



Rialtas na hÉireann
Government of Ireland

Social Activity Measure

April 20-27th

ABOUT THE RESEARCH

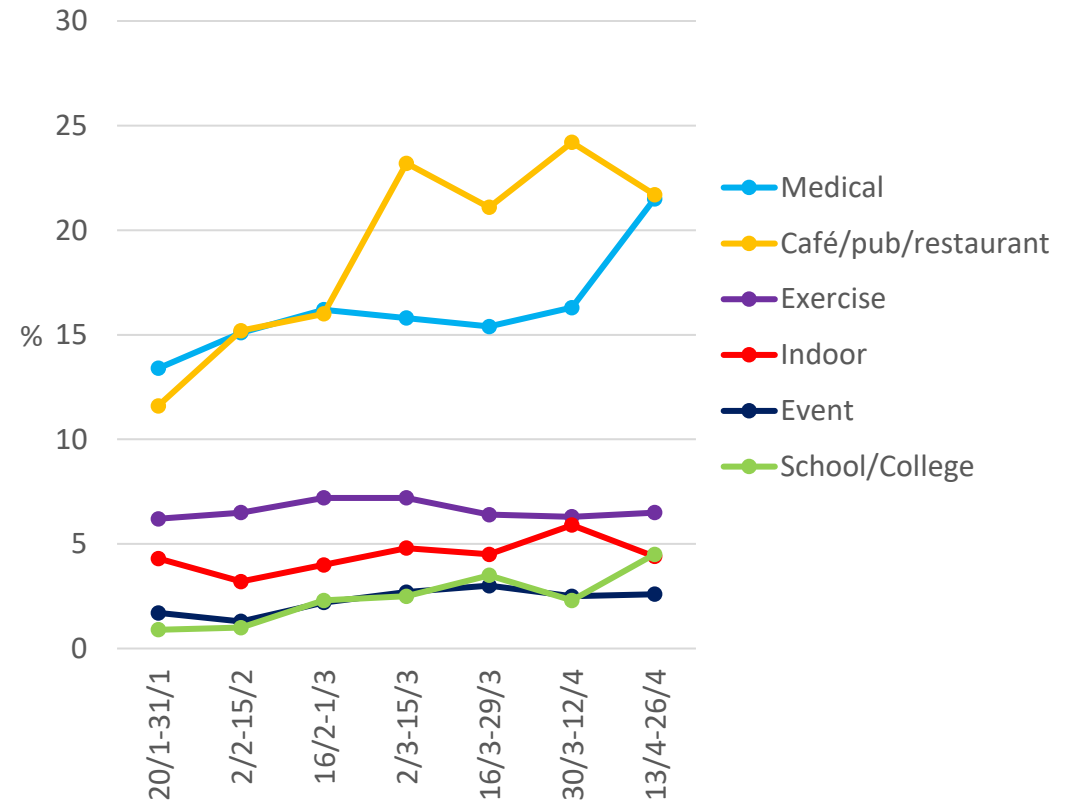
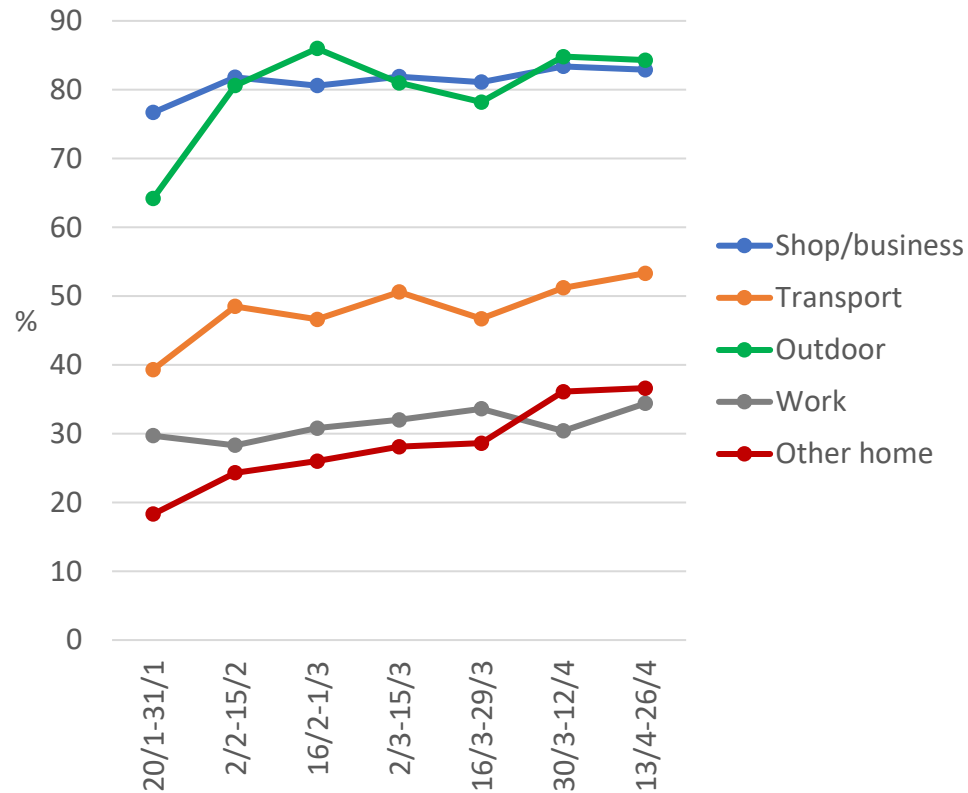
The Social Activity Measure (SAM) is a behavioural study that records the public response to the risk of COVID-19 infection over time. Designed by the ESRI's Behavioural Research Unit (BRU), SAM is an anonymous, interactive, online study that surveys people about their recent activity. The study offers 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 was designed by the BRU in consultation with the Department of the Taoiseach, which funds the work. The survey is completely anonymous. Where comparisons between survey rounds are highlighted, they are statistically significant.

TIMING

This slide deck presents results from a nationally representative sample of 1,000 people aged 18 and over who participated in the study between 20th and 27th April. Data were collected during a period when restrictions on activity were gradually being eased. The initial announcement that restrictions would be lifted was made on 30th March. The restriction to travel only within 5km of the home was lifted on 12th April. Elite sports and GAA training had returned on 19th April. Outdoor attractions and a range of outdoor activities and training were permitted from 26th April.



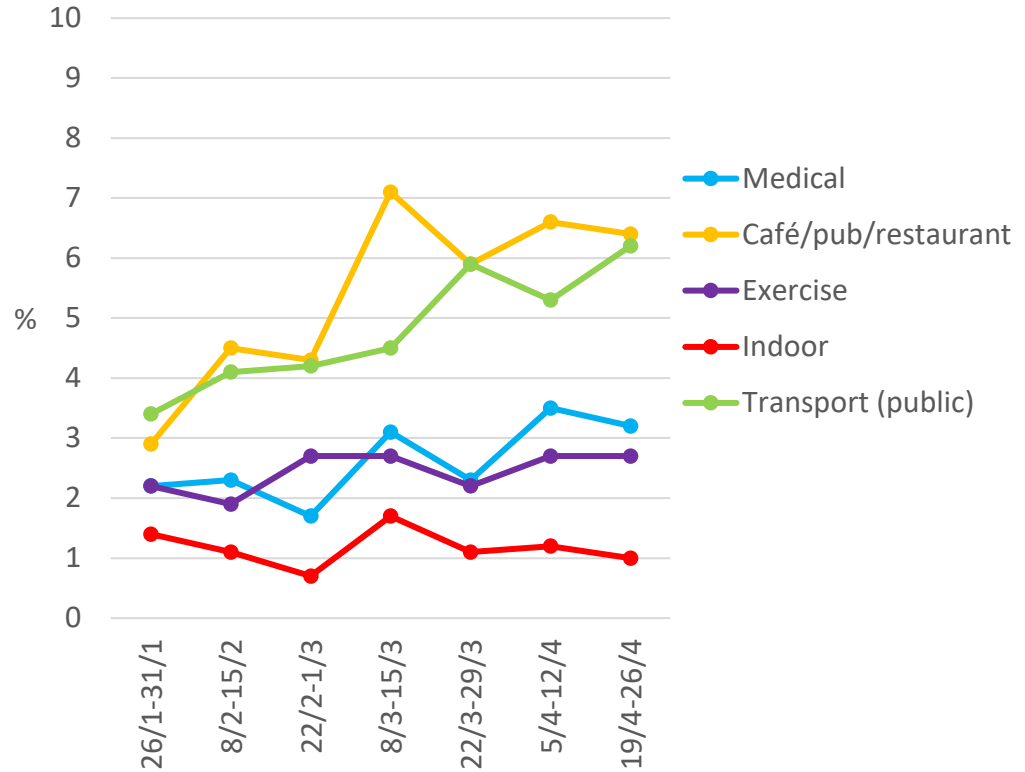
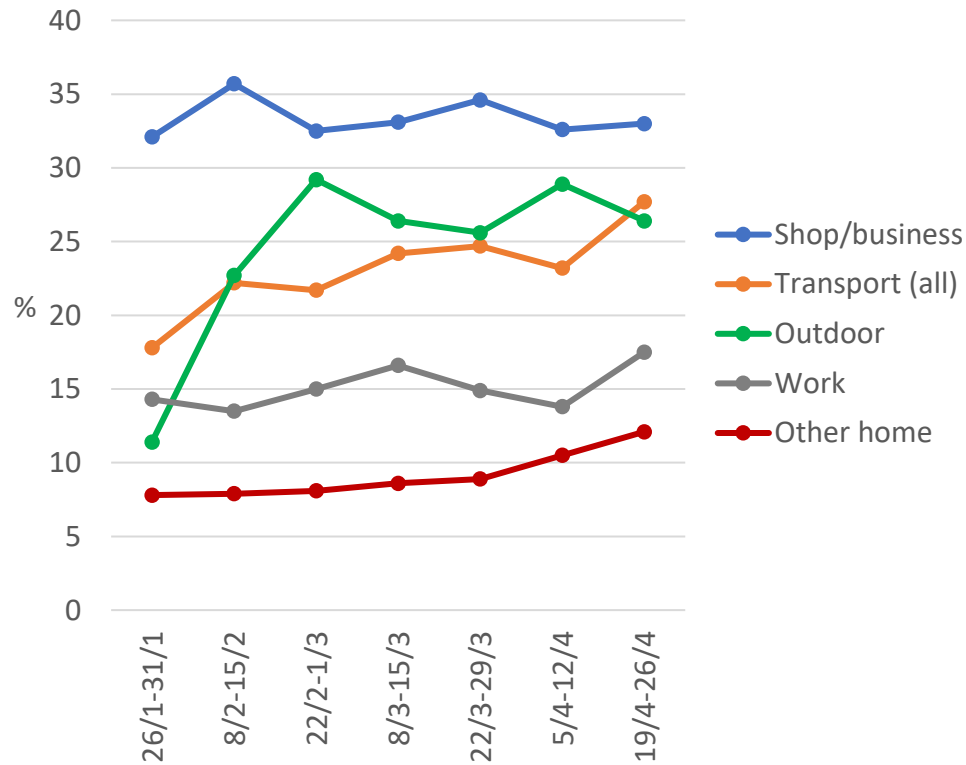
Locations visited (previous week)



The charts show the proportion of the population who had visited each location at some point during the previous week. Note the different scales on the vertical axis. The largest increases were for attending a workplace, visiting a medical facility, using transport, and going to school/college.



