

August 6, 2020

COVID-19 Survey in the Municipality of Anchorage, July 16-18: Highlights

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Key Findings

A population-based cell phone survey on COVID-19 was conducted among Anchorage residents (N = 600) from July 16 to July 18, 2020. This was the second population-based cell phone survey conducted in the Municipality on COVID-19; the first one (N = 996) was conducted May 6-10, 2020. Between the first and second population-based cell phone surveys, four online surveys were conducted every two weeks with a panel of respondents from the first cell-phone survey. In total, six surveys have been done in Anchorage so far. Key findings from the most recent survey are as follows:

- *Most* of the respondents reported *practicing physical distancing and good hygiene*.
 - *Most* (74%) *did not* have any visitors in their home the day before the survey.
 - *Most* (74%) *did not* have physical contact of any kind with someone who didn't live with them.
 - While most (66%) reported not going to or attending events indoors (i.e., church, bar, restaurant, house party) last weekend, this distancing behavior was abided by less than the previous ones listed above.
 - *Most* (79%) reported wearing their mask *all or most of the time* when they were outside their home.
 - *Most* (68%) reported wearing a mask *all or most of the time* when they were within six feet of someone not from their household.
 - *Most* (76%) reported washing or sanitizing their hands *every time or most of the time* after touching things that people outside their household may have touched.
- Most reported not being worried or only slightly worried about: transportation (88%), having enough to eat (84%), losing employment (78%), household finances (71%), and not being able to connect with friends and family (62%).
- Most reported being worried or very worried about: sending children back to school (64%), other friends and family members being infected by coronavirus (56%), and themselves or members of their household being infected by coronavirus (52%).
- Most (75%) felt that the Municipality's response to the outbreak has been good or very good
- *Most* (84%) felt that the Municipality's policies related to coronavirus have been *clear or very clear*
- *Most* (92%) strongly support or mildly support the Municipality's mask mandate.
- *Most* (53%) reported that they are *often or sometimes* confused by information on COVID-19.

COVID-19 RELATED RISK BEHAVIORS *increased* among those who:

- o Had *lower perceived threat* of COVID-19
 - Those who had significantly lower perceived threat of COVID-19 included *men* and those with *lower* perceived susceptibility to COVID-19.
 - Those with lower perceived susceptibility included *men* and *whites*.
- Reported *lower perceived benefits* of wearing a mask

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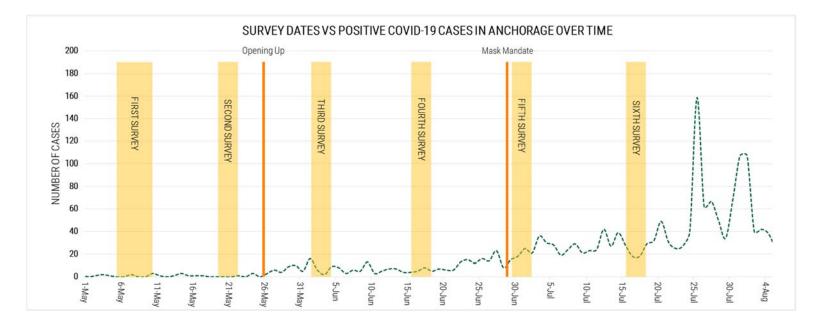
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o Those who had lower perceived benefits of wearing a mask included those who had *less than a college degree* and those who are *often/sometimes confused with information on COVID-19*.

KEY MESSAGING: Messages could continue to incorporate personal and community responsibility to engage in COVID-19 mitigation. However, new approaches, messengers, and channels are needed in order to guard against message and caution fatigue. The majority of people engaging in COVID-19 risk reduction strategies could be provided examples of how their actions are making a difference. Messaging could utilize data to show that the majority of people are continuing to take steps to reduce COVID-19 within the MOA. Consistent health education messaging could also be provided at testing sites, medical offices, and dental offices to utilize face-to-face communication to better explain and reinforce COVID-19 testing procedures, processes, and results.

