

# Horizon Research Reconnecting New Zealand to the World 6 October – 10 October 2021

In association with the School of Population Health University of Auckland

Prepared for: Behavioural Insights Science and Insights Group COVID-19 Directorate Ministry of Health





# CONTENTS

1.	. Executive summary	3
2.	COVID-19 vaccination	5
	Vaccination rates	5
	Vaccine intention	8
	Annual dose (booster vaccine)	9
	Credibility and impact of COVID-19 modelling	
3.	Reconnecting to the World	12
	Factors to consider	12
	Level of vaccination	13
	When to re-open	15
	Phased approach	
4.	Policy ideas	19
5.	Stigma around COVID-19	20
	People who have not had COVID-19	20
	Actual behaviour compared to claimed intentions	21
	Feelings around having COVID-19	22
6.	. Delta strain	23
	Increased concern	23
	Increased concern	
		24
7.	Increased risk Impact of reduced services and capacity	24 25
7.	Increased risk Impact of reduced services and capacity	24 25 <b>26</b>
7.	Increased risk Impact of reduced services and capacity Health practices	24 25 <b>26</b> 26
7.	Increased risk Impact of reduced services and capacity Health practices High risk countries Mask wearing	24 25 <b>26</b> 26 27
	Increased risk Impact of reduced services and capacity Health practices High risk countries Mask wearing	24 25 26 26 27 28
	Increased risk Impact of reduced services and capacity Health practices High risk countries Mask wearing Health and well-being (including violence)	24 25 26 26 27 28 28
	Increased risk Impact of reduced services and capacity Health practices High risk countries Mask wearing Health and well-being (including violence) Personal impact	24 25 26 26 27 28 28 30
	Increased risk Impact of reduced services and capacity Health practices High risk countries Mask wearing Health and well-being (including violence) Personal impact Reasons for impact of COVID-19	24 25 26 26 27 28 28 30 34
	Increased risk Impact of reduced services and capacity Health practices High risk countries Mask wearing Health and well-being (including violence) Personal impact Reasons for impact of COVID-19 Negative feelings	24 25 26 26 27 28 28 30 34 37
	Increased risk Impact of reduced services and capacity Health practices High risk countries Mask wearing Health and well-being (including violence) Personal impact Reasons for impact of COVID-19 Negative feelings Abuse	24 25 26 26 27 28 28 30 34 37 39
8.	Increased risk Impact of reduced services and capacity Health practices High risk countries Mask wearing Health and well-being (including violence) Personal impact Reasons for impact of COVID-19 Negative feelings Abuse	24 25 26 26 27 28 28 30 34 37 39 42



Te	Tiriti o Waitangi	44
10.	APPENDIX 1 – SAMPLE	45
11.	APPENDIX 2 – TABLES ATTACHED	47
12.	APPENDIX 3 – VERBATIMS ATTACHED	
13.	APPENDIX 4 – QUESTIONNAIRE	47



## 1. Executive summary

## Approach

These results are from an online survey of 1,316 New Zealand respondents aged 18 years of age or over conducted between 6 and 10 October, 2021.

The sample is weighted on age, gender, employment status, ethnicity, household income and education to match the 18+ population at the most recent census. At a 95% confidence level, the maximum margin of error is +/-2.7%.

Comparisons are made with results of a Horizon Reconnecting survey of 1,321 New Zealand respondents aged 18 years of age or over, conducted between 28 August and 1 September, 2021.

## Summary

*Vaccination:* This survey covers vaccination rates and intentions, given their importance to New Zealand reconnecting with the world.

In October 57% had had two doses of the COVID-19 vaccine and 25% one dose. This was up from 30% and 24% in September, indicating a vaccination rate of about 1% per day.

The number saying they will decline the vaccine remains at about 8% of the 18+ population,

with NZ Europeans / Pākehā the largest ethnic group not intending to vaccinate (9%).

29% of respondents who have not had the vaccine expressed some interest in getting it.

78% said they were likely to get a booster dose (or definitely, or most likely) and 15% unlikely (or definitely not or most unlikely) with the remaining 8% unsure. Compared to September
2021, an extra 4% seem likely to get one.

*Modelling credibility:* **59% said they believed the modelling** projecting outbreaks of Delta 2 community infection could result in infection, hospitalisation and deaths (e.g., 13,000 infections, 500 hospitalisations and 5 deaths in a one-year period if 90% vaccinated). 25% didn't believe the modelling and 16% were unsure. This shows modelling information is unlikely to change the minds of those who do not intend to get the vaccine.

**Reconnecting policy:** A majority of New Zealanders are prepared to reconnect with the world, **provided it is safely and cautiously done**. When the 12+ vaccination rate reaches 90%, the support for the borders being open rises to 73% (September 75%).

Total support for a phased reopening was **74%**, up from 66% in September. 49% think New Zealand's borders should be re-opened by the end of June 2022. Half of those (25%) say they should re-open by the end of 2021.

This indicates an <u>increasing desire</u> for the borders to open but at least half said any reduction in capacity or the ability to deliver services like testing, vaccines and hospital care would decrease their confidence in opening the border.



*Policy ideas:* The top-three supported policy ideas (60% each or more) all involve requiring proof of vaccination by arrivals to New Zealand.

**COVID-19 stigma:** Findings suggest contracting COVID-19 would carry a stigma and stop many being open about it and adopting health safety behaviours. Of 23 possible actions surveyed, which people could take if infected, 13 carried some form of stigma. There is a striking difference between what those who had been infected did and what those not infected say they would do. For example, 55% of those not infected said they would tell their doctor if they became infected, but only 4% of those infected actually did.

**Delta driving concern:** Most of the adult population (**67%**) is more concerned about the pandemic because of the emergence of the Delta variant. Concern is higher among females and older people.

*Public health protection behaviours:* 49% said they would **always wear a mask** in public. If the borders were open, mask wearing would be increased by 19% to **69%.** 

*Personal impact:* Overall, **49%** of all respondents, around **1,923,200 adults**, said the pandemic has negatively affected their personal health and wellbeing. This is up from 45% in September.

*Significant abuse:* A significant number of New Zealanders 18 years of age or over are experiencing more abuse than before the most recent lockdown on August 17, 2021.

- 198,300 adults are experiencing the "usual" level of abuse <u>outside the home</u>, and another 237,900 experiencing more.
- 146,700 are experiencing the "usual" level of abuse within their family or whānau, and another 126,900 experiencing more.
- In terms of experiencing <u>any</u> abuse (either outside the home, or within the family or whānau) since August 17, 7.6% said they had experienced the same as usual, and a further 8.4% experienced more. This equates to **301,400** experiencing the "usual" level of <u>any</u> abuse, and another **333,100** experiencing more.



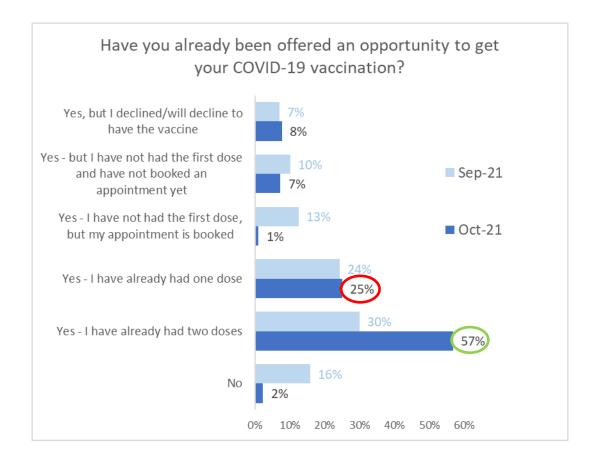
# 2. COVID-19 vaccination

### Vaccination rates

**57% have received two doses**, and a **further 25% one**. <sup>1</sup> This compares well with Ministry of Health data at 11.59 pm on October 12 reporting 58% and 24% respectively.

Vaccination rates also increased: those who have had two doses almost doubled in five weeks, from 30% to 57%.

The "I will decline" group remains about the same.



<sup>&</sup>lt;sup>1</sup> The survey was conducted October 6 to 10, 2021.



The older someone is, the more likely they are to have had both doses. This is most likely an artefact of the four different levels of vaccination rather than any reluctance on the part of younger people. (Note the higher "one dose" rates for younger people, and the relatively low "decline" rates.)

Have you already been			А	GE GROU	Р		
offered an opportunity to get your COVID-19 vaccination?	18-24 years	25-34 years	35-44 years	45-54 years	55-64 years	65-74 years	75 years or over
No	6%	3%	2%	2%	0%	0%	2%
Yes - I have already had two doses	43%	34%	52%	55%	<b>67%</b>	78%	90%
Yes - I have already had one dose	32%	48%	30%	24%	13%	10%	5%
Yes - I have not had the first dose, but my appointment is booked	0%	4%	2%	0%	0%	0%	0%
Yes - but I have not had the first dose and have not booked an appointment yet	14%	9%	9%	9%	3%	0%	2%
Yes, but I declined/will decline to have the vaccine	4%	2%	5%	10%	17%	12%	2%

There is little difference by gender with males at 59% and 26% first and second dose respectively, and females 56% and 23%.  $^{\rm 2}$ 

There is also little difference by people who live with impairments or long-term health issues (60% two doses, 22% one only) and those who not (55% and 27%).

The same is also true for **people who identify as disabled** (56% two doses, 23% one only) and those who do not (57% and 25%).

There appears to be some difference for those in paid employment (54% and 29%) versus those not (62% and 19%) but this is most likely related to age.

Māori are less likely to have had both doses, but in terms of only a single dose, they are at a similar level to the overall adult population.

Indians have a higher dose rate, both double and single.

New Zealand Europeans have the highest "I will decline" rate.

<sup>&</sup>lt;sup>2</sup> People identifying as "another gender" are included in the total sample, but as there were only six it is too small a group to report separately.



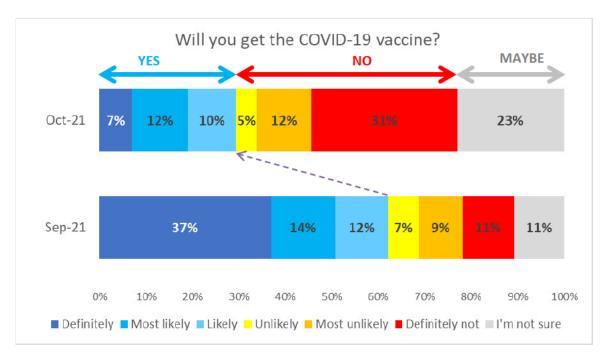
ETHNIC GROUP								
Had vaccination invitation?	Asian	Indian	Māori	NZ European/ Pākehā	Other European	Pasifika	Other	
No	2%	4%	6%	2%	1%	1%	0%	
Yes - already had two doses	57%	67%	50%	59%	44%	<mark>68%</mark>	<mark>82</mark> %	
Yes - already had one dose	34%	28%	25%	22%	34%	12%	18%	
Yes - I have not had the first dose, but my appointment is booked	2%	1%	2%	1%	0%	0%	0%	
Yes - but I have not had the first dose and have not booked an appointment yet	5%	0%	12%	6%	17%	12%	0%	
Yes, but I declined/will decline to have the vaccine	1%	0%	6%	9%	4%	7%	0%	



#### Vaccine intention

**29% of respondents who** <u>have not had the vaccine</u> expressed some interest in getting it, but 48% of the unvaccinated said they were unlikely or would definitely not.

