COVID-19 Mitigations in the U.S.
January 15, 2021
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AUTHORS
David Ingram, CERA, FSA, MAAA
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This report provides highlights of a weekly survey of practices regarding the mitigation of the spread of COVID-19 in the U.S. during the first half of January 2021 along with comparisons to prior half-month time periods. The survey asks about the degree to which the respondents perceive that people in their community are following 21 common mitigation practices. The responses are separated by state and compared to state level statistics regarding the level of COVID-19 infections from the Johns Hopkins COVID database for the same time period.

Executive Summary

A slight increase occurred in community mitigation practices across the country in the first half of January from 62.6% in the last half of December to 62.8% this week according to observations from 636 individuals in 49 states. At the same time, new COVID-19 infections continued to surge with 3.8 million new cases for the half month. This is up more than 50% in just two months. But daily increases may be showing another peak with a possibility of a downward trend in the making.

Additional findings from the first half of January:

- The top mitigations practices showed little movement with four advancing but by just a couple of percent each. Only three mitigations have compliance over 75%.
- Of the twenty two states where we have significant data from this week, the worst three (Florida, Georgia and Tennessee) had average compliance in the 50’s.
- Staying at home was one of two mitigation practice that had the highest one week increase in compliance. This doubtless reflects increased safety concerns among more vulnerable or more cautious parts of the population.
- Minnesota was the only state among the twenty-two with significant data that had average mitigation compliance over 75%.

The full set of mitigations surveyed are included in the appendix to this report.

When observers were asked when would they want to get vaccinated, 46% said that they would want that “As soon as Available”. A full 35% of respondents said that they would want to get the vaccine in six months, “Later” or “Never” which suggests some significant reluctance to be overcome before a vaccination program is fully effective.
Mitigation Practices - National

Average percentage compliance with 21 COVID-19 mitigation strategies that are surveyed was 62.8% in the first half of January, up slightly from 62.6% in the second half of December. For half-month, three of the twenty-one mitigations practices had average compliance above 75%, five had average compliance below 50% and thirteen had average compliance between 50% and 75%. This is the same result as the last half of December.

Nationally the weighted average of compliance with these mitigations has gone from an average of 62.3% in late November to 62.9% in early December to 62.6 for late December. When mitigations are broken out into practices within states and regions of states, there is a far greater variance in mitigations as respondents observe the results of individual states implementing changes in COVID mitigations and individuals react to their personal perceptions of the level of COVID danger locally.

CHANGING MITIGATIONS

Throughout the past eight weeks, the six mitigations that our observers say have the highest average compliance have remained the same (with “Wearing a Mask in Public” shifting in and out of the Top 5). Results from the last four periods are presented below:

<table>
<thead>
<tr>
<th>Top Five Mitigations</th>
<th>Nov 16-30</th>
<th>Dec 1-15</th>
<th>Dec 16-31</th>
<th>Jan 1-15</th>
</tr>
</thead>
<tbody>
<tr>
<td>Special protection in hospitals areas that treat COVID patients</td>
<td>80%</td>
<td>82%</td>
<td>82%</td>
<td>83%</td>
</tr>
<tr>
<td>Visitors to senior living facilities to be restricted</td>
<td>75%</td>
<td>77%</td>
<td>76%</td>
<td>77%</td>
</tr>
<tr>
<td>Restaurants to have reduced seating</td>
<td>78%</td>
<td>78%</td>
<td>75%</td>
<td>75%</td>
</tr>
<tr>
<td>Hairdresser and barber to be open with restrictions</td>
<td>72%</td>
<td>73%</td>
<td>70%</td>
<td>73%</td>
</tr>
<tr>
<td>Quarantine people with positive tests</td>
<td>71%</td>
<td>72%</td>
<td>71%</td>
<td>72%</td>
</tr>
</tbody>
</table>

In the first half of January four of these five practices were essentially the same and one improved by 3%. The top mitigants have had an average compliance of 75% to 76% for the last two months. With the recent surge in COVID cases across the country, it is concerning that the most used mitigations have not strengthened significantly and that only three have reached the 75% compliance level.
Mitigation practices with the largest change are compared below.

<table>
<thead>
<tr>
<th>Mitigations with Largest Change</th>
<th>Dec 16-31</th>
<th>Jan 1-15</th>
<th>Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>Violations of COVID restrictions result in fines or police enforcement</td>
<td>33%</td>
<td>30%</td>
<td>-3%</td>
</tr>
<tr>
<td>Schools (K-12) are closed or holding only remote classes</td>
<td>58%</td>
<td>55%</td>
<td>-3%</td>
</tr>
<tr>
<td>Hairdresser and barber to be open with restrictions</td>
<td>70%</td>
<td>73%</td>
<td>2%</td>
</tr>
<tr>
<td>Staying at home</td>
<td>46%</td>
<td>48%</td>
<td>2%</td>
</tr>
</tbody>
</table>

Over the past two months, large increases (greater than 5%) were observed for seven practices. Over the same period greater than 5% decreases in mitigation compliance were reported for six practices.

