



**Health  
Information  
and Quality  
Authority**

An tÚdarás Um Fhaisnéis  
agus Cáilíocht Sláinte

**Rapid review:**

**Measures to support people in self-isolation or restriction of movements and the evidence of the effectiveness of such measures**

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## About the Health Information and Quality Authority

The Health Information and Quality Authority (HIQA) is an independent statutory authority established to promote safety and quality in the provision of health and social care services for the benefit of the health and welfare of the public.

HIQA's mandate to date extends across a wide range of public, private and voluntary sector services. Reporting to the Minister for Health and engaging with the Minister for Children, Equality, Disability, Integration and Youth, HIQA has responsibility for the following:

- **Setting standards for health and social care services** — Developing person-centred standards and guidance, based on evidence and international best practice, for health and social care services in Ireland.
- **Regulating social care services** — The Chief Inspector within HIQA is responsible for registering and inspecting residential services for older people and people with a disability, and children's special care units.
- **Regulating health services** — Regulating medical exposure to ionising radiation.
- **Monitoring services** — Monitoring the safety and quality of health services and children's social services, and investigating as necessary serious concerns about the health and welfare of people who use these services.
- **Health technology assessment** — Evaluating the clinical and cost-effectiveness of health programmes, policies, medicines, medical equipment, diagnostic and surgical techniques, health promotion and protection activities, and providing advice to enable the best use of resources and the best outcomes for people who use our health service.
- **Health information** — Advising on the efficient and secure collection and sharing of health information, setting standards, evaluating information resources and publishing information on the delivery and performance of Ireland's health and social care services.
- **National Care Experience Programme** — Carrying out national service-user experience surveys across a range of health services, in conjunction with the Department of Health and the HSE.

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## List of abbreviations used in this report

<b>BPS</b>	British Psychological Society
<b>COVID-19</b>	Coronavirus disease 2019
<b>ECDC</b>	European Centre for Disease Prevention and Control
<b>HIQA</b>	Health Information and Quality Authority
<b>HSE</b>	Health Service Executive
<b>NPHE</b>	National Public Health Emergency Team
<b>PPE</b>	personal protective equipment
<b>SARS-CoV-2</b>	Severe Acute Respiratory Syndrome Coronavirus 2
<b>UK</b>	United Kingdom
<b>US</b>	United States
<b>WHO</b>	World Health Organization

## Key points

- This rapid review consisted of two elements; the first was a review of international guidance relating to measures to support those in self-isolation (due to case status) or restricting their movements (due to close contact status) during the COVID-19 pandemic; the second was an evidence summary of the effectiveness of measures used to support individuals in self-isolation or restriction of movements.
- In total, guidance from two organisations and 19 countries, relating to measures to support those in self-isolation or restricting their movements, were included in the international guidance review.
- Five broad categories of measures were identified to support those who are in self-isolation or restriction of movements, these were:
  - Psychological, addiction and safety measures, which included mental health support, online counselling services, stress management, support phone calls for those who live alone or want to talk to someone, support for those with alcohol or drug problems, safe housing and protection against violence (including domestic and child abuse).
  - Essential needs support measures, which included provision of medicines, food, accommodation, care (to children or vulnerable groups including the elderly) and personal protective equipment (PPE).
  - Financial support measures, which included any form of assistance payments (for example, salary protection, sick-pay and low-income support) and provision of certificates for cases and close contacts to guarantee financial support.
  - Information measures, which included the provision of information and educational resources (for example, apps, helplines and websites) for the public relating to COVID-19, self-isolation, restriction of movements or working from home.
  - Enforcement measures, which included any monitoring of regulations that was undertaken and fines or penalties incurred for acting outside of those regulations.
- There appears to be variation in the range and intensity of supports offered, the mechanisms by which the supports are offered, whether support is

proactive or reactive, and if supports are universal or preferentially targeted at vulnerable groups. In general, Ireland compares favourably to other countries in terms of the level of support offered.

- The second element of this rapid review was an evidence summary on the effectiveness of measures used to support individuals in self-isolation or restriction of movements due to confirmed or suspected infection with SARS-CoV-2 (or other respiratory pathogens (for example, SARS-CoV and MERS) during an epidemic or pandemic situation).
- Two Australian studies were identified both of which were based on data from a survey undertaken during the 2009 H1N1 pandemic.
  - One reported on compliance with recommendations and understanding of information on quarantine. The authors reported that 90% of individuals understood what they were meant to do during the quarantine period with increased levels of understanding identified in households with cases. Overall, 55% of households were fully compliant and there was increased compliance reported in households that understood what they were meant to do compared with those who reported that they did not (55%vs 35%; odds ratio (OR) 2.27, 95% confidence interval (CI) 1.35-3.80).
  - The second study reported on compliance with recommendations as a result of access to paid sick leave or paid carer's leave to look after quarantined children. The authors reported that access to leave did not predict compliance with quarantine recommendations (OR 2.07, 95% CI 0.82-5.23).
- Although not systematically identified, international qualitative research shows that the factors individuals perceive to be of greatest importance to support them in self-isolation or restriction of movements are improved knowledge, the provision of adequate essential supplies and financial support.
- In a study conducted in Ireland, researchers hypothesised that individuals would have increased confidence in their ability to self-isolate if they used an online tool (or decision aids) to help them make a plan and develop a routine for self-isolation. The results showed:
  - behaviourally-informed decision aids generated statistically significant, positive outcomes in helping individuals decide whether they need to

self-isolate, be confident in their ability to self-isolate and manage a household in which an individual needs to self-isolate

- researchers recommended that test and trace staff and human resources departments should be utilised to direct individuals and employees, respectively, to available resources should they need to self-isolate or restrict their movements.
- This rapid review identified a wide range of measures available to support those in self-isolation or restriction of movements. However, there is a lack of evidence from primary research studies relating to the effectiveness of such measures, that is, evidence of increased compliance and or reduced spread of infection. Signposting available resources is key to helping individuals plan for self-isolation and be confident in their ability to do so effectively.

## Background

The Health Information and Quality Authority (HIQA) has developed a series of evidence syntheses to support the National Public Health Emergency Team (NPHE) in its response to COVID-19. On 11 March 2020, the World Health Organization (WHO) declared the coronavirus (COVID-19) outbreak a global pandemic. As of 26 January 2021, there have been in excess of 98 million cases and over 2 million deaths from laboratory-confirmed cases of COVID-19 worldwide.<sup>(1)</sup>

In the context of the overall public health response to COVID-19, effective management of cases and their contacts is key to reducing the spread of COVID-19. In regard to cases, that is, those with confirmed or suspected COVID-19 infection, isolation (or self-isolation) is the term used to describe their separation from those who are not infected. Restriction of movements (or self-quarantine, or quarantine) is the term used to describe separation of those exposed or potentially exposed to SARS-CoV-2 from others, as a precautionary measure because they may have the disease.<sup>(2, 3)</sup> A previous report by HIQA advised that consideration should be given to supporting people in self-isolation and restriction of movements to improve compliance with the requirements.<sup>(4)</sup> As such, NPHE outlined the following policy question:

*"What measures are being taken internationally to support compliance with self-isolation and restricted movement requirements and is there any evidence as to how effective these measures are?"*

The following research questions (RQs) were formulated to inform this policy issue:

RQ1. *"What public health guidance or measures have been implemented to support those who are in self-isolation (due to case status) or restriction of movements (due to close contact status) to improve compliance and prevent the spread of SARS-CoV-2?"* [An international review]

RQ2. *"What evidence is there that measures to support those in self-isolation or restriction of movements improves compliance with these restrictive measures and prevents the spread of respiratory pathogens in a pandemic or an epidemic setting?"* [An evidence summary]

## Methods

For this rapid review, a detailed summary of the methods used is provided in the protocol: *What measures have been taken to support people in self-isolation or*

*restriction of movements to improve compliance with and effectiveness of such measures?* Available [here](#).

The findings from this rapid review were accurate as of 26 January 2021. However, it is important to note that the national and international measures identified to support those in self-isolation or restriction of movements may change as the situation and response to COVID-19 evolves.

As per the protocol, the international review (RQ1) was limited to measures reported on official government and public health agency websites, implemented to support those who are in self-isolation (due to case status) or restriction of movements (due to close contact status) to prevent the spread of SARS-CoV-2. Measures used in general pre-pandemic settings or from other pandemic settings (for example, SARS and MERS) were excluded.

Following a scoping review of the policy question, it was evident that there was a lack of evidence relating to the effectiveness of measures implemented to support those in self-isolation and restriction of movements. Therefore, for the evidence summary (RQ2), evidence of the effectiveness of measures implemented to support those in self-isolation or restriction of movements relating to other respiratory pathogens (for example, SARS-CoV and MERS) from an epidemic or pandemic situation from 2000-2021 were included. Evidence from non-respiratory pathogens or non-pandemic settings were excluded.

## **Results**

### **International review**

In total, guidance from two international agencies (the European Centre for Disease Prevention and Control (ECDC) and WHO) and 19 countries, relating to measures to support those in self-isolation or restricting their movements, were included in this review. The findings for the international review of public health guidance are categorised under the following headings:

- Psychological, addiction and safety support measures (including support for those with mental health issues, those struggling with addiction and victims of violence)
- Essential needs support measures (including access to medicines, food, accommodation, provision of care and personal protective equipment (PPE))
- Information (provision of information relating to COVID-19, self-isolation, restriction of movements, protecting oneself and others)

- Financial support measures (provision of income support, sick pay and medical certificates to enable individuals to access financial support)
- Enforcement measures (monitoring of self-isolation and restriction of movements and subsequent penalties for not adhering to the regulations).

Table 1 provides a summary of the measures to support those in self-isolation and restriction of movements identified in the international guidance for this rapid review.

Table 1. Summary of the measures to support those in self-isolation and restriction of movements identified in the review of international guidance

Measures available	Psychological, addiction and safety			Essential					Information			Financial		Enforcement	
	Mental health	Addiction	Safety	Medicines	Food	Accommodation	Provision of care	PPE	Helpline	Website	Apps	Assistance payment	Certificate	Monitoring	Fines and or prison term
<b>Countries</b>															
Austria	√	√	√	√	√				√	√		√			F (US\$2,177)
Australia	√	√	√	√		√*			√	√	√	√		√	F*, P*
Belgium	√	√	√	√	√	√	√	√	√	√		√	√	√*	F*
Canada	√*	√*	√*			√*			√	√		√			F*
Denmark	√	√	√			√			√	√		√			
England	√	√	√	√	√		√		√	√		√	√		F (US\$1,506)
Finland	√	√	√	√	√	√			√	√		√			
France	√	√	√	√	√	√	√		√	√	√	√		√	
Iceland	√			√	√	√	√		√	√		√	√		F (US\$1,832)
Ireland	√	√		√	√	√	√		√	√		√	√		
Netherlands	√	√	√	√	√	√	√		√	√		√			
New Zealand	√	√	√	√	√	√	√		√	√	√	√			F, P (US\$2,841)
Northern Ireland	√			√	√				√	√		√			F (US\$301)
Norway	√	√	√			√			√	√		√			F, P
Scotland	√	√	√	√	√				√	√		√			F (US\$723)
Singapore	√	√	√						√	√		√			F, P
Sweden									√	√		√	√		

Switzerland	√	√	√						√	√		√	√		F (US\$8,881)
Wales	√		√	√	√	√			√	√	√	√			F (US\$753)
<b>Agencies</b>															
ECDC	√	√	√	√	√	√	√	√	√	√	√	√			
WHO	√			√	√	√	√	√		√					

**Key:** \*Regional variation; Psychological, addiction and safety measures include any form of mental health support, online counselling services (including stress) support phone calls, support for those with alcohol/drug problems, safe housing and protection against violence (including domestic and child abuse); Essential measures includes provision of medicines, food, accommodation, provision of care (to children or vulnerable groups including the elderly) and personal protective equipment (PPE); Information measures include the provision of information and educational resources (including, apps, helplines and websites) for the public relating to COVID-19, self-isolation, restriction of movements, or working from home; Financial measures include any form of assistance payments (e.g. salary protection, sick pay and low-income support) and provision of certificates for cases and close contacts to ensure financial payment; Enforcement includes monitoring of those who should be self-isolating or restricting their movements to ensure they are doing so and fines or prison terms that may be enforced should an individual not adhere to the regulations.

## Psychological, addiction and safety support measures

Psychological support measures were identified for 18 of the 19 countries reviewed; this included mental health support, addiction support as well as support for victims of violence (domestic and or child abuse). This support is available to those self-isolating, restricting their movements, or those affected by restrictions in general. Available support was varied and included information leaflets, helplines, online appointments or video conferences with counsellors or psychologists. The information on international agency websites did not specify if organisations were government funded, nor did they specify which organisations existed before the COVID-19 pandemic. See Table 2 for a summary of the measures available for those who need psychological or addiction support, or for victims of violence.

Table 2. Summary of measures to support the psychological needs of those in self-isolation and restriction of movements

Countries	Psychological, addiction and safety		
	Mental health	Addiction	Safety
Austria	√	√	√
Australia	√	√	√
Belgium	√	√	√
Canada	√*	√*	√*
Denmark	√	√	√
England	√	√	√
Finland	√	√	√
France	√	√	√
Iceland	√		
Ireland	√	√	
Netherlands	√	√	√
New Zealand	√	√	√
Northern Ireland	√		
Norway	√	√	√
Scotland	√	√	√
Singapore	√	√	√
Sweden			
Switzerland	√	√	√
Wales	√		√

\*Regional variation.

In line with recommendations from the European Centre for Disease Prevention and Control (ECDC)<sup>(5)</sup> and the WHO,<sup>(6, 7)</sup> agency websites for Austria,<sup>(8)</sup> Australia,<sup>(9-12)</sup> Belgium,<sup>(13)</sup> Canada,<sup>(14, 15)</sup> Denmark,<sup>(16)</sup> England,<sup>(17, 18)</sup> Finland,<sup>(19-22)</sup> France,<sup>(23)</sup> the Netherlands,<sup>(24, 25)</sup> New Zealand,<sup>(26)</sup> Norway,<sup>(27)</sup> Scotland<sup>(28)</sup> and Switzerland<sup>(29)</sup> have listed resources for mental health support, addiction support and or support for victims of violence. Typically, the support offered is in the form of online information

portals and information sheets, as well as helplines and online counselling services. In Australia, victims of violence can access free, private counselling and support from a social worker.<sup>(10)</sup> Agency websites for Singapore<sup>(30)</sup> and Wales<sup>(31)</sup> have listed resources for mental health and victims of violence. Ireland<sup>(32, 33)</sup> and have resources for mental health support and addiction support, and Iceland<sup>(34)</sup> and Northern Ireland<sup>(35)</sup> have listed resources for mental health support. No psychological support measures were identified on agency websites for Sweden. However, it should be noted that while government agency websites may not have listed specific support measures available during the COVID-19 pandemic, this does not mean that support is not available. For example, in Ireland, support for victims of domestic abuse continues to be made available through organisations such as Safe Ireland, an organisation that aims to make Ireland safe for all citizens and existed pre-COVID-19.<sup>(36)</sup> See Appendix 1 for a more detailed overview of the measures available.

### **Essential needs support measures**

Guidance from the ECDC<sup>(5, 37)</sup> and WHO<sup>(6)</sup> highlight the importance of ensuring that individuals who are self-isolating or restricting their movements have access to daily essential needs. This encompasses access to medicines, food, accommodation, provision of care (include healthcare and childcare) and PPE; the ECDC recommend that medical face masks are used by everyone in households where there are people with symptoms of COVID-19 or confirmed COVID-19.<sup>(37)</sup> Information was available for 16 of the 19 countries reviewed, on the supports available to meet an individual's essential needs. The level of support identified on agency websites ranges from extremely comprehensive support covering all essential needs (that is, medicines, food, accommodation, provision of care and PPE) to covering fewer of these needs; see Table 3.

Table 3. Summary of measures to support the essential needs of those in self-isolation and restriction of movements

Countries	Essential				
	Medicines	Food	Accommodation	Provision of care	PPE
Austria	√	√			
Australia	√		√*		
Belgium	√	√	√	√	√
Canada			√*		
Denmark			√		
England	√	√		√	
Finland	√	√	√		
France	√	√	√	√	
Iceland	√	√	√	√	
Ireland	√	√	√	√	
Netherlands	√	√	√	√	
New Zealand	√	√	√	√	
Northern Ireland	√	√			
Norway			√		
Scotland	√	√			
Singapore					
Sweden					
Switzerland					
Wales	√	√	√		

\*Regional variation.

In Belgium, those who have trouble buying food can contact the Maintenance Claims Department of the Federal Public Service Finance. The Public Centre for Social Welfare will provide support for those unable to pay their rent, utility bills or access their medicines. They will also help with childcare and residents of Belgium can get face masks (provided by the government) from pharmacies.<sup>(38)</sup>

In Ireland, local authorities and other organisations across the country are coordinating community support for vulnerable members of the community. This includes people at higher risk from COVID-19 and those who are cocooning. Individuals can access this support by contacting their local community support team, either by telephone or email; details of which are provided on the Health Service Executive (HSE) website. This support includes collection and delivery of food, essential household items, fuel, medication and other medical or healthcare needs. Some pharmacies will provide delivery services, whereas other pharmacies will work with Local Authorities, An Post, the Gardaí and voluntary organisations to deliver medicines.<sup>(39)</sup> Accommodation is available for those who cannot self-isolate or restrict their movements at home; these individuals must be referred to the isolation facility by their GP, a hospital or the contact tracing team.<sup>(40)</sup> Similar measures are in

place for those who are homeless and need to self-isolate or restrict their movements.<sup>(41)</sup>

Austria,<sup>(42)</sup> Iceland<sup>(34)</sup> and the Netherlands<sup>(24)</sup> advise that those self-isolating or restricting their movements should ask friends or family to support them with daily needs. In instances where such support is not available, individuals should contact the Red Cross.<sup>(34)</sup> In Finland, the Social Insurance Institution offer financial support for food and necessary medical expenses as part of basic social assistance. As a rule, any additional costs for home delivery of medicines are not covered by the financial commitment. In some special situations, a financial commitment that covers home delivery costs may be provided if a healthcare professional deems home delivery necessary.<sup>(43)</sup> For those who have no accommodation, or who cannot self-isolate at home, municipality social services will arrange temporary accommodation. Authorities who are responsible for asking individuals to self-isolate or restrict their movements must contact the municipal social services if it becomes clear that the individual does not have a residence.<sup>(43)</sup>

In New Zealand,<sup>(44, 45)</sup> accommodation and financial assistance to get food is available through the Ministry of Social Development Work and Income site. Those seeking assistance do not have to be a Work and Income client. Those whose need is urgent (who need food within the next 24 to 48 hours) can contact a local food bank; funding to support this is being provided by the Ministry of Social Development. England<sup>(46)</sup> provides support in relation to medicines, food and provision of care. This service has been set up by NHS England and NHS Improvement who work with the Royal Voluntary Service and the GoodSAM app to help people with food shopping, medicines and other important items. They also have regular contact with people through frequent phone calls and enabling individuals to get access to medical appointments by offering to transport them to and from such appointments.<sup>(47)</sup> This service is available to those in self-isolation or restriction of movements, as well as other vulnerable people such as those who are cocooning.

