Policy-making for an 'unruly' public?
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Abstract

The initial response to COVID-19 in the UK took on a self-defeating culture of decision-making, based on the notion of an inherently 'unruly' public. This glossed over the diversity of socio-economic contexts, the complexity of the science, and the value of engaging with stakeholders. The UK experience suggests that the framing of public agency within national policy can limit the effectiveness of urban governance. In future, studies might seek to identify those approaches that better support collective responses to strategic problems of community wellbeing.

Main Text

In this think piece I argue that the initial response to COVID-19 in the UK did not sufficiently acknowledge the inherent uncertainty and spatial politics of scientific advice. I identify elements of a self-defeating 'simply science' culture of decision-making, which is based on an 'unruly' public and denies the value of engaging with stakeholders about their diverse and situated responses to policy. This provides a point of reflection for international studies of strategic problems, on the nature of public agency and the role for urban governance in promoting community wellbeing.

Significant national action has been pursued by the UK government to counter the threat from COVID-19. On 23rd March 2020, twelve days after the WHO DG characterised the spread of this coronavirus as a pandemic, initial policies were put in place for a national lockdown. This pivoted dramatically away from an initial delay on the grounds of promoting 'herd immunity' towards comprehensive intervention, with full lockdown (including school closures and suspension of local elections) and a £330bn economic package to cushion the blow on businesses. These measures came directly from the top tier of UK government together with a powerful mantra 'Stay Home, Protect the NHS, Save Lives', which appeared as a striking logo and was repeated by ministers in daily briefings.

There have been important achievements from these policies, in terms of safeguarding many at risk of infection and preventing the worst anticipated impacts on the National Health Service (NHS) and the economy so far[1]. A more rounded evaluation is now required. Even for temporary emergency responses, such fundamental changes in our ways of living together surely merit serious scrutiny. The initial stark messaging may impact on compliance with future 'unlocking' policies, which are currently being determined. Moreover, the measures may endure and the underlying governance culture may become entrenched, particularly since future global waves of infection seem likely.

In seeking to protect the country from the oncoming wave of coronavirus infections, the UK Government defaulted to centralised authority to determine and control actions. Most

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[1] Focusing on the immediate impacts during early April 2020 Government briefings were already reporting showing a downwards trend in the indices for the UK of '7 day rolling average' for daily COVID-19 deaths and critical care beds with COVID-19 patients https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/882562/2020-04-30_COVID-19_Press_Conference_Slides.pdf and the correlation of uptake of Government support schemes with businesses continuing to trade https://www.ons.gov.uk/businessindustryandtrade/business/businessservices/bulletins/coronavirusandtheeconomicimpactsontheuk/7may2020#government-schemes

notably, national policy decisions were informed via Cabinet Office Briefing Rooms (COBR), with the Scientific Advisory Group for Emergencies (SAGE)'s three expert groups on respiratory virus threats, pandemic modelling, and group behaviours. Only the first has openly disclosed its membership, and ministerial level officials have justified the secrecy of the others as standard protocol for COBR and protection for members against lobbying, while acknowledging the adverse effect on public trust[2].

The predominant use of SAGE's expertise shaped the very approach to proposing policy in the UK. The epidemiological and behavioural economics expert groups were positioned as key influencers, via reports of the 'consensus views' of their members. Thus policy flowed from measures of the extent of the public health emergency being combined with intelligence on public compliance with options for 'flattening the peak' of infections and mortality. This particular combination of expertise promoted a rationale for decisions based primarily on worst-case scenario understandings of public responses. The behavioural report[3] explained, "For those on low incomes, loss of income means inability to pay for food, heating, lighting, internet", and stated that each policy option being considered - closure of schools, and 13 week spells of either home isolation when symptomatic, voluntary household quarantine, or social distancing - was each "unlikely to contain outbreak on its own", although the latter would more be effective than the other three. The initial policies gave prominence to this potential lack of compliance, but the geography of socio-economic disadvantage and increased challenges for some communities were taken as 'simply science'. This glossed over the urban governance implications, such as the need for regionalised coordinating capacity and extra support in 'left-behind'[4] places.