An addition 23% said they were unsure, which suggests about half the people who are unvaccinated could be persuaded. <sup>3</sup>



This graph is based on those who have <u>not</u> had the vaccine: sample size of n=187 in October 2021, n=530 in September 2021.

The large drop in "yes" (the dashed line) indicates that most people who are likely to get it, have already had at least one dose of the vaccine.

Unvaccinated **females seemed more positive** towards getting the vaccine: 33% compared to 24% for males.

New Zealand Europeans seem a little less positive (25%) but this is the only ethnic group with more than 50 respondents, making results for other groups indicative only. <sup>4</sup>

<sup>&</sup>lt;sup>3</sup> Some figures may not add to 100% due to rounding.

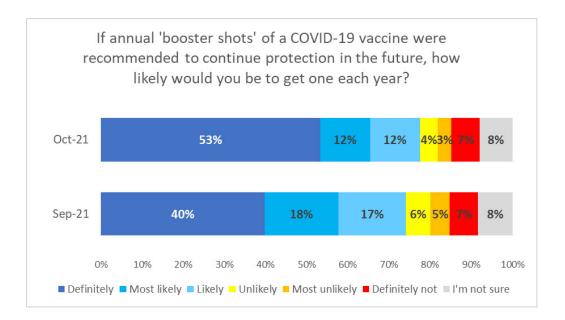
<sup>&</sup>lt;sup>4</sup> This question was only asked of people who had no vaccination, so the total unweighted base is 187 and drops quickly by sub-sample.



## Annual dose (booster vaccine)

**78% said they were likely to get** an annual **vaccine** booster (or definitely, or most likely) if it were recommended in the future. 15% <sup>5</sup> would definitely not or be most unlikely to. 8% were unsure.

Intentions have firmed since September.



Those groups more likely to get it are those **over 64 years of age** (88%), **Asians** (86%) and **Indians** (85%).

Māori are no more or less likely, at 78%.

Those who won't get the first dose are not-at-all likely to get an annual booster.

<sup>&</sup>lt;sup>5</sup> These three categories add to 15% due to rounding.



#### Credibility and impact of COVID-19 modelling

Respondents were given the following information about new modelling on the impact of COVID-19 infections and vaccines.

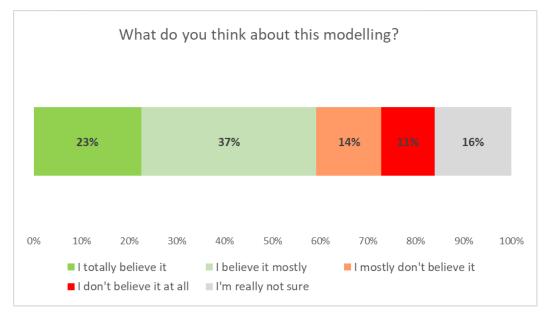
The Government and others are looking at ways in which New Zealand can still have zero tolerance of COVID-19 infection in the community (and stamp out outbreaks), but also allow more travel into and out of the country.

Some new modelling has been released which provides a glimpse at what might happen if there were community outbreaks of the Delta strain of COVID-19 at various rates of vaccination.

It finds, if:

- **70%** of the population aged five years or older were vaccinated, more than 1.5 million people could get COVID-19, over 94,000 go to hospital and 11,000 die.
- **80%** were vaccinated, there could be over 860,000 infected, 43,000 go to hospital and almost 5000 die.
- **90%** were vaccinated, 13,000 could be infected, over 400 go to hospital and five die.

**59% said they believed the modelling** <sup>6</sup> totally or to some degree. 25% didn't believe it, with another 16% unsure.



Māori have the highest level of belief, at 68%.

Disbelief is higher among people aged 45 to 64 years (35%).

It is also higher among Indians (34%) and lower among Māori (14%).

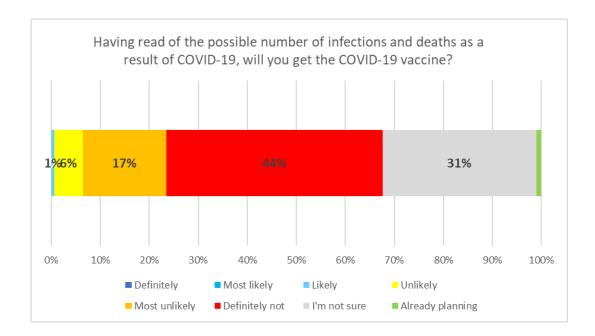
<sup>&</sup>lt;sup>6</sup> Any discrepancy in the numbers is due to rounding.



There is no significant difference by gender, employment status, people with long-term health issues or those who identify as disabled.

The information about the **modelling does not appear to change people's intentions** to vaccinate, with only 1% indicating a possible change due to the modelling. (Definitely get the vaccine 0%, most likely 0% and likely 1%).

A further 1% said they were already planning on getting it, and 31% were still unsure.



There is little difference by any subgroup measured.



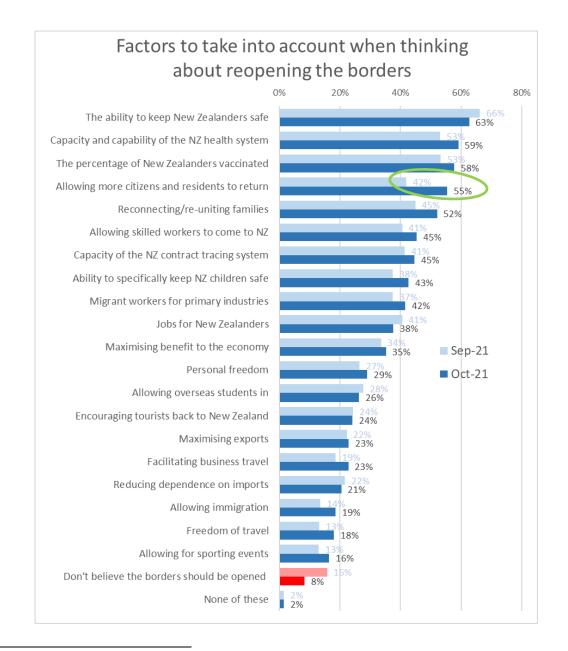
# 3. Reconnecting to the World

#### Factors to consider

The **ability to keep New Zealanders safe** is rated the most important factor adults want taken into account when reopening the borders (63%), followed by the **capacity of the health system** (59%) and the **percentage of people vaccinated** (58%).

Overall, it seems a majority of New Zealanders are prepared to reconnect with the world, **provided it is safely and cautiously implemented**. Re-opening for business travel, to allow immigration, sports teams and freedom of travel have least importance.

These results are similar to the September 2021 survey <sup>7</sup>, with only one significant change: allowing more citizens to return is up from 42% to 55%.



<sup>7</sup> Conducted between 28 August and 1 September 2021.



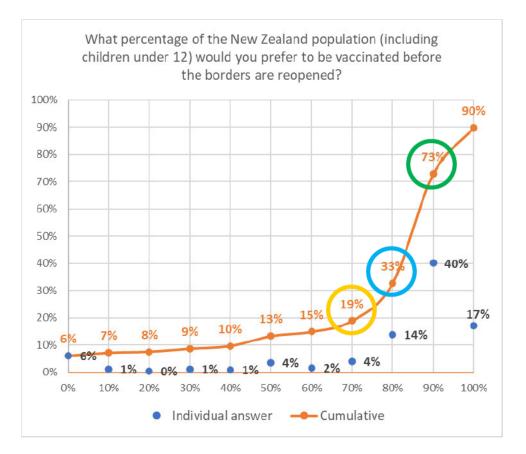
#### Level of vaccination

When the vaccination reaches 90%, support for the borders opening is 73% (the green circle), the same as September (75%).

When the vaccination rate reaches 80%, 33% would support the borders being open (the blue circle.) In September it was 47%.

19% of respondents were comfortable with a nationwide vaccination rate of 70% before the borders are opened (the orange circle in the chart below). This is down from 26% in September.

(Note that 10% said "don't know", which is why the cumulative line only reaches 90%. Last time it was only two per cent).



There does not seem to be any significant difference between genders.

Asians would be more comfortable with opening at 90% vaccination rate (84%) as well as people who identify as a European not from New Zealand (86%).

Māori are less supportive. At a 90% vaccination rate, 60% want the border re-opened.

Younger people (under 24) were more supportive of opening with a lower vaccination rate than the 18+ population overall, and this support falls as people get older.



Support for the borders			A	GE GROU	Р		
opening when vaccination rate for the whole population reaches:	18-24 years	25-34 years	35-44 years	45-54 years	55-64 years	65-74 years	75 years or over
70%	30%	17%	21%	22%	16%	12%	<b>6%</b>
80%	50%	32%	<b>29</b> %	35%	30%	18%	25%
90%	<b>78</b> %	70%	<b>6</b> 4%	80%	<b>70</b> %	71%	<b>79</b> %

Support for the borders	GENDER <sup>8</sup>		
opening when vaccination rate for the whole population reaches:	Male	Female	
70%	20%	18%	
80%	35%	31%	
90%	73%	72%	

Support for the borders			ETHNIC GROUP						
opening when vaccination rate for the whole population reaches:	Asian	Indian	Māori	NZ European/ Pākehā	Other European	Pasifika	Other		
70%	23%	28%	16%	16%	<b>29%</b>	27%	57%		
80%	34%	38%	36%	31%	43%	38%	57%		
90%	84%	74%	60%	72%	86%	66%	<b>76</b> %		

 $<sup>^{8}</sup>$  Results for those who identify as another gender are not shown owing to small base (n=6) although they are included in the total sample.

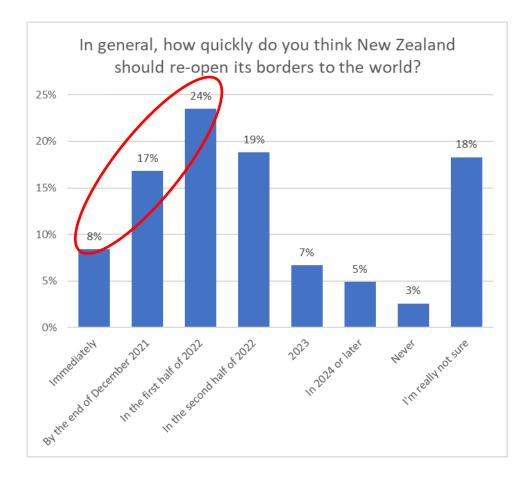


#### When to re-open

**49%** of respondents think the New Zealand borders should be re-opened to the world by the end of June 2022 and half of those (25%) by the end of 2021.

This is a significant increase since the September 2021 study which found **38%** wanted them reopened by June 2022 and 18% in 2021.

This indicates an increasing desire for the borders to open.



