## Winter Worries

Understanding Experiences of Seasonal Affective Disorder in the UK through the 2022 'Big SAD Survey'











# Winter Worries: Understanding Experiences of Seasonal Affective Disorder in the UK through the 2022 'Big SAD Survey'

Interim report for the ESRC-AHRC funded 'Living with SAD: practicing cultures of seasonality to 'feel light' differently' project, ES/Voo2473/1.

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#### 1. Introduction

This is a summary report of key findings from the 'Big SAD Survey' conducted between February and April 2022 as part of the ESRC-AHRC funded project 'Living with SAD: practicing cultures of seasonality to 'feel light' differently'. The project aims to develop a greater understanding of people's experience of self-ascribed and clinically confirmed 'Seasonal Affective Disorder ('SAD' hereafter) and 'seasonal affect' and 'lowered winter mood' in particular, in order to develop new public resources for the diverse publics living with disruptive seasonal feelings. It also serves as an intervention into public discourses and media that have sometimes discredited people's experience of SAD in recent years.

The project is led by an interdisciplinary team of academic researchers, an artistic partner and an education and CBT expert. The members of the research team are as follows:

Professor Hester Parr - Principal Investigator

Professor Hayden Lorimer – Co-Investigator

Dr. Shawn Bodden – Research Associate

Dr. Chris Williams – Education and CBT Partner, Director of Five Areas Ltd.

Mr. Alec Finlay – Artistic Partner

#### 1.1 Survey Design & Methods

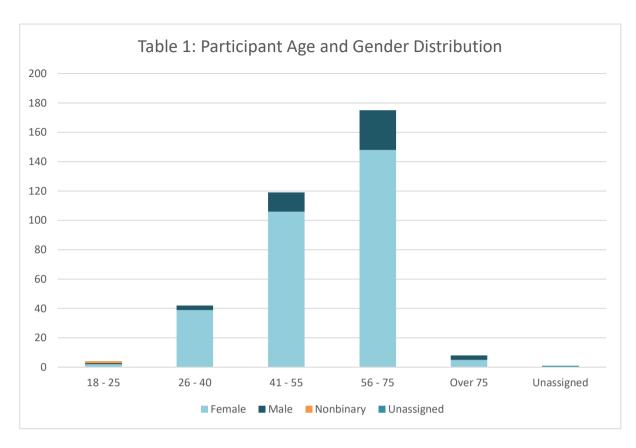
The key aim of the 'Big SAD Survey' was to gain a broad and inclusive understanding of experiences of SAD and lowered seasonal mood throughout the UK and to develop a richer sense of the relationships between psychological, environmental, social and personal aspects of 'seasonal affect'. Participants were recruited through social media advertisements and the 'Living Life to the Full' mailing list administered by project partner Five Areas Ltd. Recruitment of participants living in West Scotland postcodes was given particular priority to provide a more detailed understanding of experiences in a region understood to have higher prevalence of SAD than other parts of the UK.

The survey consisted primarily of open-ended qualitative questions about lowered winter mood organised around five key themes: seasonal change; winter in the local area; effects on personal life; effects on personal relationships; improving winter mood. Participants had the ability to skip questions they did not wish to answer.

Additionally, the survey included an adapted version of the Seasonality Assessment Form (SAF+), a clinically-tested instrument for measuring the severity of SAD symptoms (Young et al. 2015: see Appendix 1 for further information), to assess trends and variation in symptoms among participants. Surveys were made available online, and participants were recruited through a social media advertisement campaign and newsletter managed by Living Life to the Full (LLTTF) in addition to email and flyer invitations distributed to public organisations in West Scotland.

#### 1.2 Characteristics of Survey Participants

All participants were required to reside in the UK and to be of at least 18 years of age. A total of 377 surveys were completed. Of these, 2 did not meet the criteria for participation and were thus excluded. A further 27 responses were excluded from analysis due to very low seasonality scores on



the SAF+ (≤14 points); these users reported little to no symptomatology of wintertime lowered mood. In sum, 348 responses (hereafter 'study participants') exhibiting mild-to-severe experiences of wintertime seasonality were included for analysis.

86.2% of study participants identified as women (N=300), compared to only 13.5% men (N=47) and 0.3% nonbinary (N=1), in line with previous research findings which have shown women may be up to four times more likely to be affected by SAD than others. Just over half (50.3%) of study participants were between 56-75 years of age (N=175), with 34.2% between ages 41-55 (N=119), 12.1% between ages 26-40 (N=42). Only 2.3% of participants indicated that they were over 75 years of age (N=8) and 1.1% that they were between the age of 18-25 (N=4; see Table 1). These results show a higher skew toward older age groups among survey participants compared to previous research, which generally reports greater prevalence of SAD among younger adults.

Study participants represented 91 UK postcode areas (73% of total UK postcode areas). Of these, 42.5% (N=148) reported living in suburban areas, while 32.8% (N=114) lived in areas seen as rural or remote and 23.9% (N=83) in urban or metropolitan areas.¹ The survey aimed to recruit participants living in West Scotland postcodes in particular and these comprised 28.4% (N=99) of total participants. It should be noted that the 'Big SAD Survey' did not aim to conduct a population survey of SAD prevalence, however. These numbers thus should not be taken as indicative of general patterns of SAD distribution within the UK. Nonetheless, they demonstrate that SAD occurrence is widespread, affecting a diverse population living in varied location, including northern as well as southern, and rural as well as suburban and urban areas.

<sup>1.</sup> Participants were only required to answer questions about demographics, postcode and SAF+. Where data does not add up to 100%, this reflects instances where some participants chose not to respond to the given question.

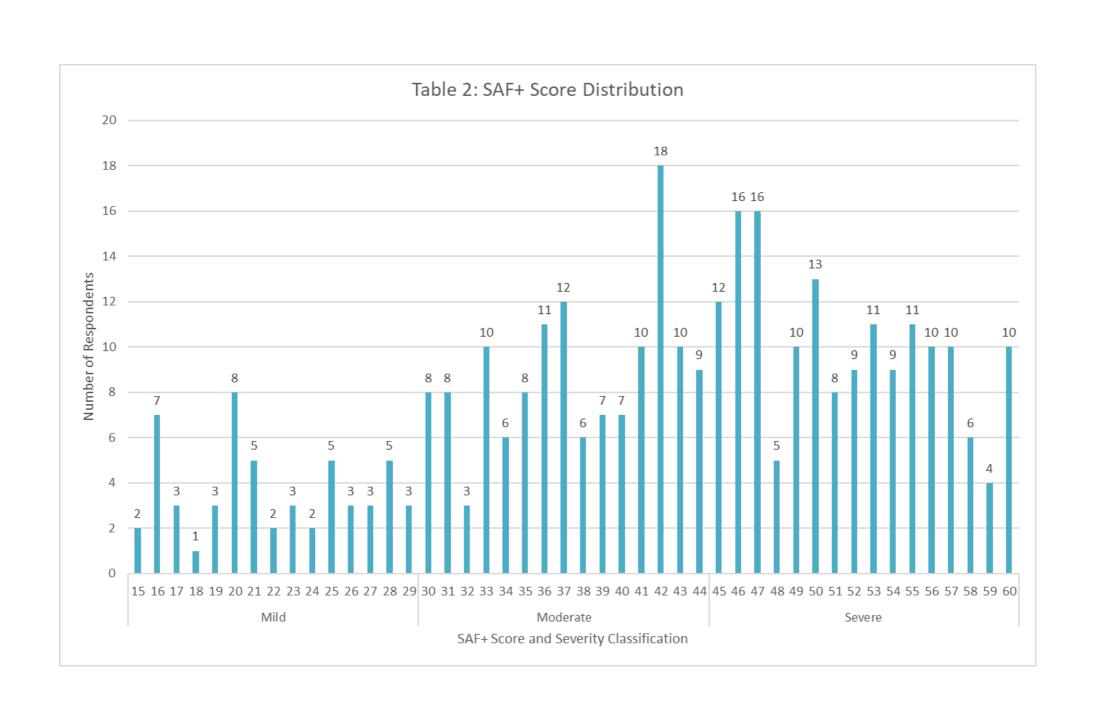
Scores on the SAF+ among study participants skewed toward the upper end of the seasonality severity scale with bimodal distribution around the moderate-severe threshold and mid-severe ranges. In total, 46.0% of study participant responses (N=160) demonstrated severe seasonal symptoms, while 38.2% (N=133) experienced moderate changes and 15.8% (N=55) reported only minor changes (see Table 2).

