COVID-19 and Well-being: Life in the Pandemic

Highlights
The pandemic has touched on every aspect of people’s well-being

The COVID-19 pandemic is having far-reaching consequences for how we live, work and connect with one another, as well as for the economic, human, social and environmental systems that support well-being over time. The OECD Well-being Framework offers a way to systematically capture the human impacts of COVID-19, and provide a more holistic picture across the policy spectrum.

In the months since March 2020, when the World Health Organization first declared COVID-19 a global pandemic, the situation rapidly cascaded from a public health crisis to a global economic and social crisis, with both short- and potentially long-term consequences.

In the first year of the pandemic across the OECD on average …

<table>
<thead>
<tr>
<th>Category</th>
<th>Description</th>
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<tbody>
<tr>
<td>Income and wealth</td>
<td>Average household disposable income increased by 2.9% between 2019 and 2020, but 31% of people in 25 OECD countries faced financial difficulties at the end of 2020.</td>
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<tr>
<td>Work and job quality</td>
<td>Unemployment rose 1.7 percentage points from 2019-20, while labour underutilisation doubled from Q1-Q2 2020, and 14% of workers felt “likely” to lose their jobs within 3 months.</td>
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<tr>
<td>Physical and mental health</td>
<td>Excess mortality averaged 16%; life expectancy fell by 0.6 years; and more than a quarter of people in 15 OECD countries were at risk for anxiety or depression by late 2020.</td>
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<tr>
<td>Work-life balance</td>
<td>1 in 3 people were too exhausted to do necessary household chores. Those teleworking were less tired and spent more time with family, but work was more likely to seep into personal life.</td>
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<tr>
<td>Social connections</td>
<td>1 in 5 people in 22 European OECD countries felt lonely most or all of the time in early 2021, up from 1 in 7 in the first months of the pandemic.</td>
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<tr>
<td>Social capital</td>
<td>Trust in both others and institutions were important resilience factors, but by Feb-May 2021, a majority of adults in 12 OECD countries found society &quot;more divided now&quot; than pre-COVID.</td>
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**The OECD Well-being Framework**

<table>
<thead>
<tr>
<th>CURRENT WELL-BEING</th>
<th>Key dimensions</th>
<th>How we measure them</th>
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<tr>
<td>Income and Wealth</td>
<td>Subjective Well-being</td>
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<td>Work and Job Quality</td>
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<td>Housing</td>
<td>Work-life Balance</td>
<td>Inequalities between top and bottom performers</td>
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<td>Health</td>
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<td>Knowledge and Skills</td>
<td>Civil Engagement</td>
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<td>Environment Quality</td>
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<table>
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<tr>
<th>RESOURCES FOR FUTURE WELL-BEING</th>
<th>Key dimensions</th>
<th>How we measure them</th>
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<tbody>
<tr>
<td>Natural Capital</td>
<td>Human Capital</td>
<td>Stocks</td>
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<tr>
<td>Economic Capital</td>
<td>Social Capital</td>
<td>Flows</td>
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The framework includes 11 dimensions of **current well-being**, covering outcomes at the individual, household or community level, focusing on material conditions, quality of life factors and community relations. Because well-being averages mask **inequalities** within countries, the framework measures the full distribution of well-being outcomes by taking into account gaps between population groups, gaps between those at the top and bottom, and deprivations. The framework also includes the resources that underpin future well-being, measured through four types of capital: Economic Capital, Natural Capital, Human Capital and Social Capital. The capitals emphasise the **sustainability of well-being** into the future, and each of the capital stocks can be affected by decisions made, or not made, today.
The virus has had devastating impacts on physical health and mortality. **Excess deaths in 33 OECD countries averaged 16%** between March 2020 and early May 2021, compared to the average number of deaths during the same time period from 2015 to 2019. This resulted in a **7-month fall in OECD 29-average life expectancy** in 2020.