In Northern Ireland, means-tested support is available for medicines, food and utility bills.<sup>(35, 48, 49)</sup> Wales has a web app to help individuals locate relevant help supports or services if affected by COVID-19; this includes medicines, food and accommodation.<sup>(31)</sup> In France, the government provide home visits for people who are self-isolating. The home visit is undertaken by a multidisciplinary, professional team, including a social worker and a nurse. The team offer advice and support with shopping and food if needed. Visits for the most vulnerable may also include childcare and the possibility of being rehoused during their illness.<sup>(50)</sup> Scotland has a dedicated helpline (9 am to 5 pm, Monday to Friday) to help those who are self-

isolating to access essentials such as food and medicine.<sup>(51)</sup> Australia<sup>(9, 52)</sup> provides medicines and accommodation supports (with regional variation depending on the state). In Canada, the supports available depend on the province within which an individual resides. For example, in Alberta, hotel rooms are available for people who cannot self-isolate or restrict their movements in their current homes; each case is considered by the Alberta Health Services on an individual basis to determine if they meet the criteria.<sup>(53)</sup> In Denmark, voluntary stay at an out-of-home quarantine facility is offered by local municipalities. The stay is free, but individuals must pay for food and other necessities.<sup>(16, 54)</sup> In Norway, suitable accommodation will be provided for those who cannot isolate in their own home (this includes shared halls, student housing and hotels) by the Municipal Medical Officer.<sup>(55)</sup>

While specific detail of essential needs support was not identified on agency websites for Singapore, it is noted that self-isolation of cases and restriction of movements of close contacts must be completed in purpose-built isolation centres where all essential needs, including psychological support, are met.<sup>(56)</sup> Sweden and Switzerland do not specifically detail any such support measures. As already highlighted for psychological support above, the information provided on international agency websites did not specify if organisations were government funded, nor did they specify which organisations existed before the pandemic. Moreover, if specific support measures were not listed on agency websites, it should not be interpreted that such supports were not available. See Appendix 1 for more detail on said measures.

## **Information**

The importance of effective communication of information has been shown to be paramount throughout the pandemic. Messages need to be targeted, easy to understand and accessible to all. Moreover, national communication strategies also need to equip the public with resources to combat the vast amount of misinformation about COVID-19.<sup>(57)</sup> Table 4 provides an overview of the information sources available.

Table 4. Summary of information support available to those in self-isolation and restriction of movements

Countries	Information		
	Helpline	Website	Apps
Austria	√	√	
Australia	√	√	√
Belgium	√	√	
Canada	√	√	
Denmark	√	√	
England	√	√	
Finland	√	√	
France	√	√	√
Iceland	√	√	
Ireland	√	√	
Netherlands	√	√	
New Zealand	√	√	√
Northern Ireland	√	√	
Norway	√	√	
Scotland	√	√	
Singapore	√	√	
Sweden	√	√	
Switzerland	√	√	
Wales	√	√	√

All agencies reviewed provided some form of information support for those self-isolating or restricting their movements. In addition to specific information to support those required to self-isolate or restrict their movement, information sources typically provided comprehensive information regarding a wide range of COVID-19 related issues. The most common form of information support available could be accessed via helplines or websites; some countries (Australia,<sup>(9, 12)</sup> France,<sup>(58)</sup> New Zealand<sup>(26)</sup> and Wales<sup>(31)</sup>) also provided information through mobile phone applications. See Appendix 1 for a more detailed overview of the measures available.

### **Financial support measures**

All agencies reviewed provided details of financial support available to those who are self-isolating or restricting their movements. Some countries provide individuals with a certificate informing them of their need to self-isolate or restrict their movements; this is to enable them to access financial supports that are available; see Table 5.

Table 5. Summary of financial support available to those in self-isolation and restriction of movements

Countries	Financial	
	Assistance payment	Certificate
Austria	✓	
Australia	✓	
Belgium	✓	✓
Canada	✓	
Denmark	✓	
England	✓	✓
Finland	✓	
France	✓	
Iceland	✓	✓
Ireland	✓	✓
Netherlands	✓	
New Zealand	✓	
Northern Ireland	✓	
Norway	✓	
Scotland	✓	
Singapore	✓	
Sweden	✓	✓
Switzerland	✓	✓
Wales	✓	

The amount payable to individuals varies between countries and is typically a fixed amount rather than a percentage of the individual's salary. For example, in Australia, the Pandemic Leave Disaster Payment is a taxable income which provides US\$1,040 for each 14-day period of isolation; a new claim must be made for each 14-day period.<sup>(10)</sup> In Canada, the Canada Recovery Sickness Benefit gives income support for those self-isolating of US\$422 (US\$379 after taxes withheld) per week for up to a maximum of two weeks.<sup>(59)</sup> In England,<sup>(60)</sup> Scotland<sup>(51)</sup> and Wales,<sup>(61)</sup> a single payment of US\$753 is available for low income recipients who cannot work from home and need to self-isolate or restrict their movements. Means testing is conducted by local councils and the payment is liable for tax, but not for national insurance contributions. Another example is Austria, where employees who cannot work from home when self-isolating can use existing sick leave pay to maintain income.<sup>(62)</sup> In Ireland, the Employment Wage Subsidy Scheme, provides a flat-rate subsidy to qualifying employers based on the numbers of eligible employees on the employer's payroll. The scheme provides income support to eligible employers, with respect to employees on their payroll, where the business activities have been negatively impacted by the COVID-19 pandemic.<sup>(63)</sup> Moreover, US\$508 per week is available to employees or self-employed people who are self-isolating; to apply, a

medical certification is required.<sup>(64)</sup> See Appendix 1 for a more detailed overview of the measures available.

## Enforcement

Of the 19 agencies reviewed, only Australia,<sup>(65)</sup> Belgium<sup>(66)</sup> and France<sup>(67)</sup> report monitoring those who should be self-isolating or restricting their movements (subject to regional variation). Austria,<sup>(42)</sup> Australia,<sup>(11, 65, 68-70)</sup> Belgium,<sup>(71, 72)</sup> Canada,<sup>(53)</sup> England,<sup>(18)</sup> Iceland,<sup>(73)</sup> New Zealand,<sup>(74)</sup> Northern Ireland,<sup>(75)</sup> Norway,<sup>(76)</sup> Scotland,<sup>(77)</sup> Singapore,<sup>(78)</sup> Switzerland<sup>(79)</sup> and Wales<sup>(80)</sup> report the use of fines and or prison terms (Australia,<sup>(11, 69, 70)</sup> New Zealand,<sup>(74)</sup> Norway<sup>(76)</sup> and Singapore<sup>(78)</sup>) for non-compliance to the regulations; the fine imposed varies by country and in some cases by state or province (namely, Australia, Belgium and Canada). Table 6 provides a summary of the enforcement measures used to encourage compliance to regulations for self-isolation and restriction of movements. See Appendix 1 for a more detailed overview.

Table 6. Summary of enforcement measures used to encourage compliance to regulations on self-isolation and restriction of movements

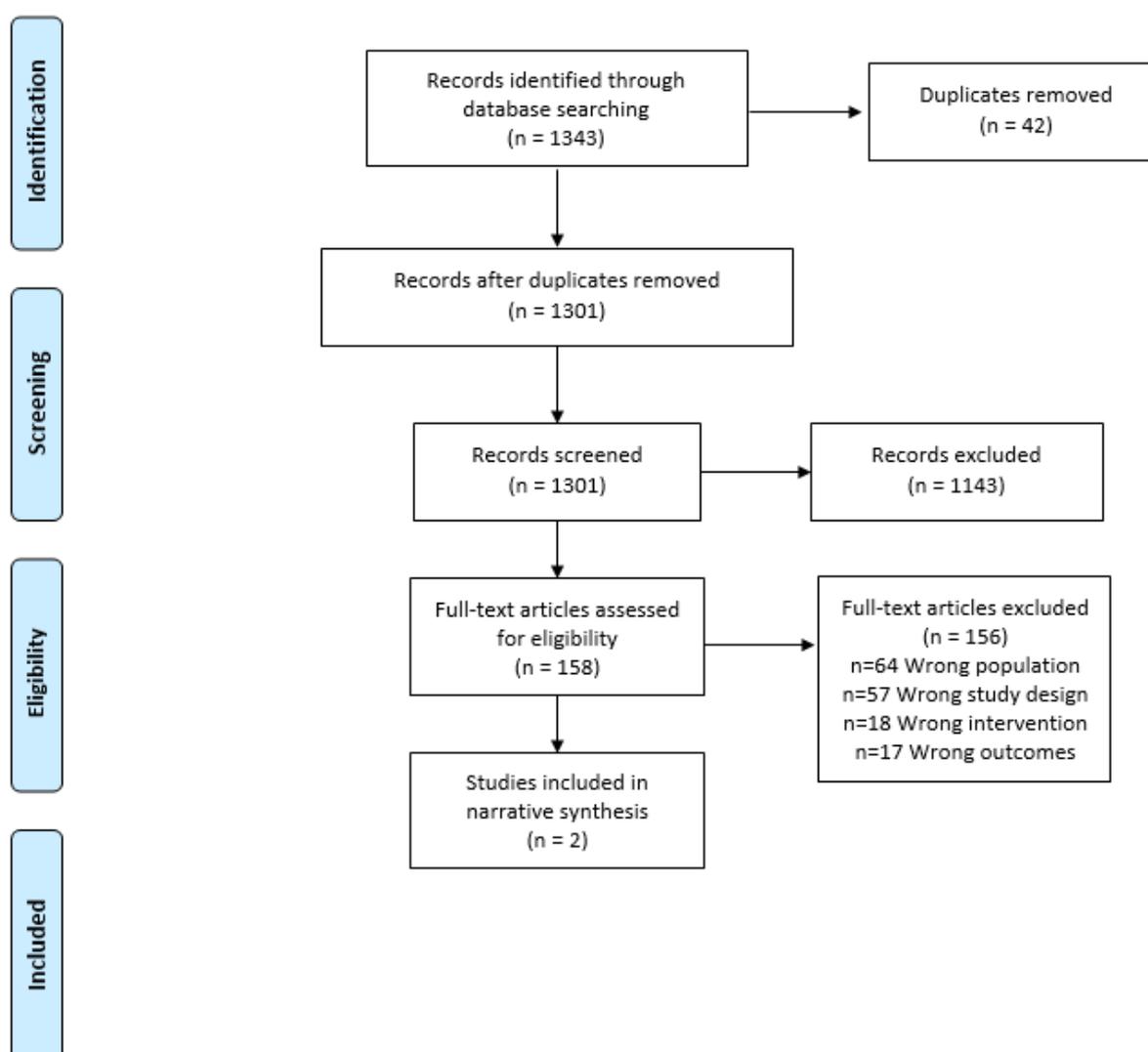
Countries	Enforcement	
	Monitoring	Fines and or prison term
Austria		F (US\$2,177)
Australia	√	F*, P*
Belgium	√*	F*
Canada		F*
Denmark		
England		F (US\$1,506)
Finland		
France	√	
Iceland		F (US\$1,832)
Ireland		
Netherlands		
New Zealand		F, P (US\$2,841)
Northern Ireland		F (US\$301)
Norway		F, P
Scotland		F (US\$723)
Singapore		F, P
Sweden		
Switzerland		F (US\$8,881)
Wales		F (US\$753)

\*Regional variation.

## Evidence summary

Across all the databases searched, the collective search up until 20 January 2021 resulted in 1,343 citations; the search strategy included terms for other respiratory pathogens (for example, SARS-CoV and MERS) during an epidemic or pandemic situation from 2000-2021. Following removal of duplicates 1,301 citations were screened for relevance, with 158 full-texts assessed for eligibility and 156 subsequently excluded. See Figure 1 for a PRISMA flow diagram of the studies included in this evidence summary. Accordingly, two studies were identified for inclusion in this evidence summary.

Figure 1. PRISMA flow diagram of included studies



Both studies included in this evidence summary, by Kavanagh et al.,<sup>(81, 82)</sup> were conducted in the school setting and used the same dataset, but reported on

different measures implemented to support self-isolation and restriction of movements. The studies were conducted in Australia and utilised survey data collected in November and December 2009. The data collected related to quarantine recommendations implemented from 22 May 2009 to 2 June 2009 during the 2009 H1N1 pandemic. Voluntary home quarantine of cases and close contacts was the main non-pharmaceutical intervention used to limit transmission of (H1N1)pdm09 flu virus during the initial response to the outbreak of the disease in Australia. The trigger for closure of mainstream schools was two or more confirmed cases in separate classes.<sup>(81, 82)</sup>

The first study,<sup>(82)</sup> published in 2011, reported on the compliance with restrictive measures as a result of information on quarantine having been provided. The study included data from 297 families; 49% of respondents' children were under 12 years old, 54% of respondents were male and 17% had a confirmed case of (H1N1)pdm09 flu virus in their household.<sup>(82)</sup> Overall, 90% (166/297) of participants understood what they were meant to do during the quarantine period. This proportion was significantly higher in households with cases than in households with contacts only (98%, 95% CI 93%-99% vs 88%, 95% CI 84%-91%,  $p < 0.001$ ). Nearly 90% of parents received information about quarantine from the school and 63% obtained information from the health department. The next most common information source was the media (44%). Overall, most families used multiple sources of information; only one household reported that they did not use any sources. Regarding the source of information used, 24% used one source, 32% used two, and 44% used three or more sources of information.<sup>(82)</sup> Approximately two-thirds of participants reported that they found the information from the health department, schools and health service providers useful or extremely useful, whereas only 38% gave media sources this rating. Ninety percent of participants reported that they understood what they were meant to do with a minority (10%) reporting that they did not know what to do). Full compliance with quarantine recommendations within their household was reported by 55% of all participants. Compliance was higher in the households that reported understanding what they were meant to do during the quarantine period compared with those who did not (55% vs 35%, odds ratio (OR) 2.27, 95% confidence interval (CI) 1.35-3.80).<sup>(82)</sup>

The second study,<sup>(81)</sup> published in 2012, included data from 133 households, all of whom included a resident parent that was employed during the quarantine period. This study reported on the compliance with restrictive measures as a result of access to paid sick leave or paid leave to look after quarantined children. At the time of data collection, 6% of respondents had a confirmed case of (H1N1)pdm09 flu virus in their household. A larger proportion of households with access to leave had a parent who took time off work to care for a child (58% (47/81) vs 42% (22/52)).

Half of all households were fully compliant with quarantine recommendations. Compared to households without access to sick leave or leave to look after quarantined children, households with access to leave appeared more likely to have all quarantined members stay at home for most of the time on all days during the quarantine period (88% compared with 75%) (OR 2.07, 95% CI 0.82-5.23,  $p=0.12$  after adjustment for parental structure and parental education).<sup>(81)</sup> In terms of the relationship between taking time off and quarantine compliance (independent of access to leave), quarantined members of households in which a parent took time off work were less likely to make trips to populated public spaces during the quarantine period (97% vs 84%) and these households were more likely to have all quarantined members stay at home for most of the time on all days during the quarantine period (88% vs 77%).<sup>(81)</sup> After adjustment for parental education and parental structure of households, taking time off work was associated with over double the odds of staying at home on all days (OR 2.47, 95% CI 1.17–5.22,  $p=0.02$ ) and seven times the odds of not making trips outside the home (OR 7.20, 95% CI 1.42–36.51,  $p=0.02$ ). Taking time off work was not, however, associated with full compliance.<sup>(81)</sup>

## **Quality appraisal**

A number of issues were identified relating to the methodological quality of the two studies included in this review. Both studies<sup>(81, 82)</sup> are observational cross-sectional studies meaning they are particularly vulnerable to biases (for example, recall bias) and may not incorporate important confounding factors. In the 2011 study by Kavanagh et al.,<sup>(82)</sup> it was unclear whether the exposure (that is, information on quarantine) was measured in a valid and reliable way. In the 2012 study by Kavanagh et al.,<sup>(81)</sup> there were no demographic data presented for the study population. In both studies,<sup>(81, 82)</sup> it was unclear if outcomes (that is, compliance with recommendations and reduction in spread of infection) were measured in a valid and reliable way.

## **Discussion**

### **Overview of international review**

This rapid review consisted of two parts, the first was a review of international guidance which identified five broad categories of measures that are available to support those who are in self-isolation or restriction of movements. Although agency websites were reviewed to identify measures to support those in self-isolation or restriction of movements, there is a possibility that some measures may be in place, but are not documented on the websites reviewed. While all countries provide a range of supports, these appear to differ in intensity. For example, some countries

primarily target their supports at vulnerable individuals or those who are ordinarily dependent on state-aid. Overall, Ireland compares favourably to the other countries reviewed in terms of the support offered. In general, support is provided either by a mixture of state agencies or by charitable bodies who have been provided with state support to fund their activities; many countries are leveraging off existing support services rather than establishing de novo services for COVID-19. Most services appear reactive, with the requirement for the individual to seek assistance, but some are proactive in that they target individuals known to be medically or financially vulnerable. In addition to using supportive measures to encourage compliance to self-isolation and restriction of movement recommendations, punitive measures were also identified; these included monitoring of cases and contacts as well as fines and or prison terms for breaching the regulations.