#### 1.3 Survey Analysis & Presentation of Findings

Survey responses were compiled and analysed for themes in NVivo12. This is an iterative and ongoing process, which will be continued in the future with more attention to differences between specific demographics. This report presents key findings from the first rounds of analysis with a focus on understanding broad patterns in experiences of winter affect and producing a more detailed and nuanced picture of affected winter life.

Findings have been organised into four thematic sections, each reflecting a different 'phase' of wintertime mood and culminating in distinct patterns of feeling expressed by participants in response. In section one, 'The Nights Draw in', participant experiences of the onset of SAD and changes between summer- and wintertime life are introduced to understand participants' descriptions of 'feeling reduced' in a world both smaller and drabber than their summertime experience. Section two, 'Trying Times', explores participants' descriptions of winter as a difficult time that inhibits everyday activity and causes a sense of 'feeling stuck'. The third section, 'Weathered Relationships', turns the focus onto the social context of winter affect, participants' recurrent worry of being misunderstood, and their feelings of stress, shame and 'pressure' while dealing with social obligations. The final thematic section, 'A Glimmer of Hope', discusses the strategies adopted and challenges faced by participants seeking better winter lives, as well as the fragile nature of their 'hopeful' feelings.

The survey responses reflect diverse and highly personal experiences of winter affect, often with notable changes over the life course and a given season. The five phases of wintertime mood identified here describe both shared and divergent experiences: rather than mapping a single, sequential winter course, they characterise distinct expressions and characteristics of winter affect as encountered by different people at different times and at varying intensities in their day-to-day lives. By examining participant responses as a whole, the phases and key themes introduced below offer useful resources for understanding the plurivocality of the shared experience of winter affect and changing seasonal mood.





## 2. The Nights Draw in

The beginning of winter was experienced at different times and to varying intensities for the survey participants, but just over half of all participants identified the end of October and beginning of November as the time of year when they first notice negative symptoms of winter affect. In many cases, symptoms were associated specifically with putting the clocks back on the final Sunday of October. The beginning of winter is thus closely tied to the perception of shortening days and daylight, reflecting understandings of SAD as a light deficiency syndrome' (Rosenthal, in Overy and Tansey 2014, p.50). The experience of shortened daylight can also take place earlier or later in the year, however, suggesting a range of the intensity of personal experience. In particular, the October clock change appears to be contribute to winter affect by drawing explicit attention to the changes in daylight, particularly by shifting routines into newly dark mornings.

'As light decreases in October – then becomes worse after clocks change.'

'Quite soon after the longest day, when I become aware of the day being shorter.'

'Around Christmas when the days are at their shortest.'

In many cases, the noticing of 'darker and earlier nights' and 'shorter days' marked the beginning of winter affect without specific mention of a calendar date. For some participants, however, stress associated with Christmas, winter holidays and birthdays featured prominently in the beginning of their lowered mood. As made clear in a number of responses, an important distinction can be made between the beginning of symptoms and when the individual recognises these changes have begun. In some instances, people experience worry about coming changes in advance, while others reported noticing their changed mood only after it had begun to effect their day-to-day life.

'From midsummers day I have a feeling of dread, as I know I have to work hard to be cheerful. I feel excited when midwinters day has arrived as I can then see the day light hours getting longer day by day.'

'When it's pointed out to me. It's rare for me to notice by myself.'

'I don't think I notice until its too late, I feel low.'

The beginning of wintertime lowered mood thus involves a drawn out and uncertain time attuned to and driven by environmental changes as well as personal mood and behaviour.

#### 2.1 In Want of Winter Light

When discussing the experience of reduced light in winter, participants also identified key changes in the quality of daylight in addition to the shortened days. Participants described winter light as 'grey', 'poor', 'weak' and 'watery', linking it to feelings of lethargy, anxiety and grumpiness. A number of participants took care to emphasise their feelings of relief and enjoyment on sunny winter days when the light was 'bright' and 'crisp', indicating that winter affect involves a dynamic experience influenced both by immediate changes in the weather. These moments of elevated mood are perceived, however, as scarce and fleeting.

Table 3: Participant Descriptions of Winter (Top 30 Words)			
Winter Words	Word Frequency		
cold	211		
darkness	180		
depressive	84		
wet	72		
long	55		
grey	52		
dull	47		
miserable	47		
lonely	46		
tiring	37		
gloomy	33		
isolation	33		
bleak	32		
sad	29		
damp	25		
windy	21		
cosy	21		
hibernate	20		
boring	20		
quiet	16		
dreary	15		
low	11		
christmas	10		
dismal	10		
crisp	8		
grim	8		
hard	8		
oppressive	8		
unmotivated	8		
challenging	7		

'It becomes very overcast and dull, really lowering your mood, but with an odd sunny day which brings you back up only to have it lowered the next day when it becomes dull and dreary again. The natural light makes you feel lighter and positive and the dull very wet days mean you can't always get outside to get some natural light where your eyesight is better. Inside you feel cooped up, lethargic, tired and your eyesight with artificial light is never as good.'

'The flat greyness of the days has the worst effect on me. If it is sunny but frosty or cold, I feel much more positive.'

'We can get some miserable days where the daylight hardly brightens. The way things are going the dull days are getting more prevalent than the nice crisp frosty days.'

