



# COVID-19

## UK Political Analysis

By Tim Hames, Senior Adviser | 30<sup>th</sup> October 2020



### [Second Wave. Europe sacrifices its November in hope of December.](#)

Few, if anyone at all, would assert that the opening wave of COVID-19 in March was the European Union's finest hour. There was virtually no attempt at a co-ordinated response to the crisis. National borders were shut, free movement and the single market were all but suspended, different approaches were taken in different places, numerous EU "partners" found themselves scrambling against each other to acquire supplies of PPE in what became an almost obscene version of a sellers' market. Italy, in particular, felt that it had been abandoned by its closest allies and there was a bitter argument afterwards as to how to pay for its aftermath. Brexit was almost irrelevant to the fact that the UK too took its own path, imposing a lockdown later than other nations and of a comparatively liberal form, certainly if southern Europe was considered to be the model to follow.

Europe, including the four nations of the UK, now knows for certain that it is facing a second wave of some magnitude and with all the disadvantages of entering winter too. Some clear trends are emerging across the continent as to the character of the second wave, the broad strategic decisions as to how to meet it that are being made, the subtle differences in tactics that have emerged and that are likely to endure depending on the extent of the restrictions that different nations are prepared to impose on the hospitality and leisure sectors and what the unstated very short term objectives (for the rest of this year) and short-medium term objectives (January to March 2021) really are. While overt

transnational policy collaboration is likely to be limited, much more is known about the disease now and that will mean that the second wave will be less divisive than the first was.

## EXECUTIVE SUMMARY

- Although the pattern in terms of numbers of new infections varies considerably across Europe, the rate of numerical increase in countries over the past month is similar as is the profile of the newly infected and whom they transmit the virus too. This is leading to greater consistency in the policies adopted across Europe.
- For almost every country, a decision has been taken to increase restrictions over the next four to six weeks (so essentially encompassing all of November). This lockdown-lite almost always involves exceptions to the stance taken in March and April with a common resolve to keep schools open (especially for younger children), maintain a higher proportion of non-essential retail functioning than was the case in March and April and be more permissive about local daytime personal movement than was witnessed during the height of the lockdown.
- In the majority of countries there was an initial preference for lockdown-lite to be implemented in a more regional and local manner than during lockdown. Circumstances have, nonetheless, moved towards a more national approach.
- Almost everywhere, the hospitality and leisure sectors have had the most drastic rules re-imposed on them and this may intensify over the next month or so. There is, though, some variation in how tough these new constraints are. There is also a difference on the extent to which household interaction in the home is regulated with the UK on the more austere end of the spectrum in this regard.
- The unstated common aim is to drive the reproduction number down to the point that would allow for a substantial liberalisation for the Christmas period.
- The major strategic uncertainty is what happens after that. Will a lockdown-lite have to be reintroduced in January in exactly the same form as in November, will circumstances in terms of controlling the virus allow for a softer approach or will enhanced testing, better treatments and the early stages of a vaccination effort allow the better and different options to be followed in what may later come to be seen as a transition era out of the pandemic? It is entirely conceivable that

policies pursued across Europe might again start to deviate from one another, renewing tensions which for the moment seem to have eased since the Spring.

## The nature of the second wave in Europe.

At a first glance at the numbers, the second wave of COVID-19 in Europe would appear to be having a widely different impact in differing countries. The list below sets out the 14-day cumulative number of COVID-19 cases per 100,000 of the population for selected countries according to the figures that are published daily (2pm, UK time) by the European Centre for Disease Prevention and Control.

### Data as of Thursday October 29th, 2020.

Belgium	1,498.7
Czech Republic	1,481.0
Netherlands	771.8
France	680.6
Spain	486.7
UK	431.6
Portugal	362.0
Italy	359.5
Ireland	289.4
Germany	168.4
Denmark	165.0

Looking at these numbers alone, therefore, one might be surprised if there was not a very wide variety in terms of policy response. There appear to be distinct layers of

severity within this data set with Belgium and the Czech Republic in a league of their own (to their misfortune), the Netherlands and France in the next set, then Spain and the UK, after that Portugal, Italy and Ireland and finally the relatively benign figures recorded for Denmark and Germany (curiously, the sole example of nations with similar numbers that actually share a national border). Just reading the numbers, why is Germany to hold an albeit limited lockdown?

In reality, other factors are forcing public policy in a more consistent direction.

The first is the rate of increase since the equivalent moment in September. Across the board, these statistics constitute a seven to tenfold increase with an average of about eightfold across the series. The numbers might be different but the trend that is being observed is consistent throughout western Europe.

The second is the profile of new cases. In every instance, numbers started to rise first and starkly among the young (in contrast with the pattern in March before the full impact of lockdown was felt), with a lag before transmission fed through to older, more vulnerable, individuals, with a further delay before the inevitable increase in hospitalisation, intensive care unit admissions and deaths (which is now occurring everywhere across Europe and has not yet peaked anywhere). This consistency of profile is also a trigger for a consistency of policy response.

