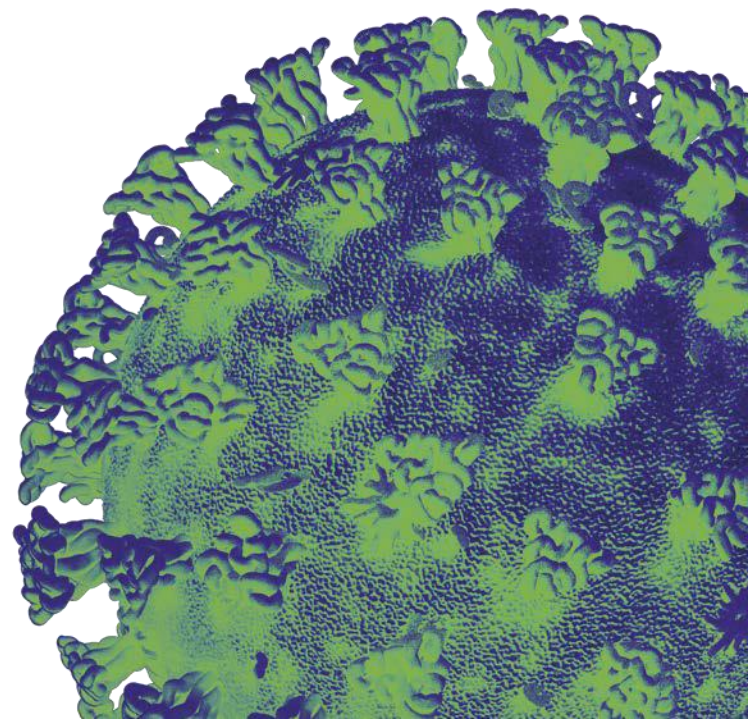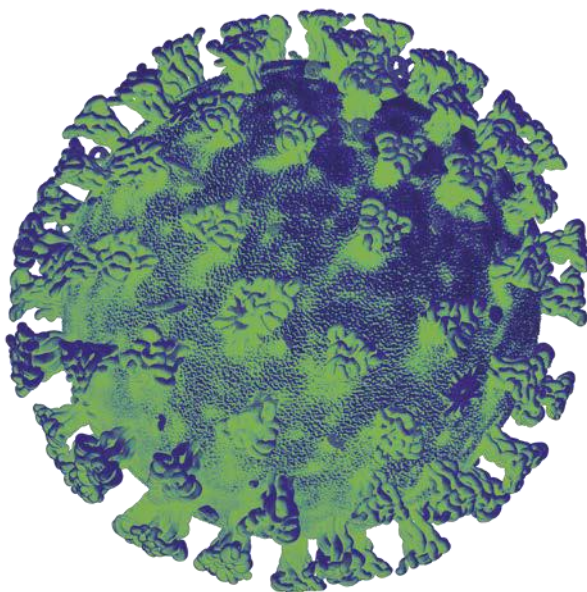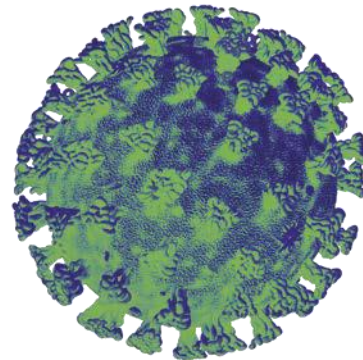Llywodraeth Cymru
Welsh Government

Technical Advisory Group

Statement on priority considerations relating to personal protective behaviours to inform decisions on easing of restrictions, spring 2021

31 March 2021

TAG Risk Communications and Behavioural Insights subgroup

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Purpose of this statement

The purpose of this statement is to highlight the key considerations and priorities from a behavioural perspective of the relaxation of COVID-19 restrictions. While cases and hospitalisation have declined and the vaccination programme is progressing well, the **need to maintain high levels of adherence to personal protective behaviours remains**, given the potential for a <u>further wave of infections</u>.

Priority considerations

1. **Communication interventions**

- Communications activity should continue to **acknowledge**: the **sacrifices** the Welsh people have made over the last 12 months; that **adherence** has remained <u>consistently high</u>; and that the <u>reasons for non-adherence</u> are complex. **Unduly highlighting non-adherence should be avoided** so as not to promote harmful norms that are not supported by evidence. Instead, pro-social (COVID-19 safe) alternatives should be used.

- Evidence suggests the **virus can still be transmitted** and a **proportion of the population will remain unprotected**, even as the vaccine rollout progresses. Effective communication activity on <u>adherence post-vaccine</u> is essential, including the period <u>directly after vaccination</u>.

