

Lifestyle of Scotland's People Since the Coronavirus Outbreak

Summary Report

Public poll commissioned by Obesity Action Scotland

May 2020

Lifestyle of Scotland's People Since the Coronavirus Outbreak: Summary Report

Obesity Action Scotland commissioned Mark Diffley Consultancy and Research to carry out a representative poll among adults in Scotland, to understand the effects of the coronavirus outbreak on lifestyle, especially on diet and physical activity. The polling fieldwork was carried out online between 7th and 13th May 2020. The survey was conducted among 2079 adults (aged 16+) in Scotland.¹

This Summary Report is accompanied by the Topline Results document summarising answers to the questions we asked. We are planning further analysis of this data exploring themes within it. We will publish this further analysis soon.

Headline findings

We asked people in Scotland how their lifestyles had changed since the coronavirus outbreak began, timing the survey at around 7 weeks after the lockdown measures were announced by Scottish government. We were particularly interested in diet and physical activity, as both are important determinants of body weight. We also asked about mental wellbeing.

The results are clear: the coronavirus outbreak has changed the lifestyles of people in Scotland in both positive and negative ways. These changes demonstrate how quickly a modified environment can change people's behaviour.

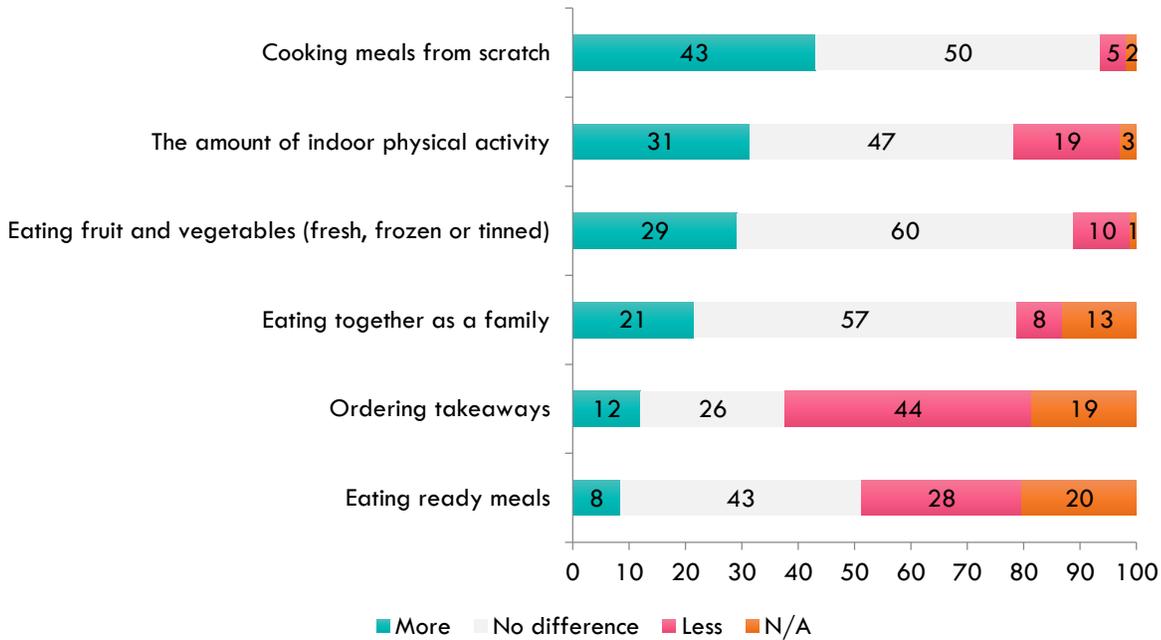
Overall, lifestyles of younger people and women seem to have been more affected by the changes brought about by the response to the coronavirus outbreak. These groups are also more concerned about lifestyle changes related to the outbreak of the virus, as well as their implications.

Favourable changes

Since the coronavirus outbreak 43% of people in Scotland are cooking from scratch more, 44% are eating fewer takeaways and 28% are eating fewer ready meals. 21% are eating together as a family more and 29% are eating more fruit and vegetables. Around a third of people in Scotland have also increased the amount of indoor physical activity they do.

¹ See *Note on Methods* section at the end of the report

Q: Since the start of the Coronavirus outbreak, to what extent, if at all, are you doing more or less of the following?

