

# Covid-19: Physical distancing, perceptions of vulnerability and severity **Global Report**

► **Report** August 2020

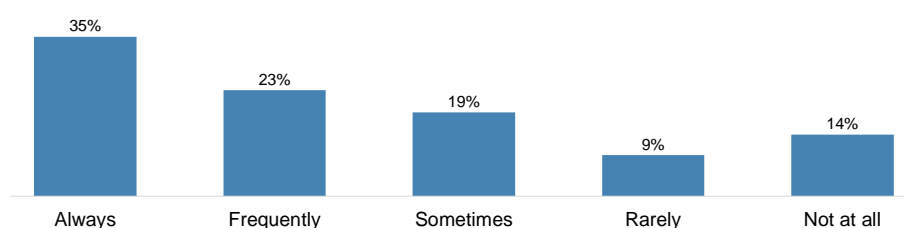
Insights and trends in people's behaviours related to COVID-19. Brought to you by a team of health and behavioural experts at the Institute of Global Health Innovation (IGHI) at Imperial College London and YouGov. These reports are created on a regular basis, following new survey results.

# To what extent are people practicing physical distancing?

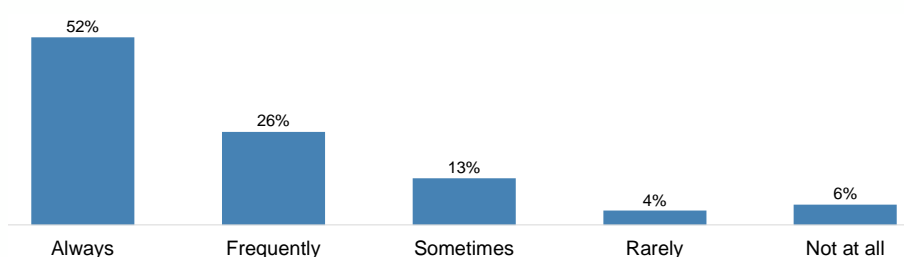
These graphs show how often respondents avoid having guests in their homes, avoid crowded areas and avoid social gatherings of different sizes

*In the most recent survey, 58% of global respondents reported always or frequently avoiding having guests in their homes while 14% reported not avoiding guests in their homes at all. 78% of respondents stated that they always or frequently avoid crowded areas. The likelihood of always avoiding gatherings increases with the size of the gathering: one third of respondents reported always avoiding small gatherings and 60% always avoiding large gatherings*

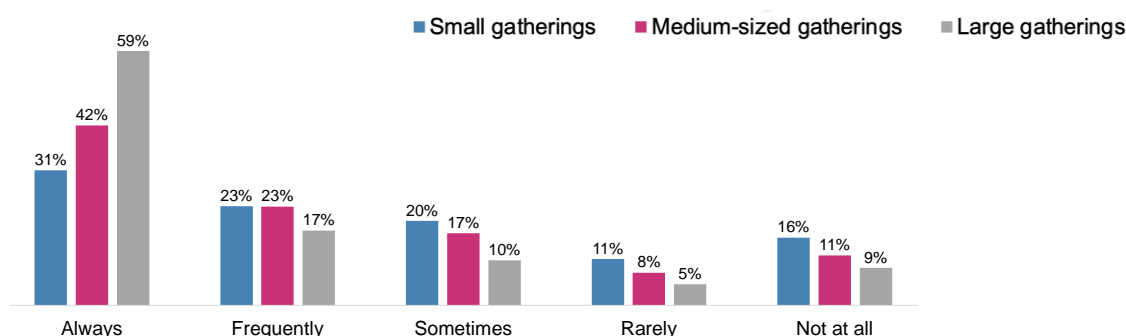
Thinking about the last 7 days, how often have you avoided having guests to your home to protect yourself or others from coronavirus (COVID-19)? (%)



Thinking about the last 7 days, how often have you avoided crowded areas to protect yourself or others from coronavirus (COVID-19)? (%)



Thinking about the last 7 days, how often have you avoided small (not more than 2 people), medium-sized (between 3 and 10) and large sized social gatherings (more than 10 people) to protect yourself or others from coronavirus (COVID-19)? (%)



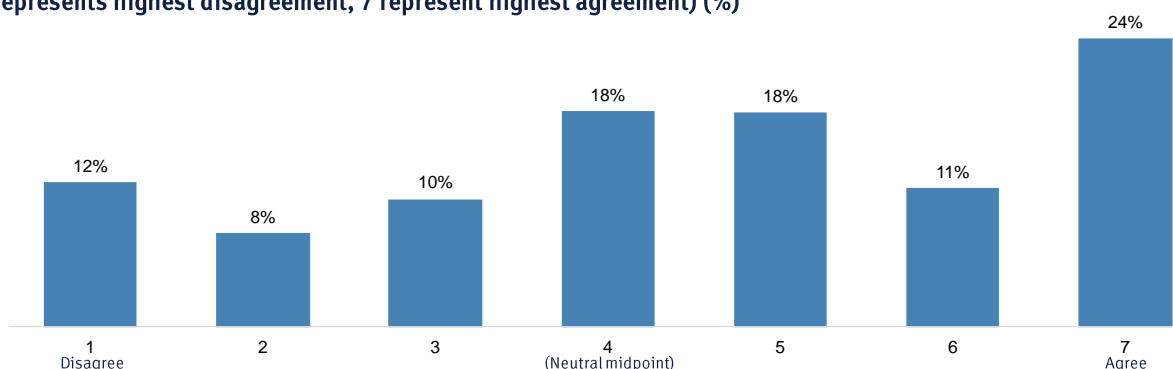
# Do people feel their lives have been greatly affected by COVID-19?

These graphs show the extent to which people agree their lives have been 'greatly affected by COVID-19' and a country breakdown of responses for the highest levels of agreement and disagreement

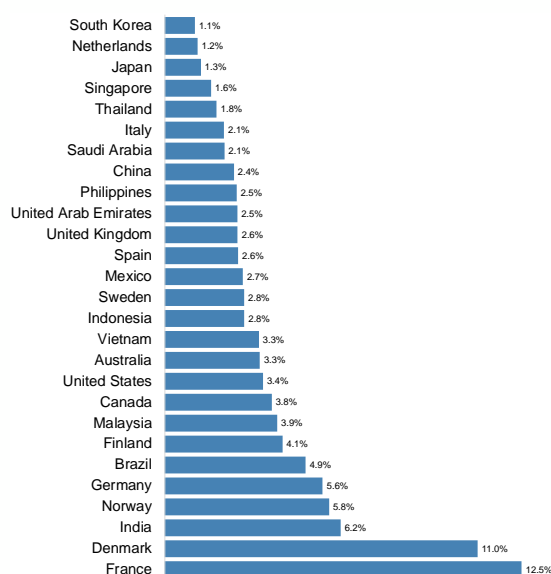
*Globally, 54% of respondents agree their lives have been greatly affected by COVID-19. 24% of respondents report strong agreement with this statement, with the Philippines having the highest share of those who strongly agree. 30% of global respondents do not agree their life has been greatly affected due to COVID-19, with France having the highest share of those who strongly disagree*

To what extent do you agree or disagree that...My life has been greatly affected by coronavirus (COVID-19)?

