

Statistical bulletin

Coronavirus and clinically extremely vulnerable people in England: 21 June to 26 June 2021

Analysis of clinically extremely vulnerable people in England during the coronavirus (COVID-19) pandemic, including their behaviours and mental and physical well-being.

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1 . Main points

- Most clinically extremely vulnerable (CEV) people were continuing to take precautions to protect themselves; 29% reported continuing to shield and 65% were no longer shielding but were following the precautionary guidance.
- Of CEV people who had left their home in the last seven days, a statistically significantly higher proportion of CEV people had gone out to socialise (33%, 21 to 26 June) in comparison with previous waves (22%, 17 to 22 May and 21%, 26 April to 1 May).
- CEV people tended to feel comfortable or very comfortable going to hospital or GP settings (70%), compared with 37% who felt comfortable or very comfortable going to hospitality, cultural or educational settings.
- A significantly higher proportion of CEV people reported feeling lonely often or always, compared with the general adult population of England (13% and 6% respectively).

Statistician's comment

Tim Gibbs, Head of the Public Services Analysis Team at the ONS, said:

"Clinically extremely vulnerable people are more likely to feel lonely than the general population, likely because they've taken more measures to keep themselves protected during the pandemic.

"Just over a quarter of clinically extremely vulnerable people are still shielding despite shielding guidance being relaxed in April this year, with a further two-thirds following the latest precautionary guidance."

Follow the Public Services Analysis team on Twitter: [@HughStick](https://twitter.com/HughStick)

2 . Indicators of clinically extremely vulnerable people's behaviours

In England, 3.7 million people have been identified as being clinically extremely vulnerable (CEV) to coronavirus (COVID-19). For more information on identifying CEV people, guidance for clinically extremely vulnerable people and collecting the data can be found in the [Glossary](#) and [Measuring the data](#) sections.

The data reported in this bulletin were collected during a time in which CEV people were not advised to shield. Because of this, we expect the behaviours of CEV people to be different in wave six (21 to 26 June 2021) compared with waves one, two and three, which were collected when CEV people were being advised to shield (before 1 April 2021).

Of all CEV people, 3 in 10 (29%) reported continuing to shield. When the advice to shield was paused, CEV people were given new guidance, outlining extra precautions they could take to protect themselves. Approximately two in three CEV people (65%) reported no longer shielding but following the new precautionary guidance. A small proportion of CEV people reported not shielding or following the precautionary guidance (6%). These estimates are not comparable to estimates from wave four or five because of improvements in the question structure.

The majority of CEV people had left their home in the last seven days (90%). The most common reasons for leaving included going to the shops or pharmacy (76%) and for exercise (56%). Less common reasons for leaving were to go to hospitality settings, including to eat or drink out at a restaurant or pub, or going out for leisure reasons, for example, going to the gym or swimming pool, cinema or theatre.

Most CEV people were comfortable or very comfortable about going to healthcare settings (70%).¹ However, a [statistically significantly](#) lower proportion of CEV people were comfortable or very comfortable about going to hospitality, educational and cultural settings (37%).¹

Of those who were not comfortable going out to healthcare, hospitality, educational or cultural settings, the most commonly reported measures that would help put them at ease included:

- mandatory wearing of face coverings (75%)
- regular sanitation, including use of hand sanitiser (75%)
- procedures at venues to enable social distancing and avoiding close contact (69%)

There was a [statistically significantly](#) higher proportion of CEV people who reported being lonely often or always, compared with the general adult population of England (13% and 6% respectively). For more information, please see [Coronavirus and the social impacts on Great Britain: 25 June 2021](#).

Table 1: Indicators of clinically extremely vulnerable people's behaviours
England, 2021

| Indicators of following guidance | Wave four: 26 April to 1 May 2021 | Wave five: 17 to 22 May 2021 | Wave six: 21 to 26 June 2021 |
|---|-----------------------------------|------------------------------|------------------------------|
| Those who have received both doses of the vaccine | 67% | 86% | 93% |
| Those who have received a single dose of the vaccine | 28% | 10% | 3%* |
| Those who reported not leaving the house at all in the last seven days | 11% | 11% | 10% |
| Of those who have left home in the last seven days, those who reported leaving the house to socialise | 21% | 22% | 33% |

Source: Office for National Statistics – COVID High Risk Group Insights Study

Notes

1. * indicates a sample of less than 30 so estimates should be treated with caution.

More about coronavirus

- Find the latest on [coronavirus \(COVID-19\) in the UK](#).
- [Explore the latest coronavirus data](#) from the ONS and other sources.
- All ONS analysis, summarised in our [coronavirus roundup](#).
- View [all coronavirus data](#).
- Find out how we are [working safely in our studies and surveys](#).

Notes for Indicators of clinically extremely vulnerable people's behaviours:

1. This question was not asked to those responding by proxy on behalf of someone else.

3 . Clinically extremely vulnerable people data

[Coronavirus and clinically extremely vulnerable people in England](#)

Dataset | Released 13 July 2021

Clinically extremely vulnerable (CEV) people in England during the coronavirus (COVID-19) pandemic from the COVID High Risk Group Insights Study. Includes information on their behaviours and well-being since receiving shielding guidance.