Finally, ministers and officials across Europe are receiving very similar advice as to what the consequences would be if the R number first breached 1.5 across an entire country and then what the impact would be if it broke through 2.0. These projected numbers have really forced the hand of those who take the decisions. This, once again, has been a strong factor in leading to similar policy actions.

## **The policy response.**

With the conspicuous exception of Sweden which is still following a course of its own, the response of governments across Europe in the past few weeks as the scale and potential severity of the second wave became clear (and none were shocked that some second wave had transpired but most were not prepared for its force) has been similar. All have, usually in stages over a number of weeks, ramped up restrictions and waited to

see how the situation evolved, and then, almost invariably, been obliged to increase their severity thereafter, so that in almost all cases (England is, as of now, not quite in this category) at the most intensive the top-end of measures could fairly be described as lockdown-lite with, in many instances, the formal application of a curfew in the evenings.

The “lite” part of lockdown-lite is, nonetheless, significant. The priorities as to what aspects of the lockdown in March and April are not thought to be desirable to repeat is important in policy terms and is consistent across countries. There is a strong consensus that schools should be kept open for the whole of this term, especially for young children who are least likely to catch or transmit the virus.

There is more willingness to accept distance learning of some form for those aged approximately 15 to 18 and positively to encourage universities to keep students on or near campus but to switch to on-line teaching as much as they possibly can. There is also a broad agreement that the range of retail outlets that should be allowed to remain open and conduct business on a “normal” basis should be higher than was true in the March to May national lockdowns. This is motivated partly by a desire to limit the damage to the economy that the second wave will undoubtedly inflict virtually everywhere across Europe, but it is also because it is better understood now than it was eight months ago how the virus spreads and that the prospect of acquiring it through a chance encounter in the typical shop is considerably lower than a number of other forms of engagement.

This enhanced evidence has also led to the conclusion that the amount of time that an individual or household unit can spend in movement and activity out of the home during daytime does not need to be as constricted as was thought to be the case several months ago. The combination of continued social distancing, much more extensive (and frequently mandatory) use of facemasks and dictums such as the “Rule of Six” do appear to have a notable impact on transmission. This is likely to be the case even if restrictions tighten with nighttime curfews serving to compel households not to intermingle with one another at all.

It was also a broadly consistent pattern, especially among the more populated European nations that a degree of local variation in the implementation of new measures was

preferred to a sweeping national position. Although the precise rules involved in the tier structure introduced in England (and as of Monday in a different fashion in Scotland too) have been criticised here as complicated and confusing, they were not, until the past few days, that different to the European norm. The curfew in France started in nine, admittedly major, cities and was then extended to 38 others, leaving a third of the population without a curfew. It was only with considerable reluctance that this localism has been abandoned.

Germany's new proposals – for a less drastic lockdown-lite than France - can only be introduced with the consent of its 16 regions, their parliaments have to back them and the regions implement them. Spain has introduced a national curfew but allows for some regional variation in its exact timing and has excluded the Canary Islands. Yet the tide seems to have turned against localism this week.

It is also apparent that administrations across Europe have come to the common conclusion that the hospitality sector, leisure industry and close contact activities such as gyms, swimming pools and beauty salons are the serious virus hot-spots. Pubs in England have accused of Boris Johnson of “singling them out” but if one looks at the situation in this country compared with the rest of Europe then if he has “singled them out” it is by his comparatively accommodating treatment. It is much easier to obtain an alcoholic drink in a bar in London and Liverpool at 9pm than in Paris or Lyon. As of this Monday all bars and restaurants across Italy have been instructed to close at 6pm (except for takeaways) and this will last for at least a month. Gyms, swimming pools, theatres and cinemas have all been shut.

It is a similar story in Belgium with a total ban on the sale of alcohol after 8pm. The same time is the cut-off in the Netherlands and drinking in public after 8pm is illegal. Portugal has adopted the 8pm alcohol sale ban as well. In Denmark you will not be able to buy alcohol after 10pm anywhere until January 3rd 2021. For at least two weeks bars across much of Germany will not be able to open too. By the standards of our neighbours, even tier three England seems like Las Vegas.

There is one counter-example where policy here is more restrictive. In England at stage tier two (as will also be followed at the same level in Scotland), there is an outright ban

on households, even members of a wider family, meeting together indoors and, by extension, overnight stays are forbidden. This is a very restrictive stance by European standards with considerable consequences for social life. It is tougher than in nations that presently have a more serious rise in infections.

In Belgium, for instance, all households can have up to four permitted guests, always the same four, who can be changed every two weeks. In the Netherlands, a maximum of three people can visit a private home on a given day. In Spain, up to six people who do not live together can meet in a private setting like a home. The tier three rules in England (and again soon to be emulated in Scotland) that prevent household interaction inside or outdoors are really comparatively hard. They are much more stringent than Germany's limited version of a lockdown which will still allow up to ten people from two households to meet in a home.

