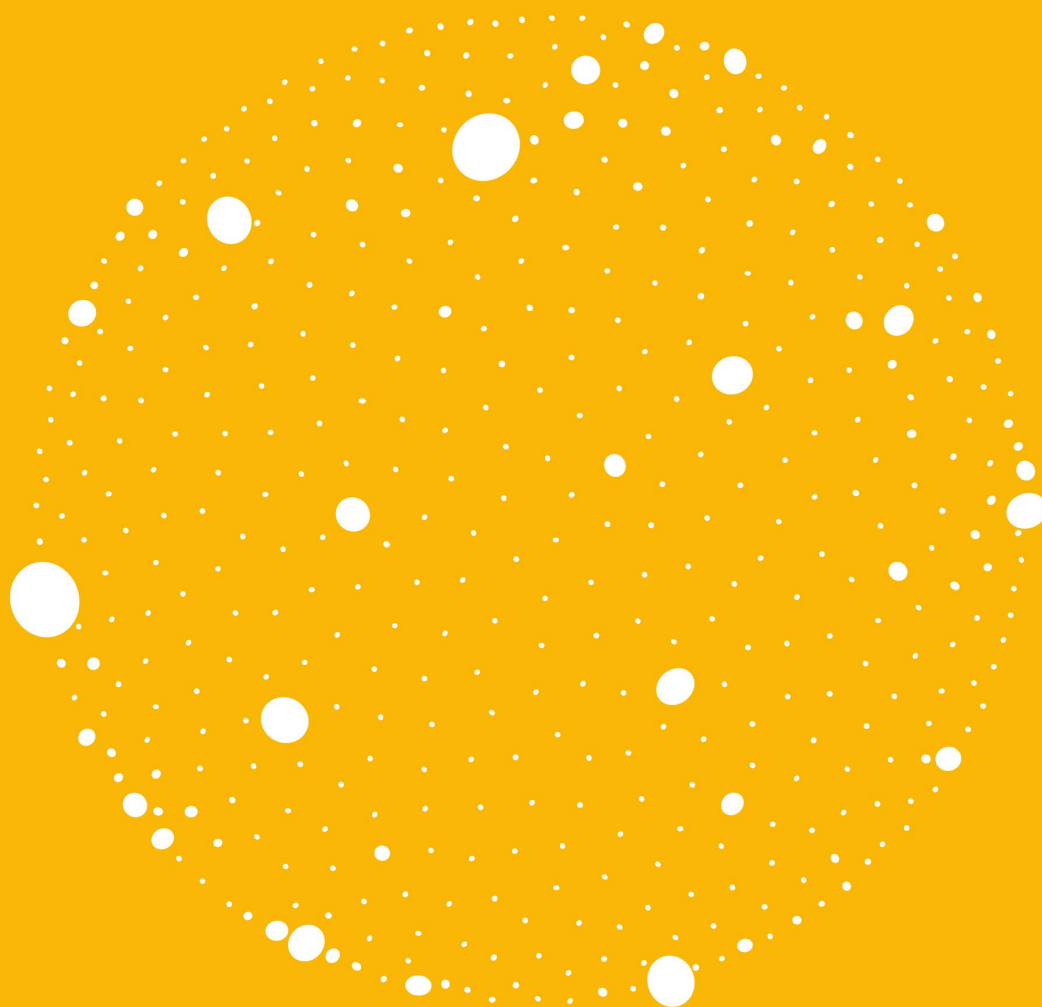




# East Ayrshire Covid Resilience Research

Report

August 2022



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# Executive Summary

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## Background and Original Drivers

The coronavirus pandemic has hit communities hard right around Scotland. Some people and organisations have done well while others, often those with less resources in the first place, have done less well. A consortia of East Ayrshire organisations came together in early 2022 to identify the impact of the pandemic on people in their communities and identify the best way to support people to recover and thrive.

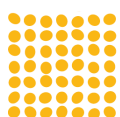
## The Consortia

The partnership is supported by The CORRA Foundation and made up of the following grass roots organisations:

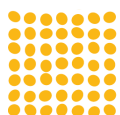
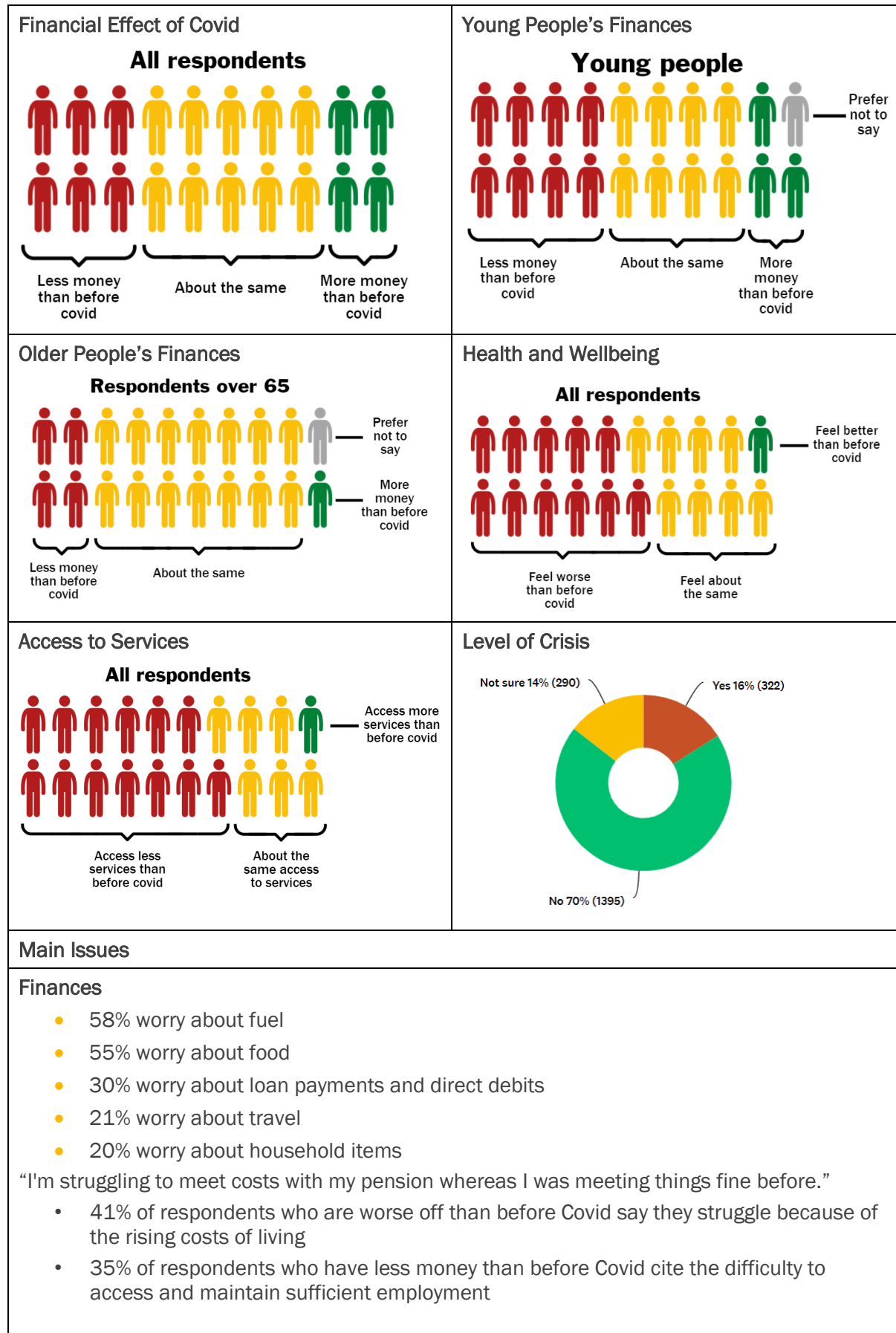


## What We Did

The key methodology was to undertake a survey face to face using trained local volunteers and staff in the partner organisations. This was highly resource intensive but enhanced the qualitative nature of the research and the validity of the results. The process can be summarised as follows:



## What We Found Out



### Wellbeing

- 42% of people who feel like their health and wellbeing have been negatively affected by Covid report worsened mental health
- 16% of respondents report a significant level of anxiety due to their financial issues
- 15% of respondents with worsened health and wellbeing report feeling lonely
- 9% of respondents report having faced physical health issues

“I can’t seem to get over lockdown and am nervous about going back out into the world.”

### Access

- 83% of respondents who report a lower access to services say that access to GP appointments is lower than it was before the pandemic. In addition, 55% of respondents struggle to have access to a dentist and 30% have an issue accessing other health services
- 21% of respondents to this question have less access to local authority services, and 16% have a lower access to community-based services

“It’s like we don’t have a GP service.”

### Support

In the past two years the importance of Scotland’s voluntary sector has been underlined, with the co-ordination of food and grocery delivery, the support in areas of mental health and wellbeing (such as befriending), digital inclusion and the reduction of isolation as well as partnership work with the NHS and other agencies.

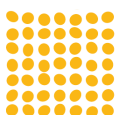
### Crisis

1. Most people who said they were in crisis report that their financial situation is worse than before Covid (74%)
2. Their health and wellbeing are worse than before Covid (87%)
3. Their ability to access services is worse (76%)
4. 92% report that they struggle to have access to a GP, 70% struggle to access a dentist and 42% have issues access local authority services and other health services
5. 43% of those respondents are unemployed, which is double the proportion of unemployed people among all respondents
6. Covid had a disproportionately devastating effect on people in areas of deprivation
7. There is a close synergy between practical challenges brought on by the pandemic and mental health issues, particularly anxiety and isolation
8. Stigma is a significant barrier to those in need accessing the support that is available

### Cost of Living

This research was undertaken post covid but before the current severe cost of living crisis. The price cap has increased in April 2022 and again significantly in September 2022. Aligned with this is a massive increase in all prices and which will considerably worsen the situation for the people we spoke to. CPAG has issued research estimating that around half the UK population will be in fuel poverty by January 2023<sup>1</sup>

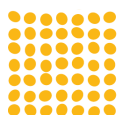
<sup>1</sup> <https://cpag.org.uk/news-blogs/news-listings/fuel-poverty-updated-estimates-uk>



## Recommendations

To address this we recommend that

1. A cross sector East Ayrshire Task Force be set up to address the adversely negative situation that areas of relative deprivation find themselves in in East Ayrshire
2. A Local Authority Covid Economic Recovery Fund be provided in innovative ways to fund vital public services delivered by local community anchor organisations to meet the needs identified in this report. Direct funding of trusted partners should be preferred over a competitive process.
3. Health agencies come together to consider how to improve access to basic health services (GP and Dental appointments etc.)
4. Mental health services are properly promoted, resourced, available and accessible
5. A collaborative approach is taken to focus on those most vulnerable to negative events such as covid which is now compounded by the cost of living emergency. This will include, but is not restricted to;
  - Working Families – those who have limited disposable income now struggling with the “Cost of Living Crisis”
  - Elderly and people with long term limiting health conditions
  - Unemployed or underemployed
  - Single Occupancy Households
  - Lone Parents
6. There is an equitable re-distribution of East Ayrshire Council’s Community Welfare resources (staffing and services) to increase and improve access and availability for the most vulnerable residents particularly living in rural communities



# 1. Introduction and Background

## 1.1 Background and Original Drivers

The coronavirus pandemic has hit communities hard right around Scotland. Some people and organisations have done well while others, often those with less resources in the first place, have done less well. A consortia of East Ayrshire organisations came together in early 2022 to identify the impact of the pandemic on people in their communities and identify the best way to support people to recover and thrive.

