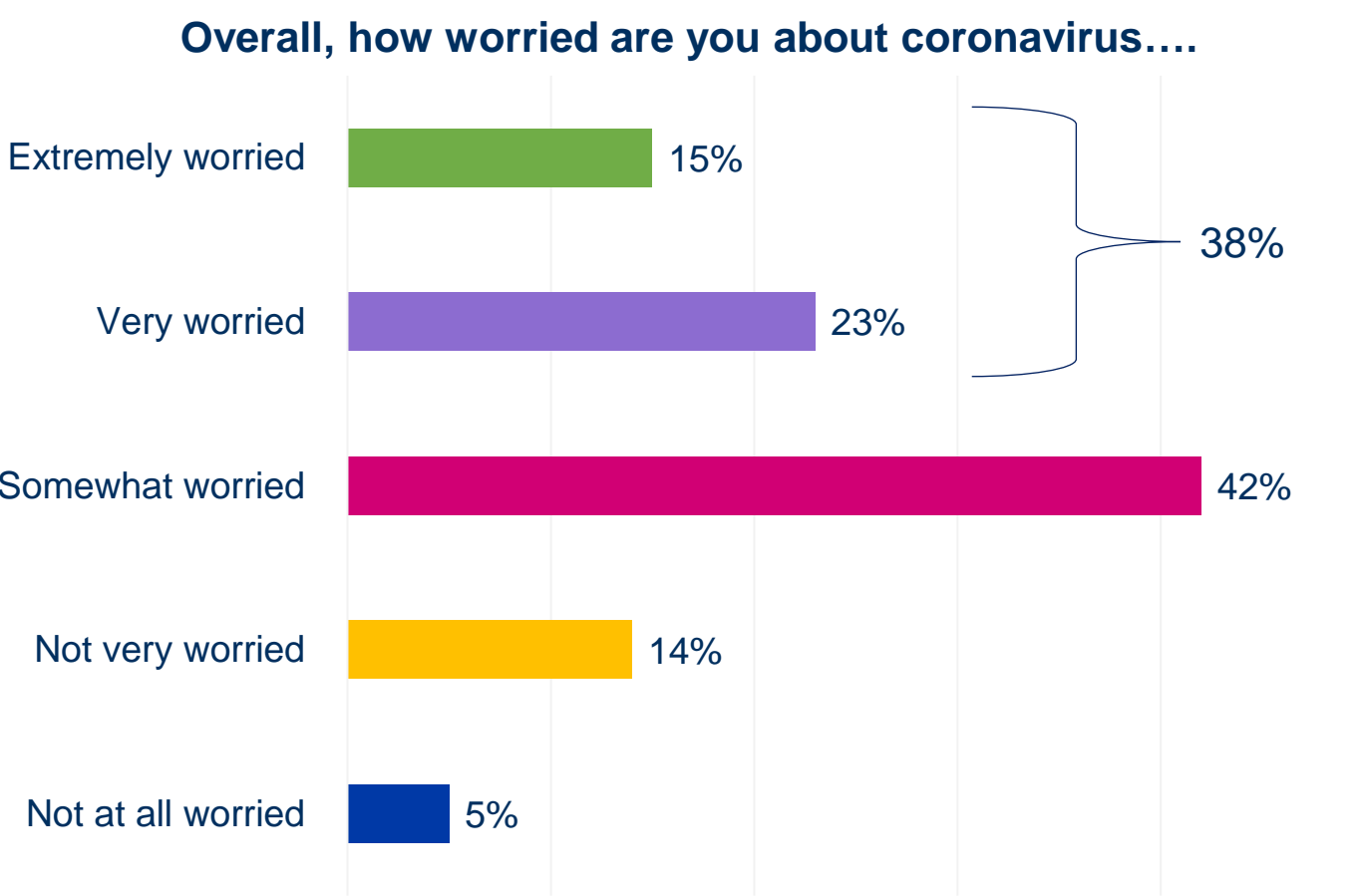
How anxious did you feel yesterday?



	Survey 1 (Nov)	Survey 2 (Dec)	Survey 3 (Jan)	Survey 4 (Feb)
% with 'high' levels of anxiety (6-10)	39%	39%	41%	42%
Mean score	5.63	5.50	5.46	5.5

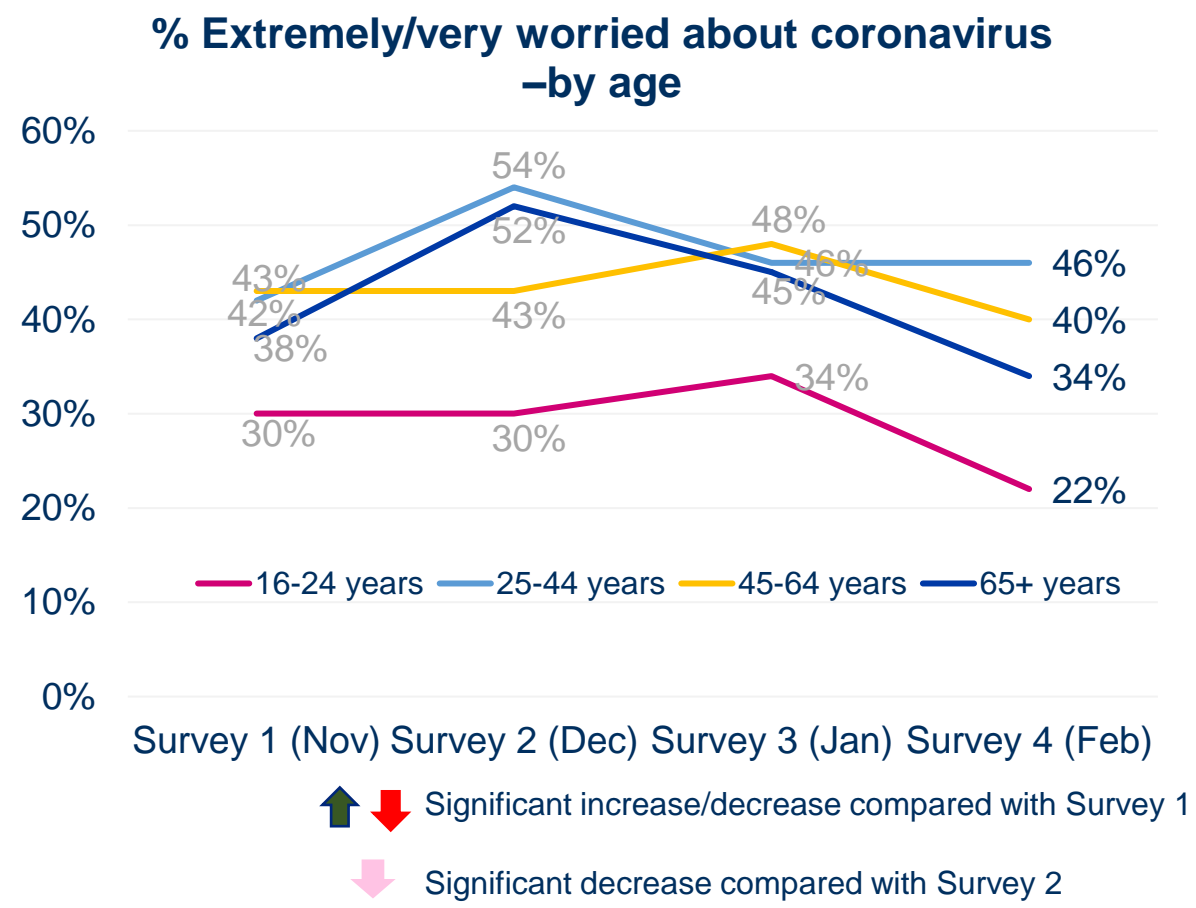
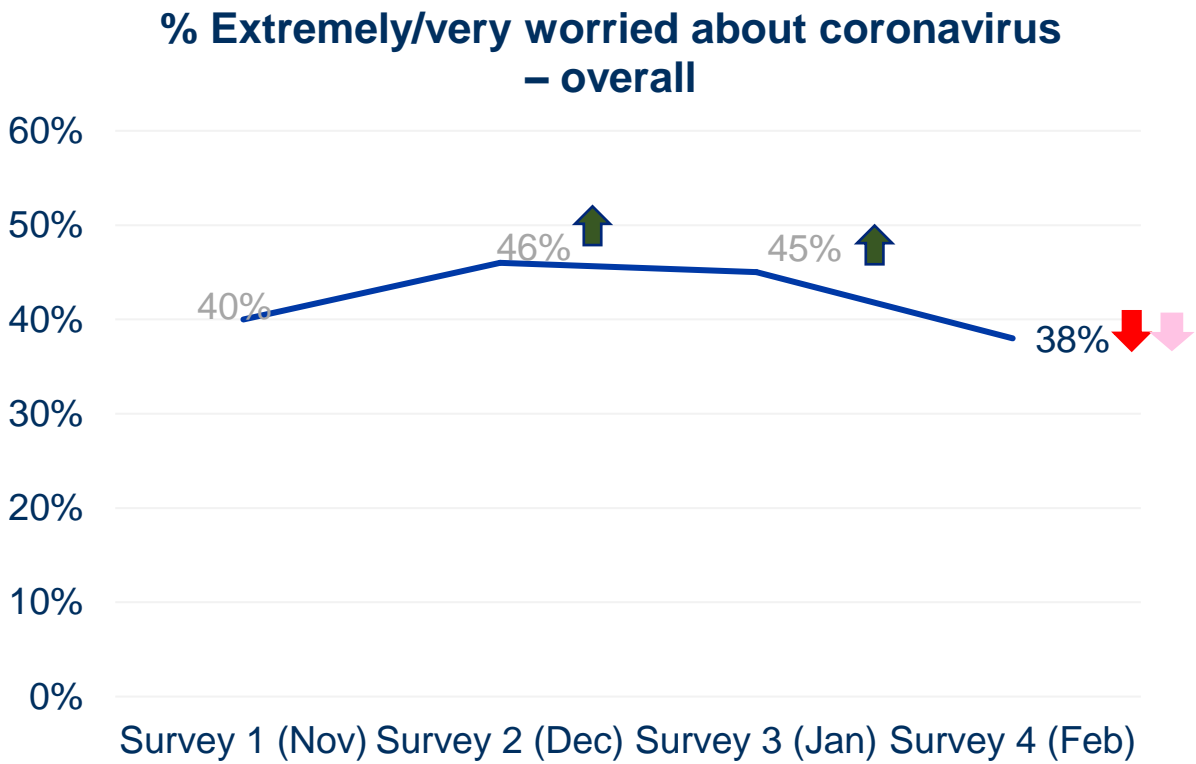
- % with 'high' anxiety higher among:
- Respondents with under 5s in early years settings (60%); with primary school aged children (51%), and where their children are currently attending school or nursery (47%)
 - Respondents with a disability (53%) and particularly a mental health illness (68%)
 - Respondents from racially diverse backgrounds (53%)
 - Carers (52%)
 - Respondents working part time (51%), and particularly those working in non-public services (46%) or who are currently furloughed (58%), on reduced pay (69%), or reduced hours (55%)
 - 25-44yr olds (48%)
 - Women (48%; compared to 35% Men)

Just under 2 in 5 (38%) respondents are now extremely or very **worried about coronavirus**. Those with a disability are among those most concerned.



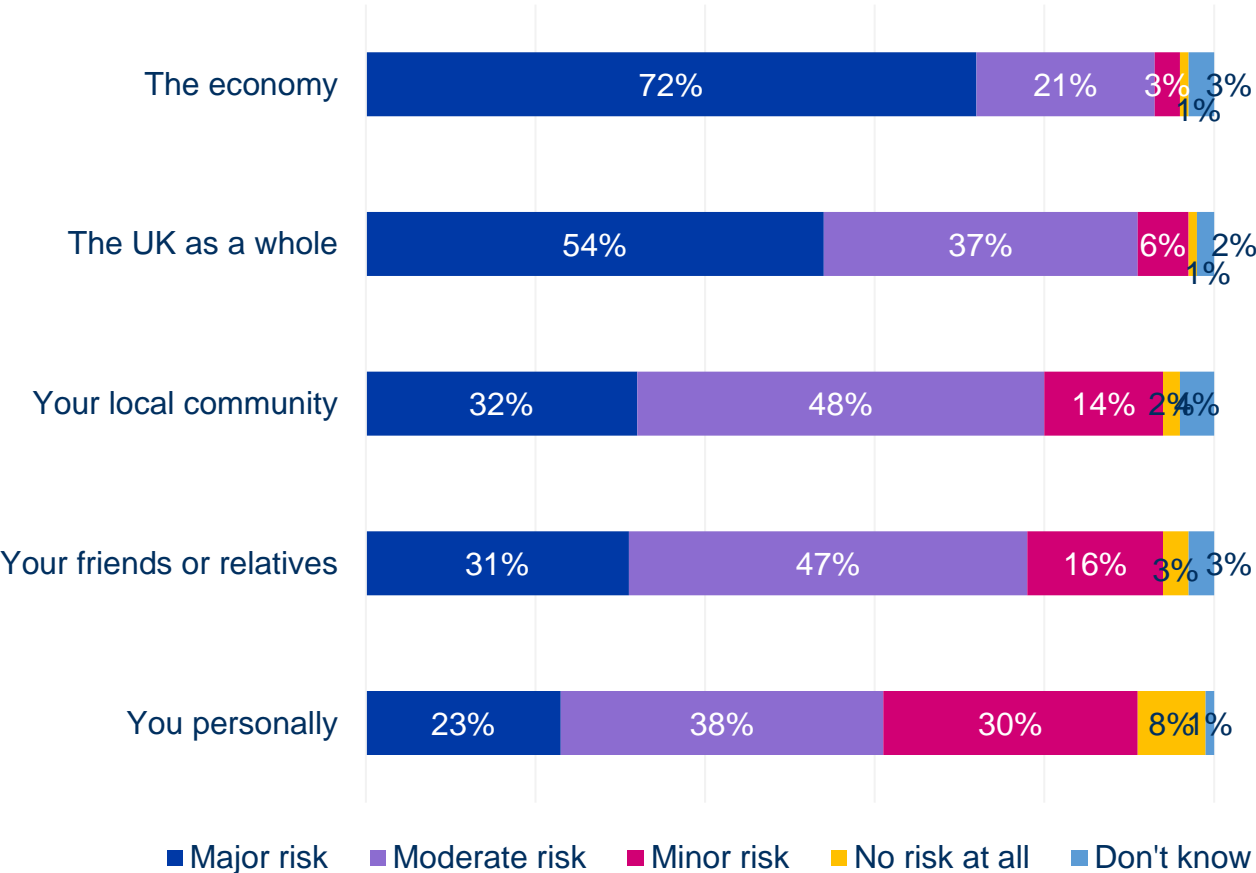
- Respondents more likely to be extremely/very worried (vs. 38% on average):**
- Respondents with a disability (53%), in particular those with mental ill health (55%) or a mobility disability (63%)
 - Respondents whose first language isn't English (50%)
 - Carers (50%)
 - Respondents where a member of their household is at high risk of coronavirus (46%)
 - Those aged 25-44yrs (46%)
 - Those living in the most deprived areas (44%)
 - Women (43% cf. 33% men)

The proportion of respondents **extremely or very worried about coronavirus (38%)** has fallen below the baseline level set in November for the first time. Most age groups have also seen a notable fall in worry, with a particular decrease in those aged 65+ (many of whom will have been eligible for the vaccine).



As the vaccine rolls out, this is the first survey not to find over 65s significantly more likely than others to see **coronavirus as a ‘major risk’** to themselves. Most respondents continue to believe coronavirus is most likely to pose a ‘major risk’ to the economy.

How much of a risk coronavirus is to...



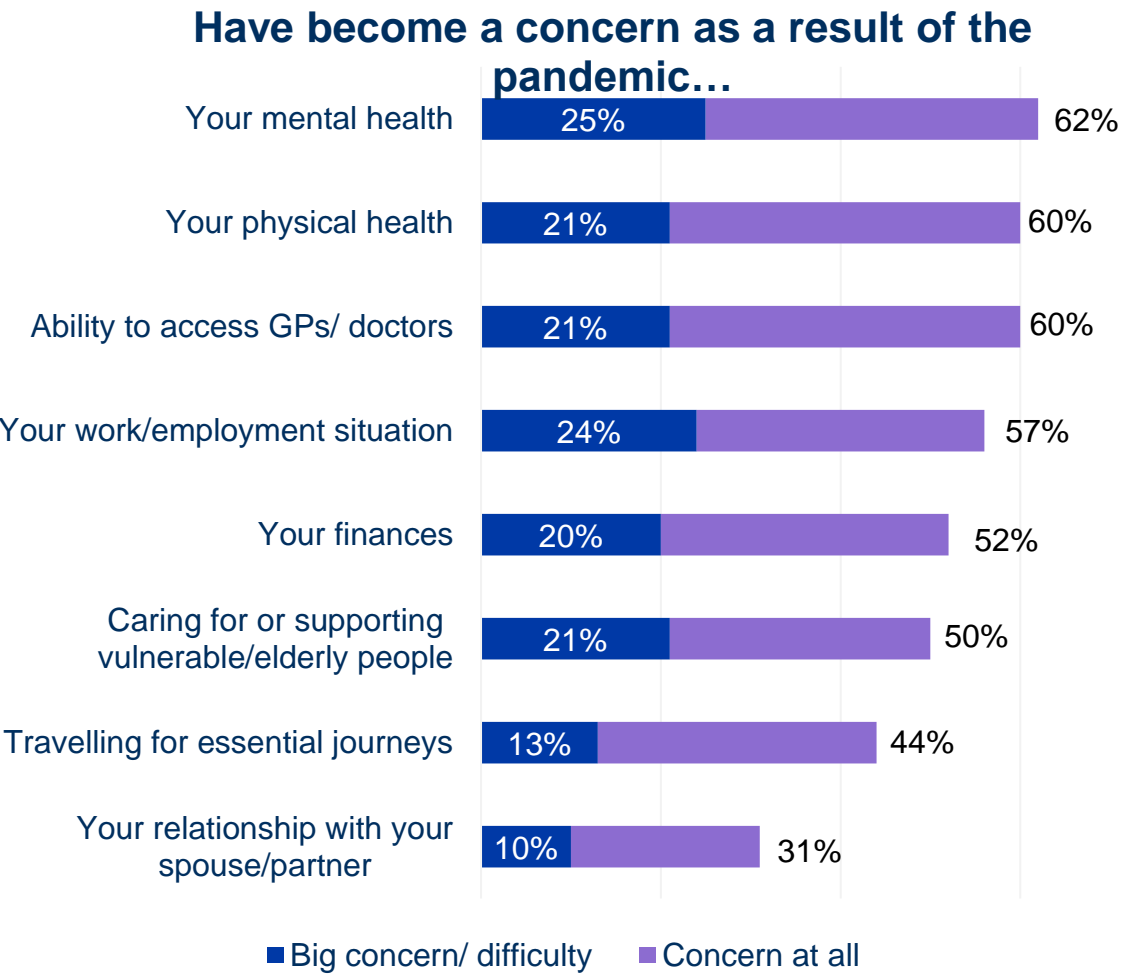
% consider it a 'major risk' to...			
Survey 1 (Nov)	Survey 2 (Dec)	Survey 3 (Jan)	Survey 4 (Feb)
60%	73%	73%	72%
55%	58%	62%	54%
37%	32%	34%	32%
33%	34%	34%	31%
25%	21%	21%	23%

More likely to say it's a 'major risk' to them personally (vs. 23% average)

- Respondents who have a disability (38%), in particular a mobility disability (48%)
- Respondents from racially diverse backgrounds (30%)
- Those living in the most deprived areas (29%)
- Those where a member of their household is at high risk of coronavirus (30%)
- Parents (28%)

Significant increase compared with Survey 1

Since the baseline in November, **specific concerns** around mental health and finances have increased. 3 in 5 (60%- 62%) are concerned about their mental health, accessing a GP, and their physical health as a result of the pandemic.



