

Psychological Insights into Consumers' COVID Reactions:
Cognitive Biases and the Struggle Between Systems 1 & 2

Waves 13 & 14: July 20 & July 30



OBJECTIVES

- As the COVID-19 pandemic continues to spread, affecting daily life for virtually all Americans, ACUPOLL seeks to give you a window into the hearts, minds, and evolving behaviors of your consumers by posing the questions we haven't seen anyone else ask about it.
- Because the situation is rapidly evolving, we are updating our learning periodically to keep you up-to-date on trends.
- This wave explores the cognitive biases and psychological drivers underlying consumer behaviors, specifically wearing a mask in public, and buying certain categories.
- We've focused on the questions and segments that were the most interesting to us, but if there's something in here you'd like us to dig into – **please ask!**

SAMPLE SELECTION: REP U.S. Males and Females age 18+

Download previous
waves here:

<https://www.acupoll.com/blog/category/COVID-19+Data+Reports>

FIELD DATES & SAMPLE SIZES (Margin of error 3% @ 90% confidence)

Report #	Field Date	n=	Topic Highlights
1	March 18	803	New behaviors, impact of product shortages, expectations from advertisers
	March 24	819	
2	March 31	803	Shifting priorities, unsung heroes, plans for the future, positives from the crisis
	April 1	808	
3	April 8	982	Changes in behavior, expectations from retailers and business in general, investigation of what “going back to normal” means
	April 14	970	
	April 16	825	
4	April 23	900	More details on “going back to normal,” guidance for retailers and restaurants to promote feelings of safety, attitudes about lockdowns
	April 30	800	
	May 1	865	
5	May 7	959	Continued exploration of attitudes toward lockdowns and masks, willingness to return to old activities, focus on eating, snacking, and weight
	May 8	971	
	May 13	904	
	May 15	982	
	May 18	938	
6	June 5	858	Consumer behavior in terms of re-opening the economy, attitudinal evaluation expanded to include racial protests, what worries are at the top of the list, how advertisers should handle controversial topics, focus on e-commerce (e-commerce: Jan 26, March 26, May 14, n=970+ each)
	June 12	876	
7	July 20	908	Cognitive biases and psychological drivers underlying consumer behaviors, including wearing a mask in public, buying certain categories, and interest in a COVID-19 vaccine
	July 30	981	

Key tracking questions captured in every wave: demographics, emotions, core motivations, economic impact, lifestyle and employment changes

- ④ Mask wearing varies considerably across activities; while only 7% of consumers never wear a mask in stores or restaurants, 21% never wear a mask even when visiting with friends/family in person – likely reflecting less fear of their germs than of strangers’.
- ④ Mask Avoiders do perceive the threat of Coronavirus to their safety, community health, and the economy – but these are superseded by perceptions that the virus threatens American values, traditions, and freedoms. This yields insight for re-framing the debate and encouraging mask use.
- ④ Dan Young, PhD – a former P&G cognitive scientist (1985–2015) who co-developed our *Spark MCR® System 1/System 2 screening methodology* – conducted qual interviews to dig deeper into COVID psychology. His work uncovered high emotionality, rational inconsistencies, displacement of frustrations onto other people, in-group/out-group dichotomies in thinking, and difficulty even processing our current environment.
- ④ Statistical analysis suggests four COVID attitudinal factors – reflecting fear, self-assurance, confident compliance, and skeptical non-compliance – underlie variation in mask wearing behavior.
- ④ Fewer than 2/3 of people are going to get the vaccine as soon as it becomes available; more than 1/3 are not in a rush.
- ④ We also explore cognitive biases and System 1/System 2 conflicts illuminated by COVID ... and present in our daily lives.



Where and when are Americans wearing masks, and why are some still resisting wearing them?





- **Consumers are starting to get back out into the world**, with 88% shopping inside stores, 70% in other public places, and 65% visiting family and friends in the past two weeks.
- 35–40% have been to a hairstylist or dined at a restaurant.

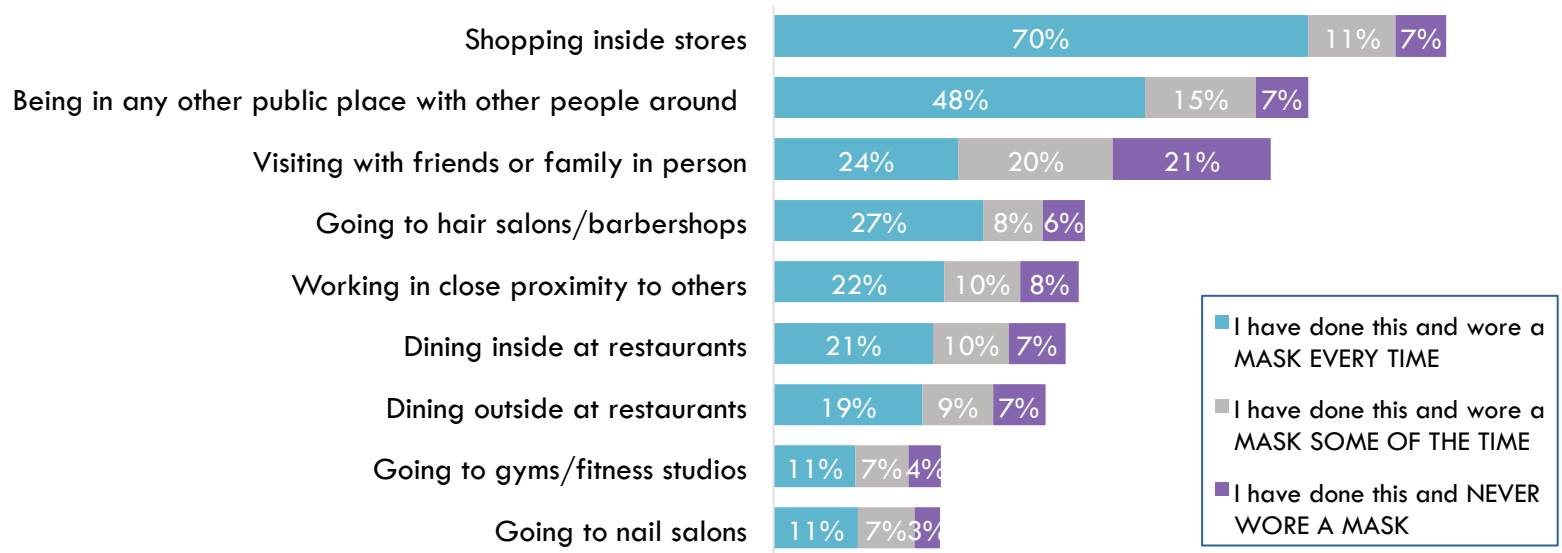
Have you done each of the following in the past 2 weeks?





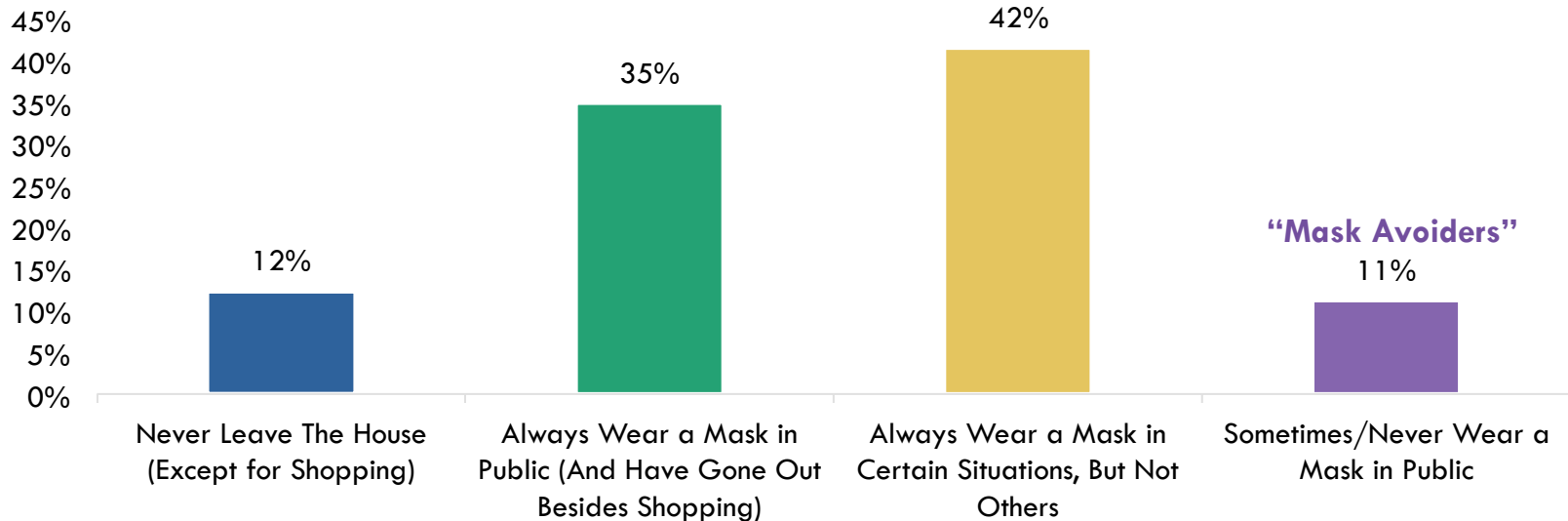
- **However, not everyone participating in these activities is wearing a mask every time, or even at all.**
 - Only 7% never wear a mask in a store, likely because it's now required in most stores.
 - On the other hand, 21% never wear a mask while visiting friends or family, probably due to a combination of feeling a greater level of trust in people they know, and the fact that it's not required.

Have you done each of the following in the past 2 weeks, and if so, did you wear a mask?





- While the majority of consumers either always wear a mask, or always wear a mask in certain situations – the behavior recommended by health experts – just over 10% are not leaving the house *at all*, or, on the other extreme, rarely (if ever) wear a mask.

