



On behalf of the federal office of public health (FOPH)

**Selected results from the COVID-19 Social Monitor:
quality of life, mental well-being and adherence to
mitigation measures during the course of the
coronavirus pandemic from March 2020 to June 2021**

Summary

Sarah Heiniger¹, Flurina Meier¹, André Moser², Sarah Schmelzer¹ und Marc Höglinger¹

¹ Winterthur Institute of Health Economics, Zurich University of Applied Sciences ZHAW

²Clinical Trials Unit, University of Bern

Winterthur, 6 October 2021

Since March 2020, the COVID-19 pandemic has posed major social challenges to the Swiss population. The COVID-19 Social Monitor project, which was set up in late March 2020, monitors social and public health changes in the Swiss population on an ongoing basis. The latest results from the monitoring are presented on the website <https://covid19.ctu.unibe.ch> a few days after the survey is conducted, and various indicators can be looked at over time and by subgroup. This report supplements the results on the website and provides an overview of the changes that occurred during the course of the pandemic, between March 2020 and June 2021. It focuses on general well-being, mental health and feelings of loneliness. The report also looks at the population's adherence to the mitigation measures put in place to contain the pandemic.

Method

The analyses are based on data from survey waves 1 to 17 of the COVID-19 Social Monitor (March 2020 to June 2021). The study population is the Swiss resident population aged between 18 and 79 with internet access. The data have been weighted and are therefore representative of the Swiss population in terms of age, sex, language region, canton and educational level. As it is an online survey, proficient internet users are likely to be overrepresented. This is likely to result in a certain selection bias, particularly in older people.

Results

The dynamic of the pandemic, with increasing infection rates and the ensuing tightening of measures (e.g. lockdowns) is reflected to some extent in the evolution of the population's well-being, mental health and feelings of loneliness. General well-being slightly deteriorated during the first lockdown in the spring of 2020, during the period of stricter measures in the autumn of 2020, and in the second lockdown in early 2021, while the values temporarily recovered in the summer of 2020. Mental health deteriorated in the autumn of 2020 and then remained at a level that was slightly below that of spring/summer 2020. Feelings of loneliness were also more frequent during the lockdowns and during phases with stricter measures.

The results vary widely by population group. It is striking that young adults generally have high levels of psychological distress and loneliness. There are also clear differences in terms of the common factors of inequality: education and income. People with a low level of education have a lower quality of life and a higher level of psychological distress during the pandemic – as is the case the rest of the time. In people on low incomes, levels of general well-being, psychological distress and loneliness during the pandemic were worse than in the other income groups. However, during the course of the pandemic, very similar patterns emerge in terms of the various indicators in the individual subgroups. In other words, the pandemic appears to have affected the different population groups to a similar extent. However, deterioration from a lower base level is more likely to have a serious impact.

In terms of adherence to the mitigation measures, it is clear that for the most part, the population systematically complied with the recommended and/or prescribed measures and

rules on hygiene and physical distancing throughout the pandemic. Most of the measures were implemented more systematically in the first lockdown than in the second, and from the spring of 2021, an increasing 'normalisation' of mobility and social activities becomes apparent. Younger people were less meticulous about physical distancing, and were also more mobile and more socially active than older people. Other than that, hardly any differences emerge between the population subgroups. Only in terms of working from home was there – unsurprisingly – a clear education and income gradient as people from high-income households and those with higher levels of education were significantly more likely to work from home partially or fully. This shows that adherence to the measures does not only depend on one's preferences and attitudes, but is also influenced by individual opportunities and resources, as well as living conditions and employment situation.

Conclusion

For the population as a whole, the conclusion is reasonably positive: in none of the areas considered was the negative impact of the pandemic as bad as initially feared. While the quality of life and mental health of the wider population was adversely affected, in most cases this was to a limited extent and only temporary. The observed changes can also likely be attributed to some extent to factors other than the pandemic. The decrease in well-being and the increase in psychological distress in particular in the autumn/winter of 2020–21 are also likely to be seasonal effects. People from vulnerable groups, such as those with existing psychological problems or children and young people from difficult family backgrounds, are not covered by our study. Also, this report only looks at the impact of the pandemic in the period from March 2020 to June 2021, but the pandemic is not yet over. Continuation of the COVID-19 Social Monitor will allow us to continue to study the longer-term effects of the pandemic and central aspects of behaviour.