% Concerned at all			
Survey 1 (Nov)	Survey 2 (Dec)	Survey 3 (Jan)	Survey 4 (Feb)
54%	64%	59%	62%
57%	60%	58%	60%
N/A	66%	58%	60%
N/A	53%	58%	56%
42%	52%	54%	52%
N/A	50%	48%	50%
47%	51%	47%	44%
31%	32%	31%	31%

Significant increase compared with Survey 1
 Significant decrease compared with Survey 2

Some groups are significantly more likely to say each of the following has become a **specific concern** (compared with the average for the population as a whole)

Physical health	Mental health
<p>Greater Manchester Average: 60%</p> <ul style="list-style-type: none">• Respondents with a disability (82%) and particularly a mental health illness (87%) or mobility disability (84%)• Those who have had coronavirus confirmed by a test (77%)• Those out of work (75%) or not in work due to ill health/disability (80%)**• Where they personally are at high risk of coronavirus (76%)• Students (75%)**• Respondents living in Oldham (73%) or Manchester (70%)• Those living in the most deprived communities (70%)• Respondents who have had to self-isolate (70%)• Those working reduced hours (72%)• Aged 16-24 (69%) or 25-44 (64%)• Part-time employees (69%)• Respondents from racially diverse backgrounds (68%)• Respondents with children of primary school age (68%)• Women (63% cf. 55% Men)• Those in a bubble (63%)	<p>Greater Manchester Average: 62%</p> <ul style="list-style-type: none">• Respondents with a disability (78%), in particular those with a mental health illness (95%)• Students (84%)**• Those out of work (79%) or not in work due to ill health/disability (83%)**• Respondents who have had coronavirus confirmed by a test (76%) or have had to self-isolate (72%)• Women (70%; 53% men)• Aged 16-24 (77%) or 25-44 (74%)• Those where a member of their household has lost their job due to coronavirus (73%)• Respondents from racially diverse backgrounds (72%)• In employment (68%), particularly those working in health and social work (76%), those who are furloughed (81%), working reduced hours (74%), or working from home all (69%) or some (78%) of the time• Have children at all (67%), in particular those with children under 5 (74%), or at primary school (73%)• Those living in the most deprived areas (67%)• Those in a bubble (67%)

Some groups are significantly more likely to say each of the following has become a **specific concern** (compared with the average for the population as a whole) (cont.)

Work/employment	Finances
<p>Greater Manchester Average: 57%</p> <ul style="list-style-type: none">• Those working in hospitality/arts/recreation (83%)**, wholesale/retail/distribution/personal services (66%) or the non-public sector more generally (62%)• Self-employed respondents (78%)**• Those where a member of their household has already lost their job due to coronavirus (76%)• Respondents who are furloughed (76%), working reduced hours (77%) or on reduced pay (91%)**• Where English is not their first language (76%)• Those who have served in the armed forces (70%)• Those who have had coronavirus but not had it confirmed by test (69%)• Aged 16-24 (68%)• Those living in Manchester (67%)• Those who have had to self-isolate (62%)• Those in a bubble (62%)	<p>Greater Manchester Average: 52%</p> <ul style="list-style-type: none">• Respondents working in hospitality/arts/recreation (84%)**, wholesale/retail/distribution/personal services (69%), or the non-public sector more generally (62%). Those who are furloughed (79%), working reduced hours (79%) or on reduced pay (80%)**• Where English is not their first language (80%)• Self-employed respondents (78%)** and part-time employees (65%), those out of work (72%) or looking after the home (72%)• Respondents with mental health illness (76%)• Those where a member of their household has already lost their job due to coronavirus (75%)• Respondents from racially diverse backgrounds (71%), particularly Asian respondents (73%)• Those Muslim respondents (67%)• Respondents living in Manchester (66%) or Oldham (63%)• Aged 16-24 (66%) or 25-44 (66%)• Non-heterosexual respondents (62%), particularly those who are Bisexual (69%)**• Respondents who have had coronavirus, both those who have had it confirmed by test (62%) and those who haven't (62%), and those who have had to self-isolate (61%)• Have children at all (61%), in particular those with children under 5 (70%), or at primary school (67%)• Women (57%; 46% Men)• Those living in the most deprived communities (57%)• Educated to non-degree level (56%)• Those in a bubble (56%)



Coronavirus impacts

Experience of coronavirus [pages 35, 36](#)

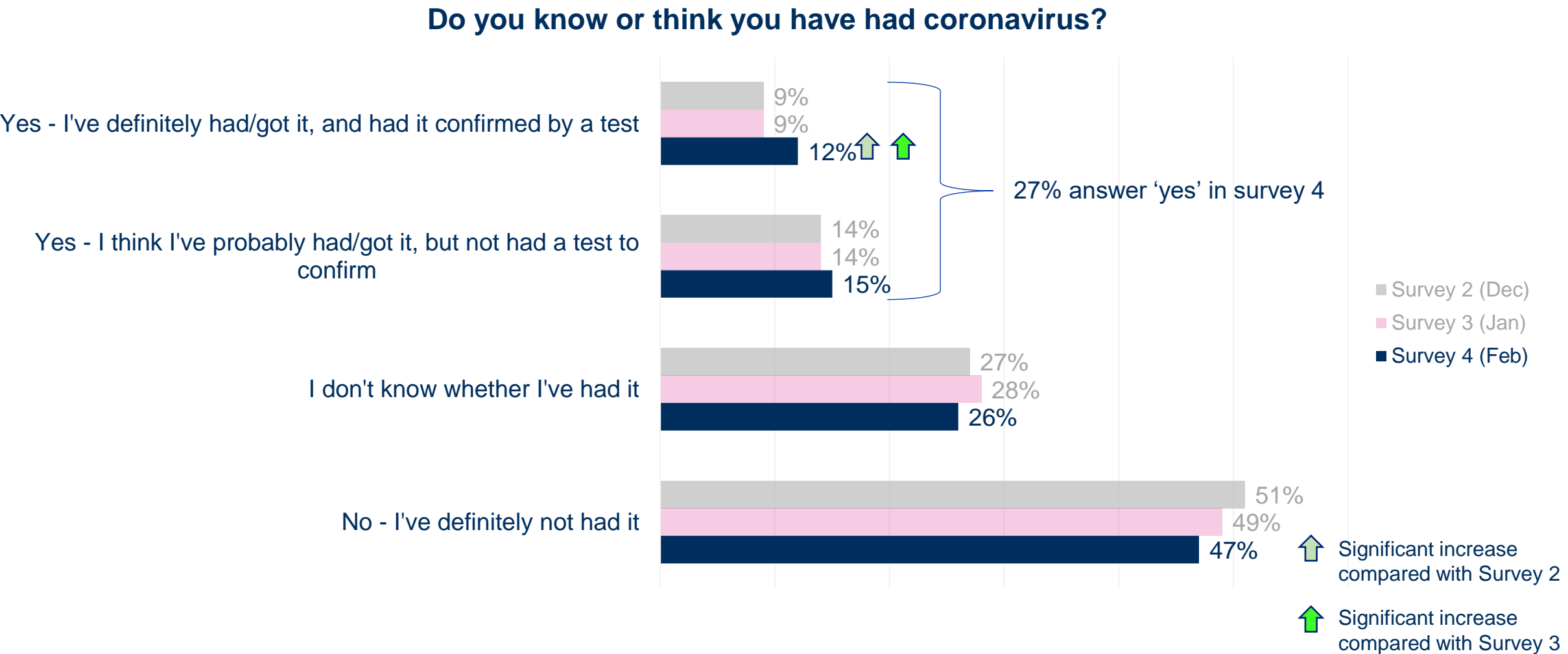
Self-isolation [pages 37-39](#) (see also “deeper insight” section from [page 65](#))

Indirect health impacts [page 40](#)

Finance and employment [pages 41-45](#)

Children and education [pages 46-48](#)

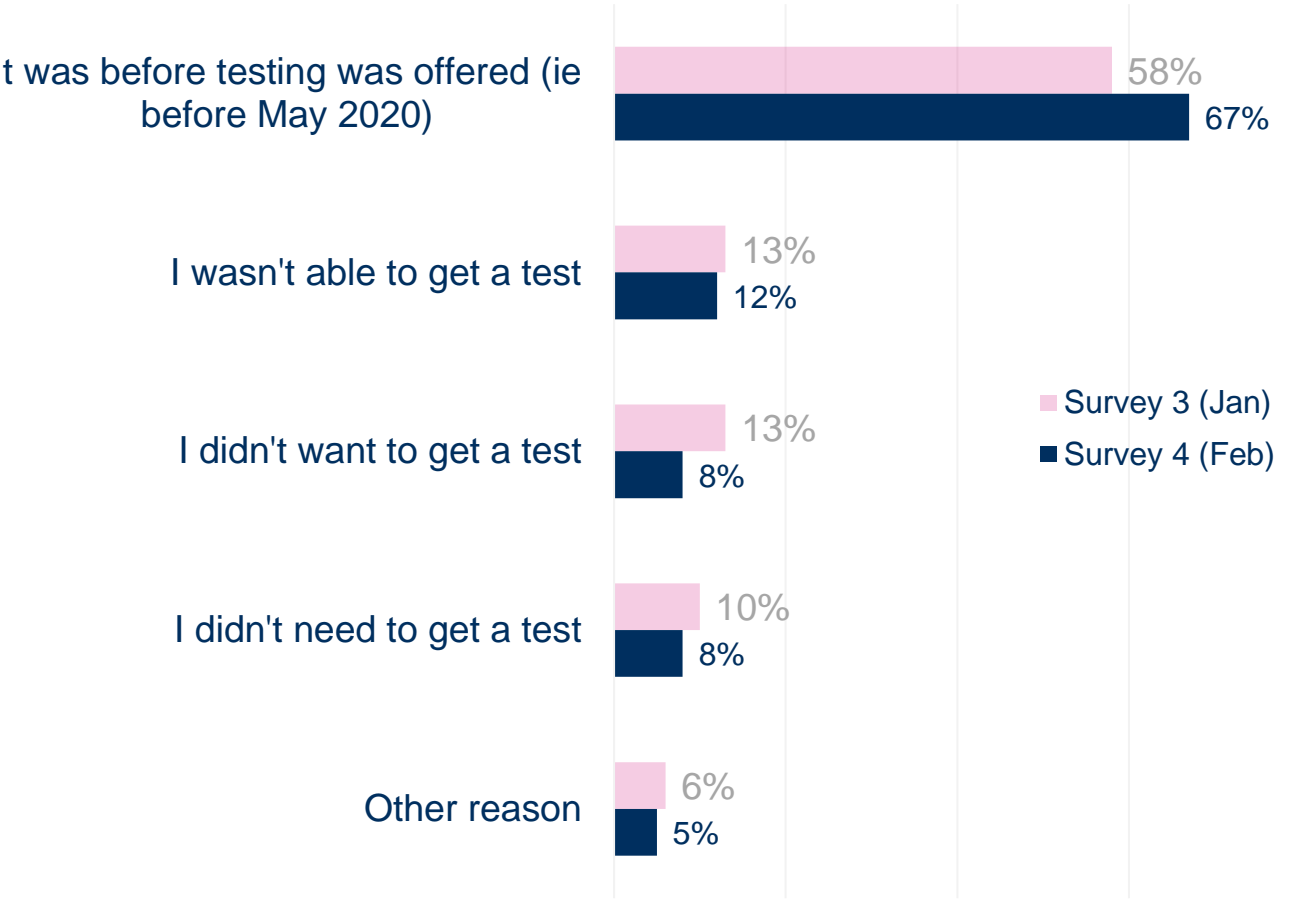
The proportion of respondents who have **had coronavirus** has increased to (27%), although the majority of these still have not had this confirmed with a test (15%).



B24. Do you know, or think, you have had coronavirus?
All respondents: Survey 2: 1007; Survey 3: 1010 ; Survey 4: 1003
N.B. Comparisons with survey 1 are not possible for this indicator due to the questions being asked in a different way

Most of those who believe they have **had coronavirus but not had a test to confirm** say this is because they believe they had it was before testing was offered. This proportion is increasing, suggesting people’s reluctance to get tested is falling.

Reasons for not getting a test...



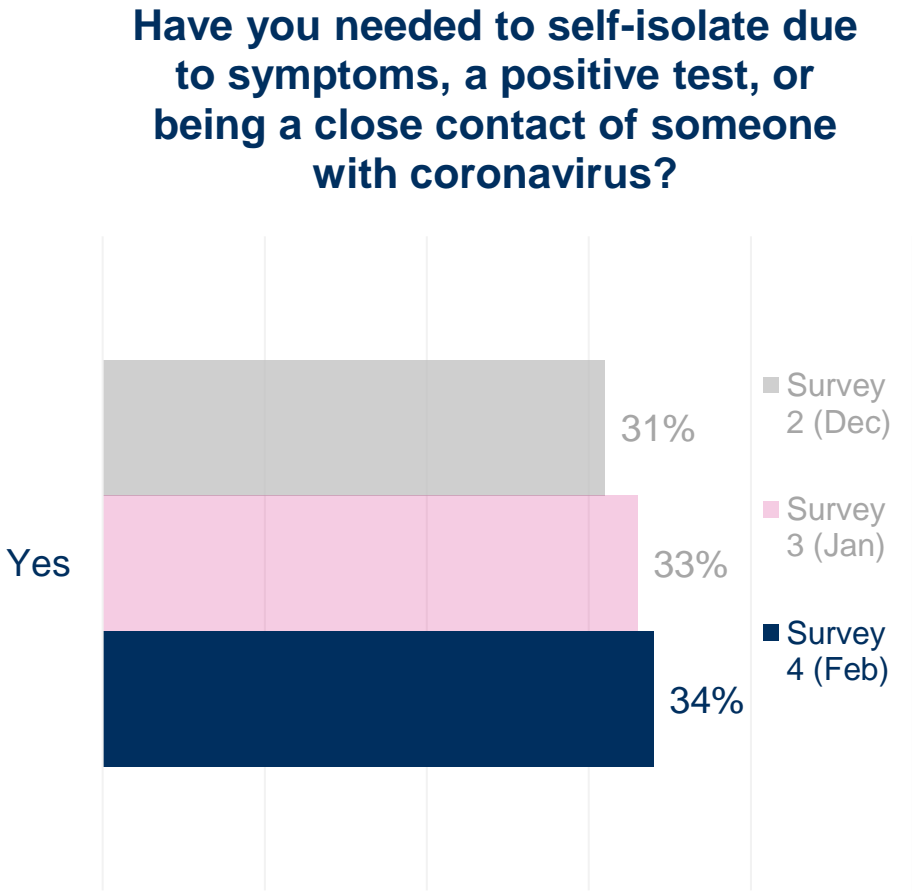
Think they’ve had coronavirus but not had it confirmed by a test... significantly higher among:

GM Average: 15%

- Have served in armed forces (33%)
- Respondents with children of primary school (22%) or secondary school age (33%)
- Students (25%)
- Rochdale respondents (24%)
- 25-44 year olds (19%)
- Respondents in full or part time employment (17%), particularly those working in the non-public sector (18%)

B24. Do you know, or think, you have had coronavirus? All respondents: 1003
B24a. Why did you not get a test to confirm whether you had coronavirus?
Unweighted base: 150 (Those who think have had coronavirus, but did not get a test)

Consistent with previous surveys, 1 in 3 (34%) say they have **needed to self-isolate** at some point. While nearly all (97%) of those who tested positive for coronavirus knew they needed to self isolate, the rate is far lower (56%) among those who think they've had coronavirus but not had it confirmed by a test.

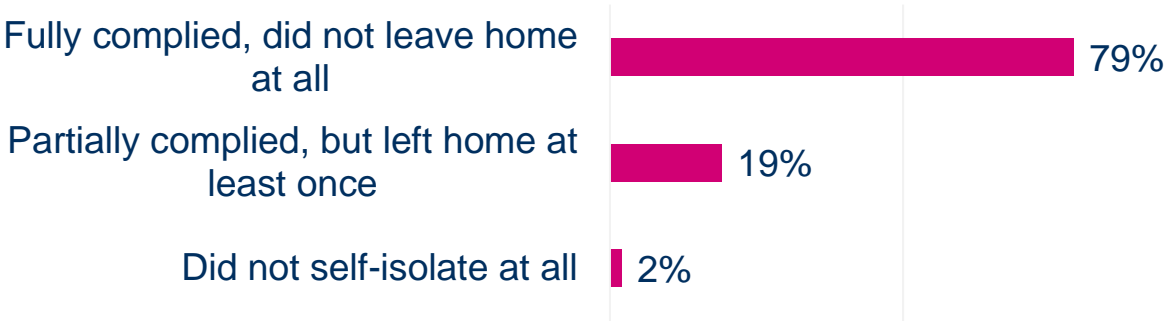


Survey 4 (Feb): Whether needed to self-isolate		
	Yes	No
All respondents	34%	66%
Had coronavirus confirmed by test	97%	3%
Think they've had coronavirus but not confirmed by test	56%	44%

The proportion that have needed to self-isolate increases to at least half among:	
<ul style="list-style-type: none">• Respondents with learning difficulties (64%)• Students (63%)• Black respondents** (62%), those from Mixed ethnic backgrounds** (56%), and Pakistani respondents** (51%)• Aged 16-24 (61%) or 25-44 (39%)• Muslim respondents (58%)• Those where a member of their household is at high risk of coronavirus (48%)• Respondents who speak English as an additional language (46%)• Respondents with children under 5 years (45%) and or of primary school age (45%)• Those in full or part time employment (39%), particularly those working in wholesale/retail/distribution/personal services (43%) or health and social work (48%)• Those living in the most deprived areas (39%)	

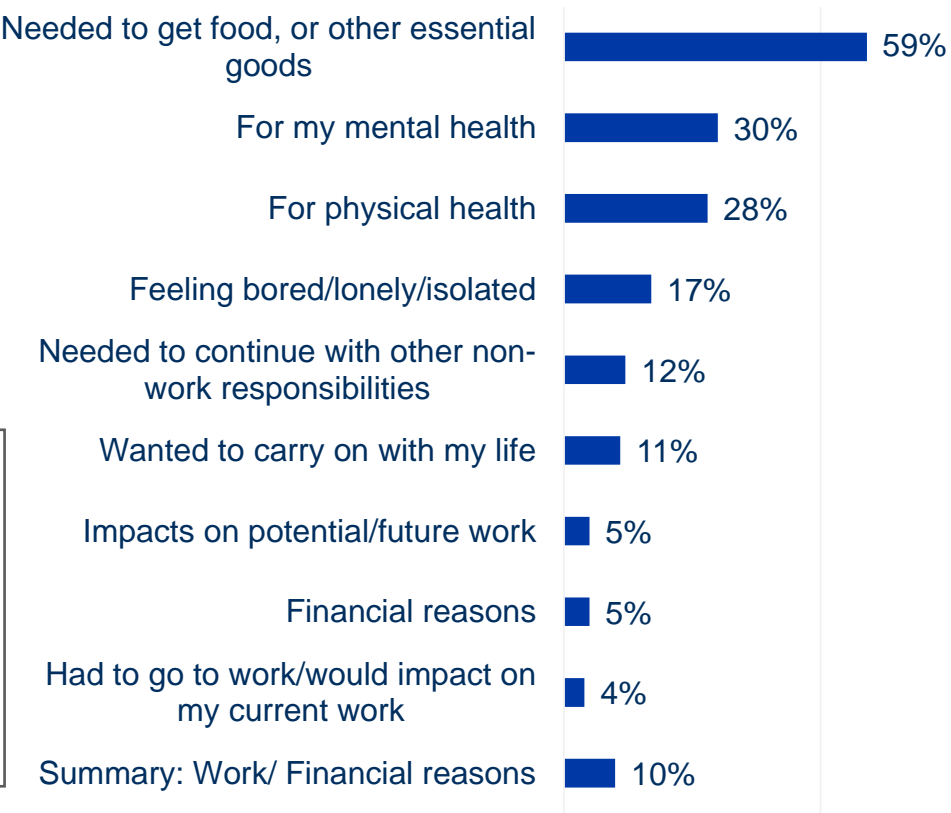
1 in 5 (21%) who needed to do so **did not fully comply with self-isolation**. For most (59%) this was to leave home to get food and other essential items. But 1 in 10 (10%) broke their self-isolation for work or financial reasons.

Compliance with self-isolation...