Similar to this international review, a scoping review by Patel et al. (published 20 January 2021) reported the government support available across 20 countries, for COVID-19 related self-isolation and restriction of movements.<sup>(83)</sup> Four main types of support were identified, namely: financial support (that is, one-off financial support for self-isolating individuals), employment benefits (that is, paid sick leave), practical support (which includes food, medicines and accommodation) from local municipalities and the Red Cross, and comprehensive support (for example, care packages that include daily necessities and sanitary supplies and quarantine facilities for those who cannot isolate at home).<sup>(83)</sup> The authors found limited data on compliance with self-isolation or restriction of movements; self-reported compliance varied from 18% in the UK to 65% in men and 72% in women in Norway. Educational level, age, gender or county of residence did not influence compliance with said recommendations. They concluded that governments should consider delivery of a comprehensive package of practical support and enhanced monitoring of compliance to the recommendations. Moreover, the authors advocated for additional capacity for public health authorities to undertake supportive supervision of compliance and identification of those in need of support.<sup>(83)</sup>

An audit by the HSE in Ireland, undertaken in November 2020, assessed compliance with self-isolation for cases and restriction of movements for contacts by assessing the behaviour, knowledge, and attitude of a random sample of cases and contacts identified by the national contact management programme (CMP). Approximately 95% of cases reported compliance with self-isolation after the test and before being informed of the result while approximately 97% of cases reported compliance after being informed of a positive test result by the CMP. However, self-reported compliance was lower (83%) while waiting for the test in those referred for testing due to symptoms. With respect to restriction of movement, identified close contacts were asked about compliance with restriction of movement during the interval

between when they were informed by CMP that they were a close contact to the time of testing. They were not asked about compliance with recommendations throughout the 14-day period (that is, the recommended restriction of movement duration at that time). Respondents reported high compliance, with approximately 87% reporting compliance. Differences in age, gender, region of Ireland, employment status, education level and household composition did not influence compliance. While these values appear to be high, compliance with self-isolation and restriction of movement recommendations were self-reported and therefore may be influenced by social desirability bias.<sup>(84)</sup>

In a commentary from the Nuffield Trust, a number of key themes were identified as having an impact on compliance with self-isolation.<sup>(85)</sup> Firstly, the need to work for financial reasons is one of the most widely cited reason in the research as to why people do not self-isolate appropriately, particularly in those of lower socio-economic status. Secondly, lack of suitable accommodation and essential supplies is another common reason for people being unable to self-isolate. Thirdly, while many countries have reduced the length of self-isolation required for cases in an effort to improve compliance, the evidence of improved compliance is mixed. In a review by Webster et al., the authors reported that reduced length of isolation or restriction of movements did not affect compliance with recommendations during the H1N1 pandemic in Australia.<sup>(86)</sup> Fourthly, monitoring of compliance with the regulations has been introduced along with penalties for non-compliance. Again, the evidence of the effectiveness of this measure is mixed and largely dependent on the culture within which the measures are implemented.<sup>(85)</sup> In general, individualism and independence is encouraged in Western culture, whereas in Asian cultures there is greater emphasis on collectiveness and interdependency.<sup>(87)</sup> Furthermore, research has highlighted differences in terms of more strict social norms in countries like China, Japan and Singapore compared with Italy and the US, whereby there is punishment for breaking regulations.<sup>(88)</sup> As such, individuals may be more compliant compared with those in 'looser', western cultures.<sup>(87)</sup>

## **Overview of evidence summary**

The second element of this rapid review was an evidence summary on the effectiveness of measures to support those in self-isolation or restriction of movements, that is, increased compliance with recommendations and reduced spread of infection. Whilst there was a lack of primary studies that met the inclusion criteria for this evidence summary, a number of reviews were identified. One component of a report by the National Academies of Sciences, Engineering, and Medicine published in July 2020, was to conduct a mixed-methods review of implementing quarantine (self-isolation and or restriction of movements) to reduce or stop the spread of a contagious disease.<sup>(89)</sup> The authors used quantitative

evidence from research studies to determine the effectiveness of strategies to improve compliance with quarantine recommendations.<sup>(89)</sup> The evidence predated the COVID-19 pandemic, and included other 'contagious' diseases, such as SARS, MERS, Ebola, smallpox and measles. Three studies were included in the effectiveness analysis, of which two are included in the evidence summary section of this rapid review.<sup>(81, 82)</sup> The third was not included as it was limited to an assessment of the relationship between household characteristics and compliance with quarantine recommendations rather than assessing the effectiveness of any measures.<sup>(90)</sup> The report by the National Academies of Sciences, Engineering, and Medicine, concluded that compliance with quarantine recommendations can vary by culture, disease, and socioeconomic status. Furthermore, evidence from the three studies on effectiveness of strategies to improve compliance provided low certainty evidence that such strategies (for example, risk communication and messaging and access to employment leave) improve compliance with quarantine recommendations.<sup>(89)</sup>

### **Additional considerations**

Others reviews identified did not report on the effectiveness (that is, compliance with regulations and reduction in spread of infection) of measures to support those in self-isolation or restriction of movements. However, they provided an insight into the measures that study participants perceived to be of support during self-isolation and restriction of movements. DiGiovanni et al. conducted a mixture of structured and unstructured interviews as well as focus groups with over 1,700 residents of the Greater Toronto Area, Canada, who were affected by the public health measures implemented to control the SARS pandemic in 2003; participants included the general public, government officials, healthcare workers and students.<sup>(91)</sup> The authors identified a number of factors that impeded compliance with the recommendations. Firstly, the overriding theme was fear of loss of income, especially in those who were not convinced that their quarantine was necessary. The absence of monitoring (that authorities claimed would be enforced) invited non-compliance, as did lack of support with obtaining essential items (for example, food). Inconsistency in information provision or in the application of recommendations between jurisdictions created confusion and lack of confidence even among those who intended to comply. Stress and stigma associated with quarantine (or the restriction of movements) was also cited as a reason for non-compliance.<sup>(91)</sup> Similarly, in a review by Webster et al.,<sup>(86)</sup> published in March 2020, the most common factors that increased compliance with isolation recommendations during an infectious disease outbreak were related to improved knowledge about the disease and purpose and benefit of isolation, as well as the provision of adequate essential supplies and financial support.<sup>(86)</sup>

The psychological impact of imposed self-isolation is well cited in the research literature. In a review by Brooks et al.,<sup>(92)</sup> the negative psychological effects of self-isolation included post-traumatic stress symptoms, confusion and anger. Such effects were compounded by extended durations of isolation, fears of infection, frustration, boredom, inadequate supplies, lack of information, financial pressures and stigma.<sup>(92)</sup> The authors concluded that if isolation is indicated, the duration of isolation should not be any longer than necessary, and that adequate information and supplies should be provided.<sup>(92)</sup> In the same way that the provision of adequate, factual information is important in empowering individuals to adhere to self-isolation recommendations, warning people about misinformation and providing them with counterarguments against false information and conspiracy theories is equally important.<sup>(90)</sup>

The importance of information provision, and consistency in the information provided has also been cited by the British Psychological Society (BPS) as being key to supporting people in self-isolation and restriction of movements.<sup>(93)</sup> In their guidance on encouraging self-isolation to prevent the spread of COVID-19, the BPS highlight the importance of empowering people to self-isolate through effective communication of what they need to do and why, how and when they need to do it. They note that provision of information should clearly define the differences between self-isolation and social distancing and inform individuals of the symptoms they should be looking for.<sup>(93)</sup> Additionally, guidance from the BPS also emphasises the need to support people in self-isolation by ensuring they have access to essential supplies (for example, food, medicine, accommodation), as well as access to healthcare services should they need assistance, or financial support and income protection. Employers and community groups are encouraged to provide support to those who need it, such as older people or vulnerable groups.<sup>(93)</sup> Penalties for lack of compliance with the regulations are not encouraged. Instead, people should be made aware of the practical and emotional support that is available to them throughout this time and the benefits of self-isolation for themselves and society as a whole should be outlined.<sup>(93)</sup> As such, promoting solidarity and altruism through community engagement, outreach initiatives and collaboration on communication strategies is vital in ensuring compliance to any intervention.<sup>(94)</sup>

In addition to the provision of measures to support those in self-isolation, (for example, adequate essential supplies and financial support) there is a need to effectively communicate the existence of such support measures to help individuals feel prepared should they need to self-isolate. Some countries provide this information through Web applications (apps) that utilise conditional logic. Such apps enable people to identify the social and financial supports that are both available and applicable to their specific situation. Research shows that individuals cope better

with changes in lifestyle when they plan for said changes; this has also been shown to enable better compliance with public health guidance.<sup>(95)</sup>

In a study conducted in Ireland, researchers hypothesised that, individuals would have increased confidence in their ability to self-isolate if they used an online tool (or decision aids) to help them make a plan and develop a routine for self-isolation.<sup>(96)</sup> The study, conducted in April 2020 (n=500 individuals), tested three interventions to help individuals decide whether they need to self-isolate, be confident in their ability to self-isolate should they need to, and manage a household in which an individual needs to self-isolate.<sup>(96)</sup> The authors reported that the behaviourally informed decision aids generated statistically significant, positive outcomes and can be used to support self-isolation during the COVID-19 pandemic. As such, the findings from the study have been incorporated into social media campaigns by the Department of Health and HSE in Ireland.<sup>(96)</sup>

While yet to formally publish, a follow-up study of 1,000 individuals living in Ireland was undertaken in July 2020 which aimed to understand an individual's willingness to self-isolate.<sup>(97)</sup> Study participants were presented with various scenarios relating to symptom presentation and asked to decide on the speed with which they would fully self-isolate and how quickly they would contact their GP. The unpublished results showed that less than 40% of individuals with one of the main COVID-19 symptoms (fever, cough, shortness of breath, change and or loss of taste and or smell) would self-isolate immediately; 50% would contact their GP.<sup>(97)</sup> Even with two or more of the main COVID-19 symptoms, only one in three individuals would self-isolate immediately and one in four would contact their GP. The authors reported that being female, having a degree and being an Irish national were independently associated with increased likelihood of self-isolating immediately or contacting the GP. The authors hypothesised that differences observed between Irish nationals and non-Irish nationals could be explained by non-Irish nationals not being registered with a GP.<sup>(97)</sup> In the same sample, approximately 90% of individuals were aware that they could arrange a COVID-19 test by calling their own GP; however, only 30% knew they could arrange a COVID-19 by calling any GP or by calling an out-of-hours GP service.<sup>(98)</sup> Furthermore, almost 50%, (particularly those aged less than 40 years) thought they could be charged for an over-the-phone consultation about COVID-19 symptoms, and 36% thought they could be charged if a COVID-19 test was indicated; this was more common in women, compared to men, and more common in those who were not Irish nationals.<sup>(98)</sup> Researchers recommended that test and trace staff should be utilised to direct individuals to available resources should they have to self-isolate or restrict their movements. Likewise, human resources departments should also be utilised to direct employees to available resources should they need to self-isolate or restrict their movements.<sup>(98)</sup>

## **Conclusion**

This rapid review identified five categories of measures available to support individuals in self-isolation or restriction of movements. At a country level, there appears to be variation in the range and intensity of supports offered, the mechanisms by which the supports are offered, whether support is proactive or reactive, and if supports are universal or preferentially targeted at vulnerable groups; overall, Ireland compares well in both the range and extent of supports offered.

Measures to support individuals in self-isolation or restriction of movements aim to reduce spread of infection by improving compliance with recommendations and or regulations. At the time of writing there is a lack of evidence from primary research studies relating to the effectiveness of these measures either in increasing compliance or in reducing spread of infection. No data were identified relating to the effectiveness of measures on agency websites. While not contributing to evidence of effectiveness, data from qualitative studies report that improved knowledge about the disease and purpose of the recommendations, as well as the provision of adequate essential supplies and financial support are perceived as being of most importance by individuals, to support them in self-isolation or restriction of movements. Additionally, signposting to available resources is key to helping individuals plan for self-isolation and be confident in their ability to do so effectively.

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## Appendix 1: Data extraction table for RQ1 international review

Country/organisation	Measures of support available
<p><b>Country:</b> Austria  <b>Organisation:</b> Federal Ministry of Social Affairs, Health, Care and Consumer Protection, Austria  <b>Title:</b> Coronavirus - Psychological Help  <b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b> 7 January 2021</p>	<p><b>Mental health support</b>  Clinical psychologists and health psychologists are available for your questions and personal concerns on the phone and by e-mail.</p> <p><b>Information sheets</b>  The Professional Association of Austrian Psychologists (BÖP) has created information sheets that show how to deal better psychologically with the current challenges. Currently available information sheets are available on the following topics: Domestic isolation and quarantine, Home office: Working from home during the corona pandemic, Corona pandemic: psychological tips for dealing with unemployment, COVID-19: To the workplace despite the corona pandemic.</p> <p><b>Information portals</b>  The Healthy Austria Fund "Together against the Coronavirus" is a portal is support neighbourhood cohesion  The Freiwilligenweb.at platform is set up by the Ministry of Social Affairs for neighbourhood aid initiatives or loose associations of volunteers to make their aid known to others. The oesterreich.gv.at portal provides comprehensive range of advice and support available throughout Austria. The portal also provides a comprehensive overview of social help offers in connection with the coronavirus with information and hotlines about Austria-wide initiatives as well as help offers from the federal states.</p> <p><b>Support for people experiencing violence</b>  An online toolbox for victim protection groups provides lists of women's shelters, women's emergency calls and advice centres for domestic violence and or abuse and sexual violence sorted by federal state. The violence info.at portal of the Federal Ministry of Labour, Family and Youth serves as a discussion forum for current topics in violence prevention, and also the addresses of contact points and initial advice. The Möwe child protection centres provide professionally consultation at 5 locations in Vienna and Lower Austria. Online advice is also available at <a href="https://die-moewe.beranet.info">https://die-moewe.beranet.info</a></p> <p><b>Support for children of mentally ill parents</b>  The KIPKE support offer is aimed at children and young people under the age of 18 if the mother or father is mentally ill or has mental problems - or another family member is mentally ill or has psychological problems.</p> <p><b>Support for family carers</b></p>

Country/organisation	Measures of support available
	<p>Caregiving relatives who are psychologically stressed due to the home care situation can take advantage of <a href="#">consolations</a> with relatives at home, at another location or by telephone. If necessary, up to 3 appointments are possible free of charge.</p> <p><b>Suicide prevention support</b> First aid tips, Emergency contacts and Help offers as well as further information on coping with this emergency situation.</p> <p><b>Austrian addiction aid compass</b> The Addiction Aid Compass is an electronic directory and currently provides information on drug support facilities and facilities for the treatment of alcohol addiction disorders.</p>
<p><b>Country:</b> Austria <b>Organisation:</b> Federal Ministry of Social Affairs, Health, Care and Consumer Protection, Austria <b>Guidance title:</b> FAQ: work, education, economy <b>URL:</b> <a href="#">Link</a> <b>Date published/updated:</b> 24 November 2020</p>	<p><b>Financial support while self-isolating</b> Employees who cannot work from home when self-isolating can use existing sick leave pay to maintain income. In addition, all self-employed and employed persons can assert loss of earnings.</p>
<p><b>Country:</b> Austria <b>Organisation:</b> Federal Ministry of Social Affairs, Health, Care and Consumer Protection, Austria <b>Guidance title:</b> FAQ: tests and quarantine <b>URL:</b> <a href="#">Link</a> <b>Date published/updated:</b> 15 January 2021</p>	<p><b>Support accessing essentials while isolating</b> Helpline (7 am to 7 pm) available to help in maintaining the supply of food and medication which is managed by the Austria team (initiative by the Red Cross and Hitradio Ö3). Alternatively state social services can help.</p> <p><b>Penalties and fines</b> Any violations will be punished as administrative offenses. Fines of up to €1450 can be imposed. In addition, the provisions of Sections 178 and 179 of the Criminal Code (endangering people from communicable diseases) may be applicable.</p>
<p><b>Country:</b> Australia <b>Organisation:</b> Australian Government</p>	<p><b>Support accessing essentials while isolating</b> Home delivery of medicines which are available with a Medicare Card is available to those isolating. The service is free to use once a month. Pharmacies may charge a fee for more frequent deliveries.</p>

Country/organisation	Measures of support available
<p><b>Guidance title:</b> Support During Covid-19  <b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b> 19 January 2021</p>	<p><b>Mental health support</b>                      Dedicated National Coronavirus support helpline and website (Head to Health) with resources as well as sessions for those experiencing serious mental health.</p> <p><b>Information portals</b>                      Coronavirus Australia App - Stay up to date with official information and advice about the COVID-19 situation, check symptoms and get notified when urgent information and updates are published.</p> <p><b>Support for people experiencing violence</b>                      Counselling support for families affected by, or at risk of experiencing, domestic and family violence including the national domestic, family and sexual violence counselling service, the national counselling service for men that provides support for emotional health and relationship concerns for men affected by or considering using violence, program to support particularly vulnerable cohorts such as victims of human trafficking, forced marriage, slavery and slavery-like practices, and support programs for women and children experiencing violence to protect themselves to stay in their homes, or a home of their choice, when it is safe to do so.</p>
<p><b>Country:</b> Australia  <b>Organisation:</b> Australian Government Department of Health  <b>Guidance title:</b> Isolation for coronavirus (COVID-19)  <b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b> 1 February 2021</p>	<p><b>Information Portal</b>                      This website is an information portal during COVID-19. Not specific to those self-isolating or in quarantine.</p> <p><b>Support App</b>                      Link to information about the Australian Government WhatsApp channel for COVID-19. Provides the latest news, case numbers, symptom check information, and support for yourself, your family and friends</p> <p><b>Information resources</b>                      Contains a link to downloadable fact sheets including links to websites, for example, <a href="http://www.headtohealth.gov.au">www.headtohealth.gov.au</a>.</p> <p><b>Support Helpline</b>                      National coronavirus and COVID-19 vaccine helpline. A helpline for COVID-19 or COVID-19 vaccines.</p> <p><b>Mental Health Support</b>                      Link out to a website for looking after your mental health during coronavirus restrictions</p> <p><b>Support accessing essentials while isolating</b>                      Link to information on options for getting medicine during COVID-19 restrictions, including digital copy prescriptions, home delivery services, and getting medicine from a pharmacy in person. Includes a section on delivery service for vulnerable groups and people in isolation.</p>

Country/organisation	Measures of support available
<p><b>Country:</b> Australia  <b>Organisation:</b> Australian Government Department of Health  <b>Guidance title:</b> Head to Health  <b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b> 1 April 2020</p>	<p><b>Information Portal</b>                      Information on where to find support during COVID-19, including mental health resources and where to find help.</p>
<p><b>Country:</b> Australia  <b>Organisation:</b> Australian Government  <b>Guidance title:</b> Pandemic Leave Disaster Payment  <b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b> 12 December 2020</p>	<p><b>Financial support while self-isolating</b>                      The Pandemic Leave Disaster Payment is taxable income which provides \$1,500 for each 14 day period of isolation. New claim must be made for each 14 day period.</p> <p><b>Support for people experiencing violence</b>                      Free, private counselling and support with a social worker.</p>
<p><b>Country:</b> Australia  <b>Organisation:</b> State Government of South Australia  <b>Guidance title:</b> Self-Isolation and Quarantine Arrangements COVID-19 Accommodation and Support Services  <b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b> 12 May 2020</p>	<p><b>Support in accessing accommodation while isolating</b>                      SA Housing Authority (SAHA) as the Emergency Relief Functional Support Group (ERFSG) under the state emergency management arrangements will supply appropriate emergency accommodation to those who require accommodation support who are in self-quarantine.</p>
<p><b>Country:</b> Australia  <b>Organisation:</b> Queensland Government.  <b>Guidance title:</b> Self-isolation for Diagnosed Cases of COVID-19 Direction (No. 4)  <b>URL:</b> <a href="#">Link</a></p>	<p><b>Penalties and fines</b>                      A person to whom a public health direction, including <i>Self-isolation for Diagnosed Cases of COVID-19 Direction (No. 4)</i>, applies must comply with the direction unless the person has a reasonable excuse. Maximum penalty—100 penalty units or 6 months imprisonment.</p>

