Addressing the public health challenges of Covid-19

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We need to recognise that the scale and complexity of the crisis caused by the COVID-19 Pandemic is unprecedented, encompassing the whole world and almost every aspect of human life...

[but] it is still possible for nations to transform the crisis into an opportunity to reimagine the social contract, putting sustainability, equity and humanitarian solidarity at the heart of a programme of reconstruction and renewal.

Outline

• The scale of what’s happened
• Challenges arising from public health measures during the pandemic – beyond Covid-19 related morbidity and mortality
• Short and longer term priorities, including Scotland in an international context
Almost 2 billion children & young people globally are not in school (UNESCO, May 25th 2020)
Mass disruption to life and how we normally interact & behave as humans. Celebrations, worship, sport, travel, leisure, remembrance and contact with our loved ones affected on an unprecedented global scale.
Employment & work affected in most countries with inevitable economic effects. But unequal distribution within & between countries & regions.
International comparisons are challenging for many reasons. It is unlikely that we will have a good understanding of which countries fared worse or better for some time. Not least because of the time lag in terms of the spread of the virus from its source in China to other countries.

However, by key measures the UK has been affected more than most. This poses questions about the adequacy of our response and the short and longer term consequences of that for different groups in the population.
Challenges arising from public health measures
Physical Health

• Excess deaths, particularly at home (around one in four excess deaths in Scotland not recorded as Covid-related)

• Delayed diagnosis and delayed treatment = poorer longer term outcomes

• Alcohol harms particularly among groups already at risk

• Longer term health effects of a recession and unemployment (i.e. the employment fall associated with the 2008 recession is estimated to have resulted in an additional 900,000 people in the UK suffering from a chronic health condition*)

Mental Health

• One in five people in the UK worried about mental illness during lockdown including 11% who report increased anxiety and 7% depression (Academy of Medical Sciences, April 2020)

• Increased self-harm and suicide (Holmes et al, April 2020)

• Groups most affected: children who may be experiencing greater exposure to substance abuse, gambling, domestic violence, and maltreatment; older people who might be particularly isolated, experiencing profound loneliness, and have less access to digital technologies that may mitigate this; those with existing mental health issues; people with learning difficulties and neurodevelopmental disorders, and front-line workers (WHO, March 2020)
Education and Economy

• School closures will have a long term impact – previous research shows that even shorter periods of missed school have consequences for skill growth

• The Office of Budget Responsibility estimates a fall of 13% GDP in 2020 with a 12 week lock down, and unemployment up 10% (additional 2 million people out of work)

• Sectors currently shut down employ 30% of all employees under the age of 25; low earners are 7x more likely than high earners to work in a sector currently shut down; and women 3x more likely

• Economic recovery will not be equally distributed
## Short term priorities

### Scottish Government COVID-19 Routemap

<table>
<thead>
<tr>
<th></th>
<th>Lockdown</th>
<th>Phase 1</th>
<th>Phase 2</th>
<th>Phase 3</th>
<th>Phase 4</th>
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<tbody>
<tr>
<td><strong>Epidemic Status</strong></td>
<td>High transmission of the virus. Risk of overwhelming NHS capacity without significant restrictions in place.</td>
<td>High risk the virus is not yet contained. Continued risk of overwhelming NHS capacity without some restrictions in place.</td>
<td>Virus is controlled but risk of spreading remains. Focus is on containing outbreaks.</td>
<td>Virus has been suppressed. Continued focus on containing sporadic outbreaks.</td>
<td>Virus remains suppressed to very low levels and is no longer considered a significant threat to public health.</td>
</tr>
<tr>
<td><strong>R</strong> Criteria/Conditions</td>
<td>R is near or above 1 and there are a high number of infectious cases.</td>
<td>R is below 1 for at least 3 weeks and the number of infectious cases is starting to decline. Evidence of transmission being controlled also includes a sustained fall in supplementary measures including new infections, hospital admissions, ICU admissions, deaths of at least 3 weeks.</td>
<td>R is consistently below 1 and the number of infectious cases is showing a sustained decline. WHO six criteria for easing restrictions must be met. Any signs of resurgence are closely monitored as part of enhanced community surveillance.</td>
<td>R is consistently low and there is a further sustained decline in infectious cases. WHO six criteria for easing restrictions must continue to be met. Any signs of resurgence are closely monitored as part of enhanced community surveillance.</td>
<td>Virus is no longer considered a significant threat to public health.</td>
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Short term priorities

• Continued public health measures (social distancing, hygiene, face coverings) will be needed for months to come
• Implementation of test, trace, isolate (Test & Protect)

Phased release of lock down:
• Re-establishing paused health and social care services
• Re-opening of schools (essential for opportunities, social interaction and long term outcomes of children) and workplaces
• Restoration of public transport systems and people’s confidence to use them
• Enhanced social safety nets, particularly as furlough support is removed
Which countries do COVID-19 contact tracing?, May 26, 2020

'Limited' contact tracing means some, but not all, cases are traced. 'Comprehensive' tracing means all cases are traced.

### How will contact tracing work?

<table>
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<tr>
<th>Identify and isolate people with symptoms consistent with COVID-19</th>
<th>Rapid testing to identify cases</th>
<th>Identify and trace contacts of cases</th>
<th>Support isolation of cases (for at least 7 days) and contacts (14 days)</th>
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<tbody>
<tr>
<td>People reporting symptoms consistent with COVID-19 are asked to isolate and a test is arranged.</td>
<td>Testing enables those who do not have COVID-19 to be released from isolation, and contact tracing to continue for positive cases. Identification of contacts can start prior to test results through self-completed digital tools or through an interview.</td>
<td>All cases are asked to self-identify contacts, and are able to access telephone support. For low risk cases, all contacts are provided with advice to isolate. For high risk and complex cases (e.g. social care worker, person with poor health literacy) specialist risk assessment and support to identify and contacts is available. Testing can be offered.</td>
<td>Some cases and contacts will be able to isolate easily. Others will need practical, finance and other support to isolate. A toolbox of different kinds of support to isolate may be required.</td>
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</table>
International perspective on longer term priorities - how might they apply to Scotland?

• Environment: accelerated action for habitat protection, sustainable and affordable clean energy

• Health: universal, underpinned by strong comprehensive primary health care [and renewed focus on prevention?]

• Labour market reform: reduction of job insecurity, improvement of labour standards and maximum decent productive jobs

• Education and skills formation as a public good & international obligation

• Social protection: universality for readiness in time of crisis and to reduce inequality; continued need for social housing – plus key fiscal measures and regulation of privatisation

Thank you

Please join the Usher Institute for its weekly Covid-19 Webinars: www.ed.ac.uk/usher/news-events/covid-19-webinars

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