

MASK-WEARING AND VACCINATION: WAVE II

The Harvard Opinion Research Program, in partnership with ASTHO and NPHIC, conducted surveys to guide COVID-19 communications strategy for mask-wearing and vaccination. Wave I was conducted from Jan. 29-Feb. 9, 2021 and Wave II was conducted Mar. 25-Apr. 6, 2021. 2001 U.S. citizens were polled to gather information on their behaviors toward mask-wearing and COVID-19 vaccines. Key findings and tips for state health department leadership was developed from the polling results and can be used to influence future communications strategies to the public. Additional polls will be conducted in the late spring/early summer of 2021 to show trends and changes in behaviors.

KEY FINDINGS

- Engagement in social activities has modestly increased since Wave I.
- Gaps in consistent mask-wearing persist, with small declines in indoor dining and beauty services.
- Vaccinated adults are *more* likely to wear a mask across multiple public activities.

- Most adults are aware of the need for precautions after vaccination.
 - Many may be overestimating needed precautions, and underestimating benefits of vaccination.*
- Unvaccinated adults cite reliance on social distancing and discomfort as top reasons for not wearing a mask.

- Estimates of vaccine effectiveness remain low, with only a slight increase since early February.
- Many unvaccinated adults believe that masks are as effective, if not more effective, than vaccines at preventing infection and limiting spread.

- Concern about safety is a top barrier for unvaccinated adults, regardless of level of hesitancy.
- Those who are more hesitant also have substantially lower perception of vaccine effectiveness, lower risk perception of infection, and lower trust in government and manufacturers.

- Unvaccinated adults are less trusting of nearly every source of information.
- Doctors and nurses are the most trusted, regardless of vaccination status.
 - CDC is also relatively well trusted, followed by state and local health agencies.*

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COMMUNICATION IMPLICATIONS

- Targeting messaging by activity and setting may be effective.
 - Encourage more mask-wearing in places where adherence is low (e.g., gyms, bars, restaurants, salons).*
- Segmenting the audience may be important.
 - Unvaccinated adults may need differentiated strategies.*

- Maintain reminders for vaccinated adults to wear masks in recommended places.
- Provide differentiated messages for those who are not.
 - I social distanced instead": Emphasize that this is not enough indoors.*
 - "It's uncomfortable": Provide tips for fitting masks and safe mask breaks.*

- More emphasis on vaccine effectiveness and the benefits of vaccination may be helpful.
 - There is little evidence that vaccinated adults are overconfident and abandoning precautions.*

- Though safety messages may be important for all, targeted messaging may be needed to reach more hesitant groups.
 - Include more messages about vaccine effectiveness and true risks of infection.*
 - Use messengers trusted by hesitant groups to communicate these messages.*

- Bring in doctors and other health professionals as spokespeople support their community connections.
 - Consider health professionals who reflect the diversity of your targeted communities.*
- Lean away from spokespeople with less technical credibility or who could be viewed as gaining politically.