Working paper: Comments welcome

Survey report on the 2020 coronavirus pandemic

Boston University • Emerging Media Studies

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A recent survey conducted by the Division of Emerging Media Studies at Boston University gathered public opinion data on Americans' attitudes and perceptions toward the impact of COVID-19. Data was collected from 2,049 respondents in a nationally representative sample based on age, gender, race/ethnicity, and education. Participants were asked to report their likelihood to engage in social distancing measures, their attitudes towards the virus as well as their knowledge of popular conspiracy theories about its origin.

Opinions about Preventive and Mitigating Measures against COVID-19

A vast majority of respondents reported being likely to follow social distancing measures such as avoiding social gatherings, rethinking travel. They were less likely to follow particularly cautious measures like stopping take-out (see Figure 1).

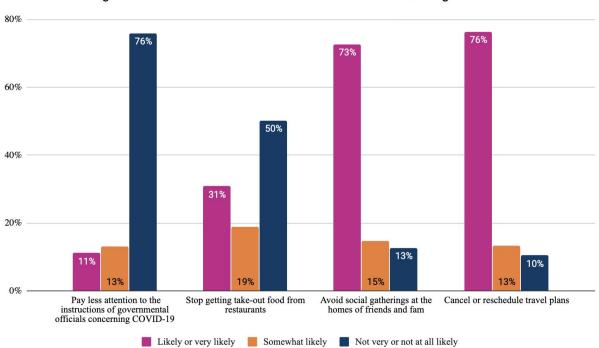


Figure 1: Individuals' likelihood to follow certain social distancing measures

Respondents were also quite receptive to lower-effort steps to curbing COVID-19 like wearing a mask and staying inside barring emergencies. There was much higher resistance to surveillance efforts like reporting others who are violating stay-at-home orders and individual economic sacrifice like paying higher taxes (see Figure 2).

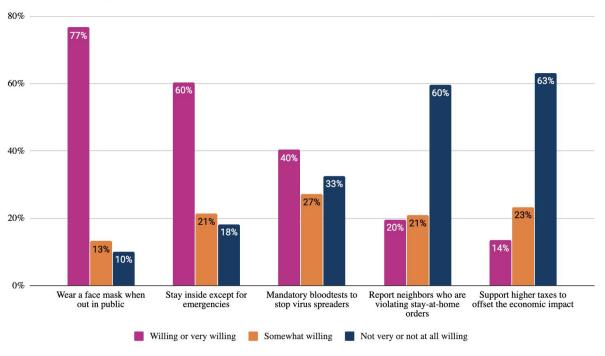


Figure 2: Individuals' willingness to take steps to prevent the spread of virus

Looking at differences between age groups (see Figure 2a), the oldest (58+) and youngest (18 - 34) were most willing to take preventive measures like wearing a face mask and staying inside, as well as supporting higher taxes to offset the economic impact of COVID-19. The oldest group was alone in being most willing to support mandatory blood tests. These trends did not hold with likelihood of changing one's daily life: the oldest group was most likely to avoid social gatherings with friends and family, cancel or reschedule travel, and stop getting takeout, while the youngest group was least likely to avoid social gatherings.

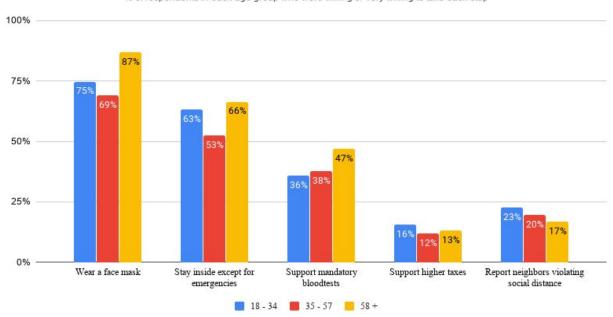


Figure 2a: Willingness to take steps to prevent the spread of virus by age

% of respondents in each age group who were willing or very willing to take each step

Women were more willing than men to take steps to help curb COVID-19 (see Figure 2b): there was at least a 10% difference between men and women's willingness to wear a face mask and stay inside except for emergencies; women were also significantly more likely to support mandatory blood tests. There was little difference between women and men's willingness to support higher taxes to offset the virus's economic impact and report neighbors who violate stay-at-home orders – each group expressed low willingness in both cases.

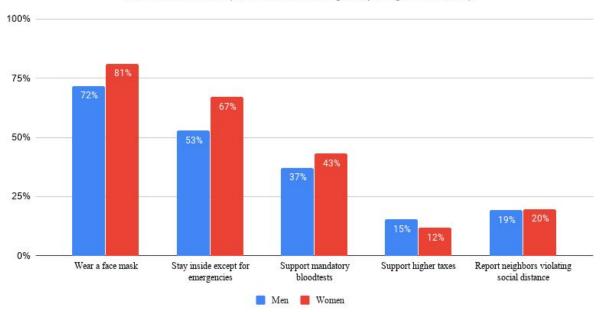
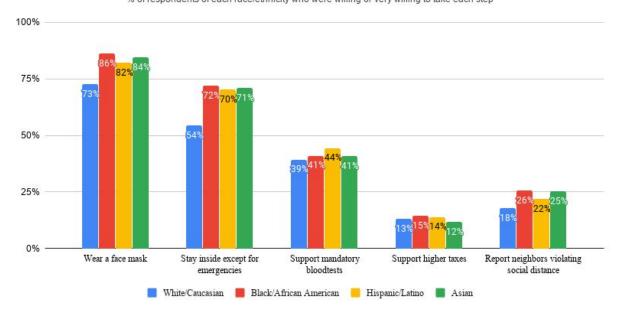


Figure 2b: Willingness to take steps to prevent the spread of virus by gender

% of male and female respondents who were willing or very willing to take each step.