## 1.2 The Consortia

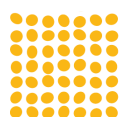
The partnership is made up of:

- New Cumnock Development Trust
- East Ayrshire CVO (the Third Sector Interface) supporting the third sector across the region
- Yipworld, based in Cumnock but serving a wider area
- Auchinleck Community Development Initiative, including service provision in Muirkirk, Catrine and Logan
- The CORRA Foundation
- The Zone in Dalmellington, working across the Doon Valley
- The SKY project, supporting children and families

## 1.3 Methodology

The key methodology was to undertake a survey face to face using trained local volunteers and staff in the partner organisations. This was highly resource intensive but enhanced the qualitative nature of the research and the validity of the results. The process can be summarised as follows:

Stage 1	Familiarisation with the project and training of local researchers in research methodology
Stage 2	Support to co-design the research and work together to construct the survey
Stage 3	Working face to face in communities to deliver 2089 separate surveys across the whole rural coalfield area
Stage 4	Analysis of that survey
Stage 5	Consideration of case studies, stories of individuals met during the research and listening phase
Stage 6	Draft report, presented to invited guests and the general public at an event in Auchinleck
Stage 7	Final Report
Stage 8	Formal launch



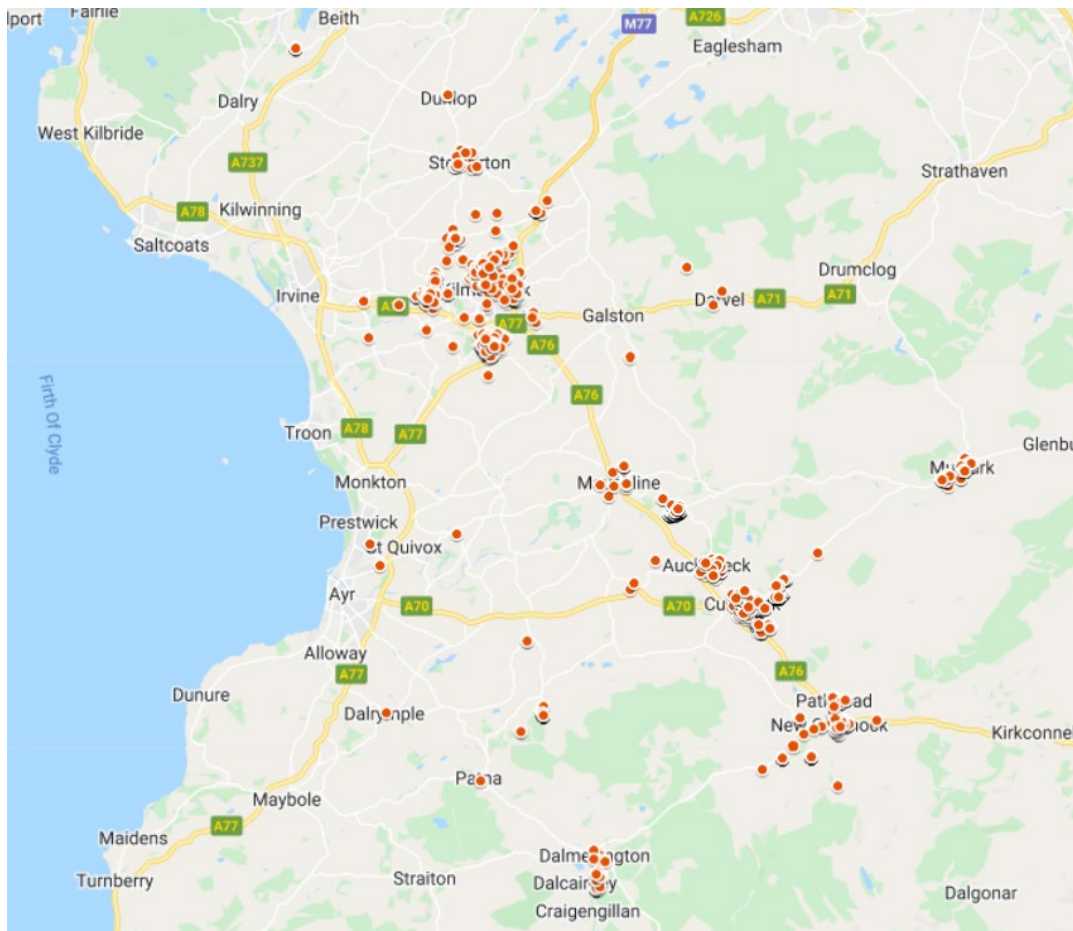
## 2. Full Survey Analysis

### Overview

2,089 people participated in the survey from October 2021 to April 2022. The survey received over 6,000 comments to the open questions. Every single comment has been read before being analysed and organised in categories. The categories were developed organically, based on the main themes emerging from the comments.

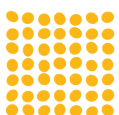
### Demographics

The map below shows the location of the 2,020 participants who shared their postcodes.



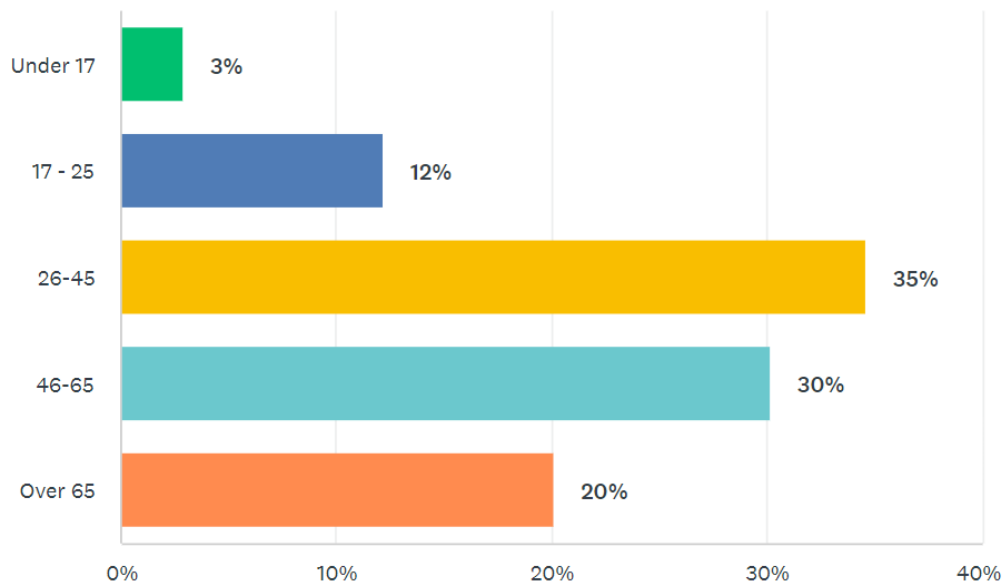
### Age of respondents

The survey has a good response rate across all age groups apart from under 17s. 3% of respondents are aged under 17, 12% of respondents are aged 17-25, 35% of respondents are aged 26-45, 30% of respondents are aged 46-65 and 20% of respondents are aged over 65.





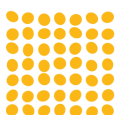
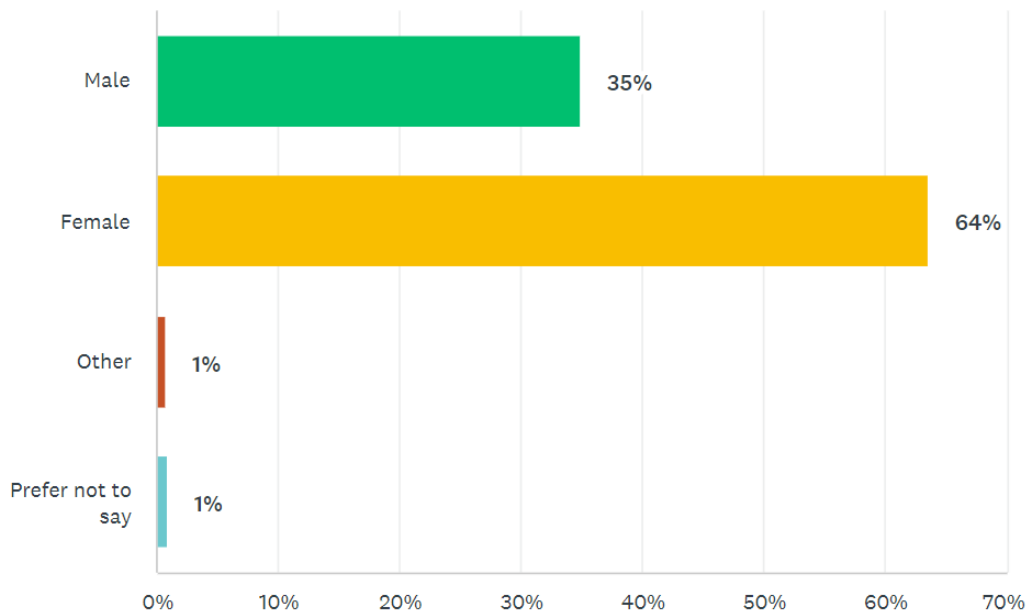
Answered: 2,071 Skipped: 18



## Gender

Around two thirds of respondents (64%) identify as female. Around one third of respondents (35%) identify as male. 1% of respondents do not identify as male or female and 1% of people prefer not to say.