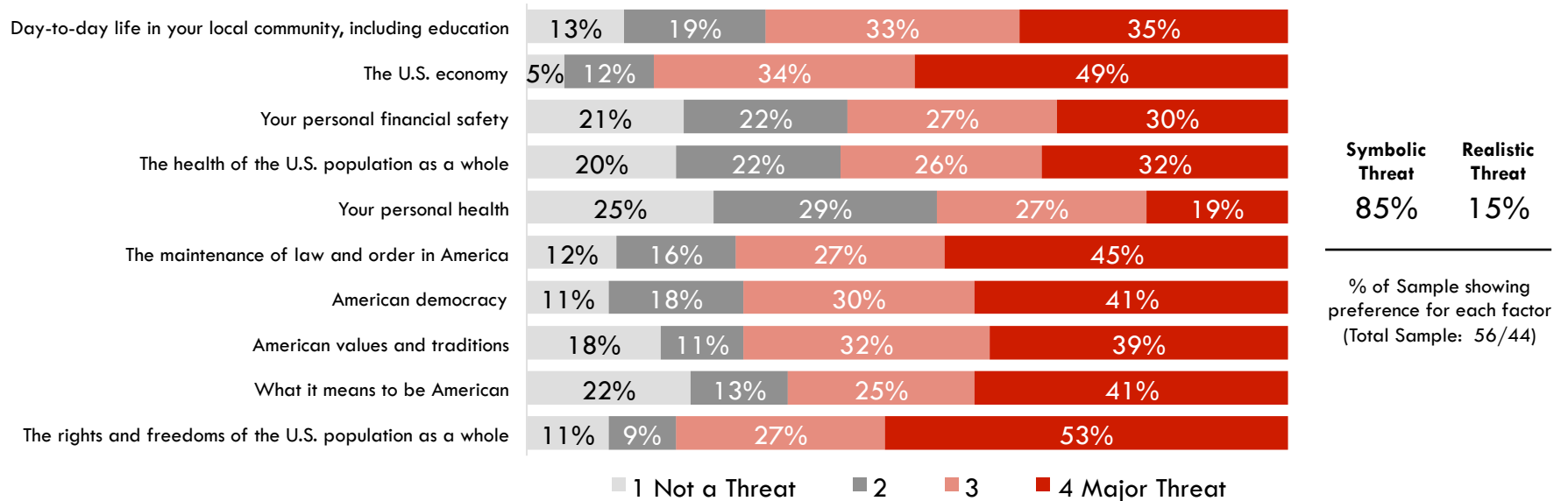




- Somewhat contrary to the portrayals we've seen, most of those who don't wear a mask do in fact see the personal and public health threat of the virus. Yet, they also see restrictions as a threat to the American way of life, and, according to work we've seen from psychological academics, are much more likely to see the Coronavirus as a *symbolic* threat, rather than a realistic one.
- Reframing mask-wearing recommendations as a patriotic duty to help preserve American businesses and freedoms, and drawing parallels to other safety laws that are commonly accepted restrictions on personal freedom for the greater good (like drunk driving), may help bring them around.

How much of a threat, if any, is the coronavirus outbreak to...?

Among Mask Avoiders (n=102)





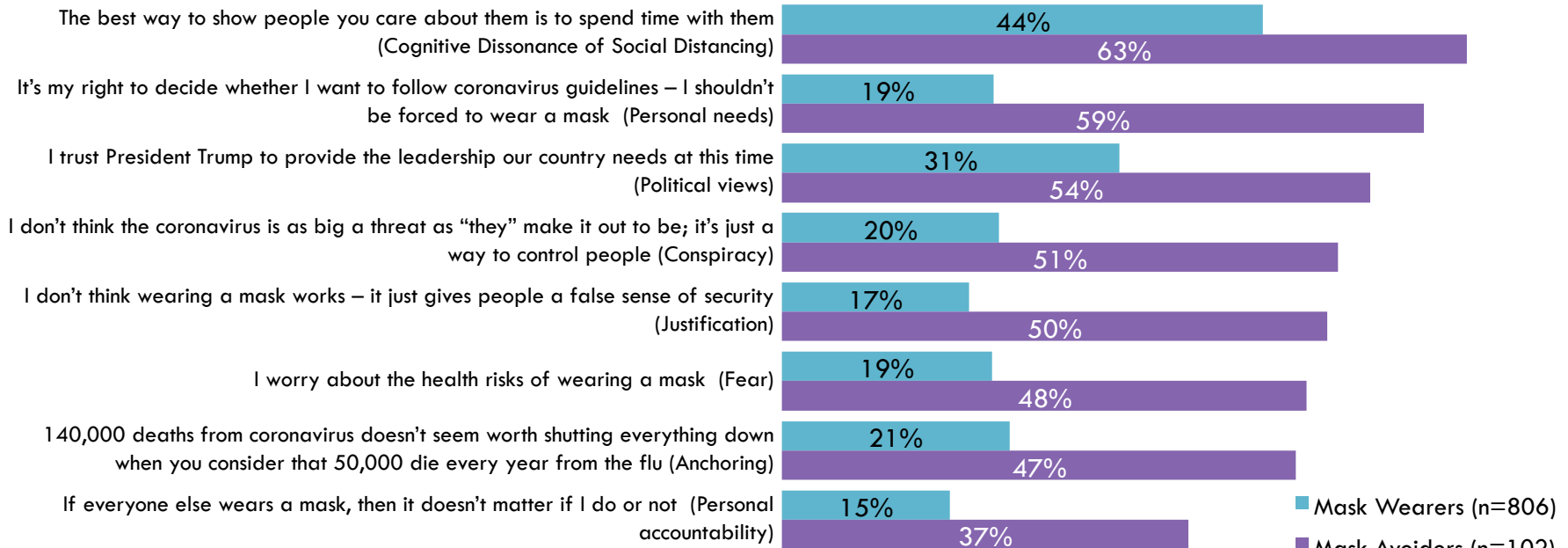
Mask Avoiders are MORE LIKELY to:

...agree that spending time with loved ones is the best way to show you care about them, suggesting they may be suffering more than most from the cognitive dissonance of the idea of “social” distancing, and are having a hard time getting comfortable with the idea of staying away from others to keep them safe.

...be concerned about being “forced” to wear a mask, and tend to question the effectiveness of masks and motives of mask advocates; they also are more likely to trust President Trump.

- **Again, it seems that appealing to their civic duty may be the encouragement they need.**

% Who Agree



July 20 – All differences between mask avoiders and mask wearers significant at the 90% confidence level.

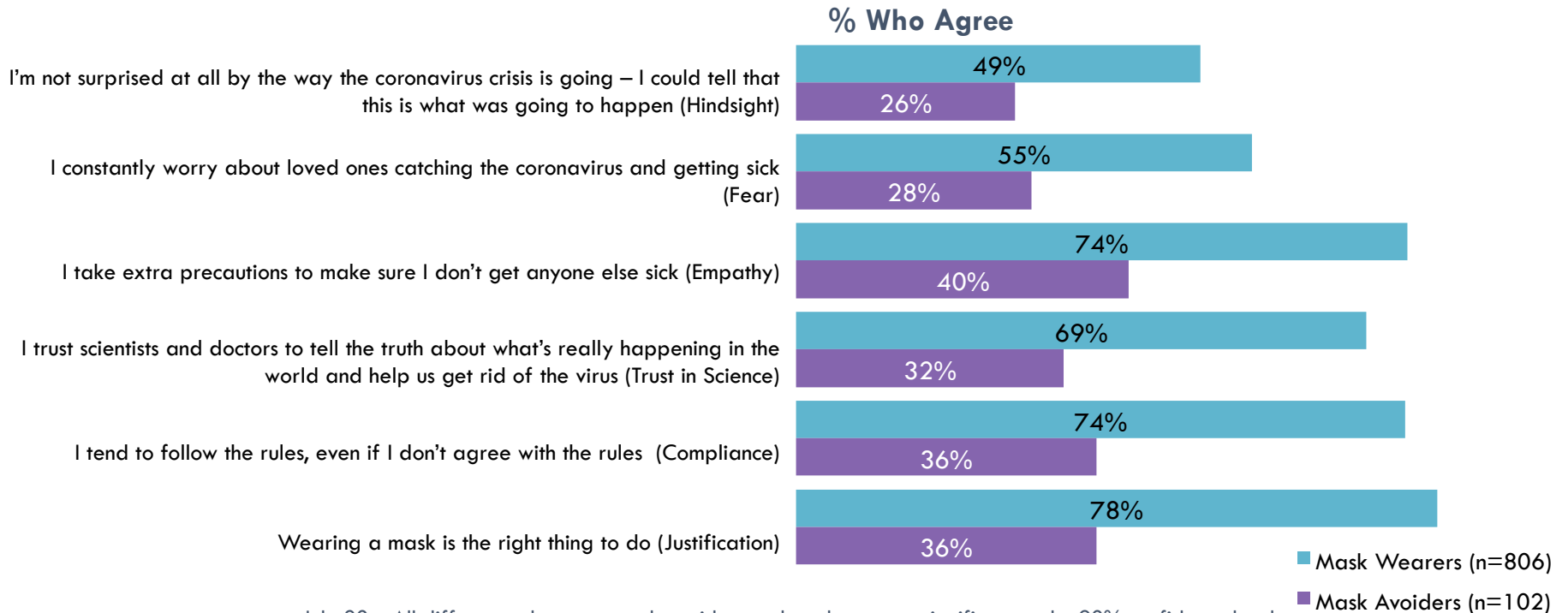
Mask AVOIDERS are LESS LIKELY to:

...say they are surprised at how the crisis is going, i.e., they're less likely to be influenced by hindsight bias.

...be consumed by worry about loved ones getting sick, take extra precautions to protect others, trust scientists and doctors to tell the truth, be willing to blindly follow rules, or think wearing a mask is the right thing to do.



- **Importantly, about one-third of Mask Avoiders do agree with these ideas, and yet avoid masks anyway.**



July 20 – All differences between mask avoiders and mask wearers significant at the 90% confidence level.



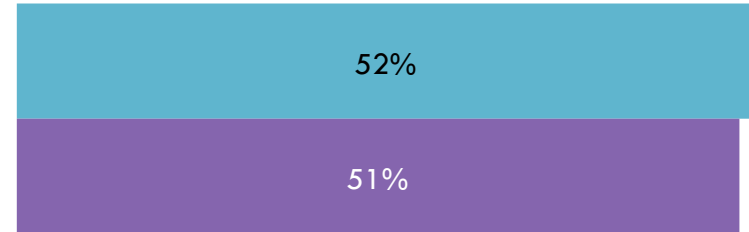
**Mask
Avoiders
are EQUALLY
LIKELY to:**

...believe in the Status Quo fallacy – the idea that since nothing bad has happened yet, the present course of action must be the best one, which may explain the stubbornness on both sides.

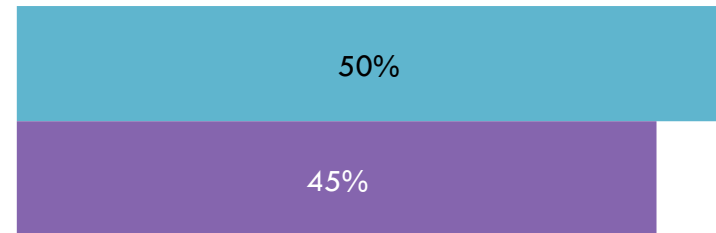
...see themselves as empathetic, suggesting that their actions are well-intentioned; perhaps they view protecting fellow citizens' rights as more important than protecting their health.

