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Contents

1. Introduction to Covid-19.....	3
2. Strategies Used to Measure, Monitor and Control the Incidence of Coronavirus	3
3. Current Public Health Policy Approaches to Reduce or Control Incidence	6
4. Models and Theories of Health Behaviour Change	6
5. The Impact of Legislations and Policies on Health and Wellbeing of Individuals in Health or Social Care Settings	8
6. Ethical Considerations	9
7. Recommendations: Which Policies Seem to Have been Successful	9
8. References.....	9

1. Introduction to Covid-19

Viruses that typically affect the respiratory tract of a broad variety of mammals, including humans, are Coronaviruses, and got their name after the spikes on their surfaces that resemble a crown.

In the 1960s, human coronavirus was first identified in the nose of a patient with the common cold. Alpha, beta, gamma, and delta are the four main groups of coronaviruses, and there are seven types of human coronavirus. Mild respiratory illnesses are caused by common human coronaviruses (UKRI, 2020). These are responsible for between 15 and 30 percent of common colds. Illnesses caused by these types of coronaviruses usually last for a short period of time. Another two types of human coronaviruses, MERS-CoV and SARS-CoV, are known for causing severe symptoms. MERS symptoms often include fever, cough, and shortness of breath, while SARS symptoms often included fever, chills, and body aches. Both usually progress to pneumonia (UKRI, 2020).

It is possible coronaviruses that infect animals evolve and can infect people as well and they thus become a new type of a human coronavirus. The latest example of this is the 7th human coronavirus, SARS-CoV-2, which evolved in 2019 and now commonly known as COVID-19.

There are similarities between SARS-CoV and SARS-CoV-2, however the differences have made SARS-CoV-2 the cause of the disorder worldwide and causing a global pandemic, while SARS-CoV infection was limited to contained geographic regions.

The aim of this assessment is to examine the differences and similarities of strategies and approaches in the UK and Serbia to measuring, monitoring, and controlling the incidence of COVID-19 with the purpose of drawing conclusions on best practices.

It has been seen human behaviour plays a huge role in spreading Covid-19. The best-done mitigation of damage that comes from Covid-19 is in countries where the population has successfully and quickly changed its behaviour. Some of these interventions have been highly effective, others have been less so, and some have produced substantial social and financial harm.

2. Strategies Used to Measure, Monitor and Control the Incidence of Coronavirus

The WHO (World Health Organization) is proposing a plan to address the goal of action to prepare for and overcome the COVID-19 pandemic. The action plan should be taken on a global, national, and regional level. The strategic goal is also based and focused on avoiding and mitigating risks for new variants. The path of the strategy is focused on safety, efficiency, and effectiveness in dealing with the COVID-19 pandemic.

A state of emergency and curfew have been introduced in Serbia - people over the age of 65 are temporarily forbidden to leave the house, and this also applies to everyone else from eight in the evening until five in the morning. (Vukanovic, 2020)

The international community should support all countries and present a strategic plan to maintain public health. This strategic plan shows what response measures need to be implemented, and a preparedness plan for the impact of the COVID-19 virus.

Decisions made are to reduce contact with other people, both in the workplace or in public places. Other measure include:

- Wash hands often with soap and water or use a disinfectant based on 70% alcohol,
- avoid touching your face, mouth, nose, and eyes,
- avoid close contact with people who have symptoms of a respiratory infection, including members of your household,
- avoid greetings by shaking hands or kissing and maintain a distance of at least one meter,
- use masks that cover your nose and mouth when staying indoors,
- ventilate rooms frequently,
- if you experience symptoms of a respiratory infection, call the institute or public health institution in charge of your area immediately.

Epidemiologists analyses new reports of COVID-19 cases and based on these data, introduce health surveillance for the entire population, collect, analyze, and interpret all data. By monitoring the health status of the public, epidemiologists calculate:

- incidence - number of new cases (within one time)
- prevalence - what is the number of cases in a short time
- hospitalization - how many cases were hospitalized
- number of deaths from Covid-19 virus (Coronavirus Disease 2019 (COVID-19), 2020).

Attempts are being made to stop the spread of Covid-19. The NHS -using the track and trace program-monitors the movement of people, so they find out all the information, who and when was an individual in contact with the Covid-19 virus, and thus they learned that these people are potential carriers for the spread of the virus. With this chain of follow-up, the chain of contact, virologists, scientists, receive information on how infection with the Covid-19 virus can potentially spread and how it spreads from person to person. Based on

this tracking, epidemiologists are investigating how to stop the infection, whether it is in the form of wearing a mask, isolation or in the form of a vaccine.

