National Public Health Emergency Team

Behavioural Change Subgroup

Draft Paper: Overview of the Work of the Subgroup to date

July 2020
1. Introduction

As COVID-19 is a new disease, without an effective treatment or vaccine as of yet, nonpharmaceutical interventions such as the behaviours of individuals and groups within the population are vitally important in interrupting transmission and slowing the spread of the virus. Communicating up-to-date information about the disease, disseminating public health guidance and advice, and developing resources to support desired behaviours are among the most critical tools in limiting the impact of such a virus.

There is an existing body of evidence and knowledge from behavioural science and related fields which is fundamentally relevant to the response to the COVID-19 pandemic, and in particular to meeting the challenges of achieving and sustaining mass behaviour change, communicating effectively and maintaining social solidarity and resilience.

Ireland’s National Action Plan in response to COVID-19, published on 16 March 2020, recognised how we must all adopt behaviours that enable us, as a society to interrupt transmission, and maintain solidarity and resilience for the duration of the national response. The National Action Plan set out ‘Actions for Everyone’ which included ‘Adopt behaviours to interrupt virus transmission’ and ‘Build solidarity and community support networks’, and recognised the following enabling ethical principles - solidarity and caring for your community; minimising harm; duty to provide care; and proportionality.

2. Establishment of Subgroup and modus operandi

In line with the published National Action Plan and governance structure for the NPHET and national response, a Subgroup on Behavioural Change was established in recognition of the fact that behavioural science can provide vital insights and evidence to support communications and other interventions required to drive and sustain behavioural change, as well as respond to emerging concerns, including misunderstanding or non-adherence to public health guidance and message fatigue.
NPHET member Kate O’Flaherty, Head of Health and Wellbeing at the Department of Health, was assigned as Chair of the Subgroup, which was established on 18th March 2020 and held its first meeting on that date. The Subgroup initially consisted of a number of social and behavioural scientists, as well as officials from the communications and research functions of the Department of Health. A number of other Irish experts in this area were then also invited to join the Subgroup and terms of reference were agreed. (Terms of reference and membership in Appendix A).

The Subgroup met on 16 occasions between 18th March and 10th July 2020. The secretariat for the Subgroup was provided by the Department. Once approved by the Subgroup, meeting agendas and minutes were published on the Department’s dedicated webpage:

Regular written updates from the Subgroup were also provided to the NPHET meetings. Working papers from research conducted by Subgroup members were also published on this webpage.

3. Subgroup work programme themes and outputs

In line with its terms of reference, a key role of the Subgroup was to provide expert analysis and advice to the Department’s COVID-19 Communications strategy and related activities. The Subgroup’s initial approach was also informed by a publication from the ESRI’s Behavioural Research Unit in early March 2020, ‘Using Behavioural Science to Help Fight the Coronavirus’, which identified key insights and existing evidence from behavioural science which could contribute to the response to Covid-19.

The Subgroup’s expertise was brought to bear in responding to research findings and emerging issues as the pandemic progressed and the national response moved through the various phases of the National Action Plan and the Government’s Roadmap for Reopening Society and Business (published on 1st May 2020), as well as informing future policy.

The range and complexity of the behavioural issues which required to be considered was significant, and continuously evolving, often extremely rapidly. Multiple behaviours and influencing factors had to be managed and addressed, each with different literature, evidence
base and approaches to supporting and sustaining the engagement of the population and subgroups within the population, as people grappled with the impact of the pandemic on their lives.

Public communication approaches and tools were designed, developed and adapted based on the ongoing advice provided by the Subgroup. Under the auspices of the Subgroup, a number of rapid behavioural studies were designed and conducted by the Behavioural Research Unit in the ESRI; the findings and implications from these studies fed into the evolving communications and other responses.

Subgroup members continuously monitored the international literature for emerging evidence and research areas, and engaged with international colleagues and networks. They also conducted or collaborated on research in multiple areas, including national and international surveys, supported the cross-Departmental response of the Government’s Roadmap, and supported the design and development of the COVID Tracker App.

