

# Social Activity Measure June 14<sup>th</sup>-June 22<sup>nd</sup>



## ABOUT THE RESEARCH

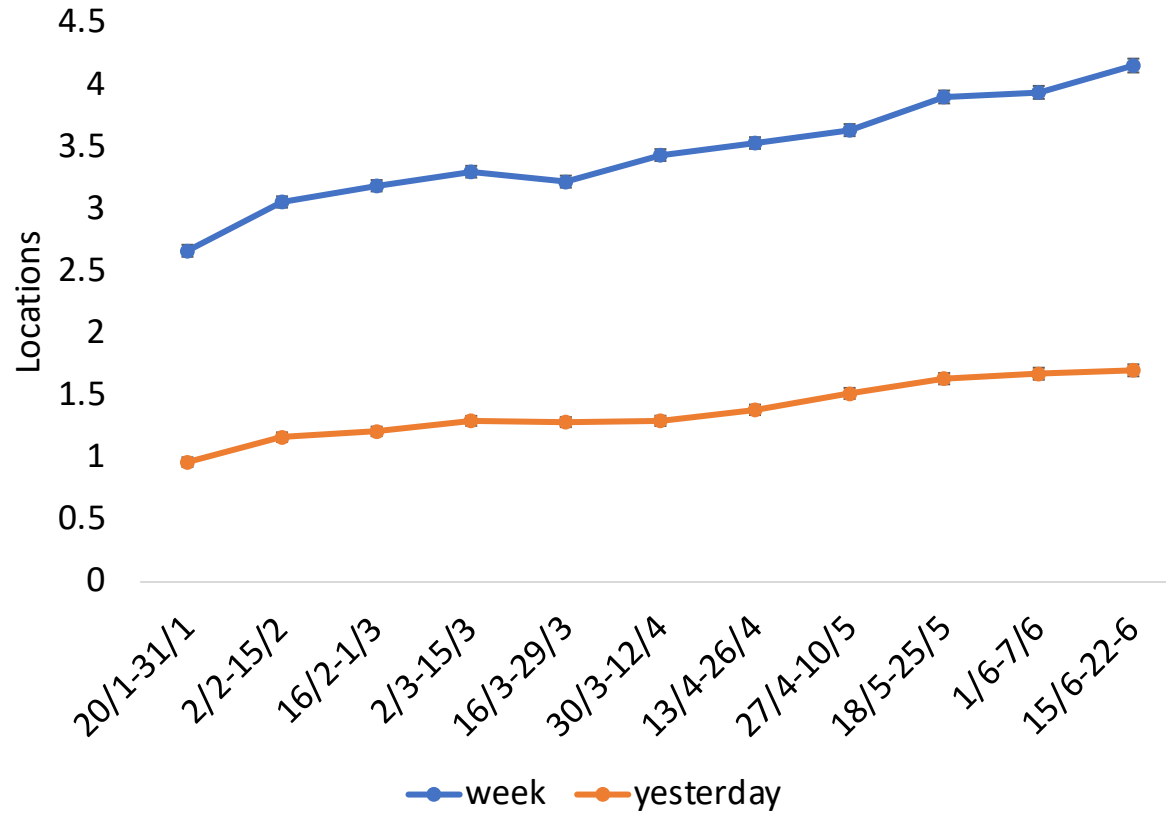
The Social Activity Measure (SAM) is a behavioural study that records the public response to the risk of COVID-19 infection over time. Designed by the ESRI's Behavioural Research Unit (BRU), SAM is an anonymous, interactive, online study that surveys people about their recent activity. The study offers 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 June 14<sup>th</sup> and June 22<sup>nd</sup>. Data were collected after changes to restrictions where outdoor dining and drinking, limited social visits, visits to indoor sport and exercise locations, larger events and sports matches were permitted. There was some media discussion of travel and the EU vaccine passport, alongside growing reports of the delta variant. Vaccine registration opened for the 35-39 year age group on June 19<sup>th</sup>.



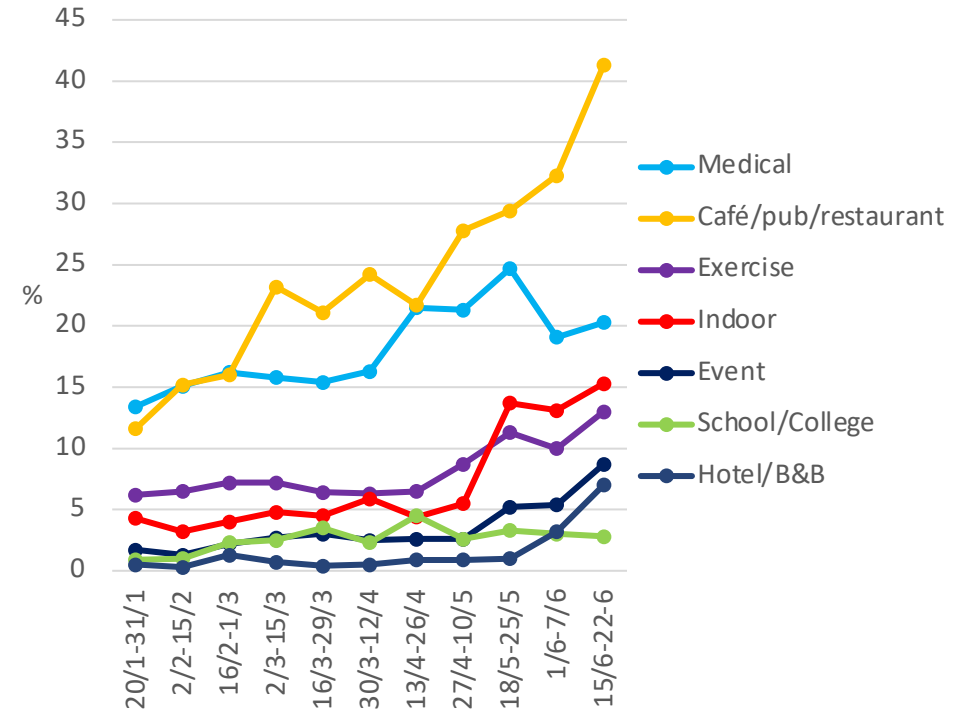
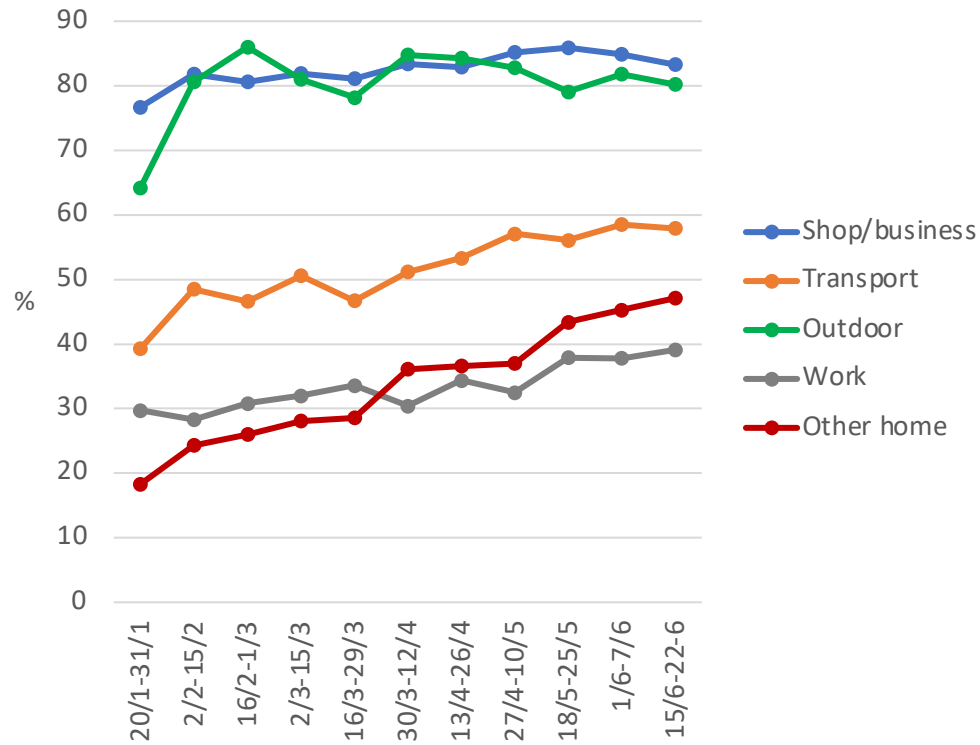
# Total locations visited



*The average number of locations visited has increased slowly and steadily since January, with the larger share of the increase occurring since early April.*



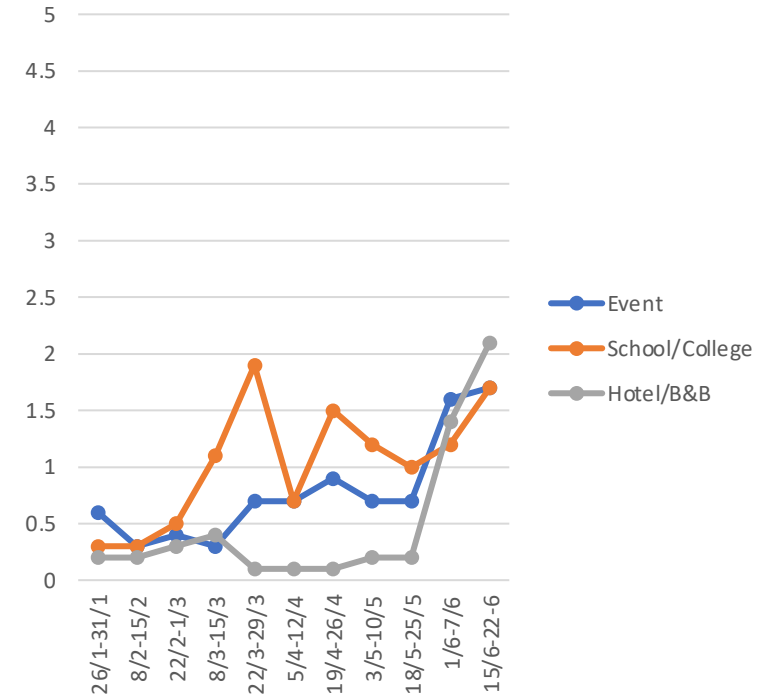
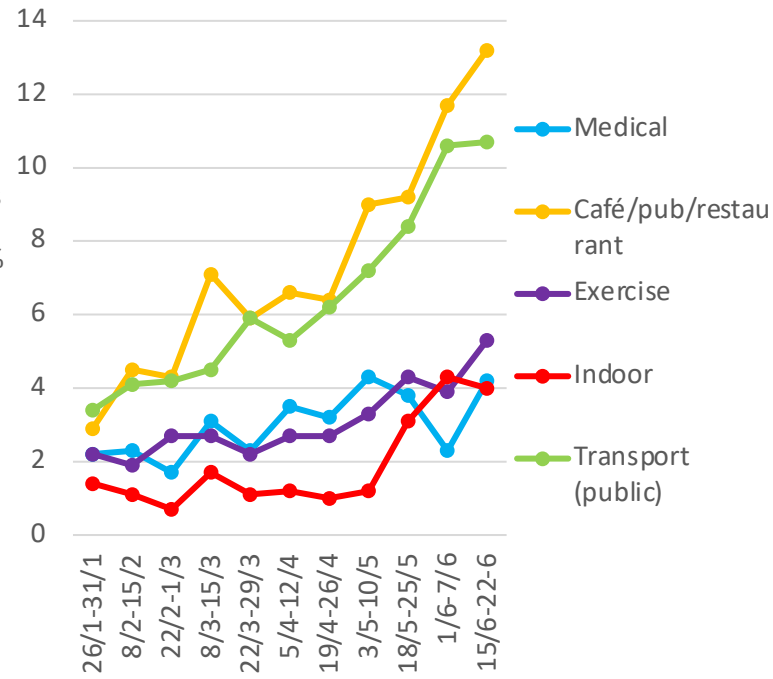
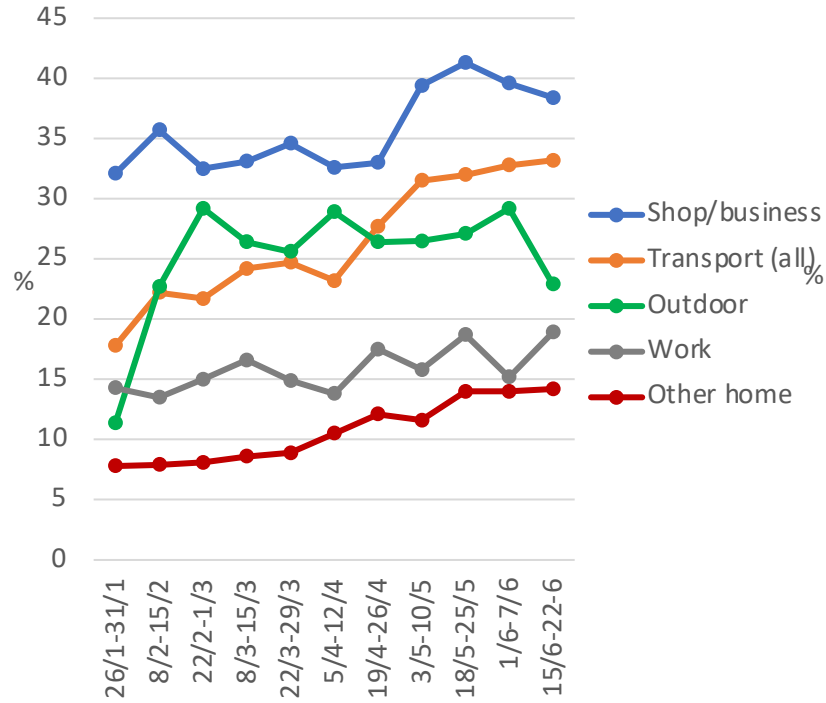
# Locations visited (previous week)



*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. In line with the change in restrictions, there were increases in people visiting hospitality venues (cafés, restaurants, pubs, hotels), exercise and sport facilities (e.g. gyms) and attending gatherings.*



