



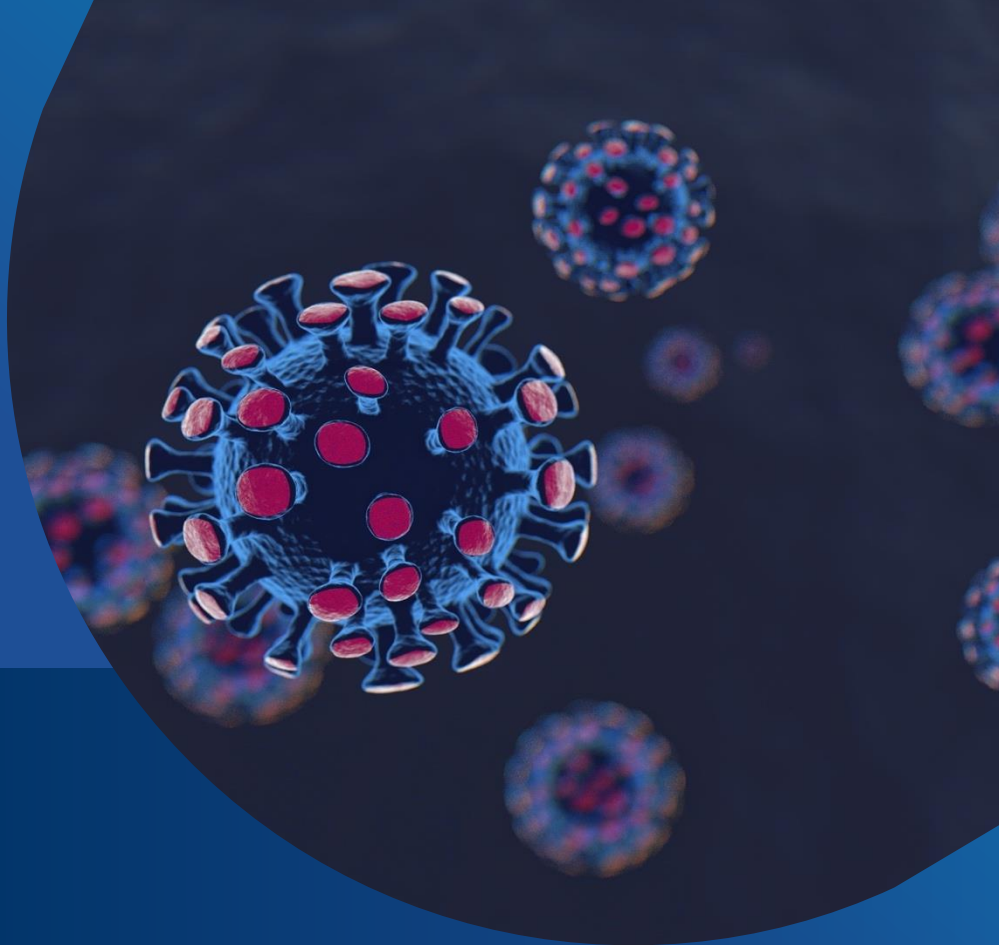
Your Weekly Briefing

COVID-19

U.S. Survey Results

WEBINAR 3

Perceived Risk and Threat





WEBINAR 1

May 6

Face Coverings and
Social Distancing



WEBINAR 2

May 13

Knowledge



WEBINAR 3

May 20

Perceived Risk
and Threat



WEBINAR 4

May 27

Vaccination



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- How do Americans perceive the threat of COVID-19?
- Have perceptions of threat shifted over time?
- Are threat perceptions linked to COVID-19-related behaviors?
- What are implications for these findings for communication and practice?



- Probability-based, web-based panel designed to be representative of U.S. households
- Wave 1: Feb 28–March 2, 2020 (n = 1,021)
- Wave 2: April 10–13 & 17–20, 2020 (n = 2,279)
- Weighted to represent the U.S. population

The online survey collected information about perceptions of risk and threat, knowledge, attitudes, and mitigation behaviors related to COVID-19.

Added new survey items as issues emerged.



Respondent Characteristics for Wave 2 (n = 2,279)



Male **48%**
Female **52%**



White **78%**
Black **12%**
Other **10%**



Hispanic **16%**
Not Hispanic **84%**



Northeast **18%**
Midwest **21%**
South **38%**
West **24%**



<\$50,000 **32%**
\$50,000–\$99,999 **31%**
\$100,000–\$149,999 **17%**
≥ \$150,000 **21%**



Excellent/Very Good **50%**
Good **35%**
Fair/Poor **15%**



Employed **65%**
Not Employed **35%**

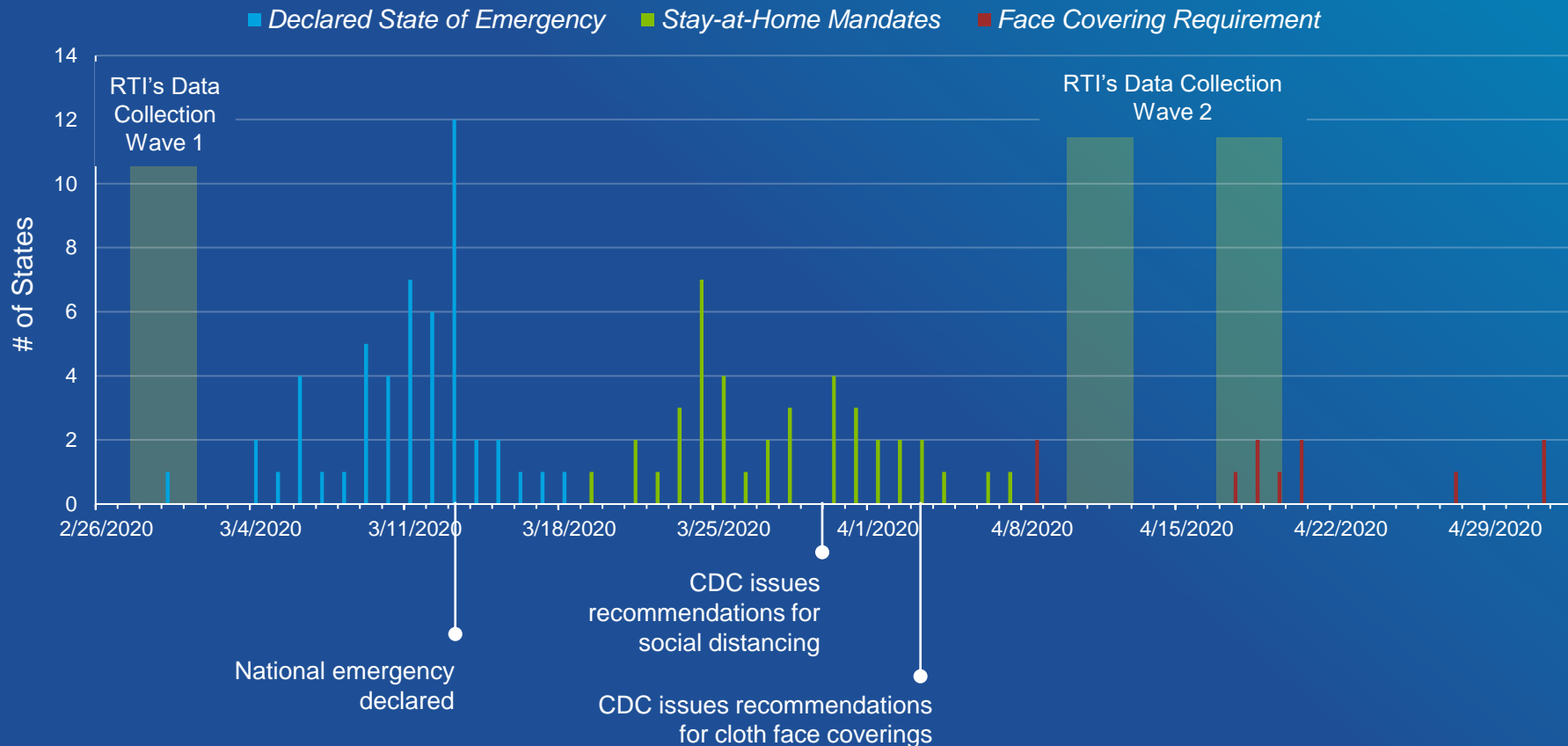


18–24 **10%**
25–34 **18%**
35–49 **24%**
50–64 **26%**
65+ **22%**



Less than High School **11%**
High School **28%**
Some College **28%**
Bachelor's Degree or Higher **33%**

Timeline





What Can Social and Behavioral Sciences Offer?

