

SPI-B return to SAGE on the use of behavioural and social interventions on a Covid-19 epidemic in the UK

Task

- SPI-B was asked to provide advice to SAGE on the effects of possible behavioural and social interventions to limit and slow transmission of Covid-19 in the UK. These measures, as outlined in the SAGE behavioural / 'non-pharmaceutical' interventions table, are:
 - isolation of people with symptoms
 - isolation of households
 - isolation of vulnerable groups
 - social distancing
 - school closure

Conclusions

- SPI-B recommended the term "behavioural intervention" in place of "non-pharmaceutical intervention" as being a more accurate description.
- For each intervention, SPI-B considered:
 - public attitude and support
 - likely adherence
 - barriers, facilitators and communication issues.
- The group agreed that the efficacy of each intervention will be reliant on peoples' willingness to adhere, as well as the practicality of adhering to each measure.
- There could be public frustration if an intervention is perceived to be inequitable or inconsistent, e.g. preventing some religious or ethnic groups from meeting, but not others; if a sporting event (happening behind closed doors) is available on pay-per-view for subscribers only; if isolation is impossible for poorer households due to financial constraints.
- There was agreement that whoever is responsible for giving public messages on behavioural interventions has the relevant expertise to ensure public confidence in the legitimacy of the message, e.g. a healthcare professional rather than a politician.
- If government advises against certain behaviours or prevents people from doing different activities, supporting alternative means of social engagement may mitigate against unintended consequences, e.g. gatherings in alternative locations or negative impacts on health and wellbeing.
- A number of measures will require Government to rethink existing financial arrangements, e.g. home isolation for those on zero hours contracts who are ineligible for sick pay, people who are in receipt of universal credit or job seekers allowance unable to present themselves

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at job centres. Support from the commercial sector may also be required to ensure behaviours are feasible (e.g. waiving online delivery charges; providing free online entertainment).

- There was agreement that Government should advise against greetings such as shaking hands and hugging, given existing evidence about the importance of hand hygiene. A public message against shaking hands has additional value as a signal about the importance of hand hygiene. Promoting a replacement greeting or encouraging others to politely decline a proffered hand-shake may have benefit.

Building on the recommendations from last week, SPI-B recommends that, in order to increase public confidence in, and adherence to, these interventions, Government should:

- **Provide clear and transparent reasons for different strategies:** The public need to understand the purpose of each intervention. SPI-B agreed that government should clearly explain why certain actions are being taken, e.g. why schools are being closed, mass gathering discouraged, and certain at-risk and vulnerable groups advised to behave in a different way.
- **Reduce ambiguity wherever possible:** It will be important to clearly define precisely what behaviours are being recommended, by whom and under what circumstances. For example, we suggest a rapid review of existing 'self-isolation' guidance to ensure it is clear, evidence-based, actionable and considers changing situations for the individual concerned.
- **Conduct rapid research:** For the behaviours under discussion, there is limited evidence on the best phrasing of messages, the barriers and stressors that people will encounter when trying to follow guidance, the attitudes of the public to the interventions, or the best strategies to promote adherence in the long-term. SPI-B recommends a co-ordinated approach to evidence-gathering.

SAGE secretariat

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