

# The Tasmania Project

Share your experience during COVID-19.

## Tasmanian attitudes towards border restrictions and the effectiveness of COVID-safe measures

Report number: 40 | Date: 22 October 2020 | Author: Nyree Pisanu

In September/October, The Tasmania Project conducted a targeted survey exploring Tasmanian attitudes towards border restrictions and COVID-safe measures.

A total of 1377 responses were collected. The sample is mostly females (71.6%), with 27.8% of the sample indicating they are male and 0.6% selecting prefer to self-describe. The age breakdown includes 18-24 years (2%), 25-44 years (23%), 45-64 years (47%) and 65+ (27.9%). 60.3% of respondent live in the South of Tasmania, while 20.1% are from the North and 19.6% are from the North-West and West (See Appendix I for more demographic information and Appendix II for information about employment status).

This report consists of 9 sections:

1. Border restrictions
2. Effectiveness of COVID-safe measures to control the spread of the virus
3. Concerns about border restrictions easing
4. Concerns about further lockdowns
5. Compliance and responsibility
6. COVID-safe behaviours: the start of the pandemic, currently, and once borders reopen
7. Staying informed
8. Seasonal agricultural employment opportunities
9. Wellbeing

### Key findings

- Just under half of the respondents do not believe that Tasmania's border restrictions should stay in place until COVID-19 is eradicated in Australia
- Most respondents indicated that when borders open, they will be more vigilant with COVID safe practices.
- The most effective measure to control the spread of COVID-19 was limiting travel to Tasmania from identified hot spots/affected regions/affected premises followed by increased testing of people with cold or flu-like symptoms.
- Regarding borders reopening, participants expressed the most concern about the healthcare system overloading, family and/or friends being infected with COVID-19, and restrictions on business.
- Many respondents did not believe the Tasmanian health system will cope with a second wave of COVID-19.
- If another lockdown occurred, respondents were most concerned about an impact on the economy and the mental/physical health of family/friends.
- Over half of respondents said they are more complacent about COVID-19 safe practices compared to the start of the pandemic.
- Many were concerned about other Tasmanians NOT complying with COVID safe practices.
- Around half of the sample trusted that the Tasmanian Government has adequate resources to manage another outbreak

## 1. Border restrictions

Respondents were asked how much they agreed or disagreed with a set of statements about border restrictions.

*Tasmania's border restrictions should stay in place until COVID-19 is eradicated in Australia*

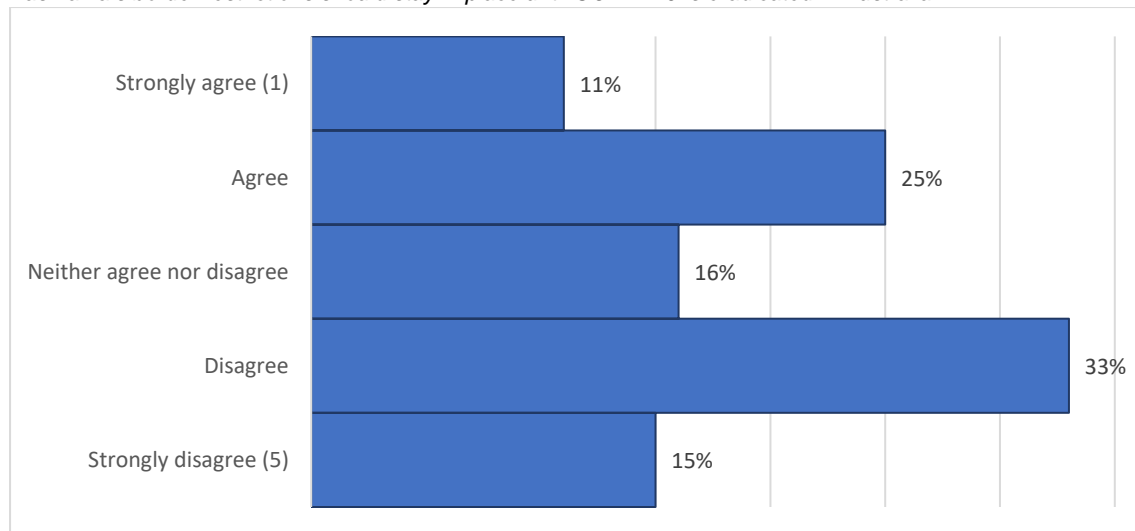


Figure 1. n=1373

Under half of respondents disagreed or strongly disagreed (48%) that Tasmania's border restrictions should stay in place until COVID-19 is eradicated in Australia<sup>1</sup>. The mean= 3.16 indicating that, on average, respondents were likely to neither agree nor disagree. Over 25 years were more likely to disagree (49%) compared with 18-24 years (35%), alongside those from the North and North-West and West (51%) compared with the South (47%). More males disagreed (51%) compared with females (48%).

Free text responses indicate mixed feelings regarding borders reopening. Those who support the borders reopening cited reasons such as visiting family interstate or for the sake of Tasmania's economy. Some respondents are concerned borders would open too early "please do not open too soon".

*I believe Tasmania's border restrictions are keeping us safe*

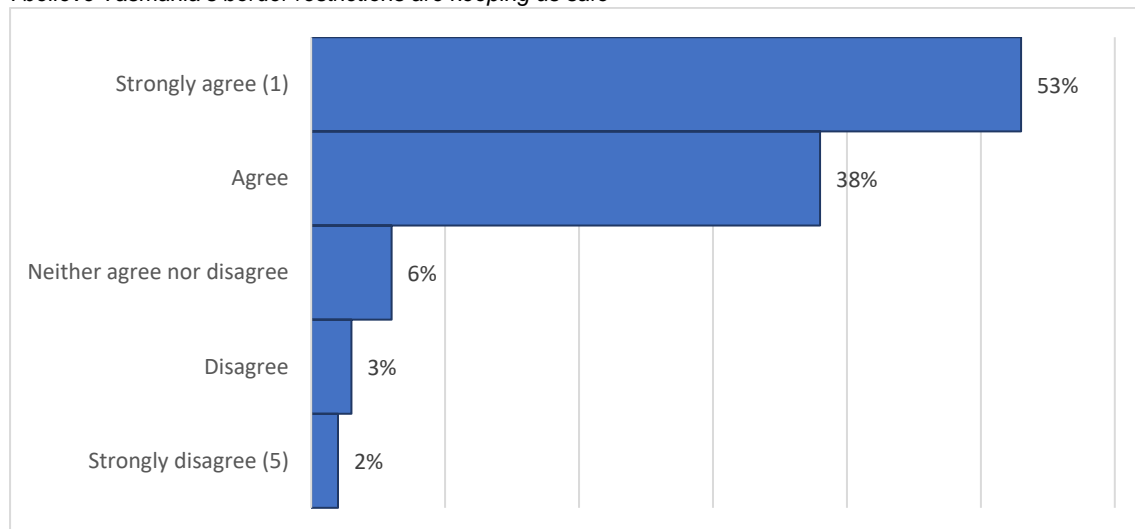


Figure 2. n=1374

<sup>1</sup> This question was also asked in three previous surveys. In survey 1, 51% agreed, 20% were neutral and 29% disagreed. There was less agreement that borders should remain closed in survey 2 (45% agreed, 20% were neutral and 35% disagreed). In survey 3, more respondents did not support border closures (45% disagreed, 36% agreed, 19% were neutral).

A clear majority of respondents agreed or strongly agreed (90%) that Tasmania's border restrictions are keeping us safe. The mean=1.62 indicating that, on average, respondents were likely to agree. Females were more likely to agree (92%) compared with males (86%).

*When the borders open, I will be more vigilant with COVID safe practices*

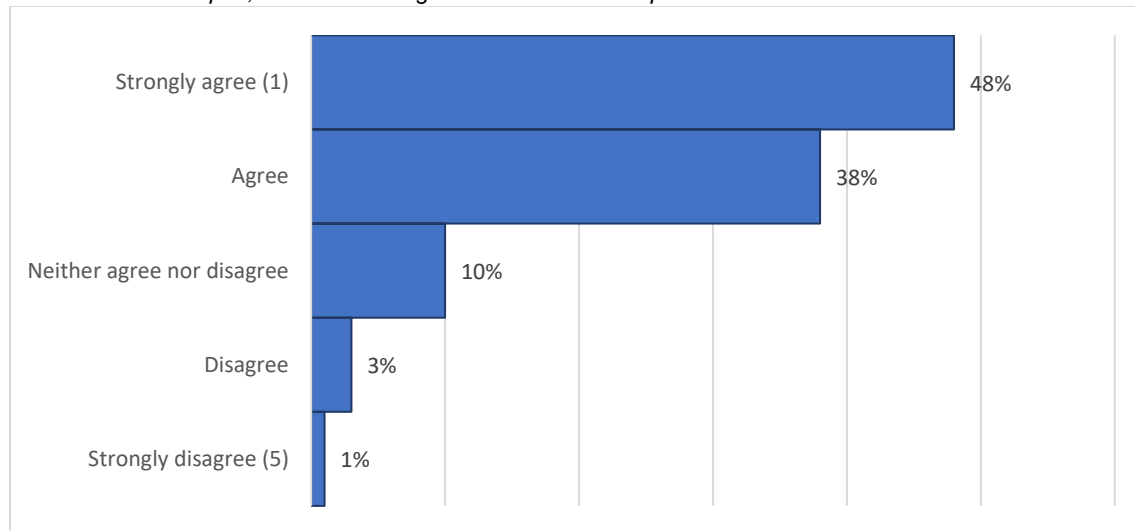


Figure 3. n=1373

Most respondents also agreed or strongly agreed that when borders open, they will be more vigilant with COVID safe practices (86%). The mean= 1.71 indicating that, on average, respondents were likely to agree. Older age groups reported they would be more vigilant (over 45 years; 88%) compared with younger (under 44 years; 83%), as well as Southern respondents (88%) compared with respondents from the North (85%) and North-West and West (82%). Females were also more likely to agree (87%) compared with males (84%).

*Tasmania's border restrictions should stay in place until other states lift their restrictions*

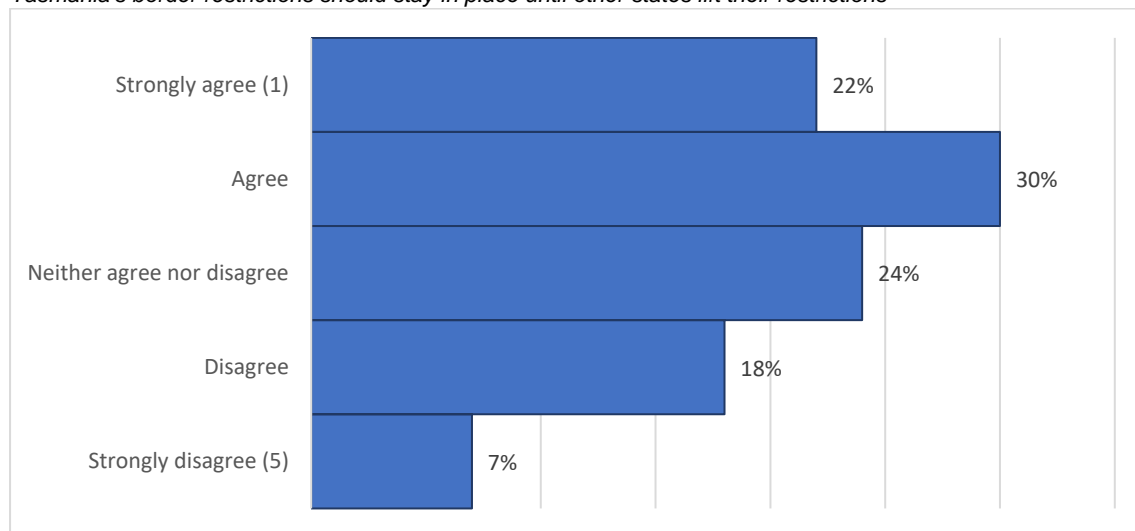


Figure 4. n=1372

While over half (52%) of respondents agreed or strongly agreed that Tasmania's border restrictions should stay in place until other states lift their restrictions, 24% felt neutral and 25% disagreed or strongly disagreed. The mean= 2.58 indicating that, on average, respondents were likely to neither agree nor disagree. 53% of respondents from the South agreed, while 52% from the North and 45% of the North-West and West agreed. A higher proportion of females agreed (53%) compared with males (48%).

