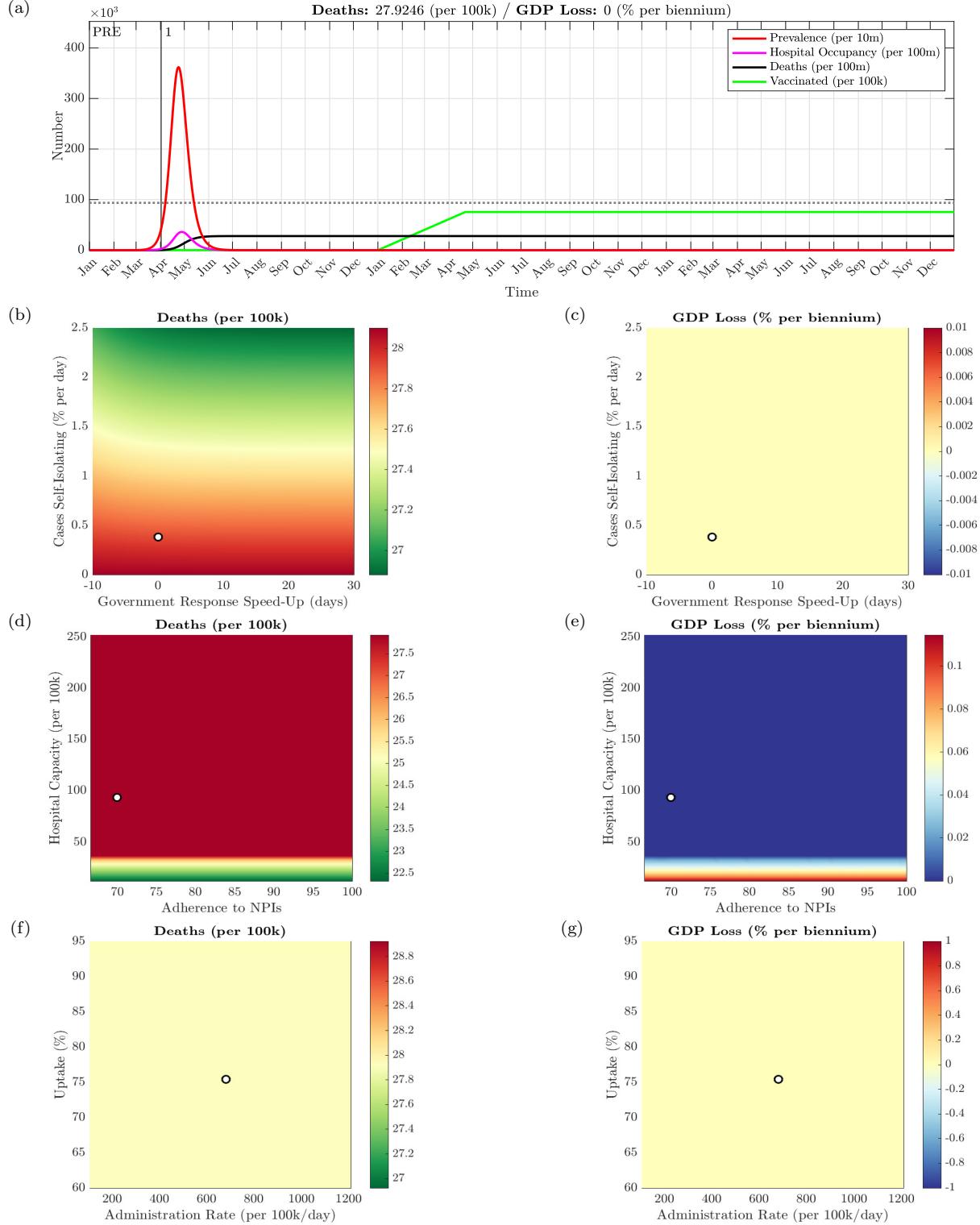


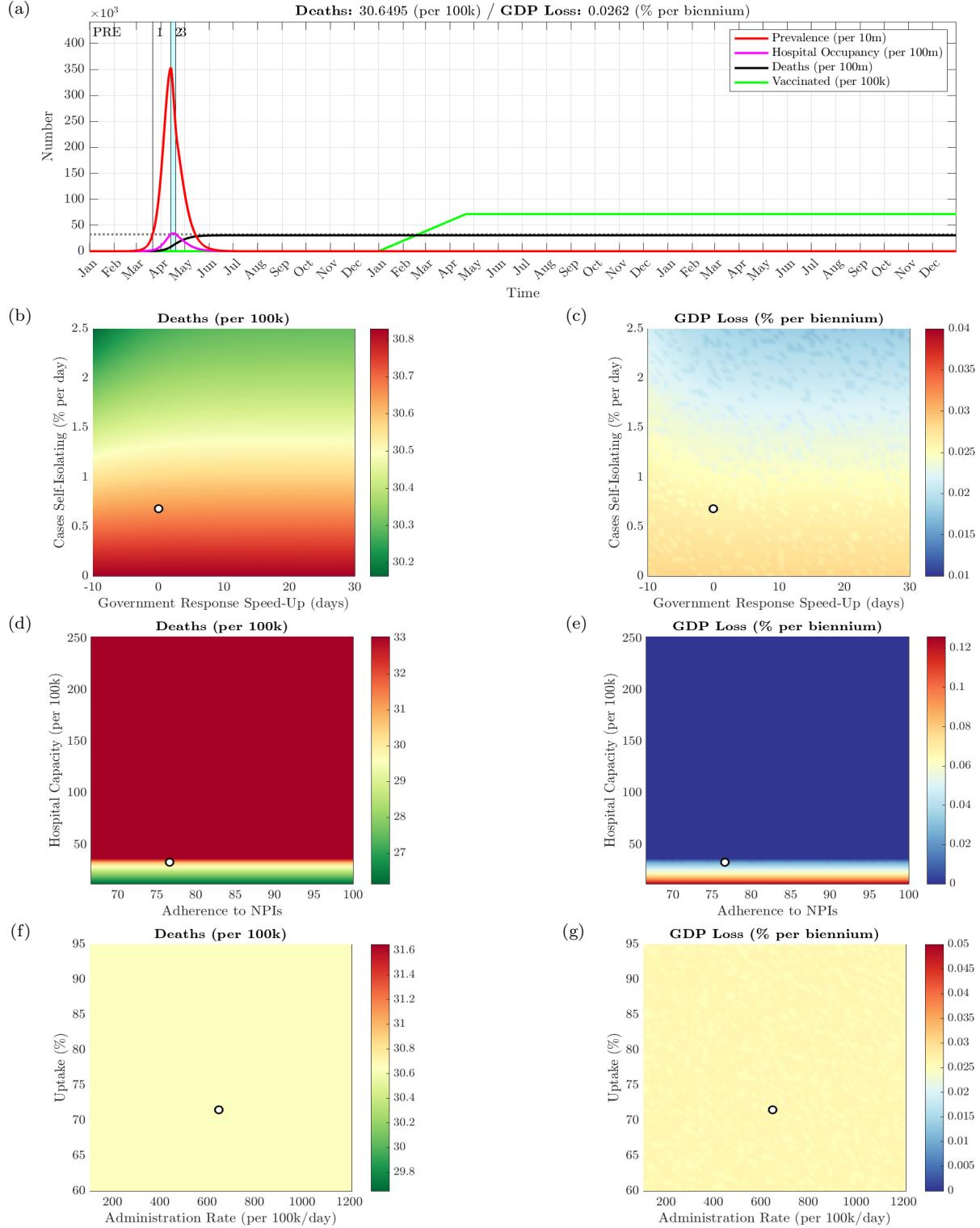
# Appendix

## **1 Unmitigated Strategy**

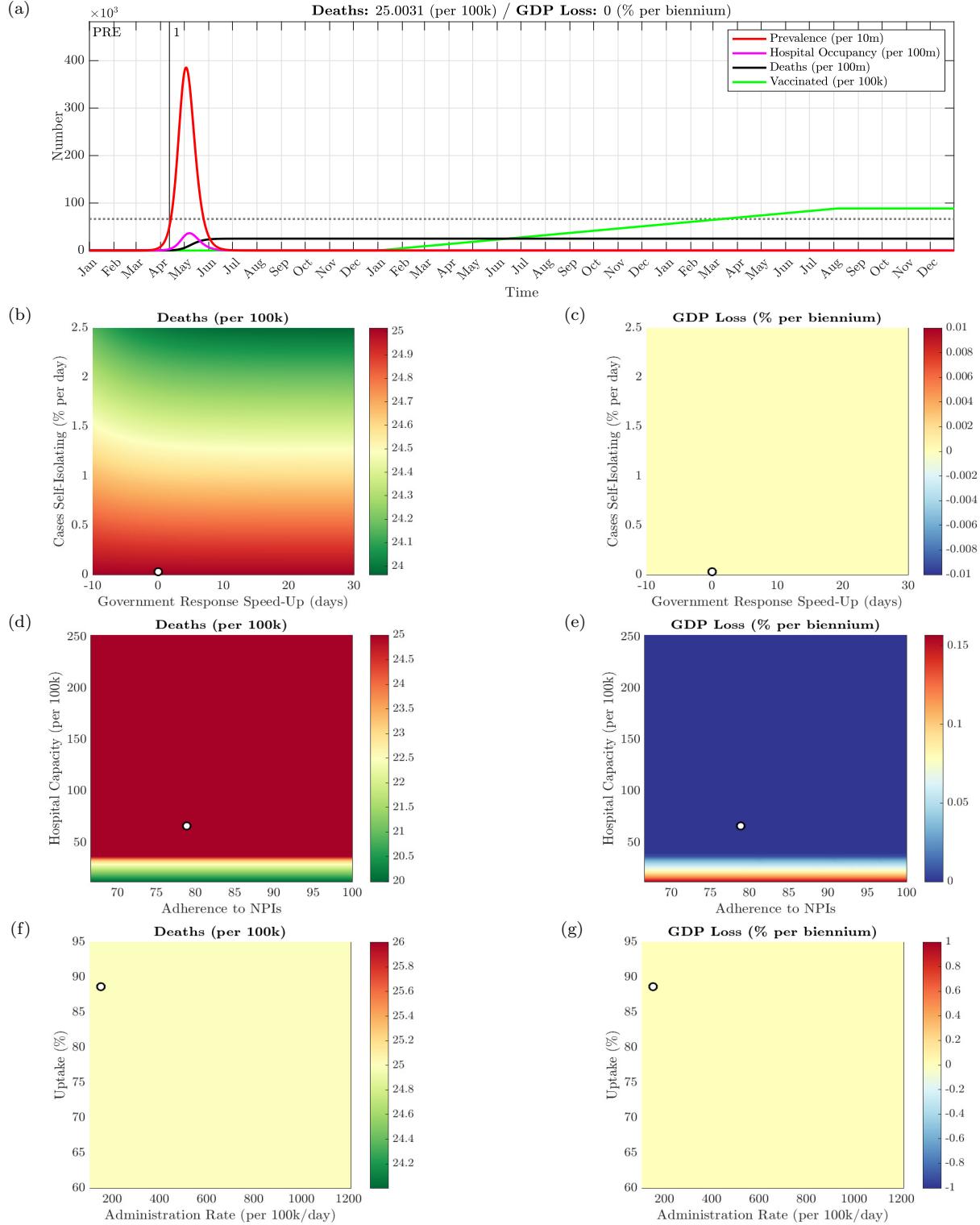
## 1.1 Swine Flu



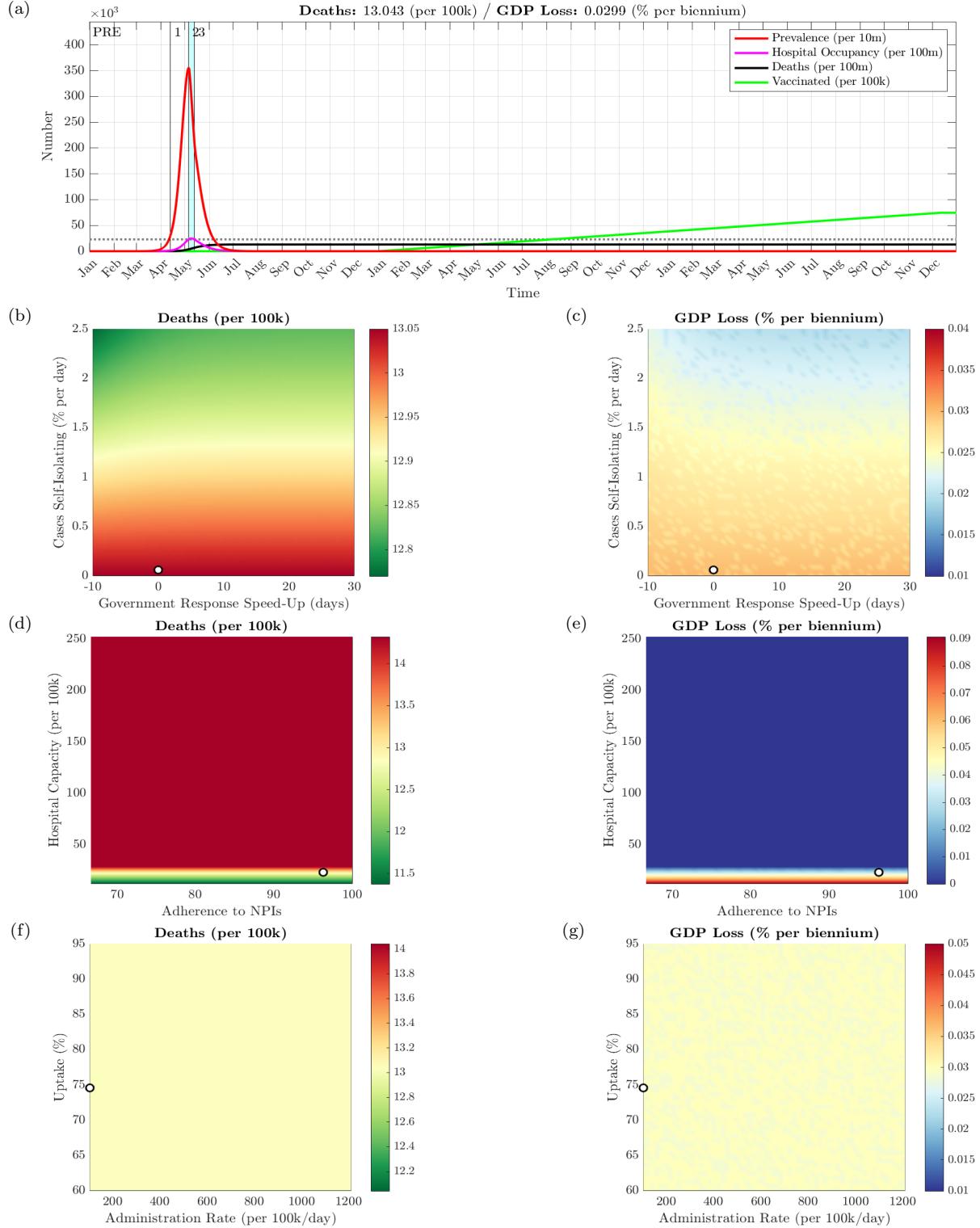
**Figure A1:** P2 in the USA; (a) the counterfactual epidemic trajectory; the effects of increasing/decreasing (b, c) the government response time & proportion of cases self-isolating, (d, e) adherence to NPIs during lockdown & hospital capacity, and (f, g) vaccine administration rate & uptake.



**Figure A2:** P2 in the UK; (a) the counterfactual epidemic trajectory; the effects of increasing/decreasing (b, c) the government response time & proportion of cases self-isolating, (d, e) adherence to NPIs during lockdown & hospital capacity, and (f, g) vaccine administration rate & uptake.

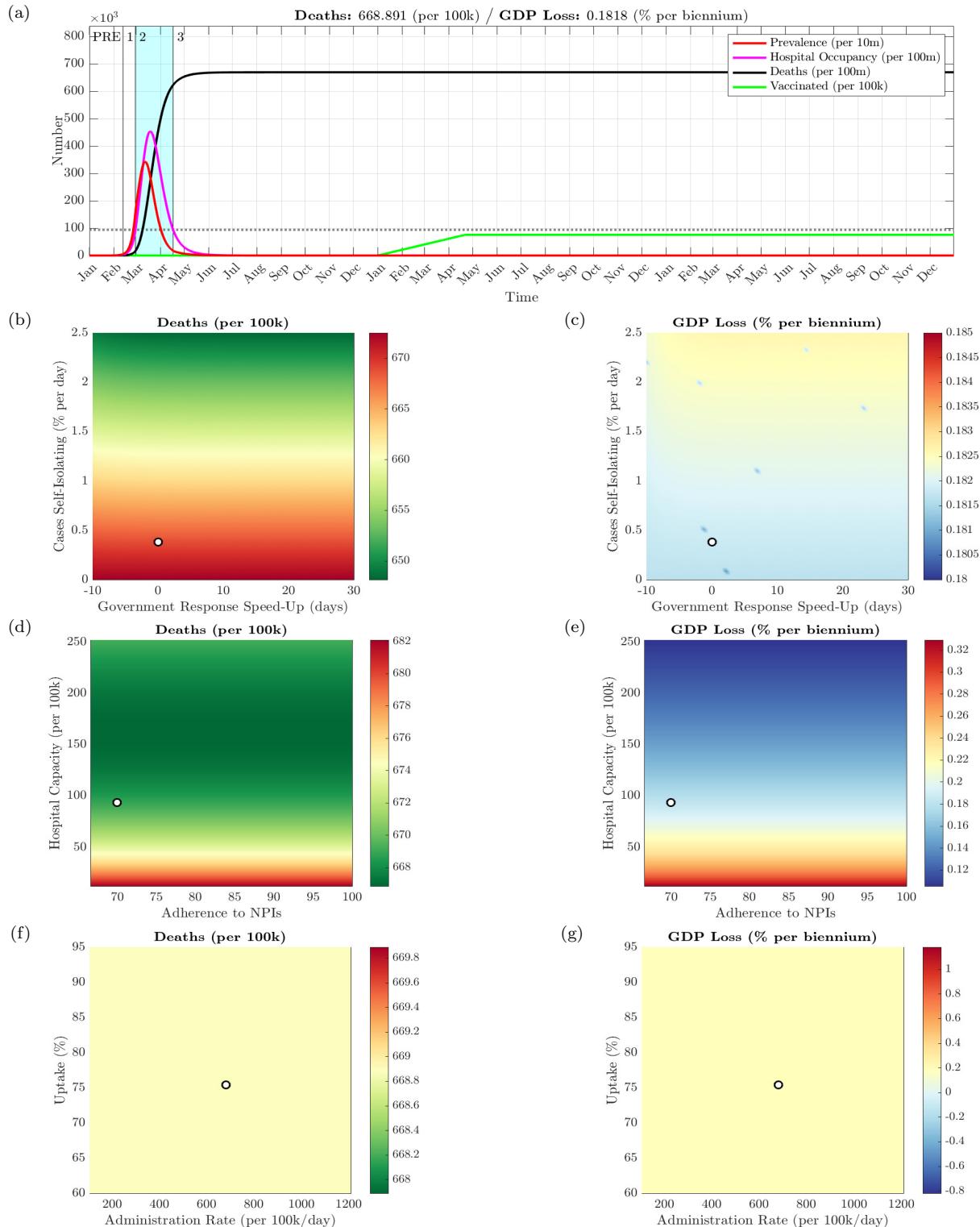


**Figure A3:** P2 in China; (a) the counterfactual epidemic trajectory; the effects of increasing/decreasing (b, c) the government response time & proportion of cases self-isolating, (d, e) adherence to NPIs during lockdown & hospital capacity, and (f, g) vaccine administration rate & uptake.

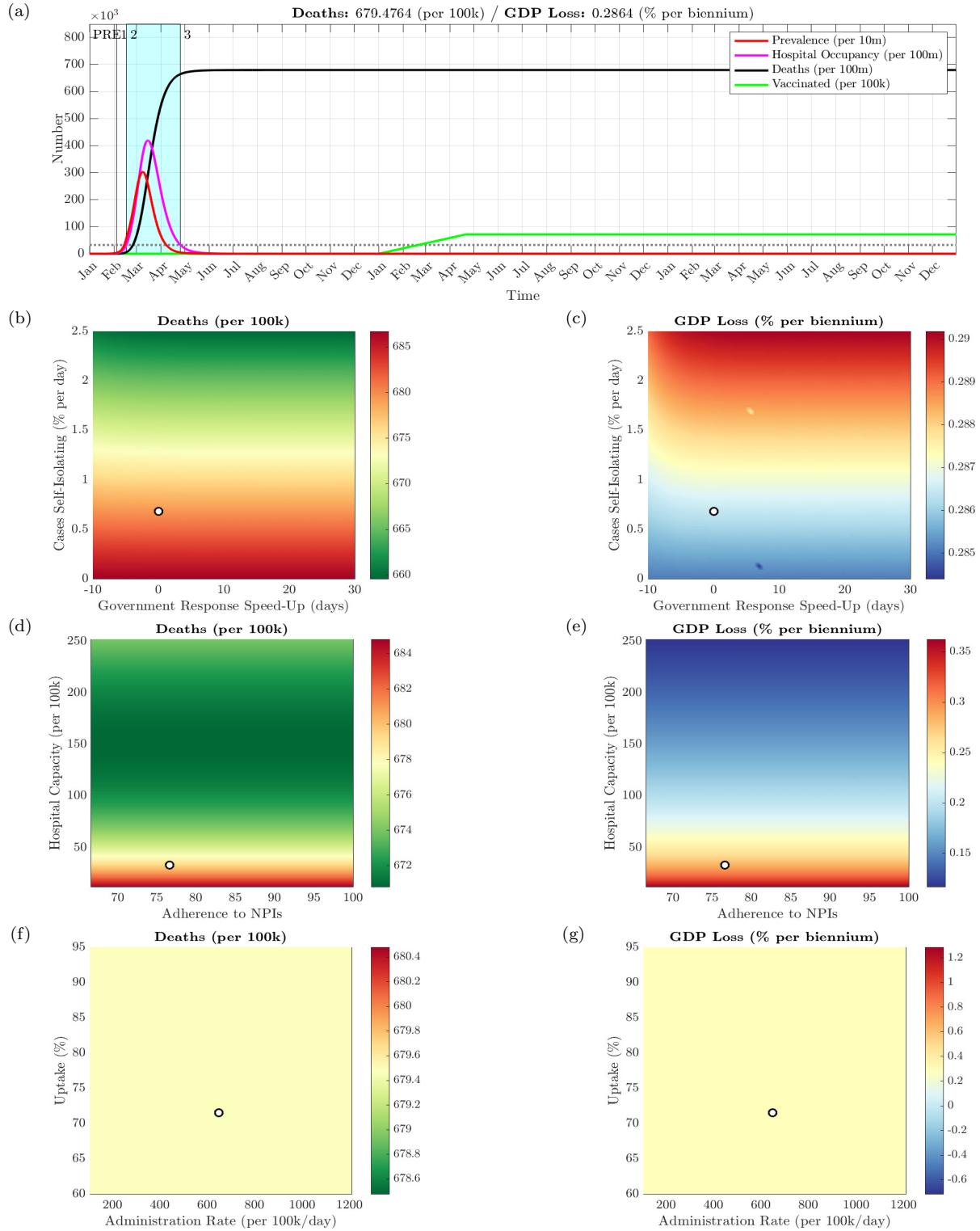


**Figure A4:** P2 in India; (a) the counterfactual epidemic trajectory; the effects of increasing/decreasing (b, c) the government response time & proportion of cases self-isolating, (d, e) adherence to NPIs during lockdown & hospital capacity, and (f, g) vaccine administration rate & uptake.