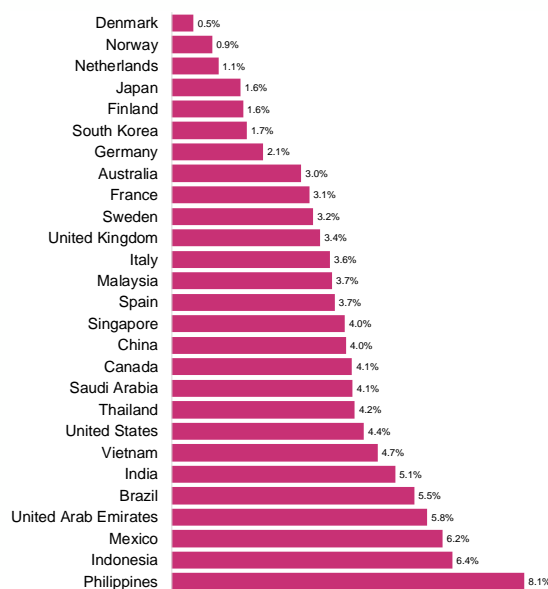
(Scores above 4 indicate higher levels of agreement with the question, score below 4 represent levels of disagreement. 1 represents highest disagreement, 7 represent highest agreement) (%)



Share of respondents per country with the highest level of disagreement (i.e. a response of 1) (%)



Share of respondents per country with the highest agreement level (i.e. a response of 7) (%)



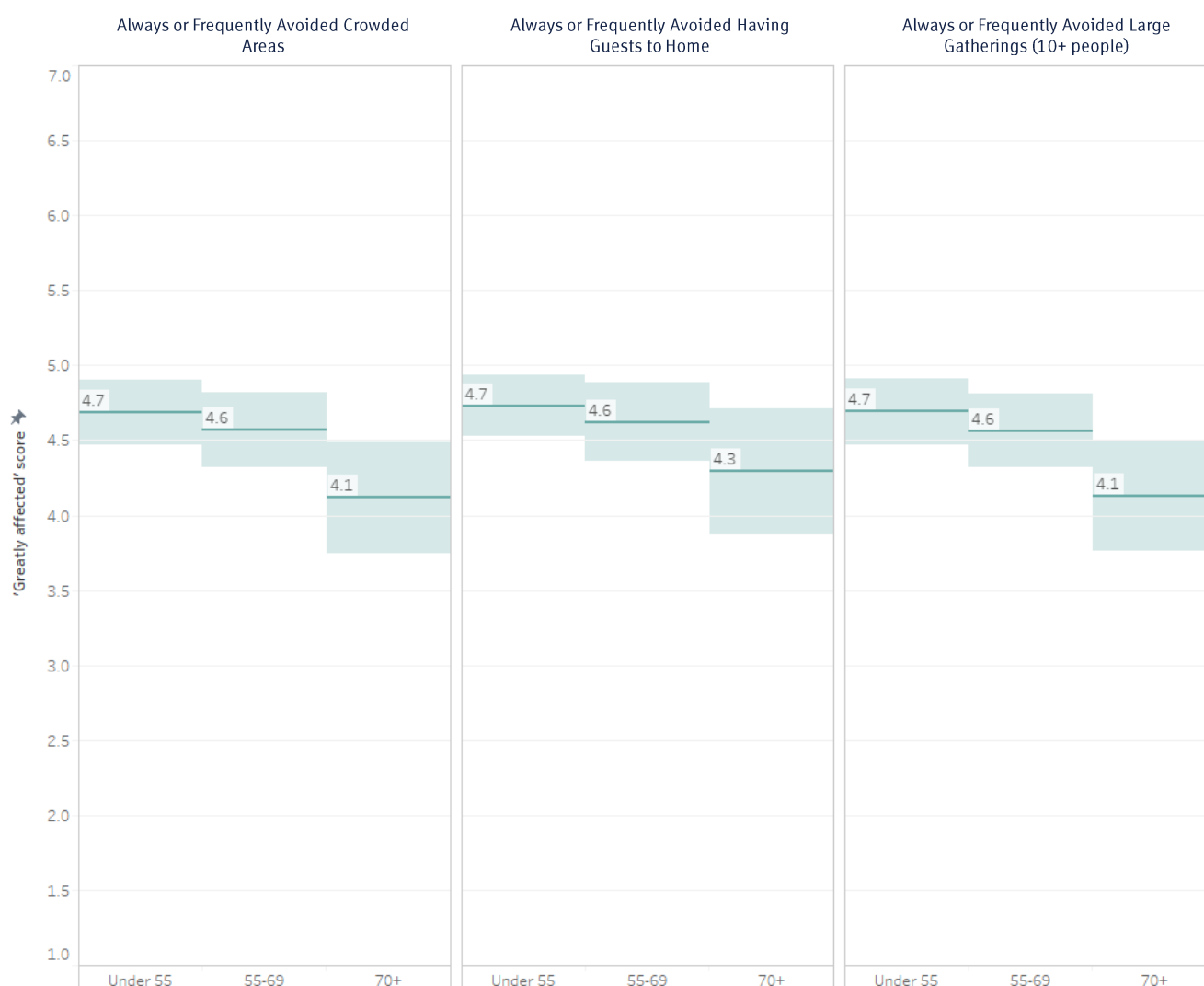
Note: responses from China are representative of the online population. Responses from India are representative of the urban online population. All others are nationally representative.  
\* Bars of the same colour (representing the share of the given response per country) add up to 100%

# To what extent do people feel their lives have been greatly impacted by COVID-19?

These graphs show the difference in perceptions of impact – of how COVID-19 has ‘greatly affected’ respondent’s lives by physical distancing behavior and age group

*Older respondents who always or frequently adhere to physical distancing report disagreeing they are ‘greatly affected’ by COVID-19*

Average ‘greatly affected’ score\* of respondents who always or frequently followed each of these preventative measures the week before, by age group (shaded area indicative of 95% confidence intervals)



\* The 'greatly affected' score is calculated as the weighted average the ordinal responses to the question "To what extent do you agree or disagree that...My life has been greatly affected by coronavirus (COVID-19)? Scores above 4 indicate higher levels of agreement with the question, score below 4 represent levels of disagreement. 1 represents highest disagreement, 7 represent highest agreement.