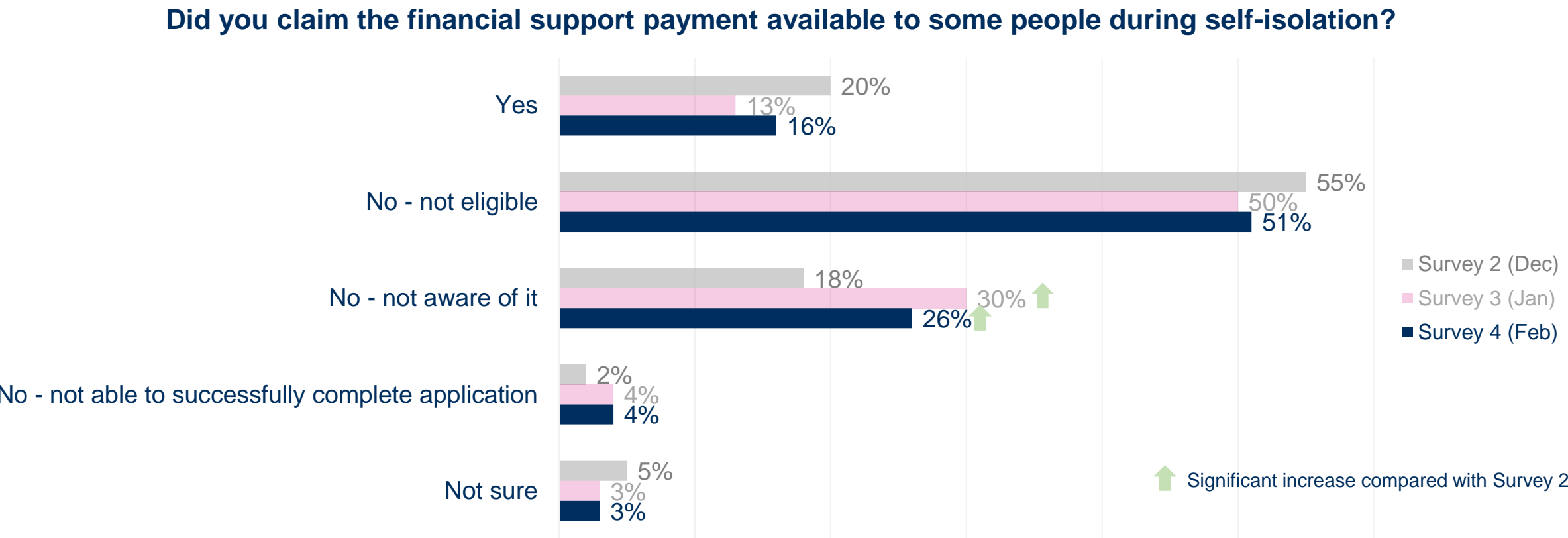


- Those who are significantly less likely to have fully complied with the self-isolation instructions (vs. 79% on average):
- Respondents in a bubble (75%)
 - Those with a disability (70%), in particular those who have mental health illness (65%)**
 - Those who have not had coronavirus or the vaccine (71%)
 - Carers (68%)**
 - Those who have served in the armed forces (63%)**

Reasons for non-compliance...



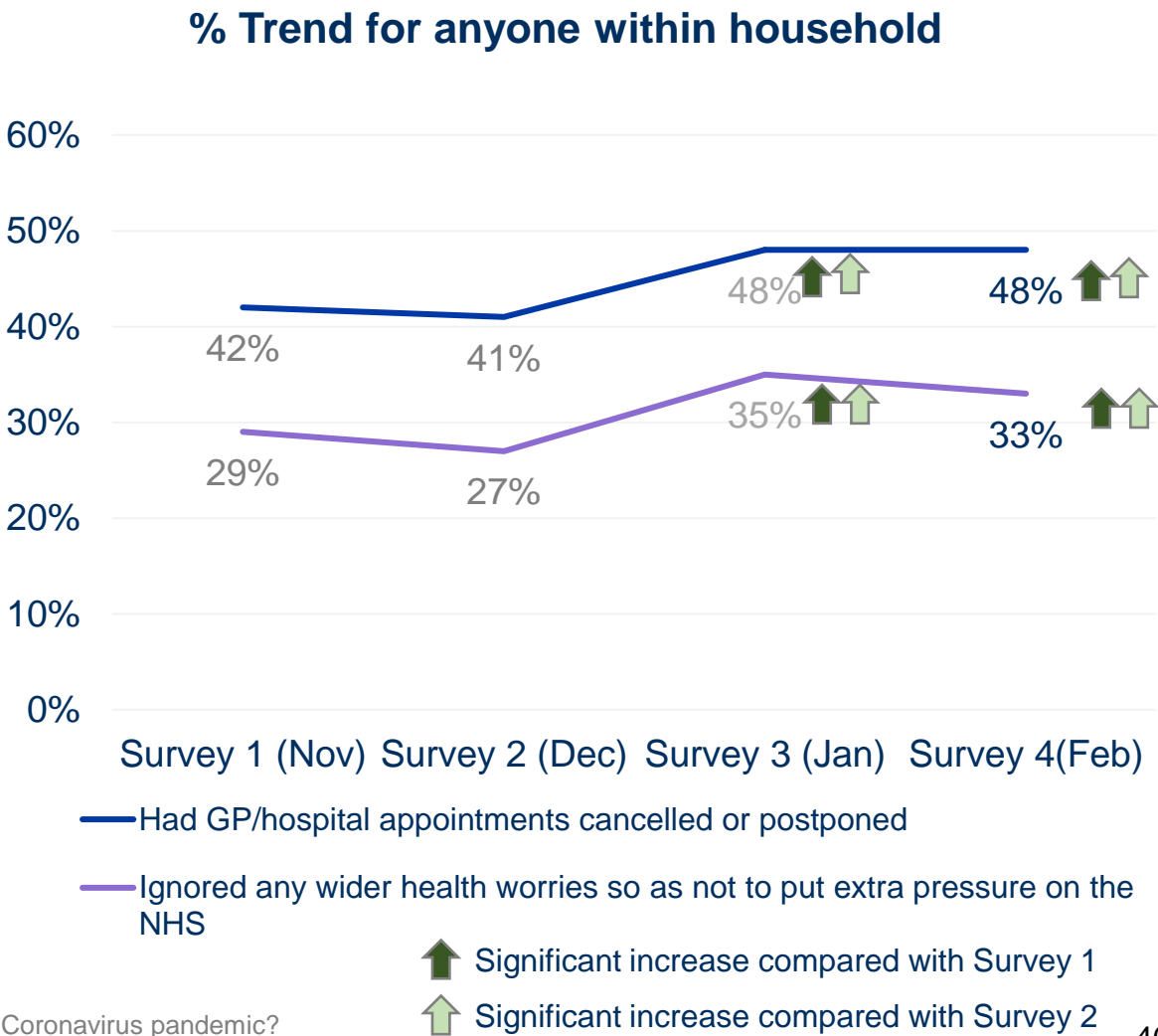
16% of respondents who have had to self-isolate have claimed the Test and Trace payment **financial support**. Half of respondents (51%) believe they were not eligible while 1 in 4 (26%) were not aware of the support.



Claims are significantly higher amongst those employed full-time (24%) when compared to the total population. There are no notable socio-economic demographics where claims are significantly lower.

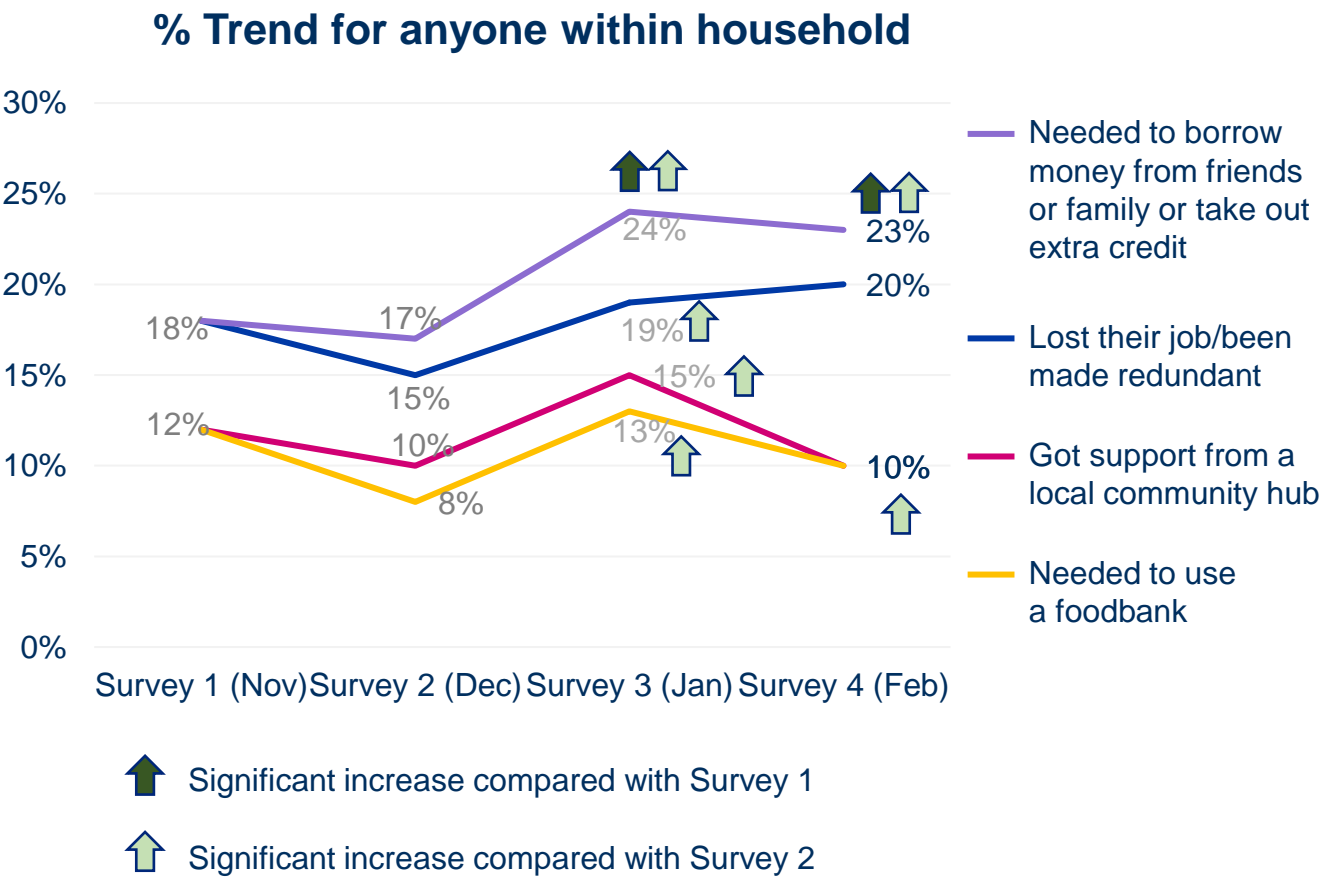
The proportion of respondents **ignoring health concerns** or having medical appointments cancelled has remained consistent with January's results, although still significantly above November and December.

Health impacts	Themselves	Someone else in household	Anyone in household
Had GP/hospital appointments cancelled or postponed	27%	27%	48%
Ignored any wider health worries so as not to put extra pressure on the NHS	21%	16%	33%

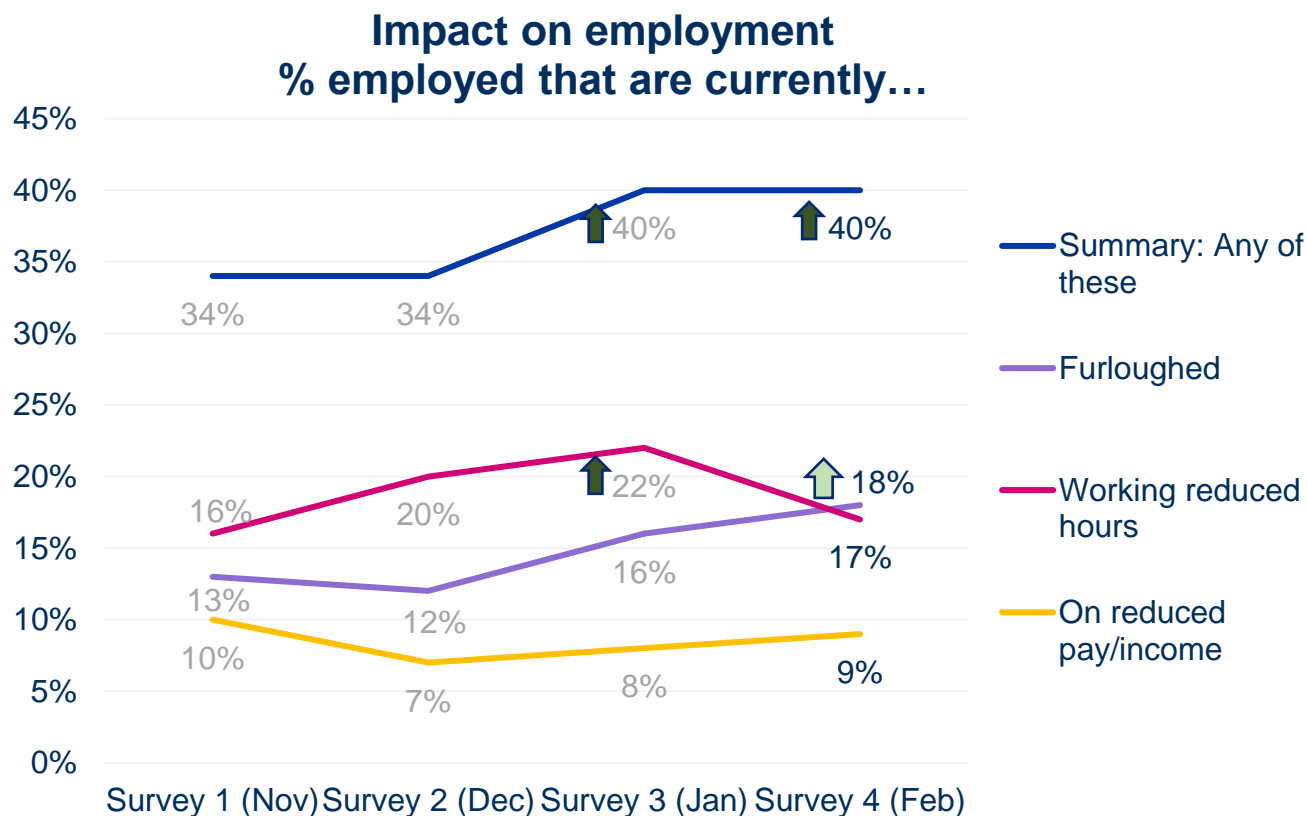


As with health impacts, **financial impacts** have remained consistent since January, but above the levels seen in November and December. But the numbers of those getting support from foodbanks and community hubs have fallen.

Financial impacts	Themselves	Someone else in household	Anyone in household
Needed to borrow money from friends or family or take out extra credit	17%	8%	23%
Lost their job/been made redundant	10%	10%	20%
Got support from a local community hub	6%	5%	10%
Needed to use a foodbank	7%	4%	10%



2 in 5 (40%) of those in employment are currently **furloughed, on reduced hours, or reduced pay**. As with other measures this is a significant increase since December, but consistent with January.

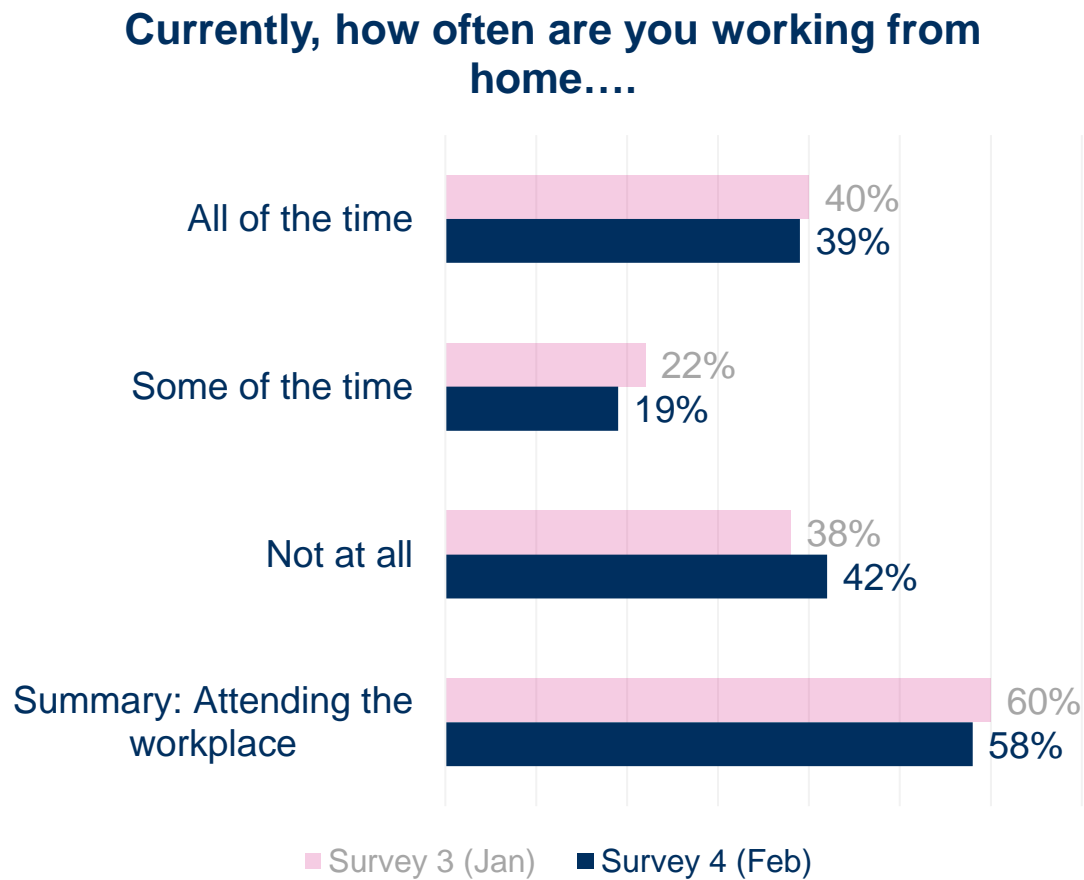


- Some of the groups significantly more likely to be affected by any of these (vs. 40% on average):
- Muslim respondents (79%)**
 - Those working in hospitality/arts/recreation (75%)**, and non-public sectors generally (43%)
 - Where have served in armed forces (75%)
 - Aged 16-24 (73%)
 - Respondents whose first language isn't English (68%)
 - Respondents with a disability (59%), in particular those with mental ill health (68%)
 - Part-time workers (58%)
 - Carers (58%)
 - Had coronavirus, whether confirmed by test (57%) or not (56%)
 - Respondents from racially diverse backgrounds (53%), particularly Asian respondents (57%)**
 - Those living in the most deprived areas (46%)

↑ Significant increase compared with Survey 1

↑ Significant increase compared with Survey 2

Despite people being advised to work from home during the national lockdown unless they cannot reasonably do so, almost 3 in 5 (58%) of people in work are **still going into their workplace** at least some of the time.



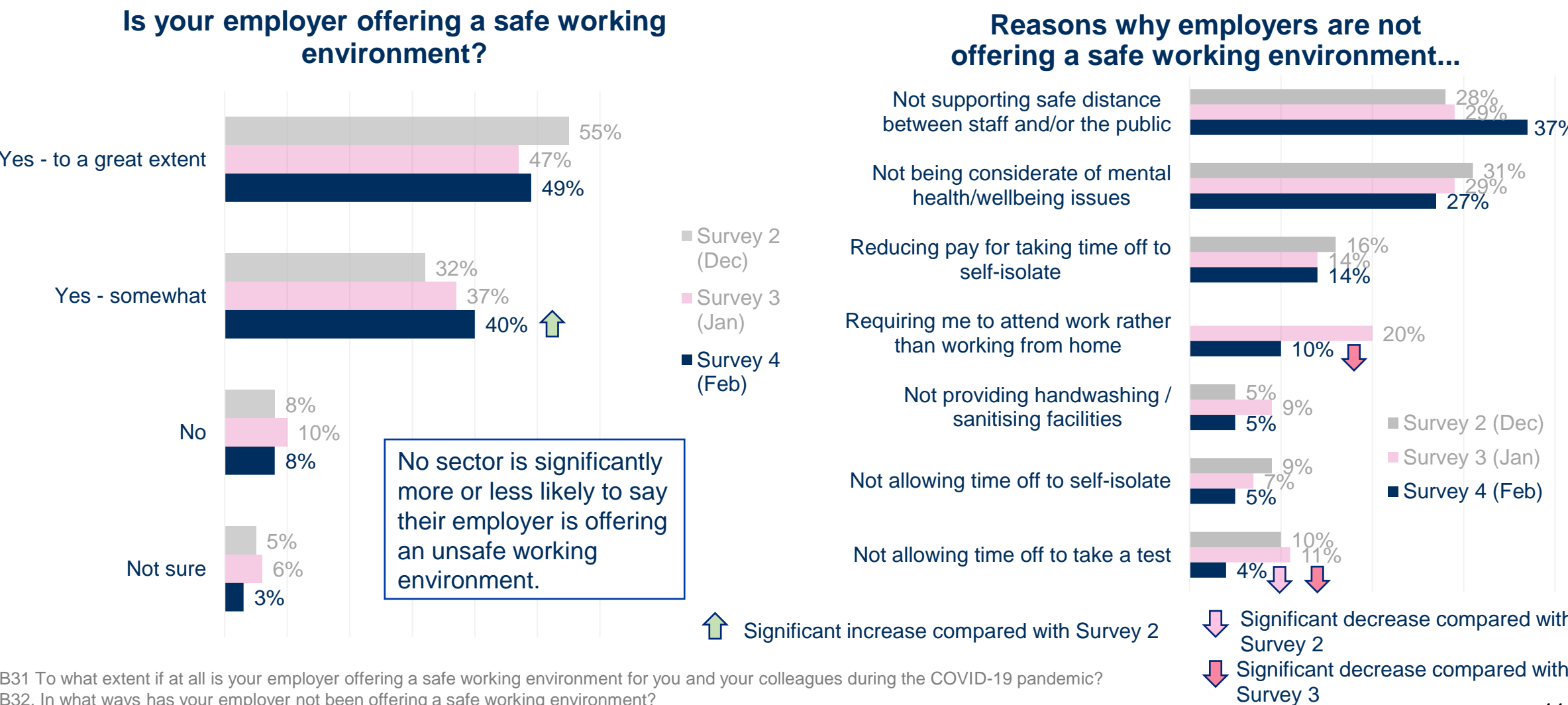
Significantly more likely to be attending their workplace:

- Those working in
 - Wholesale/retail/distribution/personal services (64%)
 - Hospitality/arts/recreation (inc. those working in the food service industry) (62%)
 - Health & Social work (55%)
- Those living in Wigan (59%)
- Educated to below degree level (57%)
- Part-time employees (51%)

3 in 4 (77%) of those working from home are doing so at least partly due to coronavirus.