Subgroup members published a range of academic and other publications arising from their work and participated in the national discourse on COVID-19 through media articles and interviews.

The insights, evidence and advice of the Subgroup were shared in a number of ways, including by regular written update to NPHET meetings, presented verbally by the Subgroup Chair at NPHET meetings, discussion with the Department’s Head of Communications, and shared more widely via NPHET and cross-Government processes, as well as through the media and public communications.

3.1 Supporting effective communications

Following the establishment of the NPHET in January 2020, the Department of Health developed a COVID-19 Communication Strategy in line with WHO best practice guidelines. The first phase of a public health campaign launched in February with the aim of building public awareness of the nature of the disease and the central role for citizens in mitigating the risk and potential spread of the disease.
The Department also commenced a communications research programme, comprising nationally representative online surveys, media and web analytics, social listening and focus groups, to monitor public engagement with the public health advice and information and help identify emerging issues in the rapidly evolving situation. Results from the online surveys were made publicly available at: https://www.gov.ie/en/collection/6b4401-view-the-amarach-public-opinion-survey/

The outputs of this communications research programme were provided to the Subgroup for analysis on a weekly basis, and advice on enhancing the communications approaches and/or developing the research programme was discussed and provided by the Subgroup.

The Subgroup continuously provided advice, supported by behavioural evidence, to inform a communications strategy which educated and empowered the public to adopt the desired behaviours and comply with public health advice and restrictive measures, improve self-efficacy to assess risk and make informed judgements, and which promoted social cohesion, resilience and a sense of collective action. The Subgroup also helped identify public perceptions and social norms that were influencing adherence or understanding of public health guidance, and suggested solutions to address these issues as they emerged.

As well inputting to the design, tone and content of various messages and communications outputs as the pandemic progressed, a number of specific tools were produced based on the Subgroup’s advice which included:

- A poster on handwashing at home which was disseminated nationwide to all households (a brief case study on this is available on the Subgroup webpage)
- Communications tools to support self-isolation planning and compliance

As well as their role in advising the NPHET and Department Communications strategy, members of the Subgroup also contributed to the national discourse via print, TV, radio and social media. Given the criticality of clear, open, transparent and responsive communications to the public, led by experts and based on available evidence, this contribution enhanced the Subgroup’s overall contribution to the national response.

The role of the media during the COVID-19 pandemic was recognised in the Government Action Plan for its important role in amplifying key messages, maintaining confidence in public health advice, and addressing concerns and misinformation. The engagement of the
Subgroup members with the media was therefore an important aspect of the overall transparency around the work of NPHET and the maintenance of public trust in the national response.

3.2 Rapid behavioural studies

A series of rapid online behavioural studies were conducted by the Behavioural Research Unit in the ESRI. These studies, conducted with nationally representative samples, contributed significantly to the real-time understanding of comprehension and implementation of measures, thereby supporting the analysis of the impact of the communications strategy and other interventions, as well as identifying emerging areas of concern and potential solutions. These studies also identified population subgroups where targeted or adapted communication approaches may be beneficial.

These studies covered the following issues:

- Public comprehension and adoption of key behaviours (social distancing, handwashing, cough/sneeze etiquette) and effective communication approaches to support and sustain adherence.
- Public comprehension and likely compliance with advice on symptom identification and self-isolation
- Public expectations and attitudes to policy on easing restrictive measures
- Risk perceptions and decision-making as restrictions are eased and society re-opens
- Behavioural pre-testing of elements of the content of the COVID Tracker App

Working papers from these studies are published by the ESRI and are available on their website esri.ie/bru as well as the Subgroup webpage on the Department’s website.

3.3 Ongoing literature review and other research

Members of the Subgroup have engaged in ongoing review of the emerging literature in relation to COVID-19, as well as relevant existing literature and evidence review in relation to key factors that may influence understanding of and adherence to key behaviours and public health advice, factors influencing risk perceptions, message fatigue and wellbeing/resilience.
This includes a report published on the Subgroup webpage on using behavioural science to improve hand hygiene.