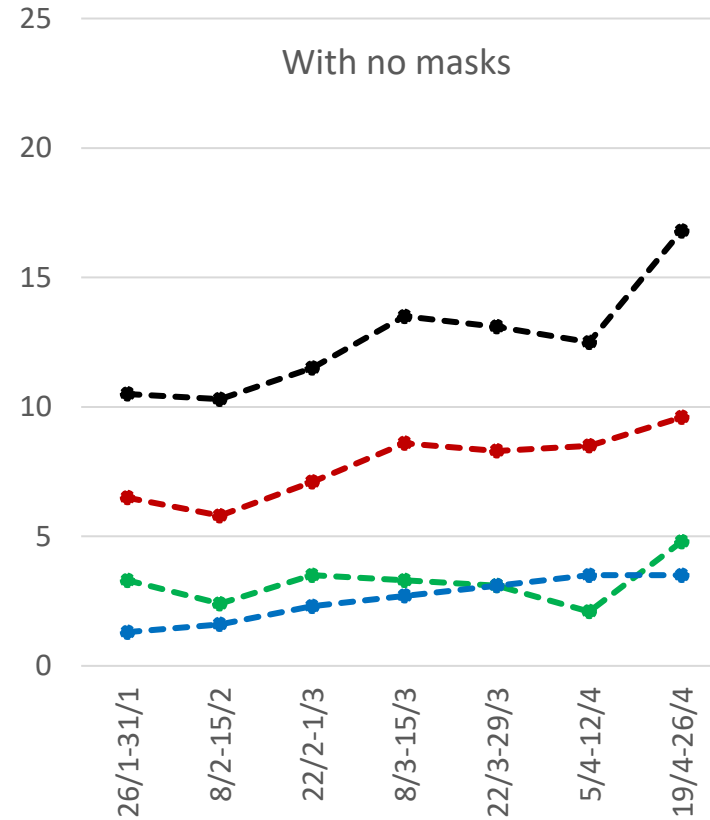
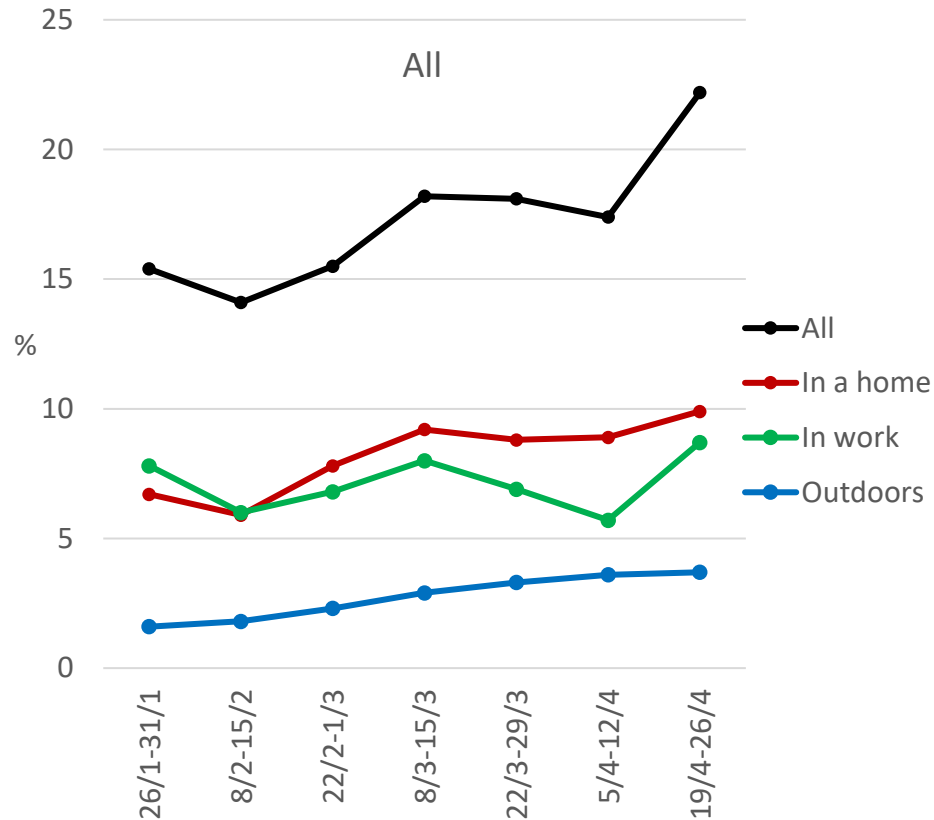
Locations visited (yesterday)



The charts show the proportion of the population who had visited each location at some point the previous day. Note the different scales on the vertical axis. The largest increases were for taking transport, attending a workplace and visiting other homes.



Close contacts* (previous day)

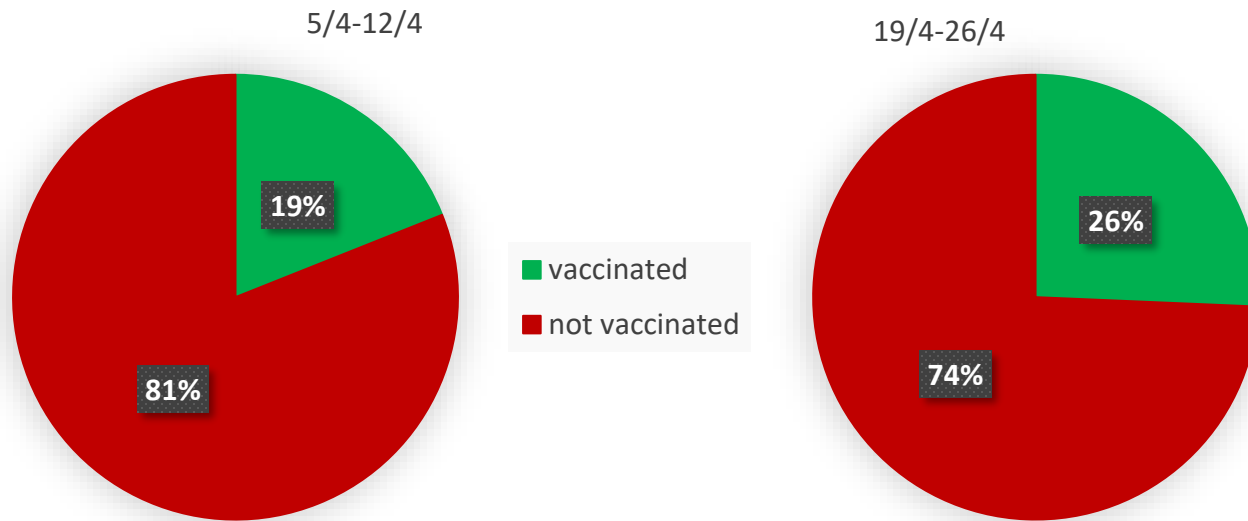


There was a sharp rise in close contacts, driven mostly by more close contacts in workplaces, but also by close contacts in homes. The increases also applied to close contacts in which people were not wearing facemasks.

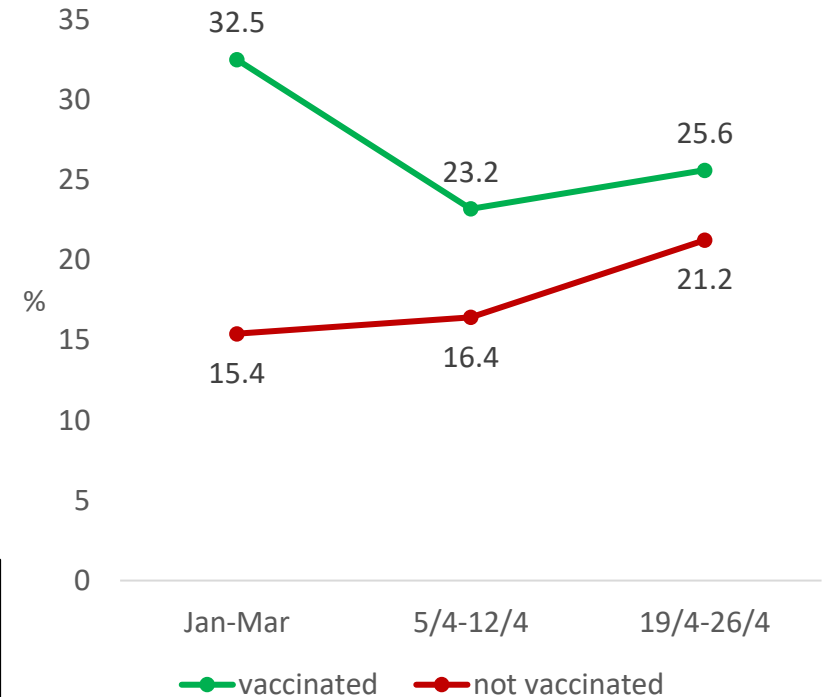
*Close contact interactions are defined as those that are likely to have lasted for longer than 15 minutes without a 2m distance being maintained at all times or that took place indoors for longer than 2 hours in a space that was not well ventilated (hse.ie).



Close contacts - vaccination



Close contact (previous day) by vaccination status

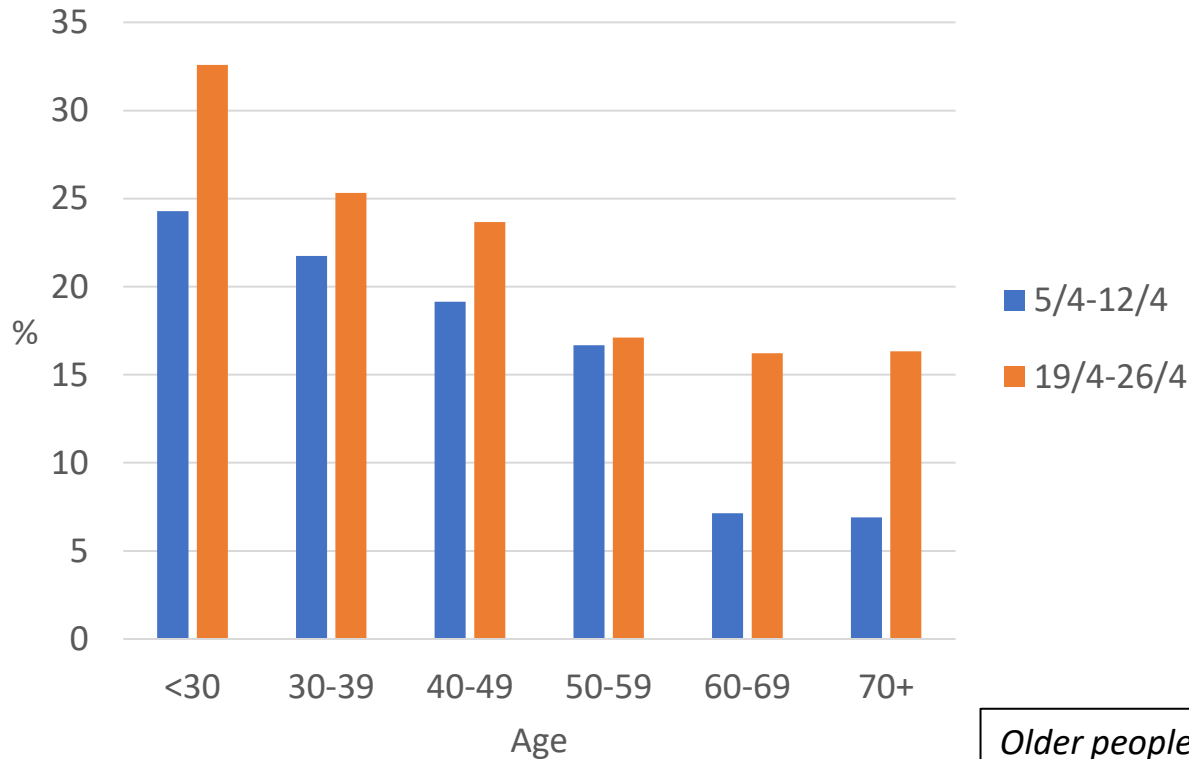


The share of close contacts reported by individuals who have had at least one dose of vaccine increased to more than one quarter. The chart on the right shows an initially higher rate of close contacts among vaccinated people, because many of the earliest people to be vaccinated were frontline workers. The increase during April is instead the result of social activity among older people who have now been vaccinated. However, the chart also reveals a substantial increase in close contacts among those not vaccinated.