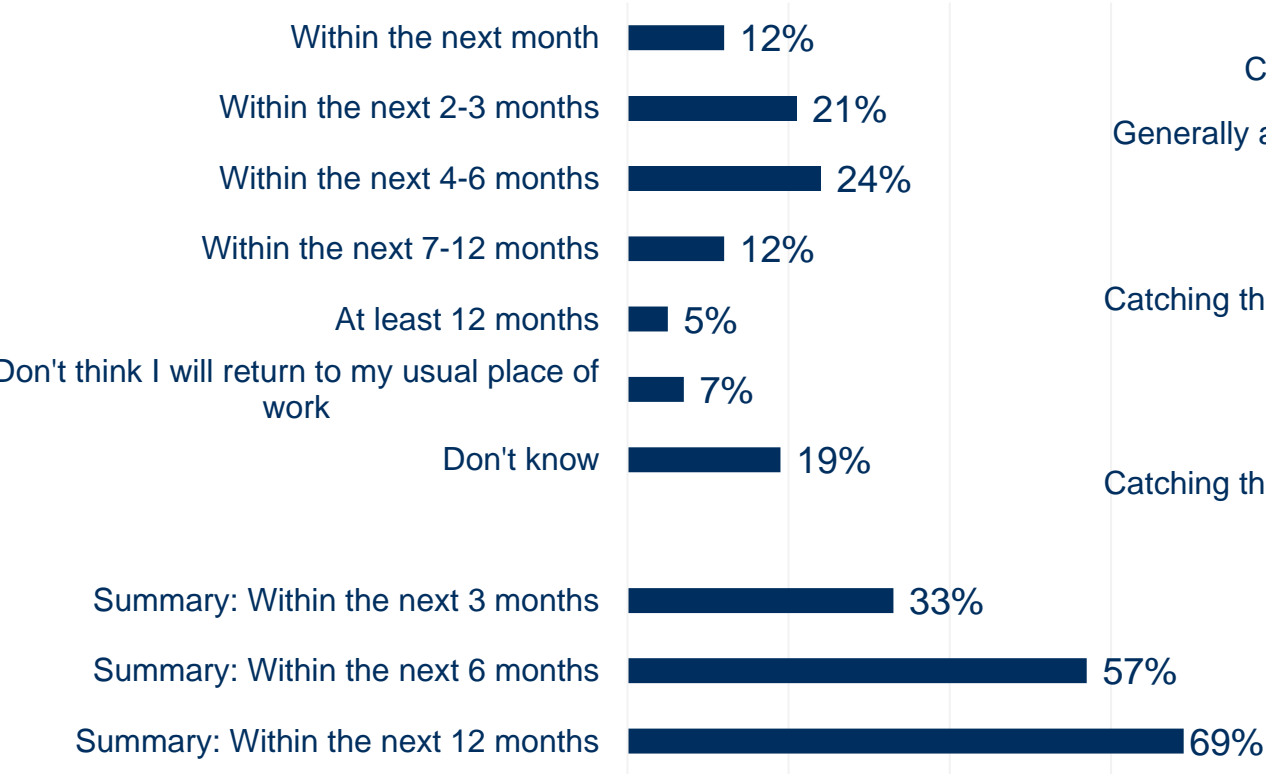
B14. Are you currently working from home...?
B37. You mentioned that you are currently working from home at least some of the time. Is this because of the COVID-19 pandemic, or is that your usual arrangement?
Unweighted base: 565 (Those who are in employment), 314 (Where working from home)

Half (49%) of respondents still attending their workplace consider their employer to be offering a **safe working environment to a great extent**. Where there are concerns it is related to safe distancing (37%) and wellbeing considerations (27%).

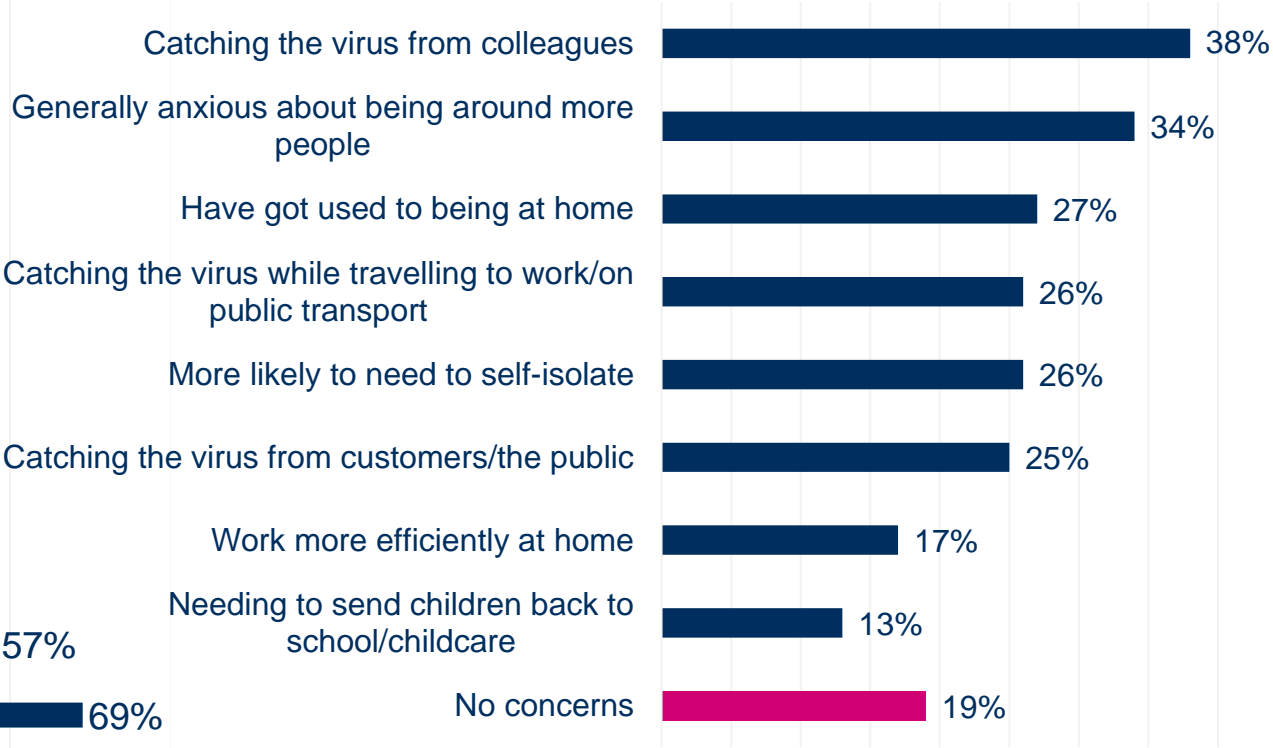


1 in 3 (33%) respondents currently working from home expect to **return to their usual workplace** within the next 3 months. A further 24% believe they will within 4-6 months. 4 in 5 (81%) have at least one concern about returning to the workplace.

Expectation of return to the workplace...



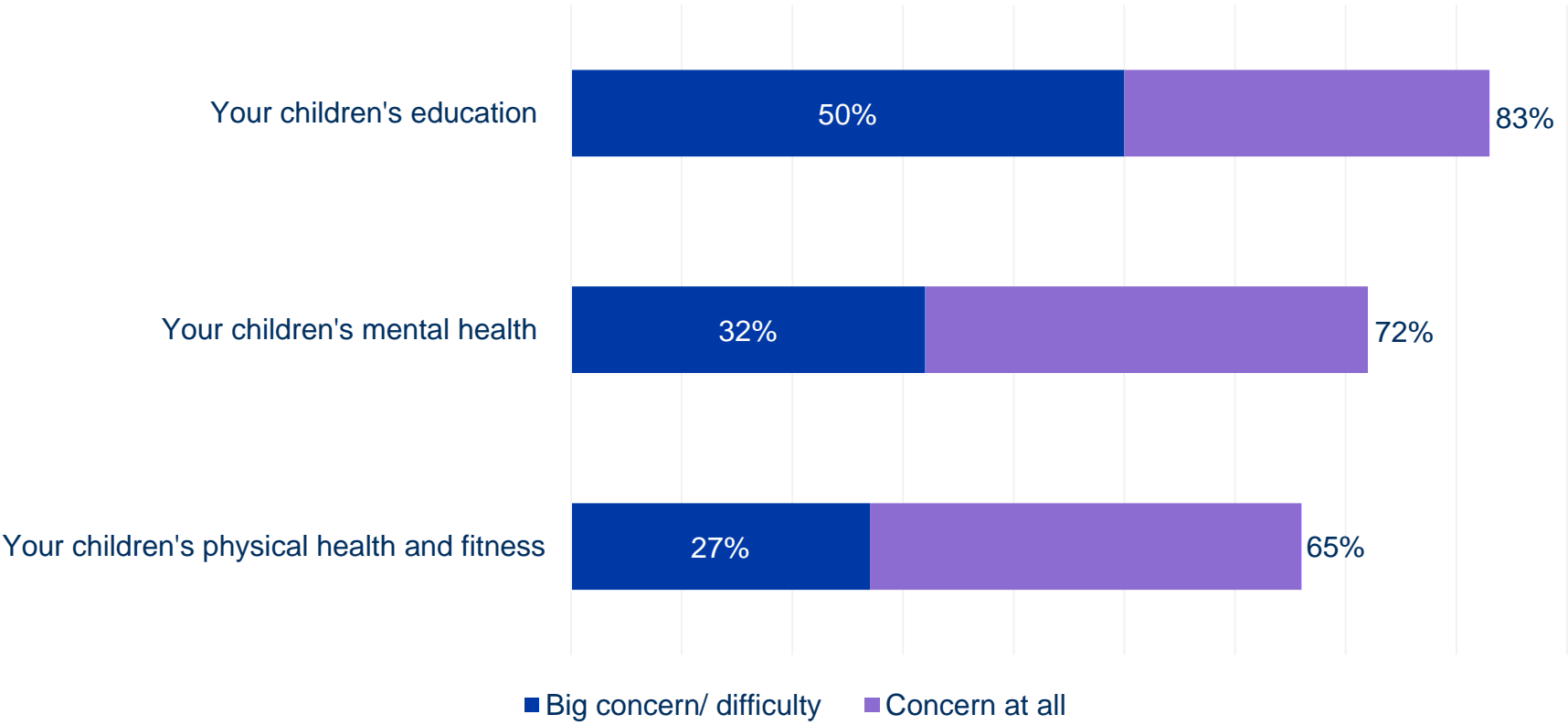
Concerns about returning to the workplace...



B38. When do you expect to return to your usual place of work i.e. your employer's premises, or to be working there as often as you usually would, before COVID?
B39. Do you have any concerns or anxieties about returning to your usual place of work, or going there more often than you do now?
Unweighted base: 244 (where working from home due to the pandemic)

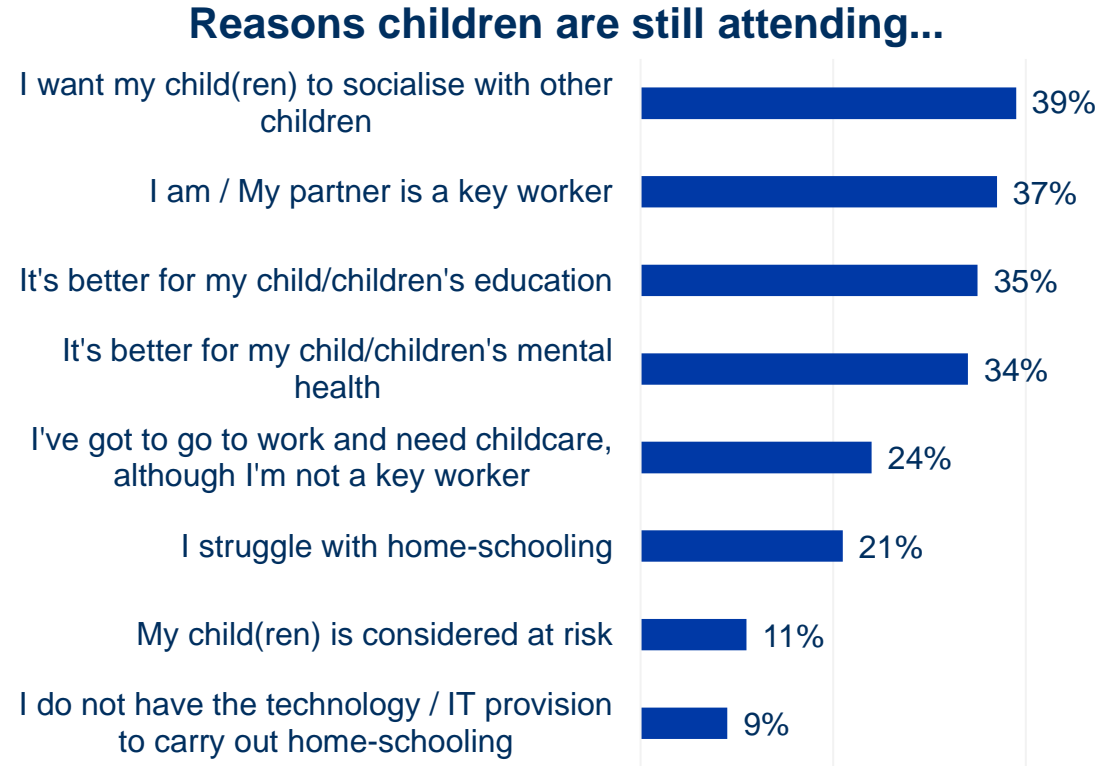
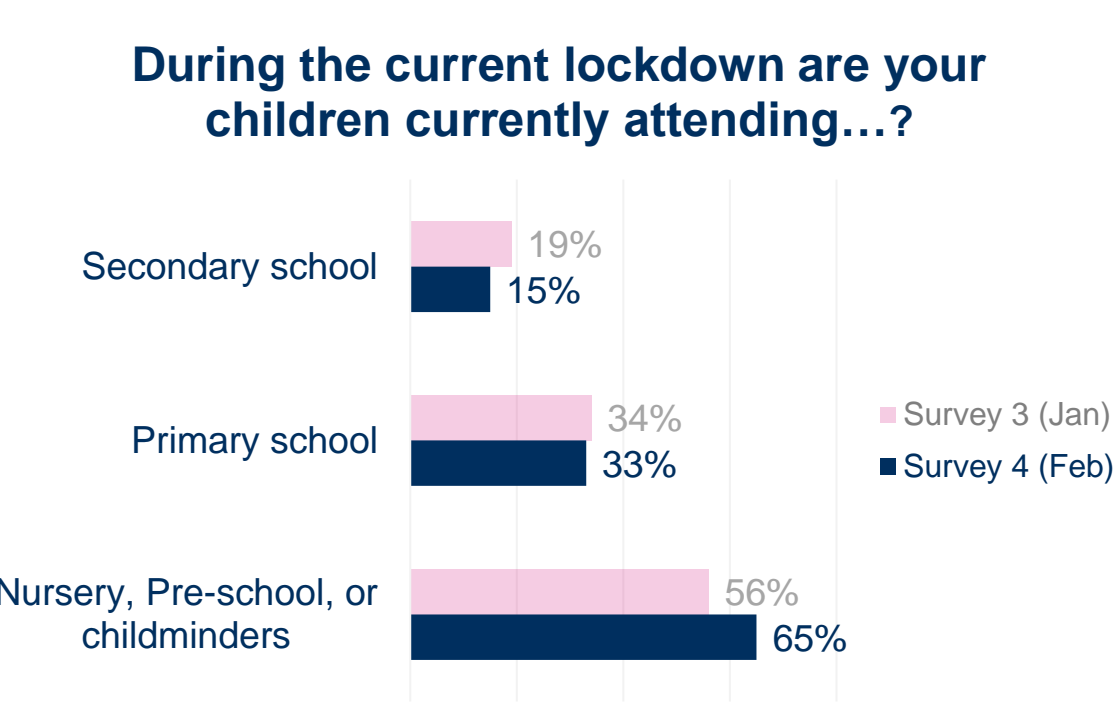
More than 8 in 10 (83%) respondents with children are **concerned about their children's** education. Half (50%) say this is a big concern or difficulty.

Have become a concern as a result of the pandemic (among those who have children)...



Survey 1 (Nov)	Survey 2 (Dec)	Survey 3 (Jan)	Survey 4 (Feb)
N/A	80%	85%	83%
N/A	67%	71%	72%
N/A	N/A	62%	65%

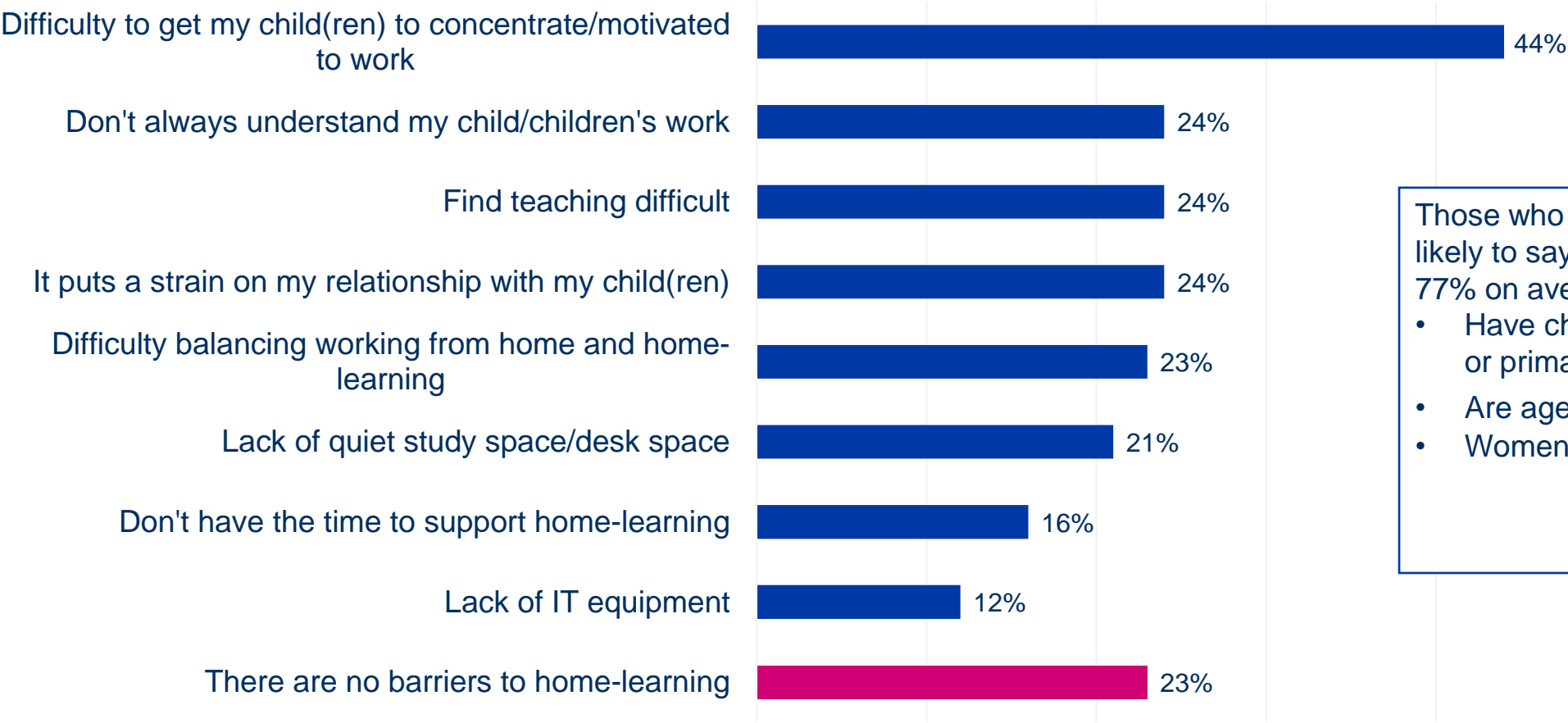
1 in 3 (33%) parents of primary and 1 in 7 (15%) of secondary pupils had children in school during lockdown. Over a third of those still **sending children to school or nursery** are key workers. But a quarter (24%) say they needed to send their children in so they could work, even though not key workers (up from 12% in January).



