SPI-B: Behavioural and social considerations when reducing restrictions (10th February 2021)

In April 2020, SPI-B produced guidance on factors to consider when easing national restrictions [1] [2]. The principles have not changed. They focus on:

- maintaining public trust by defining criteria for selecting what activities to resume based on need, risk and equity;
- providing clear guidance that helps people understand and adhere to the changed restrictions; and
- the importance of trialling the changing restrictions in careful sequence, with time to analyse data to assess the impact of each change, and of making this process public.

Since then, England has emerged from two national lockdowns, while the devolved administrations have accrued additional experience relating to ‘firebreaks.’ The context has also changed, with accumulated impact of the pandemic, new variants and associated outbreak control, and the vaccination programme. Some additional considerations are therefore highlighted below.

1. **We should continue to expect high levels of adherence to protective behaviours in the population in line with changing restrictions [High confidence]** [3]. Surveys show the population supported the recent national lockdown and believe that it should have been introduced at an earlier point to prevent transmission [4] [5]. Therefore we have high confidence that the public will support a proportionate, gradual easing of restrictions.

However, as restrictions are eased it is even more important that the government support people in practical ways to continue to follow protective behaviours including self-isolation. This is because as rules are eased people, especially among disadvantaged groups, will come under greater social pressure to continue to work when they have coronavirus symptoms or need to self-isolate after a positive test.

In addition, further packages of support and related communication campaigns will be required in the arena of mental health, childcare and elder care provision and preventing household transmission. Mental health and care provision either though central, local government or third sector organisations needs to be developed and invested in. This is because people may not follow protective behaviours if they are the only people who can help family and community members who are in need of mental health and other kinds of assistance [6]. These supportive policies are especially important for minority and disadvantaged communities given the higher levels of exposure and transmission within them [7]. However, all households need to be guided through a communications campaign focussed on practical measures they can take to keep themselves safe in everyday life [8]. Overall, through supportive government policies and communications we need to embed protective practices in daily life [9].

2. **Public perceptions of Government priorities will be set by the order in which restrictions are eased [High confidence] and the rationale for ordering should therefore be carefully considered and explained.** Equity must be at the heart of easing restrictions. The impacts of the pandemic have not been experienced equally as younger people, low-paid workers, minority ethnic groups, the self-employed, disabled workers, women and certain regions have been disproportionately affected [10] [11] [12] [13]. Unemployment is projected to increase as furlough ends and, in this context, it is important that the order in which restrictions are changed is equitable in impact and perception e.g. not seen to favour easing restrictions that are only accessible in more affluent communities
Consistency is needed in easing restrictions across different types of activities including risk of transmission, social value and accessibility for different groups. This should avoid discriminating against different social, economic, generational, religious or minority ethnic groups. Previous easing of restrictions resulted in confusion for some groups such as communities that prioritise seeing close family and friends but may be less likely to visit pubs, or opening schools but keeping gyms closed. Easing restrictions that are aligned with the social and cultural values of different communities will increase trust in the measures.

In easing restrictions, attention to the moral signals of loosening of the rules is important to avoid dissent and stigma [14]. Which aspects of society are prioritised in relaxing regulations has the potential to reinforce or undermine legitimacy and adherence. In similar vein, maintenance of support and childcare bubbles through the national lockdown has signalled a caring government [15]. As regulations change, this could be built upon by demonstrating that the government is prioritising the ability of more households to connect safely for social support. On the other hand, solely prioritising economic opening may have a negative effect on the legitimacy of rules among all socio-economic groups as economic policies do not benefit all equally [16] [17].

Furthermore, changing restrictions will now take place as cases of new variants arise. This will require new outbreak management strategies planned to find new cases, and to control and suppress transmission [18]. If this leads to restrictions at a sub-regional level, this could lead to inequities in who is subject to rules and who is not, especially as these strategies are most likely to arise and persist in areas high on the index of multiple deprivation among low-income groups. Care must be taken not to fuel stigma and inter-community tensions [19] and this can be achieved through messaging and practical national and local government economic and social support measures for these areas. Similarly, any barriers to accessing the opportunities that these new outbreak control management strategies might afford (such as engaging in surge testing) for disadvantaged communities, may quickly undermine trust in responding agencies and the legitimacy of their actions. As far as possible, national policy and communications must be joined up with local policy to prevent divisive outcomes and to support such communities.