It is not possible to say for sure what advice tipped the balance of decision-making, but the economic-behavioural analysis was a strong part of the rationale. This is most clearly evidenced by the use of extremely simplistic messaging[5] designed to 'nudge' the public into compliance. Behavioural thinking for policy has recently expanded[6] and is particularly strong in the UK, where a Behavioural Insights Team has been advising the Cabinet Office since 2010. In the behavioural reports of SAGE, the publics of most interest were 'covid-irrational' groups acting out of frustration with the lockdown and avoiding social distance. Policy based on this assumes an 'unruly' public, which is fundamentally deficient in terms of capacity and/or willingness to comply with rational calls for national collective action. It neglects public engagement, as a pillar of learning and legitimacy[7] for urban governance.

Whatever the merits of the available science, policy-makers everywhere have incredibly difficult choices to make, and must do so in challenging conditions. There is a tension between the need for immediate action on COVID-19 and fully grappling with uncertainty about the outcomes of decisions. The on-going scientific uncertainly (e.g. about chances of re-infection) create significant difficulty and policy decisions must take account of local contexts and cultural norms. For instance, New Zealand's relatively small and dispersed population was locked down after just 102 cases had been identified[8] and Sweden took an 'ask don't tell' approach to

[2] https://www.independent.co.uk/news/uk/politics/coronavirus-sage-evidence-chris-whitty-public-members-a9482941.html

[3] Independent Scientific Pandemic Influenza Group on Behaviours report of 26th February 2020, *Potential effect of non-pharmaceutical interventions (NPIs) on a Covid-19 epidemic in the UK.*

[4] Tomaney, J., Pike A. and Natarajan, L. (2019) "Land Use Planning and the Problem of Left-behind Places", *UK2070 Commission.* http://uk2070.org.uk/publications/

[5] As compared for instance with the more nuanced messaging on social distancing in New Zealand https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(20)31097-7/fulltext.

[6] Mainly across Western Europe and North America; Lunn, P (2014). *Regulatory Policy and Behavioural Economics*, OECD Publishing.

[7] See for instance, Natarajan, L. (2017), "Socio-spatial learning: A case study of community knowledge in participatory spatial planning", *Progress in Planning*, 111, pp. 1–23, and Brownill, S. and Inch, A. (2019), "Framing people and planning: 50 years of debate", *Built Environment*, 45 (1), pp. 7–25.

[8] The figure is equivalent to around 1 in 49,040 of the population, which compares favourably with the UK where on the day of lockdown the equivalent measure was 1 in 10,045, using mid-year population estimates and the figure

lockdown[9]. The testing and tracing programmes employed elsewhere[10], were not ready en masse in the UK. There is no globally applicable exemplar for successfully tackling a pandemic, yet trusted leadership is needed. Since the success of any policy is always uncertain, public trust in messaging from government will be essential for compliance with on-going adaptations in national strategy and local policy.

The simple commands[11] in the UK would suggest that the public as a whole would not appreciate the need for action, effectively ruling out the possibility of citizens determining to act in a wider public interest. This evokes long-standing debates over collective action and motivations for group behaviours[12]. However, the public defied expectations, with overwhelming acquiescence to policy measures and self-starting additional actions. The most notable example being the extremely large numbers of volunteers to support the public health and social care sectors, beyond what the co-ordinating programme can manage. In addition, community representatives are responding, with local councillors and city-regional authorities seeking greater inclusion in shaping policy and developing place-based strategies.

