Coronavirus and the social impacts on older people in Great Britain: 3 April to 10 May 2020

Indicators from the Opinions and Lifestyle Survey on the social impact of the coronavirus (COVID-19) pandemic on older people in Great Britain.

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1. Other pages in this release

- Coronavirus and the social impacts on young people in Great Britain

2. Main points

- Among older people (aged 60 years and over) who were worried about the effect the coronavirus (COVID-19) was having on their lives, their main concerns were being unable to make plans in general (64.5%), personal travel plans such as holidays (53.4%) and their own well-being (51.4%).

- Of those who said their well-being had been affected by the coronavirus, the most common ways older people said it had been affected were being worried about the future (70%), feeling stressed or anxious (54.1%) and being bored (43.3%).

- Staying in touch with family and friends remotely was the main way those aged 60 years and over said they were coping whilst staying at home, followed by gardening, reading and exercise, with those aged in their 60s and 70s equally as likely as younger age groups to say that exercise was helping them to cope.

- People aged in their 60s and 70s were more likely to have checked on neighbours who might need help three or more times and they were equally as likely to have gone shopping or done other tasks for neighbours at least one or two times as those aged under 60 years.

- Those aged 60 years and over were most likely to say they expect the financial situation of their household to stay the same over the next 12 months and more likely to say this than younger age groups; this is probably because older people are less likely to be working and more likely to be on fixed pension incomes.

- People aged in their 60s were the least optimistic about how long it will take for life to return to normal, with a higher proportion saying it will take more than a year or that life will never return to normal, than those aged under 60 years and those aged 70 years and over.

Statistician's comment

“Older people are experiencing some aspects of the lockdown situation differently from younger people, worrying less about finances but worrying more about access to essentials. Keeping in touch with friends and family remotely and doing activities such as gardening and reading are helping them cope.

“They are more likely to be looking out for their neighbours and feel supported by their local communities. Interestingly, people in their 60s are the least optimistic about when life will return to normal, with more than a quarter thinking it will take at least a year or will never return to normal”.

Sarah Crofts, Head of Ageing in the Office for National Statistics Centre for Ageing and Demography.

3. Understanding the impact on different age groups

This release contains data and indicators from a new 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, which is reported on in the Coronavirus and the social impacts on Great Britain series of bulletins.
This analysis covers the period between 3 April 2020 and 10 May 2020 (inclusive), when government advice across all three countries in Great Britain was to stay at home and only go out for specified reasons.

For the purposes of this analysis, we have defined young people as aged from 16 to 29 years. This is broader than our usual definition of young people, which is those aged 16 to 24 years. The inclusion of those aged 25 to 29 years in this analysis is mainly to have a large enough sample to ensure the robustness of the estimates.

We have defined older people as aged 60 years and over. In this article this broad group is broken down into those aged 60 to 69, 70 to 79 and 80 years and over, where the data allow. OPN data cover residents of private households only so do not include older people living in care homes and other types of communal establishments. (At the time of the last census in 2011, 3.7% of the population aged 65 years and over lived in communal establishments.)

The statistics presented are estimates and as with all estimates, there is a level of uncertainty associated with them. 95% confidence intervals have been included. These indicate the range within which we would expect the true value to lie for 95 out of every 100 samples drawn at random from the population. Wide confidence intervals, often associated with small sample sizes or large sample variance, indicate a wider range of values within which we would expect the true value to lie.

Any changes or differences mentioned in this bulletin are statistically significant. The statistical significance of differences noted within the release have been determined based on non-overlapping confidence intervals.

4. Impact of the coronavirus on own life

In the period 3 April to 10 May 2020, more than three-quarters of people were very worried or somewhat worried about the effect that the coronavirus (COVID-19) was having on their life. Those aged 80 years and over and those aged 16 to 29 years were the least likely to be worried (Figure 1).
Figure 1: The oldest and youngest ages were the least likely to be worried about the effect the coronavirus was having on their lives

Percentage of the population aged 16 years and over very or somewhat worried about the impact of the coronavirus on their lives by age group, Great Britain, 3 April to 10 May 2020

Source: Office for National Statistics – Opinions and Lifestyle Survey

Notes:

1. Question: "How worried or unworried are you about the effect that the coronavirus is having on your life right now?"

Of those who were worried, the three aspects of life that those aged 60 years and over were most likely to say were being affected by the coronavirus were being unable to make plans in general (64.5%), personal travel plans such as holidays (53.4%) and their own well-being (51.4%).