Those **more likely** to want the borders to re-open before the end of June 2022 include:

- People aged **18 to 24 years** (63%)
- Males (53% to females 46%)
- Those who **identify as disabled** (55% to those who do not 48%)
- People in paid employment (53% to those not 42%)
- Indians (67%)

Māori are less likely at 42%.



#### Phased approach

#### Respondents were told:

"An expert group has recommended a phased opening of Aotearoa New Zealand's borders once the COVID-19 vaccination programme has been fully rolled out.

The Government has announced that it will use the second half of 2021 to vaccinate as many New Zealanders as possible while it prepares and tests the safety of having three "Pathways" to allow people to enter Aotearoa New Zealand in 2022. This will involve allowing quarantine-free entry to vaccinated travellers from low-risk countries from early 2022 while those from medium- and high-risk countries will have to go through a combination of quarantine measures ranging from self-isolation to spending 14 days in quarantine. The phased reopening is looking to introduce:

- A Low-Risk pathway allowing quarantine free entry for vaccinated travellers who have been in low-risk countries.
- A Medium-Risk pathway allowing a combination of self-isolation and/or reduced time in managed isolation for vaccinated travellers who have been in medium-risk countries.
- A High-Risk pathway continuing a full 14 days in managed isolation and testing for unvaccinated travellers and any traveller, including vaccinated travellers, who have been in high-risk countries."

Total support for a phased re-opening was 74% <sup>9</sup> up from 66% in September's study.

Overall support for a phased re-opening	
Age 25 to 34	83% 个
Asian	81% 个
Employed	81% 个
Aged 65 and over	79% 个
Males	78% 个
Total	74%
Females	72%↓
People with long-term health impairments	72%↓
People who identify as disabled	70%↓
Aged 35-44	65% 🗸

Total opposition was down, from 26% in September to 17% this measure.

Males were more supportive of the phased reopening (78% compared to 72% for females), along with non-New Zealand Europeans (85%). Pasifika respondents were the least supportive of the approach (57%), although this is based on a low sample size of 25 respondents.

<sup>&</sup>lt;sup>9</sup> Strongly support, support and somewhat support.



All respondents were then told:

The individual risk-based approach requires new systems to be set up. The Government has said that it will use the remainder of 2021 to prepare for the operation of borders under this system, including:

- Ongoing development of a traveller health declaration system.
- Investigating new testing technology for rapid testing on arrival at airports and reliable pre-departure testing.
- Piloting self-isolation arrangements for some New Zealanders.
- Strengthening other public health measures such as contact tracing.

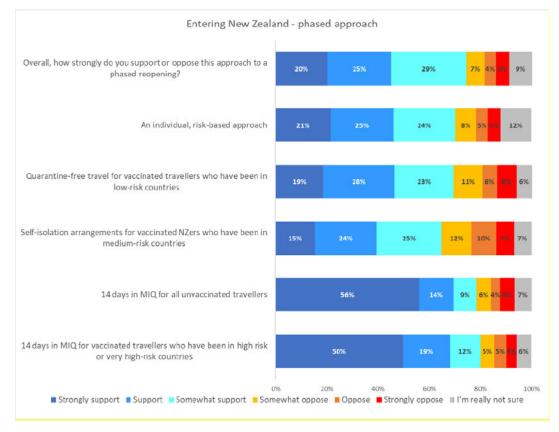
They were asked, assuming the plan was to proceed, how strongly they would support or oppose each of the following:

- The plan to change to an individual, risk-based approach.
- Quarantine-free travel being introduced for vaccinated travellers who have been in lowrisk countries.
- Self-isolation arrangements for some vaccinated New Zealanders who have been in medium-risk countries.
- 14 days in MIQ for all unvaccinated travellers.
- 14 days in MIQ for vaccinated travellers who have been in high risk or very high-risk countries.

The results are shown in the following chart, with the initial, overall question, shown as a comparison.

14 days in MIQ remains at a high level of support: 79% for unvaccinated travellers, and 81% for vaccinated ones from high-risk countries.







# 4. Policy ideas

Policies requiring **proof of vaccination** by those entering New Zealand are the top three most supported policy ideas.

Policy idea	Level of support
Make all travellers entering New Zealand prove they have been vaccinated	68%
Make vaccination compulsory for everyone wanting to enter New Zealand	67%
All people (including New Zealand residents and citizens) should prove they have been vaccinated before entering New Zealand	63%
Make mask wearing compulsory at places where people gather (like shops, restaurants, theatres, indoor events)	50%
New Zealand should move isolation and quarantine facilities away from population centres	49%
Allow travel to and from only low risk countries (those with very low rates of COVID-19)	44%
New Zealand should shift away from using hotels for quarantine and isolation to specially built facilities	43%
Make mask wearing compulsory at high schools and universities/ tertiary institutions	41%
Make vaccination compulsory for everyone wanting to leave NZ	41%
Restrict numbers at indoor venues	31%
Use Level 4 lockdown if there is an outbreak of COVID-19 in a particular area, even if 90% vaccination were achieved	30%
Wait until the vaccine is approved for use in 5-11 year olds and have them vaccinated before the borders are open	30%
New Zealand should plan to have managed self-isolation at places travellers organise themselves	28%
Give the vaccine to everyone over age 12 who wants it, then re- open the borders fully in early 2022	27%
Make mask wearing compulsory at all schools	26%
I don't support any of these ideas	<mark>6</mark> %

Overall, respondents support an average of 6.4 ideas. <sup>10</sup> This rises with age to 8.3 at 65 years or older. There is little difference by gender or people living with health impairments but **people** who identify as disabled support fewer (5.0).

Asians and Indians support fewer (4.8 and 4.0 respectively), whereas Europeans support more (both those who identify as New Zealand/ Pākehā and other Europeans) - 6.7 and 7.0 respectively.

Māori support 5.9, slightly fewer.

<sup>&</sup>lt;sup>10</sup> Almost everyone answered this question. They had an option to say "I don't support any of these ideas".

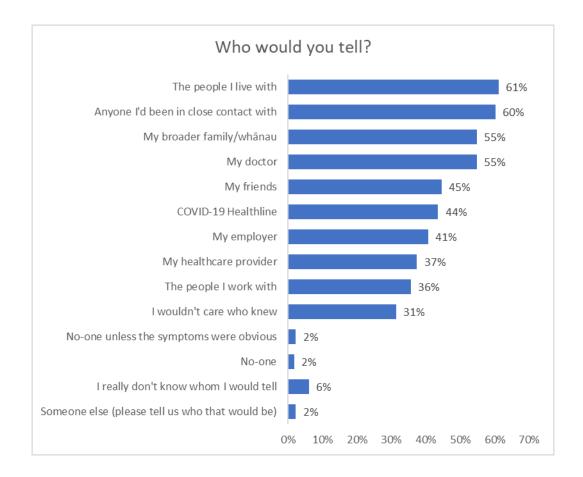


# 5. Stigma around COVID-19

## People who have not had COVID-19

Almost every respondent who has <u>not</u> had COVID-19 said they would tell <u>someone</u> if they were told they had it (90%).

Another 6% said they would tell someone but didn't know who. And another 2% would tell someone if the symptoms became obvious.



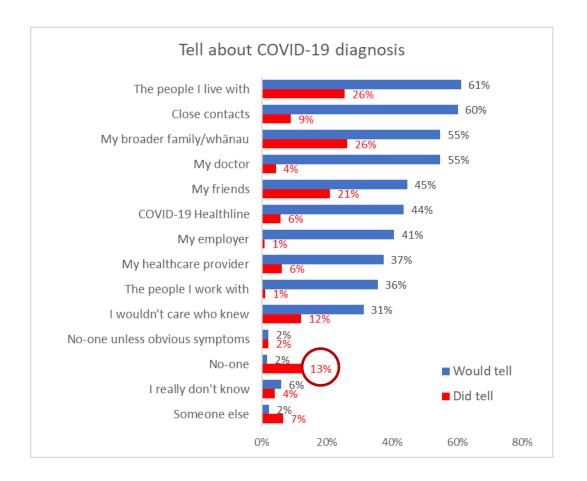
The average number of people/groups they would tell is 4.7.

This does not vary much by age, gender, or those with or without long-term health conditions. Those who **identify as disabled would tell fewer** (3.6), as would those **not currently employed** (3.9) and **Asians** (4.0) and **Indians** (3.4).



#### Actual behaviour compared to claimed intentions

There is a striking difference between what people who said they had had COVID-19 <u>actually</u> did, and what people <u>said</u> they would do. For example, 55% say they would tell their doctor, but 4% only of those who had had COVID-19 did this.



Actual behaviour is in <u>red</u> below, with claimed intentions in <u>blue</u>.

Most of those who had <u>had</u> COVID-19 told <u>someone</u>. They mainly informed those they lived with, followed by their broader family and their friends.

Very few told their employer or those they work with, even though a substantial number claimed they would if they were to get infected.

The impact of 13% of infected adults telling no-one could be significant. Based on published modelling of 5,300 COVID-19 cases potentially occurring in Northland and Auckland per week after borders reopen, this would equate to **almost 700 cases a week in those regions..**<sup>11</sup>

<sup>&</sup>lt;sup>11</sup> Modelling for the Auckland and Northland regions - at 90 per cent vaccination rates. - Ministry of Health chief medical officer Andrew Connolly, 14 October 2021.



#### Feelings around having COVID-19

Respondents who had not had COVID-19 were asked to think for a moment and pretend they thought they had the virus that causes it.

The ticks in the table below represent those feeling some kind of stigma is associated with COVID-19. The results indicate a large proportion of the adult population would feel some sort of stigma would attach itself to a positive diagnosis.

Feeling	Agreement	Stigma
I wouldn't hesitate to get a test because I would need to	58%	
know	- 404	
I would call Healthline and ask them what I should do	51%	
I would go straight to a doctor or my medical care provider	36%	
I wouldn't be afraid to tell people	34%	
I wouldn't feel embarrassed	32%	
I'd be afraid of what it meant for my family or those I live with in terms of restrictions on them	30%	✓
I wouldn't worry about how others might treat me	27%	
I would be angry if I got COVID-19	23%	✓
I wouldn't go to a doctor if I had no symptoms	16%	
Others wouldn't blame me for how I got infected	16%	
I would worry about how others might treat me	14%	✓
I wouldn't be afraid of what it meant for my family or those I live with	14%	
I would be afraid of any restrictions it might mean for me	13%	✓
Others might blame me for getting infected	12%	✓
I would hesitate to get tested because of fear of moving into an MIQ	11%	~
I would hesitate to get tested if the symptoms were not too bad	10%	✓
I'd feel embarrassed if I got COVID-19	8%	✓
I'd only get a test if saliva testing was available	8%	
I would hesitate to get tested because I won't be able to work	6%	✓
I'd be afraid to tell people	6%	✓
I wouldn't want anyone else to know	3%	✓
I would hesitate to get tested because of the shame associated with being positive	3%	✓
I would hesitate to get tested because I don't have access to childcare	2%	✓
Something else	<mark>6</mark> %	

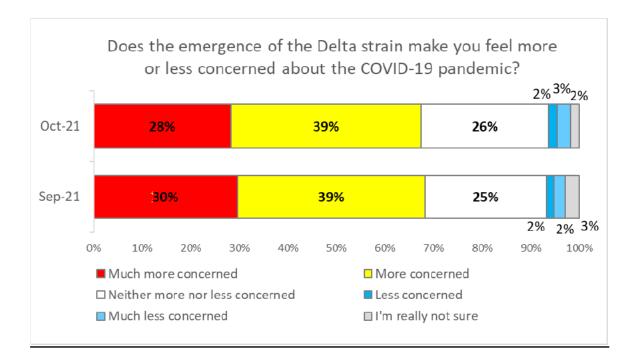


# 6. Delta strain

#### Increased concern

The emergence of the Delta strain is making **67%** of adults more concerned about the pandemic. 28% are <u>much</u> more concerned and 39% more concerned. Almost all of the rest said they were neither more nor less concerned. Only 5% were less concerned.

