

Introduction

The initial response to COVID-19 in the UK was reactive, with little time to fully consider the social implications, including interpersonal and community relationships.

It was regrettable that the term ‘social distancing’ was introduced, since only physical proximity causes viral transmission and we know that many forms of *social* proximity (e.g. conversations with friends) are crucial to maintaining relationships supportive of health and wellbeing.

This briefing summarises the key ways through which social relationships were disrupted by the COVID-19 pandemic.



Social networks

- During the height of COVID-19 restrictions, face-to-face interactions were often reduced to core network members, such as partners, family members, or potentially, live-in roommates; some peripheral relationships were lost, and interactions were limited to those closest.
- However, social networks can be adaptive and responsive to change – a disruption to usual ways of interacting can be replaced by new ways of engaging (e.g. Zoom). Yet, individual relationships within networks are not equally able to adapt to change, and this can create inequalities.
- Increases in individual interactions within local neighbourhoods contributed to the ‘community spirit’ that many experienced.

Social support

- The shift to home-working and closure of community venues reduced the number of opportunities for spontaneous interactions to occur, limiting people’s options to receive support from people outside their close social circle.
- Restrictions that confined individuals to their local area also compelled them to focus their in-person efforts locally. Commentators

on the initial lockdown in UK remarked on extraordinary acts of generosity between individuals who belonged to the same community, but were previously unknown to each other. However, community support is not necessarily maintained in the longer term.

- Whilst online interactions can increase perceived social support, it is unclear whether remote communication technologies provide an effective substitute for in-person interaction during periods of social distancing.

Rules governing social interaction

- Physical distancing measures drastically altered accepted ways of interaction, particularly those used to convey trust, affinity, empathy and respect (e.g. hugging, physical comforting).
- Large social gatherings – e.g. weddings, school assemblies, sporting events – are key opportunities for affirming and assimilating these ‘interactional norms’. Online equivalents do not easily support social-bonding activities, such as singing and dancing, and rarely offer spontaneous one-on-one conversations.
- The lack of opportunities to come together in a physical sense and increase in anonymised online interaction may accentuate in-group versus out-group differences.

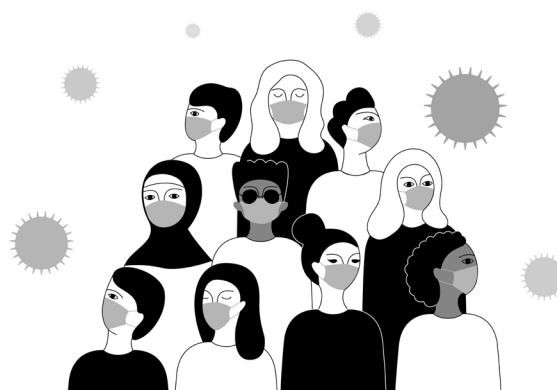
Intimate relationships

- Positively, the pandemic has offered opportunities for some individuals to (re)connect and (re)strengthen close relationships within their household via quality time together. For others, however, the increased stresses from the pandemic strained their intimate relationships.
- For those who live alone, the absence of a companion became more conspicuous, often leading to feelings of loneliness and lower mental wellbeing. Many of those living alone found themselves completely without physical contact for extended periods.
- Additional pandemic-related strain in relationships resulted, for some, in the initiation or intensification of domestic abuse.

- While those in cohabiting relationships could potentially continue as before, those who were single or in non-cohabiting relationships generally had restricted opportunities to maintain their romantic and sexual relationships.

Recommendations for future public health policy and recovery

1. The impact of COVID-19 restrictions on social relationships should be counted as part of the public health cost of the pandemic. These costs should be considered alongside things like economic impacts.
2. Innovation in online ways of interacting has been a positive outcome of the pandemic. But we should be careful about wholesale replacement of face-to-face interactions (e.g., in the workplace). We should aim for intelligent balancing between the two, which maximises the benefits of each.
3. The switch to greater home-working and reduced travel provides opportunities to build stronger and more sustainable local communities.



Read more

The paper, [‘The COVID-19 pandemic and its impact on social relationships and health’](#), is published in The Journal of Epidemiology and Community Health.

This briefing was prepared by Dr Emily Long and colleagues in the Relationships and Health programme at the MRC/CSO Social and Public Health Sciences Unit, University of Glasgow. For more information please contact Emily.Long@glasgow.ac.uk.