

Review of Face Covering (Masks) Wearing as a Behavioural Intervention to Control the SARS-CoV-2 Virus Spread

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Disclaimer

This report provides a high-level summary of a rapid review of emerging evidence and country experiences related to COVID-19 response. The evidence is collated from disparate sources, including scientific and policy reviews and reports, and occasionally media reports, which often has equivocal or even contradictory findings. Some studies are still in progress without completed or reported findings. Due to the novelty of COVID-19 virus/disease, and dynamic change in situation, studies and evidence can be conflicting, inconclusive and depending on the national or local, political, socio-economic or behavioural context. The lack of precision and clarity reflects real world research where a complex set of factors interact to influence outcomes.

To facilitate understanding related to the strength of the available evidence, the conclusions are graded as: a) strong support (green); b) moderate support (amber) and c) weak support (red), based on the published information, including from related areas, factors or possible mechanisms of action, we believe to be important to understanding COVID-19 spread.

Key Findings

- The potential benefits of nose and mouth coverings (masks) wearing are more in terms of source control (to prevent the spread to others) rather than to the mask wearer.
- The World Health Organization (WHO)¹ recommends wearing masks in indoor and crowded public settings as part of a comprehensive package of public health measures including social distancing, hand hygiene, etc., to prevent the spread of the SARS-CoV-2 (original variant) virus. This is supported mostly by studies comparing wearing masks against not wearing masks (rather than type of mask used; or duration; or type of settings), and against SARS, MERS or influenza outbreaks; with a small number of studies specific to SARS-CoV-2 and provides **MODERATE SUPPORT**

Commented [HR(S1): What does it provide?