I haven't gotten sick yet, so what I'm doing must be working and there's no reason to change (Status quo)

% Who Agree



I tend to worry about other people more than myself (Empathy)



■ Mask Wearers (n=806)
■ Mask Avoiders (n=102)

What psychological phenomena are at play
in individual Americans' coronavirus
response?



Psychological Analysis of COVID Thoughts and Feelings

Key Observations from Informal Interviews with 10 Friends/Family – July 2020

Dan Young, PhD, Consulting, former P&G CMK cognitive scientist, 1985–2015



IMPORTANT: THIS WAS NOT A REPRESENTATIVE SAMPLE, BUT RATHER A CONVENIENCE SAMPLE OF FRIENDS AND FAMILY MEMBERS.

1. **EMOTIONAL:** COVID is a highly emotionally charged topic. In conversations with people, you first get a “reasoned” (though not necessarily rational) response. But very quickly, deep and highly charged emotions take center stage – fear, anger, apathy, defensiveness, confusion, and conflicting emotions.
2. **US vs. THEM:** COVID triggers “in-group vs. out-group” conversations and thinking. There were a lot of references to “those people’s” behavior vs. my people’s behavior.
3. **DISPLACEMENT:** With some people there was displacement/transference (i.e., the redirection to a substitute target of emotions) of their anger and frustration from the COVID target to other deep-seated biases/beliefs about unrelated issues, groups, or individuals.
4. **RATIONAL INCONSISTENCIES:** While people try to put a rational face on what they believe and do, it quickly becomes either non-rational or they contradict themselves by their specific actions. People discussed the precautions they take – for example, “I always wear a mask,” “I maintain social distance from others,” “I’m careful where I go,” etc. However, when you got into the details of what they actually did, they were inconsistent in their actions.
5. **DIFFICULTY PROCESSING:** The frustration, fear, anger, and anxiety associated with the uncertainty and inconsistent organizational and government decisions/behaviors led to an inability to truly and accurately frame the risk.

MY CONCLUSIONS: While this was clearly not systematic research, combined with quantitative research I personally reviewed, it presents a picture that indicates the need for understanding people’s response to COVID-19 and its risks at multiple levels:

- Cognitive, emotional, and social
- Conscious and non-conscious
- Thoughts vs. actions

Note: Dan is a consultant who co-developed our Spark Multi-Cognition Research methodology to capture System 1 Impulse and Emotion as well as System 2 rational reactions to product ideas, messaging, positioning, claims, and other short stimuli. Go to <https://www.acupoll.com/sparkmcr> for more information.

See appendix for Dr. Young’s detailed assessment

Complete Battery of Attitudinal Statements based on our psychological principles (% Agree)

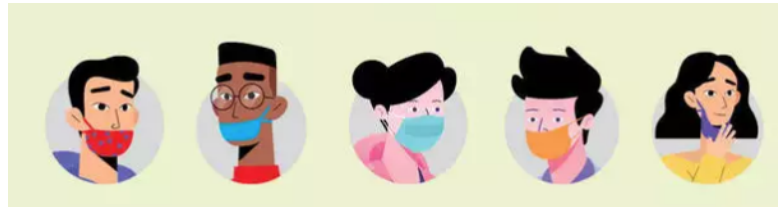
Wearing a mask is the right thing to do (Justification)	73%
I take extra precautions to make sure I don't get anyone else sick (Empathy)	70%
I tend to follow the rules, even if I don't agree with the rules (Compliance)	69%
I trust scientists and doctors to tell the truth about what's really happening in the world and help us get rid of the virus (Trust in Science)	65%
I'm confident that my choices and behaviors can protect me and others from the spread of coronavirus (Self-Efficacy)	65%
Everything I read or hear in the news tells me that I'm making the right decisions for my family (Confirmation Bias)	63%
I have been carefully monitoring statistics and scientific reports, and using that information to guide my decisions (Intellectual Curiosity)	55%
I constantly worry about loved ones catching the coronavirus and getting sick (Fear)	52%
I haven't gotten sick yet, so what I'm doing must be working and there's no reason to change (Status Quo)	52%
I focus on today's needs, since I don't know when things will get better (Hyperbolic Discounting)	50%
I tend to worry about other people more than myself (Empathy)	49%
Most people who disagree with me on these issues usually don't have all the facts (Justification)	48%
I'm not surprised at all by the way the coronavirus crisis is going – I could tell that this is what was going to happen (Hindsight)	46%
I constantly worry about catching the coronavirus and getting sick (Fear)	42%
Most people are trustworthy (Trust)	38%
Eventually, everything will get back to normal, like none of this ever happened (Normality)	35%
I trust President Trump to provide the leadership our country needs at this time (Political Views)	33%
I don't have to rely on so-called experts; since I personally understand how viruses work and what you need to do to avoid them (Dunning-Kruger)	26%
140,000 deaths from coronavirus doesn't seem worth shutting everything down when you consider that 50,000 die every year from the flu (Anchoring)	24%
It's my right to decide whether I want to follow coronavirus guidelines – I shouldn't be forced to wear a mask (Personal Needs)	24%
I don't think the coronavirus is as big a threat as "they" make it out to be; it's just a way to control people (Conspiracy)	23%
I believe that even if I take precautions, I'm likely to get COVID (Fatalism)	23%
I worry about the health risks of wearing a mask (Fear)	22%
I don't think wearing a mask works – it just gives people a false sense of security (Justification)	21%
It doesn't much matter what I do with masks and personal distance; one person can't make that much difference (Diffusion of Responsibility)	20%
I didn't really take the growing statistics around coronavirus hospitalizations and deaths seriously until I found out Tom Hanks had it, and they cancelled March Madness (Specific Cases vs. Statistics)	19%
If everyone else wears a mask, then it doesn't matter if I do or not (Personal Accountability)	18%



Those who agree strongly with
“Wearing a mask is the right thing to do”
(73% of sample)

46%

Sometimes or Never
Wear A Mask In One or
More Public Situations

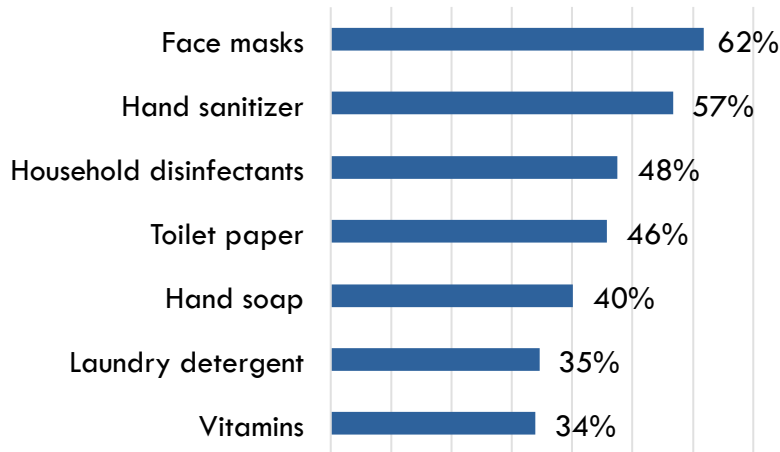


*Our rational/conscious beliefs don't always translate to behavior!
Maybe the “Sheeple” label isn't too far off the mark, with many
claiming to believe in wearing a mask, but not necessarily following
through when inconvenient/socially awkward.*



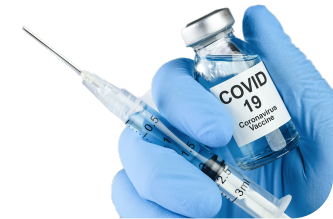
Those who agree strongly with
“I don’t think the coronavirus is as big a threat as ‘they’ make it out to be; it’s just a way to control people”
(24% of sample)

Categories purchased more often recently



69%

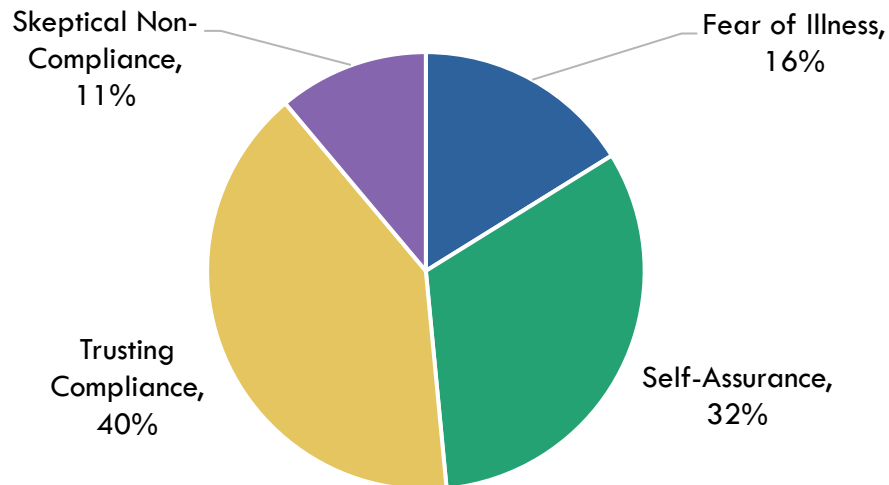
Are likely to get a vaccine



Their rationalization against the virus threat doesn't overcome their virus fears ... or defensive behaviors

- From these 27 insight statements, developed jointly with Dr. Dan Young, we've identified 4 factors that explain different attitudes toward the coronavirus and its management.
- Then, by applying the factor loadings, we identified what appear to be 4 distinct segments of consumers who identify most strongly with each of these factors.

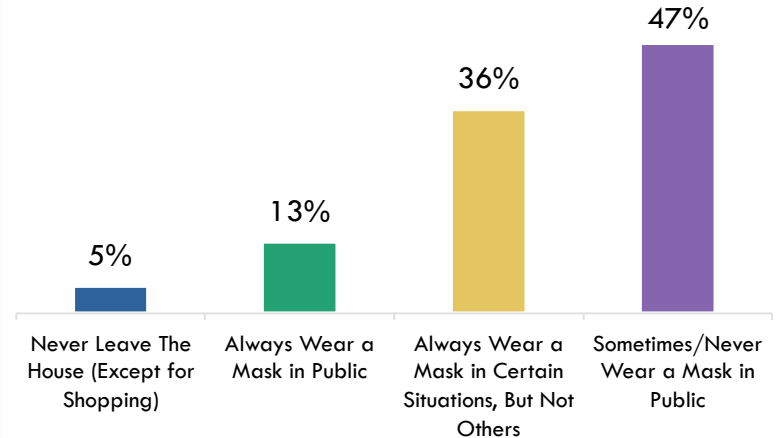
% of Sample Identifying Most with Factors





Skeptical Non-Compliance (11%)

- I don't think wearing a mask works – it just gives people a false sense of security (Justification)
- I don't think the coronavirus is as big a threat as “they” make it out to be; it's just a way to control people (Conspiracy)
- It's my right to decide whether I want to follow coronavirus guidelines – I shouldn't be forced to wear a mask (Personal Needs)
- 140,000 deaths from coronavirus doesn't seem worth shutting everything down when you consider that 50,000 die every year from the flu (Anchoring)
- I worry about the health risks of wearing a mask (Fear)
- I trust President Trump to provide the leadership our country needs at this time (Political Views)
- Eventually, everything will get back to normal, like none of this ever happened (Normality)
- If everyone else wears a mask, then it doesn't matter if I do or not (Personal Accountability)
- It doesn't much matter what I do with masks and personal distance; one person can't make that much difference (Diffusion of Responsibility)
- I don't have to rely on so-called experts; since I personally understand how viruses work and what you need to do to avoid them (Dunning-Kruger)
- I didn't really take the growing statistics around coronavirus hospitalizations and deaths seriously until I found out Tom Hanks had it, and they cancelled March Madness (Specific Cases vs. Statistics)



Those who identify with this factor are almost 50% Mask Avoiders, and tend to agree with the same insights as that group; they also still seem to be waiting/hoping for things to get “back to normal,” and may be dangerously mistaken as to the extent of their knowledge about how viruses work.



