

COVID-19 Rapid Reviews

Short Report

April 2021



LEEDS
BECKETT
UNIVERSITY



COVID-19

As a highly transmissible disease, coronavirus (COVID-19) required physical distancing protocols and/or self-isolation. In response, worldwide, governments mandated movement restrictions using quarantine and lockdowns. These restrictions have had severe impacts worldwide on the health system and daily life.

Approach

In order to successfully plan future strategies, it was seen as vital to understand the impact COVID-19 has had on health and lifestyles. Leeds Beckett University was commissioned to undertake a rapid review of the COVID-19 evidence base. From January to April 2021, fortnightly reviews were undertaken. At the end of every two-week period, Leeds Beckett University would present back the findings, implications, and recommendations for the topic areas chosen. Following these presentations, discussions were held to inform on the next two-week period and come to consensus on the most important topics to cover next.

The topics covered were:

- Change in Physical Activity
- Physical Activity and Prevention of COVID-19
- Health Conditions and Shielders
- BAME, Diabetes and Physical Activity
- Mental Health and Physical Activity
- Deprivation and Social Determinants of Health
- Deconditioning and Disabled Individuals
- Recovering from Disasters and Resilience
- Long-Covid
- Access to Health Care
- Children and Young People
- LGBT
- Workplaces

Key Findings

1. **Physical activity has decreased, sedentary time has increased, but physical activity has preventive benefits to COVID-19**

Findings suggest a decrease in physical activity, with this decrease seen across all domains of activity (moderate, vigorous, MVPA, and walking). Along with the decrease in physical activity, there was also a significant rise in sedentary behaviour. Even short-term physical inactivity (1-4 weeks) has been associated with decreased health, but with the prolonged time spent at home, it is likely more health problems will ensue from the lack of activity. While physical activity levels pre-pandemic were low, it is now an even bigger problem as activity has further decreased. Based on previous evidence around other similar infectious diseases, engaging in physical activity promotes positive health benefits, including improved immune system response and lower risk of severe future complications. Therefore, physical activity should be promoted to prevent future coronavirus contraction.

2. **Long-covid impacts 10% of people, many people suffering long-term problems**

Long-covid, or prolonged illness after COVID-19, can have many negative effects including: inability to engage, lack of aspiration, attention, planning, poor emotional control, higher anxiety levels and lost routines. It is unknown exactly how long individuals with long-covid will be impacted, so it will require carefully planned interventions which focus on the recovery of these individuals are needed in conjunction with medical professionals for the more serious cases. It is also a long-term problem, as people can suffer from long-covid for over 12+ weeks.

3. **Mental health problems have increased**

Physical activity can potentially protect against depression, anxiety and poor mental health. However, the decline in physical activity levels during COVID-19 has been associated with increased stress, anxiety, and depression. Interestingly, those who participated in more physical activity during the pandemic was associated with more positive mental health. It is therefore increasingly important to promote physical activity and building other factors such as confidence in one's own ability and drawing on the social support of reduced social networks, which can protect against common mental health problems.

4. **The pandemic has led to the widening of the inequalities gap**

While the pandemic has affected regions differently over the course of the pandemic, the close association between underlying health, deprivation, occupation and ethnicity and COVID-19 have made living in more deprived areas in some regions particularly hazardous. The declines in income since March 2020 have been unequal, and lower-income groups have lost a greater proportion of their income from earnings than better-off groups. During the COVID-19 pandemic, housing has also become an even greater determinant of health and wellbeing. Additionally, BAME groups are more greatly impacted; in relation to their white counterparts, individuals who are black ethnicity are 4x more likely to die from COVID-19. This highlights that inequalities in health behaviours should be a priority action area and interventions should be developed to improve healthy behaviours and reduce inequalities.

5. **In this for the 'long haul', long road to recovery – community engagement is essential for re-building**

Findings suggest that disaster exposure, such as a pandemic, continues to impact quality of life for many years, though the nature and duration of these impacts vary and may be influenced by factors such as age, gender, education, and vocation. Individuals reactions vary, but there is a common pattern among individuals exposed directly or vicariously to life-threatening events. Overall people experience a range of emotional responses at different phases of a disaster. It can take between 6-36 months to recover from a disaster; it is important to note that there is no quick fix and will take a while to get back to pre-disaster levels. It is essential to engage the community at a local level for successful recovery. Communities will need to be empowered to identify those groups who are missing out or struggling themselves.

Implications

Leeds pre-COVID findings in have been compared to the findings from the rapid review. Key implications are provided in the following table.

Previous Get Set Leeds Findings	COVID-19 Implications
Inactive people prioritised meeting their basic needs before being more active	COVID-19 widened the inequalities gap; it is likely more people will be worse off than before the pandemic. Therefore, more people will need to focus on their basic needs and physical activity won't be a priority. This highlights the need for social and environmental factors to be more supportive
Inactive people want to be active, but feel they aren't able to be	This is just as, if not, more important now in a COVID and post-COVID-19 world. New barriers or competing interests/concerns may now

	exist. This highlights the continual need for social and environmental factors to be supportive
Changes across the system to improve capability had the greatest impact on physical activity	With even less access and the additional fear around COVID-19, it has probably led to greater feelings of reduced capability. It remains important to re-activate capability, so individuals are enabled to be active
LGBT groups were identified as a key target group	Results indicated that LGBT groups felt they needed more dedicated environments that are socially supportive and more inclusive. The research on COVID-19 suggests that LGBT should remain a key target group moving forward and that LGBT individuals may have been disproportionately impacted
Employees felt their workplaces should focus on supporting them to be physically active	Physical activity has decreased and new challenges of working from home require a new approach from employers
Employers need to provide flexible working practices, create a culture where active working is the norm and empower employees to move more	This is still important remains important for employees – COVID has demonstrated that flexible working can work successfully, and employees still want this option post-pandemic

Recommendations

Four key recommendations have arisen from the research. These are:

1. **Reactivate feelings of capability and motivation, and provide opportunities to re-engage in activity** – it is now more important than ever to ensure people feel able and encouraged to be active, while providing safe opportunities to do so.
2. **Physical activity may not be a priority for most people; consider how to approach and encourage this behaviour** - basic needs such as income or housing will be more important, and we need to consider how to approach and encourage physical activity in a compassionate way, while acknowledging and sharing struggles with others.
3. **Address new barriers or competing interests/concerns** – COVID-19 has brought in new barriers to being physically active. It is likely many individuals will still be cautious and worried about engaging in activity in a post-COVID environment. These barriers will need to be considered and strategies will need to be implemented to reduce them.
4. **Accent supportive social and environmental factors** - With restrictions easing, there are now opportunities to see friends and family again, need to take advantage of this and provide the chance to make small changes to their daily lives. It will be important to activate the idea of 'N5' by offering programmes that are near, now, no-cost or low cost, new, and next-wise.

Conclusion

The findings from this research can be used to as an indicator as to what's changed as a result of COVID-19 and provides recommendations for how to continue to support Leeds in its journey to becoming more active. COVID-19 has greatly impacted individuals lives, approaches to public health, and the wider system. By applying it directly to the city of Leeds context, it enables a clear picture of what's needed to continue to support people living in Leeds in becoming more active.

Recommendations outline wider system changes that account for COVID-19 and the new challenges that have arisen. The results from this research will be used to adapt and rethink future action plans, while continuing to co-produce a physical activity ambition plan.