Answered: 2,058 Skipped: 31



## Employment status

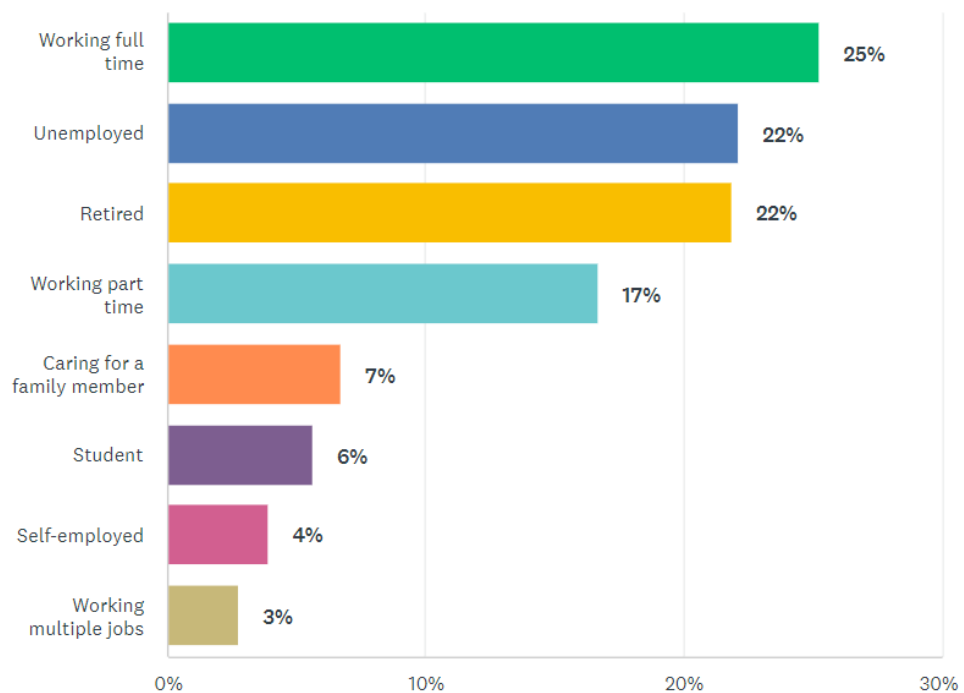
Respondents were asked about their employment status and were able to select as many options as they want.

In total, 49% of respondents are in some form of employment. This includes 25% of respondents working full time, 17% working part time, 4% being self-employed and 3% working multiple jobs.

22% of respondents are retired, 6% are students and 7% of respondents are carers.

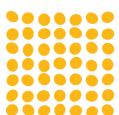
## Are you...? (Tick all that apply)

Answered: 2,069 Skipped: 20



## Carers

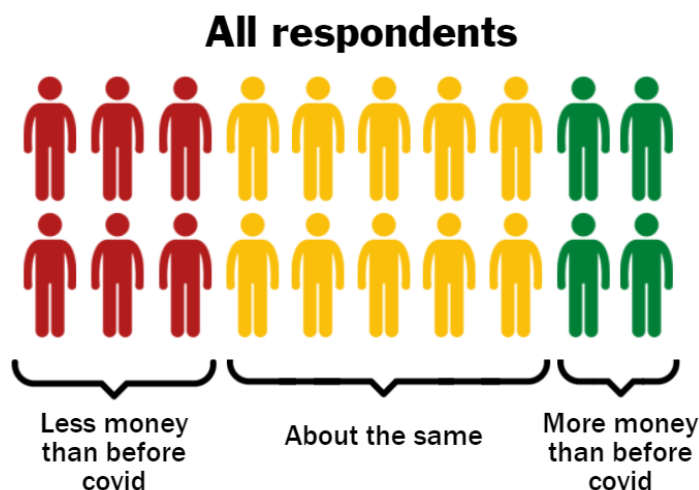
7% of respondents (139 people) are caring for a family member. The majority of carers do not work or study. However, 6% of carers who participated in this survey also work full-time, 5% work part-time, 4% are self-employed, 4% are students and 2% work multiple jobs.



## Finances

### Effect of the pandemic

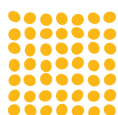
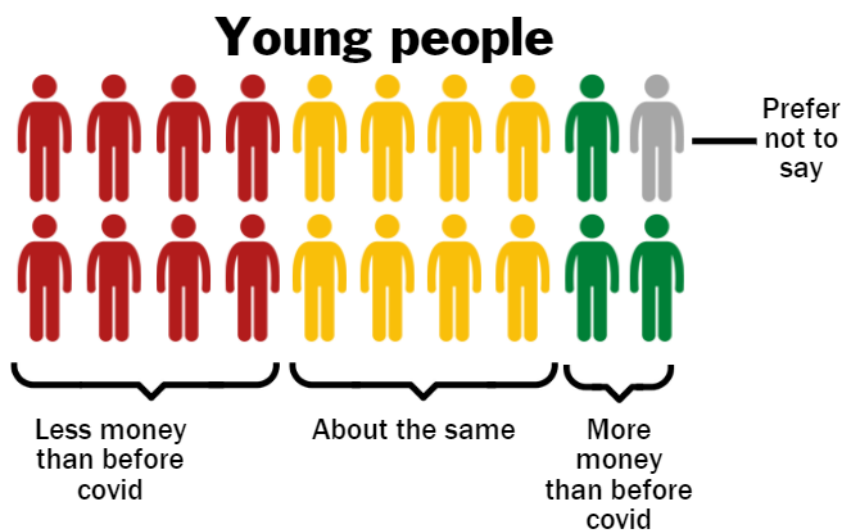
Participants were asked how the pandemic has affected their finances. 5 respondents out of 10 (49%) say they “have about the same”. 4 respondents out of 10 (38%) say they have less money than they had pre-Covid. 1 respondent out of 10 (10%) report having more money now than they had pre-Covid. 3% of respondents preferred not to say.



### Young people's finances

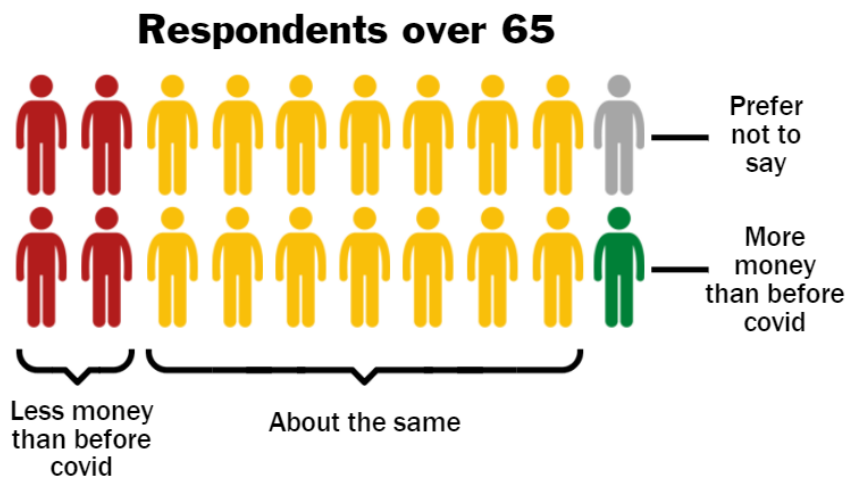
The different age groups have been impacted differently by the pandemic.

Young people aged 17-25 have been the most affected financially by the pandemic. Only 42% of young people say they have about the same as before Covid. 40% of young people have less money than they had before Covid. 15% have more money than they had before, and 3% preferred not to say.



## Older people's finances

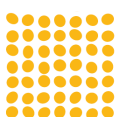
Older people have been the age group the least impacted by the pandemic. More people aged over 65 have as much as before and less people have more or less than before the pandemic, compared to other age groups. 70% of people aged over 65 say they have about the same as before the pandemic. 21% have less money than before, and 6% have more money than before. 3% preferred not to say. Despite being less affected than other age groups, the responses still indicate that 2 people aged over 65 out of 10 now have less money than they had before the pandemic.



## Financial worries

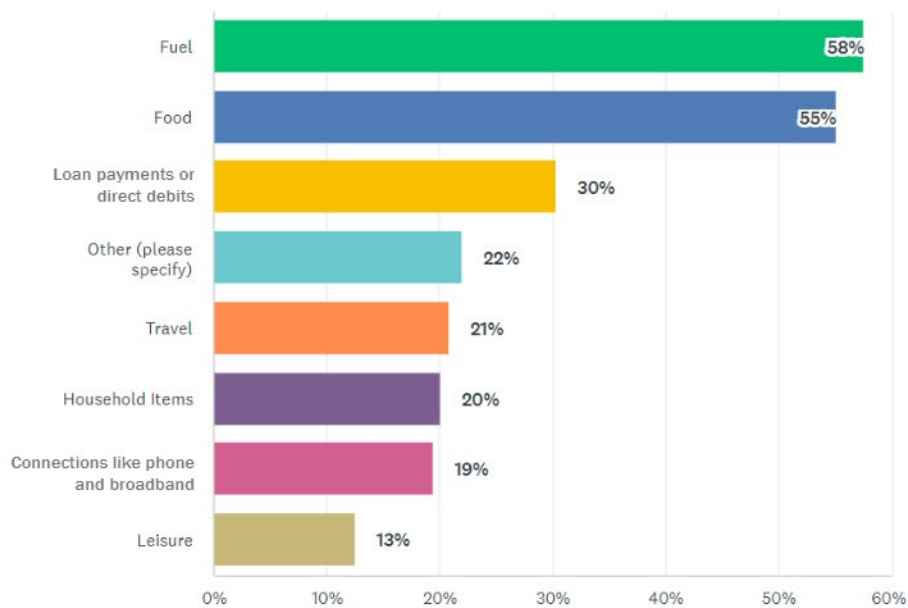
Respondents whose finances were negatively affected by Covid were asked to select their main financial worries.

1,596 people responded to this question to list their financial concerns. This is significantly higher than the 786 people who reported having less money than before Covid in the preceding question. This indicates that hundreds of respondents may have financial worries despite reporting not having been negatively affected by the pandemic.



## If you feel your finances have been negatively affected, what are the biggest worries for you?

Answered: 1,596 Skipped: 493



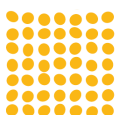
The two principal issues for respondents are affording fuel and food. 58% of respondents who have financial issues say they worry about fuel and 55% worry about food.

30% of respondents with financial issues worry about loan payments and direct debits, followed by 21% who worry about travel, 20% about household items and 19% about connections (such as phone and broadband).

Leisure is the option that the respondents worry the least about. Only 13% of respondents with financial issues worry about leisure.

### Additional financial worries

In this question, respondents were invited to comment on the other financial worries they have. 352 people commented on this question. Most respondents commented to say “Not applicable” as they do not have financial issues. Among those who commented on their issues, the two main concerns are that the price of “everything” is going up, and that heating and electricity bills are increasing. 13 respondents also worry about being unable to afford to go out with friends and to afford extracurricular activities for their children.

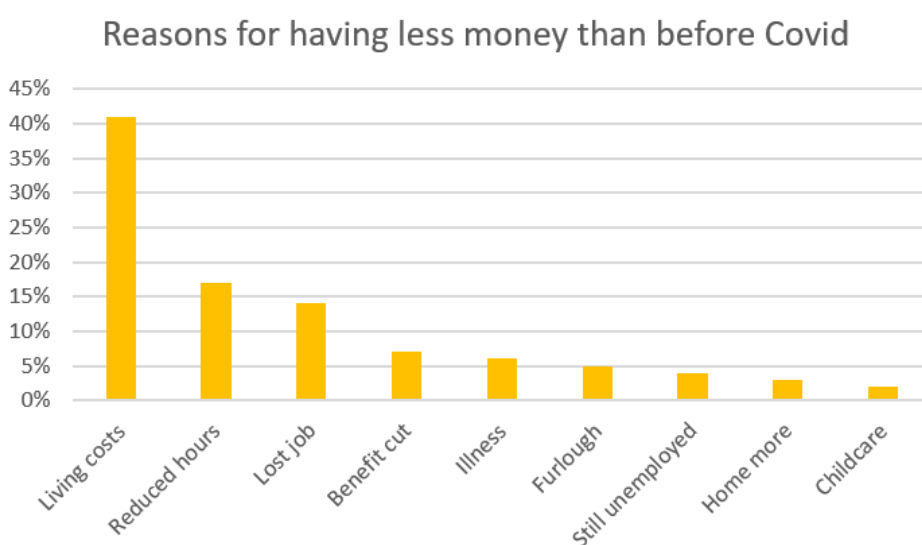


## Comments on finance

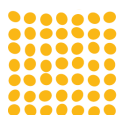
Respondents were invited to comment on the ways in which the pandemic has affected their finances. 792 people commented on this question. The comments were separated in categories of respondents who reported having less money, more money, and about the same as before Covid. The main themes are shown in graphs.