Perhaps unsurprisingly, the darker mornings and evenings were described particularly negatively. These darker hours make certain everyday activities, such as the morning commute, more difficult

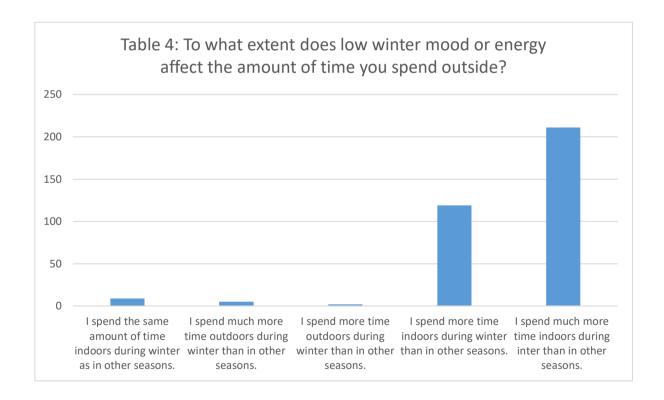
and demanding, while causing other aspects of social life, such as evening hobbies, to end completely due to demotivation and physical difficulty. The experience of winter light was also shaped by features of participants' local areas, with a common theme being the negative effects of poor lighting in rural areas and poorly designed housing.

'Reduced daylight makes sewing difficult, although I use a natural daylight lamp. I find it very difficult to get outside on dull and dreary days.'

'Although I live in a very beautiful rural setting, I struggle with not being able to physically enjoy my surroundings due to lack of light in the winter. I work full time and for many months of the year do not get an opportunity to get some outdoor time in the daylight.'

'Dark mornings and dark afternoons contribute to a lack of brightness. There is a beautiful quality about winter light, but on so many days it's hard to remember when the sun last shone! There's a loch nearby and we're fortunate to get light reflected on its surface, which helps. New "improved" street lighting is actually very harsh compared to our cheery old orangey sodium lights!'

Notably, bodies of water and freshly fallen snow were mentioned positively in several instances due to their reflective qualities. Crucially, while select times and places were seen to offer enjoyable and satisfying light, social commitments, most notably the working day, as well as physical challenges to mobility inhibit *access* to them, leaving participants in want of winter light, improved mood and interrupted social activities.



#### 2.2 Feeling Reduced

For those experiencing negative winter feelings and affect, the reduced light of winter contributes to and compounds on the reduced social and physical activity of the season. Many encounter a smaller world, in which the winter season disrupts local services, public transport and social life

more generally: 'The darkness reduces social contact especially as older folk aren't keen to drive.' In other instances, participants described reducing their own activities and ambitions as a response to the increased difficulty of life in winter: 'My energy tends to be lower in the winter so it takes more effort to make plans, or I reduce my aims.' This reduction of activity during winter can be a source of frustration, guilt and disappointment; with over 95% of participants spending less time outdoors and 60% indicating they spend much less time outdoors, reduced wintertime life is particularly widespread challenge.

'In December at the height of winter and it's cloudy the light has gone by 4pm, so any walking, cycling or normal outdoor activities are greatly reduced or gone, making it a long night if you are alone.'

'I can be more difficult to be with when I am down, I reduce when I see people in case it affects our relationship.'

'Short dark days. Often skies are overcast so daylight levels are reduced. We seem to get more of this type of weather than we used to. I have been affected by SAD for years. From end of September I feel tired, reduced energy, poorer sleep, lethargic. Bright sunny days are lovely. Sunlight reflects off the sea. I feel better, mood improves and I have more energy. Artificial light doesn't help. I have a daylight lamp but I forget to use it!'

As a whole, these changes result in less social, less mobile and less varied lives during the winter season: for those facing extreme winter affect, the season is 'life limiting'. Moreover, those activities that continue often feel less fulfilling and more exhausting: the feeling of a reduced wintertime life includes decreased activity, but also a lowered sense of the quality and value of their day-to-day life. Participants frequently reported lack of motivation, energy, enthusiasm and confidence, as well as increased fatigue, sluggishness and a general 'can't be bothered' feeling: 'It's a vicious circle. Can't be bothered to do things then annoyed that I haven't done anything.' Participants described being outside as generally more negative in winter, feeling a need to hurry back home, a desire to avoid the darkness, and an inability to stand still for an extended period of time due to the weather. When participants reduce their winter activity it is not a straightforwardly deliberate choice: recognising these changes in their behaviour, participants report feeling 'like someone else' or as though they are 'avoiding life'.

'I feel I'm half the person I know I am. I feel as if I'm in a cocoon waiting for the better weather. Just button down until it's over then I can re-emerge as the real me.'

'Low mood sets in, like a blanket covering you, creeping up slowly, then covering your whole body and soul.'

'Scary because life feels less worth living.'

As these survey responses suggest, winter life and mood can be experienced much as a type of enclosure that participants find themselves stuck within and forced to while away their time.



## 3. Trying Times

While participants consistently identified winter as the most difficult time of year, many participants identified specific periods of time that were harder than others. January and February were frequently identified as one of the most difficult times to get through due to long nights, particularly poor weather and the distance of Spring: 'February is most difficult I feel like I have ran out of all my reserves.' In some cases, this difficult period could stretch into March as well. For another significant portion of the participants, the early winter days of November—sometimes including December—felt particularly hard because of the long months ahead; some participants recalled feeling better after the Winter Solstice (December 21) when the days could be seen to be getting longer.

'October decline, November struggle, December succumb, January subsumed, February given up March, April and early May will spring ever arrive? June, July and August are the coping months (mostly).'

'All of November until December 22nd are particularly bad, but I will not be OK until a few weeks into April, after springtime has had a chance to warm me up again.'

'December is hardest as it's darkest. The weather is often worse in Jan and Feb but it's getting lighter and spring is around the corner.'

Christmas and, to a lesser extent, New Year and the wider holiday season were also mentioned frequently; participants identified this period as a time of increased busyness, socialising and social pressure. Many participants expressed strong opinions about the affect of the holiday season on their wellbeing, but these opinions were highly divided: for some, time spent with family and friends was a welcome and relaxing distraction, while others found that increased pressure to socialise was inducive of stress and anxiety. Christmas as an event was also used to mark the passing of winter. For a number of participants, the period after Christmas was difficult because there were no more events to break up perceived winter monotony.

'I enjoy Christmas time but I struggle with all the build up, the rushing around and trying to please everyone.'

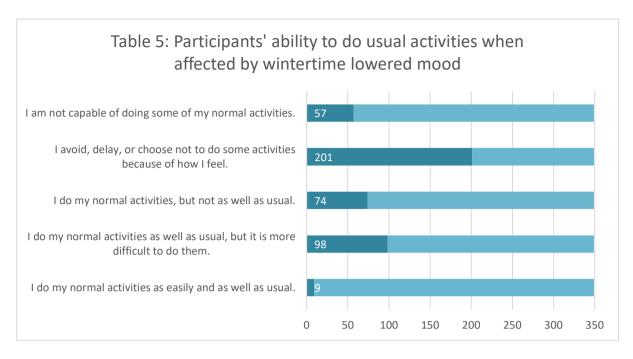
'November and December and the build up to Christmas are hardest. Once New Year starts I breathe a sigh of relief that it is over January and February are easier as I can hide away at home and not socialise as much.'

'...as the light fades my fatigue and lethargy increases with the worst after Christmas when there's nothing to look forwards to (although I watch for signs of spring and longer days).'

As participants' different feelings about the winter holidays make clear, there is no single trajectory through the winter season for those experiencing lowered seasonal mood or SAD: social context and personal history can make certain parts of winter more or less challenging for different people. However, the frequent mention of particular periods indicates clear times of shared concern and possible opportunities for intervention.