Perceived Threat

Evaluation of both the severity and vulnerability of a situation.


“What level of threat do you think the Coronavirus poses to each of the following?”

Self/Family



Vulnerable Others



Perceived Risk	Worry
Beliefs about the chances or likelihood of becoming infected; also known as <i>perceived susceptibility</i> .	Continuous thinking about an impending negative event; emotional reaction. 
"I am likely to get the coronavirus."	"I am worried about getting the coronavirus."

Do Threat Perceptions Vary by Subgroups?



Age



Race and
Ethnicity



Education



U.S. Region
(NE, MW, W, S)

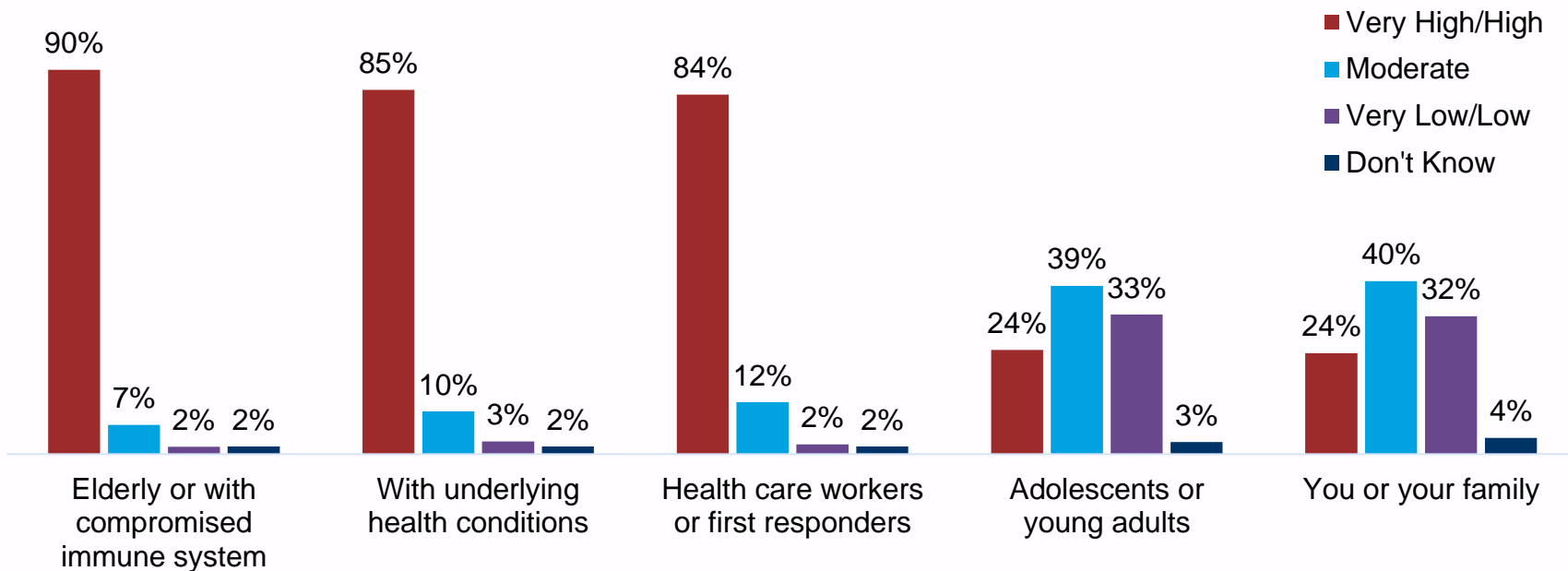


High-Risk for
Severe Illness



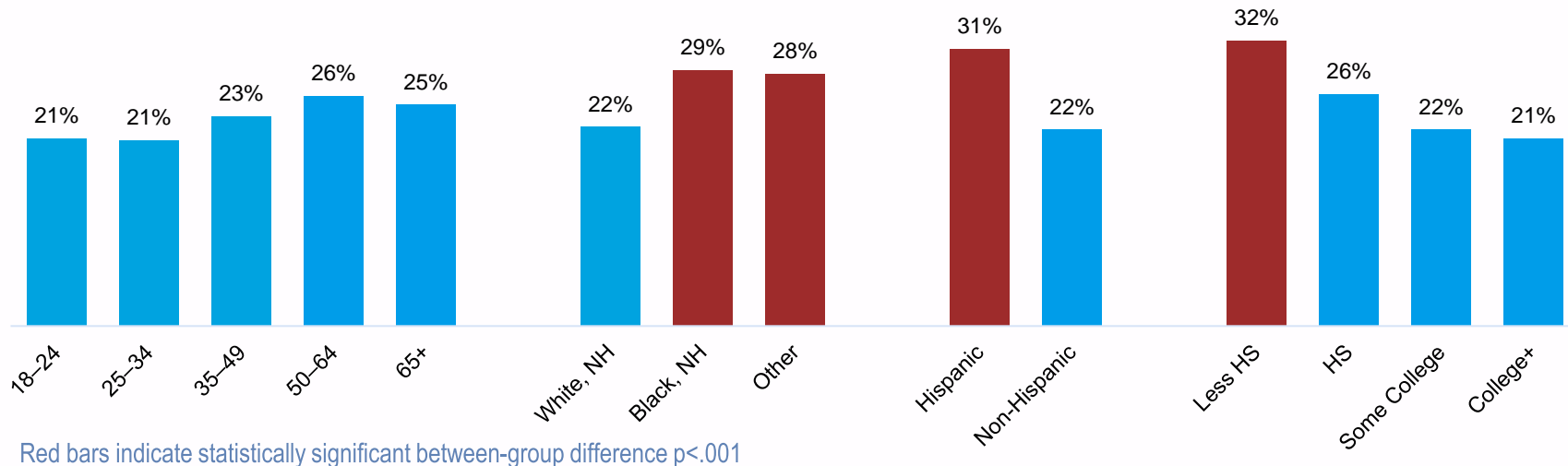
How Do Americans Perceive the Threat of COVID-19?

Americans perceive COVID-19 as a greater threat to vulnerable populations than to themselves or family.