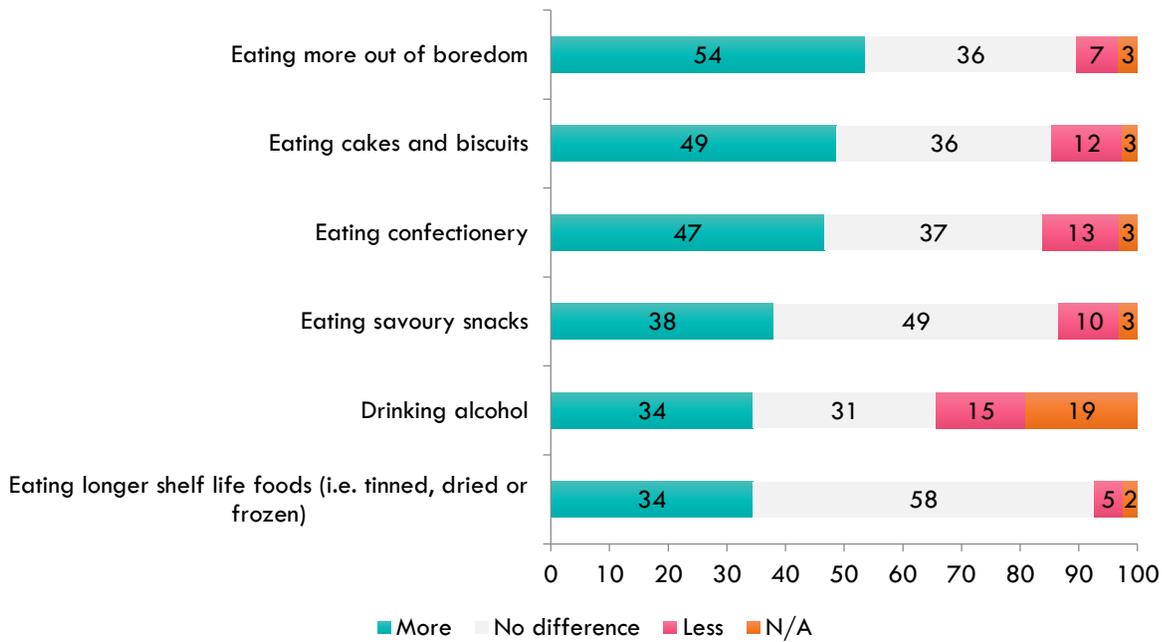


Some of these favourable changes are more pronounced in certain groups of people. For example, women, people from younger age groups and those living in urban areas report cooking meals from scratch more than others. Also, women and younger people report increasing their indoor exercise more than others.

Unfavourable changes

There are, however, a few areas in which lifestyles among people in Scotland have got worse since the coronavirus outbreak. The majority of people in Scotland (54%) are eating more out of boredom. Specifically, 49% report eating more cakes and biscuits, 47% eating more confectionery, 38% eating more savoury snacks, and 34% eating more long-shelf-life foods. Over a third of the respondents (34%) admit to drinking more alcohol compared to before the outbreak.

Q: Since the start of the Coronavirus outbreak, to what extent, if at all, are you doing more or less of the following?

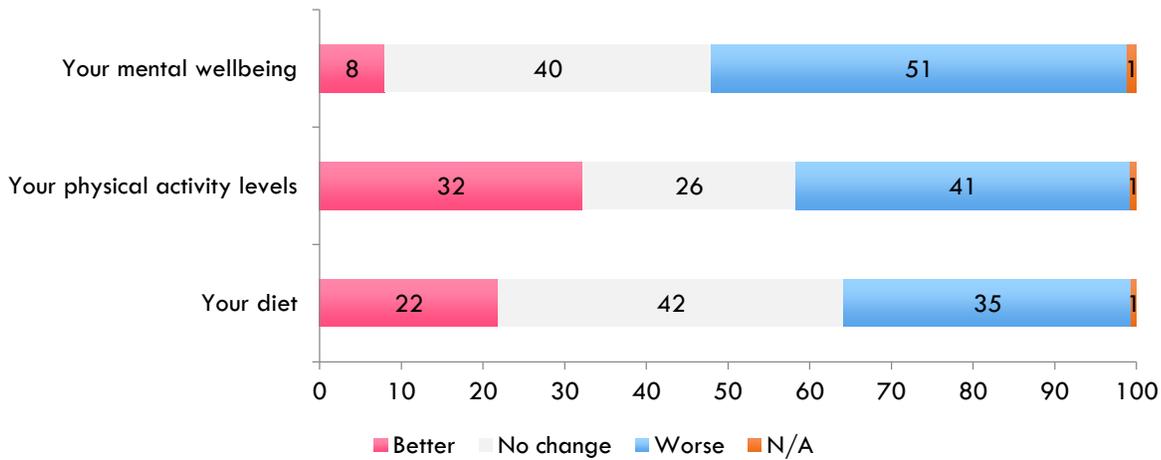


People from younger age groups report making the above unfavourable changes to their diets much more often than older age groups. For example, 65% of people aged 16-24 report eating more confectionery since the outbreak of the virus, while only 34% of those over 65 report such a change. Similarly, 71% of 16-24-year-olds say they have been eating more out of boredom, compared to 45% of those over 65.