## 2. Effectiveness of COVID-safe measures to control the spread of the virus

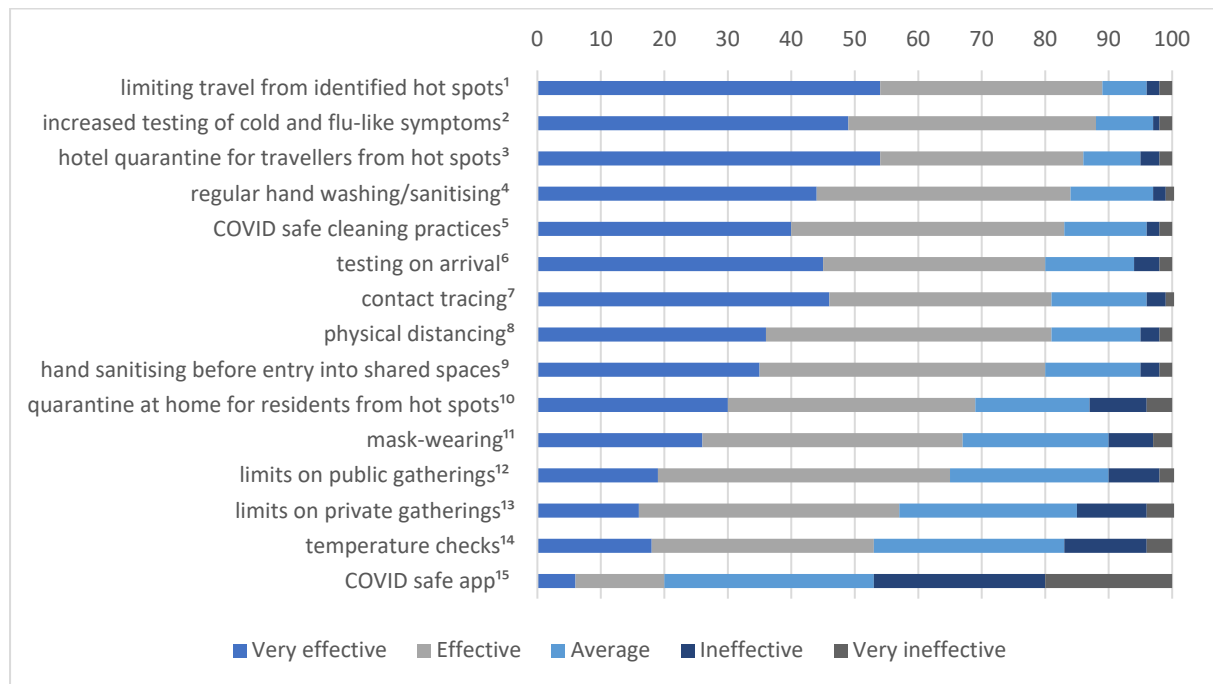


Figure 5. percentage. <sup>1</sup>n=1373, <sup>2</sup>n=1374, <sup>3</sup>n=1375, <sup>4</sup>n=1360, <sup>5</sup>n=1375, <sup>6</sup>n=1361, <sup>7</sup>n=1336, <sup>8</sup>n=1375, <sup>9</sup>n=1374, <sup>10</sup>n=1376, <sup>11</sup>n=1374, <sup>12</sup>n=1370, <sup>13</sup>n=1376, <sup>14</sup>n=1369, <sup>15</sup>n=1350.

Limiting travel to Tasmania from identified hot spots/affected regions/affected premises was selected by the highest proportion of respondents as the most effective measure to control the spread of COVID-19 (88% selected effective or very effective), followed by increased testing of people with cold or flu-like symptoms (87%), hotel quarantine for travellers (86%) and regular handwashing and sanitising (84%). The COVIDsafe app was deemed as the least effective, selected by only 20% of respondents.

For the 18-24 years age group, the highest proportion of respondents selected regular handwashing (85%), COVID testing on arrival (85%), physical distancing (85%), COVID-safe cleaning practices (85%) as the most effective measures. For the 25-44 years, hotel quarantine (86%) and limiting travel from hotspots (85%) were the most popular. For 45-65 years, limiting travel from hotspots (90%), increased testing (89%), regular handwashing (88%), hotel quarantine (87%), contact tracing (84%), COVID-safe cleaning practices (86%) were selected as most effective. The oldest respondents (65+), selected increased testing (91%), limiting travel from hotspots (91%), COVID-safe cleaning practices (89%), hotel quarantine (88%) as the most effective measures.

For females, the most popular measures were limiting travel from hotspots (90%), increased testing (89%), hotel quarantine (88%), COVID-safe cleaning practices (85%). For males, the measures that were chosen as the most effective were limiting travel from hotspots (87%), regular handwashing (86%), increased testing (86%) and COVID-safe cleaning practices (84%).

Respondents from the South chose limiting travel from hotspots (91%), hotel quarantine (87%), physical distancing (83%), COVID-safe cleaning practices (84%). Northern respondents selected hotel quarantine (91%), regular handwashing (90%), limiting travel from hotspots (86%) and COVID-safe cleaning practices (84%) as the most effective. Those from the North-West and West selected limiting travel from hotspots (85%), COVID-safe cleaning practices (84%), hand washing (83%) and hand sanitising before entering venues (81%).

Free text answers mostly centred around people arriving in the state, followed by clear communication and education (about practices, protocols, and government plans) and good hygiene practices for those in the state. There is a clear sense of the desire for consistency in how measures such as quarantining and hygiene are practiced, and a desire for more widespread testing. There are concerns that Tasmanians are getting complacent with health and safety measures.

### Arrivals and quarantining

Some respondents were concerned about people arriving the state, with many references to mandatory and consistent testing (and/or temperature testing) of all arrivals, and some references to testing on departure as well. Some respondents suggested recording visitors' movements in the state, having visitors agree to practicing COVID safety, keeping mandatory quarantine for arrivals or limiting travel from states with active cases "Keep out states who still have



multiple covid active cases until they have zero like us.” Another person suggested “covid testing before travel and having the traveller give an itinerary and contact details.’, while another stated “All visitors should be tested for COVID-19 within 2-3 days prior to departure and have evidence of a positive test result, they should have their temperature taken upon arrival and then have to quarantine for at least 3 days.” Another theme focused on limiting the number of tourists allowed into Tasmania, including references specifically to cruise ships.

For quarantining specifically, respondents argued for the need for consistency and the need for monitoring. Sometimes this is stricter (e.g. suggesting use of location monitoring), and occasionally this is more about incentivising (e.g. good conditions to discourage breaches). A few people mentioned the importance of everyone in a household quarantining, not just the individual.

#### *Clear communication and education/awareness*

Another common theme highlighted the importance of clear communication and advertising about health guidelines, protocols, and government measures/plans; the importance of reminders and communication about good practice; and the importance of education about good practice. This includes some references to making sure information is accessible for those with literacy difficulties, and countering false information. Many of these comments convey a sense of concern about other people’s complacency – references to ‘refreshing’, ‘reminding’, ‘continual awareness’, etc. “Clear protocols and procedures. We’ve got to learn to live with it and the ‘how’ needs to be crystal clear - and people need the motivation to do so.”

#### *Hygiene and distancing*

Other comments focused on the importance of measures such as good hygiene, maintaining social distancing, and staying home when unwell. Some of these are about reminding people about keeping up these habits, and some are about how good practice can be encouraged in public (e.g. improving ventilation). One respondent suggested: “constant reminders to hand wash, distance and wear masks through state government social media and traditional media channels.”

Respondents also highlighted the need for good hygiene protocols to be in place in public places/places of service. For public places, this is mostly about cleaning, sign-ins, and limiting numbers (rather than outright closures); for service industries specifically (e.g. aged care) this is mostly about cleaning, training of staff, and monitoring staff health. “I’ve noted business relaxing the COVID cleaning practices, most cafes do not have enough staff to maintain the cleaning of tables etc. I’d really like to see stronger cleaning requirements for businesses.”

#### *Testing*

Respondents encouraged wider and increased testing and also implementing random/asymptomatic testing, and in some cases sewerage testing. For example, “Faster testing and more access to testing. Anecdotally I’ve heard a few stories where people weren’t able to be tested because they didn’t have enough symptoms. Also faster testing results would encourage more testing, as the need to isolate after testing is a barrier for those needing to work, particularly casual employees.” Some respondents also mentioned the use of COVID sniffer dogs, particularly at airports.

### 3. Concerns about border restrictions easing

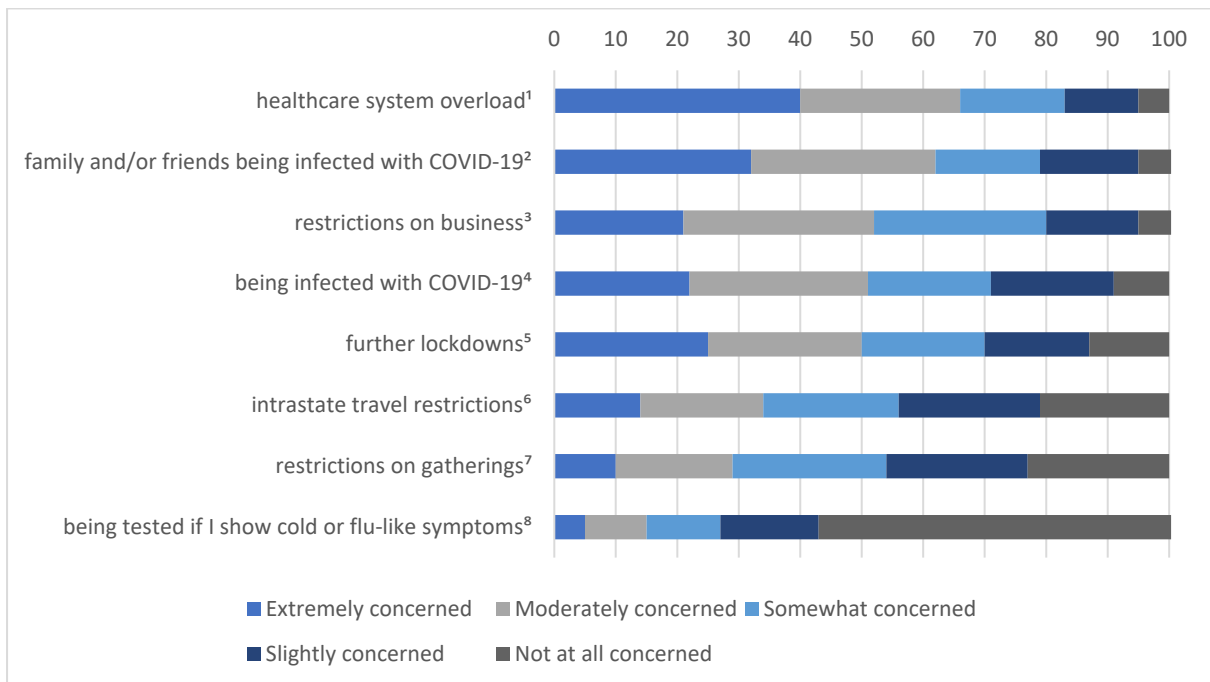


Figure 6. percentage. <sup>1</sup>n=1375, <sup>2</sup>n=1373, <sup>3</sup>n=1369, <sup>4</sup>n=1372, <sup>5</sup>n=1367, <sup>6</sup>n=1371, <sup>7</sup>n=1370, <sup>8</sup>n=1375.

Participants expressed the most concern about the healthcare system overloading (66% were extremely or moderately concerned), family and/or friends being infected with COVID-19 (62%) and restrictions on business (52%). Respondents were least concerned with being tested if they were showing symptoms (15%).

The youngest aged group (18-24 years) was most concerned about further lockdowns (65%), healthcare system overload (62%) and restrictions on businesses (58%). For the 25-44 years, family and friends being infected (60%), further lockdowns (57%) and healthcare system overload (63%) were cited as the biggest concerns. As respondents were older, they had more health concerns; for 45-65 years, being infected (54%), family and friends being infected (64%) and healthcare system overload (69%) were selected. This was the same as the oldest respondents (65+) who selected being infected (56%), family and friends being infected (58%) and healthcare system overload (64%) as most concerning.

Females were most concerned about family and friends being infected (64%) and the healthcare system overloading (70%). Males were also concerned about family and friends being infected (55%) and a healthcare system overload (57%), however were less concerned than females.

Participants from the South and North were most concerned about family and friends being infected (S- 64%, N-58%), the healthcare system overloading (S-67%, N-66%), whereas the North-West and West was most concerned about healthcare system overloading (64%), family and friends being infected (57%) alongside restrictions on businesses (57%).

## 4. Concerns about further lockdowns

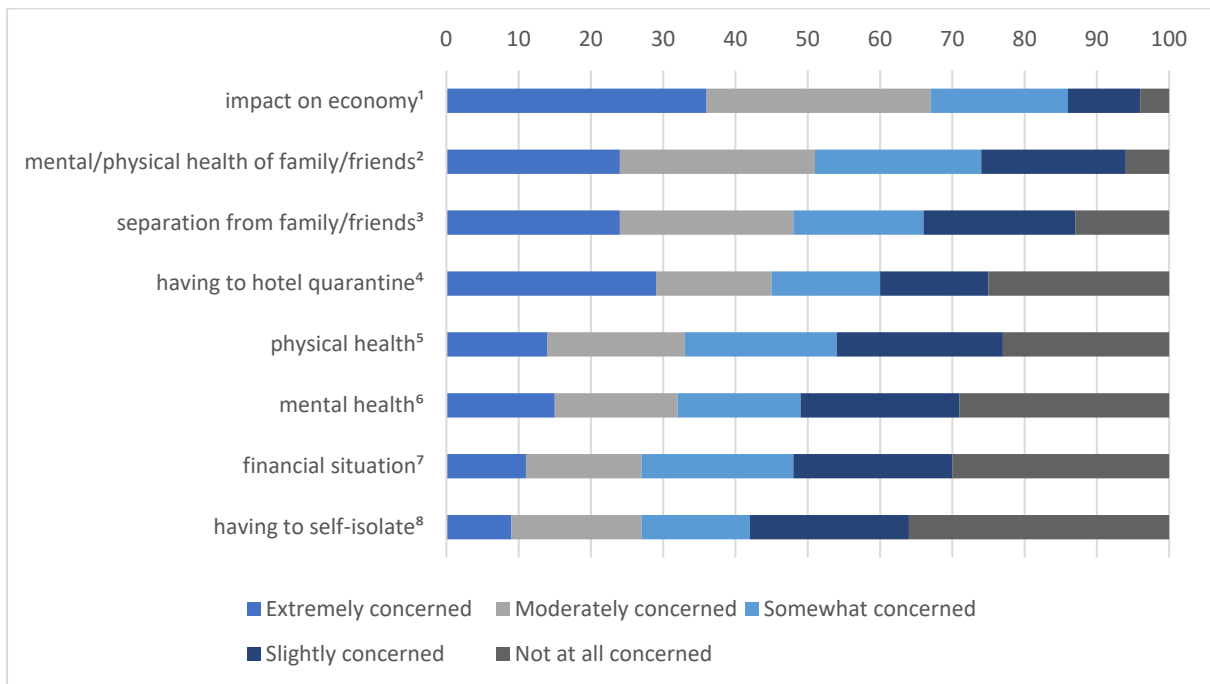


Figure 7. q5, percentage. <sup>1</sup>n=1371, <sup>2</sup>n=1372, <sup>3</sup>n=1374, <sup>4</sup>n=1368, <sup>5</sup>n=1371, <sup>6</sup>n=1373, <sup>7</sup>n=1375, <sup>8</sup>n=1373.