### Comments: less money than before Covid

Among the respondents who report having less money than before Covid, two main causes of financial stress emerge from the comments. Those are the rising costs of living and the difficulty to maintain sufficient income through employment during the pandemic.



- 41% of respondents who are worse off than before Covid say they struggle because of the rising costs of living. This includes pensioners who did not have financial issues before but are now struggling due to the increase in costs. The two key issues cited are the increasing costs of heating and electricity, and the increasing cost of food. Some respondents report being unable to afford to heat their house and having started to rely on food banks.
  - “Key worker so I’ve had to go to work all through. Wages still same as last year as I get minimum wage. Obviously have less money now due to rising energy costs.”
  - “Costs have risen on everything from car insurance, diesel, food and utilities.”
  - “I’m struggling to meet costs with my pension whereas I was meeting things fine before.”
- 35% of respondents who have less money than before Covid cite the difficulty to access and maintain sufficient employment as their main issue. Indeed, 17% of respondents to this question suffer from reduced work hours or lower pay, 14% lost



their job due to the pandemic and 4% were unemployed and looking for a job before Covid and still have not found a job.

- “My husband lost his job at the beginning of the pandemic, so it was difficult at first, he has a new job now which makes things easier but his pay is less than it was.”
- “My business has had to stop trading as a result of COVID.”
- “My hours were reduced due to limiting the number of people in the office. Office was closed for 3 months.”
- “Lockdown meant I couldn't work as much overtime.”
- 7% of respondents have less money than before Covid due to a decrease in their benefits.
  - “My universal credit has been cut after Covid and I am really struggling.”
- The other issue cited by 5% of respondents was to have been furloughed during the pandemic. Some of them say they have needed to use their savings as a result.
  - “I have less money due to being on furlough during the first lockdown.”
  - “Was furloughed and then working reduced hours during pandemic.”
- Finally, 3% of respondents say they are home more than before Covid, which is associated with higher heating bills, and 2% were having difficulties finding childcare to be able to work due to the pandemic restrictions.

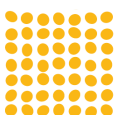
*“I now have less money for leisure activities due to all other prices going up.”*

*“You try to live on a state pension these days, bloody joke.”*

*“The cost of living has gone up considerably and wages have remained the same. The cost to heat your home whilst working from home can't be recovered from the employer and the amount tax deductible is nowhere near enough to cover costs.”*

*“Unemployed for 8 months, struggling to meet living costs as inflation rising but income is not.”*

*“Everything is more expensive!”*



*"I'm struggling to meet costs with my pension whereas I was meeting things fine before."*

*"The cost of petrol, food and gas and electric is drastically impacting our finances."*

*"I am a hairdresser and lost lots of work."*

*"Had to use savings."*

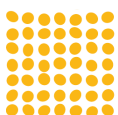
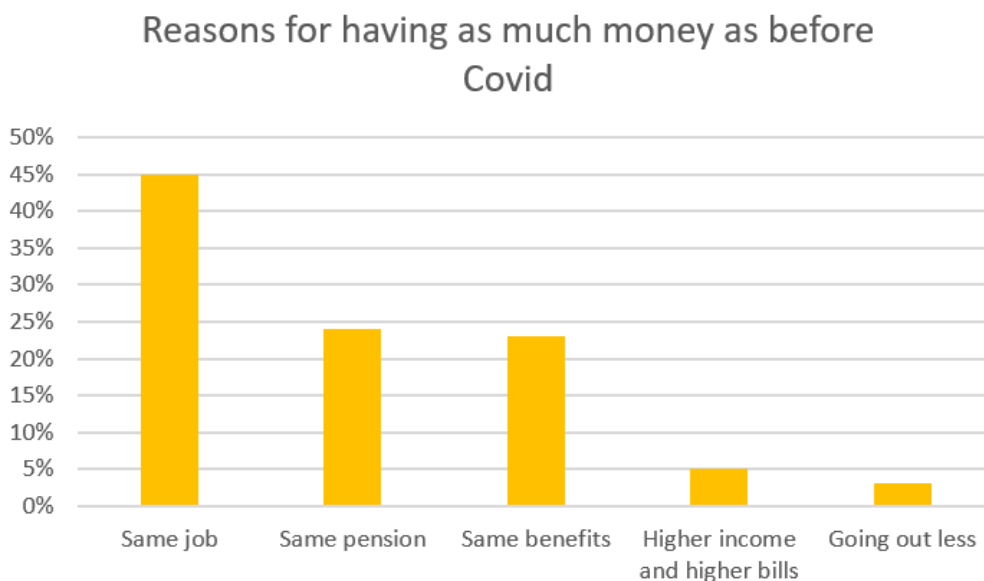
*"Had to go part time as I couldn't afford the childcare."*

*"Costs have risen on everything from car insurance, diesel, food and utilities."*

*"At home more so as heating and energy prices have gone up."*

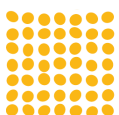
#### Comments: As much money as before Covid

314 respondents commented on why they feel like they have as much money as before the pandemic. For the majority of comments, the reason cited is that they have kept the same income (from the same job, benefits or pension) without perceiving an increase in costs of living. For a minority of people who have as much money as before Covid, they say that working more hours or going out less has compensated for the rising costs of living.



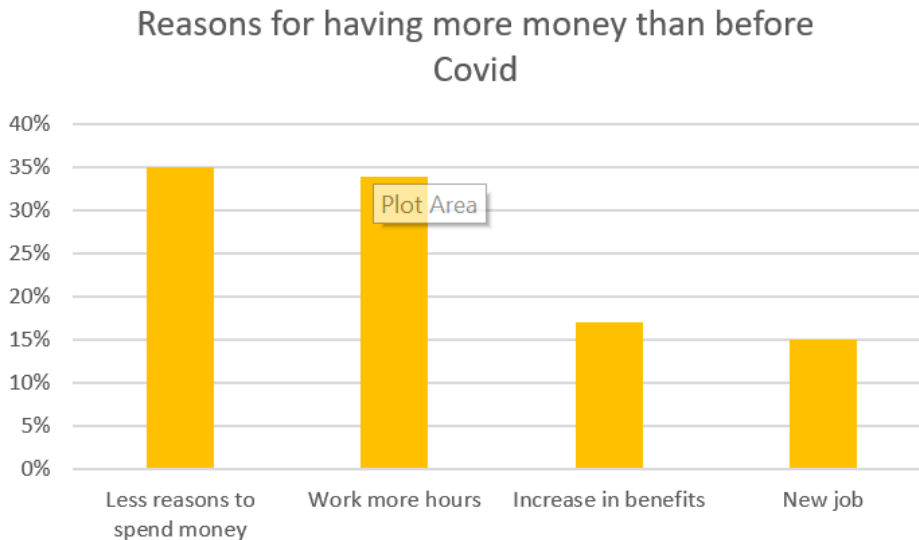


- 45% of respondents who have as much money as before Covid have maintained employment and receive the same salary as they did before Covid. In addition, they did not notice a significant change in living costs.
  - “Have managed to keep working during pandemic.”
  - “We have been fortunate that the pandemic has not affected us financially. All our household has continued to work.”
- 24% of respondents receive the same pension as before Covid, without perceiving a significant change in living costs.
  - “Pension has been stable.”
  - “Income the same due to pension still coming in.”
- 23% say they have as much money as before Covid while receiving benefits. Most of them report receiving as much in benefits while not spending more, while some report that the increase in universal credit during the pandemic was equivalent to the increase in costs of living.
  - “Benefits basically unchanged.”
  - “Slight UC uplift but most things are now more expensive.”
- 5% of respondents who have as much money as before Covid report earning more in employment while spending more on living costs. Those people say they are working more hours, which only compensates the increased cost of bills and food they are facing.
  - “I have the same as I have taken on extra work to compensate for soaring bills.”
  - “Working more hours in my jobs but spending more cash (things are more expensive).”
- Finally, 3% of respondents say that they have a similar income but go out less due to Covid restrictions, which compensates the increase in costs of living.
  - “Not seeing my pals so don't go out and spend much.”
  - “Can't get out anywhere to spend too much money.”

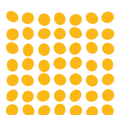


## Comments: more money than before Covid

116 respondents commented on their reasons for having more money than before the pandemic. The main reasons are having less opportunities to spend money than before Covid, working more hours, having had an increase in benefits, and having a new job.



- 35% of respondents who report having more money than before the pandemic say that it is because they have less reasons to spend money due to the restrictions.
  - “Because of restrictions I didn’t travel as much or visit restaurants and pubs. Therefore, I saved quite a bit.”
  - “We didn't have the same expense as no kids’ activities, days out and holidays.”
- 34% of these respondents have money because they have been working more hours or multiple jobs during the pandemic. This is either due to them being offered the opportunity to work more (especially for key workers) or voluntarily looking for additional employment due to the rising costs of living.
  - “I work in the hospital and always someone off sick with Covid so get more shifts.”
  - “Working three jobs to earn slightly more cash than pre-pandemic.”
  - “More overtime.”
- 17% of respondents who report having more money say it is due to an increase in benefit payments during the pandemic.
  - “Increased universal credit”
  - “UC uplift so slightly more money.”
- Finally, 15% of respondents have more money as they now have a new job.
  - “Started a new job.”
  - “New job after lockdown.”



