

Theme 2: Whether, when and how to impose lockdown and other restrictions in response to the COVID-19 pandemic

**By the Usher Network for COVID-19 Evidence Reviews (UNCOVER),
Usher Institute, University of Edinburgh**



Acknowledgements

The UNCOVER authors that led and wrote this review are Dr Ruth McQuillan, Mrs Emilie McSwiggan and Professor Evropi Theodoratou.

The UNCOVER authors that contributed to this review are Emily Adams, Nadege Atkins, Jodie Fryer, Prerna Krishan, Durga Kulkarni, Madhurima Nundy, Meagan Rust, Lorin Adams, Chiara Cotronei, Alice Gornall-Wick and Christa Roberts.

Prof Harry Campbell is the Quality Assurer, Prof Sarah Cunningham-Burley is the Ethics Adviser, Ms Marshall Dozier is the Information Specialist. Dr Gwenetta Curry was adviser for impact on equalities. Dr Alice Street was adviser for the testing theme.

Disclaimer

This rapid review has not been peer-reviewed and we have not conducted quality assessment of the included studies. Many of the included studies are pre-print publications or reports and therefore not peer-reviewed either. This review should not replace individual clinical judgement and the sources cited should be checked. The views expressed represent those of the authors and are not a substitute for professional medical advice.

Contents

Theme 2: The Scottish Government’s decisions when and how to impose lockdown and other restrictions	4
Executive Summary	4
Introduction	6
Findings	6
Sub-theme 2.1: The Scottish Government’s initial strategic response (February to March 2020)	7
Overview	7
Key events and decisions	7
Choice of strategy, timing of decisions and feasibility of divergence from UK Government policy	8
Potential questions for the Inquiry to consider	11
Sub-theme 2.2: The Scottish Government’s decisions about ending lockdown and navigating the pandemic before vaccines became available (April to December 2020)	11
Overview	11
Key events and decisions	11
Choice of overall pandemic response strategy, summer 2020	12
Timing of second lockdown	14
Potential questions for the Inquiry to consider	14
Sub-theme 2.3: The Scottish Government’s decisions about levels of restrictions once vaccines became available (but new variants started to emerge), December 2020 to February 2022	15
Overview	15
Key events and decisions	15
Vaccines and new variants	16
Potential questions for the Inquiry to consider	18
Sub-theme 2.4: The Scottish Government’s decision-making about restrictions placed on children and schools	18
Overview	18
Key events and decisions	18
Scottish Government policy on school closure evolved between the first and second lockdowns	19
Potential questions for the Inquiry to consider	20
Sub-theme 2.5: The harmful impacts of lockdown	20
Overview	20
Loneliness and isolation	21
Stress and overcrowding	21
Missed opportunities	22

Scottish Government response	22
Systematic evaluation.....	22
Potential questions for the Inquiry to consider.....	22
References	23
Appendices	25
Methods.....	25
Sources.....	25
Table 2.1: Key Decisions and Events.....	26
Table 2.3: Initiatives to mitigate the harmful impacts of lockdown: Scottish government announcements	66
Evidence syntheses included in table 2.1	73
Additional relevant evidence syntheses (not included in table 2.1)	76

Theme 2: The Scottish Government's decisions when and how to impose lockdown and other restrictions

Executive Summary

In accordance with the terms of reference for Portfolio 1, this report focuses on theme 2: **The Scottish Government's decision to lockdown and to apply other decisions**. The scope of the report is to provide information about key events, key people/organisations and key documentation to assist the Scottish Inquiry with their investigation.

A detailed analysis is presented, including sources of information, key events and decisions and a list of questions and issues that the Inquiry may wish to explore. In addition, a detailed appendix table with the information for each key event is included. Details of our methodology are provided in the appendix.

The key sub-themes that emerged from this theme include: 2.1 the Scottish Government's initial strategic response; 2.2 the Scottish Government's decisions about ending lockdown and navigating the pandemic before vaccines became available; 2.3 the Scottish Government's decisions about levels of restrictions once vaccines became available (but new variants started to emerge); 2.4 the Scottish Government's decision-making about restrictions placed on children and schools; and 2.5 the harmful impacts of lockdown.

An important overarching theme across all of these sub-themes is the extent to which ethical principles and values were invoked in the process of decision-making and of balancing the benefits and harms of policy choices across different groups.

The potential questions for the Inquiry to consider are:

Sub-theme 2.1: The Scottish Government's initial strategic response (February to March 2020)

2.1.1 Overall strategy: Did the Scottish Government consider adopting more aggressive suppression strategies in early March and if so, why were they rejected (possible considerations include public health capacity for test, track, trace and isolate; concern about population compliance with strict containment measures; feasibility of operating very different strategies north and south of the border)? Were the values and principles of public health ethics in any way influential in these decisions?

2.1.2 Timing of moving from containment to delay phase: Why did the Scottish Government take the decision to abandon the containment phase of pandemic response and move to the delay phase on 14 March 2020? This decision was implemented at the same time across all four nations of the UK: to what extent would it have been feasible to continue with the containment phase for longer in Scotland? Was this considered? Pandemic preparedness should mean having systems that can be set up and act very swiftly: to what extent did this happen?

2.1.3 Timing of lockdown: By 17 March, Italy, Spain and France had gone into national lockdown. Why did the Scottish Government wait until 23 March 2020 to introduce a national lockdown? To what extent would it have been possible for Scotland to lock down earlier, given the UK legislative framework? What would have been permissible without legislation (e.g., stronger guidance to stay at home ahead of full lockdown)?

2.1.4 Divergence from UK approach: Would it have been feasible in any sense for Scotland to have been out of step with the UK on these decisions? Even if the Scottish Government had wanted to take action sooner, would this have been feasible? How were devolved powers defined here?

Sub-theme 2.2: The Scottish Government's decisions about ending lockdown and navigating the pandemic before vaccines became available (April to December 2020)

2.2.1 Zero COVID: To what extent was "Zero COVID" (and the extensive restrictions and enhanced public health surveillance measures such a strategy entails) considered a serious and proportionate option during the summer of 2020 and if not, why?

2.2.2 Great Barrington Declaration: In October 2020, an international group of infectious disease epidemiologists and public health scientists expressed grave concerns about the damaging physical and mental health impacts of lockdown policies, particularly on the young. To what extent were such ideas the focus of attention? Were they elaborated sufficiently to influence decisions appropriately? Was this ever debated by Scottish Government and did these ideas have any influence? How was evidence and expertise collated and utilised? To what extent were there any public demonstrations or other forms of protest (e.g., open letters, engaging with MSPs) and did they ever influence decision directly?

2.2.3 Local vs. national strategy: What was the relationship between local and national decision-making and implementation? What are the relative advantages and disadvantages of local decision making in Scotland versus the potential for confusion if different parts of the country have different plans, given that they have much of the mass media in common? Advantages and disadvantages could include, for example, responding to local context and requirements as prevalence varied, versus possible confusion and loss of solidarity and perceived inequality of interventions. How effectively were local and national experience, expertise, government, governance and decision-making integrated?

2.2.4 Travel restrictions: Could the autumn resurgence of the virus have been avoided by stricter travel restrictions and border controls during the summer?

2.2.5 Delaying lockdown: What balance of considerations influenced the decision to ease restrictions on Christmas Day 2020 and to impose lockdown restrictions across mainland Scotland from 26 December? To what extent were these based on ethical analysis, epidemiological evidence and social and behavioural science? [The range of evidence, expertise, values and assumptions that influenced decision-making; whether the balance between these was appropriate; whether there were clear omissions; and whether dominant positions or types of evidence prevailed, perhaps differently at different times, are overarching questions that apply to many aspects of pandemic decision-making.]

Sub-theme 2.3: The Scottish Government's decisions about levels of restrictions once vaccines became available (but new variants started to emerge), December 2020 to February 2022

2.3.1 Communicating complexity: Currently, the vaccination strategy is providing good protection against severe outcomes of COVID-19. In this context, and at a time when the population is understandably wearying of ongoing restrictions, what communication strategies should be adopted

to maintain public preparedness for new variants by maintaining baseline restrictions, particularly as legal restrictions are phased out? How transparent have communications been about how and why decisions have been made, how benefits and harms have been weighed up and how harms have been mitigated?

2.3.2 Travel restrictions: What are the optimal travel restrictions for delaying the importation of potential new variants? What social and ethical issues were considered when balancing different options.

Sub-theme 2.4: The Scottish Government’s decision-making about restrictions placed on children and schools

2.4.1 Consultation: Were sufficient resources / priority given to gathering data on educational and social developmental harms and engaging with children, young people, parents and teachers to get their views and experience?

2.4.2 Changing priorities: How and why did government thinking evolve, with respect to prioritising school reopening? What ethical considerations were brought to bear in terms of the harms to children of lockdown and the need to balance risks and benefits across and between generations?

2.4.3 Multi-disciplinary expert advice: To what extent did the establishment of a multi-disciplinary expert advisory group influence this process? What lessons can be learned? Was there missing expertise (e.g., bioethics/public health ethics).

Sub-theme 2.5: The harmful impacts of lockdown

2.5.1 Systematic analysis of lockdown harms: What plans does the government have for a systematic audit of lockdown-associated harms and their enduring impacts, across the population and for different population groups (e.g., including minority populations, different age groups and those with a range of health conditions)? Balancing benefits and harms across different groups is a key area for ethical analysis.

Introduction

This is one chapter of a broader portfolio of work examining the public sector response to the COVID-19 pandemic in Scotland, the purpose of which is to assist the Inquiry in structuring its investigation of this complex subject. The focus of this chapter is lockdown (defined as: “the imposition of stringent restrictions on travel, social interaction, and access to public spaces” [1]). It charts the Scottish Government’s key decisions on whether, when and how to impose lockdown and other restrictions in response to the COVID-19 pandemic. An important overarching theme in this chapter is the extent to which ethical principles and values were invoked in the process of decision-making and of balancing the benefits and harms of policy choices across different groups. In considering ethical issues, the Inquiry might find helpful the work of the [UK Pandemic Ethics Accelerator](#).

Findings

Findings are organised and reported in five sections: three arranged chronologically and two thematically. The three chronological sections cover:

Sub-theme 2.1: The Scottish Government’s initial strategic response (February to March 2020):

The actions and decisions of the Scottish Government during this period set the broad parameters of Scotland’s response to the pandemic.

Sub-theme 2.2: The Scottish Government’s decisions about ending lockdown and navigating the pandemic before vaccines became available (April to December 2020):

During this period, the Scottish Government faced the challenge of navigating out of lockdown; however, without the benefit of vaccines, the virus proved difficult to bring under control.

Sub-theme 2.3: The Scottish Government’s decisions about levels of restrictions once vaccines became available (but new variants started to emerge), December 2020 to February 2022:

Vaccines brought hope of a swift return to normality, but the government faced further challenges, as new variants emerged.

The two thematic sections cover:

Sub-theme 2.4: The Scottish Government’s decision-making about restrictions placed on children and schools:

Children do not typically experience severe effects from COVID-19 itself; however, they were profoundly impacted by the measures introduced to control the virus. This section examines how the balance of harms and benefits, and the Scottish Government approach, evolved between the first and second lockdowns.

Sub-theme 2.5: The harmful impacts of lockdown:

We identify three broad categories of lockdown-associated harm: loneliness and isolation, stress and overcrowding and missed opportunities (for example, young people missing out on social, educational and employment opportunities). We provide a snapshot of Scottish Government initiatives to address these harms. Financial hardship is also clearly a harm associated with lockdown; however, as the economic impacts of the pandemic are the focus of portfolio 2, we do not address this aspect here.

Each section starts with a brief overview of the sub-theme. There is then a timeline, highlighting key events and decisions. This is followed by more detailed analysis of key issues. Finally, we suggest potential questions that the Inquiry might wish to consider further. Table 2.1 (appendix) summarises key events and decisions, with links to relevant policy and other documents.

Sub-theme 2.1: The Scottish Government’s initial strategic response (February to March 2020)

Overview

This section focuses on the period immediately before the Scottish Government announced that the country would go into full national lockdown. It highlights key events and decisions taken by the Scottish Government about the strategic public health response to the pandemic. Key issues that the Inquiry might wish to explore further are whether alternative response strategies were considered early in the pandemic; reasons for the timing of the move from the “containment” to the “delay” phase; the timing of the first lockdown; and the feasibility of Scotland diverging in a significant way from UK policy.

Key events and decisions

- On **22 February 2020**, COVID-19 was declared a notifiable disease (Scottish Government, 2020a)

- **Key Milestone:** On [1 March 2020](#), Scotland recorded its first case (Scottish Government, 2020b). During the following two weeks, the Scottish Government attempted to contain the virus by swiftly identifying, testing and isolating cases and their close contacts.
- On [March 13 2020](#), in an interview with Sky News, Sir Patrick Vallance, the UK's Chief Scientific Adviser, outlined the UK Government's strategy. As Italy and Spain were instituting full national lockdown, the UK was taking a different approach: aiming to "flatten the curve" through a "herd immunity" approach, which envisaged up to 60 % of the population becoming infected.
- **Key Decision:** On [15 March 2020](#), the Government judged that containment was no longer possible and that the country would be moving to the delay phase, with immediate effect. This meant that rather than trying to stop the virus altogether, the focus switched to trying to manage the way it spread through the population. Contact tracing was no longer a priority and testing resources were directed towards hospitalised patients, instead of being used to identify new cases in the community.
- **Key Decision:** On [15 March 2020](#), the Scottish Government announced that all indoor and outdoor mass events of 500 people or more should be cancelled; on [19 March](#), they announced that schools would close by the end of the week; and on [20 March](#), that pubs, cafes, restaurants and other hospitality and leisure venues must close.
- **Key Decision:** On [23 March 2020](#), the Scottish Government announced a full national lockdown: closure of hospitality and non-essential retail, a requirement to stay at home, work from home where possible and restrictions on indoor and outdoor gathering. This came into legal force until [The Coronavirus Act 2020](#) was given consent by the Scottish Parliament on **25 March 2020**. The Act conferred powers on all four UK governments to tackle the pandemic. It was the result of close intergovernmental collaboration, with officials from across the UK working together from mid-February 2020 to ensure that the bill was drafted to meet the needs of each administration. Scotland's national lockdown aimed to reduce transmission rates and prevent the health system from becoming overwhelmed, whilst buying time for the development of treatments and vaccines.

Choice of strategy, timing of decisions and feasibility of divergence from UK Government policy

Scotland, in common with the UK and most European countries, initially focused on containing and suppressing the virus by finding, testing, treating and isolating all cases so that the virus could not transmit freely in the population. When this was judged to be no longer possible, the emphasis switched from "containment" to "delay", the aim of which was to introduce social distancing measures to slow the spread of the virus, so that the peak number of people requiring care at any one time was reduced, and healthcare systems did not exceed their capacity. This approach is outlined in an interview the UK's Chief Scientific Adviser gave to Sky News on [13 March 2020](#), in which he articulated a response that would see up to 60 % of the UK population infected, to build "herd immunity".

A key question that the Inquiry might choose to explore is whether it would have been feasible to adopt more aggressive suppression strategies in early March. A SPI-M paper dated [9 March 2020](#) and considered by SAGE at its meeting of [16 March 2020](#) made this point, warning that the strategy the UK Government was following at the time would lead to 1.7 million deaths and that it should be abandoned immediately in favour of intense control measures, such as lockdown.

A second key question is whether the country moved from the containment to the delay stage too early. Would it have been feasible to persist with rigorous contact tracing and isolation measures for longer, or had contact tracing systems reached capacity?

Thirdly, would it have been feasible in any sense for Scotland to have been out of step with the UK on these decisions? Even if the Scottish Government had wanted to act sooner, would this have been feasible? How were devolved powers defined here?

China, New Zealand, Australia and Vietnam pursued elimination¹ strategies in their response to the pandemic, seeking to suppress the virus completely through aggressive public health measures. Proponents point to lower COVID-19 mortality rates and higher economic growth in countries that have pursued elimination strategies [2]. Detractors question whether elimination is realistic [3], citing the fact that many countries have abandoned this approach in the context of the more transmissible Delta and Omicron variants. A review of SAGE minutes and papers from February and March 2020 reveals that SAGE members rejected an elimination strategy similar to that being implemented in China because they believed it would simply result in a resurgence of the virus at a later date, potentially coinciding with a peak in winter influenza cases (see SAGE paper for [February](#) and [March 2020](#)).

Short of elimination, a related approach focuses on using highly effective outbreak control measures to prevent the importation of infections and to identify and quash outbreaks at the earliest opportunity, to prevent widespread community transmission [2]. Key measures include mass testing to detect cases, robust contact tracing measures based on electronic surveillance applications, strictly enforced quarantine (for arrivals into the country) and isolation (for cases and their contacts). South Korea, Singapore, Taiwan and Norway are examples of countries that have successfully deployed these sorts of strategies. Such approaches require a high degree of public compliance and a robust public health system. Opponents point to the excessive intrusiveness of such approaches [3].