Respondents were most concerned about the impact on the economy (67%), followed by the mental/physical health of family/friends (51%) and having to separate from family and friends (48%).

Younger respondents (18-24 years) were concerned about the mental/physical health of their family/friends (77%) impact on the economy (65%), and their mental health (58%). The 25-44 years age group were concerned about the impact on the economy (66%), mental/physical health of family/friends (65%), having to separate from family and friends (51%). Those who were 45-64 years were concerned about the impact on the economy (69%), mental/physical health of family/friends (53%) and having to hotel quarantine (46%). Oldest respondents (65+ years) were most concerned about the impact on the economy (67%) and having to hotel quarantine (56%)

Females were concerned about the impact on the economy (67%), the mental/physical health of family/friends (52%) and having to separate from family and friends (49%). Males were also concerned about the impact on the economy (67%), the mental/physical health of family/friends (46%) and having to hotel quarantine (46%). Each region was most concerned about the impact on the economy and the mental/physical health of family/friends.

## 5. Compliance and responsibility

Respondents were asked how much they agreed or disagreed with a set of statements about compliance.

*I feel comfortable telling people to comply with COVID-19 practices*

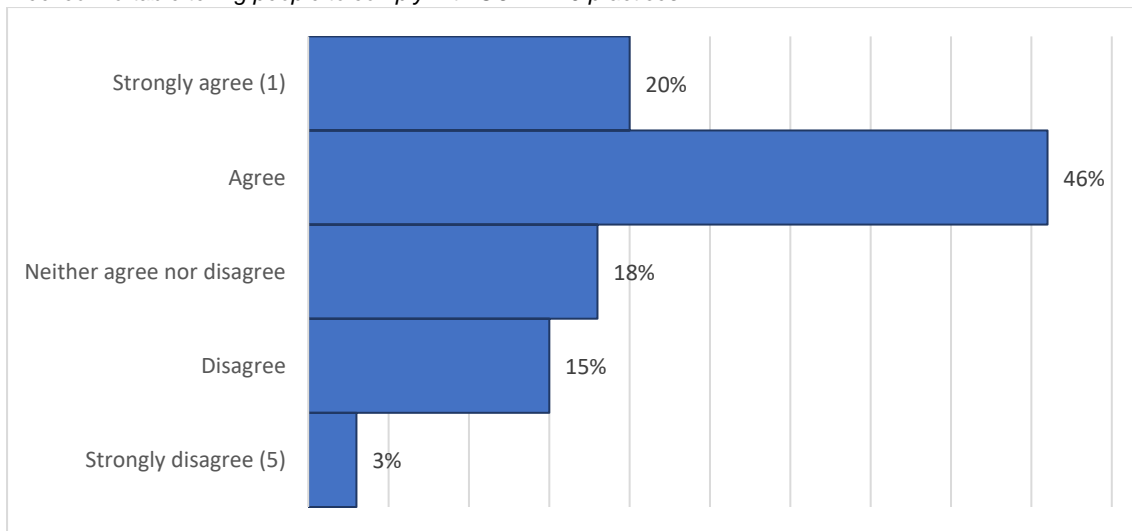


Figure 8.  $n=1355$

The sample mostly indicated that they felt comfortable telling people to comply with COVID-safe practices (66% agreed or strongly agreed). The mean= 2.36 indicating that, on average, respondents were likely to agree. Older respondents were more likely to feel comfortable (65+; 75%, 45-64 years; 65%) compared with younger (18-24 years; 54%, 25-44 years; 55%). Males also felt more comfortable (69%) compared with females (64%). North-West and West felt the most comfortable (72%), followed by North (67%) and South (62%).

*Individuals are responsible for complying with COVID-19 rules and guidelines*

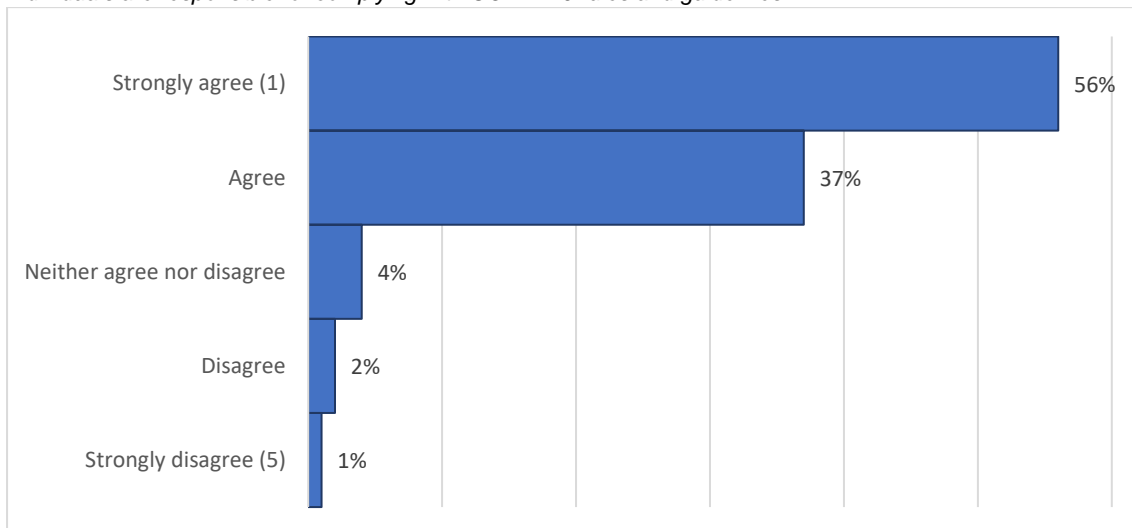


Figure 9.  $n=1355$

Participants mostly agreed or strongly agreed (93%) that individuals are responsible for complying with COVID-19 rules and guidelines. The mean= 1.56 indicating that, on average, respondents agree. No demographic differences were observed.



*I am more complacent about COVID-safe practices than I was at the start of the pandemic*

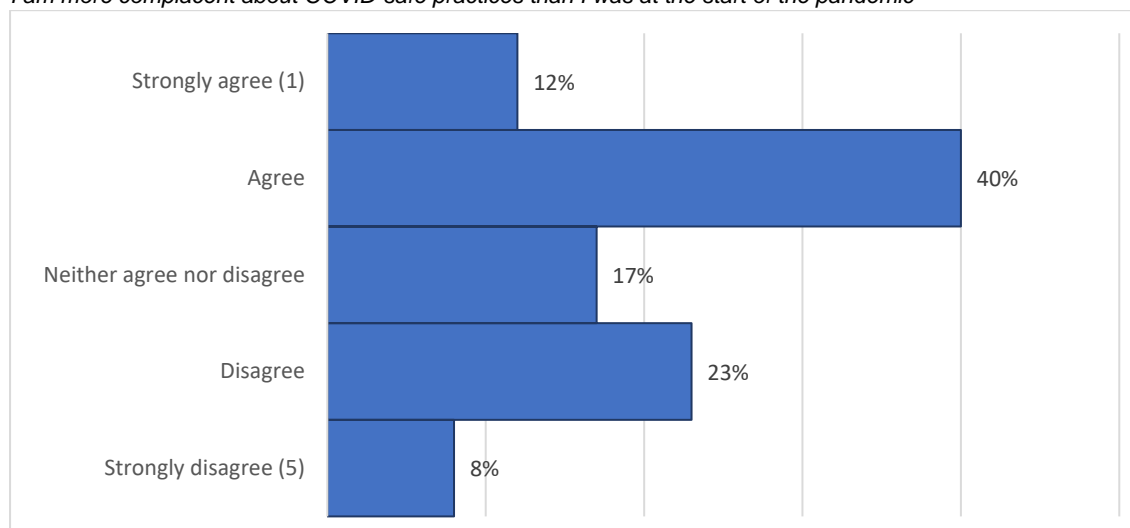


Figure 10. n=1352

Over half of respondents agreed or strongly agreed (52%) that they are more complacent about COVID-19 safe practices compared to the start of the pandemic. A mean of 2.74 indicates that, on average, respondents are likely to neither agree nor disagree. An age pattern was observed where 18-24 year olds indicated they were more complacent (73%), followed by 25-44 years (69%), 45-64 years (50%) and 65+ years (44%). Females felt more complacent (55%) compared with males (48%), alongside respondents from the South (59%), compared with the North (49%) and North-West and West (39%).

*I feel as though COVID-safe practices have become habitual in my life*

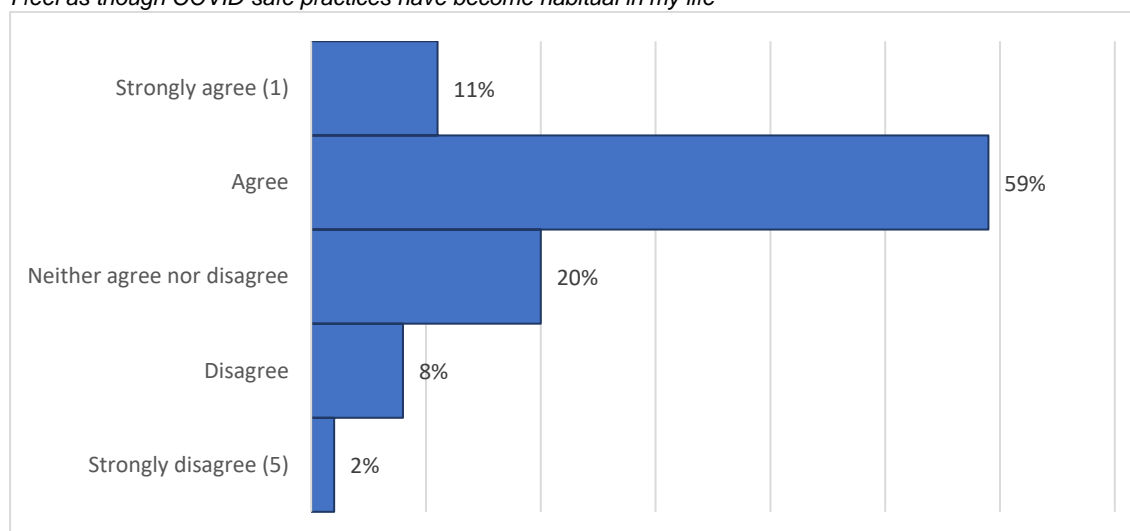


Figure 11. n=1354

Most (70%) respondents felt COVID safe practices have become habitual in their lives. A mean of 2.3 indicates that, on average, respondents agree. Older respondents (45 years and over) felt practices were more habitual (74%) compared with younger (below 44 years; 65%), as well as females (71%) over males (68%). Respondents from the North had the most agreement (75%), then North-West and West (72%) and South (68%).

*I believe Tasmanians are still at risk of catching COVID-19 in our community*

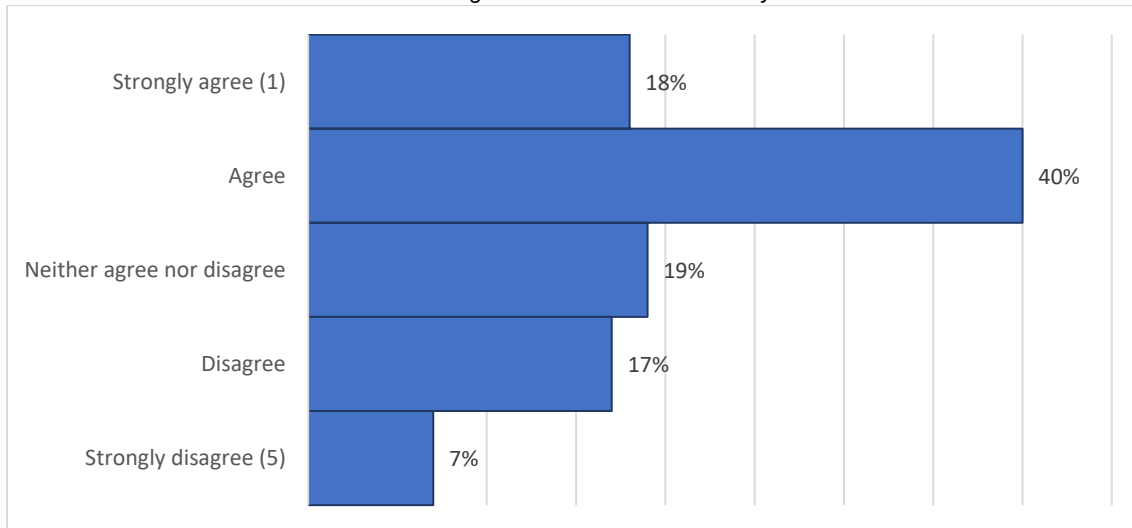


Figure 12. n=1352

Most (58%) agree or strongly agree that Tasmanians are still at risk of catching COVID-19 in our community. A mean of 2.56 indicates that, on average, participants neither agree nor disagree. Minor demographic differences were observed.

