Mental Health Foundation

Resilience across the UK during the coronavirus pandemic

Mental Health in the Pandemic Series

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Key Messages

Resilience enables us as individuals, communities, nations and as a country, to cope with the stress of the coronavirus pandemic.

This study shows that most people (64%) say they are coping well with the stress of the pandemic. However, many are struggling with the current crisis.

Of those who have experienced stress due to the pandemic, almost nine out of ten (87%) are using at least one coping strategy.

People have used a wide range of strategies to cope; these most often included going for a walk, spending time in green spaces, and staying connected with others.

We found that some people are resorting to potentially harmful ways of coping, including increased alcohol consumption, substance misuse, and over-eating, putting their mental and physical health at greater risk.

While each nation has made available mental health literacy resources in response to COVID-19, this study's findings point to where more policy and investment could be targeted to support people and communities to remain resilient in the face of local or national restrictions related to the coronavirus pandemic.

Introduction

Resilience refers to our ability to cope with the normal stress of life as well as being able to bounce back from crises.[1]

Sometimes resilience is described in terms of the individual and collective resources available to a person to help them to withstand adversity, as in this definition from the Resilience Research Centre:[2]

"In the context of exposure to significant adversity, resilience is both the capacity of individuals to navigate their way to psychological, social, cultural and physical resources that sustain their wellbeing and their capacity individually and collectively to negotiate for these resources to be provided in culturally meaningful ways."

It includes the physiology, attitudes, knowledge, skills, resources, and circumstances that are able to withstand stress and adapt to change. Being resilient includes but goes beyond one's individual resources, such as one's biological make-up and attitudes; it can include the entire socio-ecological environment, encompassing the laws of a country, its economy, and the culture of respect and solidarity within a society.

Resilience can be present at national, community and individual levels. At the national level, resilience refers to how well-prepared countries are to cope with major social and economic disruption. Countries that have healthy economies, more equal societies and good quality public services tend to be more resilient than countries with weak economies, unequal societies and inadequate availability of public services.

At the community level, resilience refers to how well-resourced communities are to withstand social and economic stressors.[3] As used widely among agencies working in disaster relief and pandemics, resilient communities are understood to be those that survive external shocks and quickly bounce back to their pre-crisis state (or better).[4] As we have witnessed during the coronavirus pandemic, communities that have safe and green environments, good quality, accessible public services and well-developed social networks are better able to cope with disasters.

At the individual level, some people may be innately more resilient. However, a core factor for developing and building individual resilience is positive experiences in very early childhood, and in particular a secure attachment relationship with at least one primary caregiver.[5] Supporting a good primary caregiver-child relationship is an important protective factor for promoting resilience, while circumstances that put this relationship under strain can negatively affect resilience and mental health throughout childhood and adulthood.

In addition, adversity in childhood and adulthood is a known risk factor for poorer mental health and wellbeing and can hinder resilience.

Throughout life, an individual's attitudes and coping skills can help make the difference between them being able to manage and even thrive in a crisis, or instead, suffer distress. Within the constraints of social circumstances, people can develop more positive attitudes and effective coping skills that help them to approach external stress better. The Foundation has developed a variety of mental health literacy and other resilience-promoting programmes that have been shown to be effective.

Regarding promoting resilience in childhood, the Harvard University Centre for Child Development has identified four positive processes that can help children develop resilience and better cope with adversity:

1. facilitating supportive adult-child relationships

2. building a sense of self-efficacy and perceived control

3. providing opportunities to strengthen adaptive skills and self-regulatory capacities, and

4. mobilising sources of faith, hope, and cultural traditions[6]

It is essential to acknowledge that programmes to promote individuals' resilience are not a substitute for providing the social, economic, and environmental circumstances that sustain and protect people's mental health and overall wellbeing.

Biopsychosocial basis of mental health

The social determinants of mental health have a profound effect on people's ability to cope with crises. Building resilience at all levels must include addressing these social determinants to give everyone the best possible opportunity for good mental health and wellbeing.

In this paper, we explore the evidence on resilience from the 'Coronavirus: Mental Health in the Pandemic' study.

The study is led by the Mental Health Foundation, in collaboration with the University of Cambridge, Swansea University, the University of Strathclyde and Queen's University Belfast. Since mid-March 2020, the project has undertaken regular, repeated surveys of more than 4,000 adults who are representative of people aged 18+ and living in the UK.

The surveys are conducted online by YouGov. More detailed information on the study is available at https://www.mentalhealth.org.uk/our-work/research/coronavirus-mental-health-pandemic. In addition to this long-term study we have conducted qualitative investigation in the form of Citizens Juries and Focus Groups to further explore our quantitative findings. The statistics reported in this briefing come from Wave 7 of the study, with data collected from 4,251 individuals between 26-28th August. Qualitative evidence is also included from a focus group conducted on 27th August.

The focus group topic was constructed around key findings from the survey data, to explore in-depth the perspectives, experiences and attitudes of the UK adult population regarding various aspects of the ways in which people coped during the periods of lockdown and easing of restrictions. These perspectives provided us with new insights, providing us with deeper knowledge and better understanding of these dimensions of people's experiences during this time. Twelve people took part in the focus group (6 males and 6 females) of different age groups; 8 were from England, 2 from Northern Ireland and 2 from Wales.

We will show that thus far, many people in the UK have managed relatively well throughout the pandemic, and we will look at their ways of coping. We will also look at some of the potentially harmful coping behaviours people have engaged in during the pandemic. Finally, we will suggest ways that the UK Government and devolved administrations could support people's resilience so that they can better weather the storm of the current pandemic.

# Resilience in the population during the pandemic

Thus far, most people appear to be coping with the stress of the pandemic.

This is very encouraging, given the unprecedented nature of the crisis. Throughout the pandemic, the ONS has published statistics on the extent of mental wellbeing in the UK population. Its most recent findings, from a survey carried out between 26th-30th August among adults aged 16 and over, show that a minority of people (39% of the population) say that the pandemic has (negatively) affected their wellbeing through, for example, boredom, loneliness, anxiety or stress.

