

<b>Institution:</b> London School of Economics and Political Science		
<b>Unit of Assessment:</b> 22A – Anthropology		
<b>Title of case study:</b> A social calculus for Covid-19 policy: ensuring equity, social support, and co-production in the UK Government response to the pandemic		
<b>Period when the underpinning research was undertaken:</b> 2007-2020		
<b>Details of staff conducting the underpinning research from the submitting unit:</b>		
<b>Name(s):</b> Laura Bear	<b>Role(s) (e.g. job title):</b> Professor of Anthropology	<b>Period(s) employed by submitting HEI:</b> 2000 to present
<b>Period when the claimed impact occurred:</b> March-December 2020		
<b>Is this case study continued from a case study submitted in 2014?</b> No		
<p><b>1. Summary of the impact</b> (indicative maximum 100 words)</p> <p>Research led by Professor Laura Bear has provided anthropological insights to Covid-19 responses at the highest levels of the UK Government. Bear is the only anthropologist to be a member of the central coordinating group of the Scientific Pandemic Influenza Group on Behaviours and the Ethnicity subgroup, which deliver expert advice to the Scientific Advisory Group for Emergencies (SAGE) on behavioural interventions. She has introduced a social calculus (reduction of inequality and prevention of adverse impact on disadvantaged/minoritized groups) to government policy. Since March 2020, her work has significantly impacted scientific advice provided by SAGE to the Covid-19 Strategy and Covid-19 Operations committees in No. 10 and to the Health Secretary. In addition, her work has directly led to policy design in the Government Communication Service Behavioural Science Unit, Public Health England, and the Ministry of Housing, Communities and Local Government.</p>		
<p><b>2. Underpinning research</b> (indicative maximum 500 words)</p> <p>Bear has conducted extensive work on the anthropology of policy, including analysis of the effects of austerity on relations of care and kinship [1]. Drawing on long-term ethnographic research funded by the ESRC among precarious workers in India, she has stressed the need for government decision-making to be informed by a “social calculus” and new practices of the public good that prioritise the reduction of inequality [1] [2]. The social calculus measures policy according to whether it improves the capacity of precarious communities to plan for the future and the extent to which it reduces entrenched disadvantage [3] [4]. Unusually this approach considers impacts on relations of social reproduction and kinship. Continuing this research in the UK as part of the ESRC-funded Rebuilding Macroeconomics project, Bear argued for attention to be paid to whether fiscal and welfare policy allows community networks of care and family relations to thrive [5]. The ethnographic methodologies she deploys are uniquely suited to reveal the multilayered impact of government decision-making on communities.</p> <p>Bear’s expertise in the anthropology of policy and ethnographic methods, and the concept of the social calculus, in particular, led to her being invited in late March 2020 to join the Scientific Pandemic Influenza Group on Behaviours (SPI-B). At the same time, she convened a group of LSE anthropologists to research the unequal impacts of the Covid-19 pandemic on communities and their networks of informal and formal care in the UK (funded by an LSE Covid Rapid Response Grant). Under Bear’s leadership this group has conducted rapid-response research throughout the pandemic [6], focusing especially on disadvantaged and minoritized communities in London and the Midlands. This research has been ongoing and responsive to the Scientific Advisory Group for Emergencies (SAGE) and government department policy needs, feeding via Bear’s contributions into 14 evidence papers and policy measures related to co-production, care, and community support. It has also provided an independent analysis of community concerns, charting the following, in particular: excess death and commemorations [7]; an increasing care gap in areas of multiple deprivation; new forms of mutuality and community self-help linked to local authority pandemic responses; and rising forms of stigma and exclusion [6].</p> <p>As its first project, the LSE group, led by Bear, carried out a public survey and 58 cross-community interviews leading to the report, “‘A Good Death’ During the Covid-19 Pandemic in the UK” [7]. The report explored the ways in which government communications and policy could be used to support and prepare communities and households for Covid-19 deaths. Research explored “what</p>		

a good death looks like” for people across all faiths and especially for disadvantaged groups. It examined how communities were already adapting to processes of dying, burial, funerals, and bereavement during the pandemic, and how they were responding to new government regulations. The report focused specifically on five moments in the process of death: pre-admission; hospital admission; disposal and release of the body; funerals; and bereavement. It proposed policy measures to ameliorate the experience of loss and foster social cohesion in each of these settings. These included the assertion of a right to a dignified death for all communities, with a prioritisation of this in all future social restrictions; compassionate government communications around the scale of the national loss; dignified practices of death in hospitals and in crematoria; and special targeted communications for those bereaved as a result of Covid-19.