*Tasmanians should expect further COVID-19 infections*

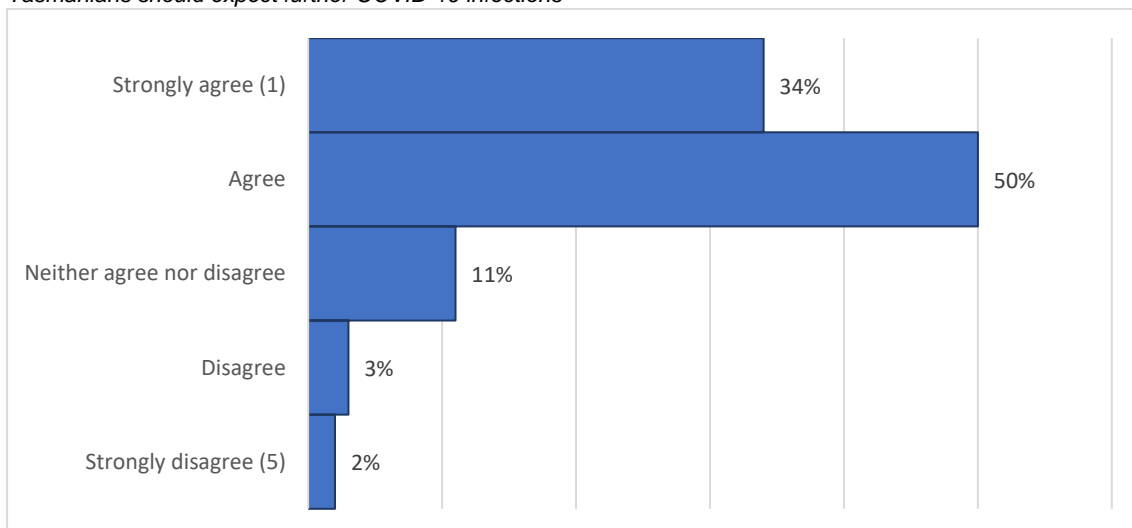


Figure 13. n=1353

84% of respondents agree or strongly agree that Tasmanians should expect further COVID-19 infections. A mean of 1.89 indicates that, on average, respondents agree. 25-44 years were most likely to agree (89%), followed by 45-64 years (85%), 65+ (80%), and 18-24 years (65%). More females (87%) agreed compared with males (77%). Respondents from the South (87%) were more likely to agree, followed by the North (84%) and North-West and West (75%).

*I am more concerned about the economic impacts than the health impacts of the COVID-19 pandemic*

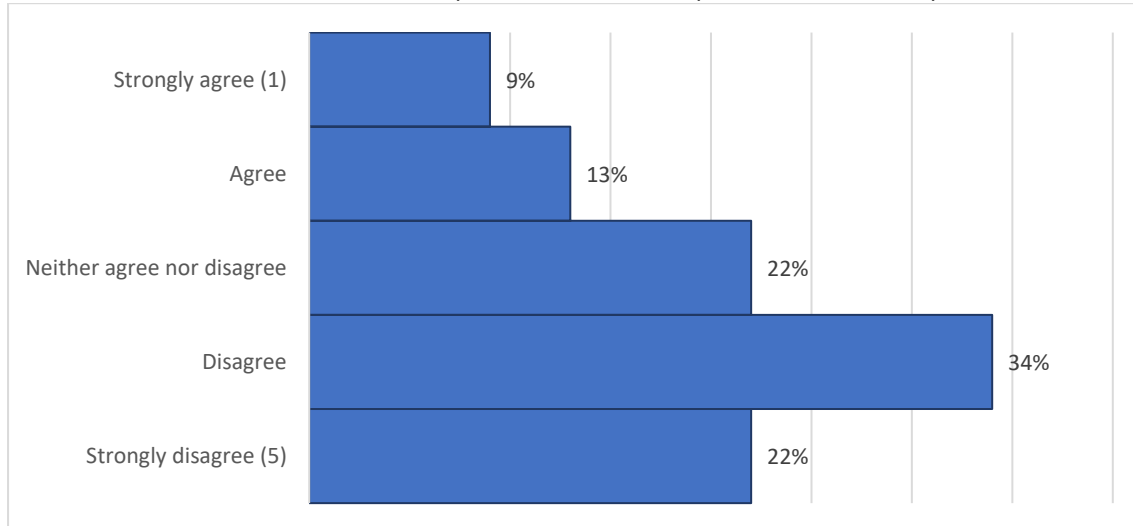


Figure 14. n=1354

Over half respondents are more concerned about the health impacts of the pandemic than the economic impacts (56% disagree or strongly disagree that they are more concerned about the economic impacts). A mean of 3.46 shows, on average, respondents neither agree nor disagree. The youngest (18-24 years; 69%) and oldest age cohorts (65+; 59%) were the most concerned about health over economic impacts, while just over half (55%) of 45-64 years and 25-44 years (51%) were more concerned about health. More females indicated they were concerned about health (58%) than males (49%). 58% of respondents from the South also indicated this compared to 53% of North and North-West and West respondents.

*I avoid attending events or venues due to COVID-19 fears*

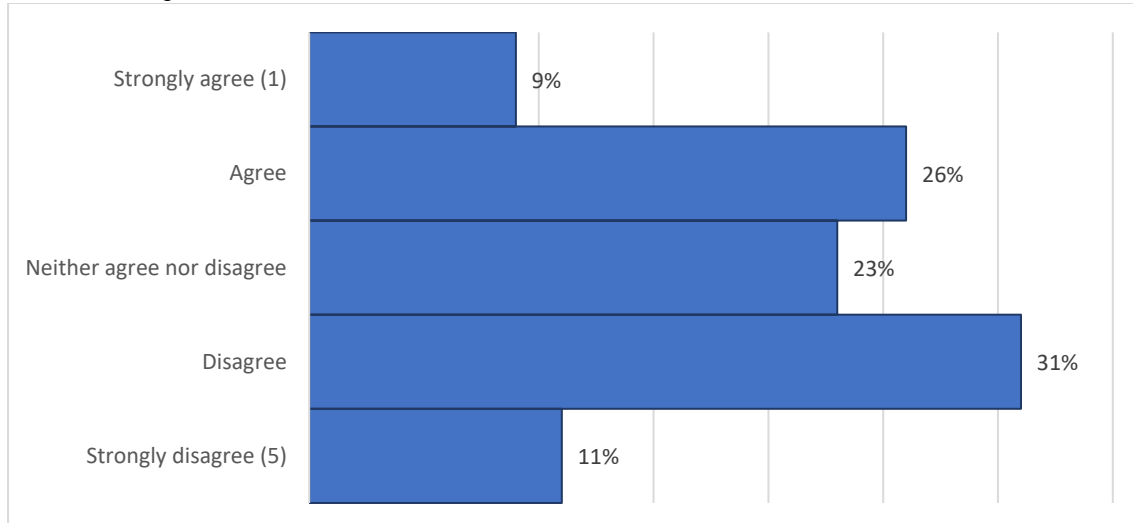


Figure 15. n=1351

While most respondents (42%) disagreed or strongly disagreed they were avoiding attending events or venues due to COVID-19 fears, a large proportion agreed or strongly agreed (37%) and neither agreed nor disagreed (23%). A mean of 3.1 indicates that, on average, respondents neither agree nor disagree. An age pattern was observed, with younger respondents (18-24 years; 58%, 25-44 years; 56%) less likely to avoid events compared with older respondents (41% of 45-64 years, 36% of 65+).

*Despite restrictions easing, I am not going out as much as I used to*

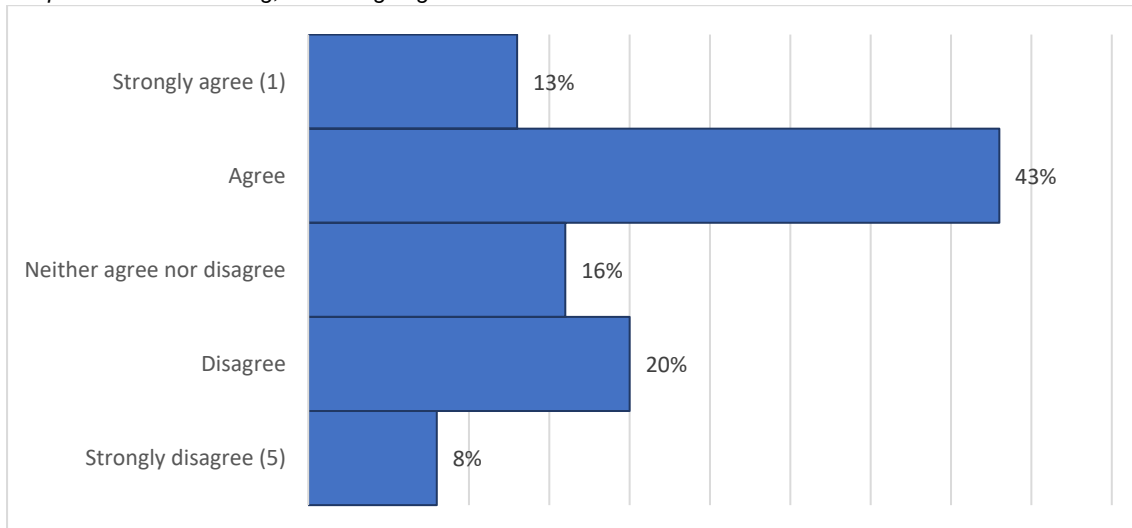


Figure 16. n=1352

Over half of respondents indicated (56% agreed or strongly agreed) that they were not going out as much they used to. An average score of 2.69 shows respondents were most likely neither agree nor disagree. Older respondents were going out less than they used to (57% of 45 years and over) compared with less than half of younger respondents (under 44 years; 47%). Females were less likely to be going out as much (56% compared with 51% of males). A higher percentage of respondents from the South (56%) agreed, followed by North (55%) and North-West and West (50%).

*The Tasmanian Government has been too slow to ease COVID- 19 restrictions*

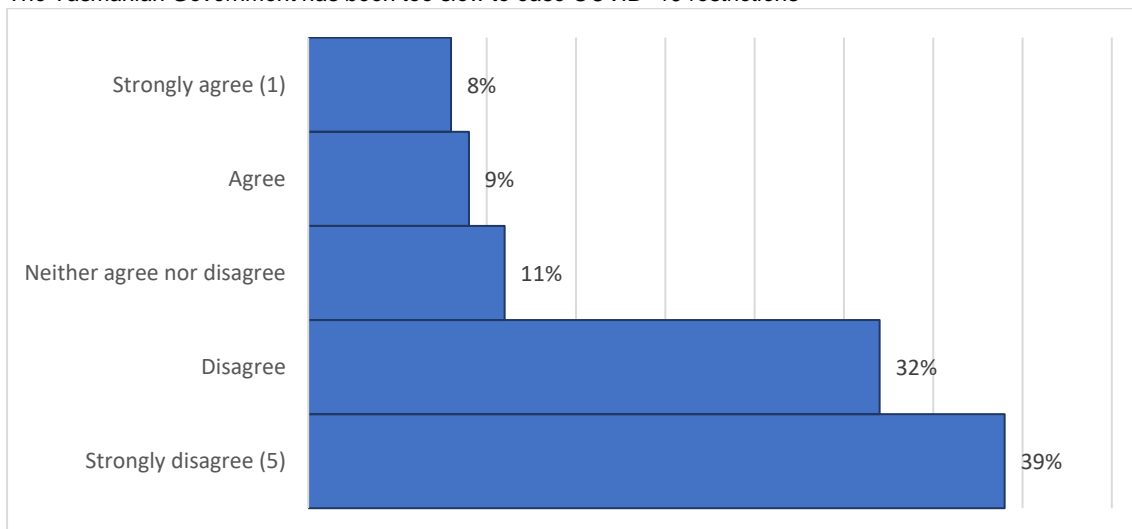


Figure 17.n=1355

Most participants (71%) disagreed or strongly disagreed that the Tasmanian Government has been too slow to ease COVID- 19 restrictions. A mean of 3.86 shows, on average, respondents disagreed. The older respondents were more likely to support the pace of restrictions easing (76% of 65+, 72% of 45-64 years), compared to younger (69% of 18-24 years, 64% of 25-44 years), alongside females (74%) over males (65%). Southern respondents (73%) were more likely to disagree restrictions eased too slowly over North (72%) and North-West and West (65%).