While similar proportions of people across all age groups were concerned about the impact the coronavirus was having on their ability to make plans, personal travel plans and life events such as weddings and funerals, there were some significant differences in the concerns of older people compared with younger age groups.

Overall, those aged 60 years and over were less likely to say they had struggled to get the groceries and toiletries that they wanted (27.5%) than those aged under 60 years (39.1%). However, of those who said they were worried about the effect the coronavirus was having on their lives, older people were more likely to say their access to groceries, medication and essentials had been affected than younger age groups (Figure 2).
Figure 2: Older people were more likely to have had difficulties accessing essentials, and less likely to have had their finances or well-being impacted, than younger people

Percentage of the population aged 16 and over, worried about the effect of coronavirus (COVID-19) by selected aspects of life affected and age group, Great Britain, 3 April to 10 May 2020

Data download

Notes:

1. Question: "In which ways is the coronavirus affecting your life?"

2. Respondents were asked to select all that apply.

3. Base population for percentage: adults who answered "very worried" or "somewhat worried" to the question "How worried or unworried are you about the effect that the coronavirus is having on your life right now?"

4. Selected aspects of life are displayed here, the full breakdown is available in the accompanying dataset.

5. The value for those aged 80 and over reporting "My household finances are being affected" has been suppressed because of small sample size.

Older people who were worried about the effect of the coronavirus were less likely to say their finances had been affected than younger age groups, with the 70 to 79 years age group the least likely to say this (Figure 2). This is probably because older people are less likely to be working and more likely to be on fixed pension incomes.

Those aged 60 years and over who were economically active (employed, self-employed or unemployed) were more likely to say their finances have been affected (26.8%) than older people who were economically inactive (9.6%) but were less likely to say this than those economically active aged under 60 years (39.3%).

Around one in five (22.8%) of those aged 60 years and over who were worried about the effect the coronavirus was having on their life said that their relationships had been affected. This was a similar level to other age groups who were worried, other than those aged 16 to 29 years, who were the most likely to say their relationships had been affected.

For older people, the relationships they were most likely to say had been affected were those with friends, other relatives, and their adult children. Those aged 60 years and over who were married or cohabitating were less likely to say their relationship with their spouse had been affected (45.9%) than those aged under 60 years who were married or cohabitating (64.7%).

Reporting that their well-being has been affected by the coronavirus among those worried about the effect of the coronavirus on their life, was high across all age groups (Figure 2). This reduced with age, with those aged 70 years and over less likely to say this than those aged under 70 years, however, when asked to identify their biggest worry, older people were most likely to say it was their well-being.

More about coronavirus
5. Well-being

In the period 3 April to 10 May 2020, those aged 60 years and over reported higher average well-being scores on life satisfaction, feeling the things they do in their life are worthwhile, and feeling happy, than those aged under 60 years. Within the older age groups, those aged 70 years and over had significantly higher life satisfaction (Figure 3).

This pattern is similar to previous findings, where it has been found that ratings of personal well-being start to rise around ages 60 to 64 years, peaking between the mid-60s and mid-70s, and then start to decrease with age, although, in the period specified, there were no significant differences between the oldest age groups ¹.

Figure 3: Older people reported higher levels of well-being, except for anxiety, which was similar across age groups

Average ratings on well-being measures by age group, Great Britain, 3 April to 10 May 2020

Data download

Notes:

1. Question: "Overall, how satisfied are you with your life nowadays?", "Overall, to what extent do you feel that the things you do in your life are worthwhile?", "Overall, how happy did you feel yesterday?", "Overall, how anxious did you feel yesterday?".