#### 3.1 Waiting out the Winter

Many participants described the challenge of winter in terms of its length and comparative monotony, contributing to anticipatory feelings of exhaustion and demoralisation: 'After Christmas



just feels like a long hard slog to Spring. Waiting for some warmth and light to return. 'Winter is described as a period of isolation and disruption, when much of life is 'delayed', 'put on hold' or 'paralysed', making both planning and doing tasks more difficult for many participants (see Table 5). For some, this involved a marked decrease in social events in their local areas, such as the closure of public facilities due to the end of the tourist season in rural communities or simply reduced opportunities to 'bump into people' for casual interactions in the street due to poor weather. This contributes to experiences of winter as emphatically dull, unstimulating and demotivating, a time when there's 'not a lot going on'. Participants worry about just 'getting through' and find themselves unable to get started in their day-to-day activities.

'Darkness. Dark mornings and dark nights. This and bad weather make it hard to get out and about. Social life suffers, exercise levels suffer. Whole area seems drab and depressing.'

'I feel miserable. Cooped up inside. Like I'm just existing until spring.'

'I used to be brilliant and able to solve problems no one else could, and did. But I cannot get moving in the winter, or get motivated. I prevaricate, and hours and days and weeks and years just drift by while I avoid doing things I need to do, and specifically things that are beneficial to me, or even just doing anything fun. It is frustrating watching myself refusing to live.'

When commenting on specific aspects of their lives that they missed during winter, participants identified a large number of low-key activities, often outdoor and/or social, such as going on walks, hobbies, spending times in gardens, talking with neighbours or simply 'having the door into the garden open' or 'watching things grow and change'. The absence or difficulty of these everyday routines during winter contributes to the perception of the season as diminished, but also a range of 'passive coping activities often described negatively by participants, such as avoidance, procrastination or—with distinctive frequency—'hibernation': 'I just feel like I should go into hibernation. My mood lowers, I feel tired, have less energy, feel less hopeful.' When feelings of winter affect are at their most extreme, winter can be seen as time to be whiled away: 'Feels like I've gone into myself and just have to get through it'. While a number of participants indicate that these activities, when they gather the energy and motivation to do them during winter, make them feel

better, several commented specifically that this feeling is diminished and last for only a short while afterwards.

'I like to spend time in the garden but sometimes it's hard to motivate myself to get outside. I like to walk the local footpaths but again it's difficult to motivate myself. Once I get outside I always feel better.'

'[I miss] going out and doing things after work, for example walking, swimming. Being able to dawdle outside rather than doing something and going home.'

'I am fortunate to work from home but even at that I would rather cancel each working day. I want to hibernate. It's dark, it's cold and I don't want to experience those days. I start work much later so that I can stay in bed longer. I'm aware that I avoid work as much as possible, it's just too much to think about and manage physically, mentally and emotionally.'

Winter is shown in this section to be a period characterised by uncomfortable waiting. Participants report pronounced tiredness, interspersed with mixed feelings relating to absence – the absence of opportunities to talk, socialise or feel motivated.

#### 3.2 Feeling stuck

Winter affect is experienced through a wide range of everyday activities, which become more difficult, dispiriting or unfulfilling for those experiencing winter-time lowered mood; everyday life itself comes to be treated as something to be avoided: 'Like trying to walk through treacle'. Participants frequently report feeling stuck, trapped or bogged down: 'Like I'm in a great big hole and I can not get out'. Some participants suggested that learning to 'accept' these feelings had led them to coping better with the changes in their mood and behaviour, either by lowering their expectations or acknowledging the temporary nature of seasonal changes: 'after many years of experiencing them I accept them with a weary stoicism and do not expect as much of myself during Oct-Dec'.

As is clear from some participants' responses, however, such acceptance is not unambiguously positive; sometimes feelings of depression or anxiety were 'accepted' as normal, for example. This is further complicated for the many participants who indicated that their experiences of winter affect compound and combine with other difficulties in their lives, including issues with physical and mental health, bereavement, divorce or other personal crises: 'I feel more tired and as if my reserves have been depleted. I don't know if this is due to grief, Covid, menopause, or my normal winter sadness'. Notably, many participants included the effects of lockdown during the Covid-19 pandemic among these due to greater feelings of isolation and stress, although some participants felt lockdown was ultimately positive for them because it alleviated pressure to socialise. While recognition that the effects of winter affect 'will pass' can be helpful for some, it can also contribute to a problematic assumption that they are thus 'minor' in comparison to other challenges which fails to acknowledge how they might combine and complicate these other negative experiences.

'Oh god, I feel exhausted. All my energy goes into work, then the basics: food, sleep and fluids. I try to socialise but it exhausts me and then I'm even more tired, irritable, cognitively impaired at work than before. Add in the menopause and b12 deficiency and I'm on my knees.'

'As I suffer from long term depression anyway it seemed like it was just something to put up with.'

'Probably worse with enforced lack of movement due to lockdowns and generally working at home shrinking my world, yet at the same time such a relief not to commute and the stress, and fear and feelings of unwellness of driving in the dark. So there is less social interaction, yet less needing to hide feelings of despair sitting at a desk in an open plan, badly lit, poorly ventilated office. Probably self medicating with alcohol more.'

Winter brings feeling of stasis to many participants and the effects of the pandemic and homeworking exacerbated the behaviours usually adopted in winter to avoid and hide. Descriptions of being 'in a hole' or 'wading through treacle' convey the slow exhaustion that can accompany even everyday and formerly enjoyable activities for some.



## 4. Weathered Relationships

A large number of participants indicated that their changes in mood and behaviour during winter had negative effects on their personal relationships with friends and family; many mentioned working to minimise or hide these effects, sometimes expressing feelings of guilt or worry of bringing others down: 'I disguise it well, I'm not sure if it affects others.' A frequent coping strategy is 'withdrawing' from social interaction due to feeling irritable, unenthusiastic or exhausted, but this response sometimes doubled as a cause of relationship troubles. Personal relationships are clearly a significant context in which the effects of winter affect are felt in addition to personal changes in mental or physical health, but they are also a key, if complicated source of support: 'It just makes relationships less enjoyable, although relationships help me cope.' While feeling a need to 'explain oneself' or indulge 'compulsory happiness' could cause further worries and anxieties, participants frequently mentioned the value of friends and family who were 'understanding' regarding their wintertime experiences.

'I don't really let it affect my work relationships but I can feel I don't want to go in as I'm tired and can't concentrate, but I go anyway. My family notices and I can get really grumpy especially when I'm not sleeping, and I'm generally a happy person any other time.'

'Husband v supportive but it must be v draining. Work understanding, boss particularly good.'

'It alienates you, you feel like no one understands, so it's easier to be more anti social so you don't have to explain yourself.'

