Social Activity Measure March 22nd

(Period Covered: Week Beginning March 22nd)

The Social Activity Measure (SAM) is a behavioural study that records the public response to the risk of Covid-19 infection and Covid-19 guidelines over time. Designed by the ESRI's Behavioural Research Unit (BRU), SAM is an anonymous, interactive, online study that surveys people about their recent activity. The study offers insight into where and how risks of Covid-19 transmission arise. SAM aims to inform policy regarding the opening of parts of the economy and society, while keeping Covid-19 under control. The research is funded by the Department of the Taoiseach.

Method

SAM is a "prompted recall" study that uses methods from behavioural science to help people to recall their activities. It asks about times when people left their homes, via factual, neutral questions. Questions cover locations people visited and visitors to their home during the previous week. Follow-up questions gather greater detail about the previous two days: how many people participants met, for how long, ease of keeping a 2m distance, use of hand sanitiser and face masks, and so on. The study concludes with questions about the pandemic more generally.

This report presents data from the fifth round of data collection, carried out in the week beginning March 22nd; the first was collected in the week beginning January 25th. Data are collected from a nationally representative sample of 1,000 adults every two weeks. Recruitment is from existing online survey panels to match the socio-demographic profile of the population. A discussion of the accuracy of this method can be found in previous ESRI-BRU publications.[1] The survey is completely anonymous.

Main Findings

Where differences are highlighted, they are statistically significant unless otherwise stated. Further detail is provided in accompanying slides, which are referenced here for ease of use. Data were collected prior to the Taoiseach's announcement about changes to restrictions in April but during a period of speculation about those changes.

1. Mobility remains relatively stable, but there has been an increase in visits to workplaces.

Visits to the 8 most popular location types remained relatively stable compared with early March (Slide 3). The rise in the proportion of people visiting cafés and restaurants that was seen in early March has levelled off. A decrease was seen in visits to outdoor locations compared with late February (78% compared with 86%). In particular, there has been a decrease in the proportion of people visiting their local area or going for a walk (Slide 5). It is possible that weather may have played a part in this decline but further analysis would be needed to establish a link.[2]

There was a small but significant increase in workplace attendance in March compared with February - 33% of all respondents had visited their workplace the previous week, up from 30% (Slide 6). This appears to be driven mostly by a small increase in non-essential workers going to their

[1] See Timmons et al. (2020), Public understanding and perceptions of the COVID-19 Test-and-Trace system, ESRI Survey and Statistical Report Series 96 (www.esri.ie/system/files/publications/SUSTAT96.pdf), pp.3-4.

[2] Any analysis would need to consider regional patterns as well as different aspects of weather conditions, and weight these appropriately across the reference period.

workplace. The majority of people who visited their workplace in the previous 2 days report that they cannot work from home (across all rounds of SAM), but almost 1 in 5 reported that they can work from home but prefer to go to work (13%) or feel pressured to (5%) (Slide 6). The data suggest that there may be tens of thousands of non-essential workers visiting their workplace in a given week when they could work from home.

2. The number of people met from other households continues to increase, and almost 1 in 5 people have a close contact interaction on any given day.

The average number of people met from outside the household in the previous 48 hours continues to increase steadily. People met significantly more people from outside their household in late March compared with late February (Slide 7). The increase appears to be driven by a minority – 12% of people met more than 7 others in the past 48 hours in late March, compared to 8% in late February. Approximately 20% of people are accounting for over three quarters of all interactions. Almost half of people (47%) met no one outside their household in the previous 2 days (Slide 7).

Almost 1 in 5 people (18%) are likely to have had at least one close contact interaction the previous day (Slide 8). This proportion remains unchanged since early March, but is significantly higher than it was in early February (14% using the same criteria for a close contact interaction; Slide 8). Household visits and the workplace account for most close contact interactions. Masks were worn during the majority of close contact situations in work settings (56% over all rounds of SAM), but this was not true of other settings – masks were worn in only 6% of close contact situations in the home, and 9% of those in outdoor locations.

3. Fewer precautions are being taken during household visits

Despite a general decline in overall household visits, visits for social reasons have remained stable. 1 in 10 people report hosting visitors or visiting another household the previous day (Slide 9). Risk factors associated with transmission of Covid-19 during these visits are becoming more prevalent. Over 80% of social visits involve time spent indoors, up from 68% in early February. While indoors, most people report not wearing masks nor ensuring the room is well ventilated. Those who report not maintaining social distance has increased from 36% in early February to 67%. A majority of social visits last longer than one hour and typically involve 2 to 3 people from another household (Slide 9). These increased risks mean that the proportion of people having close contact interactions during social visits in households has doubled since early February, from 3.1% of the population to 6.7% in late March (Slide 9). The minority engaging in these social visits is spread across socio-demographic groups, although younger respondents (aged under 40) now report riskier social visits than older respondents (Slide 10).

4. Psychological factors associated with compliance have declined

People who are more worried and people who judge preventing the spread of Covid-19 to be more important than the burden of restrictions meet fewer people from other households and are less likely to have a close contact (Slides 11 & 12). Although a large majority remain worried and favour preventing the spread of the virus, both variables continue to decline since January (Slides 13 & 14). Self-reported compliance with Government recommendations has declined further, to 6.1 (out of 7, from 6.4 in early February), and perceived compliance of others has declined to 4.3 from 4.6 in early February (Slide 15). Those who believed others were following guidelines less were themselves more likely to have had a close contact encounter the day before completing the survey (Slide 16). Attention to news coverage increased slightly in late March (Slide 13).

5. Willingness to receive the vaccine remains high

The proportion of the population yet to be vaccinated who stated that they will get the vaccination if offered remains stable at 79.2% (Slide 17). When asked about how restrictions should be managed once vulnerable groups are vaccinated, a majority (74.2%) across the last two iterations of the survey judged that restrictions should stay dependent on case numbers rather than be lifted completely (25.8%; Slide 17).

Other findings

People report finding restrictions more tiresome in March than February but there has been no further decline in self-reported wellbeing (Slide 18).

Although a majority (53.7%) expected some easing of restrictions in early April, more than a third expected no change (Slide 19). Over 60% of people believe it will be 9 months or longer before restrictions are lifted for good (Slide 20).

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