- Recognition of '<u>alert fatigue</u>' associated with the volume and complexity of regulations and guidance in place is important. **Consistent messaging** and **transparency regarding any uncertainty** is essential with **clear rationales given for decision making**. Where possible alignment across UK nations is preferable.

- Communication activity should continue to reinforce the message that the **highest risk of being infected is when in indoor environments**, particularly those with poor ventilation (e.g. homes and offices) and when with people we know and trust. Outdoor activities are <u>inherently less risky</u>, but are more visible, which may have led to the media frequently highlighting outdoor activities that appear to be non-compliant with current guidelines. Whilst official communications are increasingly focussing on modelling safe public behaviours outdoors, the media portrayal of risk behaviour synonymous with being outdoors can drive inaccurate perceptions of risk, and less concern about meeting indoors or mitigating risk in those environments.

- Each stage of lifting restrictions (or their reintroduction) should be accompanied by **consistent communications across Government**, with a clear

presentation of risk, necessary mitigations and assessment and avoidance of unintended messaging (e.g. Eat Out to Help Out). It is essential the public has the necessary information, ideally contextually relevant, in order to understand what they are being asked to do and why. Clarity on next steps, providing guidelines for when people can expect easing (or tightening) of rules for public behaviour, is important.

- In order to inform communications and policy interventions, Government and its partners should continue to further its **understanding of the modifiable behavioural determinants of transmission** using an appropriate theoretical lens such as COM-B. It is often assumed a lack of capability or knowledge (C) is the key driver but motivation (M) and opportunities (O) including those affected by structural inequalities, such as support packages to enable low-paid casual workers to self-isolate when required to do so, also impact.

- Communication materials should be rapidly co-produced and tested with the target population, or ideally segment therein, before deployment.

2. **Enabling behaviours**

- While maintaining personal protective behaviours (e.g. hands, face, space) for the time being will be key, this is only part of the story. It is critical we continue to **focus on drivers of transmission**, for example, encouraging test-seeking behaviour and self-isolation when symptomatic or a contact of a case. This should be enabled by: providing adequate **financial, social and practical support** to those self-isolating; encouraging employers to support **home working** where feasible; and ensuring venues such as workplaces, schools and supermarkets are COVID-secure (ventilation, spacing, behavioural prompts etc.). This will require a cross-societal approach that recognises the inequalities COVID-19 has exacerbated.

- As behaviour is often driven automatically by environmental triggers (including normative behaviours by others), it will be important to continue to employ multiple approaches to **improve self-awareness and support intentional pro-social behaviour**, through for example, **clear social expectations**, **environmental modifications** and providing **plans**, **feedback** and **heuristics**.

- It is critical Government continues to support the **sector-specific structural conditions that shape behaviours**, particularly where evidence suggests risk is higher. These need to be explained to the public with a clear rationale, to help them to consider risks and modify their behaviour accordingly. People and settings collaborating will maximise their likelihood of remaining safe and open.

- **Vaccine hesitancy and reduced uptake** often reflects existing inequalities in healthcare (e.g. socio-economically deprived and ethnic minority populations). As evidence and misinformation continues to emerge, **culturally sensitive and tailored risk communication** and messaging, co-produced with communities, certain occupational groups, faith and influential community leaders, are required. Insights are likely to be needed to continuously understand vaccine

hesitancy, and inform, update, and reassure. Practical measures to improve access, such as travel support and convenient locations, are also important.

3. **Risk literacy**

- **Improving risk literacy** in the population should be prioritised to empower people to make informed decisions. This will be achieved through a range of approaches, including behavioural modelling of key scenarios, provision of appropriate heuristics, and practical support (e.g. assertiveness training to deal with awkward social situations). People need to be enabled to understand the balance between knowledge, risk, certainty and action. This will be critical given the likelihood our future approach will become increasingly one of information provision and choice enablement, framed in terms of lower intensity of governmental intervention and higher levels of public behavioural modification/maintenance.

- People should also be encouraged to **plan ahead**, particularly in relation to reducing transmission from household interaction (e.g. maintaining distance, having windows open).

- As sectors re-open, it is pragmatic to assume people will go back to using them as they did previously and will be keen to meet friends/family after a year of restrictions. This will require Government and its partners to make every effort to **influence people's behaviour when going back to various activities**, such as shopping, but doing so differently. Alongside existing information to Keep Wales Safe, simple evidence-informed decision aids should be considered to support this, such as emphasising the importance of space, time spent in people's company, ventilation and the number of people meeting. Use of heuristics may be appropriate but alongside other considerations, including the requirement for bilingual materials.