Scotland initially focused on containing the virus by identifying, testing and isolating cases and their close contacts. However, on [15 March 2020](#), two weeks after the first case was identified, the emphasis abruptly switched from containment to delay. Testing resources were abruptly shifted from identifying cases in the community to focus on hospitals (staff and symptomatic patients). Patients were discharged from hospitals (including into care homes) to free up capacity for the anticipated wave of COVID-19 cases. Three days before Scotland moved to the delay phase, at his daily briefing on [12 March 2020](#), Dr Tedros Ghebreyesus, Director-General of the World Health Organisation (WHO) said:

“The idea that countries should shift from containment to mitigation is wrong and dangerous... Countries that decide to give up on fundamental public health measures may end up with a larger problem, and a heavier burden on the health system that requires more severe measures to control.” [4]

¹ Elimination is a formal public health term that refers to there being zero cases in a population for a defined period of time (Dowdle, 1999). After an initial suppression phase in which the virus is eliminated locally using aggressive public health measures, there is a sustained containment phase, in which community transmission is prevented through prompt public health action to identify and suppress outbreaks before they can spread widely. Measures such as strict control of national borders through quarantining all arrivals, comprehensive identification of new cases, rigorous contact tracing and isolation of close contacts are key to the success of this strategy. Having achieved and maintained elimination, normal economic and social activities can resume (Li Z et al, 2020).

An important consideration for the Inquiry is what factors led to this change and how were options assessed? What value judgements (explicit or implicit) influenced decision-making at this time? Why did priorities shift and what values and principles were invoked in balancing the risks of different approaches? Balancing competing interests and needs, as well as scientific understanding of the virus and its effects, and healthcare capacity are all relevant factors for decision-makers.

Over the following few days, measures such as closing schools and hospitality venues and cancelling mass events were announced to try to slow down transmission. It quickly became apparent that the delay measures were incapable of controlling transmission. The speed with which the virus spread during March meant that the government had no choice but to institute a full national lockdown on [23 March 2020](#).

Scotland, along with the rest of the UK, locked down two weeks later than Italy (which instituted a national lockdown on [9 March 2020](#), having promptly placed the most affected areas under quarantine during February), nine days later than Spain ([14 March 2020](#)) and six days later than France ([17 March 2020](#)). Evidence from Italy suggests that their swift lockdown reduced viral transmission by 45%, with consequent positive impacts on COVID-19 mortality [5].

At the time of lockdown, Scotland had a higher number of COVID-19 deaths per 100,000 population than either Spain or France at the time these countries locked down (Table 2.2). Crude statistical comparisons of this nature should be treated with caution: they do not reflect social and demographic differences among countries, differences in national testing systems and capacity or the R number in each country at the time. However, the situation unfolding in Italy and Spain in early March 2020 afforded an early warning to Scotland and other European nations, which could potentially have resulted in an earlier national lockdown and saved lives.

Table 2.2: Comparative data on case numbers and deaths at the time of lockdown – Italy, Spain, France, Scotland

Country	Date of lockdown	Cumulative number of cases at date of lockdown ^{1,2} (per/100,000 population) ^{3,4}	Cumulative number of deaths at date of lockdown ^{1,2} (per/100,000 population) ^{3,4}
Italy	9 March 2020	9,291 (15.5)	464 (0.78)
Spain	14 March 2020	45,374 (95.9)	202 (0.43)
France	17 March 2020	7,031 (10.4)	175 (0.26)
Scotland	23 March 2020	727 (13.3)	29 (0.53)

Notes:

¹COVID-19 cases and deaths in Italy, Spain and France - Worldometer (2021) [COVID-19 Coronavirus pandemic](#)

²COVID-19 cases and deaths in Scotland - PHS (2021) [COVID-19 in Scotland](#). Public Health Scotland.

³Population estimates for Italy, Spain and France, 1 January 2020 - Eurostat (2021) [Population and population change statistics](#)

⁴Population estimate for Scotland, 30 June 2019 - National Records of Scotland (2020) [Mid-2019 Population Estimates Scotland](#)

A retrospective analysis of Scotland’s first wave presented to the COVID Advisory Group on 2 [October 2020](#) estimated that up to 73 % of people who died in Scotland during the first wave were infected after the country locked down on 23 March 2020. When the incidence of disease is high, a significant accumulation of further cases is inevitable, even after introducing lockdown measures. This is because at the point of lockdown, there will be a significant pool of people who have already been infected, who will go on to infect others in their households. This underlines the risks associated with delaying the introduction of lockdown.

The UK Office for National Statistics (ONS) estimates that by the end of the first wave of the epidemic, Scotland had the third-highest rate of excess mortality² in Europe, after England and Spain [6].

Potential questions for the Inquiry to consider

- 2.1.1 Overall strategy:** Did the Scottish Government consider adopting more aggressive suppression strategies in early March and if so, why were they rejected (possible considerations include public health capacity for test, track, trace and isolate; concern about population compliance with strict containment measures; feasibility of operating very different strategies north and south of the border)? Were the values and principles of public health ethics in any way influential in these decisions?
- 2.1.2 Timing of moving from containment to delay phase:** Why did the Scottish Government decide to abandon the containment phase of the pandemic response and move to the delay phase on 14 March 2020? This decision was implemented at the same time across all four nations of the UK: to what extent would it have been feasible to continue with the containment phase for longer in Scotland? Was this considered?
- 2.1.3 Timing of lockdown:** By 17 March, Italy, Spain and France had gone into national lockdown. Why did the Scottish Government wait until 23 March 2020 to introduce a national lockdown? To what extent would it have been possible for Scotland to lock down earlier, given the UK legislative framework? What would have been permissible without legislation (e.g., stronger guidance to stay at home ahead of full lockdown)?
- 2.1.4 Divergence from UK approach:** Would it have been feasible in any sense for Scotland to have been out of step with the UK on these decisions? Even if the Scottish Government had wanted to take action sooner, would this have been feasible? How were devolved powers defined here?

Sub-theme 2.2: The Scottish Government's decisions about ending lockdown and navigating the pandemic before vaccines became available (April to December 2020)

Overview

This section focuses on the period between 23 March and 31 December 2020. During this period, Scottish Government policy focused on transitioning out of lockdown to return to a semblance of normality. However, in the absence of vaccines or effective treatments, the virus proved difficult to control. Towards the end of the year, the emergence of the Alpha variant resulted in a second lockdown. Key issues that the Inquiry might wish to explore further are the extent to which alternative response strategies were considered during the summer of 2020; the relative merits of local vs. national decision-making in relation to localised outbreaks; the utility of travel restrictions in suppressing importation of cases; and decisions about the timing of the second lockdown.

Key events and decisions

- On [16 April 2020](#), the first statutory review of lockdown restrictions took place (required by law every 21 days). Ministers decided to keep all restrictions, with some minor amendments.
- **Key Decision:** On [23 April 2020](#), the Scottish Government published COVID-19: A Framework for Decision-Making, as it plotted Scotland's move out of lockdown. The stated aim of this strategy was to suppress the virus so that the reproduction number remained below 1,

² Excess mortality refers to the number of deaths from all causes measured during a crisis, above what could be observed under 'normal' conditions.

demands on the NHS did not exceed capacity and people were able to return to some semblance of normality.

- **Key Decision:** On [21 May 2020](#), the government published a more detailed four-phase "route map", laying out the order in which restrictions would be relaxed. The details of these plans were subsequently revised on [18 June](#) (phase 2), [24 June](#) (phase 2), [2 July](#) (phase 2), [9 July](#) (phase 3), [20 August](#) (phase 3) and [10 September](#), as further evidence emerged of the effectiveness of restrictions on reducing transmission.
- On [28 May 2020](#), Scotland moved from lockdown into phase 1.
- On [18 June 2020](#), Scotland started to move into phase 2; however this was a gradual process, rather than restrictions easing all at once.
- On [20 August 2020](#), Scotland moved to phase 3. Again, this was a gradual, staged approach to easing restrictions.
- **Key Decision:** By 10 September 2020, after suppressing COVID transmission to near zero over the summer, the nation was in phase 3 of the route map. However, the Scottish Government judged that no further relaxation of restrictions could be safely achieved. The R number started to increase during August, peaking at between 1.3 and 1.7 by 1 October 2020. Hospital admission rates started to increase at the beginning of September, peaking on 23 October 2020. New cases were averaging over 150 per day, compared to 10 – 20 new cases per day during July.
- **Key Decisions:** The deteriorating position resulted in the re-imposition of some restrictions nationwide, plus additional restrictions in several local authority areas across the Central Belt (22 September, 7 October 2020). Increases in case numbers during the late summer and early autumn were predominantly in younger age groups, reflecting the impact of the return to school and university ([SAGE 56 – 10-Sep-20](#)).
- **Key Decision:** To enable it to respond more flexibly to localised outbreaks, on [23 October 2020](#) the Scottish Government launched a new strategic framework for decision-making ("The Levels System"). This introduced five protection levels, designed to support outbreak management and to allow rapid but proportionate responses. The levels were designed to be applied either nationally or locally.
- On 24 November, the Scottish Government announced that between 23 and 27 December 2020, people would be able to meet indoors in an exclusive bubble, composed of three households.
- The first mention in SAGE minutes of B.1.1.7 (initially referred to as the "Kent" and later officially as the Alpha variant) was on 17 December 2020 ([SAGE 73 – 17-Dec-20](#)), when it was noted that it seemed to be spreading more quickly than the original variant.
- **Key decision:** In response to this new threat, on [19 December 2020](#) the Scottish Government announced that the easing of restrictions around Christmas would now be limited to Christmas Day itself and that from Boxing Day, all of mainland Scotland would be living under Level 4 restrictions (close to full lockdown).

Choice of overall pandemic response strategy, summer 2020

The Inquiry may wish to explore the following key areas during this stage of the pandemic. What were the government's broad strategic aims during the summer of 2020? Could different policy choices have avoided the worst impacts of lockdown? Could different policy choices have avoided the resurgence of cases during the autumn of 2020? Should the country have locked down earlier in December 2020? What are the relative advantages of local decision making in Scotland versus the

potential for confusion if different parts of the country have different plans, given that they have much of the mass media in common?

The government's strategic framework aimed not to eliminate the virus but to suppress it to manageable levels so that normal life could resume. However, this was not the only strategy under discussion in the early summer of 2020. On 19 June 2020 the Scottish Advisory Group considered a paper ([Summer push towards elimination of COVID-19 in Scotland](#)), which argued that, having suppressed levels of the virus to low levels and having increased testing capacity, Scotland had a narrow window of opportunity over the summer to achieve "Zero-COVID". Achieving Zero-COVID would require changes to the testing strategy, aggressive case finding and strict border controls. In a statement to Parliament on [24 June 2020](#), the First Minister appeared to endorse this approach, stating that the nation must drive virus levels down "towards the point of elimination". This was repeated at the First Minister's media briefing meetings on [26 June 2020](#), [30 June 2020](#), [6 July 2020](#), [5 August 2020](#), [31 August 2020](#), [18 August 2020](#) and [3 September 2020](#).

An alternative plan was proposed in a paper prepared for the Scottish COVID-19 Advisory Group on 16 July 2020 ([COVID-19 in Scotland: what next?](#)). This argued that a strategy aimed at keeping transmission levels low, the R number below 1 and responding promptly to contain localised outbreaks was more proportionate and sustainable and less harmful than pursuing elimination. The paper argued that suppressing levels of COVID-19 to the point of elimination would require draconian measures including further lockdown, which would involve unacceptable and disproportionate harms (a made more widely a few months later in the [Great Barrington Declaration](#)). Whilst the first lockdown was justifiable because of the overwhelming need to bring the virus under control, the harms to mental health, education, livelihoods and public services were considerable. During the summer of 2020, the virus was well contained and the public health burden was low. The paper argued that in this context, it was not justifiable to re-impose such burdens on the population. The paper also questioned the feasibility of elimination, both in terms of the need for strict border controls and the need for extensive testing capacity and robust testing systems. Ultimately, this debate was overtaken by events: by early September, levels of transmission were too high for elimination to be a realistic option.

A question that the Inquiry might wish to explore is the extent to which ethical principles were systematically taken into account when weighing up alternative strategies. What consultation took place and what evidence was used to support decision-making? A further issue for exploration is the extent to which "Zero COVID" was a serious and proportionate option during the summer of 2020. An analysis of genomic data, produced for SAGE by members of the COG-UK Consortium on 9 December 2020 [7], supports the view that elimination was potentially achievable because the 2020 lockdown had been highly successful at suppressing the virus to near-zero levels. The analysis showed that most cases arising during the late autumn resurgence could be traced to summer holidays and other travel abroad during July and August 2020, the lockdown having effectively eliminated the majority of first wave strains of the virus [7]. Elimination would, however, have required very robust test, track, trace and isolate capacity, high population compliance, strict border controls and quarantine, close cross-border cooperation with the UK government and population support. It would also have required the re-imposition of restrictions, potentially including lockdown, which would have resulted in considerable harms. A related question is whether the autumn resurgence of the virus could have been avoided by stricter travel restrictions and border controls during the summer. Travel restrictions are considered in more detail in the following section.

Timing of second lockdown

A key learning point from the first wave of the pandemic was that locking down promptly before case numbers start to accumulate reduces case numbers and deaths. During the exponential phase of a pandemic, one week can make a very large difference, as explained very clearly by Tomas Pueyo in March 2020 [8]. On 22 December 2020, SAGE minutes noted that additional measures, up to and including full lockdown, would likely be required to bring the virus under control ([SAGE 74 – 22-Dec-20](#)). A paper produced by SPI-B, dated [22 December 2020](#), reiterated this point, suggesting that changing the operation of schools and universities, introducing internal and international travel restrictions and re-imposing a full lockdown were likely to be necessary. A third question that the Inquiry might therefore choose to explore is whether relaxing restrictions on Christmas Day 2020 and delaying the second lockdown until Boxing Day resulted in preventable deaths. From a public health ethics perspective, how were different harms balanced against each other? What types of analyses were drawn on in making just judgements and choices?

Potential questions for the Inquiry to consider

- 2.2.1 Zero COVID:** To what extent was “Zero COVID” (and the extensive restrictions and enhanced public health surveillance measures such a strategy entails) considered a serious and proportionate option during the summer of 2020 and if not, why?
- 2.2.2 Great Barrington Declaration:** In October 2020, an international group of infectious disease epidemiologists and public health scientists expressed grave concerns about the damaging physical and mental health impacts of lockdown policies, particularly on the young. To what extent were such ideas the focus of attention? Were they elaborated sufficiently to influence decisions appropriately? Was this ever debated by Scottish Government and did these ideas have any influence? How was evidence and expertise collated and utilised? To what extent were there any public demonstrations or other forms of protest (e.g., open letters, engaging with MSPs) and did they ever influence decision directly?
- 2.2.3 Local vs. national strategy:** What was the relationship between local and national decision-making and implementation? What are the relative advantages and disadvantages of local decision making in Scotland versus the potential for confusion if different parts of the country have different plans, given that they have much of the mass media in common? Advantages and disadvantages could include, for example, responding to local context and requirements as prevalence varied, versus possible confusion and loss of solidarity and perceived inequality of interventions. How effectively were local and national experience, expertise, government, governance and decision-making integrated?
- 2.2.4 Travel restrictions:** Could the autumn resurgence of the virus have been avoided by stricter travel restrictions and border controls during the summer?
- 2.2.5 Delaying lockdown:** What balance of considerations influenced the decision to ease restrictions on Christmas Day 2020 and to impose lockdown restrictions across mainland Scotland from 26 December? To what extent were these based on ethical analysis, epidemiological evidence and social and behavioural science? [The range of evidence, expertise, values and assumptions that influenced decision-making; whether the balance between these was appropriate; whether there were clear omissions; and whether dominant positions or types of evidence prevailed, perhaps differently at different times, are overarching questions that apply to many aspects of pandemic decision-making.]

Sub-theme 2.3: The Scottish Government's decisions about levels of restrictions once vaccines became available (but new variants started to emerge), December 2020 to February 2022

Overview

With the launch of the vaccination programme, in 2021 Scotland was no longer reliant on Non-Pharmaceutical Interventions (NPI) alone to confront the epidemic. Vaccines proved highly effective against severe outcomes of COVID-19 (hospitalisations and deaths) although less so at preventing infection. Vaccines brought hope that the virus could be brought under control, although charting a route out of lockdown alongside the vaccine roll-out brought its own complexities, and governments across the world faced further challenges, as new variants emerged. Key issues that the Inquiry might wish to explore further are strategies for communicating the importance of maintaining baseline restrictions, particularly as legal restrictions are phased out; and the role of travel restrictions in preventing the importation of cases and variants.