What do people in Scotland think about their lifestyles?

A considerable proportion of people in Scotland think that, since the coronavirus outbreak, important aspects of their lifestyles have worsened. 51% think that their mental wellbeing has worsened, 41% that their physical activity levels have worsened and 35% that their diet has worsened. While for some there has been no change, these aspects have improved only for smaller proportions of people in Scotland.

Q: Thinking about the following issues, to what extent have they got better or got worse since the Coronavirus outbreak?

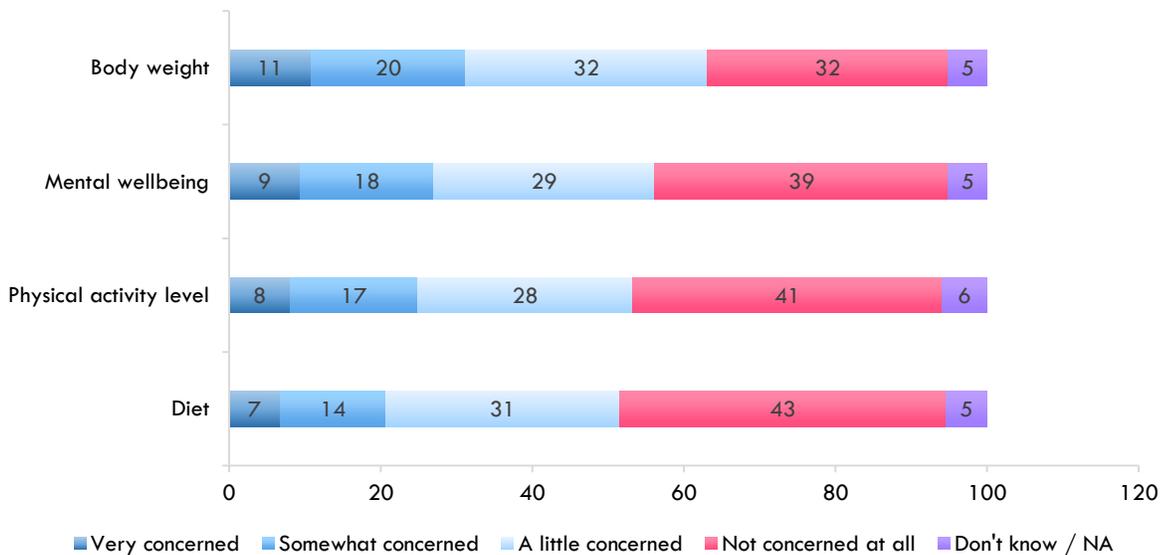


The respondents also tend to think that the diets of people in their families are a little worse (27% worse and 21% better). However, they think that physical activity levels of people from their families have not changed.

Concern about lifestyle

The majority of people are concerned to some degree about their body weight (63%), mental wellbeing (56%), physical activity (53%) and diet (51%).

Q: And how concerned, if at all, are you about each of the following issues at the moment?



Implications

It has been suggested that the outbreak of coronavirus and the resulting changes to the way we live may cause increases in weight, if they last for a longer period of time.² The current survey shows that people in Scotland have been eating more unhealthy foods since the beginning of the outbreak. Additionally, more people think that their diet, mental wellbeing and physical activity have got worse, rather than better. The survey also shows that the majority are concerned about their body weight. These findings suggest that some weight gain in the Scottish population may be expected.

A few favourable changes related to food culture are reported: people have been cooking from scratch more, eating together as a family more and eating fewer takeaways and ready meals. These may be related to the dramatic changes within the out of home sector, namely closed restaurants, cafes, bars etc. While it is clear that these positive changes do not outweigh the negative impact of the coronavirus outbreak, it is important to nurture the new good habits as we move out of lockdown, and the out of home sector starts operating again.

The urgency to prevent obesity and reduce obesity levels in Scotland has never been so high. The current survey indicates that people in Scotland have had worse diet since the coronavirus outbreak and we know that undernourished people have weaker immune systems and may be at greater risk of severe illness due to the virus.³ The response to COVID-19 needs to include actions to help people in Scotland eat healthier diets. The economic recovery from COVID-19 needs to ensure obesity prevention is at its heart. Such progress would not only help to address obesity and other diet-related diseases, but also is key for improving immunity and increasing resilience to COVID-19 or other communicable diseases.