Trusting Compliance (40%)

Wearing a mask is the right thing to do (Justification)

I tend to follow the rules, even if I don't agree with the rules (Compliance)

I trust scientists and doctors to tell the truth about what's really happening in the world and help us get rid of the virus (Trust in Science)

Everything I read or hear in the news tells me that I'm making the right decisions for my family (Confirmation Bias)

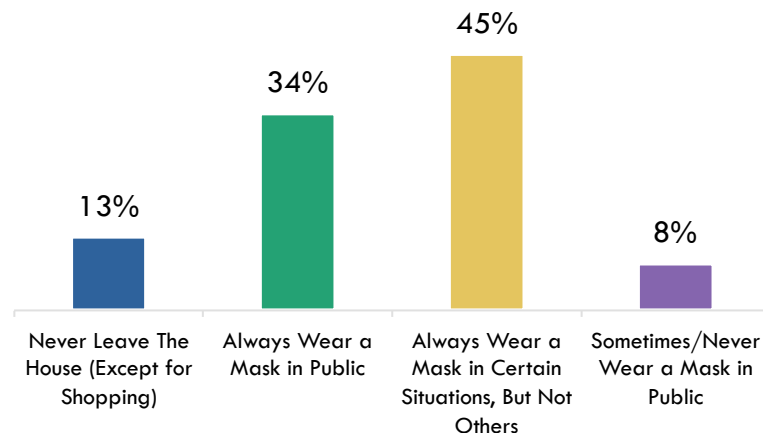
I'm confident that my choices and behaviors can protect me and others from the spread of coronavirus (Self-Efficacy)

I haven't gotten sick yet, so what I'm doing must be working and there's no reason to change (Status Quo)

I focus on today's needs, since I don't know when things will get better (Hyperbolic Discounting)

I tend to worry about other people more than myself (Empathy)

Most people are trustworthy (Trust)



Hypothesis: the “Trusting Compliance” factor represents those who are more controlled by external influences, while the “Self-Assurance” factor (next slide) represents more of an internal locus of control. Because no one is systematically monitoring mask-wearing behavior in all situations, you’d expect higher compliance with consumers who are stronger on the “Self-Assurance” factor.



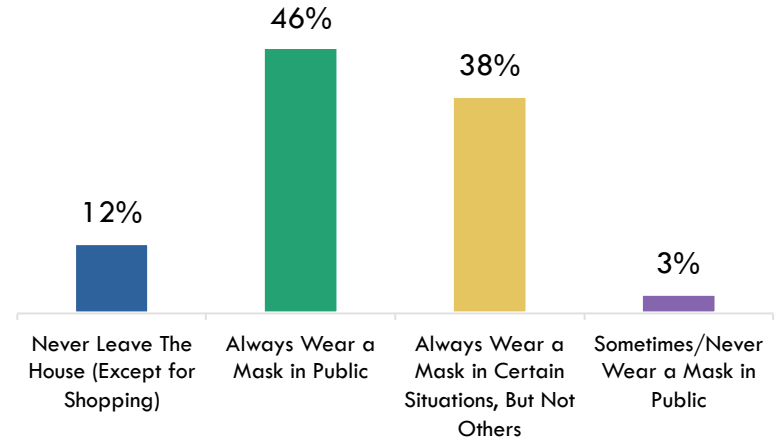
Self-Assurance (32%)

I take extra precautions to make sure I don't get anyone else sick (Empathy)

I have been carefully monitoring statistics and scientific reports, and using that information to guide my decisions (Intellectual Curiosity)

Most people who disagree with me on these issues usually don't have all the facts (Justification)

I'm not surprised at all by the way the coronavirus crisis is going – I could tell that this is what was going to happen (Hindsight)



*Those who are motivated by this factor seem to take more personal responsibility for helping to control the spread of the virus, and wear a mask/take other precautions because they believe it's **effective**, not just because they're supposed to.*

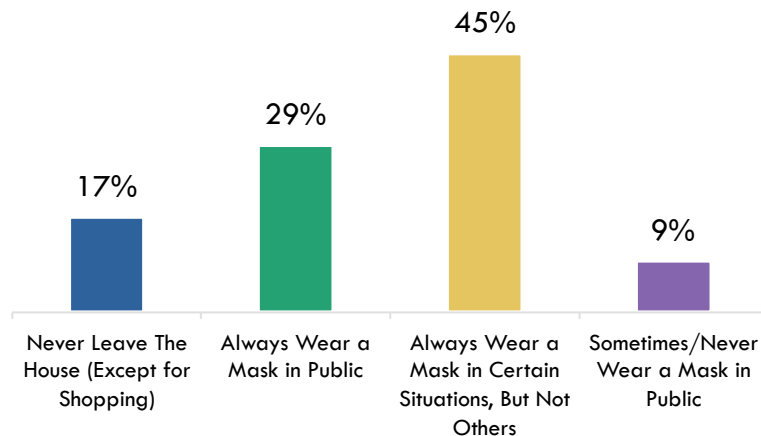


Fear of Illness (16%)

I constantly worry about loved ones catching the coronavirus and getting sick (Fear)

I constantly worry about catching the coronavirus and getting sick (Fear)

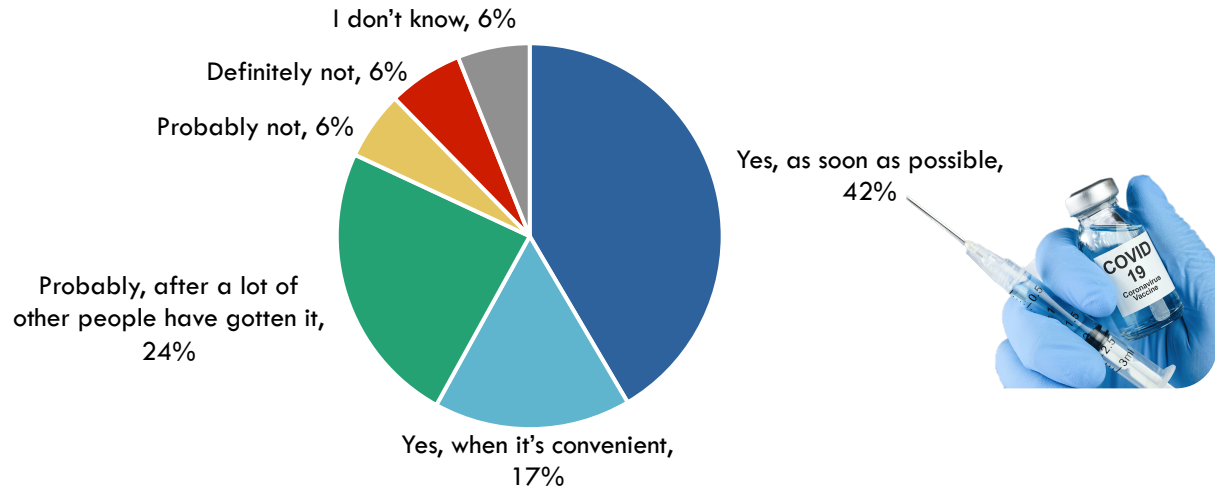
I believe that even if I take precautions, I'm likely to get COVID (Fatalism)



This factor is driven by potentially irrational fear; for the most part, they are taking the recommended precautions to avoid getting sick – with 17% essentially on full lockdown, they constantly worry about infection for themselves and loved ones.

- 82% of U.S. consumers are interested in a vaccine, which is encouraging compared to the 45% who get the flu vaccine annually, according to the CDC.
- However, 24% indicate they may take a “wait-and-see” approach – potentially resulting in less than 2/3 getting it initially.
 - Those more hesitant are more likely to be female (but not necessarily more likely to be moms), live in more rural/suburban areas, and are less confident that the choices they’re making today are the right choices.
 - Reaching and reassuring those 24% may be vitally important for herd immunity to work, according to [this article](#)* we found from the Mayo Clinic.

If a vaccine becomes available for the coronavirus, will you get it, and if so, how soon?



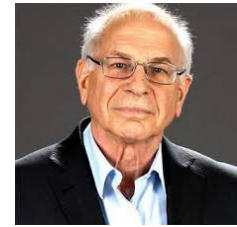
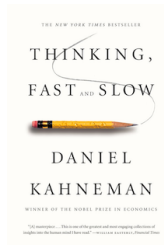
*<https://www.mayoclinic.org/diseases-conditions/coronavirus/in-depth/herd-immunity-and-coronavirus/art-20486808>

What is the role of System 1 and System 2
in these decisions?



Nobel Prize Winner Daniel Kahneman

2 Modes of “Thinking” and How We Process Information



System 1 (“Fast”)



- Automatic / Reacts to Stimuli
- Non-Conscious
- Habit or Experience-driven

Gut



Impulse



Mental Associations (PB & ?)