Bear then directed the LSE group, from April 2020 to the present, in a study of how national and local social restrictions had disrupted formal and informal support networks, disproportionately affecting disadvantaged and minoritized groups [6]. This work (based on extensive interviewing over several months and a survey of 3,800 people) shows that, because government policy was initially blind to the significance of community care and kinship, it had broken relationships essential to socio-economic life in the UK. Its pandemic, social welfare, and economic policies at first did not recognise the new care burdens emerging at the local level. Alongside this, austerity had undermined essential financial support, links, and information exchange between third sector, voluntary, and community organisations and local authorities. This left the UK ill-prepared to deal with and recover from the pandemic. Further problems were caused by a rise of political blame narratives and a stigmatisation of minoritized communities or places under lockdown, particularly as national restrictions changed into local interventions from June 2020 onwards. In addition, government rules were difficult to follow and caused alienation because they ran against the grain of social practices of childcare, religious life, and elder care, while prioritising economic opening. These rules and policies have caused particular problems for the extensively networked families of minoritized or socio-economically disadvantaged groups, undermining government legitimacy. The research also gave a detailed account of the ways in which the pandemic had reverberated through, and caused deep distress to, the community and relational life of those in other sectors. Overall, social recovery and cohesion were potentially placed at risk as a result of policies that had not yet fully adopted a social calculus [6].

### 3. References to the research (indicative maximum of six references)

- [1] Bear, L. (2015). *Navigating Austerity: Currents of Debt along a South Asian River*. Stanford University Press. ISBN: 9780804789479.
- [2] Bear, L. and Mathur, N. (2015). Introduction: Remaking the public good. *The Cambridge Journal of Anthropology*, 33(1), pp. 18-34. DOI: 10.3167/ca.2015.330103.
- [3] Bear, L. (2014). Capital and time: uncertainty and qualitative measures of inequality. *The British Journal of Sociology*, 65(4), pp. 639-649. DOI: 10.1111/1468-4446.12107.
- [4] Bear, L. (2016). Anthropological futures: for a critical political economy of capitalist time. *Social Anthropology*, 25(2), pp. 142-158. DOI: 10.1111/1469-8676.12412.
- [5] Bear, L. (2019). Fixing Inequalities in Time. *Suomen Antropologi: Journal of the Finnish Anthropological Society*, 44(3-4), pp. 3-23. DOI: 10.30676/jfas.v44i3-4.91409.
- [6] L. Bear et al. (2020). *A Right to Care: the Social Foundations for Recovery from Covid-19*. Covid and Care Research Group, LSE Anthropology. Available at: <http://eprints.lse.ac.uk/107060/>. Downloaded 2,592 times; 2,601 hits.
- [7] L. Bear et al. (2020). ‘A Good Death’ During the Covid-19 Pandemic in the UK. A Report of Key Findings and Recommendations. LSE Anthropology. Available at: <http://eprints.lse.ac.uk/104143/>. Downloaded 948 times; 1,753 hits.

### 4. Details of the impact (indicative maximum 750 words)

Bear is currently the only anthropologist member of SPI-B and the Ethnicity subgroup of SAGE. This position has enabled her to contribute a unique perspective based on a social calculus to the UK Government’s handling of Covid-19 policy. She has led on or co-authored 14 papers for SAGE on key strategies related to: support bubbles; social restrictions and interventions; ethnicity and Covid-19 disparity; co-production; and community aid initiatives [A]. She has also worked with the Cabinet Office, Civil Contingencies Secretariat (CCS), Public Health England (PHE), and the

Ministry of Housing, Communities and Local Government (MHCLG) on the design of communications and policy.

### **Informing new policy relating to the management and commemoration of death**

The "Good Death" report [7] was produced in response to an urgent CCS and Government Communication Service Behavioural Science Team (GCS) request to investigate how to deal humanely with excess death during the first wave (47,243 excess deaths from 7 March to 8 May 2020 in England and Wales; 37,295 Covid-19-related). They wanted to understand attitudes and practices towards loss, funerals, and burial among different ethnic and faith communities. The research revealed a common concern across all communities, which was that they wanted a dignified process of death enabled by access to relatives in hospital, larger observances at funerals, and national acknowledgement of the traumatic losses occurring. In addition, the report recommended that particular effort should be put into briefing and funding bereavement charities. Once finished, the CCS and GCS circulated key insights to communications teams in the Department of Work and Pensions, HMRC, Ministry of Justice, MHCLG, and the Daily Covid Conference Briefing Team [B] [C]. As a result, on 15 April the Health Secretary announced a range of new policies that would give families the "right to say goodbye to loved ones" in care homes, hospitals, and at funerals, and for the first time acknowledged the national losses occurring [D]. This humane policy, emphasising the right to a dignified death and altering the experience of mourning the dead for families across the UK [E], has continued through the second lockdown.