*Future COVID-19 outbreaks in Tasmania will be managed well*

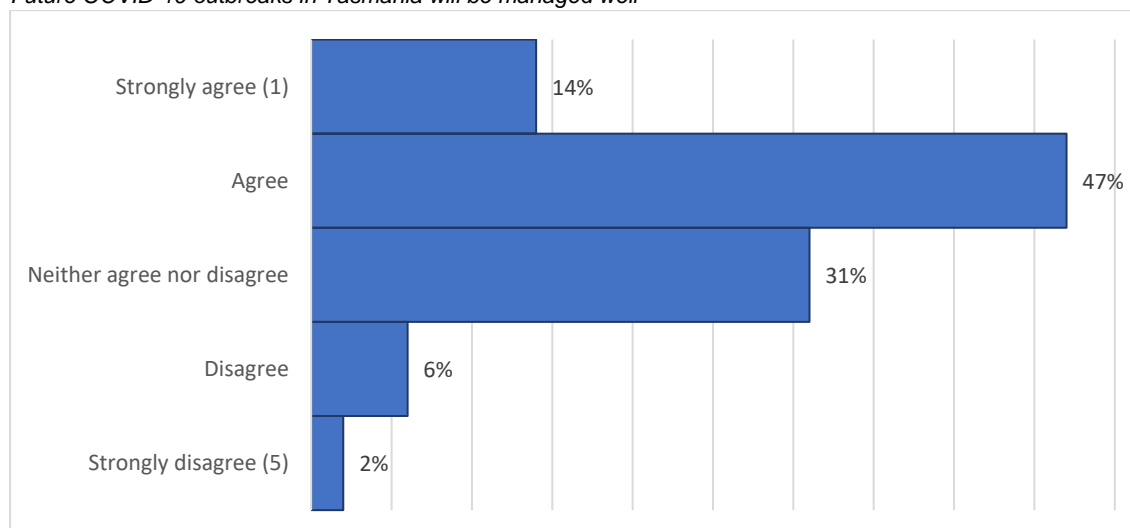


Figure 18. n=1350

While over half of respondents (61%) agreed or strongly agreed that future COVID-19 outbreaks in Tasmania will be managed well, 31% selected neither agree nor disagree. A mean of 2.36 shows that, on average, participants agreed. 64% of 45-64 years agreed, followed by 62% of 65+, 56% of 25-44 years and 50% of 18-24 years. More respondents from the North and North-West and West (66%) believed that future COVID-19 outbreaks will be managed well compared with respondents from the South (57%).

*I trust government and health officials to provide reliable information about COVID-19*

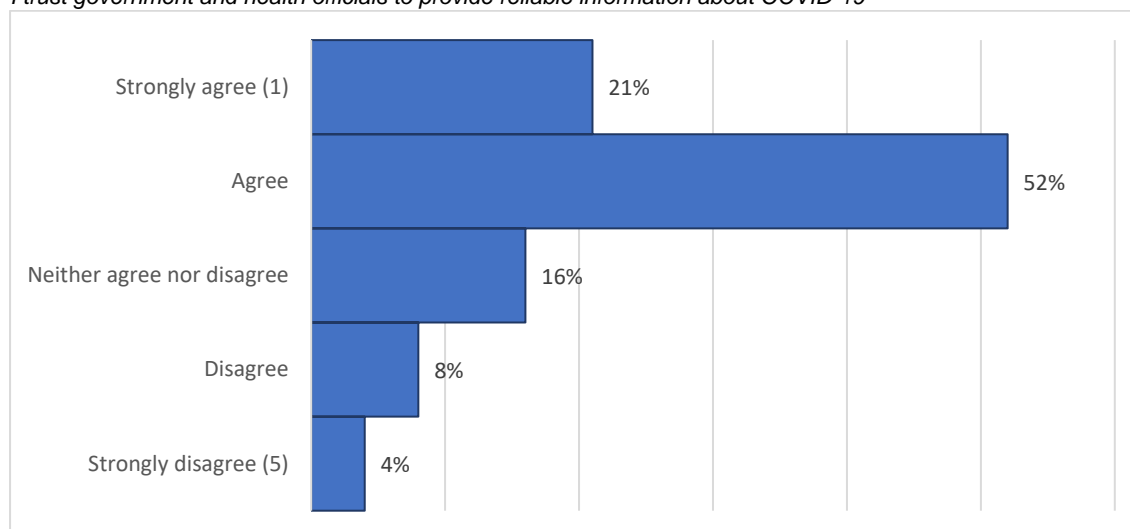


Figure 19. n=1353

The sample mostly agreed or strongly agreed (73%) with the statement: I trust government and health officials to provide reliable information about COVID-19. A mean of 2.21 shows that, on average, respondents agreed. Trust in the government to provide reliable information was high for older aged groups (45+; 74%, 25-44 years; 71%) compared with the youngest respondents (54%). Respondents from the North (75%) trusted the government more than the South (73%) and North-West and West (69%).

*I am concerned about other Tasmanians NOT complying with COVID safe practices*

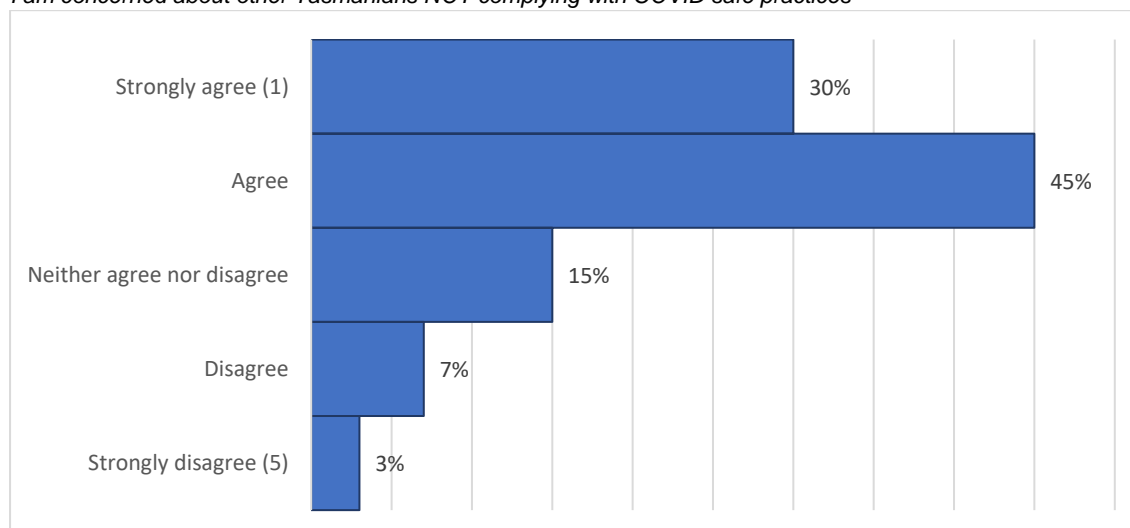


Figure 20. n=1354

Most of the sample were concerned about other Tasmanians NOT complying with COVID safe practices (75% agreed or strongly agreed). A mean of 2.07 shows that, on average, respondents agreed. The youngest (77% of 18-24 years) and oldest (76%) were most concerned about other Tasmanians not complying, compared with the middle age brackets (72% of 25-44 years and 75% of 45-64 years), alongside females (78%) over males (69%). Respondents from the North had the most concern (78%), followed by the South (75%) and North-West and West (71%).

*The Tasmanian Government and the public have worked well together to minimise the risk of COVID-19*

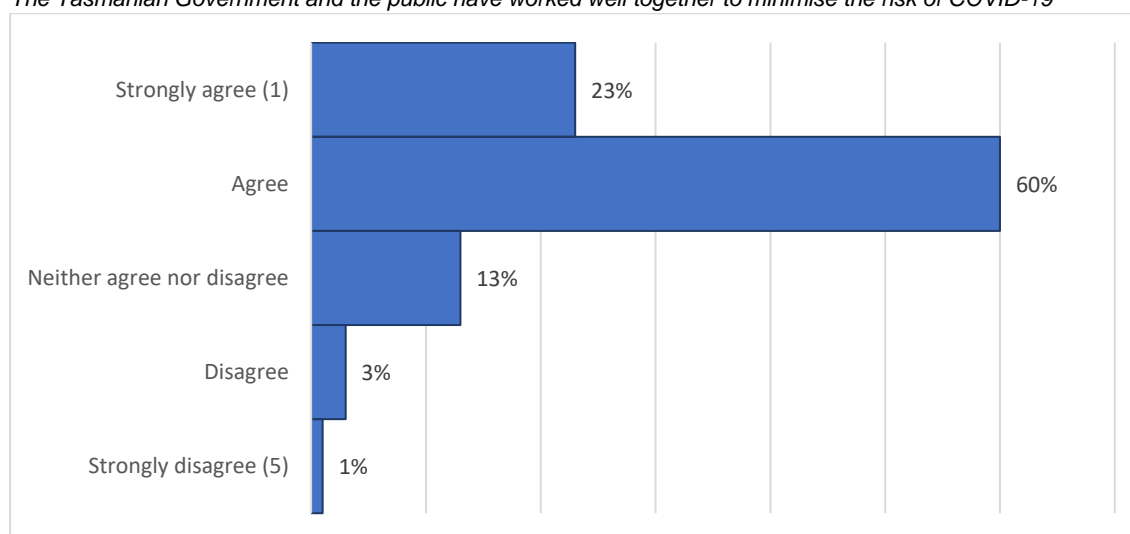


Figure 21. n= 1352

Most (83%) agreed or strongly agreed that the government and public have worked well together to minimise the risk of COVID-19. A mean of 1.99 shows that, on average, respondents agreed. Older age groups felt the government and public worked well together (87% of 45-64 years and 82% of 65+) while less younger groups agreed (77% of 18-24 years, 79% of 25-44 years). More females agreed (85%) compared with males (79%).

Qualitative responses show that some respondents are prepared to follow whatever health advice/protocols are set out by authorities, with one participant stating "for the sake of all Tasmanians I will be most willing to continue to observe protocols. I am a responsible adult.". Similar comments go further in stating that they would be prepared to do 'whatever it takes' to limit COVID "there is nothing I wouldn't do to help limit the spread."



*I trust the Tasmanian Government has adequate resources to manage another COVID-19 outbreak*

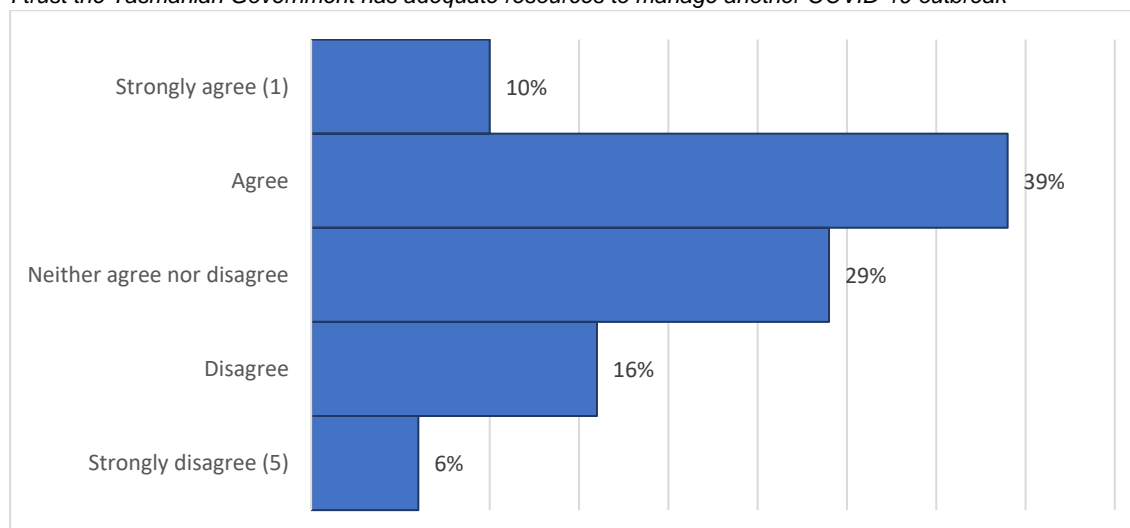


Figure 22. n=1350

Under half (49% agreed or strongly agreed) trusted that the Tasmanian Government has adequate resources to manage another COVID-19 outbreak, while 29% neither agree nor disagreed. A mean of 2.68 shows, on average, respondents neither agreed nor disagreed. Older groups had more trust that the government has adequate resources (65+; 52%, 45-64 years; 50%) while younger groups had less trust (18-24 years; 42%, 25-44 years; 46%). Males had more trust (48%) than females (53%), as well as respondents from the North (56%) compared with North-West and West (53%) and South (46%).