*“Slightly more money but prices are shooting up!”*

*“UC uplift wiped out by price increases.”*

*“Benefits have been relatively unaffected during pandemic.”*

*“Picked up more shifts through staff absences but pay more in bills.”*

*“Managed to save since I wasn't able to go out much.”*

*“I found employment during lockdown.”*

*“Working two jobs so I have tiny bit more money than pre-pandemic.”*

*“Increase in benefits but not really out to spend cash as carer.”*

*“More money as less things to go out and spend on with my grandchildren.”*

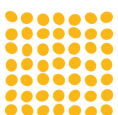
*“More orders for work since people stay at home more.”*

*“Saving money on transport.”*

*“Working more hours (essential worker) so more cash than pre-covid.”*

*“I learned more about finances during lockdown and made better choices with money.”*

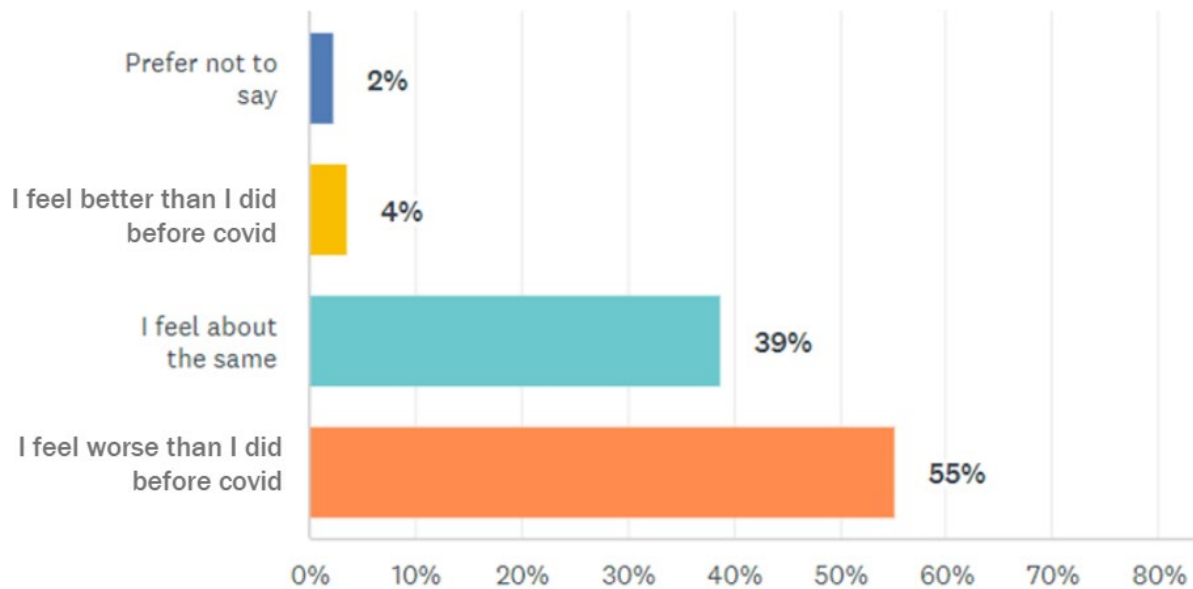
*“Covid winter fund from Uni helped.”*



## Health and wellbeing

How has the pandemic affected your feelings of health and well-being?

Answered: 2,078 Skipped: 11



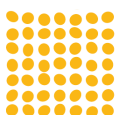
The pandemic has had a negative impact on most of the respondents to the survey, across all age groups.

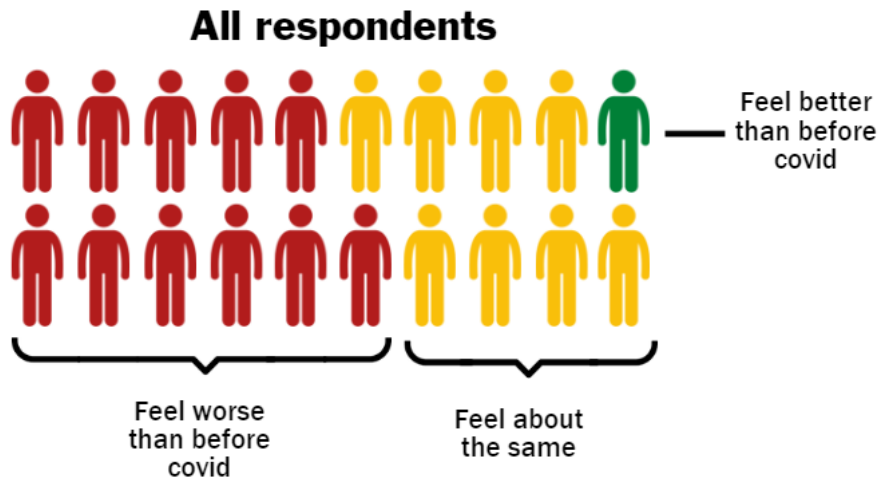
55% of respondents say they feel worse than they did before Covid. This is aligned across all age groups, with 52% to 57% of people aged under 25, from 26 to 65, and over 65 who say they now feel worse than they did before Covid.

39% of respondents feel about the same as they did before Covid. This is similar across all age groups too, only varying from 37% for those under 25 and from 26 to 65, to 45% for respondents aged over 65.

Few respondents feel better than they did before Covid. Indeed, only 4% of all respondents report feeling better now. This is similar across age groups. 6% of respondents aged under 25 feel better, 4% of those aged 26 to 65 do, and only 1% of respondents aged over 65 feel better now than they did before Covid.

Finally, 2% of respondents preferred not to say, and 11 respondents (less than 1%) skipped the question.



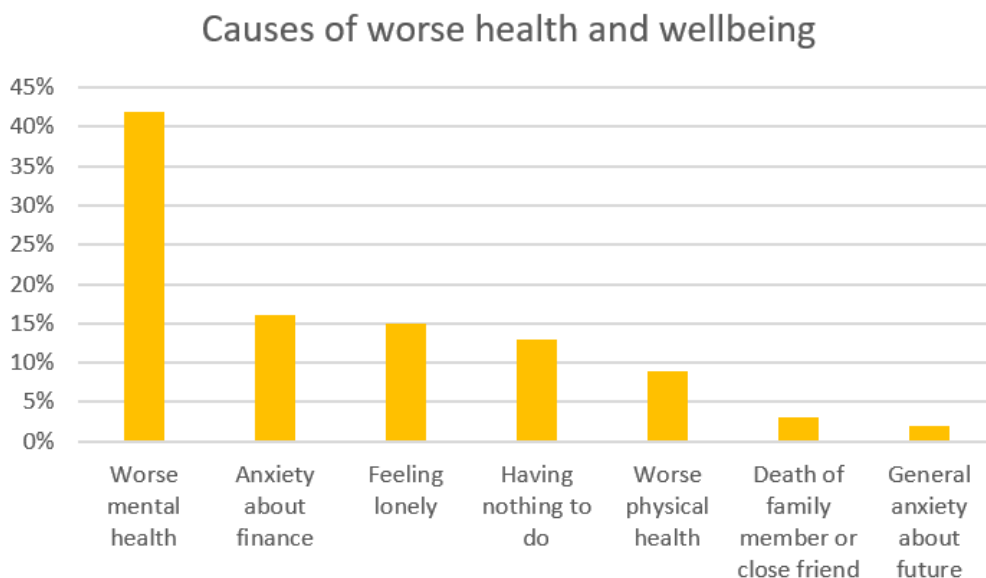


## Comments on health and wellbeing

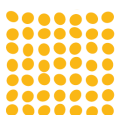
All respondents were invited to comment on the evolution of their health and wellbeing since the start of the pandemic. 828 people commented on this question.

### Comments: worse health and wellbeing

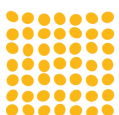
620 respondents who reported feeling worse than before Covid commented on the impacts and the reasons why they feel this way. The main issue for having worse health and wellbeing than before Covid is a deteriorating mental health, including depression.



- 42% of people who feel like their health and wellbeing have been negatively affected by Covid report worsened mental health. Some of them have significant mental health issues and are not receiving support. The issues include very high levels of anxiety and increases in addiction.
  - “Mental health was hit hard.”
  - “Mental health has suffered with feelings of apathy and some anxiety.”



- “I have anxiety, stress and depression.”
- “Seems quite bleak and no end in sight.”
- “Waves of feeling uncertain and low confidence.”
- “Really depressed.”
- 16% of respondents report a significant level of anxiety due to their financial issues.
  - “I have 6 children and struggle financially, which makes me anxious. I have had to depend on food banks. My children are embarrassed that I can’t buy them all the things their friends have.”
  - “I struggle to live financially”
  - “I feel worse as I could afford to live on what I had before covid. I now struggle daily to feed my children.”
  - “I feel worse as I am fed up with everything going up in price and how I am expected to live on the same as I did pre covid.”
- The third main issue highlighted is a feeling of loneliness among respondents. 15% of respondents with worsened health and wellbeing report feeling lonely.
  - “I have felt isolated during the pandemic and these feelings have carried on. I feel that the community spirit has gone in the area.”
  - “Loneliness stuck in doors.”
  - “Being stuck in the house and feeling isolated. Very tough not being able to see people. Lucky to have a kid to keep me entertained.”
- 13% of respondents suffer from having a feeling of having nothing to do.
  - “Not allowed to do anything.”
  - “So many restrictions have made it difficult to go out and enjoy yourself due to constantly worrying.”
- 9% of respondents report having faced physical health issues which makes them feel worse than before Covid. Some of these health issues are directly related to Covid, while other may not be.
  - “Long covid.”
  - “Jab caused health issues.”
  - “Suffered from 3 serious illnesses over the course of covid.”
  - “Keep taking chest infections and breathing really bad.”
- 3% of respondents have been strongly affected by death of family members or close friends, which had a negative impact on their mental health.
  - “2 deaths in the family since covid.”
- Finally, 2% of respondents suffer from a general anxiety about their future and their family’s future, as covid has generated a feeling of uncertainty.
  - “Worried about my grandchildren and their future prospects.”
  - “Worried about the future.”



*“I can’t seem to get over lockdown and am nervous about going back out into the world.”*

*“My mum cannot afford to do the things we did before, and she is drinking a lot because she is sad. My wee brother is only 5 and I need to look after him.”*

*“Everything is so negative it is hard to have a positive outlook.”*

*“I have been on my own caring for parents with no help, my mental health is suffering badly.”*

*“I have 6 children and struggle financially, which makes me anxious. I have had to depend on food banks. My children are embarrassed that I can’t buy them all the things their friends have.”*

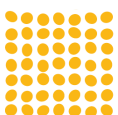
*“I feel worse as I am fed up with everything going up in price and how I am expected to live on the same as I did pre covid.”*

*“I have felt isolated during the pandemic and these feelings have carried on. I feel that the community spirit has gone in the area.”*

*“Worried about my grandchildren and their future prospects.”*

*“I no longer have the social circle I did and living in a rural community my opportunities to get out have changed, mainly due to restrictions in public transport.”*

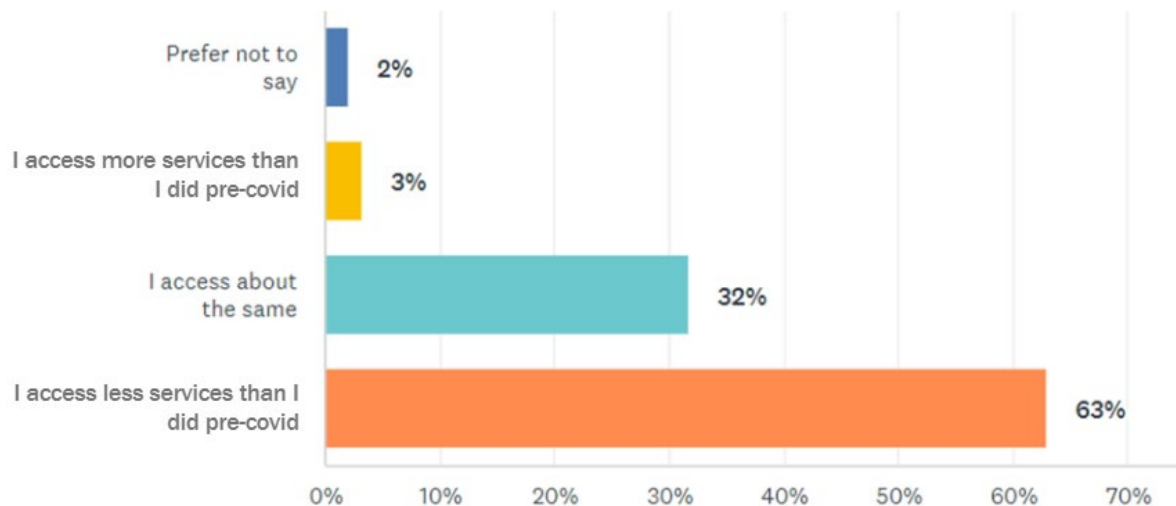
*“My anxiety and addiction have heightened over the past year.”*



## Access to services

How has the pandemic affected your ability to access services?