The influence and value of the "Good Death" report has subsequently been confirmed by the GCS Cabinet Office Behavioural Science team leaders: *"The 'Good Death' report was one of the most influential pieces of external research that we have been able to draw on during the CV19 pandemic...[It] has helped the GCS Behavioural Science team put anthropological approaches as one really key learning of what communications should draw on going forward, and we embedded the 'Good Death' report also in more tangential communications challenges such as communicating with the BAME community (where we were able to draw out differences between groups and their socio-political relevance). It has changed our Behavioural Science approach to incorporate anthropological ways of thinking about problems, and we will be looking into deepening our own expertise in this area, too"* [B]. Furthermore, the Government Chief Scientific Adviser has described how the report has been *"recognised as a paper of particular distinction and impact by colleagues in the Cabinet Office"* [A].

### **Changing the UK Government's approach to care**

In the first wave of the pandemic from March to April 2020, families were unable to form support bubbles, except for childcare between separated parents. In early May, as SAGE were considering how to open up after the national restrictions, they asked SPI-B to explore the behavioural considerations around social bubbling as practiced in New Zealand, Canada, and Guernsey. Bear was asked to lead on this paper and to consider the social support implications and behavioural effects of the sequencing of allowing various households to join. Drawing on the concepts of a social calculus [1] [2] [3] [4] [5] applied to the specific community and kinship structures of the UK, she recommended that social connections between households should be allowed early in the reopening of UK society [F]. This policy recommendation was designed to relieve the burdens of care in UK families and enable extended networks of socio-economically disadvantaged and minority groups to reconnect for support. It was also intended to signal the importance of mutuality and care as central to government policy. This advice was conveyed through SAGE to No. 10 committees dealing with the pandemic. The government subsequently prioritised childcare ties between all households and single individuals joining with households in their 11 May 2020 recovery plan. Bear drew on the ongoing findings of the LSE Covid and Care Research Group [6] to amplify and extend this advice on social connections to SAGE and the Ethnicity subgroup and the range of permitted support bubbles has been greatly extended [G]. In addition, bubbles were deployed during Christmas to enable families that had been apart for a long time to meet in areas of the country where transmission levels permitted [H]. The Government Chief Scientific Adviser has attested to the usefulness of Bear's input and the continuing influence of her advice: *"In particular, advice titled 'Well-being and Household Connection' (14 May 2020) which Prof Bear was the lead writer on, contributed to support bubble policies deployed by the government in the recovery from the first wave, and which have continued through the Christmas period and now as we emerge from the second wave"* [A]. He also highlighted her contribution to the Ethnicity

subgroup which led SAGE “to focus on household transmission in general and its specific risks for some groups, which will be particularly important as we embed new practices in everyday life to emerge from the second wave” [A]. Bear held the government to account in relation to these issues by authoring a newspaper article and Lancet article [I] [J]. The impact of a changing government approach to the significance of care relations and social support can be seen in the current regulations [K].

### **Altering the UK Government’s approach to local interventions**

In the government’s 11 May 2020 recovery plan, “local lockdowns” were an important means of preventing and limiting the transmission of Covid-19. A priority was to manage new outbreaks by detecting infection “hotspots” and using targeted measures to tackle these. Effective local lockdowns were integral to the release of the national lockdown: by controlling the spread of the virus within a particular area, they were intended to delay the need to re-impose social distancing restrictions across the whole country.

However, the ongoing research by the LSE Covid and Care Research group on the effects in the first local restriction area, Leicester, demonstrated the great social costs of this policy [6]. Not only was social support restricted, causing care burdens to intensify, but also social cohesion and the legitimacy of the measures were adversely affected. PHE were also concerned by the potential negative effects of local interventions and asked Bear to carry out some rapid-action research for them in Leicester, which was also shared with the Cabinet Office [L]. At the same time, SPI-B, with co-authorship by Bear, presented a briefing to SAGE [M]. This drew directly on the research carried out at LSE and a paper on co-production co-authored by Bear [N]. This paper emphasised how a more just set of social policies could be generated even in rapid response situations by prioritising engagement with “local experts”. These were not people in formal roles, but individuals who sit at nodes of dense interconnecting social networks and can speak to a variety of experiences. These engagements would need to go beyond well-known “leaders”, to explore a range of usually excluded perspectives including those within sub-communities. The paper encouraged deep reflection on the part of local authorities on who their key communities were. It also recommended that existing spaces of mutual engagement between communities should be the setting for these consultations. The aim of these would be not just to give feedback on policy but to develop different policies at the local level in relation to particular situations.