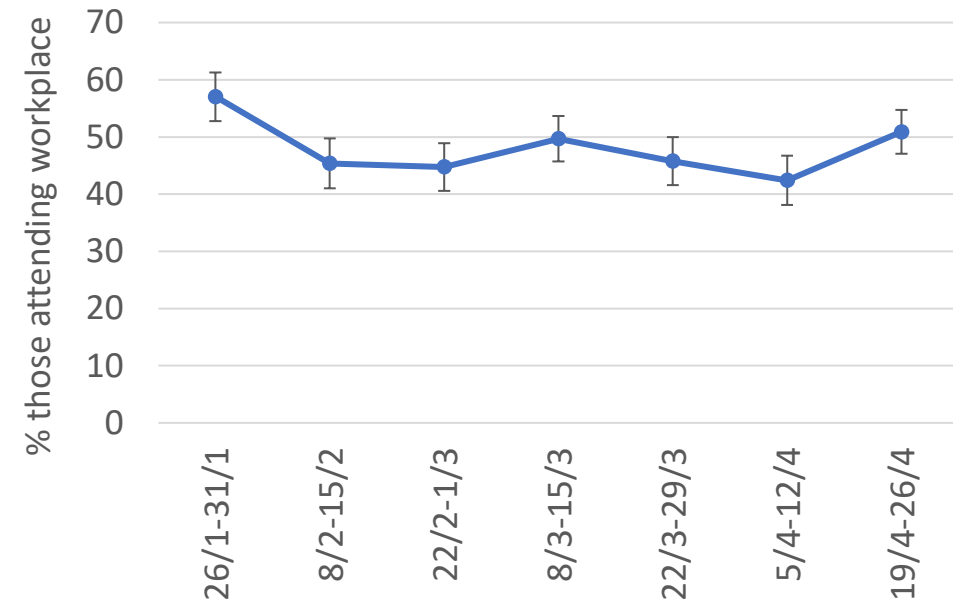


Close contacts – other factors

Increased close contact by age



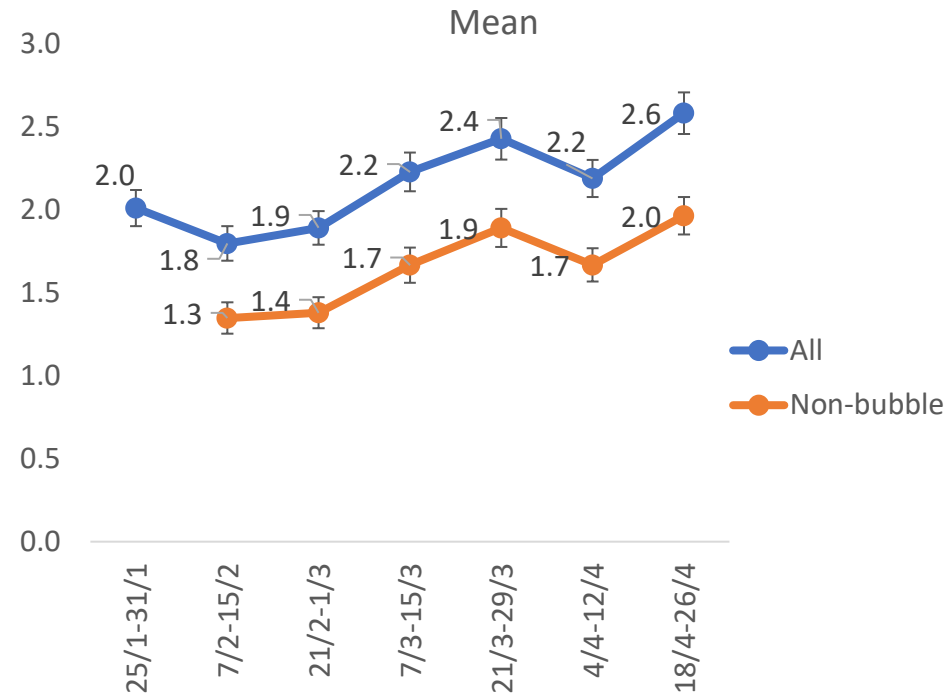
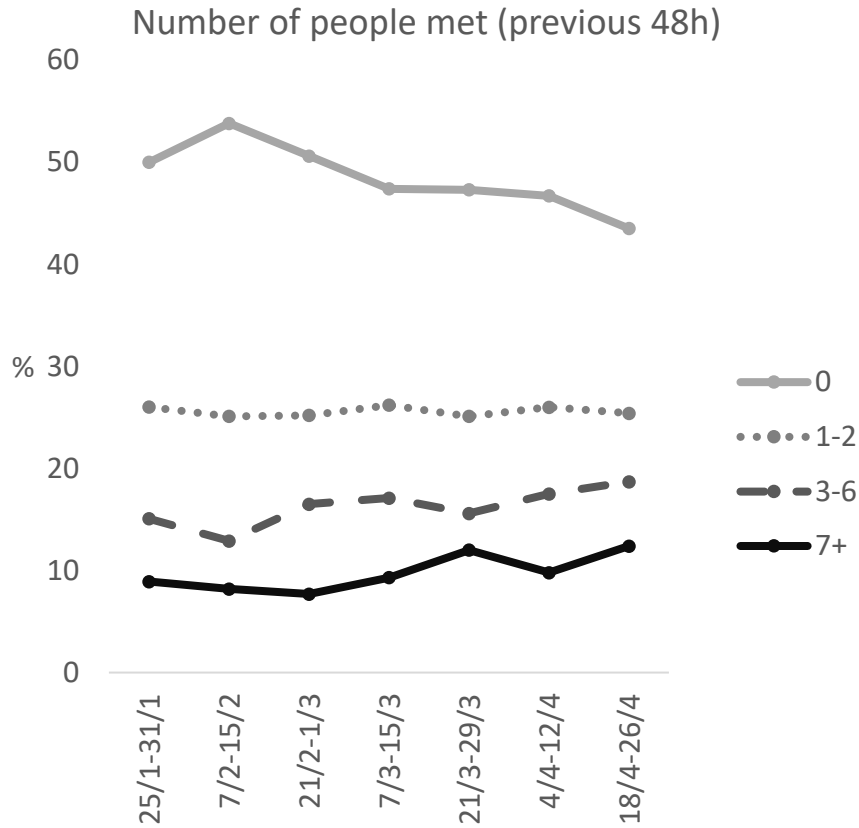
Proportion going to workplace who had close contact at work (previous day)



Older people had the largest increase in close contacts during April, mostly due to social visits to homes. Among younger people, greater numbers going to work was a larger factor. However, the chance that workers who attend work on a given day experience a close contact has remained relatively stable at around or just below 50% – it is simply that more people are going to work.



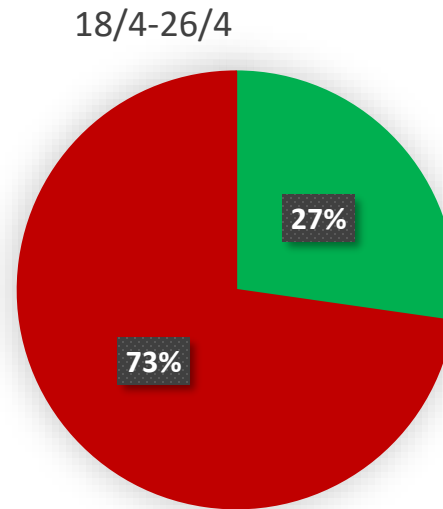
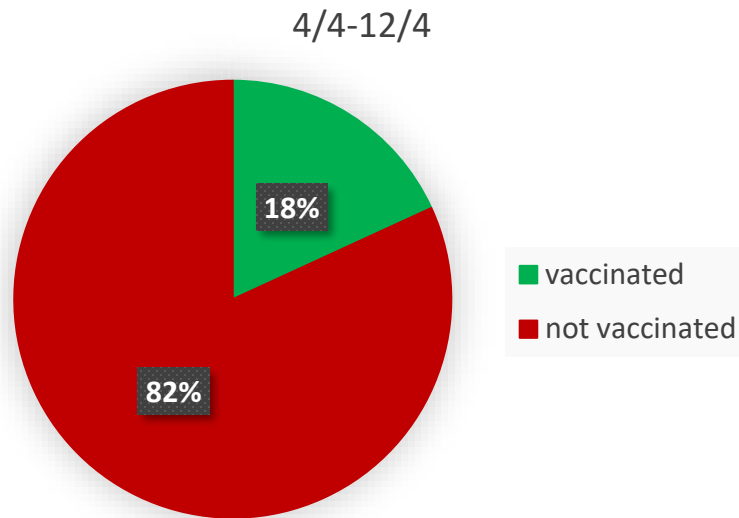
Meeting people outside the household



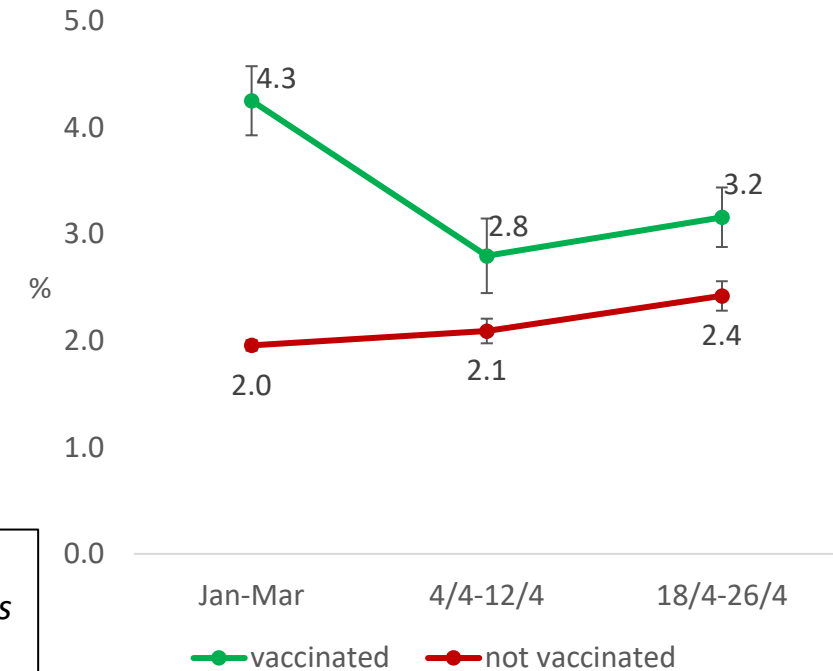
The proportion of the population who met no-one from outside their household during the previous 48 hours fell to 44%. The average number of people from other households that an individual met up with increased to the highest level recorded by SAM to date.