Broader public perceptions of winter affect also reflected a divided experience for participants, who reported encountering both supportive and dismissive attitudes among their local communities. In particular, the sentiment that negative feelings of winter affect are shared broadly by everyone was described in contrasting ways; for some participants, this allowed others to relate to them and their more severe experience, while others found that this perceived commonality could be used dismissively. These antagonistic attitudes were also sometimes linked to specific differences, such as age, culture, gender or location used to characterise extreme winter affect as an 'over-reaction' or otherwise stigmatised response. For those who reported more positive experiences, conversations with colleagues and neighbours were identified as important resources for recommendations and mitigation techniques. A lack of general knowledge about extreme forms of winter affect like SAD was a common source of frustration for participants as well.

"Get on with it.' You're a snowflake.' In my day we used to keep calm and carry on.' I have also found people who understand and have a more compassionate attitude. These people tend to have a subjective experience of SAD.'

'It's like when people tell you "oh, I get headaches too" when you have a migraine, or "everyone gets stressed" when you have a panic disorder- people don't realise how bad and impactful winter mood changes can be.'

'I think because everyone feels it to some extent, they think they understand the whole thing. It's not the same as feeling grumpy for a few days when you come back from Lanzarote.'

'People tend to think you're just fed up or moaning. 'You live in Scotland, what do you expect?' or 'We all feel crap in winter'.'

Participants living in West Scotland identified a particular challenge with perceptions that Scottish winters, broadly recognised as dark and damp, are a difficulty for everyone and therefore do not

merit 'complaint': 'Just a general feeling of it's Scotland get on with it.' This paired with longestablished cultures of 'stoicism' regarding mental health and illness (Philo, Parr and Burns 2003) provide for a sense that wintertime lowered mood is a 'Scottish problem', at times occluding differences in individual experience and severity and impeding access to help: 'People understand, but it is not addressed as a specific issue. It's just part of living here, no point whinging.'

#### 4.1 Winter Work

Employment and work life is also frequently described as more difficult, with lowered winter mood affecting not only the ability to complete work effectively, but also relationships with colleagues. Participants described issues with decreased motivation, lack of clarity, distractedness and impatience; a number of participants also mentioned reducing hours or adopting flexible hours, such as late starts, during the winter months. Much as with personal relationships, this experience was more positive when colleagues and managers were found to be 'understanding' and responsive to individual needs. Work was also often identified as a primary obstacle to access to sunlight; shiftwork as well as work in buildings that admit little-to-no natural lighting were particularly challenging. The proliferation of working-from-home was generally well-received, allowing more flexibility in work-hours or for outdoor walks during the lunchbreak, although for some the negative effects of isolation from colleagues outweighed these benefits.

'My mood affects the quality of my relationships with colleagues and of my teaching: everything is flat there is no energy enthusiasm.'

'I don't get to see daylight as I go to the shift before it is properly light and finish after sunset. It doesn't really feel like there is a life outside of work during the winter.'

'I struggle to concentrate for longer periods of time. I also find work harder when I'm cold - but heating is expensive. I'm less inclined to socialise after work. I don't wake up with enough time to do anything before work. I try to go for a walk every lunch time, even in the bad weather.'

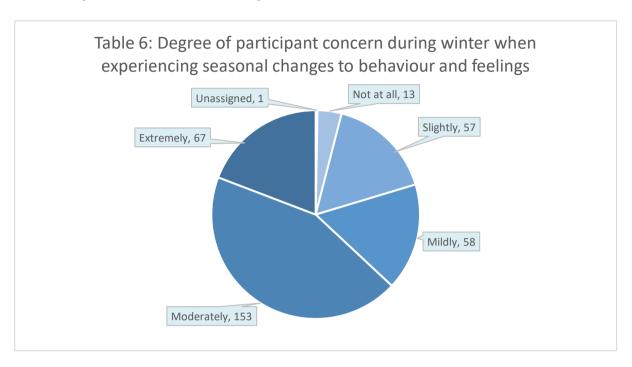
Participants indicated facing similar difficulties with lowered motivation and energy during housework and childcare as well. However, volunteer work was almost always mentioned positively as a way to get outside, to stay busy, and as a 'distraction'. For some participants, this could also be true of their professional employment which could provide structure; others found that caring responsibilities for children and dogs also helped establish a routine of going outside and staying busy.

'I find work distracts me from myself as I have to concentrate on something else. However, after work I am very tired. Sometimes I just want to come home and go to bed. I make myself eat a healthy meal and stay up until somewhere near my normal bedtime. I sometimes fall asleep on the sofa which isn't ideal.'

'My work dictated my mood as very stressful ... Winter harder due to darkness and lack of socialising. Now in early retirement I don't have work pressure but also no structure.'

'Now I'm working from home I can sometimes get out at lunch time, but previously it was dark before and after work, makes it harder to feel energised and focused.'

Just over 50 participants indicated that they had retired from work, and this change reflected a similar mixture of advantages, such as increased flexibility to go outside during the daytime, and disadvantages, such as the loss of colleagues and 'distractions' from winter affect.



#### 4.2 Feeling Pressured

Experiences of and responses to winter affect are shaped by the changing contexts, routines and relationships of social lives. Participant responses describe a clear sense of concern about the effects of their lowered mood and changed behaviour on others and others' perceptions of them, contributing to feelings of concern, shame, guilt, frustration, embarrassment and failure (see Table 6). Their descriptions suggest that such social pressure can greatly exacerbate individuals' negative feelings about their changed winter lifestyle: 'Humiliating – feel like I'm letting everyone down.' While this is affected by individual interactions and relationships, many participants themselves made negative comparisons between their lives and those of others during the winter months—or their own during other seasons—and some found that tempering these expectations by being 'kinder to themselves' could help get through the season.

'I feel I have to explain myself, I feel I miss out and wish I had more energy for friends, I sometimes feel a bit pathetic because others don't have this issue.'

'It's frustrating. It's hard not to feel lazy but I don't think I'm a lazy person. I'd feel embarrassed if someone else could see how little I was doing.'

'I feel anxious, I can't be bothered, I feel I have to lie to others, make excuses. I feel guilty, I don't pull my weight at work. I feel like I'll get found out I'm not doing enough work either at home or work, like I'll get into trouble, so I just sleep instead.'

'I have had this so long I have accepted it and no longer even attempt to fight it. What's the point? If I'm tired (which is all the time), I sleep. If I don't want to talk, I switch phone off. So in short, I no longer say to myself I should/I could i.e. I'm kinder to myself now.'

In participant responses, these feelings of social pressure and judgement stem from unfulfilled expectations and negative comments from partners or other family members, but also from a less overt sense that members of the public are 'ignorant' of or 'disinterested' in severe winter affect. Participants can feel pressured to be (or appear) happier, do more or keep quiet due to negative reactions as well as well-intentioned, but perhaps presumptuous attempts to claim that difficult winters are a 'shared experience' for everyone.