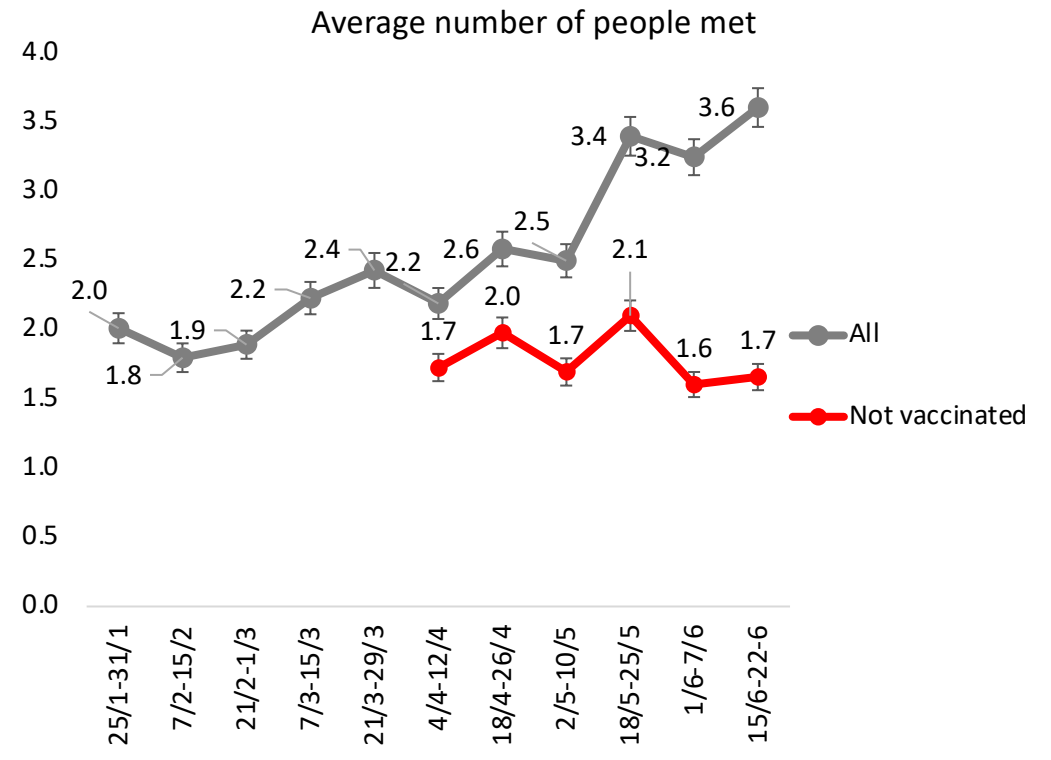
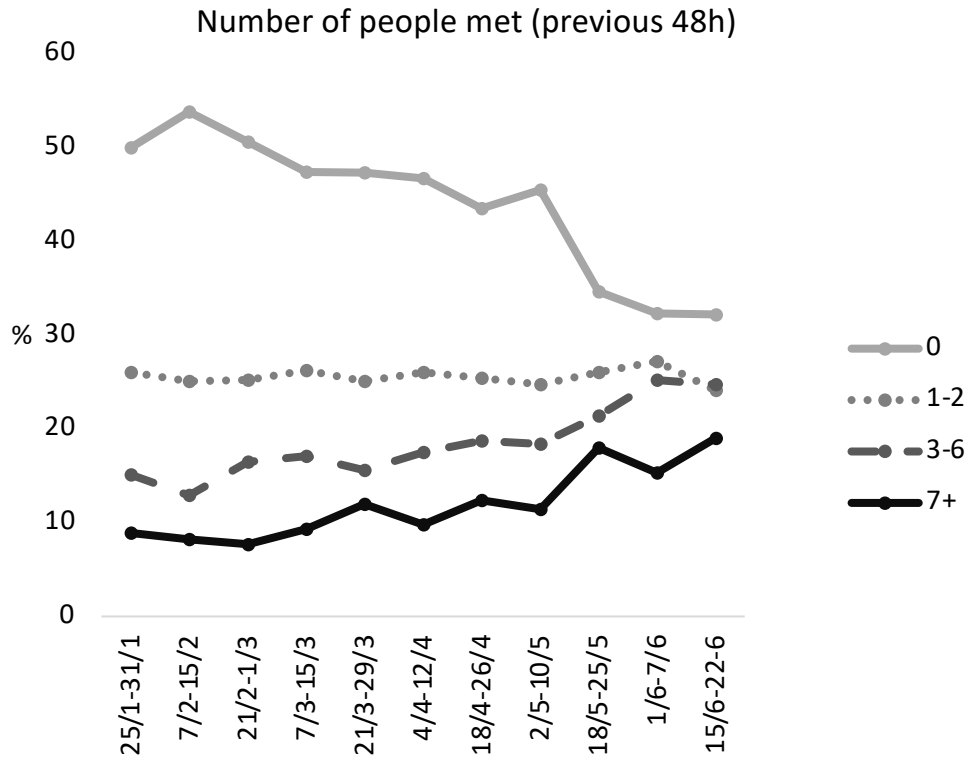
# Locations visited (yesterday)



*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. There were increases in attendance at work and visits to hospitality venues (cafés, restaurants, pubs, hotels). Attendance at medical appointments recovered following the drop after the HSE cyber attack. Visits to outdoor locations significantly declined, accompanied with a further (although non-significant) increase in visits to hospitality venues.*



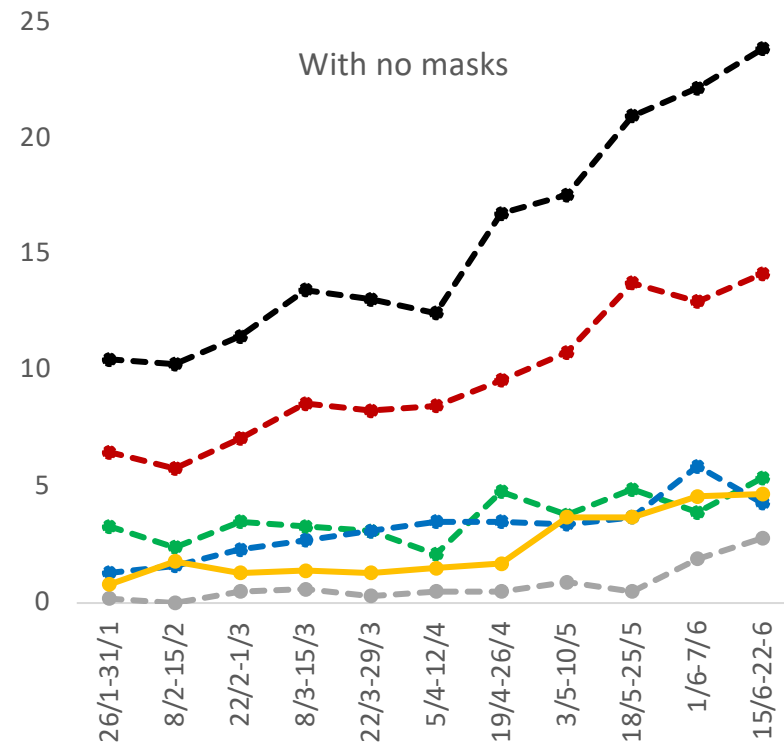
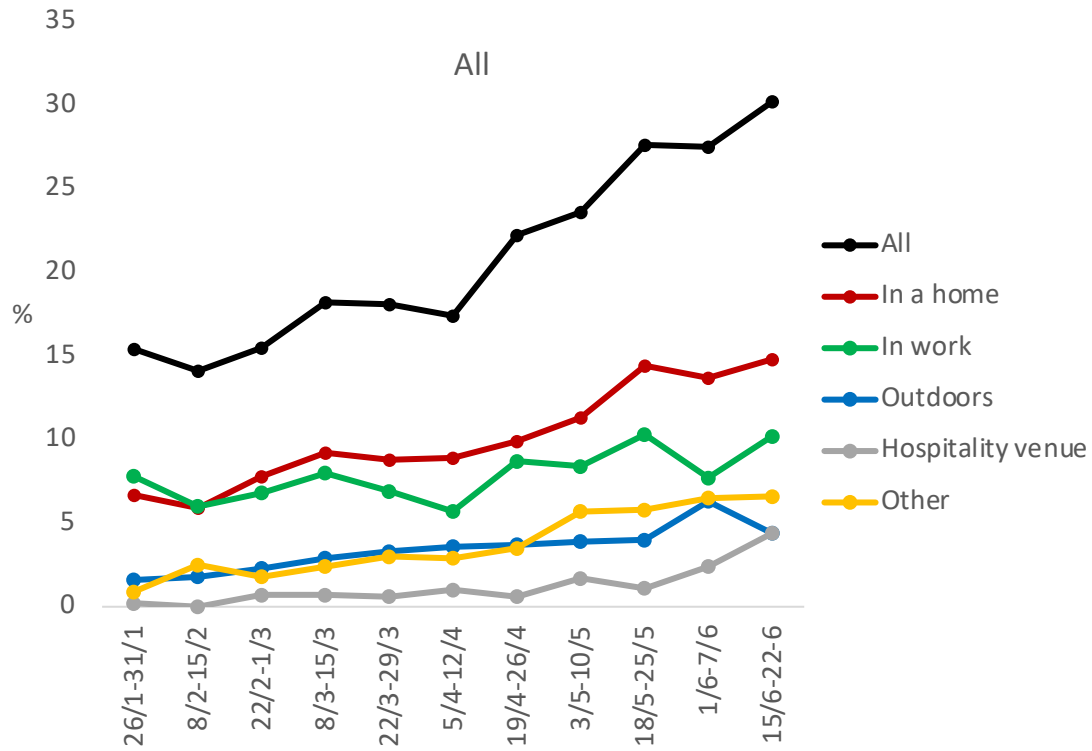
# Meeting people outside the household



*There was a further slight increase in the number of people individuals met up with from other households. The increase is accounted for entirely by an increase in the number of vaccinated people met, with no change in the number of unvaccinated people met.*



# Close contacts\* (previous day)

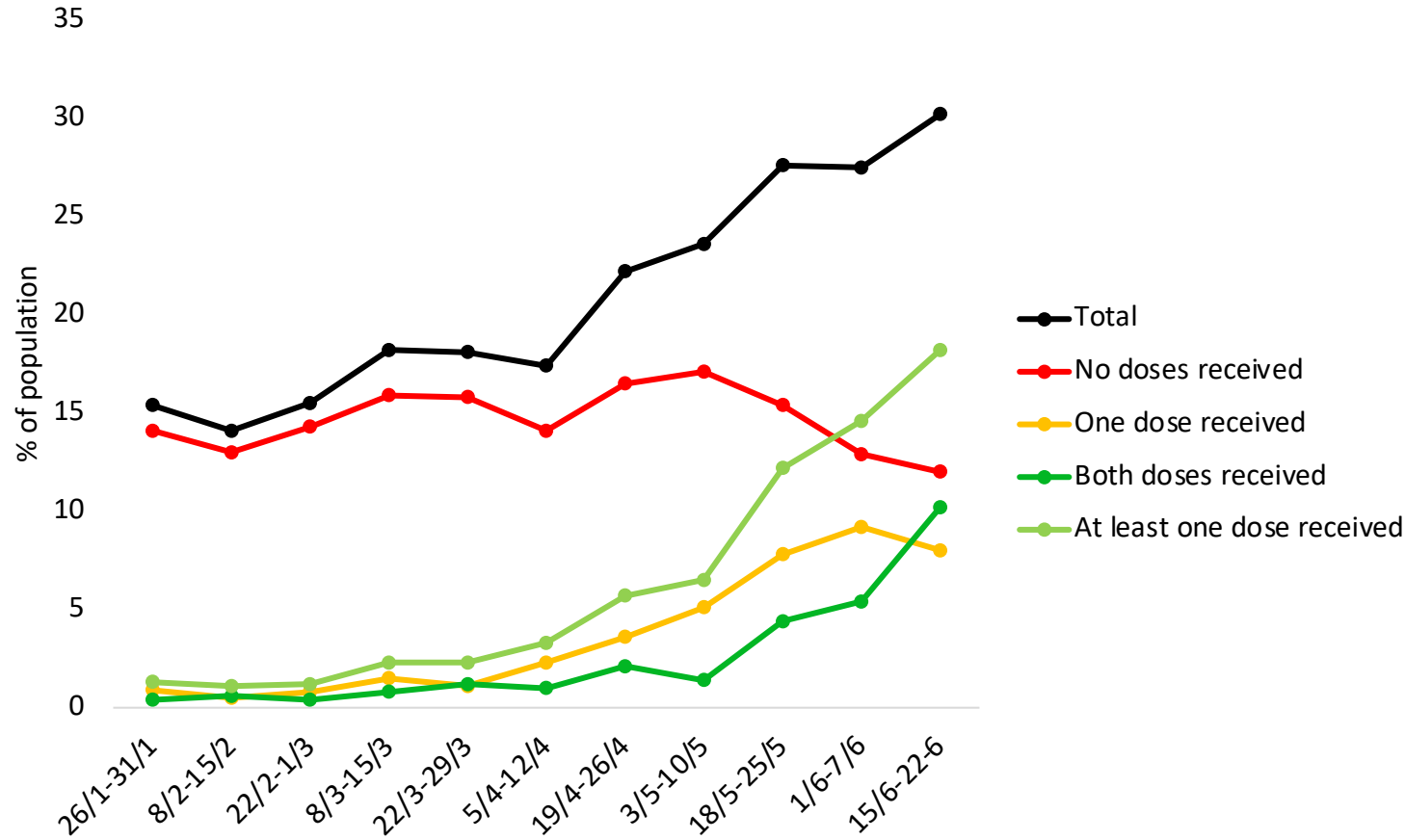


\*Close contact interactions are defined as those that are likely to have lasted for longer than 15 minutes without a 2m distance being maintained at all times or that took place indoors for longer than 2 hours in a space that was not well ventilated (hse.ie).

