The effect of social distancing on the reproduction number and number of contacts in the UK from a social contact survey Report 6

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Main conclusion

Using our best estimates, we estimate that R_0 is below one nationally and in all regions. There is small variation between regions. In some regions, we cannot rule out that R_0 is below one, though all central estimates are below one.

Methods

CoMix is a behavioural survey, with a study sample recruited to be broadly representative of the UK adult (18+) population. It was launched on 24th of March 2020 and this analysis includes data collected up to the 27th of April. Data is collected weekly, using two different panels who are interviewed using the same questionnaire in alternate weeks. Participants recorded direct, face-to-face contacts that they made on the previous day, specifying certain characteristics for each contact including the age and sex of the contact, whether contact was physical (skin-to-skin contact), and where contact occurred (e.g. at home, work, while undertaking leisure activities, etc). Further details have been published elsewhere.¹

Change in contact patterns over time by region

We combined the final week for Panel A (week 5; 1,144 participants) and B (week 4; 1,326 participants) to get estimates in each region. Estimates for child-child contacts had to be imputed from national POLYMOD data², but scaled accordingly in each region. We used BBC Pandemic data³ in each region as the baseline of contacts prior to the lockdown. We made two assumptions for the baseline R_0 estimates in each region: we either assumed R_0 followed a normal distribution with mean 2.6 and standard deviation 0.54 in all regions, or used the first reported estimated R_0 by Abbot et al⁵ in each region (shown in Table 1).

Table 1. First available R_t estimates. First available R_t estimates available by region from Abbot et al

Region	Date	Rt estimate	
Greater London	28-02-2020	2.21 (1.75-2.92)	
North West	01-03-2020	2.14 (1.56-3)	

South West	02-03-2020	1.94 (1.36-2.72)	
East Midlands	03-03-2020	2.06 (1.5-2.86)	
East of England	03-03-2020	2.1 (1.53-2.96)	
South East	03-03-2020	2.07 (1.62-2.8)	
West Midlands	05-03-2020	2.1 (1.67-2.76)	
Northern Ireland	07-03-2020	1.98 (1.38-2.85)	
Yorkshire and The Humber	07-03-2020	2.03 (1.56-2.7)	
Scotland	09-03-2020	2.06 (1.62-2.71)	
North East	13-03-2020	2.07 (1.62-2.7)	
Wales	15-03-2020	1.87 (1.54-2.32)	

Change in contact patterns over time nationally

We individually compared the contacts in the final weeks for each panel to get national estimates. Estimates for child-child contacts had to be imputed from national POLYMOD data². We used national POLYMOD² and BBC Pandemic data³ as the baseline of contacts prior to the lockdown. We assumed R_0 followed a normal distribution with mean 2.6 and standard deviation 0.54.

Current R_o estimates are compared by multiplying the baseline R_o estimates by the ratio between the maximum eigenvalue of the baseline and CoMix contact matrices, as calculated and corrected for the population distribution using the method proposed by Wallinga et al⁴. We bootstrapped all matrices and R_o values 2,000 times to assess uncertainty around our estimates.

Results

National reproduction number

Combining data from Panel A (week 5) and Panel B (week 4), and POLYMOD² contacts as a baseline, we estimate the mean current R_0 to be 0.42 (0.25 - 0.52). Using BBC Pandemic contacts³ as a baseline, we estimate the mean current R_0 to be 0.53 (0.32 - 0.66).

Reproduction number by region

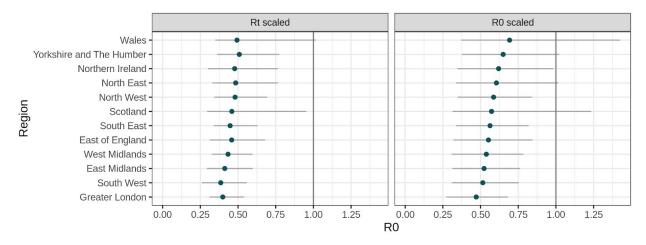


Figure 1. R_0 **estimates by region in the UK.** Rt scaled uses the first available R_t estimates by Abbott et al as a baseline, while R_0 scaled assumed that the baseline R_0 estimate followed a normal distribution with mean 2.6 and standard deviation 0.54 everywhere.

