

## Social Activity Measure April 19<sup>th</sup> (Period Covered: Week beginning April 20<sup>th</sup> – April 27<sup>th</sup>)

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 seventh round, carried out in the week beginning April 19<sup>th</sup>; the first was collected in the week beginning January 25<sup>th</sup>. 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.<sup>1</sup> 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 during a period when restrictions on activity were gradually being eased. The initial announcement 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.

#### *1. There were further increases in mobility and social activity*

The proportions of the population who attended their workplace (34% during the previous week; 18% the previous day), another person's home (37% and 12%), and used transport (53% and 28%) were the highest of the seven rounds of SAM since it began at the end of January (Slides 3 and 4). The proportion visiting shops and outdoor locations remained approximately unchanged. Greater transport use was mostly down to more private car travel, but the proportion using public transport the previous day also rose to the highest level since January (6%).

#### *2. Close contacts rose sharply, including close contacts without masks*

Additional activity led to a corresponding increase in close contacts, with just over 22% of the population having had a close contact the previous day, surpassing the previous high of 18% (Slide

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<sup>1</sup> 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](http://www.esri.ie/system/files/publications/SUSTAT96.pdf)), pp.3-4.

5). The largest rise occurred in the workplace, but close contacts in homes also went up, while close contacts without face coverings increased in both contexts (Slide 5). An increased share of close contacts was reported by people who are vaccinated (26%), but close contacts increased also among those not vaccinated too (Slide 6). The oldest adults had the largest increase, mainly due to vaccinated individuals beginning to engage in social home visits, followed by the youngest, mainly at work (Slide 7). The likelihood that an individual had a close contact if they went to their workplace remained stable; close contacts went up simply because more people went to work.

### *3. Individuals met up with more people from other households*

On average, each individual met up with 2.6 people from outside of their household over a 48-hour period (Slide 8) – the highest number recorded by SAM to date. A lower proportion (44%) met no-one from another household during the previous 48 hours, suggesting that some of the previously most cautious people have begun to meet up with others. There remain large individual differences, with 19% meeting up with three or more people and 12% meeting seven or more. The share of meetings undertaken by vaccinated individuals increased to 27%, but there was also an increase among people who have not been vaccinated (Slide 9). The increase in meetings was greatest among workers and students (Slide 10).

### *4. There was a substantial increase in social visits to homes, mainly driven by people who are vaccinated*

The proportion of the population who had visited another person's home the previous day went up from 22% two weeks earlier to 27%. This increase was entirely due to the proportion engaging in social visits, which rose from 12% to 17% (Slide 11). However, compared to two weeks earlier, a higher proportion of these visits were undertaken outdoors, with social distancing, and/or good ventilation (Slide 11). The bulk of the increase was due to vaccinated people (Slide 12), who now account for 32% of such social visits. Nevertheless, there was also an increase in social visits to other homes among those who are not vaccinated. Overall, the increase was strongly concentrated among older adults (Slide 13), in keeping with the effect of increased vaccination.

### *5. People are feeling better*

There has been a sustained improvement in self-reported wellbeing, following the low levels reported in February and March after Level 5 was extended, which has been accompanied reports of less fatigue in coping with the restrictions (Slide 14).

### *6. Self-reported compliance has continued to fall*

While the majority still report following public health guidance, self-reported compliance has continued to fall (Slide 15).

### *7. Changing patterns in the drivers of behaviour*

Overall worry about the virus has fallen further and remains a strong predictor of behaviour, but somewhat less so than in previous rounds (Slide 16). This may reflect the influence of vaccination (and perhaps expectation of vaccination), which is increasing the social activity of people who, until now, have engaged in little social interaction during 2021. The perceived coherence of the restrictions and how people trade off the burden of restrictions against preventing the spread of Covid-19 both continue to influence behaviour. However, as restrictions are lifted, the influence of the former has grown stronger and the latter somewhat weaker (Slides 17 and 18).

*6. Expectations of further easing of restrictions in May remain strong*

The large majority of people (80%) expected restrictions to be further eased in May (Slide 19), in keeping with the announcement on 29<sup>th</sup> April (after these data were gathered). Just 6% expected any kind of tightening.

*7. Willingness to receive the vaccine remains high and stable*

Support for the vaccine remains strong, with approximately 80% of the population having either received a dose already or intending to receive the vaccine (Slide 20). The majority of the rest are unsure, with consistently less than 10% saying that they will not take the vaccine.

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