2. Each of these questions is answered on a scale of 0 to 10, where 0 is “not at all” and 10 is “completely”.

Since the coronavirus (COVID-19) pandemic, average scores on these three well-being measures have decreased markedly across age groups generally, meaning personal well-being has been negatively impacted, with scores declining more steeply for younger age groups than older age groups.

Anxiety scores have also increased across age groups, however, while previously it has been found that anxiety levels tend to be highest in mid-life, declining as people reach their early to mid-60s, and dropping to their lowest levels in the mid to late-60s where they remain relatively stable, in the period specified there were no significant differences in average anxiety scores overall across all age groups (Figure 3).

Also, while those aged under 70 years were more likely to have high anxiety if they had a health condition, those aged 70 years and over were equally likely to have high anxiety regardless of whether or not they had a health condition.

These findings imply that the pandemic has had a greater impact on the anxiety levels of older people than younger people.
As in previous findings on loneliness, those aged 60 years and over were less likely to report being lonely often, always or some of the time than younger ages.

Amongst those who reported that their well-being had been affected by the coronavirus, the most common ways those aged 60 years and over were likely to say it had been affected were being worried about the future (70%), feeling stressed or anxious (54.1%) and being bored (43.3%).

People in their 70s who said their well-being had been affected were less likely to say they were feeling stressed or anxious than younger ages and those aged 70 years and over were less likely to say that their well-being has been affected by mental health issues. They were also less likely to say that the coronavirus had strained their personal relationships or to have felt that they were spending too much time with others.

This may be because older people are more likely to live alone, with the likelihood of living alone increasing with age. This then has the consequence of higher proportions of those aged 80 years and over reporting that their well-being had been affected by spending too much time alone compared with those aged 30 to 59 years (Figure 4).

Those aged 60 years and over were equally as likely to be bored as other age groups apart from those aged 16 to 29 years, who were significantly the most likely to say their well-being was affected by being bored.

There were no significant differences across age in the proportions of those who said their well-being had been affected by worrying about the future.

**Figure 4:** Older people were less likely to say their personal relationships were affected, yet compared with most ages, the oldest old are more likely to report their well-being affected by spending too much time alone

Percentage of the population age 16 years and over, worried about the effect of the coronavirus on their well-being by selected aspects of well-being affected and age group, Great Britain, 3 April to 10 May 2020

**Data download**

**Notes:**

1. Question: “In the past seven days how has your well-being been affected?”

2. Respondents asked to select all that apply.

3. Base population for percentage: adults who answered both that they were “very worried” or “somewhat worried” about the impacts of the coronavirus for the question “How worried or unworried are you about the effect that the coronavirus is having on your life right now?” as well as “My well-being is being affected” for the question “In which ways is the coronavirus affecting your life?”.

4. Selected aspects of well-being are displayed here, the full breakdown is available in the accompanying dataset.

5. The value for those aged 80 years and over reporting “Strain on my personal relationships” have been suppressed because of small sample size.

**Note: For Well-being section:**
1. It is important to note that pre-pandemic personal well-being measures referred to are based on Annual Population Survey data, which cover a much longer period than the weekly pooled OPN data presented here. The Annual Population Survey also has a larger sample size. Differences in patterns observed in the two sets of data could be in part because of these and other methodological differences.

6. Health

**Older people are more at risk from the coronavirus (COVID-19) than younger people.** As we age our immune system weakens and the likelihood of having a health condition also increases with age.

Around one-third of those aged 60 to 69 years reported having a health condition, rising to two-fifths of those aged 70 to 79 years and almost a half of those aged 80 years and over (Figure 5). (In this analysis, underlying health conditions were defined based on NHS guidance around those at higher risk of contracting the coronavirus.)

**Figure 5: The likelihood of having a health condition increases with age**

Percentage of the population aged 16 years and over with a health condition by age group, Great Britain, 3 April to 10 May 2020

Source: Office for National Statistics – Opinions and Lifestyle Survey

Notes:

1. Underlying health conditions were defined based on NHS guidance around those at higher risk of contracting the coronavirus. For a list of the health conditions included, refer to the glossary.