Table 2 R_0 **estimates by region in the UK.** R_t scaled uses the first available R_t estimates by Abbot et al^5 as a baseline, while R_0 scaled assumed that the baseline R_0 estimate followed a normal distribution with mean 2.6 and standard deviation 0.54 everywhere. The N column shows the total number of participants in each region.

Region	Pariticipants	R, scaled	R_o scaled
Wales	112	0.54 (0.35-1.02)	0.74 (0.37-1.43)
Yorkshire and The Humber	206	0.52 (0.36-0.77)	0.66 (0.38-1.02)
Northern Ireland	54	0.49 (0.3-0.77)	0.63 (0.35-0.98)
North East	92	0.50 (0.33-0.77)	0.62 (0.34-1.02)
North West	256	0.49 (0.34-0.69)	0.59 (0.35-0.84)
Scotland	203	0.50 (0.30-0.95)	0.62 (0.31-1.23)
South East	336	0.46 (0.34-0.63)	0.57 (0.34-0.82)
East of England	219	0.47 (0.31-0.68)	0.56 (0.32-0.84)
West Midlands	231	0.44 (0.33-0.6)	0.54 (0.31-0.78)
East Midlands	188	0.42 (0.29-0.6)	0.52 (0.31-0.76)
South West	246	0.39 (0.26-0.56)	0.52 (0.31-0.75)
Greater London	327	0.40 (0.31-0.54)	0.47 (0.27-0.68)

Discussion

The overall epidemic in the UK is made up of different components: the community epidemic and outbreaks in enclosed settings, most notably hospitals and care homes. This survey provides estimates of epidemiologically relevant behaviours in the community.

We estimate that the reproduction number of this community epidemic is below one both nationally and across regions. There is little variation in R_0 between regions, but we estimate Wales to have the highest R_0 estimate (0.74) and Greater London the lowest (0.47). Using R_t estimates from Abbot et al⁵ as the baseline value for R_0 , we estimate lower values. However, we cannot exclude that social distancing was already affecting the contacts prior to the lockdown, when these values were taken.

A major potential limitation is that this study may not be capturing individuals who are breaking lockdown rules and there may be a social desirability bias which results in an underreporting of the number of contacts. In addition, we had to impute values for child-child contacts, and were not able to calculate baseline estimates for contacts prior to the lockdown.

References

- Jarvis CI, Van Zandvoort K, Gimma A, *et al.* Quantifying the impact of physical distance measures on the transmission of COVID-19 in the UK. Epidemiology. 2020; published online April 3. DOI:10.1101/2020.03.31.20049023.
- 2 Mossong J, Hens N, Jit M, *et al.* Social contacts and mixing patterns relevant to the spread of infectious diseases. *PLoS Med* 2008; **5**: e74.
- Klepac P, Kucharski AJ, Conlan AJK, et al. Contacts in context: large-scale setting-specific social mixing matrices from the BBC Pandemic project. Epidemiology. 2020; published online Feb 19. DOI:10.1101/2020.02.16.20023754.
- Wallinga J, Teunis P, Kretzschmar M. Using data on social contacts to estimate age-specific transmission parameters for respiratory-spread infectious agents. *Am J Epidemiol* 2006; **164**: 936–44.
- Epiforecasts. National and Subnational estimates for the United Kingdom [Internet]. CMMID; 2020 Apr [cited 2020 May 5]. (Temporal variation in transmission during the COVID-19 outbreak). Available from: https://github.com/epiforecasts/covid-regional/tree/master/united-kingdom/regional-summary