Country/organisation	Measures of support available
<p><b>Date published/updated:</b> 30 December 2020</p>	
<p><b>Country:</b> Australia  <b>Organisation:</b> State Government of South Australia  <b>Guidance title:</b> Self isolation and quarantine  <b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b> 8 December 2020</p>	<p><b>Monitoring</b>            South Australia Health and South Australia Police are working together to monitor people who should be in quarantine and fines may be issued to people who breach these directives.</p> <p><b>Penalties and fines</b>            A \$1,000 on-the-spot fine can be issued to anyone breaching self-quarantine requirements.</p>
<p><b>Country:</b> Australia  <b>Organisation:</b> State Government of Victoria  <b>Guidance title:</b> Isolation and quarantine – extra help and support  <b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b> 19 January 2021</p>	<p><b>Penalties and fines</b>            A fine of \$4,957 can be issued to a person found to have breached the requirement to isolate or quarantine for a <i>second</i> or <i>subsequent</i> time. Personnel from the Department of Health and Human Services make daily contact to those isolating via text and phone calls. Police conduct random spot checks.</p> <p><b>Monitoring</b>            Personnel from the Department of Health and Human Services make daily contact to those isolating via text and phone calls. Police conduct random spot checks.</p>
<p><b>Country:</b> Australia  <b>Organisation:</b> State Government of Victoria  <b>Guidance title:</b> Test isolation and worker support payments  <b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b> 30 November 2020</p>	<p><b>Financial support while self-isolating</b>            Victorian workers (including guardians and carers) can apply for a \$450 COVID-19 Test Isolation Payment that provides financial support while they self-isolate to wait for the results of a COVID-19 test. This can be claimed in addition to \$1500 Pandemic Leave Disaster Payment.</p> <p><b>Support for business during self-isolation of employees</b>            Employers must support their employees to self-isolate if they are unwell or have been tested for COVID-19. Employers can contact Business Victoria for advice and possible staffing support, or referrals to the Working for Victoria employment scheme.</p>
<p><b>Country:</b> Australia  <b>Organisation:</b> State Government of New South Wales  <b>Guidance title:</b> Self-isolation rules  <b>URL:</b> <a href="#">Link</a></p>	<p><b>Information portal</b>            This website provides an overview of what is required of those self-isolating. It has links to Pandemic Leave Disaster Payment New South Wales, Domestic and family violence support as well as a number of information helplines. There is also links relating to travel, symptoms and testing and mental wellbeing.</p> <p><b>Support for people experiencing violence</b></p>

Country/organisation	Measures of support available
<p><b>Date published/updated:</b> 5 January 2021</p>	<p>There is a link for those who are experiencing domestic violence, there are a number of helplines provided as well as online chat services. Those who feel unsafe, don't have to stay at home.</p> <p><b>Support helplines</b> There are telephone numbers for a NSW call service as well as a Coronavirus Disability Information Helpline</p> <p><b>Mental Health Support</b> A link is provided that takes the user to a 'Your mental wellbeing' website. This website contains links to coronavirus phone counselling services as well as online forums on the topic of 'coping during the Coronavirus outbreak'. They provide a link to other mental health supports (Beyond Blue website), links to websites and helplines related to domestic and family violence and a list of mental wellbeing services provided by the NSW government including helplines, alcohol and drug information service NSW, mental health counselling supports as well as information for employers to provide a mental health work environment during COVID-19.</p> <p><b>Penalties and fines</b> The self-isolation rules are enforceable under the Public Health (COVID-19 Self-Isolation) Order. Not following the rules is a criminal offence and attracts heavy penalties. For individuals, the maximum penalty is \$11,000, 6 months in prison, or both with a further \$5500 fine for each day the offence continues.</p>
<p><b>Country:</b> Australia <b>Organisation:</b> State Government of Northern Territories <b>Guidance title:</b> Self-quarantine - non-compliance - Darwin <b>URL:</b> <a href="#">Link</a> <b>Date published/updated:</b> 5 January 2021</p>	<p><b>Penalties and fines</b> The self-isolation rules are enforceable under the Public Health (COVID-19 Self-Isolation) Order. Not following the rules is a criminal offence and attracts heavy penalties. For individuals, the maximum penalty is \$11,000, 6 months in prison, or both with a further \$5500 fine for each day the offence continues.</p>
<p><b>Country:</b> Belgium <b>Organisation:</b> Government of Belgium <b>Guidance title:</b> I'm looking for support <b>URL:</b> <a href="#">Link</a></p>	<p><b>Food, housing and other essential needs</b> For those who have trouble buying food, they should contact the Maintenance Claims Department of the Federal Public Service Finance, either by telephone or email or at one of the information centres.</p> <p>The Public Centre for Social Welfare can provide support for those unable to pay their rent, utility bills or access their medicines. The Public Centre for Social Welfare can also provide support with childcare.</p>

Country/organisation	Measures of support available
<b>Date published/updated:</b> Not reported	Residents can get face masks (provided by the government) from pharmacies.
<b>Country:</b> Belgium <b>Organisation:</b> Government of Belgium <b>Guidance title:</b> Quarantine and self-isolation <b>URL:</b> <a href="#">Link</a> <b>Date published/updated:</b> Not specified	<b>Self-isolating certificate for employment</b> A 'quarantine certificate' is issued to those who are unable to work from home in order to receive benefits. <b>Financial support while self-isolating</b> Those unable to telework, can claim temporary unemployment benefits. Self-employed people who are unable to work due to quarantine may invoke a bridging right.  <b>Penalties and fines</b> Fines and punishment can be issued to people who break rules for quarantine or isolation. Local authorities can take actions directly. They cannot go against the legislation of Federal and Federated authorities, but they can decide for example to be more restrictive in the case of outbreaks in their municipality without having to wait for approval.
<b>Country:</b> Belgium <b>Organisation:</b> Belgium Government <b>Guidance title:</b> Take care of yourself and your emotions <b>URL:</b> <a href="#">Link</a> <b>Date published/updated:</b> Not reported.	<b>Mental health support</b> Information sheets with mental health advice for the general public and for care givers provided through a collaboration between the Red Cross Flanders, the FPS Public Health and the Flemish Government.  <b>Support help lines</b> List of help lines from charities and civil society initiatives providing support relating to mental health, suicide, addiction and violence in the home.  <b>Information portals</b> Links to forums, support groups and information relating to mental health, suicide, addiction and violence in the home.
<b>Country:</b> Belgium <b>Organisation:</b> Belgium Government <b>Guidance title:</b> COVID-19: The Consultative Committee has carried out a mid-term review and confirms existing rules <b>URL:</b> <a href="#">Link</a> <b>Date published/updated:</b> 8 January 2021	<b>Monitoring of self-isolation compliance</b> Spot checks at workplaces on employees who should be self-isolating or quarantining.
<b>Country:</b> Belgium	<b>Monitoring of self-isolation compliance</b>

Country/organisation	Measures of support available
<p><b>Organisation:</b> AVIQ (The AVIQ is the body in the Walloon region of Belgium competent for essential matters of health and well-being, disability and the family)</p> <p><b>Guidance title:</b> Quarantine, isolation and testing</p> <p><b>URL:</b> <a href="#">Link</a></p> <p><b>Date published/updated:</b> Not reported</p>	<p>Wallonia set up a monitoring system specific to quarantine and testing measures intended to communicate problematic people and situations to Walloon mayors. The mayors have access to various services and or the police services.</p>
<p><b>Country:</b> Belgium</p> <p><b>Organisation:</b> AVIQ</p> <p><b>Guidance title:</b> Penalties for non-compliance with quarantine and testing measures</p> <p><b>URL:</b> <a href="#">Link</a></p> <p><b>Date published/updated:</b> 19 January 2021</p>	<p><b>Penalties and fines</b></p> <p>People who are a close contact (high risk) should get tested immediately. In the event of non-compliance with this obligation, they risk a fine of €250. In the event of a repeat offense, these people will be directly summoned to appear before the criminal court.</p>
<p><b>Country:</b> Canada</p> <p><b>Organisation:</b> Government of Canada</p> <p><b>Guidance title:</b> Canada's COVID-19 Economic Response Plan</p> <p><b>URL:</b> <a href="#">Link</a></p> <p><b>Date published/updated:</b> 11 January 2021</p>	<p><b>Financial support while self-isolating</b></p> <p>The Canada Recovery Sickness Benefit (CRSB) gives income support for self-isolating of \$500 (\$450 after taxes withheld) per week for up to a maximum of two weeks. Scheme will be active from 27 Sep 2020 and 25 Sep 2021.</p> <p><b>Financial support while self-isolating</b></p> <p>Employment Insurance sickness benefits can provide up to 15 weeks of financial assistance if unable to work due to illness, injury, quarantine or any medical condition. You could receive 55% of your earnings up to a maximum of \$595 a week.</p> <p><b>Financial support while self-isolating</b></p> <p>\$500 per week for up to 26 weeks per household for workers if unable to work for at least 50% of the week because they must care for a child under the age of 12 or family member because schools, day-cares or care facilities are closed due to COVID-19. Or because the child or family member is sick and/or required to quarantine or is at high risk of serious health implications because of COVID-19.</p>
<p><b>Country:</b> Canada</p> <p><b>Organisation:</b> Government of Canada</p>	<p><b>Information portals</b></p>

Country/organisation	Measures of support available
<p><b>Guidance title:</b> Download COVID Alert today  <b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b> 30 October 2020</p>	<p>Information on all aspects of the pandemic including the current situation, vaccines, financial support, self-isolation and quarantine. Link: <a href="#">COVID 19 website</a></p>
<p><b>Country:</b> Canada  <b>Organisation:</b> Public Health Agency of Canada  <b>Guidance title:</b> Public Health Agency of Canada Coronavirus hotline  <b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b> Not reported</p>	<p><b>Support helplines</b>  Public Health Agency of Canada Coronavirus hotline 1-833-784-4397.</p>
<p><b>Country:</b> Ontario, Canada  <b>Organisation:</b> Government of Ontario  <b>Guidance title:</b> COVID-19: Support for people  <b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b> 25 January 2021</p>	<p><b>Support help lines</b>  List of help lines from government, charities and civil society initiatives providing free support relating to mental health, suicide, indigenous people, addition and violence in the home.</p> <p><b>Information portals</b>  Links to forums, support groups and information relating to mental health, suicide, indigenous people, addition and violence in the home.</p>
<p><b>Country:</b> Alberta, Canada  <b>Organisation:</b> Government of Alberta  <b>Guidance title:</b> Isolation and quarantine requirements  <b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b> Not reported.</p>	<p><b>Support in accessing accommodation while isolating</b>  Hotel rooms are available for people who must isolate or quarantine but cannot do so in their current homes.</p> <p><b>Financial support while self-isolating</b>  Financial support is available if you're unable to work because you are sick, required to isolate, or are caring for someone in isolation.</p> <p><b>Fines or penalties</b>  Alberta has applied the Quarantine Act to self-isolation due to infection or close contact. As a result, if a public health order is violated a \$1,000 fine may be issued. Additionally, people can be prosecuted for up to \$100,000 for a first offense.</p>
<p><b>Country:</b> Alberta, Canada</p>	<p><b>Mental health support</b></p>

Country/organisation	Measures of support available
<p><b>Organisation:</b> Government of Alberta</p> <p><b>Guidance title:</b> COVID-19 info for Albertans</p> <p><b>URL:</b> <a href="#">Link</a></p> <p><b>Date published/updated:</b> Not reported.</p>	<p>Information sheets with mental health advice for the general public.</p> <p><b>Support help lines</b> List of free help lines from charities and civil society initiatives providing support relating to mental health, suicide, addiction and violence in the home.</p> <p><b>Information portal</b> Links to forums, support groups and information relating to mental health, suicide, addiction and violence in the home.</p>
<p><b>Country:</b> Denmark</p> <p><b>Organisation:</b> Danish Health Authority</p> <p><b>Guidance title:</b> Advice from hotlines and other authorities</p> <p><b>URL:</b> <a href="#">Link</a></p> <p><b>Date published/updated:</b> 11 January 2021</p>	<p><b>Out of home quarantine accommodation:</b> Voluntary stay at an out-of-home quarantine facility offered by local municipality, The stay is free, but you have to pay for your own food and other necessities. The facility offers three daily meals for DKK 150 per day.</p> <p><b>Mental health support</b> Information sheets with mental health advice. Also available are free consultations</p> <p><b>Support help lines</b> Dedicated help line 'Coronaopspring' for quarantine issues. In addition, several Danish authorities have set up hotlines for mental health, childcare, multilingual questions on coronavirus, young people and refugees.</p> <p><b>Information portal</b> Links to forums, support groups and information relating to mental health, suicide, addiction and violence in the home.</p>
<p><b>Country:</b> Denmark</p> <p><b>Organisation:</b> The Danish Immigration Service</p> <p><b>Guidance title:</b> Coronavirus information</p> <p><b>URL:</b> <a href="#">Link</a></p> <p><b>Date published/updated:</b> 16 November 2020</p>	<p><b>Penalties and fines</b> The Epidemic Act provides for special measures to prevent generally dangerous diseases which includes enforce isolation. However, there is no evidence that fines or punishments are used in this context.</p> <p><b>Wage compensation scheme</b> If you have been sent home temporarily, you will continue to receive your salary, because employers can make use of the temporary salary compensation scheme.</p>
<p><b>Country:</b> Denmark</p> <p><b>Organisation:</b> The National Board of Health</p>	<p><b>Out of home quarantine accommodation</b> Voluntary isolation stay in a facility provided by local municipalities.</p>

Country/organisation	Measures of support available
<p><b>Guidance title:</b> Self-isolation and voluntary out-of-home stays  <b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b> 27 January 2021</p>	
<p><b>Country:</b> England  <b>Organisation:</b> English Government  <b>Guidance title:</b> Guidance for the public on the mental health and wellbeing aspects of coronavirus (COVID-19)  <b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b> 7 January 2021</p>	<p><b>Support help lines</b>                      NHS Volunteer Responders Helpline to access help relating to shopping, medicines and prescriptions. Social support is also available in the form of a hotline (8 am to 8 pm) for those having mental health issues or just need to chat with someone.</p>
<p><b>Country:</b> England  <b>Organisation:</b> Public Health England  <b>Guidance title:</b> Stay at home: guidance for households with possible or confirmed coronavirus (COVID-19) infection  <b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b> 19 January 2021</p>	<p><b>Mental health support</b>                      NHS urgent mental health helplines continues to be available to adults and children around the clock. This is for a mental health crisis, emergency or breakdown, seek immediate advice and assessment.</p> <p><b>Support help lines</b>                      A link to a comprehensive list of mental health charities, organisations and support groups is provided.</p> <p><b>Informational websites</b>                      Links to websites covering topics such as mental health, sleep, diet and exercise, are also provided.</p> <p><b>Penalties and fines</b>                      Failure to comply with self-isolation may result in a fine, starting from £1,000. This in line with the penalty for breaking quarantine after international travel - but could increase to up to £10,000 for repeat offences and for the most egregious breaches, including for those preventing others from self-isolating. Parents or guardians are legally responsible for ensuring that anyone under 18 self-isolates if they test positive for COVID-19 and are contacted by NHS Test and Trace and told to self-isolate.</p>
<p><b>Country:</b> England  <b>Organisation:</b> Government of the United Kingdom</p>	<p><b>Support for people who are self-isolating</b>                      NHS Test and Trace will direct individuals to their local authority helpline if they need any of the following during the period of self-isolation: practical or social support for yourself; support for someone you care for; financial support.</p>

Country/organisation	Measures of support available
<p><b>Guidance title:</b> NHS Test and Trace: how it works  <b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b> 11 January 2021</p>	
<p><b>Country:</b> England  <b>Organisation:</b> English Government  <b>Guidance title:</b> Coronavirus (COVID-19): what to do if you're employed and cannot work  <b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b> 3 November 2020</p>	<p><b>Financial support while self-isolating</b>            Single payment of £500 for low income recipients who cannot work from home and need to self-isolate due to receiving a positive COVID-19 test result or by notification by the NHS Test and Trace. Means testing is conducted by local councils. Payment is liable for tax but not for national insurance contributions.</p> <p><b>Financial support while self-isolating</b>            Statutory sick pay is available from employers for every day missed self-isolating due to COVID-19. After 7 days evidence may be required to support the claim.</p> <p><b>Financial support while self-isolating</b>            New Style Employment and Support Allowance is available for people who are unable to claim SSP and have been advised or one of their children has been advised to self-isolate. Evidence is required to support the claim.</p> <p><b>Financial support while self-isolating</b>            For people under the State Pension age with less than £16,000 in savings, a universal credit is available which can be used for things like rent or the costs of raising children. This is in addition to SSP or New Style ESA but will result in the discontinuation of other tax credits.</p>
<p><b>Country:</b> England  <b>Organisation:</b> English Government  <b>Guidance title:</b> Find out what support you can get if you're affected by coronavirus  <b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b> Not reported</p>	<p><b>Information portal</b>            A service to find out what help and advice is available from the government and other organisations</p>
<p><b>Country:</b> England  <b>Organisation:</b> NHS  <b>Guidance title:</b> Get an isolation note</p>	<p><b>Certificate of isolation</b>            Available online through a NHS portal.</p>

Country/organisation	Measures of support available
<p><b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b>                      Not reported</p>	
<p><b>Country:</b> Finland  <b>Organisation:</b> Finnish Institute for Health and Welfare  <b>Guidance title:</b> Strengthening your coping  <b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b> 28 September 2020</p>	<p><b>Information websites</b>                      Links to websites covering topics such as mental health, sleep, diet and exercise, are also provided. Small changes to improve your quality of life, Take a virtual walk in the forest, Living with worry and anxiety amidst the pandemic, multiple languages, Coping during COVID-19, managing, lockdown fatigue, coping with change etc., Mindfulness exercises in several languages, Exercises to listen to in several languages,</p>
<p><b>Country:</b> Finland  <b>Organisation:</b> Finnish Institute for Health and Welfare  <b>Guidance title:</b> Procedure in case of suspicion of coronavirus COVID-19 infection  <b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b> 22 January 2021</p>	<p><b>Penalties and fines</b>                      No evidence of fines relating to self-isolation.</p>
<p><b>Country:</b> Finland  <b>Organisation:</b> Finnish Institute for Health and Welfare  <b>Guidance title:</b> Reducing risk and stress  <b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b> 28 September 2020</p>	<p><b>Support for people experiencing violence</b>                      Numerous services for victims of crime or violence or search help for your own violent behaviour online, via telephone or chat.</p> <p><b>Support for substance abuse</b>                      Support for alcohol or substance abuse issues can be found via local health care centres and through Finish organisations.</p>
<p><b>Country:</b> Finland  <b>Organisation:</b> Finnish Institute for Health and Welfare  <b>Guidance title:</b> Seeking help  <b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b> 21 October 2020</p>	<p><b>Support help lines</b>                      Several national or local services provide multilingual help-lines and services including for suicide and mental health via phone or local social and crisis emergency service.</p> <p><b>Mental health support</b>                      The Health Centre is the first port of call for any health related issue including mental health. Your needs will be assessed, including consultation with the psychiatric services if necessary. If you are employed you will have access to</p>