2. From 9 April, pregnancy has been included as a health condition. This is because pregnant women are classed as clinically vulnerable to the coronavirus.
Those aged 60 years and over were also more likely to have a limiting long-standing illness, with those aged 80 years and over the most likely. Those in older age groups also reported having worse general health overall than younger people and were less likely than those under 60 years to report very good general health, with those over 70 years the least likely.

Also, of the more than 2.2 million people classified by the NHS as clinically extremely vulnerable (CEV) to severe complications of the coronavirus, 63% were aged 60 years and over.

The likelihood of living with and looking after someone who is sick, disabled or over 70 years also increases with age, with those aged 70 years and over more likely to be doing so than those aged under 70 years. This means that, together with being more likely to have a health condition themselves, the over 70s are also more likely to be providing care to someone with a health condition, most probably a spouse (Figure 6).

**Figure 6: Older people were more likely to be living with and looking after someone who is sick, disabled, or over 70 years, than younger people**

Percentage of the population aged 16 years and over, living with someone who is sick, disabled, or over 70 years whom respondents look after or give special help to by age group, Great Britain, 3 April to 10 May 2020

Source: Office for National Statistics – Opinions and Lifestyle Survey

Notes:

1. Question: "Is there anyone living with you who is sick, disabled, or over 70 years whom you look after or give special help to?"
Although 42% of those aged 70 years and over reported having a health condition, a relatively small proportion of older people who were worried about the effect that the coronavirus was having on their life, reported that their health was being affected compared with other worries; 8.5% of those aged over 70 years, a smaller proportion than those aged under 70 years (12.9%). They were also less likely to say their mental health had been affected.

For those with a health condition, those aged 70 years and over were significantly less likely to say their health has been affected than those aged under 70 years, 13.0% and 25.1% respectively.

7. Impact of the coronavirus on friends and family’s lives

Levels of worry about how the coronavirus (COVID-19) was affecting friends and family’s lives were very high across all age groups, with people of all ages more worried about the impact of the virus on the lives of friends and family than on their own lives (Figure 7).

Figure 7: A high proportion of people of all ages were worried about the impact of the coronavirus on their friends and family

Percentage of the population aged 16 years and over, very or somewhat worried about the impact of the coronavirus on their friends and family by age group, Great Britain, 3 April to 10 May 2020

Source: Office for National Statistics – Opinions and Lifestyle Survey

Notes:

1. Question: "How worried or unworried are you that the coronavirus is affecting your friends and family?"
Among those aged 60 years and over who were very or somewhat worried about the effect on friends and family, the most frequently mentioned concerns were their well-being (55.8%) and work (55.4%). Relatively high proportions of older people were also worried about the effect the coronavirus was having on the finances (47.5%), health (42.5%) and schools and universities (41%) of their friends and family (Figure 8).

**Figure 8: Older people were most likely to be worried about how the coronavirus might affect the well-being of friends and family but they were less likely to be concerned than younger people**

Percentage of the population aged 16 years and over, worried about the effect of the coronavirus on their friends and family by selected aspects of life affected and age group, Great Britain, 3 April to 10 May 2020

[Data download](#)

**Notes**

1. Question: "In which way are you worried that the coronavirus is affecting your friends and family?"
2. Respondents were asked to select all that apply.
3. Base population for percentage: adults who answered "Very worried" or "Somewhat worried" to the question "How worried or unworried are you that the coronavirus is affecting your friends and family?"
4. Selected worries are displayed here, the full breakdown is available in the accompanying dataset.

Older age groups were, however, less likely to be worried about the impact on the well-being and health of their friends and family than younger age groups (Figure 8).

There were some aspects of life that those aged 70 to 79 years were more likely to be worried about for their friends and family than other age groups. They were more likely to be worried about the effect the coronavirus was having on their work than both the 30 to 59 years and 60 to 69 years age groups and were more likely to be worried about schools and universities than all younger age groups (Figure 8). This could be driven by the relative ages (and life stages) of their children and grandchildren.

8. **Coping strategies**

Staying in touch with family and friends remotely was the most frequently mentioned way those aged 60 years and over said they are coping whilst staying at home.