An unfortunate possible consequence of communicating with the public so simplistically is that trust in governance may be eroded as complexities become apparent. Tragically, 'protecting the NHS' was not enough as the majority of reported COVID-19 related deaths are occurring in social care settings[13], and public compliance with that messaging is having adverse effects, e.g. as fewer people experiencing heart attack symptoms go to hospital for fear of exposure to the virus in those institutions. 'Herd immunity' is also not guaranteed; re-infections of individuals are observed globally and the potential for mutations of corona virus to produce new strains is self-evident. Those working in health and key services (public transport, food retail) are at greater risk of exposure to the virus, and some groups will inevitably be impacted more than others by lockdown, e.g. those with least economic security being hit first and worst by a struggling economy. As the 'uneven' effects of infections and lockdown become more apparent, there will be repercussions. The enormous complexities of decisions cannot remain hidden indefinitely, and the distributional effects of policies will surely feed into evaluations of the whole governance system. Public opinion on the means and the ends of measures will affect trust in (and consequently also levels of compliance with) national policies and city-level strategies.

In summary, the initial culture of policy-making for COVUD-19 in the UK was a significant gamble with public trust. Ultimately, the level of trust will determine whether socially and geographically diverse groups might act in a wider collective interest. So, are centralised powers and simplified messaging helpful longer term? The assumption of an 'unruly' public led to glossing over the complexities of matters that may negatively affect the eventual evaluations of UK policy and undermine compliance with future urban governance. Given the current high levels of support for this administration, demonstrable on-going public compliance, and local

of 6,650 for UK cases. See COVID-19 infection data at https://www.gov.uk/government/publications/slides-to-accompany-coronavirus-press-conference-30-march-2020 and https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-situation/covid-19-current-cases/covid-19-current-cases-details.

[9] As explained for instance by deputy PM Lovin https://www.bbc.co.uk/news/av/world-europe-52431813/coronavirus-myth-that-sweden-has-not-taken-serious-steps

[10] Notably in South Korea https://theconversation.com/coronavirus-south-koreas-success-in-controlling-disease-is-due-to-its-acceptance-of-surveillance-134068#comment_2175300

[11] Here, it is also worth noting the contrasting tone set by the devolved nations of Wales and Scotland in their messaging and the explicit principles of openness set out the framework provided by the Scottish Government.

[12] Olson's theories have been widely applied to studies of environmental and urban governance, see Ostrom, E. (2009), "Collective Action Theory", *The Oxford Handbook of Comparative Politics*, pp. 1–25. For a discussion of current urban regulatory concerns see Heijden, J. van der. (2017), "Urban sustainability and resilience", in Drahos, P. (Ed.), *Regulatory Theory: Foundations and applications*, ANU Press, Acton ACT, pp. 725–740.

[13] https://www.nursingtimes.net/news/social-care/new-covid-19-death-data-reveals-hidden-crisis-in-care-homes-14-04-2020/

policy efforts, the gamble may yet pay off. Yet, even if 'high alert' measures and 'simply science' approaches to decision-making are unwound, their effects on urban governance may linger. Admittedly, there is a tension between the need for urgent action in the face of a pandemic, and the realities of fully grappling with complexities inherent in urban problems. But, obscuring the diverse socio-economic contexts of public responses can only delay consideration of the challenges for urban governance.

Urban governance has always required leadership that can cope with the uncertainties and politics inherent in strategies, and COVID-19 experiences are exposing the consequences where it does not exist. Public communications that aim to ensure general compliance may assist strategy, but the notion of an 'unruly' public is a poor basis for decision-making on community wellbeing. The specific influences seen in this (still evolving) UK case may be unique, but they point to a more general concern about 'simply science' cultures in policy-making arenas. In future, international studies can pay attention to the framing of public agency within governance approaches, and their effects on societal responses and collective action. Exemplars are needed of more participatory frameworks that strengthen connections between statutory institutions and wider society[14], in order to support collective responses to strategic problems.

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[14] Including in contexts with low statutory capacities (see Frediani, A.A. and Cociña, C. (2019), "Participation *as* planning: Strategies from the south to challenge the limits of planning", *Built Environment*, 45(2), pp. 143–161.)