Meeting people - vaccination

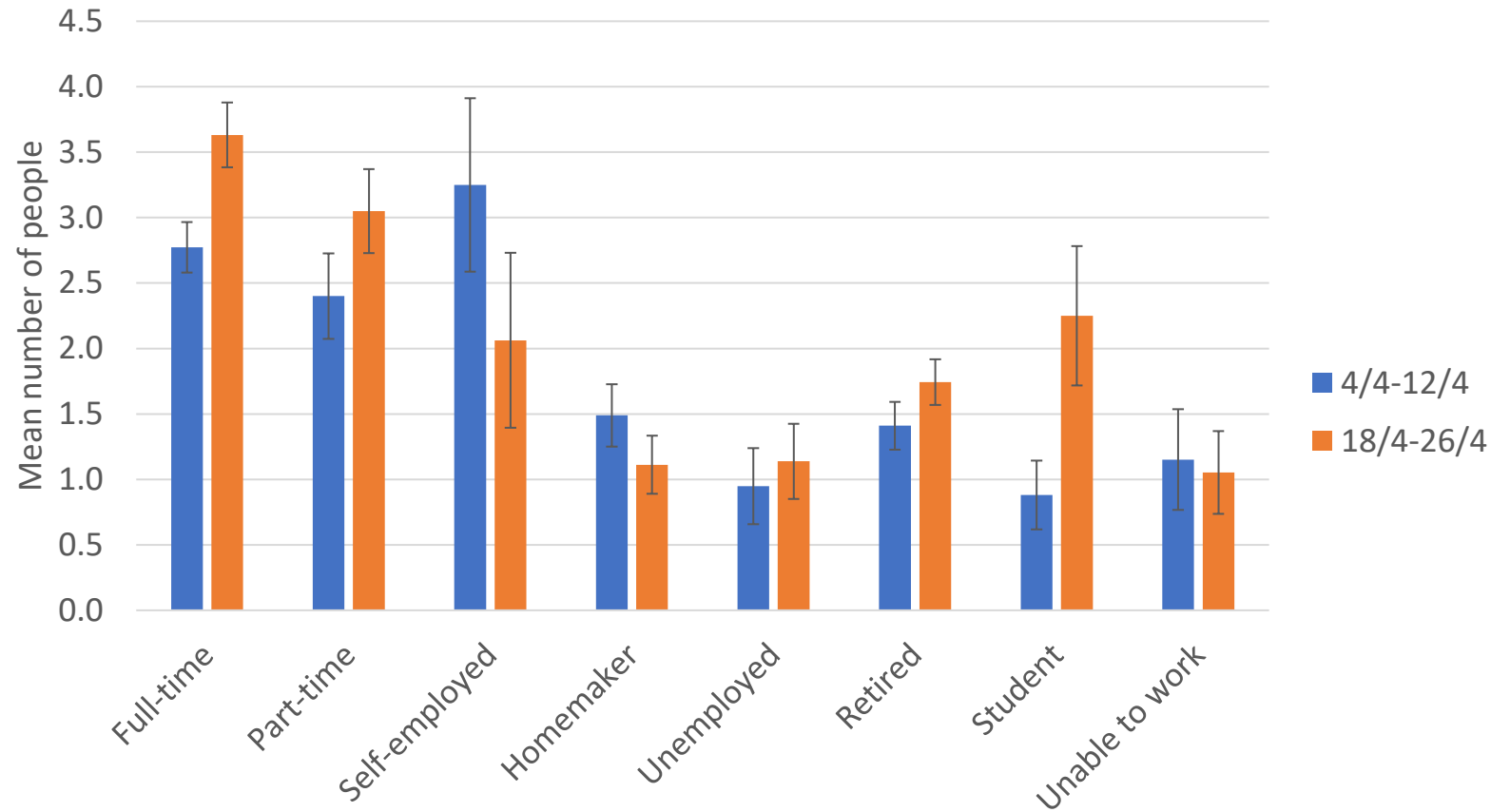


Mean number from outside the household met (previous 48h) by vaccination



The share of meetings with people from outside the household reported by individuals who have had at least one dose of vaccine increased to more than one quarter. The chart on the right shows an initially higher rate of meeting up among vaccinated people, because many of the earliest people to be vaccinated were frontline workers. The increase during April is instead the result of social activity among older people who have now been vaccinated. However, the chart also reveals a continuing increase in meetings among those not vaccinated.

Meeting people from outside the household (previous 48h) by working status

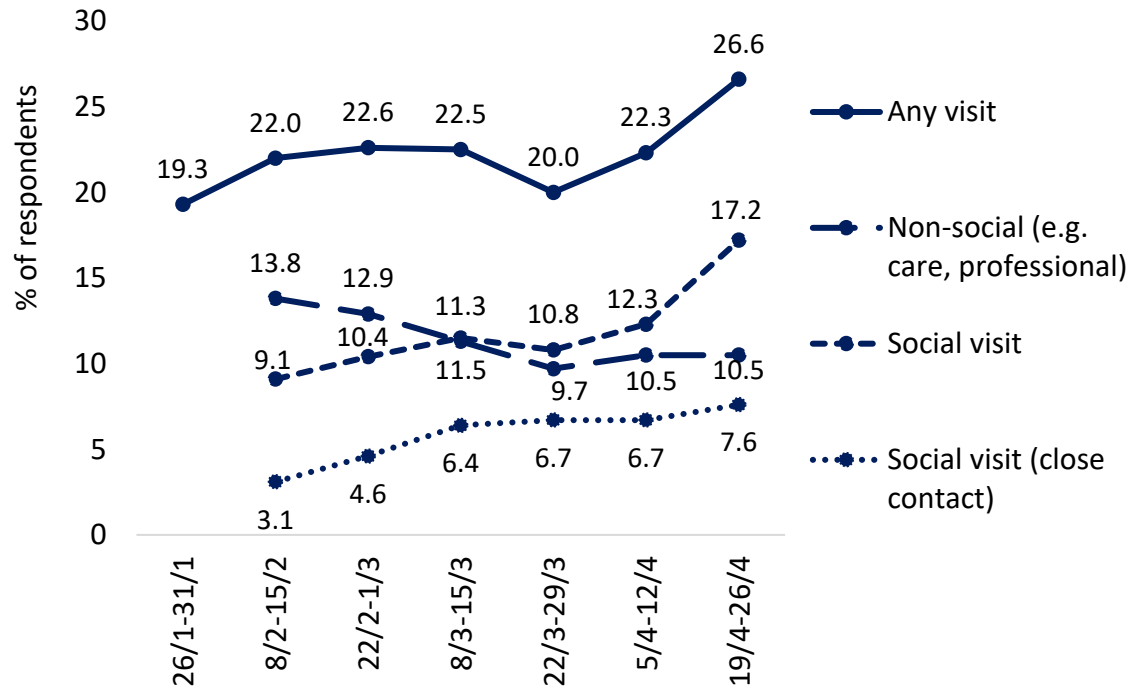


The increase in meeting people from other households was concentrated among working people and students. The previous period included the week immediately after Easter, following which more people returned to work and school/college.

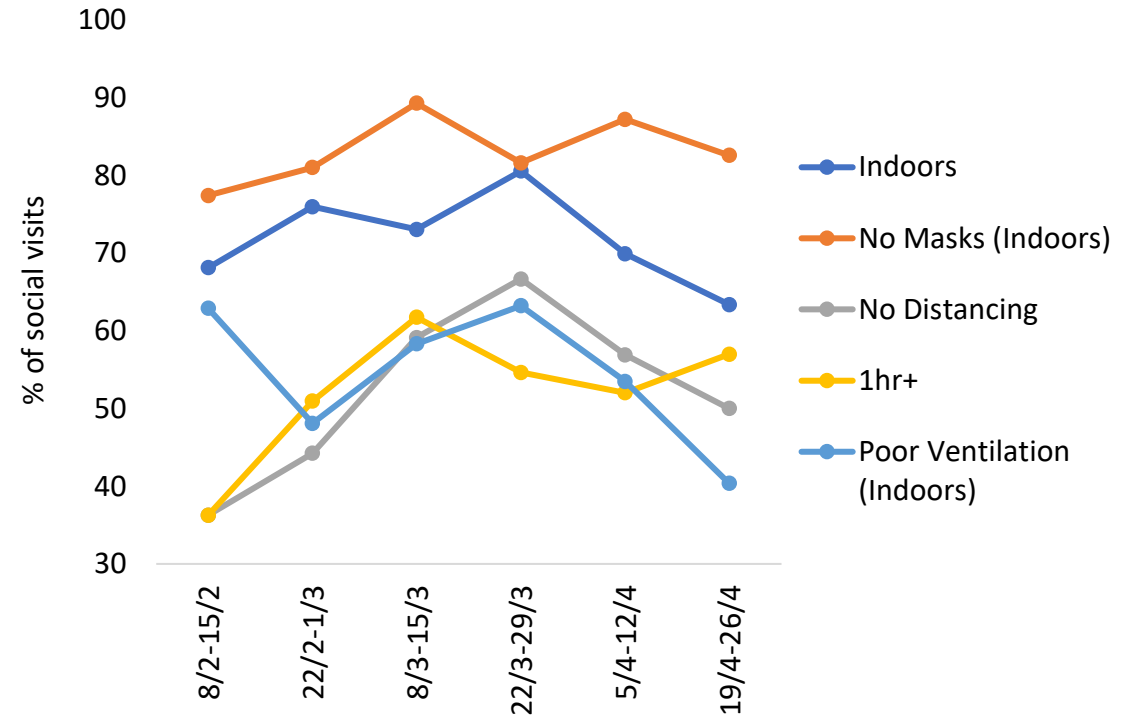
Visits to homes



Proportion who had visitors or visited another household (previous day)