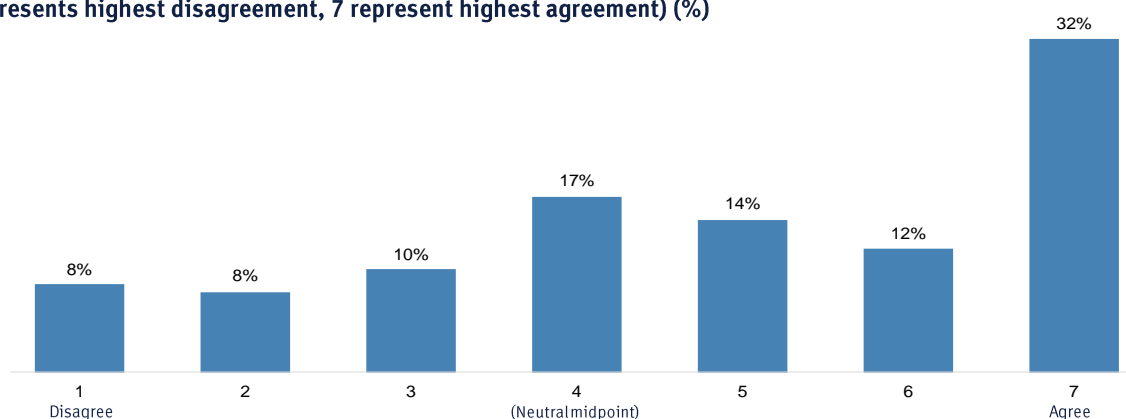
# Do people perceive COVID-19 illness as 'very dangerous'?

These graphs show the extent of perceptions of danger/severity of COVID-19 and a country breakdown of lowest and highest perception of danger/severity

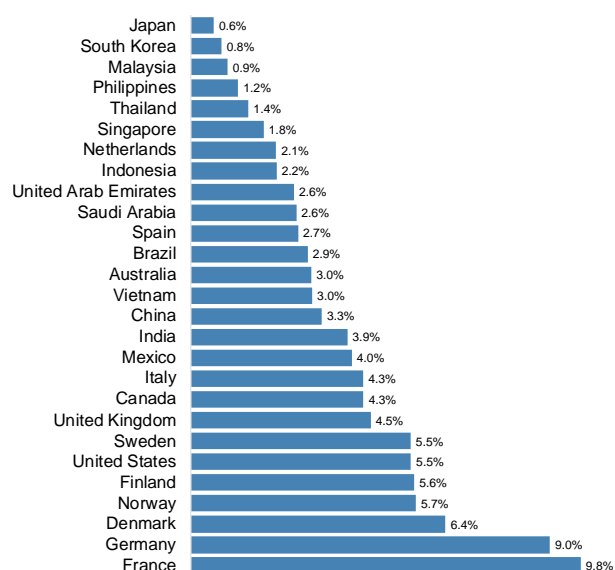
*58% of global respondents agree COVID-19 is 'very dangerous' for them. The Philippines accounts for the highest share of global respondents who strongly agree COVID-19 is 'very dangerous' for them. France accounts for highest share of respondents who strongly disagree it is 'very dangerous' for them*

To what extent do you agree or disagree that...Coronavirus (COVID-19) is very dangerous for me?

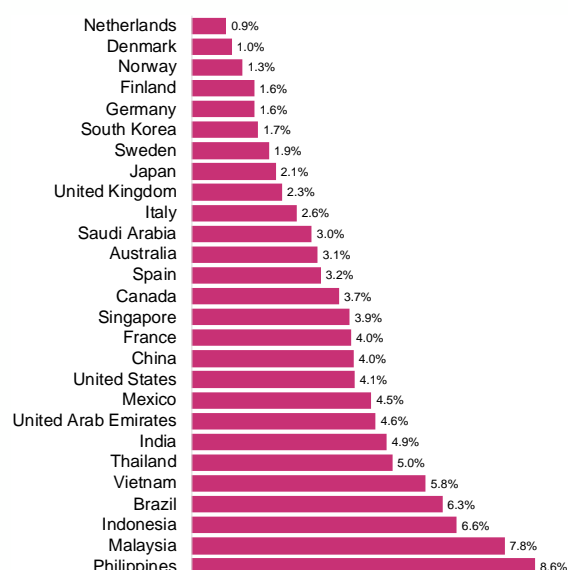
(Scores above 4 indicate higher levels of agreement with the question, score below 4 represent levels of disagreement. 1 represents highest disagreement, 7 represent highest agreement) (%)



Share of respondents per country with the highest level of disagreement (i.e. a response of 1) (\*%). This suggests lower perceptions of danger/severity.



Share of respondents per country with the highest agreement level (i.e. a response of 7) (\*%). This suggests higher perceptions of danger/severity.



Note: responses from China are representative of the online population. Responses from India are representative of the urban online population. All others are nationally representative.  
\* Bars of the same colour (representing the share of the given response per country) add up to 100%

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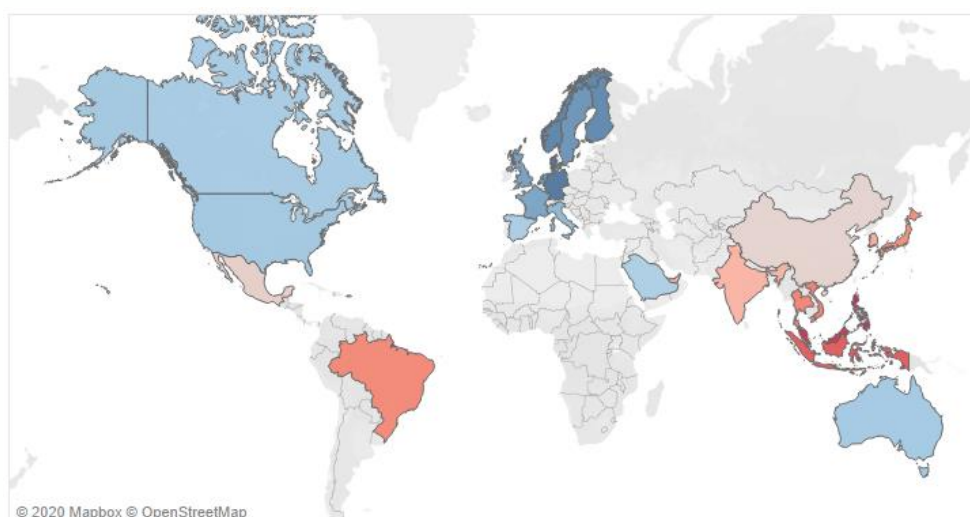
# Do people perceive COVID-19 illness as dangerous?

These graphs show the difference in perceived danger/severity of COVID-19 by country, physical distancing behavior and age group