Key events and decisions

- **Key Decision:** Scottish Government announce mainland Scotland is to go into lockdown from [5 January 2021](#) with a new legal requirement forbidding anyone from leaving their home except for essential purposes.
- To prevent or delay the importation of new variants from South Africa and Brazil, Scotland introduced a series of travel restrictions on international arrivals from specified countries on 7, 12, 14, 15 and 28 January, requiring pre-departure testing and 10-day quarantine on arrival in Scotland.
- On [9 February 2021](#), the Scottish Government announced further tightening of travel restrictions for international arrivals from outside the Common Travel Area. International arrivals were required to go into isolation in managed quarantine hotels, at a cost to the traveller of £1750 per person.
- **Key Decision:** On [23 February 2021](#), Scotland published an updated decision-making framework, setting out the broad order of priorities for relaxing lockdown restrictions and the conditions to be met at each stage.
- **Key Milestone:** From [12 March 2021](#) a gradual easing of restrictions began (changes to level 4 restrictions), with different local authority areas moving at different paces, depending on the local state of the epidemic.
- In April 2021 B.1.617.1, later officially named the Delta variant, was widespread in India and South Asia ([SAGE 87 – 22-Apr-21](#)).
- **Key Milestone:** On [26 April 2021](#), the whole of Scotland moved to level 3 (some rural and island communities had moved to level 3 earlier).
- **Key Milestone:** Most of Scotland (with local exceptions) moved to level 2 on [14 May 2021](#).
- **Key Milestone:** By 19 May 2021, Delta had become the dominant variant in Scotland.
- Driven by the Delta variant, the incidence of new cases increased from around 10 May. Whilst most infections among the vaccinated population were relatively mild, unvaccinated people were exposed to the ongoing risk of serious disease.
- On [17 May 2021](#), the Government introduced a traffic light system for international travel, similar to the arrangements in place in the UK. Travel restrictions were repeatedly tightened and eased for specific countries as the Delta variant took hold over the summer months.
- **Key Milestone:** On [1 June 2021](#), more restrictions were eased. Island communities already in level 1 moved to level 0; most of Scotland moved to level 1; some local authority areas remained in level 2; Glasgow moved from level 3 to level 2.

- On [1 June 2021](#), Scotland’s National Clinical Director, Jason Leitch, said that Scotland’s epidemic was now beginning its third wave [9].
- A study by Public Health Scotland and EAVE II presented to the SAGE meeting on 3 June ([SAGE 91 – 03-Jun-21](#)) and later published in The Lancet [10] reported almost double the risk of hospitalisation for the Delta compared with the Alpha variant, with risks particularly marked in those with five or more relevant comorbidities. Two vaccine doses reduced the risks of hospitalisation, although with slightly lower effectiveness compared with the Alpha variant.
- **Key Milestone:** All of Scotland moved to level 0 on [19 July 2021](#) (1 metre social distancing, outdoor gatherings of up to 15 people from 15 households, indoor gatherings of up to 10 people from 4 households, hospitality settings allowed to open until midnight, up to 200 people allowed to attend weddings and funerals).
- **Key Milestone:** On [9 August 2021](#), the country moved “beyond level 0”. This removed the legal requirement for physical distancing and limits on gatherings; however, some restrictions remained. These included the use of face coverings indoors; the collection of contact details as part of Test and Protect; ongoing capacity limits on indoor and outdoor gatherings and changes to self-isolation rules (contacts who were fully vaccinated and symptom-free could come out of isolation with a negative PCR test). Rules were reviewed every three weeks to ensure they remained proportionate.
- New case numbers peaked around 6 September, with hospitalisations peaking a week later and deaths on 23 September. Deaths peaked at around a third of the peak numbers of deaths in the first and second waves.
- In November, travel restrictions were imposed in response to the Omicron variant: on [26 November](#) in 6 southern African countries and on [27 November](#) more generally.
- **Key Milestone:** On [3 December 2021](#), there was confirmation of community transmission of Omicron in Scotland.
- On [11, 14](#) and [27 December 2021](#), some restrictions were reintroduced in response to the Omicron variant.
- On [17, 24](#) and [31 January 2021](#), these restrictions were gradually eased.
- **Key Decision:** On [22 February 2022](#), the Scottish Government published an updated strategic framework, which removes most of the legal restrictions that have been in place for the last two years and outlines the arrangements that will be needed to respond flexibly to future resurgences.

Vaccines and new variants

In early 2021, the Scottish Government again plotted a cautious route out of lockdown, prioritising a return to the classroom for children and young people over the reopening of other sectors of the economy (see next section). This gradual approach was in line with advice from SAGE, who consistently warned of the risks of removing restrictions too early or too rapidly (for example, [SAGE 79 – 04-Feb-21](#); [SAGE 80 – 11-Feb-21](#); [SAGE 81 – 18-Feb-21](#)). Modelling suggested that the impact on infections, hospitalisation and deaths would be reduced by relaxing restrictions over 6 – 9 months, with the retention of some baseline measures (such as social distancing, face coverings, ventilation and hygiene), rather than lifting all restrictions after 3 months. The advice stressed that decisions should be based on epidemiological data, not target dates ([SAGE 79 – 04-Feb-21](#); [SAGE 80 – 11-Feb-21](#); [SAGE 81 – 18-Feb-21](#)). SAGE advised that a five-week gap between relaxing restrictions would allow for assessment of the impact of relaxing different measures ([SAGE 81-18-Feb-21](#)). As in

2020, the Scottish Government's strategy aimed to reduce transmission, bring the R number under 1, minimise loss of life and prevent the NHS from being overwhelmed. Also as in 2020, the Government was explicitly committed to maintaining restrictions no longer than necessary, to minimise associated social, economic and non-COVID health harms. Two factors not present during most of 2020 brought additional complexity and uncertainty in 2021: the dynamic rollout of the vaccine strategy and its impact on transmission and severe outcomes; and the emergence of significant new variants, threatening new epidemic waves.

The minutes of the SAGE meeting of 5 May 2021 give a flavour of this uncertainty ([SAGE 88 – 05-May-21](#)). Discussing the likely progress of the pandemic in the UK, it was agreed that further resurgence of hospitalisations “at some point” was highly likely, although it was impossible to predict when, or how severe, this would be. The minutes noted that factors likely to minimise the severity of such a resurgence included rapid vaccine roll-out, keeping prevalence of the virus low and sustaining behaviours known to reduce transmission (e.g., face coverings, limiting contacts, social distancing). Factors likely to increase the risk of resurgence included a swift return to social mixing on the easing of restrictions, low vaccination rates, particularly amongst younger adults and the emergence of new variants that were either highly transmissible or able to escape immunity. Unknown levels of seasonal variation in transmission, waning immunity over time and the impact of vaccination on asymptomatic transmission added further uncertainty ([SAGE 88 – 05-May-21](#)).

SAGE warned that the combination of high prevalence and high rates of vaccination created the perfect conditions for the emergence of an immune escape variant ([SAGE 93 – 07-Jul-21](#)). Concern about this had prompted a spate of restrictions on international travel in January and February, in response to Variants of Concern first detected in South Africa and Brazil. At a SAGE meeting on 21 January, there was scepticism about the effectiveness of such reactive, geographically targeted travel bans because of the time lag between the emergence and identification of new variants and because of indirect travel via third countries. SAGE advised that only complete, pre-emptive closing of borders or mandatory quarantine of all visitors in designated facilities, with strong population compliance, could prevent importation ([SAGE 77 – 21-Jan-21](#)). Nevertheless, travel restrictions were again introduced in November 2021 in response to Omicron.

A key learning point from this stage of the pandemic is that the pandemic is not yet over. With the rollout of the vaccine strategy, by 2021 the government had more weapons with which to fight the virus; however, this brought its own challenges. When most people are vaccinated, a vaccine-resistant variant has a competitive advantage over the original variant and so spreads faster. This, of course, is a global and not a local UK issue. It is the level of transmission globally and not just locally that is important; hence the importance of governments supporting agencies like the World Health Organisation in promoting appropriate global strategies on vaccine distribution and financial aid to support low- and middle-income countries. Although such considerations might seem rather distant to this review, in fact such decisions are important for the course of the pandemic in Scotland, as well as being important for reasons of global equity. To what extent did the global/local nexus feature in Scottish Government decision-making? To what extent were global public health issues considered from an ethical point of view? This means that restrictions such as social distancing and face coverings remain important after vaccination. The easing of restrictions on social distancing and face coverings may increase the chances of a vaccine-resistant strain emerging ([Rella et al, 2021](#)). The challenge to policymakers is to communicate this complexity to a population weary of living under restrictions, as we move beyond legally mandated restrictions. Another learning point is that reactive, country-specific travel bans cannot prevent the importation of new variants, although they may delay a new wave, buying time to prepare ([SAGE 97 – 29-Nov-21](#)).

Potential questions for the Inquiry to consider

- 2.3.1 Communicating complexity:** Currently, the vaccination strategy is providing good protection against severe outcomes of COVID-19. In this context, and at a time when the population is understandably wearying of ongoing restrictions, what communication strategies should be adopted to maintain public preparedness for new variants by maintaining baseline restrictions, particularly as legal restrictions are phased out? How transparent have communications been about how and why decisions have been made, how benefits and harms have been weighed up and how harms have been mitigated?
- 2.3.2 Travel restrictions:** What are the optimal travel restrictions for delaying the importation of potential new variants? What social and ethical issues were considered when balancing different options?

Sub-theme 2.4: The Scottish Government's decision-making about restrictions placed on children and schools

Overview

School closures as a means of preventing virus transmission are a particularly ethically challenging issue because the burdens and benefits accrue to different groups and may have long term impacts. The direct effects of COVID-19 are typically less severe for children than for adults; however, the harmful impacts of missed school and other activities supporting child development accrue almost entirely to children. Despite this imbalance, children around the world were sent home in the early months of 2020 on the precautionary principle, because schools are an efficient way of connecting households. In Scotland, schools were closed for in-classroom teaching to most pupils between March and August 2020 and again between January and April 2021, although during the second period of school closures, children and young people were allowed to meet each other outdoors, in carefully calibrated group sizes for children of different ages. Key issues that the Inquiry might wish to explore further include the evolution of policy on school closure between the first and second lockdowns; the role of expert advisory groups in supporting policymaking and the extent to which consultation with key stakeholders informed policy decisions.

Key events and decisions

- **Key Decision:** Schools closed for classroom learning for most pupils on [20 March 2020](#). Teachers delivered learning and teaching online and schools stayed physically open to provide critical childcare and learning for vulnerable children and the children of key workers.
- [On 21 May 2020](#), the Education Secretary announced a partial reopening of school buildings and return to the classroom after the summer holidays, with a blend of online and classroom teaching.
- On [23 June 2020](#), following better than expected progress in reducing virus levels, the Education Secretary announced that schools would fully reopen for classroom learning after the summer holidays, subject to scientific advice.
- **Key Decision:** The August return to school was confirmed on [30 July 2020](#).
- **Key Milestone:** On 11 August schools reopened to all pupils, but with some restrictions in place [11].
- Face coverings became a requirement in schools and on school transport from [25 August 2020](#). (See PPE chapter for detailed discussion of face coverings in schools).
- **Key Decision:** On [4 January 2021](#), most pupils returned to online learning only, although there were differences compared to the first lockdown and [childminders](#) were allowed to stay open.

- **Key Decision:** On [22 February 2021](#), a phased return began, starting with the youngest children (primaries 1 – 3).
- **Key Decision:** Senior 5 and 6 were the next to return, on [15 March 2020](#).
- **Key Decision:** All other children returned to school in [April 2021](#), after the Easter holidays.

Scottish Government policy on school closure evolved between the first and second lockdowns

Children and young people face relatively low direct risks from COVID-19, but relatively high risks of wider social, educational, economic and wellbeing harms from school closures. In recognition of the need for a more granular understanding of the direct and indirect impacts of the pandemic on children and young people, in June 2020 the COVID-19 Scottish Advisory Group established a sub-committee – the Advisory Sub-Group on Education and Children’s Issues (ASGECI) - to provide rapid, regular and detailed scientific advice on education and children’s issues to support policy development. Committee members brought multi-disciplinary expertise and experience in education, early learning and development, children’s services, public health, clinical medicine, behavioural sciences and statistical modelling. ASGECI’s remit covers all issues affecting early learning centres and schools, and linked children’s services issues. All minutes and committee papers are available [here](#) and are likely to be a useful source of information for the Inquiry.

The Scottish Government published a report on [10 November 2020](#), which recognized that maintaining social interaction and engagement with peers is essential to the wellbeing of children and young people. To this end, exemptions were applied for children and young people to the restrictions on social distancing that applied to the general population. Children under 12 were allowed to mix with their friends outdoors or in indoor public spaces, with no physical distancing restrictions. Older children and young people (12 -17 years) were allowed to meet in groups of six outdoors, with social distancing.

At its first meeting, on [23 June 2020](#), ASGECI highlighted the harms associated with being out of school, particularly for the most disadvantaged children and young people. These include learning loss, child development delays and disruption, child protection and mental health impacts. On [21 July 2020](#), noting WHO’s statement that globally, no COVID-19 outbreak could be attributed to schools, ASGECI recommended that if levels of infection increased again, higher-risk venues should be closed before schools to minimise the indirect harms to children from being out of school. Since its inception, ASGECI has had a sustained focus on the impact of COVID-19 restrictions on the wellbeing of children and young people, highlighting the impact on intergenerational justice and on inequalities and the need for evidence to support decision-making.

When Scotland again went into lockdown in December 2020, it was a clear Scottish Government priority for children and young people to return to the classroom at the earliest opportunity, to minimise further disruption to their education and wellbeing. Emerging evidence synthesised from multiple studies suggested that on balance, that children and schools are likely to play only a limited role in transmission, although the evidence is uncertain [12]. ASGECI stated that prolonged school lockdowns were not sustainable and recommended that policymakers introduced a phased return, prioritising younger children (pre-school and primaries 1 – 3) and senior pupils (secondary 5 and 6), the latter because of concerns about their mental wellbeing and about the need for some in-school input to prepare them for certification.

There were, however, risks associated with school reopening; a modelling study considered by SAGE on 28 January 2021 estimated that reopening schools would increase the R number by between 10 and 50 % ([SAGE 78 – 28-Jan-21](#); [SPI-M-O – 27-Jan-21](#)). It was also important to take account of the

anxiety of teachers, parents and pupils about the health risks of returning to the classroom. A further risk was that reopening schools might be interpreted by the public as a more general return to normality. ASGECI called for clear messaging about why schools were being prioritised and about the importance of maintaining other restrictions ([ASGECI - 26-Jan-21](#)).

On 28 January 2021 SAGE advised that the impact on transmission of children returning to school was largely determined by two factors: community prevalence of the virus and the proportion of the population vaccinated. Whilst prevalence was still falling and vaccination was under way, later resumption of in-classroom teaching would result in lower community transmission, as would limiting the numbers of children returning. Another option would be for children to return to school in different regions at different times, depending on the R number, prevalence and incidence locally ([SAGE 78 – 28-Jan-21](#)).

On [22 February 2021](#), a phased return began, starting with the youngest children (primaries 1 – 3). Senior 5 and 6 were the next to return ([15 March 2020](#)), with all other children returning in [April 2021](#). By employing a range of mitigation measures (including cohorting, face coverings, physical distancing, enhanced cleaning, ventilation, restricting school visitors, CO₂ monitoring, hand hygiene, testing and enhanced surveillance to detect outbreaks) schools have remained open ever since.

After the first lockdown, non-essential retail, indoor hospitality, visitor attractions and hairdressers opened before schools. In contrast, in the winter and spring of 2021, reopening schools at the earliest possible opportunity was prioritised above all other sectors of the economy. The reasons for this significant change of priority may include a range of factors, including the rollout of vaccines changing the balance of risks compared with the first wave, a better understanding of the role of children and schools in transmission of the virus, effective mitigation and outbreak management arrangements in schools, and a growing understanding of the accumulated harms associated with prolonged and repeated school closure, particularly to the most vulnerable children and young people. Also of potential significance is the role of ASGECI in marshalling evidence about the impact of school disruption on the education and wellbeing of young people and maintaining a strong focus on this issue. Again, a key question for the Inquiry is whether there was an explicit analysis of ethical issues in weighing up alternative choices and balancing benefits and harms.

Potential questions for the Inquiry to consider

- 2.4.1 Consultation:** Were sufficient resources / priority given to gathering data on educational and social developmental harms and engaging with children, young people, parents and teachers to get their views and experience?
- 2.4.2 Changing priorities:** How and why did government thinking evolve, with respect to prioritising school reopening? What ethical considerations were brought to bear in terms of the harms to children of lockdown and the need to balance risks and benefits across and between generations?
- 2.4.3 Multi-disciplinary expert advice:** To what extent did the establishment of a multi-disciplinary expert advisory group influence this process? What lessons can be learned? Was there missing expertise (e.g., bioethics/public health ethics)?