Our study supports the idea that thus far most people are coping well with the stress of the pandemic. As of the end of August, 64% of people say that they are coping well with the pandemic. Among this group, 17% say they are coping very well and 47% say they are coping fairly well.[7]
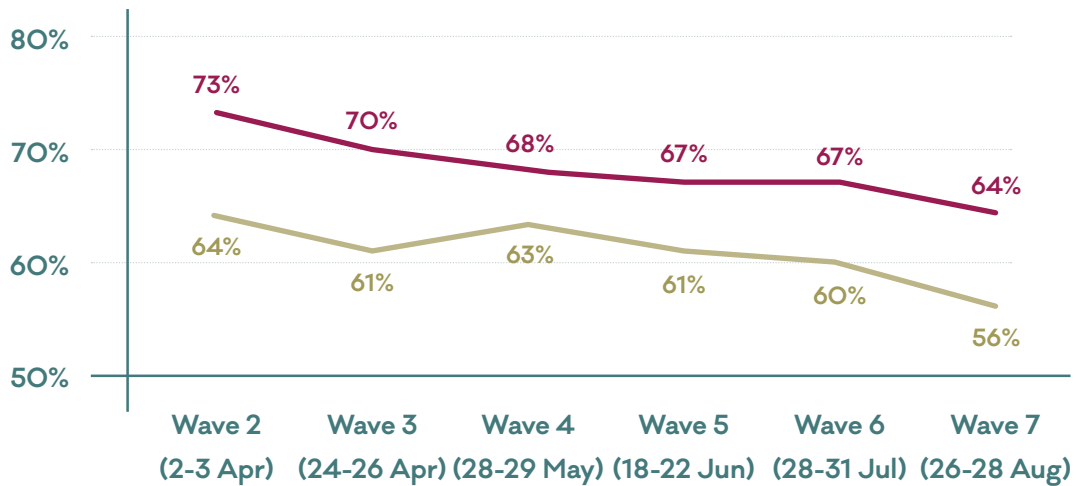
Although the proportion of people who reported they were coping well was high at the start of lockdown (2nd-3rd April), the graph below shows the slow
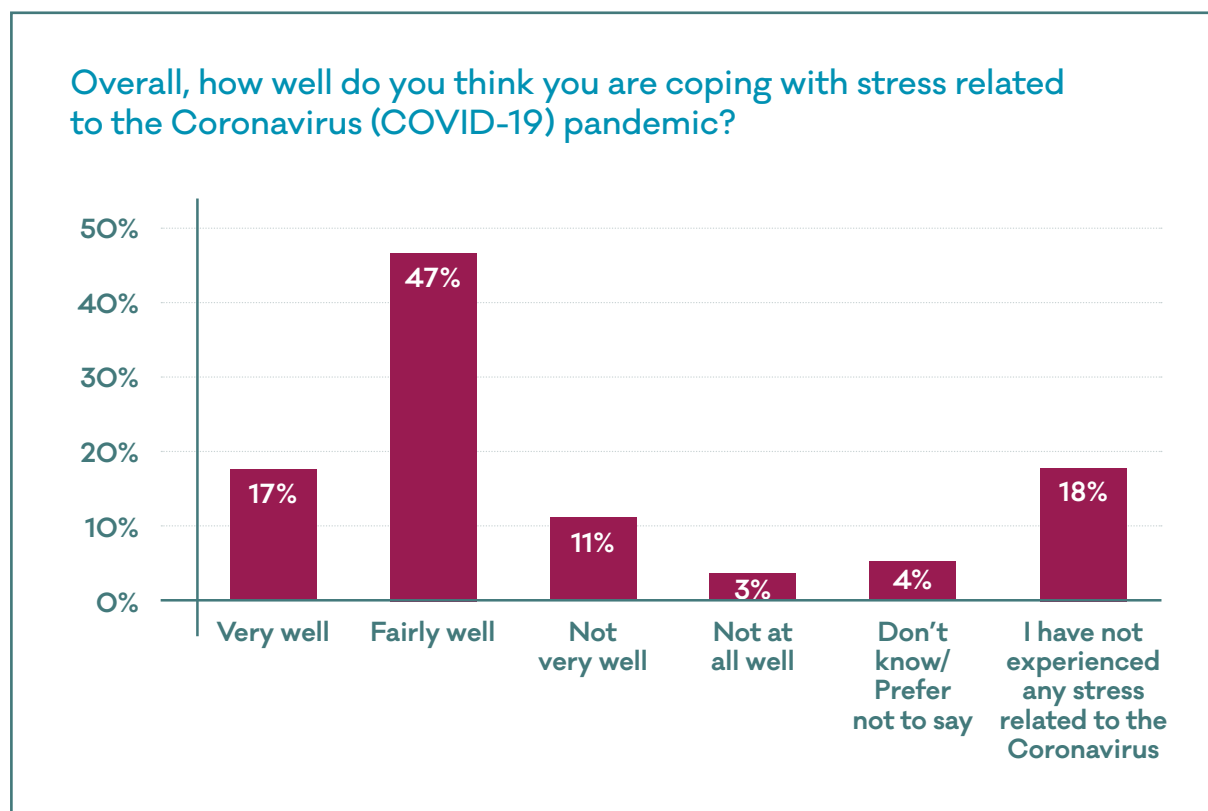
Overall, how well do you think you are coping with stress related to the Coronavirus (COVID-19) pandemic?

Overall, how well do you think you are coping with stress related to the Coronavirus (COVID-19) pandemic? *'Coping Very Well / Fairly Well'*

Total population
18-24 years

	Wave 2 (2-3 Apr)	Wave 3 (24-26 Apr)	Wave 4 (28-29 May)	Wave 5 (18-22 Jun)	Wave 6 (28-31 Jul)	Wave 7 (26-28 Aug)
Total population	73%	70%	68%	67%	67%	64%
18-24 years	64%	61%	63%	61%	60%	56%

decline in our ability to cope well as the pandemic and its associated restrictions continue. In particular, Young People (aged 18-24yrs) are coping less well as restrictions continue.

Nothing had prepared people for the experience of living through this pandemic, yet respondents in our focus group reported that they had coped well, and in many cases better than they expected.

"I was lucky, because I work in tuition, I was lucky to have a few students that I could work with online. That was enormously helpful because you had some sort of sense of purpose that you were doing something and being some kind of use ..."

