Novel coronavirus (COVID-19)

Risk communication for promoting social distancing in relation to the COVID-19 pandemic
12th March 2020

Purpose of this document
This document aims to support public health authorities in the Member States during implementation of communication activities in relation to social distancing measures aimed at minimising the spread of COVID-19. It provides five proposed key messages aimed at the public that highlight the urgency and value of such measures, along with supporting background information. It also complements the ECDC document on considerations relating to social distancing in the context of COVID-19.

Target audience
Public health authorities in the EU/EEA Member States and the United Kingdom, with a particular focus on those responsible for planning and implementing communication activities.

Five proposed key messages for risk communicators, and supporting arguments

1. Urgent action is needed now!
   - The COVID-19 pandemic is evolving very fast. Community transmission is currently ongoing throughout several countries in Europe and is expected to expand quickly in other countries in the coming days.
   - Estimates done by the European Centre for Disease Prevention and Control indicate that if no action is taken, the entire EU/EEA and UK is predicted to reach a rate of new infections similar to the peak experienced in Hubei-province by the end of March. As of 12th March, some countries are less than a week from this scenario.
   - A rapid, proactive and comprehensive approach is essential in order to delay further transmission and ‘flatten the curve’.

2. We need to build urgently on the control efforts that we have already had in place
   - Control efforts up until now have focused largely on isolating individual patients who have the virus, and intensively following up all the people with whom they have had contact since they fell ill. This has been successful in slowing the spread of the virus, and it has given us more time to prepare for the rapid increase in cases that we are now seeing.
The virus that causes COVID-19 is very infectious. Once the virus is spreading widely in the community, as it is now throughout most of Europe, we have to reconsider our strategy. The measures that we had initially implemented can no longer be sustained on a large scale. We urgently need to adapt our strategy in this new situation, and this will include implementing additional social distancing measures.

3. **Now is the time to keep our distance from each other**

   - In the absence of other tools to fight the spread of the virus, social distancing measures are essential tools to reduce the spread of disease. Social distancing measures include such actions as self-isolation, school and business closures, cancelation of events with a large number of participants, and quarantine.
   - Social distancing is needed because:
     - There are no vaccines available against COVID-19, and vaccine development takes time;
     - There is not yet good evidence on the effectiveness of potential therapeutic agents;
     - There is probably no pre-existing immunity in the population against the new coronavirus and everyone is therefore assumed to be susceptible.
   - We know from other contexts with the COVID-19 pandemic and from influenza pandemics that social distancing measures, if implemented comprehensively, can be very effective.
   - It has been estimated in a modelling study that if a range of non-pharmaceutical interventions, including social distancing, had been conducted one week, two weeks, or three weeks earlier in the country, the number of cases could have been reduced by 66%, 86%, and 95%, respectively, together with significantly reducing the number of affected areas. This is based on the experience in China.

4. **We all need to play our role**

   - Everyone needs to contribute to fighting the virus by following and promoting public health advice within their communities, showing solidarity, and protecting the most vulnerable.
   - Authorities and organisations have a responsibility in fighting this virus, but so do we as individuals. This includes:
     - Adherence to social distancing measures
     - Good hand hygiene
     - Respiratory hygiene (coughing and sneezing into your elbow)
     - Staying home when unwell (even if only with mild symptoms)

5. **We are all in this together!**

   - Social distancing measures can create real difficulties for people, but they are absolutely needed at this time. The measures can affect us all in our daily lives, our plans, our leisure activities, but...
     - These measures are key to protect the health systems so that they can cope with increased pressure over a long period.
     - They protect those most vulnerable from severe outcomes and death.
     - They also buy time for the testing of therapeutics and vaccine development.
   - Vulnerable individuals – for example the elderly, those with underlying health conditions, disabled people, people with mental health problems, homeless people, and undocumented migrants – will also require extra support, including from civil society and faith-based groups.
   - Everyone can look out for friends, neighbours and the wider community, to make sure that everyone has the support they need in this difficult time.
Possible channels for dissemination of the key messages could include:
  o Trusted spokespeople from the national authorities
  o Media and social media as disseminators of the messages
  o Community organisations, clubs, faith-based groups
  o Public health associations, healthcare professional groups

Some useful links and resources
  • An explanation of ‘Why ‘flattening the curve’ may be the world’s best bet to slow the coronavirus’ https://www.statnews.com/2020/03/11/flattening-curve-coronavirus/
  • A much-praised example of public communication about the need for personal responsibility and solidarity. It was given on February 8 by the Prime Minister of Singapore: https://www.youtube.com/watch?v=oNw1pyksKHo&feature=emb_logo

Background information and data
  • In less than four months since its discovery, and as of 12 March 2020, more than 125 000 cases of COVID-19 have been reported worldwide by more than 100 countries (data available here). Since late February, the majority of cases reported are from outside of China, with an increasing majority of these reported from EU/EEA countries and the UK.
  • On 11th March 2020, the Director General of the World Health Organization declared COVID-19 a global pandemic.
  • All EU/EEA countries and the UK are now affected, reporting a total of 22 105 cases as of 12 March. 943 cases reported by EU/EEA countries and the UK have died (data available here). Italy represents 56% of the cases (n=12 462) and 87% of the fatalities (n=827).
  • Although the course of illness is mild for the majority of cases (80%), severe illness and death do occur and these are more common among the elderly and in persons with other chronic underlying conditions.
  • The current pace of the increase in cases in the EU/EEA and the UK mirrors trends seen in China in January-early February and trends seen in Italy in mid-February.
  • A rapid shift from a containment to a mitigation approach is required, as the rapid increase in cases that is anticipated in the coming days may not provide decision makers and hospitals enough time to realise, accept and adapt their response accordingly if not implemented ahead of time.
  • Measures taken at this stage should ultimately aim at protecting the most vulnerable population groups from severe illness and fatal outcome by reducing transmission and reinforcing healthcare systems.
  • According to ECDC’s updated risk assessment (12 March)
    o The risk of severe disease associated with COVID-19 infection for people in the EU/EEA and UK is currently considered moderate for the general population and high for older adults and individuals with chronic underlying conditions.
    o The risk of healthcare system capacity being exceeded in the EU/EEA and the UK in the coming weeks is considered high. The impact and risk assessment on health system capacity can be mediated by the application of effective infection prevention and control and surge capacity measures.
    o The risk of transmission of COVID-19 in health and social institutions with large vulnerable populations is considered high. The impact of transmission in health and social institutions can be mediated by the application of effective infection prevention and control and surge capacity.