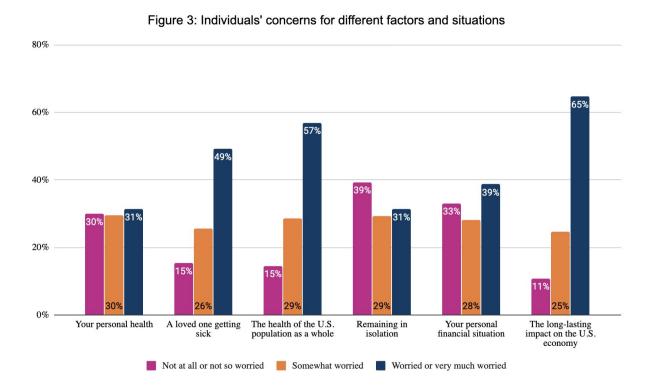
Figure 2c: Willingness to take steps to prevent the spread of virus by race/ethnicity % of respondents of each race/ethnicity who were willing or very willing to take each step



The biggest differences across racial/ethnic groups appeared in respondents' willingness to take preventive measures against COVID-19 (see Figure 2c): white/Caucasian respondents were least willing to take these steps, particularly wearing a face mask and staying inside except for emergencies.

Concerns about COVID-19 and China's role

Overall, people are most worried not about themselves but about country-level issues: the effect that COVID-19 will have on the U.S. economy and the health of the U.S. population (see Figure 3). Nearly half also expressed concern over a loved one getting sick, but only about a third were worried about their personal health.



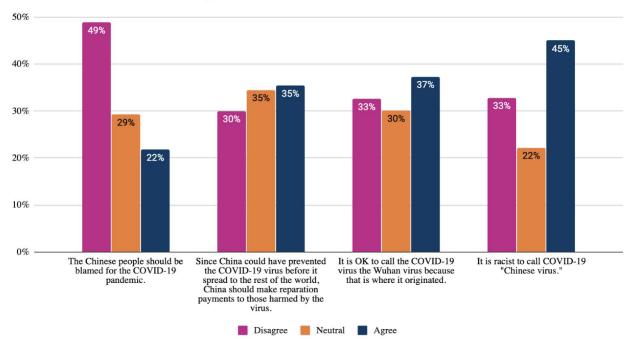
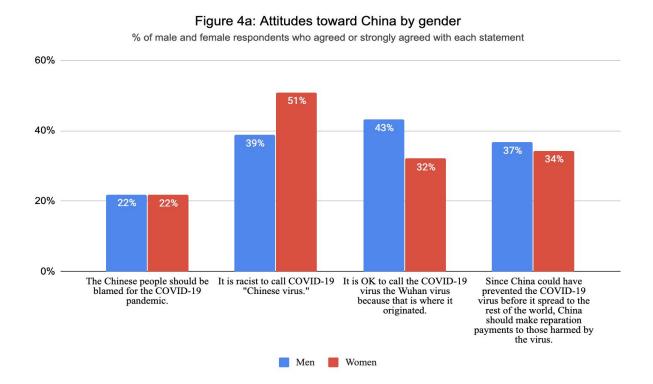
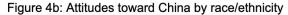
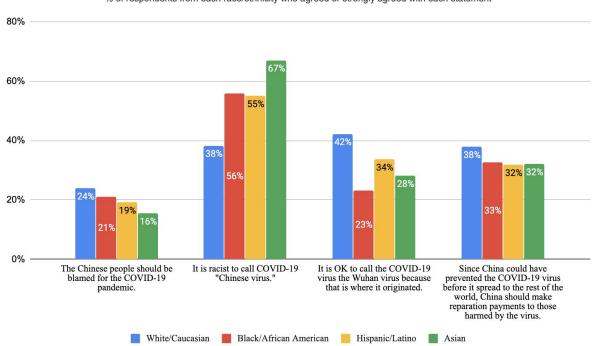


Figure 4: COVID-19 beliefs related to China

About a third of the sample held negative beliefs about China's role in the virus, though fewer thought that the Chinese people should be blamed for the pandemic (see Figure 4). Men were more likely than women to hold stronger negative views about China, in particular about whether it's OK or racist to refer to COVID-19 as the Wuhan or Chinese virus (see Figure 4a). In terms of racial/ethnic differences, white/Caucasian respondents held the most negative views of China (see Figure 4b).







% of respondents from each race/ethnicity who agreed or strongly agreed with each statement