However, some people found it difficult to be separated from partners:

"...I was unable to isolate with a partner and therefore I have been feeling the disadvantages of the lack of physical and romantic intimacy. This type of intimacy can be very comforting, be it one-off with a new person or with a long-term partner. I believe that those who have had to isolate on their own, or with people with whom they only have a non-sexual/non-intimate relationship, are feeling even more anxious than those who live with their romantic or sexual partners..."

While some found it more difficult to be with people the whole time:

... I am living with my partner and daughter... I have no down-time, no isolation time. I need to have time on my own to maintain my mental health..."
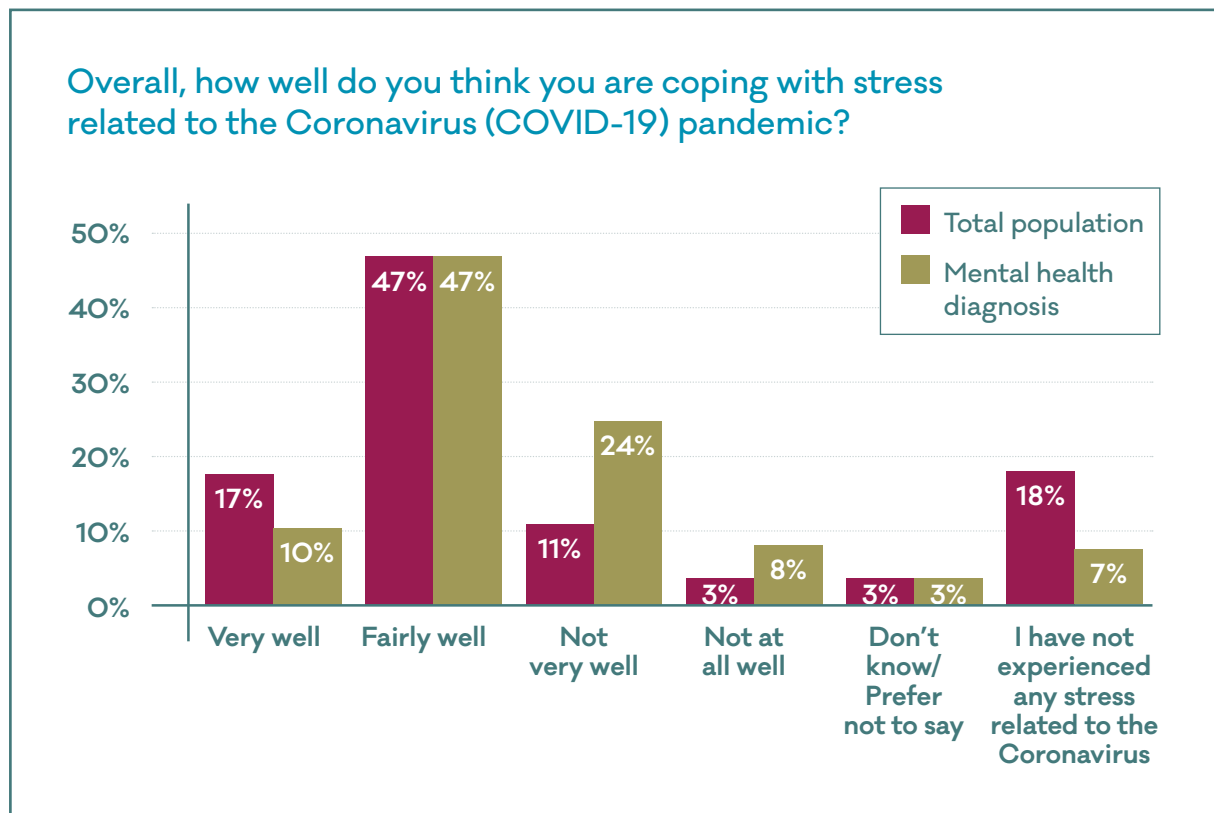
Variations in people's resilience

The extent to which people report feeling resilient differs by demographic group. These differences reflect people's life histories and social circumstances.

People who are unemployed were three times less likely to say that they were coping 'very well' (6%) compared to people in employment (16%). They were also more likely to say they were not coping well (19%) compared to those in employment (11%). These findings make sense given the strong evidence of employment as a protective factor for mental health and wellbeing.

Our focus group participants particularly welcomed the opportunity to work from home, where able to do so:

"…I live with my husband and son… and I like to work from home… no one is pressing me to go out, it's less stressful…"

"I like working from home… not a mad commute and rat race…"

Overall, how well do you think you are coping with stress related to the Coronavirus (COVID-19) pandemic?

|	Very well	Fairly well	Not very well	Not at all well	Don't know/ Prefer not to say	I have not experienced any stress related to the Coronavirus
Total population	17%	47%	11%	3%	3%	18%
Mental health diagnosis	10%	47%	24%	8%	3%	7%

People with a pre-existing mental health problem were much more likely than the overall population to report not coping well, with 32% of this group reporting they are not coping well (either not very, or not at all), compared with 14% of the population as a whole.

However, 57% of those with a pre-existing mental health problem reported that they have coped well, showing that despite having a mental health problem, they have found inner and/or external resources to enable them to manage the effects of the crisis.

Focus group participants also articulated that people's ability to cope depended very much on their personality and circumstances, with some people finding that restrictions suited them, while others experienced restrictions as challenging:

"... so I think it's been really different for each person in their own individual circumstances, which is a truism, I guess, but yeah."