Through such tracking programs, NHS and public health workers contact individuals to that they have been in contact with a person infected with the COVID-19 virus. Those people who have been in contact with the infected are at greater risk to their health and should adhere to stricter, more disciplined measures, primarily self-isolation. This means being distant and having no physical contact with people for the next few days (Dum Brava, 2020).

Government have embraced the digital world and the use of mobile devices to monitor the population. In cooperation with telecommunications and the use of applications on telephone devices, the system, strategy plan, is supported to maintain and limit the spread of viruses. With these applications, the movements of the population are mapped, and people who may be in danger are monitored (Dum Brava, 2020).

As we have seen the beginning of the epidemic, not all countries have the same procedure and the same criteria. Each country has its own approaches and criteria depending on its own capacity and resources. Many countries focus on laboratory reports of confirmed cases and this diagram shows the situation in a particular community or region. All this testing is different and gives a different picture of the development of the COVID-19 virus. We conclude that at the end of the research, the process of comparison is not allowed, whether it is between countries or within a country by its regions.

Monitoring can be a low testing capacity, when only those people who are infected, who have been infected or people who are travelers are monitored. To prevention, it is possible to monitor, with laboratory findings, all persons, so that tests are performed on non-infected people, because some do not have symptoms of infection.

Testing is the first step in the fight against coronavirus. The NHS provides two types of tests:
-PCR tests - which are sent to the laboratory to be checked, this is for people who have symptoms and

-rapid lateral flow tests - only for people without symptoms, the result is obtained quickly (Get tested for coronavirus (COVID-19), 2021).

Testing not only helps to isolate patients and prevent the spread of the virus, but also helps to identify potential new patients who may be at an early stage and show no symptoms at this time. It is believed that testing and monitoring have helped to curb the infection in those countries that have relied on it, the number of new cases has fallen, while in countries where testing is not a priority, the number of cases has increased.

3. Current Public Health Policy Approaches to Reduce or Control Incidence

Experts say droplet transfer is the reason why wearing masks is so important. Masks act as a barrier that prevents the transmission of a large drop to other people after exhalation, minimizing the risk of spreading. Of course, it helps to maintain social distance and regular hand hygiene. Knowledge about the Covid 19 virus has expanded and increased, despite many limited data, which gives us the feature of slow development as new evidence emerges. With expanded knowledge, the introduction of vaccination was made possible. (Halperin et al., 2021).

The fastest, most powerful way to reduce the number of people suffering from COVID-19, as well as to return to a sense of normalcy even when various viral variants appear, is widespread vaccination. The world's population still cannot be satisfied with the stockpile of vaccines, so they must be used as efficiently and strategically as possible. Give priority to health workers and vulnerable populations (Halperin et al., 2021). In response to the riskiness of the Omicron variant, England switched to Plan B:

- Receive the vaccine and take a booster dose,
- wear a mask in closed public places,
- if you can, work from home,
- ventilate closed rooms often, hold meetings better outdoors,
- get tested and, if necessary, be in self-isolation (Coronavirus (COVID-19): guidance and support, 2021).

The BI survey in Serbia found out which population, group, had lower intentions for vaccination. The answer to this result was the initiation and intentions for vaccination, which increased from 35% to 57% over 6 months (An introduction to WHO in the European Region, n.d.).

The statement of the Crisis Staff for the Protection of the Health of the Population from the COVID-19 Infectious Diseases in Serbia reads that it is the epidemic situation is stable and has the lowest rate of new cases in Europe, but also a warning that these percentages are growing, especially in Belgrade, and that there are fears that this may be the beginning of a significant increase. All current measures should be continued, and general measures - masks and distance give the same effects (RS, n.d.).

4. Models and Theories of Health Behaviour Change

Health behavior is aimed at preventing disease, promoting health, which means reducing behavioral pathogens and increasing behavioral immunogens. Variables that influence the

adoption of health behaviors are an individual's, social context, perception of symptoms, emotional states, and health beliefs.

We have a few theories discussing health-behavior change:

- Health belief model (HBM)
- Theory of reasoned action
- Transtheoretical Model Stage of change

The health believe model (HBM) suggests that a person's propensity for health behavior will be determined by two factors: the perception of susceptibility to the disease and the perceived severity of the consequences of the disease. These factors are formed by two types of variables: demographic (where you live, age, gender.) and psychosocial variables and beliefs that are key to action (prevention campaigns, advice) (LaMorte, 2019). The tool scientists use to predict health behaviour is called the Health Believe Model (HBM).

Accepting protective health behaviors and not engaging in risky health behaviors can be difficult. People sometimes need a lot of time to decide to change their behavior and find it difficult to persevere in that behavior when faced with challenges. The likelihood that people will adopt protective health behaviors or change bad habits depends on three sets of cognitions (LaMorte, 2019).