Answered: 2,068 Skipped: 21

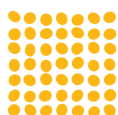
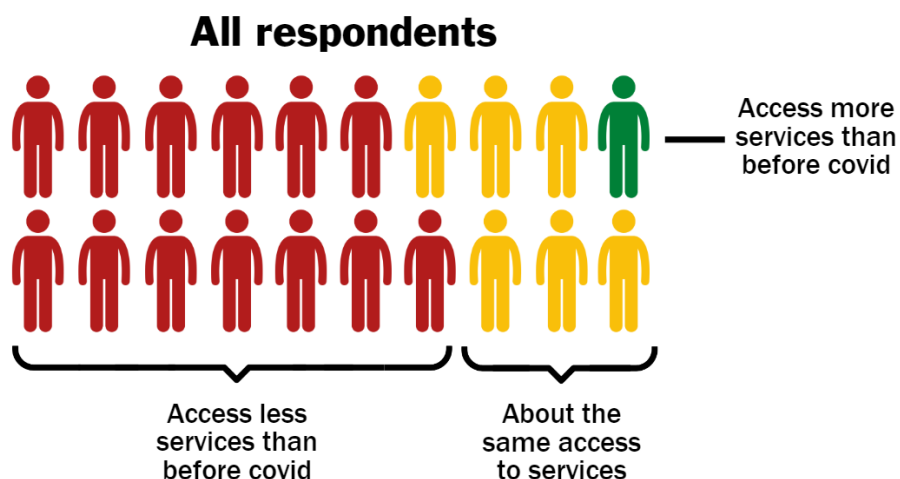


The pandemic has had a negative effect on access to services for most respondents, across all age groups. Responses are similar across all age groups, with less than 7% difference between the average and the answers of each age group.

Around two respondents out of three (63%) say that they access less services than they did before Covid. When looking at specific demographics, 56% of young people aged under 25, 66% of people aged 26-65 and 59% of people aged over 65 report accessing less services than before Covid.

Around one respondent out of three (32%) of respondents say their access to services is about the same as before the pandemic. There are limited variations across age groups. 37% of young people aged under 25, 29% of people aged 26-65, and 37% of people aged over 65 say they access a similar access to services as before the pandemic.

Only 3% of respondents say they access more services than before the pandemic, including 4% of young people under 25, 4% of people aged 26-65, and 2% of people aged over 65.



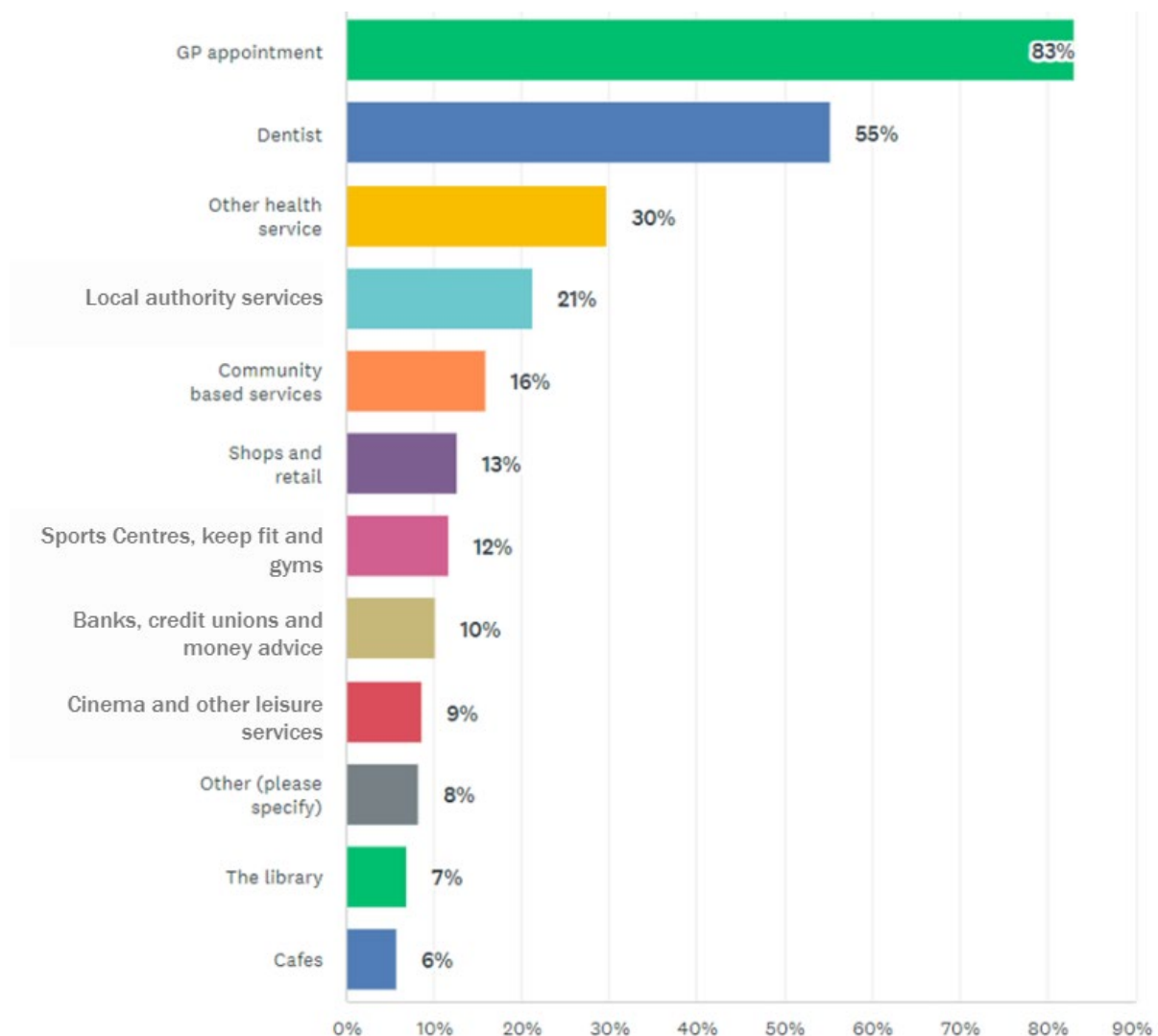


## Services less accessible

Respondents who reported a lower access to services since the start of the pandemic were asked which services they have struggled to access. There was no limit on the number of options they were able to select.

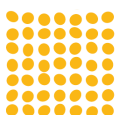
### If you access less, what is not available now that was before?

Answered: 1,661 Skipped: 428



These responses show that the access to health services has been strongly affected and is the main issue for the respondents. All the options related to health were the most widely selected.

- 83% of respondents who report a lower access to services say that access to GP appointments is lower than it was before the pandemic. In addition, 55% of respondents struggle to have access to a dentist and 30% have an issue accessing other health services.
- The second most reported issue is access to local services. 21% of respondents to this question have less access to local authority services, and 16% have a lower access to community-based services.



- 13% of respondents have a lower access to shops and retail services, and 12% report a lower access to sports centre and gyms.
- Access to other services appear to have been less affected, with 10% of respondents or less reporting issues accessing banking services (10%), the cinema and other leisure services (9%), the library (7%) and cafes (6%).

Respondents were invited to comment on other services that were difficult to access during the pandemic. The majority of comments repeated the issue of accessing GP appointments. The two other key issues highlighted in the comments were public transport, which is discussed by 12 respondents, and access to mental health services and addiction support, which is mentioned by 5 respondents.

*“Need the support of charities for wellbeing support and emergency food as I haven't been able to contact my social worker or get a GP appointment.”*

*“Apprehensive about going places and difficult to get doctors and dental appointment.”*

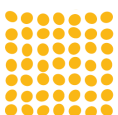
*“Can't even get doctor or dentist appointments.”*

*“It's like we don't have a GP service.”*

*“Waiting to be seen for my addiction.”*

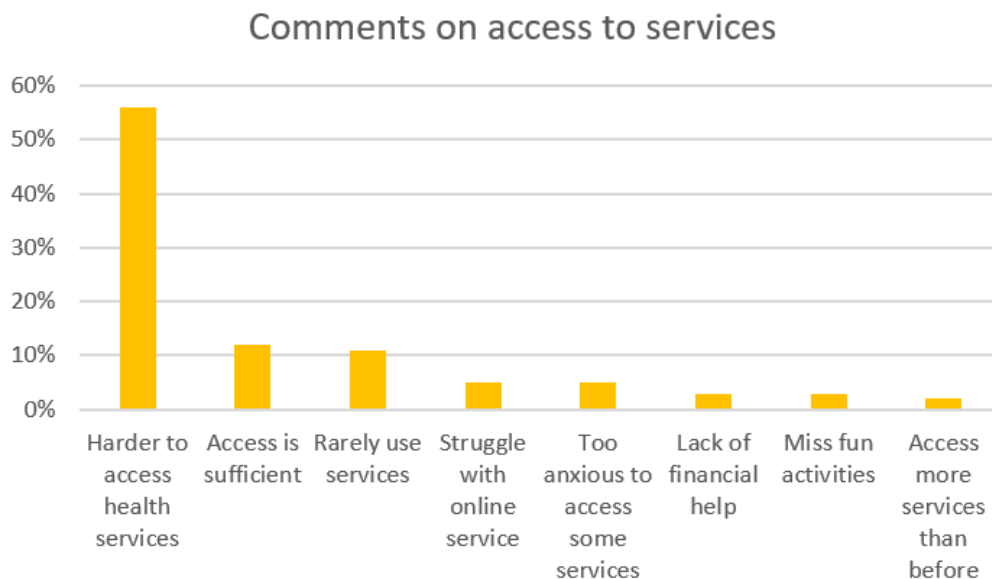
*“Stopped trying to get doctor's appointment and can't arrange dental one.”*

*“Services have been closed down during covid. Unable to get the medical tests done that I need.”*

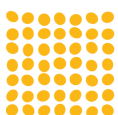


## Comments on access to services

595 respondents commented on the impact of the pandemic on their ability to access services.