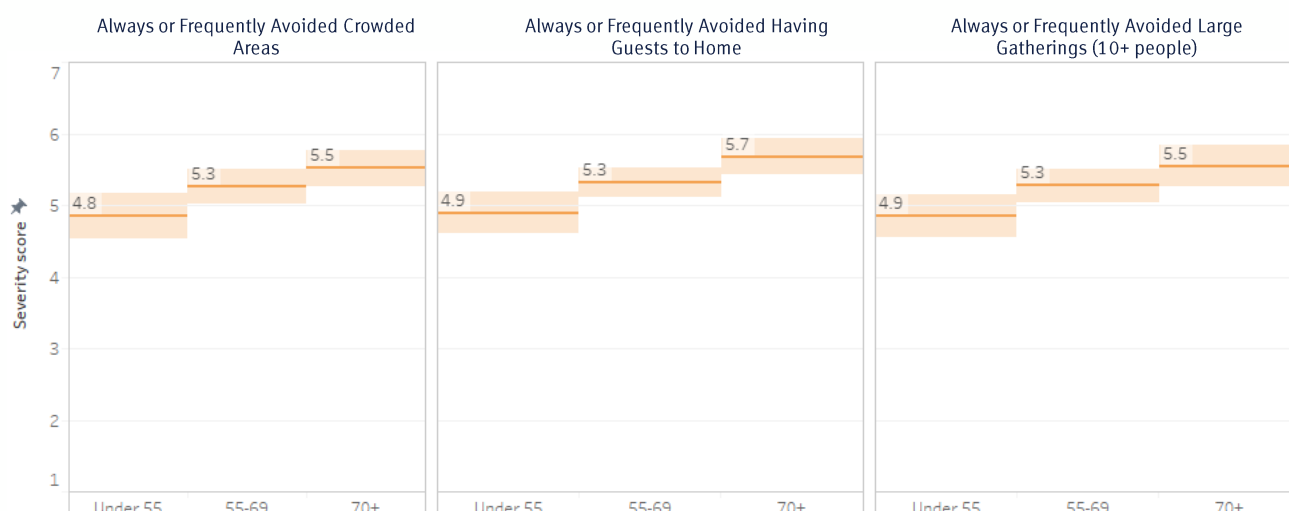
*South East Asian countries are the most likely to agree that COVID-19 is 'very dangerous' for them. European countries (and Nordics in particular) are the least likely to agree that COVID-19 is 'very dangerous' to them. Older respondents who always or frequently adhere to physical distancing are the most likely to report that COVID-19 is dangerous to them*

Danger/severity score\* by country (darker blue countries indicative of higher disagreement that COVID-19 is 'very dangerous', darker red countries indicative of higher agreement)

Severity score  
3.628 6.291



Average danger/severity score\* of respondents who always or frequently followed each of these preventative measures the week before, by age group (shaded area indicative of 95% confidence intervals)



Note: responses from China are representative of the online population. Responses from India are representative of the urban online population. All others are nationally representative.  
\* The danger/severity score is calculated as the weighted average the ordinal responses to the question "To what extent do you agree or disagree that...Coronavirus (COVID-19) is very dangerous for me?" Scores above 4 indicate higher levels of agreement with the question, score below 4 represent levels of disagreement. 1 represents highest disagreement, 7 represent highest agreement.

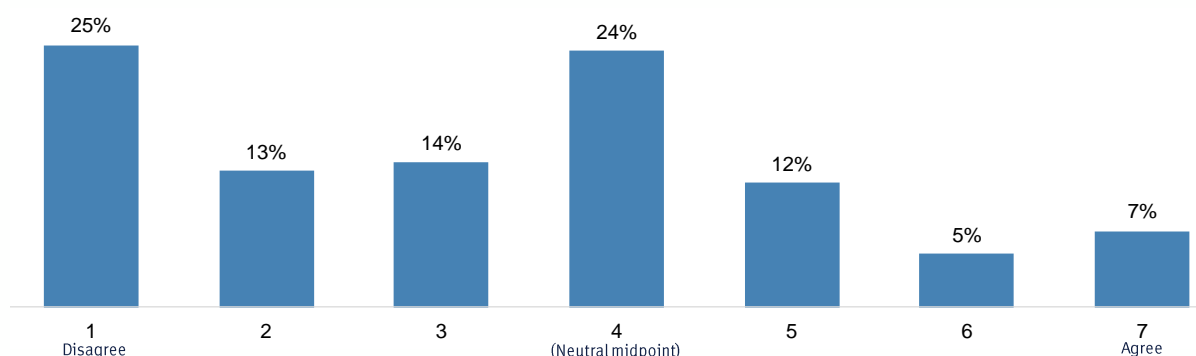
# How vulnerable to contracting COVID-19 do people perceive themselves to be?

These graphs show the level of vulnerability people feel towards COVID-19 and a country breakdown of the lowest and highest feelings of vulnerability

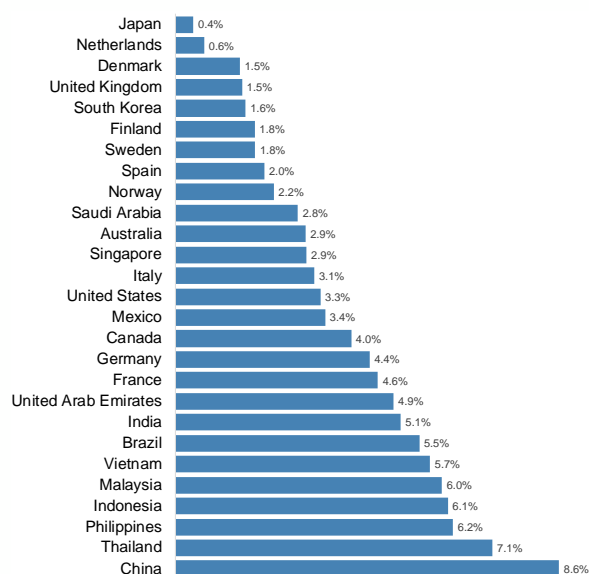
*24% of global respondents agree they are likely to get COVID-19 while half of global respondents do not agree they are likely. 24% neither agree nor disagree they are likely to get COVID-19. China accounted for the highest share of respondents strongly disagreeing they are likely to get COVID-19, while Mexico made up the highest share of those who strongly agree they are likely to get COVID-19*

To what extent do you agree or disagree that...It is likely that I will get coronavirus (COVID-19) in the future?

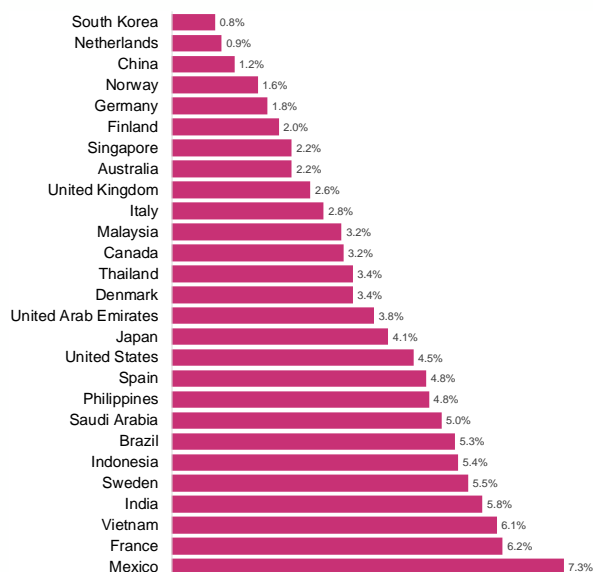
(Scores above 4 indicate higher levels of agreement with the question, score below 4 represent levels of disagreement. 1 represents highest disagreement, 7 represent highest agreement) (%)



Share of respondents per country with the highest level of disagreement (i.e. a response of 1) (\*%). This suggests lower perceptions of vulnerability.



Share of respondents per country with the highest agreement level (i.e. a response of 7) (\*%). This suggests higher perceptions of vulnerability.