## 5. A Glimmer of Hope

Only 23.6% (n=82) of participants indicated that they had previously sought out or connected with others who experienced winter affect and lowered winter mood; a small number of participants described making connections through social media groups and online forums, mental health groups and cafes, and counselling. Only one participant specifically mentioned the Seasonal Affective Disorder Association (SADA), a former registered charity dedicated to helping people whose lives were affected by SAD and the only organisation of its kind in the UK. More frequently, participants described occasions when the topic came up during casual conversations, sometimes with regards to their own personal experience but often focusing on winter more generally. Some participants observed that the 'general moaning' about the weather could worsen their mood: 'Lots of moaning about the weather, everyone seems more fed up and unhappy, less tolerance of each other.' This contributed to worries that their own problems could be dismissed as 'just moaning'. In other accounts, however, passing conversations with colleagues, neighbours or friends were an important source of ideas and strategies for dealing with winter-time mood. Often, social groups and clubs provided the supportive space for such conversations to arise, which on other occasions can be inhibited by worries about stigma, misunderstanding, or avoidance of socialising by those experiencing winter affect.

'I have talked to a neighbour about it and she too finds this a tough time of year. She was the one who suggested that I try a day light bulb.'

'I have a friend, but the dark nights and days seem to make her more irritable and cross. When I worked in an office with no natural light a clerk bought a light box in and the managers were very scathing and dismissive and concerned about the fact it was using their electricity.'

'I believe it was with friends and the topic came up in conversation. I think that one or two might have mentioned that they too liked it when the days started getting lighter. We probably spoke about it during the darker winter days and didn't really think it important; perhaps we were feeling mildly glum and dopey as usual so didn't notice anything out of the ordinary.'

A slightly larger number of participants, just over 28.4% (n=99) indicated that they had spoken about their experiences of winter affect with their GP or another medical professional. Experiences were varied, including both highly positive and highly negative encounters with medical practitioners, which could shade and influence future efforts to find help: 'They laughed and said it [SAD] doesn't exist.' In these conversations, the difficulty of disentangling experiences of winter affect from other mental and physical health conditions—particularly depression—posed a particular problem for getting help, with SAD often treated as a lesser or secondary concern: 'They said because I was already diagnosed with depression that they wouldn't put it in my notes.' Participants who did receive support recounted a range of recommended courses of action, including CBT, vitamin D, lightboxes, anti-depressants, meditation, regular walks outside and advice to 'try to keep positive'. Participants' feelings about the usefulness of this advice varied. As with relationships with friends and family, participants commented positively about those GPs who were 'understanding' even and 'supportive' even in the absence of concrete treatment options.

'They validated it and said they'd noticed a pattern as well. I am not diagnosed with SAD, however I have longstanding chronic mental health conditions and professional have noticed a connection between winter and relapsing.'

'They took it seriously. Told me to get out, as early in the day as I could after it got light, without sunglasses. To get out as much as possible anyway. Also to use the medical grade lightbox I have, up until lunchtime.'

'They just saw it as part of a wider depression.'

The tendency to treat SAD and wintertime lowered mood as less important than or simply expressions of other 'larger' difficulties such as depression was a relatively common occurrence, suggesting that season-specific factors like lowered light may go overlooked along with corresponding possibilities for treatment.

#### 5.1 Seeing the Light

Participants identified a large range of treatments, strategies and activities that they have tried, with varying degrees of success, for improving their mood and overall experience during winter (see Table 7). These involved a mixture of simple interventions like mindfulness exercises or 'keeping busy' as well as significant changes to lifestyle such as winter-time holidays overseas. While over a third of all participants indicated that they had considered relocating because of their experiences of winter affect, many indicated that this was not a practicable option for them due to finances and the desire to stay close to friends and family.

These comments occasionally highlighted difficulties with these approaches, however, particularly the limited or short-term nature of their benefits and the difficulty in initiating or sustaining selected strategies due to low energy and motivation: 'I can boost my mood in the short term if I can force myself to get more involved with the activities and things that my partner and child do.' The value of establishing—or, in some cases, externally imposed—routine or structure was also highlighted by a number of participants, although this could be a fragile accomplishment susceptible to disruption by life events such as retirement or broader issues like lockdown: 'Pushing myself to keep my healthy routines, a walk outside.'

'I know I have to spend time outside every day if I can. I also try and have a new craft project to work on or a new book or magazine to read.'

'Not going outside, lighting scented candles, snuggling up with the dogs and a cozy blanket and my camomile tea.'

'I use sun beds frequently to try and Give my body some artificial sun light. I also try and take frequent short trips to Spain in the winter.'

'Yes a lightbox, to an extent, when it doesn't give me a headache. Coffee. Some social interactions but conversely they are very much harder in winter and I become very withdrawn. Voluntary activities such as amateur dramatics, or volunteering at events.'

15.2% (n=53) of participants indicated that they use antidepressants, although these were not necessarily prescribed for lowered winter mood specifically. Participants' discussion on the whole suggested that an iterative and gradual process of learning what works for them, although frustrating when only providing slow results, was important for developing a successful and beneficial wintering strategy: 'Small improvements on previous years through mindful observance rather than hoping I'll just be better.'

In total, 36.2% of participants (n=126) had used a light box, although other participants did occasionally mention other similar devices such as sunlight alarms and less obviously identifiable

'light devices'. For those participants who found the light box useful, the most commonly cited benefit was help 'getting going' in the morning. Others developed routines that allowed them to sit by their light box throughout the day, for instance at work. Some participants expressed negative effects like headaches or felt unable to maintain sufficient regularity to notice any changes; a number of participants simply experienced no effect: 'I didn't feel it worked very well for me. Got more benefit from going on a 10 minute walk if it's not raining.' Some participants felt unsure whether the light box was having any effect, but for those it did help the difference could range from helping 'a bit' to 'life changing'.

'I have used a light box for 10 or so years, I don't know how much good it does, but now do not want to be without it in case I fall apart!'

'I had a light that changed colours in sequence on my bedroom windowsill but it didn't do much to help anything really...'

'I have been using a SAD lamp for many years. I enjoy the bright light. I think it lifts my mood a bit, but not sure. It is by my chair and I have it on whenever I sit there, so on and off all day. I developed cataracts aged 52 and am not sure if the light exposure may have caused them . I got an alarm clock with the gradual daylight to wake me but found it too complicated to operate.'

Table 7: What helps alleviate wintertime lower	ed mood (Top 15 responses)
Participants Responses	Response Frequency
Getting Outside	128
Community/Socialising	70
Personal Activity ('Keeping Busy')	64
SAD Lamp	56
Nothing	45
Travel Somewhere Sunny	30
Cozying up Indoors	28
Vitamin D	20
Mental Re-orientation ('Mindfulness')	20
Diet	16
Medication	16
Sleep	10
Other Vitamins or Herbal Remedies	9
Noticing or Recording Nature and Seasonal	
Change	8
Sitting Inside Near a Sunny Window	7

#### 5.2 Feeling Hopeful

Participants describe a large number of activities and conditions that help them weather the winter season. For some, outdoor activities and exercise were key, while others preferred to create comfortable and 'cozy' spaces indoors to shelter. When commenting on sources of hope, however, the most common response from participants was springtime, with 21.8% (n=75) of participants identifying signs of the coming warmer and lighter days as their main source of wintertime hope: 'Spring and things growing, lighter nights.' Notably, for most of these participants, signs of the coming Spring were able to lift their mood and give them hope even in the mid-winter days of

January or February, breaking up the perceived monotony and 'grey' of winter. The ability to 'look forward' to better days has a significant part to play in the activities and wintering strategies people use to manage winter affect.