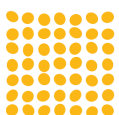
- The main concern highlighted across the comments is the same as in the multiple-choice question above: the difficulty to access health services. 56% of respondents report struggling to access local health services since the pandemic has started. The majority have issues making GP appointments and some respondents also struggle to see a dentist and to have access mental health support services.
  - “Every time I phone to get appointments they get cancelled I feel as if I am going off my head with not getting any answers to my health matters.”
  - “It's like we don't have a GP service.”
  - “Difficulty accessing dentist since early 2020. Almost three years since they've been able to see me for a check-up!”
- 12% of respondents report feeling satisfied with the services available and the level of access they currently have.
  - “Thankfully, I've had no major problems accessing services during pandemic.”
  - “Still able to access the same level of services as pre-pandemic.”
- 11% of respondents do not feel affected because they rarely used local services before the pandemic and are not trying to use those services now.
  - “Don't normally access many services.”
  - “Don't really bother with GP and stuff.”
  - “Contacts doctors if essential but tend to just get on with it.”



- 5% of respondents have significant difficulty caused by the services being switched to online or by phone. The main concerns reported are the challenge to access online services by people without access to internet at home, the need to make appointments and bookings for many services instead of “showing up” in person, and the frustration of not being able to see a medical practitioner face-to-face that could impact the quality of the health treatment.
  - “More places closed and can only get access by telephone or internet and don't have internet access.”
  - “All appointments are by telephone consultation, can't see anybody face to face.”
  - “GP has been ridiculous to access. Phone call appointments are pointless.”
- 5% of respondents say their anxiety about catching Covid and the risks associated with Covid have impacted their ability to go out and access services.
  - “Being in the most vulnerable group I will not go out during the pandemic.”
  - “Didn't want to use GP with risks.”
  - “Getting more and more anxious about leaving the house.”
- 3% of comments mention that there is a lack of services to support and advise people with financial difficulties.
  - “Couldn't get help or advice when I wasn't working, had to get food banks.”
  - “No clubs or financial advice”
- 3% of people say the main thing they are missing is the possibility to go out and enjoy fun and social activities, because there are less activities due to Covid restrictions and because of the high cost of the existing activities.
  - “There is nothing to do in the community for the elderly anymore. I feel like no one goes out anymore and I miss the social activities.”
  - “There seems to be less activities in the area than there ever has been. We have nowhere to take the kids that doesn't cost lot of money.”

2% of respondents say that they now access more services than they did before Covid. This includes joining new mental health support groups and starting new sports.

- “I now access groups for mental health.”
- “I have started groups through social prescribing. Walking groups and arts and crafts group. However, on the other hand I can't get medical or dental appointments.”



*“Even though I access services I have a level of anxiety that wasn't there pre covid.”*

*“I don't really access any services.”*

*“I have started groups through social prescribing. Walking groups and arts and crafts group. However, on the other hand I can't get medical or dental appointments.”*

*“I work most of the time so don't really access services much. But I find it difficult to get GP appointments and shopping as the bus services aren't the same now either.”*

*“Luckily, I've still been able to access most services during pandemic.”*

*“I can't get appointments and have no cash for leisure.”*

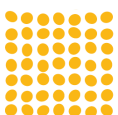
*“Every time you call the doctor you never get to see anyone.”*

*“Feel like everyone is too busy and short staffed so I don't bother anyone.”*

*“There are less activities in the community so we have less to access.”*

*“There seems to be less activities in the area than there ever has been. We have nowhere to take the kids that doesn't cost lot of money.”*

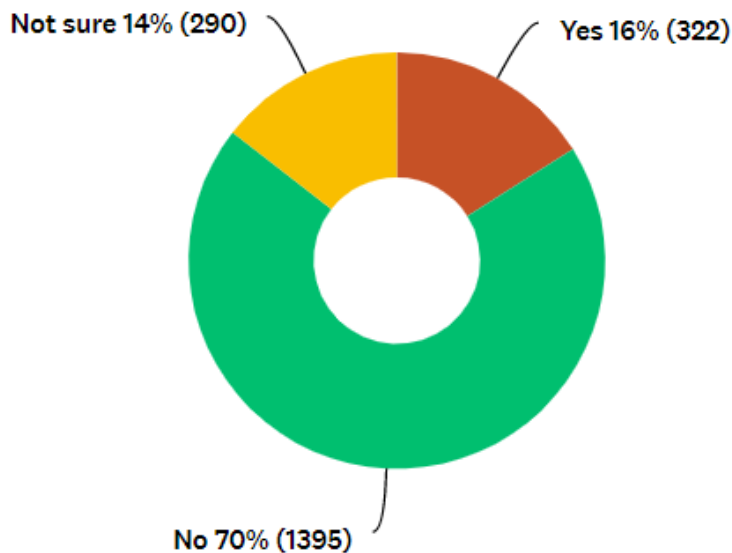
*“You cannot get an appointment with anyone I need to see citizens advice and a doctor.”*



## Serious situations and crises

### Would you call your situation right now serious or a crisis?

Answered: 2,007 Skipped: 82



Close to one in six respondents (16%) call their current situation serious or a crisis.

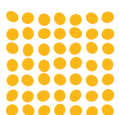
An additional 14% of respondents say they are not sure. The remaining 70% of respondents would not call their situation serious or a crisis.

#### People in a serious situation or crisis

The 16% of respondents calling their situation a crisis have several characteristics in common. The large majority of them report that their financial situation is worse than before Covid (74%), that their health and wellbeing is worse than before Covid (87%), and that their ability to access services is worse (76%). These rates are significantly higher than the averages among all respondents. In addition, 92% report that they struggle to have access to a GP, 70% struggle to access a dentist and 42% have issues accessing local authority services and other health services, which is higher than for other respondents.

43% of those respondents are unemployed, which is double the proportion of unemployed people among all respondents. In addition, 18% of people considering their situation serious or a crisis are working full time, 15% are retired, 11% are working part-time, and 10% are caring for a family member.

People considering their situation serious or a crisis are equally spread among all age groups, with about 15% of respondents from each age group describing their situation as serious or a crisis.



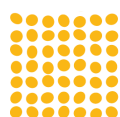
## If there was one thing we could do for you right now, what would that be?

Respondents were asked what is the one thing that could be done to help them. 1,529 people responded to this question.

350 respondents said that they do not need anything, or that they do not know what could help them right now. The other responses were analysed by key themes. When relevant, multiple themes were selected for a single comment.

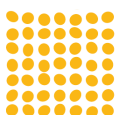
Main concepts	Percentage of responses	Sample comments
1. Financial support	34%	<i>"I am having to eat less than before to pay other bills. I go to bed hungry and it's affecting my mental health."</i>
2. Returning to "normal"	12%	<i>"Make everything go back to normal."</i>
3. More things to do	9%	<i>"Arrange some activities for the elderly to meet up and chat or even arrange activities where we could volunteer so that we could get out more and integrate with the community more."</i>
4. Activities for children and teenagers	9%	<i>"Put on local youth clubs and sports activities that we could go to in order to make friends and socialise."</i>
5. Access to health services	9%	<i>"Get me a hospital appointment and the support and care that I need."</i>
6. Employment	7%	<i>"I'd love to get a full-time job which could stabilise my family for a brighter future."</i>
7. Mental health services	7%	<i>"Having someone to talk to sometimes when things are tough."</i>
8. Local services	6%	<i>"More help with filling out forms for benefits."</i>
9. Housing	3%	<i>"Better house with no dampness."</i>
10. Public transport	1%	<i>"Make buses run every hour."</i>

- 34% of respondents who want help say they need financial support. This includes respondents asking for food parcels and help to be able to afford bills and fuel.



Some of these respondents are currently in employment but say that they need support because their current income is not enough.

- 12% of these comments are about returning to “normal”. These respondents mostly commented that they want “covid to go away” and “covid to disappear” to get “back to normal.”
- The third most requested thing is to have more to do, in 9% of these comments. These comments refer to activities for adults and older people to have the opportunity to have social interactions and get out of the house. Some of these comments propose a variety of activities, including LGBT groups, sports classes, a swimming pool and community events.
- 9% of respondents who commented ask for more activities for children and young people. For some of the respondents, one key aspect of these activities should be affordability and accessibility for all families. Some of the activities proposed include baby and toddler groups, sports clubs for kids, theatre facilities, a soft play space, and a space for young people to hang out together.
- 9% of comments are about having better access to health services. Most of those comments ask to make more GP appointments available, and some comments also highlight the challenges of getting appointments with specialist medical professionals such as opticians.
- 7% of respondents to this question say that they would like support to access employment. The three main points are having access to employment for people who are unemployed, being able to work more hours a week, and having access to full time employment.
- 7% of the comments refer to a lack of mental health support and issues with addiction locally. Some have been especially affected by the pandemic which has made them feel isolated, anxious and depressed. In addition, some respondents report that their increasing mental health issues have worsened their addiction and they would like to be able to access more support. Some of the resources requested include support for addiction, a walk-in mental health clinic and mental health facilities specifically for young people.
- 8% of the comments ask for more local services. These include a wide variety of requests, including a general support hub or “go-to” point to access a variety of services including financial support, help with benefits forms, resources for local businesses, and more information about the types of support already available locally.
- 3% of the comments are about wanting better quality housing, including a few mentions of issues of dampness.
- 1% of respondents to this question say there is an issue with public transport locally and would like more frequent and more affordable buses.





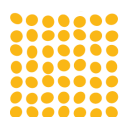
## If you had a magic wand, what would you wish for your town?

Respondents were asked what they would wish for their town. 1,795 people responded to this question.

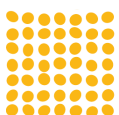
92 respondents said they do not know or do not think the area needs to change. In addition, 189 respondents say that they would like to go back to “normal” as before Covid, as highlighted in the preceding question. The other responses were analysed by key themes. When relevant, multiple themes were selected for a single comment.

Main concepts	Percentage of responses	Sample comments
1. Activities for children and teenagers	18%	<i>"More services for young people in all respects. Breakfast clubs at school running again and indoor (free) places for them to meet and hang out with friends."</i>
2. Environment	14%	<i>"Improve the state of the houses and surrounding area - whole place is a mess."</i>
3. Shops	12%	<i>"More shops and retail facilities."</i>
4. Community services	11%	<i>"Somewhere that we could go to receive the support we needed. Whether that be food packs, or just a group where we could discuss how things are affecting us mentally."</i>
5. Things to do	10%	<i>"More activities and outdoor things for people to get use to going outside again."</i>
6. Employment	10%	<i>"Bring more jobs and industries to the area."</i>
7. Health	10%	<i>"Medical services to be running. better access to appointments."</i>
8. Finance	6%	<i>"Local help for those struggling with food and fuel costs."</i>
9. Sports	4%	<i>"Facility with a variety of affordable outdoor activities i.e., Tennis courts, climbing wall and golf range and other activities that would encourage people to be active."</i>

- The first most requested thing for the local area is more activities for children and teenagers. This is mentioned in 18% of comments to this question.
- The second most requested change is an improvement in the local environment, in 14% of comments. The first complaint in this topic is the derelict buildings in the town centre that make the place less enjoyable to live in and less attractive for visitors. The various requests for change include renovating the facades of the buildings in the town centres and destroying the oldest buildings to build new ones. The other complaints mention issues of dog mess and litter on the street.