There has been no significant change in concern since the September study.



Increased concern is reported by a majority across all age groups and peaks at 82% among those aged 75+.

		AGE GROUP						
	18-24	25-34	35-44	45-54	55-64	65-74	75 years	
	years	years	years	years	years	years	or over	
Some increase in concern	60%	72%	70%	58%	<mark>68</mark> %	70%	82%	

Females are more concerned, with 71% having some increase of concern compared to 63% of males.

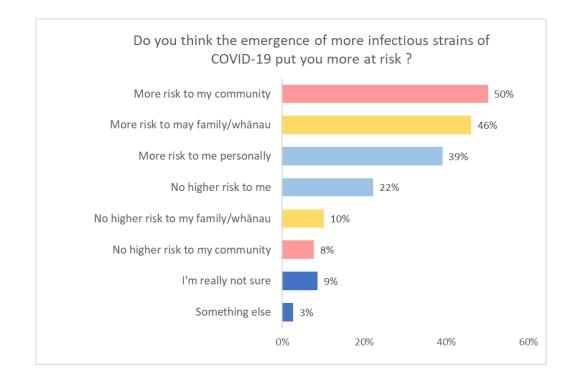
Those with long-term health impairments are more concerned (75% versus 63% of those without) but there is no difference between those who identify as disabled and those who do not.

Indians and Asians have higher increased levels of concern (79% and 72%) than the rest of the population.



## Increased risk

There is a perception of higher risk to the community (50%) as a result of the emergence of more infectious strains of COVID-19. 8% say there is no higher risk to the community. Higher versus less risk results are for the family/whanau (46% versus 10% not) and me personally (39% versus 22% not).



Many respondents across all age ranges felt more at risk with the emergence of more infectious strains, with **those between 25 and 34** being especially concerned of more risk to their family and whānau (55% and 57%).

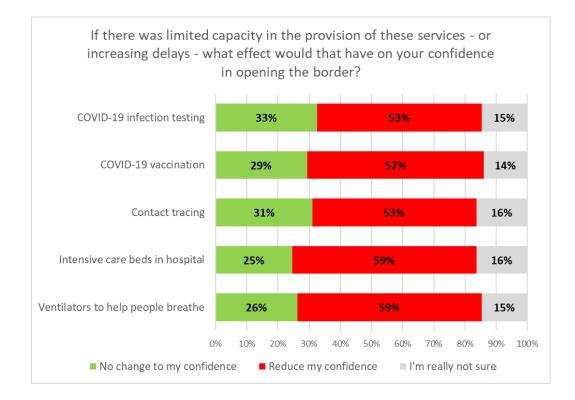
Asians (55%), Pasifika (55%) and Indians (51%) also shared this concern about the increased risk to family or whānau.

People with **long-term health impairments** were also more concerned about the increased risk to them personally (52% compared to 31% of those without.)



#### Impact of reduced services and capacity

At least half of respondents said any reductions in service and capacity, affecting the ability to manage COVID-19, would decrease their confidence in opening the border.



In general, limited capacity or increased delays would affect the confidence more of older people, New Zealand Europeans / Pākehā and those who do <u>not</u> identify as disabled.

Taking limited capacity in vaccination as an example, 50% of those under 45 years of age say it would reduce their confidence in opening the border. For those 45 and over, this rises to 62%.

Those **more likely** to say it would **reduce their confidence** include **Europeans** (not of NZ descent), **Asians** and **NZ European / Pākehā** (65%, 59% and 58% respectively).

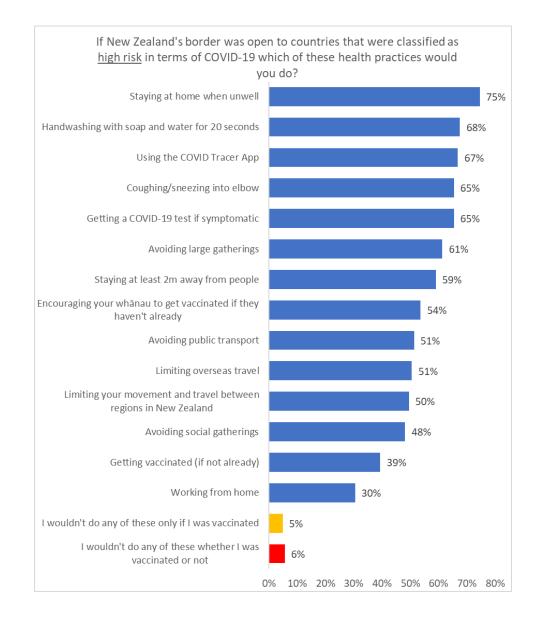
**Māori, Pasifika and Indians** are **less likely** to say it would reduce their confidence (45%, 46% and 44% respectively.)



# 7. Health practices

## High risk countries

Most respondents would adopt a large number of health protection practices (7.8 of the 14 listed) if the border were open to <u>high-risk countries</u>. **6% (equivalent to around 237,400 adults)** said they would not do any of these, and **5%** said they would not do any if they were vaccinated.



On average, respondents claimed they would adopt 7.8 of these practices, with **younger people doing fewer** (6.9 under the age of 35) and **older people more** (8.8 at 65 years of age or older.)

**Females say they will practice more** than males (8.2 compared to 7.4). Those who do **not identify as disabled** would also adopt (8.1 compared with 6.0 of the disabled).

Europeans (non-NZ) would practice slightly more at 8.2, New Zealand Europeans / Pākehā 8.1. Māori respondents said they would practice fewer at 7.0.



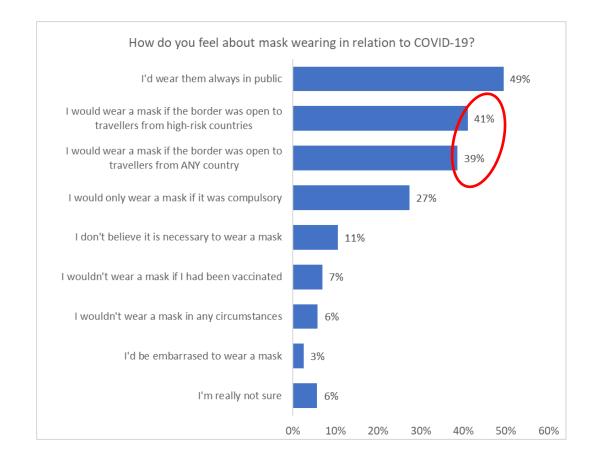
#### Mask wearing

**Mask wearing** to protect against COVID-19 is **well supported** and would increase if the border were open.

Almost half of respondents said they would always wear a mask in public (49%).

Whether a country is deemed high-risk or not has little influence on behaviour: 39% would wear them if the border were open to *any* country, and only an additional 2% if those countries were high-risk.

While 49% would always wear a mask, an <u>additional</u> 19% say they would wear a mask if the border were open (to any country) lifting the total from 49% to 69% <sup>12</sup>.



Those who feel it is <u>not</u> necessary to wear a mask (11%) are **more likely to be male** (14% compared to 8% female) and **European** (12% for New Zealanders, and 18% for others).

<sup>&</sup>lt;sup>12</sup> The difference is due to rounding.



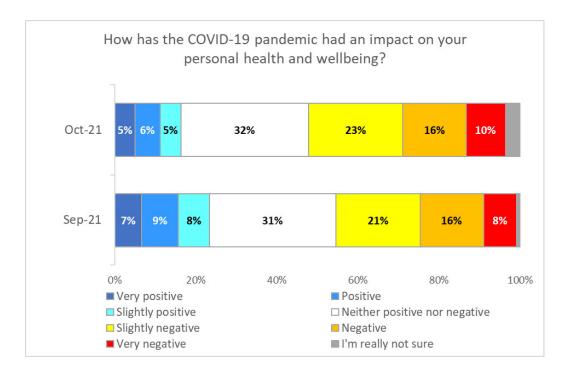
# 8. Health and well-being (including violence)

## Personal impact

**49%** of all respondents said the pandemic has negatively affected their personal health and wellbeing. This is higher than in September 2021 (45%) and equates to around **1,923,200 people 18+.** <sup>13</sup>

**32%** found it to be "neither positive nor negative" (31% in September) and **16%** found it positive to some degree (23% in September), which equates to 650,300 adults. 4% were unsure (1% in September).

While not a large shift, these results – in just over a month – indicate an increasing level of negative impacts and a reducing level of positive ones. That is, the **net negatives have gone up from 22% in September to 33% in October.** 



<u>Negative impacts</u> were **higher among younger people**, with **54%** of those under 25 saying the pandemic had impacted their personal health and wellbeing negatively to some degree.

Negative impacts were also higher among females (52% versus 44% for males), those <u>without</u> long-term health impairments (52%) and those who do <u>not</u> identify as disabled (50%).

By ethnicity, the **highest negative impact** was on **non-NZ Europeans** (72%), with those reporting the **lowest negative impact** including **Māori** (34%), **Pasifika** (also 34%) and **Indians** (26%). <sup>14</sup>

<sup>&</sup>lt;sup>13</sup> Based on 3,965,390 people 18+ in New Zealand.

<sup>&</sup>lt;sup>14</sup> That is, people of European descent who do not identify as NZ European/Pākehā.



Key groups with greater or lower levels of impact in comparison with the overall result were:

COVID-19 impact on personal health and well-being (all NEGATIVES combined)	
Other (non-NZ) European	72% 个
Aged under 25 years	54% 个
Female	52% 个
No long-term health impairments	50% 个
Do not identify as disabled	50% 个
Total NEGATIVES	49%
Long-term health impairments	44%
Male	42%
75 years or older	38%↓
Identify as disabled	35%↓
Māori	34%↓
Pasifika	34%↓
Indian	26%



Below is a sample of 30 comments representing what respondents said when asked how the COVID-19 pandemic had affected their personal health and well-being.

They are split into positive, neutral (or little effect) and negative. (All verbatim comments accompany this report).

