

[COVID Information Commons \(CIC\) Research Lightning Talk](#)

[Transcript of a Presentation by Kelly Dunning and Katie Corvey \(Auburn University\), June 9, 2021](#)



[Title: RAPID: A participatory study of how policy-makers and marginalized communities in the American South consume and act on scientific information in the context of Covid-19](#)

[Kelly Dunning CIC Database Profile](#)

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Transcript

Katie Corvey:

*Slide 1*

Right so I'm Katie Corvey. I'm a postdoctoral research fellow at Auburn University, and we are working on a study to look at how policymakers in the south consumed and acted on scientific information over the past year in the context of COVID-19. And so, the PI on the project is Dr. Kelly Dunning of the Auburn School of Forestry and Wildlife, and we've also been working with Dr. Williamson, Willoughby, and Zohdy at Auburn and also Dr. Parrish Bergquist from Georgetown.

*Slide 2*

Hold on there we go. Alright, and so to frame our study, we have been using the Policy Regime Framework. It is from the public administration literature and it seeks to explain and identify the different things that are in play whenever there is a policy regime. In this case, it would be the response to COVID-19. And so, this slide kind of outlines work that was done by two scholars in the field Carter and May and this was published last year and this framework- they kind of did an initial assessment of COVID-19, and then we're building on it by looking at what the response has been in Alabama, Mississippi, and Louisiana. And so, this framework theorizes that policy responses to major issues such as the pandemic include ideas, institutions, and interests. And ideas are the concepts that become the foundations for policy. So, in our case we're defining the science of COVID as our ideas, as these are the basis for guidance mandates etc., in the response to COVID. And then we have institutions, and so these are the federal, state, local agencies and organizations that have responded to COVID. We're particularly interested in what their actions have been, and we are looking at both their individual actions and

collaborative actions. And then finally you have interests, which are the different political actors who push for different policy approaches during the response, and so the second box of each of these three kind of shaded areas kind of outlines the findings of Carter and May, and as we kind of go through the next few slides you will see that we are finding very similar things.

### *Slide 3*

So, we have three components- three major components to our study. The first is an analysis of policy documents, second is interviews with decision makers, and the third is a public survey. And so, for the policy document analysis component of the study, we've been collecting policy documents from federal, state, local agencies, other organizations who have played some role in the COVID response for our three states. And so, these documents can include official agency guidance, general website content, news releases, press conference write-ups, any kind of other information that is out there that can help us to understand what ideas have been communicated, who has been doing it, what have been the roles of the different institutions involved, and what are the various interest groups that have influenced the response in the three states. And so, we're kind of in the early stages of this. For ideas, we found that generally information has flowed from federal agencies down to state agencies, and then on to local agencies and organizations, and that states have in general developed plans from federal guidance. They are incorporating CDC data but also their own state level data, and then these plans are operationalized at both the state and local level. For institutions to date, we've found that there was a reduced response capacity at the federal level and that this caused a lot of confusion and delay and response and it has led state and local actors to really take responsibility for creating and operationalizing their policy responses for COVID. And for the interests, sure it's no surprise that political polarization has just really hampered the response, and so we are picking up on that as well.

### *Slide 4*

And the second component is interviews with decision makers. And so, these are also federal state and local organizations. And so, I'm talking with different state and local health departments, governmental offices, governor's offices, mayor's offices, local organizations like educational institutions, community organizations, hospital systems, chambers of commerce, media representatives, etc. So, we're trying to get a fairly broad representation there. And so, in general we found again that the information is flowed from the federal level, but many of the local organizations in particular are primarily relying on state-level data to develop their policy responses, as they just feel that it's more appropriate for what they're trying to get done. Agencies are sharing scientific information, so virus characteristics, risk, different behaviors that people can engage in to try to slow the spread, but they're also sharing resources such as links to unemployment information, small business loan information, etc. And they are doing it by every medium that you could imagine. And so, general- in general in terms of trust, that's come up a lot in the interviews. And there's been a real focus on building trust at the local level and also capitalizing on trust that is already there at that level to really kind of operationalize and facilitate the policy responses that are coming from all levels of government, really. And so, we're also asking them about their challenges. One of the biggest challenges that has been talked about by so many of our participants is the inability to effectively counter misinformation, for many reasons- just it spreads so rapidly. There's a huge

volume of misinformation, the politicization of the entire response, and also the promotion of misinformation at the federal level, particularly in the early stages of the pandemic last year. Another big thing they're mentioning is information management. Again, just because of the sheer volume of the information that's coming out, that the information has changed over time just as the response and situation has changed. And also, just this sense of burnout in the population in terms of how much information about COVID we're expecting people to consume, internalize, and act upon. And then in general, just this widely held belief that COVID has highlighted existing societal issues: racism, politics, politicization disparities in health, education, income, access to resources, and that those are the things that we really need to focus on in order to better deal with situations like this in the future.

#### *Slide 5*

And then the final component of the survey is a public- or of the study, sorry, is a public survey which will be rolling out in the next few weeks to adult residents of Alabama, Mississippi, and Louisiana. And so, we'll be asking them where they're- asking people where they're accessing information about COVID from all levels of sources: federal, state, and local. So, we've included major news outlets, local outlets, mayor's offices, local radio and tv, agencies like CDC [Centers for Disease Control and Prevention] or the state or local health department, social media individuals such as including former president Trump and president Biden, people's personal physicians, religious leaders, families and friends, employers, etc. The crux of the survey are experimental questions that we're going to use to examine public trust and information that's provided by different levels of government. And so, we'll have messages such as guidance on COVID mitigating behaviors that people can engage in, and we will attribute those messages to various institutional actors from the different levels of government, and then we'll gauge participant response to that presentation of the information. So, kind of excited about that. And then we'll also ask about support or opposition to various mitigation measures as well as any personal behaviors that people have or have not engaged in to control the spread of COVID. And then, of course, we will be collecting demographic information so that we can analyze our responses by the different subgroups of respondents.

#### *Slide 6*

So that's a very quick overview of what we're doing. I have to acknowledge all of the students who have helped us so far with this project, and these are the references for the policy regime framework if anybody is interested in that.