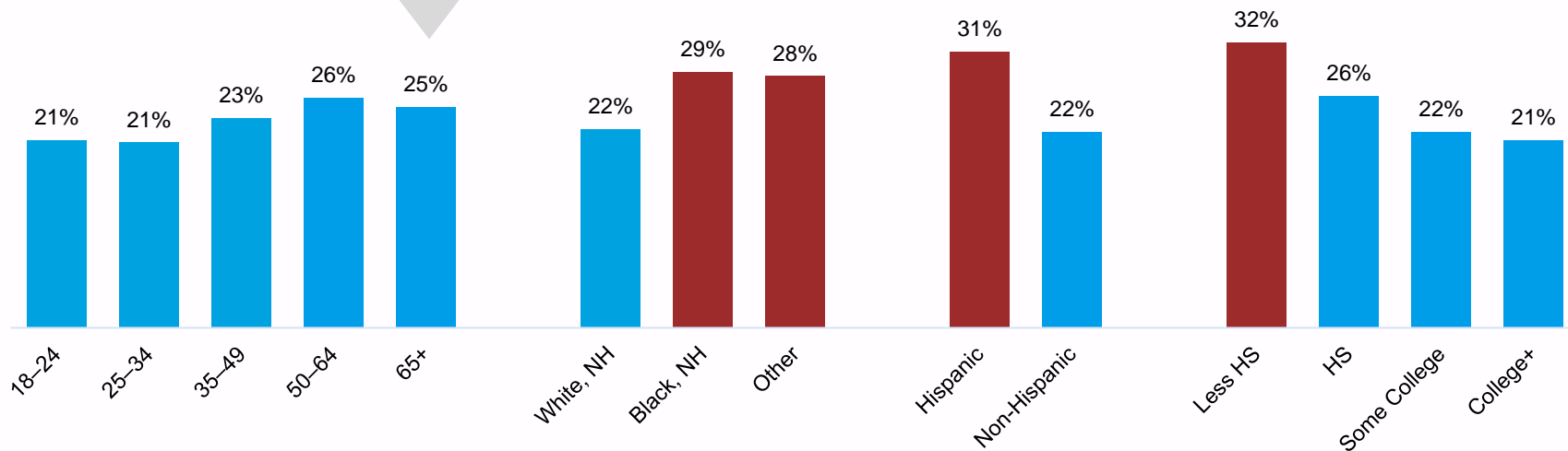
% Perceive COVID-19 as Very High/High Threat to Self/Family

Non-Whites, Hispanics, and those with less than a high school education perceive COVID-19 a greater threat to self/family.



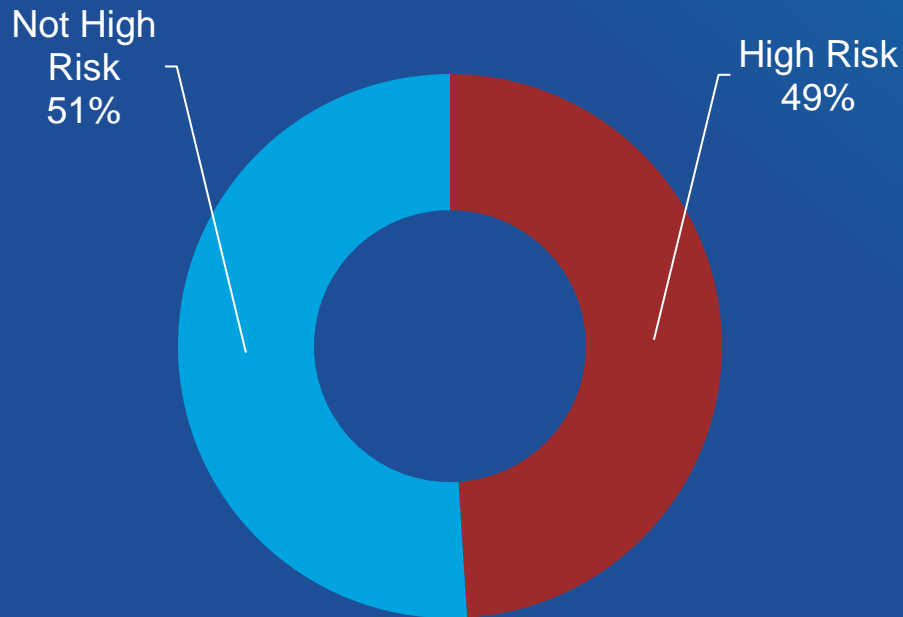
% Perceive COVID-19 as Very High/High Threat to Self/Family

Older Americans did not differ from other age groups in their perceptions of threat to self/family.



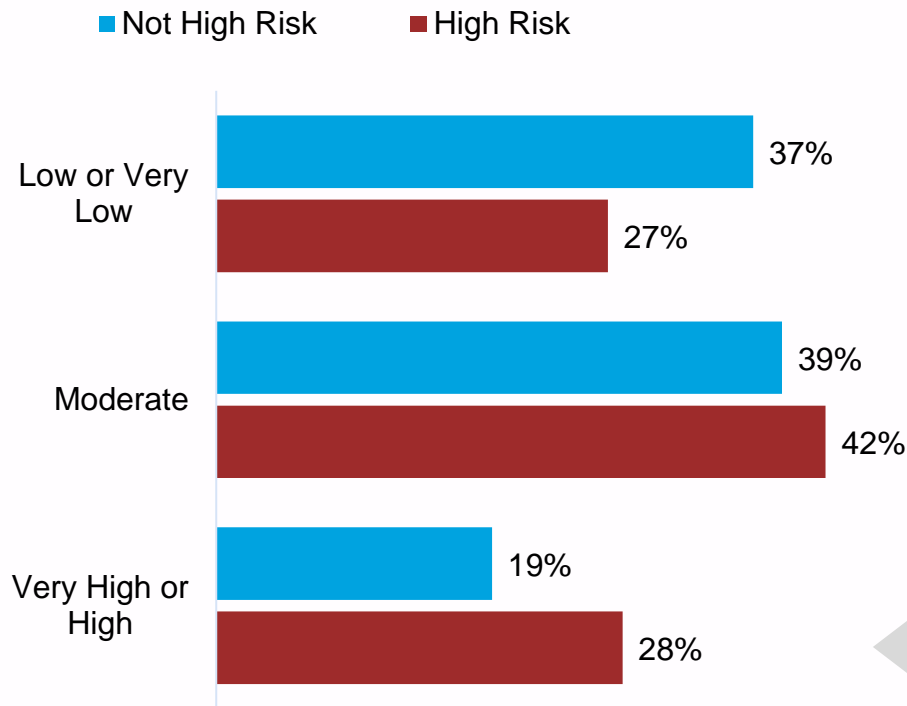
Red bars indicate statistically significant between-group difference $p < .001$

High Risk for Severe Illness



- Age 65+
- Severe obesity
- Chronic kidney, liver or lung disease
- Compromised immune system
- Diabetes
- Serious heart condition
- Moderate-severe asthma
- Neurological condition