Members of the Subgroup, including through academic collaborations, are participating in a range of national and international surveys and other research related to COVID-19, and brought the experience and insights from a wide body of work to the discussions at the meetings. These relevant areas of research include research on impact on population mental health and wellbeing, psycho-social impacts on children, and optimising physical environments to support adherence with public heath advice. In addition, a number of external researchers were invited to give presentations to Subgroup meetings.

The Subgroup also inputted into the paper prepared by the Research Subgroup of the COVID-19 Expert Advisory Group with a view to informing a national coordinated research response to COVID-19.

3.4 Cross-sectoral collaboration

As well as the advice emanating from the Subgroup being shared cross-sectorally though NPHET and cross-Government processes, the Subgroup were also actively involved in a number of cross-sectoral projects, including a survey to support planning under the Government Roadmap for businesses to re-open, and the development of the COVID Tracker App.

3.4.1 Under the Government’s Roadmap for Reopening Society and Business, a phased approach was taken to the gradual lifting of restrictions, and resumption of key social, cultural and commercial activity. The Subgroup designed and conducted a business capability survey - in collaboration with the Department of Business, Enterprise and Innovation (DBEI) and their key stakeholders - to understand what supports would be required to ensure that businesses could adapt to the requirements of public health guidance and mitigate risks of infection, in order to safely recommence activity.

The survey findings fed into the work led by DBEI and its agencies to support resumption of business activity under the Government Roadmap.
3.4.2 The development of the COVID-19 App in Ireland was a collaboration between the Department of Health, the HSE, OGCIO, An Garda Siochana and the private sector. A member of the Subgroup was also on the Covid Tracker App Development Team, the Subgroup commented on the design and content of the App as part of its development (report available on the Department’s website), a member of the Subgroup worked with the App Team to adopt suggested refinements to content, and the Behavioural Research Unit in the ESRI also carried out a behavioural pre-test of elements of the content of the App prior to launch. The insights and suggestions from the Subgroup fed into the overall App development process and communications strategy. This has contributed to the robust research and development of the app, and in part led to its significant success as the fastest non-compulsory uptake of an app of its kind globally. A brief case study on the application of behavioural insights to the content of the Tracker App is available on the Subgroup webpage.

3.5 International Engagement

Subgroup members engaged significantly with international colleagues and existing networks of expertise, as well as actively participating in and contributing to the new international collaborative efforts that arose out of the global response to COVID-19. Subgroup members actively participated in a new International COVID-19 Behavioural Insights and policy Group established by the OECD, including presenting case studies of the work of the Subgroup and sharing experience with international colleagues, and contributing to an OECD brief paper on the application of behavioural insights to Covid-19. Members of the Subgroup have also presented the case studies of the work of the Subgroup at a separate WHO Covid response webinar series, and are collaborating on further work emerging from these international connections.

In line with the MoU with Northern Ireland, a link was made with a similar group formed in Northern Ireland, and informal contacts and information sharing were maintained during the period.
4. Conclusions and Next Steps:

As stated at the outset, the most important means of controlling the spread of this novel virus and its unprecedented impact on the population, was the collective adoption of key public health-mandated behaviours aimed at interrupting transmission and helping protect health service capacity to manage the pandemic.

The experience so far in Ireland has demonstrated an exceptional public response in terms of people’s willingness to follow public health advice to protect themselves and others from the disease. Lives were saved that would otherwise have been lost because of people’s willingness to make and maintain those behavioural changes despite the hardship and sacrifice that this often required. A strong sense of collective spirit and solidarity have been continuously displayed by the majority of people, despite the stress caused by the impact of the pandemic on their daily lives, and the evolving situation and ongoing uncertainty.

The evidence and expert advice provided through the Subgroup to informing the national response, and in particular the communications approaches taken, made a significant contribution to maintaining a high level of public trust in the public health messages and guidance, in achieving and sustaining a high level of compliance with public health advice, in promoting ongoing solidarity and inculcating an empathetic response to the challenges faced by many groups in the population.