Background and Context

A total of six surveys have been conducted by the Municipality of Anchorage about COVID-19. The first one was a population-based cell phone survey conducted May 6-19, 2020. The second through the fifth surveys were done online at two-week intervals with panels of people from the first survey. The sixth survey was also a population-based cell phone survey conducted July 16-18, 2020. The demographics of the respondents of the most recent survey were not significantly different from the previous surveys in terms of gender, geographic distribution, and race/ethnicity. This is a brief summary of highlights from the sixth survey, with findings compared to the previous surveys when appropriate. A detailed report will be created after all surveys have been completed.



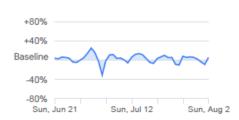
The first survey was a population-based phone survey conducted May 6-10, 2020, followed by panel surveys conducted May 20-22, June 2-4, June 16-18, and June 30-July 3. A second population-based phone survey was conducted July 16-18, 2020 (sixth survey).

Google analytics mobility data⁹ indicates that residents of Anchorage have largely returned to, or exceeded, baseline levels of mobility from before the pandemic for most sectors. Mobility at workplaces has remained below baseline levels, with a reduction of 12%.

Anchorage

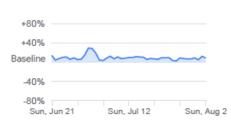
Retail & recreation

+6% compared to baseline



Grocery & pharmacy

+9% compared to baseline



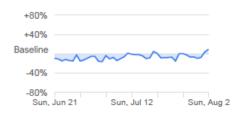
Parks*

+135% compared to baseline



Transit stations

+9% compared to baseline



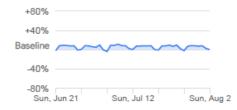
Workplaces

-12% compared to baseline



Residential

+0% compared to baseline



Results

PHYSICAL DISTANCING

- Most (76%) reported not having physical contact with someone outside their household, which was a significant increase from the fourth survey (53%).
- Most (74%) reported having no visitors to their homes the day before the survey, which was a significant increase from the fourth survey (68%).
- Most (66%) reported not going to or attending events indoors (i.e., church, bar, restaurant, house party) last weekend.

HYGIFNF

- Most (79%) reported wearing a mask all or most of the time when outside their home; this is a significant increase from the early June survey (72%).
- Most (76%) washed or sanitized their hands every time or most of the time when they touched things touched by others not from their household.
- Most (68%) reported wearing a mask all or most of the time when coming within six feet of someone not from their household.

76%

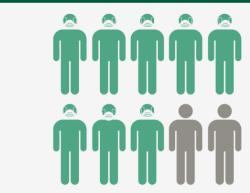
Did not have physical contact with anyone outside their household

PERCEIVED BENEFITS OF WEARING A MASK

- Most (77%) reported that they believed masks reduced others' risk for COVID-19.
- Most (72%) reported that they believed masks reduced their risk for COVID-19.
- Most (72%) reported that they strongly disagreed or disagreed that wearing a mask was not necessary even if they are not sick.

PERCEIVED BARRIERS TO WEARING A MASK

- 35% strongly agreed or agreed that wearing a mask was inconvenient, a decrease from 52% on the early June survey.
- 45% strongly agreed or agreed that they found it hard to breathe with a mask on, a decrease from 61% on the early June survey.
- One-third of the respondents in the current survey strongly agreed or agreed that they don't like the government telling them to wear a mask, a slight increase from the early June survey (25%).



8 OUT OF 10 PEOPLE WHO WENT OUTSIDE THEIR HOME WORE A MASK MOST OR ALL OF THE TIME THEY WERE OUT

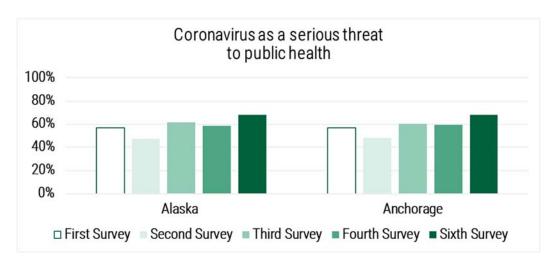




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PERCEIVED THREAT OF COVID-19

- Most (68%) felt that COVID-19 was a threat to public health in Alaska.
- Most (68%) felt that COVID-19 was a threat to public health in Anchorage.