B11a. During the current lockdown, are your children currently attending?
B33. You mentioned that your child(ren) are still attending nursery, pre-school or a childminder / primary school / secondary school, why is this?
Unweighted base: 249 (where children are in school or early years provision); 83 (Those who have children in school or early years provision)

3 in 4 (77%) of those whose children were out of school experienced **barriers to home-learning**. Those with younger children were more likely to face challenges.

Difficulties home-learning



Those who are significantly more likely to say they face barriers (vs. 77% on average):

- Have children of under 5 (91%)** or primary school age (83%)
- Are aged 25-44 (88%)
- Women (86%; 64% men)

B34. Do you have any difficulties with home-learning?
Unweighted base: 185 (Those who have children in school or early years provision but are not attending)

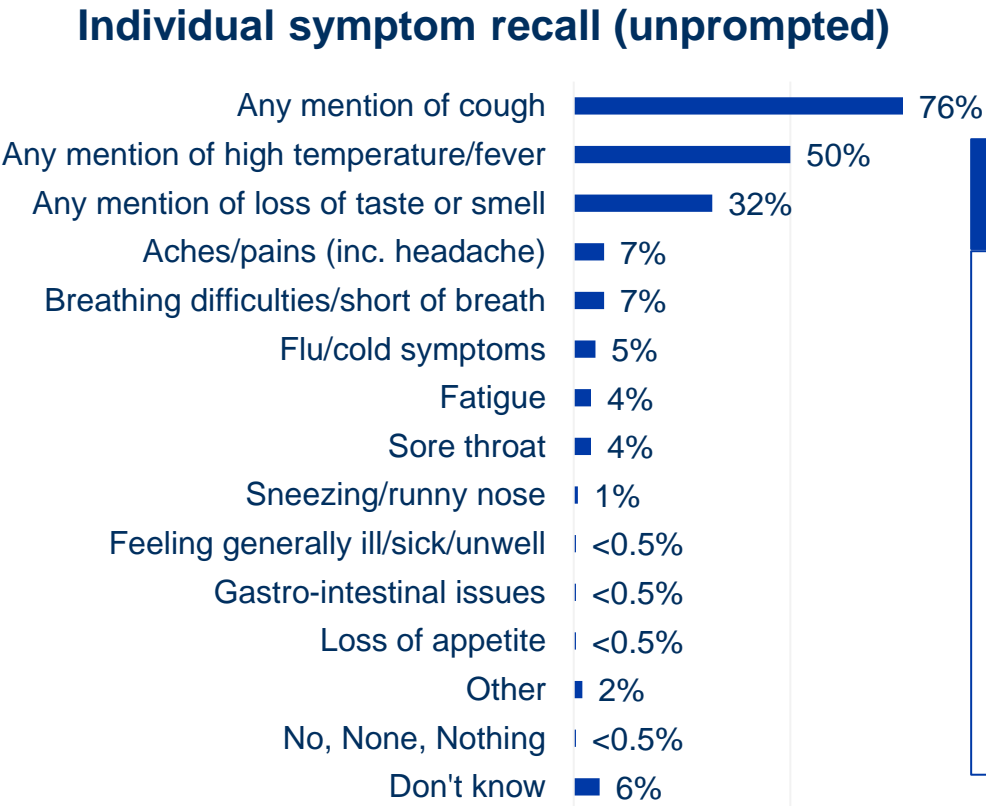
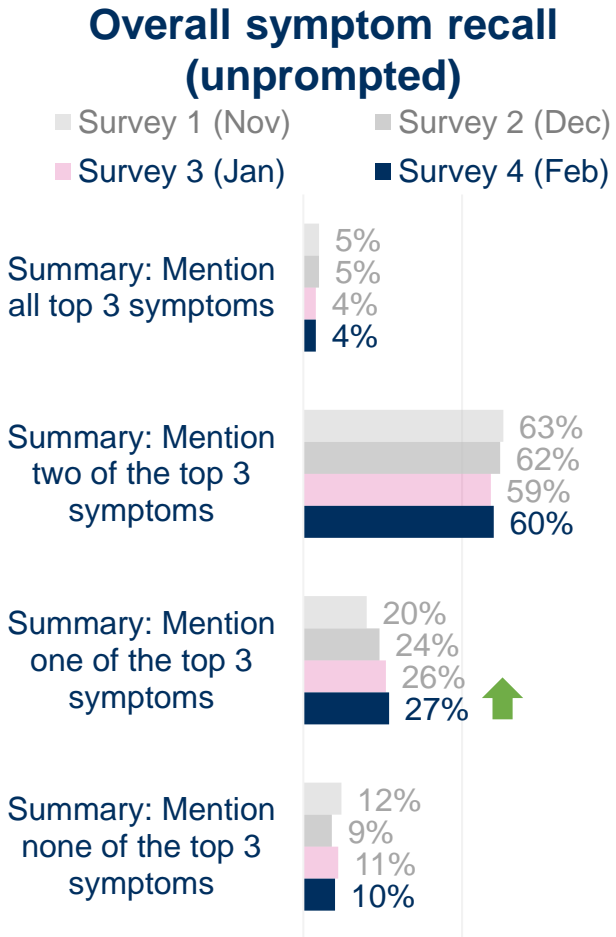
**Low base under 50



Knowledge and understanding

Coronavirus symptoms [page 50](#)

While 9 in 10 (90%) respondents could name one of the main **coronavirus symptoms**, just 4% could name all three. Cough and fever are those most commonly known. A wide range of other symptoms were also given.



Significantly more likely to mention none of the top 3 (in survey 3) (vs. 10% on average):

- Respondents with no qualifications (25%)
- Bisexual respondents (21%)**
- Have served in the armed forces (18%)
- Work in Wholesale / retail / distribution / personal services (15%) and non-public sectors more generally (12%)
- Living in the most deprived communities (12%)
- Males (12%)
- Christian respondents (12%)
- Employed full time (12%)

↑ Significant increase compared with Survey 1

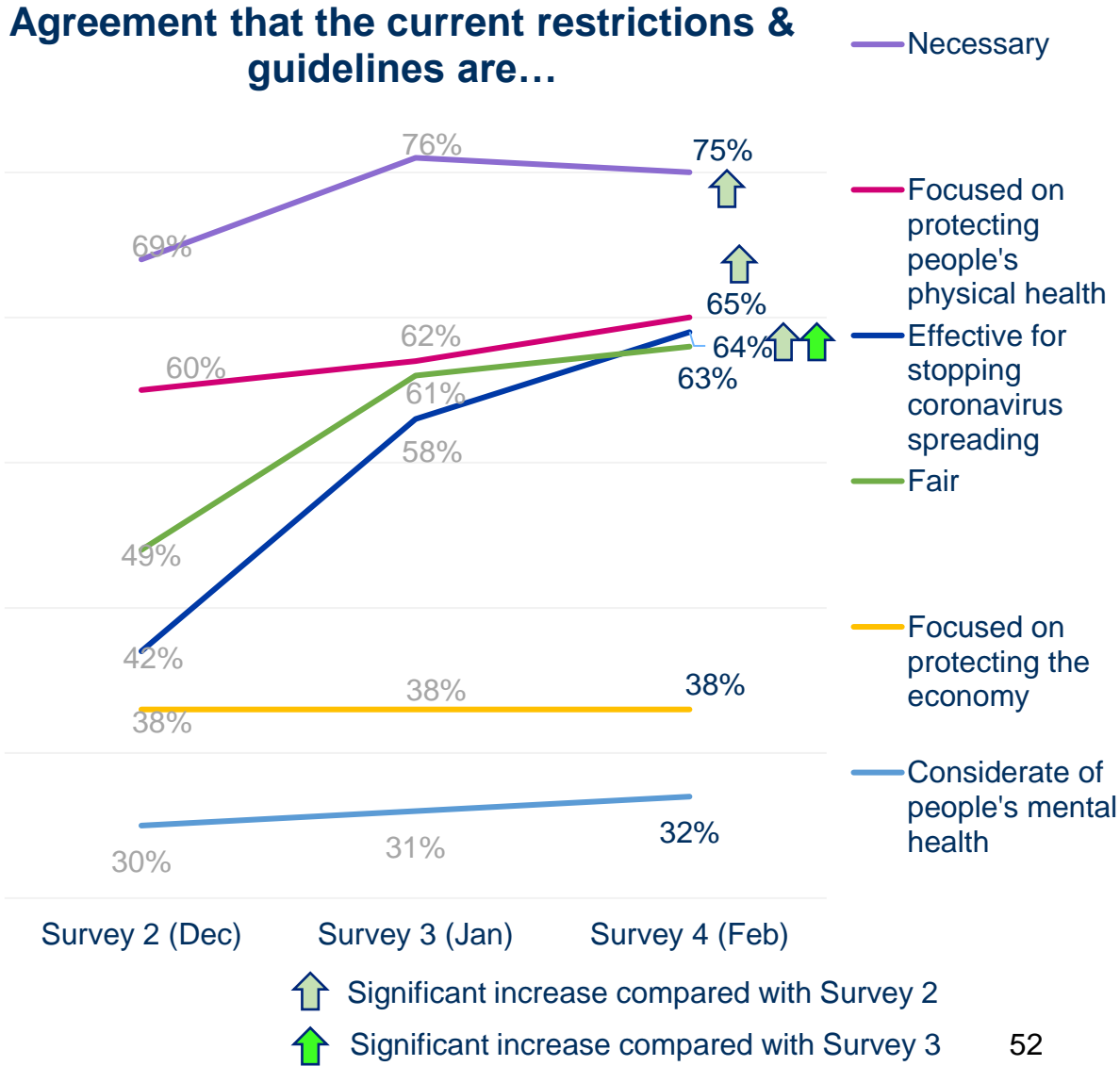
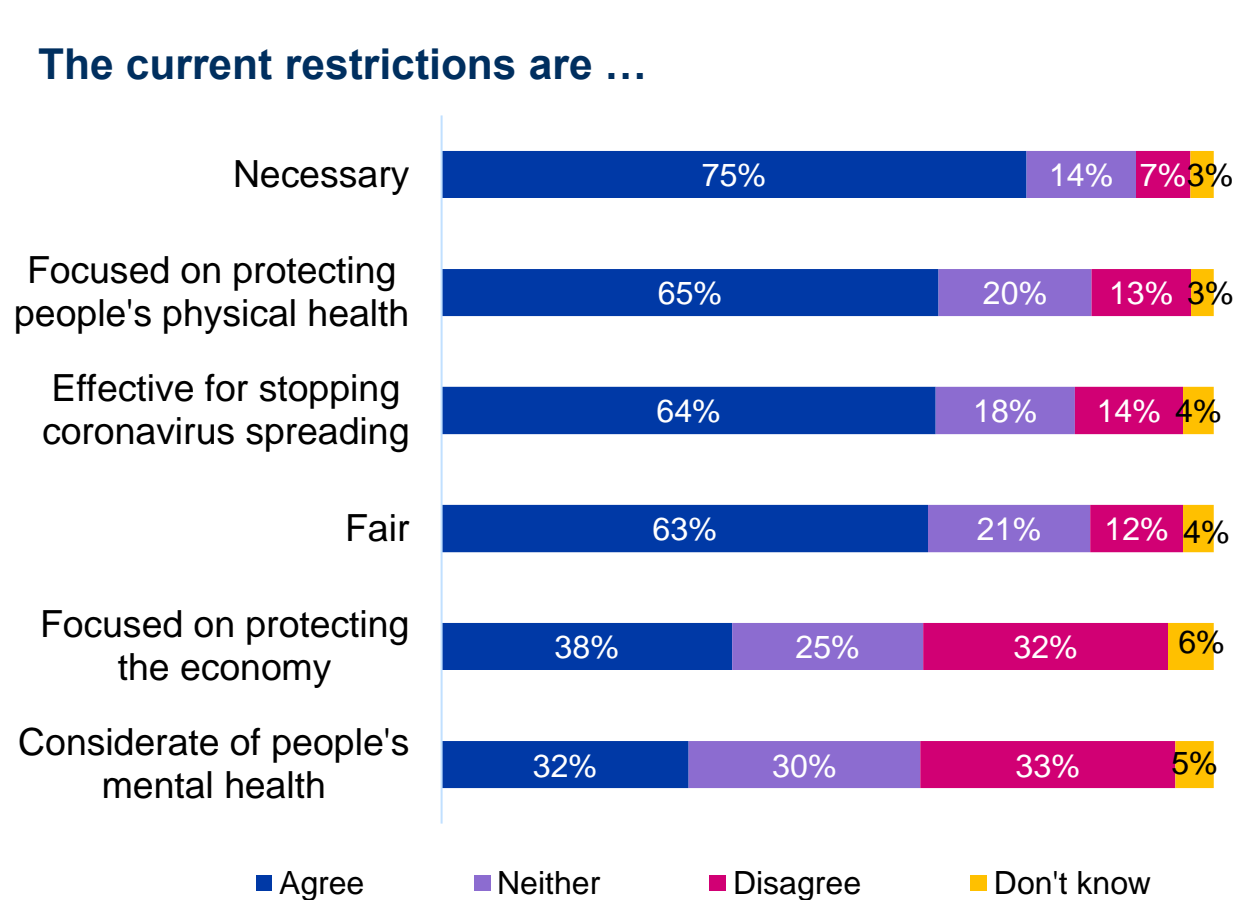


Attitudes and behaviours

Attitudes to restrictions [page 52](#)
Compliance with guidance [pages 53-56](#)
Bubbles [page 57](#)
Support for Test and Trace [page 58](#)
Vaccines [pages 59-61](#)

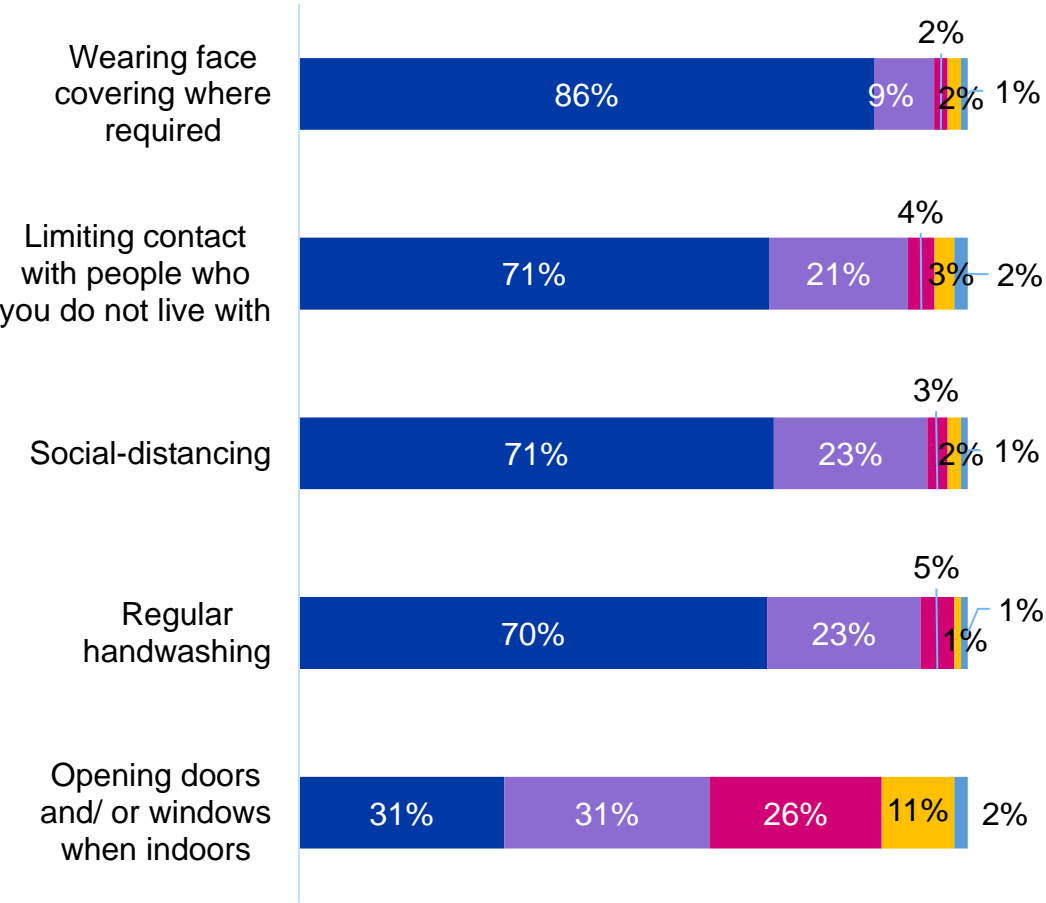
Asymptomatic testing [pages 62, 63](#)
Future travel [page 64](#)

The national lockdown has seen increased proportions of respondents agreeing the **restrictions are effective, fair and necessary**. But still only 1 in 3 (32%) feel they are considerate of people’s mental health.



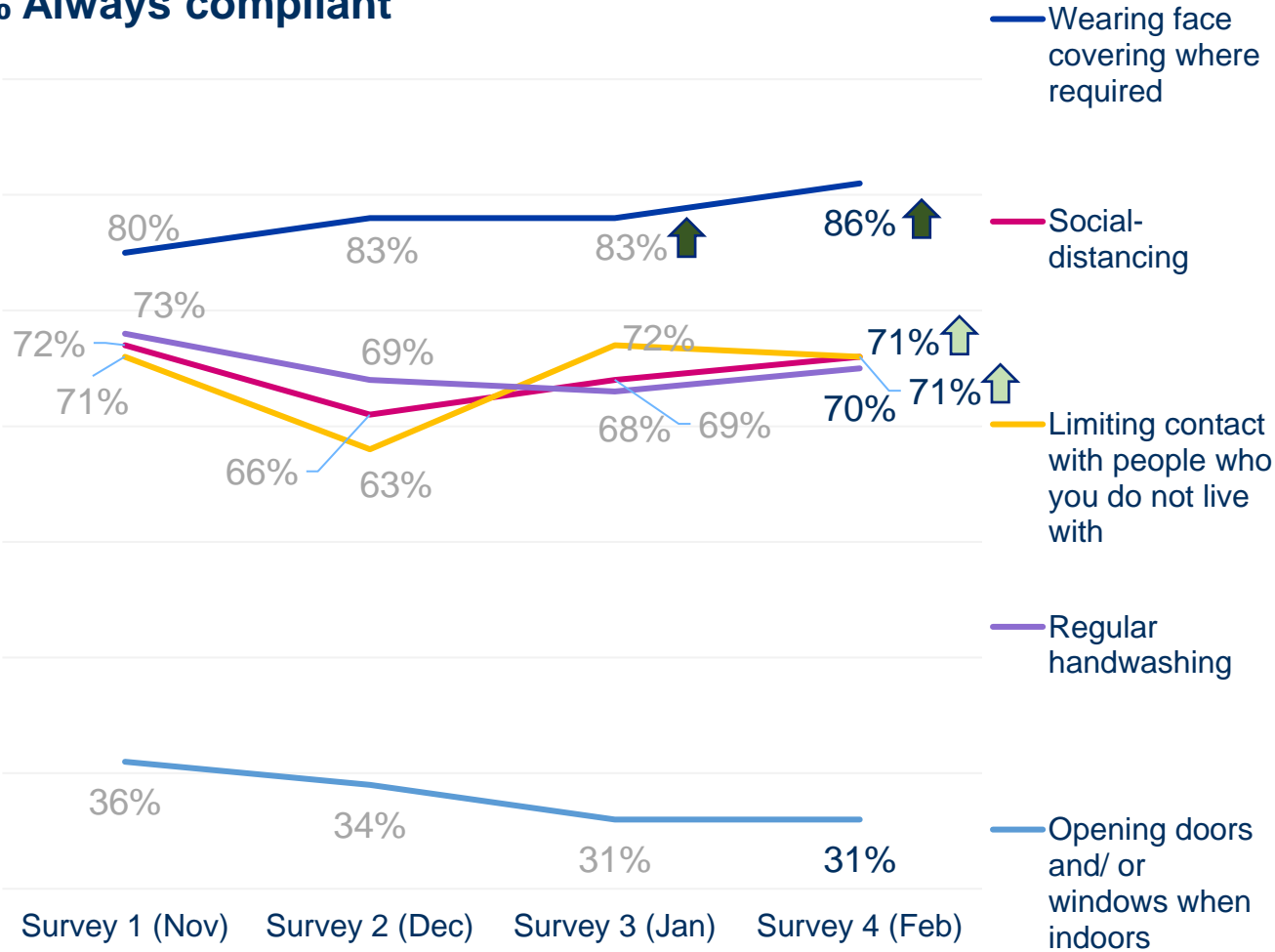
Similar numbers of respondents to January – around 1 in 4 (23%) – say they are always **compliant with the key guidance** for stopping the virus. Those who have had the vaccine or coronavirus are no less likely to do these actions than the overall population.