Sub-theme 2.5: The harmful impacts of lockdown

Overview

This section outlines key harms associated with lockdown, identifies population groups most at risk from these harms and summarises Scottish Government announcements and initiatives aimed at

mitigation. We have identified three broad categories of harm: loneliness and isolation, stress and overcrowding and missed opportunities. A key issue that the Inquiry might wish to explore further is the utility of a systematic evaluation of lockdown harms across society.

Loneliness and isolation

COVID-19-related physical distancing measures had adverse effects on emotional, social, cultural and professional relationships. People most likely to have been adversely affected include: people who were unable to visit or be with relatives who were sick or dying of COVID-19 or other causes; people who died alone; elderly people (who are more likely than younger people to live alone); younger people living alone; people with existing mental health problems; people who are bereaved; care home residents unable to see their loved ones; children and young people not able to attend school or socialise with their peers; the parents of young children and people who had babies during this period and were unable to develop normal support networks; and people who normally rely on community or religious organisations and networks for support. Being unable to communicate with community leaders or visit community centres – important sources of information, food and health guidance for some minority ethnic communities – may have further compounded people’s isolation and loneliness, particularly for those who also experience a language barrier. Digital exclusion is an important component of isolation: those unable to access the internet may have missed out on opportunities to connect with loved ones, access public services or participate in education. Those most affected were likely to have been elderly people without internet access or skills, and people from low-income households, particularly children and young people, whose education was potentially impacted. A final important consideration is isolation resulting from the curtailment of vital public services and support during the lockdown, for example social work, child protection and addiction services (n.b. our analysis does not include NHS services, such as interrupted cancer screening programmes, which are the focus of portfolio 3). Those most impacted are likely to have included people at risk of domestic and gender-based violence, children from struggling families at risk of child abuse, refugees and asylum seekers, people experiencing homelessness, people with drug and alcohol problems, people with mental health problems, women involved in prostitution and Gypsy and Traveller communities who face challenges in accessing public services.

Stress and overcrowding

The requirement to stay at home, work from home and support children to study from home placed enormous stress on families, particularly families living in cramped accommodation, including Gypsy and Traveller communities. For low-income families with children eligible for free school meals, lockdown potentially impacted food security. Deputy First Minister, John Swinney recognised this, announcing on [19 March 2020](#) that local authorities would continue to provide free school meals for eligible children. On [16 June 2020](#), the Scottish Government announced that additional funding had been allocated to continue free school meal provision over the summer. Those most at risk of harm from stress and overcrowding are likely to have included: people suffering from domestic or gender-based violence and children at risk of physical or sexual abuse or sexual exploitation. Overcrowding may have adversely affected elderly and vulnerable people living in multi-generational households during lockdown. For example, younger members of the household exposed to the virus through working in essential occupations risked infecting their older relatives. Evidence from England suggests that this may have been a particular vulnerability in some minority ethnic communities, where it is more common to live in multi-generational households [13]. An ONS study in England also found that ethnic minority communities had less access to green spaces during lockdown, compared with white communities [14].

Missed opportunities

Lockdown resulted in the sudden curtailment of employment, educational and training opportunities. Those most likely to be affected were young people and people in insecure employment. Educational impacts are covered in depth in portfolio 4.

Scottish Government response

Table 2.3 (appendix) lists 32 Scottish Government documents aimed at mitigating the impacts of lockdown, identified from the SPICE timeline. It includes a range of different document types: funding announcements (21 documents), advice, guidance or information (4), campaign launches (3), reports, impact assessments and consultations (3), and announcements (1). It should not be regarded as a comprehensive list. The documents addressed isolation (30 documents), stress and overcrowding (17) and missed opportunities (2). The focus was on mental health (9 documents), domestic abuse and gender-based violence (7), loneliness and isolation (6), financial or employment support (3), targeted guidance or support to a specific vulnerable group (3), digital exclusion (2), homelessness and addiction (1) and inequality generally (1). Initiatives were targeted at the following groups: people experiencing domestic abuse or gender-based violence (6), people experiencing loneliness and isolation (5), people/families affected by mental health or addiction (5), children and young people (4), older people (3), unpaid carers (2), women engaged in prostitution (2), survivors of child abuse (1), autistic people (1), Gypsy/ traveller communities (1), people who are digitally excluded (1), students (1), low income families/households (1 document), people with protected characteristics (1).

Systematic evaluation

This analysis reveals a range of initiatives aimed at mitigating the harms associated with lockdown restrictions. Most initiatives were focused on specific population groups likely to be experiencing particular challenges. We did not find any evidence of a systematic approach specifically focused on identifying, understanding and addressing lockdown harms across the population. We found one paper, which analysed the health and social impacts of lockdown in terms of the protected characteristics [15]; however, the scope of this paper was wider than lockdown alone, it was written early in the pandemic (June 2020) and it did not cover the experiences of groups not covered by the protected characteristics (e.g., people living in rural areas). In response to reports at a UK-wide and international level that some minority ethnic groups may face disproportionate direct and indirect harms from the pandemic, the Scottish Government established an expert advisory group in June 2020 (papers [here](#)). Other related initiatives include ongoing research to better understand the reasons for the disproportionate harms on multi-ethnic groups; the publication of workplace assessments to support minority ethnic staff working in health and social care; a targeted public health information campaign (May 2020) and direct engagement with minority ethnic communities to listen and address concerns.

Potential questions for the Inquiry to consider

2.5.1 Systematic analysis of lockdown harms: What plans does the government have for a systematic audit of lockdown-associated harms and their enduring impacts, across the population and for different population groups (e.g., including minority populations, different age groups and those with a range of health conditions)? Balancing benefits and harms across different groups is a key area for ethical analysis.

References

1. Collins English dictionary. 2022. Available from: <http://www.collinsdictionary.com/english/creative> [Accessed 22 February 2022].
2. Rudan I. Evaluating different national strategies to contain the COVID-19 pandemic before mass vaccination. *J. Glob. Health.* 2021; 11: 01004. Available: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8141329/> Accessed 22 February 2022.
3. Livermore D. "'Zero Covid' - an impossible dream". 2021. HART – Health Advisory & Recovery Team. Archived from the original on January 2, 2022. Accessed 22 February 2022.
4. Ghebreyesus TA. WHO Director-General's opening remarks at the Mission briefing on COVID-19 - 12 March 2020 Available: <https://www.who.int/director-general/speeches/detail/who-director-general-s-opening-remarks-at-the-mission-briefing-on-covid-19---12-march-2020> Accessed 22 February 2022.
5. Gatto M, Bertuzzo E, Mari L et al. Spread and dynamics of the COVID-19 epidemic in Italy: Effects of emergency containment measures. *Proc Natl Acad Sci USA.* 2020; 117(19): 10484–10491. Available: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7229754/> Accessed 22 February 2022.
6. Office for National Statistics. Comparisons of all-cause mortality between European countries and regions: January to June 2020. Available: <https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/death/s/articles/comparisonsofallcausemortalitybetweeneuropeancountriesandregions/januarytojune2020> . Accessed 22 February 2022.
7. Lycett SJ et al. Epidemic waves of COVID-19 in Scotland: a genomic perspective on the impact of the introduction and relaxation of lockdown on SARS-CoV-2. 2020. Available: <https://www.cogconsortium.uk/wp-content/uploads/2020/12/9th-December-2020-COG-UK-Report-Scotland-SARS-CoV-2-a-genomics-perspective-SAGE.pdf> Accessed 22 February 2022.
8. Pueyo T. Coronavirus: Why You Must Act Now. 2020. Available: <https://tomaspueyo.medium.com/coronavirus-act-today-or-people-will-die-f4d3d9cd99ca> . Accessed 22 February 2022
9. BBC. Covid: Scotland 'at the start' of a third wave. 2021. Available: <https://www.bbc.co.uk/news/uk-scotland-57323037> . Accessed 22 February 2022
10. Sheikh A, McMenamin J, Taylor B et al. SARS-CoV-2 Delta VOC in Scotland: demographics, risk of hospital admission, and vaccine effectiveness. *Lancet* 397(10293):2461-2462. Available: [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(21\)01358-1/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(21)01358-1/fulltext) Accessed 22 February 2022. Accessed 22 February 2022
11. BBC. Coronavirus: Scottish schools to fully reopen from 11 August. Available: <https://www.bbc.co.uk/news/uk-scotland-53581785> Accessed 22 February 2022
12. Li X et al. What is the evidence for transmission of COVID-19 by children in schools? A living systematic review. *J Glob Health.* 2021; 10 (2):021104. Available: <https://jogh.org/documents/issue202002/jogh-10-021104.pdf> Accessed 22 February 2022.
13. Race Disparity Unit. Final report on progress to address COVID-19 health inequalities. 2021. Available: <https://www.gov.uk/government/publications/final-report-on-progress-to-address-covid-19-health-inequalities> Accessed 22 February 2022.
14. Office for National Statistics. One in eight British households has no garden. Available: <https://www.ons.gov.uk/economy/environmentalaccounts/articles/oneineightbritishhouseholdshasnogarden/2020-05-14> Accessed 22 February 2022.

15. Scottish Government Communities Analysis Division. The impact of COVID-19 for equality in Scotland. 2020. Available:
<https://www.gov.scot/binaries/content/documents/govscot/publications/research-and-analysis/2020/09/the-impacts-of-covid-19-on-equality-in-scotland/documents/full-report/full-report/govscot%3Adocument/Covid%2Band%2Binequalities%2BFinal%2BReport%2BFor%2BPublication%2B-%2BPDF.pdf> Accessed 22 February 2022.

Appendices

Methods

Sources

We used the following sources to identify the key events or decisions, key players and key documents for theme 2 that were then used to populate table 2.1.

- 1) A [timeline](#) by the Scottish Parliament Information Centre that focuses on Scotland's response to the Coronavirus (COVID-19) pandemic and includes all major developments. The timeline runs from 31/12/2019 and was last accessed on 11/02/2022.
- 2) Three timelines of the COVID-19 pandemic in Scotland for [2020](#), [2021](#) and [2022](#) by Wikipedia, last accessed on 11/02/2022.
- 4) [Minutes and papers](#) from the Scientific Advisory Group for Emergencies (SAGE) meetings.
- 5) [Minutes and papers](#) from the Scottish Government Covid-19 Advisory Group.
- 6) Reports and Correspondence of the [Health & Sport Committee](#).
- 7) To source academic literature on relevant topics we searched the [COVID-END inventory of "best evidence syntheses"](#), which presents the current state of evidence for COVID-19 related issues to support decision-makers.
- 8) Other literature was sourced iteratively (for example, by searching the reference lists of selected papers).

We **included** decisions related to lockdown, social distancing, social gathering, social mixing, school closure, restriction of access to public or private indoor and outdoor spaces, travel restrictions, the impact of lockdown measures on social and physical wellbeing.

We **excluded** decisions related to the impact on NHS services and the social care sector of lockdown measures (covered by portfolio 3), the impact of school closures on educational outcomes (covered by portfolio 4), the economic impacts of lockdown (covered by portfolio 2), the use of face coverings (covered in the section on PPE).

Using these sources, we extracted the following information: Key event (including date), sub-theme, key players (including bodies and/ or people), relevant reports and other documents (including news items, guidelines, parliamentary documents, audit reports) and relevant research papers and publications (including preprints).

The Inquiry team may also want to review parliamentary questions in relation to lockdown and restrictions.

Decisions or milestones that we suggest may be priorities for investigation (including investigation of their timing) by the Inquiry team were characterised as key. We used the following definitions. A Key Decision is a decision that is:

- directly relevant to Scotland and
- taken by the Scottish government and
- had the potential to impact the course of the pandemic and its direct or indirect consequences.

A Key Milestone is a key event that marks an important point in the progress of the pandemic or a key decision taken outside Scotland that had a potential impact on the course of the pandemic in Scotland and its direct or indirect consequences.

Table 2.1: Key Decisions and Events

<p>Detailed issues identified in public consultation: People wanted to understand the timing and decision-making around the first lockdown, generally and with respect to care homes. They wanted to understand the societal, health and economic impacts of lockdown. They wanted to understand the rationale for the changing rules and systems and whether these constant changes were appropriate. They wanted to understand how decisions were taken to handle restrictions across geographical borders.</p>
<p>Additional issues identified by UNCOVER: We have highlighted issues around the speed and timing of decision-making, the range of pandemic response strategies considered, the feasibility of the Scottish Government diverging far from UK Government policy, the evolving attitudes towards school closure, the different challenges faced in 2020 (no vaccine) and 2021 (vaccine and mass testing but new variants). We highlight some initiatives to mitigate harms on particular groups.</p>
<p>Impact on equalities: Elderly people resident in care homes; children and young people; people who are digitally excluded; low income families with children; people experiencing or at risk of homelessness; people living in multi-generational households, predominantly from minority ethnic communities; people living alone; people experiencing bereavement; people with pre-existing mental health problems; people (predominantly women and children) experiencing domestic violence; people experiencing loneliness.</p>

Key events (with dates)	Topic	Main body/persons involved	Relevant documents	Commentary
<p>15 March 2020 – Key Decision: Scotland moves from the Containment to the Delay phase</p>	<p>Containment to delay</p>		<p>Scottish Government documents: Coronavirus (COVID-19) - implications of move to delay phase: CMO letter 15 March 2020</p> <p>SAGE meetings and papers: SAGE 15 minutes: Coronavirus (COVID-19) response, 13 March 2020 - GOV.UK (www.gov.uk)</p>	<p>SAGE 15 – excerpt from minutes: 23. It was noted that Singapore had had an effective ‘contain phase’ but that now new cases had appeared. 24. SAGE was unanimous that measures seeking to completely suppress spread of COVID-19 will cause a second peak. SAGE advises that it is a near certainty that countries such as China, where heavy suppression is underway, will experience a second peak once measures are relaxed. 33. Community testing is ending today – which will increase the pace of testing (and delivery of results) for intensive care units, hospital admissions, targeted contact tracing for suspected clusters of cases and healthcare workers. This includes faster confirmation of negative results.</p>
<p>15 March 2020 - Key Decision: Restrictions:</p>	<p>Cancellation of mass events</p>			<p>This was <u>advice</u> issued by the Scottish government that all indoor and outdoor events involving > 500 people should be cancelled. At</p>

Key events (with dates)	Topic	Main body/persons involved	Relevant documents	Commentary
<p>Scottish Government advises organisers to cancel or postpone all mass events of 500 people or more, indoors or outdoors.</p>			<p>Large gathering guidance (Scottish Government news release, 15 March 2020)</p> <p>SAGE meetings and papers: SAGE 15 minutes: Coronavirus (COVID-19) response, 13 March 2020</p> <p>The impact of banning sporting events and other leisure activities on the COVID-19 epidemic, 11 March 2020</p> <p>SPI-M-O: Consensus statement on public gatherings, 11 March 2020 - GOV.UK (www.gov.uk)</p> <p>SPI-B: Insights on public gatherings, 12 March 2020</p> <p>NERVTAG: Distance, time, handshakes, 12 March 2020</p> <p>The impact of banning sporting events and other leisure activities on the COVID-19 epidemic, 11 March 2020</p>	<p>this point in the pandemic, the Scottish Government did not yet have the powers to order cancellation of events. [Only the Government news release is available. Guidance no longer available on Scottish government website].</p> <p>It is not clear on what basis this decision was taken; however closure of mass events was being considered by the Scientific Emergency Group for Emergencies (SAGE) at this time. The arguments for and against this cancellation of mass events were finally balanced. On the one hand, modelling suggested that the direct impact of closing mass events would be limited. On the other hand other factors should also be considered, including public expectations, the impact on public confidence of divergence from measures being taken in other countries and supporting social distancing measures that are taking place anyway (such as people opting to stay away from mass events). There were also considerable unknowns, such as the impact on transmission of changed behaviours (e.g. would closing mass outdoor sports gatherings result in more people congregating in pubs?)</p>