Note: responses from China are representative of the online population. Responses from India are representative of the urban online population. All others are nationally representative.  
\* Bars of the same colour (representing the share of the given response per country) add up to 100%

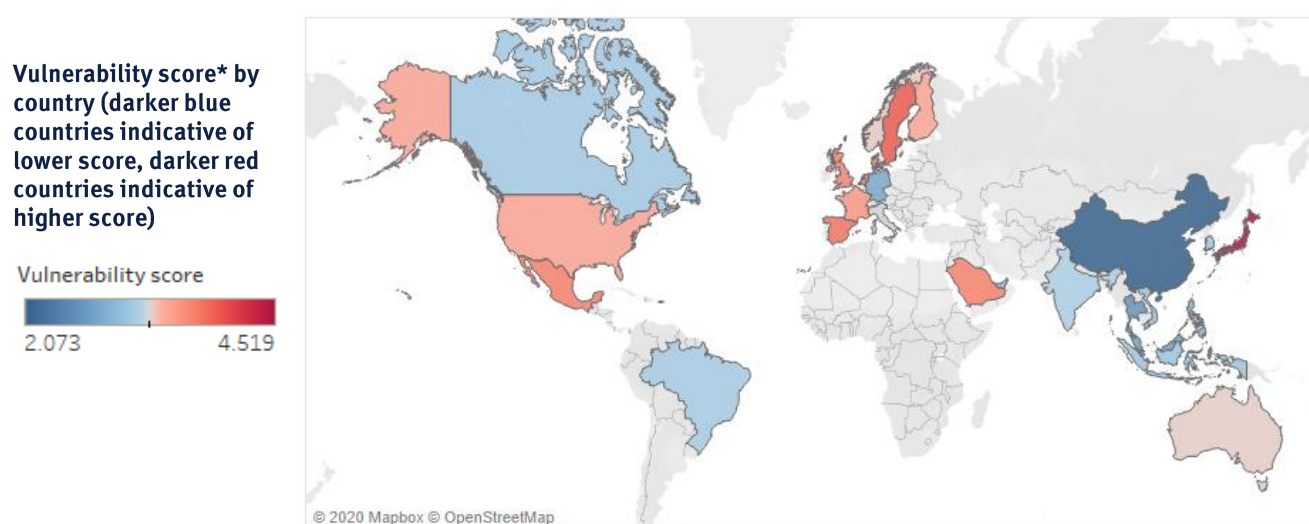
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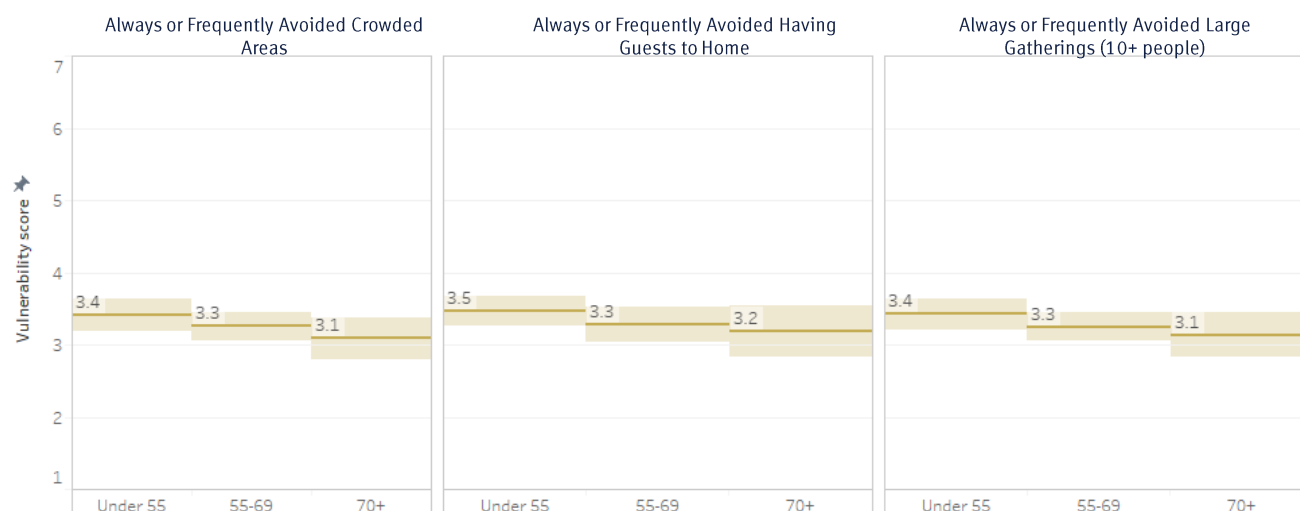
# How vulnerable to contracting COVID-19 do people perceive themselves to be?

These graphs show the difference in vulnerability to COVID-19 by country, physical distancing behavior and age group

*Responses from Japan suggest they have the highest perceived vulnerability to COVID-19, whereas responses from China suggest they have the lowest. Responses from older people who always or frequently adhere to physical distancing suggest they have the lowest perceived vulnerability to COVID-19*



**Average vulnerability\* score of respondents who always or frequently followed each of these preventative measures the week before, by age group (shaded area indicative of 95% confidence intervals)**



Note: responses from China are representative of the online population. Responses from India are representative of the urban online population. All others are nationally representative.  
 \* The vulnerability score is calculated as the weighted average the ordinal responses to the question "To what extent do you agree or disagree that...It is likely that I will get coronavirus (COVID-19) in the future? Scores above 4 indicate higher levels of agreement with the question, score below 4 represent levels of disagreement. 1 represents highest disagreement, 7 represent highest agreement.



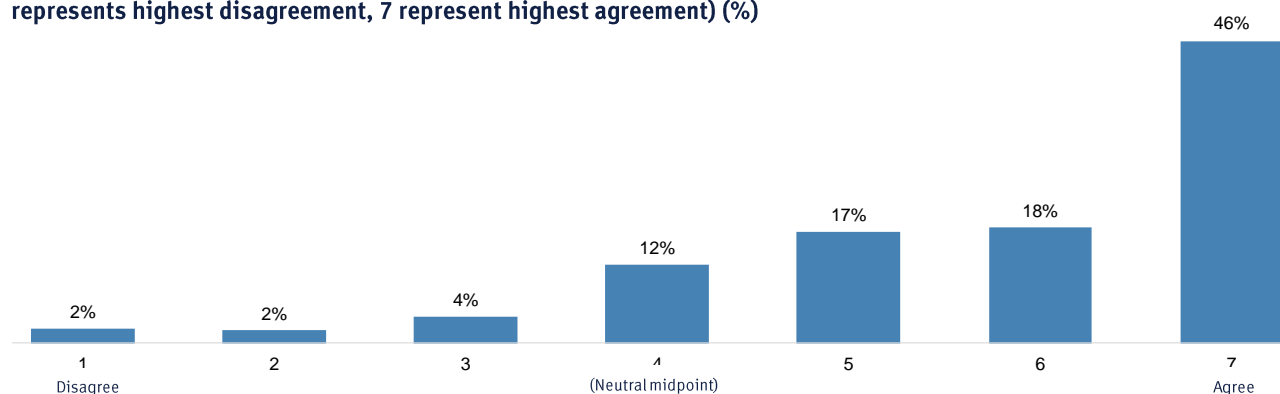
# How motivated are people globally to improve their health?