Country/organisation	Measures of support available
	<p>occupational health care. Also private mental health professionals such as psychotherapist or psychiatrists are available, although these will involve fees for services.</p> <p>Internet-based psychotherapy is available in Finland only in Finnish or Swedish. However, some International service providers offer COVID-19 – related support and internet-based psychotherapy for depression and anxiety in English or other languages.</p> <p>Several psychotherapists provide psychotherapy in multiple languages. They might also provide the therapy via teleconferencing. If this is not possible, psychotherapy can also be available with the support of a translator, please make sure to ask your service provider for options.</p>
<p><b>Country:</b> Finland  <b>Organisation:</b> Finnish Institute for Health and Welfare  <b>Guidance title:</b> Supporting others  <b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b> 6 October 2020</p>	<p><b>For families</b>                      Family support is available via local municipal services. Information can also be found via these channels : Support for families, Family Support, Support for couples and family conflicts, Support for children - Bullying and loneliness, Family Friendly Finland, Information bank for Intercultural families, Support with Divorce, Families and parenthood, Young people, Multicultural activities and services, Help and support, Home economics, well-being and quality of life in the home, Supporting yourself and colleagues at work during the pandemic, Guidelines for supporting mental well-being</p> <p><b>Support persons</b>                      Give gifts of time, and acts of kindness, enjoy helping others and benefit from the connections you will make. Give positive feedback to others, find or become a peer supporter.</p> <ul style="list-style-type: none"> <li>▪ Multicultural activities and services</li> <li>▪ Child protection activities</li> <li>▪ Supporting the well-being of elderly people</li> <li>▪ Help and support</li> </ul> <p><b>Carers</b></p> <ul style="list-style-type: none"> <li>▪ Advocacy and support association for carers</li> <li>▪ Financial support for informal care</li> <li>▪ Help to families of people with a mental illness</li> <li>▪ Help and support</li> </ul> <p><b>Support for older adults</b></p> <ul style="list-style-type: none"> <li>▪ The Finnish Association for the Welfare of Older People</li> <li>▪ Active Ageing in Finland</li> <li>▪ Helsinki Helpline for people over 70</li> </ul>

Country/organisation	Measures of support available
<p><b>Country:</b> Finland  <b>Organisation:</b> Ministry of Social Affairs and Health, Finland  <b>Guidance title:</b> Individuals' and families' financial benefits and allowances during the coronavirus situation  <b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b> 15 October 2020</p>	<ul style="list-style-type: none"> <li>▪ Help and support</li> </ul> <p><b>Financial assistance when child is sick</b></p> <ul style="list-style-type: none"> <li>▪ If there is a confirmed case of COVID-19 in an individual school or day-care centre, children can be placed in quarantine. In such cases, those who have custody of the children are entitled to communicable disease allowance.</li> <li>▪ If a child falls ill, the provisions of the Employment Contracts Act and collective agreements concerning temporary absence from work are observed. A person with custody of the child is not therefore entitled to compensation during their absence from work.</li> </ul> <p><b>Financial assistance for at risk groups</b></p> <ul style="list-style-type: none"> <li>▪ Belonging to a risk group does not automatically entitle anyone to compensation. Persons who choose to stay in quarantine-like conditions are not, as a rule, entitled to compensation, although they are following the Government's recommendations.</li> <li>▪ In cases where employees belonging to risk groups are working in positions in which remote work is not possible and where the risk of being exposed to infection is high, the employer must try to make arrangements so that these persons can transfer to positions where the risk of being exposed to infection is lower. Remote work is currently advised for all employees whose tasks can be carried out from home.</li> </ul> <p><b>Financial assistance for extra medical expenses or additional costs to buy food during home quarantine.</b></p> <ul style="list-style-type: none"> <li>▪ The Social Insurance Institution (Kela) can grant financial commitment for necessary medical expenses as part of basic social assistance. As a rule, any additional costs for home delivery of medicines are not covered by the financial commitment. In some special situations, a financial commitment that covers home delivery costs if a healthcare professional deems home delivery necessary may be covered.</li> <li>▪ Food is covered by basic social assistance, and any additional costs associated with buying food can be covered by supplementary social assistance. If Kela has made a decision on granting basic social assistance, supplementary social assistance can be applied for at the municipal social administration. Municipalities have introduced even other local arrangements for grocery purchasing. You can ask about the arrangements directly from your municipality of residence.</li> </ul> <p><b>Accommodation</b></p> <ul style="list-style-type: none"> <li>▪ The responsibility for arranging temporary accommodation rests with the social services of your municipality. The authorities placing a person under quarantine must contact the municipal social services if it becomes clear that the person does not have a residence.</li> </ul>
<p><b>Country:</b> Finland  <b>Organisation:</b> Social Insurance Institution of Finland</p>	<p><b>Financial assistance</b></p>

Country/organisation	Measures of support available
<p><b>Guidance title:</b> Infectious disease daily allowance  <b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b> 19 October 2020</p>	<p>A person covered by Finnish social security who has been isolated or quarantined in an EU or EEA country, Switzerland or the UK may also be entitled to a communicable disease daily allowance. A certificate from a doctor who is entitled to prescribe these restrictions in that country is then required as an annex to the application.</p>
<p><b>Country:</b> France  <b>Organisation:</b> Ministry of Health, France  <b>Guidance title:</b> Test, alert, protect: elimination of the waiting day for employees who test positive for Covid-19 or symptomatic for Covid-19 while awaiting the result of their test.  <b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b> 8 January 2021</p>	<p><b>Financial Support</b>  The national health insurance organisation - Assurance Maladie - processes the payment of daily allowances and the employer supplement for people who are self-isolating and cannot work from home as a result of being in close contact with a confirmed case, have had a positive test result or live with someone who has tested positive.</p> <p>Elimination of the waiting day for employees who test positive for Covid-19 or symptomatic for Covid-19 while awaiting the result of their test. This approach allows them to benefit from the payment of daily allowances and the employer supplement, without a waiting period.</p> <p>Claims can be initiated via an online portal. An antigen or PCR test must be performed within 2 days, however 4 days of payments are made until proof test is required.</p> <p>Negative test result means the person can return to work. If the test is positive, their sick leave is then prolonged and payments continue.</p> <p><b>Monitoring</b>  Those making a claim can expect to be called by Assurance Maladie "two to three" times during the 7 days of isolation and from 20 January a home visit by a nurse will be offered for those who have self-declared positive for Covid-19.</p>
<p><b>Country:</b> France  <b>Organisation:</b> OECD  <b>Guidance title:</b> Policy responses to the COVID-19 crisis  <b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b> 24 July 2020</p>	<p><b>Financial Support for those in quarantine</b>  There are 2 different systems for employees (insured under the general regime of social security) who received health instructions to self-isolate (as of 1st of May – before this date sickness benefits applied to all cases of quarantine):</p> <ol style="list-style-type: none"> <li>1. Paid sick leave and sickness benefits (PSLSB): for employees who have been in close contact with someone who has COVID-19. The persons concerned receive sickness benefits (daily allowances) paid by the health insurance and paid sick leave (supplementary compensation) by the employer.</li> <li>2. Short-time working benefits (STW): for employees in the private sector who are required to self-isolate because they (1) have an elevated health risk (e.g. pregnant women in their third trimester of pregnancy or people suffering from a long-term condition, chronic diseases patients); or (2) live with another vulnerable person. The standard STW conditions apply.</li> </ol> <p>No waiting period for both.</p>

Country/organisation	Measures of support available
	<p><b>Financial support for those who are self-isolating</b></p> <p>Waiving of the 3-day waiting period for private-sector employees and self-employed workers to receive sickness benefits/daily allowances (paid by health insurance): are now paid from the 1st day of illness (for reasons related to COVID-19 but also for any other sickness) for all sick leave in all regimes. In addition, for employees: waiving of the 7-day waiting period to receive the supplementary employer allowance for sickness absence related to COVID-19. Applies until 10 July 2020 (end of the state of health emergency).</p> <p>Coverage of paid sick-leave (without firm cost-sharing) of workers who will have to stay home to take care of their children.</p> <p>COVID-19 will be systematically and automatically recognised as an occupational disease for all health and care workers (including self-employed carers). This implies full coverage of medical care, increased daily allowances, and increased protections associated with this type of risk.</p>
<p><b>Country:</b> France  <b>Organisation:</b> The Connexion French News and Views  <b>Guidance title:</b> France COVID-19: self-isolation recommended but not forced  <b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b> 11 December 2020</p>	<p><b>New home visits for self-isolating people</b></p> <p>The government has announced that “home visits” will be provided for people who test positive and who are requested to stay at home. The objective is that every person who is diagnosed with the virus is offered a home visit by a multidisciplinary, professional team, including a health worker and a nurse.” The team will also aim to offer advice to self-isolating people, and to offer extra help and support, such as shopping and food if needed. Visits and help for the most vulnerable may also include childcare and the possibility of being rehoused during their illness.</p>
<p><b>Country:</b> France  <b>Organisation:</b> Government of France  <b>Guidance title:</b> Restrictions and requirements in metropolitan France  <b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b> 16 January 2021</p>	<p><b>Information</b></p> <p>A toll free hotline service is available to answer questions about coronavirus (24 hours a day 7 days a week).</p>
<p><b>Country:</b> France  <b>Organisation:</b> Government of France</p>	<p><b>Information</b></p> <p>MyCovidAdvice provides official personalized advice based on the user's family, professional and state of health to deal with the virus. It helps guide a person according to their needs and possible symptoms. It also allows you to monitor</p>

Country/organisation	Measures of support available
<p><b>Guidance Title:</b> TousAntiCovid application  <b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b> 02 December 2020</p>	<p>your symptoms if you are sick. A new feature allows a patient who tests positive for Covid-19 to monitor the evolution of these symptoms during his fortnight</p>
<p><b>Country:</b> France  <b>Organisation:</b> Sante Publique France  <b>Guidance Title:</b> J'ai les signes de la maladie du COVID-19. [I have the signs of COVID-19 disease]  <b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b> 06 November 2020</p>	<p><b>Information</b>  An information sheet for anyone with symptoms of COVID-19. Contains information including what to do if you test positive, or negative. For those self-isolating or in quarantine awaiting test results -masks are prescribed by a doctor or/and can be given by the pharmacy after presenting proof of positive test result.</p> <p><b>Support Helpline</b>  Free call helpline for anyone with questions about coronavirus.</p>
<p><b>Country:</b> France  <b>Organisation:</b> Sante publique (Public Health) France  <b>Guidance Title:</b> COVID-19: Taking care of your mental Health during the epidemic  <b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b> 29 October 2020</p>	<p><b>Mental Health Support</b>  Tips for taking care of your mental health, including for those confined. An information sheet and a video, includes helplines and link outs for those with addictions (alcohol, drug, smoking) and those experiencing violence</p>
<p><b>Country:</b> France  <b>Organisation:</b> Sante publique (Public Health) France  <b>Guidance Title:</b> COVID-19: prevention tools intended for healthcare professionals and the general public  <b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b> 25 January 2021</p>	<p><b>Information Portal</b>  Includes information about what to do if you have symptoms or are self-isolating and where to get help.</p>
<p><b>Country:</b> France</p>	<p><b>Mental health support</b></p>

Country/organisation	Measures of support available
<p><b>Organisation:</b> France24  <b>Guidance title:</b> Toolbox: Home quarantine and isolation  <b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b> 25 November 2020</p>	<p>Clinical psychologists and health psychologists are available for your questions and personal concerns on the phone and by e-mail.</p> <p><b>Information sheets</b>  Information sheets including algorithms to understand the steps required. Required.</p>
<p><b>Country:</b> Iceland  <b>Organisation:</b> Government of Iceland  <b>Guidance title:</b> Financial Supports  <b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b> 20 November 2020</p>	<p><b>Financial support</b>  For families with children (single parents with two children and a monthly income of ISK 350,000-580,000 will receive an annual increase of ISK 30,000 in child benefits, and that for a family whose combined monthly income is ISK 700,000-920,000, child benefits will be ISK 60,000 higher than they would be otherwise).</p> <p>For disability pensioners and vulnerable groups, a one-time payment of ISK 50,000 will be made before 18 December to recipients of disability and rehabilitation pensions who are eligible for pensions during the year, in addition to the December supplement that is usually paid during the month.</p>
<p><b>Country:</b> Iceland  <b>Organisation:</b> Directorate of Health  <b>Guidance title:</b> Instructions for persons under home-based quarantine  <b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b> 4 November 2020</p>	<p><b>Unexpected quarantine</b>  Anyone that is unexpectedly quarantined in Iceland without other resources can contact the Red Cross helpline or online. There you can ask for assistance, get support or information and talk to someone in confidence. The helpline is open 24/7 and is free of charge.</p> <p><b>Certificate of Quarantine</b>  A certificate of quarantine for individuals who reside in Iceland can be obtained from the Directorate of Health. Employers have been instructed to be considerate if an employee needs to be quarantined for unavoidable reasons.</p>
<p><b>Country:</b> Iceland  <b>Organisation:</b> Government of Iceland  <b>Guidance title:</b> Violations of the Epidemiological Control Act and rules set in accordance with it, cf. Article 19 Epidemic Prevention Act no. 19/1997, due to pandemic COVID-19  <b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b> 27 March 2020</p>	<p><b>Penalties and fines</b>  Fine of ISK. 150,000-500,000 for non-compliance of an isolation request.</p> <p>Fine of ISK. 50,000-250,000 for non-compliance of a quarantine request.</p>

Country/organisation	Measures of support available
<p><b>Country:</b> Ireland  <b>Organisation:</b> Government of Ireland  <b>Guidance title:</b> Minister for Health welcomes additional funding of €5.1 million in homeless supports  <b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b> 21 October 2020</p>	<p><b>Support for homeless groups</b></p> <ul style="list-style-type: none"> <li>▪ Operate a 110 bed isolation unit for homeless families and single people, including nursing, GP and social care support.</li> <li>▪ Provide a health supports team of nurses and mental health social care workers to care for 250 people who are cocooning and the people who are in private emergency accommodation.</li> <li>▪ Operate an 18 bed unit for single homeless people with complex needs.</li> <li>▪ Provide mobile testing, tracing and self-isolation facilities for people who are homeless with suspected cases of COVID-19.</li> <li>▪ Continue 7 day dedicated homeless response team.</li> </ul>
<p><b>Country:</b> Ireland  <b>Organisation:</b> Government of Ireland  <b>Guidance title:</b> Covid-19 Supports  <b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b> Not reported</p>	<p><b>Financial assistance</b>  The Pandemic Unemployment Payment is available to all employees and the self-employed who have lost their job due to the COVID-19 pandemic.</p> <p><b>Financial assistance (for businesses)</b>  The Employment Wage Subsidy Scheme (EWSS), provides a flat-rate subsidy to qualifying employers based on the numbers of eligible employees on the employer’s payroll.</p>
<p><b>Country:</b> Ireland  <b>Organisation:</b> Government of Ireland  Guidance title: Enhanced Illness Benefit for COVID-19 Information (multi-lingual)  <b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b> 26 November 2020</p>	<p><b>Illness Benefit for COVID-19</b>  €350 per week available to employees or self-employed people who are self-isolating. To apply a person will require medical certification.</p>
<p><b>Country:</b> Ireland  <b>Organisation:</b> Government of Ireland  <b>Guidance title:</b> Symptoms of COVID-19 and how to protect yourself  <b>URL:</b> <a href="#">Link</a></p>	<p><b>Information and resources websites</b> including:</p> <ul style="list-style-type: none"> <li>▪ Services for Deaf and Hard of Hearing people</li> <li>▪ Minding your mental health during the COVID-19 pandemic</li> <li>▪ Public health advice posters</li> <li>▪ Stay safe guidelines.</li> </ul>

Country/organisation	Measures of support available
<p><b>Date published/updated:</b> 13 January 2021</p>	
<p><b>Country:</b> Ireland  <b>Organisation:</b> HSE Ireland  <b>Guidance title:</b> Keeping well in self-isolation  <b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b> 29 October 2020</p>	<p><b>Advice on smoking and alcohol:</b>                      Read advice on drinking less during the COVID-19 pandemic.                      Read about quitting smoking during the COVID-19 pandemic.</p> <p><b>Support for older people:</b>  <b>Older people can phone the charity ALONE</b> from Monday to Sunday, 8am to 8pm.                      Self-isolation can be boring or frustrating and it may affect your mood and feelings. You may feel low, worried or have problems sleeping.</p> <p><b>Support for mental health:</b>                      Read advice about minding your mental health during the COVID-19 pandemic.</p>
<p><b>Country:</b> Ireland  <b>Organisation:</b> HSE Ireland  <b>Guidance title:</b> Community Support during the Covid-19 Pandemic  <b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b> 2 April 2020</p>	<p><b>Support for essential items:</b>                      Local Authorities and other organizations across the country are coordinating community support for vulnerable members of the community. This includes people at higher risk from COVID-19 and those who are cocooning. This support can help with:</p> <ul style="list-style-type: none"> <li>▪ collection and delivery of food, essential household items, fuel, and medication</li> <li>▪ social isolation</li> <li>▪ other medical or healthcare needs</li> <li>▪ Some pharmacies will provide delivery services. Other pharmacies will work with Local Authorities, An Post, the Gardaí and voluntary organisations to get your medicines to you.</li> <li>▪ Contact your local COVID-19 community support team (one for each county)</li> </ul>
<p><b>Country:</b> Ireland  <b>Organisation:</b> Department of Health, Ireland  <b>Guidance title:</b> Statutory Instruments related to the COVID-19 pandemic  <b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b> 26 January 2021</p>	<p><b>Penalties and fines</b>                      No fines or penalties relating to self-isolation or quarantine.</p>
<p><b>Country:</b> The Netherlands  <b>Organisation:</b> Government of Netherlands</p>	<p><b>Information Sheet</b>                      This website contain an information brochure, providing information on where to get support if you are in quarantine.</p>

Country/organisation	Measures of support available
<p><b>Guidance title:</b> Brochure - Help and support when self-quarantining (staying at home)  <b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b> 23 October 2020</p>	<p><b>Support Helplines</b>            Has a list of helplines that are available for those who are in quarantine. Includes the Red Cross Helpline which it states is for “anyone with questions about practical issues (like help with shopping or transport to a coronavirus test location) or who needs advice or just a listening ear.”</p> <p><b>Essentials:</b></p> <ul style="list-style-type: none"> <li>▪ <b>Food, medication and other necessities:</b> Shopping or collect medication available from local municipality and the Red Cross.</li> <li>▪ <b>Provision of care to children:</b> If you can’t arrange for other parents or someone from the school itself to take your children to school or pick them up, contact your municipality.</li> <li>▪ <b>Walking the dog:</b> You can only go outside in your garden or on your balcony (if you have one). Ask a friend or neighbour to walk your dog, or make use of a dog walking service. If this isn’t possible, call the Red Cross to discuss available options.</li> <li>▪ <b>Accommodation if you can’t self-quarantine at home:</b> If you can’t self-quarantine at home, for example because you share a household with someone who is vulnerable due to underlying health conditions, or because your own safety would be at risk, contact your municipality.</li> <li>▪ <b>Provision of care (home help):</b> If you normally receive care or help at home – like from a district nurse or a home help – tell your contact person that you’ll be self-quarantining. Talk to them about how you can go on getting care and assistance. Carers have been given guidelines by the National Institute for Public Health and the Environment (RIVM) on how to work safely during the current crisis, so that they can continue to provide as much care and support as possible. Always stick to the guidelines, and if in doubt, contact the care agency and/or your municipality.</li> <li>▪ If you need any care services (in general, not just during quarantine), contact your municipality, doctor and/or health insurer to discuss the possibilities.</li> </ul> <p><b>Sport and physical exercise</b></p> <ul style="list-style-type: none"> <li>▪ If you’re in self-quarantine you can’t go to the gym, the swimming pool or a sports club. It’s important to exercise though, even if you have to do so at home, because it’s good for your physical and mental health. Maybe your sports club can help by providing you with online classes or a set of exercises to do at home, for instance. There are also various websites that help people to keep fit at home.</li> </ul> <p><b>Financial assistance</b></p> <ul style="list-style-type: none"> <li>▪ Tell your employer or clients that you’ll be self-quarantining. If you work for a company or organisation, tell the company doctor. Make clear agreements about your work during this period.</li> <li>▪ If you can’t work from home, it’s likely that under the terms of your employment contract, you’re entitled to receive your salary while you’re self-quarantining. But this doesn’t apply to everyone, so you will need to check.</li> </ul>