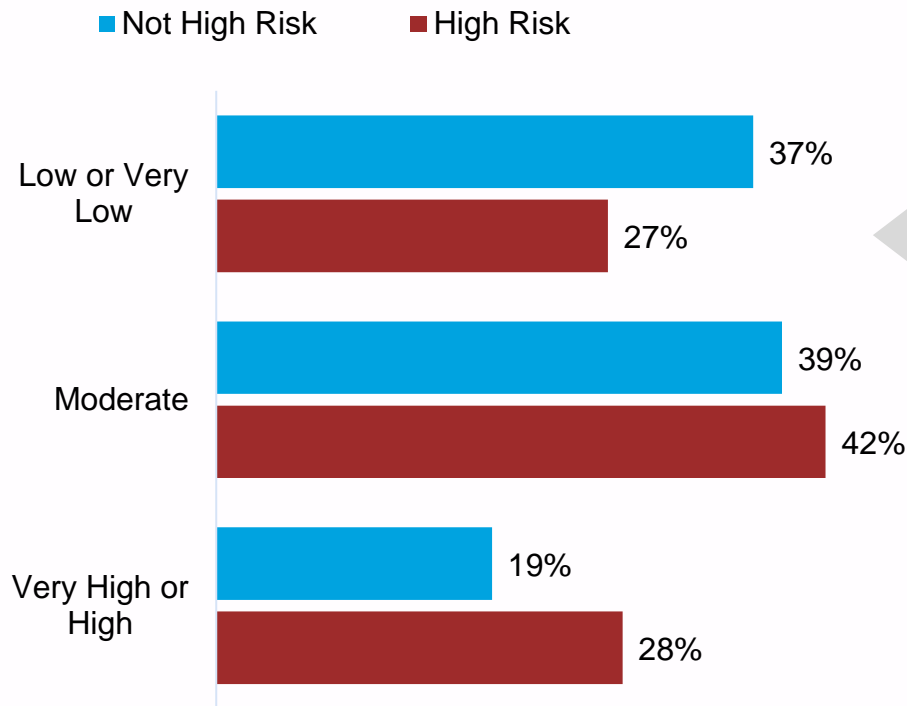
% Perceive COVID-19 as Very High/High Threat to Self/Family



Those at higher risk for severe illness are somewhat more likely to perceive COVID-19 as a threat to self/family.

Comparison statistically significant $p < .001$

% Perceive COVID-19 as Very High/High Threat to Self/Family



Yet, **27%** of those at high risk of severe illness from COVID-19 described the threat to themselves or family as “low” or “very low.”

Optimism Bias?

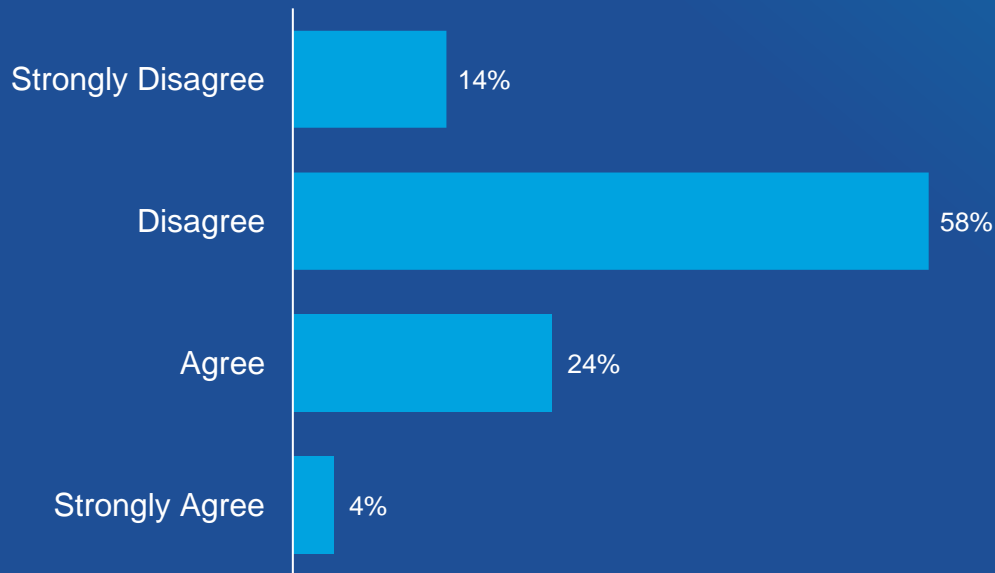
Comparison statistically significant $p < .001$

“

At my age, eighty-five,
I have too many other
medical problems and
am too old to have this
problem visit me.

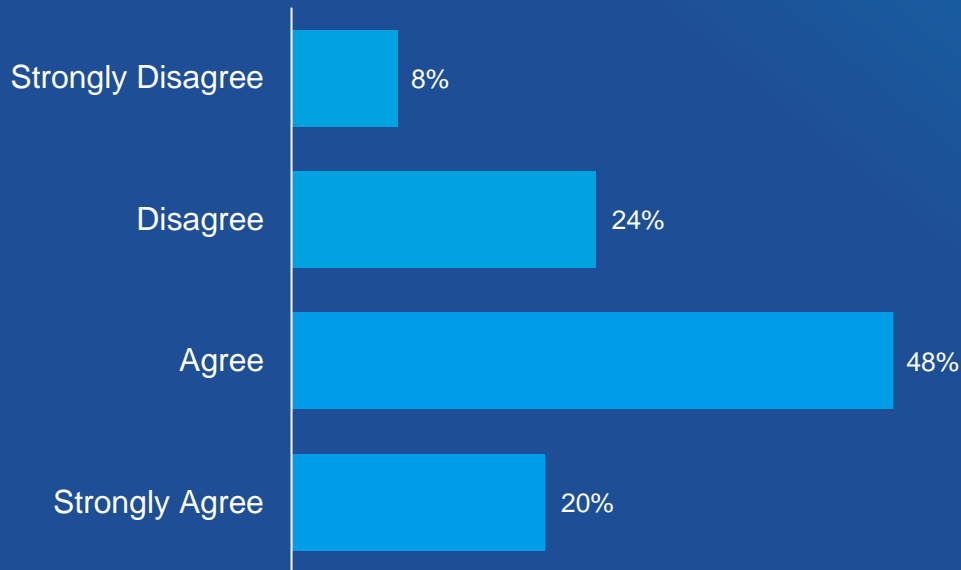
”

I am likely to get the Coronavirus.



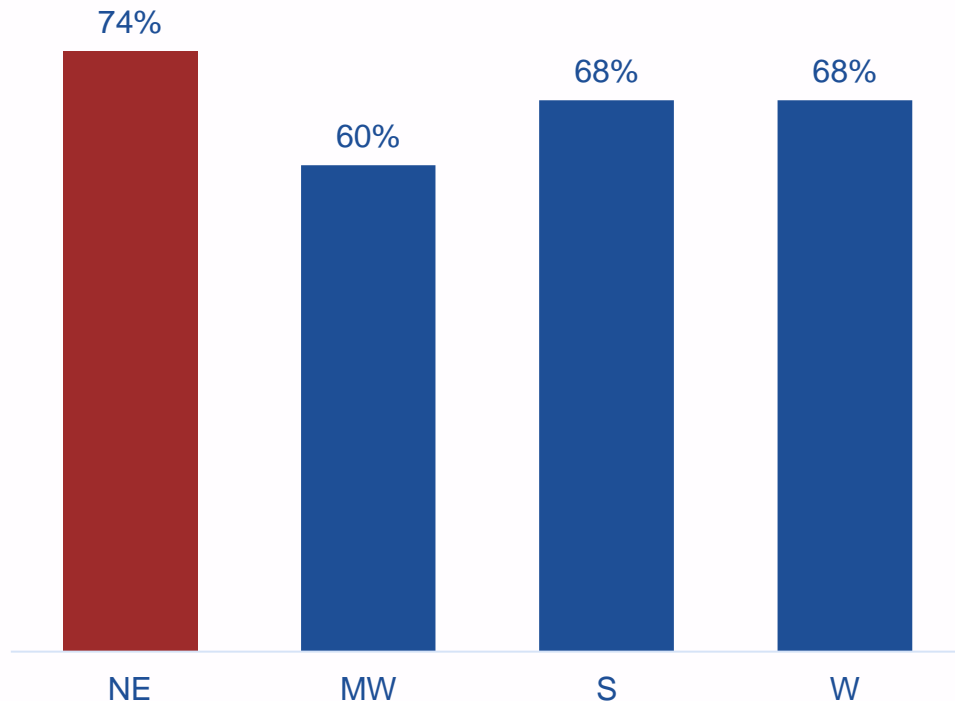
A majority do not think they are likely to get COVID-19...

