

COVID-19

Review of Physical Distancing in Scotland

June 2021

This publication will be available in accessible HTML on the gov.scot website

Summary of review considerations

In reviewing our current approach to physical distancing, we have taken a number of factors into account to reach a judgement on the most appropriate way to proceed as we take our next steps in managing the epidemic in Scotland. In particular, we have taken into account the impact of distancing in reducing the spread of the virus; the impacts of our ongoing roll-out of the COVID-19 vaccination programme; and the wider impacts of distancing in terms of health, economic and social harms. This review is set against a backdrop of differential approaches to restrictions and distancing taken in the other nations of the UK and of good self-reported adherence to current regulations and guidance in Scotland, as discussed further below.

The impact of physical distancing in reducing the spread of the virus

Current evidence suggests that the virus spreads mainly between people who are in close contact with each other. ¹⁰ Infection can occur when aerosols or droplets containing the virus are breathed in or come into contact with the eyes, nose, or mouth. Transmission risk is increased in indoor places that are poorly ventilated or crowded, and where people tend to spend longer periods of time. This is because aerosols remain suspended in the air and there is increasing evidence of airborne transmission over longer distances in some situations. ¹¹ ¹²

Physical distancing and use of face coverings are therefore both important measures to reduce transmission of coronavirus. Factors that affect transmission include:¹³

- Length and frequency of exposures (time);
- Proximity or physical contact with an infected individual (non-linear relationship with distance);
- Number of people within a space (likelihood of presence of an infectious person and greater potential for secondary cases);
- · Infectiousness of individuals, which may differ between viral variants; and
- Community prevalence, as the lower the prevalence the less likely you are to be in contact with someone who is infectious.

The Environmental and Modelling Group (EMG) says with high confidence that coronavirus transmission is strongly associated with proximity, duration and frequency of contact and community prevalence. The highest risks of transmission are associated with poorly ventilated and crowded indoor settings.¹⁴ In shared indoor spaces, there is no guaranteed safe distance to maintain from others, but maintaining a distance around 2 metres as far as possible and reducing the time of exposure is likely to reduce the risk of infection. Very short duration closer exposures are unlikely to pose a significant risk, especially outdoors. ¹⁵

¹⁰ Coronavirus disease (COVID-19): How is it transmitted? (who.int)

¹¹https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/9 79612/S1186_SAGE_86_Minutes.pdf

¹² S0824 SARS-CoV-2 Transmission routes and environments.pdf (publishing.service.gov.uk)

¹³COVID-19 risk by occupation and workplace (publishing.service.gov.uk)

¹⁴ S1194 Transmission in hospitality retail leisure.pdf (publishing.service.gov.uk)

¹⁵ Application of physical distancing and fabric face coverings in mitigating the B117 variant SARS-CoV-2 (publishing.service.gov.uk)