'I monitor the days stretching (hours of daylight) from Christmas on through until the Spring. You get an extra hour of light by January 22nd, you know!'

'I wouldn't say that I am hopeful about managing my mood lowering, I just accept it better than I used to.'

'Practicing mindfulness. Having indoor projects. The light slowly getting better after Dec 21st. Seeing snowdrops.'

The process of finding—as well as holding onto—hope during the winter can nonetheless be a difficult process, shaped perhaps most of all by sceptical and dismissive responses from others: the primary source of frustration for participants regarding their experience of lowered winter mood were the negative responses of other people. Participants described being told to 'get on with it' or 'snap out of it'; others expressed frustration about GP responses, specifically the tendency to prescribe antidepressants. Such responses cause participants to feel guilty, misunderstood and ignored. It can also lead to them giving up on finding help: 'I just think it's something I have to get on with. Can't imagine getting any support from anyone as most people don't seem to experience it.' Support and validation of people's experiences of winter affect plays a key role in the search for a better winter life.

'People tend to think you're just fed up or moaning. 'You live in Scotland, what do you expect?'. Or 'We all feel crap in winter'.'

'Not everyone understands how hard it is to motivate yourself to do things when you feel down. I also try and hide my thoughts and feelings as no one likes to be thought to be moaning about it or miserable about the winter.'

'It's not understood. Most think it's made up. Hubby thinks its melodramatic & I should just get on with life. Don't be lazy. But it's a real feeling of nothingness, emptiness & fatique.'

For those facing intense experiences of winter affect, feeling hopeful is neither an easy or reliable state. However, a supportive environment and cultivated, personalised wintering strategies can help keep close the reminder, as one participant observed, 'That Spring always comes around!'



#### 6. Conclusion

The many accounts shared through *The Big SAD Survey* testify to the diverse range of experiences of winter affect and SAD, but also, as discussed above, shared challenges, concerns and feelings. Experiences of winter affect involve distinctive, if often interrelated phases: the changing season and environment can produce smaller, greyer, 'reduced' worlds; the changes in weather and light make everyday activities more difficult causing people to feel 'stuck' and 'left behind'; consequently, people face feelings of guilt and 'pressure' as they struggle to keep up with the social world or strategically avoid it; and as they find signs of spring, develop routines, or share wintering strategies, people find ways to feel 'hopeful', although it can be jeopardised by dismissive attitudes or 'misunderstanding'.

This broad overview of the experience of extreme winter affect on people's lives presents a number of key themes that will be further investigated over the course of the 'Living with SAD' project. Interviews, seasonal diaries and a participatory Winter Workshop series will provide greater insight into people's experiences of the winter season and provide a forum for discussing and developing techniques for feeling hopeful together. These findings will be shared in more detail in an updated edition of this report in 2023 as well as through an online self-help course designed and facilitated by the Living Life to the Full organisation.

#### 7. References

- Overy, C. and Tansey, E.M. (Eds.) (2014). "The Recent History of Seasonal Affective Disorder (SAD): The transcript of a witness seminar held by the History of Modern Biomedicine Research Group, Queen Mary, University of London, on 10 December. London, England: Queen Mary University of London.
- Philo, C., Parr, H. and Burns, N. (2003). "Rural Madness: a geographical reading and critique of the rural mental health literature". *Journal of Rural Studies*, 19(3): 259-281.
- Rosenthal, N., Genhardt, M., Sack, D.A., Skewrer, R.G. and Where, T. (1987). "Seasonal affect disorder: Relevancefor treatment and research in bulimia. In H.G. Pie and J.I. Hudson (Eds.), *Psychology of Bulimia* (pp.203-228). Washington: American Psychiatric Association.
- Young, M.A., Reardon, A. and Azam, O. (2008). "Rumination and vegetative symptoms: a test of the dual vulnerability model of seasonal depression". *Cognitive Theory and Research*, 32: 567-576.
- Young, M. A., Hutman, P., Enggasser, J. L., & Meesters, Y. (2015). "Assessing Usual Seasonal Depression Symptoms: The Seasonality Assessment Form". *Journal of Psychopathology and Behavioral Assessment*, 37(1), 112–121.

#### Appendix 1 – Explaining the SAF+

The 'Big SAD Survey' incorporates an adapted version of the Seasonality Assessment Form (SAF) developed and tested by Young et al. 2015 to improve upon existing diagnostic tools for assessing the usual severity of seasonal symptoms for individuals, most notably the Seasonal Pattern Assessment Questionnaire (SPAQ) developed by Rosenthal et al. (1987). While the SPAQ remains the standard diagnostic tool in use within SAD research, the SAF aims to address limitations imposed by the narrow range of factors and symptoms included within the SPAQ, which notably do not cover the entire range of symptoms included in the DSM criteria for a depressive episode (Young et al. 2015: 112-113). Additionally, the SAF builds on the 'Dual Vulnerability Model' of SAD proposed by Young et al. (2008) to describe two distinct process of physiological responses to seasonal changes in the physical environment and psychological responses to changing cognitive and emotional symptoms.

Unlike most (highly quantitative) surveys conducted in psychiatric research about SAD, the purpose of the 'Big SAD Survey' was not to diagnose the condition or document prevalence in a population: the aim of this survey was, instead, to gather broad and rich (primarily qualitative) data about individual experiences of wintertime lowered mood including, but not limited to, clinically-diagnosed SAD. As such, the survey incorporated a modified version of the SAF, which for project-reporting purposes has been named the SAF+. The SAF+ includes additional questions about lowered self-confidence, increased irritability and decreased socialising. These questions were included to provide insight into a wider range of behavioural and social experiences of lowered wintertime mood and SAD. Due to these questions, SAF+ scores and severity thresholds thus tend to be higher than equivalent results from the SAF, but these are only intended to provide a general sense of the degree of disruption caused by seasonal symptoms, not as an alternative diagnostic method.

The adapted SAF+ can be viewed within the 'Big SAD Survey', a copy of which is included in this report as Appendix 2 - Survey Copy. The original SAF has been published by Young et al. (2015: 120); the SAF was used in this study with written permission from the corresponding author.

## The Big S.A.D. Survey

Page 1: Welcome!









## Thank you for your interest in taking the Big S.A.D. Survey!

This survey is part of a research project led by researchers at the University of Glasgow and the University of Edinburgh called *Living with SAD: practising cultures of seasonality to 'feel light differently'*. If you live within the United Kingdom and are age 18 or over, you are

able to participate.

The survey consists of 31 questions (multiple-choice and short-answer) about your experiences of winter, changing seasons and mental and emotional health. Only a small range of questions are mandatory, however, and you should feel free to skip any that you would prefer not to answer. The survey should be completed in one session. We anticipate it to take between **12-25 minutes**, although we encourage you to take as much time as you like with your answers.

After completing the survey, you will also be given the opportunity to join further stages of the project, including Seasonal Diaries, Interviews and/or a Winter Event Lab to be held in Winter 2022.