Country/organisation	Measures of support available
	<ul style="list-style-type: none"> <li>▪ If you are self-employed and can't work from home, try to resume work after the ten days are over, or to arrange that the work be done at a different time. If that's not possible, try to find someone to replace you. If you've suffered a financial loss because of having to quarantine, you might qualify for assistance under the temporary self-employment income support and loan scheme (TOZO-regeling). To apply for such assistance, contact your municipality. The scheme bridges the gap between what you are earning and the level of benefit you would receive under the Work and Social Assistance Act. The municipality assesses your application to see if you meet the criteria.</li> <li>▪ You can find more information by going to <a href="http://www.government.nl/topics/coronavirus-covid-19/information-for-businessowners">www.government.nl/topics/coronavirus-covid-19/information-for-businessowners</a></li> </ul> <p><b>Support for online</b> To get access to help and entertainment you often need to go online. If you don't have internet and can't make use of publicly-available Wi-Fi options, you could buy a SIM card for mobile internet from a telecom company. If you can't afford that, contact your municipality. Help to use the a computer or smartphone can be provided by a number of organisations – the contact details are provided</p>
<p><b>Country:</b> The Netherlands <b>Organisation:</b> National Institute for Public Health and the Environment <b>Guidance title:</b> Coronavirus disease COVID-19 <b>URL:</b> <a href="#">Link</a> <b>Date published/updated:</b> 27 January 2021</p>	<p><b>Information Portal</b> Information on COVID-19 including isolation and quarantine</p>
<p><b>Country:</b> The Netherlands <b>Organisation:</b> Rijksoverheid <b>Guidance title:</b> Coronavirus and mental health care <b>URL:</b> <a href="#">Link</a> <b>Date published/updated:</b> Not reported</p>	<p><b>Mental Health Support</b> Mainly about mental health services during coronavirus. Has a link to another website which provides support in the form of contacting a counsellor, it gives tips for distraction and online help.</p>
<p><b>Country:</b> The Netherlands <b>Organisation:</b> Rijksoverheid <b>Guidance title:</b> Coronavirus and mental health care <b>URL:</b> <a href="#">Link</a></p>	<p><b>Mental Health and addiction support</b> People with questions about mental health and psychosocial consequences of the corona crisis can contact the Corona Care Support Centre. The Support Centre Corona Care provides up-to-date, accessible and reliable information about mental health and psychosocial consequences of the corona crisis. The Support Center Corona Care brings together initiatives that are aimed at informing, supporting or helping people. The Steunpunt Corona Care brings people into</p>

Country/organisation	Measures of support available
<p><b>Date published/updated:</b> Not reported</p>	<p>contact with local and regional aid, care and service providers. The topics covered by the centre include psychological problems and addiction.</p>
<p><b>Country:</b> The Netherlands  <b>Organisation:</b> European Network on Victims' Rights  <b>Guidance title:</b> Netherlands – specific measures during COVID-19 crisis  <b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b> Not reported</p>	<p><b>Support for People Experiencing Violence</b>  This webpage contains information of where victims of domestic abuse can get help during the COVID-19 crisis. A special campaign has been launched on television, radio and social media to refer people, both victims as well as spectators, to a special government website on domestic violence (<a href="http://www.ikdoeietstegenhuiselijkgeweld.nl">www.ikdoeietstegenhuiselijkgeweld.nl</a>) and the phone number. Support can be reached via WhatsApp and online chat so s to make it easier for victims to report a situation of domestic violence, especially in cases where the perpetrator is continuously at home.</p>
<p><b>Country:</b> New Zealand  <b>Organisation:</b> Ministry of Health, New Zealand  Guidance title: Supporting your own mental wellbeing  <b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b> 14 October 2020</p>	<p>If you or those around you are concerned about how you're feeling or your wellbeing, there is information and tools available to help you feel mentally well and get through. Download information on online mental wellbeing tools and resources: <a href="#">Digital mental wellbeing tools</a></p> <p><b>Information and websites</b></p> <ul style="list-style-type: none"> <li>▪ Getting Through Together is a mental wellbeing programme focused on things we can all do to maintain our mental wellbeing during the COVID-19 pandemic (All Right? and the Mental Health Foundation)</li> <li>▪ Looking after mental health and wellbeing during COVID-19 advice and information, and useful top tips to get through (Mental Health Foundation)</li> <li>▪ Stories of people's journeys to wellness and ideas to help you find your own way to better wellbeing (Depression.org.nz)</li> <li>▪ Best Bubble highlights choices as people figure out what works best for them, and promotes healthier activities over those that could make life trickier, particularly drinking too much alcohol (NZ Drug Foundation)</li> <li>▪ Asian Family Services provides mental health support to Asians living in New Zealand.</li> <li>▪ Anxiety New Zealand provides a free national helpline as well as workshops, support groups and specialist medical assessment.</li> <li>▪ The Depression.org.nz website provides advice, information and support for: Pregnant women and new parents; Pasifika; Older people; People with long-term health conditions; and Māori.</li> </ul> <p><b>Self-help tools and apps</b></p> <ul style="list-style-type: none"> <li>▪ <a href="#">Melon</a> is an app with a health journal, resources and self-awareness tools to help you manage your emotional wellbeing. You can also join their online community to connect with and support others, and watch daily webinars about health and wellbeing (Melon Health)</li> </ul>

Country/organisation	Measures of support available
	<ul style="list-style-type: none"> <li>▪ <a href="#">Mentemia</a> is an app that you can use to monitor, manage and improve your mental wellbeing by setting daily goals and tracking your progress (Mentemia)</li> <li>▪ <a href="#">Staying on Track</a> is an e-therapy course that teaches you practical strategies to cope with the stress and disruption of day-to-day life (Just a Thought)</li> <li>▪ <a href="#">Working through depression</a> is a personalised online programme that focuses on positivity, lifestyle changes and problem solving (The Journal at Depression.org.nz)</li> <li>▪ <a href="#">Working through problems</a> with Auntie Dee is a tool to work through problems, generate ideas and find a solution (Le Va)</li> <li>▪ <a href="#">Whakatau Mai - The Wellbeing Sessions</a> are free, virtual community events aimed at supporting wellbeing in real-time – to help you connect you with others, learn and practice new skills, and start looking at things differently.</li> </ul> <p><b>Self-help tools for young people</b></p> <ul style="list-style-type: none"> <li>▪ <a href="#">Feeling down, worried or stressed</a> (SPARX)</li> <li>▪ <a href="#">Learn more about mental health issues</a> (Mental Wealth)</li> <li>▪ <a href="#">Recognising and understanding depression and anxiety</a> (The Lowdown)</li> <li>▪ <a href="#">Aroha</a> is a chatbot that uses Facebook Messenger to provide practical, evidence-based tools to manage stress, maintain social connection and stay active (University of Auckland)</li> <li>▪ <a href="#">Youthline’s web chat</a>, where young people can talk one-to-one with a real person</li> <li>▪ <a href="#">Melon Health</a> has a range of online resources specifically for young people</li> <li>▪ <a href="#">RainbowYOUTH</a> provides free 1:1 peer support for youth in the rainbow community, their friends and whānau.</li> </ul> <p><b>Support for frontline health care professionals and care workers</b></p> <p>Health Care New Zealand is providing a free counselling service for frontline health care professionals and care workers who are seeking mental health and wellbeing support during the COVID-19 response. Health care professionals and care workers can access this confidential service to make an appointment with an experienced therapist.</p> <p><b>Concerned about your substance use and/or gambling?</b></p> <p>During this time people may be looking to familiar habits or seeking out new ways to cope with feelings and situations. While alcohol or other drug (substance) use and or gambling may seem like ways to cope, these behaviours can negatively impact many areas of our lives including our health, wairua (spirit), hinengaro (mind), relationships and overall wellbeing.</p> <p>If you, or those around you, are concerned about your substance use and/or gambling, there are some great resources to help you identify if you need some extra support:</p>

Country/organisation	Measures of support available
	<ul style="list-style-type: none"> <li>▪ <a href="#">Is your drinking ok?</a> (Health Promotion Agency)</li> <li>▪ <a href="#">Test your drug taking</a> (Alcohol Drug Helpline)</li> <li>▪ <a href="#">Test your gambling</a> (Choice Not Chance)</li> <li>▪ <a href="#">NZ Drug Foundation</a> and <a href="#">Drug Help</a> have information for people who use alcohol and other drugs, and those supporting them, about how to use safer, manage withdrawal symptoms, and stay in recovery.</li> </ul> <p><b>What if I am already receiving mental health and addiction services or need these services?</b></p> <ul style="list-style-type: none"> <li>▪ <a href="#">Mental health and addiction services</a> continue to be available. Some services may still be delivered in different ways such as by video link or over the phone.</li> <li>▪ If you, or those around you, are already receiving mental health and addiction services, continue to do the things that you know are helpful for your mental health and wellbeing and make contact with the health professional you see most often if you need advice or additional support right now. The online and phone support services listed on this page are also available for you to use.</li> <li>▪ Talk to your health professional, GP, or free call or text any time to talk to a trained counsellor if you need further support.</li> </ul> <p><b>Supporting others' mental wellbeing</b></p> <p>There is a lot you can do to help yourself, your friends, family and community during this time.</p> <p><i>Supporting children and young people</i></p> <p>There may be children or young people in your life who experience distress. As a trusted adult, you can help reassure and educate them about COVID-19:  <a href="#">Resources To Help Explain Coronavirus (COVID-19) To Children - kidshealth.org.nz</a></p> <p><i>Supporting people living with mental health or addiction challenges</i></p> <p><a href="#">Whai Ora, Whiti Ora Fund</a> – helps charitable organisations and community groups help tāngata whaiora – those who live with mental health and addictions challenges (Mental Health Foundation).</p> <p><i>Supporting someone with substance use and/or gambling concerns</i></p> <p>You can follow these links for resources to support you while you support someone else:</p> <ul style="list-style-type: none"> <li>▪ <a href="#">Supporting Others</a> (New Zealand Drug Foundation)</li> <li>▪ <a href="#">Help Someone Else</a> (Drug Help)</li> <li>▪ <a href="#">Gambling: Concerned for Someone?</a> (Choice Not Chance)</li> <li>▪ <a href="#">How to talk to someone about their drinking</a> (Health Promotion Agency)</li> <li>▪ Supporting someone who is feeling suicidal</li> </ul>

Country/organisation	Measures of support available
	<ul style="list-style-type: none"> <li>▪ You can follow these links for resources to support you while you support someone else:</li> <li>▪ <a href="#">Supporting someone who may be suicidal</a> (Ministry of Health)</li> <li>▪ <a href="#">Supporting whānau through suicidal distress</a> (Mental Health Foundation)</li> <li>▪ <a href="#">How to support people who may be feeling suicidal</a> (LifeKeepers)</li> </ul> <p><i>If you need someone to talk to</i></p> <p>If you need to talk, free call or text to talk to a trained counsellor. They're available day and night. Other places that can help you if you need someone to talk to:</p> <ul style="list-style-type: none"> <li>▪ <a href="#">Depression helpline:</a></li> <li>▪ <a href="#">Alcohol Drug Helpline:</a></li> <li>▪ <a href="#">Gambling Helpline:</a></li> <li>▪ <a href="#">OUTLine:</a> confidential telephone support for people in the rainbow community, available evenings from 6pm–9pm.</li> <li>▪ <a href="#">Anxiety Helpline:</a></li> </ul> <p><i>If you're feeling suicidal</i></p> <p>If you're feeling suicidal or having thoughts of suicide tell someone you trust so you can get the support you need. If you can't find someone you trust to talk to, free call or text to talk to a trained counsellor. They're available day and night. Other helpful resources that are available include:</p> <ul style="list-style-type: none"> <li>▪ <a href="#">Suicide: coping with suicidal thoughts</a> (Mental Health Foundation)</li> <li>▪ <a href="#">Having suicidal thoughts</a> – a resource to help people manage their own suicidal thoughts or feelings (Mental Health Foundation)</li> </ul> <p><i>If you're concerned about someone's safety</i></p> <p>If you're seriously concerned about someone's immediate safety, or if someone is putting others in immediate danger, call <a href="#">111</a> for assistance or contact your district health board's psychiatric emergency service or <a href="#">mental health crisis assessment team</a>. Try to help them to stay safe until support arrives.</p>
<p><b>Country:</b> New Zealand  <b>Organisation:</b> Unite against COVID-19  <b>Guidance title:</b> If you cannot get essential supplies  <b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b> 07 October 2020</p>	<p><b>Food, medication and other necessities</b></p> <p>For those who need food, there are a number of ways to get help.</p> <p>Financial assistance to get food is available through Work and Income. Those seeking assistance do not have to be a Work and Income client.</p> <p>For those whose need is urgent and they need food within the next 24 to 48 hours, they can contact a local food bank. The Ministry of Social Development is helping fund these.</p>

Country/organisation	Measures of support available
	<p>For those who can't leave their home, support may be available to get food delivered through online orders from supermarkets or through family and friends. If this is not possible, assistance through community groups, food banks, social services or health providers is also available.</p> <p>For those who need financial assistance, call Work and Income. Help is available for eligible foreign nationals who are experiencing serious financial hardship due to COVID-19. Work and Income may be able to help pay for groceries or goods, if an individual is on a low income or a benefits.</p>
<p><b>Country:</b> New Zealand  <b>Organisation:</b> Unite against COVID-19  <b>Guidance title:</b> If you need help with accommodation  <b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b> 01 December 2020</p>	<p><b>Accommodation</b>                      The following information is for New Zealand citizens, residents or permanent residents. For those leaving a managed isolation facility and have nowhere to stay, talk to the manager of the managed isolation facility.</p> <p>For those who are a public housing tenant of Kāinga Ora or a Community Housing provider, and in need of help to pay for the housing or accommodation, contact the tenancy manager.</p> <p>Work and Income will also provide help to those aged under 19 years older, and those in urgent need of housing within the next 7 days and have nowhere else to stay.</p> <p><b>At risk from family violence</b>                      Those at risk from family violence and in immediate danger should call the police. Helplines available for those not in immediate danger (open 24 hours daily, seven days a week).</p>
<p><b>Country:</b> New Zealand  <b>Organisation:</b> New Zealand Legislation  <b>Guidance title:</b> Quarantine and Isolation  <b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b> 20 December 2020</p>	<p><b>Penalties and fines</b>                      Under the requirements for isolation or quarantine, offenses may be punished with fines of up to NZ\$4,000 (about US\$2,480) or imprisonment for up to 6 months. Infringement offenses are subject to an infringement fee of NZ\$300 (about US\$186) or a court-imposed fine of up to NZ\$1,000 (about US\$620)</p>
<p><b>Country:</b> New Zealand  <b>Organisation:</b> New Zealand Government  <b>Guidance title:</b> COVID-19 financial support tool  <b>URL:</b> <a href="#">Link</a></p>	<p><b>Financial Assistance: payments available</b>                      Online financial support tool that allows individuals to determine the type of financial support they are eligible for.</p>

Country/organisation	Measures of support available
<p><b>Date published/updated:</b> 24 August 2020</p>	
<p><b>Country:</b> Northern Ireland  <b>Organisation:</b> Northern Ireland Direct  <b>Guidance title:</b> Coronavirus (COVID-19): practical support for individuals  <b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b> Not reported</p>	<p><b>COVID-19 Community Helpline</b>  A dedicated COVID-19 helpline (9 am to 5 pm) is featured which is managed by the independent advice network <a href="#">AdviceNI</a> and is aimed at those self-isolating and also for those generally struggling over the winter with access to food, medicines or other products and services. With relevant supports and services specific to the local areas are provided.</p>
<p><b>Country:</b> Northern Ireland  <b>Organisation:</b> NI Direct  <b>Guidance title:</b> Coronavirus (COVID-19) and Benefits  <b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b> Not reported.</p>	<p><b>Universal Credit Contingency Fund short-term living expenses</b>  Means tested financial support is available for short-term living expenses (for example, a short term supply of groceries) for people self-isolating. For the duration of the current pandemic, the amount payable for short-term living expenses via Universal Credit Contingency Fund short-term living expenses grant has been increased to the full daily Income Support personal allowance for a person, their partner, and any dependent children. There is no limit on the number children that can be included in an award. Criteria is based on your employment contributions.</p> <p><b>Discretionary Support during the COVID-19 (Coronavirus) pandemic</b>  A means tested non-repayable Discretionary Support self-isolation grant payment to assist with short term living expenses where a person, or any member of their immediate family, is diagnosed with COVID-19 or is advised to self-isolate. More than one claim can be made if financial difficulties continue and are a result of self-isolation. For the current pandemic, the amount payable for short term living expenses has been increased to the Universal Credit daily rate for a person and their partner. The amount payable for children is based on the Income Support rate for children, as it is higher than in Universal Credit. There is no limit on the number children that can be included in an award. <a href="#">Criteria for eligibility</a> includes being in an 'extreme, exceptional or crisis situation which places you or your immediate family's health, safety or wellbeing at significant risk'.</p> <p><b>Covid-19 Heating Payment</b>  A one-off heating payment of £200 if in receipt of Pension Credit, or in receipt of certain disability benefits at the higher rates, in recognition of additional costs arising from the Covid-19 pandemic. Payment is automatic as it is linked to other benefits, as a result no formal application is required. The Covid-19 Heating Payment is in addition to any other payments, including the Winter Fuel Payment.</p> <p><b>Carer's Allowance</b></p>