This reflects where England, especially, is something of an outlier in Europe. The two main forms by which the virus spreads (beyond a hospital or a care home setting) is within a household (usually when a household member has left home and been in contact with an infected member of a different household with whom they are often familiar) and close contact with an infected person who might be entirely unknown to them in a social setting such as a bar or restaurant.

The "balancing act", which the Prime Minister has referred to in recent weeks, has been to be comparatively restrictive on how households might engage with each other while being relatively permissive on what they are allowed to do as households and where provided that they only function as a household unit and those social activities are concluded by 10pm. There are, plainly, plenty of SAGE scientists who would choose to be tough on both household interaction and on the social settings in which households are allowed to move. This would move the UK towards the most restrictive end of the spectrum seen in Europe.

The Prime Minister's hope has been that the comparative stability of daily new infection cases over the past two weeks (around 20,000-25,000 typically) would let him see out November without either a form of national "circuit break", or a de facto "tier four" which hits hospitality harder. The publication of the React 1 Imperial College, London,

study this week, threatens the credibility of those daily numbers. It suggests on the basis of random testing that an enormous section of asymptomatic cases are being missed and that the real statistics for infected people and the actual R number are being massively underestimated. If this becomes official orthodoxy, then policy will have to change in some manner even if the structure of tiers is retained to allow for an element of localism.

## What next?

The relative coherence of policy within Europe of late has encouraged Brussels to seek further co-ordination. Ursula Von Der Leyen, the President of the European Commission, has hopes for a European Passenger Locator Form that would allow continent-wide contact tracing and the creation of common rules on quarantine, self-isolation and travel arrangements and closer information sharing on hospital capacity across EU national boundaries. She has also suggested a more collective approach to testing strategies and deeper collaboration on testing as the supply of rapid antigen tests increases. The desirability of such a programme is clear.

Whether it can be realised in reality is, unfortunately, another matter entirely.

In the very short-term the target that is moving most European countries in the same direction is the ambition of forcing case infection rates down during the month of November and early December with the aim of then softening those restrictions somewhat in a 7-10 day period in and around Christmas. Unless they prove to be embarrassingly ineffective, then most of the initiatives which are being witnessed at the moment will ease at more or less the same time and in a largely similar manner which might offer the impression of close co-ordination. The same will probably be true for the four constituent nations of the UK too.

The real challenge is what happens after that. A short, sharp shock in the form of more restrictive policies will almost certainly allow the reproduction number to fall by mid-December. Although by how much it does will depend on the degree of compliance seen across the UK and Europe which will struggle to be as firm as it was in the initial lockdown when fear of the virus assisted the authorities. The civil disobedience seen in



Italy this week may not prove an isolated incident but an indication that COVID-fatigue has set in and enough of the public is unwilling to continue to endure restrictions on personal and economic freedom for the impact of the measures to be less than was anticipated. This risks a vicious circle in which the scientific advice to ministers and advisers everywhere is that they need to crack down harder to move the reproduction number down, a strategy that might simply increase the level of resentment and then resistance to it.

Even if matters proceed more smoothly than that, the reproduction number falls to one or a little less and something akin to a conventional Christmas occurs, the candid truth is that right now no one is sure what policy in January will look like. Traditional New Year celebrations certainly will not be on the agenda. There is instead an array of possibilities from reintroducing the harsher measures that had been parked before the Christmas break, to bringing back a milder version of them, to reaching an assessment that the combination of enhanced and faster testing, better treatment of the virus in hospital and the arrival of a vaccine will allow countries in fairly short order to head back to where they were in August.

One immediate and pressing question across the continent (and in the UK) is whether university students should be allowed to return to campus again in January or whether the danger of repeating the transmission effects seen in the past six weeks almost everywhere across Europe is too high to allow for that.

Even the “silver bullet” of the vaccine creates its own complications. This will be less true in the UK than elsewhere, particularly if it is the Oxford/AstraZenica version of the vaccine that comes across the line first (it is in a close race with Pfizer/BioNTech) as the country has not only an existing stockpile of that vaccine but one of the largest series of contracts on other options too if they materialise instead.

The situation within the EU, by contrast, is more fragmented. Some of the most wealthy countries either already have or can be expected to make their own arrangements while poorer parts of the Union are reliant on central purchases. The dash to vaccinate first between countries could prove to be as divisive as the competition to acquire PPE plainly became earlier this year. Calls for a European Passenger Location Form or common rules

on quarantine or better sharing of information about hospital capacity could swiftly become a sideshow as every government in Europe comes to regard its perceived effectiveness in its vaccine strategy as fundamental to its standing. That a number of the largest EU states are due to hold parliamentary or presidential elections over the next eighteen months or so will not be without its influence over political decisions either.

In short, the risk for Europe (and to a degree the UK) is that comparative policy consistency and an element of co-operation over the next four to six weeks does not prove to be sustainable. Differing directions may well be taken after a break for the Christmas festivities which makes collaboration much harder to realise. In the short-term, even the prospect of mass vaccination could prove highly divisive across European nations as well as within them. A lot of hope is being invested in the time between having to make awkward decisions as to what restrictions are needed in January and an effective mass vaccination campaign being just weeks away.

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