#### **Reasons for impact of COVID-19**

#### Positive

"Better hygiene. Practice of regular vaccinations for all communicable diseases. Better community cohesion. Keeping National out of power. Feeling of National and community cohesion. Improved physical environment outcomes. Enhanced progress on combatting climate change. More domestic travel. Seeing NZ instead of overseas." - Male, 75 years or over

"By working from home, I am using the time I would normally be on public transport to exercise and I am able to eat healthier cooking my own meals. My spending habits have changed and I no longer spend much money on wasteful material items." - Female, 45-54 years

"Had time with my family and was able to care for my mum daily who was post op. Reduced stress as felt protected from the risk of COVID being spread throughout New Zealand as would have surely happened if we had not gone into lockdown." - Female, 45-54 years

"Helped me with my study, I was without distractions as well as assignments grade boosts." -Female, 18-24 years

"I like the slowdown in pace, I travelled so much for work previously. Life has just slowed to a pace I feel I can keep up with, it's really hard on our friends and family overseas but I am so glad to be in a country where we have such astute leadership and transparent decision making. I am also so glad to have some respite from our out of hand tourism, perhaps now we can have a conversation nationally about managing, protecting and vectoring future visitors to some but not all places that are well managed and set up to handle the [number] of visitors we decide is right for that area. We must set aside areas that are not part of the visitor free for all that can regenerate and be left to nature." - Female, 35-44 years

## Neutral (or little change in life)

"A number of my activities, appointments and events have been cancelled or postponed but I understand the reason and need. As a retired person I am happy to potter around at home, but I miss contact with family who have their own bubbles." - Male, 75 years or over

"Although lockdowns hugely beneficial for protecting the physical health of New Zealanders, isolating at home for weeks on end is not good for one's mental health. Being socially active is incredibly important for Rangatahi - this activity has been severely impacted by COVID 19." -Male, 18-24 years

"Due to personal reasons and having older aged children and infant children we /I do not tend to go out and socialise /eat out, go on holiday most of my revenue goes towards a mortgage and bills so once those are paid there is no money left over to indulge in any other activities." - Male, 55-64 years

"Generally, I enjoy being at home, locked down, an opportunity for space and time to think and catch up and be with my whanau. However long term 'cabin fever' sets in and find myself



getting irritable and frustrated with children who aren't doing enough schoolwork." - Female, 45-54 years

"I am fortunate that I am retired and do not have to worry about a job or a growing family. My immediate family lives in Auckland also and are managing their stress and situation. I am able to occupy myself with adequate mental and physical activities. I live in a retirement village and am able to see other people around if only to greet them with a wave or on the phone." -Female, 75 years or over

"I am retired and live with my husband in our own home. We are able to provide for ourselves and are in good health. I am able to do my own shopping and housework so apart from missing the occasional take-away and meal out I feel we are coping as well as anyone in this crazy world. I am just seeing it as [indecipherable] and have faith that the government is on the right track. Mostly I get anxious when I read the continuous negative comments from the likes of the 1ZB crowd. The media have been the only stress really in my life this year. And of course, the weird conspiracy theorists." - Female, 75 years or over

"I have continued to work (from home) with a good internet connection Have supportive neighbours. Make phone/internet contact with friends & family every day Able to cycle/walk each day Have a very well stocked pantry /freezer so no stress around food (in the 2020 lockdown it as 5wks before I needed to restock)." - Female, 55-64 years

"Neither me nor my partner have worked for quite some time due to both having ongoing illnesses so the lockdowns haven't really affected our lifestyle all that much but it has still affected us in a slightly negative way as there has been less freedom to move around." - Female, 45-54 years

"No impact on work, comfortable having lockdowns and mental health is fine. I wouldn't like to see lockdowns go on for months and months though, think many people would start suffering if that was the case." - Male, 45-54 years

"The effects of staying at home are mostly the same as usual, except for shopping and banking. The near solitude is not a real problem currently. A little more contact can be made by phone at this time." - Female, 65-74 years

#### Negative

"Because after the 10 weeks of lockdown last year I was unable to see my then 8, now 9-yearold daughter for all that time. I usually visit and spend time with her each weekend. After those 10 weeks she had distanced from me feeling I wasn't about when she was most concerned and it has significantly impacted our relationship and her opinion of me (I live 2 hours away from her and her mother). It has ruined my relationship with my daughter which for me is devastating and I don't believe it is at all good for her either." - Male, 45-54 years

"Because Jacinda Ardern has made me a virtual prisoner in New Zealand. The MIQ booking mismanagement fiasco is an absolute disgrace. Her failure to take timely steps to ensure that the population is vaccinated when we had such a head start and could have the borders relatively open by now is a SHAMEFUL FAILURE." - Female, 45-54 years



"Because lockdown is really hard when you already struggle with mental health problems and having all the kids home totally makes that worse. but glad I can keep my whanau safe." -Female, 35-44 years

"COVID and the numerous short notice lockdowns have made it difficult to plan community and family events. My life revolves around being involved in my community and with my family. Because I have some limited movement, much of what I would like to do at home is not possible and I can't have tradespeople or family in to help." - Female, 65-74 years

"Due to lockdowns, I have been unable to see my friends as frequently as I would like, and more importantly for me I have been unable to engage in the physical activity that keeps me grounded and mentally healthy." - Male, 25-34 years

"Feel more lonely, isolated. My household has lost a major career and the only salary we had due to COVID. We were also forced to move out of Auckland due to COVID." - Female, 25-34 years

"First lockdown I prepared myself mentally for it. This lockdown came as a surprise so I have felt trapped at home and annoyed about so many others flaunting the rules which had a more negative affect on me." - Female, 65-74 years

"Frustrated and anxious about the lockdown even though I'm relatively comfortable, don't have financial concerns and believe it is the right thing to do - it's hard to be positive in spite of that." - Female, 35-44 years

"Has prevented me from going to social events, has stressed my partner who has to balance working from home and looking after our toddler while I go to work as an essential worker. Has just had a slight negative impact on myself and partners mental health and our ability to provide a good upbringing for our child, filled with new experiences and family." - Male, 25-34 years

*"I actually lost 2 different jobs last year during the first 2 lockdowns in March 2020 and August 2020. This affected me and my family emotionally and financially." - Male, 45-54 years* 

"I am desperate to see my family in South Africa again after all this time. I was so hopeful once I got the 2 jabs, but now it looks like extra precautions will come in again. I say, no vaccination, no travel. We need a digital health passport that will allow overseas travelling again. It has been immensely stressful as an essential health worker." - Female, 55-64 years

"I can't see my child who lives overseas, my life has come to a bit of a standstill as most of the things I do are not done at home and I feel as though my freedoms are eroded. I am careful and have always practised distancing. I hate wearing mask and avoid this if possible.so I don't really go out much in the current situation, so basically, I see no one except my husband. It is extremely boring. I do exercise my dog but now drive to where I can walk up hills to increase my fitness. I used to play golf three times a week and that is gone." - Female, 65-74 years

"It has been difficult personally mentally being in lockdown L4 and L3. Also being the owner of a business, initially loss of income and trying to keep staff employed and all the financial decisions that have had to be made due to COVID have made things very stressful. The unknown of when the next level change has also made it difficult to plan work - things are very quiet in L3 and L4, and then everything that was deferred during those times ends up being squeezed in the next



few months resulting it too much work, not enough time to do it, not enough sleep, fatigue - the list goes on. Burnt myself out at the end of last year because of it." - Female, 45-54 years

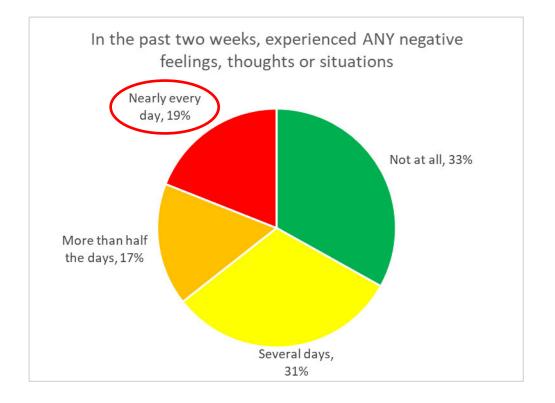
"It made trying to escape a violent situation even harder. It prevents me from seeing my children. There is a lot of stress caused by the stupidity and selfishness of others. It is sad to learn of the long-term effects, particularly with young people." - Male, 35-44 years

"My mental health and well-being has been most recently, very badly affected as I have more information coming to hand regarding the unethical rollout of vaccines that are touted as "safe" when they are still only in experimental stage and are proving to not be working. The disregard for governments to listen to respected doctors and scientists who are trying to speak up and no communication being entered into with the public, media's lack of truthful reporting is also stressful." - Female, 45-54 years



## Negative feelings

**19%** of the adult population have experienced some **negative feelings**, thoughts or situations **nearly every day** in the past two weeks, this equates to around **753,400** adults. <sup>15</sup>

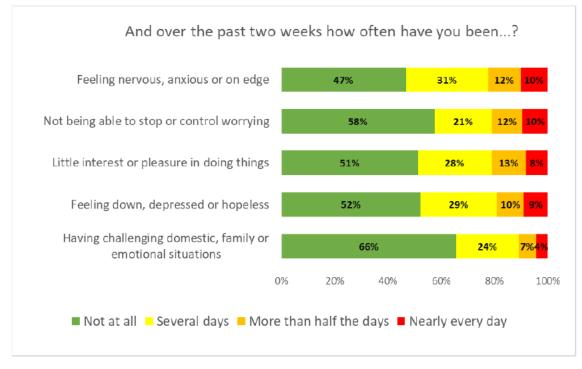


These **negative feelings are higher among females**, those who **identify as disabled**, **Europeans** (who don't identify as New Zealand European) and **younger people** (especially under 25 years).

<sup>&</sup>lt;sup>15</sup> These questions are based on the anxiety and depression tests on the Depression NZ website.

https://depression.org.nz/is-it-depression-anxiety/self-test/anxiety-test/





The following table shows the 18+ population affected by these negative feelings, thoughts or situations in the past two weeks.

	ADULTS 18+ WITH NEGATIVE FEELINGS, THOUGHTS OR SITUATIONS		
	Nearly every	More than half	Several
	day	the days	days
Feeling nervous, anxious or on edge	400,500	487,700	1,225,300
Not being able to stop or control	376,700	456,000	848,600
worrying			
Little interest or pleasure in doing	325,200	511,500	1,090,500
things			
Feeling down, depressed or hopeless	360,900	392 <mark>,</mark> 600	1,146,000
Having challenging domestic, family	174,500	257,800	931,900
or emotional situations			



The younger someone is, the more likely they are to experience <u>any</u> negative feelings or situations in the past two weeks.

		AGE GROUP					
	18-24	25-34	35-44	45-54	55-64	65-74	75 years
	years	years	years	years	years	years	or over
Any negative feelings or	81%	76%	70%	61%	<b>61</b> %	58%	53%
situations past two weeks	_						

Females are also more likely to have experienced more.

	GENDER 16	
	Male	Female
Any negative feelings or situations past two weeks	60%	73%

Asians, Pasifika and Europeans (who do not identify as New Zealanders) also experienced more.

