

Every **Story** Matters

Every Story Matters Record: Mental Health & Wellbeing In Brief

The UK Covid-19 Inquiry is an independent public inquiry examining the response to and impact of the Covid-19 pandemic to learn lessons for the future. The Inquiry is divided into separate investigations known as modules. Each module is focused on a different topic with its own public hearings. Following the hearings, a module report is published which contains findings based on all of the evidence and the Chair's recommendations for the future.

How Every Story Matters fits into the Inquiry's work

This summary covers one of the Every Story Matters records for Module 10, examining the impact on mental health and wellbeing during the pandemic.

The record brings together people's experiences shared with us:

- online at everystorymatters.co.uk;
- at listening events, including targeted listening events and listening circles; and
- a small number of targeted interviews with mental health professionals completed as part of Module 3 - Healthcare.

Stories are analysed and used in module-specific records. These records are entered into evidence for the relevant module investigation.

Every Story Matters is neither a survey nor a comparative exercise. It cannot be representative of the entire experience of the UK nor was it designed to be. Its value lies in hearing a range of experiences, in capturing the themes that have been shared with us, quoting people's stories in their own words and, crucially, in ensuring that people's experiences are part of the Inquiry's public record.

Every Story Matters closed to new stories in May 2025. Records for Module 10 analysed every story shared with the Inquiry online and at our Every Story Matters listening events up until this date. This record covers the general impacts of the pandemic on mental health and wellbeing for those living in the UK; related impacts are also addressed in the Module 10 Bereavement record and the Module 10 Key Workers record. Impacts on mental health and wellbeing are also examined in the 'Healthcare' (Module 3), 'Adult Social Care Sector' (Module 6) and 'Children and Young People' (Module 8) records.

Some of the stories in this record includes references to death, self-harm, suicidal ideation, disordered eating, trauma, neglect and significant physical and psychological harm. These may be distressing to some. Readers are encouraged to seek support if necessary. Details of support services can be found at the [UK Covid-19 Inquiry website](#).

Introduction

The effect of the pandemic and subsequent restrictions and lockdown measures affected everyone in the UK, and the impact on mental health and wellbeing was widespread and varied. This record demonstrates the experiences of a wide range of people, including those with pre-existing mental health conditions and those who developed mental health conditions during the pandemic. We also heard from some people about how their mental health improved during the pandemic, while others shared the steps they took to manage their mental health during lockdown and living under restrictions.

Challenges affecting mental health and wellbeing

- People told us how frightened they were about catching Covid-19 and how the fear of spreading the virus made them feel worried and distressed about being in public spaces.
- For people advised to shield, including those in clinically vulnerable households, shielding often brought deep feelings of isolation, loneliness and anxiety, made harder by the constant concern about catching Covid-19.
- Many contributors told us about the isolation they experienced because lockdown restrictions meant they could not see or be supported by their loved ones and their wider community. This was particularly challenging for those who lived alone.

- We heard from some people how the frequency of news updates and televised government briefings left them feeling frightened. They told us how this information often added more stress as it increased their worry about the pandemic.
- Many people faced financial difficulties during the pandemic. Those who lost their jobs told us how this led to stress and uncertainty, which was detrimental to their mental health and made them feel anxious about being able to provide for their families.
- We heard from victims and survivors of domestic abuse who were confined with their abusers during the pandemic without any opportunities to leave their home for respite. They told us how frightening and stressful this was, and some told us about how they were unable to access support services that had previously helped them.

Impact of the pandemic on mental health and wellbeing

- A number of individuals reported a significant decline in their mental health since the start of the pandemic, even if they have not formally been diagnosed with any mental health conditions. For example, some said feelings of anxiety about the future, and more intense worries about their health, have remained.
- Some contributors told us that they experienced intrusive thoughts about self-harm or suicide. They said these thoughts were linked to feelings of stress and worry about the pandemic and the restrictions imposed on them. Others began self-harming during the pandemic, to cope with their feelings of fear and uncertainty.
- Some people told us how they fell into unhealthy patterns to deal with the stress of the pandemic. This included increased alcohol and drug use, changes in eating patterns or developing eating problems and/or disorders.
- Others who previously had no experience of mental health conditions told us that they felt sad, angry and hopeless from being isolated from their loved ones. We heard from some people that these feelings led to difficulties they had not experienced before such as anxiety, depression, post traumatic stress disorder (PTSD) and obsessive compulsive disorder (OCD).
- We heard from many people about how their fear and anxiety deepened during lockdowns as their usual social connections disappeared. They spoke about missing everyday in-person contact with friends, family and the wider community.

Impact on parenting and family life

- Women who were pregnant during the pandemic described the loneliness and anxiety they felt as restrictions meant their partners could not attend antenatal appointments.
- They also shared their experiences of being diagnosed with postnatal depression during the pandemic, which they felt resulted from the lack of support they had during and immediately after giving birth. We heard from new fathers who struggled to bond with their newborn babies; for many this led to paternal postnatal depression and ongoing feelings of distress.