Key events (with dates)	Topic	Main body/persons involved	Relevant documents	Commentary
<p>19 March 2020 –</p> <p>Key Decision:</p> <p>Restrictions:</p> <p>Announcement that schools are expected to close by the end of the week</p>	<p>School closure</p>	<p>Deputy First Minister and Cabinet Secretary for Education and Skills John Swinney MSP;</p> <p>Cabinet Secretary for Constitution, Europe and External Affairs Michael Russell MSP</p>	<p>Scottish Government documents:</p> <p>Coronavirus (COVID19) – impact on education: Deputy First Minister speech, 19 March 2020</p> <p>School and nursery closures (Scottish Government news release, 18 March 2020, trailing this speech)</p> <p>Health and Sport Committee documents: Legislative consent memorandum, Coronavirus Bill</p> <p>SAGE meetings and papers:</p> <p>SAGE 16 minutes: Coronavirus (COVID-19) response, 16 March 2020</p> <p>SPI-M-O: Consensus view on behavioural and social interventions, 16 March 2020</p> <p>Impact of non-pharmaceutical interventions (NPIs) to reduce COVID-19 mortality</p>	<p>On 18 March 2020 Scottish Government issued a news release, trailing an announcement by the Deputy First Minister and Cabinet Secretary for Education and Skills, that schools were expected to close by the end of the week. The news release stated that SAGE were examining new advice which was likely to recommend school closure.</p> <p>SAGE met on 18 March 2020 and considered evidence from Scientific Pandemic Influenza Group on Modelling (SPI-M-O) and Scientific Pandemic Influenza Group on Behavioural Science (SPI-B), on the basis of which, SAGE advised that available evidence now supported implementing school closures on a national level as soon as practicable to prevent NHS intensive care capacity being exceeded.</p> <p>The Scottish Government identified three priority groups where it was important to mitigate the impacts of school closure:</p> <ul style="list-style-type: none"> Vulnerable pupils and those in receipt of free school meals Pupils undertaking coursework and preparing for exams Key workers including doctors, nurses and emergency service workers who have children. <p>Fol requests are about Scottish Government powers to close schools; impact of school closures on attainment gap.</p>

Key events (with dates)	Topic	Main body/persons involved	Relevant documents	Commentary
			<p>and healthcare demand, 16 March 2020</p> <p>Coronavirus Disease 2019 (COVID19) intervention strategies, 16 March 2020</p> <p>The impact of aggressively managing peak incidence, 11 March 2020</p> <p>SPI-B: Note on school closures, 17 March 2020</p> <p>SPI-M-O: Consensus view on the impact of mass school closures, 17 March 2020</p> <p>SAGE 17 minutes: Coronavirus (COVID-19) response, 18 March 2020</p> <p>SPI-M-O: Consensus view on the impact of school closures on COVID-19 - 17 March 2020</p> <p>School closures: note from SPI-B - 17 March 2020 (Paper discussed at SAGE meeting on 17 and 18 March 2020)</p>	

Key events (with dates)	Topic	Main body/persons involved	Relevant documents	Commentary
			<p>Impact of school closures, 18 March 2020</p> <p>Timing of the introduction of school closure for COVID-19 epidemic suppression, 18 March 2020</p> <p>The impact of adding school closure to other social distance measures, 17 March 2020</p> <p>FOI requests: School closures: FOI release published 30 Sep 2020</p> <p>COVID-19 impact on Attainment Scotland Fund and school closures: FOI release published 4 Nov 2020</p>	
<p>20 March 2020 – Key Decision: Announcement: Restrictions: Scottish Government tells pubs, cafes to close</p>	<p>Closure of hospitality</p>		<p>Scottish Government documents: Pubs, cafes and more told to close (Scottish Government news release)</p> <p>SAGE meetings and papers:</p>	

Key events (with dates)	Topic	Main body/persons involved	Relevant documents	Commentary
			Seventeenth SAGE meeting on COVID-19 - 18 March 2020	
<p>23 March 2020 – Key Decision: Restrictions: Decision to introduce lockdown</p>	<p>Lockdown</p>		<p>Effective 'lockdown' to be introduced (Scottish Government news release, evening of 23 March 2020)</p> <p>FoI requests: Questions concerning COVID-19 restrictions in Scotland: FOI release published 7 Dec 2020</p> <p>COVID-19 restrictions in places of worship: FOI release published 22 Sep 21</p> <p>Scientific evidence syntheses: Curran et al (2021) Public Health and Health Systems Impacts of SARS-CoV-2 Variants of Concern</p> <p>Hughes et al (2021) Impact of COVID-19 on the</p>	<p>On 23 March 2020 at 22:24, the Scottish Government issued an announcement with immediate effect to introduce lockdown. This did not come into legal force until the Coronavirus (2020) Act received Royal Assent and Scottish Ministers made formal declarations for the exercise of powers under schedules 21 and 22 (powers relating to potentially infectious persons and powers relating to events, gatherings and premises in Scotland) on 25 March 2020.</p> <p>A rapid scoping review focusing on variants of concern, transmission, public health measures, and health systems. Public health measures including lockdowns were identified as being critical in controlling the spread of the virus.</p> <p>FoI requests are about legality of lockdown; the decision to ban singing.</p>

Key events (with dates)	Topic	Main body/persons involved	Relevant documents	Commentary
			Health and Well-being of Informal Caregivers of People with Dementia: A Rapid Systematic Review	
16 April 2020 First statutory review of lockdown restrictions		Cabinet Secretary for Constitution, Europe and External Affairs Michael Russell MSP	Health and Sport Committee documents: Letter from Cab. Sec. For Constitution, Europe and External Affairs to Convenor of Health and Sport Committee	Required by law every 21 days. Ministers decided to keep all restrictions, with some minor amendments.
23 April 2020 – Key Decision: Decision-making framework: COVID-19: A Framework for Decision-Making is published by the Scottish Government. The document sets out the factors that must be considered as the country moves gradually to ease restrictions.	Framework for decision-making		Scottish Government documents: Coronavirus (COVID-19): framework for decision making Looking beyond lockdown (Scottish government news release) News media: Lifting of Scottish lockdown 'likely to be phased' (BBC news article, 23 April 2020 – via www.bbc.co.uk .)	This framework sets out the values and principles under-pinning decision-making about moving out of lockdown. It recognizes four broad harms: direct harms to health from COVID-19; harms to health and social care services, with knock-on impacts on capacity to treat non-COVID conditions; negative societal impacts of restrictions (e.g. isolation, disruption to education); economic harms. Document states commitment to work within 4 nation UK framework, but taking distinctive decisions for Scotland if the evidence indicates that this is necessary. The approach to moving out of lockdown will involve incremental rather than all-at-once easing of restrictions, combined with close assessment of the impact of any change on the R number and other key indicators. Close attention will be paid to the impact on equalities. The merits of tailoring options to specific geographical areas, sectors, etc will be assessed. Four key elements to assessment framework:

Key events (with dates)	Topic	Main body/persons involved	Relevant documents	Commentary
			<p>Scottish Government Covid-19 Advisory Group: https://www.gov.scot/publications/scottish-government-covid-19-advisory-group-minutes-13-april-2020/</p> <p>Scientific evidence synthesis on the social impacts of lockdown: Castaldelli-Maia et al (2020) Investigating the effect of national government physical distancing measures on depression and anxiety during the COVID-19 pandemic through meta-analysis and meta-regression</p> <p>Yen-Hao et al (2020) Social consequences of mass quarantine during epidemics: a systematic review with implications for the COVID-19 response</p>	<p>1. Options for physical distancing measures – easing, maintaining, (re)introducing – are technically assessed using the best available evidence and analysis of their potential benefits and harms to health, the economy, and broader society so as to minimise overall harm and ensure that transmission of the virus is suppressed.</p> <p>2. Potential options – individual and combinations of measures – are assessed for their viability, for example taking account of how easy they are to communicate and understand, likelihood of public compliance, the proportionality of any impact on human rights and other legal considerations.</p> <p>3. Broader considerations also include equality impacts and consideration of tailoring measures, for example to specific geographies and sectors.</p> <p>4. Assessments will inform the required reviews of the Coronavirus regulations and collective assessment and decision-making with the UK Government and other Devolved Administrations as appropriate.</p> <p>A systematic review and meta-analysis on prevalence of depression and anxiety in the global population during the COVID-19 pandemic and the impact of mitigation strategies on depression and anxiety. Amongst all mitigation strategies, public transportation closure, especially in Europe, was associated with increased anxiety.</p>
21 May 2020 –				

Key events (with dates)	Topic	Main body/persons involved	Relevant documents	Commentary
<p>Key Decision: Decision-making framework: Publication of COVID-19 Routemap to take Scotland through and out of the COVID-19 pandemic.</p>	<p>Routemap</p>		<p>Scottish Government documents: Coronavirus (COVID-19): Scotland's route map through and out of the crisis</p> <p>Relevant evidence synthesis: National Collaborating Centre for Methods and Tools. (2021, March 12). Rapid Review Update 1: What are best practices for risk communication and strategies to mitigate risk behaviours?</p> <p>FOI requests: Scientific evidence which influenced the decision to restrict the opening of gyms: FOI release published 10 Nov 2020</p> <p>Scientific evidence to support the re-opening of certain sectors and activities: FOI release published 10 Nov 2020</p>	<p>Four-phase "route map" for easing lockdown restrictions in Scotland, laying out which restrictions will be relaxed during each phase. Details of plans for Phase 1, including allowing people to meet up outside with people from one other household from 28 May 2020, subject to the number of new cases of COVID-19 continuing to fall. Plans for schools to reopen on 11 August, with a "blended model" of part-time study at school combined with some learning at home.</p> <p>Evidence synthesis about communication and messaging regarding mitigation of risky behaviours.</p> <p>FOI request are about the scientific evidence supporting the decision to close gyms and soft play areas.</p>

Key events (with dates)	Topic	Main body/persons involved	Relevant documents	Commentary
<p>28-May-20 Key Milestone: Scotland moves out of lockdown into phase 1</p>			<p>Scottish Government documents: Coronavirus (COVID-19) Phase 1: Scotland's route map update</p> <p>Health and Sport Committee correspondence: Letter from Cab Sec for Constitution, Europe and External Affairs to Convener COVID-19 Committee, 10 May 20</p>	<p>Phase 1 provisions:</p> <p>Seeing family and friends More outdoor activity permitted – such as being able to sit in the park, as long as physically distanced Meeting up with another household outdoors, in small numbers (max 8), including in gardens, but with physical distancing required</p> <p>Getting around Consistent with the reopening of workplaces set out in this phase, where home working is not possible businesses and organisations are encouraged to manage travel demand through staggered start times and flexible working patterns. Permitted to travel short distances for outdoor leisure and exercise but advice to stay within a short distance of your local community (broadly within 5 miles) and travel by walk, wheel and cycle where possible. International border health measures are introduced</p> <p>Schools, childcare and other educational settings School staff return to schools Increased number of children accessing critical childcare provision. Re-opening of childminding services and fully outdoor nursery provision Transition support available to pupils starting P1 and S1 where possible.</p> <p>Working or running a business Remote working remains the default position for those who can</p>

Key events (with dates)	Topic	Main body/persons involved	Relevant documents	Commentary
				<p>For those workplaces that are reopening, employers should encourage staggered start times and flexible working.</p> <p>Non-essential outdoor workplaces with physical distancing resume once relevant guidance agreed.</p> <p>Construction – Phases 0-2 of industry restart plan can be implemented. (Industry to consult government before progressing to phase 2).</p> <p>Preparing for the safe reopening of the housing market.</p> <p>Workplaces resuming in later phases can undertake preparatory work on physical distancing and hygiene measures.</p> <p>Shopping, eating and drinking out</p> <p>Gradual re-opening of drive through food outlets</p> <p>Garden centres and plant nurseries can reopen with physical distancing. Associated cafes should not reopen at this stage except for takeaway,</p> <p>Sport, culture and leisure activities</p> <p>Consistent with the rules and guidance that are applicable to any activity in this phase:</p> <p>Unrestricted outdoors exercise adhering to distancing measures</p> <p>Non-contact, outdoor activities in your local areas e.g. golf, hiking, canoeing, outdoor swimming, angling.</p> <p>Community and public services</p> <p>Gradual resumption of key support services at the community level with physical distancing and hygiene measures</p> <p>Restarting face to face Children's Hearings with physical distancing</p> <p>Greater direct contact for social work and support services with at risk groups and families with physical distancing and hygiene measures</p> <p>Access to respite/day care to support unpaid carers and for families with a disabled family member</p> <p>Household Waste Recycling Centres open</p> <p>Re-opening of court and tribunal buildings, with limited business and public access</p>

Key events (with dates)	Topic	Main body/persons involved	Relevant documents	Commentary
				<p>Gatherings and occasions No public gatherings permitted except for meetings of two households, outdoors and with physical distancing</p> <p>Health and Social Care Beginning to safely restart NHS services, covering primary, and community services including mental health. Phased resumption of some GP services supported by an increase in digital consultations Roll out the NHS Pharmacy First Scotland service in community pharmacies. Increase care offered at emergency dental hubs as practices prepare to open Restart, where possible, urgent electives previously paused. Resumption of NHS IVF treatment has now been approved in Scotland and we are working with the 4 centres to resume services quickly and safely. Increase provision of emergency eyecare in the community We will consider the introduction of designated visitors to care homes.</p>
08-Jun-20 to 23-Dec-20 Travel restrictions to prevent importation of cases from countries with high prevalence	Travel restrictions	Justice Secretary Humza Yousaf	<p>Scottish Government documents: https://www.gov.scot/news/new-health-measures-for-travellers-to-scotland/ https://www.gov.scot/publications/covid-19-international-travel-measures/</p> <p>Health and Sport Committee papers:</p>	<p>With Scotland’s relatively low infection rate, importation of new cases from abroad was a significant risk to public health during the summer of 2020. This period saw changes in quarantine policy for travellers based on monitoring of case numbers in countries from where they were travelling. 8 June - general measures covering all countries (14 days self-isolation for people entering UK from abroad, online passenger locator form prior to travel (contact details and address where self-isolating), spot checks and fines. 25, 30 July, 20 August, 3, 10 September, 1, 15, 22, 29 October, 5, 7, 12, 26 November, 19 December, 9 Jan 2021 - 14 day quarantine (reduced to 10 days from 11 Dec 2020) for specific countries with high levels of virus. Relaxation of restrictions for travellers from</p>

Key events (with dates)	Topic	Main body/persons involved	Relevant documents	Commentary
			<p>COVID-19 related Scottish Statutory Instruments – the Health Protection (Coronavirus) (International Travel) (Managed Accommodation and Testing etc) (Scotland) Regulations 2021</p> <p>SAGE and related papers: SAGE 42 – 18-Jun-20</p> <p>PHE: Investigation into the effectiveness of 'double testing' travellers incoming to the UK for signs of COVID-19, 17 June 2020</p> <p>Serial testing to minimise false negatives, 16 June 2020</p> <p>FoI requests: COVID 19 hotel quarantine: FOI release published 24 Aug 21</p> <p>Information regarding quarantine on travellers returning from Portugal: FOI release published 19 Nov 20</p>	<p>specific countries, where risk is judged to be sufficiently low - 8 July, 13, 20 August, 10 September, 1, 15, 22 October, 12, 26 Nov.</p> <p>Health and Sport Committee papers is an extensive set of documents including correspondence and papers from two evidence sessions – with stakeholders (2 March 2021) and with Cab Sec for Transport, Infrastructure and Connectivity (9 March 21)</p> <p>SAGE 42 - agreed that double testing of travellers could enable quarantining terms of less than 14 days (double testing significantly reduces risk of false negatives). If initial testing is carried out prior to travellers entering the UK, the duration of quarantine in the UK could be shortened further (with the caveat that travellers should self-isolate between testing and travelling). Pre-testing of this kind would require international agreements and common standards.</p> <p>FoI requests are about quarantine and managed (hotel) quarantine.</p>

Key events (with dates)	Topic	Main body/persons involved	Relevant documents	Commentary
			<p>COVID-19 Introduction of quarantine: FOI release published 19 Jan 21</p> <p>Covid-19 international travel quarantine: FOI release published 15 Jul 21</p> <p>Covid 19 managed isolation and quarantine: FOI release published 24 Aug 21</p> <p>Number of hotel rooms used for international flight quarantine: FOI release published 14 April 21</p> <p>Covid-19 mandatory hotel quarantine breakdown: FOI release published 29 Jun 21</p> <p>Covid-19 hotel quarantine: FOI release published 3 Aug 21</p> <p>COVID-19 total number of bookings for the Managed Quarantine Services: FOI release published 14 Oct 21</p> <p>Covid 19 managed isolation and quarantine: FOI review published 26 Oct 21</p>	

Key events (with dates)	Topic	Main body/persons involved	Relevant documents	Commentary
			<p>Evidence syntheses: Nussbaumer-Streit B, et al. Quarantine alone or in combination with other public health measures to control COVID-19: A rapid review. Cochrane Database of Systematic Reviews. 2020;(4)CD013574.</p> <p>Burns J et al (2021) International travel-related control measures to contain the COVID-19 pandemic: a rapid review</p> <p>National Collaborating Centre for Methods and Tools. Rapid Review: Are any jurisdictions using isolation periods other than 14 days in response to COVID-19?. Hamilton, ON: National Collaborating Centre for Methods and Tools; 2020.</p>	
<p>18 June 2020 – Key Decision: Easing of restrictions: Phase 2 of the route map out of lockdown will begin, with a staged introduction of</p>	<p>Phase 2 of route map</p>		<p>Scottish Government documents: Coronavirus (COVID-19) Phase 2: Scotland's route map update</p>	<p>Changes in phase 2 to be introduced in stages, rather than all at once, to assess impact on case rates and the R number. Changes include:</p> <ul style="list-style-type: none"> - reopening of most shops and other parts of the economy; - resuming and scaling up of public services, including specific non-COVID health services;

Key events (with dates)	Topic	Main body/persons involved	Relevant documents	Commentary
changes commencing on 19 June.			FoI request: Beer garden reopening complaints: FOI release (published 10 Aug 2020)	<ul style="list-style-type: none"> - people living alone or single parents with children able to form an "extended group" with one other household from 19 June, allowing them to stay overnight, while up to three households can meet up outdoors; - face coverings become compulsory on public transport from 22 June; - potential changes to shielding advice to allow outdoor exercise from 18 June. <p>FoI request is about planned reopening of pub beer gardens.</p>
23 June 2020 - Key Decision: Reopening of schools. Statement by Deputy First Minister to Parliament that schools will reopen in August 2020.	Reopening of schools		<p>Scottish Government documents: Coronavirus (COVID-19): statement by the Deputy First Minister on re-opening of schools</p> <p>FoI Request: Schools re-opening full time decision making correspondence: FOI release</p>	FoI request is for correspondence about this decision.
24 June 2020 – Key Decision: Easing of restrictions: Publication of	Updated routemap		<p>Scottish Government documents: Coronavirus (COVID-19): Scotland's route map -</p>	Easing of restrictions includes allowing people to meet indoors with two other households from 10 July; reopening pubs and restaurants, holiday accommodation, and hairdressers from 15 July. The two metre social distancing rule stays in place.