Before completing the survey, you will need to review a brief information sheet and data personal privacy notice to ensure that you understand how and why we will use the data you provide us. If you are interested in taking part in this research, please read the following two documents and then confirm your consent to participate below:

#### Click here to read the Information Sheet

#### Click here to read the Personal Data Privacy Notice

## To participate in the survey, please confirm the following by selecting 'Yes' below:

- I have read and understood the information sheet describing the survey and how data will be managed.
- I grant my permission to take part in this research project.
- I understand that my information (in anonymous postcode form) may be used in the writeup of the research or in related outputs and events.
- I agree that my information (in pseudonymised and anonymised form) can be quoted in research outputs and used in online education.
- I understand the collated anonymised data will be deposited by the UK Data Archive service and may be viewed and used by other researchers after the end of the project.
- I understand my contribution will be confidential.
- I have read the Personal Data Privacy Notice and understand how my data will be stored and used.

I understand and consent to all of the above: \* Required

C Yes C No

To begin the survey, click 'Next' below.

## Page 2: Information about You

First, we'd like you to tell us a bit more about yourself.

How old are you?

€ 18 - 25	€ 26 - 40	C 41 - 55
○ 56 - 75	C Over 75	

What is your gender?

What are the first four digits of your UK post code?	

How would you describe the place where you live?

○ Urban	<ul><li>Metropolitan</li></ul>	

#### **Your Experiences of Winter**

In a few sentences, how would you describe the changes that take place in your local area in winter? Feel free to comment on any aspects of your local environment, including physical landscape, atmospheric conditions or social life.

Can you comment specifically on the changes in winter light in your local area and how it affects you? You can comment on natural light or artifical light changes or both.
If you were to choose 5 words to describe your experience of winter to a friend, which 5 words would you choose?
What sort of landscape captures your experience of winter light? Write a short description of the images this question brings to mind.

#### Page 3: Personal Experiences of Winter

Next, we would like to understand how your mood and behaviour change in wintertime. We are interested in **your** experience, not other people you know or may have observed.

Please indicate the degree to which you usually have each of the following changes throughout winter: 0 - Not at all 1 - Slightly 2 - Mildly 3 - Moderately 4 - Severely

	0	1	2	3	4
Feel drowsy	C	0	0	0	0
Activities that I usually enjoy are less pleasurable	C	0	0	0	0
Appetite or weight increases	0	0	0	0	0
Feel sad or down	0	0	0	0	0
Sleep more	0	0	0	0	0
Having trouble thinking or concentrating	0	0	0	0	0
Feel less energetic	0	0	0	0	0
Feel inadequate or worthless	0	0	0	0	O
Crave sweets or carbohydrates	0	0	0	0	C
Feel discouraged or hopeless	0	0	0	0	C
Feel sluggish	0	0	0	0	O
Have more trouble making decisions	0	0	0	0	0
Have difficulty sleeping	0	0	0	0	0
Socialise less	0	0	0	0	0
Have lowered self-confidence	0	0	0	0	0
Have increased irritability	0	0	0	0	0

During the winter when these behavioural changes and feelings were at their worst, how concerned were you about them?

_	pehavioural changes and feelings were at their worst, how do your usual activities? (Indicate as many as apply.)
<ul> <li>□ I do my normal activities as easily and as well as usual.</li> <li>□ I avoid, delay, or choose not to do some activities because of how I feel.</li> </ul>	<ul> <li>□ I do my normal activities as well as usual, but it is more difficult to do them.</li> <li>□ I am not capable of doing some of my normal activities.</li> <li>□ I do my normal activities, but not as well as usual.</li> </ul>
Using your own words, can you during wintertime?	u describe what your experience of these changes feels like
When do you usually first notic	e these changes occurring?
Are there particular times of the	e year that you identify as the hardest or the easiest?

 $\ \ \$  Extremely

Moderately

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## Page 4: How Wintertime Feelings Affect Your Life

Over the past two years, to what extent have your experiences of wintertime symptoms changed?
To what extent does low winter mood or energy affect the amount of time you spend outside?
To what extent does low winter mood of energy affect the amount of time you spend outside:
C I spend much more time indoors during winter indoors during winter than in other seasons.  C I spend more time amount of time indoors during winter as in other seasons.
O I spend more time outdoors during winter than in other seasons.  O I spend much more time outdoors during winter than in other seasons.
What things do you most miss being able to do during winter, and why?
How does your experience of work change during winter?

**Improving Wintertime Mood** 

Is there anything that you have found which helps to alleviate the experience of low mood or energy in winter?
Have you ever used a lightbox to improve lowered winter mood or energy?
C Yes C No
Can you tell us more about your experience using the lightbox?
Have you ever relocated or considered relocating from your home residence because of your winter experience?
C Yes C No
Can you tell us about why you did or did not act on your plan?

Have you talked about your wintertime experience with a medical professional?

○ Yes ○ No	
How did they respond to your experience?	
Are you currently prescribed any antidepressants by your GP and, if so, is the dose chan during the winter?	nged
What makes you most hopeful about managing lowered winter mood or energy?	
What makes you feel most disappointed, upset or angry in terms of the perception and treatment of lowered winter mood or energy?	

### Page 5: How Wintertime Feelings Affect Those around You

Have you ever sought out or connected with other people who experience lowered winter mood?

c Yes	○ No	
How did you make this connect	tion?	
In a few sentences, can you de family, friend or work relationsh		d winter mood or energy has affected your
What attitudes toward low winte	er mood or energy	have you encountered in your local area?

Is there a particular piece of writing, art, music, film, television or other art form/cultural item that speaks to your experiences of winter light and/or lowered winter mood? Has it helped you in some way?


#### Page 6: Invitation for Further Participation

Thank you for sharing your experiences and perspectives with us! We would like to invite you to participate in future activities as part of this study.

There are 3 opportunities for further participation:

- 1. **Personal Interviews** to talk about your experiences with a member of the research team
- 2. Seasonal Diaries to document and share your experiences of the changing seasons
- 3. **Programme of Outdoor Winter Events** to be held in Glasgow during Winter 2022 to mitigate lowered mood

Please mark each activity that you would be interested in below, and we will contact you in due course with further information about how to participate. *Optional* 

☐ Personal Interviews ☐ Seasonal Diaries
☐ Winter Event Series
I give consent to be contacted by email about the selected activities:
○ Yes
C No
Please provide your email address here if you would like to participate in further stages of the project.
<b>Note</b> : we will separate your email address from your survey responses so that the data you have provided will remain anonymous.
Contact email: Optional
Please enter a valid email address.

#### Page 7: Thank you!

# Thank you for sharing your time and experiences with us!

We are very grateful for your contributions, and look forward to learning how to live life to the full in winter together.

If you would like to get in touch with any questions or recommendations, please feel free to contact the research team at <a href="mailto:shawn.bodden@glasgow.ac.uk">shawn.bodden@glasgow.ac.uk</a>. You can also contact Professor Hester Parr at <a href="mailto:Hester.parr@glasgow.ac.uk">Hester.parr@glasgow.ac.uk</a> for further information if you have concerns about this project. If you wish to contact anyone beyond the immediate research team, please contact the Chair of the CoSE Ethics Committee

Christoph.Scheepers@glasgow.ac.uk