- Many parents spoke of feeling overwhelmed as they struggled to balance work, household demands and home school their children during the pandemic. They described feelings of stress, worry, and anxiety, with disruptions to family life increasing tensions and taking a toll on their mental health.
- Parents of children with special educational needs and disabilities (SEND¹) told us how school closures meant that they had to take on additional caring responsibilities while also caring for other children, home schooling and/or trying to continue working. They described how the pressure of juggling these responsibilities along with the loss of support from schools and other services took a heavy toll on both their own mental health and that of their children.

Impact on people with pre-existing mental health conditions

- Disruption to routines and reduced access to regular mental health services made it difficult for people with pre-existing mental health conditions to manage their conditions, which often made their mental health worse. For example, some told us that they struggled with the transition from in-person to online or telephone mental health support, leaving them feeling disconnected from the mental health professionals supporting them as they could not build rapport in remote sessions.
- Some people with pre-existing mental health conditions, such as borderline personality disorder (BPD) and obsessive compulsive disorder (OCD), told us that the uncertainty of the pandemic and the disruption to their daily routines made it harder to cope with their symptoms and resulted in a decline in their mental health.
- People who had eating disorders told us how difficult it was to cope with the loss of control they felt during the pandemic. Feelings of loneliness and anxiety often made things worse, leading to a decline in their mental health. Contributors described turning to other problematic ways of coping, such as increased self-harm or over-exercising, as they tried to manage overwhelming emotions. Some also noted it was easier to hide their eating disorders during the pandemic because they had little contact with others.
- We heard from some contributors with addictions that their therapy or support groups stopped during the pandemic. They said this caused their mental health and wellbeing to worsen as they struggled to manage their addictions without the help they usually relied on. Restrictions also impacted their partners and family members who were not able to access support groups.

Impact on mental health services

- We heard how demand for mental health services increased during the pandemic, with contributors describing difficulties accessing these services due to long waiting lists.
- Some contributors told us how the transition to remote appointments made it more difficult to access the mental health support they needed. For example, some contributors who were d/Deaf told us that remote appointments were not accessible to them.

¹ Special Educational Needs and Disabilities (SEND) is the term used in England; in Northern Ireland the term used is Special Educational Needs (SEN); in Scotland it is Additional Support Needs (ASN); and in Wales it is Additional Learning Needs (ALN).

- Mental health professionals indicated that the increased demand for services placed significant pressure on them, creating difficulties in managing workloads and leading to considerable stress. Many mental health professionals experienced burnout due to extreme workloads and staff shortages, which were often exacerbated when colleagues contracted Covid-19 or were required to self-isolate.
- Some mental health professionals were also concerned about the quality of care they could provide through online and telephone appointments.
- Staff working in mental health services who were still meeting patients face to face also expressed considerable fear and anxiety about catching the virus or spreading it to their families.

Ways of managing and maintaining mental health and wellbeing

- Some contributors described how their wellbeing improved during the pandemic. For example, we heard how working from home improved work-life balance for some.
- Many contributors described using exercise to manage their anxiety and worry during lockdowns and periods when restrictions were imposed. They said that exercising regularly provided them with a routine and helped them to feel productive.
- Some shared how meditation and mindfulness helped them manage their feelings of worry and stress.
- Some contributors started new hobbies and activities, including arts, crafts and DIY, which helped improve their mental health and wellbeing.
- Others connected with friends in their local area and went out walking together, helping them get exercise and to have some social connection to support their wellbeing. Exercising outside also helped people to connect with nature, which many said helped calm and ground them, easing their worries about the pandemic.
- Some said they joined online support and social groups to manage the isolation and loneliness they felt from not seeing their loved ones in person. Many were able to participate in new hobbies and meet friends via online groups and found this valuable in supporting their wellbeing.
- We heard of many people creating or joining community groups, from WhatsApp groups to street bingo and doorstep events, to help people stay connected and ease feelings of loneliness. Neighbours sometimes supported each other with errands, wellbeing activities and small socially distanced gatherings when it was allowed. Many of these groups are still active today, continuing to organise events and strengthening the sense of community.
- We also heard how some people valued the support they received from their employers. Some were able to access mental health support through employee assistance programmes, which they felt helped them.

Lessons to be learned

- Contributors want future government pandemic guidance to prioritise social interaction, including allowing people to see loved ones. This was particularly important for those living alone and would help ensure better access to mental health support.
- Some want more funding for mental health services so that it is easier to access support in future pandemics. This would help provide effective support to those who develop mental health conditions during the pandemic and allow services to meet the likely increased demand.
- Some contributors with existing mental health conditions were unable to access mental health support during the pandemic. In future pandemics they want services to remain accessible to ensure people can receive professional mental health support.
- Women who had babies during the pandemic want more mental health support tailored for parents. Suggestions included offering informal check-ins, practical mental health support and opportunities to connect with other new parents.
- Contributors suggested that in future pandemics, the frequency and content of government communications should be carefully considered to prevent the public becoming overly fearful.

To find out more or to download a copy of the full record or other accessible formats, visit: <https://covid19.public-inquiry.uk/every-story-matters/records/>