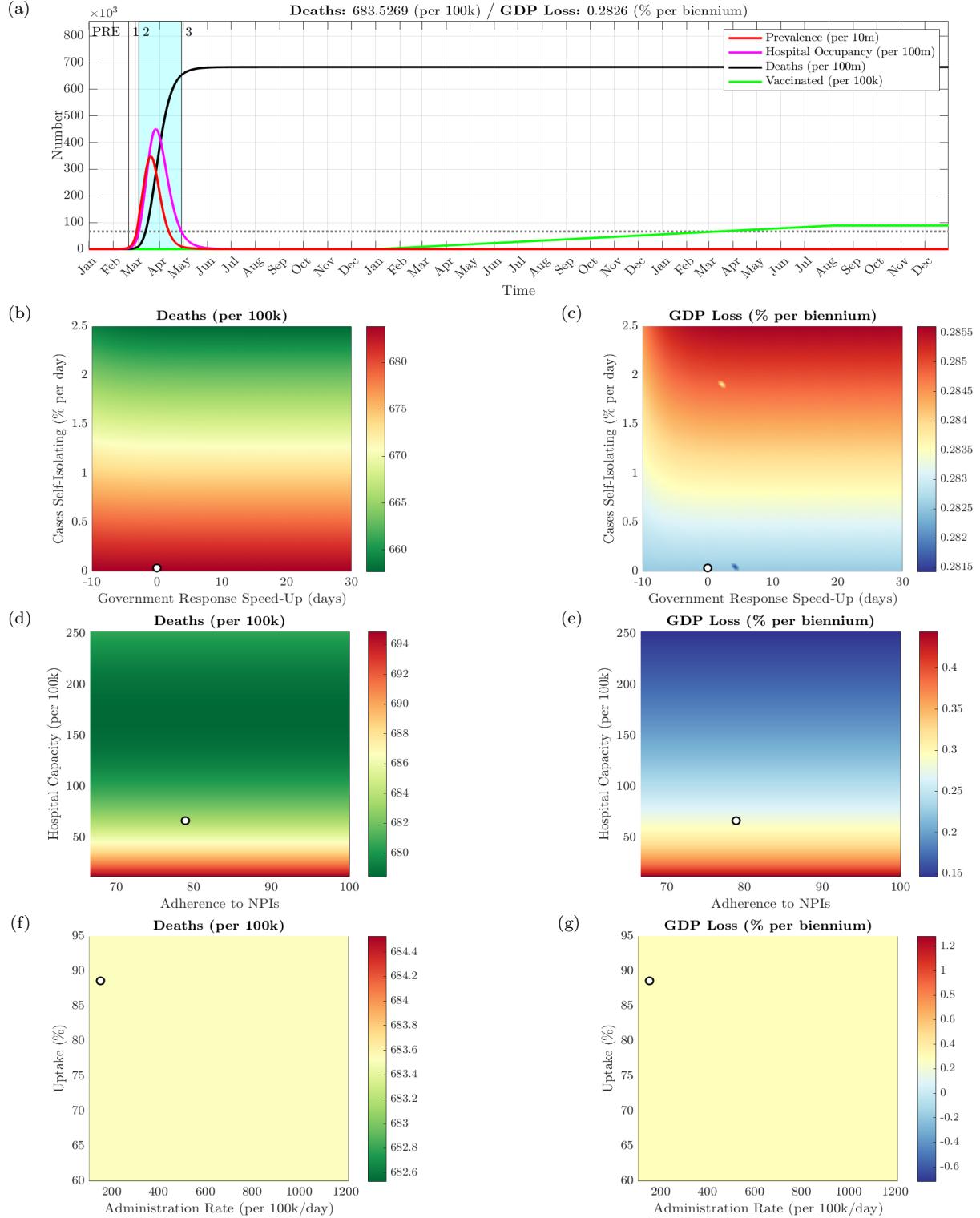
## 1.2 Spanish Flu



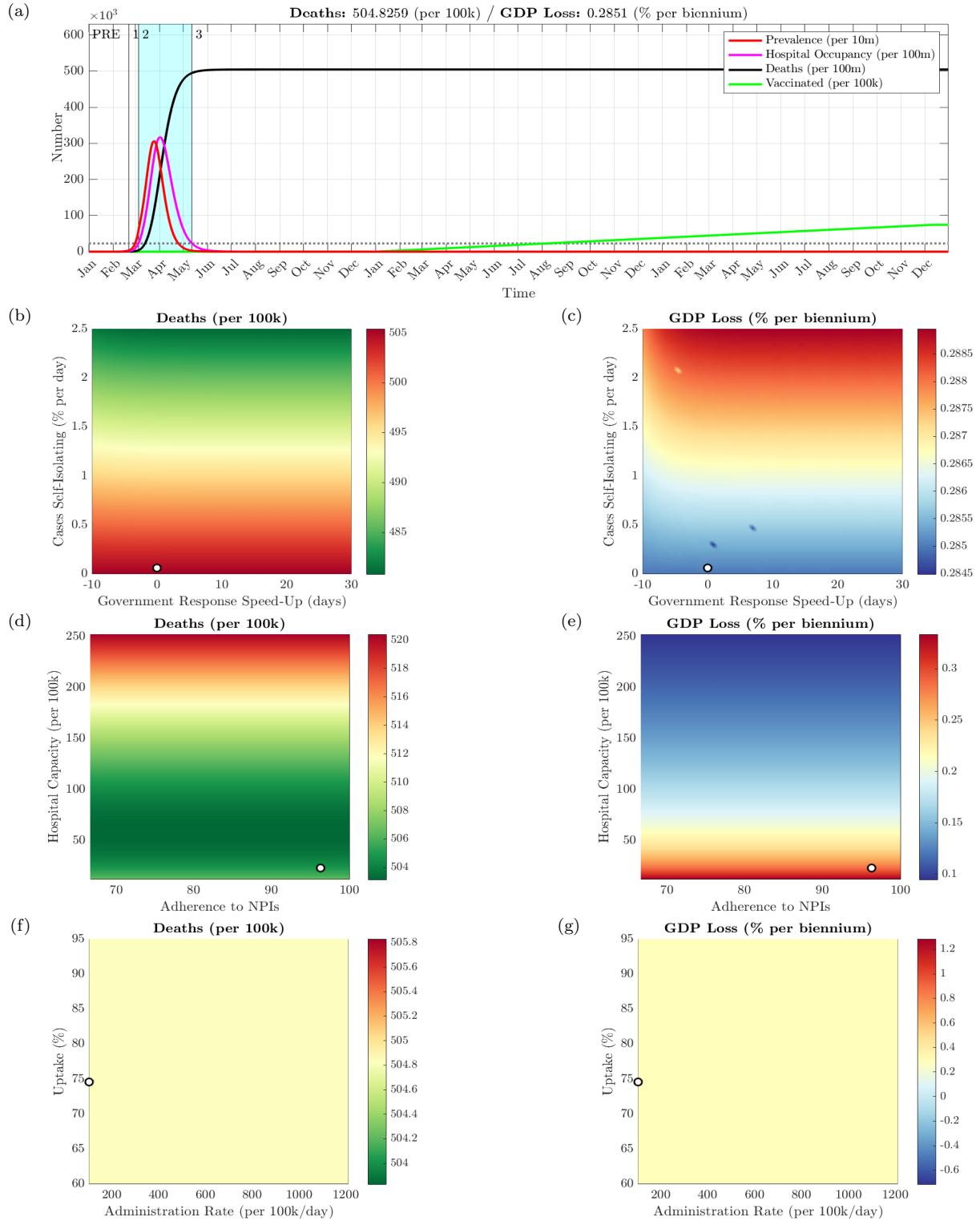
**Figure A5:** P2 in the USA; (a) the counterfactual epidemic trajectory; the effects of increasing/decreasing (b, c) the government response time & proportion of cases self-isolating, (d, e) adherence to NPIs during lockdown & hospital capacity, and (f, g) vaccine administration rate & uptake.



**Figure A6:** P2 in the UK; (a) the counterfactual epidemic trajectory; the effects of increasing/decreasing (b, c) the government response time & proportion of cases self-isolating, (d, e) adherence to NPIs during lockdown & hospital capacity, and (f, g) vaccine administration rate & uptake.

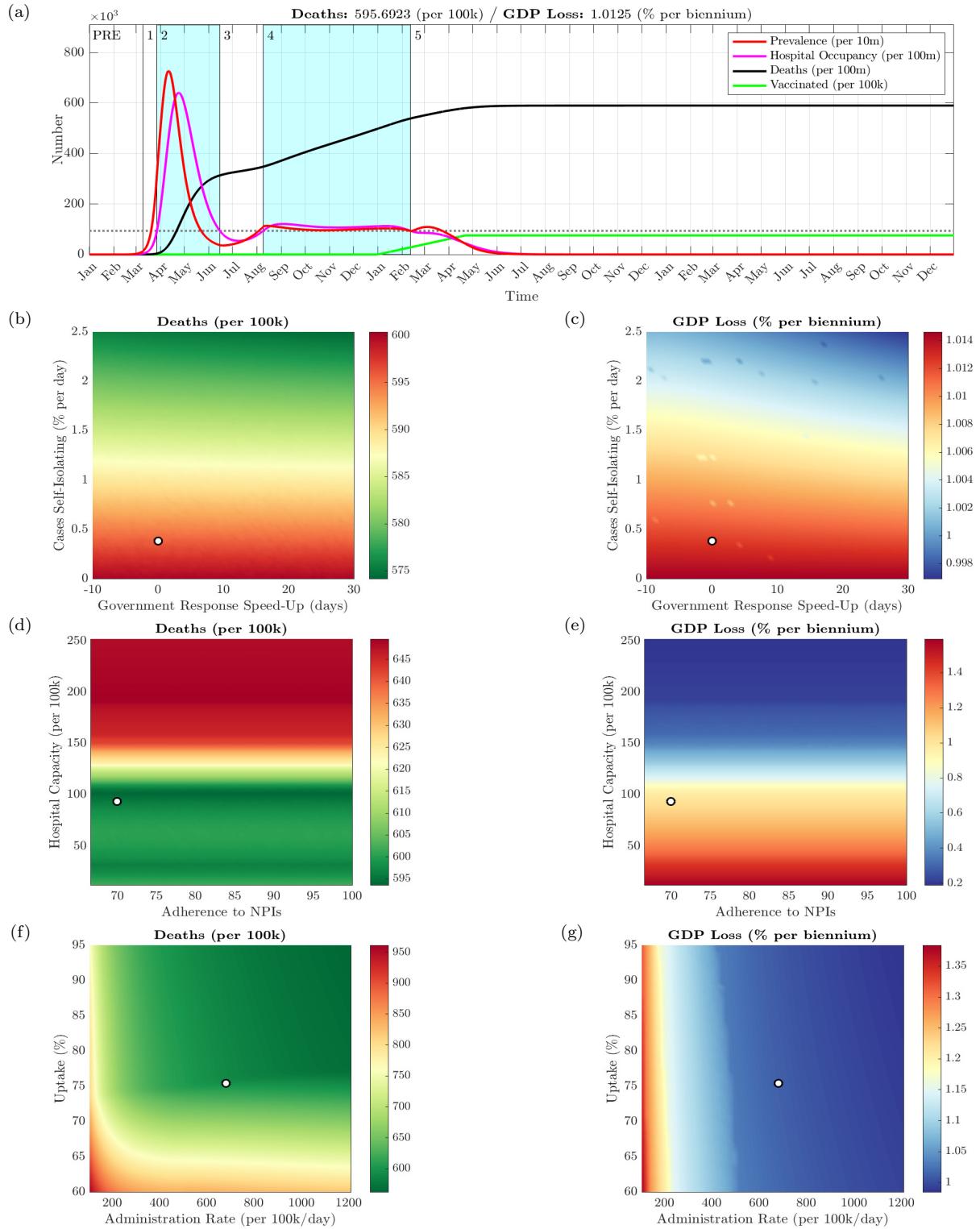


**Figure A7:** P2 in China; (a) the counterfactual epidemic trajectory; the effects of increasing/decreasing (b, c) the government response time & proportion of cases self-isolating, (d, e) adherence to NPIs during lockdown & hospital capacity, and (f, g) vaccine administration rate & uptake.

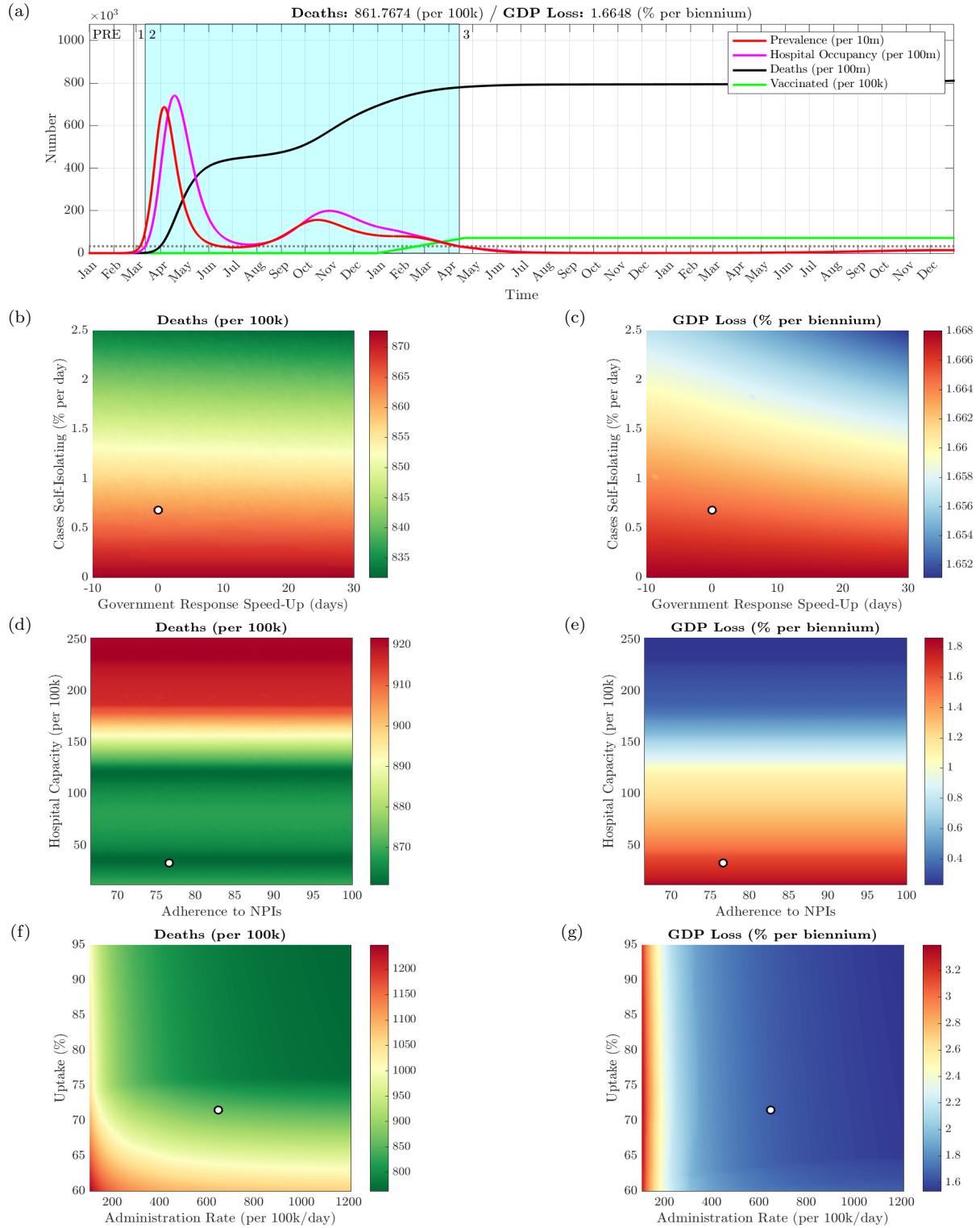


**Figure A8:** P2 in India; (a) the counterfactual epidemic trajectory; the effects of increasing/decreasing (b, c) the government response time & proportion of cases self-isolating, (d, e) adherence to NPIs during lockdown & hospital capacity, and (f, g) vaccine administration rate & uptake.

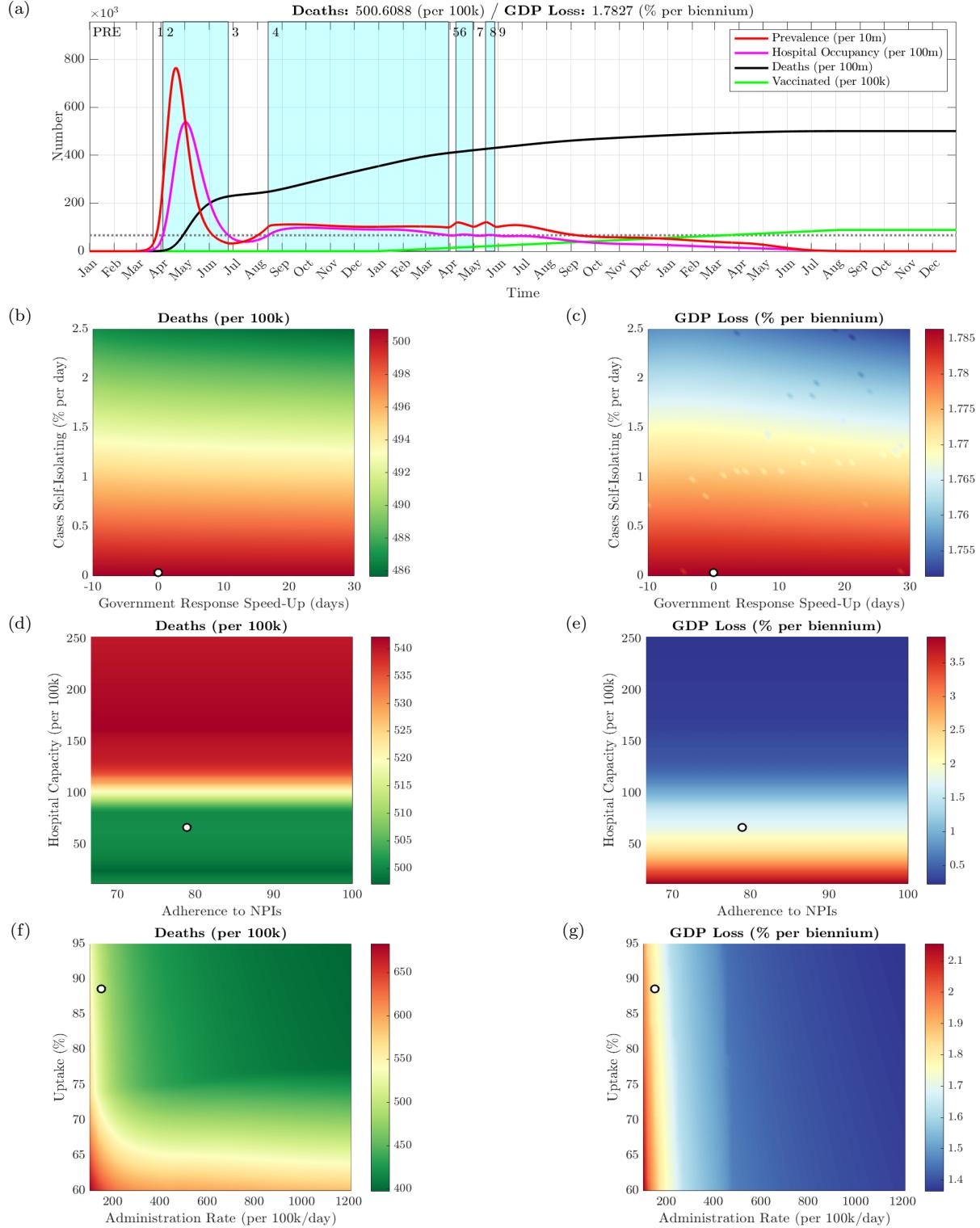
### 1.3 Covid



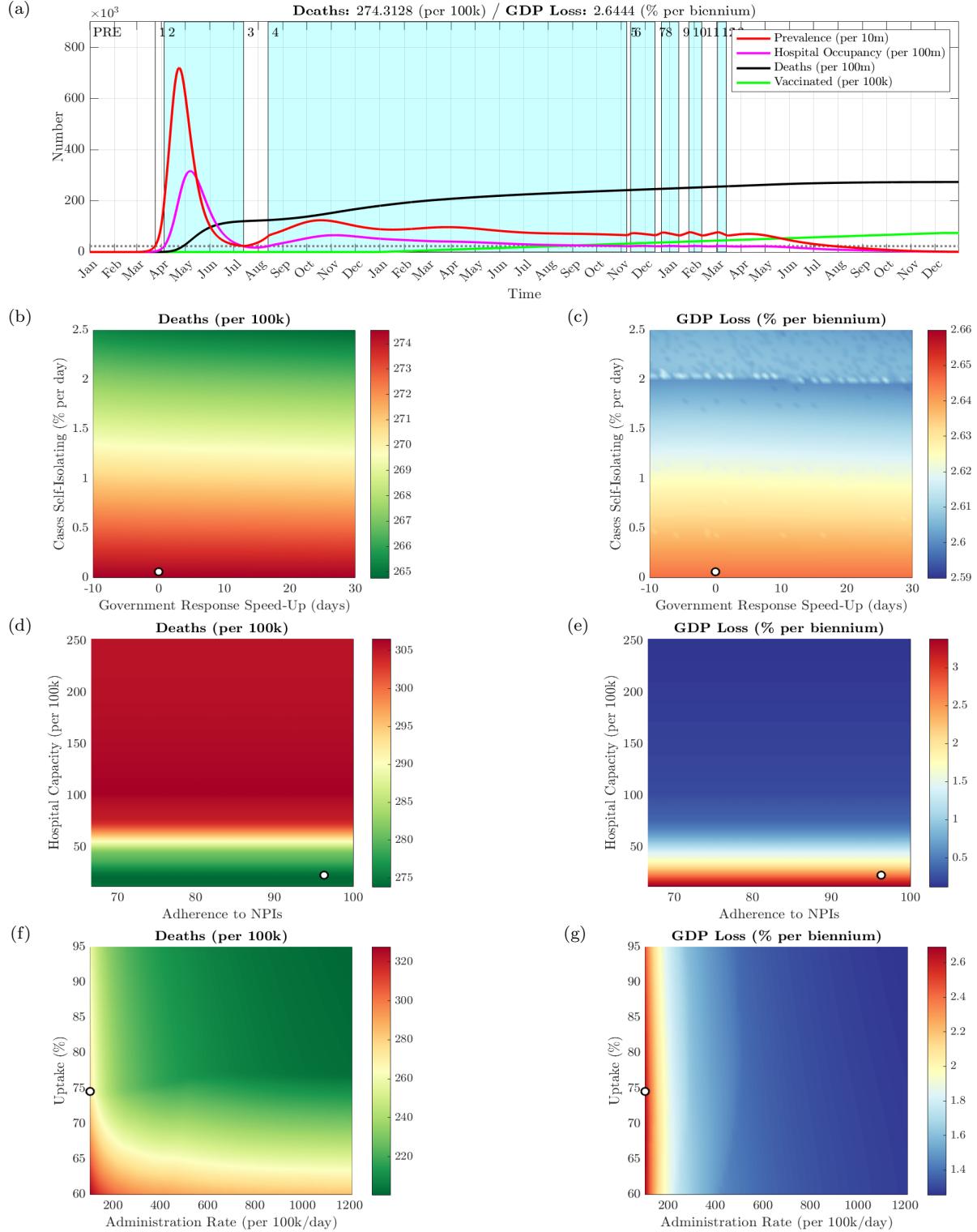
**Figure A9:** P2 in the USA; (a) the counterfactual epidemic trajectory; the effects of increasing/decreasing (b, c) the government response time & proportion of cases self-isolating, (d, e) adherence to NPIs during lockdown & hospital capacity, and (f, g) vaccine administration rate & uptake.



**Figure A10:** P2 in the UK; (a) the counterfactual epidemic trajectory; the effects of increasing/decreasing (b, c) the government response time & proportion of cases self-isolating, (d, e) adherence to NPIs during lockdown & hospital capacity, and (f, g) vaccine administration rate & uptake.