*There was a small but non-significant rise in the number of people who had a close contact interaction yesterday. Workplace close contacts recovered following a marginal decrease over the June bank holiday. The remaining increase can be primarily attributed to outdoor dining at cafés, pubs and restaurants. In June, the rise in close contacts where masks were not worn is attributable mostly to hospitality settings.*



# Close contacts by vaccine status



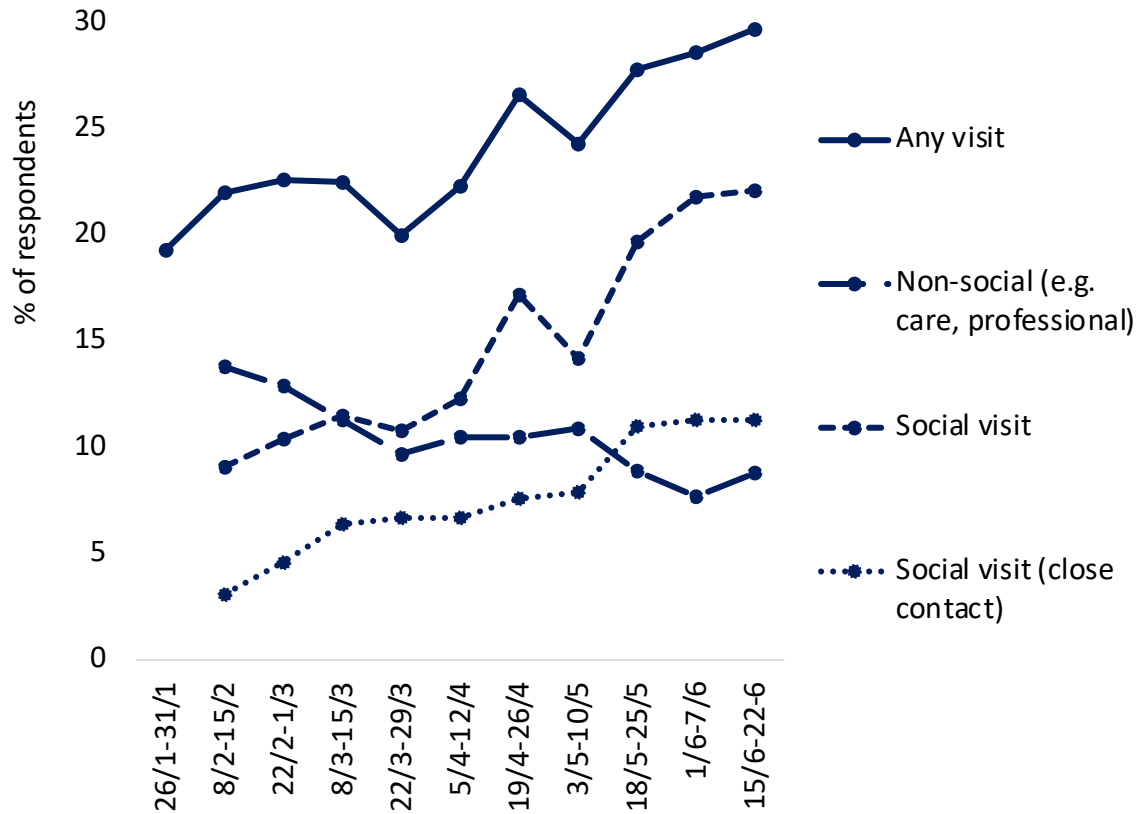
*The rise in close contacts since late April is accounted for primarily by people who have been vaccinated, with those who are fully vaccinated accounting for more close contacts than those with one dose for the first time. Approximately 90% of unvaccinated people do not have any close contacts in a given day.*



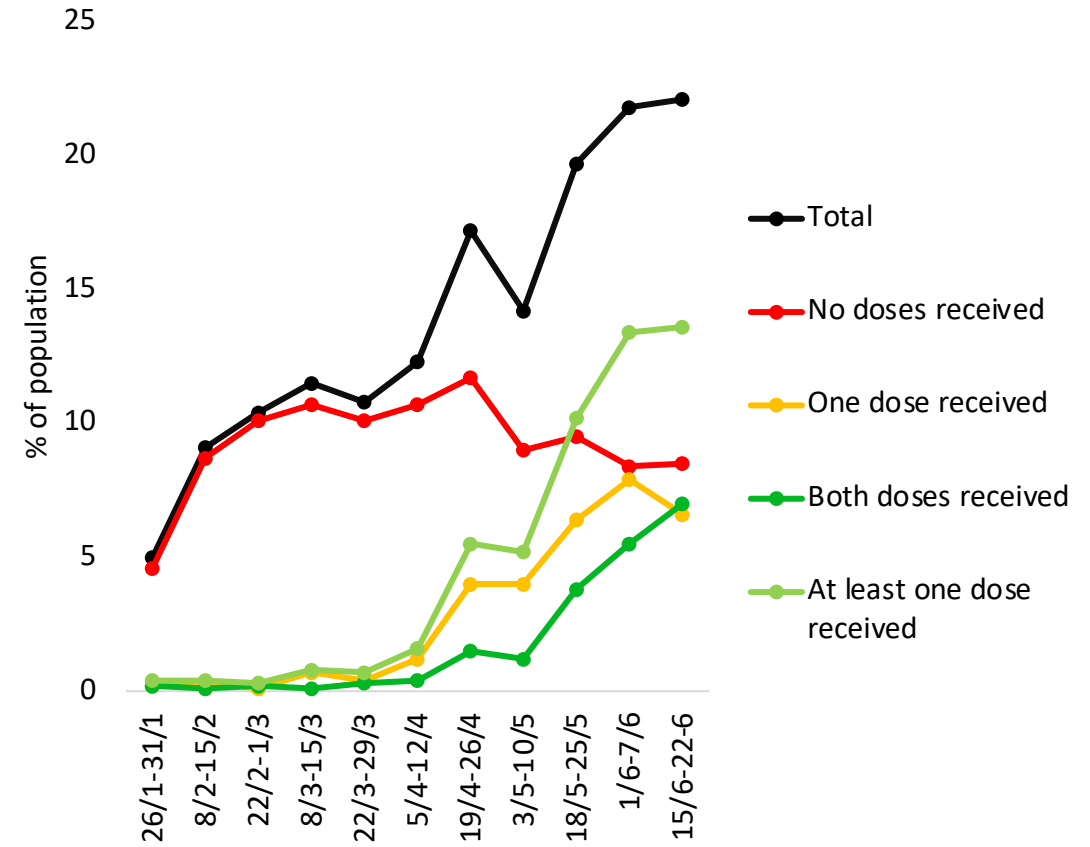
# Visits to homes



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



Social visits by vaccination status

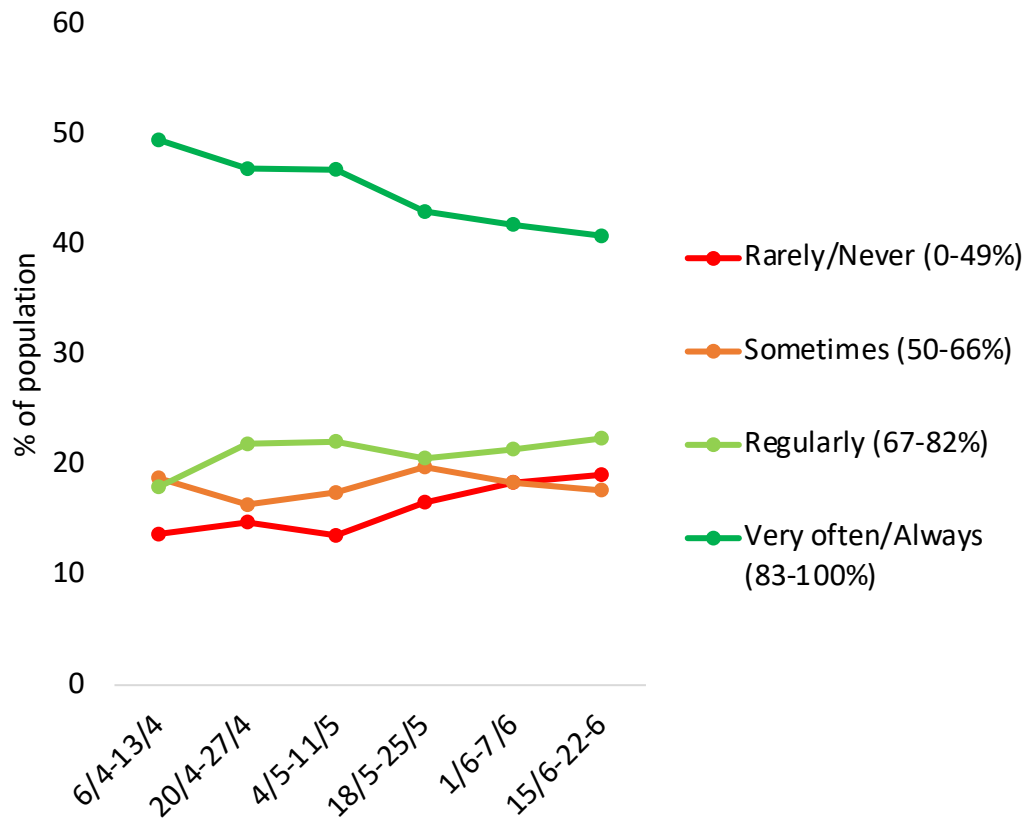


*Despite an upward trend, there has been no significant increase in visits to homes. The rise in social visits to homes since early May is accounted for primarily by vaccinated people.*

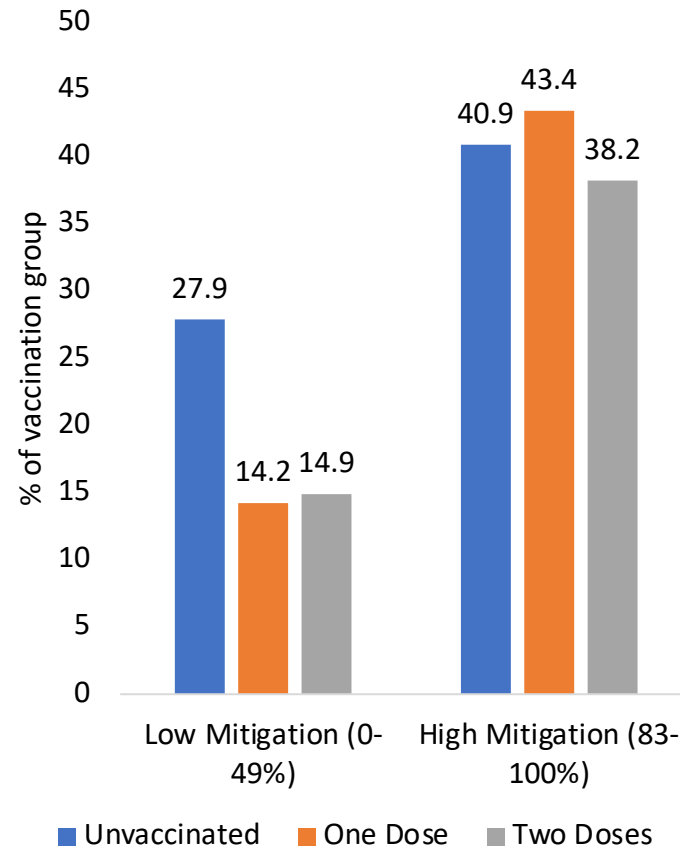
# Day-to-day risk mitigation



Caution when leaving home  
(mitigative behaviours)



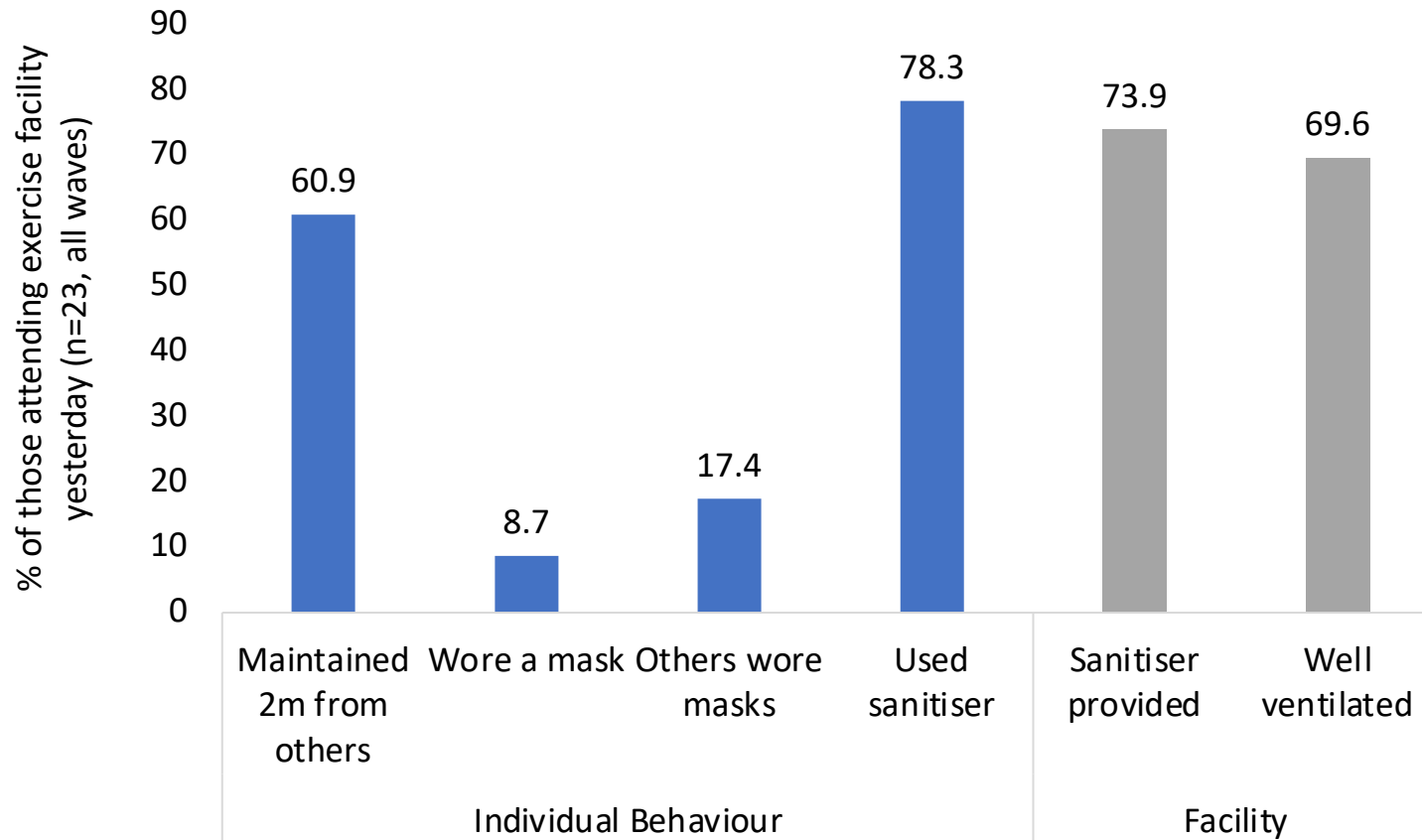
Caution by Vaccine Status



*We created a measure of how often, when visiting each location outside of their home, people reported keeping 2m distance, wearing a mask, and cleaning their hands. These were pooled into a single measure of the probability that the individual undertook the behaviour. The share of the population being highly cautious has declined since early April. Similar proportions of people across unvaccinated, one dose and two dose groups can be classified as highly cautious, but substantially more unvaccinated people take precautions less than half of the time compared to the other groups. (Note, people who did not leave their home are classed as 'Always' cautious, although this may be a heterogenous group.)*



