Technical Advisory Group

Behavioural insights to support a post fire break Wales

29th October 2020
Technical Advisory Group Risk Communication and Behavioural insights subgroup

Behavioural insights to support a post fire break Wales

Background

Wales entered a ‘fire break’ on 23rd October at 6pm with the intention of ‘resetting’ COVID-19 levels in the population. The scientific advice provided to support ministerial decision making has been published¹ and widely reported² in the media.

The WHO in their recently published report³ suggested that people are tiring of living within the restrictions imposed worldwide to tackle COVID-19, using the phrase ‘pandemic fatigue’, resulting in reduced adherence to the key protective behaviours required to reduce transmission rates. However, this account has been questioned, with evidence suggesting the majority of people want to do what is being asked of them but may be unable to do so due to lack of support, non-enabling environments or misunderstanding increasingly complex restrictions with variation across nations. Building and maintaining confidence in government is therefore key in managing the ongoing pandemic⁴. Governments require data on key behaviours and the drivers behind why people act in the way they do. The behavioural lens applied for insight leading to interventions, at multiple levels, focussing on the causes of behaviours in populations is most likely to be effective.

Continuing with the same policies is likely to lead to the same results. Given this, the TAC fire break advice concludes (p13):

‘The second phase is a new, simpler, national approach to behaviours and restrictions. Simpler messaging and regulations are expected to be easier to understand and comply with. Some existing restrictions may be removed if they are shown to be less effective or more harmful than originally expected…’

A way forward

There is an emerging view that a theoretically driven approach based broadly on behavioural insights⁵ has the potential to support these objectives. This builds on established literature but applies it in this novel context. This approach (understanding the situation and co-producing the solution) can be broken down into

---

¹ https://gov.wales/technical-advisory-group-fire-breaks
² https://www.bbc.co.uk/news/uk-wales-54616580
⁵ See for example https://www.nature.com/articles/s41562-020-0887-9/figures/ or https://jech.bmj.com/content/74/8/617 or https://bmcpublichealth.biomedcentral.com/articles/10.1186/s12889-020-09519-2
three stages:

- application of behavioural models to understanding individual and group behaviour (e.g. COM-B\(^6\));
- development of communication and behavioural interventions including for existing government advice (e.g. using behavioural toolkits like MINDSPACE\(^7\), EAST and Behaviour Change Wheel\(^8\));
- co-production and testing of targeted interventions with different segments/user-groups (e.g. through Implementation Science approaches).

Underpinning such an approach is the importance of tailoring interventions (including but not restricted to communications) at an individual or group level to influence population protective behaviours but also with the goal of reducing inequalities and potential discrimination in response to the challenges that COVID-19 poses. A core aim is to bring people together and identify similarities, not identify differences which promote divisiveness and blame i.e. communications and interventions can be targeted but not necessarily labelled as such. Co-production might also include a broader two-way ‘conversation’ with the population, to ensure engagement, and to enable a sense check of the Government’s approach.

In some cultures (e.g. Sweden) there is a strong cultural commitment to the collective which has supported the response of the population to government messages, emphasising the connection between individual behaviours and their impact on wider community levels of infection. Our goal should be the harnessing of a similar sense of civic duty in Wales to increase this sense of collective commitment, and alongside this empower individuals to make informed decisions that positively impact themselves and their community. Similar approaches have been introduced elsewhere, such as the development of a Kindness Innovation Network in North Ayrshire\(^9\). A number of policy principles based on the evidence underpin this approach (Table 1)\(^10\).