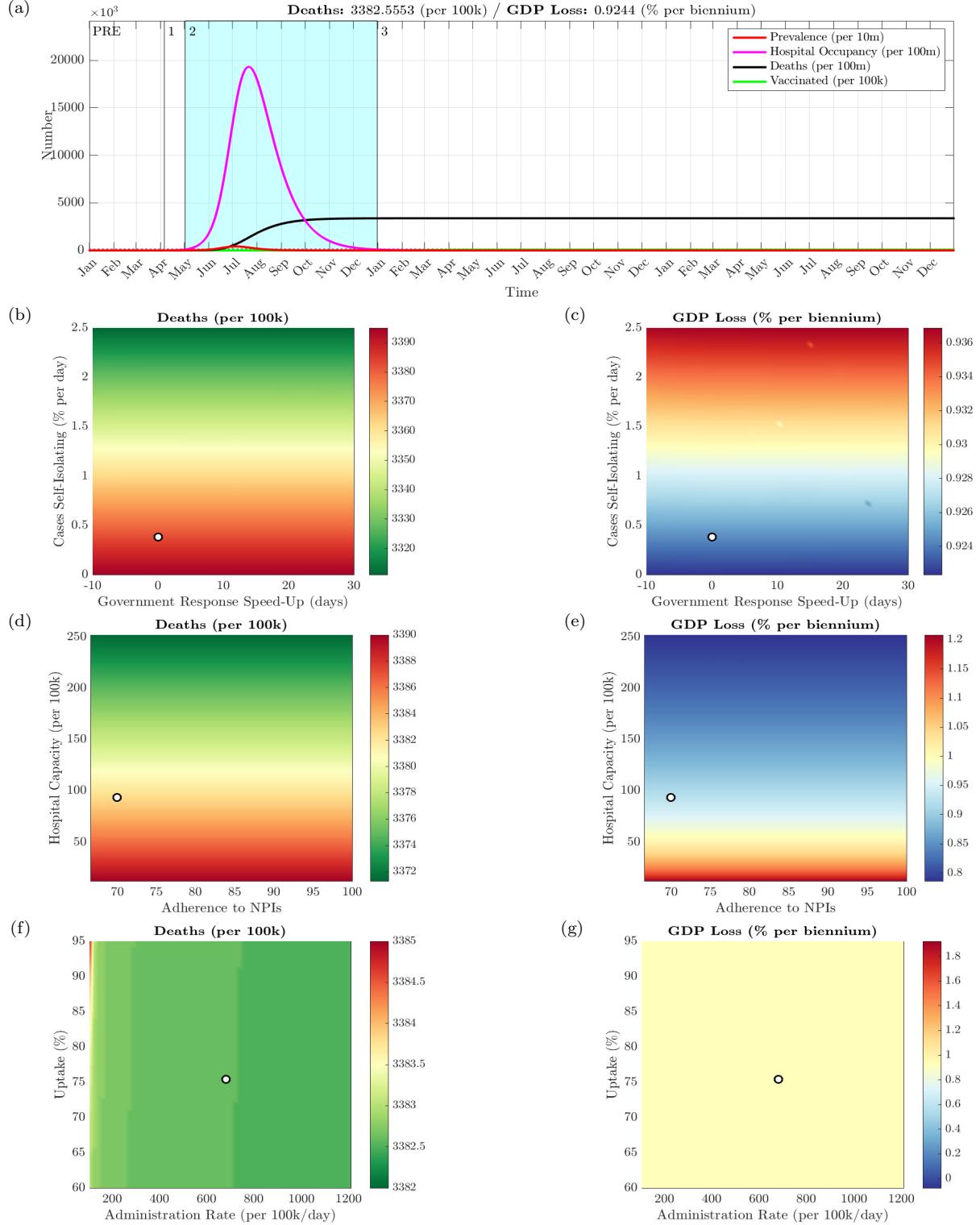


**Figure A11:** P2 in China; (a) the counterfactual epidemic trajectory; the effects of increasing/decreasing (b, c) the government response time & proportion of cases self-isolating, (d, e) adherence to NPIs during lockdown & hospital capacity, and (f, g) vaccine administration rate & uptake.

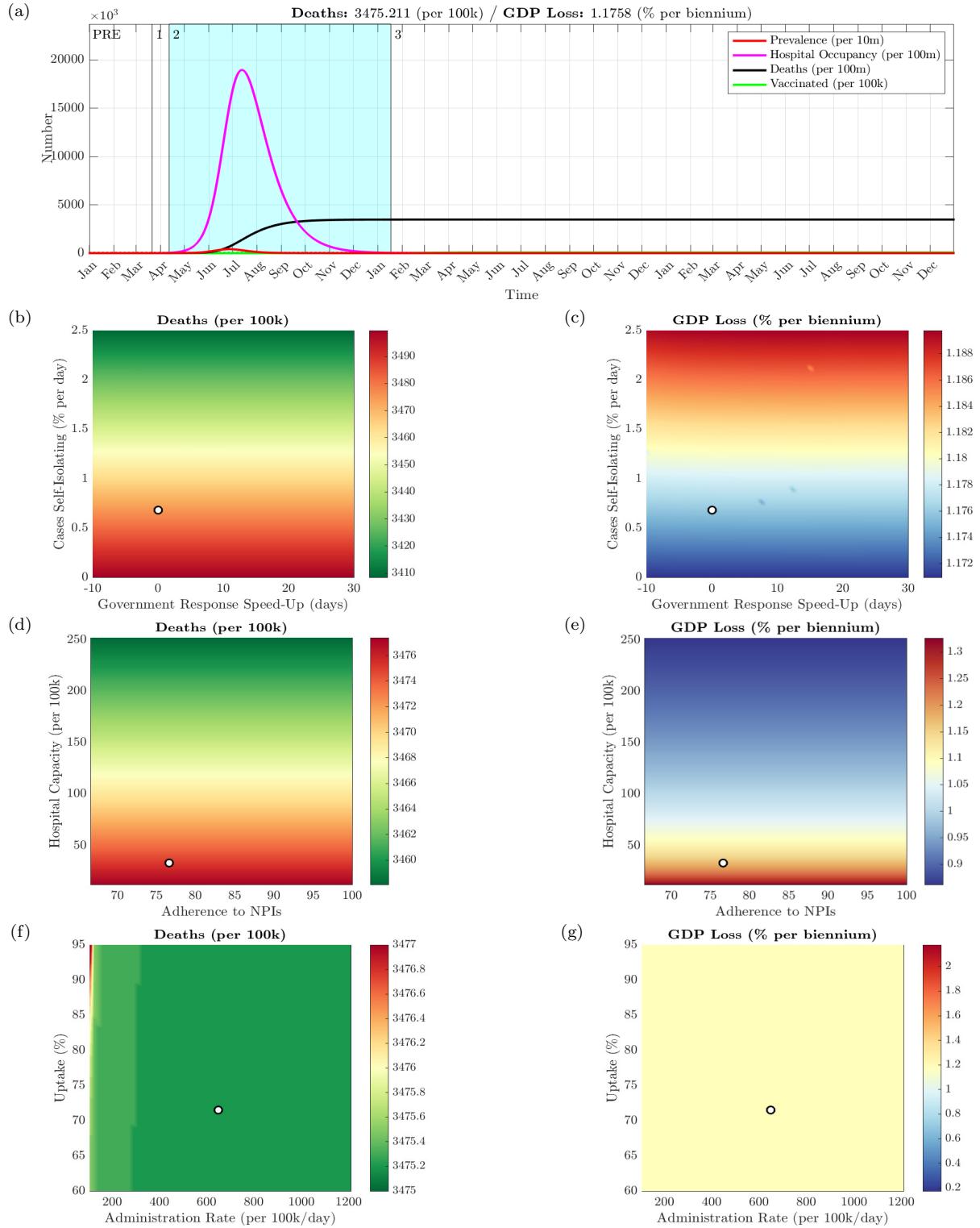


**Figure A12:** P2 in India; (a) the counterfactual epidemic trajectory; the effects of increasing/decreasing (b, c) the government response time & proportion of cases self-isolating, (d, e) adherence to NPIs during lockdown & hospital capacity, and (f, g) vaccine administration rate & uptake.

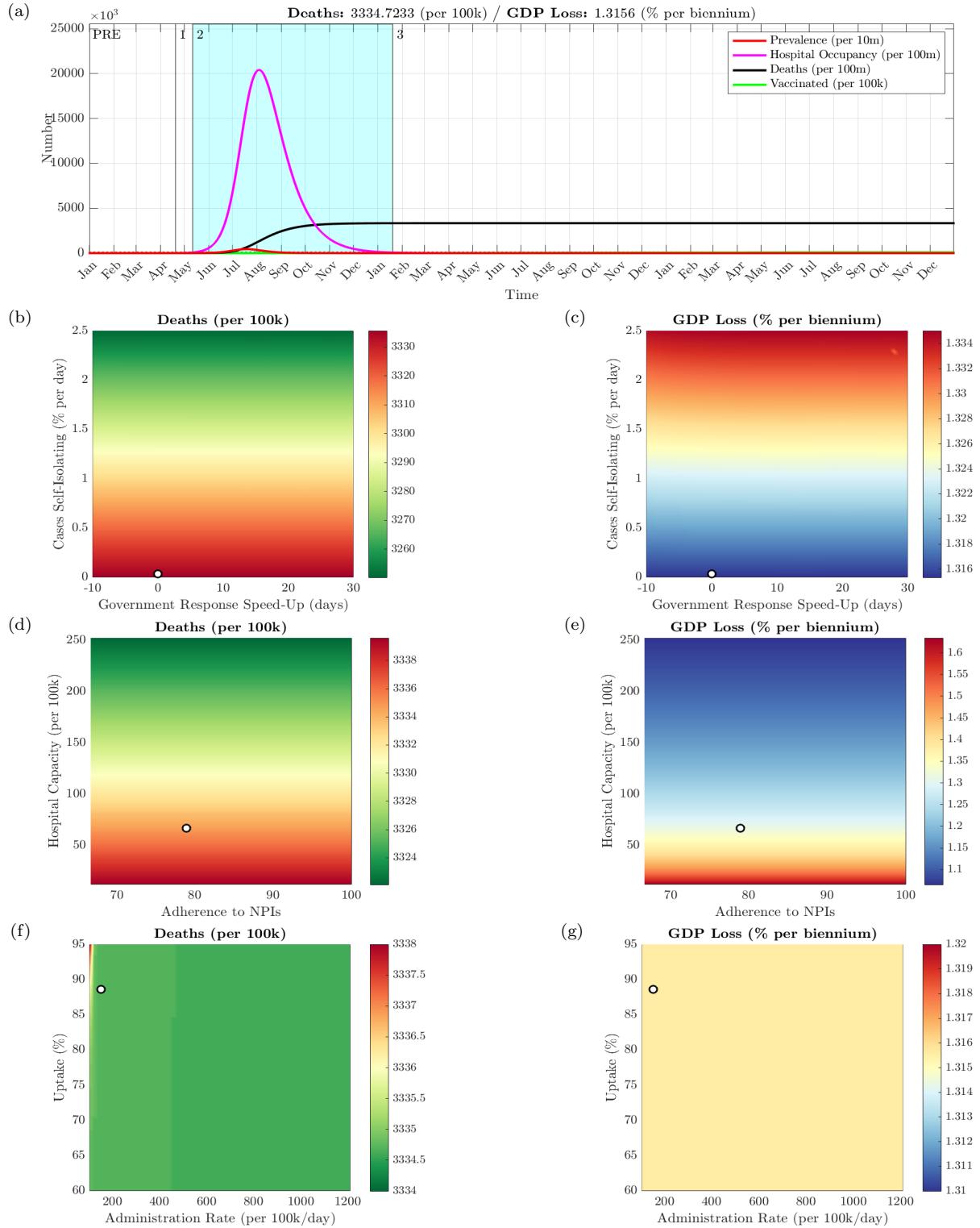
## 1.4 SARS



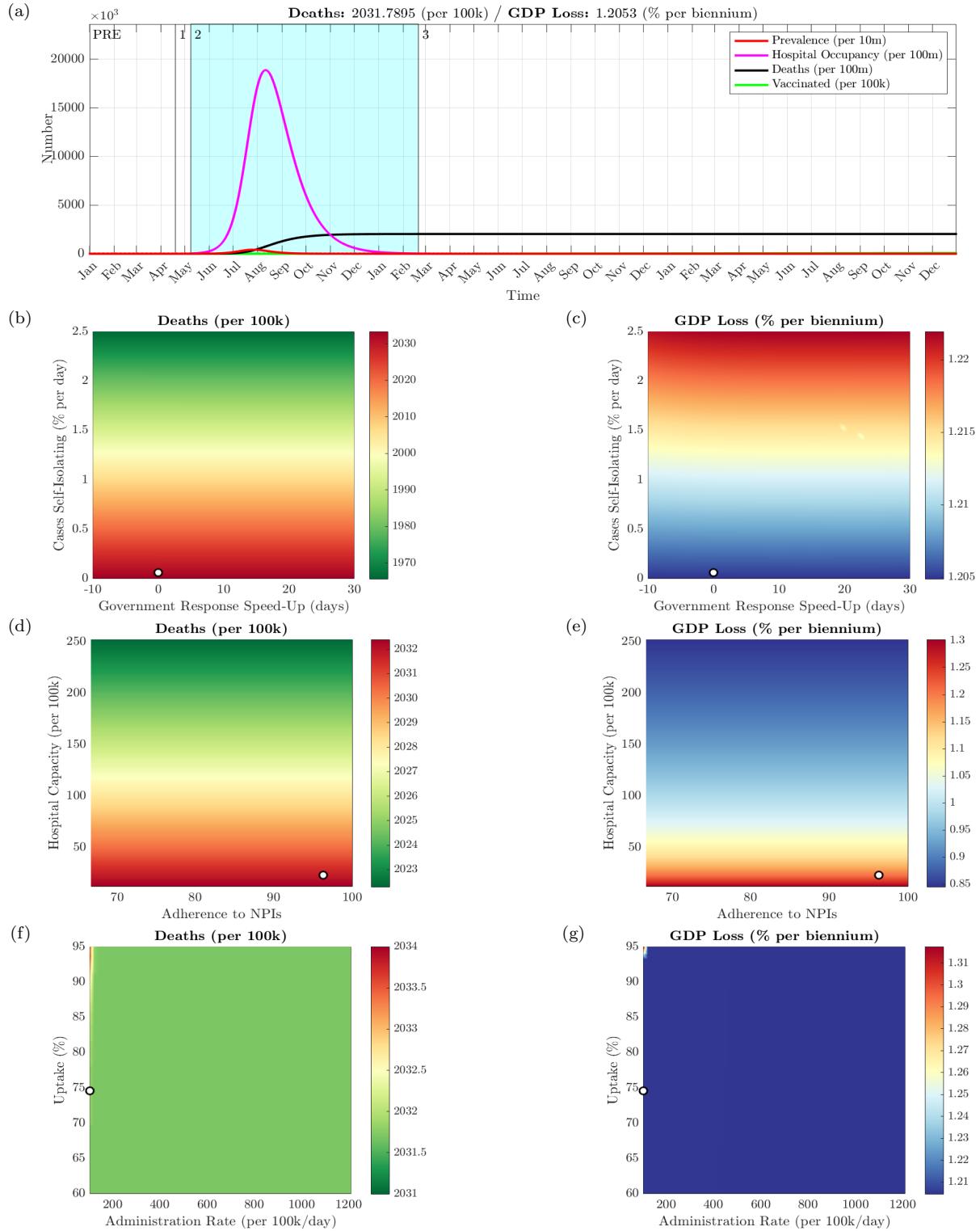
**Figure A13:** P2 in the USA; (a) the counterfactual epidemic trajectory; the effects of increasing/decreasing (b, c) the government response time & proportion of cases self-isolating, (d, e) adherence to NPIs during lockdown & hospital capacity, and (f, g) vaccine administration rate & uptake.



**Figure A14:** P2 in the UK; (a) the counterfactual epidemic trajectory; the effects of increasing/decreasing (b, c) the government response time & proportion of cases self-isolating, (d, e) adherence to NPIs during lockdown & hospital capacity, and (f, g) vaccine administration rate & uptake.



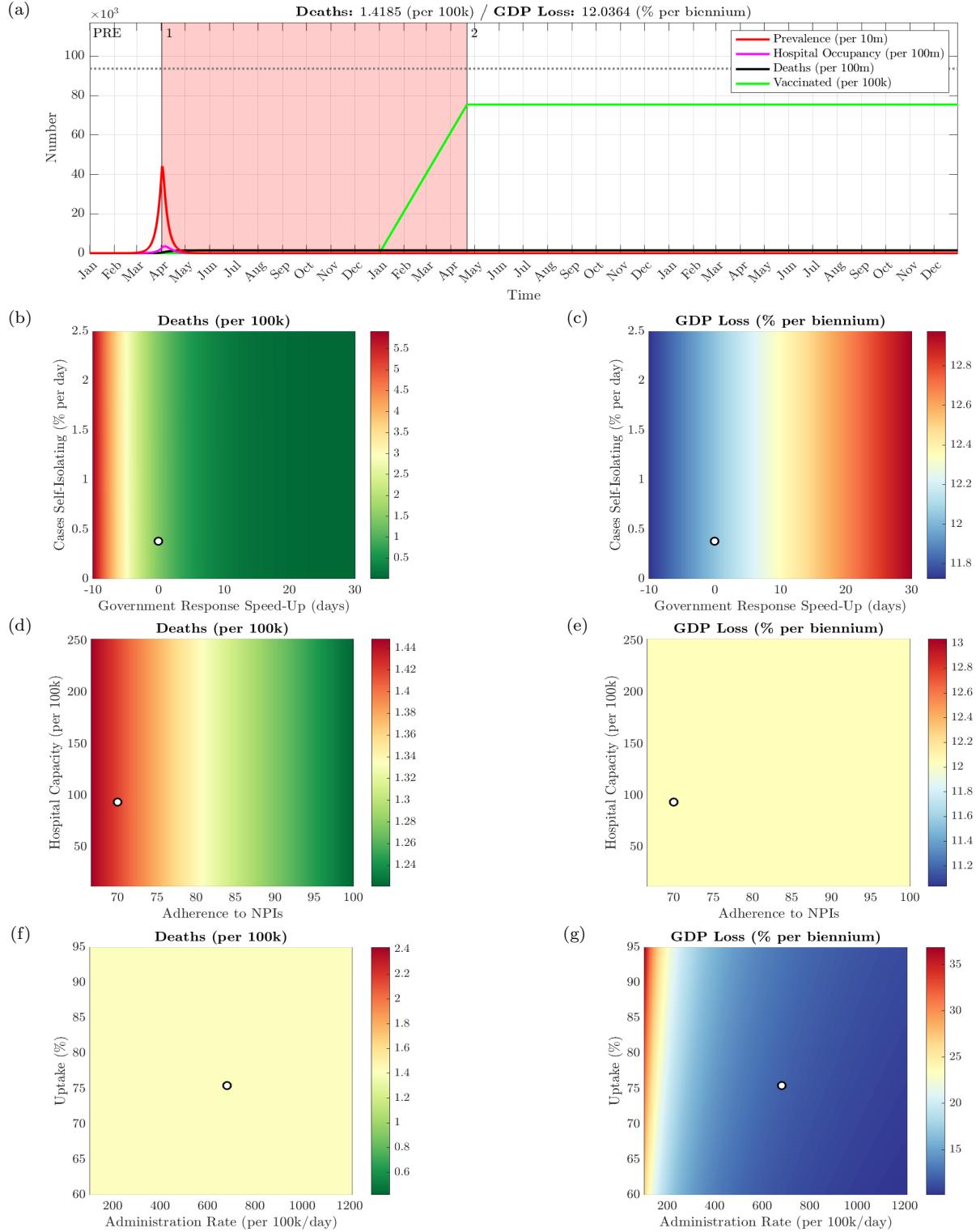
**Figure A15:** P2 in China; (a) the counterfactual epidemic trajectory; the effects of increasing/decreasing (b, c) the government response time & proportion of cases self-isolating, (d, e) adherence to NPIs during lockdown & hospital capacity, and (f, g) vaccine administration rate & uptake.



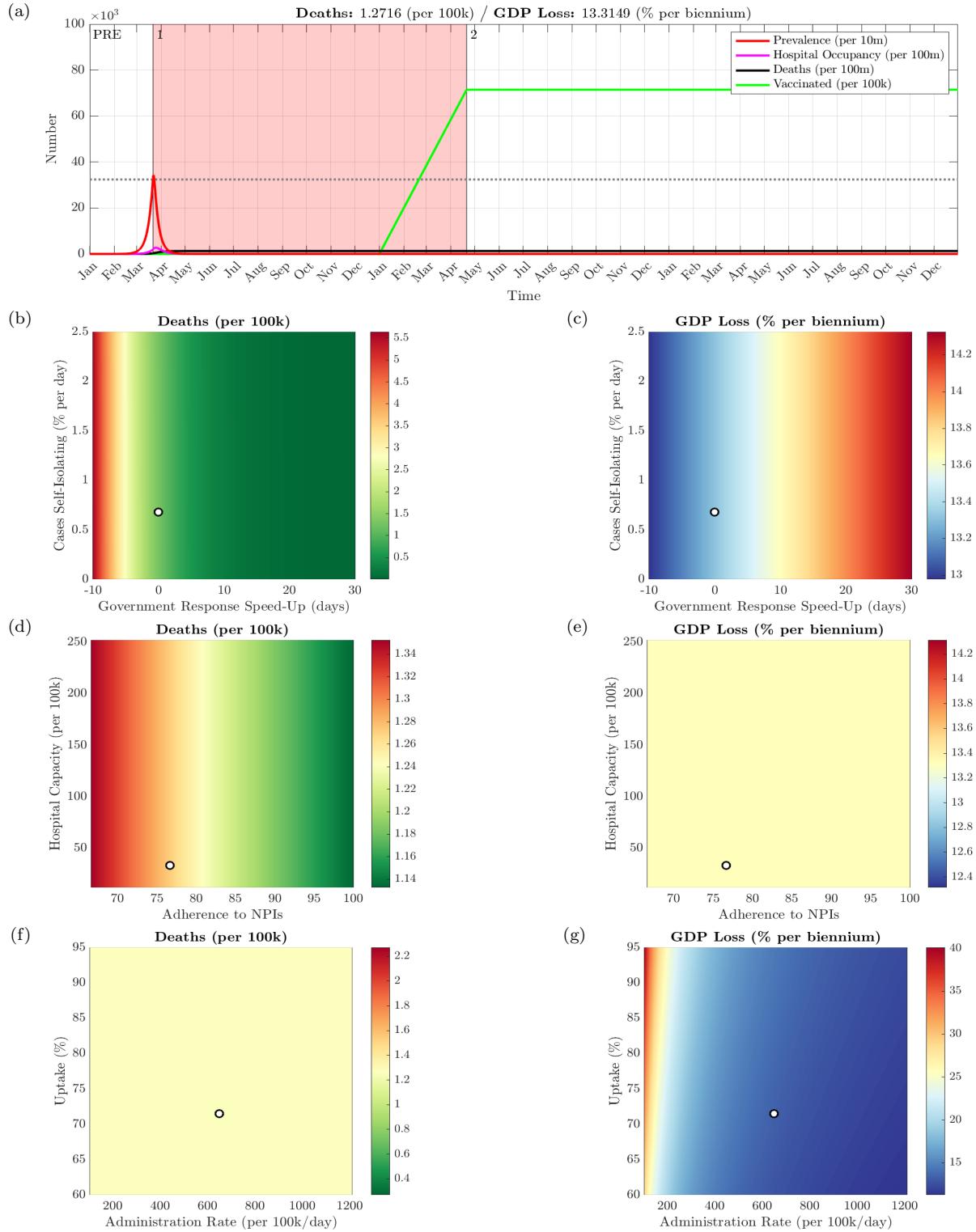
**Figure A16:** P2 in India; (a) the counterfactual epidemic trajectory; the effects of increasing/decreasing (b, c) the government response time & proportion of cases self-isolating, (d, e) adherence to NPIs during lockdown & hospital capacity, and (f, g) vaccine administration rate & uptake.