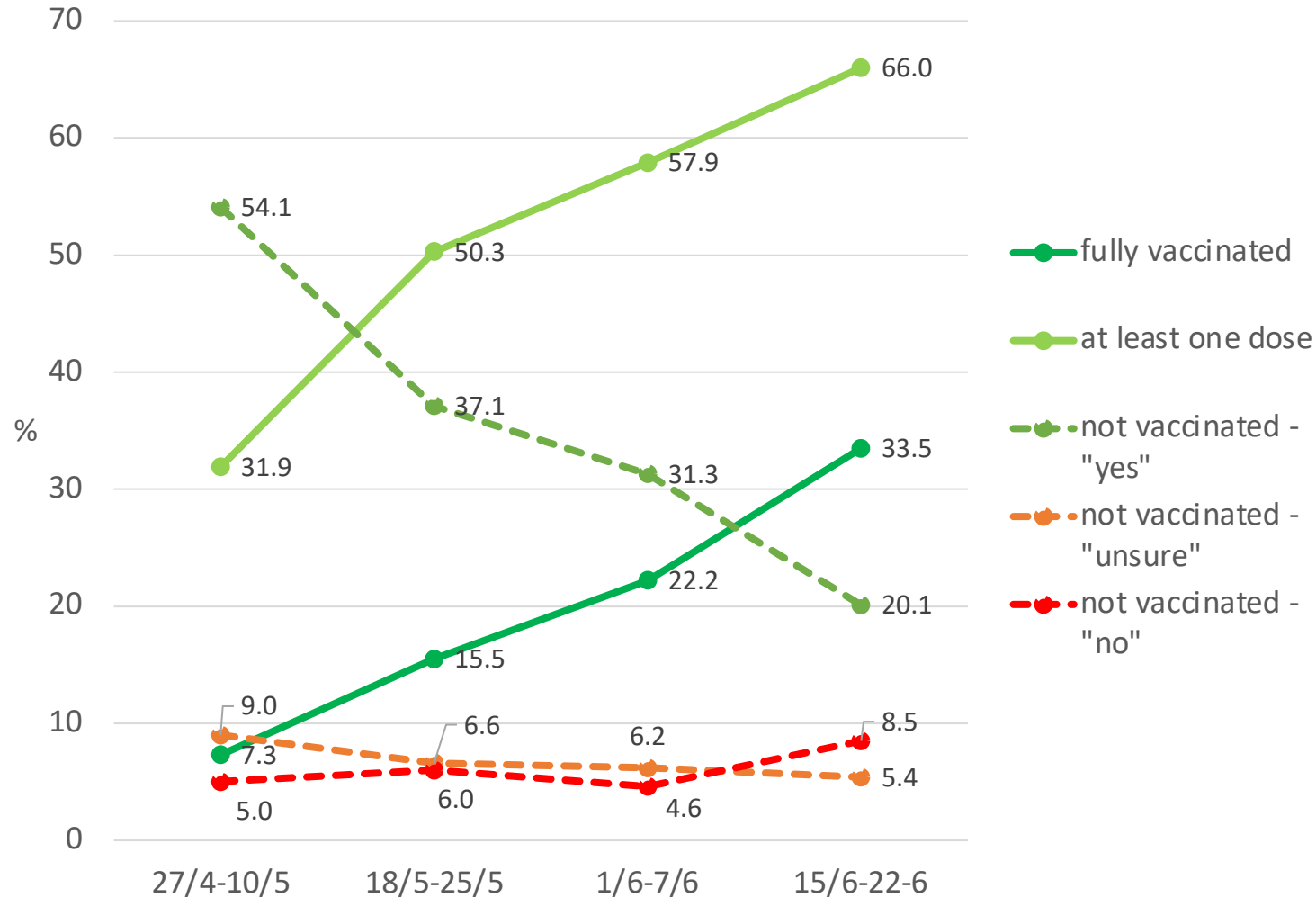
# Precautions in Indoor Exercise Facilities



*There is considerable scope for improving precautions while visiting indoor exercise facilities (e.g. gyms). Less than 1 in 10 people visiting an indoor exercise facility report wearing a mask, while 1 in 3 gyms are reportedly not well ventilated.*



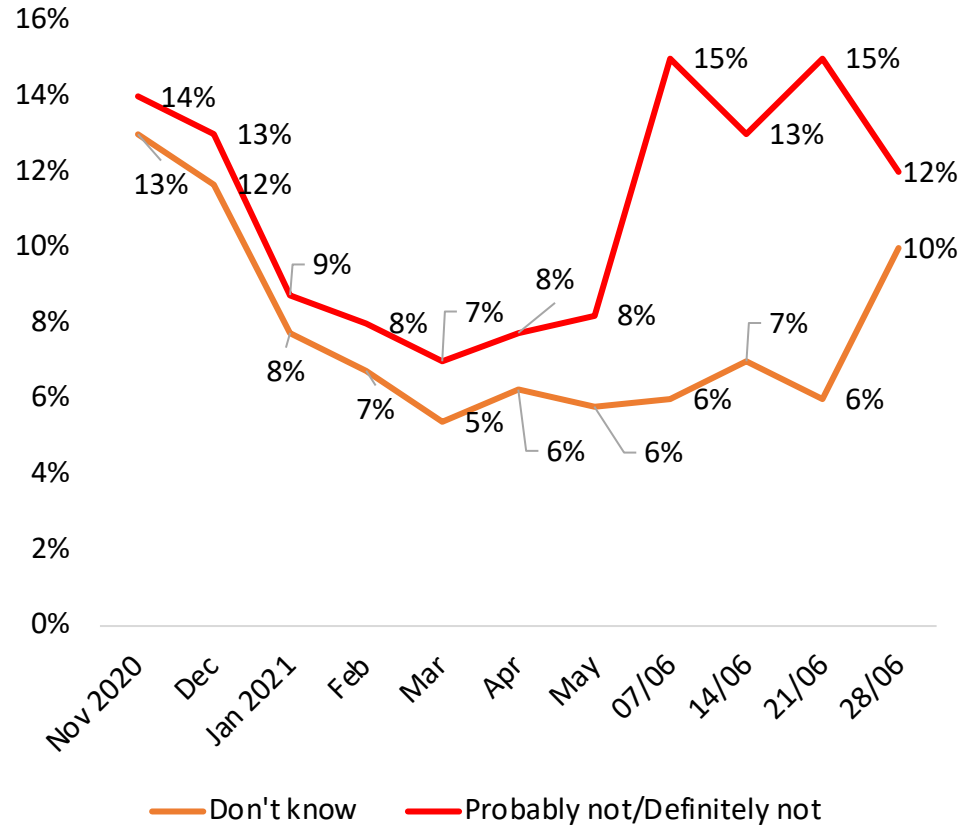
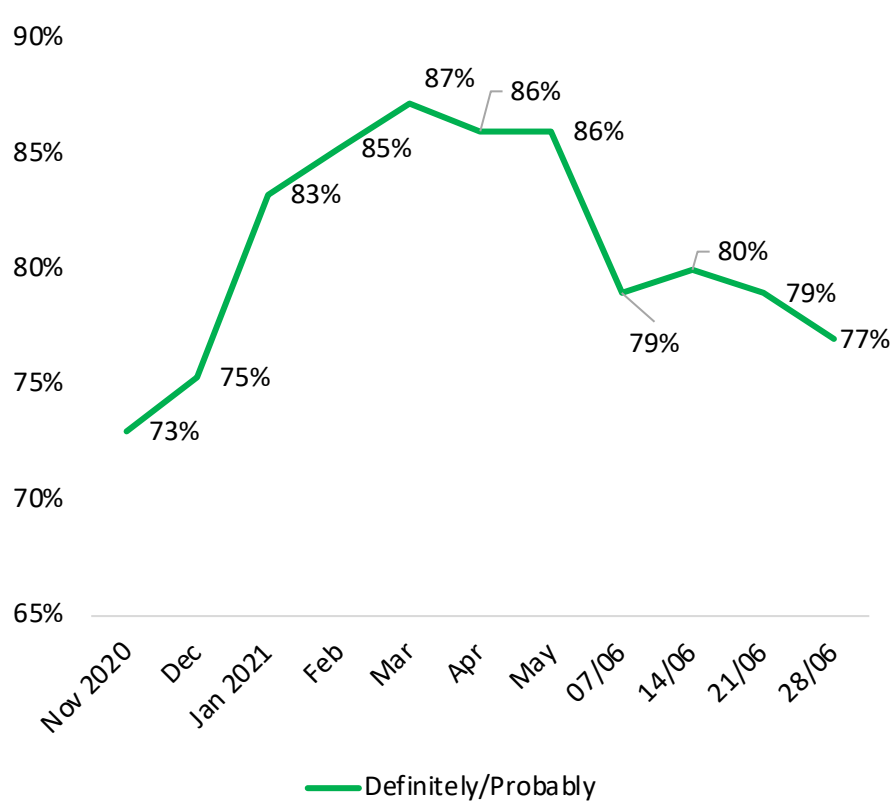
# Vaccine uptake and intention



The chart shows trends in the vaccine status of the whole sample over the most recent 4 rounds of data collection. The dark solid line shows the proportion of the sample who report being fully vaccinated. The lighter solid line shows the proportion who have received at least one dose. The remainder are unvaccinated and are split into three groups according to their stated intention, represented by the dashed lines. Thus, the solid light green line, plus the three dashed lines, add up to 100%. As the vaccine rollout has progressed, those who say they are going to get vaccinated receive it, so the solid lines have gone up and the dashed green line has fallen. The dashed orange line has fallen too, as some who were unsure have taken the vaccine. In the most recent round of data, there is a statistically significant increase in the dashed red line – those who say they will not take the vaccine – but this remains below 10%.



# Vaccine Intention (Amárach Tracker Data)

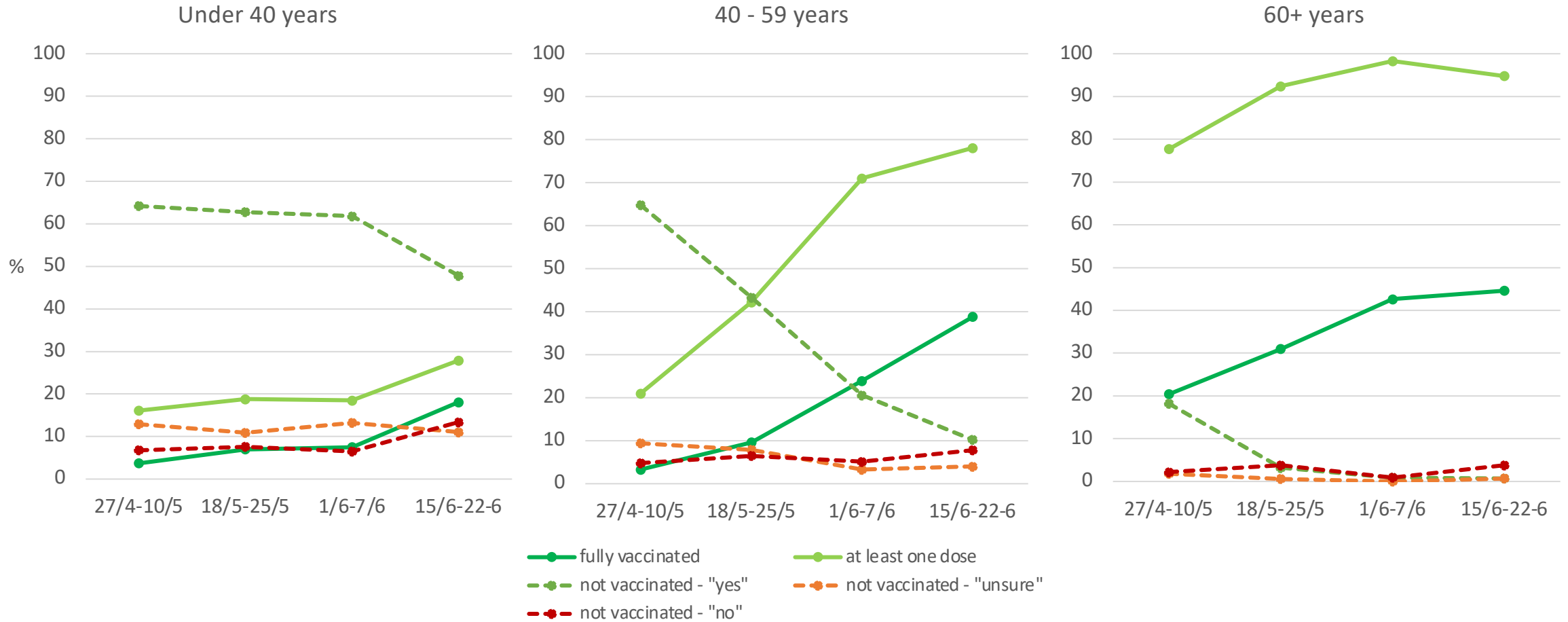


*For comparison with the previous slide, the charts show data from the Amárach Tracking Survey. These data are collected using a different sample and different question. The intention to take the vaccine is reported as a percentage of those who have not yet been offered the vaccine – not as a percentage of the whole adult population. So looking at the red line, 12-15% of people yet to be offered the vaccine is below 10% of the whole population. However, the same trend is apparent: during June there was a modest increase in the proportion saying they will not take the vaccine.*

Source: Amárach Public Opinion Tracker for Department of Health

Note that the above charts required converting the five-category Tracker variable to a three-category variable to match the SAM response format and reduce statistical noise.