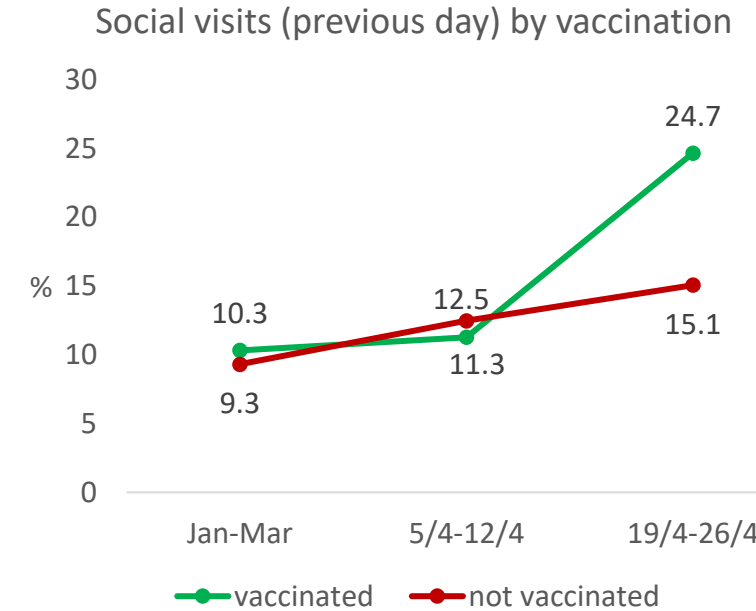
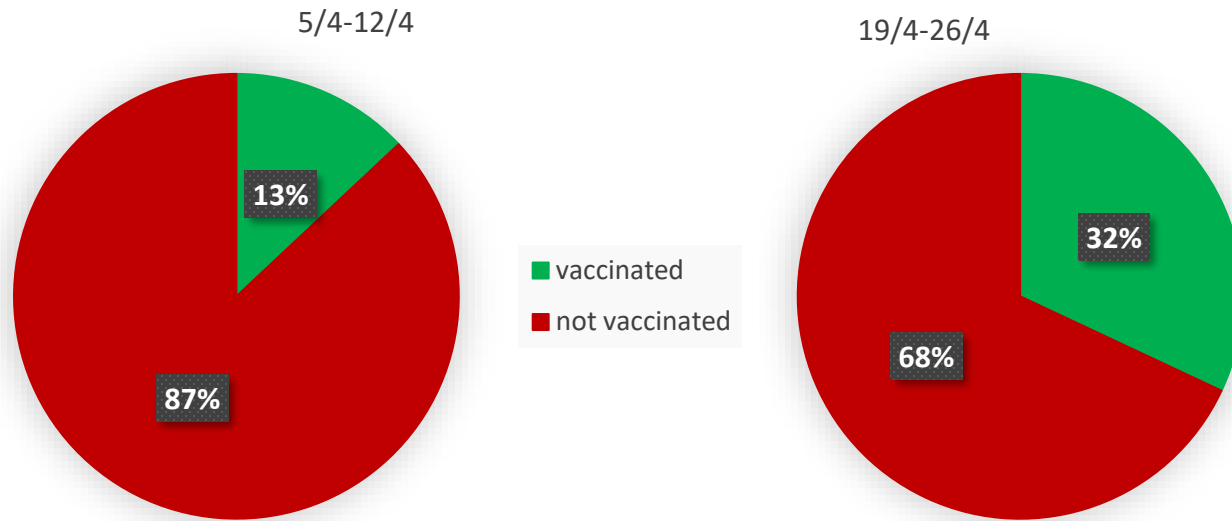


Risk factors during social visits



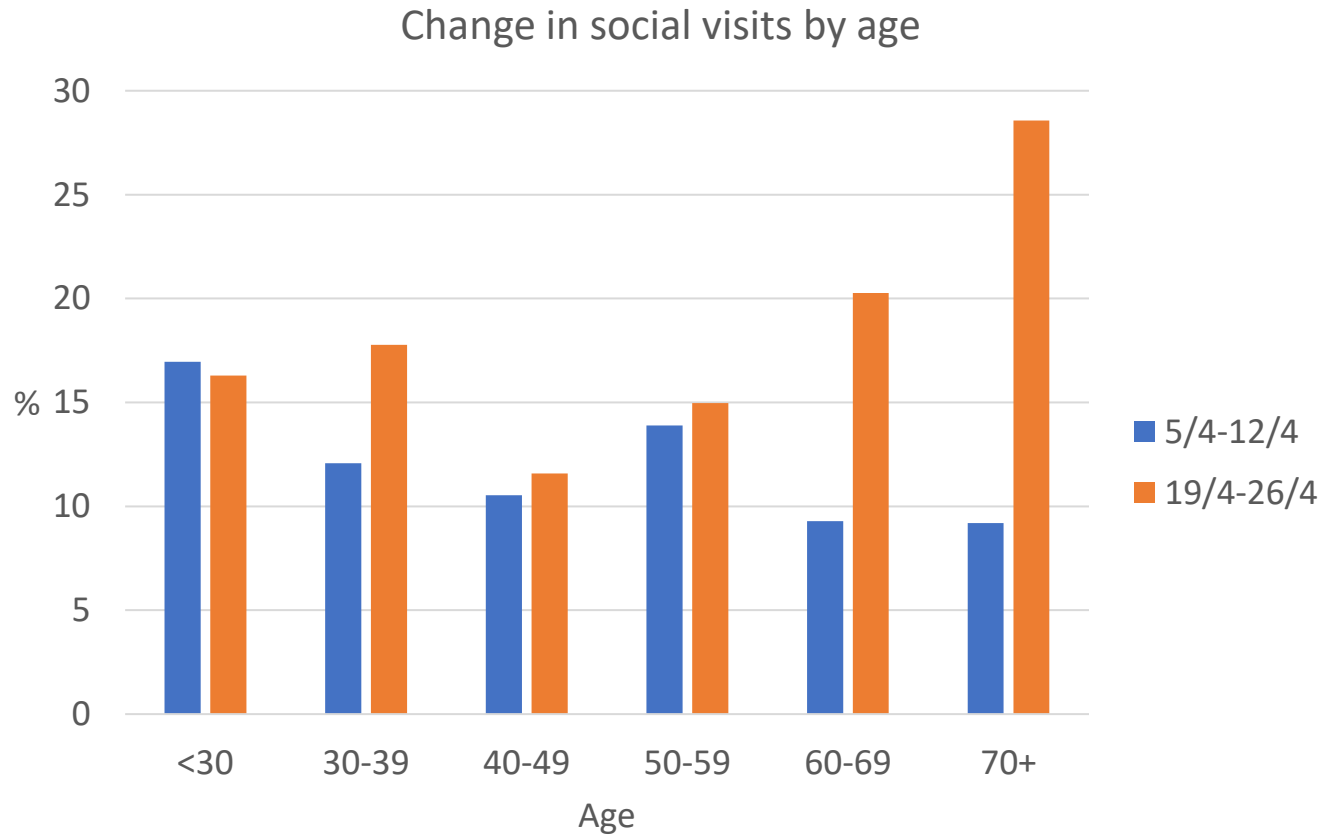
There was a sharp rise in visits to homes, entirely accounted for by social visits. However, higher proportions of the visits were undertaken outdoors, wearing masks, with distancing, for shorter durations, or with better ventilation.

Social visits - vaccination



The share of social visits reported by individuals who have had at least one dose of vaccine increased to almost one third. People who are vaccinated accounted for a large amount of the overall increase in social visits to homes, although there was a continuing increase in social visits among those not vaccinated.

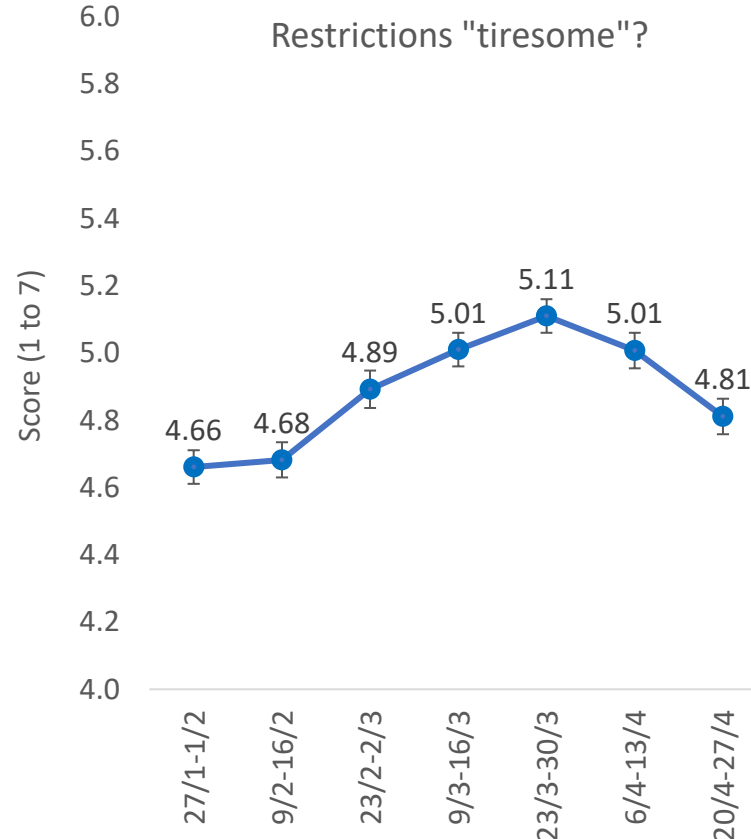
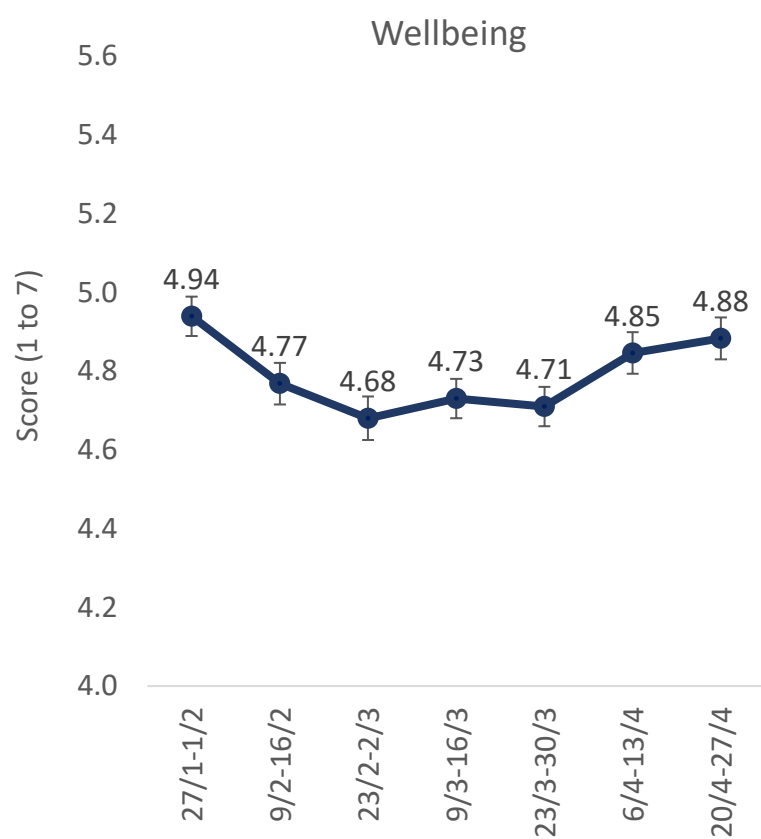
Social visits by age



The increase in social visits to homes was very much greater among older adults.