## 2 Lockdown Strategy

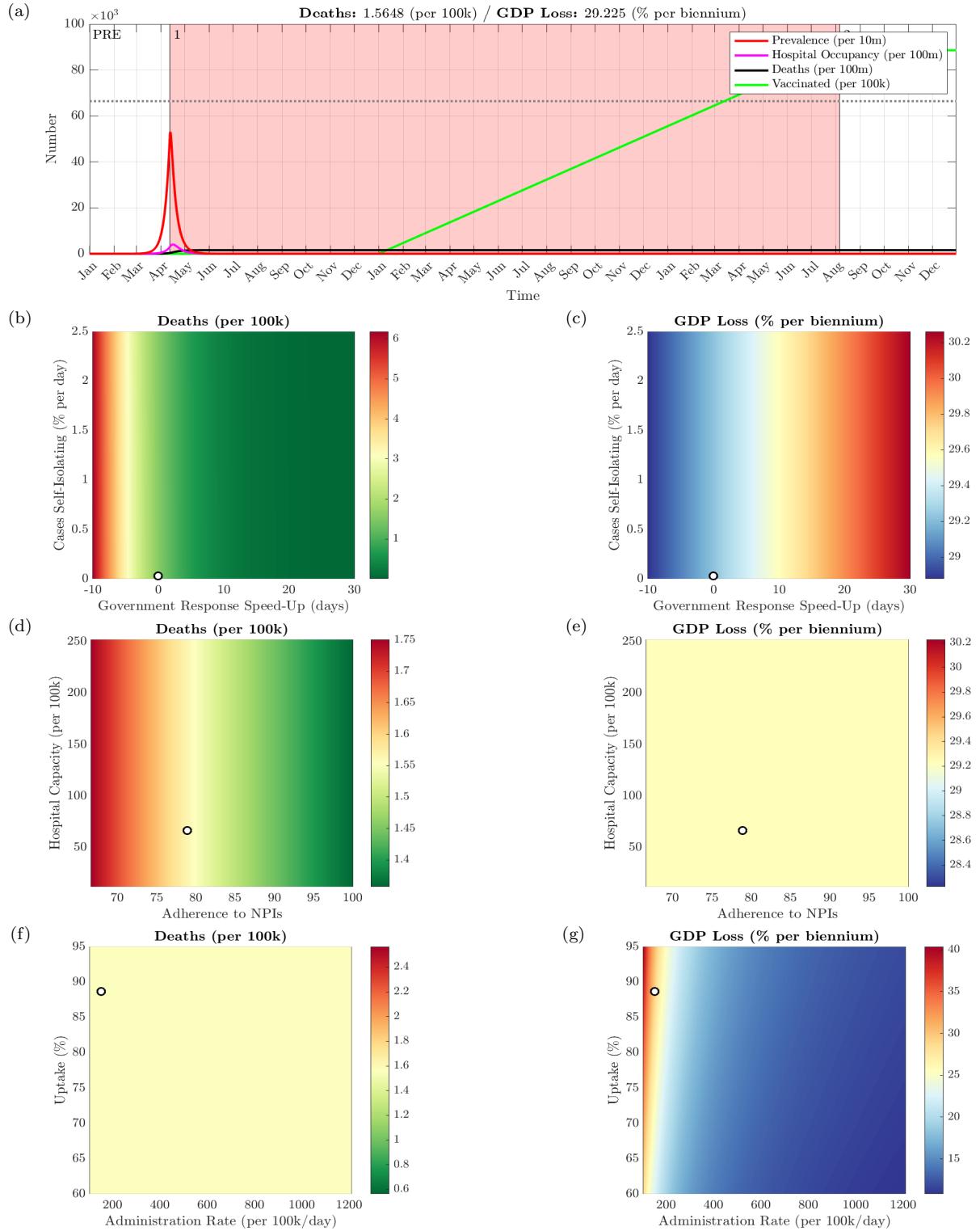
## 2.1 Swine Flu



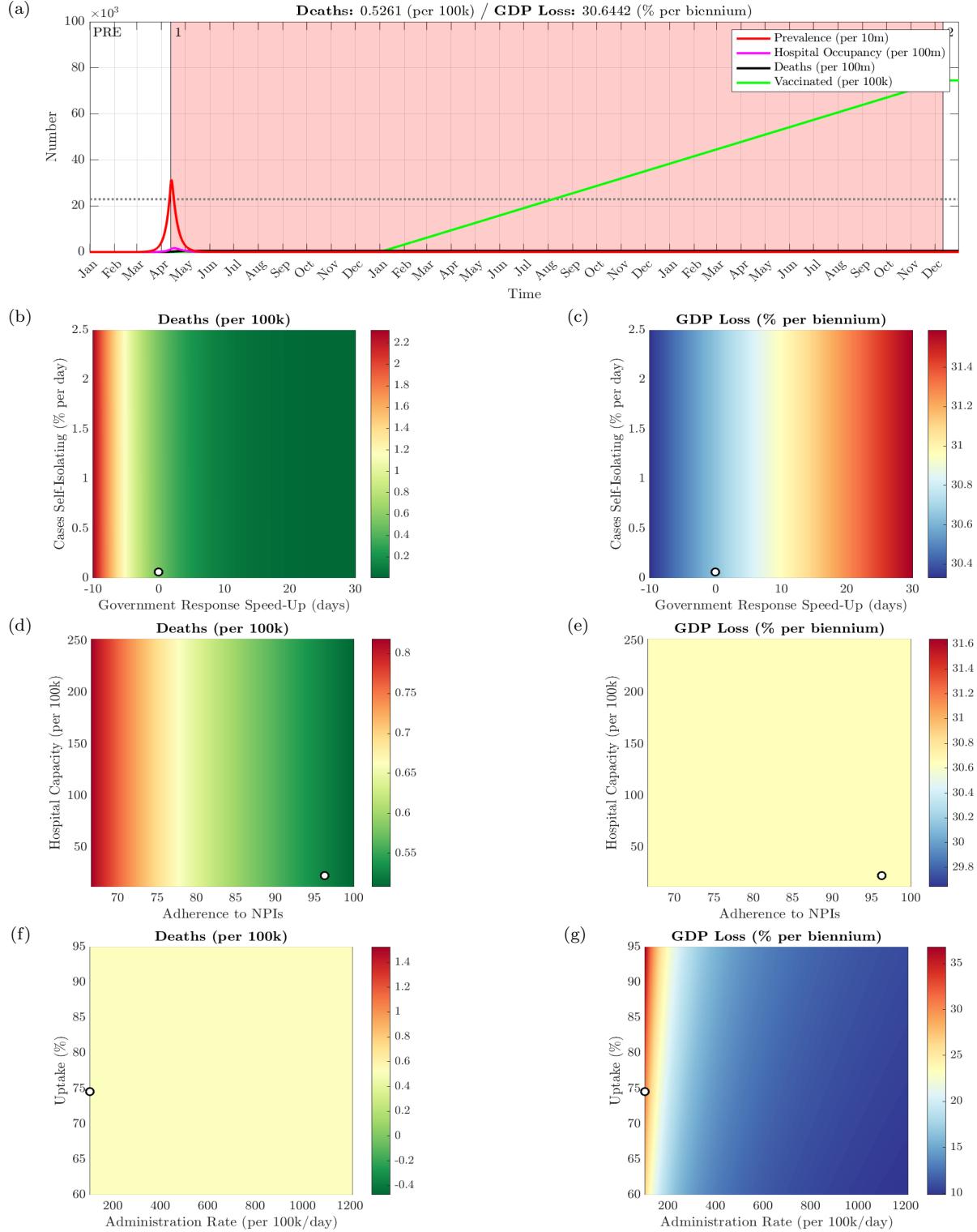
**Figure A17:** P2 in the USA; (a) the counterfactual epidemic trajectory; the effects of increasing/decreasing (b, c) the government response time & proportion of cases self-isolating, (d, e) adherence to NPIs during lockdown & hospital capacity, and (f, g) vaccine administration rate & uptake.



**Figure A18:** P2 in the UK; (a) the counterfactual epidemic trajectory; the effects of increasing/decreasing (b, c) the government response time & proportion of cases self-isolating, (d, e) adherence to NPIs during lockdown & hospital capacity, and (f, g) vaccine administration rate & uptake.

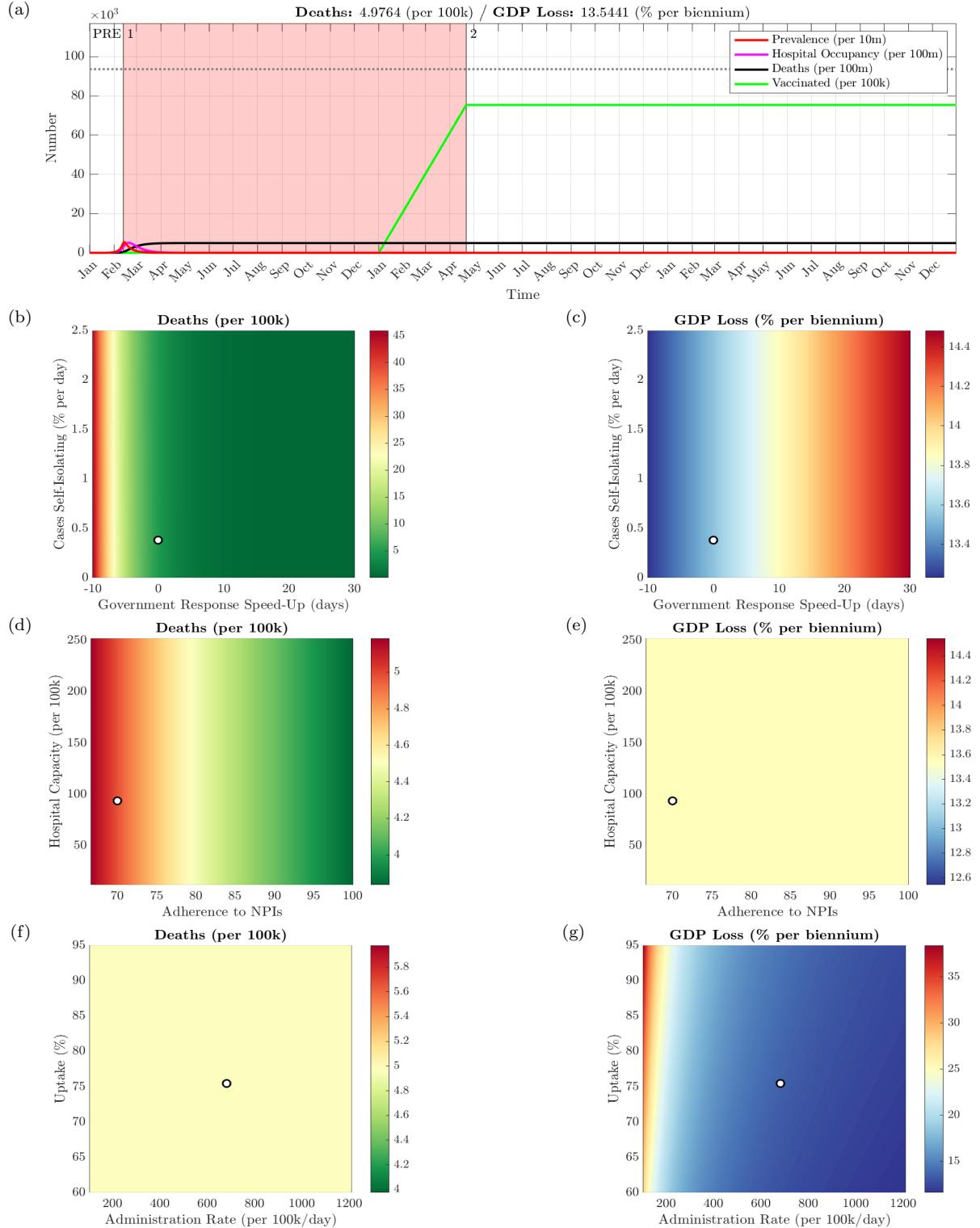


**Figure A19:** P2 in China; (a) the counterfactual epidemic trajectory; the effects of increasing/decreasing (b, c) the government response time & proportion of cases self-isolating, (d, e) adherence to NPIs during lockdown & hospital capacity, and (f, g) vaccine administration rate & uptake.

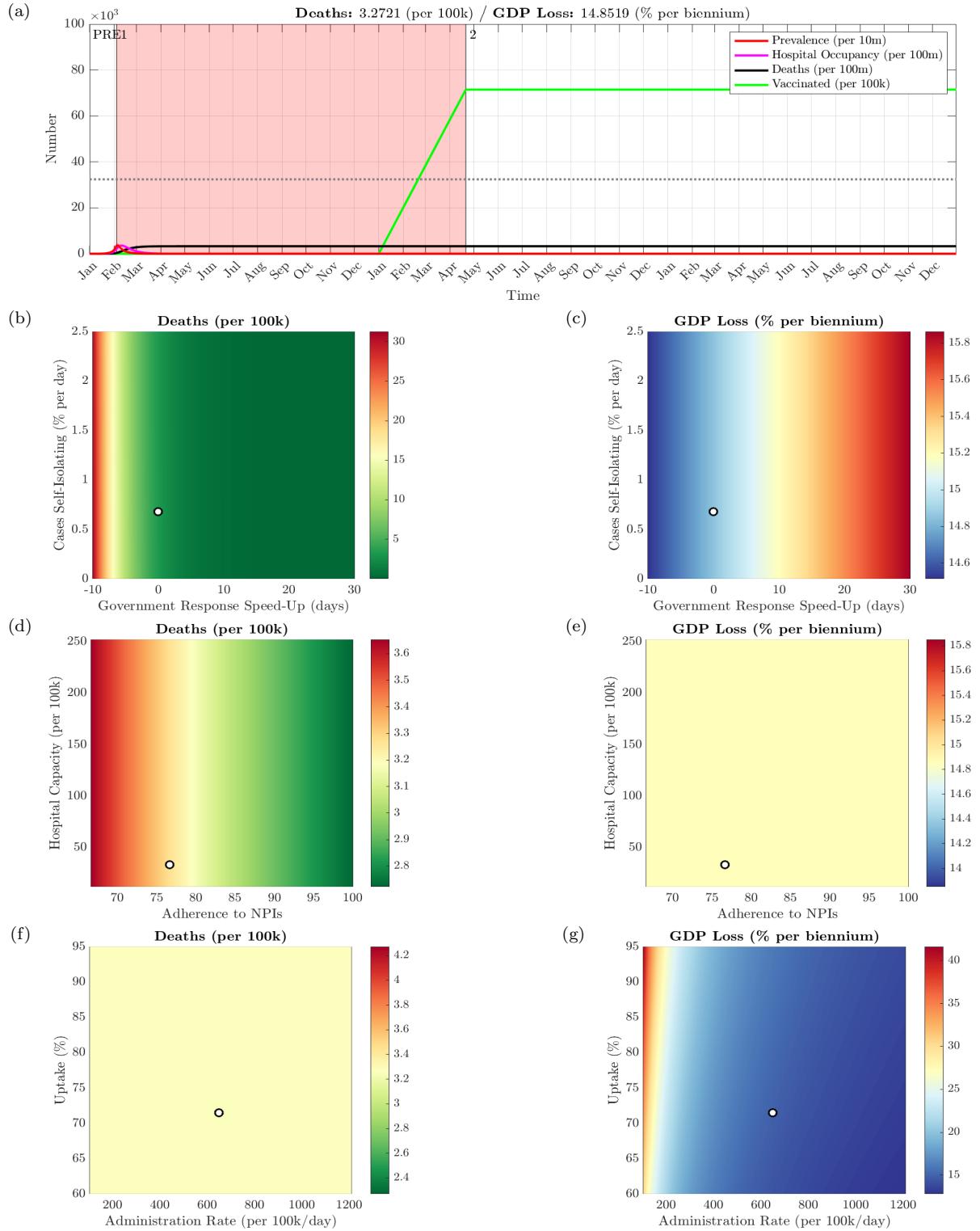


**Figure A20:** P2 in India; (a) the counterfactual epidemic trajectory; the effects of increasing/decreasing (b, c) the government response time & proportion of cases self-isolating, (d, e) adherence to NPIs during lockdown & hospital capacity, and (f, g) vaccine administration rate & uptake.

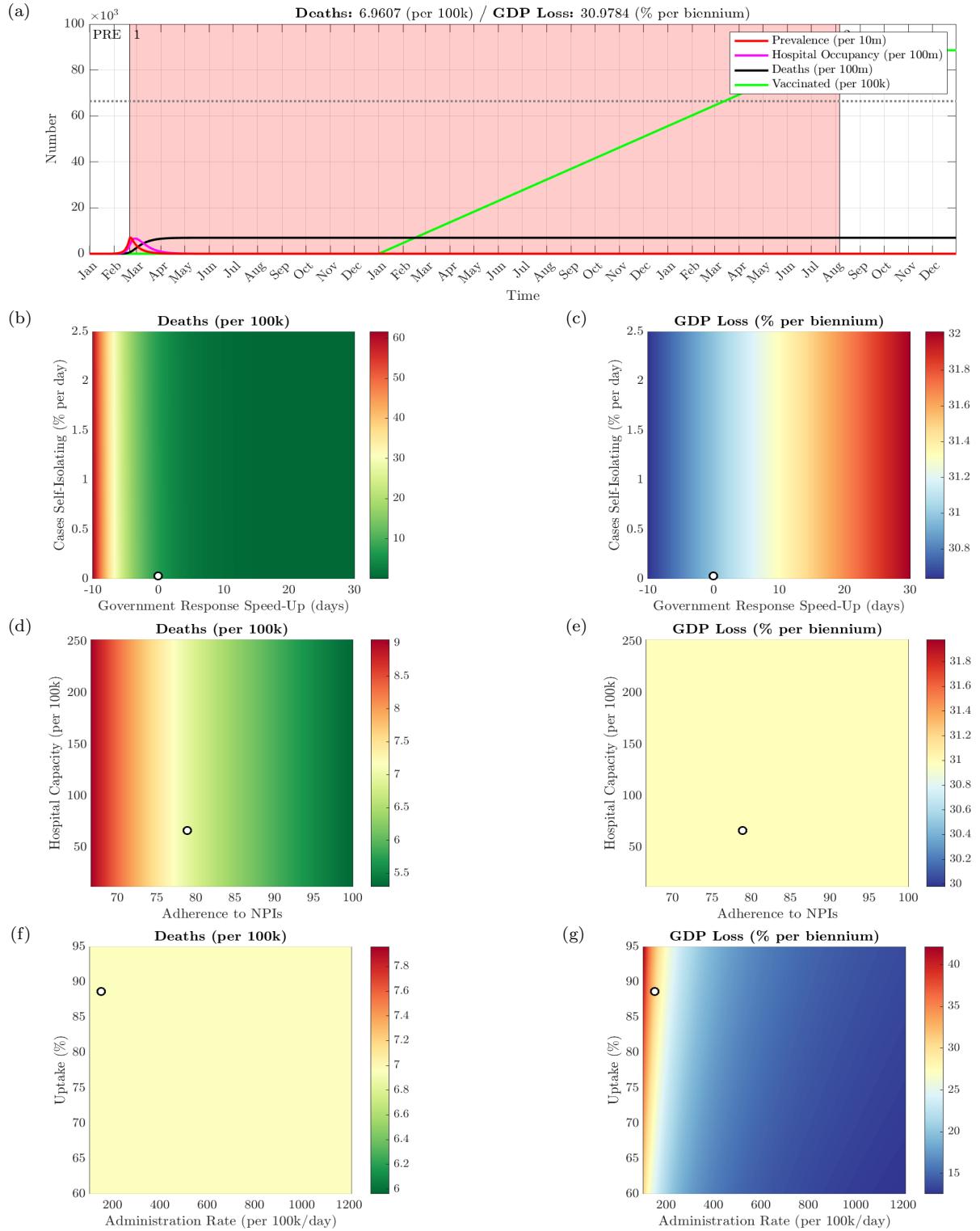
## 2.2 Spanish Flu



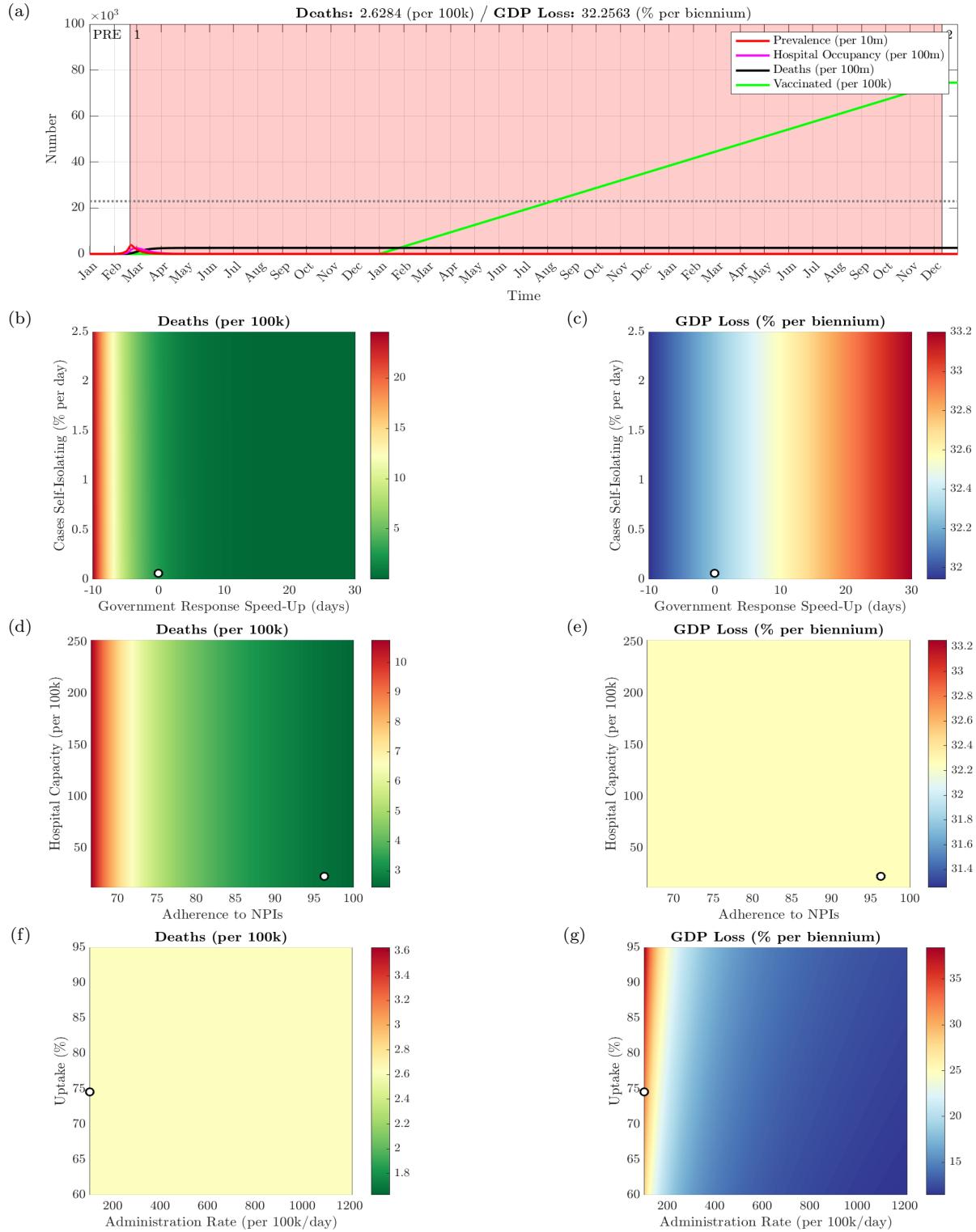
**Figure A21:** P2 in the USA; (a) the counterfactual epidemic trajectory; the effects of increasing/decreasing (b, c) the government response time & proportion of cases self-isolating, (d, e) adherence to NPIs during lockdown & hospital capacity, and (f, g) vaccine administration rate & uptake.



**Figure A22:** P2 in the UK; (a) the counterfactual epidemic trajectory; the effects of increasing/decreasing (b, c) the government response time & proportion of cases self-isolating, (d, e) adherence to NPIs during lockdown & hospital capacity, and (f, g) vaccine administration rate & uptake.