I am worried about getting the coronavirus.



...but a fair
amount worry
about getting it.

% Worry About Getting COVID-19 by U.S. Region



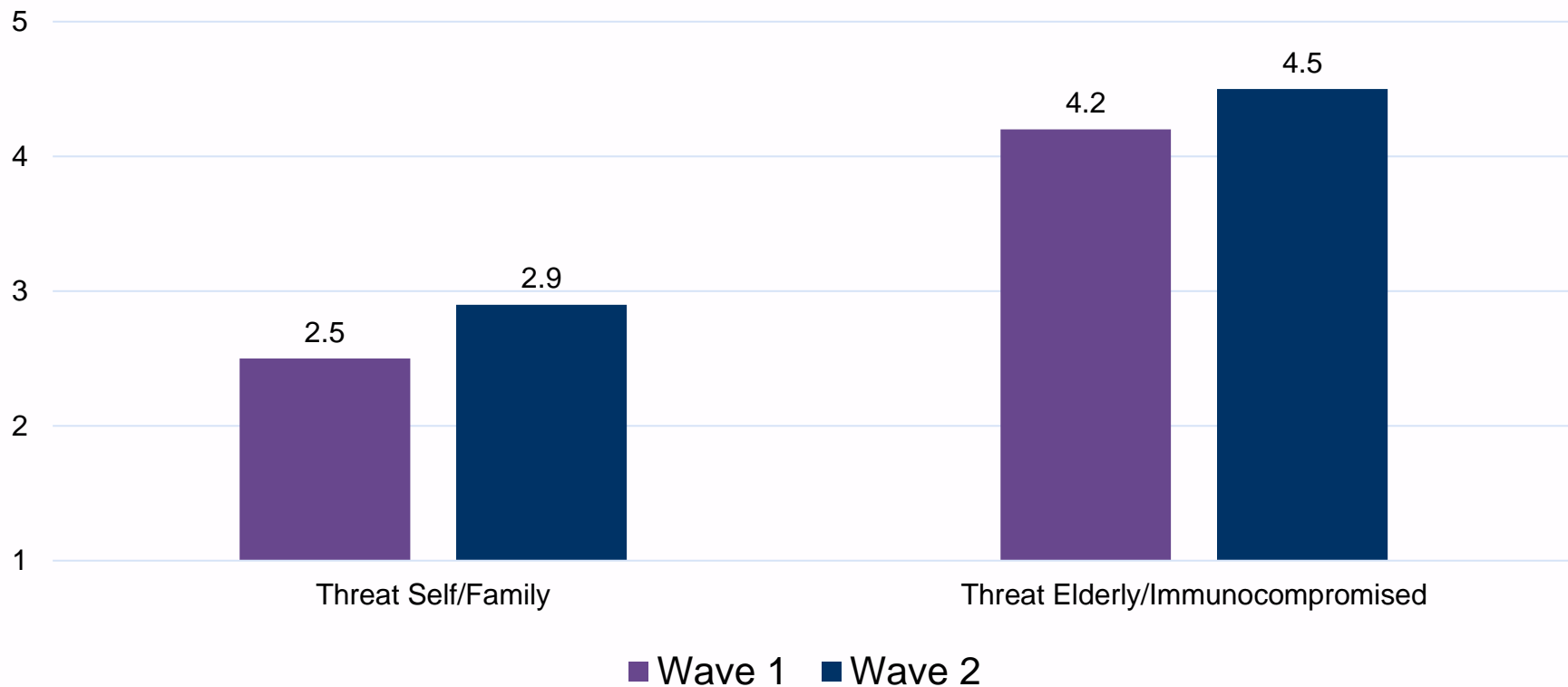
Those living in the Northeast expressed more worry about getting COVID-19.

Comparison statistically significant $p < .05$



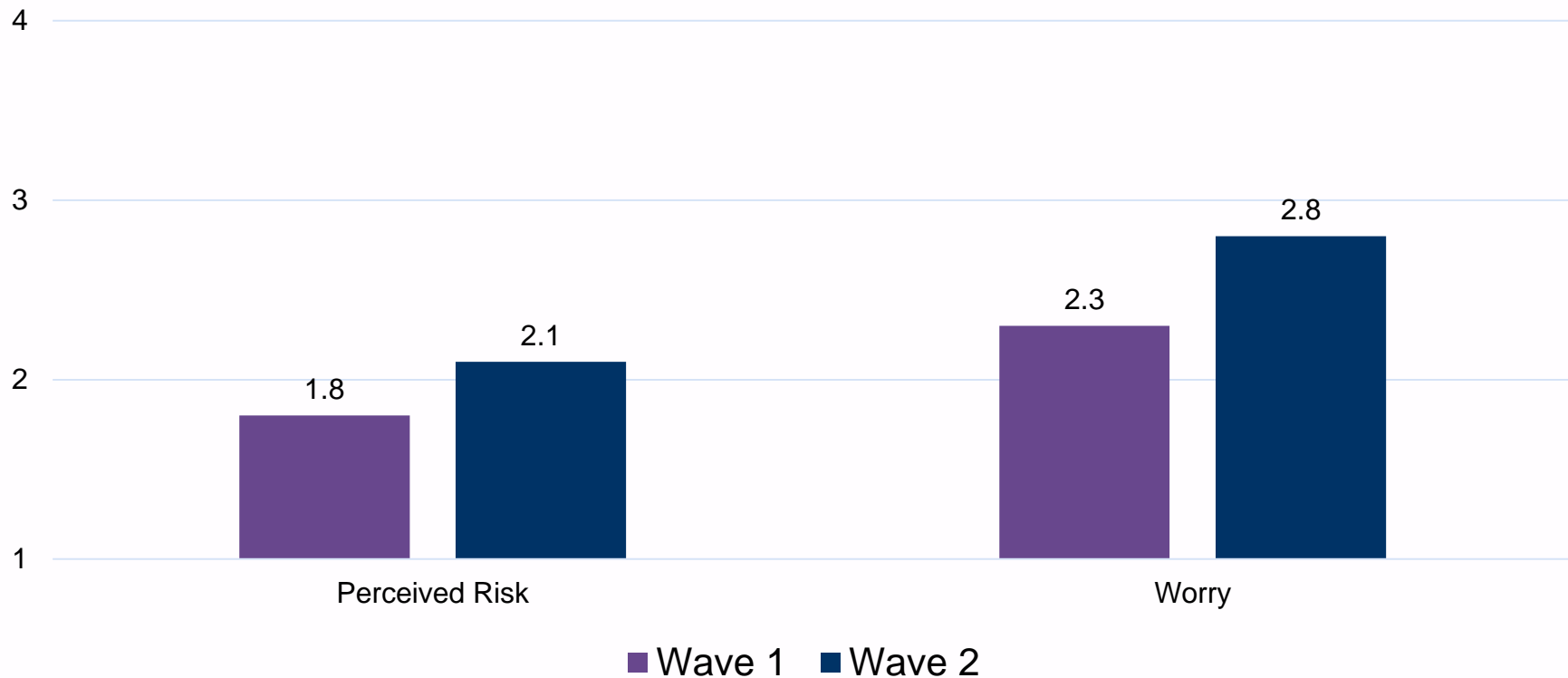
Have Threat
Perceptions
Changed over
Time?