3. As complexity of messaging increases, helping people understand why specific behaviours are important and communicating their social value becomes more important [Moderate confidence]. As interventions are lifted, communication will shift from a relatively straightforward “stay at home” message to a more nuanced set of messages about a range of activities. Messaging may be complicated by differences across tiers that change over time and complicated still further if immunity or vaccination certificates provide exemptions for some people, for some activities. Previous advice around messaging still stands [20] [21]. One added complexity relates to ‘alert fatigue’ – the concept that a continual stream of changes to advice has left the public unable to keep up and to identify and attend to important new messages [22]. Changes in the epidemiology will clearly necessitate changes in communication. But the need for minor changes to guidance which have little practical impact should be balanced against the wider confusion that can arise from this. In general, helping members of the public understand the principles underlying the various risk-reducing behaviours that are being advised may engender better adherence than focussing on a list of rules that need to be followed [23] [24].

Providing communications with an underlying message of social solidarity can help people to navigate changing rules and ambiguous, uncertain situations [25]. While moral questions can be divisive during crisis and pandemic situations, and pragmatic guidance is easier to accept, this guidance now faces a credibility gap because of its shifting and dynamic nature. Communications around Covid that emphasise values of care and support could help people to better negotiate safe
behaviour in their families, communities and workplaces. These communications should connect with people’s lived circumstances and speak across various identity positions [26]. Communications should state that sustaining the easing restrictions for some domains (e.g. schools) must be rooted in holding the line to maintain adherence to restrictions in other domains (e.g. children and parents’ broader social contacts). Communications should aim to build motivation for maintaining broader adherence in terms of the social importance of sustaining the easing of restrictions for the most socially valuable domains.

4. As perceptions of immunity grow, messaging may need to explain why continued adherence to specific protective measures is important [Moderate confidence]. The vaccination campaign has already successfully provided a first dose to more than 20% of UK adults [27]. Unless a good communication campaign is in place, vaccination may lead to lower adherence to protective behaviours in people who have been vaccinated [28] and, potentially, others in the population who perceive that there is no longer a major risk to vulnerable people [29] [28]. In addition, 16% of the general public believe they have already had COVID-19 [30]. This belief is associated with perceptions of immunity and lower adherence to several recommended behaviours [30] [31] [32]. At the moment, the presence of national restrictions means that people who believe they have some immunity have a reduced opportunity to interact with others. As restrictions change, lower adherence to some recommendations may become apparent. This is more likely for those behaviours that are difficult for people to adhere to, for example restrictions to seeing family or friends. The extent to which this will be offset by increased immunity is uncertain. As restrictions change, messaging should be careful to ensure that the importance of continued adherence to protective measures is well explained.

5. Expectations relating to the duration and changing nature of restrictions will need to be carefully managed [Moderate confidence]. Polling suggests that many members of the public believe that restrictions will be with us for some time. Ipsos MORI data suggest that 34% do not expect normality to return until 2022. Conversely, 26% expect life to return to normal by August 2021 [33]. The ONS Opinion and Lifestyle Survey identified 17% of adults who expect life to return to normal in six months or less [34]. Modelling from SPI-M suggests this is optimistic. Additionally, the challenge of new variants may call for sudden, strict reimposition of measures. Setting realistic expectations as to the likely duration of, pattern of and reason for continuing or suddenly imposed restrictions may help people to plan, improve their understanding of the efficacy of interventions and improve the perceived legitimacy of interventions.

6. Harnessing new resources to engage the public in the response should promote engagement and adherence [High confidence]. There has recently been substantial investment in community engagement to bridge the gap between government organisations and local communities. Community Champions schemes have been established which draw on local experts to convey key messages to their communities. Strong connections with local communities and drawing on local knowledge and expertise has been integral to the success of some local test and trace systems, tailoring health messages for diverse communities and increasing reach into sometimes harder to reach communities [35] [36]. Messaging relating to outbreak control should stress collective action and goals so as to avoid stigmatisation of certain communities and should involve community representatives in messaging. Similar efforts are underway to promote vaccine uptake [37]. These partnerships should be harnessed to support communications and increase trust when easing restrictions.

