

**Thirty-Second Meeting of Scottish Government COVID-19 Advisory Group**  
**21.09.2020**  
**Held via Zoom**

**1. Welcome and Apologies**

The Chair welcomed group members. The chair also welcomed Audrey MacDougall, head of the Covid Analysis Hub and Chief Social Researcher for the Scottish Government and Nicola Edge joint-head of the Covid Health and Analysis Hub at the Scottish Government. Lesley Sheppard, deputy-director in the Directorate for Covid Public Health also observed.

The Chair noted the concern across the UK due to the rising number of infections, and acknowledged the public briefing carried out by the UK Government Chief Scientist and UK Chief Medical Officer earlier that day.

Apologies –Angela Leitch, Carol Tannahill, Gregor Smith, Aziz Sheikh, Jacqui Reilly.

**2. Minutes and Actions**

All group members were content with the minutes from the previous week.

**ACTION** – Secretariat to send letters thanking group members for their work shortly.

**3. Adherence to COVID-19 Regulations**

The group were given an overview of a paper produced by Stephen Reicher, looking at factors relevant to adherence to covid-19 measures. The discussion outlined that the public narrative around non-adherence suggests that this is a choice when often this may not be the case.

Behavioural science literature on adherence makes the point of that the following impact on adherence:

- Capability: knowledge of what is expected of them and the skills they have to undertake behaviours.
- Opportunity: situational constraints on behaviour
- Intention and motivation are the other major factors.

Research showed that those from more deprived backgrounds were more likely to break lockdown, not due to motivation but due to opportunity. The implication is therefore that the problem is not people misbehaving but needing assistance and support to enable them to adhere to measures. Research is also showing that the majority of people want measures to still go further.

A problem is the rise of a blame culture. This ignores the fact that people getting infected will be linked to how exposed they are (e.g. at work and on public transport). Blaming people is also detrimental as it does not help to influence them to change their behaviour. It also shifts responsibility to certain groups (e.g. students) and may make the rest of the population feel less concerned about breaking measures

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because they feel they are still obeying the spirit of these. Focussing on 'spectacular' violations hides the large number of people who are slightly bending the rules and feel this is ok as they are following the spirit of the rules.

**Sanctions**

- Being punitive is likely to create disincentives. E.g. huge fines for self-isolating leading to individuals choosing not to get a test or reveal contacts as this increases the risk of being fined. Another problem is that this alienates people and makes you less willing to comply (e.g. only comply when observed).
- Getting neighbours to inform on each other undermines the sense of collective identity which is key to ensuring adherence.
- Repression is not the most effective approach in the long run. The starting point should be support and facilitation to help people comply with measures.
- Presuming ill-will is unhelpful.

In South Korea, punitive measures have become more and more strict as time goes by. Initially fines and now there is jail-time for not isolating. Preliminary analyses are not showing that coercion increases compliance. Instead it might undermine compliance in other areas. Excessive enforcement, when it feels this is against the interests of the public can be counterproductive as it leads to resentment. Places such as France where a large number of fines were first given out have seen much more resistance against new restrictive measures being reintroduced.

It is important that people feel the rules/law is there for them, rather than there to punish them. It is also important to understand the knowledge and practical resources that people need to comply. With self-isolation: risk of losing job or money. What if you have caring responsibilities, how will you buy food, what about your own wellbeing/mental health? It is also important to recognise that the constraints will be different for different groups (age, income, ethnicity).

Polling – shows small hard-core not interested in complying, but much larger group are just confused. A much simpler message is helpful but oversimplifying can unnecessarily limit other groups. This is a difficult trade-off. Some rule separations such as indoors vs. outdoors are easier to understand. The perception of diminished risk also leads to people's compliance decreasing. Statements like having pubs open contradict announcements in broadcasts that there is still a high risk.

Norms need to be made public. Non-compliance gets lots of coverage but this is not the behaviour of the majority. You can use some symbols to signal compliance, such as flags, stickers, badges.

Co-production – asking and engaging with people to figure out how to implement decisions can be helpful and improve uptake.

Public health measures can be enforced through legislation (e.g. drink driving, smoking ban). With the smoking ban, the important message was that passive smoking is a killer and individuals can harm others by smoking around others. The smoking ban became effective when it was everywhere (consistency). Social stigmatising then comes into play – admitting to drink driving is not a good thing.