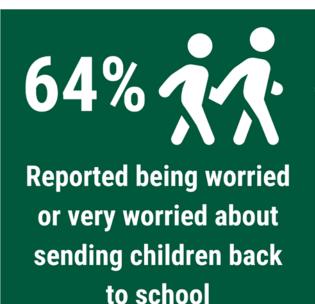


PERCEIVED SUSCEPTIBILITY TO COVID-19

- Most (56%) reported being very worried or worried that their other friends and family could become infected with the coronavirus, a significant increase from early June (48%).
- Most (52%) reported being very worried or worried that they or members of their household could become infected with the coronavirus, a significant increase from early June (44%).
- Almost half (48%) reported being very worried or worried about spreading coronavirus to others, not significantly different from early June (52%).

MENTAL HEALTH

- Most were not worried or only slightly worried about:
 - o Not being able to connect with friends and family (62%)
 - o Household finances (71%)
 - o Losing employment (78%)
 - o Transportation (84%)
 - o Having enough to eat (88%)
- Most (64%) reported being worried or very worried about sending children back to school.
- Most (76%) reported having *good or very good morale* in their household.
- Most (51%) reported their households were stressed or very stressed.



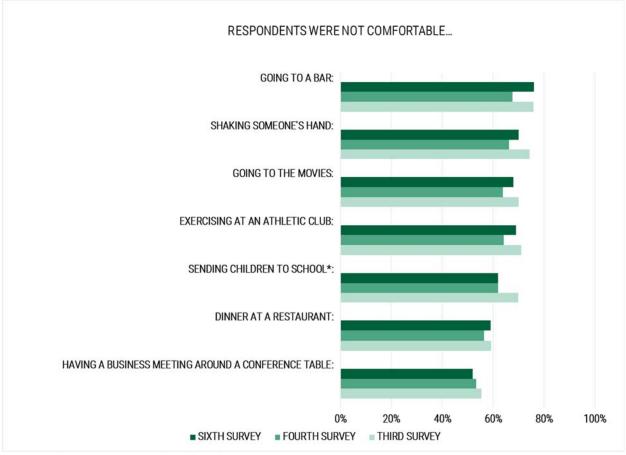
SELF-EFFICACY OF WEARING MASKS AND CLEANING HANDS

- Most (65%) did not forget to bring their mask when they went out, a significant increase from early June (46%).
- Most (76%) washed or sanitized their hands when they touched things that people outside their household might have touched, a significant increase from early June (62%).



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ACTIVITY COMFORT LEVEL

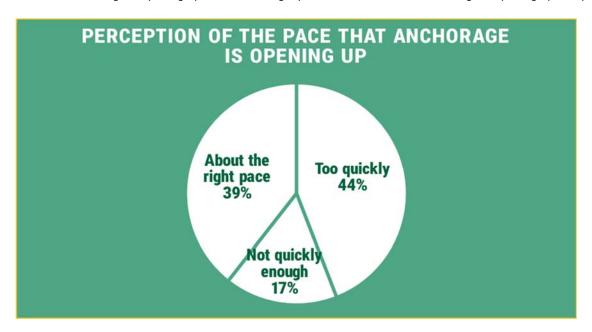


Most of the respondents were <u>not</u> comfortable with:

- Going to a bar (76%)
- Shaking someone's hands (70%)
- Exercising at an athletic club (69%)
- Going to the movies (68%)
- Going to religious service (63%)
- Sending children to school (62%)
- Going to dinner at a restaurant (59%)
- Having a business meeting around a conference table (52%)

PERCEPTION OF THE MUNICIPALITY'S RESPONSE

About 40% felt that Anchorage is opening up at about the right pace and 44% felt that Anchorage is opening up too quickly.



- Most (92%) reported that they mildly support or strongly support the municipality's mask mandate.
- Most (84%) felt that the municipality's COVID-19 policies are clear or very clear.
- Most (83%) reported knowing where to get tested for COVID-19.
- Most (75%) rated the municipality's response to the outbreak as good to very good.
- Most (53%) felt that they were often or sometimes confused by information related to COVID-19.

