



The Scottish Parliament
Pàrlamaid na h-Alba

COVID-19 Recovery Committee

Maree Todd MSP
Minister for Public Health, Women's
Health and Sport

COVID-19 Recovery Committee
Room T3.60
Edinburgh
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By e-mail
MinisterPHWHS@gov.scot

23 September 2022

Dear Minister,

COVID-19: COMMUNICATION OF PUBLIC HEALTH INFORMATION

I refer to the Committee's inquiry into COVID-19: communication of public health information.

The purpose of the inquiry was to hear from experts and stakeholders about the effective communication of public health information, evidence-based decision-making and tackling misinformation, drawing on the experience of the COVID-19 pandemic. As you told the Committee, we are only half-way through the pandemic. The Committee therefore believes these are important issues and that we need to continue to adapt public health messaging as the pandemic continues.

Following this evidence-taking, the Committee agreed to write to the Scottish Government with its conclusions and recommendations. Whilst this inquiry was not intended to cover all the issues comprehensively, the Committee has identified a number of issues and recommendations that we invite you to respond to.

Future communications planning and tackling misinformation and disinformation

The Committee considered the complexities involved in the communication of public health information during the pandemic to date, particularly when policy judgments changed over time as the science developed. The Committee was informed that risks, as well as the rationale, behind decision-making need to be effectively communicated. The Committee also heard how trusted communicators and targeted communications have been used to combat misinformation and disinformation.

The Royal Society of Edinburgh recommended that an independent fact-checking service should be established in Scotland, to help tackle the spread of misinformation and disinformation, a point which was echoed by Full Fact and the Office for Statistics Regulation.

Will Moy from Full Fact also spoke of the work his organisation has done on scoping a framework for information incidents and suggested that this should be considered in preparing communications approaches for future incidents.

During evidence you confirmed that the challenges were significant and acknowledged there were risks of overload and confusion, particularly when the measures and messaging were different from those of the United Kingdom Government.

On an independent fact-checking service, the Scottish Government said it did not believe it necessary to fund a new body, rather it would consider further what is the correct model for tackling misinformation and disinformation, taking into account international examples.

The Committee recommends that the Scottish Government prepares communication plans for future pandemics and ensures that any learning from the COVID-19 pandemic is reflected in these plans.

The Committee also recommends the Scottish Government gives further consideration to the idea of an independent fact-checking service to tackle misinformation and disinformation as suggested by witnesses.

Communicating with individuals on the highest risk list

Dr Sally Witcher OBE praised the Scottish Government for establishing a channel of communication in the form of the Chief Medical Officer's letter for people with highest underlying clinical risk. She highlighted, however, where you have diverse audiences, there is a need for multiple, accessible, communication channels. She suggested that, to reach segmented, specific groups it is important to involve them in the development of communication strategies.

The Committee notes that the Scottish Government wrote to people who were on the Highest Risk List in May 2022 to inform them the list would end as a result of the [its April 2022 review of advice](#).

The Scottish Government subsequently published [specific guidance for this group](#) on the discontinuation of the Highest Risk List. The guidance indicated that other protective measures (social distancing, face coverings etc.) are a personal choice for the individual. Therefore, for each person this now entails assessing risk for themselves and acting accordingly. The guidance suggests the individual may also choose to wear a [Distance Aware badge](#).

The Committee heard concerns about the discontinuation of the Highest Risk List with those on the list reportedly receiving mixed messages about whether they were at risk or not. The Committee heard that many had not been prioritised for vaccination, and were not eligible for new treatments, despite evidence showing they still had elevated risks.

In written evidence, the Alliance also noted that as health protection measures have been reduced, many people who were on the highest risk list have complained of a complete lack of public health communication. They are therefore receiving information from online platforms and undertaking their own research to inform their decision as to whether to continue to shield.

Messaging to the general public about the need to protect others, particularly those at high risk, was also raised as a concern. For example, questions were raised regarding the current “Covid Sense” campaign, aimed at providing guidance on how to “help protect yourself and others” in the current stage of the pandemic. Gillian McElroy from the Alliance said it was confusing and unclear to people what it means, particularly for people who are at highest clinical risk, or for unpaid carers.

Adam Stachura from Age Scotland told the Committee that ongoing communication must address the needs of all individuals so that those who are at the highest clinical risk, or are unpaid carers, do not feel that they are being left behind. He highlighted that several older people are still shielding, despite not necessarily being at clinical risk because they fear getting COVID-19 and passing it on to anyone who might be at a high clinical risk.