Government support helped to sustain OECD average household income levels in 2020, and stemmed the tide of unemployment, even as average hours worked fell sharply and **labour underutilisation rates nearly doubled** between the first and the second quarter of 2020. Although job retention schemes were offering workers some protections, 14% of workers in 19 European OECD countries felt it was “likely” they would lose their job within three months, and nearly 1 in 3 people reported at least one **financial difficulty**.

On average, **house prices grew** by 4.7% from 2019 to 2020 across the OECD area, and rental prices increased by 1.8%. This, combined with reduced earnings, falling working hours and rising energy prices has raised living costs and **threatened housing affordability** – especially for the poorest households.
Mental health deteriorated, with data from 15 OECD countries suggesting that over one-quarter of people were at risk of depression or anxiety in 2020. These rates rose slightly in the early months of 2021, though new evidence from some countries suggests that mental health may have begun to recover, in some instances. Yet as the pandemic has worn on, in general more people are feeling worn out. In early 2021, one-third of people in 22 European OECD countries reported feeling too tired after work to do necessary household chores, up from 22% in the first months of the pandemic a year earlier. Feelings of loneliness, division and disconnection from society also grew between mid-2020 and the first half of 2021.

Confinement measures brought new challenges in terms of school closures, unpaid care work, and domestic violence. While some pressures on well-being improved in the earliest stages of the pandemic (e.g. carbon emissions fell, road deaths reduced, trust in government rallied, and gender-gaps in unpaid home and care work narrowed), all now show strong signs of reverting back to business as usual.
Experiences of the pandemic have varied widely depending on age, gender, race and ethnicity, as well as jobs, pay and skills

The crisis has hit people who were already struggling the hardest. Typically, disadvantage accumulates and intersects in ways not easy to see in the data we have, and this can understate how well-being challenges pile up for certain groups of people. For example, the relationship between well-being, race and ethnicity is complex – and a broader range of socio-economic factors, including living and working conditions as well as deep-seated forms of racism and discrimination, can help explain why different racial and ethnic communities have experienced divergent outcomes during COVID-19.

In Canadian neighbourhoods where less than 1% of the population belongs to a racial or ethnic minority group, COVID-19 mortality rates were ...

49%  
... lower than mortality rates in neighbourhoods with more than a 25% share of racial or ethnic minorities

From Jul-Sep 2020 the unemployment rate of Britons belonging to an ethnic minority group was ...

9%  
... compared to only 4.5% of white Britons

From April 2020 to May 2021, the share of Americans belonging to a racial or ethnic minority group reporting symptoms of anxiety or depression was ...

40%  
... compared to 36% for white Americans in the United States

In those OECD countries with data, COVID-19 mortality rates for some ethnic minority communities have been more than twice those of other groups, while ethnic minority workers have been more likely to lose their jobs during the pandemic. Mental health deteriorated for almost all population groups on average in 2020, but gaps in mental health by race and ethnicity are also visible.
In the case of age, older people have been much more likely to suffer severe outcomes or death due to COVID-19 infection, making reduced social contact an especially important precaution for them. Younger adults have meanwhile experienced some of the largest declines in mental health, social connectedness and life satisfaction in 2020 and 2021, as well as facing job disruption and insecurity.

In Q2 2020 the youth unemployment rate was double that of other working-age adults, and in 22 European OECD countries 19% of workers aged 18 to 24 felt they were likely to lose their job in the near future, compared to 11% of people 25 and over. Survey data from 12 OECD countries indicate that anxiety and depression rates for 15-24 year-olds have been higher than older age cohorts, both early in the pandemic (April through December 2020), as well as later on (January through June 2021) (Figure 1).

Figure 1. Young people experienced the highest rates of anxiety and depression, both earlier and later in the pandemic

Note: Risk for depression and anxiety are measured using the PHQ-4 questionnaire; results are from 12 OECD countries. 2020 data refer to Apr-Dec; 2021 data were collected from Jan-Jun. OECD calculations based on Imperial College London YouGov (2020) Covid 19 Behaviour Tracker Data Hub (database).
Average well-being outcomes also differed by gender, as well as across different household types, during the pandemic. Excess deaths have been higher for men than for women, yet women are more likely to experience long COVID. Throughout the first year of the pandemic, women also saw larger falls in mental health, and felt lonelier.