1. Perceived sensitivity - when people do not realize that they are in danger, they simply do not want to and will not change their health behavior. Perceived sensitivity is subjective. It consists of two elements: susceptibility to disease (risk) and perceived severity as regards the consequences of COVID-19 this case.
2. Perceived Severity - Perceived seriousness includes people's beliefs about how dangerous this virus is, even for life. That with accepted acceptance, a person will change their health behavior.
3. Visible benefits - It is difficult to convince people to change their behavior if there is nothing useful for them. The perceived benefits relate to an individual's assessment of the value of engaging in health behaviors to reduce the risk of virus-induced disease (LaMorte, 2019).

Why do perceived obstacles arise? People do not change their health behavior because they think that change will be difficult. In addition to physical difficulties, there are also social ones. Changing health behaviors can cost effort, time and even money (LaMorte, 2019).

5. The Impact of Legislations and Policies on Health and Wellbeing of Individuals in Health or Social Care Settings

Prohibition of contact, physical distance, hygiene measures, lockdown, isolation, closed schools and kindergartens, reduced working hours, etc. For most people, life has changed drastically since March 2020. These measures have profound consequences, primarily on mental health (depression, anxiety, OCD) and people's livelihoods as many jobs were lost. This is especially true for people who live alone, those with compromised immune system and those in care homes who had to "shield".

Strategies, such as a quarantine, which are necessary to minimize the spread of the virus, have also had a negative psychological impact, causing symptoms of post-traumatic stress disorder, depression, and insomnia, among others (Public mental health and wellbeing and COVID-19, 2021). Due to the long-term consequences of Covid-19, doctors, and other mental health professionals, are worried about which mental health problems caused by this pandemic may last longer. Psychologists believe that obsessive-compulsive disorder could be one of the main conditions caused by the pandemic. This could lead to long-term consequences, because OCD occurs due to the interaction between genes and environmental factors (Public mental health and wellbeing and COVID-19, 2021).

One of the major problems during a pandemic is chronic loneliness, which is caused by social isolation or a "lack of meaning in life". Then, job losses and financial difficulties during the global economic crisis also associated with long-term decline in mental health (Public mental health and wellbeing and COVID-19, 2021).

The main factors of burden are the lack of personal contacts with relatives and friends (89%). Loneliness is especially difficult for people. For families with children, the closure of kindergartens and schools caused special stress (59%), and every second employee stated that he suffers more stress at work. There was a lack of socializing with friends and families, sports, culture, or travel to replenish resources (Fegert, Vitiello, Plener and Clemens, 2020).

On a positive note, the use of protective masks, regular hand hygiene and social distance have contributed to the fact that the flu virus is not registered at all this season. Due to the measures installed to health the spread of Covid-19 this influenced the spread of other respiratory infections, well as less rotavirus for young children, less common cold, and other coronaviruses, but also less immunity to these diseases. (Fegert, Vitiello, Plener and Clemens, 2020).

6. Ethical Considerations

The unfortunate Covid-19 pandemic turned everything upside down, so it mixed up our feelings during the New Year and Christmas holidays. People can't wait to travel abroad on vacation, to travel to see relatives and friends. In fact, they all wanted only one thing - to see each other, give a hug and have a physical contact. It all stands in one normal life. The question is what a balance between protection of vulnerable groups and individual freedoms is (to travel, socialise, work, etc.).

It is obligatory to travel with a PCR test and to undergo a two-week quarantine. However, no employer will approve this and will not pay for quarantine time. Family members are also in a trouble because they all must be quarantined if one person is in isolation. Another problem is the complicated travel procedure due to the measures against Covid 19, which would take away many days of rest (Cook, 2020).

Older people are not only facing a health crisis: physical distancing measures, introduced to stop the spread of the virus, also have disproportionate consequences for life and livelihoods as many older people are cut off from services, support and persons providing care and assistance, on whom they otherwise rely. Rights of older people who were "locked away" for many months (ageist policies?). Societies, are struggling to create conditions in which an increasing number of older people will be able to survive, maintain good health and remain active in their communities and public life. Instead, many older people are neglected and affected by poverty, social exclusion and isolation that today have much more severe forms due to the pandemic (Age-platform.eu, 2020).

7. Recommendations: Which Policies Seem to Have been Successful

Based on the literature and information discussed in this paper, regulations such as hand washing, wearing masks, regular testing, and vaccinations can help stop the spread of the virus.

To help people, understand that compliance with these regulations is important for our health, education and communication with professionals and public health are crucial. However, the information of the experts is not explained in a simple way.

The messages had a high level of health literacy At, this moment, the pandemic should not be used and abused to violate basic human rights.

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