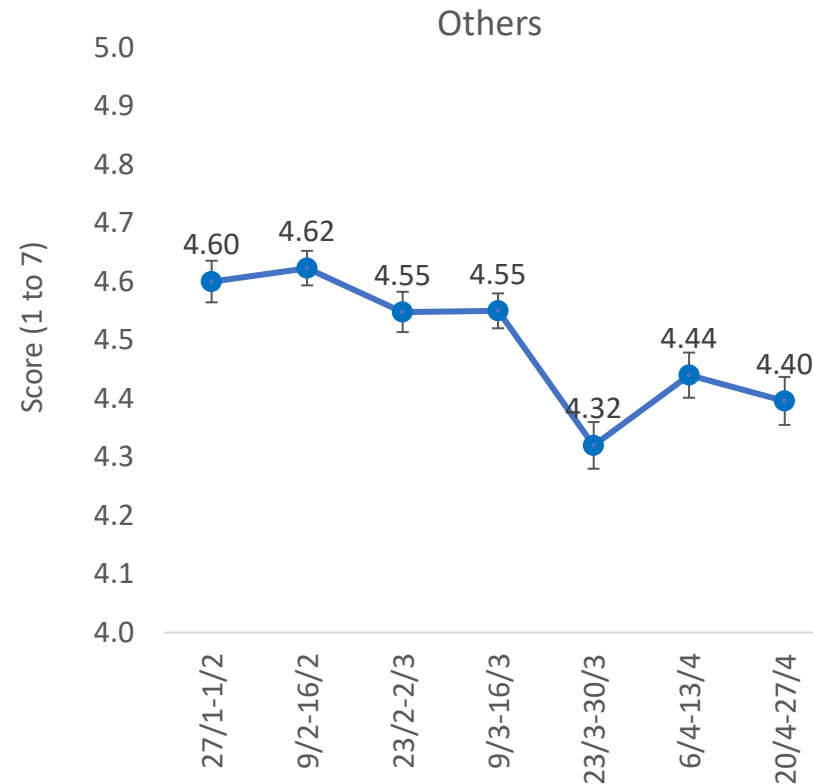
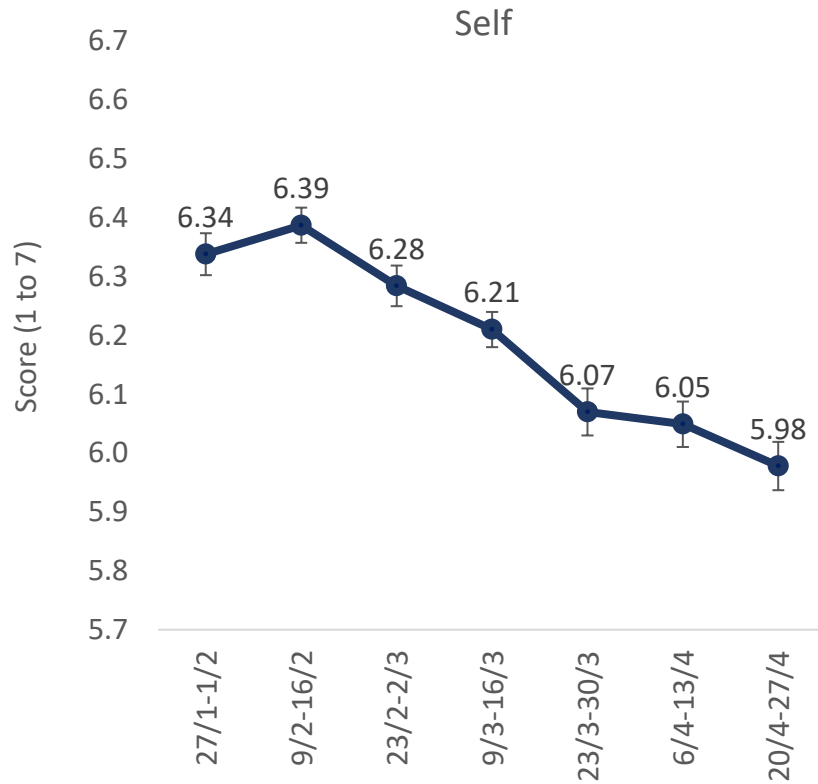


Wellbeing and Fatigue



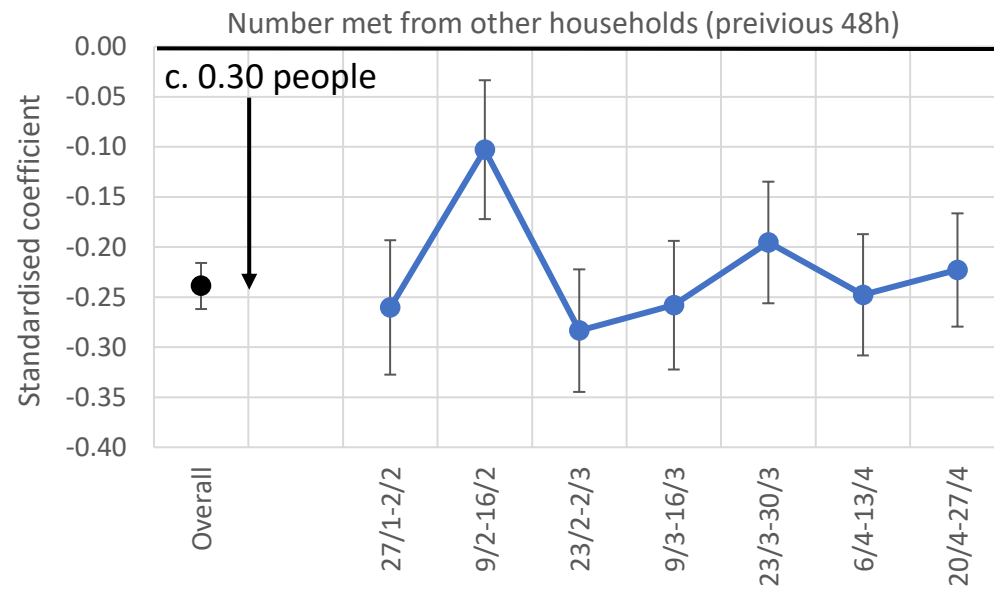
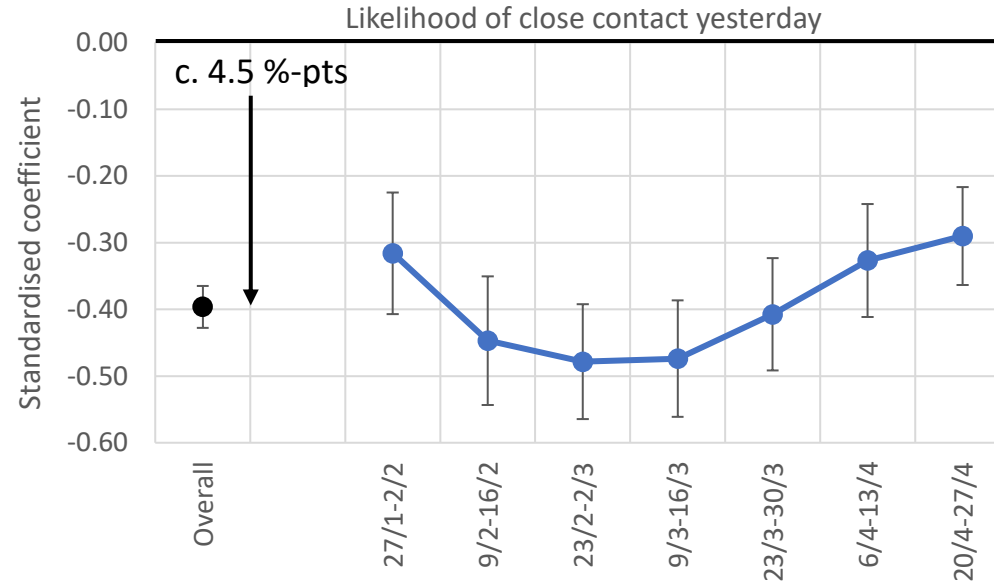
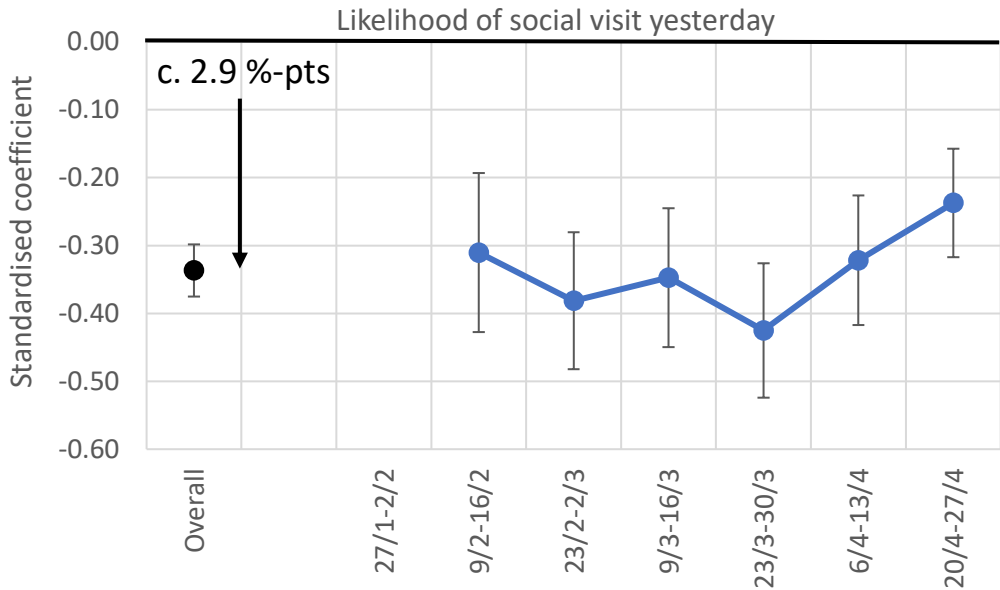
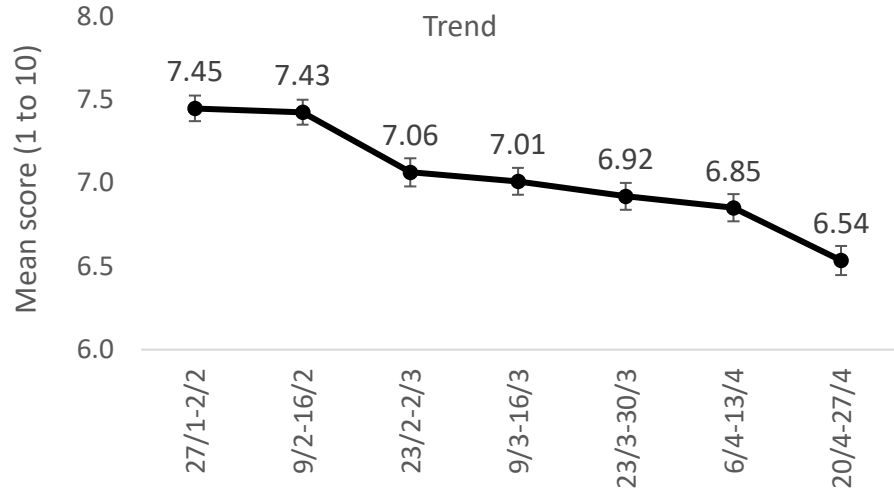
The period of uncertainty regarding the extension of Level 5 coincided with low wellbeing, which has since recovered. Since the first announcement that some restrictions would be lifted, there has been a reduction in how tiresome people are finding keeping to the restrictions.