"... I am an introvert, so having to go to fewer places and having to see fewer people suits me... "
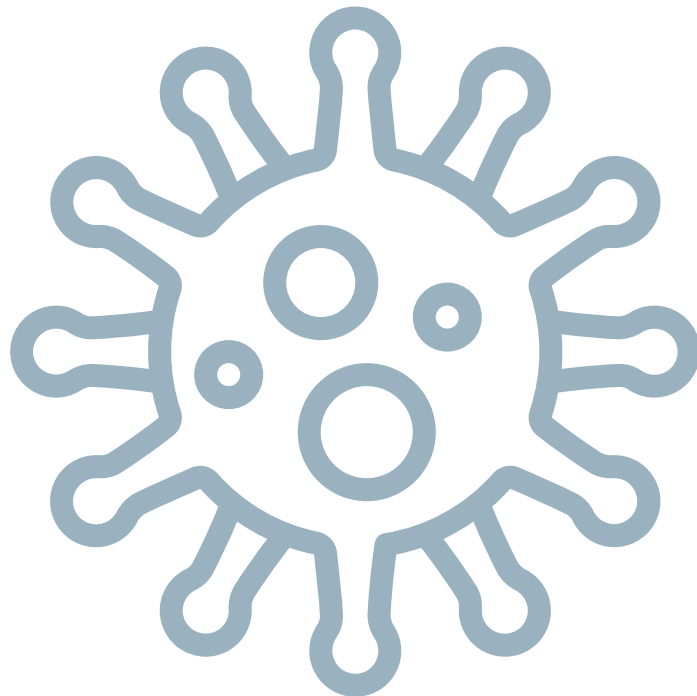
Positive ways of coping with stress

There is good evidence for a range of actions that people can take to improve their mental health.

The Foundation has published general guidance on looking after one's mental health as well as specific guidance for coping with the stress of the pandemic.[8,9]

In terms of coping with the stress of the pandemic, our suggestions include:

- Exercising
- Spending time in nature
- Maintaining contact with friends and family
- Eating healthily
- Being aware of smoking and drinking
- Taking time to relax
- Being mindful
- Getting restful sleep
- Avoiding negative thinking
- Doing an enjoyable hobby

Findings from our study show that people are benefiting from these types of activity to help their mental health and overall wellbeing. In total, almost nine out of ten (87%) of those who have experienced stress as a result of the pandemic reported at least one of these actions to support their mental health, while only 9% say that nothing has helped them cope with the stress of the pandemic (13% of men and 5% of women). The chart on page 11 shows the top 5 coping activities selected in the survey by participants, and the proportion of participants who selected no coping activities.
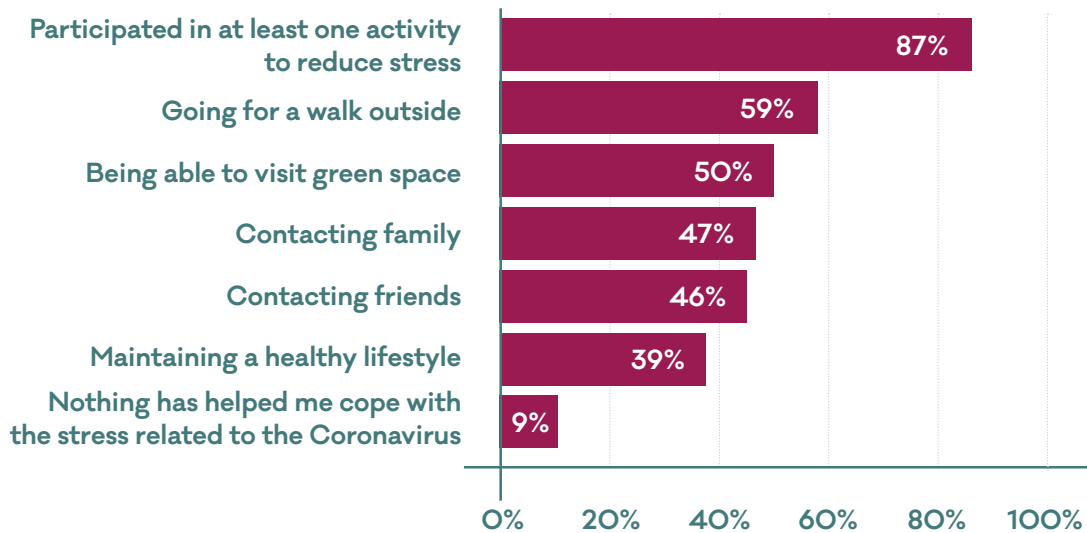
Exercise is known to boost mood, while physical fitness is a protective factor for good mental health. There is now strong evidence to demonstrate the protective effect of physical activity on a range of many chronic conditions, including coronary heart disease, obesity, type 2 diabetes, mental health problems and social isolation.[10] Even relatively small increases in physical activity can contribute to improved health and quality of life.[11]

Our study shows that 59% of the adult population has found going for a walk outside helped them to cope with the stress of the pandemic.

Spending time in green space is known to be beneficial for mental health and overall wellbeing.[12] Spending time in natural environments reduces levels of stress and/or improves attention fatigue and mood more than built-up environments. There is strong evidence that living in greener environments is associated with better mental health and overall health and wellbeing, while long-term exposure to green space may protect against anxiety and depression.[13]

Which, if any, of the following have helped you to cope with stress related to the Coronavirus (COVID-19) pandemic?*

Response	Percentage
Participated in at least one activity to reduce stress	87%
Going for a walk outside	59%
Being able to visit green space	50%
Contacting family	47%
Contacting friends	46%
Maintaining a healthy lifestyle	39%
Nothing has helped me cope with the stress related to the Coronavirus	9%

Multiple response.

Our study shows that 50% of adults across the UK had visited green space in August as a way of coping with the stress of the pandemic.

All focus group participants agreed that access to nature, green spaces, open spaces and plants (e.g. gardens, parks, allotments, balconies with plants, the seaside, water, etc.) has helped them to cope and is crucially important for wellbeing:

"I have a balcony and I invested in plants. It brings me to the present."

"... a garden is important. And green spaces around me... and open spaces where there is no contact with anyone else."

"... being near nature, which kept me sane."

Connecting with others with whom we have a positive relationship is an effective way of supporting our mental health and wellbeing and may prevent mental health problems.[14] Through connecting with others, we receive affirmation of our identity and share compassion for our struggles. Maintaining connection protects gainst loneliness.