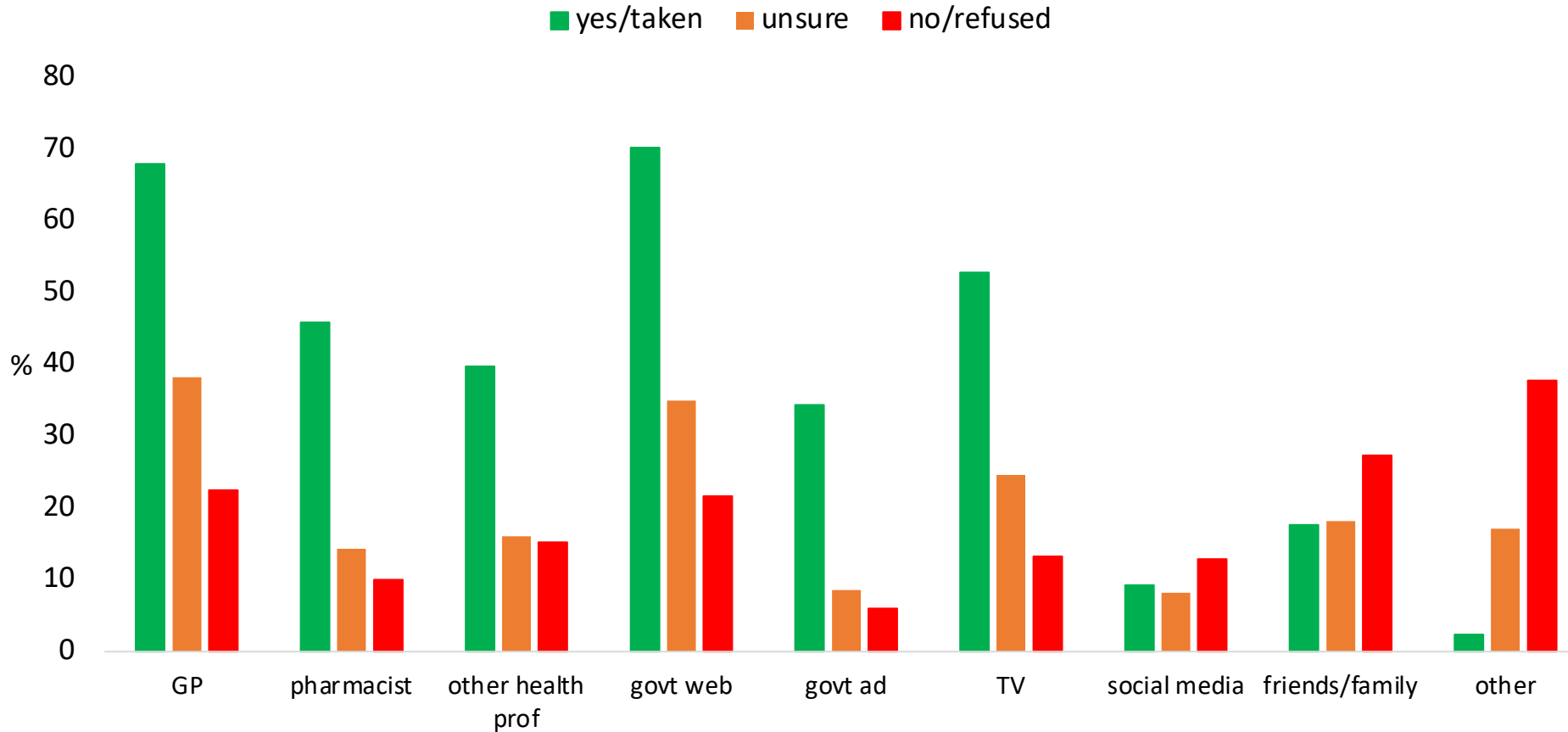
# Uptake and intention by age group



*These charts are as Slide 12, but separated by three age groups. Support for the vaccine is high in all age groups. The minorities who are unsure or saying "no" are somewhat larger among under-40s. The recent increase in hesitancy is also mostly among the younger group.*



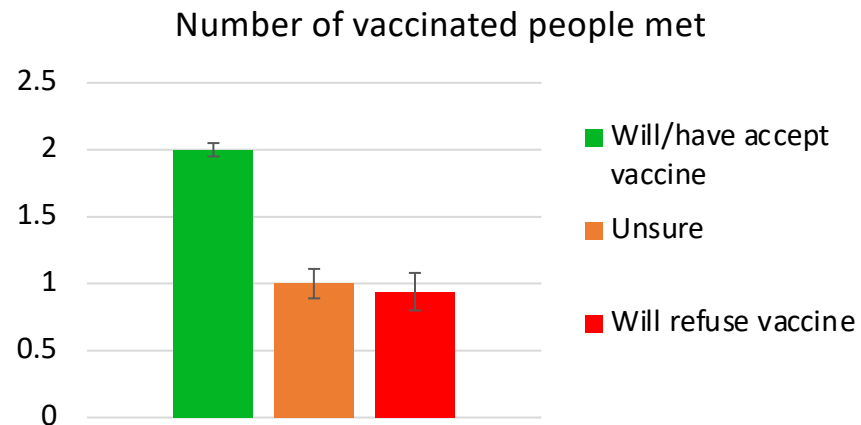
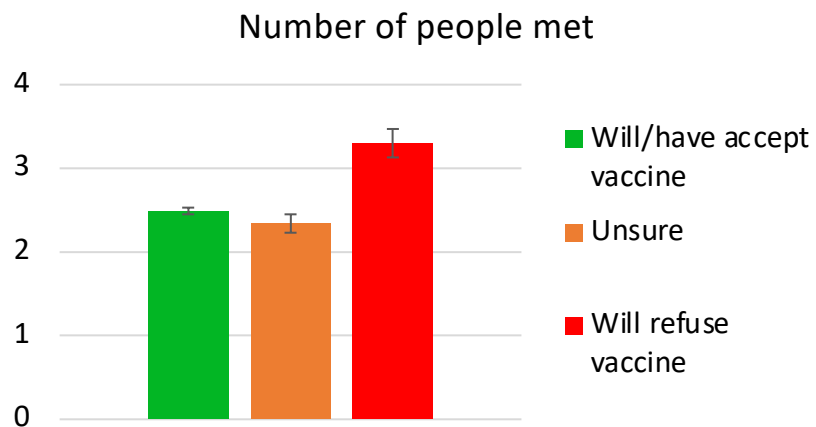
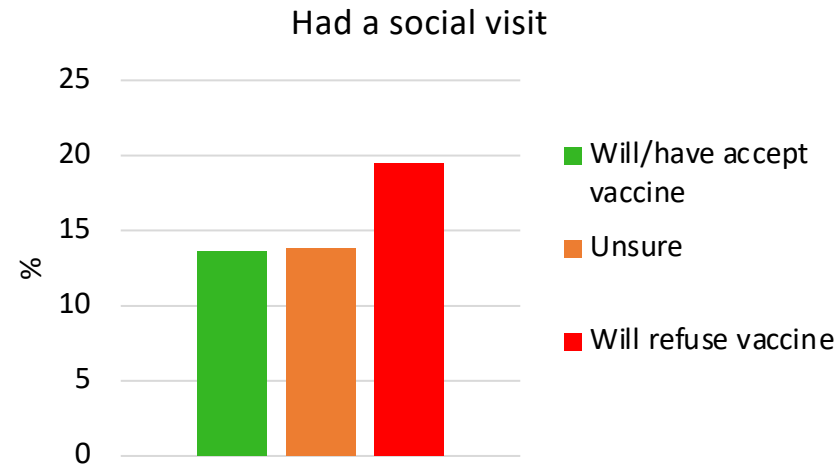
# Vaccine Intention & Info Sources



*The chart shows the percentage of people who trust various sources of information about the vaccine by their willingness to take the vaccine. Those willing to take (or who have taken) the vaccine are more likely to trust medical professionals, the Government and TV. Those not willing to take (or who have refused) the vaccine are less trusting in general, but more trusting of social media, friends and family and other (unnamed) sources.*



# Vaccine Intention and Behaviour

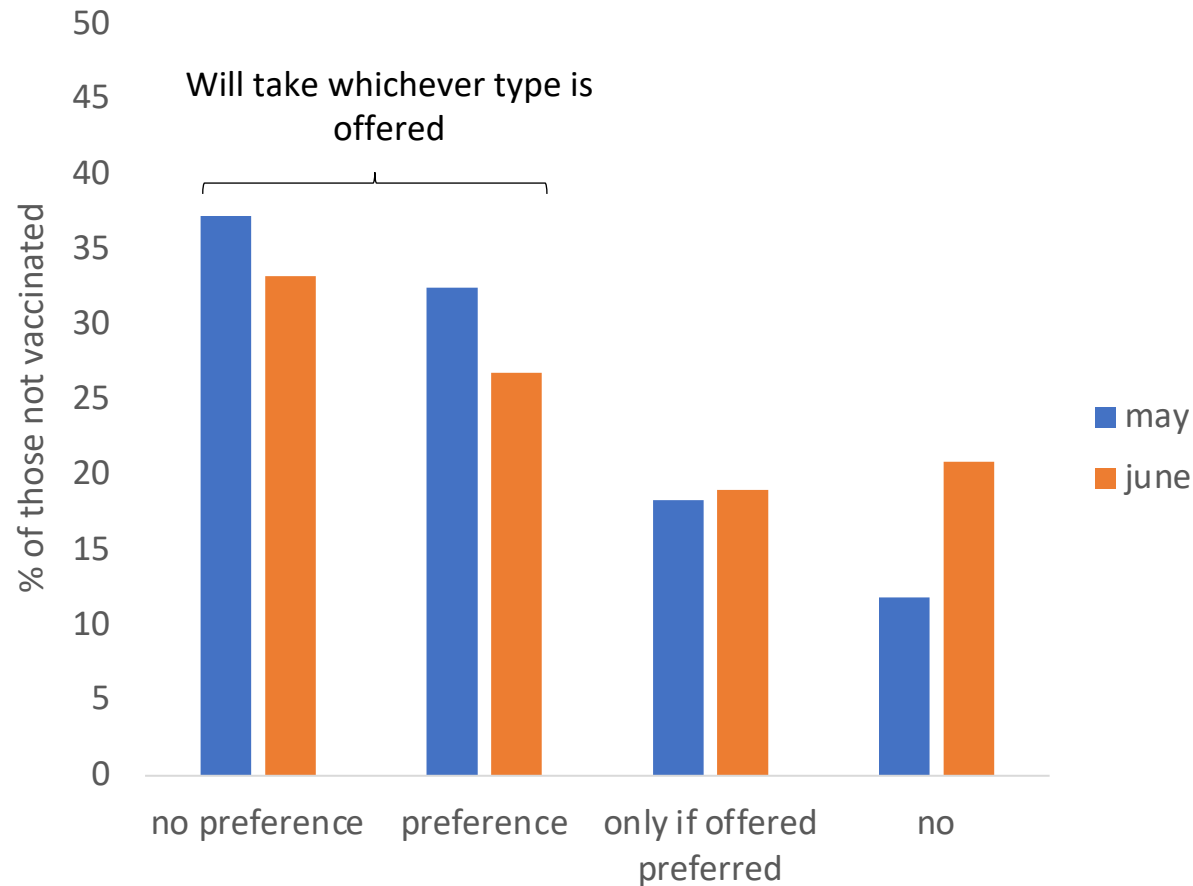


*The chart shows behavioural outcome variables by willingness to take the vaccine. Those who plan to refuse or who have refused the vaccine are more likely to have had a close contact and social visit and to have met more people in general, but fewer vaccinated people.*





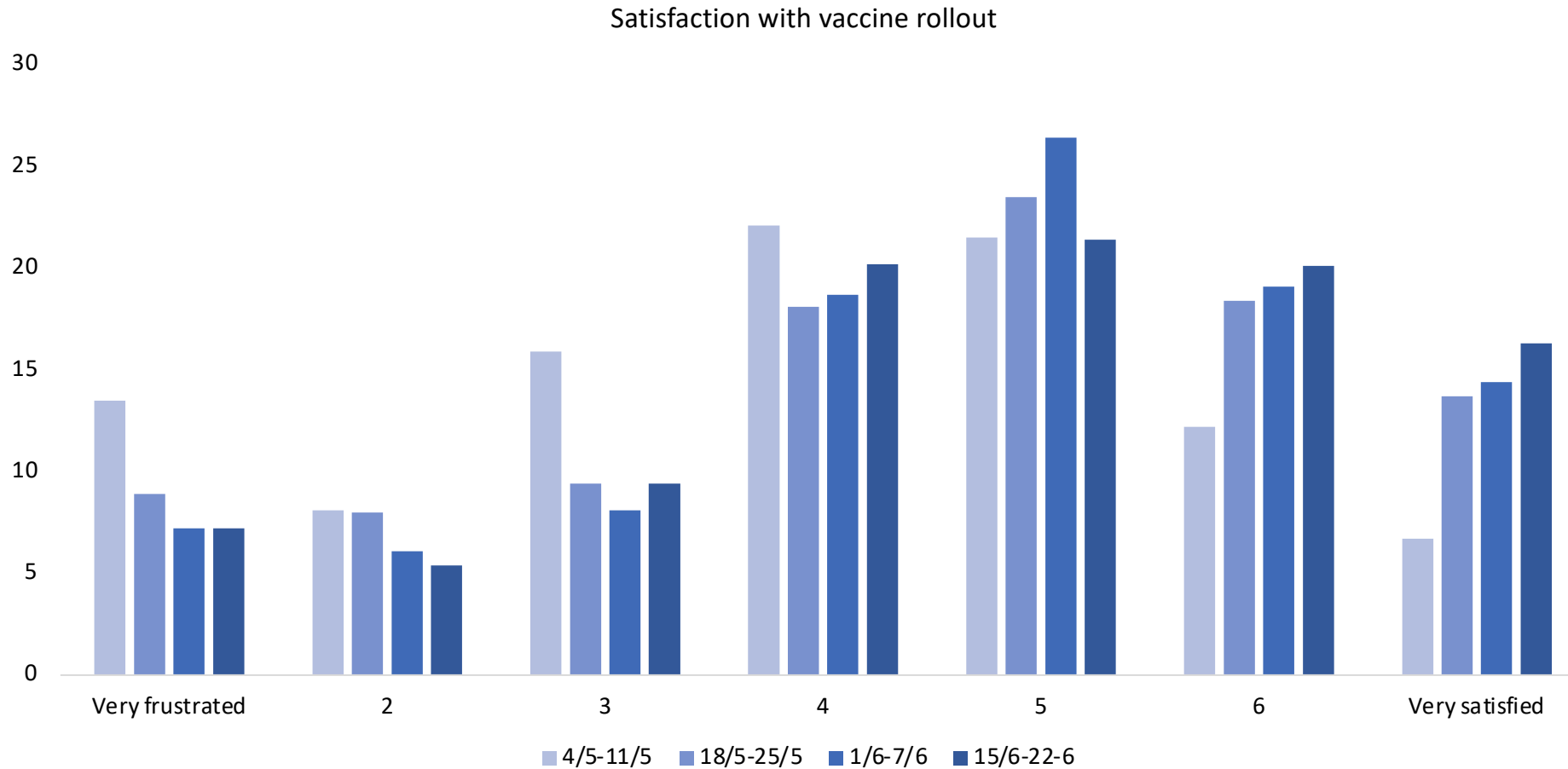
# Preference for vaccine type



*The chart shows vaccine preferences of those who have not yet had any dose of vaccine. Almost 2-in-3 (adding the first two categories in the chart) will take any vaccine offered to them, although almost half of this group do have a preference. Just over 1-in-6 of those who have not had any dose say that whether they will take the vaccine depends on which one they are offered. Among this group, the Pfizer vaccine is by far the preferred type.*