ETHNIC GROUP							
	Asian	Indian	Māori	NZ European/ Pākehā	Other European	Pasifika	Other
Any negative feelings or situations past two weeks	<mark>80%</mark>	60%	66%	66%	79%	78%	61%

These negative feelings were also higher among non-rural dwellers (68% compared to 59% rural) as well as people who identify as disabled (73% compared to 66% for those who do not).

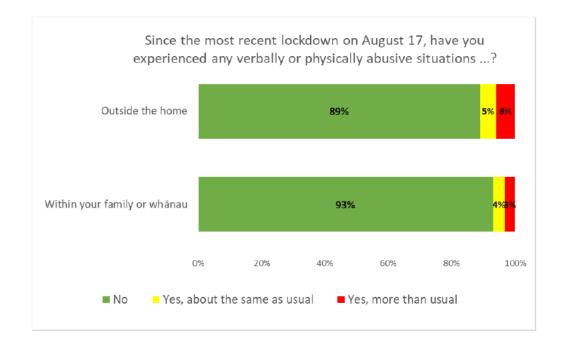
 $<sup>^{16}</sup>$  Results for those who identify as another gender are not shown owing to small base (n=6) although they are included in the total sample.



#### <u>Abuse</u>

A significant number of New Zealanders 18 years of age or over are experiencing more physical or verbal abuse than before the most recent lockdown on August 17, 2021.

- 198,300 are experiencing the "usual" level of abuse <u>outside the home</u>, and another 237,900 experiencing more. <sup>17</sup>
- 146,700 are experiencing the "usual" level of abuse <u>within their family or whānau</u>, and another are 126,900 experiencing more.



The number reporting more-than-usual abuse outside the home rises to 12% (from 6% in general) for those **45 to 54 years**, 10% for those with **long-term health impairments** and 19% for **Europeans** (who don't identify as New Zealand European).

Groups reporting more abusive situations than usual within their families or whanau (population average 3%) include those who **identify as disabled** (10%), and **Māori** (8%).

Abusive situations outside the home		ETHNIC GROUP 18				
Abusive situations <u>outside the nome</u>	Māori	NZ European/ Pākehā	Other European			
Usual	1.3%	5.6%	3.7%			
More	1.8%	4.7%	19.4%			

Abusive situations within family or whānau	ETHNIC GROUP				
Abusive situations within family of whanau	Māori	NZ European/ Pākehā	Other European		
Usual	2.2%	3.4%	2.2%		
More	8.4%	3.5%	3.6%		

<sup>17</sup> Based on 3,965,390 people 18+ in New Zealand.

<sup>18</sup> Other ethnic groups had less than 30 responses so are not reported separately.



#### There appears to be little difference by gender. <sup>19</sup>

Experienced abusive situations outside the home	G	iender
Experienced abusive situations outside the nome	Male	Female
Usual	5.8%	4.3%
More	5.7%	6.2%

Experienced abusive situations within family or whānau		Gender		
Experienced abusive situations within family of whanau	Male	Female		
Usual	3.6%	3.8%		
More	3.8%	2.4%		

There is some difference among some age groups, with those between 45 and 64 experiencing more abuse outside the home.

Experienced abusive		AGE GROUP					
situations <u>outside the</u>	18-24	25-34	35-44	45-54	55-64	65-74	75 years
<u>home</u>	years	years	years	years	years	years	or over
Usual	5.3%	0.4%	3.9%	4.2%	7.3%	4.7%	5.1%
More	3.8%	0.4%	<b>5.0%</b>	12.1%	7.3%	2.4%	0.8%

Experienced abusive		AGE GROUP					
situations within family or	18-24	25-34	35-44	45-54	55-64	65-74	75 years
<u>whānau</u>	years	years	years	years	years	years	or over
Usual	1.5%	0.0%	7.4%	1.9%	4.5%	4.2%	5.8%
More	6.1%	0.0%	1.8%	1.4%	5.7%	5.0%	1.0%

In terms of experiencing <u>any</u> abuse since August 17 (either outside the home, or within the family or whānau) 7.6% said they were experiencing the same as usual, and a further 8.4% more.

This means **301,400** are experiencing the "usual" level of <u>any</u> abuse, and another **333,100** experiencing more. <sup>20</sup>

Abuse experienced by the unvaccinated:

17% of those unvaccinated and unbooked reported some kind of abuse <u>more than usual</u> compared to those who have at least had one dose, on 4%.

For abuse <u>outside the home</u> the figure is 16% for the unvaccinated compared to 4% at home, indicating the vast majority of the increase in abuse was outside the home.

<sup>&</sup>lt;sup>19</sup> Note these abusive situations could be verbal, emotional or physical. Also, people who identify as another gender are included in the overall result, but not reported separately as there were only six of them.

<sup>&</sup>lt;sup>20</sup> Based on 3,965,390 people 18+ in New Zealand.

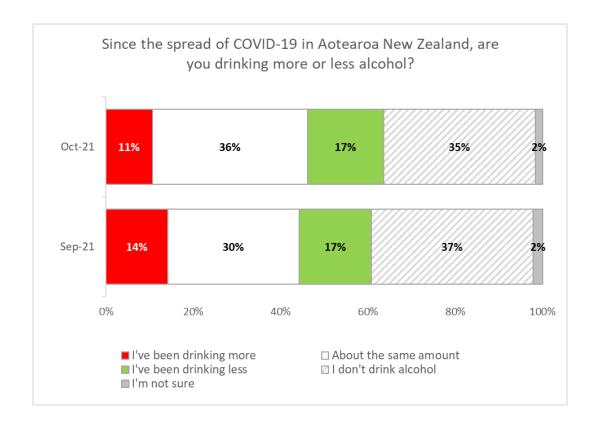


#### <u>Alcohol</u>

**11% say they are drinking more** alcohol relative to <u>before the spread of COVID-19</u> in New Zealand. This is down from 14% in the September 2021 study.

17% say they are drinking less (the same as the previous study.)

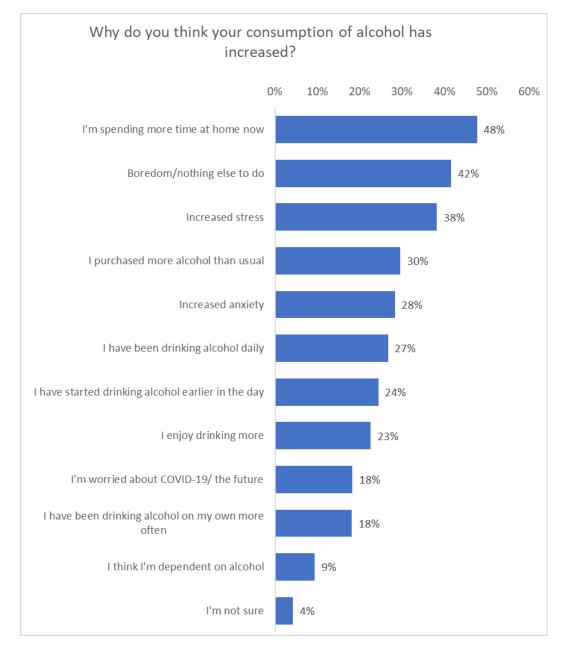
Although this information is self-reported there is **no evidence that more alcohol is being consumed overall** since COVID-19 started spreading in New Zealand.



No demographic or sub-group we measured reported a net "drinking more" result.



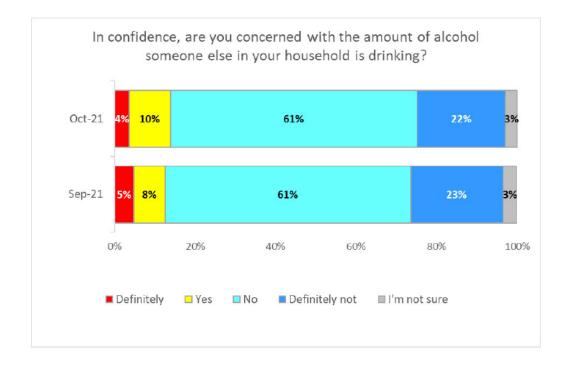
The main reasons people gave for drinking more were that they were spending more time at home (48%), boredom (42%) and increased stress (38%).



Note sample size is n=181 unweighted and based on those who said they were consuming more alcohol since the start of the spread of COVID-19 in New Zealand.



14% said "yes" or "definitely" that they were concerned about the of the amount of alcohol someone else in their household was drinking. This is similar to the September 2021 study (5% and 8% respectively).



Those with a higher net "yes" ("definitely" plus "yes") include people under 45 (21%), those with long-term health impairments (18%), people who identify as disabled (32%), Indians (41%), Asians (19%) and Māori (18%).

Concern about amount someone else in household is drinking? ("Definitely" and "Yes")	
Indian	41% 个
People who identify as disabled	32% 个
Aged under 45 years	21% 个
Asian	19% 个
Long-term health impairments	18% 个
Māori	18% 个
Total	14%
NZ European/Pākehā	12%↓
People who do not identify as disabled	11%↓
Aged 55 and over	6%↓

Note respondents were offered a list of professional organisations if they, or someone they knew, needed help.



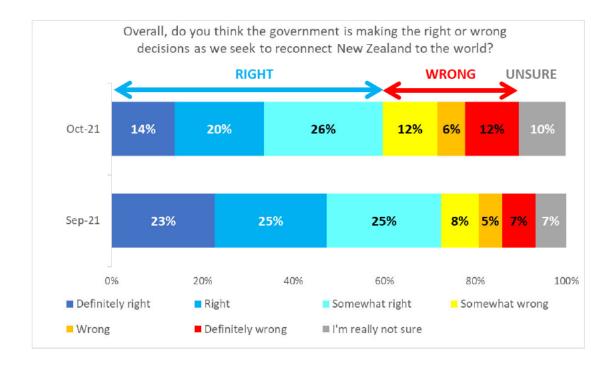
### 9. Government performance

#### Overall approach

Respondents think the government is generally making the right decisions on reconnecting New Zealand to the world, though this has fallen in the last five weeks.

Overall, 60% think the Government is making the right decisions, 30% wrong ones and 10% are unsure.

However, the net right (right responses minus wrong responses) result has fallen from 52% <sup>21</sup> to 30% since early September.



Those aged 25 to 34 years give the highest "net right" rating of 40% while those aged 55 to 64 the lowest at 15%.

Females were also more likely to give a positive answer (net 36% compared to males at 24%).

Respondents who identify as disabled are more likely to think the government is making the right decisions (net 35%) compared to those who do not (net 29%).

Māori (net 49%), Asian (net 44%), and Indian (net 40%) respondents are more likely think the government is making the right decisions. Net right scores were lowest among other Europeans (27%), NZ Europeans/Pākehā (26%), and Pasifika (24%).