Country/organisation	Measures of support available
	Carer's Allowance will still be paid if there is a temporarily physical stop caring as a result of either yourself or the person you care for having to self-isolate as emotional support also counts towards the care provide for someone during the COVID-19 crisis.
<p><b>Country:</b> Northern Ireland  <b>Organisation:</b> Advice NI  <b>Guidance title:</b> Benefits  <b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b> Not reported</p>	<p><b>Free School Meals</b>  Families of young people who are entitled to Free School Meals will receive food grants during school holidays from Christmas 2020. The scheme which will run until Easter 2022.</p>
<p><b>Country:</b> Northern Ireland  <b>Organisation:</b> NI Direct  <b>Guidance title:</b> Coronavirus (COVID-19) regulations: compliance and penalties  <b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b> Not reported.</p>	<p><b>Penalties and fines</b>  Failure to stay at home incurs a £200 fixed penalty that reduces to £100 if paid within 14 days or punishable on summary conviction by a fine not exceeding £5,000.  Failure to self-isolate after travelling incurs a £1,000 fixed penalty or punishable on summary conviction by a fine not exceeding £5,000.</p>
<p><b>Country:</b> Norway  <b>Organisation:</b> Norwegian Institute of public Health  <b>Guidance title:</b> Follow-up of close contacts, quarantine and home isolation- advice for healthcare personnel  <b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b> 11 January 2021</p>	<p><b>Financial support</b>  No loss of income if there is a positive test result during exemption from quarantine.</p>
<p><b>Country:</b> Norway  <b>Organisation:</b> Norwegian Centre for Violence and Traumatic Stress  <b>Guidance title:</b> Coronavirus: Advice for those experiencing mental health issues  <b>URL:</b> <a href="#">Link</a></p>	<p>Coronavirus infection and infection control measures may result in additional stress for everyone and perhaps especially for those experiencing mental health issues or substance abuse difficulties. Includes generic advice and specific advice for those isolating:</p> <ul style="list-style-type: none"> <li>▪ Stress-reducing measures in quarantine and isolation <a href="#">Stress advice</a></li> <li>▪ Those experiencing mental health <a href="#">Mental health advice</a></li> <li>▪ Advice for parents (<a href="#">parents' advice</a>) and children (<a href="#">Children advice</a>) in vulnerable situations.</li> </ul>

Country/organisation	Measures of support available
<p><b>Date published/updated:</b> Not reported</p>	
<p><b>Country:</b> Norway  <b>Organisation:</b> Norwegian Institute of Public Health  <b>Guidance title:</b> Quarantine and isolation  <b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b> 28 January 2021</p>	<p><b>Information portals</b>            Online facts advices and measures specifically for those in quarantine or self-isolating.</p> <p><b>Accommodation</b>            Suitable accommodation will be provided for those who cannot isolate in their own home (including shared halls, student housing, and hotels) by the Municipal Medical Officer.</p>
<p><b>Country:</b> Norway  <b>Organisation:</b> Ministry of Health and Care Services  <b>Guidance title:</b> The Government is establishing clear quarantine and isolation rules  <b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b> 11 January 2021</p>	<p><b>Penalties and fines</b>            Intentional or grossly negligent violation of provisions in the regulations is punishable by a fine or imprisonment for up to 6 months.</p>
<p><b>Country:</b> Scotland  <b>Organisation:</b> Scottish Government  <b>Guidance title:</b> Coronavirus (COVID-19): Test and Protect  <b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b> 14 December 2020</p>	<p><b>National Assistance Helpline</b>            A dedicated helpline (9 am to 5 pm, Monday to Friday) to help those who are self-isolating to access essentials such as food and medicine.</p> <p><b>Self-Isolation Support Grant</b>            Means tested one off payment of £500 for people on low incomes, in receipt of low income benefits and would lose income through self-isolation, who have been asked to self-isolate by contact tracers. The Self-Isolation Support Grant does not cover people who are self-isolating after returning to the UK from abroad, unless they have tested positive for coronavirus or have been told to stay at home and self-isolate by the Test and Protect Service. Backdated claims for payment can be made up to 28 Sep 2020. More than one claim can be made if asked to self-isolate on more than one occasion, as long as these do not overlap. Payment should be made within three working days of the application being verified.</p> <p><b>Crisis Grant</b>            Existing Scottish Welfare Fund available to people who do not qualify for the Self-Isolation Support Grant.</p>

Country/organisation	Measures of support available
	<p><b>Statutory Sick Pay (SSP)</b>                      SSP is available to those who are required to self-isolate and are unable to work as a result. SSP is payable from the first day of sickness absence, rather than the fourth, for absences related to coronavirus where all SSP eligibility conditions are met, including being absent for at least four days in a row (including non-working days).</p>
<p><b>Country:</b> Scotland  <b>Organisation:</b> Government of Scotland Resilience Division  <b>Guidance title:</b> Ready Scotland  <b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b> Not reported</p>	<p><b>Informational websites</b>                      Aimed at people affected by coronavirus (COVID-19). Links are provided to websites covering topics such as mental health, sleep, diet and exercise.</p>
<p><b>Country:</b> Scotland  <b>Organisation:</b> Government of Scotland  <b>Guidance title:</b> Coronavirus (COVID-19): international travel and quarantine  <b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b> 19 January 2021</p>	<p><b>Penalties or fines</b>                      If you fail to comply with any of these self-isolation measures then you may be fined £480 in Scotland under a fixed penalty notice.</p>
<p><b>Organisation:</b> Government of Scotland.  <b>Guidance title:</b> Support for people affected by coronavirus (COVID-19)  <b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b> 15 January 2021</p>	<p><b>Informational websites</b>                      Aimed at people affected by COVID-19. Links are provided to websites covering a wide range of topics including mental health, domestic violence and substance abuse.</p>
<p><b>Country:</b> Singapore  <b>Organisation:</b> Government of Singapore  <b>Guidance title:</b> Official COVID-19 sources</p>	<p><b>Official websites:</b> Ministry of Health; Gov.sg COVID-19.  <b>Gov.sg social media channels:</b> Keeping the public informed on the latest COVID-19 situation in Singapore  <b>COVID-19 Recovery Grant:</b> Lower- to middle-income employees and self-employed persons who are financially impacted by COVID-19 may be eligible to receive up to \$700 a month for three months</p>

Country/organisation	Measures of support available
<p><b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b> 28 December 2020</p>	<p><b>Support Go Where Funds:</b> A number of grants, funds and packages for individuals, including for those issued to stay-at-home  <b>Meh Go Where platform:</b> For youth to get latest information and have fun at the same time during the circuit breaker period. Youth can engage in live streams, refer to articles and useful resources, take part in polls or weekly challenges, submit ideas and much more.  <b>We Go Digital:</b> Self-help resources to help you buy, pay and learn online  <b>Parent Kit:</b> Tips on how you can support your child's learning from home  <b>CPH Online Counselling:</b> For those experiencing marital or parenting stress (<i>From 1 June 2020</i> Live chat: Mon-Fri, 9am-6pm (except public holidays)                      Email: Anytime, counsellor will respond within 3 working days)  <b>List of Community helplines:</b> including National Care Hotline; Mental Well-being hotlines, Marital and parenting hotlines; Violence or abuse hotlines, and counselling hotlines  <b>Legal Support Resources:</b> For those who need legal assistance</p>
<p><b>Country:</b> Singapore  <b>Organisation:</b> Immigration and checkpoints authority Singapore  <b>Guidance title:</b> Stay Home Notice overview  <b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b> Not reported</p>	<p><b>Penalties or fines</b>                      Any breach in the Stay-Home Notice (SHN) requirements is punishable under Singapore laws, which can amount to an imprisonment term and/or fine. Additional punitive measures such as the cancellation of long term visit passes could also be taken by the relevant authorities.</p>
<p><b>Country:</b> Sweden  <b>Organisation:</b> The Public Health Agency of Sweden  <b>Guidance title:</b> The Public Health Agency of Sweden's work with COVID-19  <b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b> 9 November 2020</p>	<p><b>Sick certs abolished</b>                      In order for the individual to be able to meet the government recommendations and the legally binding requirements, the government and parliament have, for example, decided to abolish the qualifying day of sickness, so that many workers can stay at home at the slightest symptom without major financial consequences. The requirement for a medical certificate for sick leave longer than seven days has also been removed in order to relieve the burden on primary care.</p>
<p><b>Country:</b> Sweden  <b>Organisation:</b> Public Health Agency of Sweden</p>	<p><b>Information portals</b>                      National helpline established and info websites as well as factsheets and posters available.</p>

Country/organisation	Measures of support available
<p><b>Guidance title:</b> More about COVID-19  <b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b> 14 December 2020</p>	
<p><b>Country:</b> Sweden  <b>Organisation:</b> Government of Sweden  <b>Guidance title:</b> More about COVID-19  <b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b> Not reported.</p>	<p><b>Financial support</b>  Measures that have been adopted to limit the spread of infection include compensation for the standard deduction for sick days, suspension of the medical certificate requirement during the sick pay period and increased funding for disbursement of the disease carrier’s allowance. In certain cases, people who belong to at-risk groups have been able to stay at home and receive a preventive sickness benefit for a limited period.</p>
<p><b>Country:</b> Switzerland  <b>Organisation:</b> Federal Office of Public Health, Switzerland  <b>Guidance title:</b> COVID-19: Instructions on quarantine  <b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b> 24 December 2020</p>	<p><b>Psychological support</b>  If it is not possible, to talk about your thoughts and feelings with friends or family, or if you still feel anxious about the situation, a helpline and website are available for support.</p> <p><b>Addiction support</b>  Worry, loneliness and stress can lead to increased consumption of alcohol, prescription drugs and other substances. At <a href="http://www.safezone.ch">www.safezone.ch</a> individuals can get online advice on addiction and substance abuse issues, anonymously.</p> <p><b>Victims of violence</b>  For those who feel threatened in their own home, or are seeking assistance or protection, they will find phone numbers and email addresses for anonymous advice and protection throughout Switzerland at <a href="#">Victim Support Switzerland</a></p>
<p><b>Country:</b> Switzerland  <b>Organisation:</b> Federal Office of Public Health, Switzerland  <b>Guidance title:</b> Coronavirus: Isolation and quarantine  <b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b> 18 January 2021</p>	<p><b>Financial entitlements in the event of isolation/quarantine</b></p> <ul style="list-style-type: none"> <li>▪ If you have to go into isolation because you have the coronavirus disease and have been signed off work by a doctor, you are entitled to continued payment of your salary or to daily sickness benefits. The continued payment of salary is governed by the Swiss Code of Obligations. This obliges your employer to keep paying you for at least three weeks. Many employers take out insurance so that employees who are absent for longer periods receive daily sickness benefits covering 80% of their pay. Check with your employer and your employment contract to find out what arrangements apply to you. If you are self-employed, your entitlement to financial compensation will depend on whether you have taken out daily sickness benefit insurance.</li> <li>▪ If you have to go into quarantine because you have been in close contact with a person who has tested positive, you are entitled to compensation for loss of earnings. You have this entitlement if quarantine was ordered by a cantonal office or a doctor. You can submit your claim for compensation to the compensation</li> </ul>

Country/organisation	Measures of support available
	<p>office to which your employer or you yourself, if you are self-employed, are affiliated. Use the application form provided by your compensation office. Note: In the current situation it may be that the cantonal office cannot order quarantine. In this case you can still fill in the application form in any case. Mention on the form that you were not contacted by the cantonal office.</p> <ul style="list-style-type: none"> <li>▪ You will find more information on compensation for loss of earnings (in German, French and Italian) on the website of the Federal Social Insurance Office (FSIO).</li> <li>▪ You will find the rules on quarantine for people entering the country on the quarantine for persons arriving in Switzerland page.</li> </ul> <p><b>Medical certificate</b> Talk to your employer about when you need to present a medical certificate. In the current situation, we recommend employers are accommodating when it comes to demanding medical certificates.</p>
<p><b>Country:</b> Switzerland <b>Organisation:</b> Federal Office of Public Health, Switzerland <b>Guidance title:</b> Nouveau Coronavirus (French) <b>URL:</b> <a href="#">Link</a> <b>Date published/updated:</b> 03 December 2020</p>	<p><b>Penalties or fines</b> Anyone who does not comply with the quarantine or reporting obligation commits an offense to the law on epidemics and is punishable by a fine of up to 10,000 francs.</p>
<p><b>Country:</b> Wales <b>Organisation:</b> Welsh Government Guidance title: Self-isolation support scheme <b>URL:</b> <a href="#">Link</a> <b>Date published/updated:</b> 14 November 2020</p>	<p><b>Self-isolation Support Scheme</b> Means tested one off payment of £500 for those on low income, who cannot work from home and have tested positive for COVID-19 or have been contacted by the NHS Wales Test, Trace Protect service and formally told to self-isolate. This includes parents and carers on low incomes with children who are self-isolating. Payments will be taxed, but are exempt from National Insurance contributions. It should not affect any benefits you get. Application for payment must be within 14 days following the completion of the self-isolation period. On introduction in 30 October payments were backdated to October 23.</p> <p>Each member of a household who are told to self-isolate and are eligible, can apply for the payment. However, if a child is told to self-isolate, only one payment can be claimed for the household at the time of the self-isolation period.</p> <p>Up to three claims can be made for each time tested positive and instructed to self-isolate. Parents and carers can only claim, each time their child has been told to self-isolate. Close contacts can apply twice. Self-isolation periods must not overlap.</p>

Country/organisation	Measures of support available
	<p>Employers may be liable for an offence if they do not comply with the obligation to allow and enable an employee to self-isolate. Employers can be served with a closure notice. If employers breach that notice, they will incur penalties ranging from £2,000 to £10,000. It's recommended that employers do not record the need to self-isolate against an employee's sickness record.</p> <p><b>Discretionary Payment from a local authority</b> For those who meet most of the criteria for the Self-isolation Support Scheme but do not get benefits, a discretionary payment from your local authority can be applied for. Discretionary payments are only made in exceptional circumstances. For example, if: temporary immigration status with a condition that means you cannot apply for benefits, total household income is less than £350 per week or less than £6,000 in savings.</p>
<p><b>Country:</b> Wales <b>Organisation:</b> Welsh Government <b>Guidance title:</b> COVID-19 statutory sick pay enhancement scheme <b>URL:</b> <a href="#">Link</a> <b>Date published/updated:</b> 17 December 2020</p>	<p><b>COVID-19 statutory sick pay enhancement scheme</b> The Statutory Sick Pay Enhancement scheme is for social care staff working in care homes, domiciliary care and as personal assistants who are required to stay off work due to actual or suspected COVID-19 or because they have to self-isolate, excluding self-isolation following foreign travel. This scheme provides funding to allow employers to pay eligible workers at full pay if they cannot work due to COVID-19.</p> <p>Wide range of eligible employment types including full-time or part-time, subject to a zero hours employment contract, subject to a permanent or temporary contract, working from a care agency, bank or pool staff or self-employed.</p> <p>The enhanced payment is payable from the first day of absence and continues for the maximum periods outlined in current guidance. However once a negative test result has been received then payment stops, as according to guidance the person can return to work. There is no limit on the number of times eligible employees can benefit from this scheme. A comprehensive list of eligible staff roles is also provided.</p>
<p><b>Country:</b> Wales <b>Organisation:</b> Welsh Government <b>Guidance title:</b> Contact tracing: support for workers and the self-employed <b>URL:</b> <a href="#">Link</a> <b>Date published/updated:</b> 16 November 2020</p>	<p><b>Statutory Sick Pay (SSP)</b> £95.85 per week for people who have to self-isolate. This includes people who live with someone who has coronavirus symptoms or has tested positive for coronavirus, and people who share a support bubble/extended household with someone who has symptoms or has tested positive for coronavirus. It is available for entire self-isolation period. SSP is not available for reasons relating to entering or returning to the UK.</p>
<p><b>Country:</b> Wales <b>Organisation:</b> Social Care Wales</p>	<p><b>Social care employee assistance programme</b> Helpline (24/7) that offers well-being support to those employed in the social care workforce in the private and voluntary sectors in Wales, including personal assistants.</p>

Country/organisation	Measures of support available
<p><b>Guidance title:</b> Your health and well-being  <b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b> 15 January 2021</p>	
<p><b>Country:</b> Wales  <b>Organisation:</b> Welsh Government  <b>Guidance title:</b> Find support if you're affected by coronavirus  <b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b> Not reported</p>	<p><b>Online Support Directory</b>  Easy to use <a href="#">web app</a> to locate relevant help supports or services if affected by coronavirus. Information is available about what to do if you're feeling unsafe where you live, or what to do if you're worried about the safety of another adult or child, going in to work, paying bills or being unemployed, getting food or medicines, having somewhere to live, mental health and wellbeing, including information for children.</p>
<p><b>Country:</b> Wales  <b>Organisation:</b> Welsh Government  <b>Guidance title:</b> How to self-isolate when you travel to Wales: coronavirus (COVID-19)  <b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b> 23 January 2021</p>	<p><b>Penalties or fines</b>  An adult who contravenes an isolation requirement or provides false or misleading information to the Government commits an offence.  A fixed penalty notice will be issued which provides that person with the opportunity to pay the penalty within 28 days to avoid being convicted of the offence. The first penalty will be for the sum of £500 and subsequent penalties will be £1000, £2000, to a maximum of £4000.</p>
<p><b>Organisation:</b> ECDC  <b>Guidance title:</b> Guidelines for the implementation of non-pharmaceutical interventions against COVID-19  <b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b> 24 September 2020</p>	<p><b>Isolation of symptomatic cases not requiring hospitalisation-Considerations for implementation</b>  There are complicated logistical issues associated with this measure (e.g. food provision, medical supplies, medical care) and training and supplies will therefore be essential to ensure support and infection control (e.g. PPE, proper waste disposal) for household members caring for a person who is ill.</p> <p>Unless carefully managed, the isolated patient may not receive adequate care and support, especially if elderly or living alone. Caregivers would also have to stay at home to care for a patient. Those who are infected, and often their caregivers, will not be able to report to work or go to school, and therefore there may be financial and practical disincentives (e.g. lost income or job insecurity). Support for the financial, social, physical and other needs of patients and caregivers require careful planning.</p> <p>Acceptability will also determine the effectiveness and adherence to this measure. Although isolation could be well-accepted in certain settings, its acceptability may vary considerably. A systematic review of the public perception of non-</p>

Country/organisation	Measures of support available
	<p>pharmaceutical measures for reducing transmission of respiratory infections revealed concerns about isolation due to the perceived adverse impact and social stigma. In five studies carried out during the 2009 influenza pandemic, between 50% and 96% of respondents stated that they would stay home from work if they experienced symptoms, whereas six other studies found that only &lt;1% to 26% would do so.</p> <p><b>Quarantining of contacts- Considerations for implementation</b>                      There are considerable logistical, social and communication challenges in implementing quarantine measures. Some people may be unable to quarantine at home - for example, if they have communal living arrangements. If resources allow, public health authorities could arrange to receive people at specially-arranged quarantine facilities (e.g. hotels).</p> <p>Quarantine may place a significant burden on the individual and Member States could consider supportive action, such as providing food and medicines. This would also reduce the risk of quarantined individuals having to go out and meet other people. There can also be substantial costs associated with quarantine, mainly due to a significant number of people being off work and the amount of testing needed for contact tracing purposes.</p> <p>Compliance and acceptability may vary. Experience from previous pandemics and the SARS epidemic showed that compliance was sub-optimal in communities with cultural similarities to Europe. When quarantine measures are implemented, national laws and regulations have to be taken into account. Engaging with quarantined contact persons through regular follow-up, encouragement and a discussion of the importance of quarantine could help compliance, but this is resource intensive.</p>
<p><b>Organisation:</b> WHO  <b>Guidance title:</b> Considerations for quarantine of contacts of COVID-19 cases  <b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b> 19 August 2020</p>	<p><b>Ensuring an appropriate setting and adequate provisions</b>                      The implementation of quarantine implies the use or creation of appropriate facilities in which a person or persons are physically separated from the community while being cared for.</p> <p>Possible settings for quarantine include hotels, dormitories, other facilities catering to groups, or the contact's home. Regardless of the setting, an assessment must ensure that the appropriate conditions for safe and effective quarantine are being met. Facilities for those in quarantine should be disability inclusive, and address the specific needs of women and children.</p> <p>If quarantine is undertaken at home, chosen, the quarantined person should occupy a well-ventilated single room, or if a single room is not available, maintain a distance of at least 1 metre from other household members. The use of shared spaces, crockery and cutlery should be minimized, and shared spaces (such as the kitchen and bathroom) should be well ventilated.</p>