4 . Glossary

Clinically extremely vulnerable

People who are identified as clinically extremely vulnerable (CEV) are at very high risk of severe illness from the coronavirus (COVID-19). Up to 16 February 2021, CEV people were identified either because of a pre-existing condition or based on the clinical judgement of their clinician or GP that they are at higher risk of serious illness if they catch COVID-19.

From 16 February 2021, individuals are still identified as CEV by these routes, but also by the COVID-19 population risk assessment. The NHS identified approximately 2.2 million people as being CEV by clinical condition or clinician's review. A further 1.5 million people were advised to shield through the COVID-19 population risk assessment. More information can be found in [Coronavirus Shielded Patient List Summary Totals](#) and [Guidance on shielding and protecting people who are CEV from COVID-19](#).

Shielding

From 1 April 2021, the advice to shield paused. Shielding is a voluntary action in which the individual stays in their home or garden as much as possible, except for leaving their household to attend essential medical appointments or for exercise. Guidance during the most recent period of shielding (January to March 2021) includes that CEV people:

- can meet one person outdoors from another household for exercise
- should try to stay two metres away from others within their household, especially if they display symptoms of the coronavirus or have been advised to self-isolate
- can still meet with their support bubble
- should try to access services to minimise the need to leave their home, such as food and prescription delivery services

The full guidance can be viewed in [Guidance on shielding and protecting people who are CEV from COVID-19](#). The guidance is regularly updated.

Precautionary guidance

From 1 April 2021, the advice to shield paused. CEV people were advised to take precautions to minimise the risk of exposure to the virus whilst also adhering to the rules in place for everyone. The extra precautions for CEV people include:

- meeting other people outside if possible
- make sure the space is well ventilated if meeting inside
- consider whether themselves and the people they are meeting have been vaccinated – CEV people may want to wait until 21 days after receiving the second dose of COVID-19 vaccine before close contact with others
- working from home where possible
- washing hands regularly

The full guidance can be viewed in [Guidance on shielding and protecting people who are CEV from COVID-19](#). The guidance is regularly updated.

5 . Measuring the data

Survey information

This is the sixth bulletin in this series, with the survey in its current format and using the current data collection methodology. However, it is not directly comparable with wave one and wave two (18 to 30 January 2021 and 22 to 27 February 2021) of this survey because of changes in the shielding population; for more information please see [Coronavirus and clinically extremely vulnerable people in England methodology. Identifying clinically extremely vulnerable people](#). The data in wave one and wave two reflect only clinically extremely vulnerable (CEV) people identified through clinical condition or clinician's review.

Estimates for wave six

The data for wave six were collected between 21 and 26 June 2021. The sample size was 1,066 CEV people and survey weighting was used to weight the sample estimates to provide estimates for the population of CEV people. For more information on how the estimates have been produced, please see [Coronavirus and clinically extremely vulnerable people in England methodology](#).

Changes to the shielding guidance from 1 April 2021

The national advice given to CEV people to shield was paused from 1 April 2021. From 1 April 2021, CEV people were issued precautionary guidance and still had to follow the national restrictions in place. Waves one to three were collected when shielding was advised, prior to 1 April 2021; any comparisons between wave three or earlier and wave four, five or six should be made with this in mind.

6 . Strengths and limitations

Information on the strengths and limitations of this survey are available in [Coronavirus and clinically extremely vulnerable people in England methodology](#).

7 . Related links

[Coronavirus and clinically extremely vulnerable people in England methodology](#)

Methodology article | Released 21 May 2021

Latest quality and methodology information on data from the COVID High Risk Group Insights Survey and its use to analyse the behaviours and well-being of clinically extremely vulnerable people.

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

Webpage | Updated as and when data become available

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

[Coronavirus \(COVID-19\) roundup](#)

Blog | Updated as and when data become available

The latest data and analysis related to the coronavirus pandemic and its impact on our economy and society.

[Coronavirus and clinically extremely vulnerable people in England: 17 to 22 May 2021](#)

Bulletin | Released 8 June 2021

Analysis of clinically extremely vulnerable people in England during the coronavirus (COVID-19) pandemic, including their behaviours and mental and physical well-being.

[Coronavirus and shielding of clinically extremely vulnerable people in England: 9 to 16 July 2020](#)

Bulletin | Released 5 August 2020

Analysis of clinically extremely vulnerable people (the shielding population) in England during the coronavirus (COVID-19) pandemic, including their behaviours and mental and physical well-being.

[Coronavirus \(COVID-19\) harmonisation guidance](#)

Webpage | Updated frequently

This page provides harmonisation guidance on how best to collect data about the impact of the coronavirus (COVID-19) pandemic. Users can also find a bank of questions from multiple Office for National Statistics (ONS) surveys related to coronavirus (COVID-19) to be used in other surveys to further support harmonisation and questionnaire development. This bank also provides users with an understanding of what data ONS has in relation to the coronavirus pandemic.