Key events (with dates)	Topic	Main body/persons involved	Relevant documents	Commentary
updated route map, with indicative dates for Phase 2 and early Phase 3 measures			indicative dates for the remainder of Phase 2 and early Phase 3 Health and Sport Committee correspondence: Letter from Cab Sec for Health and Sport to Convener of Health and Sport Committee , 25 June 2020	Letter from Cab Sec is about phased return to visiting in care homes.
2 July 2020 – Key Decision: Easing of restrictions: Update to Phase 2 restrictions and confirmation of dates for remainder of Phase 2.	Update to phase 2 restrictions		Scottish Government documents: Coronavirus (COVID-19) Phase 2: Scotland's route map - physical distancing update COVID-19 Advisory Group: advice on physical distancing Health and Sport Committee correspondence: Letter Deputy FM to Convener, COVID-19 Committee, 2 July 20	Updated guidance based on COVID-19 Advisory Group advice on: physical distancing, based on advice published by the COVID-19 Advisory Group: maintain 2 m physical distance but with limited exceptions in public transport, indoor and outdoor hospitality, retail. Children under 12 no longer required to maintain physical distancing No limit to the number of groups that those aged 12 – 17 can meet with in a day (maximum of 3 households in the group, no more than 8 people in total, as before).

Key events (with dates)	Topic	Main body/persons involved	Relevant documents	Commentary
<p>9 July 2020 – Key Decision: Easing of restrictions: Move to Phase 3 of the Scottish Government’s route map out of lockdown.</p>	Phase 3		<p>Scottish Government documents: Coronavirus (COVID-19) Phase 3: Scotland's route map update - 9 July 2020</p> <p>FoI request: COVID-19 guidance from SportScotland regarding changing rooms and showers: FOI release published 25 Feb 21</p>	<p>People are able to meet up indoors with two other households from 10 July, and also in extended groups outside of up to fifteen from the same day. Shopping centres reopen from 13 July, and hairdressers and barbers, as well as the indoor areas of bars, restaurants, holiday accommodation, visitor attractions, cinemas and places of worship from 15 July.</p> <p>FoI request is about SportScotland guidance on changing rooms and showers.</p>
<p>30 July 2020 – Key Decision: Easing of restrictions: Scottish Government confirm that schools will re-open full-time from 11 August, following scientific evidence and advice that it is safe to do so.</p>	Reopening of schools	<p>Deputy First Minister and Cabinet Secretary for Education and Skills John Swinney MSP; COVID-19 Education Recovery Group (CERG); newly-formed sub-group of the COVID-19 Advisory Group, specializing on education and children’s issues.</p>	<p>Scottish Government documents: Schools to re-open full-time (Scottish Government news release)</p> <p>Guidance on preparing for the start of the new school term in August 2020 (Developed with the Education Recovery Group to support local authorities, teachers and parents to prepare for the new term)</p> <p>Scottish Government Covid-19 Advisory Group: https://www.gov.scot/publications/scottish-</p>	<p>FoI requests – correspondence from members of public to FM and DFM about plans to reopen schools; scientific advice on return to school; communications from local authorities to Scottish Government.</p>

Key events (with dates)	Topic	Main body/persons involved	Relevant documents	Commentary
			government-covid-19-advisory-group-minutes-20-april-2020/ FoI Request: Reopening of schools: FOI release (published 12 Aug 2020) Scientific advice for return to school: FOI release (published 13 Aug 2020) Communications regarding full time reopening of schools: FOI release (published 29 Sep 2020)	
5 August 2020 – Aberdeen goes into lockdown – bars, restaurants, cafes and pubs legally required to close.	Localised lockdown		Scottish Government documents: Local restrictions introduced in Aberdeen FoI requests: COVID-19 related information regarding previous and future Health Protection Regulations: FOI release published 21 Dec 2020	FoI request relates to correspondence between Scottish ministers and advisors and NHS Grampian officials.
20 August 2020 –				

Key events (with dates)	Topic	Main body/persons involved	Relevant documents	Commentary
<p>Key Decision: Changes in restrictions: Scottish Government updates route map, setting out dates for further changes, and announces that Scotland is to remain in Phase 3 of the route map, as COVID-19 remains a significant threat to public health.</p>	<p>Updated routemap. Phase 3.</p>		<p>Scotland remains in Phase 3 (Scottish Government news release)</p> <p>Coronavirus (COVID-19) Phase 3: Scotland's route map update - 20 August 2020</p> <p>Health and Sport Committee papers: COVID-19 restrictions on sports clubs and sport and leisure venues</p>	<p>Continued gradual reopening:</p> <ul style="list-style-type: none"> - Reopening of specified indoor and outdoor sports and leisure activities and services from 24 August 2020 - Reopening of specified indoor sports and services (gyms, swimming pools, skating and dance studios, indoor youth work) from 31 August 2020 <p>In response to recent outbreaks and evidence that indoor hospitality and social gatherings in people's homes are major risk factors:</p> <ul style="list-style-type: none"> - New regulations to strengthen the power of local authorities to act where hospitality businesses have not implemented guidance effectively - New regulations to give police power of enforcement to break up and disperse large indoor gatherings. <p>Health and Sport Committee papers: At its meeting on 3 November, Members agreed to undertake a short, focused inquiry into the impact on sports clubs, leisure venues and communities of COVID-19 restrictions, with a particular focus on any reductions or cessation of community-based activities undertaken by sporting organisations including mental and physical health impacts on individuals. They launched two online surveys to capture information about the nature of the impact on community sports clubs/organisations and sporting venues and the effects on users. The first survey opened on 16 November 2020 - sporting organisations, sports clubs and venues informed the committee about the impact COVID-19 has had on the ability to provide community based activities and initiatives; the financial impact; and the potential long term impact. The second survey opened on 23 November 2020 – individuals reported on the impact COVID-19 has had on access to sport. Each survey closed on 7 December 2020. Following the survey responses, the committee took</p>

Key events (with dates)	Topic	Main body/persons involved	Relevant documents	Commentary
				evidence from the Minister for Public Health, Sport and Wellbeing on 15 December 2020 and on 12 January 2021 from individuals and sporting organisations. There are links to evidence sessions and correspondence.
10 September 2020 Key Decision: Decision-making framework: Scottish Government publish an updated route map, limiting indoor and outdoor gatherings to six people from two households, as Scotland remains in Phase 3	Updated routemap		<p>Scottish Government documents: Coronavirus (COVID-19) Phase 3: Scotland's route map update – 10 September 2020</p> <p>Scottish Government Covid-19 Advisory Group: https://www.gov.scot/publications/scottish-government-covid-19-advisory-group-minutes-4-may-2020/</p> <p>FOI requests: Advice given to Scottish Government regarding weddings: FOI release published 28 July 21</p>	<p>Because of the deteriorating state of the pandemic, the Scottish Government judged that it was not the right time to progress to Phase 4. This announcement includes further restrictions to the numbers of people who can meet socially indoors, making face coverings mandatory for customers and staff in indoor hospitality and extending the house party offence regulations that came into force on 28 August to include parties held within student residences. Attendance limits for weddings, funerals and civil partnerships remain at 20.</p> <p>FOI request is about limits in numbers of adults and children attending weddings.</p>
22 September 2020 – Key Decision: Restrictions: Scottish Government announce significant reintroduction of restrictions from 23 September 2020.	Reintroduction of restrictions		<p>Scottish Government documents: New measures to drive down infection rate (Scottish Government news release)</p>	<p>This significant reintroduction of restrictions, in response to an upsurge in cases, includes:</p> <ul style="list-style-type: none"> - No household mixing indoors in people's homes - Maximum of six people from two households meeting outdoors or in indoor public spaces - 10 pm curfew for hospitality settings - No car sharing

Key events (with dates)	Topic	Main body/persons involved	Relevant documents	Commentary
			Questions concerning the COVID-19 voluntary restrictions involving students: FOI release published 11 Nov 2020	<ul style="list-style-type: none"> - Continue to work from home where possible <p>FoI request concerns restrictions aimed specifically at students.</p>
<p>7 October 2020 – Key Decision: Regional Restrictions: Scottish Government introduce further tightening of restrictions nationwide, with additional restrictions in the Central Belt</p>	Reintroduction of restrictions; regional restrictions		<p>Scottish Government documents: New moves to stop COVID-19 spread (Scottish Government news release)</p> <p>The challenge Scotland faces has also been set out in an evidence paper published today by senior clinical advisors: the Chief Medical Officer, the Chief Nursing Officer and the National Clinical Director. It shows the R number is currently higher in Scotland than in other UK nations and that three weeks after opening hospitality, the R number rose to 1 and above.</p> <p>FoI request: Data used to restrict household gatherings due to COVID-19: FOI release published 15 October 2020</p>	<p>Scottish Government announce further reintroduction of restrictions nationwide, to include: restricting hospitality opening times to 6am-6pm indoors, with no sales of alcohol; shops asked to return to two metres physical distancing.</p> <p>Additional restrictions in five health board areas (Ayrshire & Arran; Forth Valley; Greater Glasgow & Clyde; Lanarkshire; Lothian):</p> <ul style="list-style-type: none"> - all licensed premises in the central belt area will be required to close, with the exception of takeaway services. - outdoor live events, adult contact sports and indoor group exercise classes (18+) are to be paused. - snooker/pool halls, indoor bowling, casinos and bingo halls are to close. <p>The new restrictions will be backed by a £40 million support fund for business and the existing UK Job Retention Scheme and will be in place nationwide for 16 days.</p> <p>FoI request is about data related to regional restrictions on household mixing in Glasgow in September 2020.</p>
23 October 2020 –				

Key events (with dates)	Topic	Main body/persons involved	Relevant documents	Commentary
<p>Key Decision: Framework for Decision-making: Scottish Government publish the five-level Strategic Framework, which indicates different levels of protection that might be needed based on different levels of transmission for the virus. The levels are due to come into force on 2 November.</p>	<p>Five level strategic framework</p>		<p>Scottish Government documents: Coronavirus (COVID-19): Scotland's Strategic Framework Scotland's strategic framework (Scottish Government news release) FOI requests: COVID-19 death statistics and implications for changes to restrictions: FOI release published 19 Nov 2020 Question regarding COVID-19 restrictions on gatherings: FOI release published 11 Dec 2020 Correspondence concerning the hospitality sector during lockdown: FOI release published 15 Dec 2020 COVID-19 restrictions and aquatic training: FOI release published 17 Dec 2020 COVID-19 related information regarding previous and future Health</p>	<p>Level 0 (baseline) and Level 1: Characterised by low incidence of the virus with isolated clusters, and low community transmission. Broadly equivalent to the measures in place during the summer during “Phase 3” (the lowest level of restriction reached so far). Levels 0 - 1 are the closest we can get to normality, without a vaccine or effective treatment in place. Levels 0 and 1 are designed to be sustainable for long periods</p> <p>Levels 2-3: characterised by increased incidence of the virus, with multiple clusters and increased community transmission. There would be a graduated series of protective measures to tackle the virus, focusing on key areas of risk – broadly, indoor settings where household mixing takes place with less, or less well-observed, physical distancing and mitigations. The measures would be intended to be in place for relatively short periods (2-4 weeks), and only for as long as required to get the virus down to a low, sustainable level.</p> <p>Level 4: characterised by very high or rapidly increasing incidence, and widespread community transmission which may pose a threat to the NHS to cope. Level 4 would likely involve the introduction of measures close to a return to full lockdown. Measures would be designed to be in place for a short period, to provide a short, sharp response to quickly suppress the virus.</p> <p>FOI requests are about when restrictions on hospitality venues will be lifted and about restrictions on gatherings in level 4; reopening of club swimming training; data and criteria on which localized lockdown in Aberdeen was based; rules on congregational singing; local restrictions in Lothian.</p>

Key events (with dates)	Topic	Main body/persons involved	Relevant documents	Commentary
			<p>Protection Regulations: FOI release published 21 Dec 2020</p> <p>COVID-19 restrictions related to congregational singing: FOI release published 23 Dec 2020</p> <p>COVID-19 local protection levels: FOI release published 6 April 21</p>	
<p>07-Nov-20 to 27-Nov-21 Travel restrictions to delay the importation of new variants</p>	<p>Travel restrictions</p>	<p>Cabinet Secretary for Transport, Infrastructure and Connectivity Michael Matheson</p>	<p>SAGE meetings and papers: SAGE 42 – 18-Jun-20 SAGE 71 – 03-Dec-20 LSHTM and the University of Manchester/the Alan Turing Institute: Comparison of quarantine and testing strategies to prevent onwards infection from infected travelers returning to the UK from abroad, 1 December 2020</p>	<p>To delay the importation of new variants, travel restrictions were introduced for travellers from specific countries on 7 Nov (Denmark), 23 Dec (South Africa), 9 January 2021 (several countries - South Africa variant), 14 January (several countries, Brazil variant), 28 January (various countries, S Africa variant), 3 June (Portugal green to amber - Delta), 17 July (France - beta), 27 Nov (South Africa, Namibia, Lesotho, Eswatini, Zimbabwe, Botswana - Omicron). From 18 January 2021 there was also a requirement for a pre-departure test.</p> <p>SAGE 42 – discussed double testing of travellers to enable quarantining terms of less than 14 days (double testing significantly reduces risk of false negatives). If initial testing is carried out prior to travellers entering the UK, the duration of quarantine in the UK could be shortened further (with the caveat that travellers should self-isolate between testing and travelling). Pre-testing of this kind would require international agreements and common standards.</p>

Key events (with dates)	Topic	Main body/persons involved	Relevant documents	Commentary
				SAGE 71 considered a paper on the number of SARS CoV-2 infections potentially resulting from returning travellers under different quarantine and testing strategies including quarantine, test to release, and daily lateral flow testing with isolation if positive.
10-Nov-20 Scottish Government publishes report on impact of COVID-19 restrictions on wellbeing of children and young people	Wellbeing of children and young people		Scottish Government documents: Impact of COVID-19 restrictions on children and young people.	
11-Dec-20 Reduction in time people are required to quarantine/ self-isolate	Travel - quarantine	UK Chief Medical Officers; Health Secretary Jeane Freeman	Scottish Government documents: https://www.gov.scot/news/reduction-in-self-isolation/ SAGE meetings and papers: SAGE 51 – 13-Aug-20 SAGE 68 – 16-Nov-20	<p>Following their review of the latest clinical evidence and taking into account the joint recommendation of UK CMOs from all four nations, the Scottish government agrees to reduce the required isolation period for international travellers arriving in Scotland, and for contacts of positive cases in Scotland, from 14 to 10 days.</p> <p>SAGE 51 – called for more evidence to determine how adherence varies with the length of an isolation period and practical incentives for isolation. SAGE reiterated that a test and release strategy could be implemented.</p> <p>SAGE 68 - considered the use of LFT or PCR tests to reduce/replace quarantine by repeat testing upon tracing. Contacts of known index cases are currently required to quarantine for 14 days. As previously advised, a shorter period might be more effective in reducing transmission if it results in more people coming forward for testing and/or improves adherence to quarantine (see SAGE 67). However, there is a trade-off with increased transmission risk from those who are still infectious beyond the end of the quarantine period. Significant uncertainty exists around the</p>