Older people were more likely to say reading and gardening were helping them to cope with staying at home than those aged under 60 years and within older age groups those aged 70 to 79 years were the most likely to say gardening. Although older people were more likely to have access to a garden, with those aged 70 to 79 years the most likely (95.2%), 88.1% of those aged 30 to 59 years also had a garden (Figure 9).

**Figure 9: Older people were more likely than younger people to be coping by reading or gardening during lockdown**

Percentage of the population aged 16 years and over, reporting selected activities which helped them cope whilst staying at home by age group, Great Britain, 3 April to 10 May 2020
Data download

Notes:

1. Question: "What is helping you to cope whilst staying at home?"
2. Respondents were asked to select all that apply.
3. Selected ways of coping are displayed here, the full breakdown is available in the accompanying dataset.

Older people were less likely to say watching TV, films or using streaming services were a way in which they have been coping and those aged over 60 years were less likely than younger age groups to say they have used the internet to continue their usual activities. However, those aged 60 to 79 years were equally as likely as those aged under 60 years to say that exercise is helping them to cope (Figure 10).

Figure 10: Older people were less likely than younger people to be coping by spending time with household members or watching TV during lockdown

Percentage of the population aged 16 years and over, reporting selected activities which helped them cope whilst staying at home by age group, Great Britain, 3 April to 10 May 2020

Data download

Notes:

1. Question: "What is helping you to cope whilst staying at home?"
2. Respondents were asked to select all that apply.
3. Selected ways of coping are displayed here, the full breakdown is available in the accompanying dataset.

9. Community support

The majority of people of all ages agreed that if they needed help other local community members would support them during the coronavirus (COVID-19) pandemic. Those aged 60 years and over were more likely to agree than those aged under 60 years and within the 60 years and over age group, those aged 70 years and over were more likely to agree than those aged 60 to 69 years (Figure 11).
Figure 11: Older people were more likely to feel that the local community would help them

Percentage of the population aged 16 years and over who strongly agree or somewhat agree that if they needed help other local community members would support them, by age group, Great Britain, 3 April to 10 May 2020

Source: Office for National Statistics – Opinions and Lifestyle Survey

Notes:

1. Question: "To what extent do you agree or disagree with the following statement? If I need help, other local community members would support me during the Coronavirus (COVID-19) outbreak."

People aged in their 60s were less likely never to have checked on their neighbours who might need help than those aged under 60 years. Those aged in their 60s and 70s were also more likely than those aged under 60 years to say they had checked on their neighbours multiple times (three or more) (Figure 12).

Figure 12: Young people aged 16 to 29 years were most likely to have not checked on their neighbours in the last week

Percentage of the population aged 16 years and over within each age group by the number of times they checked on neighbours in the last week, Great Britain, 3 April to 10 May 2020

Data download

Notes:
1. Question: "In the past seven days how many times have you checked on neighbours who might need help?".

2. Percentages within each age group do not sum to 100% due to 'not applicable' responses, which are not shown here. These make up between 10.8% (age 16-29), and 17.7% (age 80+) of responses. Estimates for all responses, including 'not applicable', are available in the accompanying dataset.

Within the 60 years and over age group, those aged 80 years and over were the least likely to have checked on their neighbours but nevertheless were more likely to have done so multiple times than those aged 16 to 29 years (Figure 12).

People aged in their 60s were equally as likely to have gone shopping or done other tasks for neighbours at least one or two times as those aged under 60 years while those aged 70 years and over were less likely to have done so (Figure 13).

**Figure 13: Those aged 70 years and over were the least likely to have done tasks for neighbours**

*Source: Office for National Statistics – Opinions and Lifestyle Survey*

**Notes:**

1. Question: "In the past seven days how many times have you gone shopping or done other tasks (such as dog walking) for neighbours?"

2. The two highest age groups (70 to 79 and 80 and over) have been combined because of small sample sizes.
Most people across all ages thought that people were doing things to help others more since the coronavirus pandemic than before, with those aged 70 years and over (87.5%) more likely to think this than those aged under 60 years (80.7%).