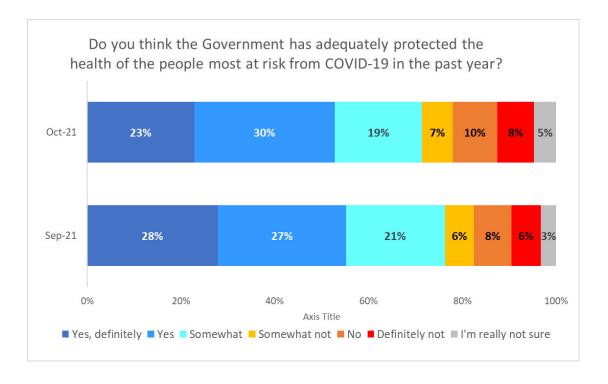
<sup>&</sup>lt;sup>21</sup> There may appear to be some discrepancy in the nets and sums due to rounding.



#### Performance protecting those most at risk

In October the who thought the Government was adequately protecting the health of those most at risk from COVID-19 in the past year **was 71%, down from 75% in September**. The total No response was 24% in October <sup>22</sup>, up from 20% in September.

A net **48%** thought the government had adequately protected the health of those most at risk. (This is the total "yes" answers minus the total "no" answers.)



There has been a drop in **net yes** from **56%** in September to **48%** in October.

A net **52% of females** think that the government has adequately protected the health of those most at risk, **45% of males**.

This net result is higher for Asians (70%) and lower for Indians (22%).

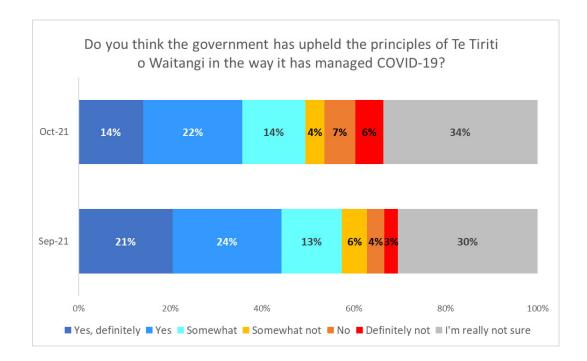
<sup>&</sup>lt;sup>22</sup> Difference due to rounding.



#### <u>Te Tiriti o Waitangi</u>

Half of respondents (50%) feel the government has upheld the principles of Te Tiriti o Waitangi in the way it has managed COVID-19. 17% say it hasn't and 34% are unsure.

The net positive score (yes, definitely and somewhat – minus no, definitely not and somewhat not) is **32%**. <sup>23</sup>



As with the government's overall approach, there has been drop in the net score from **45% in September** to **32% in October** showing a **13% decrease** in five weeks.

There is no real difference by gender, but different age groups vary in their opinions, with respondents **aged 45 to 54** years having a net right of 16% only.

There is a large net difference between those who **identify as disabled** (49%) and those who do not (30%).

There is a significant difference by ethnicity with **Asians** (60% net) saying it has upheld the treaty and **Europeans** (who don't identify aa New Zealanders) saying it has not (net 2%).

New Zealand European/Pākehā and Māori were both 34%. Māori have the lowest "I'm not really sure" at 22% (for those ethnic groups with a sample size above 50).

<sup>&</sup>lt;sup>23</sup> There are some slight apparent discrepancies due to rounding.



### **10. APPENDIX 1 – SAMPLE**

These results are from an online survey of 1,316 New Zealand respondents aged 18 years of age or over.

The survey was conducted between 6 and 10 October, 2021.

The sample is weighted on age, gender, employment status, ethnicity, household income and highest education to match the 18+ population at the most recent census.

At a 95% confidence level, the survey has a maximum margin of error of  $\pm 2.7\%$  overall (this occurs when the result is 50%).

Used in comparison are results of a 28 August to 1 September 2021 Horizon Research online survey of 1,321 adults representing the 18+ New Zealand population at the 2018 Census. Overall margin of error: ± 2.7%.

October survey sub-sample respondent counts and margins of error are shown below.

	All res	spondents
	Count	Sub-sample margin of error
TOTAL	1,316	±2.7%
<u>GENDER</u>		
Male	663	±3.0%
Female	647	±2.6%
Another gender	6	±2.6%
AGE GROUP		
18-24 years	135	±6.6%
25-34 years	206	±4.6%
35-44 years	227	±4.4%
45-54 years	172	±5.1%
55-64 years	274	±4.8%
65-74 years	140	±5.4%
75 years or over	162	±8.1%
IMPAIRMENT, LONG-TERM HEALTH CONDITIONS		
OR DISABLED	507	12.20/
Impairment or long-term health conditions	507	±3.2%
Identify as disabled	198	±6.2%



		All respondents			
	Count	Sub-sample margin of error			
AREA TYPE					
Large city	682	±3.8%			
Regional City	218	±6.6%			
Regional town	247	±6.2%			
Rural, but not remote	151	±8%			
Rural and remote	17	±23.8%			
ETHNIC GROUP					
Asian	90	±10.3%			
Indian	47	±14.3%			
Māori	142	±8.2%			
NZ European/ Pākehā	1006	±3.1%			
Other European	96	±10%			
Pasifika	25	±19.6%			
Other	12	±28.3%			
REGION					
Northland	33	±17.1%			
Auckland	394	±4.9%			
Waikato	116	±9.1%			
Bay of Plenty	82	±10.8%			
Taranaki	19	±22.5%			
Gisborne/Hawkes' Bay	52	±13.6%			
Wairarapa	11	±29.5%			
Whanganui/ Manawatu/ Palmerston North/ Rangitikei/ Ruapehu/ Horo-whenua	80	±11%			
Wellington (Urban Areas)	180	±7.3%			
Nelson/ Tasman/ Marl-borough	46	±14.4%			
Canterbury	183	±7.2%			
West Coast	9	±32.7%			
Otago	59	±12.8%			
Southland	20	±21.9%			

Page 46



## **11. APPENDIX 2 – TABLES ATTACHED**

## **12. APPENDIX 3 – VERBATIMS ATTACHED**

### **13. APPENDIX 4 – QUESTIONNAIRE**

### **Reconnecting to the World Survey - Questionnaire**

### Behavioural Insights, Science & Insights Group COVID-19 Directorate, Ministry of Health

**Demographic information:** Age, gender, ethnicity, household income, personal income, region (includes DHB), employment status, occupation, highest educational qualification, household type, DHB area plus the following:

#### ALL RESPONDENTS

#### Which of the following best describes your occupation?

- 1. Doctor
- 2. Nurse
- 3. Other Health Industry worker
- 4. Teacher
- 5. Police, Fire or Ambulance service
- 6. Other frontline border or essential service worker
- 7. Other essential worker
- 8. Professional
- 9. Senior Government Official
- 10. Business Manager/Executive
- 11. Business Proprietor/Self-employed
- 12. Technical/Mechancical/Skilled worker
- 13. Public-facing clerical/sales employee
- 14. Other clerical/sales employee (not public-facing)
- 15. Other office or home-based worker
- 16. Farm Owner/Manager
- 17. Transportation/Supply chain/Logistics worker
- 18. Factory/Manufacturing/Food proecessing worker
- 19. Labourer/Agricultural or Domestic worker
- 20. Home-maker (not otherwise employed)
- 21. Student
- 22. Retired/Superannuitant



- 23. Unemployed/Beneficiary
- 24. Prefer not to say
- 1. Do you live with impairments or long-term health conditions?
  - Yes
  - No
- 2. Do you identify as disabled?
  - Yes No

#### 3. How would you generally describe the area you are currently living in?

Large city (e.g. Auckland, Hamilton, Tauranga, Wellington, Christchurch, Dunedin) Regional city (e.g. Whangarei, Gisborne, Napier, Hastings, Palmerston North, Whanganui, Nelson, Timaru, Invercargill) Regional town Rural, but not remote

Rural and remote

## 4. Have you already been offered an opportunity to get your COVID-19 vaccination? No

- Yes I have already had two doses
- Yes I have already had one dose
- Yes I have not had the first dose, but my appointment is booked
- Yes but I have not had the first dose and have not booked an appointment yet
- Yes but I declined/will decline to have the vaccine

#### TO ALL WHO HAVE NOT YET BEEN VACCINATED.

- 5. Will you get the COVID-19 vaccine?
  - Definitely Most likely Likely Unlikely Most unlikely Definitely not I'm really not sure

### New modelling on impact of COVID-19 infections and vaccines

The Government and others are looking at ways in which New Zealand can still have zero tolerance of COVID-19 infection in the community (and stamp out outbreaks), but also allow allow more travel into and out of the country.

Some new modelling has been released which provides a glimpse at what might happen if there were community outbreaks of the Delta strain of COVID-19 at various rates of vaccination...

It finds, if:



- **70%** of the total population aged 5 years or older were vaccinated, more than 1.5 million people could get infected with COVID-19, 94,809 go to hospital and 11,399 would die.
- If 80% of the 5+ population were vaccinated, there could be 861,391 infected, 43,757 go to hospital and 4,936 die.
- If **90%** were vaccinated, 13,398 could be infected, 476 go to hospital and 5 could die.

#### TO THOSE NOT YET VACCINATED:

- 6. Having read of the possible number of infections and deaths will you get the COVID-19 vaccine?
  - Definitely Most likely Likely Unlikely Most unlikely Definitely not I'm really not sure I was already planning on getting the COVID-19 vaccine



#### TO ALL (VACCINATED AND UNVACCINATED)

#### 7. What do you think about this modelling?

I totally believe it I believe it mostly I mostly don't believe it I don't believe it at all I'm really not sure

#### **COVID-19: New strains**

New strains or variants of the COVID-19 virus have emerged. Some, like the Delta strain, are more infectious than previous strains.

8. Does the emergence of the Delta strain make you feel more or less concerned about the COVID-19 pandemic?

Much more concerned More concerned Neither more or less concerned Less concerned Much less concerned I really don't know

9. Do you think the emergence of more infectious strains of COVID-19 put you more at risk ?

More risk to me personally No higher risk to me More risk to my family/whānau No higher risk to my family/whānau More risk to my community No higher risk to my community I'm really not sure Something else (plese tell us what that is)

#### **Re-opening New Zealand's borders**

#### 10. In general, how quickly do you think New Zealand should re-open its borders to the world?

Immediately By December 2021 In the first half of 2022 In the second half of 2022 2023 In 2024 or later



Never I'm really not sure

## 11. What percentage of the total Aotearoa New Zealand population (including children under 12 years of age) would you prefer to be vaccinated before the borders are reopened?

0% - the borders did not need to be closed 10% 20% 30% 40% 50% 60% 70% 80% 90% 100% I really don't know

## Being infected with COVID-19

12. In total confidence, have you been infected with COVID-19 in New Zealand or overseas? Yes

No

#### IF YES

13. Who did you tell you when you first suspected you had been infected with COVID-19?

No-one Just the people I live with My friends and family Everyone, I didn't care who knew Anyone I had been in close contact with My doctor My health care provider COVID-19 Healthline My employer People I work with Someone else (who was that?)



IF NO

### Pretend you had COVID-19

Here's a difficult question which might require some imagination.

Pretend you were told you had COVID-19, and the Delta variant. Think about it for a moment...

#### 14. Who would you tell?

(Please tick all that apply) Multiple response, rotate

> No-one No one unless the symptoms were obvious Just the people I live with My broader family/whānau My friends Everyone, I wouldn't care who knew Anyone I'd been in close contact with My doctor My health care provider COVID-19 Healthline My employer People I work with I really don't know who I would tell Someone else (please tell is who that would be)

# 15. If you thought you had COVID-19, which of these feelings do you think you'd have and what do you think you would do?