COVID-19 RFI ATFD RISK BFHAVIORS

COVID-related risk behaviors measured in this survey included: (1) having a visitor at home; (2) having physical contact with someone; (3) getting within six feet of someone outside their household and not wearing a mask; (4) touching things that may have been recently touched by others and not washing or sanitizing hands; and (5) not wearing a mask most or all of the time outside home. We assigned respondents one "point" for each of the risk behaviors that they reported.

- 14% of respondents had 3 to 5 risk behaviors
- Factors independently associated with increased COVID-19 related risk behaviors included respondents who:
 - o Felt *lower perceived threat* of COVID-19
 - o Reported *lower perceived benefits* of wearing a mask
- Factors independently associated with *lower perceived threat of COVID-19* included:
 - o *Men*
- Those who had low levels of perceived susceptibility to COVID-19
- Factors independently associated with lower perceived susceptibility to COVID-19 included:
 - o *Men*
 - o Whites
- Factors independently associated with lower perceived benefits of wearing a mask included:
 - o Those who had *less than a college degree*
- Those who were often/sometimes confused by information on COVID-19

Recommendations

These survey findings indicate that the majority of respondents continue to engage in COVID-19 risk reduction behaviors. The majority of people are doing their part to mitigate COVID-19 in the community. Respondents were also more likely to wear masks and clean hands than in previous surveys. Support for the MOA mask mandate has increased and the majority overwhelmingly support the mandate (92%). For respondents, the perceived benefits of wearing masks outweigh the perceived barriers. Overall, perceived susceptibility to COVID-19 is now higher. The findings from this report suggest that health education and communication strategies could consider the following:

- Use different messengers, approaches, and communication channels to counter message and caution fatigue
- Continue messaging on personal responsibility to reduce risk
- Continue messaging on social responsibility to reduce risk
- Continue to incorporate comprehensive behavioral scripts with mask messaging, which include physical distancing and other COVID reduction strategies (ie avoid gatherings, distance, mask, wash, test, trace, isolate, support)
- Provide hopeful messaging for the majority of people engaging in COVID mitigation, illustrate how their actions are making a difference
- Utilize data to normalize the COVID attitudes and behaviors of the majority
- Provide COVID testing sites consistent health education related to test procedures and processes at the point of testing *and* upon receiving results. Leverage testing sites as opportunities to engage in face-to-face communication to further reinforce guidelines on and resources to support being successful with isolation, quarantine, and contact tracing expectations etc.
- Provide COVID information and health education to MOA medical and dental offices related to pre-procedure testing, test
 procedures and processes. Leverage medical and dental offices as opportunities to engage in face-to-face communication to
 further reinforce guidelines on isolation, quarantine, etc. See HAN 6/23
 http://dhss.alaska.gov/dph/Epi/Documents/phan/AKPHAN 20200723 COVIDUpdate.pdf
- Considerations for health education content for testing sites and medical/dental offices could include information from MOA and SOA websites and use visually appealing, infographics-style presentation in the form of a one-page yes/no decision tree. The simplified one-page handout could help improve understanding of COVID testing and proper protocols to follow. As an added step, tested individuals could be encouraged to take a photo of the one-page handout in case the handout is lost. In addition, the handout could also include Alaska 2-1-1, MOA, and language resources.
- Explore opportunities for SMS (short message service/text messaging) with new CommCare health data management system and via Nixle linking recipients to information.
- Prior to potential CommCare SMS deployment (currently focused on supporting daily monitoring of known contacts), agenda building and earned media strategies should be in place.

Limitations

The Municipality contracted the UAA research team to conduct the analysis of the first four surveys. However, two more surveys have been conducted (fourth panel survey and the second cell phone survey). Given the immediate need to provide the Municipality with a more up-to-date and generalizable information to act on for public health and communications efforts, the team has provided an additional service of analyzing the second population-based cell phone survey, as shared here. We anticipate that analysis of the fourth panel survey, and subsequent panel surveys, will be provided as part of a contract extension.