



PREVENTING COVID-19 TRANSMISSION WITHIN THE HOUSEHOLD:

RECOMMENDATIONS TO SUPPORT HOUSEHOLD MEMBERS

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PURPOSE

Secondary transmission rates of COVID-19 within households exceed those in other settings. Two meta-analyses have summarized results from household studies and found pooled rates of COVID-19 in households of 27% and 19%, respectively, with individual studies reporting rates as high as 90%.⁴ A home is a social environment and implementing COVID-19 prevention measures over an extended period in that setting can be very difficult. Therefore understanding how households implement these measures is crucial.

KEY MESSAGES AND POLICY SUGGESTIONS

Nine key messages and policy suggestions have been developed out of this work aimed at optimising support for household members living with a person who has COVID-19

1. PROVIDE INFORMATION ABOUT THE POTENTIAL INFECTIVITY OF THE INDEX CASE

Messaging related to preventing disease transmission in the home should emphasise the fact that regardless of how ill the patient appears, there remains the risk of infection to other household members.

2. CONSIDER TESTING ALL HOUSEHOLD MEMBERS REGARDLESS OF SYMPTOMS

Having a negative test result while living with someone diagnosed with COVID-19 will motivate household members to maintain preventive measures within the home. Thereby, testing can shorten the duration of self-isolation.

3. MOTIVATE PEOPLE TO GET TESTED IMMEDIATELY WHEN SYMPTOMS START

Explain the benefits to the whole household of people getting tested early and the need to implement stringent infection prevention measures as soon as concerns arise.

4. EMPHASIZE THE VALUE OF PERSEVERANCE AND OF IMPLEMENTING ROUTINES FOR PREVENTING INFECTION IN THE HOME

Messaging should emphasize that infection prevention is useful and important regardless of how long household members have been living with a person who is ill with COVID-19. Becoming infected isn't inevitable: every effort counts.

5. HELP HOUSEHOLD MEMBERS PROVIDE QUALITY CARE AT HOME

Information about how to care for household members with COVID-19 and when to seek medical care should be provided. Checklists are seen as particularly useful as a way of providing information.

6. COMMUNICATE DIRECTLY WITH HOUSEHOLD MEMBERS

Information should be directed at household members and provided to them when they are living with a person who has COVID-19. Immediate provision of information from an official source is an effective approach to meet household member information needs.

7. ENCOURAGE HOUSEHOLDS TO DISCUSS THEIR FEELINGS ABOUT POTENTIAL DIAGNOSIS WITH COVID

Anger, fear, anxiety and feeling overwhelmed are common and legitimate emotions when a household member first becomes unwell. Discussing feelings will help households prepare for that scenario which can build resilience.

8. SHARE SOLUTIONS THAT OTHERS HAVE FOUND TO WORK

The home is a social environment. Preventive measures have a greater chance to be adopted, maintained and be successful if they work within a household's daily rituals and routines.

9. CONSISTENCY IS KEY

Different policies and guidelines from schools, employers and national government creates confusion.



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PURPOSE (CONT.)

In order to reduce infections within household settings, it is important to understand how household members implement transmission prevention recommendations in the home⁵, how



they experience the impact of living with someone who has COVID-19, and what needs they have in terms of information and support. Understanding how best to influence the behaviour of individuals and families living with someone diagnosed with COVID-19 requires evidence.⁶

FINDINGS

We found that almost all households implemented some preventive measures, the use of face masks being least frequently reported. Measures taken depended on what was physically possible, the perceived severity of illness of the index patient and the extent to which measures limited social interaction. Our participants did not want to wear face masks within the house, and from the interviews this was explained by doubts about effectiveness, impracticality and the stigma associated with wearing masks. Interviewees reported that self-isolation had a high emotional burden and they wished to have more information about how long they could expect to stay in self-isolation, their own COVID-19 status, symptoms

and when to seek medical help.

METHODS FOR DATA COLLECTION

Our findings are based on follow up of 34 households in the Netherlands and Belgium during the first wave of the pandemic (April-May 2020) with a confirmed SARS-CoV-2 infection. One member of the household completed a survey on household characteristics and from all household members characteristics and views on transmission prevention measures were captured. One adult household member was also asked to participate in an interview investigating their views on preventive measures.



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⁵ [https://www.who.int/publications/i/item/home-care-for-patients-with-suspected-novel-coronavirus-\(ncov\)-infection-presenting-with-mild-symptoms-and-management-of-contacts](https://www.who.int/publications/i/item/home-care-for-patients-with-suspected-novel-coronavirus-(ncov)-infection-presenting-with-mild-symptoms-and-management-of-contacts)

⁶ Experiences and Needs of Persons Living with a Household Member Infected with SARS-CoV-2 1 - a Mixed Method Study. J.D.M. Verberk*, S.A. Anthierens*, S. Tonkin-Crine, H. Goossens, J. Kinsman, M.L.A. de Hoog, J. 5 Bielicki, P.C.J.L. Bruijning-Verhagen, N.H. Gobat. Under Review Plos One.