These graphs show the extent to which people are motivated to carry out activities to improve their health and a country breakdown of responses for the lowest and highest levels of agreement

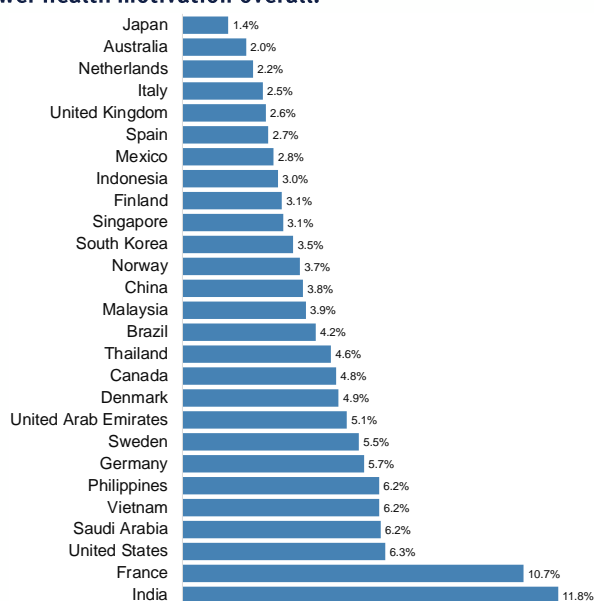
*46% of global respondents strongly agree it is important to carry out health-improving activities, with Brazil having the highest share of these respondents. 20% of the global respondents 'disagree or neither agree nor disagree' it is important to carry out these activities, with India having the highest share of those who strongly disagree*

To what extent do you agree or disagree that...I feel it is important to carry out activities which will improve my health

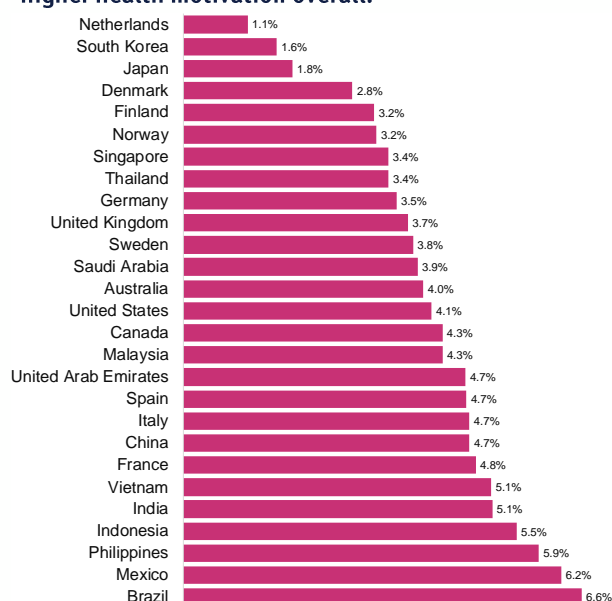
(Scores above 4 indicate higher levels of agreement with the question, score below 4 represent levels of disagreement. 1 represents highest disagreement, 7 represent highest agreement) (%)



**Share of respondents per country with the highest level of disagreement (i.e. a response of 1) (\*%). This suggests lower health motivation overall.**



**Share of respondents per country with the highest agreement level (i.e. a response of 7) (\*%). This suggests higher health motivation overall.**



Note: responses from China are representative of the online population. Responses from India are representative of the urban online population. All others are nationally representative.  
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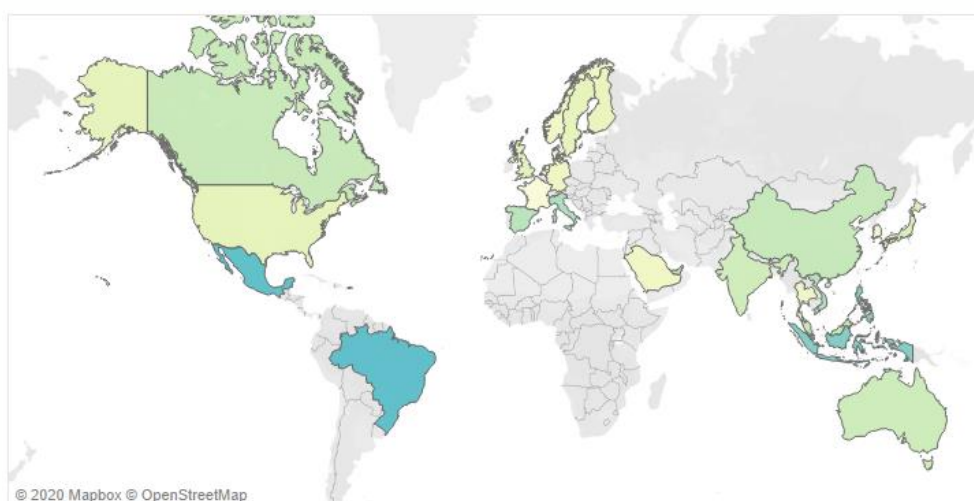
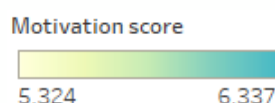
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# How motivated are people to improve their health?

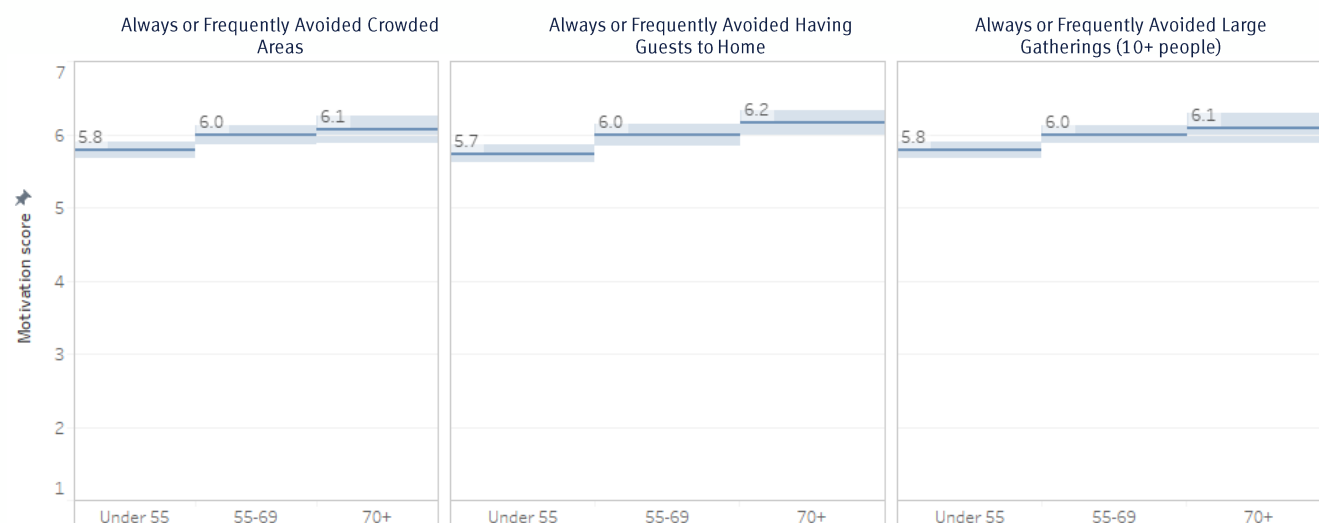
These graphs show the difference in health motivation by country, physical distancing behavior and age group