- The third topic is encouraging more shops to open locally, in 12% of comments. The majority of these comments ask for more shops and more diversity in the types of shops available. Some of the shops requested in comments are low-cost food, clothes and household items shops, including Primark and B&M.
- 11% of comments ask for more community services, including local services and opportunities for local people to come together as a community. Most of these respondents would like to see a stronger community spirit locally. Many of them say that developing a community hub would help to make connections with local people and access support services. In addition, some of these respondents ask for more local services and support.
- 10% of respondents want more things to do locally. Many of the respondents only commented to say they want more things to do, while others listed some ideas. The ideas listed include a library, a night club, a cinema and outdoor activities.
- 10% of respondents want more support to access employment, including more working hours and full-time employment.
- 10% of these comments ask for more support with their health and a better access to local health services.
- 6% of respondents want better access to finance support and finance advice.
- Finally, 4% of respondents want more sports facilities locally that are affordable. The ideas proposed include a swimming pool, a skate park and an affordable gym.



## 3. Case Studies

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### 3.1 Introduction

The following case studies were recorded by the community researchers as qualitative stories to complement the data analysed in the survey. They serve to bring life to the findings and are chosen from across the region. All individuals are simply referred to as X and all identifying detail has been removed to ensure they are anonymised.

### 3.2 Case Studies

#### Case Study 1

A is in his 70's, lives in a ground floor flat by himself and suffers from poor health and cataracts in both eyes (rendering him essentially blind). He was struggling both physically and mentally and he felt that he was a burden to both friends and family because of his poor health. As a result, he tried to distance himself from them. He was unable to bathe himself in his own home, as the bath was too high for him to get in and out of and due to his eyesight, he was at risk of slipping and falling. He instead had to visit a family members house to use a walk-in shower which was easier to access. That family member also helped with cooking as he was scared to use the stove in his current condition. He was due to have surgery on one of his cataracts but because of lockdown it has been continually delayed.

When the researcher met him, he was only receiving his state pension and struggling to get by. The project staff arranged for an Occupational Therapist to visit to assist in making his home more accessible with additional handrails, a wet room, and an orthopaedic bed. The staff also supported him to apply for Attendance Allowance so that he could pay a carer and he also was supported to secure the pension credit element to help ease the financial burden.

#### Case study 2

B is known to the organisation and has already received support. He recently and suddenly lost his brother and was very concerned about how he was going to pay for the funeral as he had no savings nor did his late brother. The project staff spoke to local funeral directors to see what the best options would be and helped to arrange the funeral support payment which can cover the funeral costs. The staff continued to support A through the entire process, offering emotional as well as practical support.

B was supported with his mental health, and he was very happy to be able to give his brother a dignified funeral.

#### Case Study 3

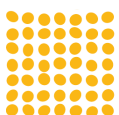
C is a 73-year-old widow who found herself “stuck” after her husband’s passing during the pandemic.

When we first met C, she rarely left the house due to her pain, and a host of physical health problems. She was also wary of leaving her house unattended due to the “unsavoury characters” that stayed on her street. Whether perception or reality this resulted in severe social isolation.

She also expressed her loneliness, having lost her husband and being in an unfamiliar surrounding she felt trapped and isolated, with her only contact with family being the occasional brief phone call.

Contact with the project gave her someone to link in with so she did not feel so isolated. She had been given a smart phone by a family member but was unsure how to use it. The project staff arranged to have weekly “tech support” meetings after her shopping was dropped off.

C had lost confidence in herself, due to her age and condition. She just felt like there was nothing she could do for herself but realising that the smartphone was not as daunting as it seemed really boosted her mental state. This supported her to contact her family on WhatsApp, and they



sent over lots of family photos, as well as drawings that C's granddaughter had made and videos of her playing the guitar and singing. C was delighted.

Her family started to arrange for her to move nearer them and, though positive, this also caused some stress and worry. The tech support helped her to use Google Maps to virtually visit the street which she was moving to as well as the closest Post office, shops and Chemists. The move went well, and she has settled in.

#### **Case Study 4**

D required help with getting shopping and prescriptions during Covid. The project staff would either phone or visit once a week, to see how she was feeling. One day she mentioned a "computer thingy" she had received and although D was an intelligent woman, this was before the age of laptops and tablets.

The laptop she had received was from Connecting-Scotland and the project staff set up her system.

She had mentioned that she had been feeling very isolated since the start of pandemic. She told project staff that both her sons and their families live abroad, in Spain and France and that it had been years since she had seen them. The staff informed her about the video calling software available on her laptop and she was overjoyed at the prospect of being able to see her sons. Project staff are also supporting her now with shopping and other practical assistance.

#### **Case Study 5**

E is 62-year-old man who had a heart attack and was forced to stop working. Since then, he has been diagnosed with aggressive rheumatoid arthritis and has had increasing difficulties with mobility and daily living. Mr M had been advised by family, friends and health workers that he would be eligible to apply E has resisted applying for benefits due to the administrative burden.

When E first contacted us, we arranged a home visit to understand his specific situation and to explain what benefits he may be entitled to and to explain the process involved

Within 8 weeks E received word that he was to attend a PIP assessment in Kilmarnock and was very nervous about attending. Following our support, he has subsequently been awarded PIP and we have helped him to request aids to help him in his day-to-day life.

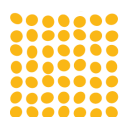
#### **Case Study 6**

While collating survey responses F got into contact with the project staff. F is a young person. When staff approached this young person to complete a copy of the survey, they identified quickly that this person was deprived in various areas. Through the initial completion of the survey, F identified themselves as someone who had suffered negatively in all areas relating to financial troubles, mental health difficulties and poor access to local services.

As staff continued to speak with F, they began to discuss how the pandemic had impacted them. At the start of the pandemic, F had lost their job and had been receiving financial aid to help ease this problem. However, F found that they were still struggling to ensure they had enough money to cover their essential costs i.e., paying rent, gas and electricity bills, food expenses etc. Individual F discussed that they were actively seeking for a job but due to their current learning difficulties – dyslexia – they had not performed well in school and struggled with most jobs due their poor reading and writing skills.

To add to F's worries, they had recently moved into the Logan area due to their previous work and did not have many friends or family in proximity they could rely on. This was worsened by the fact that F had recently lost a member of their family and were unable to attend the funeral due to the Covid restrictions that were in place. As recorded in their survey response, F felt that their mental health had been – and was – being affected immensely by the current situation they found themselves in.

Staff provided F with guidance and offered to provide support and the young person was provided in-house support by yipworld through their employability team. They aimed to help F



break down their perceived barriers to the life of work and they also got support with their financial difficulties.

### **Case Study 7**

G was within the 26 – 35 age bracket. G was quickly identified as a person in need through the completion of the survey. Through completing the survey, G also identified themselves as someone who had suffered negatively in all areas relating to the survey i.e., financial troubles and struggling with mental health difficulties.

As staff continued to speak with G, they began to discuss how the pandemic had impacted them. At the start of the pandemic, G had lost their job and had been receiving financial aid to help ease this problem (Furlough Scheme provided by the Scottish government). However, *Individual G* was unfortunate when the scheme had stopped, this led to them struggling to ensure they had enough money to cover their essential costs. G discussed that they were actively seeking help through various schemes provided by the Scottish government but due to their personal circumstances they did not qualify to receive the schemes.

As recorded in their survey response, G felt that their mental health had been badly affected by the current situation and circumstances they found themselves in. G is the main carer for their two children who were currently out of school due to the pandemic. When speaking to staff *Individual G* hinted to the fact that there would be no childcare when returning to work due to uncertainty in school closures which was a major concern for them.

Staff provided *Individual G* with opportunities and support; staff informed them of what yipworld offer with their employability team.

The individual refused the support and Staff felt this was predominantly down to the fact that people felt embarrassed or too proud to admit that they were struggling due to the pandemic.

### **Case Study 8**

Two individuals H and I admitted they were struggling financially although they believed there was no help available for them as they were not on benefits. Project staff issued them with food vouchers and explained that there is a food larder in the area offering dignified, subsidized food. However, both residents felt uncomfortable taking advantage of this community asset as they worried about the stigma attached to accepting this help and other people finding out that they needed the extra support.

This evidence has raised some concerns as it indicates more needs to be done to encourage residents to integrate into the community following Covid and to tackle the stigma attached to accepting support when it is needed.

### **Case study 9**

A young female, J, aged 21 had three small children under the age of 5 years of age and had addiction issues with no means of support from any other person. She was struggling to feed the children and heat the house. The team supported her with food and fuel and put her in touch with addiction services within the local area. They continued to support this family with presents for Christmas from a local toy appeal which helped the family enjoy Christmas. Referrals have been quick and we know that this particular young person is engaging with the new peer mentor services within the area.

### **Case Study 10**

One small community solely relies on electrical heating and sits within a 5-10% - SMID 1 data zone. This local community struggle to heat their homes and, when speaking to a young mum, K, on the doorsteps, she broke down in tears to the canvassers stating that she worried weekly on how she was going to either feed the children or keep them warm. At this point they were paying over £320 monthly from their benefits and this was having a severe effect on her mental health. The parent was visibly suffering from anxiety. The team were able to point the individual to services at “Challenge Poverty Week.” The event saw agencies such as co-op providing food to



the larder, the financial inclusion team helping people with debt, Lemon aide supporting people with heating vouchers and many other agencies that were on hand with advice and support.

### **Case Study 11**

L, a man who had a medical condition, became more ill due to Covid which left him confined to a wheelchair and almost housebound. He lives in a downstairs flat and he is unable to get out as there are steps to the main pavement. He is also unable to access his garden due to the steps. He also found that, as restrictions lifted, he was still unable access face to face doctor appointments when he felt he really required one. Consequently, the lack of access to the doctor and other vital services has meant that he has struggled with his mental health. He must rely on his Grandson as a carer.

He felt very isolated when he was not able to have visitors during lockdown. Due to the steps this has meant that when he does have a hospital appointment, he must access patient transport with 2 ambulance crew members who then must bodily lift him out of his home, and he finds this very undignified and that his mental health has deteriorated.

Project staff are working with him to help improve his situation.

### **3.3 Key Findings**

Key findings from the case studies are:

1. Covid had a disproportionately devastating effect on people in areas of multiple deprivation.
2. There is a close synergy between practical challenges brought on by the pandemic and mental health issues, particularly anxiety and isolation.
3. Practical help, where people are and when they need it, makes a huge difference.
4. Stigma is a significant barrier to those in need accessing the support that is available.
5. There is a benefit in co-ordinating statutory and third sector support.