Emotional Reaction



Heuristics / Mental Shortcuts



Habitual / Automatic Behavior



System 2 (“Slow”)



- Rational Thought
- Conscious / Aware
- Requires Attention

Logic



Math

$$2x + 5y = -1$$

$$5y = -2x - 1$$

$$y = -\frac{2}{5}x - \frac{1}{5}$$

Self-Control



Goal-Seeking

Nutrition Facts	
Serving Size 2 Oatcakes (30g)	
Amount Per Serving	
Calories 135	Calories from Fat 69
% Daily Values*	
Total Fat 7.7g	12%
Saturated Fat 4.1g	21%
Trans Fat 0g	

Evaluations or Comparisons

Compare Great Deals	Compare Great Deals	Compare Great Deals	Compare Great Deals
✓	✓	✓	✓
✓	✓	✓	✓
✓	✓	✓	✓
✓	✓	✓	✓
✓	✓	✓	✓
✓	✓	✓	✓
✓	✓	✓	✓
✓	✓	✓	✓
✓	✓	✓	✓
✓	✓	✓	✓

Explaining or “Rationalizing”



Attitudinal statements reveal the cognitive biases and exaggerations we all go through as Systems 1 and 2 interact:

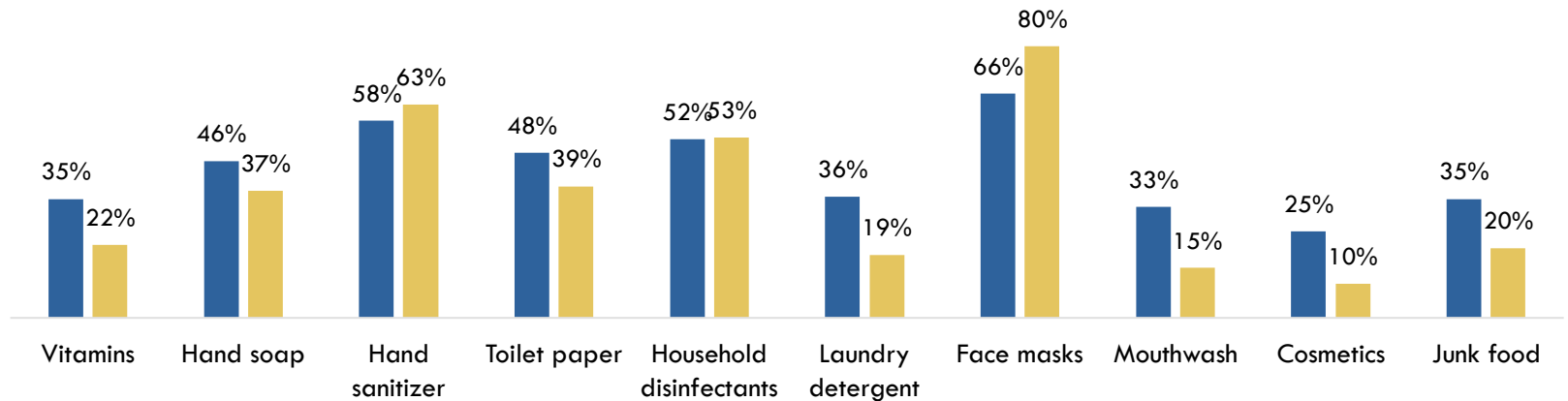
% Agree

- 65%** **I'm confident that my choices and behaviors can protect me and others from the spread of coronavirus (Self-Efficacy)**
Suggests hubris or over-confidence that one can be self-assured amidst the most contagious virus of our times, transmittable by asymptomatic people
- 52%** **I haven't gotten sick yet, so what I'm doing must be working and there's no reason to change (Status Quo)**
It's fallacious to think that just because you haven't been infected, you're doing things right, when only a few hundred people have been out of 100,000
- 48%** **Most people who disagree with me on these issues usually don't have all the facts (Justification)**
Obviously, this is over-confidence in one's ability to capture "all" the facts, and closed-minded to other points of view
- 35%** **Eventually, everything will get back to normal, like none of this ever happened (Normality)**
Emotional and overcome by the desire for positivity, given how many well-known businesses have already gone bankrupt (let alone families)
- 24%** **140,000 deaths from coronavirus doesn't seem worth shutting everything down when you consider that 50,000 die every year from the flu (Anchoring)**
1 in 4 agree – yet ignore that this statistic compares 3 to 4 months of deaths to an annual rate, and that the 140,000 could easily mushroom by year's end
- 24%** **It's my right to decide whether I want to follow coronavirus guidelines – I shouldn't be forced to wear a mask (Personal Needs)**
Values-driven ... yet choosing to ignore that we have restrictions all the time in daily life (laws/restrictions re: seat belts, drunk driving, drug use, taxes)
- 19%** **I didn't really take the growing statistics around coronavirus hospitalizations and deaths seriously until I found out Tom Hanks had it, and they cancelled March Madness (Specific Cases vs. Statistics)**
1 in 5 admit that celebrity/sports news made a bigger impact on them than the facts ... we suspect that this would have been higher if we had included other relatively frivolous indicators (when bars closed, when they cancelled baseball's Opening Day, etc.) – compared to death statistics



- Consumers who agree more that they are guided more by intuition and (System 1) gut feelings are more likely to have been stocking up on virtually every category, compared to those who think they're guided by (System 2) logic and facts.
 - Our guess is that they're trying to build a safer, more comforting nest, and/or got swept up in panic buying.
- Meanwhile, those claiming to make decisions with System 2 logic have been buying more hand sanitizer and face masks, which are the items that experts recommend we stock up on.

Categories Purchased More Often During Pandemic



■ More System 1-Oriented (I tend to make decisions based on intuition and “gut feelings”) n=126

■ More System 2-Oriented (I tend to make decisions based on logic and the most recent facts) n=572

- Those who are more System 2-oriented, however, aren't quite as logical and data-driven as they'd like to think they are.

45%

"I constantly worry about catching the coronavirus and getting sick"

...when in fact...

"For most people, the immediate risk of becoming seriously ill from the virus that causes COVID-19 is thought to be low."

—CDC, JUNE 30, 2020

55%

Say they are on lockdown/never leave the house except for essentials

...when in fact...

50% of those claiming this have been to a restaurant, hair salon, or nail salon in the past two weeks.

50%

"I'm not surprised at all by the way the coronavirus crisis is going – I could tell that this is what was going to happen"

...when in fact...

They are likely falling prey to hindsight bias.

Emotional & Economic Impact

Continuing our tracking of consumer priorities and sentiment

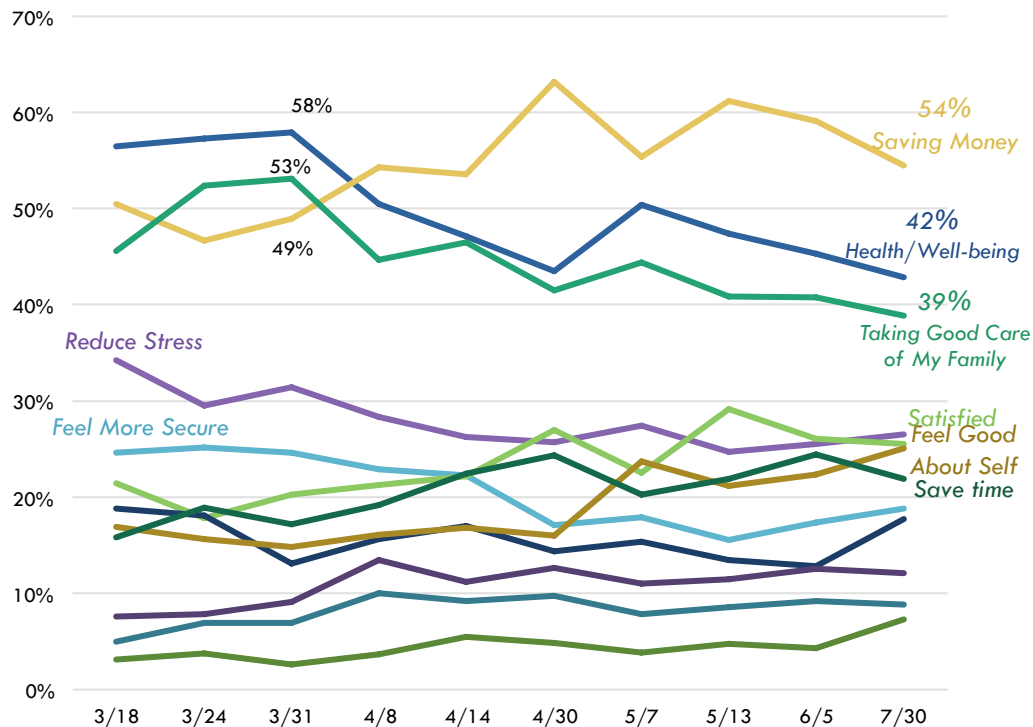




Core Motivations

ACUPOLL'S approach to understanding the deeper drivers for purchase decisions

When you're looking for products to buy, what are your TOP 3 PRIORITIES right now?



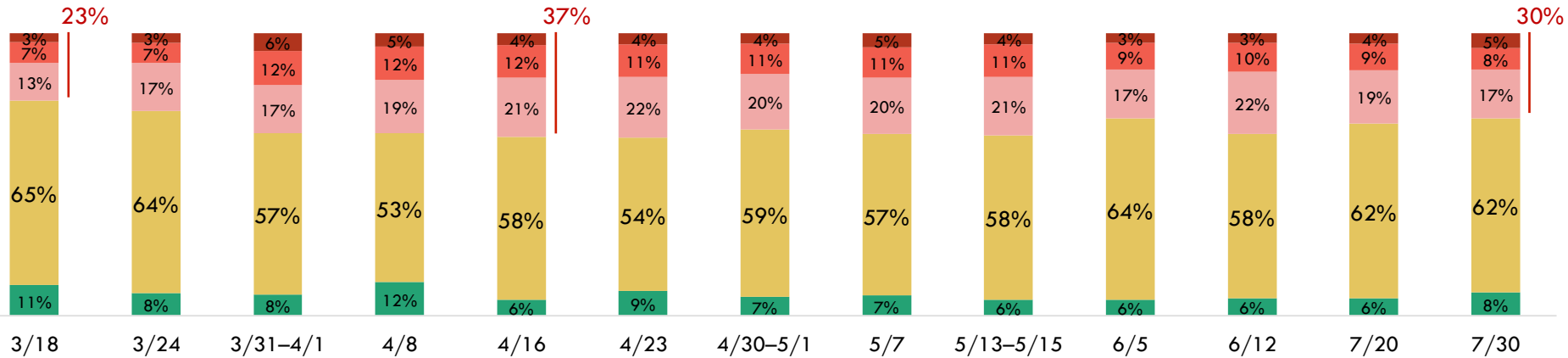
Differences of 4% are generally significant at the 90% confidence level.

- We are continuing to see *Saving Money* dominate as most important when making buying decisions, while *Health/Well-being* and *Taking Good Care of My Family* decline.
- This reinforces the need for companies to focus on justifying their Value proposition in this environment.
- These three basic needs have all declined since June, as people settle more into the “new normal” and are able to move back up Maslow’s Hierarchy.
- The need to *reduce stress* and *feel more secure* are on the decline, and consumers are beginning to demand that products *satisfy, save time, and make them feel good about themselves* again.



- About one-third of those surveyed have lost at least some income – a number that has held steady since early April, although a few % points off its peak of 37%.

How much, if at all, has each of the following CHANGED since before recent events?