New evidence and insights have been generated through the work of this Subgroup which are not only of value internationally in adding to the global knowledge base, but in underpinning future policy to respond to this disease, and indeed other pandemics or similar crises.

A stocktake exercise was undertaken at the Subgroup meeting of 5th June, as part of the overall review of the structures and operation of NPHET. Overall the group had largely positive feedback on the working arrangements and work undertaken to date by the Subgroup, while acknowledging the significant challenges faced in terms of the speed of response required and the unprecedented nature of the pandemic from multiple perspectives. The group also acknowledged the feedback from international colleagues that the process in Ireland to utilise and behavioural expertise is viewed to be comparably successful and valuable to the national response to Covid-19.
While it is clear that the Subgroup has met, and continues to meet its terms of reference, it is also clear that as we plan future policy on Covid-19, and work to support society learning to live safely with the disease pending an effective cure or vaccine, the expertise and evidence provided from behavioural science and insights will continue to be an important and necessary contribution.

The following is a proposed reconfiguration of the work and remit of the Subgroup to integrate with the overall reconfiguration of NPHET and its future work under consideration at this time.

**Proposed structure/process for future:**

As the Subgroup’s primary focus of activity has been in advising on the communications strategy to support adherence to public health advice, key behaviours and maintenance of collective solidarity, it is proposed that the expertise within the group be maintained in some form as a resource to future NPHET considerations on communications and responses to the public’s engagement with public health advice.

It is proposed that this might best be achieved by reconstituting a group, incorporating expertise and learning from the Subgroup, on an advisory basis to the Department’s Communications function, with the aim of meeting monthly to consider the monthly report to NPHET from the ongoing communications research.

The Department has an existing arrangement with the ESRI for behavioural studies to be conducted under a research programme, and it is proposed that future behavioural studies to support the COVID-19 response could be contracted via this arrangement. Details on the work programme and funding will be further discussed with the Department’s Research Services and Policy Unit which manages this programme with the ESRI.

*Note: A further Appendix to this report containing links to key research papers and other outputs, as well as some media coverage featuring members/work of the Subgroup will be added prior to finalisation.*
Appendix A: Terms of Reference and Membership

NPHET Behavioural Change Subgroup Terms of Reference:

1. Provide evidence-based, expert analysis and advice from the national and international literature and research to understand key population behaviours and drivers

2. Establish robust processes to support the work of, and collaborate with, the Communications Group

3. Analyse data generated through research processes conducted to listen to the public (including through media and social media monitoring, qualitative research, data analytics) to understand and address emerging concerns

4. Establish processes, in collaboration with the Communications group, to measure and analyse the impact of ongoing communications and interventions designed to drive behaviour change and support resilience

5. Design, implement and analyse rapid behavioural studies or other research measures to support optimal impact of ongoing communications and interventions, address emerging or anticipated issues and concerns, or as requested by NPHET

6. Collaborate with relevant partners to inform solutions to emerging issues

7. Provide timely analysis and advice to the Communications Group and to NPHET to inform relevant decision-making and communications outputs

8. Agree Subgroup *modus operandi*

9. Report to NPHET as required

NPHET Behavioural Change Subgroup Membership:

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<tr>
<th>Name</th>
<th>Position/Organization</th>
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<tbody>
<tr>
<td>Ms Kate O’Flaherty (Chair)</td>
<td>Head of Health and Wellbeing, Department of Health (DOH)</td>
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<td>Prof Molly Byrne</td>
<td>School of Psychology, National University of Galway (NUIG)</td>
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<td>Prof Liam Delaney</td>
<td>Professor of Economics, University College Dublin (UCD)</td>
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<td>Prof Pete Lunn</td>
<td>Head of Behavioural Research Unit, Economic and Social Research Institute (ESRI)</td>
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<td>Dr Aileen McGloin</td>
<td>Director, Marketing and Communications, safefood (Food Safety Promotion Board)</td>
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<td>Dr Robert Mooney</td>
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<td>Prof Orla Muldoon</td>
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