

Webster, R.K., et al. How to improve adherence with quarantine: rapid review of the evidence. 2020. Public Health. 182: 163-69. <https://www.sciencedirect.com/science/article/pii/S0033350620300718>

This publication is a rapid review of studies reporting factors that increase or decrease adherence to quarantine during infectious disease outbreaks.

QUESTION The study PICO is as follows;

P – people asked to enter quarantine outside of the hospital environment for >24 hours

I – factors, such as knowledge, social setting, support, that may increase or decrease

O – adherence with quarantine

METHODS This study is a rapid evidence review. Components of the systematic review process are skipped or simplified to produce information in a rapid timeframe. This review conducted a systematic search of multiple databases, one reviewer extracted data from included studies and categorised factors associated with adherence behaviour.

RESULTS This review included 8 quantitative and 6 qualitative studies. Studies were conducted during outbreaks of Ebola, Swine flu, SARS and mumps. The main factors influencing or associated with adherence decisions reported by the review were: (1) knowledge about the disease and quarantine procedure, (2) social norms (e.g. social pressure, feeling of civic duty), (3) perceived benefits of quarantine and risk of the disease and (4) practical issues (e.g. fear of losing income, running out of supplies). The review also reported adherence to quarantine ranging from 0-93%. To improve adherence, the reviewers recommend: (1) providing clear rationale for quarantine, (2) emphasising social norms, (3) increasing the perceived benefit that engaging in quarantine will have on public health and (4) ensuring sufficient supplies are provided.

OVERALL SUMMARY This review addresses an issue of vital importance for informing policy decisions during infectious disease outbreaks. However, methodological limitations arising from its design as a rapid review limit the reliability of interpretations drawn by the reviewers. Further, minimal discussion and exploration of the adherence factors limit the usefulness of this review for informing public policy. Despite the weaknesses of the review, the list of possible factors associated with adherence reported, are a potentially useful starting point for further study.

COMMENTS The following points were discussed:

– while the search strategy comprised a search of multiple databases, it was felt the language limitations applied could have led to exclusion of relevant studies (particularly those published in Spanish or in Asian languages). No other methods of locating studies were used.

-the included studies were not assessed for risk of bias making it difficult to judge the reliability of the interpretations drawn by the reviewers. There was no description of how synthesis of the studies was performed.

-it was felt that greater examination and reporting of the studies and exploration of the factors associated with adherence was necessary for the review to provide useful information. For example, the Theoretical Domains Framework (TDF) and the Capability, Opportunity, and Motivation Model of Behaviour (COM-B) could have been used to further explore the concept of knowledge as a factor related to adherence.

-more detail of the results of studies quantifying associations between adherence and possible variables would have been helpful.

- there was discussion around some of the factors the study reported as being associated with increasing adherence and what the decline in cases of SARS-CoV-2 infection in Australia means – how should public health messages be framed? Does communicating reduction in cases help or hinder adherence?

- how applicable are the findings of these studies in swine flu, Ebola and SARS may translate to coronavirus?