

**Written Evidence from Prof. Kimberley Brownlee, Dr Alexandra Couto, Dr Bouke de Vries,
Mr Adam Neal, and Dr Felix Pinkert (COV0173)**

Executive Summary

- i. This submission focuses on the impact of the UK Government's stay-at-home and social distancing orders on a constellation of human rights that pertain to our **interpersonal needs** as social creatures, including our needs for decent human contact, social inclusion, care, community membership, integration, and companionship. It focuses in particular on the disproportionate impact of the Government's response on **people who live alone**.
- ii. The number of people who live alone in the UK increases year on year, and is presently above 8.2 million (over 12% of the population).
- iii. The **Human Rights Act 1998** recognises several rights that pertain to our fundamental needs as social creatures, needs which are at risk during the current pandemic. **Article 3** recognises a right against torture and inhuman or degrading treatment or punishment including cruel or **barbaric detention conditions or restraints**. **Article 8** protects the right to respect for **family life** and private life. Furthermore, while no explicit right to have access to social contact and connection has been legally formulated, there are strong reasons to recognise such a right within our human rights catalogue.
- iv. The Government's stay-at-home and social distancing orders in response to COVID-19 have had a disproportionate impact on people who live alone, by severely **restricting their ability to meet their interpersonal needs** and increasing their **risk of chronic, acute loneliness**.
- v. Since chronic loneliness has demonstrably adverse mental and physical health effects, the Government's response has imposed an additional health risk on people who live alone. It has thus impacted human rights by **negatively impacting their right to the highest possible standard of health including mental health**.
- vi. The COVID-19 lockdown prevented people living alone from enjoying the same kind of minimal social life that was enjoyed by people living in the same household; the prevailing **assumption remains that the nuclear family is the default and normal way of household organisation**.
- vii. To mitigate the impact of any future/resumed stay-at-home and social distancing orders on people who live alone, the UK Government 1) must guarantee the **Support Bubble exemption** as an integral part of any future response; 2) must **repay any fines** levied for behaviour that would have been permitted had the Support Bubble exemption been in place all along; and 3) must **include representatives from single-person households** in its future deliberations.

Authors' Information

The submitting authors are philosophers and political theorists who work on ethical themes related to social relationships and loneliness.

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1. Background

1.1 Interpersonal needs and social human rights

Article 8 of the **Human Rights Act 1998** recognises the right to respect for private life and family life, including respect for a person's home and correspondence. This includes a right to participate in essential economic, social, cultural and leisure activities, and a right to enjoy family life without government interference where that includes a right to live with family and, where this is not possible, a right to regular contact.¹ Article 8 rights are subject to lawful, necessary, and proportionate restrictions, i.e. restrictions that are appropriate and the minimum necessary to address an overriding interest, such as the interests of public safety, protection of health, and protection of others' rights and freedoms.

Articles of the **International Covenant on Economic, Social and Cultural Rights** recognise additional, related rights: **Article 15.1** recognizes the right to participate in culture, and **Article 12** recognizes the right to the highest possible standard of health including mental health.²

Although no explicit human right to social contact and connection has been legally formulated, there are strong reasons to recognize such a right within our human rights catalogue, because our interests in having minimally adequate access to decent human contact and companionship are as strong as our other rights-grounding interests.³

1.2 Single-person households in the UK

The number of people who live alone is increasing year on year. In 2017, 7.7 million people in the UK lived alone. In 2018, that number passed 8 million, and, in 2019, over 8.2 million people lived alone, about half of those being under the age of 65.⁴ While there may be exceptional cases of extremely reclusive people, like the hikikomori in Japan,⁵ it is fair to assume that the majority of people who live alone have generally active social lives. But in contrast with couples and families who live together, their most important relationships are, necessarily, with people outside of their own household.

¹ UK Equality and Human Rights Commission (2018), 'Article 8: Respect for Your Private and Family Life', 15 November 2018: <https://www.equalityhumanrights.com/en/human-rights-act/article-8-respect-your-private-and-family-life>.

² Office of the High Commissioner of Human Rights (1996), 'Fact Sheet No.2 (Rev.1), The International Bill of Human Rights', United Nations: <https://www.ohchr.org/Documents/Publications/FactSheet2Rev.1en.pdf>.