Compliance



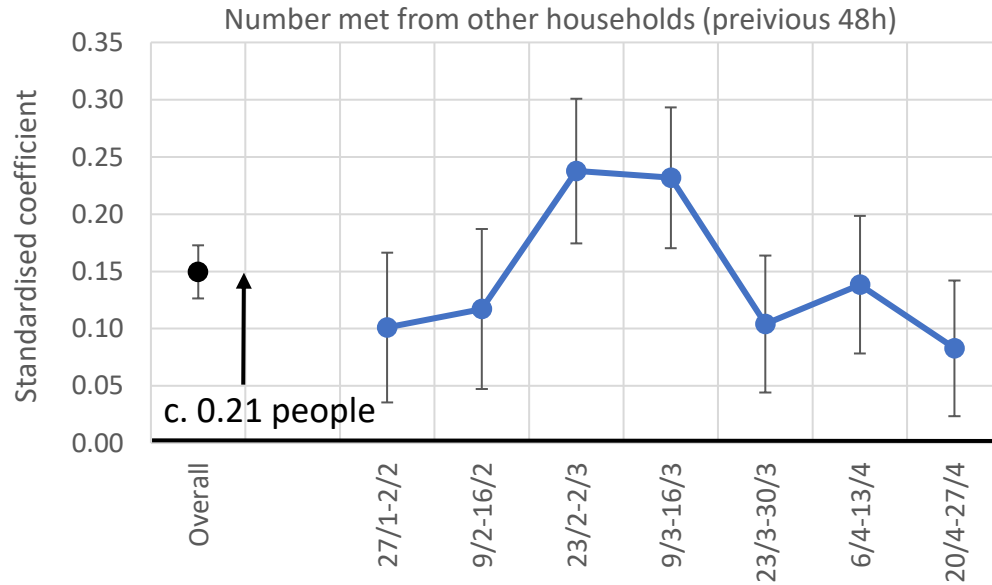
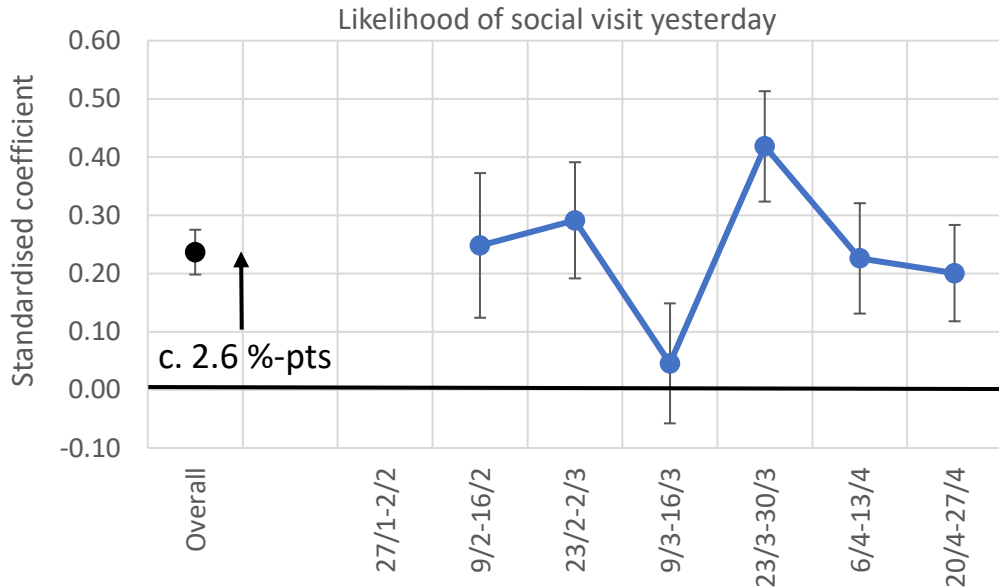
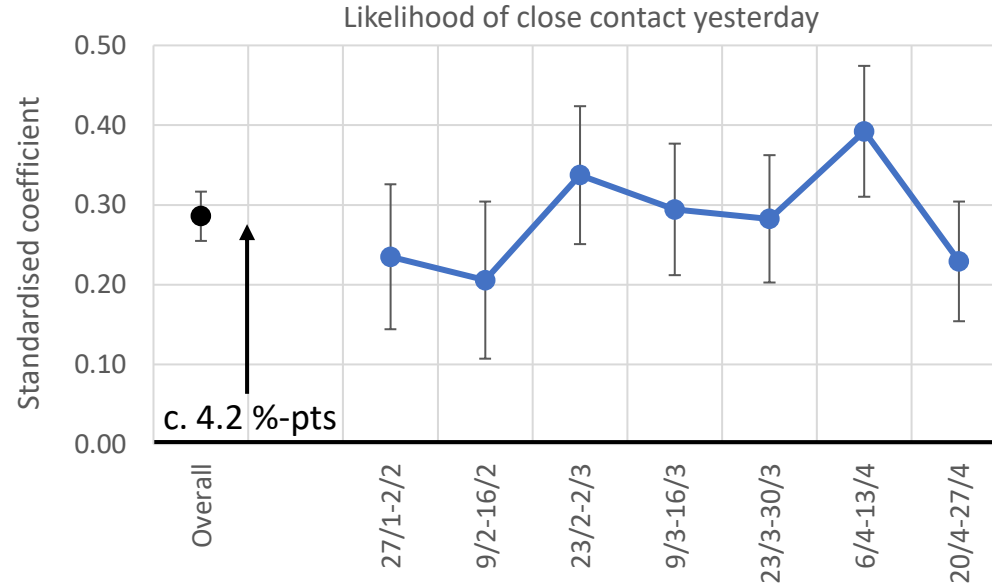
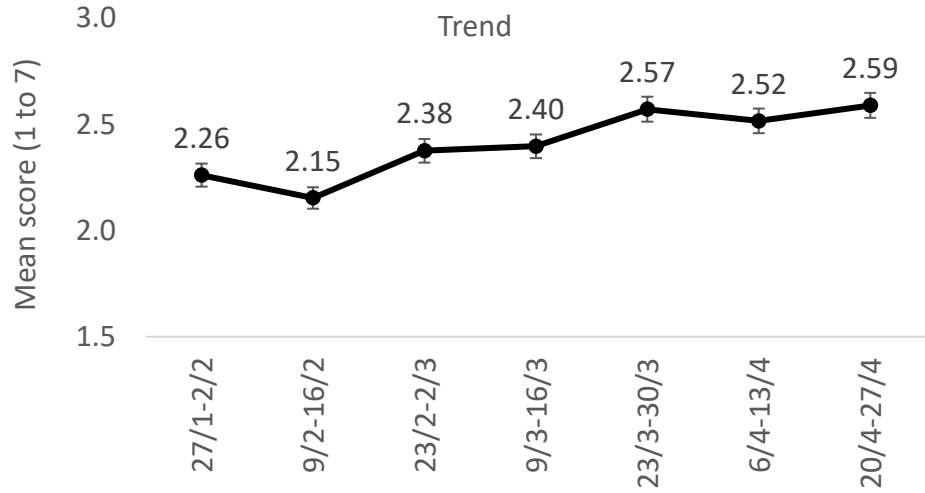
Self-reported compliance has continued to fall, although it remains at almost a score of 6 on a 7-point scale. People report much lower compliance by others, although a broadly similar downward trend is apparent.

Worry



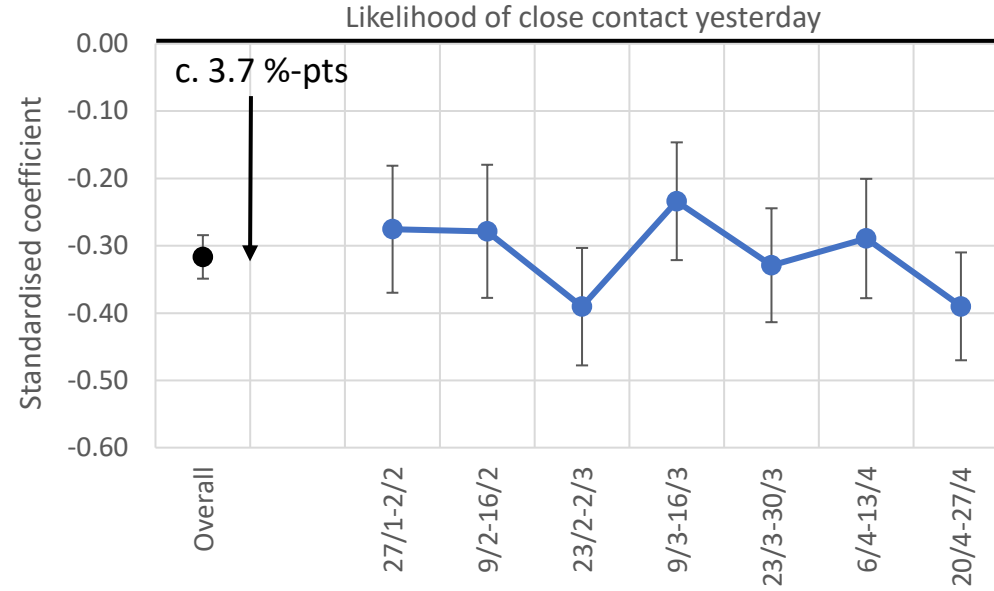
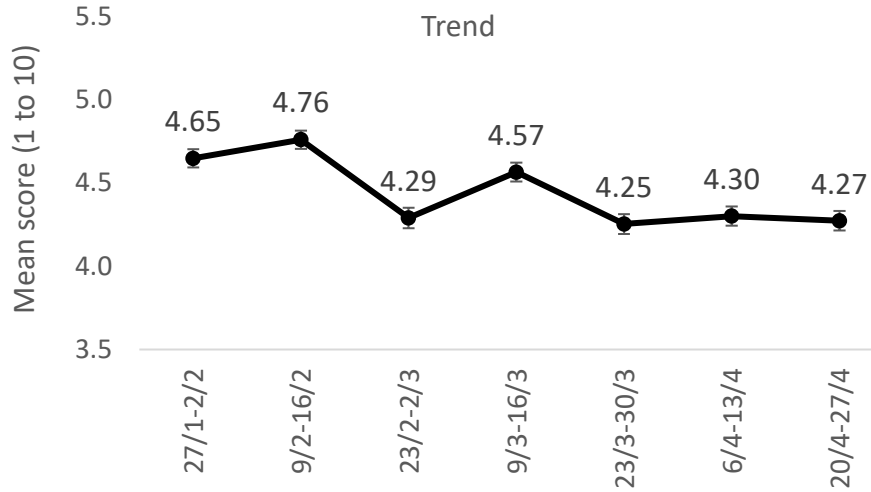
The trend shows that overall levels of worry continue to fall. The other three charts show how worry predicts activity. People with a one standard deviation higher level of worry are less likely to have a close contact, less likely to be involved in a social home visit, and meet fewer people from other households. The arrows indicate of the strength of these effects. However, the impact of worry in suppressing close contacts and social visits has weakened over the past 4 weeks.