The Scottish Government informed the Committee that it is piloting a COVID safety signage scheme. The Committee understands that the pilot will run until the end of August 2022 and the evaluation from the pilot will inform decisions about Covid Sense Signage and communications over the autumn and winter.

The Committee notes the Minister’s view is that we are currently halfway through the pandemic. The Committee considers that it is important that all members of Scotland’s society should feel included as we move through the next phase of the pandemic and into recovery. The Committee is therefore concerned to hear views from those who were on the highest risk list that recent communications have not addressed their concerns. The Committee recommends that the Scottish Government works with representative groups to review the needs and concerns of people on the highest risk list to consider how these can be addressed in public health messaging going forward.

The Committee notes the concerns expressed by witnesses regarding the clarity of the “Covid Sense” public health campaign and the impact on those people who currently do not feel safe with health protection measures no longer being in place. The Committee therefore requests that the Scottish Government provides an update on the findings from its review of the COVID safety signage scheme, which is currently being piloted. In particular, the Committee would welcome clarity on how the Covid Sense public health campaign will address the issues highlighted in the evidence received during this inquiry going forward.

Vaccination programme: communication and uptake

The Committee also considered communication issues associated with the vaccination programme. As you are aware, the Committee has maintained an interest in this issue, having previously heard from witnesses who explained that vaccination information has for some people been difficult to understand, in terms of language, culture and accessibility, or was not accessible from trusted sources. The Committee [wrote](#) to the

Scottish Government in December 2021 on its work with suggestions for how to improve vaccine uptake in certain groups where uptake was low and where people were hesitant to get vaccinated.

Dr Nick Phin from Public Health Scotland highlighted the work being done on identifying communities in which public health messaging could be improved, using data on vaccine uptake and the number of cases, to focus in on those communities. Often they are in areas of deprivation and where there are minority groups. He explained the aim throughout the pandemic was to provide information that was culturally and linguistically sensitive and work with community leaders to reach their communities.

BEMIS told the Committee of the use of the Vaccine Information Fund (VIF) to develop better ways of delivering vaccine information to ethnic minority groups. It estimated that 55,000 individuals in 51 ethnic groups had been reached through the VIF, resulting in a marked increase in vaccination uptake. But it also pointed out the latest data for vaccination uptake shows that rates remain relatively low among White Polish and Gypsy/Traveller communities, an issue which was considered by the Committee in December 2021.

As highlighted, the Committee heard that we are currently halfway through the pandemic and it is not clear whether there may be another virulent strain in future months. The Committee is aware that the Scottish Government's vaccination programme is based on advice from the Joint Committee on Vaccination and Immunisation, which published [guidance](#) in July 2022 on the UK booster scheme. Under this advice the following will be eligible for a booster vaccination—

- all adults aged 50 years and over
- those aged 5 to 49 years in a clinical risk group, including pregnant women
- those aged 5 to 49 years who are household contacts of people with immunosuppression
- those aged 16 to 49 years who are carers
- residents in a care home for older adults and staff working in care homes for older adults
- frontline health and social care workers

The Committee considers that a high level of uptake by those eligible for the booster vaccination programme will be vital to the ongoing Covid response. The Committee also notes from its earlier work last autumn that some people who are eligible for the booster may feel fatigued by further Covid measures, or may be hesitant to be vaccinated. The Committee is also aware from this inquiry that misinformation and disinformation about vaccination persists. A communications strategy that accompanies the booster programme will be key to addressing these issues.

The Committee is concerned that vaccine uptake rates among some communities in Scotland, including Polish and Gypsy/Traveller people, remains low despite the issues around reaching these audiences being well known. Given the Committee's ongoing interest in the vaccination programme, it requests that the Scottish Government provides further information on how it intends to raise uptake amongst the groups where uptake has been low for those eligible for the autumn booster.

In addition, the Committee requests further information on the proportion of people in high-risk groups that have been fully vaccinated (i.e. have taken up all available doses) to date.

The Committee hopes that this letter will assist in the Scottish Government in its ongoing strategy for communicating public health information effectively during the recovery phase and in preparing communication strategies for any possible future pandemics.

I look forward to your response by 21 October 2022.

Yours sincerely,

A handwritten signature in black ink, appearing to read 'Siobhian Brown', with a long horizontal flourish extending to the right.

Siobhian Brown MSP
Convener
COVID-19 Recovery Committee