With the large increase in number of infections we are currently experiencing, it is also possible that mitigations are much less effective with higher infection levels and winter indoor living. This may indicate that nationwide we need to adapt our behaviors on a large scale to a more stringent application of the mitigations that were effective for much of the summer and into the fall.

Mitigation Practices – State Level

For the first half of January, the survey had a credible number of responses from 22 states. The states from that group with the highest compliance were Minnesota (76%) Massachusetts (74%), and Washington (70%). The states with the lowest compliance were Florida (53%), Georgia (55%) and Tennessee (56%).

Focusing in on the ten most populous states, there is quite a bit of variability, some of which is likely driven by a variety of opinions from the observers.
The large movements in compliance over the last month demonstrated above shows that even though the national picture has been static, individual states are constantly changing their practices to adapt to what individuals, corporate leaders, and political authorities are observing on the ground.

**COVID-19 Spread of Infections – National**

There were 3.8 million new cases of COVID-19 reported in first half of January. This is more than the total year-to-date number of infections reported in late July. The reported infection level fell over the late December holidays and has risen slightly from that level but is again seeming to peak.

*Infection Level is the number of active infections per 100,000*
In the first half of January, the rate of new infections rose and fell back down to just above the No Growth Level. The chart above shows a clear cyclical pattern, rising and falling every several weeks as different states increase and decrease their compliance demands and actual practices. Over the December holidays, reported infections fell and deferred reporting was widely suspected to be the cause. But now looking back from mid-January, there is only a very moderate amount of rebound. Growth of infections has slowed to near zero and may start to trend downwards.
Mitigations Levels over Time
The following charts provide a perspective on the relative compliance levels of all 21 mitigations with each other as well as the trends over the past two months.
Vaccination Preferences and Concerns

From December 27 to January 9, the surveys featured two questions about Vaccinations. The first question was “When would you want to get vaccinated for COVID?” The responses were:

- 46% “As soon as available”
- 16% “After several months of other people taking the vaccines”
- 19% “After six or more months of other people taking the vaccines”
- 10% “Later”
- 10% “Never”

These responses can be summarized as 65% “Sooner” and 35% “Later/Never”.

The second question asked “What is the biggest concern about the COVID vaccines in your community?”. The responses to that were: 43% Safety, 18% Effectiveness and 39% Availability.

When the two questions were cross referenced, the people who favored a concern about Safety or Effectiveness were both at 53% looking to get the vaccine “Sooner”, while the people who favored “Availability” were 83% in the “Sooner” category, more or less as would be expected.
Acknowledgments

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Project Working Group members:
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  - Kailan Shang, FSA, CFA, PRM, SCJP
  - Robert Wolf, FCAS, CERA
  - John Stark, FSA, CERA
  - Thomas McAndrew, Ph.D.
  - Daniel Ingram, MBA

At the Society of Actuaries:
  - R. Dale Hall, FSA, MAAA, CFA, CERA

Note on Mitigation Compliance Observations

The COVID mitigation information is collected via a SurveyMonkey survey. In that survey, observers are asked to say what they are seeing in their community regarding the percentage compliance with 21 specific mitigation activities. The observers are volunteers who were either recruited personally by the project team or who responded to a variety of solicitations for observers via Twitter, Facebook, LinkedIn, and SurveyMonkey. This data is subject to self-selection and other biases. No adjustments have been made to the data that we have collected in order to respond to possible biases. Responses are aggregated and the average of multiple views are treated as true information about the mitigation activity in a state. The variance of the responses in a state has been examined and targets are set for a higher number of responses in states where there is a higher variance of responses.
Appendix List of Mitigations under Study

- Wearing a mask in public
- Maintaining social distance
- Staying at home
- Restaurants to have reduced seating
- Businesses to be closed – work from home only
- Hairdresser and barber to be open with restrictions
- Visitors to senior living facilities to be restricted
- Commonly touched surfaces to be sanitized
- Special protection in hospitals areas that treat COVID patients
- Get tested for active virus
- Get antibody testing to detect prior infection
- Quarantine people who have been in close contact with people with positive tests
- Quarantine people with positive tests
- Quarantine travelers from higher infection places
- Limit large gatherings of people
- Local level of COVID infections
- Statewide targets for reducing COVID spread
- Local approach to limiting COVID spread
- Colleges are closed or holding only remote classes
- Schools (K-12) are closed or holding only remote classes
- Violations of COVID restrictions result in fines or police enforcement
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