Compliance with ...



■ All of the time ■ Most of the time ■ Not very often ■ Not at all ■ Not sure

% Always compliant



▲ Significant increase compared with Survey 1

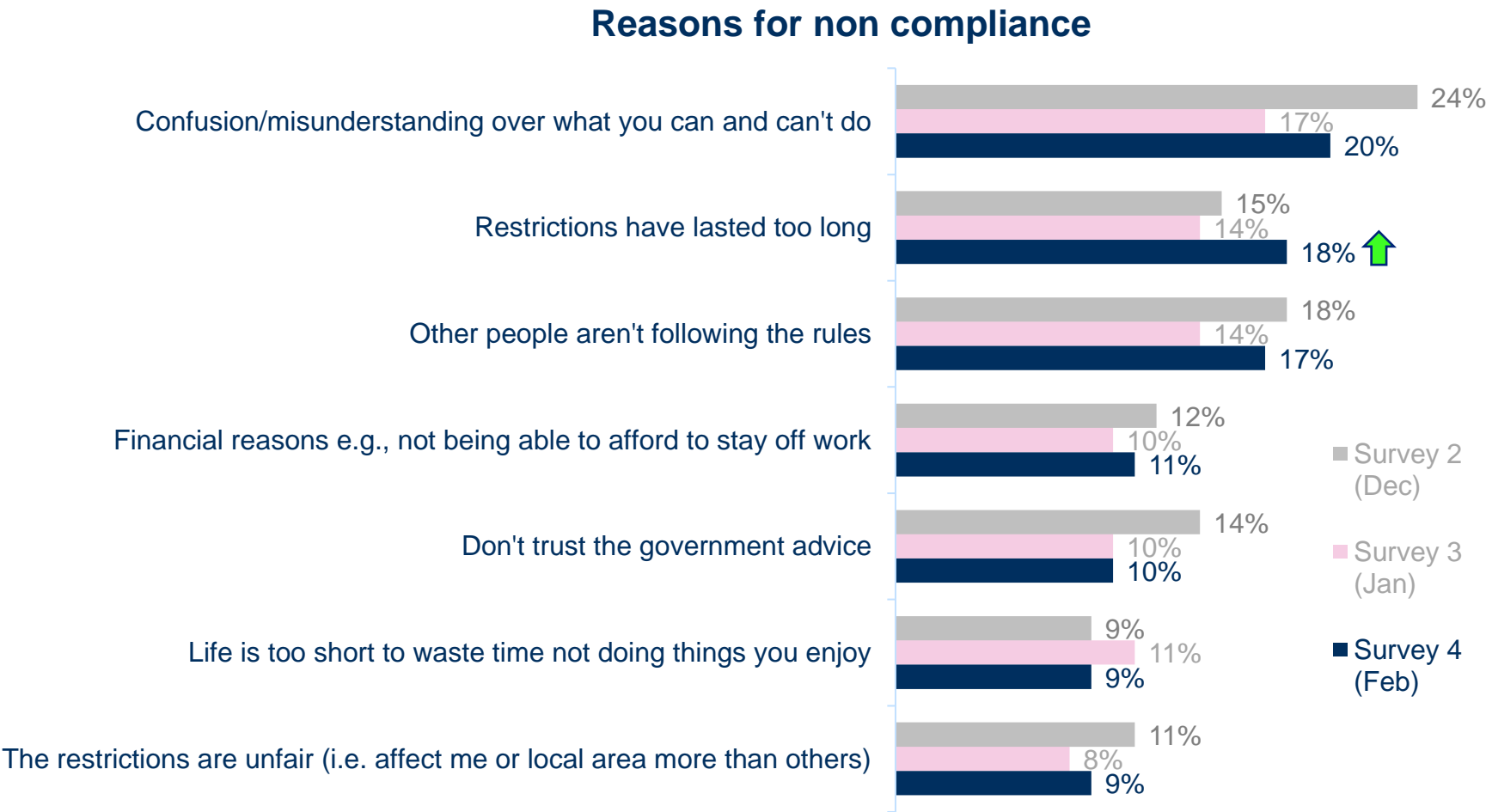
▲ Significant increase compared with Survey 2

D4. Are you complying with or following each of the current restrictions and guidelines?
Unweighted base: All respondents: Survey 1: 1015; Survey 2: 1007; Survey 3: 1010; Survey 4: 1003

An increased proportion of those **not always complying with the restrictions and guidelines** say it is because these restrictions have lasted too long. Financial and work reasons remain a factor for around 1 in 10 (11%) people not always complying.

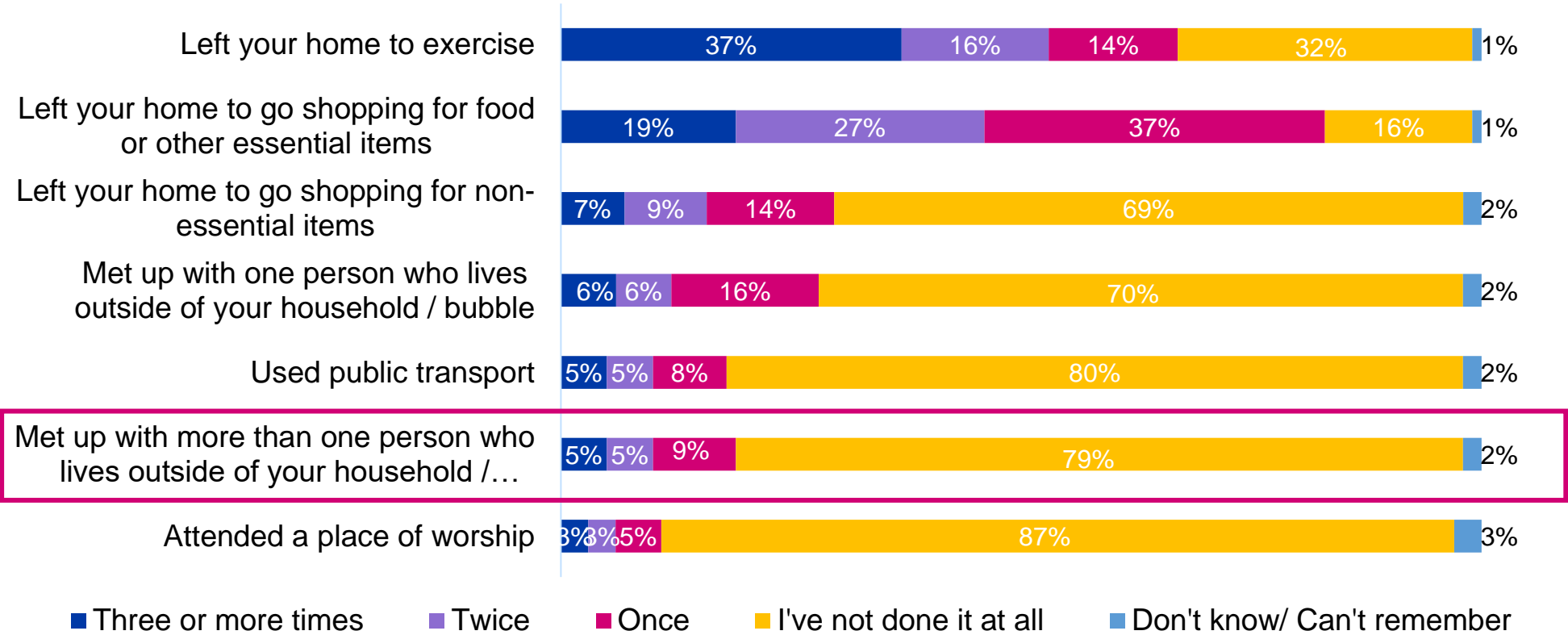
- Those who are significantly more likely to not be compliant all of the time (vs. 77% on average):
- Those working in manufacturing (93%)**
 - Those who partially complied with self-isolation (87%)
 - Think they've had coronavirus but not had it confirmed by a test (86%) or not sure if they've had coronavirus (81%)
 - Respondents who say they are not very likely/not sure about receiving the vaccination (86%) or taking an asymptomatic test (84%)
 - Educated to degree level or above (83%)
 - Single adult households (82%)
 - Those who plan to travel in the next year (81%)
 - Respondents who do not have children (79%)
 - Those who speak English as a first language (78%)

D4. Are you complying with or following each of the current restrictions and guidelines?
D6. Why might you not always fully comply or follow the coronavirus restrictions and guidelines?
Unweighted base: 1003 (All respondents); 770 (Those who do not comply with restrictions all the times) **Base below 50



Over 9 in 10 (93%) respondents **left their home** in the past 7 days, consistent with the first month of national lockdown. 1 in 5 (19%) met up with more than one person from outside their household or bubble at least once, against lockdown restrictions.

Reasons for leaving home in the last 7 days

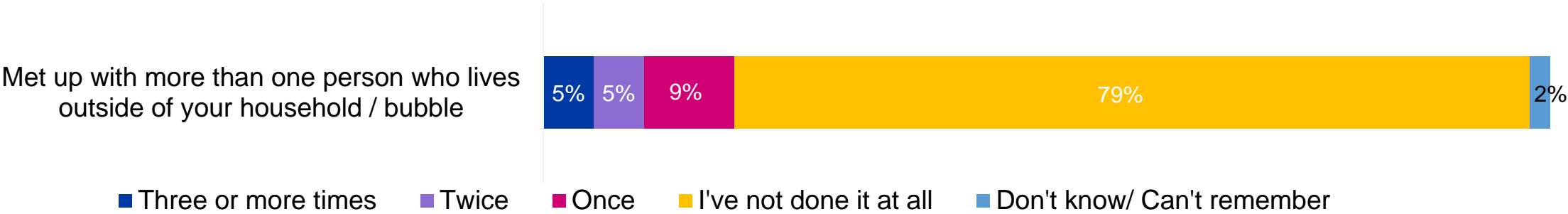


Those who have received the vaccine or had coronavirus are significantly more likely to have left home to:

- Exercise (73%)
- Use public transport (21%)
- Attend a place of worship (15%)

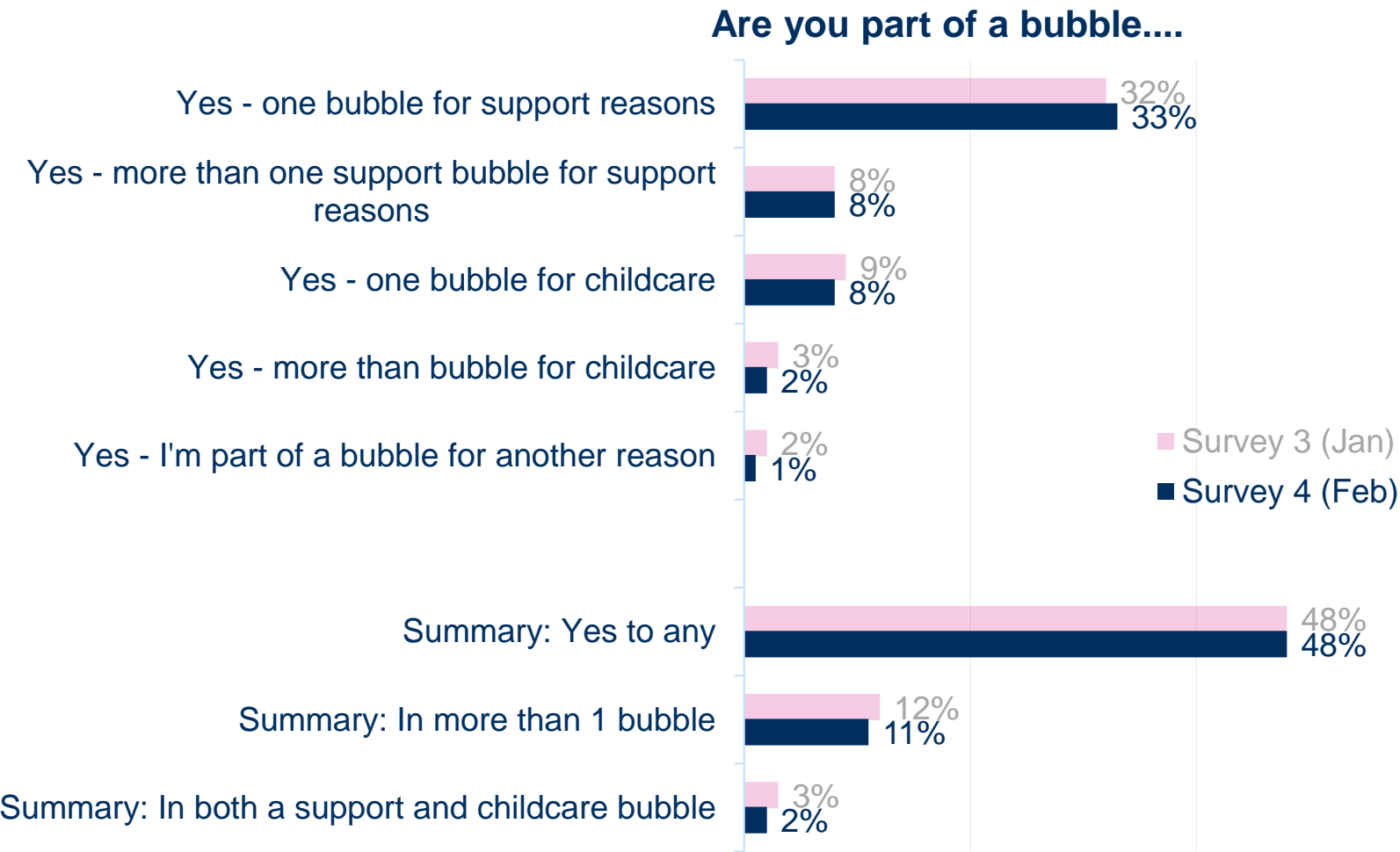
They are no more or less likely to have left home for other reasons, including meeting up with others.

Respondents **most likely to have bent the rules** around meeting other people during lockdown are those who also said they did not fully self-isolate when required to so or are unlikely to receive the vaccine or take a test without having symptoms.



- Those who are significantly more likely to have met up with more than one person from outside their household or bubble (vs. 19% on average):
- Those who only partially complied with self-isolation (49%)
 - Those unlikely to receive the vaccine (46%) or unlikely to take an asymptomatic test (35%)
 - Think they've had coronavirus but not had it confirmed by a test (34%)
 - Carers (31%)
 - Where they personally are at high risk of coronavirus (30%)
 - Respondents living in Rochdale (27%)
 - Aged 25-44 (25%)
 - Parents (24%), and particularly those with children under 5 years (30%) and at primary school (31%)
 - Full-time employees (24%), and particularly those working in the hospitality/arts/recreation sector** (33%) and those who have served in the armed forces (47%)
 - Educated to degree level or above (23%)

Almost half (48%) of respondents are **in a bubble** for childcare and/or support. Although only 2% say they have both kinds of bubble, as permitted, 11% say they are in more than one bubble.



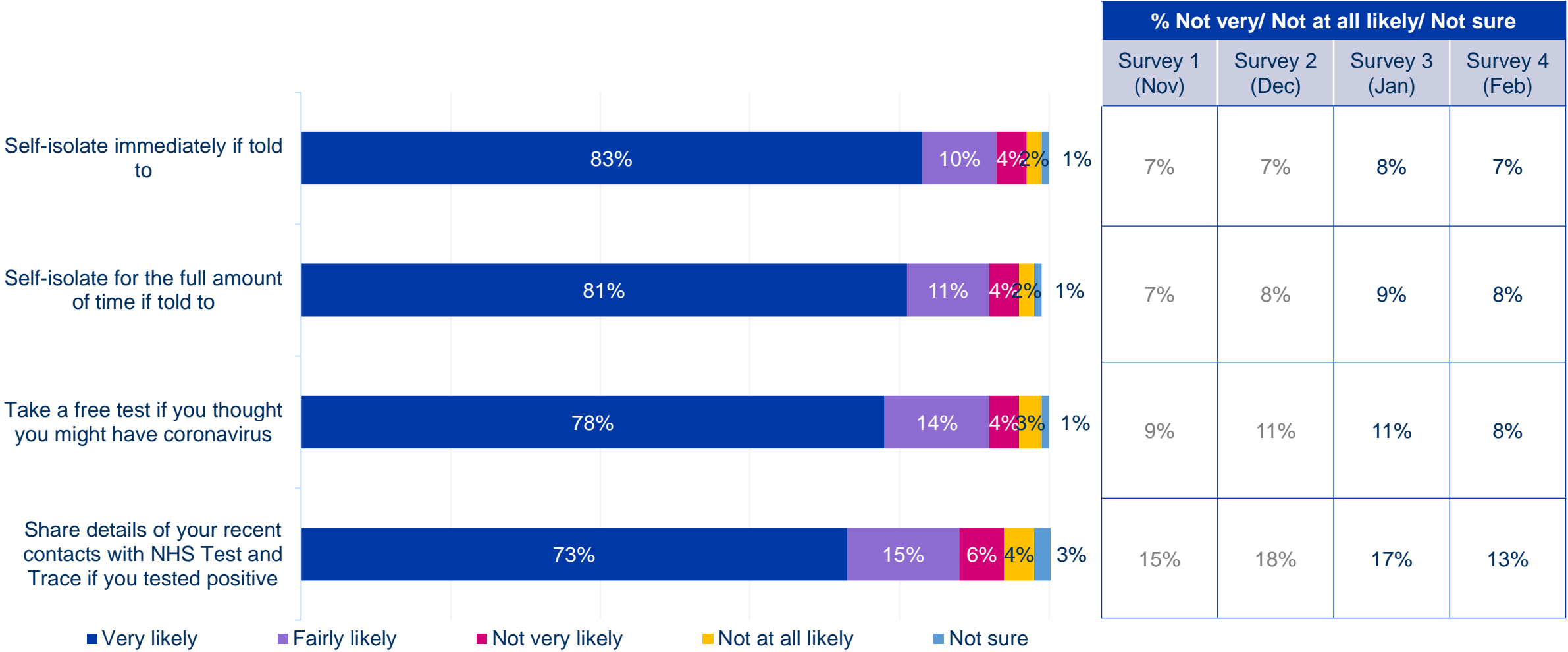
Those who are significantly more likely to be in more than one bubble (vs. 11% on average):

- Only partially self-isolated when needed (35%)
- Unlikely to receive vaccine (24%) or take an asymptomatic test (23%)
- Part-time employees (21%)
- Respondents with a disability (19%), in particular those with mental ill health (25%)
- Carers (19%)
- Think they've had coronavirus but not had test to confirm (18%)
- Aged 16-24 (17%) or 25-44 (14%)
- Where they personally are at high risk of coronavirus (17%)
- Females (14%; 7% of males)
- Parents (14%), in particular those with children under 5 years (23%) or of primary school age (20%)

Notably, many of these groups, who are significantly more likely to be in more than one bubble, are also significantly more likely to be meeting up with multiple people from outside their bubble or household.

