

Encouraging behavior to reduce the spread of COVID-19

Submission date 16/07/2020	Recruitment status No longer recruiting	<input type="checkbox"/> Prospectively registered
		<input type="checkbox"/> Protocol
Registration date 27/07/2020	Overall study status Completed	<input type="checkbox"/> Statistical analysis plan
		<input checked="" type="checkbox"/> Results
Last Edited 19/03/2021	Condition category Infections and Infestations	<input type="checkbox"/> Individual participant data

Plain English summary of protocol

Background and study aims

The researchers plan to conduct survey experiments examining which public health messages are most effective in increasing compliance with social distancing guidelines during the COVID-19 pandemic. They will also examine whether this type of messaging changes attitudes and beliefs about those who are not cooperating with social distancing efforts. They will measure their behavioral intentions, attitudes, and beliefs after treatment. They will also collect basic demographic information.

Who can participate?

Americans over the age of 18 are eligible. The researchers are using You Gov panels to get a census representative sample of participants.

What does the study involve?

Participants will spend at minimum 30 seconds on the survey page that shows them the messages to give them ample time to read it. After reading the message, subjects complete questionnaires measuring (1) intended social distancing behaviors, (2) food-related behaviors, (3) evaluations of others based on their social distancing behavior, (4) beliefs about the efficacy and importance of social distancing, (5) mask-wearing, (6) interest in receiving a future COVID-19 vaccine, and (7) different ways of voting in the November 2020 election. The study then concludes with a short debrief that highlights the importance of social distancing and provides participants with a link to learn more.

What are the possible benefits and risks of participating?

There are no direct benefits to participating, nor are there any known risks. The study will help policymakers develop evidence-based messaging strategies to promote social distancing and prevent the spread of COVID-19.

Where is the study run from?

Yale University (USA)

When is the study starting and how long is it expected to run for?

May 2020 to July 2020

Who is funding the study?
Investigator initiated and funded

Who is the main contact?
Gregory Huber
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Contact information

Type(s)
Scientific

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Additional identifiers

Clinical Trials Information System (CTIS)
Nil known

ClinicalTrials.gov (NCT)
Nil known

Protocol serial number
1312013102

Study information

Scientific Title
Encouraging behavior to reduce the spread of COVID-19: experimental analysis

Study objectives

1. The IOCLP message increases intentions to social distance compared to the untreated control
2. The IOCLP message increases intentions to social distance compared to the baseline control
3. The not bravery message increases intentions to social distance compared to the untreated

control

4. The not bravery message increases intentions to social distance compared to the baseline control

Secondary hypotheses:

1. The IOCLP message increases intentions to vote by mail compared to the untreated control
2. The IOCLP message increases intentions to vote by mail compared to the baseline control
3. The not bravery message increases intentions to vote by mail compared to the untreated control
4. The not bravery message increases intentions to vote by mail compared to the baseline control
5. The IOCLP message increases intentions to receive a vaccine compared to the untreated control
6. The IOCLP message increases intentions to receive a vaccine compared to the baseline control
7. The not bravery message increases intentions to receive a vaccine compared to the untreated control
- 8.. The not bravery message increases intentions to receive a vaccine compared to the baseline control
9. We also hypothesize that when looking at those who have high liberty, the not bravery message will increase intentions to social distance compared to the baseline control

Ethics approval required

Old ethics approval format

Ethics approval(s)

No ethics approval required, Yale University Human Research Protection Program (25 Science Park, 150 Munson Street, 3rd Floor, New Haven, CT 06511; no telephone number provided; HRPP@yale.edu), ref: 1312013102

Study design

Interventional randomized controlled trial

Primary study design

Interventional

Study type(s)

Prevention

Health condition(s) or problem(s) studied

COVID-19 (SARS-CoV-2 infection)

Interventions

Subjects will be assigned at equal rates to one of four conditions: A pure control condition, a baseline COVID-19 risk reduction message, and two additional treatment messages that were the two most successful treatment messages in the first study of 10 different treatment messages. The two most successful messages from the first study added language to the baseline COVID-19 risk reduction content.

The first is the Impact Others, Cooperative Linear Production (IOCLP) message. This message describes how social distancing protects other people from COVID-19 and that everyone needs to take this action to stop the spread.

The second is the Not Bravery message. This message describes the brave actions of individuals like doctors and firefighters during the COVID-19 pandemic. It then invokes the idea that people

who do not practice social distancing are not brave like those individuals and are instead reckless and putting the health of others at risk.

Participants will spend at minimum 30 seconds on the survey page that shows them the messages to give them ample time to read it. After reading the message, subjects complete questionnaires measuring (1) intended social distancing behaviors, (2) food-related behaviors, (3) evaluations of others based on their social distancing behavior, (4) beliefs about the efficacy and importance of social distancing, (5) mask-wearing, (6) interest in receiving a future COVID-19 vaccine, and (7) different ways of voting in the November 2020 election. The study then concludes with a short debrief that highlights the importance of social distancing and provides participants with a link to learn more.

Intervention Type

Behavioural

Primary outcome(s)

Social distancing behaviors measured using 5 scales at a single timepoint:

1. Social distancing behaviors scale, composed of the average of 16 items
2. Food-related behaviors scale, composed of the average of 3 items
3. Evaluations and actions toward others based on their social distancing behavior scale, composed of the average of 7 items
4. Beliefs about the efficacy and importance of social distancing scale, composed of the average of 3 items
5. Mask wearing scale, composed of the average of 7 items

Key secondary outcome(s)

Measured using online questionnaire at a single time point:

1. Interest in voting by mail and willingness to vote in person if unable to vote absentee/by mail
2. Willingness to obtain the COVID-19 vaccine when and if it becomes available
3. Demographic measures: liberty endorsement (low/high); partisanship (democrat or republican); gender (self-identified gender male or female); employment status: (can work from home/cannot work from home/not working)

Completion date

24/07/2020

Eligibility

Key inclusion criteria

18 years of age or older and residing in the US

Participant type(s)

All

Healthy volunteers allowed

No

Age group

Adult

Lower age limit

18 years

Sex

All

Key exclusion criteria

Does not meet inclusion criteria

Date of first enrolment

17/07/2020

Date of final enrolment

24/07/2020

Locations**Countries of recruitment**

United States of America

Study participating centre**Yale University**

PO Box 208236

New Haven

United States of America

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Sponsor information**Organisation**

Yale University

Funder(s)**Funder type**

Other

Funder Name

Investigator initiated and funded

Results and Publications

Individual participant data (IPD) sharing plan

The datasets generated during and/or analysed during the current study will be stored in a publically available repository. The underlying anonymous study microdata, documentation of the survey, and statistical analysis code will be posted on the replication archive required by the journal in which the resulting paper is published, with public access, or at the Harvard Dataverse if the journal does not require a specific archive to be used. The material will be publicly available for anyone to download. Consent was obtained for data sharing.

Additional documents available at: https://osf.io/vpafh/?view_only=5b9b78b1162d4fa091b8f569199e664f

IPD sharing plan summary

Stored in repository

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Preprint results	non-peer-reviewed results in preprint	28/10/2020	19/03/2021	No	No