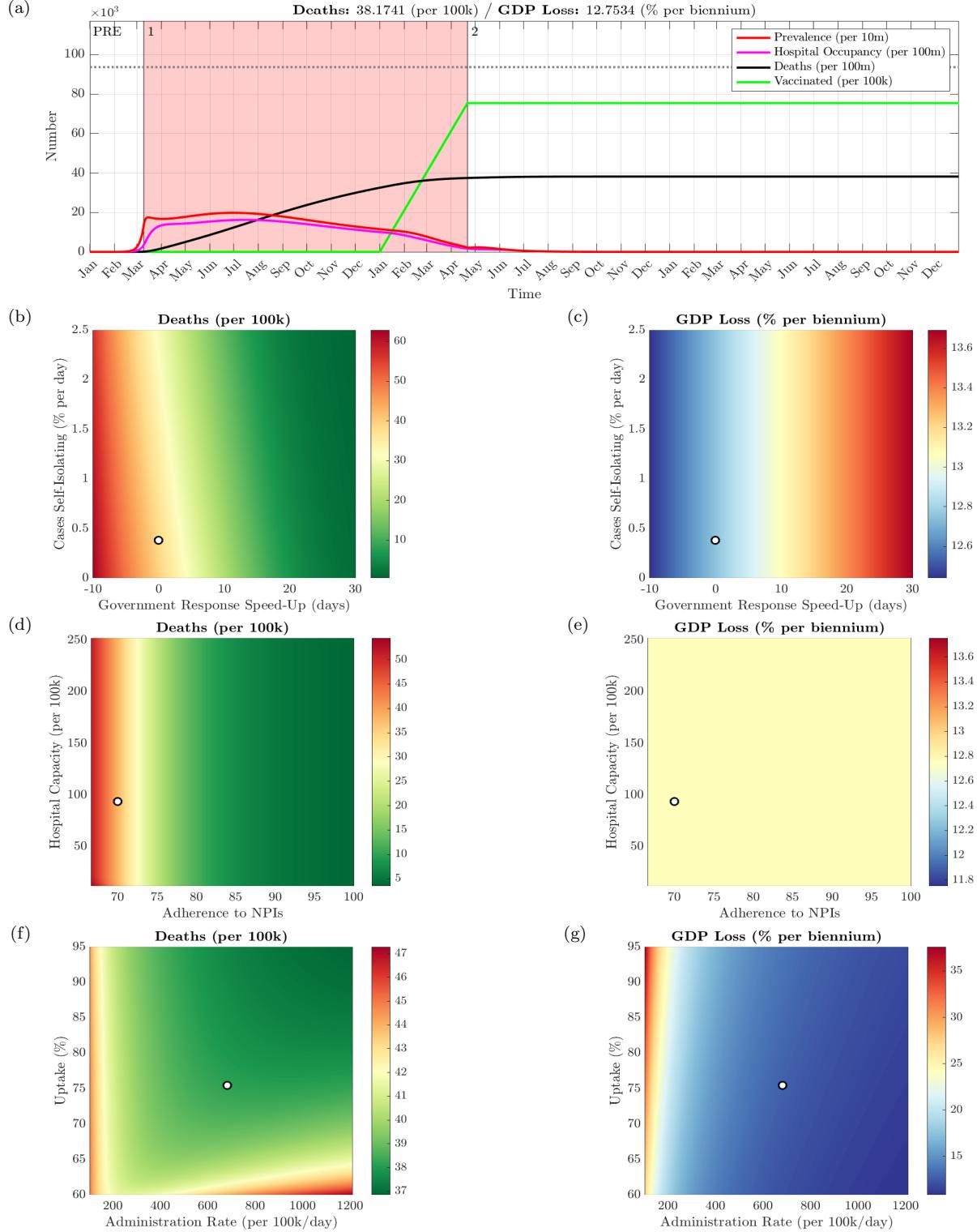


**Figure A23:** P2 in China; (a) the counterfactual epidemic trajectory; the effects of increasing/decreasing (b, c) the government response time & proportion of cases self-isolating, (d, e) adherence to NPIs during lockdown & hospital capacity, and (f, g) vaccine administration rate & uptake.

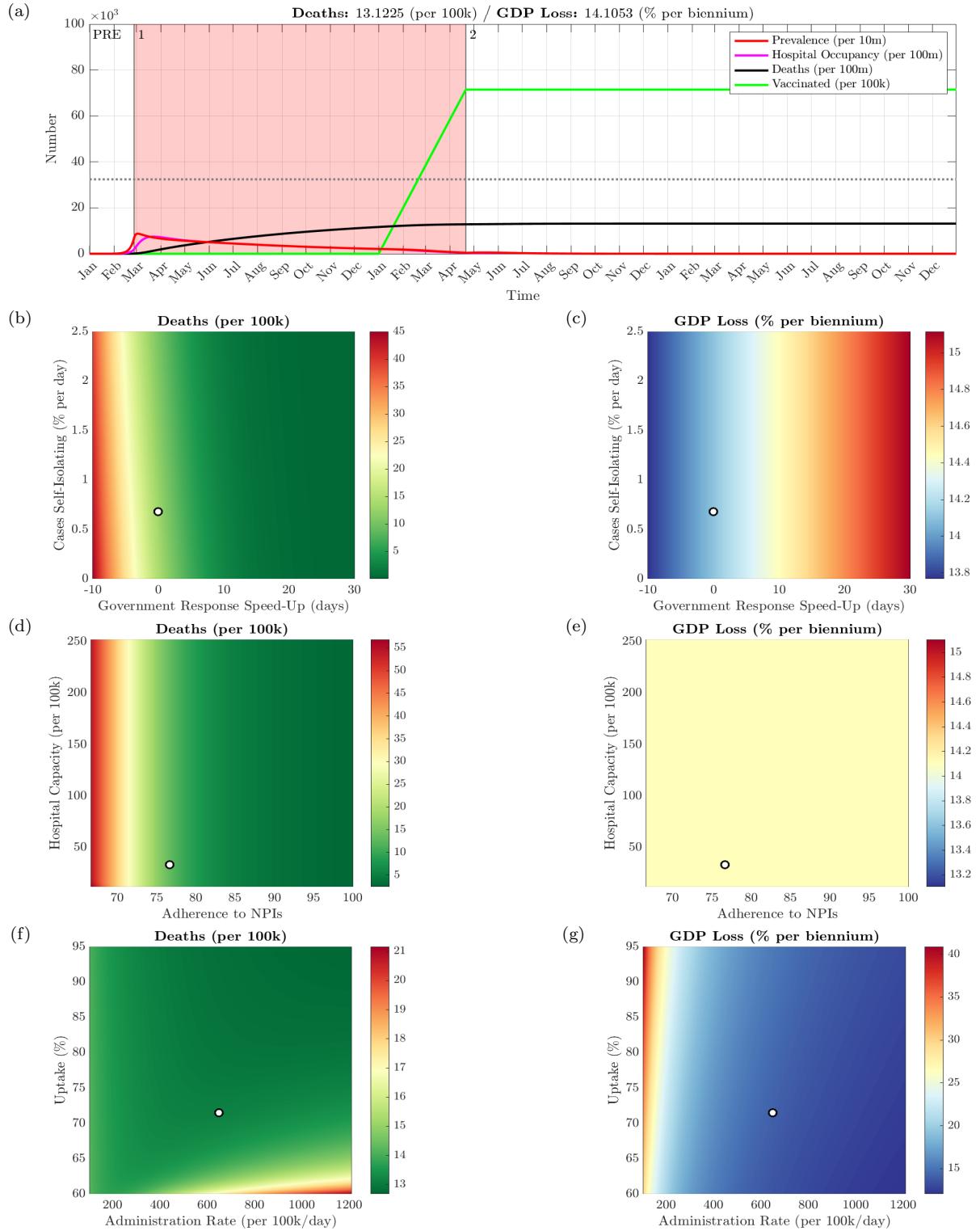


**Figure A24:** P2 in India; (a) the counterfactual epidemic trajectory; the effects of increasing/decreasing (b, c) the government response time & proportion of cases self-isolating, (d, e) adherence to NPIs during lockdown & hospital capacity, and (f, g) vaccine administration rate & uptake.

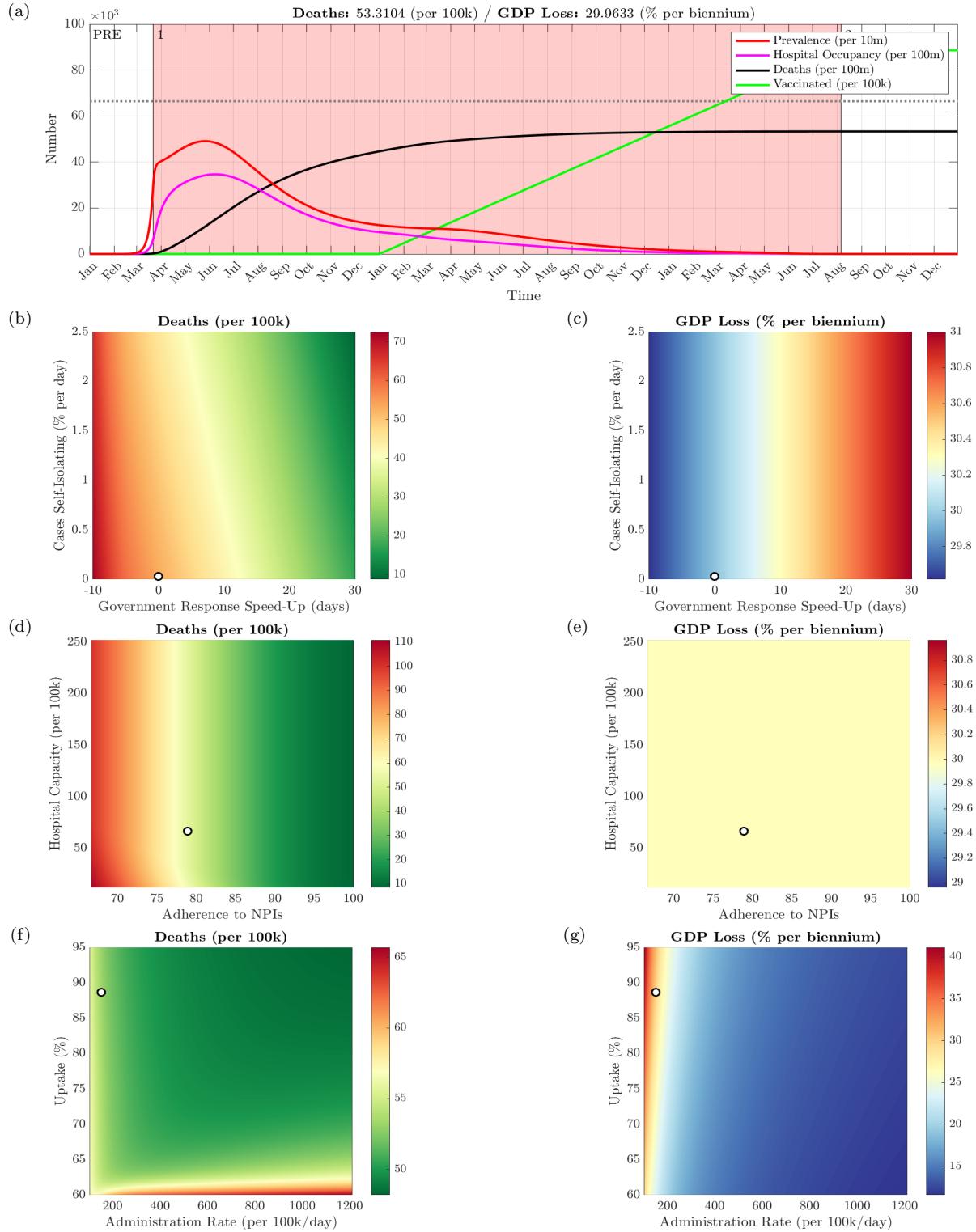
## 2.3 Covid



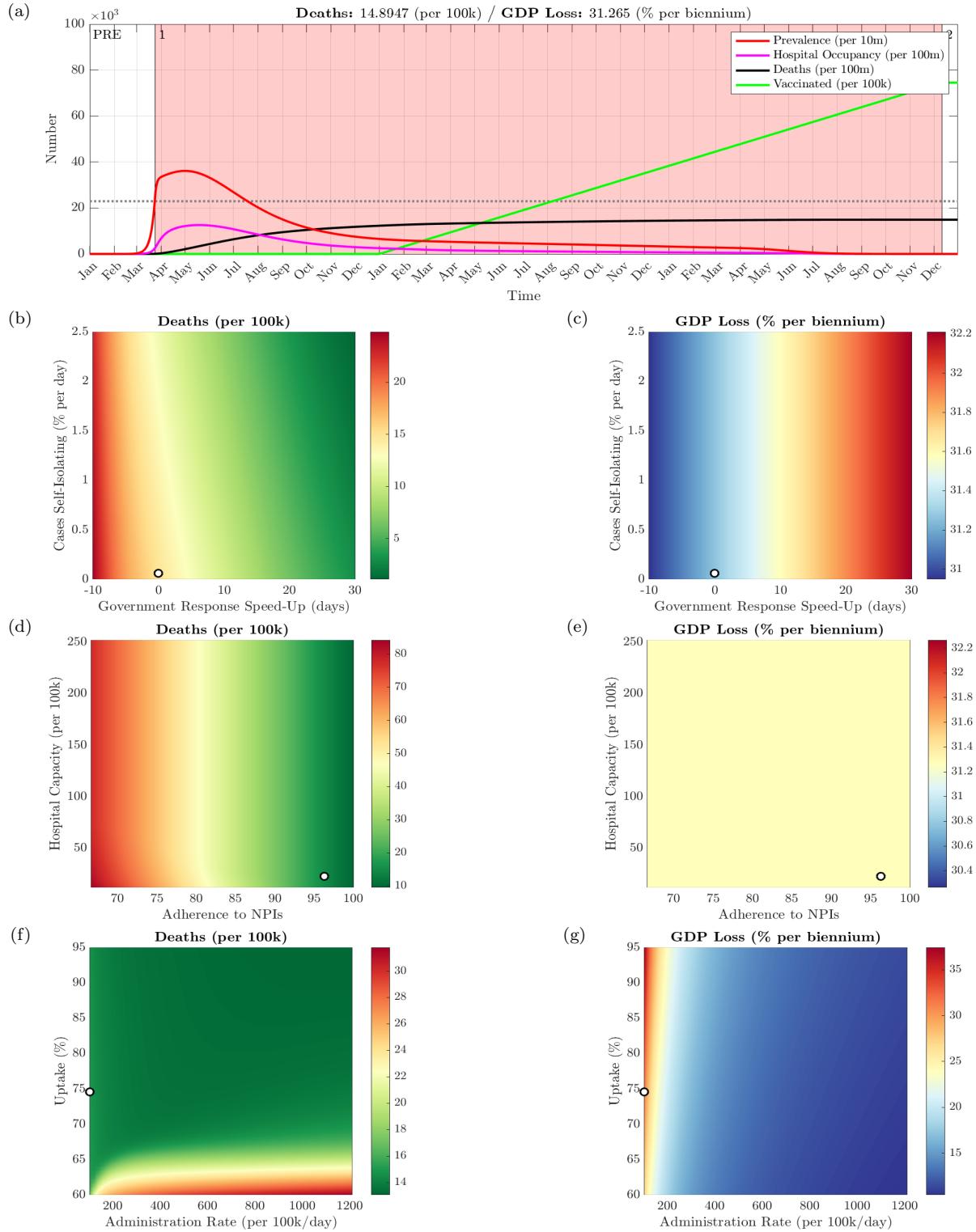
**Figure A25:** P2 in the USA; (a) the counterfactual epidemic trajectory; the effects of increasing/decreasing (b, c) the government response time & proportion of cases self-isolating, (d, e) adherence to NPIs during lockdown & hospital capacity, and (f, g) vaccine administration rate & uptake.



**Figure A26:** P2 in the UK; (a) the counterfactual epidemic trajectory; the effects of increasing/decreasing (b, c) the government response time & proportion of cases self-isolating, (d, e) adherence to NPIs during lockdown & hospital capacity, and (f, g) vaccine administration rate & uptake.

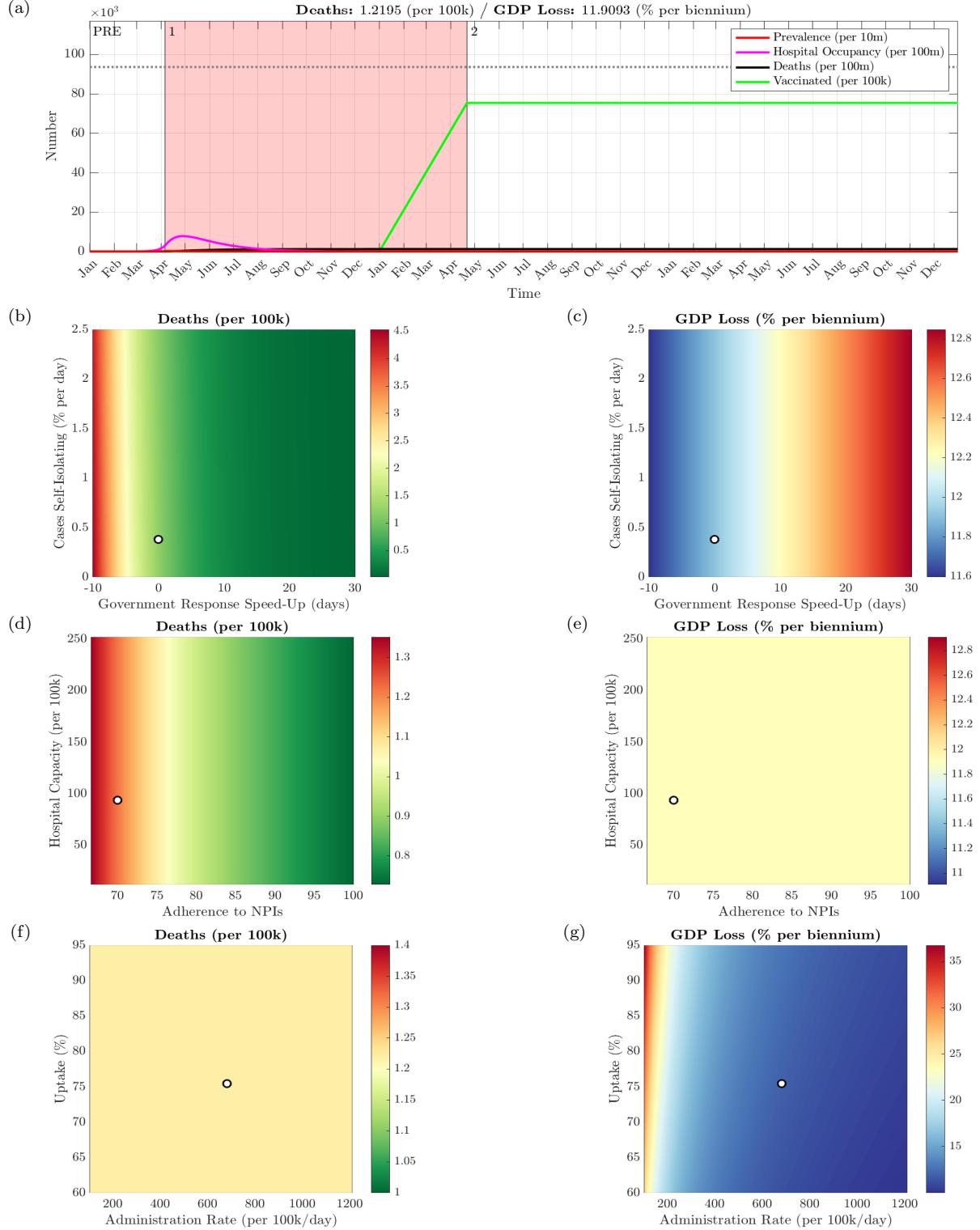


**Figure A27:** P2 in China; (a) the counterfactual epidemic trajectory; the effects of increasing/decreasing (b, c) the government response time & proportion of cases self-isolating, (d, e) adherence to NPIs during lockdown & hospital capacity, and (f, g) vaccine administration rate & uptake.

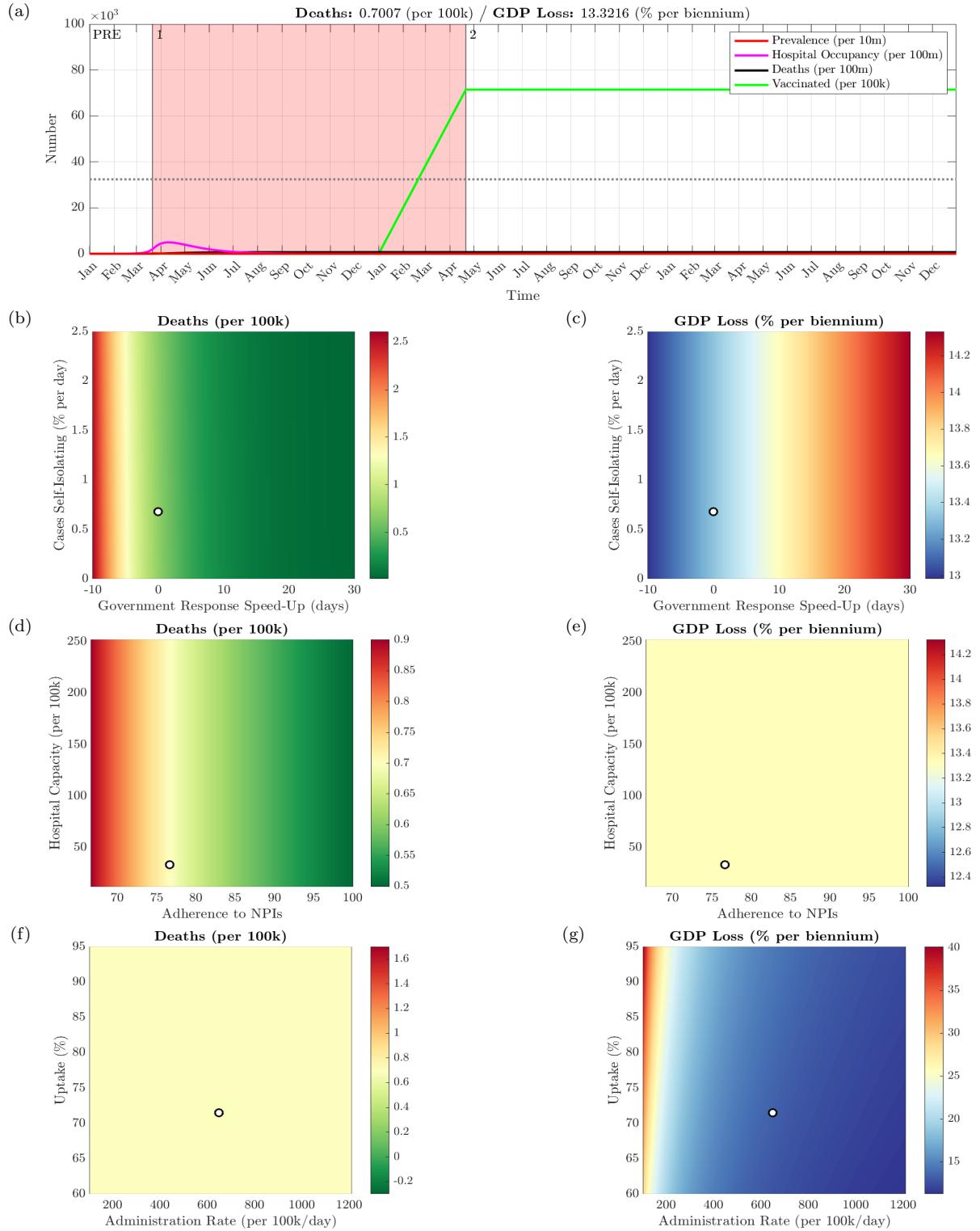


**Figure A28:** P2 in India; (a) the counterfactual epidemic trajectory; the effects of increasing/decreasing (b, c) the government response time & proportion of cases self-isolating, (d, e) adherence to NPIs during lockdown & hospital capacity, and (f, g) vaccine administration rate & uptake.