Key events (with dates)	Topic	Main body/persons involved	Relevant documents	Commentary
				modelling, so piloting is needed before any decision should be taken.
<p>19 December 2020 – Key Decision: Restrictions: First Minister Nicola Sturgeon announces the tightening of COVID-19 restrictions around the festive period.</p>	<p>Christmas restrictions</p>		<p>Scottish Government documents: New guidance issued for the festive period (Scottish Government news release)</p> <p>SAGE meetings and papers: SAGE 73 minutes: Coronavirus (COVID-19) response, 17 December 2020 (publishing.service.gov.uk)</p> <p>SAGE minutes and SPI-B paper from shortly after this decision was taken: SAGE 74 minutes: Coronavirus (COVID-19) response, 22 December 2020 (publishing.service.gov.uk)</p> <p>Mitigations to reduce transmission of the new variant SARS-CoV-2 virus, 22 December 2020 (publishing.service.gov.uk)</p> <p>FoI requests:</p>	<p>The easing of restrictions around Christmas now limited to Christmas Day itself, and not the previous 5-day window that was planned. From Boxing Day, all of Scotland to have Level 4 restrictions applied, including the closure of non-essential retail and hospitality. Other than for specific exemptions, travel between Scotland and the rest of the UK not legal from midnight on Sunday 20 December.</p> <p>FoI requests are about four nations alignment; restrictions to large events.</p>

Key events (with dates)	Topic	Main body/persons involved	Relevant documents	Commentary
			<p>Covid-19 briefings relating to restrictions: FOI release published 15 Jun 21</p> <p>Restrictions to large events: FOI release published 14 Feb 22</p>	
<p>4 Jan 2021- Key Decision: Restrictions: Scottish Government announce mainland Scotland is to go into lockdown from 5 January 2021 with a new legal requirement forbidding anyone from leaving their home except for essential purposes</p>	<p>Lockdown</p>		<p>Scottish Government documents: Scotland in lockdown (Scottish Government news release)</p> <p>Scientific evidence synthesis on international public health responses to the COVID-19 outbreak- Tabari P et al (2020) International Public Health Responses to COVID-19 Outbreak: A Rapid Review</p> <p>Johanna N et al (2020) Mass screening vs lockdown vs combination of both to control COVID-19: A systematic review</p> <p>Regmi K et al (2021) Factors Associated with the Implementation of Non-Pharmaceutical</p>	<p>FoI requests are about criteria Scottish Government would use to assess whether to lock down again; scientific evidence regarding restrictions on hospitality and gyms; data on harms associated with lockdown; harms associated with school closure; restrictions on places of worship.</p>

Key events (with dates)	Topic	Main body/persons involved	Relevant documents	Commentary
			<p>Interventions for Reducing Coronavirus Disease 2019 (COVID-19): A Systematic Review</p> <p>FOI Requests: Criteria for future lockdowns: FOI release (published 15 June 2020)</p> <p>Scientific evidence regarding restrictions of pubs and gyms in Scotland: FOI release published 15 Jan 2021</p> <p>Scientific evidence for implementing restrictions on pubs and restaurants: FOI release published 15 Jan 2020</p> <p>Scottish Government evidence supporting the decision for restrictions: FOI release published 11 Feb 2020</p> <p>COVID-19 scientific evidence backing the closure of schools: FOI release published 8 Mar 2021</p>	

Key events (with dates)	Topic	Main body/persons involved	Relevant documents	Commentary
			<p>Correspondence regarding enhanced restrictions for places of worship: FOI release published 8 Mar 21</p> <p>COVID-19 scientific evidence discussions concerning restrictions within hospitality sector: FOI release published 9 Mar 21</p> <p>COVID-19: Closure of places of worship: FOI release published 22 Mar 20</p> <p>Covid-19 restrictions on public worship: FOI release published 7 April 2021</p> <p>COVID-19 closure of gyms: FOI release published 20 Apr 21</p> <p>Correspondence relating to attendance limit at place of worship: FOI release published 3-Jun-21</p>	
<p>2 Feb 2021- Key Decision: Easing of restrictions: Scottish Government announce dates for phased return to</p>	<p>Schools reopening</p>		<p>Scottish Government documents: Back to school (Scottish Government news release)</p>	<p>Children in early learning and childcare and in primaries 1-3 scheduled to make a full return to nurseries and schools from 22 February, subject to final confirmation on 16 February that sufficient progress in tackling the virus has been achieved.</p>

Key events (with dates)	Topic	Main body/persons involved	Relevant documents	Commentary
school. To support the return to school, the Scottish Government announces a significant expansion of COVID-19 testing.			New measures to tackle virus (Scottish Government news release) Scottish Government Covid-19 Advisory Group: https://www.gov.scot/publications/scottish-government-covid-19-advisory-group-minutes-30-december-2020/	Current restrictions, including the 'stay-at-home' requirement, remain in place until at least the end of February and schools continue to be closed to most children for the rest of the month.
16 Feb 2021- Key Decision: Scottish Government announce children in early learning and childcare (ELC) and primaries 1 to 3 will return full-time to classrooms from Monday 22 February.	Schools reopening		Scottish Government documents: Remote learning to continue for majority (Scottish Government news release) FOI request: COVID-19 return to school: FOI review published 12 May 2021	The majority of primary and secondary school pupils to continue with remote learning until at least mid-March while children in early learning and childcare (ELC) and primaries 1 to 3 to return full-time to classrooms from Monday 22 February FOI request is about return to school.
23 Feb 2021- Key Decision: Decision-making framework: Scottish Government publish the updated Strategic Framework,	Updated strategic framework		Scottish Government documents: Coronavirus (COVID-19): Strategic Framework update - February 2021	This document updates the original Strategic Framework to take account of important developments, including: new and highly infectious strains of the virus progress with the vaccination roll-out

Key events (with dates)	Topic	Main body/persons involved	Relevant documents	Commentary
<p>setting out the broad order of priority for re-opening and the conditions that need to be met to start lifting restrictions.</p>			<p>Scottish Government Covid-19 Advisory Group: https://www.gov.scot/publications/scottish-government-covid-19-advisory-group-minutes-18-february-2021/</p> <p>Evidence syntheses: Burns J et al (2021) International travel-related control measures to contain the COVID-19 pandemic: a rapid review</p> <p>Pang J K et al (2021) Probability and estimated risk of SARS-CoV-2 transmission in the air travel system</p> <p>Grépin KA et al (2021) Evidence of the effectiveness of travel-related measures during the early phase of the COVID-19 pandemic: a rapid systematic review</p>	<p>The strategic intent remains: to suppress the virus to the lowest possible level and keep it there, while striving to return to a more normal life for as many people as possible.</p> <p>The Framework explains how all of the tools available will be used to achieve these aims: vaccination testing and contact tracing (Test and Protect) protective measures and the levels system travel restrictions to reduce the risk of new cases and strains coming into Scotland (importation measures) ensuring adherence to the rules and guidance (adherence to measures) support for people and businesses</p> <p>The document does not provide fixed dates, because there are too many uncertainties. Instead, it sets out the conditions that need to be met to start lifting restrictions in a safe way.</p> <p>It provides details of the broad order of priority for re-opening, with the main priority continuing to be education. It espouses a gradual easing of restrictions on other areas of life as the virus is suppressed.</p>
<p>24 Feb 2021 – Updated guidance on care home visiting</p>	<p>Care home visiting</p>		<p>Health and Sport Committee correspondence:</p>	

Key events (with dates)	Topic	Main body/persons involved	Relevant documents	Commentary
		Jeane Freeman, Cab Sec for Health and Sport	Letter from Cab Sec for Health and Sport to Convener of Health and Sport Committee, 24 Feb 21	
2 Mar 2021- Key Decision: Easing of restrictions: Scottish Government announce Phase 2 of schools return.	Reopening of schools		Scottish Government documents: Phase 2 of schools return (Scottish Government news release)	All remaining primary school children to return to school full-time from 15 March, with all secondary pupils returning on a part-time basis from that date.
9 Mar 2021- Key Decision: Scottish Government announce changes to level 4 restrictions.	Changes to level 4 restrictions		Scottish Government documents: Changes to Level 4 restrictions (Scottish Government news release)	Because of a significant fall in new cases, deaths and hospital admissions, and because the progress of the vaccination programme exceeds initial expectations, a relaxation of some level 4 restrictions is possible. From Friday 12 March up to four adults from two households can meet locally outdoors for social and recreational purposes as well as exercise. Outdoor non-contact sports and group exercise will also resume for adults in groups of up to 15 people
12 March 2021 – Key Milestone: Easing of level 4 restrictions.			Scottish Government documents: Changes to Level 4 restrictions	From 12 March 2021 a gradual easing of restrictions began (changes to level 4 restrictions), with different local authority areas moving at different paces, depending on the local state of the epidemic.
6 April 2021- Key Decision: Scottish Government announce nearly all pupils will return	Schools reopening		Scottish Government documents: Return to full-time school	A scoping review describing exit strategies for school and workplace opening with social distancing, testing and contact tracing.

Key events (with dates)	Topic	Main body/persons involved	Relevant documents	Commentary
to full-time school after the Easter holidays, with children on the shielding list advised to stay at home until 26 April.			(Scottish Government news release) Scientific evidence synthesis: D'angelo D et al (2021) Strategies to exiting the COVID-19 lockdown for workplace and school: A scoping review	
26 April 2021 – Key Milestone: Whole of Scotland moves to Level 3.	Level 3	Cab Sec for Health and Sport	Scottish Government documents: Coronavirus (COVID-19) update: First Minister's statement – 13 April 2021 Health and Sport Committee correspondence: Letter from Cab Sec for Health and Sport to Presiding Officer, Scottish Parliament, 13 April 2021	
14 May 2021- Key Milestone: Scottish Government announce most of mainland Scotland will move to Level 2 from Monday 17 May.	Move to level 2		Scottish Government documents: Next steps out of lockdown (Scottish Government news release) FoI request: COVID-19 correspondence from pubs and nightclubs	With the exception of Glasgow and Moray, Scotland to move to level 2 from Monday 17 May, with eased restrictions on hospitality, entertainment, education and sport. Most islands to move to level 1. The number of people and households that can meet inside homes in Level 2 increases to six people from three households. From 17 May, anyone entering Scotland from countries on a new international travel 'Green List' will not be required to quarantine on arrival, but will have to take a PCR test for COVID-19.

Key events (with dates)	Topic	Main body/persons involved	Relevant documents	Commentary
			regarding pandemic rules: FOI release published 14 Sep 21	FoI request is about pubs and nightclubs.
1 June 2021 – Key Milestone: Easing of restrictions (from 5 June 2021)	Island communities already in level 1 move to level 0; most of Scotland moves to level 1; some local authority areas remain in level 2.		Scottish Government documents: Coronavirus (COVID-19) update: First Minister's statement - 1 June 2021	Glasgow moved from Level 3 to Level 2. The following mainland local authority areas remained at Level 2: East Dunbartonshire, East Renfrewshire and Renfrewshire East Ayrshire, North Ayrshire, and South Ayrshire North Lanarkshire and South Lanarkshire Edinburgh and Midlothian Stirling and Clackmannanshire Dundee These 15 mainland local authorities moved to Level 1: Highland and Argyll & Bute Aberdeen City, Aberdeenshire and Moray Angus and Perth & Kinross Inverclyde and West Dunbartonshire Falkirk Fife West Lothian and East Lothian The Scottish Borders Dumfries & Galloway Island communities already in level 1 move to level 0.
22 June 2021- Key Decision: Easing of restrictions: First	Move to level 0			A further indicative date of 9 August for the lifting of all major COVID-19 restrictions (subject to confirmation).

Key events (with dates)	Topic	Main body/persons involved	Relevant documents	Commentary
Minister Nicola Sturgeon announces a new indicative date for the whole of Scotland to move to level 0 on 19 July, provided all necessary vaccination and harm reduction measures are met.			Scottish Government documents: Coronavirus (COVID-19) update: First Minister's statement - 22 June 2021 (Statement to Scottish Parliament) FOI requests: COVID 19 restrictions in schools: FOI release published 16 Aug 21	FOI request is about school proms.
13 July 2021- Key Decision: Easing of Restrictions: First Minister Nicola Sturgeon announces all of Scotland will move to protection level 0 on Monday 19 July.	Move to level 0		Scottish Government documents: Level 0 from 19 July (Scottish Government news release)	Physical distancing to reduce to 1 metre in all indoor public settings and outdoors, and informal social gatherings of up to 15 people from 15 households to be permitted outdoors without physical distancing. Mandatory face coverings to remain in place.
19 July 2021 – Key Milestone: All of Scotland moves to level 0	Level 0		Scottish Government documents: Level 0 from 19 July	All of Scotland moved to level 0 on 19 July 2021 (1 metre social distancing, outdoor gatherings of up to 15 people from 15 households, indoor gatherings of up to 10 people from 4 households, hospitality settings allowed to open until midnight, up to 200 people allowed to attend weddings and funerals).
9 August 2021- Key Milestone: Easing of restrictions: First Minister Nicola Sturgeon announces Scotland	Move beyond level 0		Scottish Government documents: Scotland to move beyond level 0 (Scottish Government news release)	Legal requirement for physical distancing and limits on gatherings to be removed. Some protective measures to stay in place such as the use of face coverings indoors and the collection of contact details as part of Test and Protect.

Key events (with dates)	Topic	Main body/persons involved	Relevant documents	Commentary
to move beyond level 0 on 9 August			FoI request: COVID 19 cases linked to nightclubs, football matches & questions on vaccine passports: FOI release published 22 Feb 22	FoI request is about evidence for transmission in nightclubs and at football matches.
07-Dec-21 Travel restrictions to delay the importation of Omicron	Travel restrictions	Transport Secretary Michael Matheson	Scottish Government documents: https://www.gov.scot/news/pre-departure-test-requirement-for-travel/	Re-introduction of requirement for pre-departure test - People arriving in Scotland from abroad will need to take pre-departure COVID-19 tests to help stem the spread of the omicron variant. International travellers will have to provide a negative pre-departure test taken two days before travelling, in addition to a negative PCR test on or before day two after arrival, under measures agreed on a four nation basis.
11 December 2021 – Introduction of restrictions because of Omicron	Reintroduction of restrictions		Scottish Government documents: Coronavirus (COVID-19): Omicron in Scotland - evidence paper	All household contacts of any confirmed coronavirus case must isolate for 10 days regardless of vaccination status – even if they initially get a negative PCR test. People are also being urged to defer work Christmas parties to slow the spread of the virus.
14 December 2021 – Restrictions on social gatherings	Restrictions on social gatherings		Scottish Government documents: New measures required to slow the spread of Coronavirus	Scottish Government publish updated guidance on reducing social interaction at home or in indoor public places to a maximum of three households at any time, with everyone encouraged to take a lateral flow test before meeting.
15-Dec-21 Easing of travel restrictions in response to Omicron targeted at specific countries are no	Travel restrictions	Cabinet Secretary for Net Zero, Energy and Transport Michael Matheson	Scottish Government documents: https://www.gov.scot/news/11-countries-removed-	Eleven countries are to be removed from the international travel red list as Omicron cases increase globally. Pre-departure tests and PCR testing measures on or before day 2 on arrival in Scotland will remain in place. Passengers returning from Angola, Botswana, Eswatini, Lesotho, Malawi, Mozambique, Namibia, Nigeria, South

Key events (with dates)	Topic	Main body/persons involved	Relevant documents	Commentary
longer effective at delaying importation.			from-international-travel-red-list/	Africa, Zambia, and Zimbabwe will not have to stay in a managed quarantine hotel on arrival in Scotland from this date. As Omicron cases rise in Scotland and in countries around the world, restrictions targeted at specific countries on the travel red list are no longer as effective as they were in slowing the incursion of Omicron from abroad. Other temporary protections will remain effective and proportionate for longer. All passengers arriving in the UK must continue to take a pre-departure test before they depart for the UK and must take a PCR test on or before day 2 and self-isolate until they receive a negative result.
27 December 2021 Tightening of restrictions – one metre social distancing reintroduced in indoor hospitality and nightclubs must close	Social distancing		Scottish Government documents: Further measures needed to reduce contacts Nightclubs to close	Scottish Government announce one metre physical distancing to return in indoor hospitality and leisure settings from 27 December. Attendance at large events will be limited (100 people for indoor standing events, to 200 for indoor seated events, and to 500 for all outdoor events) from 26 December.
06-Jan-22 Easing of travel restrictions	Travel restrictions	Cabinet Secretary for Net Zero, Energy and Transport Michael Matheson	Scottish Government documents: https://www.gov.scot/news/easing-of-restrictions-on-international-travellers/	People travelling to Scotland from abroad who are fully vaccinated or under the age of 18 will no longer need to take pre-departure COVID-19 tests, and will also no longer be required to self-isolate on arrival until they've received a negative result. Travellers in this group will still need to take a test on or before day 2 after arriving in the UK - which can be a lateral flow device rather than a PCR test
17 January 2022 Easing of restrictions	Outdoor events		Scottish Government documents: Large outdoor events resume from 17 January	Large outdoor events can resume without physical distancing or capacity limits from 00:01 on Monday 17 January.
24 January 2022				