Findings from our study show that during the pandemic many people found connecting with others a valuable way of coping with stress. When asked about what had helped them to cope during the pandemic, 47% of survey
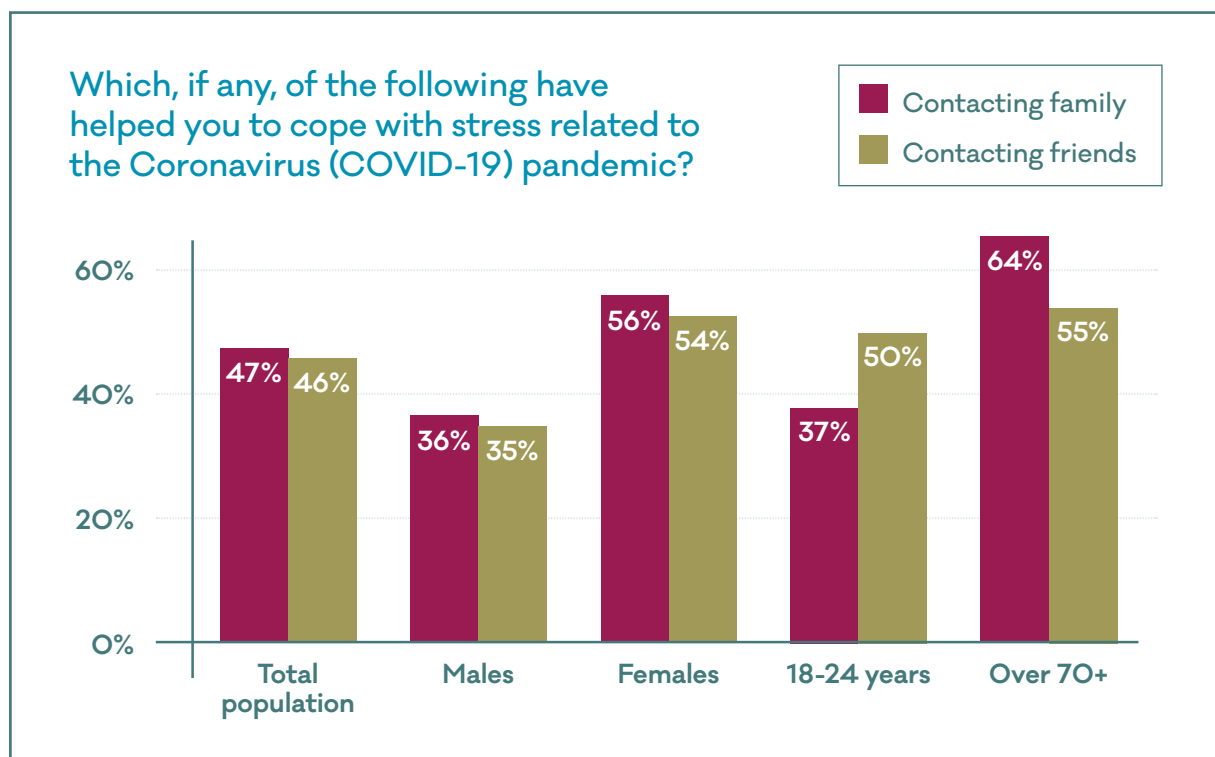
respondents identified connecting with family, while 46% identified connecting with friends. Older people over the age of 70 and females were more likely to seek contact with friends and family connections.

In contrast, relatively small proportions of the population have sought support for their mental health from a mental health professional or a support group. In our study, 4% said that they had contacted a mental health professional (counsellor, etc.), while 1% said that they had contacted a support group. However, the proportion who utilised these types of support was higher among people with a pre-existing mental health problem (11% contacted a professional), showing the need for this type of support for some people who might otherwise be isolated.

Most of our focus group participants agreed that social contact was vital for their ability to cope with the stresses of the pandemic.

However, there were differences in the types of daily contact that people felt comfortable with, and with whom and where people felt comfortable being in contact with others. For instance, almost all members of the focus group were feeling comfortable with the person/people in their own household and/or virtual or social media contacts. However, they identified heightened worry, stress and anxiety about meeting up outside their home, especially in high risk places (e.g. crowed spaces) and with reckless people (e.g. those who flout the rules of physical distancing, do not wear a face covering, etc.), whilst meeting up in a park or big open space where there

Which, if any, of the following have helped you to cope with stress related to the Coronavirus (COVID-19) pandemic?

Legend:
- Contacting family
- Contacting friends

Category	Contacting family	Contacting friends
Total population	47%	46%
Males	36%	35%
Females	56%	54%
18-24 years	37%	50%
Over 70+	64%	55%

are few people was seen as less worrying and stressful:

"I am living with my parents and I have my friendship groups. I also have professional contacts and – since lockdown lifted – I occasionally am meeting up with others. Yes, social contacts with others keep me grounded."

Pets were also mentioned as an important source of companionship, and again later in connection with exercise and green space.

Maintaining a healthy diet can also contribute to mental health and wellbeing. Eating well (i.e. a well-balanced diet rich in vegetables and nutrients) may be associated with feelings of wellbeing. One 2014 study found high levels of wellbeing were reported by individuals who ate more fruit and vegetables.[15] In addition, one study found that a Mediterranean-style diet (a diet high in vegetables, fruits, legumes, nuts, beans, cereals, grains, fish, and unsaturated fats such as olive oil.) supplemented with fish oil led to a reduction in depression among participants, which was sustained six months after the intervention.[16]

Sleep is a protective factor for mental health. It plays a central role in our learning, emotional regulation, behaviour, and how we interact with others – all of which might help to explain the vital role that sleep plays in our ability to interact and cope with the world around us.[17]

Lack of sleep can affect our emotional regulation, and studies suggest that

sleep deprivation may limit our ability to manage our responses to negative situations.[18] For these reasons, sleep becomes even more important during times of crisis.

In our study, maintaining a healthy lifestyle (e.g. balanced diet, enough sleep, exercise etc.) was reported to be a valuable support for 39% of the population, with women more likely to identify this as a helpful way of coping (41% women, 36% men). Of some concern is that only 32% of unemployed people and only 29% of people with a diagnosed mental health problem reported that maintaining a healthy lifestyle aided their ability to cope with the stress of the pandemic.