10. Looking forward

The 60 to 69 years age group were the least optimistic about how long it will take for life to return to normal, with a higher proportion saying it will take more than a year or that life will never return to normal, than those aged under 60 years and those aged over 70 years, and a lower proportion thinking life will return to normal in less than six months compared with those aged under 60 years (Figure 14).

Figure 14: Compared with young people aged 16 to 29, older people are less likely to think that their lives will get back to normal within six months

Percentage of the population aged 16 years and over within each age group by how long they think it will be before their life gets back to normal, Great Britain, 3 April to 10 May 2020

Data download

Notes:

1. Question: "How long do you think it will be before your life returns to normal?"

2. Percentages within each age group do not sum to 100% due to 'not sure', and 'prefer not to say' responses, which are not shown here. These make up between 13% (age 16-29) and 21% (age 80+) of responses. Estimates for all responses, including 'not sure' and 'prefer not to say', are available in the accompanying dataset.

Those aged 60 years and over were most likely to say they expect the financial situation of their household to stay the same over the next 12 months (55.6%) rather than getting a little or a lot worse (35%) or a little or a lot better (9.5%) and are more likely to think their financial situation will remain unchanged than younger age groups. This view increases with age, with those aged 70 years and over more likely than those aged in their 60s to think their financial situation will stay the same.

However, while over half of older people overall thought their financial situation would remain the same over the next year, those aged 60 years and over who were economically active (employed, self-employed or unemployed) were more likely to think their financial situation would get a little or a lot worse (46.2%) than those who were economically inactive (32.2%).

Of those aged 60 years and over who said their finances had been affected by the coronavirus (COVID-19), the most common reason given was that their household income had reduced (60.5%), although this was lower than for those aged under 60 years (78.7%).

Those aged 60 years and over who were economically active were more likely to say their household income had reduced than economically inactive older people and were equally as likely to say this as economically active younger age groups.

However, recent experimental statistics show that older employees have greater financial resilience. Of those aged 70 years and over, 94% have sufficient financial assets to cover a three-month reduction of 20% in employment income, as do 78% of those aged 50 to 69 years, compared with 66% of those aged 30 to 59 years and 56% of those aged 16 to 29 years.
Of those aged 60 years and over who said their finances had been affected, 28.8% said pension values were being affected by economic instability. Older people were also significantly more likely to say their saving values had been affected by economic instability than those aged under 60 years. This may in part be because of the fact that older people are more likely to have savings than younger households.

People of all ages were most likely to say that they think the general economic situation in the country will get a little or a lot worse over the next 12 months, however, those aged 80 years and over (71.2%) were less likely to say this than those aged under 70 years (82.9%).

11. Glossary

Underlying health conditions

In this analysis, underlying health conditions were defined based on NHS guidance around those at higher risk of contracting the coronavirus. This guidance changed over the period covered within this release.

Within our analysis, adults with an underlying health condition include those with:

- angina or long-term heart problem
- asthma
- autism spectrum disorder (ASD) or Asperger's (Asperger syndrome)
- cancer
- chronic obstructive pulmonary disease (COPD) or long-term lung problem
- diabetes
- kidney or liver disease

From 9 April this also includes pregnant women.

From 24 April this also includes:

- conditions affecting the brain and nerves, such as Parkinson's disease
- a weakened immune system as the result of conditions such as HIV and AIDS, or medicines such as steroid tablets or treatment for cancer
- problems with your spleen - for example, sickle cell disease, or if you've had your spleen removed
- being overweight (having a BMI of 40 or above)
- given an organ transplant

From 24 April this excludes:
• Alzheimer’s disease or dementia
• epilepsy or other conditions that affect the brain
• high blood pressure
• stroke or cerebral haemorrhage or cerebral thrombosis
• rheumatoid arthritis

**Statistical significance**

Any changes or differences mentioned in this bulletin are statistically significant. The statistical significance of differences noted within the release are determined based on non-overlapping confidence intervals.

**12. Measuring the data**

The Opinions and Lifestyle Survey (OPN) is a monthly omnibus survey. In response to the coronavirus (COVID-19) pandemic, we have adapted the OPN to become a weekly survey used to collect data on the impact of COVID-19 on day-to-day life in Great Britain.