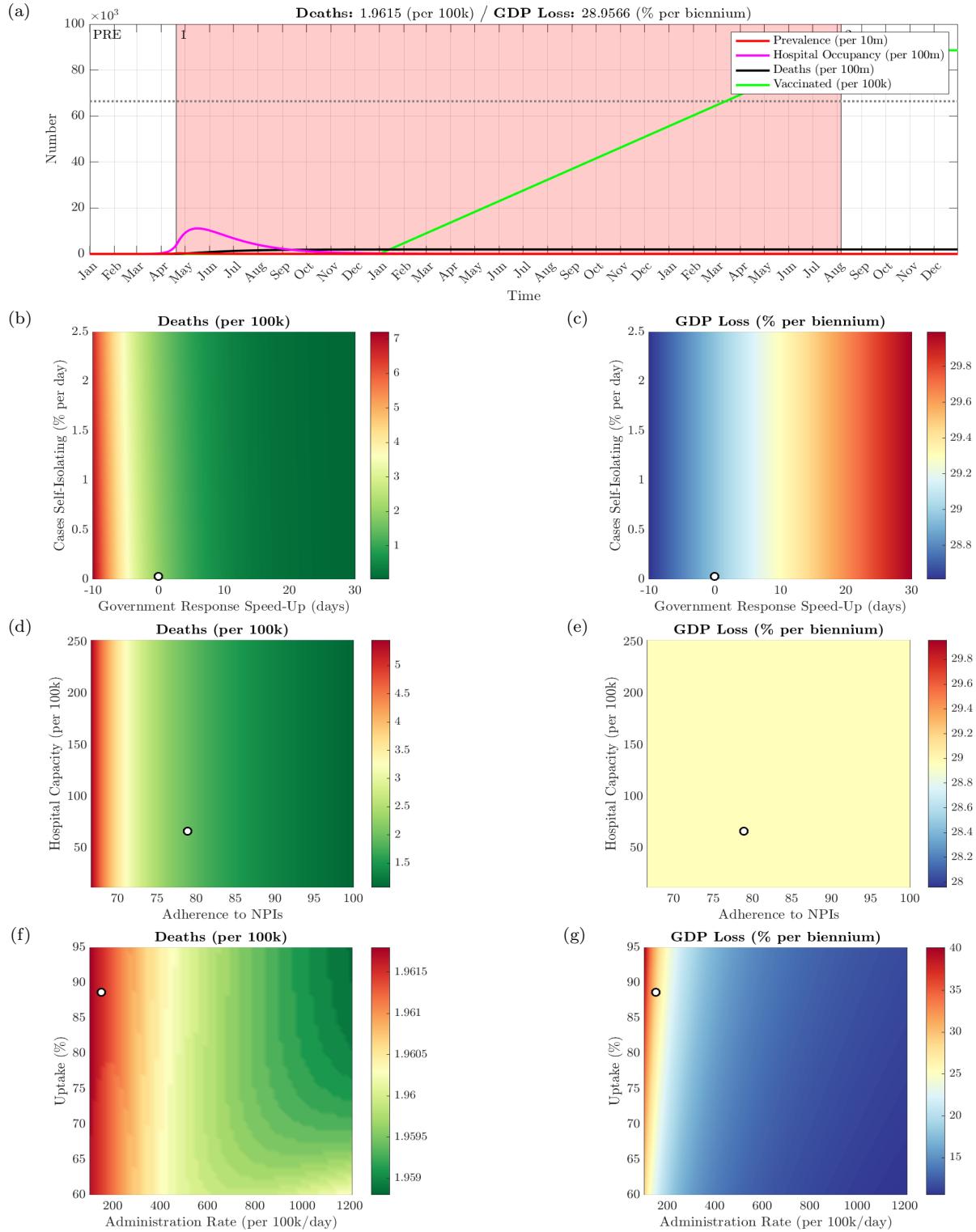
## 2.4 SARS



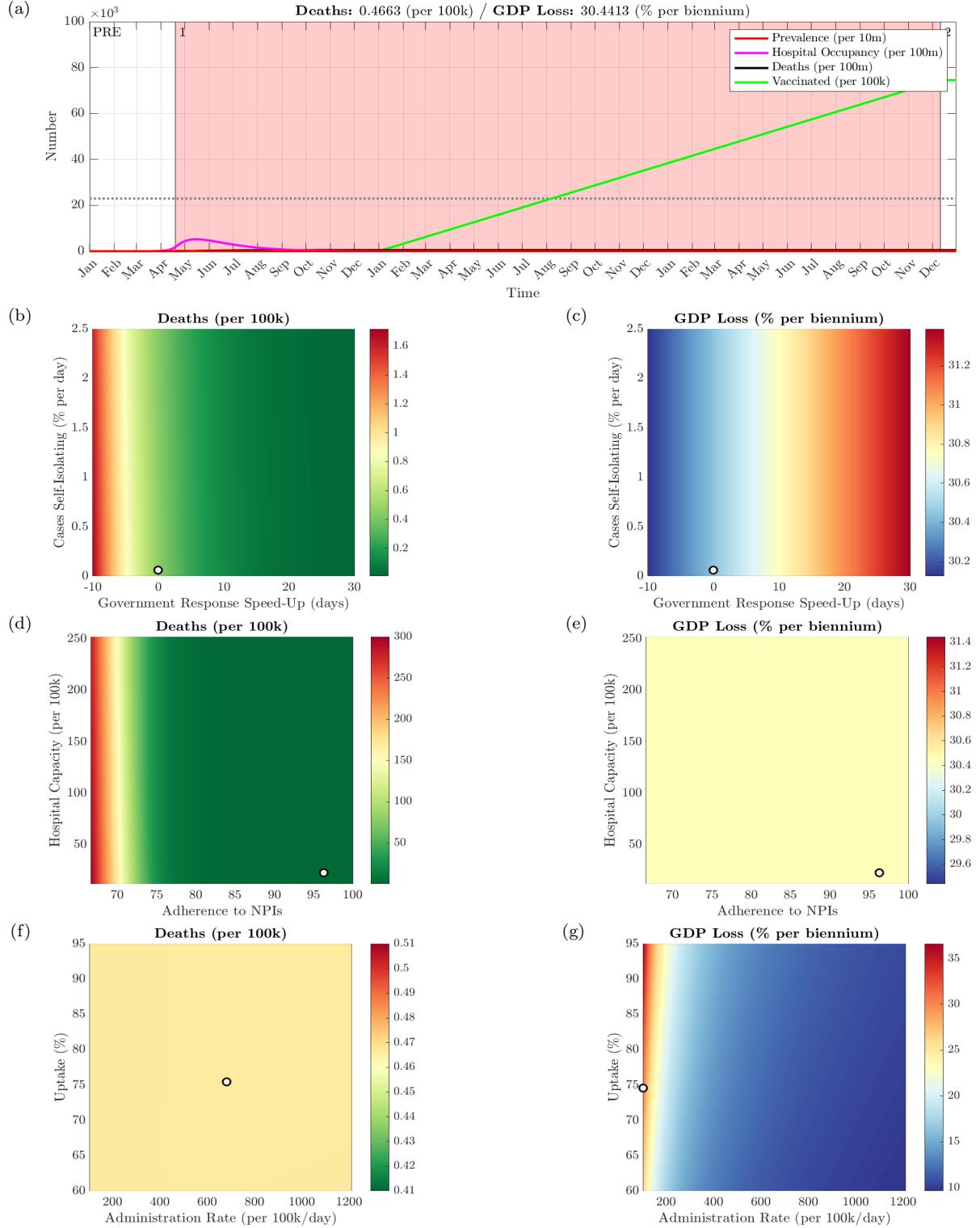
**Figure A29:** P2 in the USA; (a) the counterfactual epidemic trajectory; the effects of increasing/decreasing (b, c) the government response time & proportion of cases self-isolating, (d, e) adherence to NPIs during lockdown & hospital capacity, and (f, g) vaccine administration rate & uptake.



**Figure A30:** P2 in the UK; (a) the counterfactual epidemic trajectory; the effects of increasing/decreasing (b, c) the government response time & proportion of cases self-isolating, (d, e) adherence to NPIs during lockdown & hospital capacity, and (f, g) vaccine administration rate & uptake.



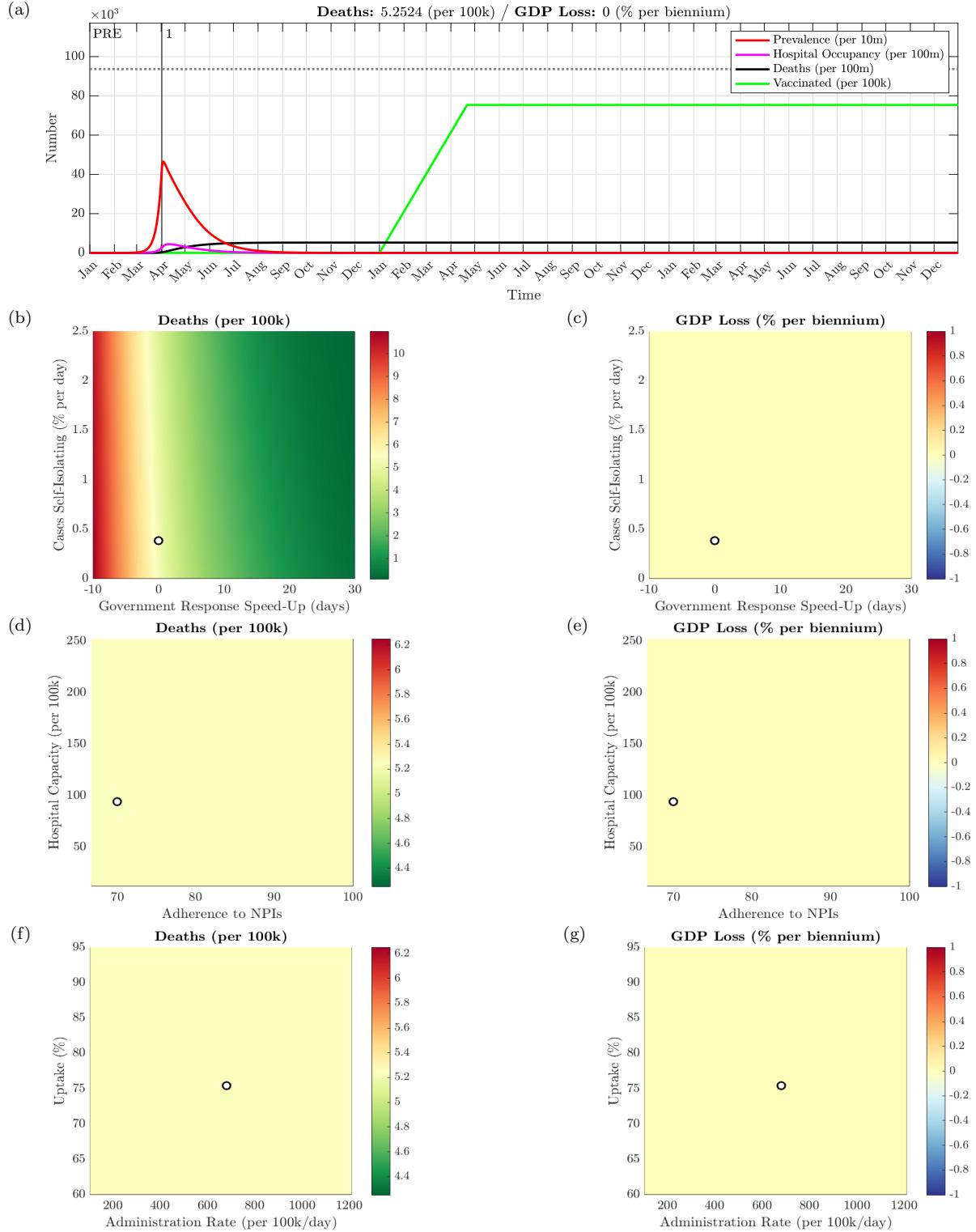
**Figure A31:** P2 in China; (a) the counterfactual epidemic trajectory; the effects of increasing/decreasing (b, c) the government response time & proportion of cases self-isolating, (d, e) adherence to NPIs during lockdown & hospital capacity, and (f, g) vaccine administration rate & uptake.



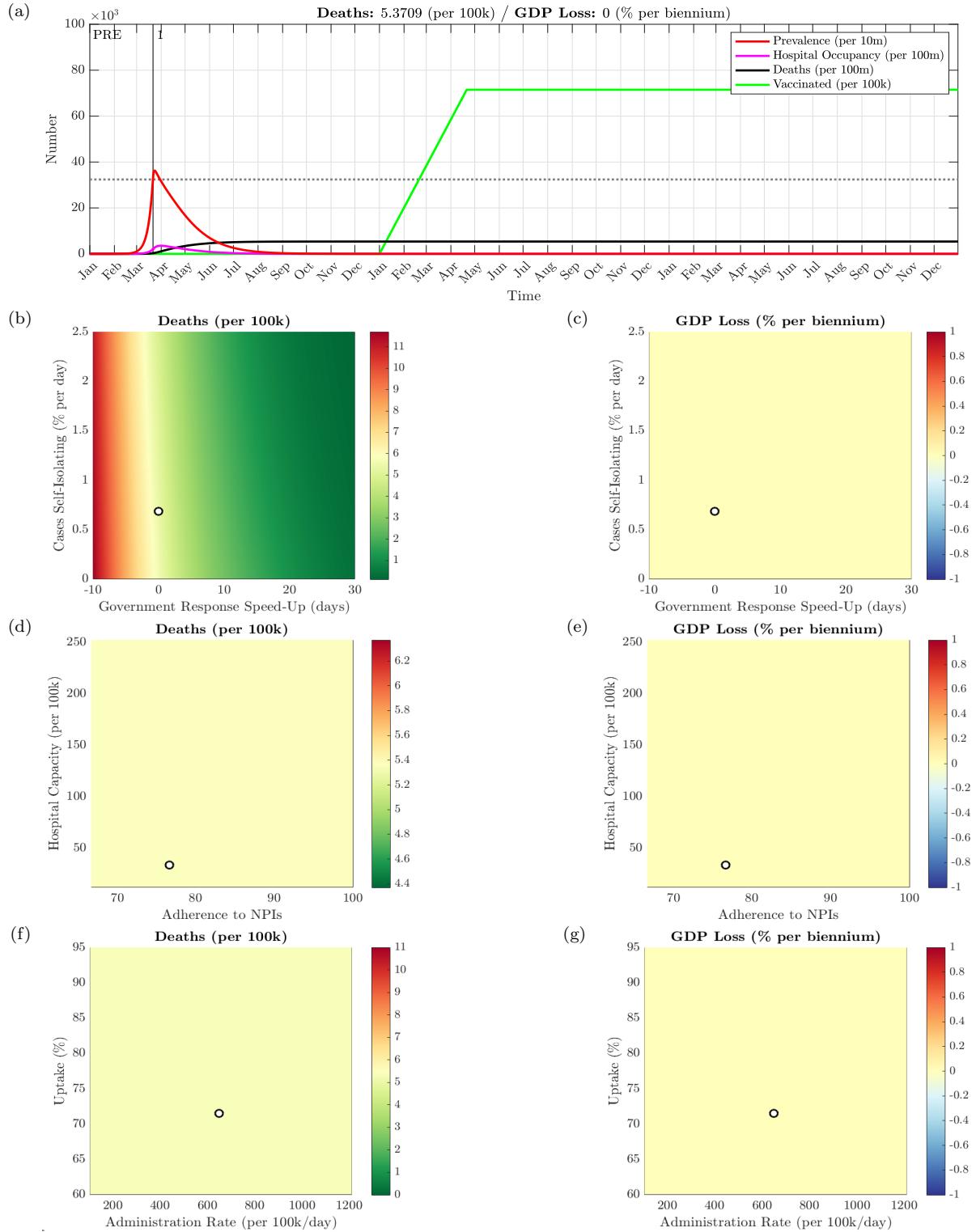
**Figure A32:** P2 in India; (a) the counterfactual epidemic trajectory; the effects of increasing/decreasing (b, c) the government response time & proportion of cases self-isolating, (d, e) adherence to NPIs during lockdown & hospital capacity, and (f, g) vaccine administration rate & uptake.

### 3 Reactive Closure Strategy

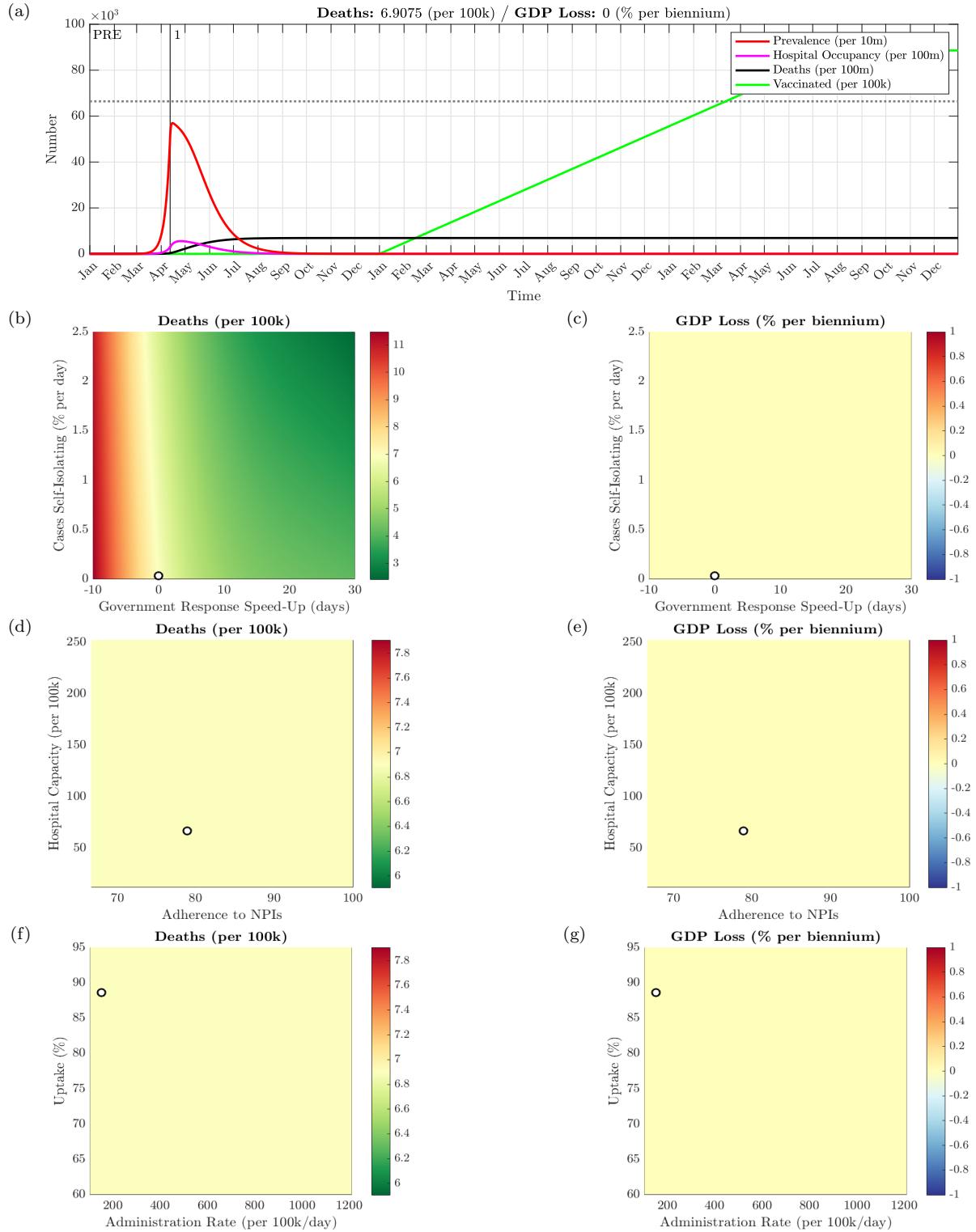
### 3.1 Swine Flu



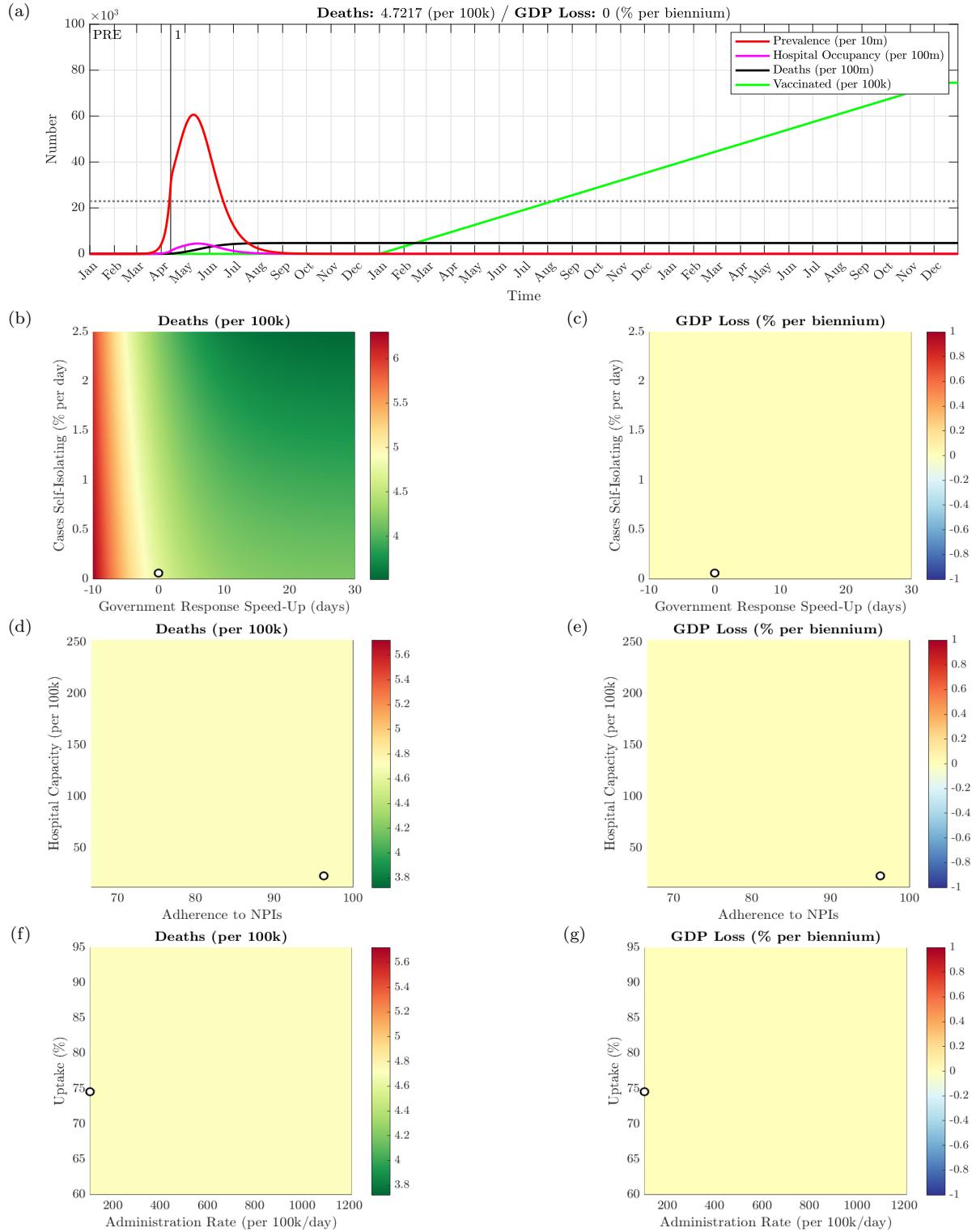
**Figure A33:** P2 in the USA; (a) the counterfactual epidemic trajectory; the effects of increasing/decreasing (b, c) the government response time & proportion of cases self-isolating, (d, e) adherence to NPIs during lockdown & hospital capacity, and (f, g) vaccine administration rate & uptake.



**Figure A34:** P2 in the UK; (a) the counterfactual epidemic trajectory; the effects of increasing/decreasing (b, c) the government response time & proportion of cases self-isolating, (d, e) adherence to NPIs during lockdown & hospital capacity, and (f, g) vaccine administration rate & uptake.