Mean Perceived Threat Scores Increased over Time



$p < 0.001$. Note: Adjusted means control for gender, age, race/ethnicity, education, income, employment status, health insurance, region, self-reported health status, risk status, and proximity to the coronavirus.

Mean Perceived Risk and Worry Increased over Time



$p < 0.001$. Note: Adjusted means control for gender, age, race/ethnicity, education, income, employment status, health insurance, region, self-reported health status, risk status, and proximity to the coronavirus

“



I don't want to put anyone in harm's way and affect their health, especially with the increasing death rates right now.



We don't want our family to get sick, especially since some are older and might not make it if they get sick.

”



Does Perceived Threat Motivate Behavior?

12-Item Behavioral Index

Washing my hands with soap and water more often

Using more disinfectants, such as hand sanitizers and cloth wipes

Wearing a face mask while out in public

Avoiding travel on subways, buses, taxis, and Ubers/Lyfts

Wearing a cloth face covering while out in public

Sheltering-in-place/staying home

Not letting people who do not live with me enter my home

Not visiting family and friends in their homes

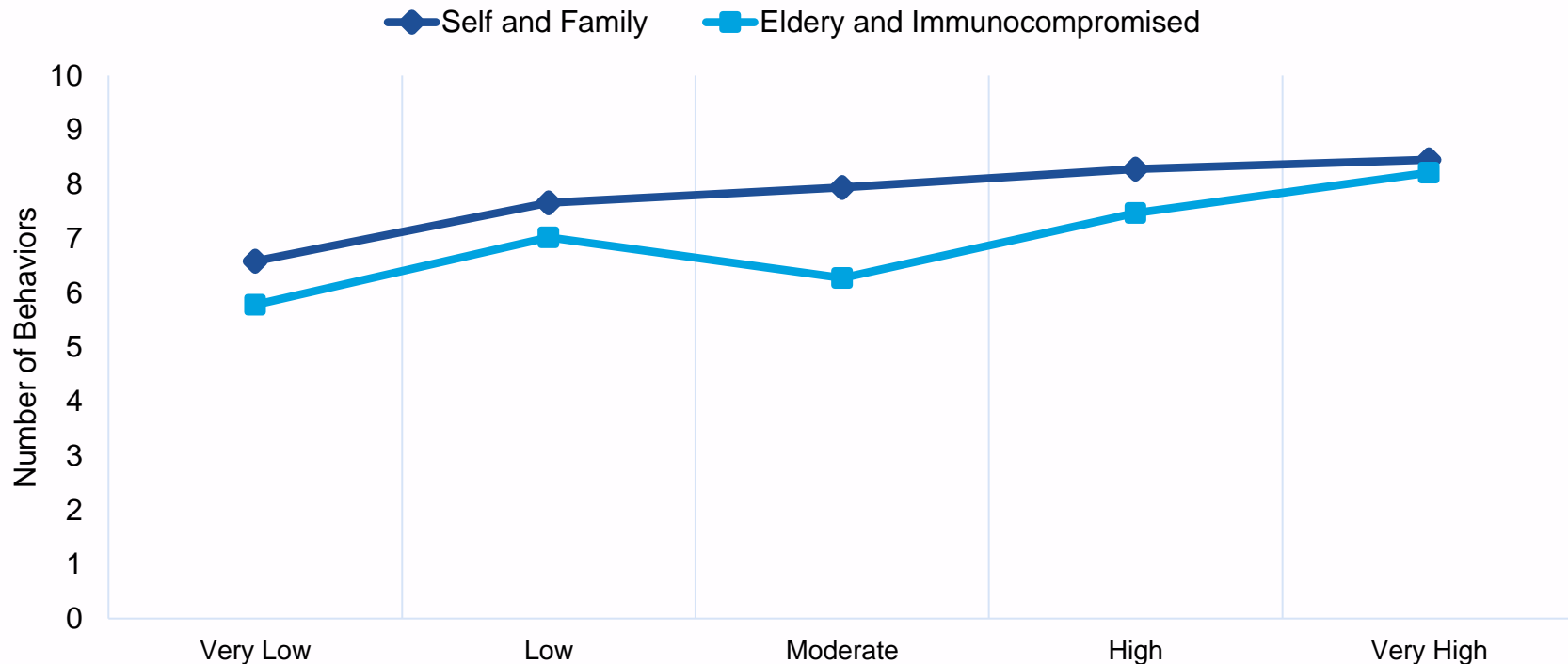
Planning to wear face covering

Practicing social distancing

Postponing or canceling non-essential medical appointments, procedures, or surgeries

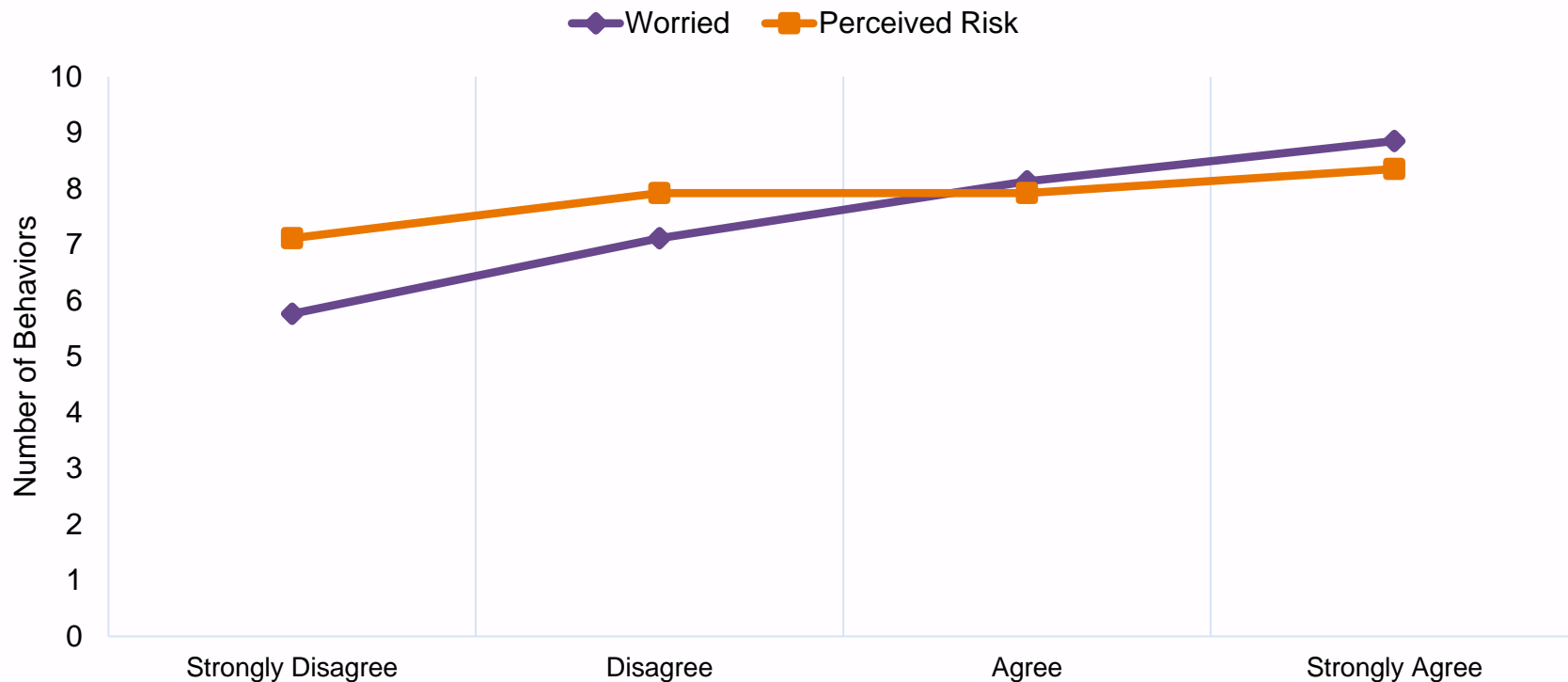
Wearing protective gloves while out in public