*I believe the Tasmanian health system will cope with a second wave of COVID-19*

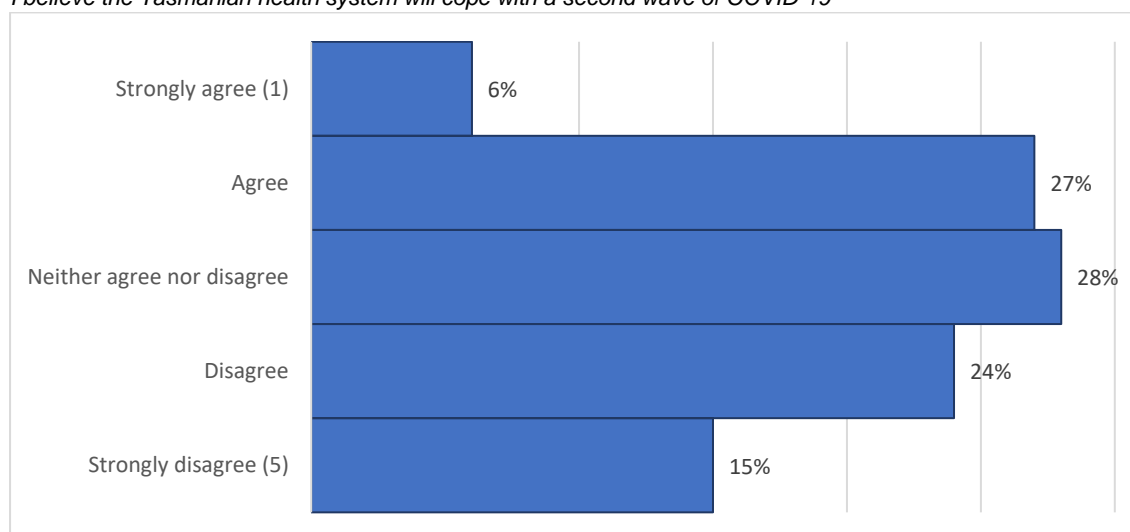


Figure 23. n=1347.

The highest proportion of respondents did not believe the Tasmanian health system will cope with a second wave of COVID-19 (39%), while 28% neither agreed nor disagreed, and 33% disagreed or strongly disagreed. An average of 3.16 shows that respondents were more likely to feel neutral. 65+ were more likely to agree that the Tasmanian health system will cope with a second wave (39%) while all other age groups disagreed (18-24 years; 36%, 25-44 years; 45%, 45-64 years; 42%). Females were more likely to disagree (42%) while males were more likely to agree (40%). More respondents from the South (44%) disagreed the health system will cope, whereas North (39%) and North-West and West (37%) respondents agreed.

*I understand what the Tasmanian Government is doing to prepare for future cases or outbreaks*

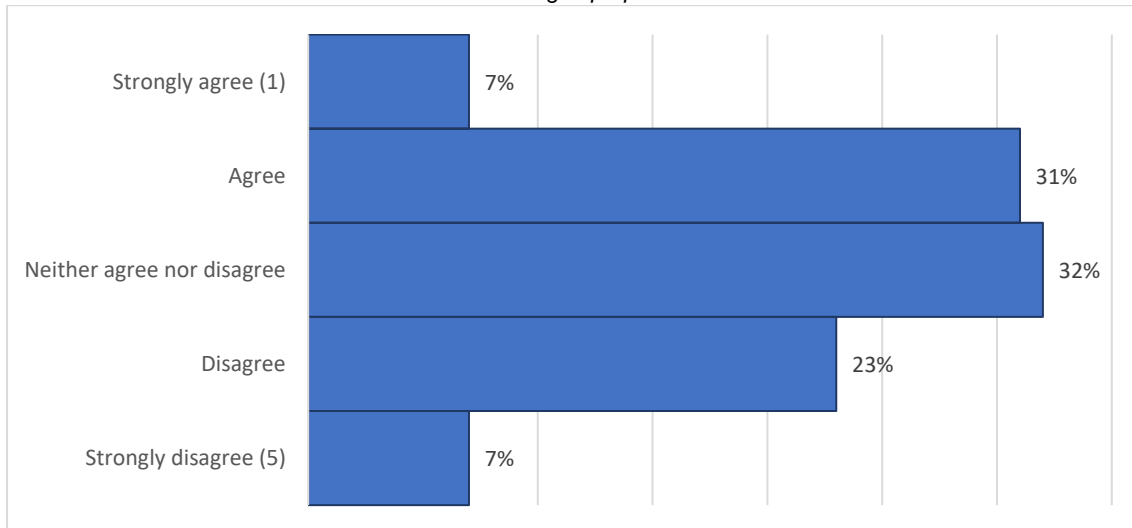


Figure 24. n=1349

Responses to the statement: 'I understand what the Tasmanian Government is doing to prepare for future cases or outbreaks' were mixed. 38% agreed or disagreed, 32% felt neutral and 30% disagreed or strongly disagreed. A mean of 2.91 indicates that, on average, respondents felt neutral. The 18-24 year old age group did not understand what the Tasmanian Government is doing to prepare (48% disagreed), whereas the older groups indicated they did understand (25-44 years; 35%, 45-64 years; 40%, 65+; 38%). More respondents from the North and North-West and West (41%) indicated they understood while less respondents from the South (37%) understood.

## 6. COVID-safe behaviours: the start of the pandemic, currently, and once borders reopen

Wash hands/sanitise throughout the day

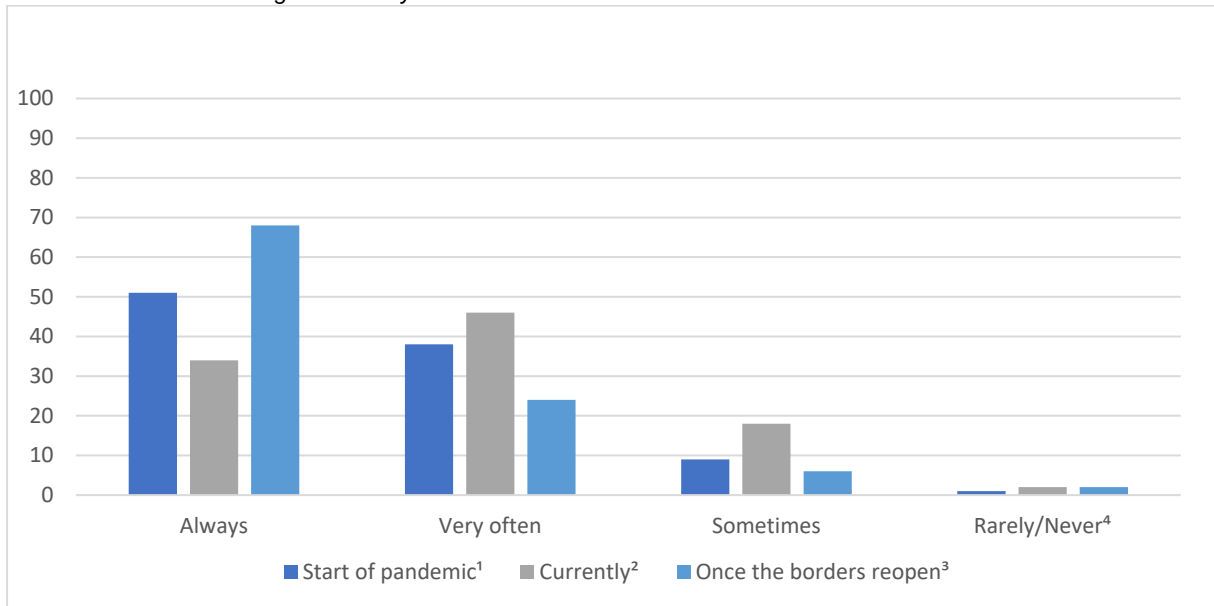


Figure 25. <sup>1</sup>n=1353, <sup>2</sup>n=1354, <sup>3</sup>n=1353, <sup>4</sup>Rarely/Never are collapsed due to small sample sizes.

Over half of respondents (51%) indicated that, at the start of the pandemic, they always washed their hands/sanitised throughout the day. When asked about current behaviour, a decrease was observed (34% selected always, 46% selected very often). Once the border reopens, 68% of respondents indicated they would wash hands/sanitise regularly.

Sanitise every time enter new business/venue/establishment

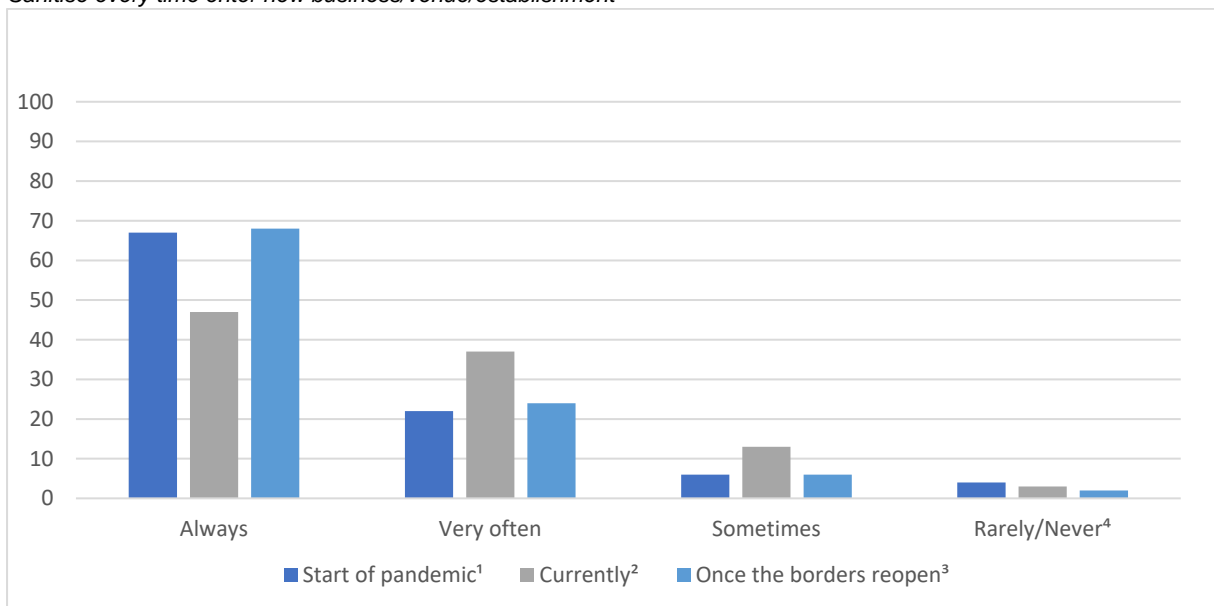


Figure 26. <sup>1</sup>n=1352, <sup>2</sup>n=1354, <sup>3</sup>n=1354, <sup>4</sup>Rarely/Never are collapsed due to small sample sizes.

The highest proportion of respondents (67%) indicated they always sanitised when they entered a new business, however currently, less respondents (47%) were sanitising. This proportion increased again when the sample was asked about once the borders reopen (68%).

However, some respondents indicated that once the borders re-open they will limit their movement to avoid exposure to COVID-19. "At the moment we are travelling, eating out, having coffees. We will stop as soon as the borders open. We presently do not go to the cinema, theatre, pubs or anywhere that aerosol spread puts us at risk."

Practice physical distancing (i.e. 1.5 metres)

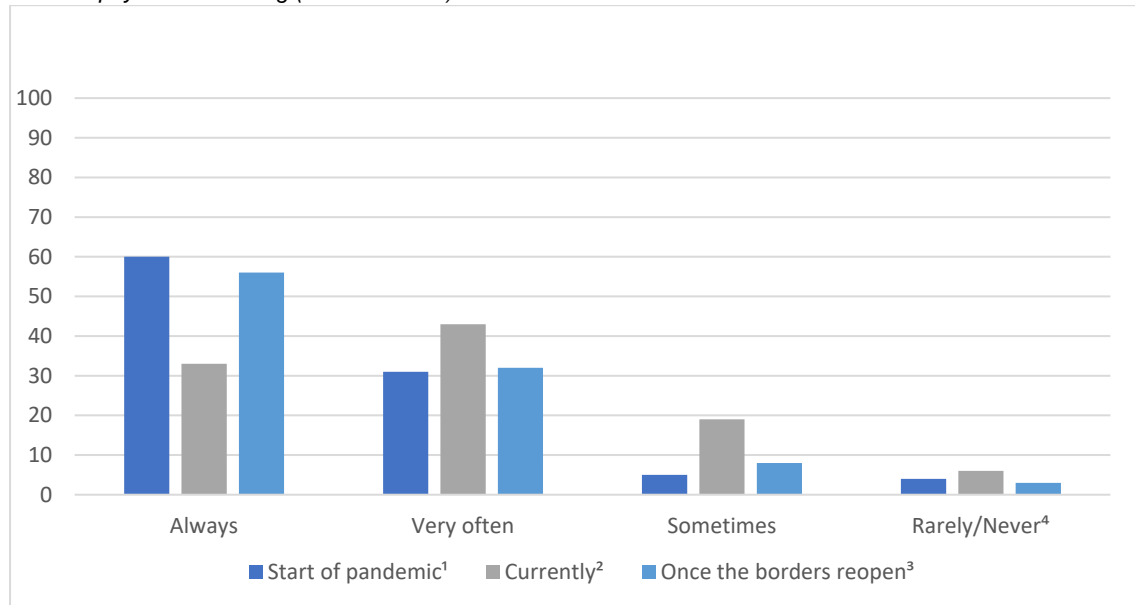


Figure 27. <sup>1</sup>n=1349, <sup>2</sup>n=1354, <sup>3</sup>n=1350, <sup>4</sup>Rarely/Never are collapsed due to small sample sizes.