³ Brownlee, Kimberley (2020), *Being Sure of Each Other: An Essay on Social Rights and Freedoms*. Oxford University Press, chs 1-3, Hawkey, Louise C., and John T. Cacioppo. 2010. "Loneliness Matters: A Theoretical and Empirical Review of Consequences and Mechanisms." *Annals of Behavioral Medicine: A Publication of the Society of Behavioral Medicine* 40 (2).

⁴ Office for National Statistics (2019), *Families and Households in the UK: 2018*, Released 7 August 2019: <https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/families/bulletins/familiesandhouseholds/2018>; and Office for National Statistics (2019), *Families and Households in the UK: 2019*, Released 15 November 2019: <https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/families/bulletins/familiesandhouseholds/2019#in-2019-there-were-82-million-people-living-alone>.

⁵ BBC News Magazine (2013), 'Hikikomori: Your Stories about Refusing to Leave Bedrooms', BBC, 18 July 2013: <https://www.bbc.com/news/magazine-23255526> and National Geographic (2018), 'Pictures of Life in Isolation: Japan's Hikikomori', 14 February 2018: <https://www.nationalgeographic.com/photography/proof/2018/february/japan-hikikomori-isolation-society/>.

1.3 Loneliness in the UK

The situation in the UK prior to the advent of COVID-19 was already troubling in regard to loneliness, with 9 million people in the UK reporting that they are always or often lonely.⁶ Young people aged 16-24 are among the most affected, with 10% reporting they are always or often lonely. Amongst older people, the situation is particularly dire, with 3.9 million older people saying that television is their main form of company⁷ and 1.2 million older people being chronically lonely.⁸

Chronic loneliness is highly detrimental to physical and mental health, being worse than obesity,⁹ and comparable to smoking 15 cigarettes a day,¹⁰ in increasing risk of death by 29%.¹¹ Loneliness is also linked to other health conditions including dementia,¹² heart disease¹³ and depression.¹⁴ The effects of social disconnection are estimated to cost the UK £32 billion every year.¹⁵ The UK is a world-leading pioneer in establishing a 'loneliness minister' and a cross-governmental strategy to tackle loneliness. But the funds the government has put behind this initiative have been comparatively small. For both medical and economic reasons, the government should be investing even more heavily in tackling loneliness.

1.4 The primacy of face-to-face social contact and affectionate touch

Humans are social animals with a need to belong. We rely on physical gestures, eye contact, and facial expressions to feel that we can trust other people. Being in close proximity with some physical contact signals to us that we are accepted and that we belong. Infinitesimal cues like nods, eye contacts and facial expressions, plus following each other's gaze, and mirroring each other, which happen naturally during conversation, are essential to get the most out of human contact. Being in close proximity to trusted others also helps us to relax; we can rest more easily at night and in states of vulnerability when we reside safely with people we trust.

For these reasons, social connections conducted online or via telephone calls cannot substitute for face-to-face meetings. Studies indicate that deprivation of affectionate touch in particular is correlated with 'depression, stress, loneliness, insecure attachment, alexithymia, and the number of diagnosed mood/anxiety disorders and secondary immune disorders'.¹⁶

⁶ Campaign to End Loneliness (n.d.), *The Facts on Loneliness*: <https://www.campaigntoendloneliness.org/the-facts-on-loneliness/>

⁷ Age UK (2014), *Evidence Review: Loneliness in Later Life*. London.

⁸ Mortimer, Jill (2016), *No One Should Have No One: Working to End Loneliness amongst Older People*. Age UK: https://www.ageuk.org.uk/Documents/EN-GB/No-one_Should_Have_No-one_Working_to_end_loneliness.pdf?dtrk=true

⁹ Holt-Lunstad, J., T.B. Smith, and J.B. Layton (2010), 'Social Relationships and Mortality Risk: A Meta-analytic Review' *PLOS Medicine*, 7(7): e1000316.

¹⁰ Holt-Lunstad, J. *et al* (2010).

¹¹ Holt-Lunstad, J *et al* (2015), 'Loneliness and social isolation as risk factors for mortality: a meta-analytic review', *Perspectives on Psychological Science*, 10(2), 227-237.

¹² James, Brian D., Robert Wilson, Lisa Barnes, and David Bennett (2011), 'Late-life social activity and cognitive decline in old age'. *Journal of the International Neuropsychological Society*, 17(6), 998-1005.