**Your household INCOME
from employment**

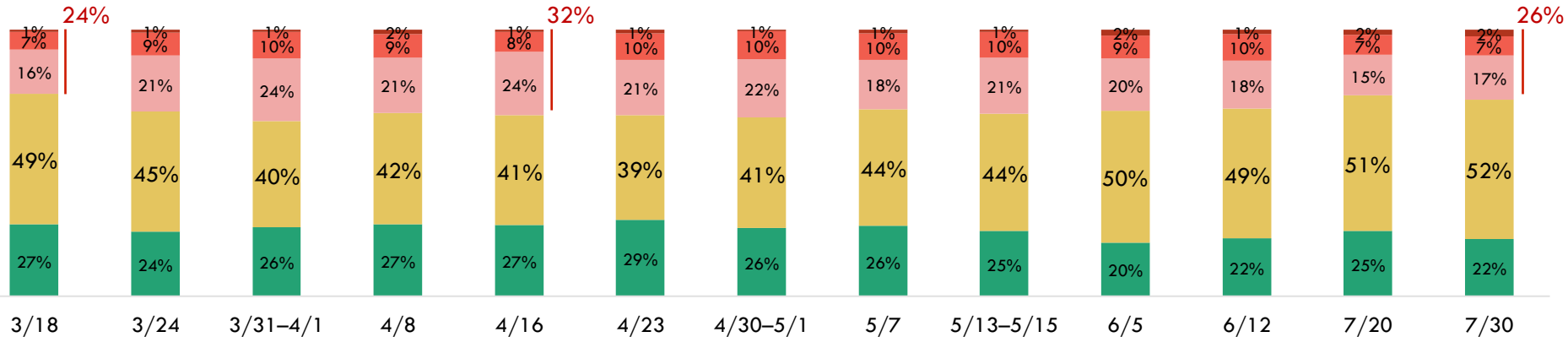
■ Increased ■ Stayed the same/no change ■ Decreased a little ■ Decreased a lot ■ Eliminated completely

Differences of 4% are generally significant at the 90% confidence level.



- The % of households decreasing their essential spending is also down from its mid-April peak of 32%.

How much, if at all, has each of the following CHANGED since before recent events?



**Your household SPENDING
on ESSENTIAL items**

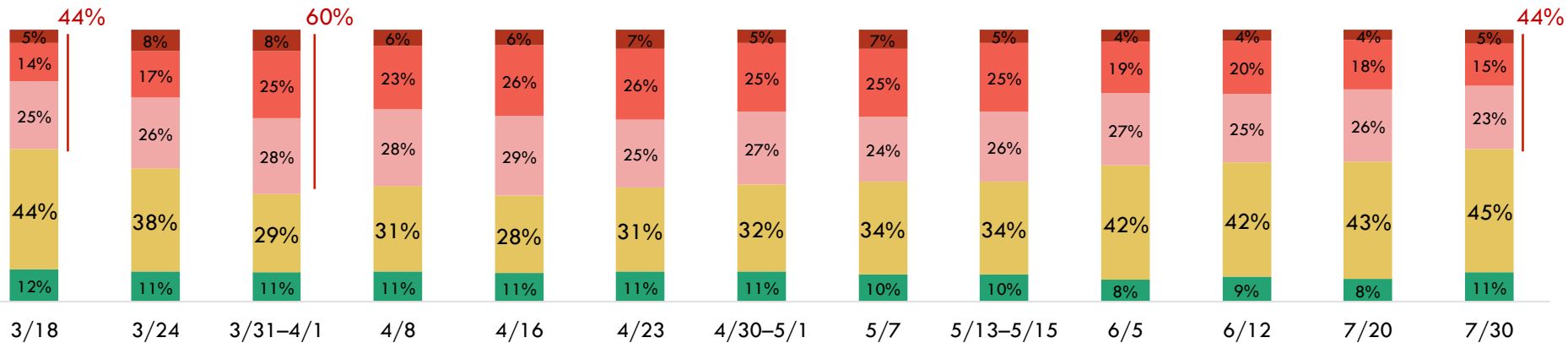
■ Increased ■ Stayed the same/no change ■ Decreased a little ■ Decreased a lot ■ Eliminated completely

Differences of 4% are generally significant at the 90% confidence level.



- The number of households spending less on non-essential items has been steadily trending down since late March/early April, but has not yet rebounded from the original downturn at the beginning of the crisis in the US.

How much, if at all, has each of the following CHANGED since before recent events?



**Your household SPENDING
on NON-ESSENTIAL items**

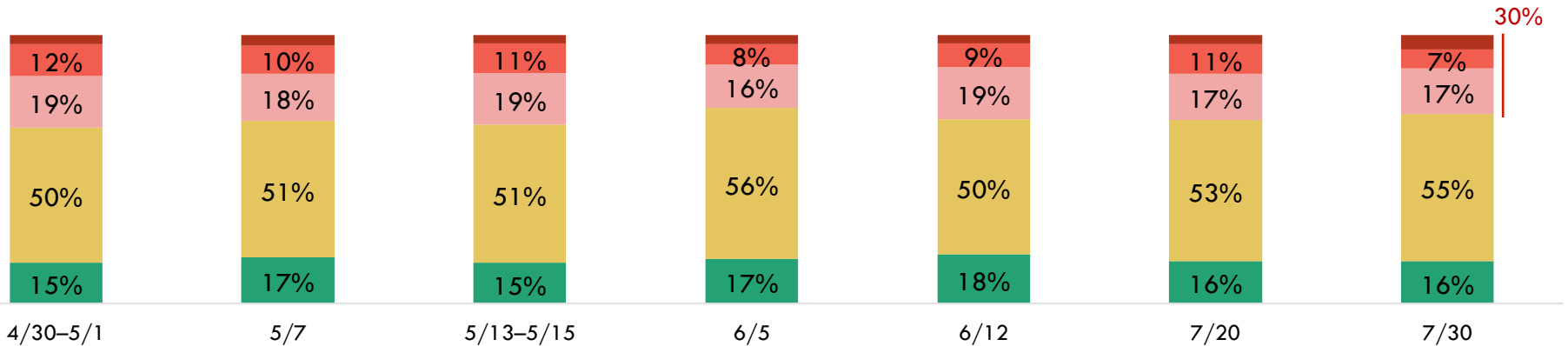
■ Increased ■ Stayed the same/no change ■ Decreased a little ■ Decreased a lot ■ Eliminated completely

Differences of 4% are generally significant at the 90% confidence level.



- About one-third of households have had to pull from savings.

How much, if at all, has each of the following CHANGED since before recent events?



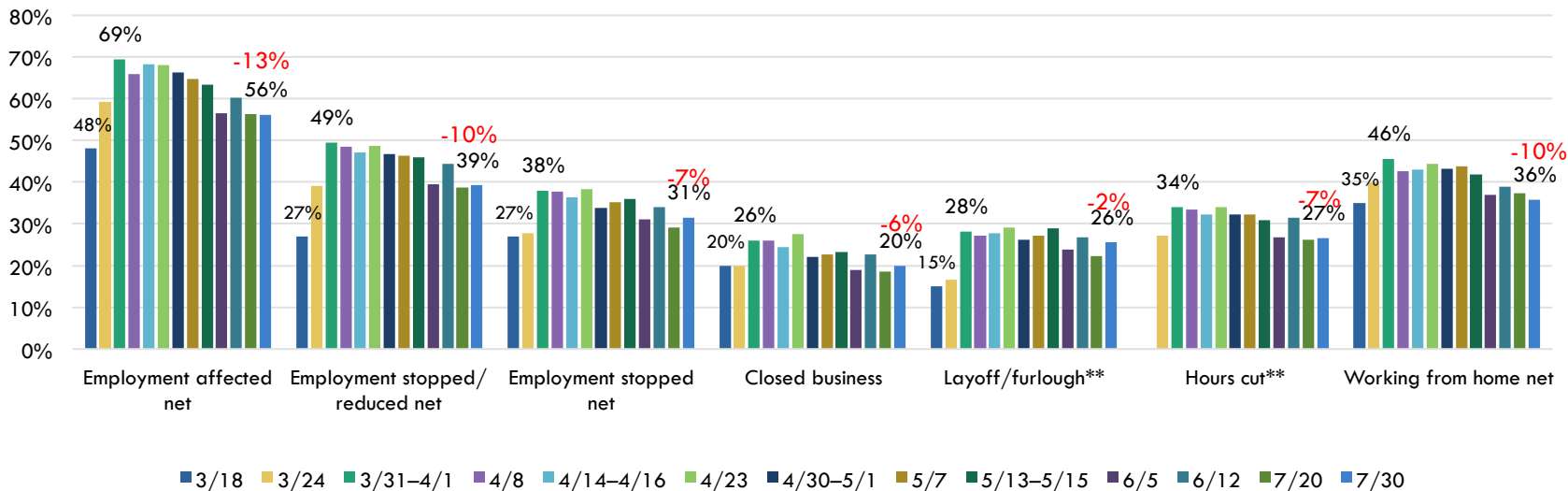
Your household SAVINGS

■ Increased ■ Stayed the same/no change ■ Decreased a little ■ Decreased a lot ■ Eliminated completely

Differences of 4% are generally significant at the 90% confidence level.

- **Employment losses *may* be trending down from their peak at the beginning of April, as some businesses re-open or people find new jobs.**
- However, the changes over time are slight, and those with stopped/reduced income are still at an alarmingly high rate if these businesses/industries don't bounce back soon.