In terms of getting an adequate amount of sleep, approximately one-sixth of adults (16%) say that the coronavirus pandemic has negatively affected their sleep in the past two weeks. It is positive that the proportion of people whose sleep has been negatively affected has dropped from a high of 26% since 24-26 April.
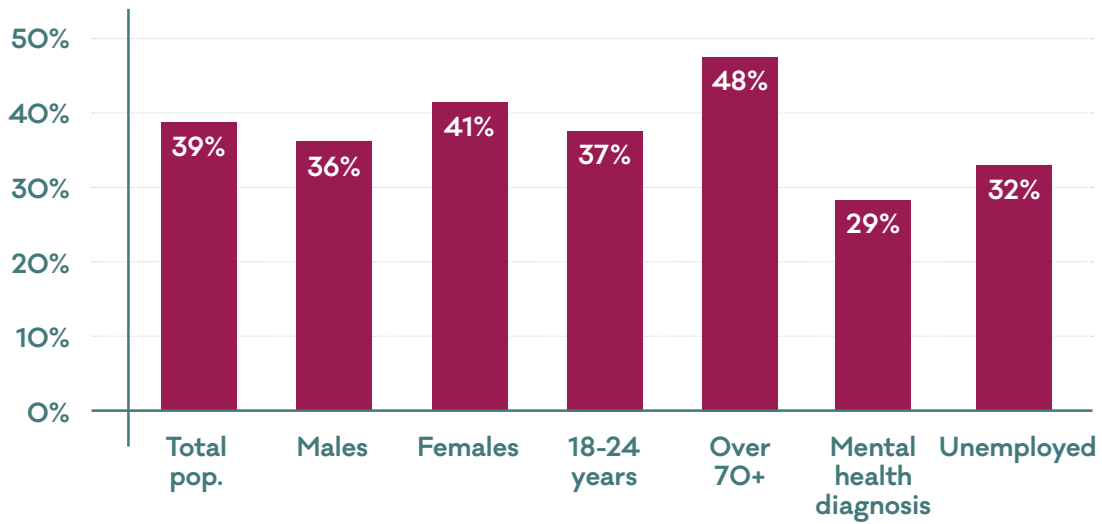
Participants in our focus group agreed that the allowance of one daily outdoor activity during lockdown was very beneficial and a great help with coping:

"Gardening and walking dogs is key. I went to the coast for long walks when we were allowed to do so. It means a lot to me for my mental health and wellbeing."

"I walked my dog each day... I am more aware of exercise and the value of it because of Covid and the lockdown."

Which, if any, of the following have helped you to cope with stress related to the Coronavirus (COVID-19) pandemic? Maintaining a Healthy Lifestyle (e.g. balanced diet, enough sleep, exercise etc)

	Total pop.	Males	Females	18-24 years	Over 70+	Mental health diagnosis	Unemployed
	39%	36%	41%	37%	48%	29%	32%

However, for some people, the lockdown made it more difficult to exercise. Two participants explicitly mentioned the negative impacts of gym closures and the lack of various social activities, such as dancing, which were their main physical activities (e.g. semi-professional dancing at high and competitive level) and also a partial source of income (e.g. coaching in a gym), with which they strongly identified themselves. The loss of these activities (which continues now) hits hard and is like grieving a loss, as it is so important in their lives:

"I was coaching in a gym, but they closed. I lost a big aspect of my identity. I am riding a bike but it's not the same. It has affected my anxiety and hypervigilance as I don't have the same tools as before. It [lockdown and its consequences] broke my routine."
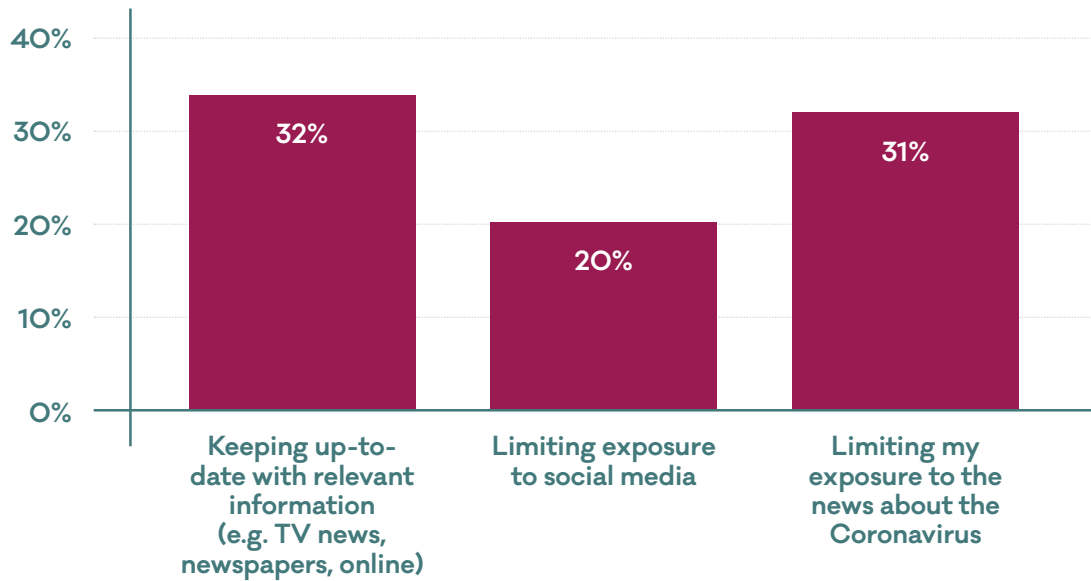
Doing an enjoyable activity such as a hobby can also support mental health. In our study, 38% of adults reported that engaging in a hobby helped them to cope with the stress of the pandemic.

Negative thinking is a widely recognised contributor to anxiety and depression such that psychological therapies for these conditions often focus on addressing negative thoughts. In our study, we asked people about practices that might help them to avoid negative thinking, such as limiting exposure to the news about the coronavirus or to social media.

We also asked if keeping updated with relevant information helped them to cope with the stress of the pandemic. We found that these have been valuable supports for about one-third of the population since lockdown.

Which, if any, of the following have helped you to cope with stress related to the Coronavirus (COVID-19) pandemic?

Keeping up-to-date with relevant information (e.g. TV news, newspapers, online)	32%
Limiting exposure to social media	20%
Limiting my exposure to the news about the Coronavirus	31%

All participants in the focus group agreed that the use of media (both mainstream media and social media) is a double-edged sword, with both pros and cons, although everyone agreed that too much media (both mainstream and social media) is stressful, worrying and anxiety-inducing.

Yet, participants agreed that there is a tension between obtaining information about the Coronavirus, lockdown and associated rules and legislation, and keeping away from the media to safeguard wellbeing:

"My use of the news increased at first... But it's helpful to limit news because it's stressful ..."