## **5. Proposed Measures – group views**

The group were given a summary of proposed measures that the Scottish Government is considering. These measures include:

- Further restricting indoor domestic settings (extended households only with as few exceptions as possible but exemptions for children and childcare).
- Outdoor – considering a 6/2 rule in outdoor settings.
- Hospitality – the group's views were sought on measures to significantly impact on R.
- Travel – SAGE have asked for more advice. The group's views were sought on this and in particular, domestic travel.
- Compliance/enforcement – how do we make best use of public servants across Scotland to support compliance across hospitality and other sectors?
- Timing/Exit – measures will delay the progress of the pandemic. How long do the measures go on for. The UK Government is talking about a circuit break (maybe 2 weeks) to align with school holidays to minimise the impact on schools. The Scottish Government proposes to continue its 3/4 week review cycle though measures may be in place for significantly longer.

The group were given a brief summary of discussions at SAGE that morning. views sought on a wide variety of NPIs.

-John Edmunds paper, now 2 papers – summary papers and a suite of potential recommendations, and a detailed NPI table assessing the benefits and harms of NPIs individually.

-As well as things that need to be done acutely now to bring R down, we need to have a plan for other restrictions that are likely to need to be in place for 6-8 months.

-Measures need to be consistent and avoid 'chop and change'.

-Point made that it would be useful to know about impact of cross-border/region travel in the UK.

-The group highlighted the significant uncertainty that surrounds most of this.

### Views from the group:

#### **Duration of measures**

- Sense of going back to where we were during first wave. It would be great instead to have a reward for businesses that are complying/doing well, and enforcement for those businesses not complying.
- Need to move away from thinking about lockdown vs. release.
- The objective of new measures must be articulated. Are we going to be in a cycle of the lockdown/release or is there a more specific goal?
- Lack of exit strategy – if you are anticipating a vaccine, clarity is needed for this. How long is too long? This may also need to be communicated with the public.
- Public weariness – if we maybe need to learn to live with the virus, then avoiding the chop and change of measures will help prevent weariness.

#### **Impact of measures on R**

- PHS Data from the West of Scotland was shown.
  - The data shown suggested 'blunting' of the rate of increase that might have been expected without additional restrictions.



- Looking at this, we can be optimistic that new proposed measures could bring R below 1.
- Clarity needed to know what estimates we are working from.
- Concerns that the doubling rate shown by the UK Chief Medical Officer and Chief Scientific Adviser at the press conference of the morning of 21 September could be misinterpreted.
- R is currently about 1.4 in Scotland. Difficult to know if measures are excessive until these are clearly articulated.

#### **Hospitality**

- Aerosol elements underplayed at the start. Perception now that handwashing and table distancing sufficiently lowers risk in hospitality when this might not be the case.
- Ensuring venues are properly socially distanced – good interim step. The same could/should be done for workplaces.
- Process of certification for workplaces and hospitality could be rolled out.

#### **Education**

- Many kids are having to self-isolate and risking falling behind. Need to have proper support/IT to help them study at home.
- Universities – it is important to understand the impact these are having on rising case numbers in university towns and cities.

#### **Self-isolation**

- Self-isolation: compliance is extremely low in studies (CORSAIR). If self-isolation is the bedrock of our approach and people are failing to self-isolate then that in itself could be the reason for the increase in cases.
- Increasing the proportion of people properly self-isolating would have a significant impact on R.

### **6. Subgroup Updates**

The chair of the Education subgroup confirmed there are no major updates for this week.

### **7. SAGE Update**

Information from SAGE was shared as part of discussions on compliance and proposed measures.

#### **Attendees**

##### ***Advisory Group Members:***

Andrew Morris, David Crossman, Chris Robertson, Jill Pell, Stephen Reicher, Nicola Steedman, Tom Evans, Mark Woolhouse, Jim McMenamin, Sheila Rowan, Marion Bain.

***Invited attendees:*** Mary Black,

Name  
Redacted

***SG:*** Daniel Kleinberg, Audrey MacDougall, Nicola Edge, Lesley Sheppard.

***Secretariat:***

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