B35. Are you part of a bubble with another household?
B36. How many other households are you in a bubble with?
Unweighted base: 1010, 491 (Those in a bubble)

Levels of likely compliance with elements of NHS Test and Trace remain broadly constant. 4 in 5 (81%) say they would comply with self-isolation instructions – matching the number which said they did so when required (79%).

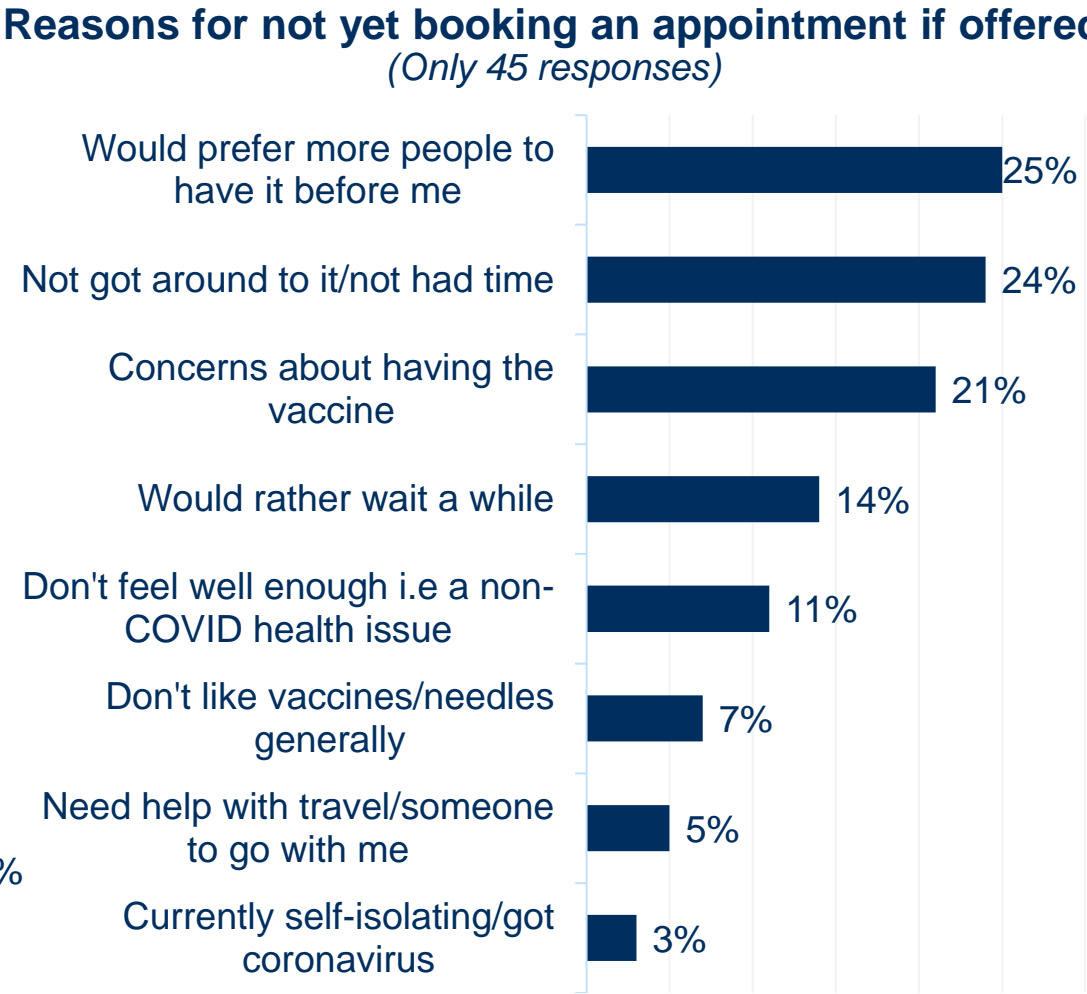
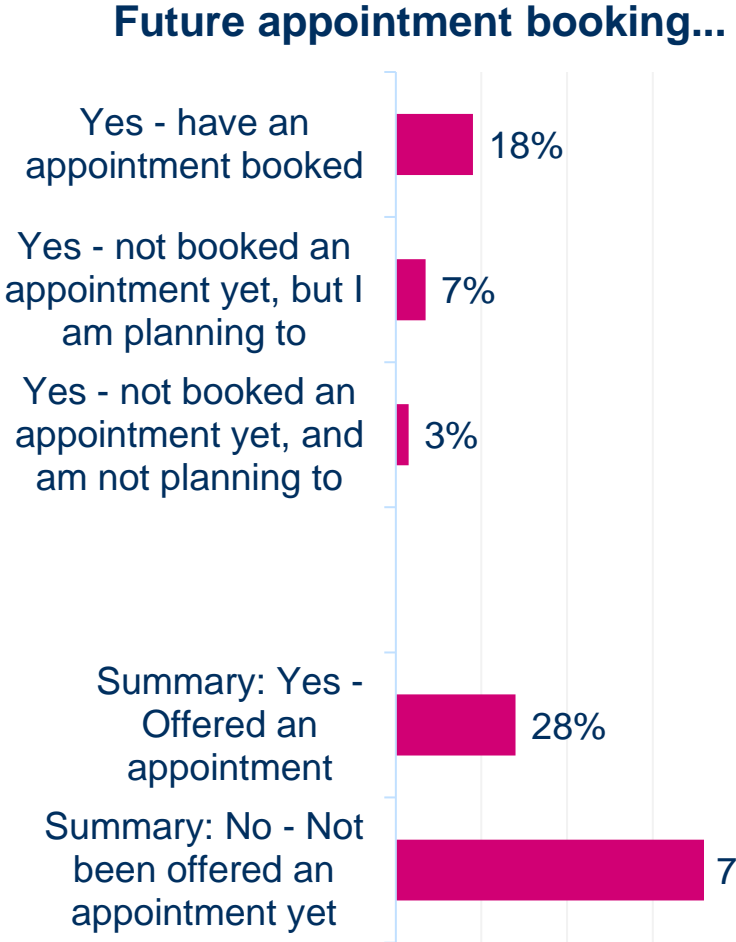


1 in 5 (19%) respondents have now received the vaccine at least once. A further 1 in 4 (23%) have been offered an appointment.

Of the 19% who have now received their vaccine, the vast majority have only received their first dose (95%).

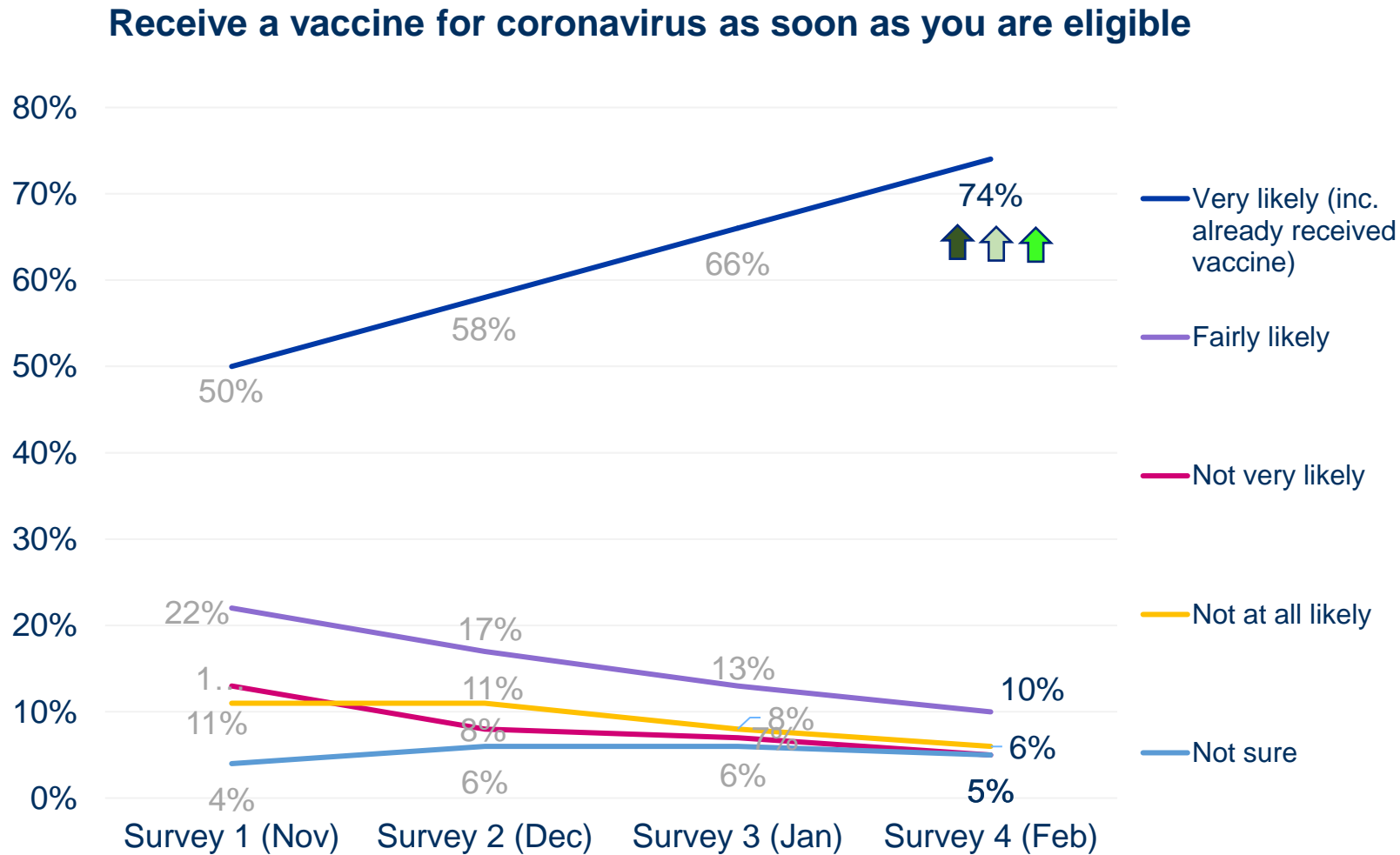
Overall, of all respondents this equates to:

- 18% have received their first dose
- 1% have received both doses
- 23% have been offered an appointment
- 58% have yet to receive their vaccine or an appointment



D17. Have you received both doses of your vaccine or just one?
D18. Have you been offered an appointment yet for a COVID vaccine?
D19. Why have you not booked an appointment yet?
Unweighted base: 226 (where received vaccine); 777 (Where not already received vaccine); 45 (where planning on booking their vaccine appointment)
At time of fieldwork, vaccines were available to the priority groups 1-4: : care home residents and staff; frontline health and social care; aged 70+; clinically extremely vulnerable.

The proportion of respondents who **would receive the vaccine**, or have already had it, has increased significantly when compared to all previous surveys.



More respondents from the following groups are not very/not at all/not sure about getting the vaccine (compared to 16% average among all respondents):

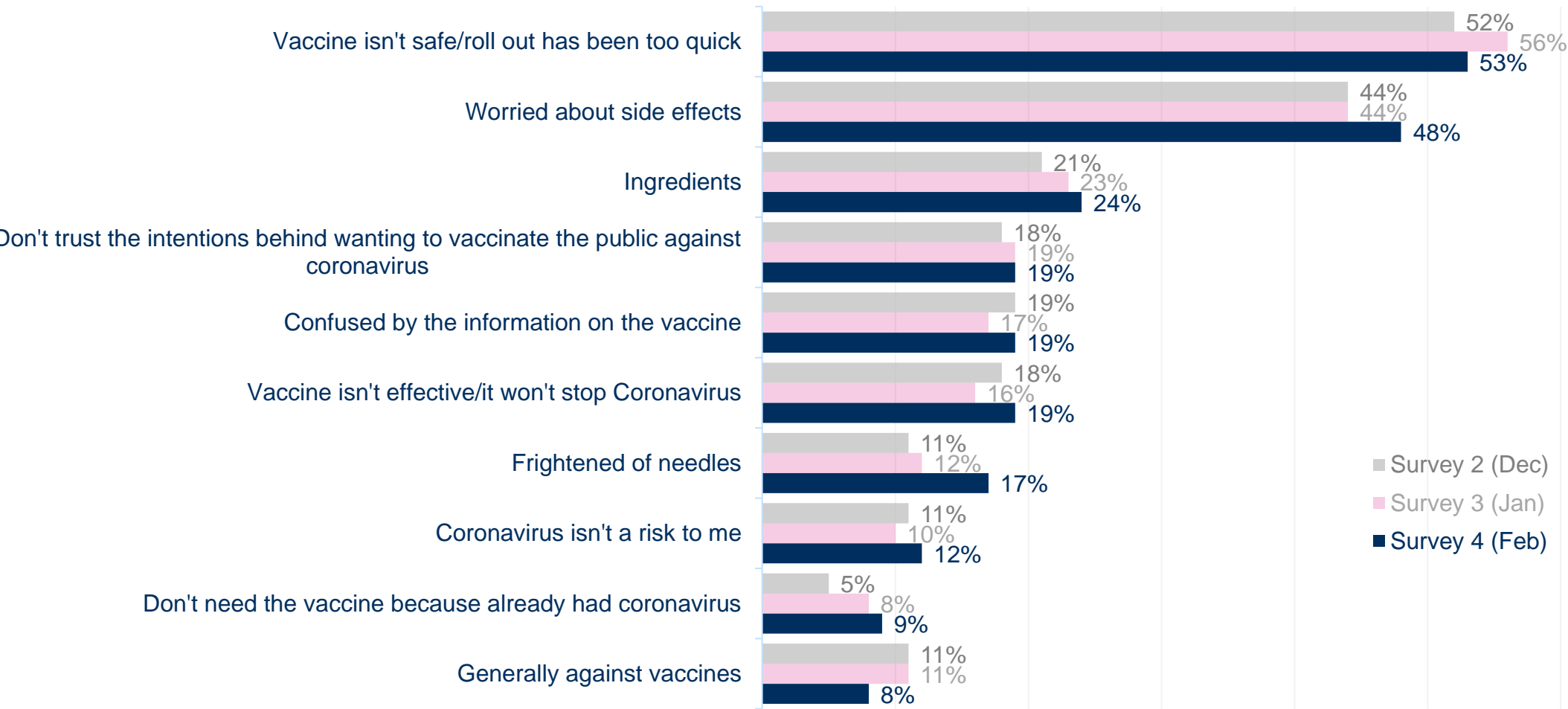
- Black respondents (41%)
- Aged 16-24 (35%) or 25-44 (23%)
- Those who have English as an additional language (33%)
- Parents of children under 5 years (30%)
- Muslim respondents (29%)
- Rochdale respondents (29%)
- Those who believe they've had coronavirus, although not had it confirmed by test (23%)
- Those living in most deprived areas (21%)
- Females (21%; 10% among males)

- ▲ Significant increase compared with Survey 1
- ▲ Significant increase compared with Survey 2
- ▲ Significant increase compared with Survey 3

D5. How likely would you be to do each of the following?
Unweighted base: All respondents: Survey 1: 1015; Survey 2: 1007; Survey 3: 1010; Survey 4: 1003
At time of fieldwork, vaccines were available to the priority groups 1-4 : care home residents and staff; frontline health and social care; aged 70+; clinically extremely vulnerable

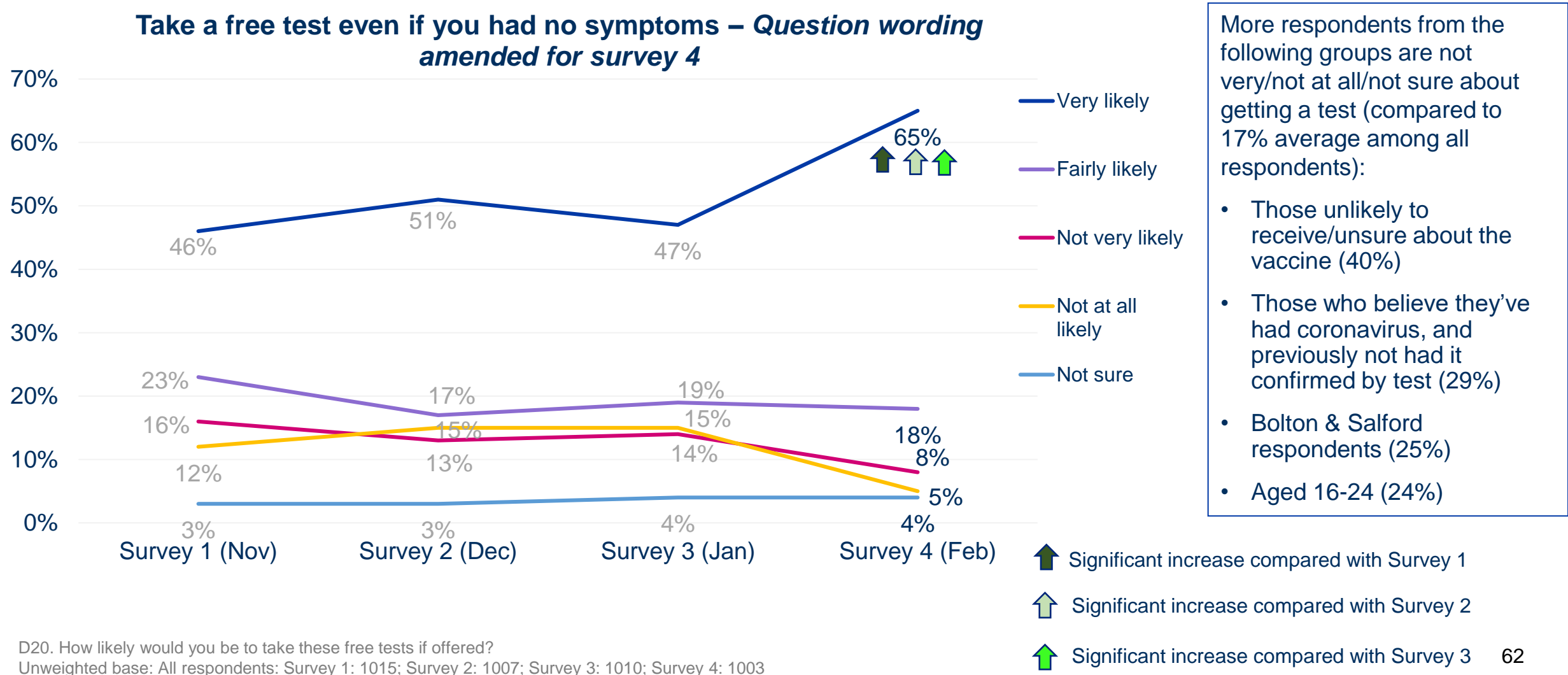
Safety concerns and worries about the side effects remain the two main reasons why respondents are hesitant to be vaccinated.

Reasons for not getting vaccinated...