"I am avoiding media and news as it muddles my own thinking. But I need to stay informed to have the correct information to carry on..."

"...I'm making a conscious effort not to listen anymore... media has a negative effect."

Negative ways of coping

While most people have turned to positive ways of coping with the stress of the pandemic, a significant minority have responded in ways that may harm their mental health and wellbeing if sustained over time.

Drinking too much alcohol and using illicit drugs can be both a consequence and a cause of poor mental health. There is a strong association between substance misuse, including alcohol misuse, and both mood and anxiety disorders.[19]

Alcohol can temporarily alleviate the feelings of anxiety and depression that may arise during the pandemic, but it can also make our physical and mental health worse and is a key risk factor in suicidal behaviour. Similarly, drug misuse may provide a temporary feeling of wellbeing or of being in control, but can ultimately damage an individual's physical and mental health. Our study shows that one-fifth (19%) of adults who had experienced stress related to the pandemic said they had drunk more alcohol in August in order to cope with that stress.

More positively, the numbers of people who reported drinking more has steadily dropped, from a high of 38% at Wave 3 (fieldwork conducted 24th-26th April – one week after lockdown was extended).

Regarding illicit drug use, a relatively small proportion of individuals (2%) who had experienced stress related to the pandemic said that they had increased their use of illicit drugs in order to cope with that stress. This figure has thus far remained steady.

Over-eating can lead to obesity, which is a risk factor for poor physical and mental health and is a high-risk factor for COVID-19.
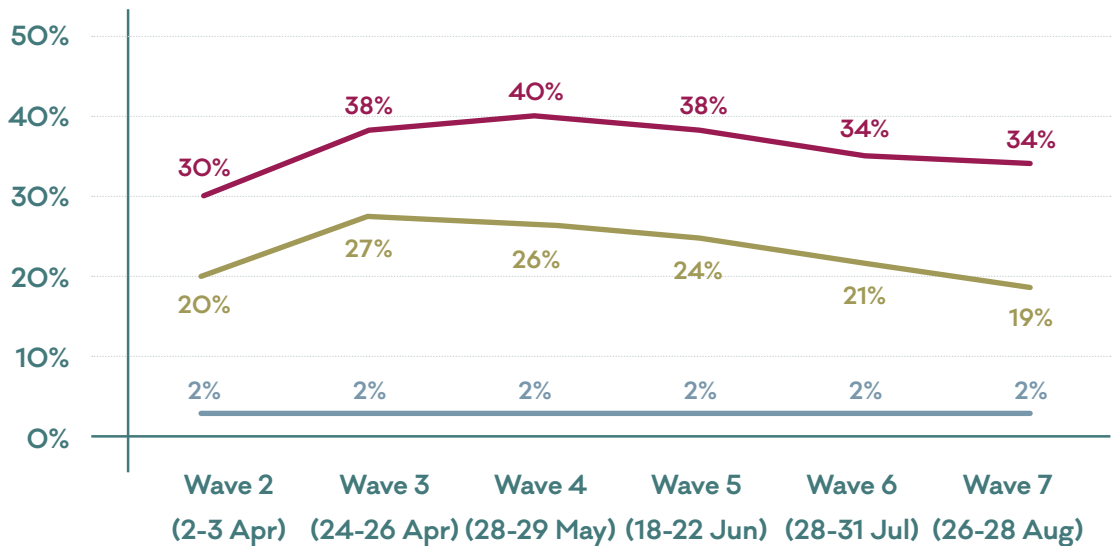
Evidence suggests that over-eating may be partly responsible for depression among people who are obese[20], although the influence also goes in the other direction. For this reason, over-eating represents a negative coping behaviour that should be avoided, if possible.

Of those adults who said that they had experienced stress related to the pandemic, one third (34% total, 30% men, 37% women) said they had eaten too much as a way of coping with the pandemic.

Which, if any, of the following have you done more of to cope with stress related to the Coronavirus (COVID-19) pandemic?

Legend:
- Eaten too much
- Drunk more alcohol
- Took more illicit drugs

	Wave 2 (2-3 Apr)	Wave 3 (24-26 Apr)	Wave 4 (28-29 May)	Wave 5 (18-22 Jun)	Wave 6 (28-31 Jul)	Wave 7 (26-28 Aug)
Eaten too much	30%	38%	40%	38%	34%	34%
Drunk more alcohol	20%	27%	26%	24%	21%	19%
Took more illicit drugs	2%	2%	2%	2%	2%	2%

Implications for policy

Resilience can be supported at the structural level in terms of whole-society measures and interventions that foster good mental health and wellbeing, at community-level through local programmes and initiatives, and for individuals through increasing mental health literacy, self-care and positive coping skills.

Such measures complement the necessary provision of adequate mental health services and supports for people who experience mental distress.

At the national level, the UK and devolved-nations administrations have put in place valuable measures such as income supports and stays on evictions to prevent homelessness. These protections for people's financial and physical security are hugely important supports for the mental health and resilience of millions of people, at a time of lockdown restrictions and uncertain employment prospects.

They exemplify how departments right across government have major roles in protecting our mental health – a task that cannot be left to the Department for Health and Social Care alone. Each national agency for public health has also published online advice about healthier ways of coping with the pandemic.

However, it is vital that longer-term sustainable supports are put in place to further improve people's resilience. For the next phase of the pandemic and its economic aftermath, we recommend:

1 **A Whole-Government COVID-19 Mental Health Response and Wellbeing Recovery Plan that reflects a cross-governmental approach to mental health and wellbeing during the coronavirus crisis and in the recovery phase.**

Measures to address the social determinants of mental health and wellbeing at the structural level require action by government departments other than health, for example communities and local government, education, justice, transport and welfare. Such action can help people to protect and recover their mental health and overall wellbeing during and after the pandemic and can prevent more severe mental health problems from taking hold as a consequence of the crisis.

2 **The UK Government should publish a sustainable Wellbeing Economy Green Paper, drawing on international experience from New Zealand, and experience from elsewhere in the UK.**

The pandemic has exposed the fragile nature of our economies and societies in the wake of a major global health crisis

and demonstrated that wellbeing must be at the heart of decisions about the UK's future. One way to focus attention on wellbeing across Government is by making it a key measure of the country's sustainable economic progress.