7. A steady increase in social activity is likely to occur when social restrictions are eased, which will probably be faster in young people [Low to moderate confidence]. Most members of the public
currently approve of the lockdown measures or want them to go further. In one poll from mid-January, while 37% felt current measures were “about right,” 48% felt they were “not strict enough” [38]. Any lifting of interventions is likely to be met with a cautious response by many people. At the same time, members of the public have found the winter 20/21 lockdown hard: 6 in 10 respondents to one survey finding it hard to stay in touch with friends and family [39]. Following the release of restrictions in May, a steady increase in socialising was observed in the public. People aged 16-24 yrs had a faster initial return to social activity than others (rising from 20% leaving home in the past seven days to see friends or family at the end of lockdown, to 33% one week later). A slightly quicker return to social activity was also seen in this group following the November lockdown (from 37% meeting up with friends or family at the end of lockdown to 49% [40] one week later). A quicker return to activity therefore seems likely to occur again in this group following the current lockdown. There is a possibility that this may lead to an increase in transmission. Following a leak of the plan to impose the November 2020 lockdown, an increase in socialising ahead of its implementation may have driven a subsequent increase in case numbers among 20 to 29yr olds [41].

In the medium-term, particularly where perceived risk is low, incentives to return to a specific activity may have a large impact on behaviour. The implementation of Eat Out to Help Out subsidies for restaurants led to a substantial increase in dining out compared to the same period pre-pandemic, which has been associated with an increase in transmission in those areas with higher take up of the scheme [42].

While many people will return to previous activities where permitted, some will continue to be concerned about doing this. Additional research on how best to provide targeted reassurance or support, where this is needed and appropriate, may be required.

8. Enforcement activities will face new challenges, heightened by differential effects of lifting restrictions [High confidence]. If the easing of restrictions does not keep pace with public perceptions of falling risk, perceptions of illegitimacy could increase, leading to resentment and lower levels of compliance. Operationally, policing is delivered via a ‘persuasion first’ policy (the 4 ‘E’s – Engage, Explain, Encourage & Enforce). This approach has been highly effective, but Covid-19 enforcement has previously been more difficult at times of lifting. Perceptions of the threat posed by Covid-19 may also differ among sub-sections of the community or neighbourhoods, depending on national rates and targets of vaccination, some of whom may no longer feel that they should be subject to restrictions. This will make it more difficult for the police to use persuasion. Grievances could be amplified if those vaccinated are provided with some sort of certification, enabling them to escape local restrictions. Businesses and other organisations may begin to implement their own forms of certification that contradict the Government position on easing [43]. To preserve legitimacy, the roadmap out of lockdown will need to provide clear messaging and transparent criteria. For policing it needs to set out in very clear terms which behaviours, activities and venues are not allowed, where and how the boundaries will be drawn, and why.

The most significant social cohesion considerations in the context of national relaxation of control measures arise from the possibility that restrictions may need to be re-imposed at a local level in the event of an outbreak. Data consistently suggests that deprived communities are more likely to be subject to interventions than others [44] [45] [46]. Control measures are likely to interact with social and economic conditions in ways that may amplify social tensions. Hyper-local restrictions will therefore need to be transparent, with consistently stable justifications and messaging concerning decision-making. This will require a very clear message about what control measures are intended to achieve, where and why they have been applied, and what will be required to enable relaxation, alongside adequate financial and other support. The limited effect of enforcement on adherence has
been argued previously [47]. A neighbourhood policing-led approach which is capable of monitoring local tensions is more likely to be successful in building compliance. This should entail working in partnership with local networks and using the messaging approaches recommended in Section 5 above to avoid the stigmatisation of, and retain police proportionality toward, diverse communities.

References


[30] DHSC, *BMG Coronavirus Health Behaviours - Survey Data (collected 11-13 January 2021).*