60% of respondents always practiced physical distancing at the start of the pandemic, compared to only 33% currently (43% selected very often). Once the borders reopen, 56% of respondents indicated they would always practice physical distancing.

Avoid hugging/shaking hands with family and friends

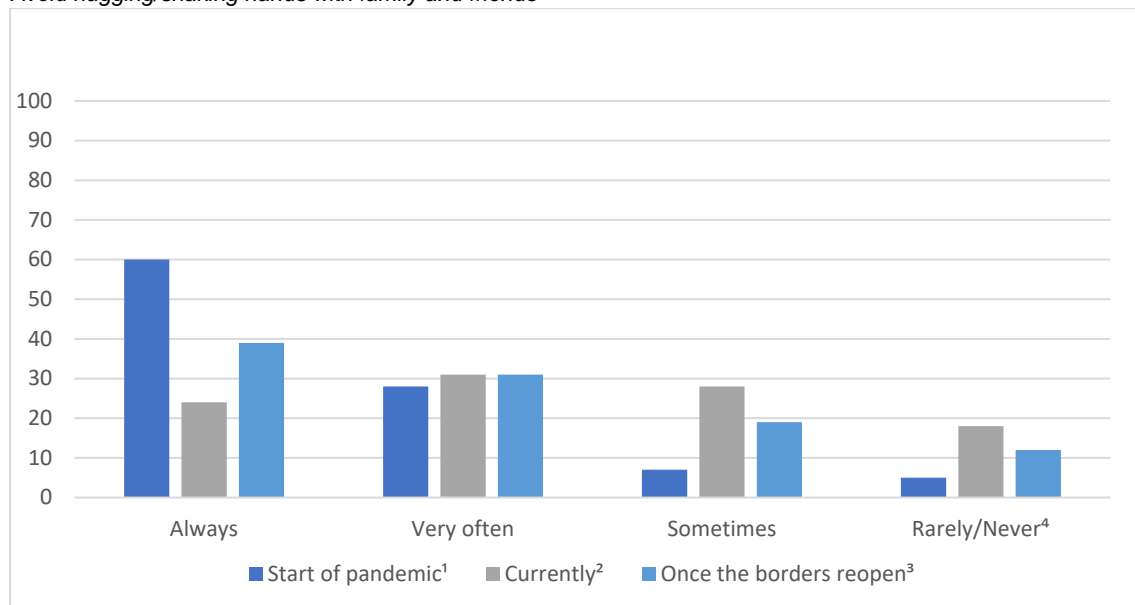


Figure 28. <sup>1</sup>n=1354, <sup>2</sup>n=1352, <sup>3</sup>n=1352, <sup>4</sup>Rarely/Never are collapsed due to small sample sizes.

Most (60%) of participants always avoided hugging/shaking hands with family and friends at the start of the pandemic, compared to 24% currently (31% selected very often). Once the borders reopen, only 39% of respondents indicated they would always avoid hugging/shaking hands with family and friends.

*Adhere to restrictions on the number of people allowed in spaces*

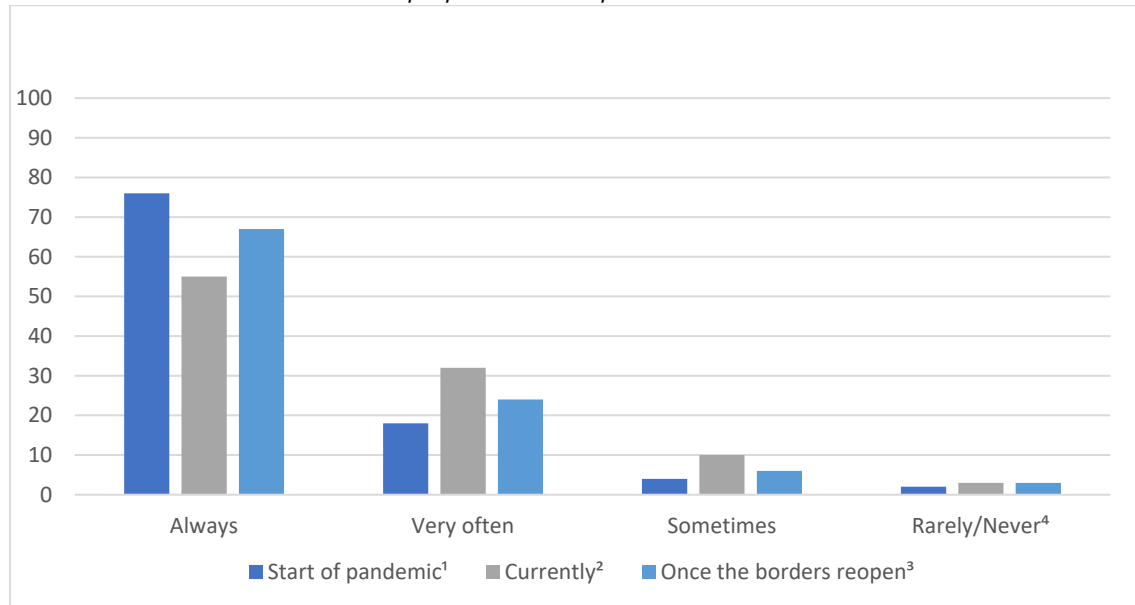


Figure 29. <sup>1</sup>n=1351, <sup>2</sup>n=1349, <sup>3</sup>n=1351, <sup>4</sup>Rarely/Never are collapsed due to small sample sizes.

A majority of respondents indicated they always adhered to restrictions on the number of people allowed in spaces at the start of the pandemic (76%) and currently (55%), and again once the borders reopen (67%).

*Wear a mask in public*

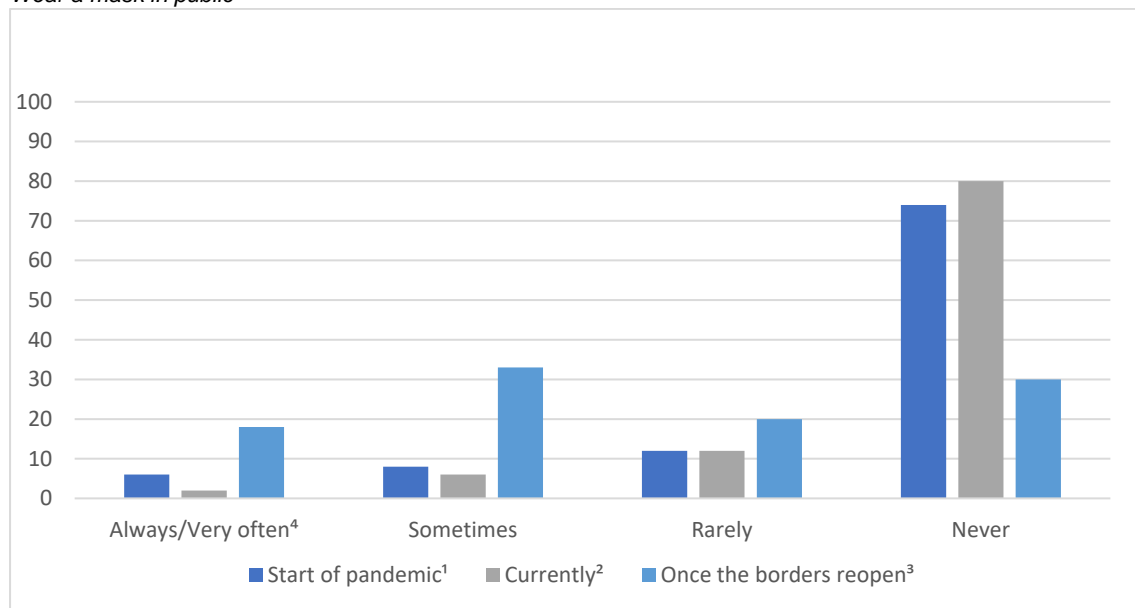


Figure 30. <sup>1</sup>n=1343, <sup>2</sup>n=1348, <sup>3</sup>n=1337, <sup>4</sup>Always/Very often are collapsed due to small sample sizes.

Most respondents indicated they never wore a mask at the start of the pandemic (74%), and most also indicated they currently did not (Never; 80%). Once the borders reopen, the highest proportion of respondents indicated they would sometimes wear a mask (30%).

There was lots of support in the free-text comments for wearing a mask in public. Very often these comments involved qualifiers – respondents say they would wear a mask if it was advised/required/socially acceptable to do so “I would be happy to wear a mask in public if it were mandated if borders open.” A few people said that masks should be made mandatory (plus a few more who said it should be encouraged/normalised), while some state they would not wear a mask (several of which explain why, such as health issues in relation to wearing a mask).

## 7. Staying informed

How often do you consume information or news about COVID-19?

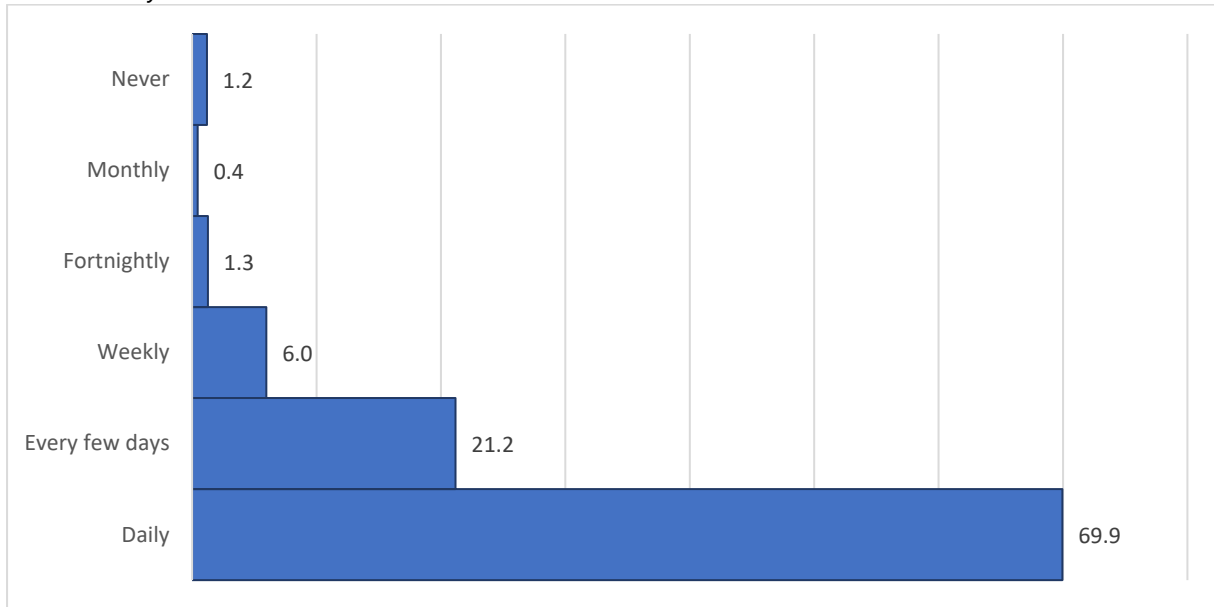


Figure 31. n=1341

A majority of the sample (70%) consumed news about COVID-19 daily. Older respondents were more likely to consume news daily (25-44 years; 53%, 45-64 years; 72%, 65; 81%), whereas most 18-24-year olds consumed news every few days (42%). Males (76%) were more likely than females (68%) to consume news daily, alongside respondents from the South (72%) compared with the North (66%) and North-West and West (65%).

Which of the following sources do you rely on for COVID-19 information?

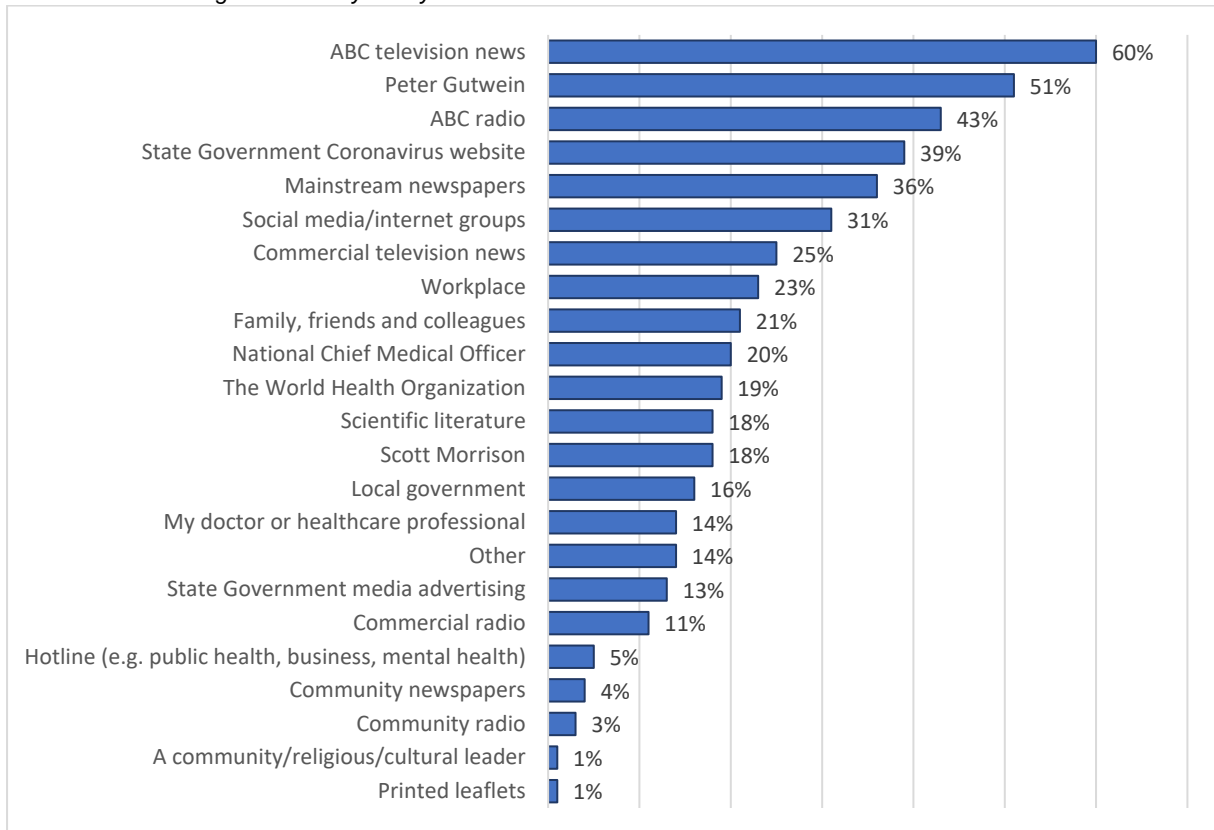


Figure 32. Q2. n=1337



ABC TV news was the most popular information source (60% of respondents selected this), followed by Peter Gutwein (51%), ABC radio (43%), State Government Coronavirus website (39%) and mainstream newspapers (36%).