Country/organisation	Measures of support available
	<p>Strategies for ensuring adequate ventilation in public buildings are described in the WHO Q&amp;A on ventilation and air conditioning in the context of COVID-19.<sup>11</sup> The rooms should ideally be a single room with ensuite hand hygiene and toilet facilities. If single rooms are not available, beds should be placed at least 1 metre apart.</p> <ul style="list-style-type: none"> <li>▪ Physical distance of at least 1 metre must be maintained between all persons who are quarantined.</li> <li>▪ Suitable environmental infection controls must be used, including ensuring access to basic hygiene facilities (i.e. running water and toilets) and waste-management protocols.</li> <li>▪ Accommodation should include:             <ul style="list-style-type: none"> <li>○ provision of adequate food, water, and hygiene facilities;</li> <li>○ secure storage places for baggage and other possessions;</li> <li>○ medical treatment for existing conditions as necessary;</li> <li>○ communication in a language that the quarantined individuals can understand, with an explanation of their rights, services that are available, how long they will need to stay and what will happen if they become sick; if necessary, contact information for their local embassy or consular support should be provided.</li> </ul> </li> <li>▪ Health care must be provided for those requiring medical assistance.</li> <li>▪ Those who are in quarantine, including children, must have some form of communication with family members who are outside the quarantine facility, for example, telephone.</li> <li>▪ If possible, access to the internet, news, and entertainment should be provided.             <ul style="list-style-type: none"> <li>○ Psychosocial support should be available.</li> <li>○ Older persons and those with comorbid conditions require special attention because of their increased risk for severe COVID-19, including access to medical provisions and equipment (e.g. medical masks).</li> </ul> </li> </ul> <p><i>Protection and provision of care for children</i></p> <p>When implementing quarantine, authorities should avoid family separation, weighing the welfare of the child against the potential risk of COVID-19 transmission within the family. Any decision to separate a child from his or her caregiver when implementing quarantine should include careful and thorough consideration of the possible consequences of family separation. If a child is a contact:</p> <ul style="list-style-type: none"> <li>▪ Children should ideally be quarantined at home, in the care of a parent or other caregiver.</li> <li>▪ When this is not possible, children should be quarantined in a household in the care of an adult family member or other caregiver who is at low risk of severe COVID-19. Known risk factors for severe disease include individuals aged &gt;60 years and individuals with underlying medical conditions.</li> <li>▪ If quarantine at home is not possible, children should be quarantined and cared for in a child-friendly space, taking into consideration the specific needs of children, their safety as well as physical and mental well-being. All efforts should be made to allow a caregiver or other adult family member to visit daily and/or stay with the child throughout the quarantine period.</li> </ul>

Country/organisation	Measures of support available
	<ul style="list-style-type: none"> <li>▪ Policies and individual decisions should allow home-based quarantine of children and caregivers based on a holistic assessment in which the child’s best interests are the primary consideration.</li> <li>▪ Any setting that anticipates hosting children, particularly children without caregivers, must provide sufficiently trained care staff who can provide the children with a safe, caring and stimulating environment. Each quarantine facility receiving children should assign one staff member as a focal point for child protection issues. Staff who monitor the health of quarantined children should be trained to recognize the symptoms of COVID-19 in children, as well as signs that they need immediate medical assistance. Referral pathways should be established in advance.</li> </ul> <p>If an adult is a contact, and a child is not, the adult may need to be quarantined apart from the child. In this case, the child should be placed in the care of another non-contact adult family member or caregiver.</p> <p><b>Infection prevention and control measures</b></p> <p>The following IPC measures should be used to ensure a safe environment for quarantined persons. These measures apply to quarantine in a designated facility and to quarantine at home.</p> <p>a) Early recognition and control</p> <ul style="list-style-type: none"> <li>▪ Any person in quarantine who develops febrile illness or respiratory symptoms at any point during the quarantine period should be treated and managed as a suspected COVID-19 case and immediately isolated. Ensure the quarantine facility has a designated referral centre and clear process for any symptomatic person. A designated room (or, if not feasible, designated area) is recommended for isolating any persons who develop symptoms, if the facility uses shared rooms, while waiting to transfer the individual to the referral centre.</li> <li>▪ Standard precautions apply to all persons who are quarantined and to quarantine personnel. <ul style="list-style-type: none"> <li>○ Perform hand hygiene frequently, particularly after contact with respiratory secretions, before eating, and after using the toilet. Hand hygiene includes either cleaning hands with soap and water or with an alcohol-based hand rub. Alcohol-based hand rubs are preferred if hands are not visibly dirty; hands should be washed with soap and water when they are visibly dirty.</li> <li>○ Ensure that all persons in quarantine are practising respiratory hygiene and are aware of the importance of covering their nose and mouth with a bent elbow or paper tissue when coughing or sneezing, and then immediately disposing of the tissue in a wastebasket with a lid and then performing hand hygiene.</li> <li>○ Refrain from touching the eyes, nose and mouth.</li> <li>○ Physical distance of at least 1 metre should be maintained between all persons who are quarantined.</li> <li>○ To prevent COVID-19 transmission effectively in areas of community transmission, governments should encourage the general public to wear masks in specific situations and settings, such as on public transport, in shops or in other confined or crowded environments, as part of a comprehensive approach to suppress SARS-CoV-2 transmission.</li> </ul> </li> </ul> <p>b) Administrative controls</p>

Country/organisation	Measures of support available
	<p>Administrative controls and policies for IPC within quarantine facilities include but may not be limited to:</p> <ul style="list-style-type: none"> <li>▪ Educating persons who are quarantined and quarantine personnel about IPC measures. All personnel working in the quarantine facility need to have training on standard precautions (hand hygiene, respiratory etiquette, PPE, cleaning and disinfection, waste and linen management) before the quarantine measures are implemented. The same advice on standard precautions should be given to all quarantined persons on arrival.</li> <li>▪ Both personnel and quarantined persons should understand the importance of promptly seeking medical care if they develop symptoms; developing policies to ensure the early recognition and referral of a suspected COVID-19 case.</li> </ul> <p>c) Environmental controls</p> <p>Environmental cleaning and disinfection procedures must be followed consistently and correctly. Those responsible for cleaning need to be educated about and protected from COVID-19 and ensure that environmental surfaces are regularly and thoroughly cleaned throughout the quarantine period, as well as ensuring safe and appropriate storage, handling and use of all cleaning materials and disinfectants. The following actions are important:</p> <ul style="list-style-type: none"> <li>▪ Establish sustainable IPC infrastructure (for example, by designing appropriate facilities).</li> <li>▪ Ensure all persons quarantined in facilities have single rooms with en-suite facilities. Where single rooms are not available, maintain a minimum of 1 metre separation between beds and apply cohorting strategies.</li> <li>▪ Clean and disinfect frequently touched surfaces – such as bedside tables, bed frames and other bedroom furniture – at least once daily. Clean and disinfect bathroom and toilet surfaces at least once daily. Regular household soap or detergent should be used first for cleaning, and then after rinsing, regular household disinfectant, containing 0.1% sodium hypochlorite (bleach, equivalent to 1000ppm) should be applied by wiping surfaces. For surfaces that cannot be cleaned with bleach, 70% ethanol can be used.</li> <li>▪ Wash clothes, bed linen, and bath and hand towels using regular laundry soap and water, or machine wash at 60–90 °C (140–194 °F) with common laundry detergent, and dry thoroughly.</li> <li>▪ In a designated quarantine facility, cleaning personnel should wear adequate personal protective equipment (PPE) and be trained to use it safely. In non-health care settings where disinfectants such as bleach are being prepared and used, the minimum recommended PPE is rubber gloves, impermeable aprons and closed shoes.<sup>13</sup> Eye protection and medical masks may be needed to protect personnel against chemicals used or if there is a risk of exposure to blood /body fluids, such as when handling soiled linen or cleaning toilets. Cleaning personnel should perform hand hygiene before putting on and after removing PPE.</li> <li>▪ Waste generated during quarantine should be placed in strong bags and sealed before disposal.</li> <li>▪ Countries should consider implementing measures to ensure that this type of waste is disposed of in a sanitary landfill and not in an unmonitored open area.</li> </ul> <p><b>Requirements for monitoring the health of quarantined persons</b></p>

Country/organisation	Measures of support available
	<p>Daily follow up of persons who are quarantined should be conducted within the facility or home for the duration of the quarantine period and should include screening for body temperature and symptoms in accordance with WHO and/or national surveillance protocols and case definitions. Groups of persons at higher risk of severe disease (individuals aged &gt;60 years and individuals with underlying medical conditions) may require additional surveillance or specific medical treatments.</p> <p>Consideration should be given to the resources needed, including personnel and, for example, rest periods for staff at quarantine facilities. Appropriate resource allocation is particularly important in the context of an ongoing outbreak, when limited public health resources may need to be prioritized for health-care facilities and case-detection activities.</p> <p><i>Laboratory testing during quarantine</i> Any person in quarantine who develops symptoms consistent with COVID-19 at any point during the quarantine period should be treated and managed as a suspected case of COVID-19 and tested. For contacts who do not develop symptoms, WHO no longer considers laboratory testing a requirement for leaving quarantine after 14 days.</p>
<p><b>Organisation:</b> WHO <b>Guidance title:</b> Policy Brief: COVID-19 and the Need for Action on Mental Health <b>URL:</b> <a href="#">Link</a> <b>Date published/updated:</b> 13 May 2020</p>	<p>To minimize the mental health consequences of the pandemic, it is important to consider urgently the following 3 recommended actions:</p> <ol style="list-style-type: none"> <li>1. Apply a whole-of-society approach to promote, protect and care for mental health Mental health actions need to be considered essential components of the national response to COVID-19. A whole-of-society approach for mental health in COVID-19 means: <ul style="list-style-type: none"> <li>▪ including mental health and psychosocial considerations in national response plans across relevant sectors, for example supporting learning and nurturing environments for children and young people who are confined at home;</li> <li>▪ responding proactively to reducing pandemic- related adversities that are known to harm mental health, for example domestic violence and acute impoverishment; and</li> <li>▪ crafting all communications to be sensitive of their potential impact on people’s mental health, for example by communicating empathy for people’s distress and including advice for their emotional well-being.</li> </ul> </li> <li>2. Ensure widespread availability of emergency mental health and psychosocial support Mental health and psychosocial support must be available in any emergency. Achieving this objective during the COVID-19 pandemic means: <ul style="list-style-type: none"> <li>▪ supporting community actions that strengthen social cohesion and reduce loneliness, for example supporting activities that help isolated older adults stay connected;</li> <li>▪ investing in mental health interventions that can be delivered remotely, for example quality-assured tele-counselling for frontline health-care workers and people at home with depression and anxiety;</li> </ul> </li> </ol>

Country/organisation	Measures of support available
	<ul style="list-style-type: none"> <li>▪ ensuring uninterrupted in-person care for severe mental health conditions by formally defining such care as essential services to be continued throughout the pandemic; and</li> <li>▪ protecting and promoting the human rights of people with severe mental health conditions and psychosocial disabilities, for example, by monitoring whether they have equal access to care for COVID-19.</li> </ul> <p>3. Support recovery from covid-19 by building mental health services for the future All affected communities will need quality mental health services to support society’s recovery from COVID-19, and this requires investment in the following:</p> <ul style="list-style-type: none"> <li>▪ using the current momentum of interest in mental health to catalyse mental health reforms, for example by developing and funding the implementation of national services re-organization strategies that shift care away from institutions to community services;</li> <li>▪ making sure that mental health is part of universal health coverage, for example by including care for mental, neurological and substance use disorders in health care benefit packages and insurance schemes;</li> <li>▪ building human resource capacity to deliver mental health and social care, for example among community workers so that they can provide support;</li> <li>▪ organising community-based services that protect and promote people’s human rights, for example by involving people with lived experience in the design, implementation and monitoring of services.</li> </ul> <p>Rapid implementation of these recommended actions will be essential to ensure people and societies are better protected from the mental health impact of COVID-19.</p>
<p><b>Organisation:</b> WHO  <b>Guidance title:</b> Coronavirus disease (COVID-19) advice for the public  <b>URL:</b> <a href="#">Link</a>  <b>Date published/updated:</b> 22 January 2021</p>	<p><b>Information</b>  A suite of resources available on the WHO website relating to advice for the public, for example Myth busters, FAQs etc.</p>

## Appendix 2: Data extraction table for RQ2 evidence summary

Study descriptors	Population characteristics	Primary outcome	Restrictive measures
<p><i>Author (year):</i> Kavanagh (2011)</p> <p><i>Country:</i> Australia</p> <p><i>DOI:</i> 10.1186/1471-2334-11-2</p> <p><i>Study design:</i> cross-sectional survey</p> <p><i>Virus:</i> H1N1</p> <p><i>Date of data collection:</i> data related to quarantine from 22 May 2009 to 2 June 2009 (survey carried out Nov/Dec 2009)</p>	<p><i>Sample size:</i> 297 families (27% participation rate)</p> <p><i>Setting:</i> School</p> <p><i>Age (mean ±SD):</i> 49% of respondents oldest child was under 12 years old</p> <p><i>Sex (% male):</i> 54 (85.5%)</p> <p><i>Measure(s) implemented:</i> Information on quarantine</p> <p>17% of participants had a confirmed case of pH1N1 in their household</p>	<p><i>Compliance to measure(s):</i> 90% (166/297) of participants understood what they were meant to do during the quarantine period. This proportion was significantly higher in households with cases than in households with contacts only (98%, 95% CI 93%-99% vs 88%, 95% CI 84%-91%, <math>P &lt; 0.001</math>). Nearly 90% of parents received information about quarantine from the school and 63% obtained information from the health department. The next most common information source was the media (44%). Overall, most families used multiple sources of information; only 1 household reported that they did not use any sources. 24% used only one source, 32% used two, and 44% used three or more. Approximately two-thirds of participants reported that they found the information from the health department, schools and health service providers useful or extremely useful, whereas only 38% gave media sources this rating.</p> <p>53% of participants reported full compliance with quarantine recommendations within their household. Of the 90% of respondents who reported understanding what they were meant to do during quarantine, 55% (<math>n = 147</math>) reported full compliance. In contrast, full compliance was only reported by 35% (<math>n = 11</math>) of the minority who did not report that they understood what they were meant to do. Compliance was higher in the households that reported understanding what they were meant to do during the quarantine period (Odds Ratio 2.27, 95% CI 1.35-3.80).</p>	<p><i>Restrictive measures at that time:</i> "Voluntary home quarantine of cases and close contacts was the main non-pharmaceutical intervention used to limit transmission of pandemic (H1N1) 2009 influenza (pH1N1) in the initial response to the outbreak of the disease in Australia. The Australian Government's management plan for pandemic influenza recommended school and classroom closures to reduce the early spread of the virus." The trigger for closure of mainstream schools was two or more confirmed cases in separate classes.</p>

Study descriptors	Population characteristics	Primary outcome	Restrictive measures
<p><i>Author (year):</i> Kavanagh (2012) (same study as Kavanagh 2011)</p> <p><i>Country:</i> Australia</p> <p><i>DOI:</i> 10.1186/1471-2334-12-311</p> <p><i>Study design:</i> Cross-sectional survey</p> <p><i>Virus:</i> H1N1</p> <p><i>Date of data collection:</i> data related to quarantine from 22 May 2009 to 2 June 2009 (survey carried out Nov/Dec 2009)</p>	<p><i>Sample size:</i> 133 households (all resident parents were employed during quarantine period)</p> <p><i>Setting:</i> Schools</p> <p><i>Age (mean ±SD):</i> Not reported</p> <p><i>Sex (% male):</i> Not reported</p> <p><i>Measure(s) implemented:</i> access to paid sick leave or paid carer's leave to look after quarantined children.</p> <p>6% of participants had a confirmed case of pH1N1 in their household</p>	<p><i>Reduction in spread of infection:</i> Not reported.</p> <p><i>Compliance to measure(s):</i> Definition of quarantine: 1. All quarantined members of the household stayed at home for most of each day. 2. Quarantined children did not mix with children from another household for 15 minutes or more. 3. No adults from other households visited the home for 15 minutes or more. 4. No quarantined household members visited public places being utilised by lots of other people (excluding visits to health practitioners). 5. Childcare was provided only by adults living in the household.</p> <p>An overall measure of compliance was constructed distinguishing households that met all the criteria from those that did not.</p> <p>A larger proportion of households with access to leave had a parent who took time off work to care for a child (58% (47/81) vs 42% (22/52). Across the sample, thirty-eight per cent of households (26/69) lost pay as a result of taking time off work to care for quarantined children. Loss of pay was more frequent in households that did not have access to leave (73% vs 21%, p&lt;0.001). Half of all households were fully compliant with quarantine recommendations. Compared to households without access to sick leave or carer's leave, households with access to leave appeared more likely to have all quarantined members stay at home for most of the time on all days during the quarantine period (88% compared with 75%) (OR=2.07; 95% CI 0.82 to 5.23; p=0.12 after adjustment for parental structure and parental education). the relationship between taking time off</p>	<p><i>Restrictive measures at that time:</i> "Voluntary home quarantine of cases and close contacts was the main non-pharmaceutical intervention used to limit transmission of pandemic (H1N1) 2009 influenza (pH1N1) in the initial response to the outbreak of the disease in Australia. The Australian Government's management plan for pandemic influenza recommended school and classroom closures to reduce the early spread of the virus." The trigger for closure of mainstream schools was two or more confirmed cases in separate classes.</p>

Study descriptors	Population characteristics	Primary outcome	Restrictive measures
		<p>and quarantine compliance (independent of access to leave), quarantined members of households in which a parent took time off work were less likely to make trips to populated public spaces during the quarantine period (97% vs 84%) and these households were more likely to have all quarantined members stay at home for most of the time on all days during the quarantine period (88% vs 77%). After adjustment for parental education and parental structure of households, staying at home on all days OR 2.47, 95% CI 1.17–5.22, <math>p=0.02</math> and seven times the odds of not making trips outside the home (OR 7.20, 95% CI 1.42–36.51, <math>p=0.02</math>). Taking time off work was not, however, associated with full compliance.</p> <p><i>Reduction in spread of infection:</i> Not reported.</p>	

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