The Scottish government published their *Diet and Healthy Weight Delivery Plan*⁴ in 2018 with the aim to improve the health of people in Scotland. The outbreak of coronavirus has highlighted how important healthy weight is. Therefore, the existing plan should be adapted to the current situation and integrated into the COVID-19 response. It is crucial that both treatment and prevention policies for obesity and other diet-related diseases are a key part of our recovery.

² World Obesity Federation (2020) Coronavirus (COVID-19) & Obesity. Available at: <https://www.worldobesity.org/news/statement-coronavirus-covid-19-obesity>

³ Global Nutrition Report (2020) Action on equity to end malnutrition. Bristol, UK: Development Initiatives

⁴ The Scottish Government (2018) Diet and Healthy Weight Delivery Plan

Note on methods

A sample of 2079 adults, invited from the *ScotPulse* panel of 28,000 adults (16+) in Scotland, completed the survey online. The geographic and demographic balance of the sample is evidenced in the sample breakdown (see Table 1 below). The sample size allows the ability to undertake sub-group analysis among, for example, different age groups, those from different socioeconomic backgrounds and those with existing health conditions. Overall, the sample allows for robust and reliable estimates, which policymakers can use for decision-making.

The questions used in this survey combine (1) questions used in official government surveys and the census to measure existing health conditions and educational qualifications, (2) questions used in GB-wide surveys, and (3) questions using well-defined and used 'Likert' scales.

This Summary Report is accompanied by the Topline Results document summarising answers to the questions we asked. We are planning further analysis of this data exploring stories within it. We will publish this further analysis soon.

Table 1. Sociodemographic description of the survey sample (n=2079, weighted).

Sociodemographic variable	Categories	Survey sample, n=2079
Gender (%)	Male	998 (48)
	Female	1081 (52)
Age (%)	16-24	270 (13)
	25-34	312 (15)
	35-44	333 (16)
	45-54	374 (18)
	55-64	374 (18)
	65+	416 (20)
Social grade (%)	ABC1	1152 (55)
	C2DE	927 (45)
Number of people in household (%)	1	341 (16)
	2	879 (42)
	3	423 (20)
	4	342 (16)
	5+	94 (5)
Children in household (%)	No children	1609 (77)
	1 child	291 (14)
	2 children	142 (7)
	3 children	7 (0)
	4+ children	3 (0)
Local authority area* (%)	North	608 (29)
	East	649 (31)
	West	820 (39)
Urban/Rural (%)	Urban	1690 (81)
	Rural	386 (19)
Education (%)	No qualifications	108 (5)
	Level 1 to 3 (O grade, Standard Grade, Higher)	655 (32)
	Degree or equivalent	690 (33)
	Professional qualifications	447 (22)
	Other (please say what)	130 (6)
	Don't know	44 (2)
Physical or mental health conditions / illnesses (%)	None	770 (37)
	Mental health problems	419 (20)

	Heart, blood pressure or circulation problems	388 (19)
	Arthritis	336 (16)
	Chest or breathing problems (asthma/ bronchitis)	277 (13)
	Some other health problem or disability	243 (12)
	Problems or disabilities related to back or neck	210 (10)
	Problems or disabilities related to legs or feet	201 (10)
	Diabetes	148 (7)
	Problems or disabilities related to arms or hands	132 (6)
	Severe stomach, liver, kidney or digestive problem	85 (4)
	Severe disfigurement, skin condition or allergies	79 (4)
	Rather not say	61 (3)
	Some other progressive disability or illness	56 (3)
	Learning or behavioural problems (e.g. autism, Down's Syndrome)	27 (1)
Coronavirus-related lifestyle change (%)	Working from home	609 (29)
	Having a reduced income	448 (22)
	Shielding (vulnerable and not leaving home and minimising all non-essential contact within home)	434 (21)
	Furloughed	307 (15)
	Seeking help to afford food from family and/or friends	85 (4)
	Seeking help to afford food from emergency support such as a foodbank	20 (1)

* Local authority areas included North (Highland, Shetland, Orkney, Western Isles, Aberdeenshire, Aberdeen City, Moray, Dundee City, Angus and Perth and Kinross), West (Glasgow City, North Lanarkshire, South Lanarkshire, Dumfries and Galloway, Renfrewshire, East Renfrewshire, Inverclyde, West Dunbartonshire, East Dunbartonshire, Argyll and Bute, North Ayrshire, East Ayrshire and South Ayrshire), and East (Edinburgh City, Scottish Borders, Midlothian, East Lothian, West Lothian, Fife, Stirling, Falkirk, and Clackmannanshire).