For the youngest aged group (18-24 years) the top source for information was the State Government Coronavirus website (65%) followed by Peter Gutwein (54%), and friends, family and colleagues (46%) and social media/internet groups (46%). For 25-44-year olds, Peter Gutwein (48%) was the top source, followed by social media/internet groups (43%) and the State Government Coronavirus website (38%). For the 45-64 age group, the top source was ABC TV news (59%), followed by Peter Gutwein (51%) and the State Government Coronavirus website (46%). For the oldest participants (65+), ABC TV news (82%) was the most popular source, then ABC radio (59%) and Peter Gutwein (57%).

There were no differences between gender and regions (all relied on ABC TV news as their top source of information about COVID-19).

*In the last week, which media have you engaged with most?*

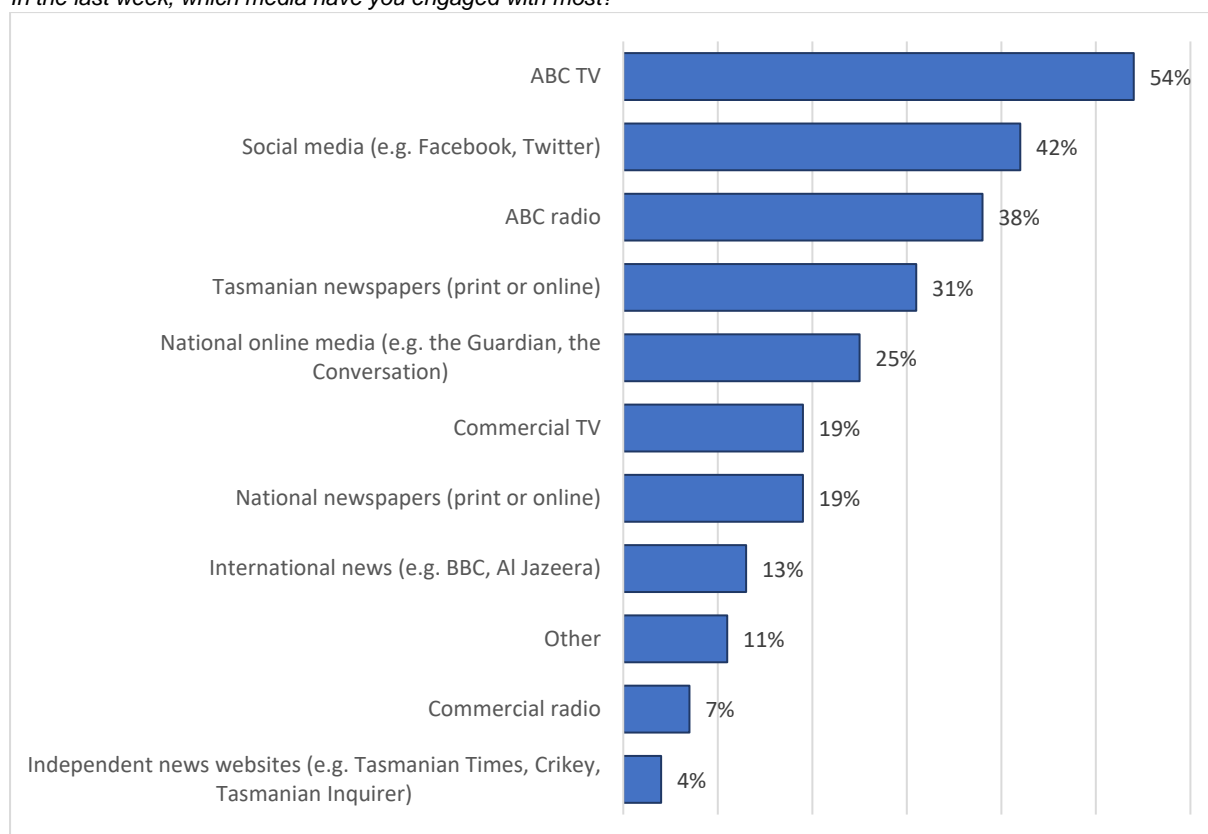


Figure 33. Q3. n=1338

ABC TV was the media engaged with most (selected by 54% of respondents), followed by social media (42%) and ABC radio (38%).

For the younger aged groups, the media they engaged with most was social media (18-24 years; 68%, 25-44-year olds; 64%). For the older participants, the media they engaged with most was ABC TV (45-64 years; 51%, 65+; 75%).

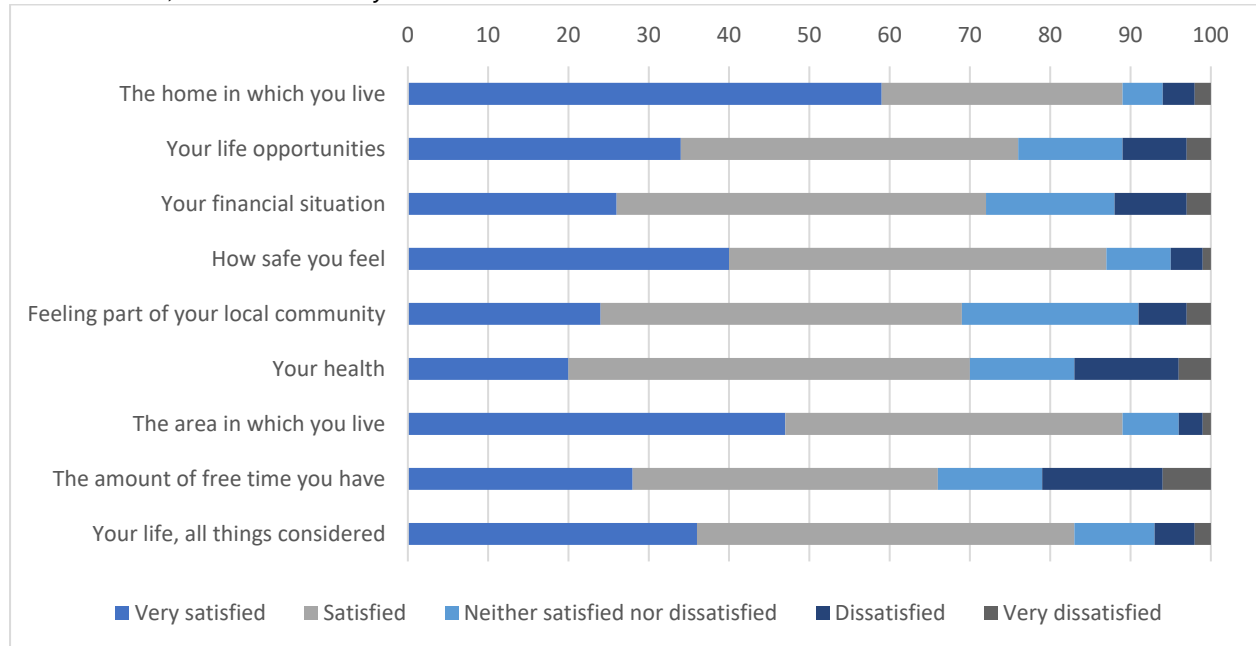
There were no differences between gender and regions (all engaged with ABC TV the most).

## 8. Seasonal agricultural employment opportunities

A majority of the sample had not previously undertaken farm work in Tasmania (90%). A majority also indicated they were unlikely or very unlikely to undertake farm work in the future (68%). Some (16%) indicated someone in their family may do seasonal farm work in the future. The most frequent source of information on farm work opportunities was online employment websites (44%), followed by government websites (21%), newspaper advertisements (19%), other (13%) and Centrelink (6%). 41% of the sample selected N/A.

## 9. Wellbeing

*In the last week, how satisfied have you been with:*



Respondents were the most satisfied with their homes (89%), the areas where they lived (89%), and how safe they felt (87%), and least satisfied with feeling part of their local community (69%) and their health (70%).

Older age groups (45-64 years; 90%, 65+; 94%) were more satisfied with their homes compared to younger age groups (18-24 years; 77%, 25-44 years; 85%). Older age groups (45-64 years; 74%, 65+; 85%) were more satisfied with their life opportunities compared to younger age groups (18-24 years; 62%, 25-44 years; 71%). 83% of 65+ felt satisfied with their financial situation, compared to 69% of 45-64 years, 68% of 25-44 years and 58% of 18-24 years. Older age groups felt safe (90% of 65+, 88% of 25-44 years, 86% of 45-64 years) while younger people (18-24 years) felt less safe (77%).

An age pattern was observed for feeling part of local community (73% of 65+, 70% of 25-44 years, 66% of 45-64 years, 46% of 18-24 years), the amount of free time they had (89% of 65+, 62% of 25-44 years, 51% of 45-64 years, 39% of 18-24 years) and their overall lives (90% of 65+, 82% of 25-44 years, 80% of 45-64 years, 69% of 18-24 years).

Older respondents were generally more satisfied with the area in which they lived (92% of 65+, 89% of 25-44 years, 87% of 45-64 years, 85% of 18-24 years) and their health (74% of 65+, 69% of 25-44 years, 68% of 45-64 years), compared with younger (18-24 years; 54%).

Males were more satisfied than females with their home (91% compared to 88% of females), finances (76% compared to 71%), safety, (89% compared with 86%), health (73% compared with 68%), amount of free time they had (68% compared to 65%) and their lives overall (84% compared to 83%). Females felt more satisfied with the area in which they lived (90% compared to 88% of males).

North-West and West felt more satisfied with life opportunities compared with South and North (75%), and also felt slightly more a part of their local community (72%) than South (69%) and North (68%). Respondents from the North felt more satisfied with their overall lives (86%) compared with South (82%) and North (83%).

## Appendix I: Demographics

The total sample size is 1377.

	%	n
<b>Region</b>		1309
South	60.3	
North	20.1	
North-West and West	19.6	
<b>Gender</b>		1316
Female	71.6	
Male	27.8	
Prefer to self-describe	0.6	
<b>Aboriginal/Torres Strait Islander</b>		1312
No	97.8	
Yes, Aboriginal	2.1	
Yes, Torres Strait Islander	0.1	
Yes, both Aboriginal and Torres Strait Islander	0.1	
<b>Disability</b>		1314
Yes	8.7	
No	91.3	
<b>Vulnerable person</b>		1317
Yes	40.1	
No	51.9	
Don't know	8.0	
<b>Age</b>		1289
18-24 years	2.0	
25-44 years	23.0	
45-64 years	47.0	
65 years and above	27.9	
<b>Education</b>		1312
High school	11.1	
Certificate I- Advanced Diploma	20.1	
University	68.8	
<b>Annual income</b>		1301
\$0 - \$18,200	10.5	
\$18,201 – \$37,000	17.1	
\$37,001 – \$65,000	19.8	
\$65,001 – \$90,000	20.1	
\$90,001 – \$130,000	16.2	
\$130,001 - \$180,000	3.5	
Over \$180,000	2.7	
Don't know/prefer not to say	10.1	
<b>Political party</b>		1298
Liberal Party	18.3	
Labor Party	18.9	
Greens	23.0	
No party affiliation	33.7	
Other	6.2	
<b>Housing</b>		1310
Own outright	47.2	
Own, paying off mortgage	36.0	
Rent, private	9.8	
Rent, public	2.2	
No permanent address	0.2	
Other	4.5	

## Appendix II: Employment

	%	n
<b>Employment situation</b>		1329
Employed (full time)	34	
Employed (part time)	18	
Employed (casual)	6	
Self-employed	11	
Unemployed	4	
Retired	28	
A homemaker / family carer	5	
A student	5	
A volunteer	5	
Other	3	
<b>Government benefits or payments</b>		1321
No	69	
JobKeeper	8	
JobSeeker	5	
Disability Support Pension	3	
Age Pension	13	
Youth Allowance	1	
Austudy	0.2	
Other	3	