¹³ Valtorta, Nicole K., Mona Kanaan, Simon Gilbody, Sara Ronzi, and Barbara Hanratty (2016), 'Loneliness and social isolation as risk factors for coronary heart disease and stroke: systematic review and meta-analysis of longitudinal observational studies', *Heart*, 102, 1009-1016.

¹⁴ Cacioppo, John, Mary Hughes, Linda Waite, Lousie Hawkley, and Ronald Thisted (2006), 'Loneliness as a Specific Risk Factor for Depressive Symptoms: Cross-Sectional and Longitudinal Analyses. *Psychology and Aging*', 21, 140-51.

¹⁵ Eden Project Communities (n.d.), *The Cost of Disconnected Communities*: <https://www.edenprojectcommunities.com/the-cost-of-disconnected-communities>

¹⁶ Floyd, Kory, and Colin Hesse (2017), 'Affection Deprivation Is Conceptually and Empirically Distinct From Loneliness', *Western Journal of Communication* 81, no. 4 (8 August 2017): 446-65, <https://doi.org/10.1080/10570314.2016.1263757>.

2. Covid-19 and Social Rights

2.1 Impact of Government measures: Near-total cessation of face-to-face contact

Under the Government's stay-at-home order from March 23 2020, everyone in the UK was required to stay at home, except for essential shopping, travel to work that can not be done from home, medical need, and exercise. Exemptions for *joint* activity outside only applied to contacts with people from the same household.

For people who live alone, this order meant a near-total cessation of face-to-face contact, and thereby drastically curtailed their ability to fulfil their interpersonal needs. The only face-to-face social contacts implicitly permitted by the order were brief exchanges with strangers when shopping for necessities or when meeting, at a distance of at least 2m, someone familiar during the permitted time exercising outdoors. A longer exchange or common activity would already have been prohibited, as the other person would not have been from the same household. Due to the requirement to travel only for essential purposes, if one did not have a social contact in the immediate vicinity, then the order meant not even briefly seeing anyone familiar for almost three months.

This impact was particularly acute for people who were not required to be physically present at a workplace that provides social interaction. Hence people working from home, unemployed people, people unable to work, retired persons, and students were particularly affected by the stay-at-home-order. This impact is thus highly detrimental to people's ability to meet their interpersonal needs, and hence to their social rights.

2.2. Lack of proportionality of the impact on people living alone

The relevant Article 8 rights of the Human Rights Act 1998 are subject to lawful, necessary, and proportionate restrictions, i.e. restrictions that are appropriate and the minimum necessary to address an overriding interest, such as the interests of public safety, protection of health, and protection of others' rights and freedoms. Yet the particularly high cost experienced by people living alone would seem to fail the test of proportionality.

Implicit in the Government's stay-at-home order is a proportionality test with regard to people living in multi-person households. People living in these households have not been required to do all that is possible to prevent the spread of infection among members of the same household. For example, the NHS recommends that people who might be infected always stay alone in a room, wear masks, use common areas only one person at a time, and always disinfect common areas after every use.¹⁷ Yet requiring such measures of *all* households was not publicly considered – presumably because the associated social cost were deemed disproportionate to the limited additional benefit to public health.

Yet the same cost, near-total cessation of face-to-face contact, was required of people living alone. The government could, after all, have granted the Support Bubble exemption right from the start. As per this exemption, introduced only on 13 June, but partially introduced or discussed by other governments¹⁸ as well as by epidemiologists¹⁹), people living alone are allowed to interact with one

¹⁷ NHS (2020), 'How to Avoid Spreading Coronavirus to People You Live With', updated 17 July 2020: <https://www.nhs.uk/conditions/coronavirus-covid-19/self-isolation-and-treatment/how-to-avoid-spreading-coronavirus-to-people-you-live-with/>.

¹⁸ Long, Nick (2020), 'New Zealand did 'support bubbles' first. Here's what England can learn from them', *The Guardian*, 12 June 2020: <https://www.theguardian.com/commentisfree/2020/jun/12/new-zealand-support-bubbles-england>. Compare with Office of Sophie Wilmès, Belgian PM (2020), Coronavirus: Mesures renforcées, 17 March 2020: <https://www.premier.be/fr/Coronavirus-Mesures-renforcees>; and Galindo, Gabriela (2020), 'Coronavirus: only outings of people living together 'tolerated' during lockdown', *The Brussels Times*, 19 March 2020: <https://www.brusselstimes.com/belgium/101495/coronavirus-only-outings-of-people-living-together-tolerated-during-lockdown-covid-friends-out>.