(Please tick any that apply)

I would hesitate to get tested if the symptoms were not too bad
I would hesitate to get tested because of stigma associated with being positive
I would hesitate to get tested because of fear of moving into an MIQ
I would hesitate to get tested because I won't be able to work
I would hesitate to get tested because I don't have access to child care
I wouldn't hesitate to get a test because I would need to know
I'd only get a test if saliva testing was available
I wouldn't worry about how others might treat me
I wouldn't want anyone else to know
I wouldn't go to a doctor if I had symptoms
I would go straight to a doctor or my medical care provider



I would call Healthline and ask them what I should do

I'd be afraid to tell people

I wouldn't be afraid to tell people

I'd feel embarassed if I got COVID-19

I wouldn't feel embarrassed

I would be angry if I got COVID-19

I'd be afraid of what it meant for my family or those I live with in terms of restrictions on them

I wouldn't be afraid of what it meant for my family or those I live with

I would be afraid of any restrictions it might mean for me

Others might blame me for getting infected

Others wouldn't blame me for how I got infected

Something else (please tell us what that is) (open text)



#### **Reconnecting New Zealand with the world**

The Government and others are looking at ways in which New Zealand can still have zero tolerance of COVID-19 infection in the community (and stamp out outbreaks), but also allow allow more travel into and out of the country.

## 16. Which of these things do you believe New Zealand should take into account in thinking about reopening its borders?

Maximising benefit to the economy Jobs for New Zealanders Reconnecting/re-uniting families People should be able to travel where they want to and when they want to Allowing more New Zealand citizens and permanent residents to return Allowing immigration Allowing overseas students at our universitiesws and schools Allowing migrant workers to come to New Zealand to support our primary industries Allowing skilled workers to come to New Zealand Facilitiating business travel Allowing for sporting events Maximising exports Encouraging tourists back to New Zelaand Reducing dependence on imports The percentage of New Zealanders who have been vaccinated The capacity and capability of the New Zealand health system The capacity of the New Zealand contact tracing system The ability to keep New Zealanders safe The ability to specifically keep New Zealand children safe (i.e., those who are in an age group for which a vaccine has not been approved) Personal freedom I don't believe the borders should be opened None of these (please tell us what you think should be taken into account)

## 17. If annual "booster shots" of a COVID-19 vaccine were recommended to continue protection in the future, how likely would you be to get one each year?

Definitely Most likely Likely Unlikely Most unlikely Definitely not I'm really not sure



18. If there were <u>limited capacity</u> in the provision of these services, or <u>increasing delays</u> in providing any of these services, what effect, if any, would that have on your confidence in opening the border?

COVID-19 Infection testing	No change to confidence
COVID-19 Vaccination	Reduce confidence
Contact tracing	I'm really not sure
ICU Beds	
Ventilators	

19. If New Zealand's border was open to countries that were classified as high risk in terms of COVID-19 which of these public health practices would you do?

Handwashing with soap and water for 20 seconds Coughing/sneezing into elbow Staying at home when unwell Getting a COVID-19 test if symptomatic Getting vaccinated if you haven't already Encouraging your whanau to get vaccinated if they haven't already Using the COVID Tracer App Avoiding large gatherings Avoiding social gatherings Avoiding public transport Working from home Staying at least 2m away from people Limiting your movement and travel between regions in New Zealand Limiting overseas travel I wouldn't do any of these only if I was vaccinated I wouldn't do any of these whether I was vaccinated or not

#### Mask wearing if the border was open

**20. How do you feel about mask wearing?** *Please tick all that apply* 

I'd be embarrased to wear a mask



I would only wear a mask if it was compulsory
I wouldn't wear a mask if I had been vaccinated
I wouldn't wear a mask in any circumstances
I don't believe it is necessary to wear a mask
I would wear a mask if the border was open to travellers from high-risk countries
I would wear a mask if the border was open to travellers from ANY countries
I'm really not sure

#### Some policy ideas

As the country considers ways to reconnect to the world and allow more travel across our borders, some are making policy suggestions.

#### 21. Which of these ideas would you support, if any?

(Tick all of those you would support)

- Give the vaccine to everyone over age 12 who wants it, then re-open the borders fully in early 2022
- Wait until the vaccine is approved for use in 5-11 year olds and have them vaccinated before the borders are open
- Allow travel to and from only "low risk countries" (those with very low rates of COVID-19 infection)
- Make vaccination compulsory for everyone wanting to enter New Zealand
- Make vaccination compulsory for everyone wanting to leave New Zealand
- Make all travellers entering New Zealand prove they have been vaccinated
- All people (including New Zealand residents and citizens) should provide they have been vaccinated before entering New Zealand
- Make mask wearing compulsory at places where people gather (like shops, resturants, threates, indoor events)
- Make mask wearing compulsory at high schools and universities/ tertiary institutions
- Make mask wearing compulsory at all schools (including primary schools)
- Restrict numbers at indoor venues
- Use Level 4 lockdown if there is an outbreak of COVID-19 in a particular area, even if 90% vaccination were achieved
- New Zealand should move isolation and quarantine facilities away from population centres New Zealand should shift away from using hotels for quarantine and isolation to specially built facilities
- New Zealand should plan to have managed self-isolation at places travellers organise themselves
- I don't support any of these ideas



### **Entering New Zealand**

Here's some brief background to help you answer the next question.

An expert group has recommended a phased opening of *Aotearoa* New Zealand's borders once the COVID-19 vaccination programme has been fully rolled out.

The Government has announced that it will use the second half of 2021 to vaccinate as many New Zealanders as possible while it prepares and tests the safety of having three "Pathways" to allow people to enter *Aotearoa* New Zealand in 2022. This will involve allowing quarantine-free entry to vaccinated travellers from low-risk countries from early 2022 while those from medium- and high-risk countries will have to go through a combination of quarantine measures ranging from self-isolation to spending 14 days in quarantine. The phased reopening is looking to introduce:

- *A Low-Risk pathway* allowing quarantine free entry for vaccinated travellers who have been in low-risk countries.
- A Medium-Risk pathway allowing a combination of self-isolation and/or reduced time in managed isolation for vaccinated travellers who have been in medium-risk countries.
- A High-Risk pathway continuing a full 14 days in managed isolation and testing for unvaccinated travellers and any traveller, including vaccinated travellers, who have been in high-risk countries.
- **22.** Overall, how strongly do you support or oppose this approach to a phased reopening?: Strongly support
  - Support Somewhat support Somewhat oppose Oppose Strongly oppose I'm really not sure

### **Entering New Zealand**

Assuming the three pathways plan was to proceed, we'd like to know whether you would support or oppose various aspects of it.

The individual risk-based approach requires new systems to be set up. The Government has said that it will use the remainder of 2021 to prepare for the operation of borders under this system, including:

- Ongoing development of a traveller health declaration system.
- Investigating new testing technology for rapid testing on arrival at airports and reliable predeparture testing.
- Piloting self-isolation arrangements for some New Zealanders.
- Strengthening other public health measures such as contact tracing.



#### 23. Assuming the plan was to proceed, how strongly do you support or oppose:

The plan to change to an individual, risk-based approach	Strongly support	
Quarantine-free travel being introduced for vaccinated	Support	
travellers who have been in low-risk countries	Somewhat support Somewhat oppose	
Self-isolation arrangements for some vaccinated New Zealanders who have been in medium-risk countries		
14 days in MIQ for all unvaccinated travellers	Oppose	
14 days in MIQ for vaccinated travellers who have been in high	Strongly oppose	
risk or very high-risk countries	I'm really not sure	

#### How are you doing?

The pandemic and lockdowns have affected different people in different ways. We are interested in the effects, if any, of COVID-19 and the lockdowns on your personal wellbeing.

Please be assured that, by responding to the following questions, the answers you give will be completely anonymous. The questions are included to help get an understanding of how the pandemic and the consequent lockdowns have affected people in New Zealand.

## 15. Would you say that the COVID-19 pandemic has had a positive or negative impact on your personal wellbeing?

Very positive Positive Slightly positive Neither positive nor negative Slightly negative Negative Very negative I'm really not sure

#### The past two weeks

16. Over the last 2 weeks, how often have you been bothered by the following problems?

	Not at all	Several Days	More than half the days	Nearly every day
Feeling nervous, anxious or on edge				



Not being able to stop or control worrying		
Little interest or pleasure in doing things		
Feeling down, depressed or hopeless		
And over the past two weeks how often have you had challenging domestic, family or emotional situations?		

## 17. In total confidence, since the start of the most recent nationwide lockdown on 17 August, have you experienced any verbally or physically abusive situations:

	Yes, more than normal	Yes, about the same as usual	No
Since the most recent lockdown on August 17, have you experienced any verbally or physically abusive situations outside the home?			
And what about any verbally or physically abusive situations within your family or whanau?			



## 18. Since the start of the most recent nationwide lockdown on 17 August 2021, are you drinking more or less alcohol?

I've been drinking more I've been drinking about the same amount I've been drinking less I don't drink alcohol I'm not sure

#### IF ALCOHOL DRINKING HAS INCREASED

#### 19. Why do you think your consumption of alcohol has increased?

Increased stress Increased anxiety I'm worried about COVID-19/ the future Boredom/nothing else to do I'm spending more time at home now I think I'm dependent on alcohol I enjoy drinking more I have been drinking alcohol on my own more often I have been drinking alcohol oaily I have started drinking alcohol earlier in the day I purchased more alcohol than usual I'm not sure

## 20. In confidence, are you concerned with the amount of alcohol someone else in your household is drinking?

Defintiely Yes No Definitely not I'm not sure

Page 60



#### Just before you go

- 21. Overall, do you think the government is making the right decisions as we seek to reconnect Aotearoa New Zealand to the world?
  - Defintiely right Right Somewhat right Somewhat wrong Wrong Definitely wrong I'm really not sure

## 22. Do you think the government has protected the health of the people most at-risk from COVID-19 in the past year?

- Yes, definitely Yes Somewhat Somewhat not No Definitely not I'm really not sure
- 23. Do you think the government has upheld the principles of Te Tiriti o Waitangi in the way it has managed COVID-19?
  - Yes, definitely Yes Somewhat Somewhat not No Definitely not I'm really not sure
- 24. If you are concerned about the effects of the COVID-19 pandemic and lockdowns on your personal wellbeing (or the wellbeing of someone in your household or family/whānau) and would like some information on services you can contact for professional help, tick Yes below for a list of organisations that may be able to help. Yes, I'd like to see the list

No, thanks



#### Thank you!

Thanks for all your views; those are all the questions we have.

If you are concerned about the effects of the COVID-19 pandemic and lockdowns on your personal wellbeing (or the wellbeing of someone in your household or family/whānau) and would like some information on services you can contact for professional help, CLICK HERE for a list of organisations that may be able to help (the list will open in a new window).

**25.** Do you have any final comments on this survey or the issues raised in it? *Open response*