The SPI-B local interventions briefing recommended this form of local planning through co-production with regional public health teams; public health officers in the local authority in consultation with a wide range of communities. It also suggested the renaming of local lockdowns as “interventions”. This terminology was subsequently reflected in government guidance for local decision-makers on containing Covid-19 [O]. Even more importantly, co-production and ethnographic research were embedded in PHE to ensure consultation and co-production in areas of local intervention. A broader debate on local interventions also began in the press, holding the government to account [P]. As stated by the PHE Head of Behavioural Science Covid-19 Behavioural Science and Insights Unit, research by Bear and her team “has been pivotal to the strategies of local social interventions during the Covid-19 pandemic, through rapid responsive research and evaluation, and the use of ethnographic methodologies... [it] contributed to the implementation of PHE and its partners’ local response. We began to focus on liaisons with local authorities and community groups and started to use more extensive ethnographic methods and evidence to generate greater co-production” [L].

### **Initiating community responses and new forms of co-production**

The importance of community consultation and co-production in generating policy moves in line with a social calculus is at the core of Bear’s research [1] [6]. This has now become central to the UK Government’s response to preventing transmission, improving vaccine uptake, and developing greater health equity. Bear co-authored a briefing for SAGE on Community Champions as a response to dealing with the pandemic, particularly among disadvantaged and minority communities [Q]. This included findings from the LSE Covid and Care Research Group in relation to the importance of cooperation between local community groups and local authorities in responding to public health and trust issues around Covid-19 [6]. As a result of this, Bear has been directly advising MHCLG on the design, implementation, and evaluation of its Community Champions policy since October 2020. Drawing on her recommendations on supporting community recovery, co-production, and cooperative efforts in areas of multiple deprivation worst

hit by the Covid-19 pandemic, 60 local authorities are now running Community Champion schemes with government funding to achieve these ends [R] [S]. MHCLG intend this approach, based on a social calculus, to be the foundation for a more equitable recovery from the pandemic across the UK [T]. Bear's research and advice have been vital to the development of this programme, as confirmed by the Deputy Director, Faith Integration and Communities at MHCLG: "Professor Bear has since October 2020 provided crucial advice that has been central to our design, implementation and evaluation of our new MHCLG Community Champions programme...It was on the basis of [her] writings and our weekly conversations that we formulated our approach to the Community Champions initiative. Professor Bear contributed directly to the overall design, call for proposals from local authorities, training, and evaluation process. Her ideas, writings and assistance have led to the current success of the programme which is running in 60 local authorities in the most deprived areas of the UK" [T].

#### 5. Sources to corroborate the impact (indicative maximum of 10 references)

[A] Supporting statement from Government Chief Scientific Adviser, 25 February 2021.

[B] Supporting statement from Team Leaders, GCS Behavioural Science Team, Cabinet Office, 25 February 2021.

[C] Email from GCS Behavioural Science Team detailing government departments to have received report findings, 27 April 2020.

[D] "Hancock vows to give families 'right to say goodbye' to loved ones", [The Guardian](#), 15 April 2020. See also UK Government Coronavirus press conference, 15 April 2020 (available on [YouTube](#)).

[E] COVID-19: guidance for arranging or attending a funeral during the coronavirus, [Department of Health and Social Care and Public Health England](#). Updated 22 January 2021.

[F] SPI-B: Well-being and Household Connection: the behavioural considerations of 'Bubbles', [UK Government](#).

[G] Housing, household transmission and ethnicity: For SAGE meeting, 26 November 2020, [UK Government](#), 24 November 2020.

[H] SPI-B Insights on Celebrations and Observances during COVID-19, [UK Government](#).

[I] "Lockdown rules won't be respected if they prioritise business over human relationships", [The Guardian](#), 27 October 2020.

[J] Mathur, R., Bear, L., Khunti, K., and Eggo, R. M. (2020). Urgent actions and policies needed to address COVID-19 among UK ethnic minorities. [The Lancet](#), 396(10266), pp. 1866-1868.

[K] Making a support bubble with another household, [Department of Health and Social Care](#), 9 September 2020.

[L] Supporting statement from Head of Behavioural Science Covid-19 Behavioural Science and Insights Unit, Public Health England, 1 March 2021.

[M] SAGE commission to SPI-B: Areas of intervention ("local lockdown") measures to control outbreaks of COVID during the national release phase, [UK Government](#), 30 July 2020.

[N] Principles for co-production of guidance relating to the control of COVID-19, [UK Government](#), 8 July 2020.

[O] COVID-19 contain framework: a guide for local decision-makers, [UK Government](#). Updated 28 August 2020.

[P] Examples of media coverage include: [The Guardian](#), 14 August 2020; [Daily Mirror](#), 15 August 2020; [inews](#), 16 August 2020.

[Q] The role of Community Champion networks to increase engagement in the context of COVID-19: Evidence and best practice, [UK Government](#).

[R] Minister for Equalities sets out government action to tackle Covid disparities, [UK Government press release](#), 22 October 2020.

[S] Community Champions to give COVID-19 vaccine advice and boost take up, [UK Government press release](#), 25 January 2021.

[T] Supporting statement from Deputy Director, Faith Integration and Communities, MHCLG, 25 February 2021.