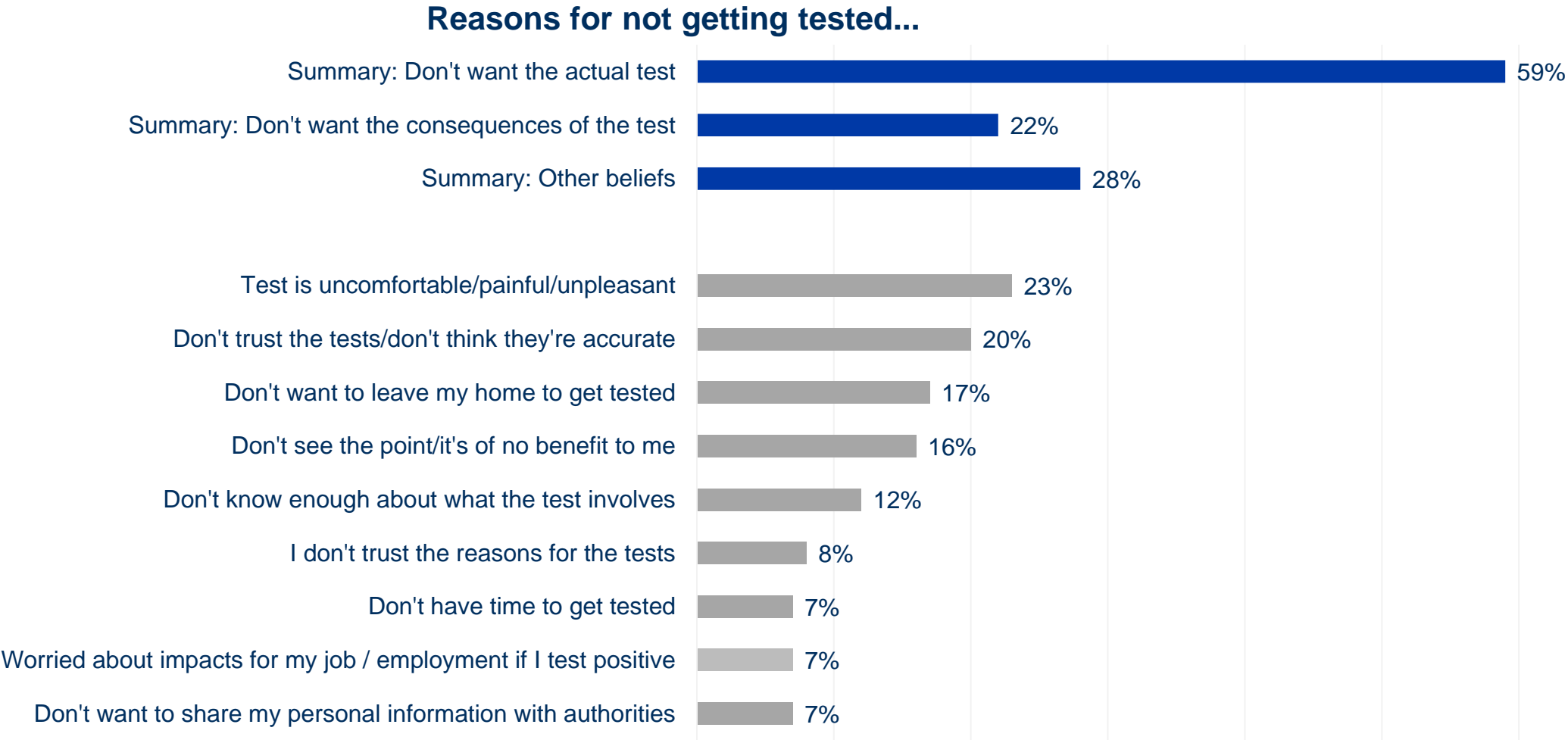


D9. Why are you unlikely to get vaccinated against coronavirus?
Unweighted base: 224 (Those who aren't already vaccinated or not very likely to get the vaccine when offered)
At time of fieldwork, vaccines were available to the priority groups 1-4 : care home residents and staff; frontline health and social care; aged 70+; clinically extremely vulnerable

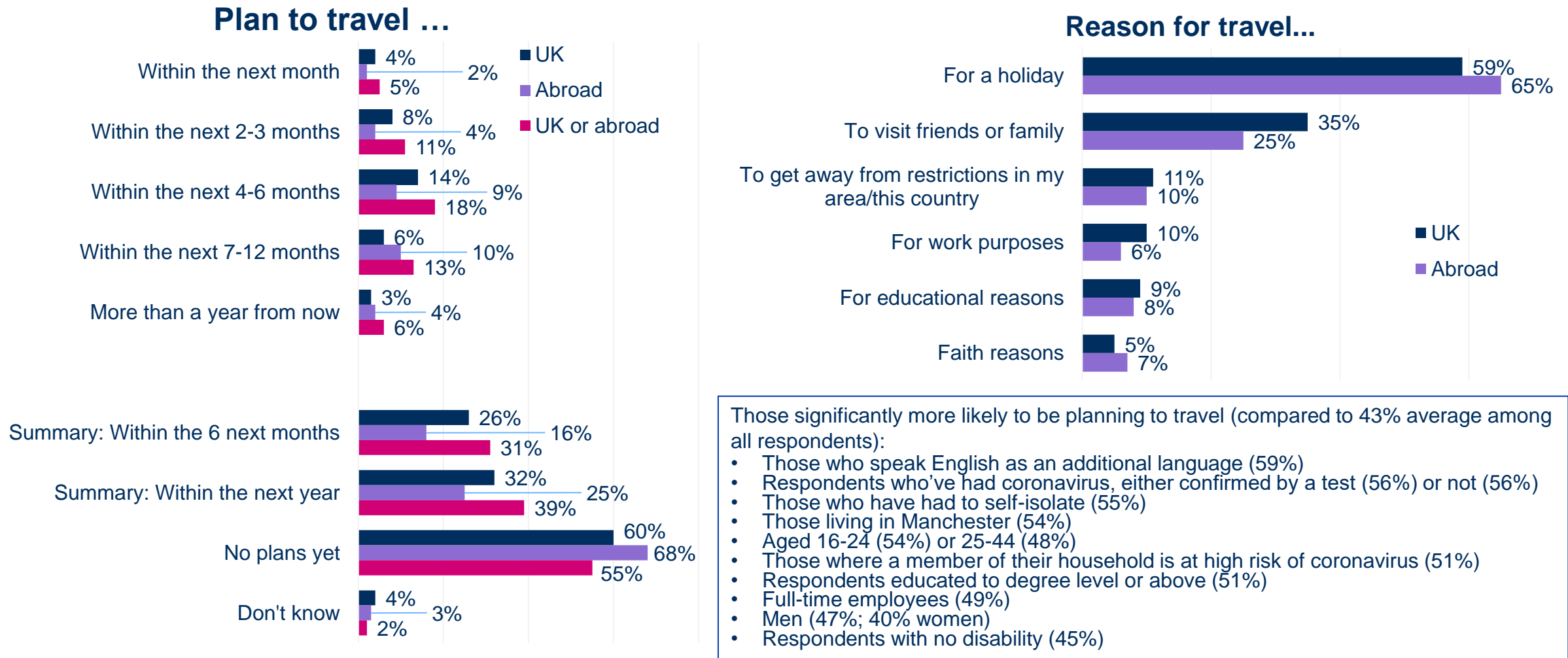
2 in 3 (65%) respondents are very likely **take a coronavirus test when showing no symptoms**. This is up significantly across all previous surveys, potentially reflecting the recent local increase in community / workplace testing activity (although a change in question wording may have also contributed).



Concerns about pain / discomfort and reliability of the tests are the two main reasons why respondents are hesitant to get tested. But almost a quarter (22%) of those who are hesitant say it is because they do not want the consequences of testing positive.



1 in 3 (31%) respondents are **planning to travel** in the next 6 months. Trips within the UK are more likely than abroad. For all destinations, the most common reasons for travel are holidays or seeing friends and family.



D15a. Do you have any plans to travel outside of your local area to other regions or parts of the UK within the next 12 months or so, or are you waiting until restrictions have been lifted?
D15b. And do you have any plans to travel abroad within the next 12 months or so, or are you waiting until restrictions have been lifted? D16b. Why are you likely to travel abroad within the next 12 months or so? D16a. Why are you likely to travel outside your local area within the next 12 months or so?
Unweighted base: 1003 (All respondents); 342 (Where plan to travel in the UK), 275 (Where plan to travel aboard)



Deeper insight: Experiences of self-isolation

Qualitative research – overview of approach

- **10 in-depth qualitative telephone interviews**, ranging from 25 to 50 minutes, were held focusing on self-isolation and community testing. In particular they explored: **general understanding** of self-isolation; **communication** of the requirements; **drivers of their own behaviour** in self-isolating (or not); **support** received; and **barriers and difficulties** faced. Additionally, a short section around **community testing** was also included.
- Participants had all taken part in the main surveys and were **selected for interview on the basis of their responses**.
- Every effort was made to ensure that the composition of the ten interviews reflected a **broad range of different life situations and experiences**. The final sample included:
 - Five individuals in employment, two retired, two out of work and one looking after the home.
 - Of the five in employment, three work from home some of the time and two do not
 - Five males and five females
 - Four with children in the house, and three with no other adults in the house

Within the following categories in relation to self-isolation	
Fully complied (required to self-isolate and did)	3
Partially complied (required to self-isolate but left the house at least once)	5
Think they've had coronavirus (not confirmed by a test); unaware they would have needed to self-isolate	2

Age group	
18 to 24	2
25 to 34	3
35 to 44	0
45 to 54	3
55 to 64	1
65+	1

Understanding of self-isolation

- All **respondents were able to give definitions of self-isolation** when asked – reporting that this involves staying at home and not meeting anybody. Some respondents also discussed separating yourself from other members of the household as much as possible.
- However, when asked in further detail, many respondents appeared to **confuse self-isolation instructions with more general ‘Stay at Home’ instructions** for stopping the spread of the virus. One interviewee said:

“We’re all self-isolating now, apart from key workers, but (cases) are still going up. That, to us, says that nothing’s changed. We’re all in isolation and the kids are off school, but the numbers are still going up. So obviously isolation isn’t working.” – Female, 25-34, didn’t self-isolate

- While most respondents understood the rationale for self-isolation, **many respondents were unclear on the length of an isolation period** in more general terms: some respondents believe it to be ten days in all circumstances; other respondents believe it to be fourteen in all circumstances; and some respondents think this varies depending on whether it’s because of testing positive or a close contact.
- Those who have had to self-isolate were generally aware of the length of their self-isolation period, often because the **Test and Trace service made the duration** very clear; many respondents feel it should be clear to everybody as it has been communicated constantly.
- Some respondents **believe that the requirements for a self-isolation period have changed throughout the Covid period**, but were not clear on specifics. One respondent reported having to isolate for 10 days when testing positive, with others in the household isolating for 14 days, but said a few weeks later this was changed to 7 and 10 days respectively.
- **Inconsistent information** across different official sources was given as a reason why people would generally have difficulties understanding the length of a self-isolation period:

“Even if you look on the internet, information differs. I looked on the NHS website, and when you read part of it, it says 14 days, but when you see on gov.uk it says they’re reducing it to 10 days for everything. So do you trust gov.uk or do you trust the NHS?” – Female, 25-34, didn’t self-isolate

“They’d already contacted me to self-isolate for the 10 days, but then a couple of days later, they were like, ‘no, it’s the 14 days from this day’ (because her boyfriend tested positive).” – Female, 18-24, did self-isolate

Experience of NHS Test and Trace

- Many of those who had done so were **negative about the experience of getting tested**, typically because of ‘inconclusive’ tests or more general concerns about false positives; the latter was sometimes a barrier to getting a test in the first place. One respondent was required to self-isolate after his wife tested positive, but five days later she tested negative – he views the tests as “garbage”.
- Most respondents were **positive about the logistics of a test**, including booking, availability, site access and site operations. However, one person reported putting in a complaint about an official who was ‘rude’ following a disagreement about the way the sample was collected; another waited a few days to receive a home testing kit.
- Many respondents had been **contacted by Test and Trace while self-isolating**. This was typically to offer support and signposting to different services, which was not required by the individuals. Some had contact during the isolation period to check in and offer support again.
- One respondent had an issue of being **incorrectly contacted by NHS Test and Trace** due to an apparent positive test from a household member who had not actually done so; this undermined her confidence in the system.
- Some respondents reported **learning of their need to self-isolate from people other than NHS Test and Trace**; contacts who had tested positive had telephoned them, or they had been told to by their employers or colleagues. One reported being unsure of what to do if she were to test positive – whether it was up to her to reach out to all her contacts, or whether Test and Trace were responsible for doing that.
- Some respondents were **negative about the COVID-19 app** for test and trace, in particular not understanding where they could have come into contact with a positive case after receiving a notification to self-isolate via the app. As they believed this to be the result of inaccurate GPS, they were less inclined to comply with the instruction.

Barriers to self-isolation – individuals' experiences

- All of **those who did not fully comply with their instruction to self-isolate said they did what they could** – adjusting their behaviour, and limiting time out of the house to specific, 'essential' activities:
 - One individual moved in with elderly parents for the weekend after being told to self-isolate, in order **to continue providing care** for her mother who has dementia. She had already seen her parents anyway since coming into contact with the positive case, and had no alternative support available:

“I carried on seeing my parents. It made absolutely no difference because I'd already been in living proximity to them since seeing (the positive case).” – Female, 45-54, didn't self-isolate
 - Another respondent gave **childcare as their reason for breaking self-isolation**. Their autistic child would have found it very difficult to be confined to the house, and the parent felt he needed to be taken to the park a couple of times despite the self-isolation requirements.
 - One respondent **continued to go to work**. He viewed this as risk-free as he drove there and was the only person on site. As the owner of the business, he felt he had no alternative:

“If I have to self-isolate, then my business shuts down, and I've got three or four employees... if you've got work to do that can only be done in a workplace, getting deliveries ready to go out in a truck, what else can I do?” – Male, 45-54, didn't self-isolate
 - One respondent **visited the supermarket** to buy some food while self-isolating; another reported having to go out after ten days in order to top up the **gas and electricity**.
- **None of those who broke their self-isolation were concerned about any legal repercussions or fines**. All felt that their actions were both low risk and essential.

Barriers to self-isolation – general difficulties

- Many respondents believe that, for them personally, **adequate stocks of food and essential goods** in the house to support a self-isolation period would be a potential difficulty. Similarly, one reported needing to supply food parcels to those self-isolating through her work.
- Many respondents felt that, for people generally, **economic factors and not being able to afford to miss two weeks of work** would be the most significant barrier. There were specific examples reported of personal contacts that were unable to self-isolate as a result. Others reported employers being difficult and uncooperative more generally:

“Employers are thinking that people are using it to get two weeks off work. I agree that some people have done that, but it’s not always the case. They just need to have a little more trust in their staff, that they’re not going to play the system.” – Female, 25-34, didn’t self-isolate

- Several respondents cited a concern that **older people may not be able to access appropriate information and support**, through lack of technology or ‘know-how’. They gave examples of elderly neighbours and contacts who would be unable to search for support as required:

“There’s a bit of a presumption nationally that people have access to all this technology, and a lot of people don’t” - Female, 45-54, didn’t self-isolate

- Issues around **mental wellbeing**, trying to keep yourself busy and becoming fed up were also noted. One interviewee reported her father did not self-isolate when required to because “he thought he’d go nuts”
- **Caring responsibilities** would also be a concern – in some cases other people may not be able to provide help beyond dropping off food.
- One also noted the **lack of exercise and fresh air** as a difficulty, as she lives in a flat:

“When I went out for the first time [following self-isolation], I was blinded by the light” – Female, 25-34, did self-isolate

Support and enabling factors for self-isolation

- Many respondents noted that the **presence of friends and family** to supply food and essential goods would be important in overcoming a significant barrier to self-isolation, both for themselves individually and others in their network. Some respondents had also received more informal support from friends and family, checking in to ensure their mental wellbeing was OK while self-isolating.
- One received **support from a Facebook group** set up for the parents of autistic children, using this to ask for advice in explaining Covid restrictions more generally to an autistic child.
- Some respondents have **planned in advance**, ensuring they have enough provisions for a self-isolation period if required:

“I have kept a stock of food both at my house and my parents house since this started. I’m not talking about one of these people who looks like they’re waiting for a nuclear winter, I’m just talking about keeping two weeks ahead with freezer stuff, canned food, in case I was told I couldn’t go out” – Female, 45-54, didn’t self-isolate

- Many respondents also reported that their **employers had been supportive**, such as enabling them to work from home if required, and continuing pay for self-isolating employees unable to work from home.
- More generally a **lack of financial barriers** was often a key enabling factor. Some respondents felt well-placed to self-isolate because of having a large house and a garden, and that self-isolating would otherwise be challenging.
- Some **respondents who live alone** reported that they are generally used to their own company and that the experience wasn’t drastically different from their regular life in the Covid period anyway; this helped them prepare mentally.
- One also noted that self-isolation was made much **easier because of the wider restrictions** – most leisure activities were not possible anyway, and that without this she would have been tempted to still visit pubs and restaurants.

Self-isolation: motivational factors

- Those respondents who self-isolated were generally **motivated by a desire to protect their community and stop the spread of Covid** rather than simply following rules for its own sake or through fear of legal repercussions.
- Some respondents also mentioned that doing everything they can to stop the spread, including self-isolating when required, is **the quickest way out of Covid restrictions**:

“I want this over as fast as I can. The best way I can get this over as fast as I can is by sticking to the rules. I really, really don’t want this to carry on any longer. I’ve had enough of it as much as everybody else, and the quickest way we can do that is to stop it spreading... if everyone does this and sticks by the rules, then hopefully this pathway out of this will actually stick to plan.” – Female, 45-54, didn’t self-isolate

- Most respondents expressed the view that a significant minority have **become ‘fed up’** and aren’t interested in following Covid-restrictions, typically because they don’t feel it is a risk to them. This scepticism was often this was related to a **lack of trust** in the testing process and ‘false’ positives.
- Some respondents admitted sharing some of these concerns personally, with one preferring a **‘herd immunity’** strategy instead and drawing on memories of ‘pox parties’ to build immunity in healthy people that way.
- Some respondents felt that for at least a significant minority of people, failure to self-isolate has been driven by motivational factors rather than specific barriers – particularly that **people can self-isolate but don’t want to**:

“Everyone can isolate, regardless of anything. Money-wise, even if you’re the lowest paid person, you can isolate if you think it’s the right thing to do. People don’t want to, because they just don’t see the point.” – Female, 25-34, didn’t self-isolate

- One also felt that their attitude to self-isolation would be **different depending on whether it was related to symptoms or contact**:

“I feel absolutely fine, it’s somebody else who’s got it, not us, so why can’t we go for a walk around the park?” – Female, 25-34, didn’t self-isolate

Encouraging further self-isolation and messaging

- Most respondents felt that there is **little that can be done around the messaging around self-isolation** to encourage people to do it, feeling that it's been well known for a year and that if people still aren't following it, they never will:

“I think people are that fed up, I’m not certain anything will have an impact. It’s been on the news every night for a year... the information has been out there constantly from all different channels. I don’t know how people could have missed it.” – Female, 45-54, didn’t self-isolate

- Many respondents expressed the view that **messaging by senior politicians in national government is less effective** due to general mistrust:

“It would be better coming from scientists and medical people, because there’s a mistrust of politicians. If a politician told you to isolate, it would be less effective. If somebody like Van Tam told you to isolate and told you the reasons why, you’d probably pay more attention than Boris Johnson or Matt Hancock telling you.” – Male, 55-64, symptoms but no test

- A couple of respondents suggested that **strict enforcement of ‘staying at home’** more generally would be the only way to counter this.
- Further **support to ease financial pressures** was also referred to, though typically this related to communication of existing support:

“A lot of people don’t really understand how to go about, and how to get access to government funding, and the ways to be supported. There’s not a lot of information provided like that.” – Female, 18-24, did self-isolate

- One individual also felt that the **daily check-in calls from NHS Test and Trace** while self-isolating appeared to focus on simply enforcement and reminding her to self-isolate rather than actually offering support:

“It annoys me a bit because it’s a little bit false. They rang me to say they’re checking in, and ask about mental wellbeing but they’re not really, they’re just checking you’re at home... They didn’t really give me any information in regards to taking care of myself or anything like that... it would have been nice if they could have said that there are options to explore if you need financial help or something like that.” – Female, 18-24, did self-isolate

Community testing

- **Many respondents had heard about community testing**, and thought that this involved testing as many people as possible in a particular area, regardless of any symptoms or contact. Some respondents also noted that such an approach could be deployed when new variants are discovered.
- **Opinions about community testing were sharply divided:**
 - Some respondents could see the **value of identifying asymptomatic positive cases** and ensuring they self-isolate.
 - Others were negative, typically through **concern about the value of the tests and the possibility of false positives:**

“Even if the test is unreliable, it could find asymptomatic people who wouldn’t be found otherwise, so I’d see it as a positive, but I still have this question mark over the type of test, the fact it’s lateral flow.” – Male, 55-64, symptoms but no test

- Where people were positive about the value of community testing, they were **generally open to taking part as often as required**, and certainly at least twice a week. But this level of regularity was a barrier for two people:

“I think twice a week would be too much for me. I work quite long hours and quite often, and I’m thinking about how I’m going to get out of work... how I can schedule it around work.” – Female, 18-24, did self-isolate

- Some respondents were **aware that a community testing approach had been adopted in Liverpool which they felt had not been successful**. One reported learning that those testing negative then disregarded Covid restrictions and that this caused the virus to spread:

“Anecdotally, people were telling me they were having these negative tests, and more than one household was meeting up because they’d had the negative tests, and subsequently someone was testing positive who had previously tested negative, and everybody else was then at risk of catching Covid.” – Female, 45-54, didn’t self-isolate

- Many respondents feel that **a significant proportion of the population have become ‘fed up’ with Covid-19** and feel the government has been heavy-handed in dealing with it, and that these individuals would therefore not engage with community testing.