### Balancing risk while living with COVID-19

A shift in emphasis of a new approach will be about focusing on what positive behaviours are – encouraging people to live their lives whilst managing/considering the risk (i.e. COVID as an endemic landscape for the foreseeable future; that risks will need to be assessed in a similar way to those assessed when crossing a road or driving a car). In other words, ‘Living with COVID’ (framing the conversation with the long view). This embeds the key question of “Why Should I?”, encompassing beliefs about the consequences and benefits of the behaviour change, reflecting a need to

---

\(^6\) https://implementationscience.biomedcentral.com/articles/10.1186/1748-5908-6-42
\(^7\) https://www.instituteforgovernment.org.uk/publications/mindspace
\(^8\) See for example https://gcs.civilservice.gov.uk/publications/strategic-communications-a-behavioural-approach/
make positive consequences more proximal supported by informed decision making (see ‘COVID Can I do it’\textsuperscript{11}). This also draws on harm minimisation literature and positive strategies for sustaining adherence to infection control behaviours\textsuperscript{12} which includes key recommendations:

1. Provide positive feedback about a) the great efforts people are making to control the virus and b) the success these efforts are having in reducing infection rates
2. Emphasise that everyone has an important part to play in keeping infection levels low and avoid singling out particular activities, settings or people
3. Promote and support positive alternatives whenever activities that people value must be restricted
4. Help people change their environments and form alternative social customs to prompt and sustain habits that will reduce the spread of infection
5. Help members of the public to identify situations where they find it difficult to avoid risky behaviour and work with them to create acceptable solutions
6. Focus on whether and how people are trying to reduce infection risk, rather than assessing ‘compliance’ with ‘rules’ and relying on enforcement approaches
7. Target more intensive information and practical support for adherence to the specific behaviours, settings and populations that need it (e.g. face coverings available in schools, financial support for those self-isolating, maybe mobile data for young people)
8. Messaging and interventions should be co-produced and tested where possible prior to rolling out (recognising the challenge of working at pace).
10. Wherever possible see enforcement as a last resort (i.e. engage, explain, encourage’ and only ‘enforce’ if necessary. No evidence an enforcement approach results in positive public health outcomes.

\textsuperscript{11} https://covidcanidoit.com/US/all
Table 1 - Collective resilience in times of crisis: Lessons from the literature for socially effective responses to the pandemic

<table>
<thead>
<tr>
<th>KEY LESSONS FROM LITERATURE</th>
<th>POLICY PRINCIPLE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Malleability of social behaviours in time of crisis</td>
<td>Anticipate that everything can change rapidly</td>
</tr>
<tr>
<td>Perceived social norms play a critical role in accelerating change</td>
<td>Make constructive behaviour visible</td>
</tr>
<tr>
<td>Impractical regulations are likely to produce counterproductive effects</td>
<td>Favour clear simple practical instructions</td>
</tr>
<tr>
<td>Adherence to public health guidance is reinforced by the perception of a common identity with the persons issuing or relaying the guidance</td>
<td>Mobilise inclusive role models</td>
</tr>
<tr>
<td>The search for a sense of collective continuity is a powerful source of social motivation</td>
<td>Recall ordeals overcome and shared pride e.g. in Wales’ sporting and cultural history #TogetherStrong</td>
</tr>
<tr>
<td>Even in life-threatening emergencies, many ordinary social roles and relationships are preserved and continue to guide social interactions</td>
<td>Avoid perpetuating myth of collective panic</td>
</tr>
<tr>
<td>New communities of solidarity are likely to emerge out of the crisis situation</td>
<td>Let spontaneous solidarity express itself</td>
</tr>
<tr>
<td>The momentum of solidarity can be fragile when crisis management creates or reinforces inequalities</td>
<td>Show that vulnerability is shared</td>
</tr>
<tr>
<td>Confusion and lack of information are more difficult to manage than shared truths</td>
<td>Preserve information and communication channels</td>
</tr>
<tr>
<td>The preservation of social ties is a critical determinant of resilience in stressful times</td>
<td>Allow for the continuity of social ties</td>
</tr>
</tbody>
</table>

Longer-term implications

We need to embed current behavioural insights and social research findings into policy making if we are to build on this work to support the pandemic response. This will require capacity development through investment, as well as adding value using existing expertise across Wales. There will be a need to model unintended consequences of interventions and explicit activity to promote a collective society.