The survey results are weighted to be a nationally representative sample for Great Britain, and data are collected using an online self-completion questionnaire. Individuals who did not complete the survey online were given the opportunity to take part over the phone.

The estimates provided in this article are based on data collected from this survey with a sample of approximately 6,400 adults (64% response rate) between 3 April and 10 May 2020 (inclusive).

More quality and methodology information on strengths, limitations, appropriate uses, and how the data were created is available in the [Opinions and Lifestyle Survey QMI](#).

**Sampling**

A sample of 2,010 households were randomly selected from the Annual Population Survey (APS), which consists collectively of those respondents who successfully completed the last wave of the Labour Force Survey (LFS) or the local LFS boost. From each household, one adult was selected at random but with unequal probability. Younger people were given higher selection probability than older people because of under-representation in the sample available for the survey. Further information on the sample design can be found in the [OPN QMI](#).

**Weighting**

The responding sample contained approximately 6,400 individuals (64% response rate). Survey weights were applied to make estimates representative of the population.

The weights of the pooled waves 3 to 7 dataset were obtained by re-weighting the pooled dataset using the scaled weights of the component datasets as the starting weights in calibration. This ensures that each week is equally represented in the pooled dataset. Subsequently, the scaled component weights were calibrated to satisfy population distributions considering the following factors: sex by age, region, tenure, highest qualification, employment status, National Statistics Socio-economic Classification (NS-SEC) group by sex, and smoking status.
For age, sex and region, population totals based on projections of mid-year population estimates for April 2020 were used. For the remaining factors, the distributions were based on estimates obtained from APS 2019. The resulting weighted sample is therefore representative of the Great Britain adult population by a number of socio-demographic factors and geography.

The calibration process helps in adjusting for potential bias stemming from attrition in the last waves of LFS and its local boost, the samples from which OPN samples are selected, non-consent to follow-up and non-response in OPN.

### 13. Strengths and limitations

The main strengths of the Opinions and Lifestyle Survey (OPN) include:

- it allows for timely production of data and statistics that can respond quickly to changing needs
- it meets data needs; the questionnaire is developed with customer consultation, and design expertise is applied in the development stages
- robust methods are adopted for the survey’s sampling and weighting strategies to limit the impact of bias
- quality assurance procedures are undertaken throughout the analysis stages to minimise the risk of error

The main limitations of the OPN include:

- the sample size is relatively small; 2,010 individuals per week with fewer completed interviews, meaning that, even with pooled data, detailed analyses for subnational geographies and other sub-groups are difficult
- comparisons between groups must be done with caution as estimates are provided from a sample survey; as such, confidence intervals are included to present the sampling variability, which should be considered when assessing differences between groups, as true differences may not exist

More quality and methodology information on strengths, limitations, appropriate uses, and how the data were created is available in [Coronavirus and the social impacts on Great Britain](https://www.gov.uk/government/publications/coronavirus-and-the-social-impacts-on-great-britain) and the [Opinions and Lifestyle Survey QMI](https://www.gov.uk/government/publications/opinions-and-lifestyle-survey-qmi).
14 . Related links

- **Coronavirus (COVID-19) latest data and analysis**
  Web page | Updated as data become available
  Latest data and analysis on the coronavirus (COVID-19) in the UK and its effects on the economy and society.

- **Coronavirus and the social impacts on Great Britain**
  Bulletin | Weekly
  Indicators from the Opinions and Lifestyle Survey to understand the impact of the coronavirus (COVID-19) pandemic on people, households and communities in Great Britain.

- **Coronavirus and anxiety, Great Britain: 3 April 2020 to 10 May 2020**
  Article | Released 15 June 2020
  The number of people reporting high levels of anxiety has sharply elevated during the coronavirus (COVID-19) pandemic. This article will provide insights into which socio-demographic and economic factors were most associated with high levels of anxiety during the first weeks of lockdown.

- **Coronavirus and loneliness, Great Britain: 3 April to 3 May 2020**
  Bulletin | Released 8 June 2020
  Analysis of loneliness in Great Britain during the coronavirus (COVID-19) pandemic from the Opinions and Lifestyle Survey.