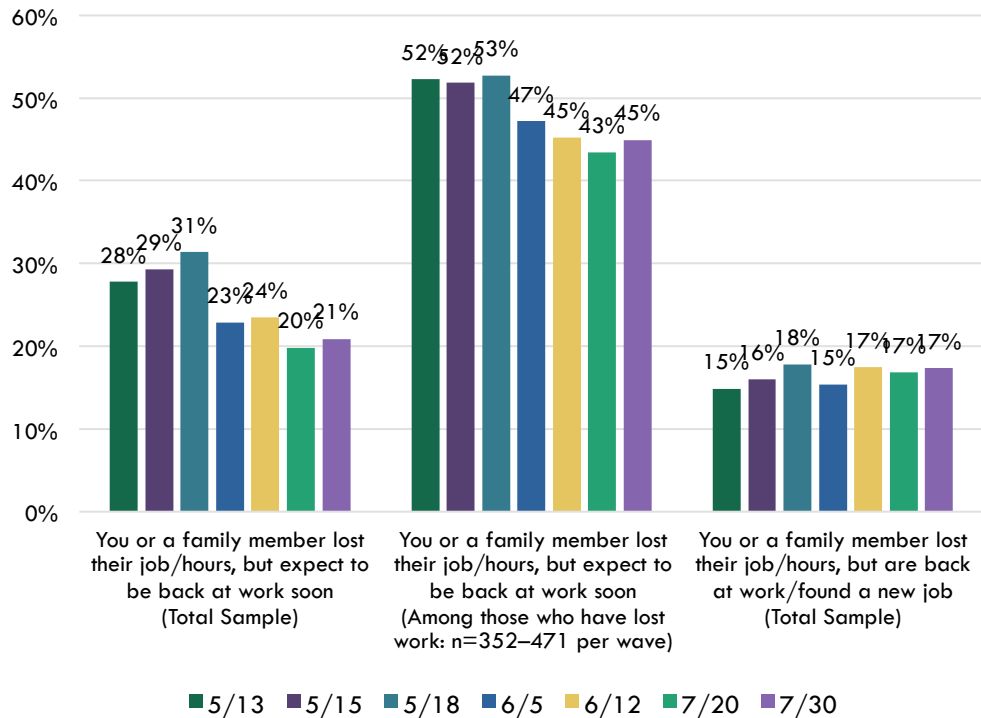
Difference vs. Peak:



**Furlough added on 3/31 **Hours cut added on 3/24

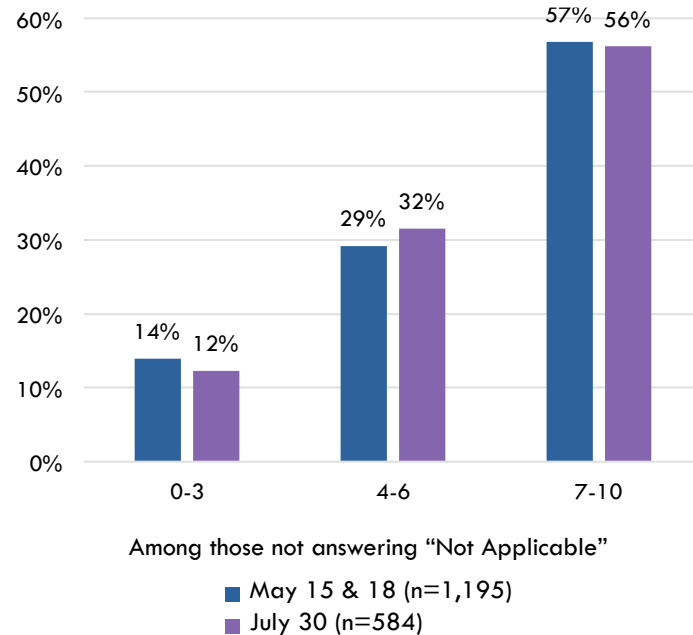
Differences of 4% or greater are significant at the 90% confidence level.

- While some unemployed workers are optimistic that they'll be back at work soon, and some have already been able to find new work, about half have low confidence in getting their jobs back.



If you have lost income or employment due to the Coronavirus, how CONFIDENT are you that you will get your hours/salary back sometime in the near future?

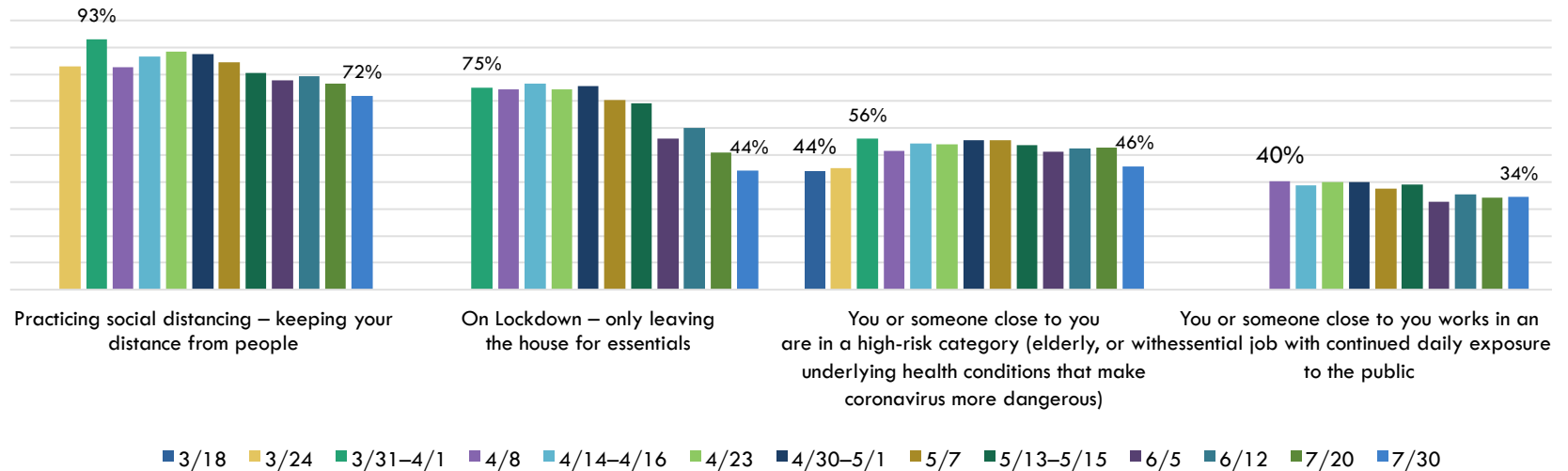
(0) Not At All Confident / (10) Very Confident



Differences of 4% or greater are significant at the 90% confidence level.

- The number of consumers practicing social distancing and lockdown continues to decline, as more states open back up.
- The number of people working in essential jobs has decreased, perhaps due to additional recent layoffs/closures, or changes in worksites that decrease public contact.

Which of the following changes have you or someone in your household experienced due to recent events?

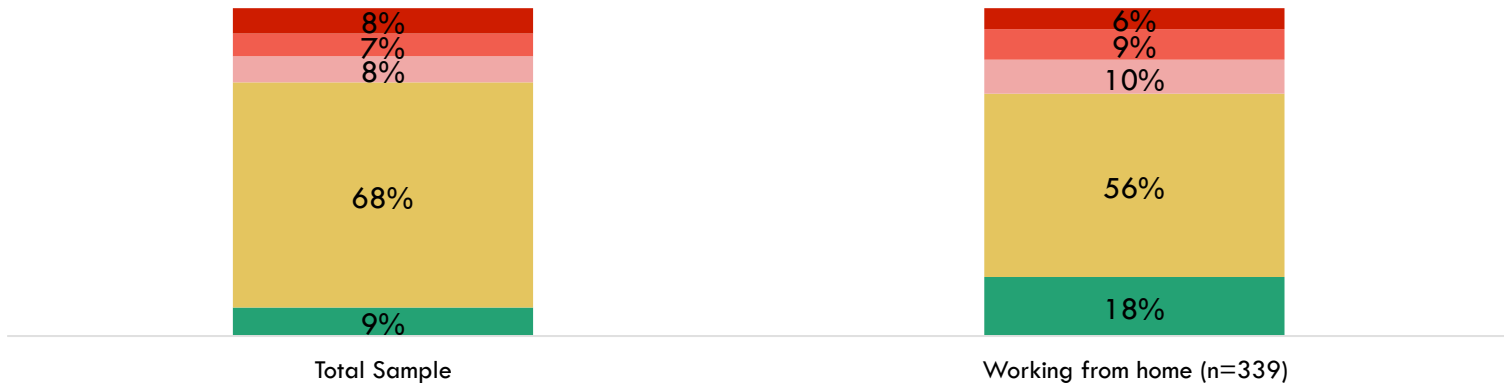


Differences of 4% are generally at the 90% confidence level.



- Work schedules are changing, particularly for those who are working from home.
- 18% report working outside normal business hours more often, while 25% are doing so less often, perhaps in an effort to get as much of a barrier between home and work as possible.

How much, if at all, has each of the following CHANGED since before recent events?



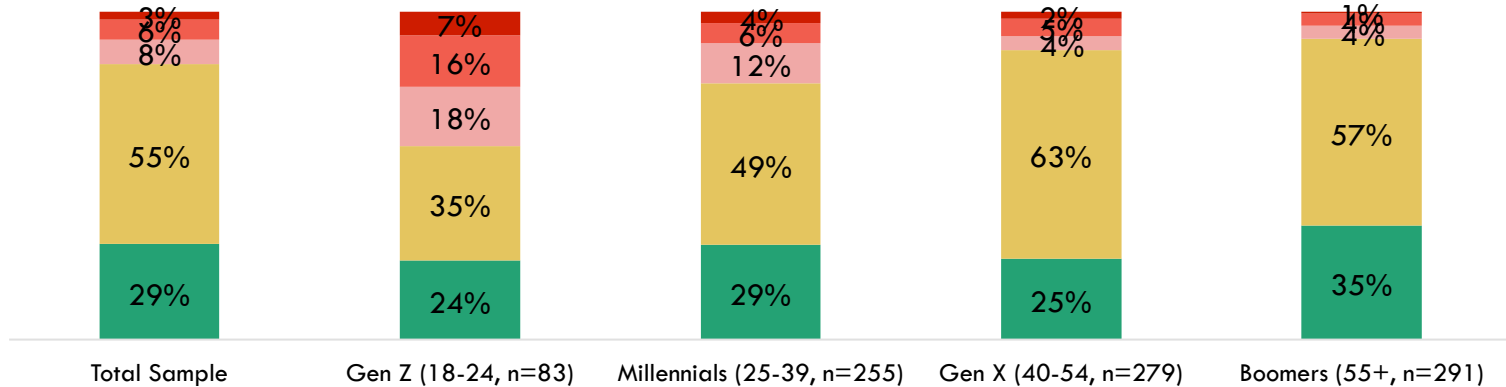
Working Outside of “Normal” Business Hours

■ Increased ■ Stayed the same/no change ■ Decreased a little ■ Decreased a lot ■ Eliminated completely



- How we communicate with loved ones is in flux as well, with close to one-third of consumers talking on the phone more often.
- While 24% of Gen Z are talking on the phone more, 41% are doing so even less than they did before, which probably wasn't very much.

How much, if at all, has each of the following CHANGED since before recent events?