Prevention-burden trade-off

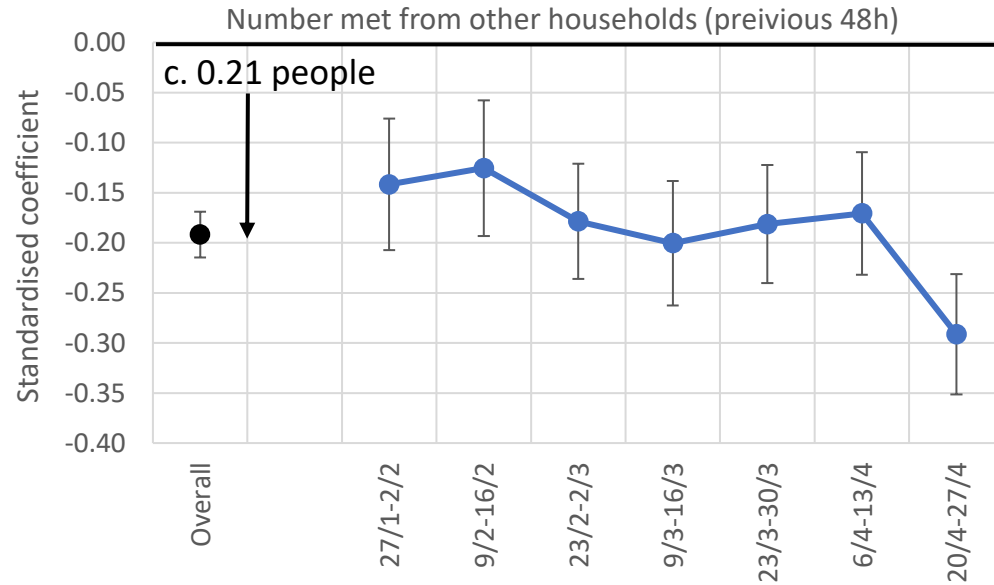
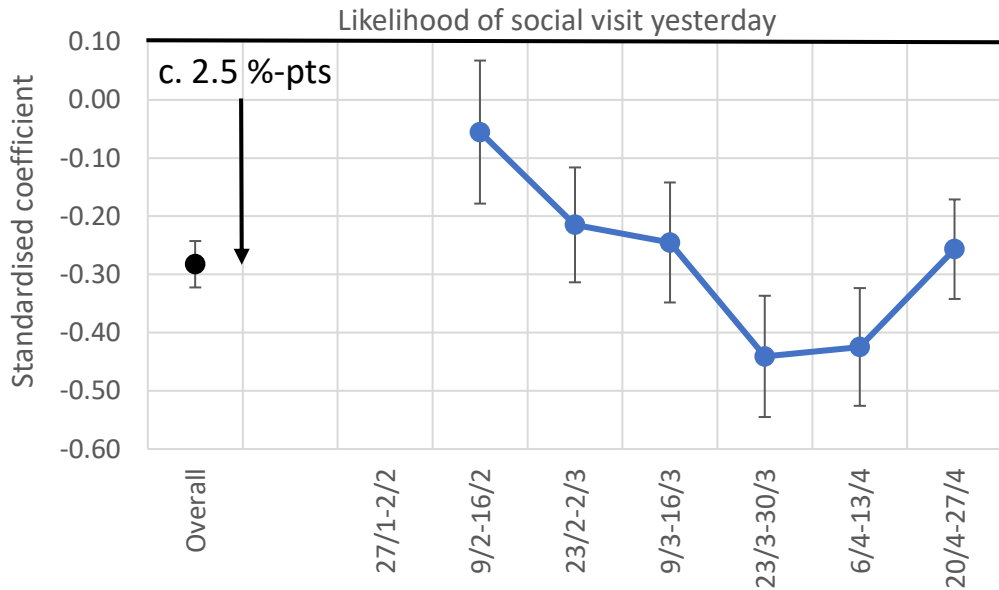


When asked which is more important, preventing the spread of the virus (=1 on the scale) or the burden of restrictions (=7), most people give a score below 4. The trend rose to the end of March but levelled off with the easing of restrictions. People with a one standard deviation higher score are more likely to have a close contact, more likely to be involved in a social home visit, and meet more people from other households in a 48-hour period. The effect of prioritising the burden of restrictions may now be falling.

Perceived coherence of restrictions

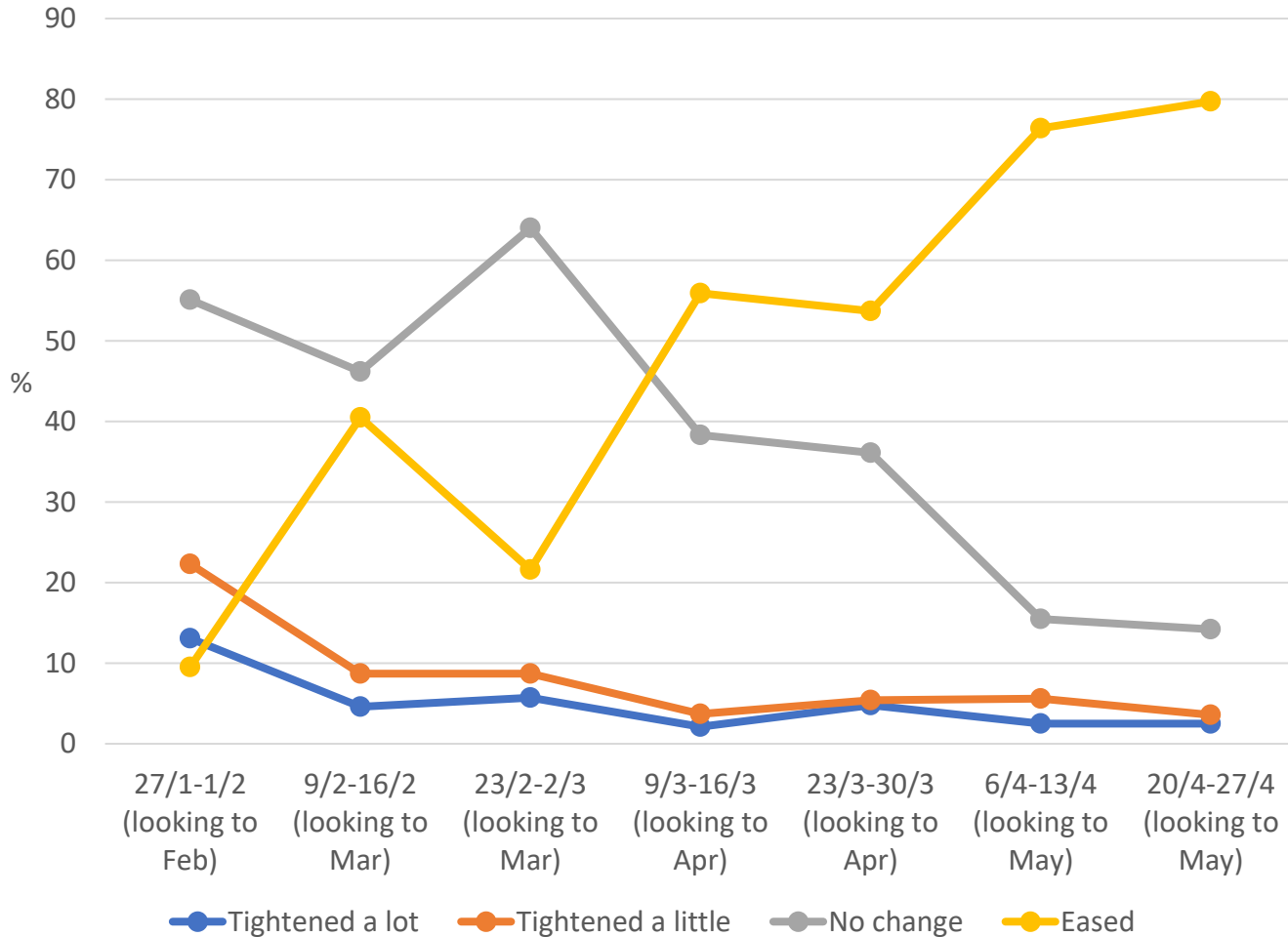


Since late January, the perceived coherence of the restrictions has fallen marginally, but has been stable since the announcement on 30th March. People who perceived the restrictions to be one standard deviation more coherent are less likely to have a close contact, less likely to be involved in a social home visit, and meet fewer people from other households in a 48-hour period. This effect may have strengthened since restrictions began to be lifted.





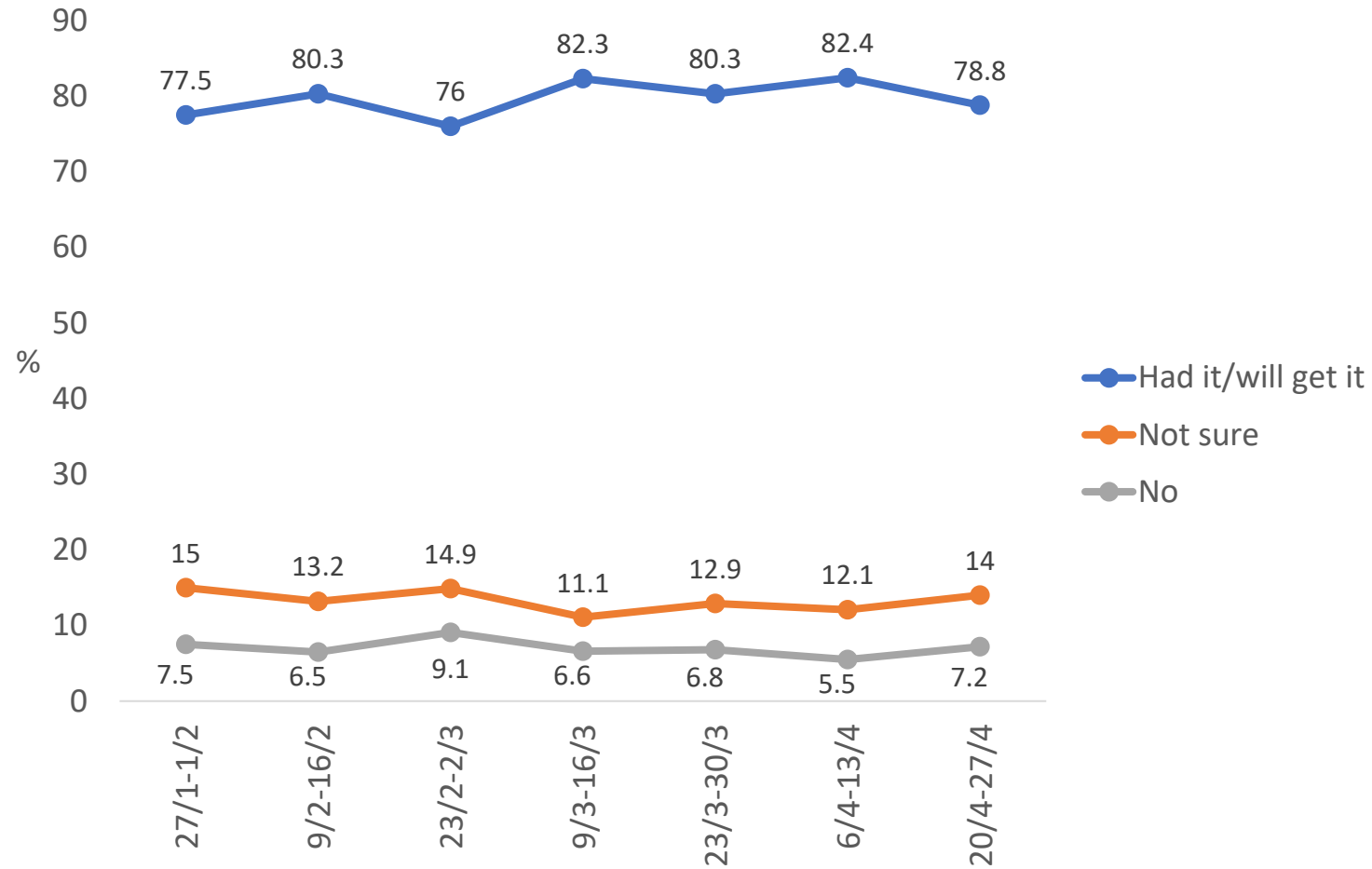
Expectations for easing restrictions (next month)



There has been a strong increase in the proportion of the population that expects restrictions to be eased the following month, reaching 80% in late April, just before the announcement of further easing during May and June.



Vaccine intention



The level of support for the vaccine has remained consistently high at c.80%, despite news stories of a very low risk of blood clots associated with two of the vaccines.