More Perceived Threat to Self and Others = More Behaviors



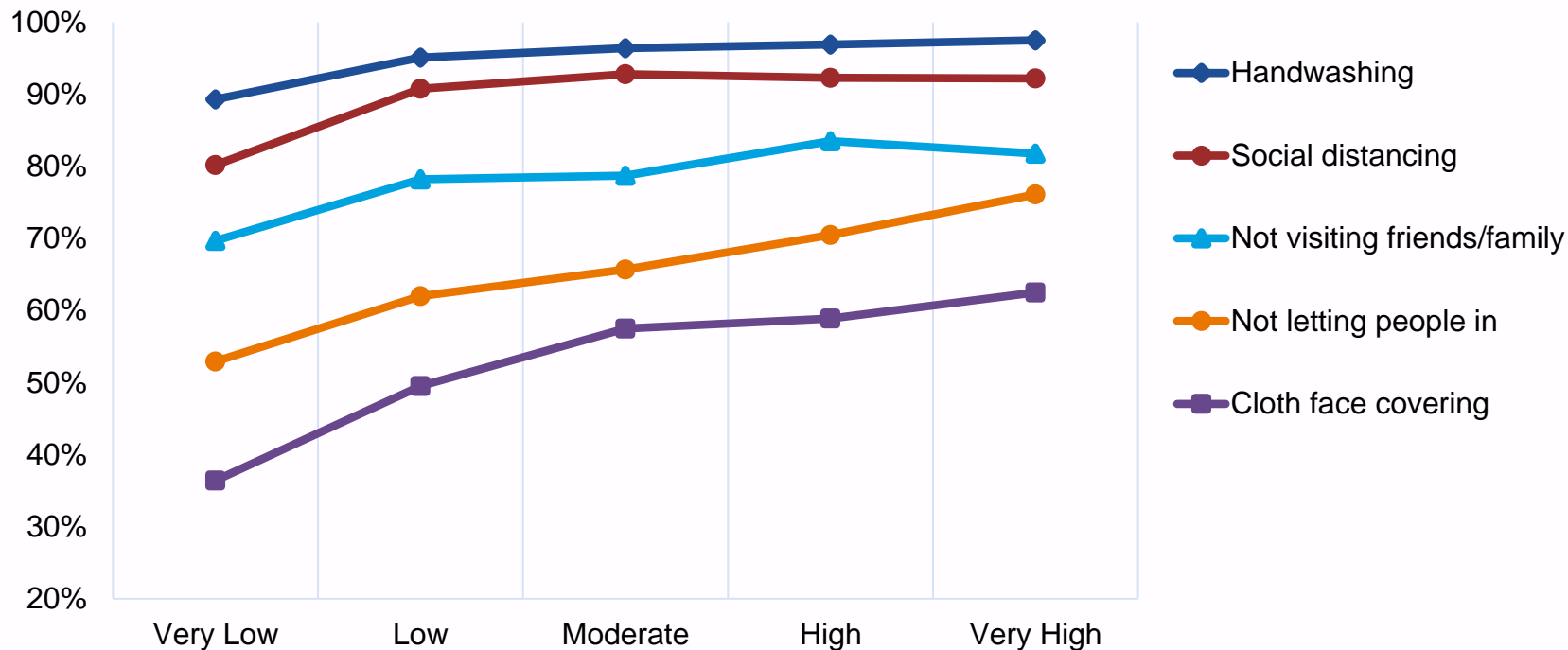
$p < .001$. Note: Adjusted for gender, age, race/ethnicity, education, income, employment status, health insurance, region, self-reported health status, risk status, and proximity to the coronavirus

Higher Perceived Risk, More Worry = More Behaviors

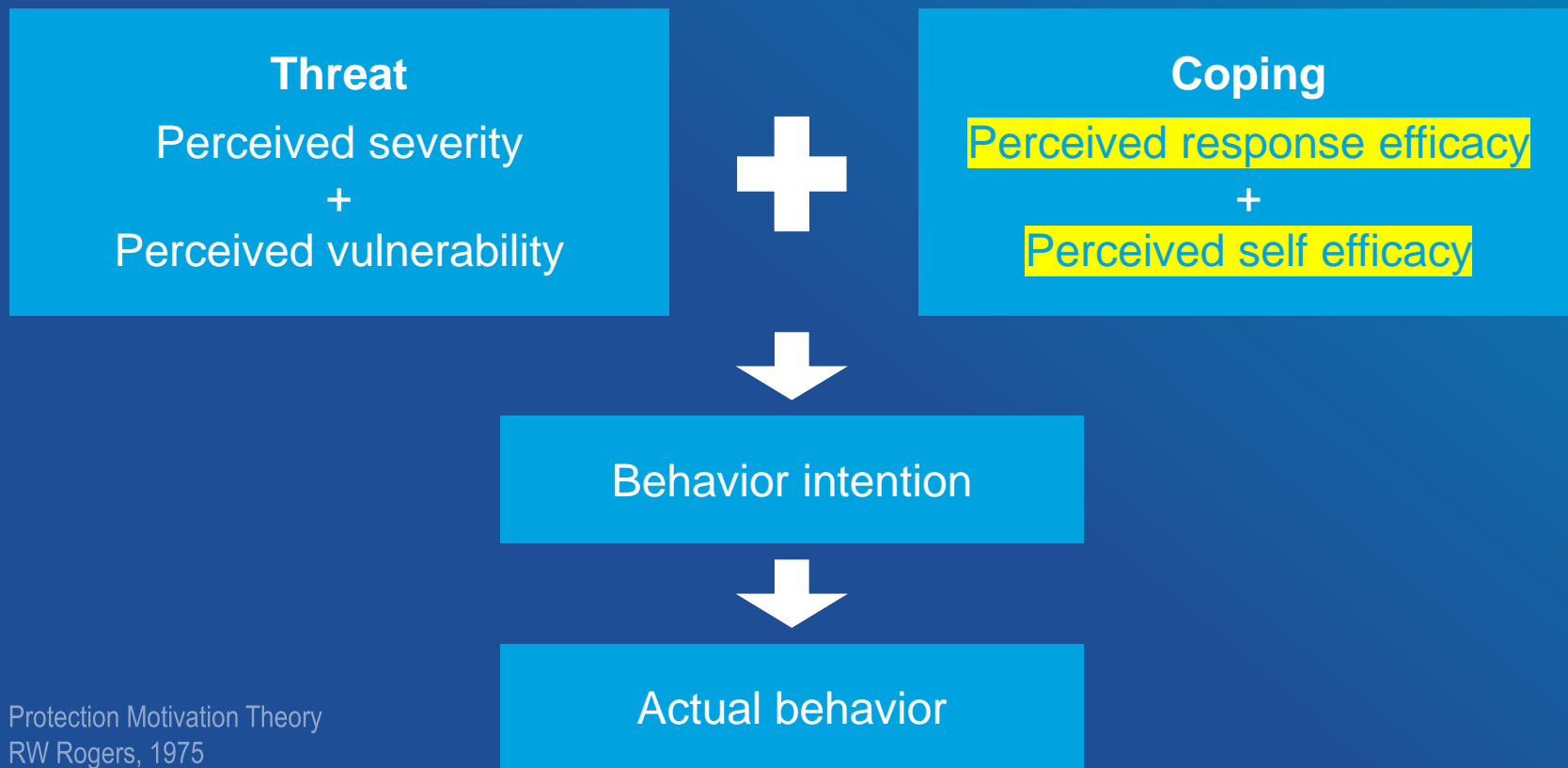


$p = <.001$. Note: Adjusted for gender, age, race/ethnicity, education, income, employment status, health insurance, region, self-reported health status, risk status, and proximity to the coronavirus

