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The Independent Scientific Advisory Group for Emergencies (SAGE)

The Independent SAGE Report 52

Using behavioural science to help minimise the spread of Covid-19

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Submitted to The UK Government and the People of Great Britain
& Northern Ireland by Sir David King, former Chief Scientific Adviser,
UK Government, Chair of Independent SAGE

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Key points

1. Vaccines and past infection do not provide 100% immunity from Covid-19 so the virus is likely to circulate for the foreseeable future.
2. This means that we need to engage in longer-term risk management including
 - a. making spaces safer (e.g. by improving ventilation), and
 - b. ensuring that people keep enacting protective behaviours (e.g. getting vaccinated, wearing masks as required, social distancing) (Table 1).
3. It is not enough just to tell people to do things; we must actively promote and enable these behaviours using the best available behavioural science.
4. Behavioural science involves:
 - a. using evidence to understand why people act the way we do,
 - b. developing policies, campaigns, resources and services to influence behaviour, and
 - c. evaluating the impact of these approaches.
5. People are more likely to perform actions that are: Normal, Easy, Attractive and Routine (NEAR). That means understanding and accepting what we need to do, how to do it, and why it is important, finding it relatively easy, and considering it as part of our routine, everyday behaviour.
6. The nations in the British Isles have teams of behavioural scientists advising on how to achieve this.
7. The Scientific Pandemic Insights on Behaviour (SPI-B) subgroup of SAGE produced a report on 22nd April that contained important insights about how to sustain Covid-protective behaviours (Table 2).
8. **The Westminster Government appears to have ignored these. Instead, it has produced confused and mixed messages, failed to set a good example, failed to provide adequate support for crucial behaviours such as self-isolation, and failed to engage adequately with communities to develop effective campaigns.** The Scottish, Welsh and Irish Governments appear to have taken a more positive and pro-active approach.

Table 1: Behaviours that reduce spread of Covid-19

Behaviour	Details
Getting vaccinated	Vaccination greatly reduces the risk of becoming infected, transmitting the virus, and being seriously ill or dying if infected.
Getting tested regularly	Getting tested regularly, particularly before engaging in high contact events, is crucial to establishing infectiousness but must be accompanied by isolation when required.
Isolating when potentially infectious	Isolating when potentially infectious (because of symptoms, or after a positive test result, exposure to infection, or travelling from a high-risk setting) is a cornerstone of infection control.
Maximising ventilation when indoors	Ensuring high turnover of fresh air in indoor spaces is highly effective in reducing infection rates.
Limiting the use of public indoor areas	Indoor areas pose a much greater risk than outdoor areas, particularly when crowded.
Social distancing	Maintaining a distance of 2m or more from others reduces the risk of infection. It is achievable in many settings without being disruptive.
Wearing a protective mask	Evidence now strongly indicates that wearing a well-fitting N95 or FFP2 mask or similar over the mouth and nose reduces the risk of being infected and infecting others.
Hand and surface hygiene	Regularly disinfecting hands through washing with soap or using hand sanitiser, and ensuring surfaces are regularly disinfected, reduces the risk of exposure through contact.
Hygienically trapping coughs and sneezes	Catching large droplets produced by coughing and sneezing in a suitable material and safely disposing of this reduces transmission of the virus.
Restricting travel	Restricting travel reduces the risk of seeding infections in communities that currently have no infections.

Table 2: Key findings from the SPI-B report ‘Sustaining behaviours to reduce SARS-CoV-2 transmission’ 22nd April 2021

1. ‘SAGE has concluded that, as legal restrictions are eased, maintaining low levels of transmission will require continuing policies that promote COVID-19 protective behaviours. These are everyday behaviours that involve spaces that we normally inhabit, including our homes, public spaces, educational facilities, businesses, and hospitality and leisure facilities. **Evidence collected to date strongly suggests that as restrictions are eased, COVID-19 protective behaviours will not be sustained without multiple co-ordinated interventions (high confidence).**’
2. **‘Successful risk management involves: multiple layers of protection;** a combination of physical, social and psychological measures; effective communication of risk and uncertainty; inclusion of the targeted groups in its development; continued monitoring and feedback (high confidence).’
3. ‘The wider evidence base underscores the need for people to have ongoing **capability, opportunity and motivation** if they are to engage in desired behaviours in a sustained way. Strategies that promote these will make such behaviours **normal, easy, attractive and routine (NEAR)** (high confidence).’
4. **‘Co-production and extensive stakeholder engagement will be critical** to the success of interventions and research and monitoring (high confidence).’
5. **‘Minority and socio-economically deprived groups face major barriers in applying risk-mitigating practices** in their workplaces, communities, transport and domestic spaces. Additional measures aimed at overcoming these barriers are required but need to avoid stigmatising the groups concerned. This is best achieved by interventions that create environments to avoid or overcome barriers, complemented where necessary with targeted, co-produced communication interventions (high confidence).’

Reference

<https://www.gov.uk/government/publications/spi-b-sustaining-behaviours-to-reduce-sars-cov-2-transmission-30-april-2021/spi-b-sustaining-behaviours-to-reduce-sars-cov-2-transmission-22-april-2021>

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