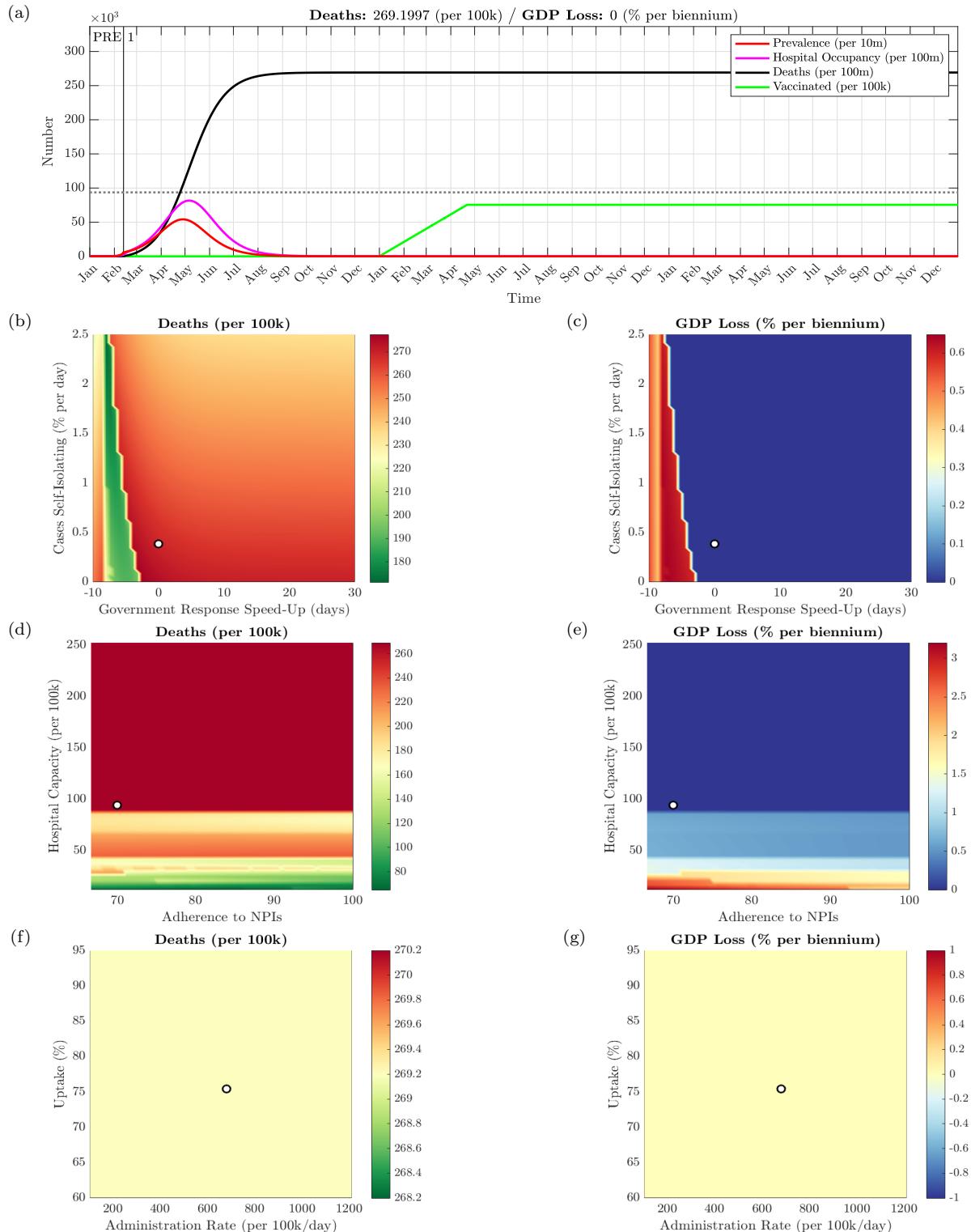


**Figure A35:** P2 in China; (a) the counterfactual epidemic trajectory; the effects of increasing/decreasing (b, c) the government response time & proportion of cases self-isolating, (d, e) adherence to NPIs during lockdown & hospital capacity, and (f, g) vaccine administration rate & uptake.

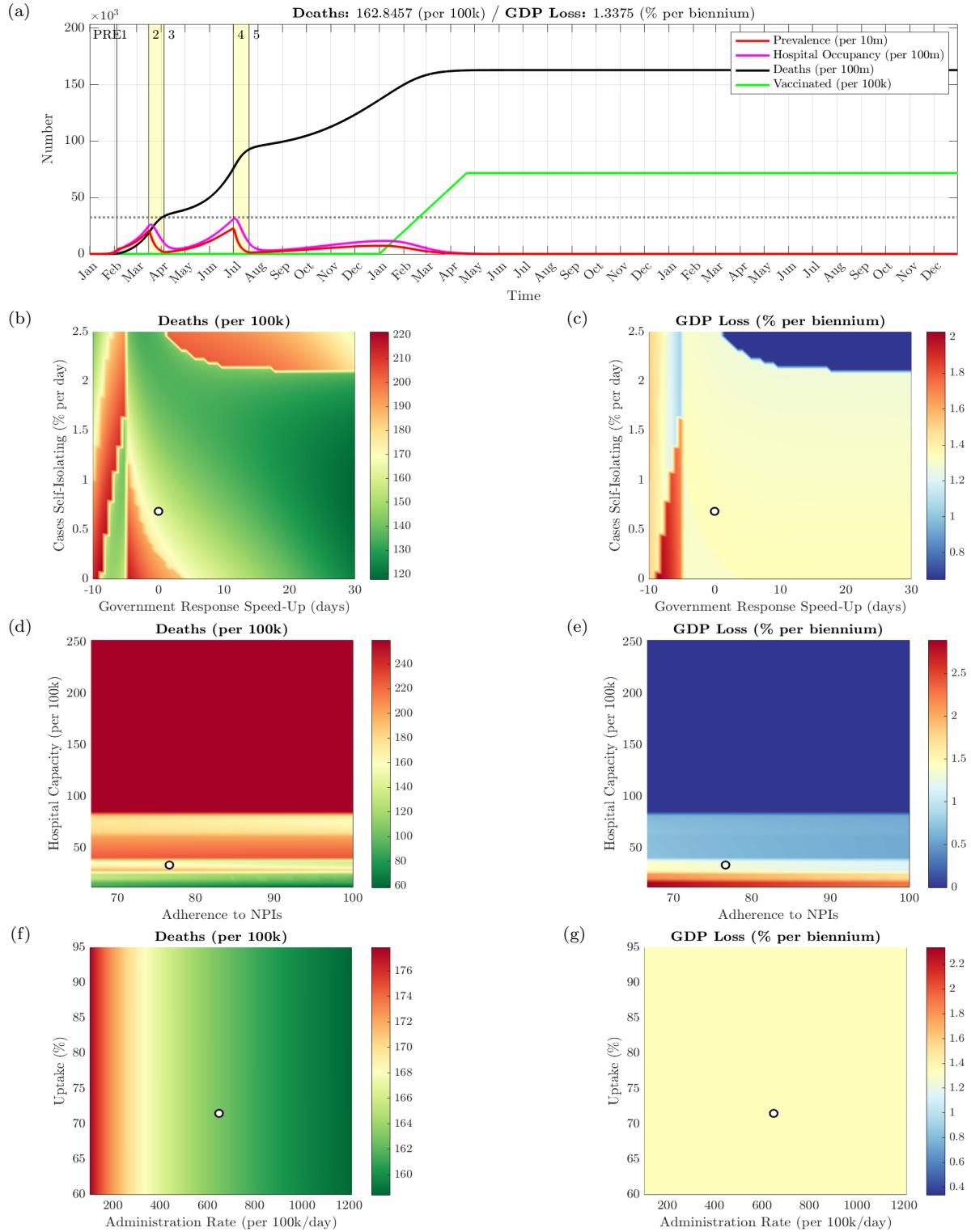


**Figure A36:** P2 in India; (a) the counterfactual epidemic trajectory; the effects of increasing/decreasing (b, c) the government response time & proportion of cases self-isolating, (d, e) adherence to NPIs during lockdown & hospital capacity, and (f, g) vaccine administration rate & uptake.

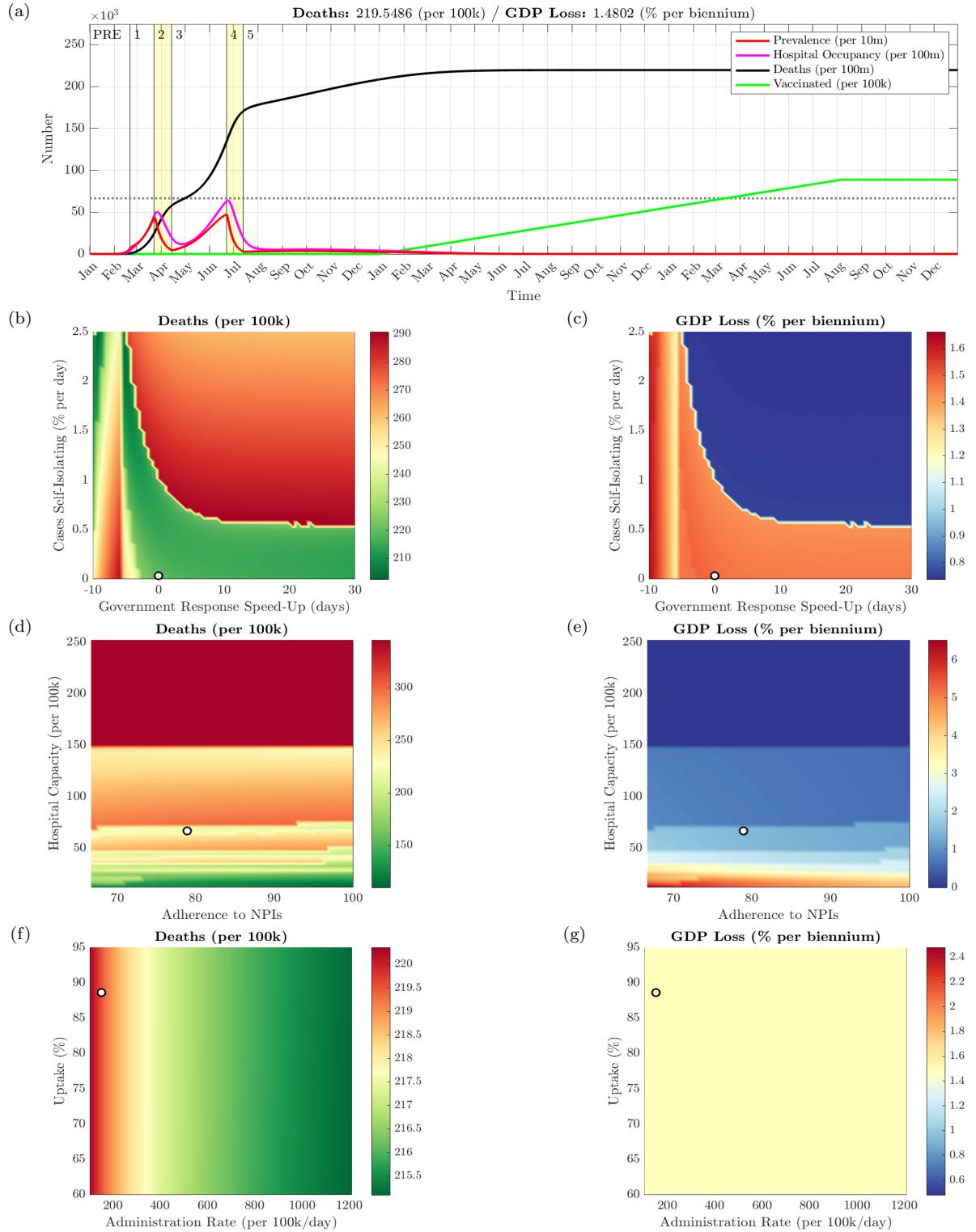
### 3.2 Spanish Flu



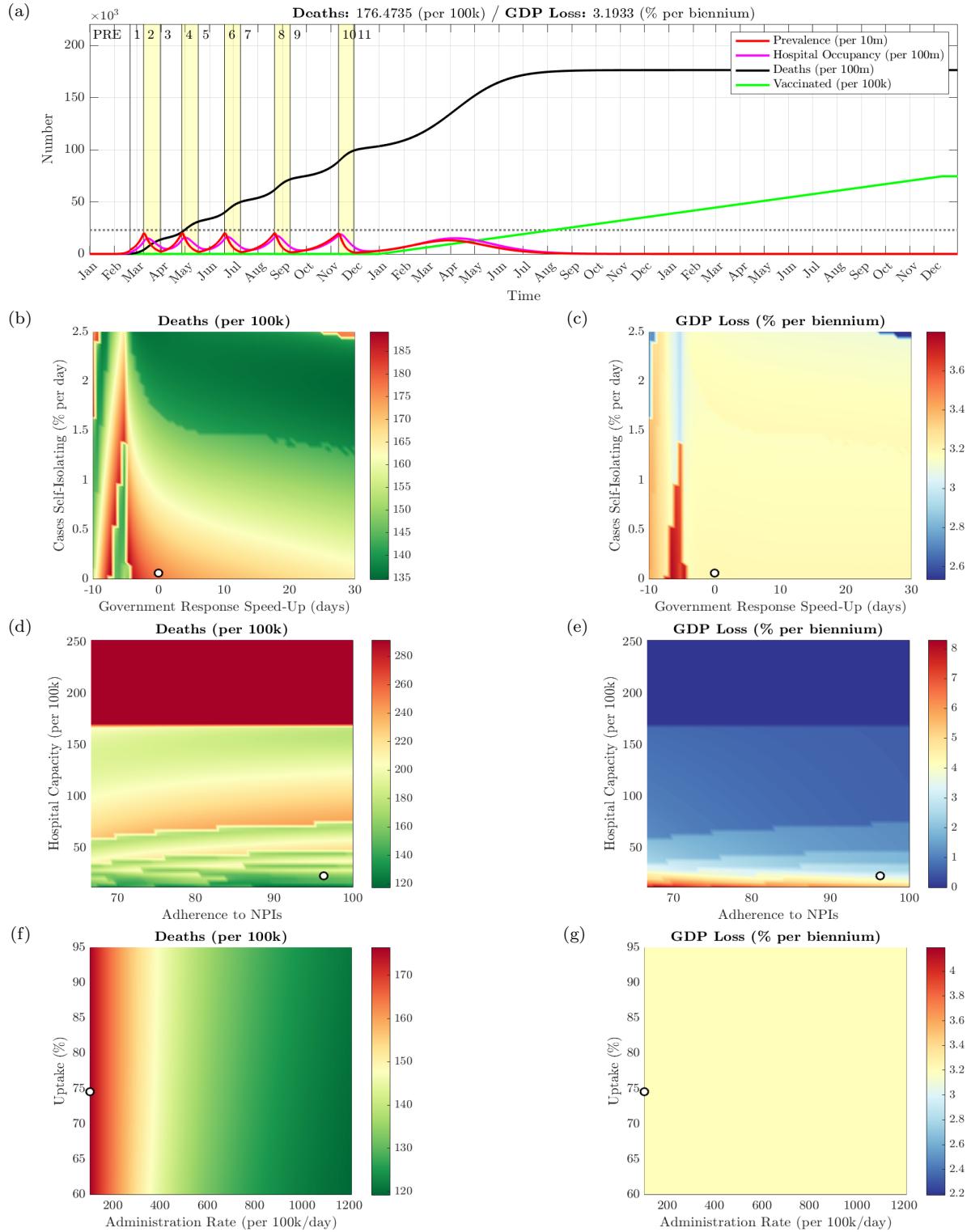
**Figure A37:** P2 in the USA; (a) the counterfactual epidemic trajectory; the effects of increasing/decreasing (b, c) the government response time & proportion of cases self-isolating, (d, e) adherence to NPIs during lockdown & hospital capacity, and (f, g) vaccine administration rate & uptake.



**Figure A38:** P2 in the UK; (a) the counterfactual epidemic trajectory; the effects of increasing/decreasing (b, c) the government response time & proportion of cases self-isolating, (d, e) adherence to NPIs during lockdown & hospital capacity, and (f, g) vaccine administration rate & uptake.

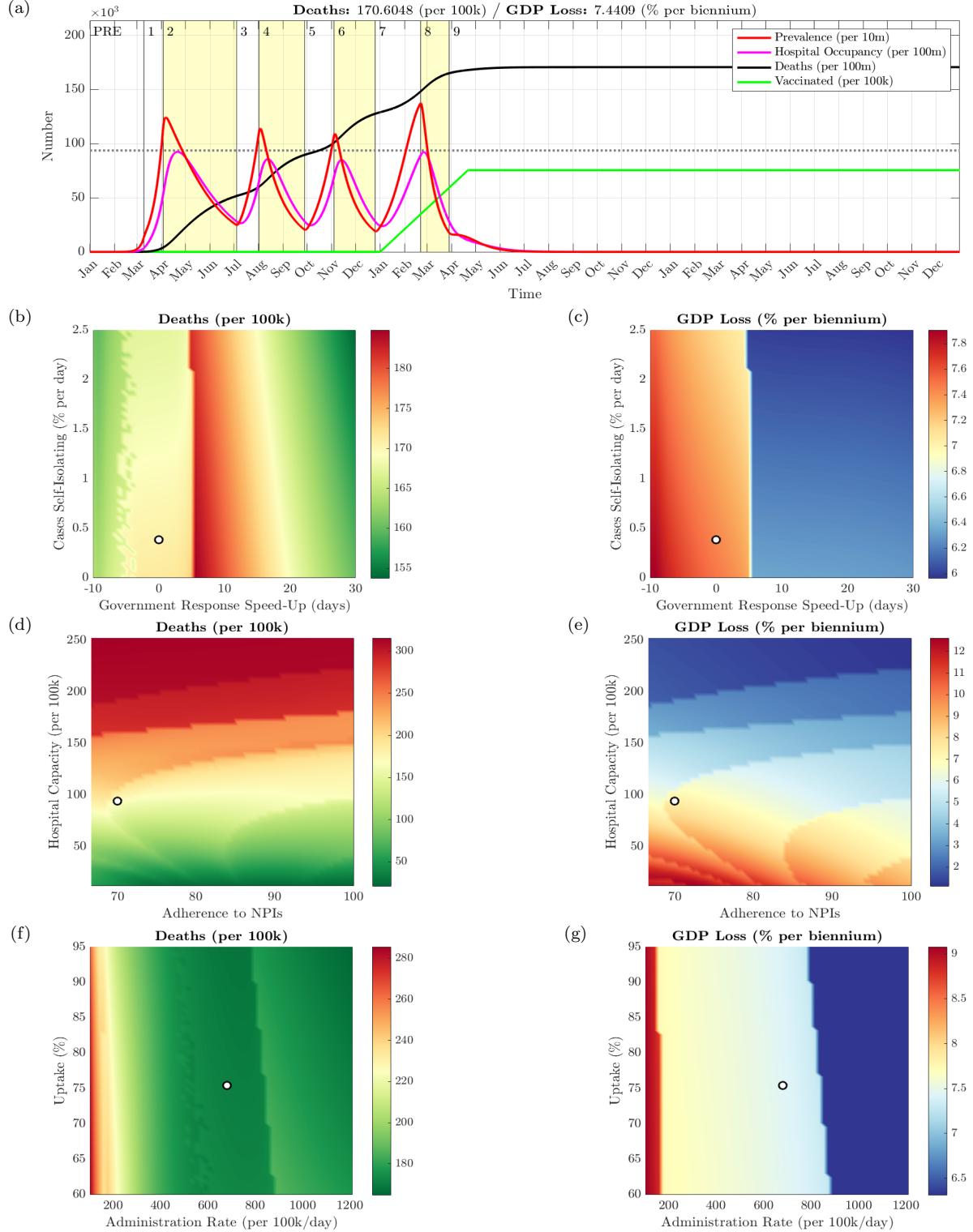


**Figure A39:** P2 in China; (a) the counterfactual epidemic trajectory; the effects of increasing/decreasing (b, c) the government response time & proportion of cases self-isolating, (d, e) adherence to NPIs during lockdown & hospital capacity, and (f, g) vaccine administration rate & uptake.

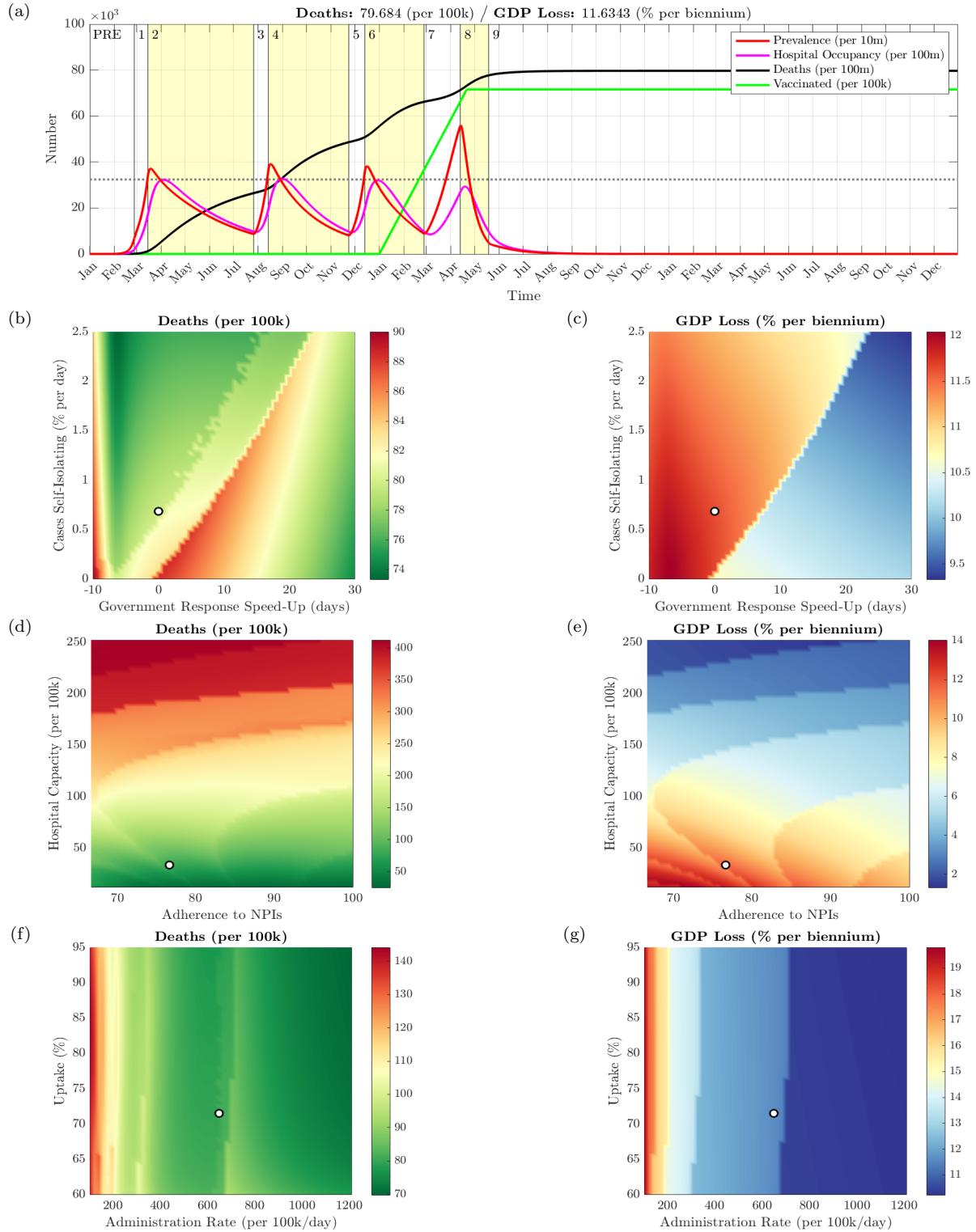


**Figure A40:** P2 in India; (a) the counterfactual epidemic trajectory; the effects of increasing/decreasing (b, c) the government response time & proportion of cases self-isolating, (d, e) adherence to NPIs during lockdown & hospital capacity, and (f, g) vaccine administration rate & uptake.