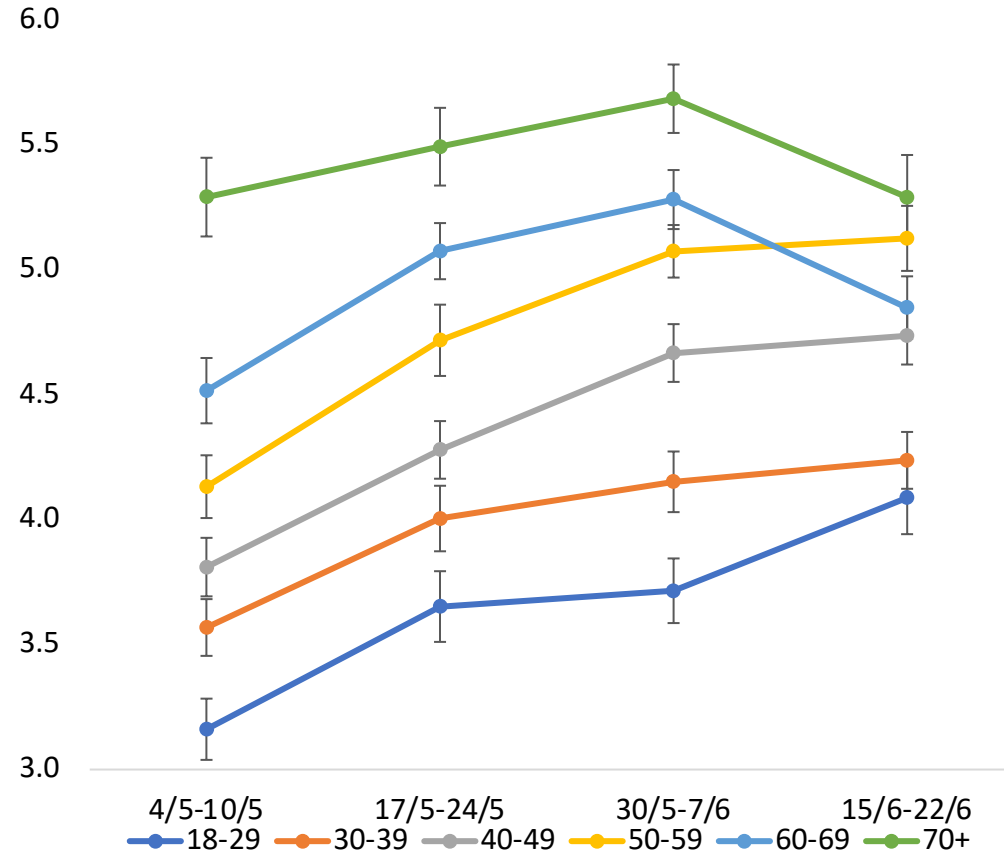
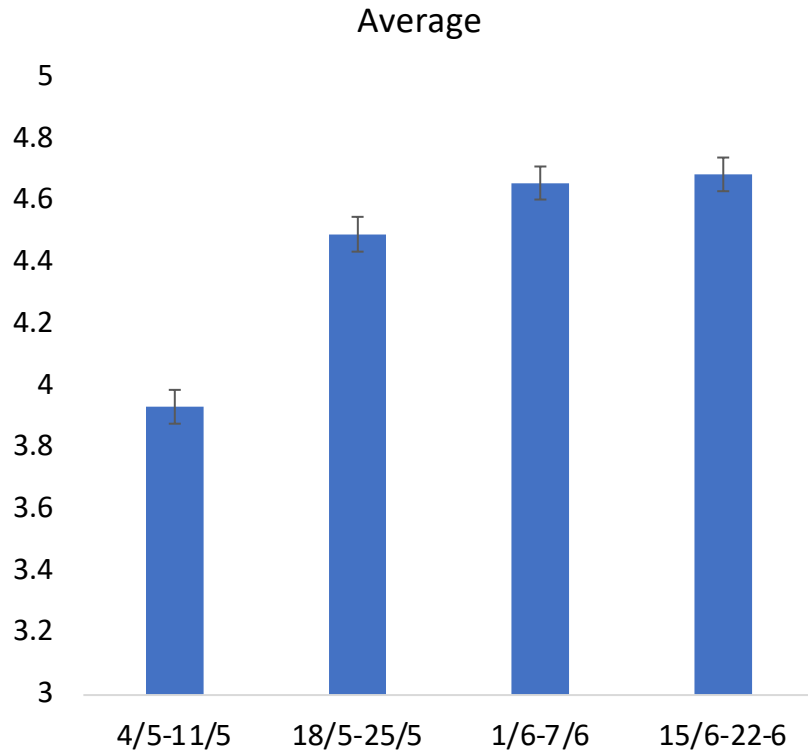


# Vaccine rollout satisfaction



*Satisfaction has stabilised after significant increases in the previous waves of SAM.*

# Rollout satisfaction by age

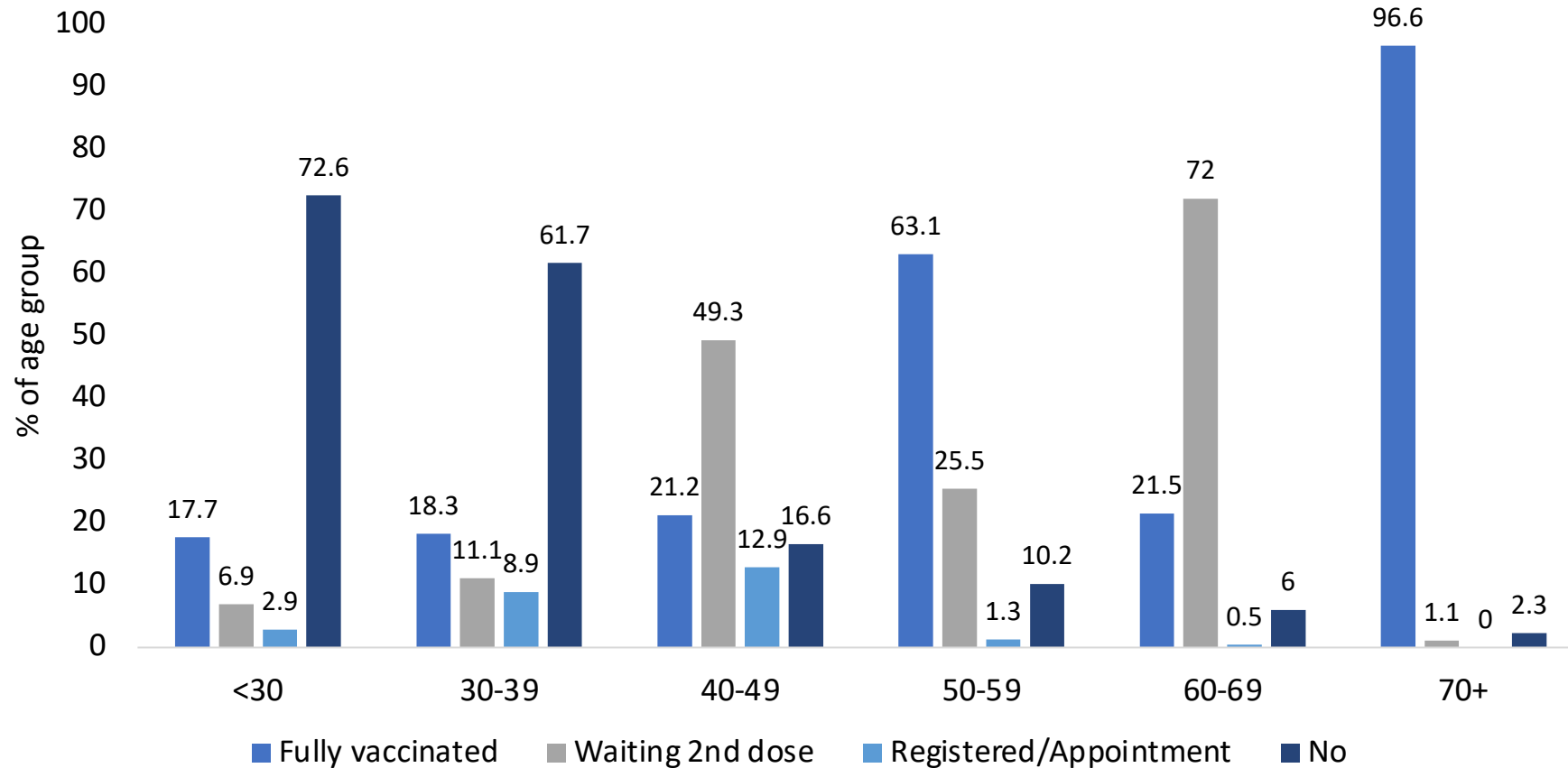


*Satisfaction is increasing among younger age groups, but has dipped among the over 60s.*



# Vaccine Status by Age

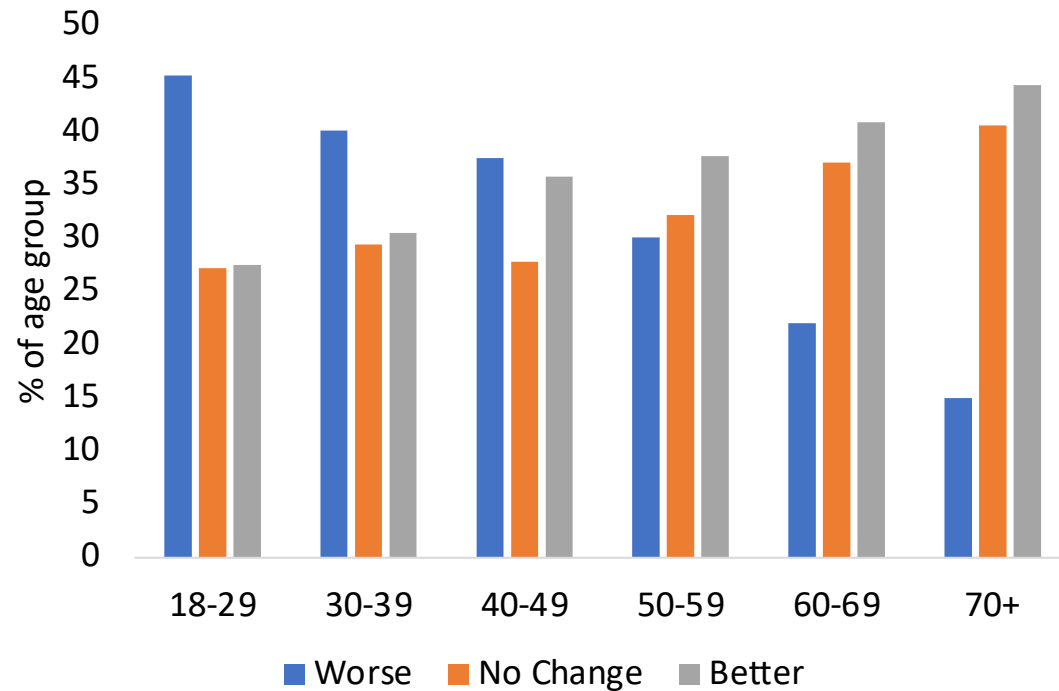
Vaccine Status by Age



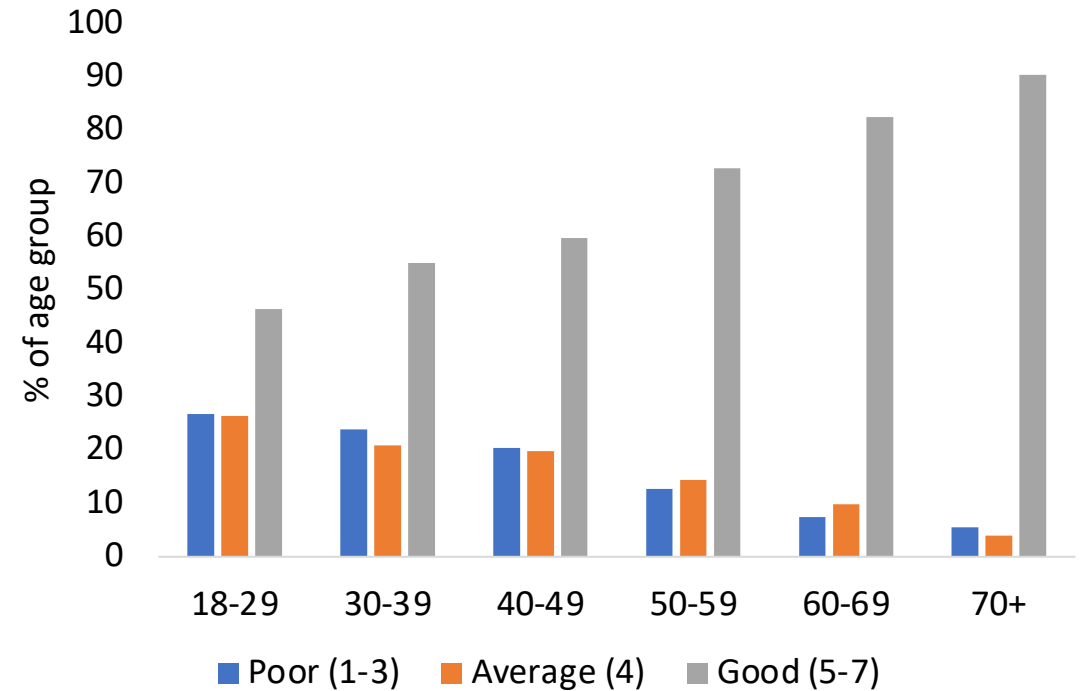
*Almost all over 70s report being fully vaccinated, alongside 63% of those aged 50-59. The largest group of 60-69 year olds and 40-49 year olds report waiting for their second dose. Intention to go to appointments among those waiting is high (6.6 out of 7).*