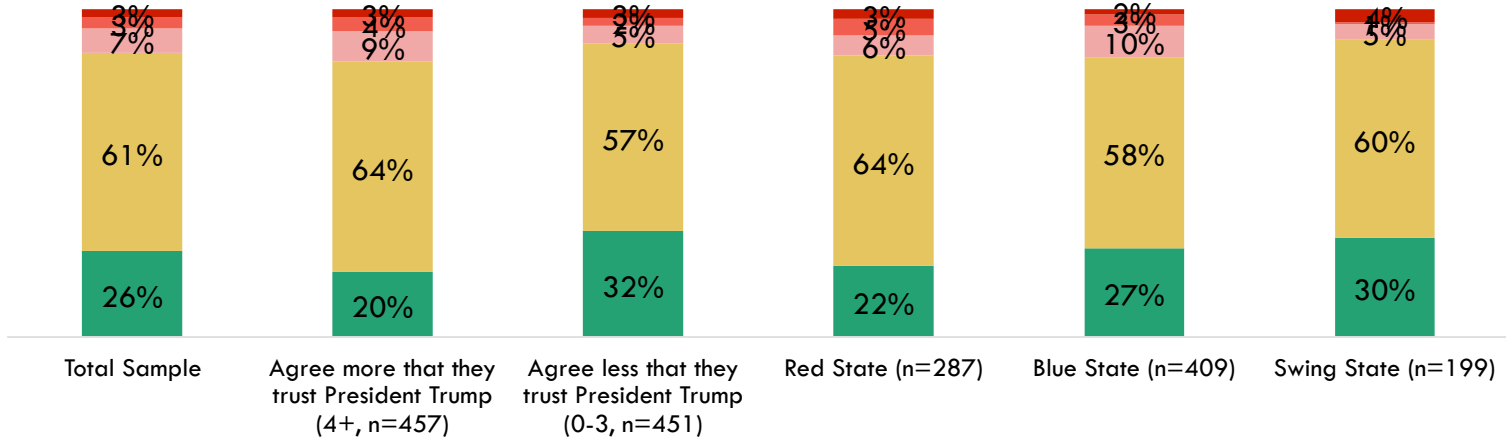
Talking to friends and family over the phone (as opposed to just texting)

■ Increased ■ Stayed the same/no change ■ Decreased a little ■ Decreased a lot ■ Eliminated completely



- Those who distrust the President, or who live in Blue or Swing states, are more likely to be “fired up” about voting in the next presidential election.

How much, if at all, has each of the following CHANGED since before recent events?



Your likelihood of voting in the next presidential election

■ Increased ■ Stayed the same/no change ■ Decreased a little ■ Decreased a lot ■ Eliminated completely

- **Remote learning through the school system is what most parents plan on doing for the coming school year.**

- Those in rural communities, and African Americans, are less likely to be planning on this, perhaps because they don't have that option.
- Those in suburban communities (who make up the majority of our sample) seem to be most likely to rely on their local school system for education, with rural and urban parents more likely to be turning to creative solutions like homeschooling, hiring professionals, or forming a co-op with other families.
- Lower-income families are, paradoxically, least likely to be using remote learning *and* in-person learning; our hunch is that between work, transportation, and child-care concerns, they're less likely to be able to "double-dip" as some more affluent families are doing.
- African-American and Hispanic parents are 3 to 4 times more likely than Caucasians to plan on forming an education co-op, and 39% of Hispanic parents surveyed plan to hire outside help.

If you have school-age kids, which of the following are you planning on for the coming school year?	Remote learning through the school system	In-person learning at school	Independent homeschooling	Hiring teachers or tutors to teach my child in home	Forming an education co-op with other families to teach kids in small groups at home
Total Parents (n=370)	52%	39%	25%	18%	10%
Rural (n=87)	39%	43%	29%	24%	14%
Suburban (n=233)	57%	37%	21%	13%	6%
Urban (n=50)	50%	42%	38%	26%	18%
HH Income <\$50,000 (n=113)	43%	33%	27%	15%	11%
HH Income \$50,000-\$99,999 (n=130)	52%	37%	28%	15%	3%
HH Income \$100,000+ (n=127)	59%	46%	21%	22%	16%
White (n=247)	51%	45%	25%	16%	6%
African American (n=45)	38%	27%	27%	18%	24%
Hispanic (n=51)	55%	35%	31%	39%	20%

Appendix



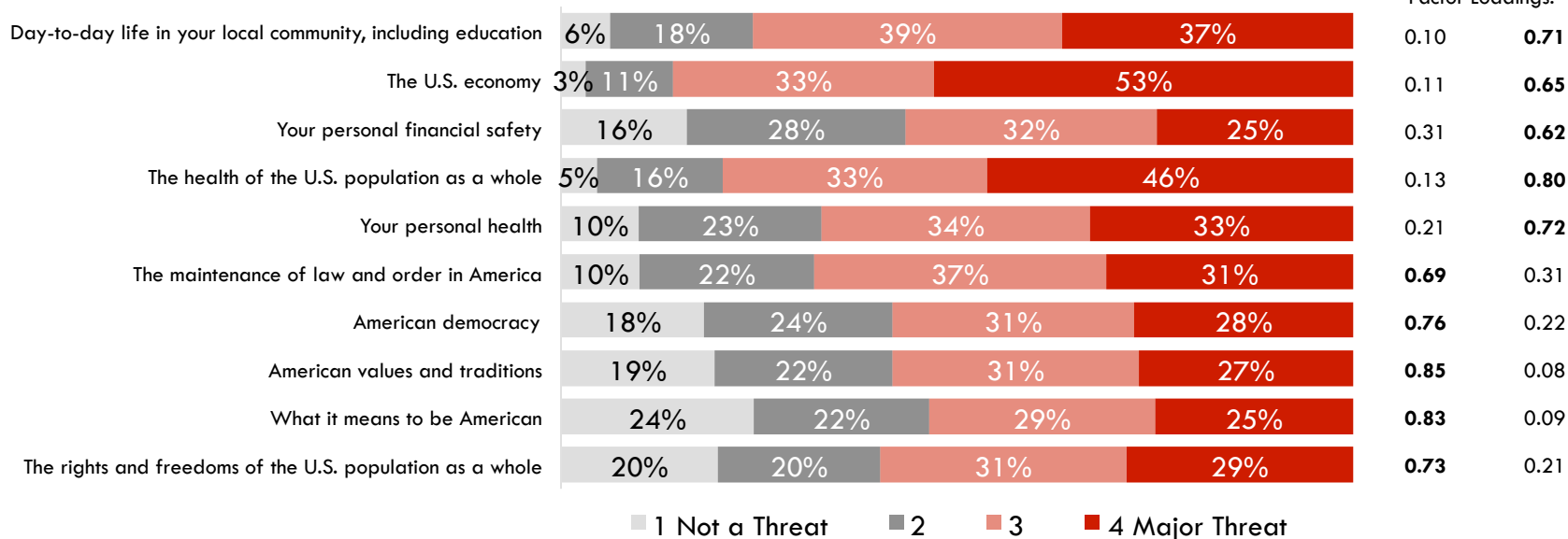
- Respondents in general are most likely to see the coronavirus as a threat to the U.S. economy and the health of the population as a whole, as opposed to a threat to them personally.

How much of a threat, if any, is the coronavirus outbreak to...?

Symbolic Threat
56%
of Sample

Realistic Threat
44%
of Sample

Factor Loadings:



Source of scale & factor loadings: Kachanoff, Bignan, Kapsakis, Gray. Measuring Two Distinct Psychological Threats of COVID-19 and their Unique Impacts on Wellbeing and Adherence to Public Health Behaviors, April 2020.

Psychological Analysis of COVID Thoughts and Feelings

Informal Interviews with 10 Friends/Family – July 2020

Dan Young, PhD, Consulting, former P&G CMK cognitive scientist, 1985-2015



IMPORTANT – THIS WAS NOT A REPRESENTATIVE SAMPLE, BUT RATHER A CONVENIENCE SAMPLE OF FRIENDS AND FAMILY MEMBERS.

The following are some key observations from these in-context interactions:

1. **EMOTIONAL:** COVID is a highly emotionally charged topic. In conversations with people, you first get a “reasoned” (though not necessarily rational) response. But very quickly, deep and highly charged emotions take center stage – fear, anger, apathy, defensiveness, confusion, and conflicting emotions. Once the emotions take over, you start to see disconnected and, at times, personally targeted negative comments. While some are still focused on COVID specifically, they generally turn into short vignettes/stories of people’s and authorities’ behavior and comments.
2. **US vs. THEM:** COVID triggers “in-group vs. out-group” conversations and thinking. There were a lot of references to “those people’s” behavior vs. my people’s behavior. The in and out groups could be political, age groups, racial groups, community groups. It seemed that people quickly shifted responsibility for the problem to others.
3. **DISPLACEMENT:** With some people, there was displacement/transference (i.e., the redirection to a substitute target of emotions) of their anger and frustration from the COVID target to other deep-seated biases/beliefs about unrelated issues, groups, or individuals. This is the first time I have seen this occur on a wide range of emotionally charged topics. My hypothesis is that people feel such strong emotions in this space but have no real outlet for impacting the source directly, that they reroute their emotions to other areas of personal concern.

As an example, one person I talked with transferred their anger and frustration about COVID onto me. They became very angry and attacked what they knew were my personal beliefs, even though they were irrelevant. In a later email exchange where I tried to reduce the tension, their response was “I just want things to get back to normal.” I sensed them feeling a lack of control in the current world and that their personal beliefs were at stake.

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4. **RATIONAL INCONSISTENCIES:** While people try to put a rational face on what they believe and do, it quickly becomes either non-rational or they contradict themselves by their specific actions. People discussed the precautions they take – for example, “I always wear a mask,” “I maintain social distance from others,” “I’m careful where I go,” etc. However, when you got into the details of what they actually did, they were inconsistent in their actions. For instance, one person who said they always wear a mask in public, later said she did not wear a mask if she was interacting with people outside of buildings. Others (one a salesperson) admitted they only wore their masks if the business they called on required it. Another said they always social distanced, but we were in a group of people sitting less than 4 feet apart. Another person working in the medical profession, mentioned a doctor they worked with who did not wear a mask “because he didn’t have COVID,” discounting the protection it would afford him from contracting the virus.
5. **DIFFICULTY PROCESSING:** The frustration, fear, anger, and anxiety associated with the uncertainty and inconsistent organizational and government decisions/behaviors led to an inability to truly and accurately frame the risk. With some people this led to near isolation from anyone other than those in the household; for others, it seemed to lead to inconsistently taking safety measures or doing nothing at all.

MY CONCLUSIONS: While this was clearly not systematic research, combined with quantitative research I personally reviewed, it presents a picture that indicates the need for understanding people’s response to COVID-19 and its risks at multiple levels:

- Cognitive, emotional, and social
- Conscious and non-conscious
- Thoughts vs. actions

Based on this holistic understanding, we can then develop multiple and integrated messaging that speaks (in a cohort way) to people on multiple levels. I’ve worked with creatives in the past (on very different issues), supporting their development of effective and fluently processed advertising and marketing communications based on such understanding.

Note: Dan is a consultant who co-developed our Spark Multi-Cognition Research methodology to capture System 1 Impulse and Emotion as well as System 2 rational reactions to product ideas, messaging, positioning, claims, and other short stimuli. Go to <https://www.acupoll.com/sparkmcr> for more information.

• What's Next?

- These results may vary further by regional hot spot, age, household income, and countless segment opportunities.
- If you have questions about what's happening in your brand or category, ask us!
- Missed our previous reports? Click here: <https://www.acupoll.com/blog/category/COVID-19+Data+Reports>
- Want to share with friends or colleagues? Please feel free! <https://mailchi.mp/acupoll.com/covid-19-data>



Contact us so we can help you navigate these new waters.

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