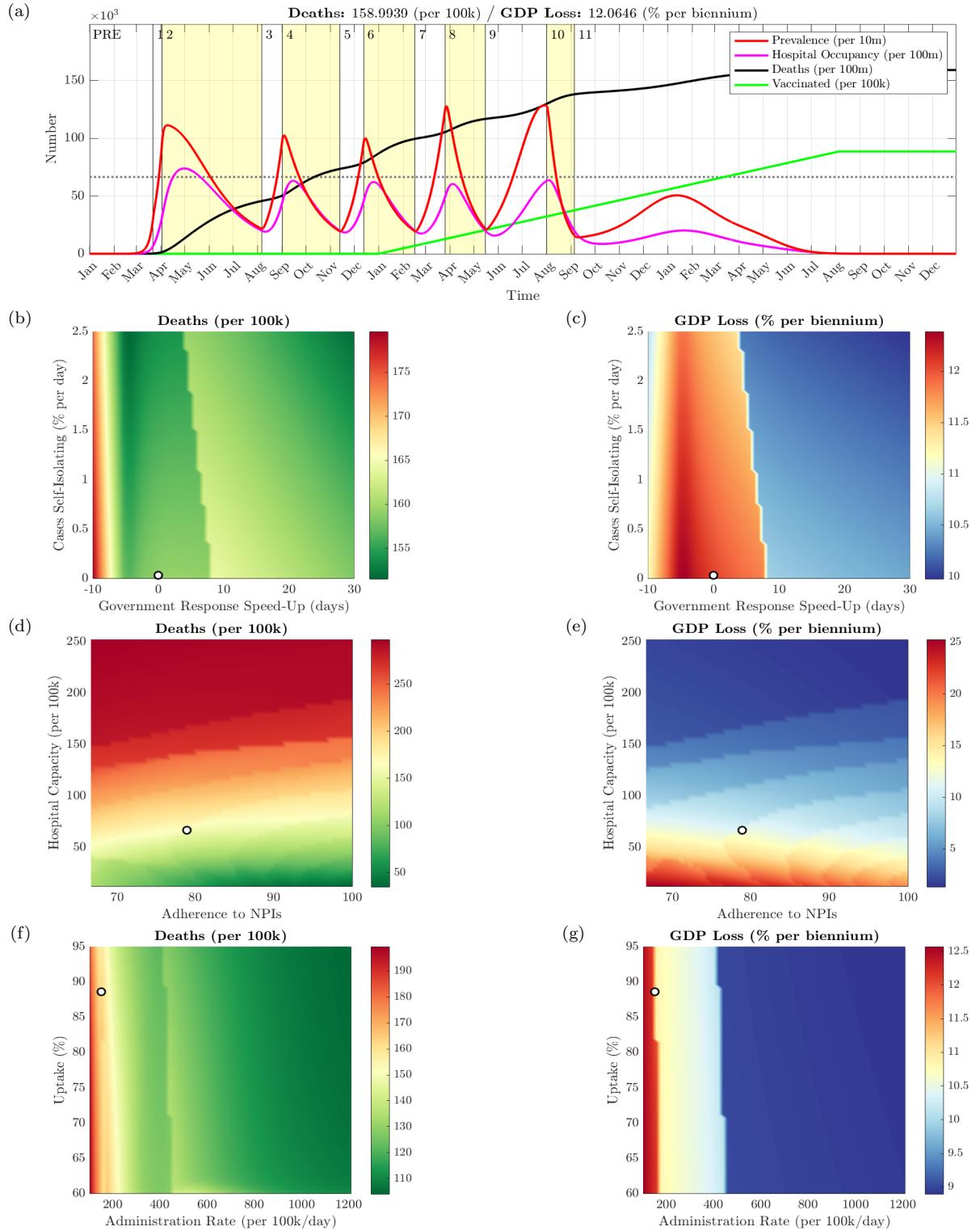
### 3.3 Covid



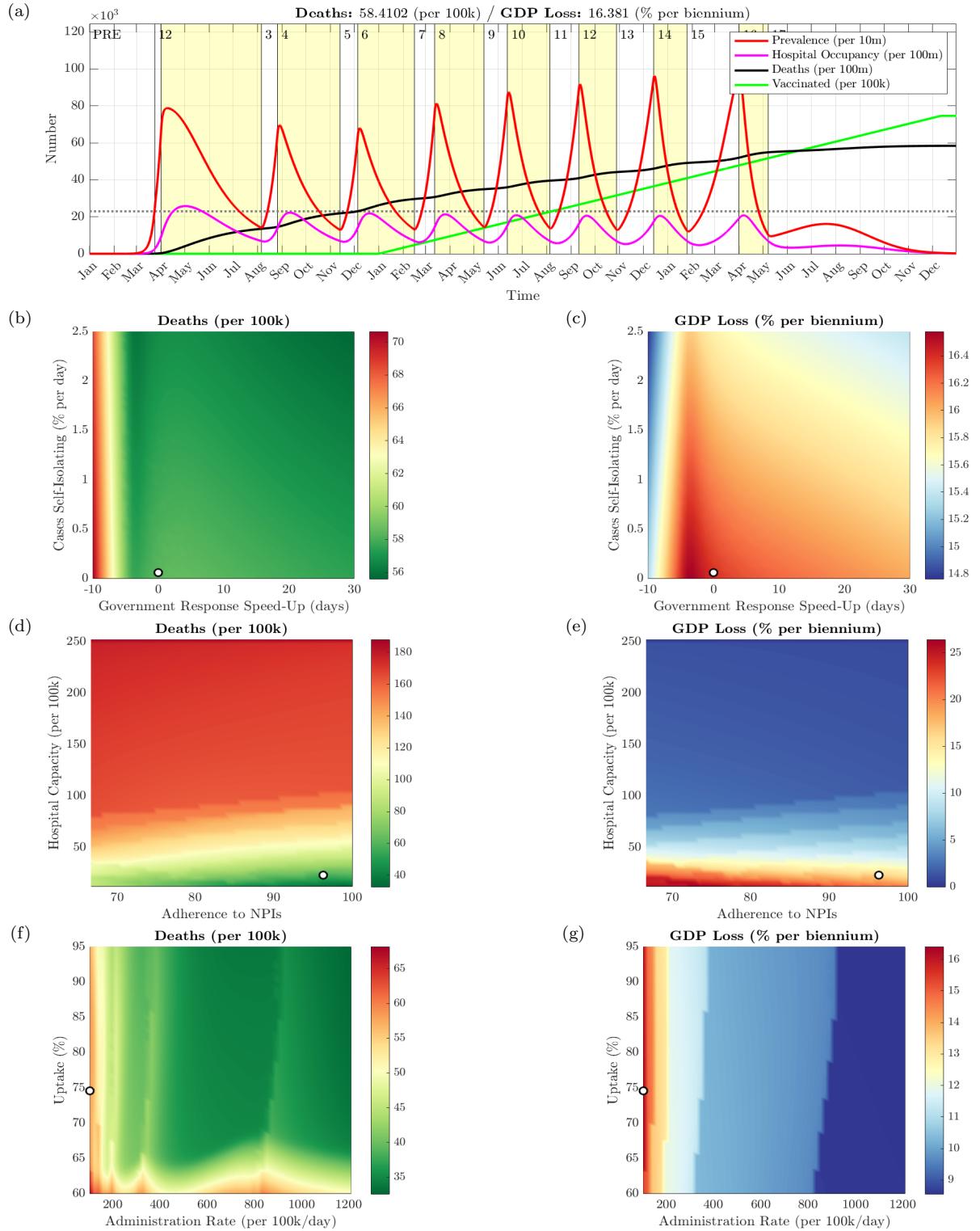
**Figure A41:** P2 in the USA; (a) the counterfactual epidemic trajectory; the effects of increasing/decreasing (b, c) the government response time & proportion of cases self-isolating, (d, e) adherence to NPIs during lockdown & hospital capacity, and (f, g) vaccine administration rate & uptake.



**Figure A42:** P2 in the UK; (a) the counterfactual epidemic trajectory; the effects of increasing/decreasing (b, c) the government response time & proportion of cases self-isolating, (d, e) adherence to NPIs during lockdown & hospital capacity, and (f, g) vaccine administration rate & uptake.

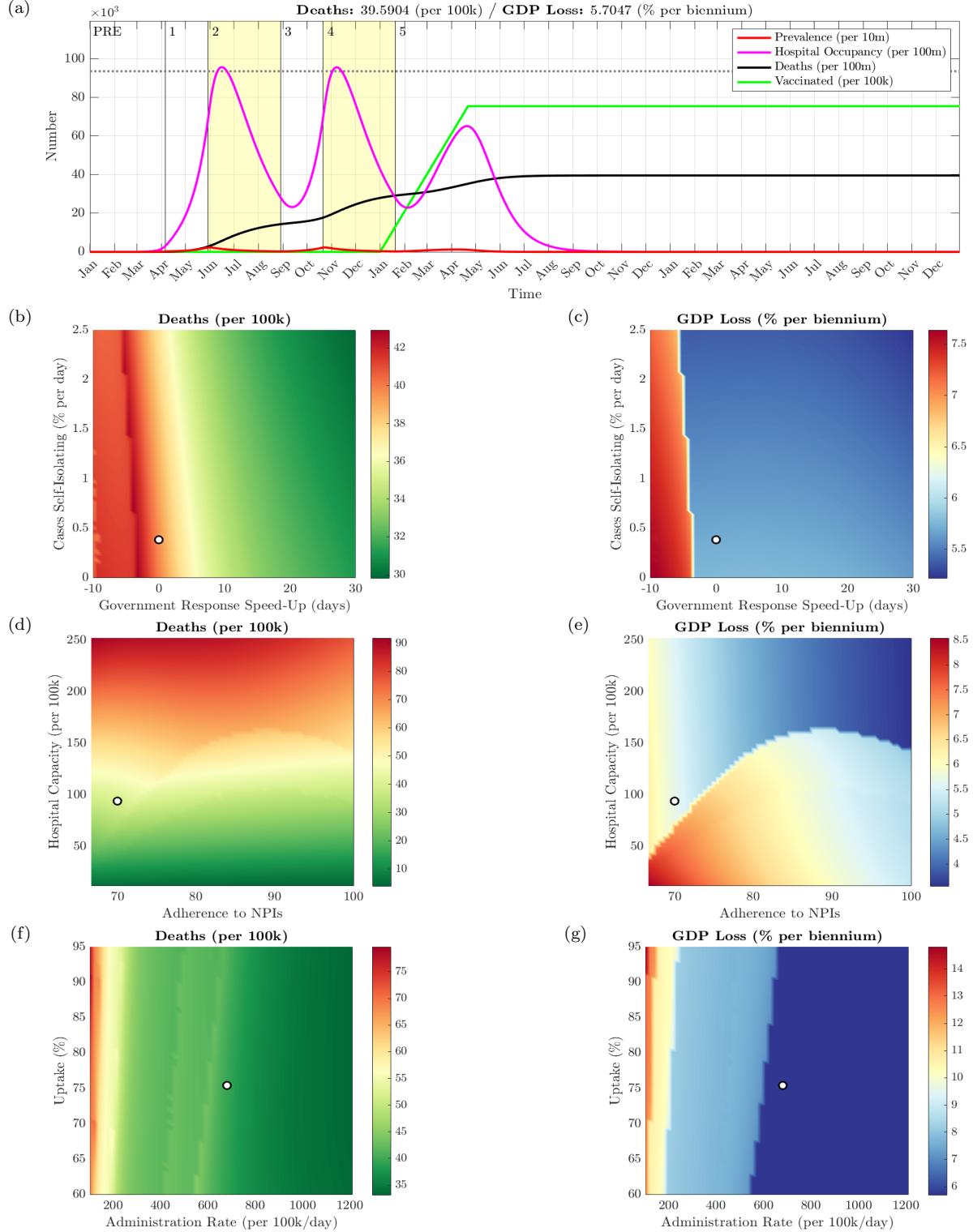


**Figure A43:** P2 in China; (a) the counterfactual epidemic trajectory; the effects of increasing/decreasing (b, c) the government response time & proportion of cases self-isolating, (d, e) adherence to NPIs during lockdown & hospital capacity, and (f, g) vaccine administration rate & uptake.

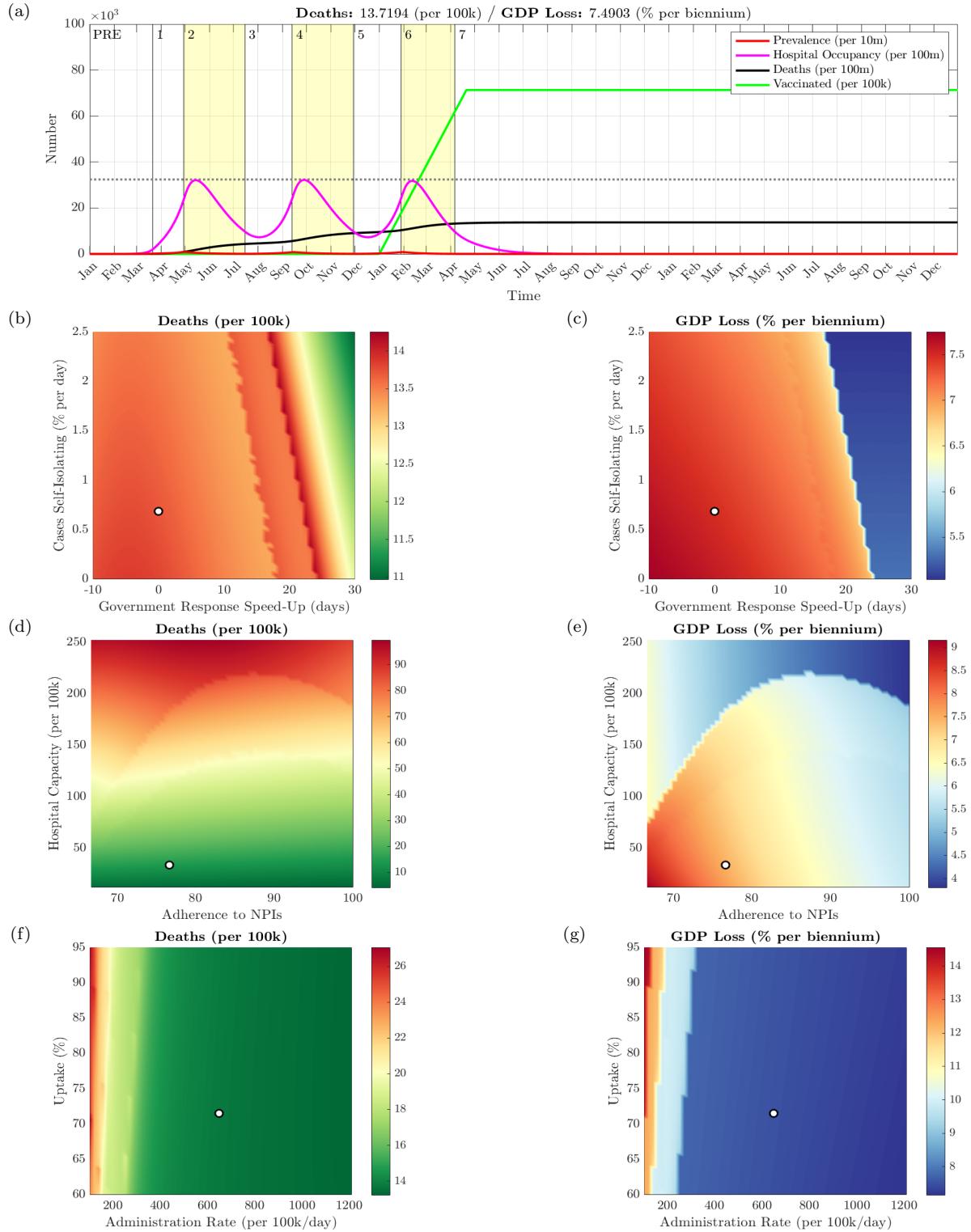


**Figure A44:** P2 in India; (a) the counterfactual epidemic trajectory; the effects of increasing/decreasing (b, c) the government response time & proportion of cases self-isolating, (d, e) adherence to NPIs during lockdown & hospital capacity, and (f, g) vaccine administration rate & uptake.

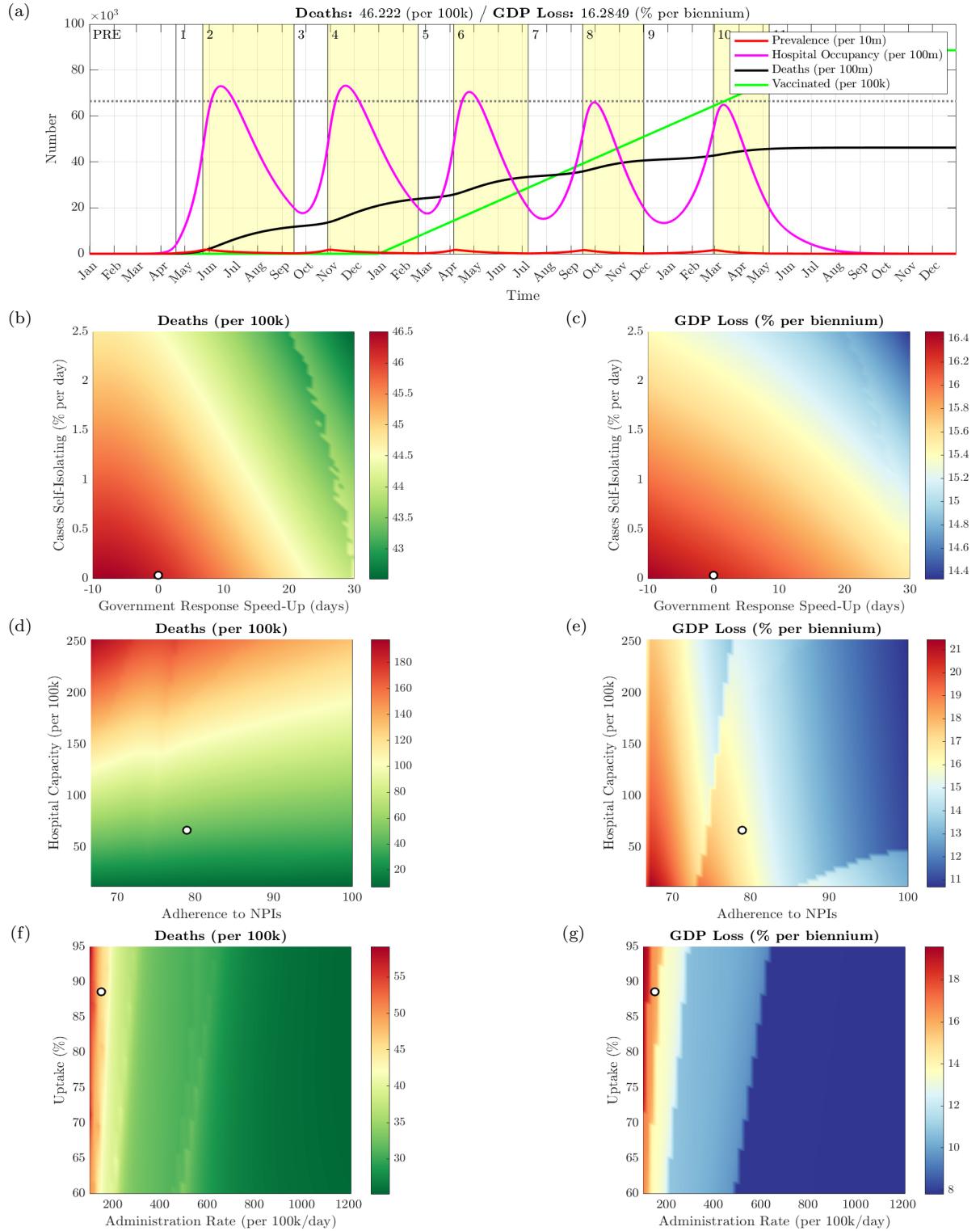
### 3.4 SARS



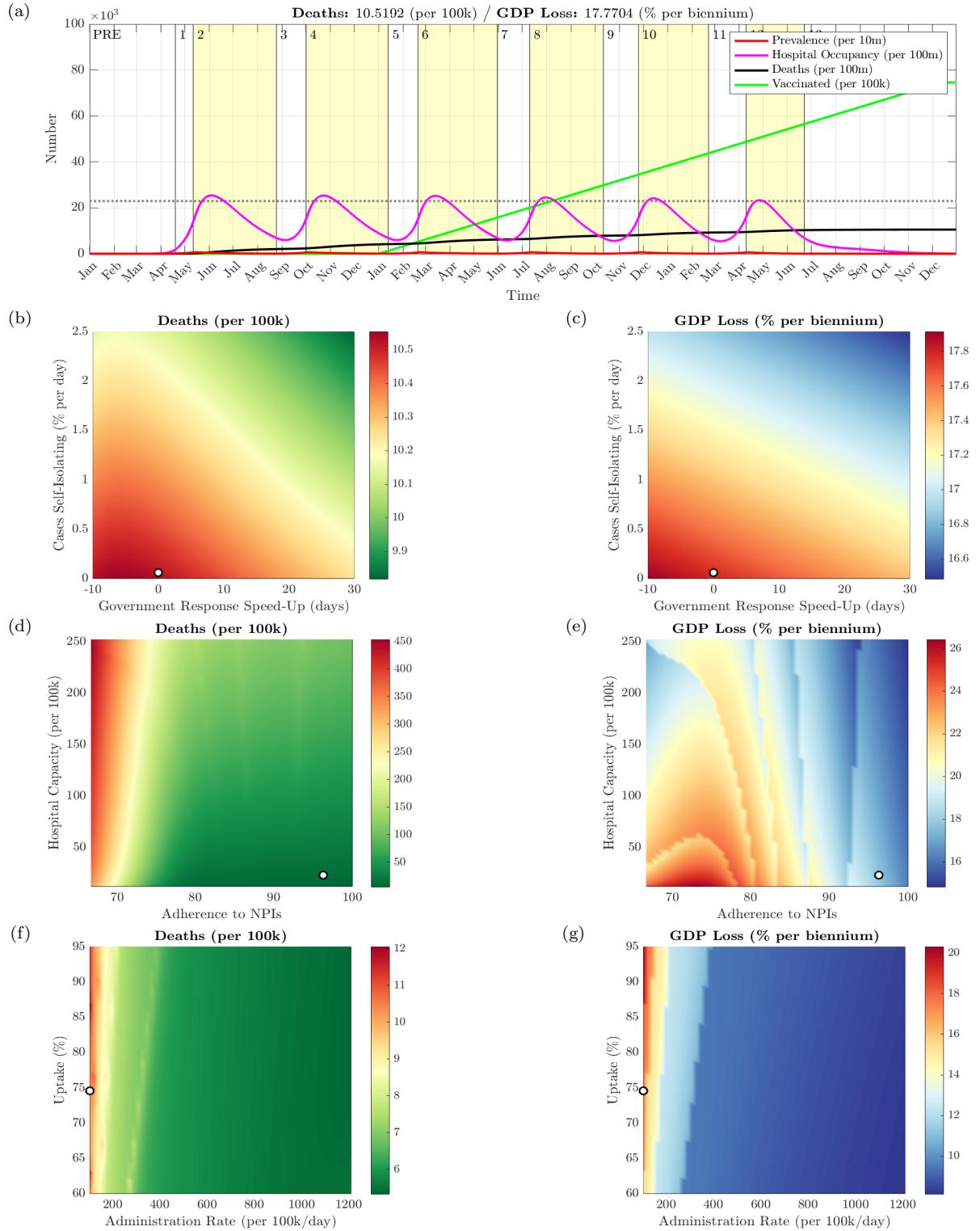
**Figure A45:** P2 in the USA; (a) the counterfactual epidemic trajectory; the effects of increasing/decreasing (b, c) the government response time & proportion of cases self-isolating, (d, e) adherence to NPIs during lockdown & hospital capacity, and (f, g) vaccine administration rate & uptake.



**Figure A46:** P2 in the UK; (a) the counterfactual epidemic trajectory; the effects of increasing/decreasing (b, c) the government response time & proportion of cases self-isolating, (d, e) adherence to NPIs during lockdown & hospital capacity, and (f, g) vaccine administration rate & uptake.



**Figure A47:** P2 in China; (a) the counterfactual epidemic trajectory; the effects of increasing/decreasing (b, c) the government response time & proportion of cases self-isolating, (d, e) adherence to NPIs during lockdown & hospital capacity, and (f, g) vaccine administration rate & uptake.



**Figure A48:** P2 in India; (a) the counterfactual epidemic trajectory; the effects of increasing/decreasing (b, c) the government response time & proportion of cases self-isolating, (d, e) adherence to NPIs during lockdown & hospital capacity, and (f, g) vaccine administration rate & uptake.