*In every country a majority of respondents agree it is important to carry out health-improving activities, with Brazil and Mexico having the highest proportion of agreement. Older respondents who always or frequently adhere to physical distancing show the strongest agreement with the importance of health-improving activities*

Motivation score\* by country (darker blue countries indicative of higher score, lighter green countries indicative of lower score)



**Motivation\* score of respondents who always or frequently followed each of these preventative measures the week before, by age group (shaded area indicative of 95% confidence intervals)**



Note: responses from China are representative of the online population. Responses from India are representative of the urban online population. All others are nationally representative.  
\* The motivation score is calculated as the weighted average the ordinal responses to the question "To what extent do you agree or disagree that...I feel it is important to carry out activities which will improve my health (A higher score indicates a higher level of agreement with the question)?"

# In relation to COVID-19, how do perceptions of impact, danger/severity, vulnerability and health motivation vary by country?

This chart shows differences in perceived impact, danger/severity, vulnerability and health motivation across countries

*Perceived impact of COVID-19 on people's lives, as well as perceptions of how dangerous it is, vary significantly across countries. In general, respondents across the globe do not believe it is very likely that they will get infected with COVID-19. They also agree that health-improving activities are important. Responses suggest almost all respondents globally perceive the general severity of COVID-19 illness to be higher than their perception of their personal vulnerability - or likelihood of contracting COVID-19.*

**'Greatly affected' score, danger/severity score, vulnerability score and motivation score by country (darker shade indicative of higher value)**

	'Greatly affected' score	Danger/severity score	Vulnerability score	Motivation score
Philippines	5.5	6.3	2.9	6.1
Indonesia	5.2	5.8	3.1	6.1
UAE	5.1	5.1	3.1	5.9
Mexico	5.0	5.0	3.7	6.3
Singapore	4.9	5.2	3.3	5.7
Saudi Arabia	4.9	4.8	3.7	5.5
Thailand	4.8	5.5	2.6	5.5
South Korea	4.8	5.1	3.1	5.4
Italy	4.8	4.5	3.3	6.0
Brazil	4.8	5.5	3.1	6.3
Vietnam	4.7	5.5	3.1	5.9
Spain	4.7	4.8	3.8	5.9
China	4.7	5.0	2.1	5.9
Japan	4.6	5.4	4.5	5.7
Canada	4.6	4.7	3.1	5.8
UK	4.6	4.2	3.7	5.7
USA	4.6	4.7	3.5	5.6
India	4.6	5.1	3.2	5.8
Malaysia	4.5	6.2	2.7	5.8
Netherlands	4.5	4.2	3.7	5.3
Sweden	4.4	4.1	4.0	5.6
Australia	4.4	4.7	3.3	5.8
Finland	3.9	3.9	3.5	5.6
Germany	3.8	3.7	2.8	5.5
France	3.6	4.3	3.6	5.3
Norway	3.4	3.9	3.3	5.5
Denmark	2.6	3.6	3.8	5.4

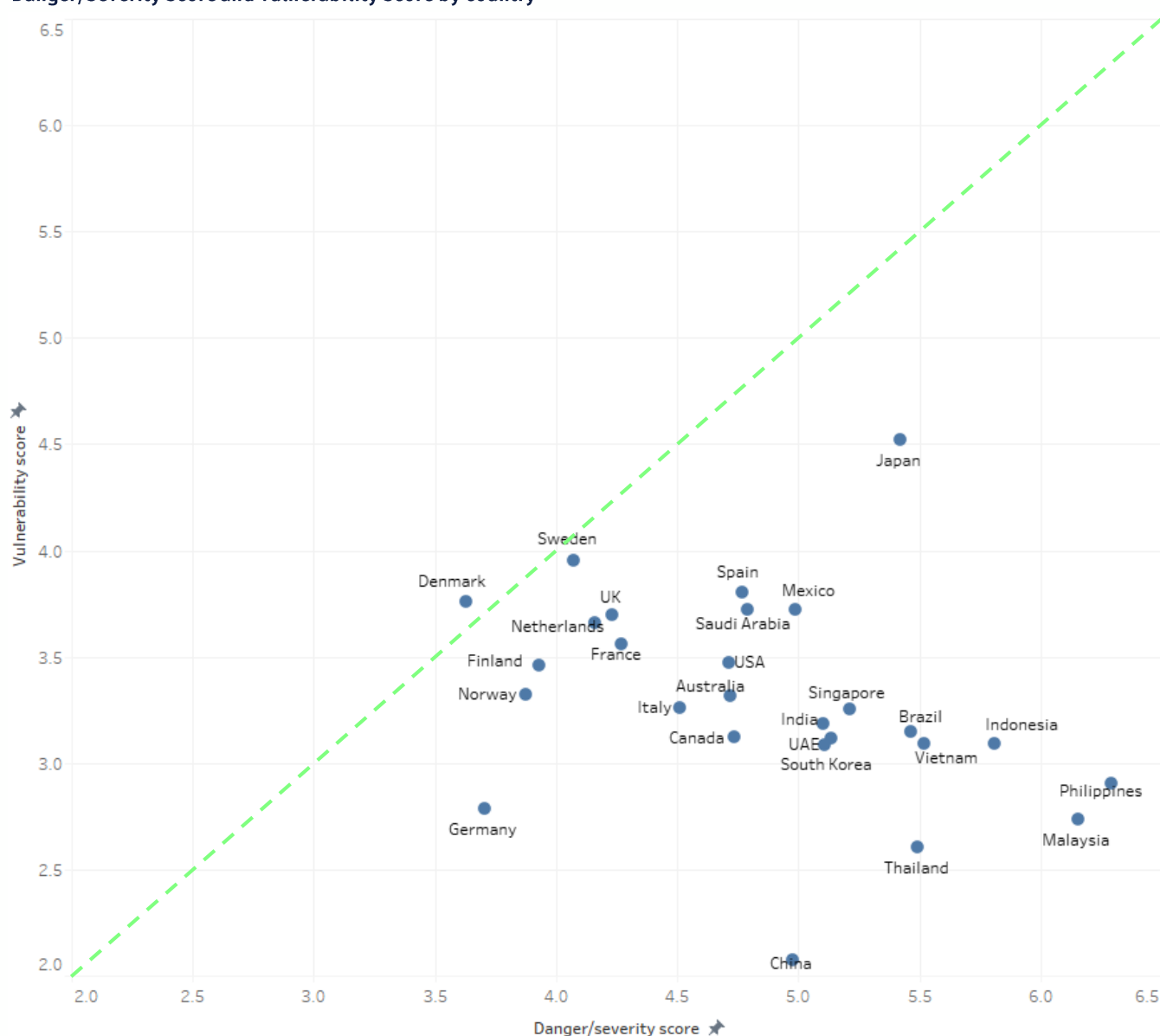
Note: responses from China are representative of the online population. Responses from India are representative of the urban online population. All others are nationally representative. The **'greatly affected' score** is calculated as the weighted average the ordinal responses to the question "To what extent do you agree or disagree that...My life has been greatly affected by coronavirus (COVID-19)?" The **danger/severity score** is calculated as the weighted average the ordinal responses to the question "To what extent do you agree or disagree that...Coronavirus (COVID-19) is very dangerous for me?" The **vulnerability score** is calculated as the weighted average the ordinal responses to the question "To what extent do you agree or disagree that...It is likely that I will get coronavirus (COVID-19) in the future?" The **motivation score** is calculated as the weighted average the ordinal responses to the question "To what extent do you agree or disagree that...I feel it is important to carry out activities which will improve my health" (Scores above 4 indicate higher levels of agreement with the question, score below 4 represent levels of disagreement. 1 represents highest disagreement, 7 represent highest agreement) (%)