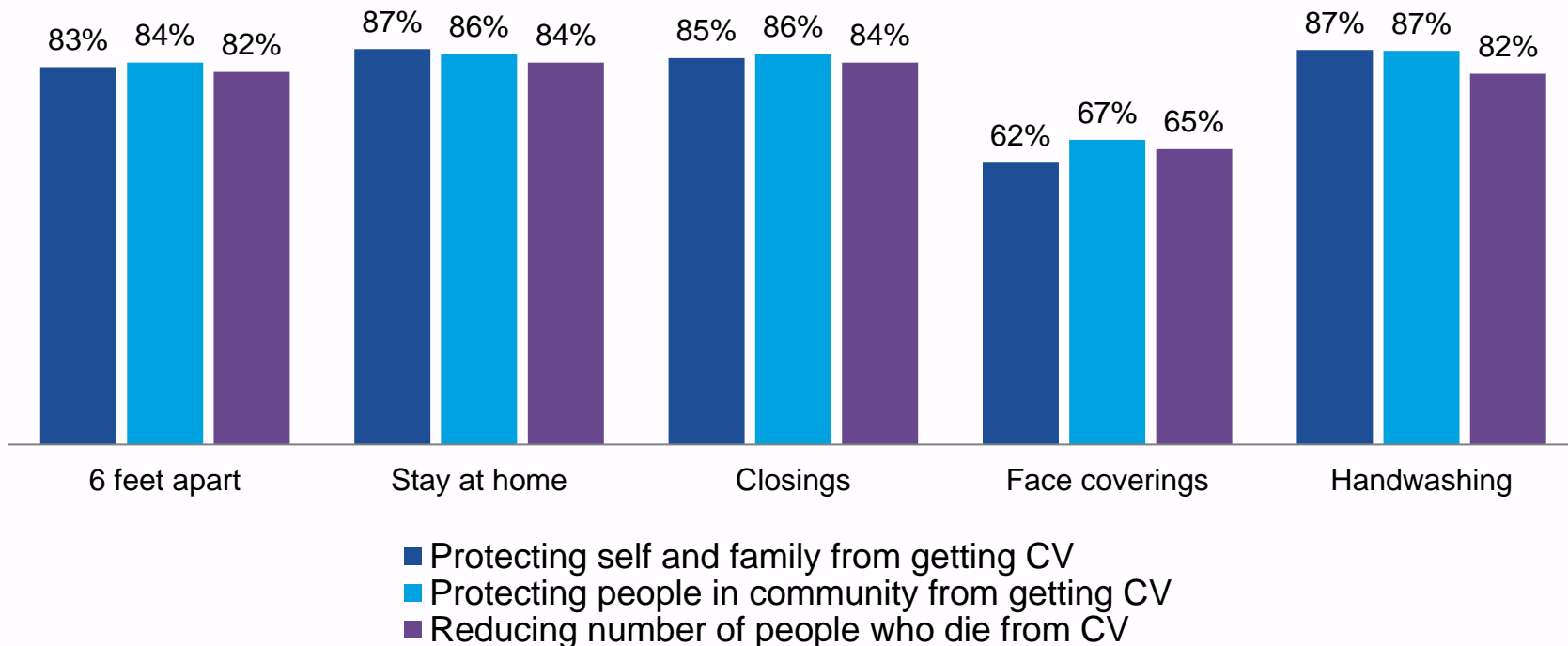
Perceived Threat to Self/Family and Individual Behaviors



The Other Piece: Is It Effective? Can I Do It?



Percent who strongly agree/agree



Can I Do It?

14%

Do **not** feel confident they can shelter-in-place/ stay-at-home for however long authorities recommend.

22%

Believe it is hard to get people in their household to stay at home.





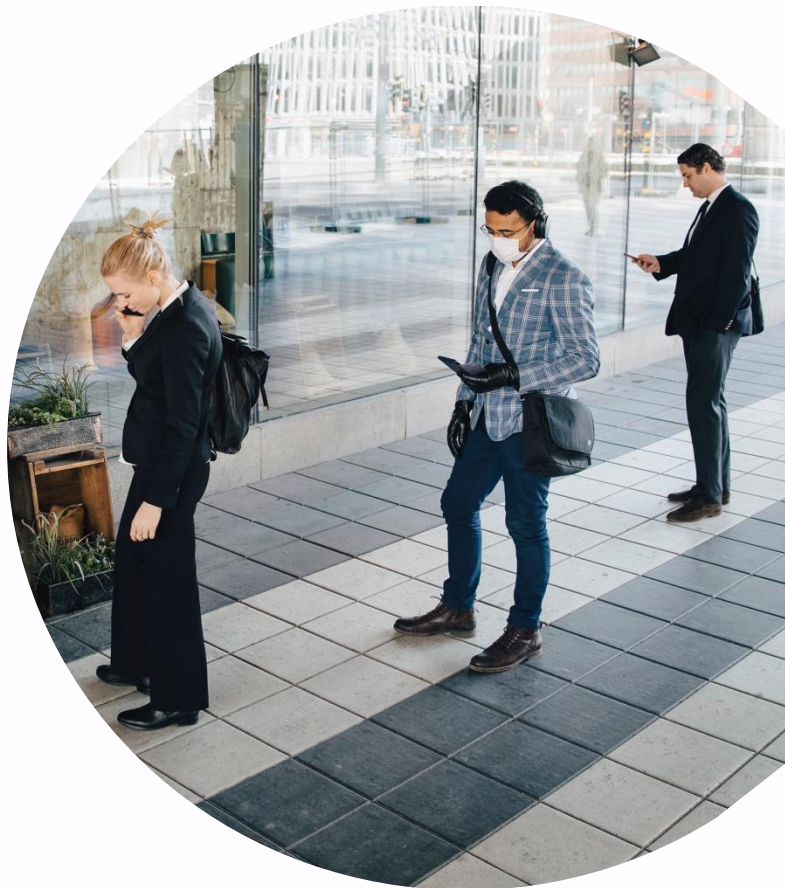
What Does This Mean for Public Health?

Communication strategies must strike a balance between breaking through optimism bias without inducing excessive feelings of anxiety and dread.

(Van Bavel et al., 2020)



- Emphasize the effectiveness of the preventive measures.
- Instill confidence in people's abilities to practice behaviors.
 - Model behavior; share stories about how others overcame barriers.
- Educate on the benefits to self and to others.
- Consider focused messages.



Tips for States and Surveillance

- Test messages with population before they are widely disseminated.
- Continue monitoring public perceptions and behavior.





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COVID-19 Response and Capabilities

To combat the unprecedented challenges presented by COVID-19, **RTI International offers broad and deep experience to address a variety of public health threats**—including Ebola, Zika, tuberculosis, malaria, and HIV.

RTI offers a deep bench of cross-functional experts, including

- Epidemiologists
- Data scientists
- Public health workers
- Educators and trainers
- Physicians
- Survey methodologists
- Evaluation specialists
- Innovation experts

Learn more about RTI's rapid response to COVID-19

rti.org/emerging-issue/covid-19-research