# Wellbeing and Age

Mental Health by Age  
(May and June only)



Recent Wellbeing by Age  
(May and June only)

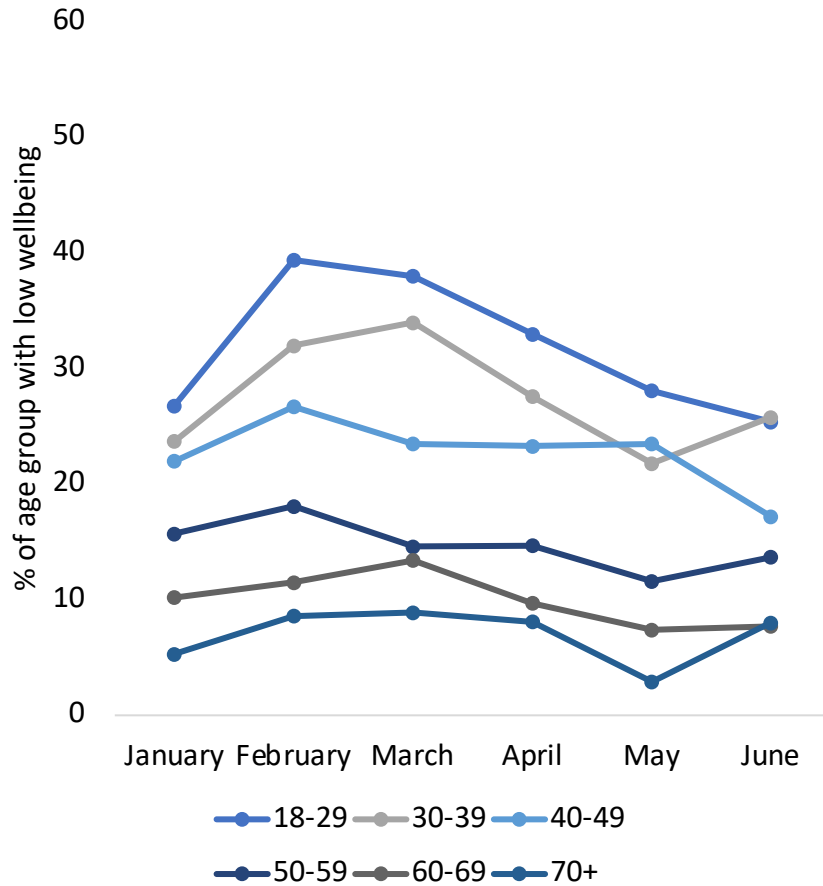


*Large age differences in wellbeing remain. Almost half of 18-29 years rate their mental health as worse now compared to before the pandemic, versus 15% of those over 70. The largest group in all ages rate their recent wellbeing as 'good', although the proportion of those over 70 is almost double that of those under 30.*

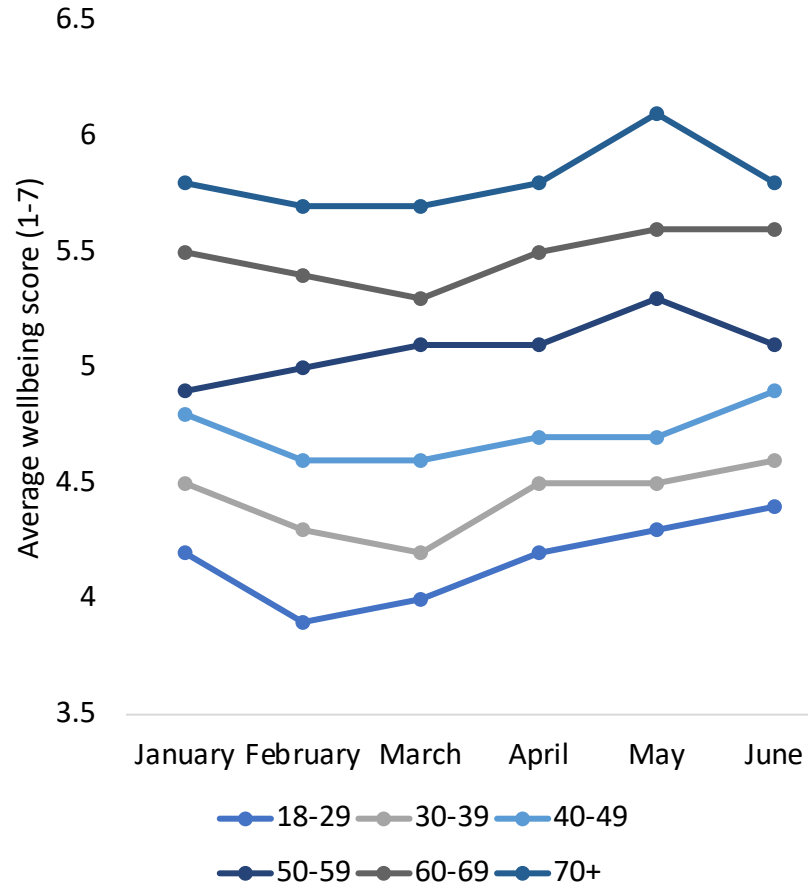


# Wellbeing and Age: Trends

Change in Low Wellbeing (1-3 of 7) by Age

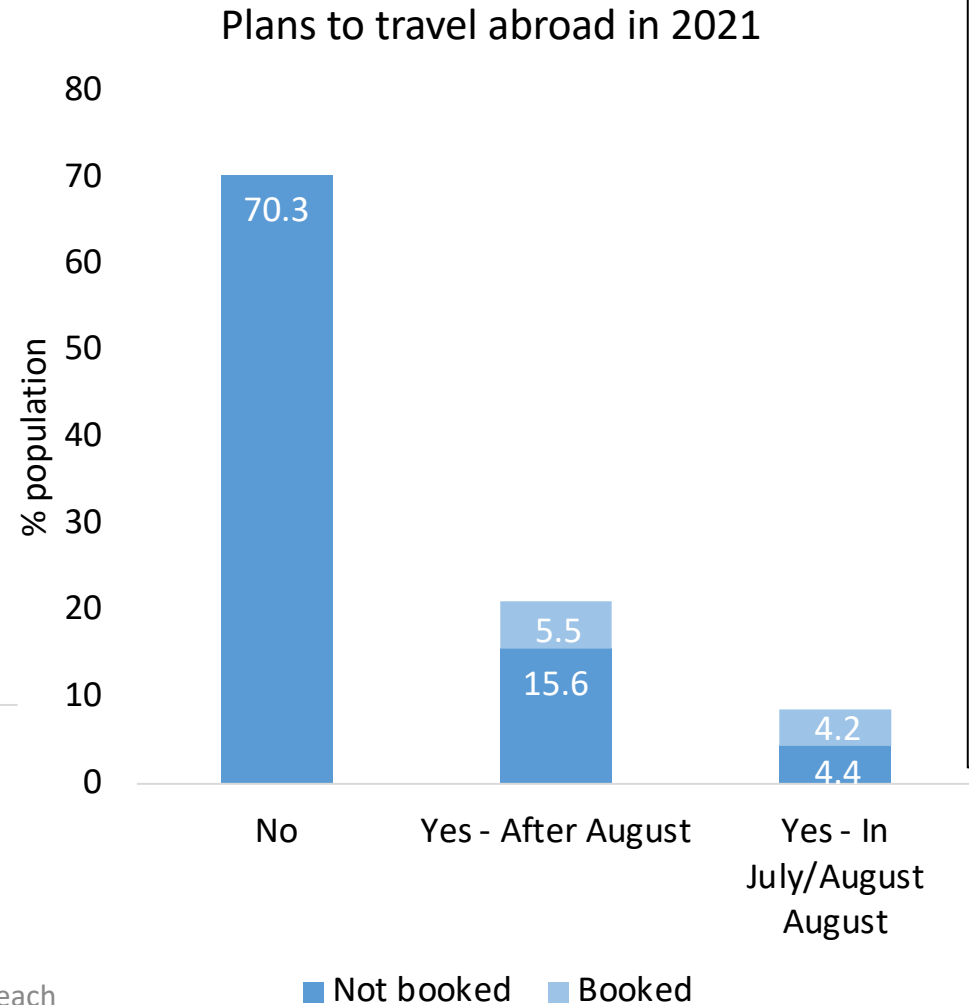
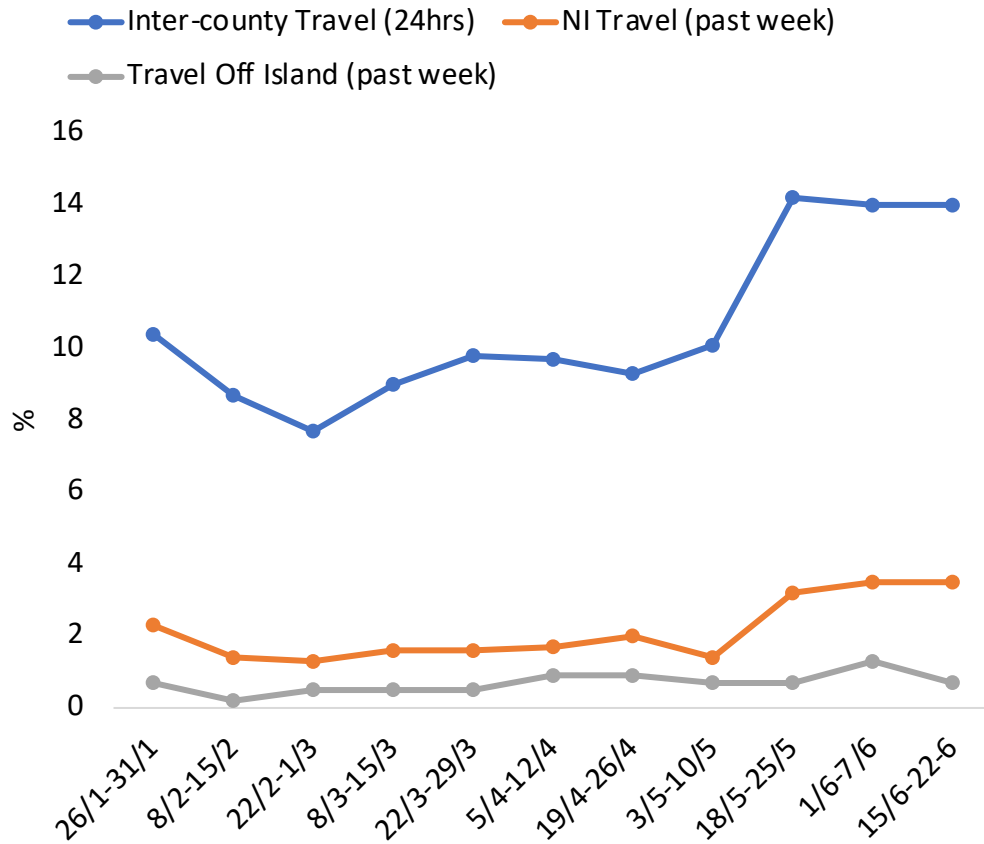


Change in Average Wellbeing by Age



*Low wellbeing peaked in February and March during on-going level 5 restrictions and has been declining since. Approx. 25% of younger people (under 40) currently report low wellbeing, compared to less than 10% of those over 60. Average wellbeing is climbing steadily among younger people following a low in February/March, but remains significantly below average wellbeing among older people.*

# National and international travel



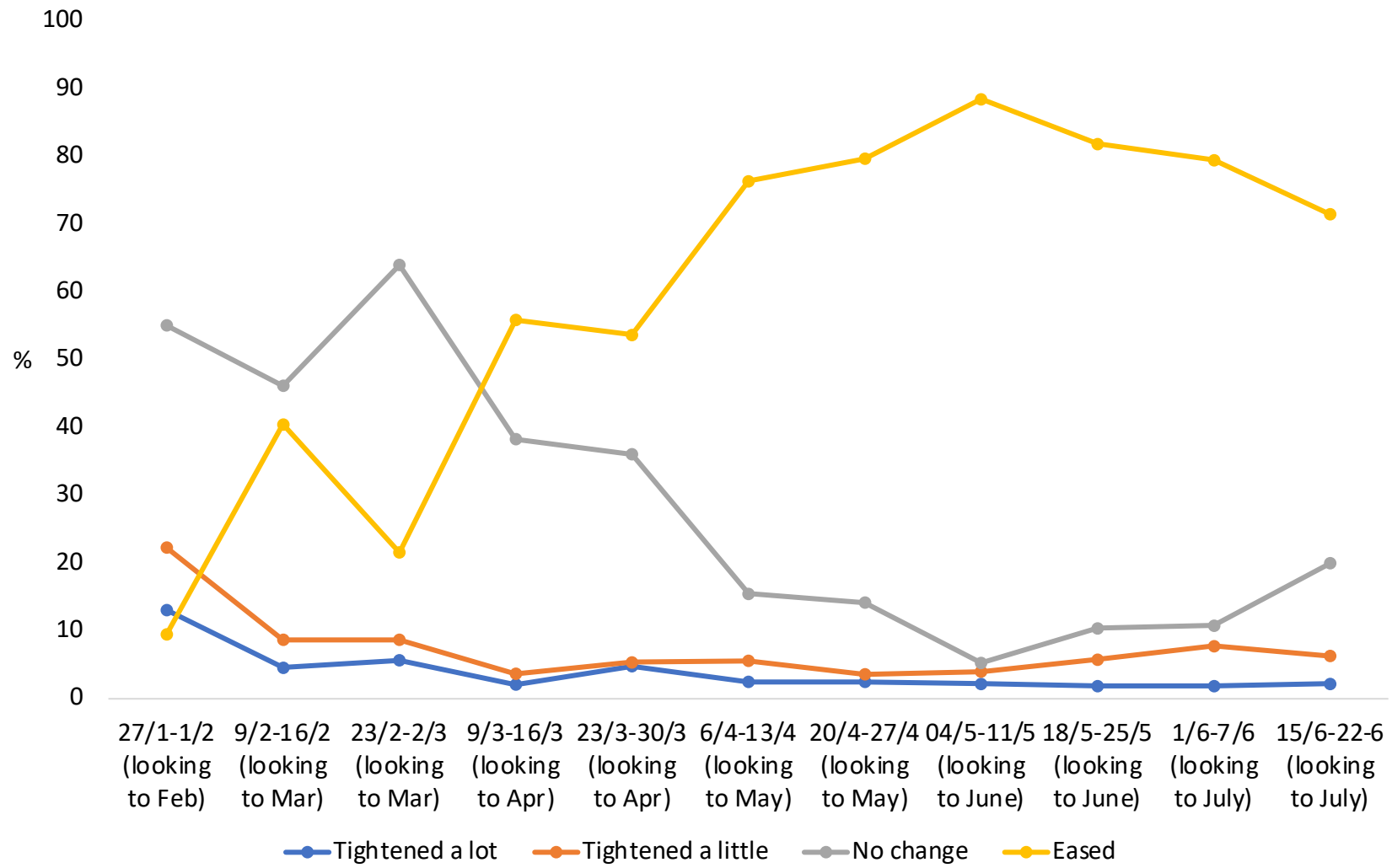
*There has been little change in the percentage of people travelling outside their county, into Northern Ireland, or outside the country since inter-county travel re-opened.*