3 **The new National Institute for Health Protection should ensure that its work on communicable diseases incorporates a focus on their mental health effects. Also, a national body providing leadership and oversight on public mental health must be established to continue the non-communicable disease-related public mental health functions of Public Health England.**

A national body providing public health leadership, expertise, resources and oversight is essential to support local public mental health functions. Such a body provides the national-level infrastructure for population health improvement, including data collection and evaluation that enables ongoing planning for the mental health of the population. It also provides a focal point for expert advice to government on public mental health, and acts as an advocate for public mental health actions in other government departments.

It is not acceptable to lose the home of the national public mental health function without making a clear commitment to a replacement body that fulfils all of these functions.

4 **Cuts to local authority public health budgets should be fully reversed, and the government should reprioritise public health and treat health outcomes as a key indicator of success.**

Preventing mental health problems – an area of policy known as "public mental health" – has historically received little attention, both in terms of policy proposals and funding. Local authorities are responsible for delivering public mental health in their local area, and this is largely funded through the public health grant.

The public health grant remains 19% below the level of the 2015/16 allocation and falls short of the £1bn per year that the Health Foundation and King's Fund calculate is necessary to restore cuts to public health services.[21] Local authority spending on public mental health already represents a low proportion of their overall public health spending. The public health grant shortfall limits local authorities' ability to fund public mental health; it must be restored to its 2015/16 level.

5 **Every government department should undertake a public policy review and apply a values-based approach to all workstreams, with kindness, equality, dignity and respect informing each government framework, with measurable outcomes.**

Policies rooted in the core values of kindness, empathy, dignity and respect have greater potential to strengthen relationships and trust between service

recipients and providers and may more broadly prompt greater trust between governments, citizens and wider society.

A society infused with this ethos of kindness is more likely to be resilient against crises than one rooted in conflict and lack of mutual respect.
A public policy review of kindness, equality, dignity and respect should include developing new metrics, coproduced with the people and communities the policies aim to benefit, such as satisfaction and attention, which require a focus on the relational and the kind, not only on the rational.[22]

(6) Universal Credit advance payment should immediately be made a grant for all claimants, removing the current requirement to repay it over the following 12 months. In the medium term, the Government should convene an expert Taskforce to develop proposals for reducing economic insecurity on a long-term basis.

The five-week wait for Universal Credit claimants is pushing people into food banks and a poverty cycle which is also undermining their mental health. The link between poverty and mental health has been recognised for many years and is well evidenced. Financial security is a fundamental source of mental and emotional resilience.

(7) The government should provide additional resources and mechanisms to enable the health visiting function to continue to provide face-to-face and other support to parents and maintain safe early intervention with families, including those at risk, during the pandemic and in the recovery phase.

Pregnancy and the very earliest years of a child's life represent a unique opportunity for preventing mental health problems in childhood, adulthood and later life, with home visiting programmes and evidence-based parenting support programmes shown to be some of the most cost-effective mental health interventions for parents. It is vital that professional and more informal community maternal mental health and early years supports are maintained during the pandemic and the recovery.

(8) Local authorities should provide funding for development of safe places for social connection and interaction via community and peer support, utilising community assets such as libraries and other community spaces, and also online provision/extension of these.

(9) National governments should provide a designated funding stream for local authorities to support community development initiatives, including peer support, to promote public mental health. This should be available to all communities and include targeted initiatives for vulnerable communities.

10 **Local authorities should be given additional resources to improve the physical environment in neighbourhoods and leisure areas, creating safe spaces for outdoor activities, and green environments to enable people to fulfil Government guidance on exercise. National and devolved governments should also protect and facilitate access to nature (green and blue spaces) as part of a sustainable wellbeing economy and an inclusive 'good health and wellbeing for all' strategy. Governments should also ensure the continued inclusion of a period of daily physical activity when deciding on future lockdown restrictions.**

At the community level, local authorities and other providers of support should implement measures to foster people's resilience during and after the pandemic. These measures can include programmes to support community development and to improve environmental infrastructure. Asset-based approaches to community development are another way to foster communities' resilience.[23] "Assets" are strengths, identified by a community as valuable to them, that when exposed to the right conditions can be used to positively transform that community.

Assets can be physical resources (such as land, money and buildings), but more often in public health, assets tend to be psycho-social, such as self-esteem, confidence, a sense of coherence, knowledge, skills, social networks and collective efficacy.[24] There is some evidence that asset-based approaches at the community level can improve individuals' mental health outcomes, for instance by increasing self-esteem and reducing social isolation.[25]

In addition, the Mental Health Foundation has produced a COVID-19 policy recommendations briefing paper, elements of which draw on our study; this is available at https://www.mentalhealth.org.uk/coronavirus/pandemic-recommendations-prevention

At an individual level, increasing one's mental health literacy and engaging in the mental health-promoting behaviours discussed in this briefing paper can help to build our resilience to stress. The public health agencies in each of the four nations have produced vital guidance for individuals on how to cope with the mental health effects of the pandemic. This information is available on the UK's Coronavirus (COVID-19) health and wellbeing webpage and on the coronavirus mental health hubs for Scotland, Wales and Northern Ireland.

The Foundation is part of the UK Government's response to the pandemic and has produced a range of online information resources on how to support one's own mental health and wellbeing during the pandemic. These resources are tailored to different circumstances and social groups and can be found on the Foundation's coronavirus hub.

Conclusion

Resilience enables us as individuals, families, communities, as nations and as a country, to cope better with the stress of the coronavirus pandemic. This study shows that, on balance, and thus far, many people are coping well, while some people are struggling to cope with the current crisis. People are using a wide range of strategies to cope; the positive strategies they are using are consistent with the Foundation's guidance and other evidence on what works to protect people's mental health.

In contrast, some people are resorting to potentially harmful ways of coping, including increased alcohol and illicit drug use and over-eating, putting their mental and physical health at greater risk.

The UK Government and devolved administrations have a responsibility to lead not only the physical but also the mental and emotional recovery from the pandemic. While each nation has made available mental health literacy resources in response to the coronavirus pandemic, more should be done at UK, national, regional and local authority levels to support people's resilience in order to foster the best possible mental health and wellbeing outcomes from this current challenge.

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