At the same time, women have often been on the frontline of pandemic care, whether in their jobs or doing unpaid care work at home. Evidence from a number of OECD countries shows that even when men stepped up their share of unpaid work (including household, homeschooling and care work), this was only temporary and insufficient to match women’s contributions.

**Figure 2. Parents with young children experienced larger drops in life satisfaction**

**Figure 3. Those living without a partner felt loneliest in the first year of the pandemic**

Housing conditions and how we live together took on a new significance for well-being in the pandemic. Life satisfaction fell particularly for couples living with children during 2020 (Figure 2), while single parents and those living alone in 22 European OECD countries were almost twice as likely to feel lonely, compared to the population as a whole (Figure 3).
Whether and where people work has affected their exposure to both COVID-19 and the wider impacts of the crisis. Teleworking helped to protect people and their jobs, particularly for the well-paid and highly-skilled, but was not an option for the majority of workers. Data from 11 OECD countries showed workers in the bottom earnings quartile were twice as likely to stop working, and nearly half as likely to telework, compared to those in the top quartile (Figure 4).

**Figure 4. While higher-earning employees often worked from home, lower-earning employees had to stop working**

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<th>Working from home</th>
<th>Working in the usual workplace</th>
<th>Stopped working</th>
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Note: Share of employees working from home, working in the workplace, or who stopped working, by income quartile, from April to May 2020. 1st quartile refers to the bottom income quartile; 4th quartile refers to the top. Data are from the REPEAT (REpresentations, PErceptions and ATTitudes on the COVID-19) survey.

Losing work means losing more than your salary: unemployed people were more than twice as likely to feel lonely and to feel left out of society compared to the employed.
Stocks of natural, human and social capital will need re-building after the crisis

In addition to the impacts of the pandemic on children and young people, damage to stocks of natural, economic, human and social capital have long-run consequences for societal well-being. Building back better must mean addressing the climate and biodiversity crises that threaten future well-being, as well as building up human and social infrastructure.

Labour market underutilisation — which measures the share of the total labour force who are either unemployed, marginally employed (those not in the labour force who did not recently seek work but who wish, and are able, to work) or underemployed (full-time workers working less than usual for economic reasons) — in 32 OECD countries reached 17% in 2020. Furthermore in 27 OECD countries, 13% of people aged 15-29 were not in employment, education or training (NEET) in 2020, erasing gains made since the 2007-08 crisis. Pandemic strains meant more people accumulated future health risks such as weight gain and increased alcohol consumption (Figure 5): data from 19 OECD countries collected from October to November 2020 found that 31% of people, on average, had gained weight since the start of the pandemic, compared to only 18% who had lost weight. Similarly, 22% reported having increased their physical activity, while 25% reported exercising less frequently.

Figure 5. More people adopted unhealthy, rather than healthy, behaviours since the start of the pandemic

Lost weight -18%  Gained weight 31%
Exercised less -25%  Exercised more 22%
Consumed less alcohol -7%  Consumed more alcohol 12%
Stopped smoking -3%  Started smoking 3%

Note: OECD 19 average health behaviour changes since the start of the pandemic, as of Oct-Nov 2020. OECD calculations based on Bailey et al. (2021) Diet and health under COVID-19, Ipsos.
Trust (in people and in institutions) has been an important resilience factor, with higher trust contributing to COVID-19 containment. Nevertheless, some of the early gains in trust enjoyed by several governments have since been eroded. At the same time, feelings of disconnection have grown. By early 2021, 1 in 3 people in 22 European OECD countries felt left out of their societies (up from 1 in 5 in mid-2020), and between 53% and 88% of adults in 12 OECD countries felt that their country was “more divided now” than before the coronavirus outbreak (Figure 6).