*A majority of people don't plan to travel internationally in 2021. Most of those who do intend to travel abroad expect to wait until after the summer. Note that respondents needed to currently be in Ireland in order to take the survey.*

*Approx. half of those who have booked travel are fully vaccinated.*



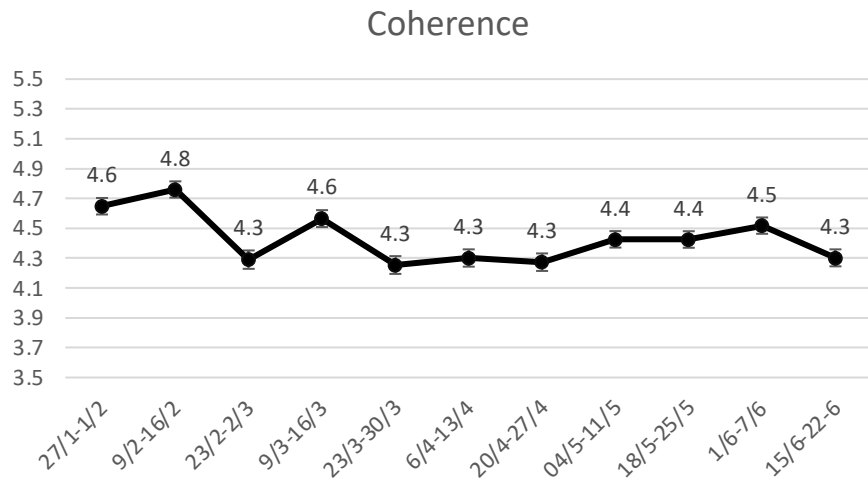
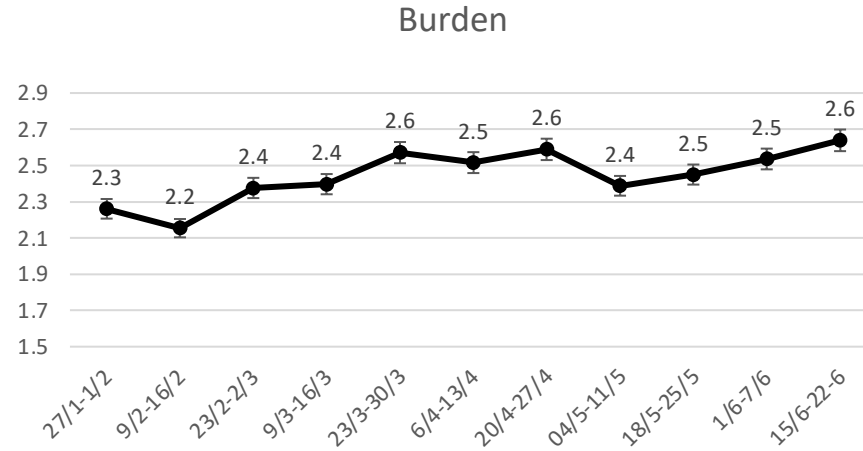
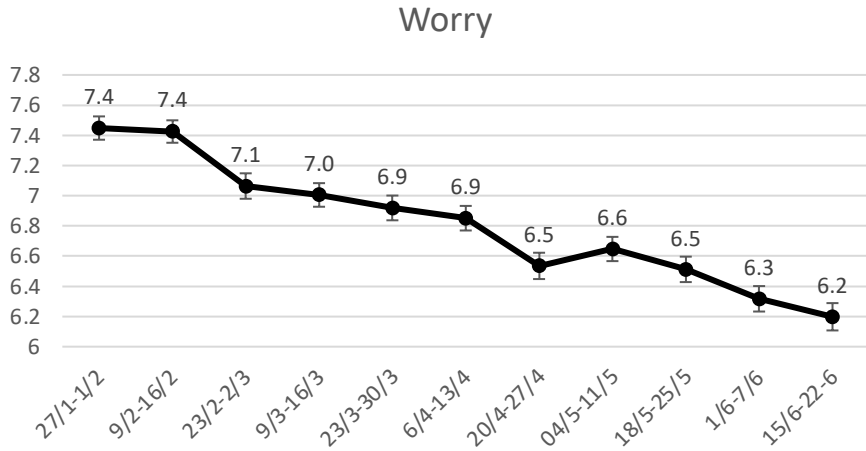
# Expectations for easing restrictions (next month)



*There has been a decline in the proportion of people expecting further easing of restrictions. The percentage of people expecting no change to restrictions in July has almost doubled from 10.8% to 20%.*



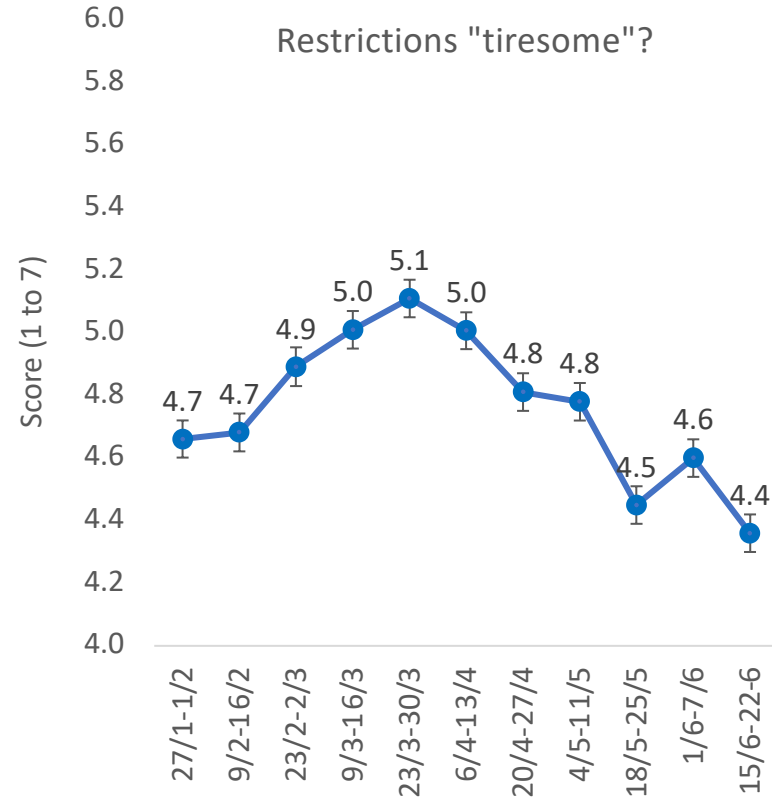
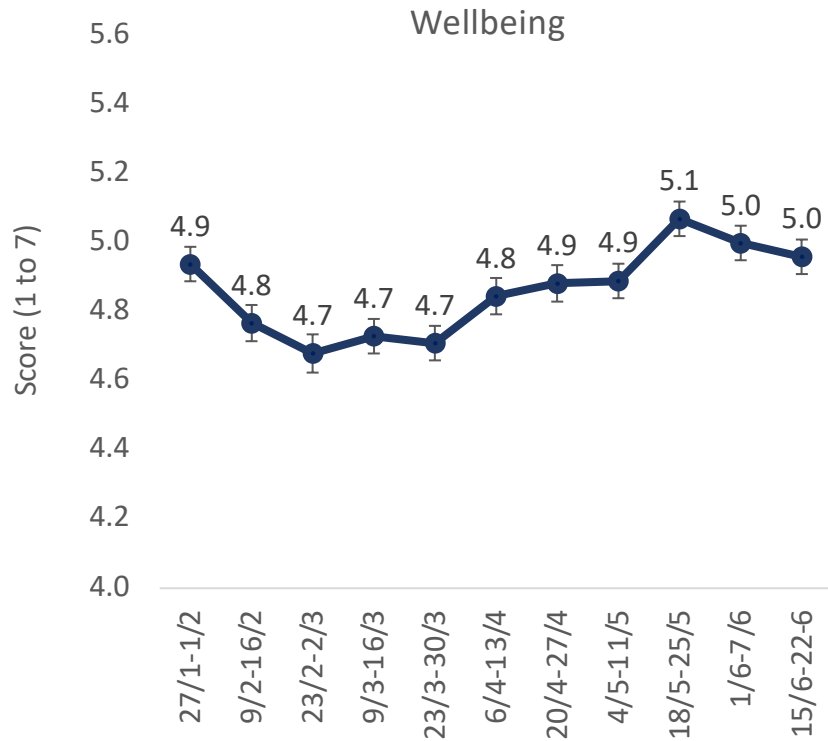
# Key psychological variables



*Overall worry has declined slowly since early May and this is matched by a slow increase in the extent to which people prioritise the burden of restrictions over preventing the spread of Covid-19. The extent to which respondents view the restrictions as coherent rather than contradictory has declined following a further easing of restrictions. These three psychological variables are all linked to the likelihood that people have a close contact, whether they engage in a social visit to another household, and how many people individuals meet from other households.*

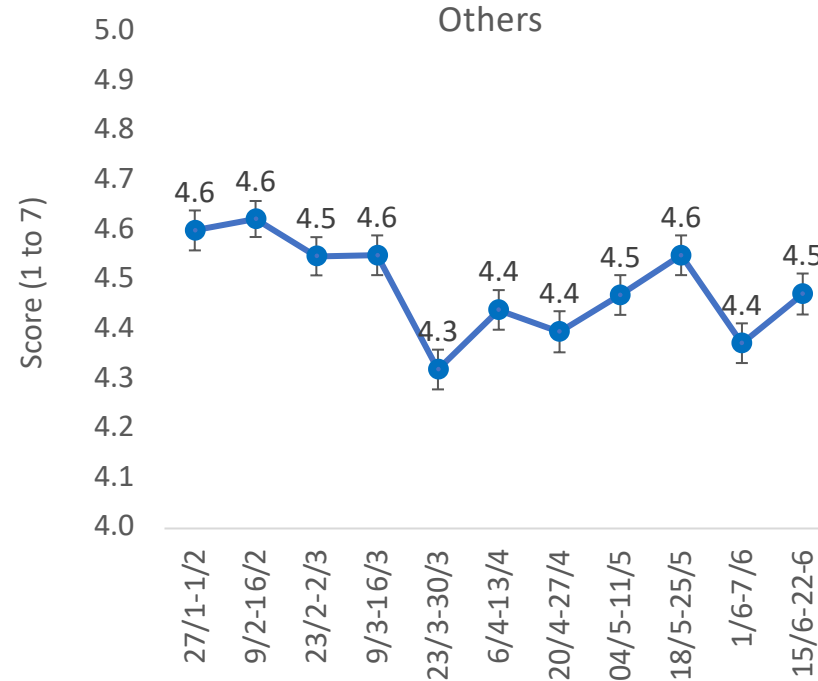
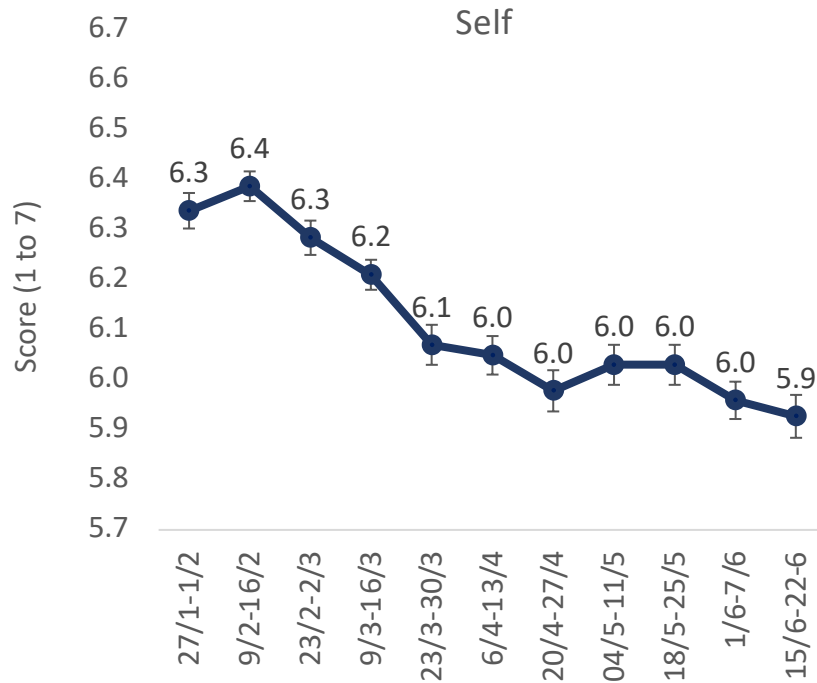


# Wellbeing and Fatigue



*There was no change in wellbeing and a significant decrease in the extent to which people say they are tired of the restrictions.*

# Compliance



*Self-reported compliance follows a downward trend but there was no significant change since early June. There was a marginally significant improvement in reports that others are following restrictions (returning to levels from late May).*