# How are perceived vulnerability and perceived danger/severity of COVID-19 related?

This chart shows the relation between each country's perceived danger/severity and perceived vulnerability to COVID-19

*In general, most countries' respondents rate perceptions of the danger/severity of COVID-19 higher than they rate perceptions of personal vulnerability to COVID-19*

**Danger/severity score and vulnerability score by country**



Note: responses from China are representative of the online population. Responses from India are representative of the urban online population. All others are nationally representative. The danger/severity score is calculated as the weighted average the ordinal responses to the question "To what extent do you agree or disagree that...Coronavirus (COVID-19) is very dangerous for me?" The vulnerability score is calculated as the weighted average the ordinal responses to the question "To what extent do you agree or disagree that...It is likely that I will get coronavirus (COVID-19) in the future?" (Scores above 4 indicate higher levels of agreement with the question, score below 4 represent levels of disagreement. 1 represents highest disagreement, 7 represent highest agreement) (%)

# Countries included in this report

This table shows the countries included in this report and the dates of the survey

*This report looks at data from the most recent survey available for each country. The table below indicates the dates of each country's latest survey and the number of respondents per country*

Country	Survey date	Number of Participants
Australia	22 <sup>nd</sup> July to 27 <sup>th</sup> July	1001
Brazil	22 <sup>nd</sup> July to 27 <sup>th</sup> July	1007
Canada	22 <sup>nd</sup> July to 5 <sup>th</sup> August	975
China	22 <sup>nd</sup> July to 28 <sup>th</sup> July	1001
Denmark	22 <sup>nd</sup> July to 27 <sup>th</sup> July	945
Finland	22 <sup>nd</sup> July to 26 <sup>th</sup> July	1004
France	22 <sup>nd</sup> July to 29 <sup>th</sup> July	1791
Germany	22 <sup>nd</sup> July to 27 <sup>th</sup> July	1010
India	22 <sup>nd</sup> July to 27 <sup>th</sup> July	1016
Indonesia	22 <sup>nd</sup> July to 27 <sup>th</sup> July	994
Italy	22 <sup>nd</sup> July to 27 <sup>th</sup> July	1001
Japan	22 <sup>nd</sup> July to 31 <sup>st</sup> July	510
Malaysia	22 <sup>nd</sup> July to 27 <sup>th</sup> July	988
Mexico	8 <sup>th</sup> July to 16 <sup>th</sup> July	971
Netherlands	22 <sup>nd</sup> July to 3 <sup>rd</sup> August	500
Norway	22 <sup>nd</sup> July to 5 <sup>th</sup> August	1003
Philippines	22 <sup>nd</sup> July to 27 <sup>th</sup> July	983
Saudi Arabia	22 <sup>nd</sup> July to 4 <sup>th</sup> August	982
Singapore	22 <sup>nd</sup> July to 27 <sup>th</sup> July	1002
South Korea	22 <sup>nd</sup> July to 4 <sup>th</sup> August	498
Spain	22 <sup>nd</sup> July to 27 <sup>th</sup> July	1007
Sweden	22 <sup>nd</sup> July to 30 <sup>th</sup> July	1016
Thailand	22 <sup>nd</sup> July to 27 <sup>th</sup> July	1013
United Arab Emirates	22 <sup>nd</sup> July to 3 <sup>rd</sup> August	1009
United Kingdom	29 <sup>th</sup> July to 2 <sup>nd</sup> August	1003
United States	8 <sup>th</sup> July to 15 <sup>th</sup> July	954
Vietnam	22 <sup>nd</sup> July to 27 <sup>th</sup> July	1006

# About this report

Led by Imperial College London's  
Institute of Global Health Innovation  
(IGHI) and YouGov

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London**

**Institute of  
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- ▶ Gianluca Fontana  
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- ▶ Dr David Nabarro  
Co-Director, IGHI  
Special Envoy of WHO Director General on COVID-19
- ▶ Sarah P. Jones  
Faculty of Medicine, Department of Surgery & Cancer Research Postgraduate
- ▶ Dr Roberto Fernandez Crespo  
Analytics Fellow, BDAU
- ▶ Dr Manar Shafat  
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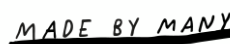
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## Realised by



Contributors to the Imperial College London - YouGov survey include: Professor Helen Ward, Dr. Christina J. Atchinson, Dr. Benjamin C. Lambert, and Gavin Ellison

The Imperial College London - YouGov team wishes to express their grateful support to Stephan Shakespeare, Marcus Roberts, Alex MacIntosh, Chris Curtis, Eir Nolsoe, Sharon Paculor, Lenny Naar, Alice Blencowe, Steve Adams from Visual DJ Ltd. and volunteers from Made by Many: Rebecca Foy, Anna Pagan, Gareth Cozens, Callum Jefferies, Neethu Mathew, Micha Nicheva, Kristof Goossens

## Supporters



This research is made possible by generous support for the public good from YouGov Plc.

The Imperial College London - YouGov team gratefully acknowledges the kind support of Edelman Intelligence for their global social listening contribution

Question for the research team? Get in touch [here](#)

Press enquiry? Contact Dr. Justine Alford at [j.alford@imperial.ac.uk](mailto:j.alford@imperial.ac.uk)

# For more behavioural data on a global level, visit [coviddatahub.com](https://coviddatahub.com) to explore our interactive charts

The [CovidDataHub.com](https://coviddatahub.com) project is a joint collaboration between the Institute of Global Health Innovation (IGHI) at Imperial College London and YouGov Plc to gather global insights on people's behaviors and life satisfaction in response to COVID-19. The research covers 29 countries, areas or territories and surveys are conducted on a regular basis since the first week of April.

This report is designed to provide insights on how different populations are responding to the pandemic, helping public health bodies in their efforts to limit the impact of the disease. Anonymized respondent level data is generously made available for all public health and academic institutions globally by YouGov Plc at our [GitHub site](#).

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In collaboration with