Key events (with dates)	Topic	Main body/persons involved	Relevant documents	Commentary
Easing of restrictions	Hospitality and leisure		Scottish Government documents: Omicron measures to be lifted	Scottish Government announce restrictions including one metre physical distancing in hospitality and leisure settings, table service in hospitality venues and attendance limits at indoor events will be removed from Monday 24 January. Non-professional indoor contact sports will also resume.
31 January 2022 Easing of restrictions	Working from home		Scottish Government documents: Changes to working from home advice	Scottish Government announce that from Monday 31 January businesses can resume hybrid working arrangements.
3 February 2022 Extension to legislation	Legal framework		Scottish Government documents: Coronavirus provisions extended	Scottish Government announce a six month extension to some temporary provisions made under UK legislation.
9 February 2022 Extension to legislation	Legal framework		Scottish Government documents: Expiry date of Covid regulations extended	Scottish Government announce the extension of the expiry date for statutory coronavirus (Covid-19) restrictions and requirements to 24 September 2022. The restrictions will remain subject to review every three weeks.
11-Feb-22 Easing of travel restrictions	Travel restrictions	Cabinet Secretary for Net Zero, Energy and Transport Michael Matheson	Scottish Government documents: Travel restrictions eased	Fully vaccinated arrivals into Scotland will no longer be required to possess a negative test result from 4am on 11 February. Travellers will still need to fill in passenger locator forms and face coverings will still be required at Scottish airports in line with wider health advice. Non vaccinated travellers will still be required to take pre-departure tests and a PCR test on or before day two – but the requirement for isolation will end – and they will no longer have to take a day eight test.
22-Feb-22 <u>Key Decision:</u>	Strategic framework		Scottish Government documents:	While most of the regulations regarding protective measures have now been lifted there are still four baseline measures that

Key events (with dates)	Topic	Main body/persons involved	Relevant documents	Commentary
Scotland's updated strategic framework is published			Coronavirus (COVID-19): Scotland's Strategic Framework update - February 2022	<p>continue to be required by law (at the time of the publication of this document):</p> <p>Wearing a face-covering in indoor public spaces/public transport Hospitality businesses required to collect and share customer information to support Test and Protect contact tracing. Businesses, service providers and places of worship required to have regard to guidance about reducing risk of exposure to COVID-19 on their premises. Large events and late night venues must operate the COVID-19 certification scheme.</p> <p>These legal measures will be converted to guidance - often it will make sense for individuals and organisations to continue to adopt them.</p> <p>On 28 February, the legal requirement for COVID-19 certification in certain settings will end.</p> <p>On 21 March (indicative date) the legal requirement for face-coverings in indoor public places and on public transport will end.</p> <p>Responding to future threats Outbreaks are likely over the coming years, and we can expect new variants to appear globally. It may therefore prove necessary to take steps to protect people from serious illness and death in future. This might involve implementing temporary and targeted protective measures, either within individual settings, in certain localities or nationally.</p> <p>Managing future threats at the national level The first category of response consists of the routine adaptations to behaviours and settings that are likely to become an essential</p>

Key events (with dates)	Topic	Main body/persons involved	Relevant documents	Commentary
				<p>part of how we all live with COVID-19 going forwards, alongside individuals taking up vaccines when invited to do so and having the testing and treatment regime in place to assess the prevalence and mitigate the impacts of COVID-19.</p> <p>The second response category consists of temporary, baseline protective measures that would provide an additional layer of protection if we assess there to be an increased risk of COVID.</p> <p>Judgements around the reintroduction of baseline measures would also take into account the recognised need for stability and to avoid frequently changing rules and advice concerning protective measures.</p> <p>The third and fourth categories of response would only be applied if there was a 'high' threat from the virus that, without a significant response, would cause a very large increase in morbidity and mortality. The Scottish Government recognises the increased impacts these types of responses have on the economy and society and therefore would only use them when absolutely required.</p> <p>The third category consists of temporary, targeted protective measures, similar to those that were applied to deal effectively with the Omicron variant. These are likely to involve legal measures affecting certain higher risk settings and activities.</p> <p>The fourth and highest response level would consist of temporary, extensive protective measures. This would involve legal restrictions and requirements for a wider range of settings and activities but would likely still fall well short of a 'lockdown'.</p>

Table 2.3: Initiatives to mitigate the harmful impacts of lockdown: Scottish government announcements

Date	Document type	Link	Stress & overcrowding	Isolation	Missed opportunities	Focus	At risk groups
31-Mar-20	Guidance	Coronavirus (COVID-19): supplementary national child protection guidance	x	x		Targeted guidance or support to a specific vulnerable group	Children
10-Apr-20	Campaign launch	Supporting domestic abuse victims (Scottish Government news release)	x	x		Domestic abuse and gender-based violence	People experiencing domestic abuse or gender-based violence
24-Apr-20	Funding Announcement	Help for childhood abuse victims (Scottish Government news release)	x	x		Domestic abuse and gender-based violence	Survivors of child abuse
01-May-20	Guidance	[Document not found]	x	x		Domestic abuse and gender-based violence	People experiencing domestic abuse or gender-based violence
03-May-20	Funding Announcement	Support for autistic people (Scottish Government news release)	x	x		Mental health	Autistic people
03-May-20	Funding Announcement	Supporting mental health (Scottish Government news release)	x	x		Mental health	People/families affected by mental health or addiction

Date	Document type	Link	Stress & overcrowding	Isolation	Missed opportunities	Focus	At risk groups
03-May-20	Funding Announcement	Supporting people affected by drug use (Scottish Government news release)	x	x		homelessness and addiction	People affected by mental health or addiction
04-May-20	Campaign launch	Looking after each other during COVID-19 (Scottish Government news release)		x		Loneliness and isolation	People experiencing loneliness and isolation
07-May-20	Funding Announcement	Getting people online (Scottish Government news release)		x		Digital exclusion	People who are digitally excluded
10-May-20	Funding Announcement	Supporting communities affected by coronavirus (Scottish Government news release)		x		Financial or employment support	Low income families/households, older people
17-May-20	Funding Announcement	Support for women involved in prostitution (Scottish Government news release)	x	x		Mental health	Women engaged in prostitution
19-May-20	Guidance	Coronavirus (COVID-19) Supplementary	x	x		Domestic abuse and gender-based violence	People experiencing domestic abuse or

Date	Document type	Link	Stress & overcrowding	Isolation	Missed opportunities	Focus	At risk groups
		National Violence Against Women Guidance					gender-based violence
22-May-20	Funding Announcement	Supporting mental health and wellbeing (Scottish Government news release)		x		Loneliness and isolation	People experiencing loneliness and isolation
07-Jun-20	Campaign launch	£300,000 for young carers (Scottish Government news release)		x		Mental health	Unpaid carers, young people
19-Jun-20	Report	Coronavirus (COVID-19): domestic abuse and other forms of violence against women and girls - 30/3/20-22/05/20	x	x		Domestic abuse and gender-based violence	People experiencing domestic abuse or gender-based violence
24-Jun-20	Impact assessment	Coronavirus (COVID-19): health and social impact assessment	x	x		Inequality	People with protected characteristics
25-Jun-20	Guidance	Coronavirus (COVID-19): framework to support	x	x		Targeted guidance or support to a	Gypsy/ traveller communities

Date	Document type	Link	Stress & overcrowding	Isolation	Missed opportunities	Focus	At risk groups
		gypsy/traveller communities				specific vulnerable group	
20-Sep-20	Funding Announcement	Tackling violence against women and girls (Scottish Government news release)	x	x		Domestic abuse and gender-based violence	People experiencing domestic abuse or gender-based violence
08-Oct-20	Announcement	Supporting Scotland's mental health recovery (Scottish Government news release)	x	x		Mental health	People/families affected by mental health or addiction
02-Nov-20	Funding Announcement	Children and young people's mental health (Scottish Government news release)		x		Mental health	People/families affected by mental health or addiction, young people
16-Nov-20	Funding Announcement	£1m fund to keep care home residents connected (Scottish Government news release)		x		Digital exclusion	Older people
11-Dec-20	Funding Announcement	Tackling social isolation and loneliness		x		Loneliness and isolation	People experiencing loneliness and isolation

Date	Document type	Link	Stress & overcrowding	Isolation	Missed opportunities	Focus	At risk groups
		(Scottish Government news release)					
11-Dec-20	Funding Announcement	Extra funding for student associations (Scottish Government news release)		x		Mental health	Students
16-Jan-21	Funding Announcement	Helping vulnerable young people through COVID-19 (Scottish Government news release)			x	Financial or employment support	Young people
18-Jan-21	Funding Announcement	Extra funding to support unpaid carers (Scottish Government news release)		x		Mental health	Unpaid carers
16-Jun-21	Funding Announcement	Help for women involved in prostitution (Scottish Government news release)		x		Targeted guidance or support to a specific vulnerable group	Women involved in prostitution
25-Jul-21	Funding Announcement	Tackling gender-based violence (Scottish Government news release)	x	x		Domestic abuse and gender-based violence	People experiencing domestic abuse or gender-based violence

Date	Document type	Link	Stress & overcrowding	Isolation	Missed opportunities	Focus	At risk groups
28-Jul-21	Funding Announcement	Young Scots work promise (Scottish Government news release)			x	Financial or employment support	Young people
29-Jul-21	Funding Announcement	£1m to tackle social isolation and loneliness (Scottish Government news release)		x		Loneliness and isolation	People experiencing loneliness and isolation
24-Sep-21	Consultation	Giving care home residents the right to see and spend time with those who are important to them (Scottish Government news release)		x		Loneliness and isolation	Older people
07-Oct-21	Funding Announcement	Recognising the impact of trauma (Scottish Government news release)	x	x		Mental health	People/families affected by mental health or addiction
15-Oct-21	Funding Announcement	£15 million to help improve mental wellbeing (Scottish	x	x		Loneliness and isolation	People experiencing loneliness and isolation

Date	Document type	Link	Stress & overcrowding	Isolation	Missed opportunities	Focus	At risk groups
		Government news release					

Evidence syntheses included in table 2.1

[Burns J, et al. Travel-related control measures to contain the COVID-19 pandemic: A rapid review. Cochrane Database of Systematic Reviews.2020;\(9\):Art. No.: CD013717. DOI: 10.1002/14651858.CD013717.](#)

[Castaldelli-Maia et al \(2020\) Investigating the effect of national government physical distancing measures on depression and anxiety during the COVID-19 pandemic through meta-analysis and meta-regression](#)

[Curran et al \(2021\) Public Health and Health Systems Impacts of SARS-CoV-2 Variants of Concern](#)

[D'angelo D et al \(2021\) Strategies to exiting the COVID-19 lockdown for workplace and school: A scoping review](#)

[Grépin KA et al \(2021\) Evidence of the effectiveness of travel-related measures during the early phase of the COVID-19 pandemic: a rapid systematic review](#)

[Hughes et al \(2021\) Impact of COVID-19 on the Health and Well-being of Informal Caregivers of People with Dementia: A Rapid Systematic Review](#)

[Johanna N et al \(2020\) Mass screening vs lockdown vs combination of both to control COVID-19: A systematic review](#)

[National Collaborating Centre for Methods and Tools. Rapid Review: Are any jurisdictions using isolation periods other than 14 days in response to COVID-19?. Hamilton, ON: National Collaborating Centre for Methods and Tools; 2020.](#)

[National Collaborating Centre for Methods and Tools. \(2021, March 12\). Rapid Review Update 1: What are best practices for risk communication and strategies to mitigate risk behaviours?](#)

[Nussbaumer-Streit B, et al. Quarantine alone or in combination with other public health measures to control COVID-19: A rapid review. Cochrane Database of Systematic Reviews. 2020;\(4\)CD013574.](#)

[Pang J K et al \(2021\) Probability and estimated risk of SARS-CoV-2 transmission in the air travel system](#)

[Regmi K et al \(2021\) Factors Associated with the Implementation of Non-Pharmaceutical Interventions for Reducing Coronavirus Disease 2019 \(COVID-19\): A Systematic Review](#)

[Tabari P et al \(2020\) International Public Health Responses to COVID-19 Outbreak: A Rapid Review](#)

[Yen-Hao et al \(2020\) Social consequences of mass quarantine during epidemics: a systematic review with implications for the COVID-19 response](#)

Additional relevant evidence syntheses (not included in table 2.1)

Title of review	Date of publication (or date on document if not published)	Very brief details of what the review covers (review question, not findings)	Link
Impact of COVID-19 on the Health and Well-being of Informal Caregivers of People with Dementia: A Rapid Systematic Review	2021	Rapid systematic review focussing on the psychological impacts of the pandemic including lockdowns on caregivers of patients with dementia	10.1177_23337214211020164.pdf (nih.gov)
Global changes in maternity care provision during the COVID-19 pandemic: A systematic review and meta-analysis	19 June 2021	Systematic review and meta-analysis on the impact of COVID-19 pandemic on maternal care provision. Also discusses the impact of lockdown as described in included studies.	Global changes in maternity care provision during the COVID-19 pandemic: A systematic review and meta-analysis (nih.gov)
Indirect impact of the COVID-19 pandemic on hospitalisations for cardiometabolic conditions and their management: A systematic review	28 May 2021	Systematic review comparing cardiometabolic hospitalisation in the pandemic and pre-pandemic period and during lockdown and pre-lockdown	main.pdf (nih.gov)
Disruptions of neurological services, its causes and mitigation strategies during COVID-19: a global review	21 May 2021	Estimates the degree of disruptions of neurological services and also explores causes of this disruption (including lockdown, travel restrictions etc.) during the COVID-19 pandemic.	Disruptions of neurological services, its causes and mitigation strategies during COVID-19: a global review SpringerLink
Has COVID-19 Affected Cancer Screening Programs? A Systematic Review	17 May 2021	Systematic review investigating the impact of pandemic on cancer screening, including exploring the impact of lockdown-related delay of Medical Care on tumour stage at the time of diagnosis	Has COVID-19 Affected Cancer Screening Programs? A Systematic Review (nih.gov)
Cancer Services During the COVID-19 Pandemic: Systematic Review of Patient's and Caregiver's Experiences	29 April 2021	Systematic review identifying challenges faced by those using cancer services and exploring reasons (such as lockdown, social distancing) that may be contributing to these	Cancer services during the COVID-19 pandemic CMAR (dovepress.com)

Title of review	Date of publication (or date on document if not published)	Very brief details of what the review covers (review question, not findings)	Link
		challenges during the pandemic.	
A meta-analysis of the global impact of the COVID-19 pandemic on stroke care & the Houston Experience	8 April 2021	Compared pre-pandemic stroke admissions to those during the pandemic. Does not compare different levels of lockdown and their impacts directly- but found that the steepest drop in admissions occurred in the third week of March 2020 when the state of Texas issued lockdown orders	A meta-analysis of the global impact of the COVID-19 pandemic on stroke care & the Houston Experience (nih.gov)
Mapping Evidence of Impacts of COVID-19 Outbreak on Sexual and Reproductive Health: A Scoping Review	8 April 2021	Scoping review summarising available evidence on the impacts of the COVID-19 outbreak on sexual and reproductive health. Also, discusses the impact of lockdowns as described in some included studies.	Healthcare Free Full-Text Mapping Evidence of Impacts of COVID-19 Outbreak on Sexual and Reproductive Health: A Scoping Review HTML (mdpi.com)
Social consequences of mass quarantine during epidemics: a systematic review with implications for the COVID-19 response	13 October 2020	Systematic review exploring the social impact of mass quarantine or lockdowns including heightened communication inequalities, psychological distress, food insecurity, economic challenges, diminished access to healthcare, disruptive education, and gender inequality and violence.	Social consequences of mass quarantine during epidemics: a systematic review with implications for the COVID-19 response Journal of Travel Medicine Oxford Academic (oup.com)

Disclaimer:

This report was commissioned by the Scottish Covid-19 Inquiry as introductory scoping research. It was written to assist the inquiry with its planning process about the shape and direction of its investigation, and is published in the interests of transparency. The inquiry is grateful to the author[s] for their work. The inquiry is an independent body, and will be carrying out its own investigations to fulfil its terms of reference. The introductory research represents the views of those who wrote it, and nothing in it is binding on the inquiry. The introductory research is one of many sources which will be considered by the inquiry during the course of its investigation.