¹⁹ Tiffany, Kaitlyn (2020), 'The Dos and Don'ts of 'Social Distancing'', *The Atlantic*, 12 March 2020: <https://www.theatlantic.com/family/archive/2020/03/coronavirus-what-does-social-distancing-mean/607927>.

other person, or one other socially isolated household, as if they were member of the same household. This includes visits and spending time indoors, physical contact, as well as shared outdoor activities. In such an arrangement, people do not form infection chains, and any infections stay within the small circle of the Support Bubble – just like with people sharing the same household. The public health cost of allowing this exemption is thus very limited, while the exemption takes away the worst social cost from people who live alone.

By not granting this exemption as integral part of its response, the Government required people who live alone to endure near-total cessation of face-to-face contact, a cost which in the case of multi-person households, was apparently not deemed proportionate to its limited additional benefit to the public interest in containing COVID-19.

2.3 Discrimination of people living alone

The Government's response has resulted in disadvantageous treatment of people who live alone by failing to adequately consider the particularly high social cost borne by these people, and by failing to subject this cost to the same proportionality test as the similar cost that could have been, but was not, imposed on multi-person households. The category of *people who live alone* includes several sub-categories of people who have protected characteristics including older people and people with disabilities. The disproportionate impact of the COVID-19 response is, therefore, relevant to the Government's Public Sector Equality Duty.

Before 13 June 2020, people who live alone were not allowed to meet one other person who also lives alone (or several who live in a socially isolated household), and were allowed to spend time together outdoors or at home. Yet people living in multi-person households have been permitted all these things, at similar public health risk.

This constitutes an unfair and discriminatory treatment of people who live on their own, by a Government policy that is clearly designed with the multi-person household, in particular, the nuclear family, as the focus and as the assumed social default. This is discriminatory towards people who just happen to live alone for practical reasons, as well as people who live alone as a conscious life- and family choice, be it as partners living separately, or as people who decide against house sharing and against romantic relationships, be it temporarily or as expression of their sexual identity. All these people and their models of household life deserve to be treated with the same respect and consideration as people who live in multi-person households. The Government response to COVID-19 has failed to express this equal respect and consideration.

2.4 Stigmatisation of people maintaining limited face-to-face contact

Given the drastically negative impact on the social lives of people living alone, it is to be expected that many people in this situation worked around the regulations and nonetheless maintained a minimum of face-to-face contact to fulfil their basic interpersonal needs. If these people have, for example, prefigured the Government's much later 'Support Bubble' exemption and met precisely one designated other person who lives alone, then they have not increased the risk of COVID-19 spreading any more than have any two people who lived in the same household. The same holds for people who continued to meet their partner who also lives in a single-person household, or people who socialised with members of one otherwise socially isolated, multi-person household.

Yet contrary to people who live in multi-person households and were permitted to socialise with other household members, people living alone, and yet engaging in the above forms of socialising, were criminalised for these actions. Furthermore, Government public communications, along the lines of 'Stay home, protect the NHS and save lives' has stigmatised these people's actions.

3. Recommendations

In the short term:

1. The Government must guarantee that the Support Bubble exemption for people living alone will remain in place and will not be revoked e.g. in the case of rising infections.
2. The Government must waive or repay any penalties imposed upon people who defied the stay-at-home order in a manner that is consistent with the later Support Bubble exemption.

In the medium term:

3. The Government must guarantee that a Support Bubble exemption will be an integral part of any future stay-at-home and social distancing orders, and any future public communication of such orders.
4. Insofar as in any future lockdown, a Support Bubble exemption poses too great a risk to public health, the Government must ensure that people who live alone are among the first groups who are allowed to re-establish physical contact when lockdowns restrictions are gradually scaled back.
5. The Government must include in its deliberations representatives of people who live alone, as well as experts on the topic of loneliness and psychological effects of contact restrictions, particularly for people living alone, from psychology, psychiatry, sociology, social work, and related disciplines.

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