Youth and women continue to be under-represented in pandemic decision-making: by March 2021, women made up only 35% of COVID-19 task force members on average in 27 OECD countries (Figure 7).
Well-being outcomes are a moving target: frequent, timely data are essential

Throughout the first 15 months of the pandemic covered by this report, well-being outcomes have been a moving target, as both disease risk and restrictions shifted. The rush to meet new information needs, and the difficulty of data collection in a pandemic, posed new challenges for data quality. This has placed a premium on the high-quality, high-frequency, large-sample data collections that are typical of some economic indicators, but rare in the case of social, relational and environmental outcomes.

Some national statistical offices in the OECD area responded with significant innovation, showcased throughout this report, ranging from high-frequency household ‘pulse’ surveys, to new internet-based surveys, and experimental time-use surveys. These innovations delivered important insights that could be further enhanced through improved international coordination and standardisation on methods.

Well-being evidence can help refocus, redesign, realign and reconnect policy

A return to business as usual would miss an important opportunity for governments to tackle several interconnected environmental, economic, social, and relational challenges which pre-date COVID-19. The COVID-19 crisis has highlighted the unique and fundamental role of government in safeguarding people’s well-being. Determining policy priorities for a strong recovery is a challenging task for any government given the multiplicity of objectives to be simultaneously achieved. A well-being approach can give structure to this priority-setting process, by providing a framework for systematically scanning evidence on current well-being, distributional outcomes and resources for future well-being, to identify the areas of greatest need.

Indeed over the past decade, a number of OECD member states have introduced their own national measurement and monitoring frameworks to capture citizen well-being (Figure 8). Although any well-being framework needs to be anchored within a local context, most share a common core of concepts, dimensions and indicators surrounding current and future well-being, as well as equality of opportunity. In developing these local well-being frameworks, many governments have engaged in wide public consultation processes to develop a shared vision of what matters most to societal well-being. These frameworks can now be leveraged to respond effectively to common concerns faced by many OECD countries in the aftermath of the pandemic.
The last two decades have seen a growing number of well-being frameworks being developed and applied to public policy.

**Legend**
- Regular = Measurement frameworks
- Italics = Policy frameworks

**Figure 8. Development of well-being frameworks, 2000 – 2021**

- 2000 to 2004
  - Australian Treasury’s Well-being Framework
  - Measures of Australia’s Progress
- 2005 to 2009
  - 2002
  - Finland Findicators
  - Canadian Federal Sustainable Development Strategy
- 2010 to 2014
  - 2013
  - Italy Measures of Equitable and Sustainable Well-being (full set)
  - Statistics Portugal Well-being Index
  - How’s Austria?
- 2015 to 2021
  - 2017
  - Luxembourg Index of Well-Being
  - Norway – How We Are Doing
  - Netherlands Monitor of Well-being
  - Slovenia National Development Strategy 2030
  - Sweden New Measures of Well-being
- 2019
  - Belgium Sustainable Development Indicators
  - Indicators Aotearoa New Zealand
  - Spain Quality of Life Indicators
  - Poland Responsible Development Index
  - Iceland Indicators of Well-being
- 2018
  - Switzerland MONET 2030 Indicators
  - New Zealand Living Standards Framework Dashboard
- 2021
  - Canada’s Quality of Life Framework
  - First Report on a Well-being Framework for Ireland
- 2010
  - United Kingdom Measures of National Well-being
  - New Zealand Living Standards Framework 2011
  - How’s Austria?
  - Statistics Portugal Well-being Index
  - Italy Measures of Equitable and Sustainable Well-being (full set)
  - Quality of Life Indicators in Korea
  - Mexico Indicadores de Bienestar
- 2008
  - Australia’s Welfare
  - Israel Well-being, Sustainability and National Resilience Indicators
  - Indicators of Well-being in Slovenia
  - Finland Strategic Government Programme Indicators
  - France New Indicators of Wealth
  - Mexico Regional Well-being Indicators
- 2007
  - France New Indicators of Wealth
Well-being evidence can support policy makers in shaping a comprehensive and balanced approach to building forward, by:

**Refocusing**: using well-being frameworks and evidence to guide government action towards what matters most to the well-being of people and society. Directly targeting well-being outcomes can allow governments to set in place the foundations for more resilient, equitable and sustainable societies and economies. While OECD countries had markedly different patterns of performance before the pandemic, this report has highlighted several common priorities for recovery strategies, including: increasing job and financial security; lifting the burden of poor physical and mental health; taking strong action on climate change; improving outcomes for vulnerable youth; and reinforcing trust in others and institutions.

**Redesigning**: designing policies and programmes in a coherent and integrated way that systematically considers potential impacts across multiple well-being objectives, rather than focusing on a narrow range of outcomes. The post-pandemic pressures on public finances further raise the importance for recovery measures to consider key societal goals simultaneously, rather than sequentially, and to design coherent policies upstream rather than correct for negative externalities after-the-fact.

**Realigning**: the COVID-19 crisis has highlighted the strong interdependencies between the social, economic, relational and environmental outcomes that underpin people’s well-being. Well-being frameworks can support aligning the system of government to work collaboratively work towards priorities, by shifting the focus from narrower outputs of individual departments towards shared outcome-based objectives. Key institutional building blocks to do so successfully include multidimensional well-being monitoring, creating evidence-based priorities, having a long-term focus, strengthening integration and collaboration.

**Reconnecting**: strengthening the connections between government, the private sector and civil society based on a joint understanding of what well-being means and how to improve it. Reaching out to those who face higher barriers to involvement is essential in making recovery strategies more responsive to people who are underserved and less heard.
The wide-ranging effects of the crisis on well-being call for a joined-up policy approach to recovery, integrating the lessons of refocusing, redesigning, realigning and reconnecting. Below are five policy channels that offer “triple wins”, through coordinated cross-government action that will raise both current and future well-being while also reducing inequalities and promoting opportunities for all.

1. **Supporting the creation of sustainable, inclusive and high-quality jobs**, especially in the green, education, health and wider care sectors. A well-being lens implies a focus on job quality, in addition to quantity, and broadening access to new economic opportunities to ensure that people and places don’t get left behind. Supporting wide access to high-quality green and sustainable jobs can benefit firms' productivity, improve the mental health and well-being of workers and their families, and provide society with the skills and services needed for sustainable economic growth.

2. **Using lifelong learning to reduce inequalities of opportunity** will increase societal human capital, and support a just transition to a greener economy. Well-targeted lifelong learning, especially for disadvantaged adults who currently receive little job training, will facilitate re-employment strategies post-pandemic by developing training programmes that address skills gaps and emphasise digital abilities.

3. **Strengthening mental and physical health promotion and prevention** will allow people to lead productive and fulfilled lives. A multi-dimensional approach to health promotion and prevention acknowledges the wide range of economic, social, relational and environmental factors that influence mental and physical health outcomes, and calls for integrated policy responses that go well beyond the health care system.

4. **Using a whole-of-government approach to raise the well-being of disadvantaged children and young people.** The societal well-being returns to investing in young people are high and wide-ranging: overcoming siloed approaches requires realigning across policy departments and all levels of government to create comprehensive child and youth well-being strategies.

5. **Reinforcing trust by strengthening public sector competencies and values, and by encouraging meaningful citizen participation.** The pandemic highlighted the importance of social capital in providing resilience in the face of complex challenges. Restoring trust is key to reconnecting people and the institutions — both public and private — that are meant to support them.
For more insights and analysis, along with detailed information on data sources, country coverage and methodology, be sure to read the full-length report:

**COVID-19 and Well-being: Life in the Pandemic**

Available online, with accompanying country profiles for snapshots of the well-being impacts of the first year of the pandemic in each OECD member country, at:


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Questions? Write to us at wellbeing@oecd.org

OECD, WISE Centre
Paris, November 2021

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