# COVID Information Commons (CIC) Research Lightning Talk

Transcript of a Presentation by Kate Mason and Yifeng Cai (Brown University), March 2022



Kate Mason CIC Database Profile

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Transcript

## Kate Mason:

So just to quickly introduce myself - I'm Kate Mason from the Department of Anthropology at Brown University. I'm here with my colleague Yifeng Cai, also from the Department of Anthropology, and we received an NSF RAPID award to study the experiences of ordinary people during the early to middle phase of the COVID pandemic. We received this award early on so, of course, we didn't know how long it was going to last at that point. So this research is still ongoing, but we're just sharing some early findings. And the presentation for today is focused on this question of compliance. So we are really interested in answering a really simple question that we suspected to not have as simple an answer as some people might think, which is: why is it that 1.4 billion Chinese, with very few exceptions, complied with some of the strictest COVID control measures in the world for a long period of time? And I'm going to hand it over to Yifeng now to introduce the project and talk about what we did.

## Yifeng Cai:

Thank you, Kate. Indeed, China probably has some of the strictest and longest lasting control measures in the world. Within the first couple of weeks that the outbreak first emerged in Wuhan, China, and started to appear in other cities, the Chinese government launched a nationwide mask wearing mandate, as shown in these images, as you can see, those who refuse to comply will be reprimanded by neighborhood committee members, or even arrested by the police. Their videos were shot and circulated online for public shaming and received almost unanimous support from the public, who acknowledged that these kinds of strict measures for control were necessary.

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We can move to the next slide please.

Additionally, China quickly mobilized its highly developed digital infrastructure for pandemic control by April 2020. For example, a location tracking application called Health Code had been applied to over 200 cities in China. By now, an elaborate city-specific system of Health Code and trajectory code have become a stable part of everyday life in China. People have to display green codes in order to access public places, yellow codes will indicate that someone is at risk, need to be home quarantined, and would need to be tested negative for COVID-19 twice in a row in order to regain one's green code status and be released from home quarantine. And if one's code turned red, public health staff would quickly show up at your doorstep and take you away from mandatory quarantine in various other locations. And in the next slide, we'll talk about methodology.

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Before we go into discussing the findings, I'll briefly explain the research design and methodology. This is an ethnographic research based in Shanghai, China, starting in January 2020 and the second phase, which is the phase we'll be presenting today, was concluded in August 2021. For those of you who are unfamiliar, ethnography is a research methodology that is usually based in one specific and carefully chosen location only. Instead of trying to arrive at representative conclusions applicable to the entire population, ethnographers aim to generate in-depth and nuanced understandings about human behaviors as well as the motives and rationale behind them in relation to the particular social, political and technological context through prolonged interactions on a daily basis as well as in-depth qualitative interviews with a selective number of key informants. And to increase the generalizability of this study, we selected Shanghai as the research site, which gathered a highly diverse population with different levels of education [and] income from all over China. Additionally we also adopted adaptive methods from media studies in order to gather data from outside of Shanghai. One of our main methods for data collection is gualitative interviews, each of which lasted for about an hour and a half to two hours. We conducted our first round of interviews between June and August 2020, and selectively conducted follow-up interviews between January and February 2021. We also collected observational data in Shanghai where we visited public venues such as shopping malls, parks, gyms, and so on, to observe behavioral patterns and changes in real life settings. These data are available for comparing and contrasting the observational data with interview data and social media data. As I mentioned above, we borrowed the walk through method from media studies to collect data from various social media platforms. This method entailed that we use the same social media platforms as our informants. Social media data allow us to get a better sense of the opinions from a much broader range of populations in China and guard the changes in attitudes towards control measures over time. All data were entered into the qualitative software NVivo (v. 13) for analysis.

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And in the next slide, in order to get the most in-depth data about specific questions, we used purposive sampling and the snowballing method to recruit 38, all together, Shanghai residents for the first round of the interview. Six months later, we selected the 10 most knowledgeable from the 38 participants and invited them for follow-up interviews. Although this number might seem small, it has been well established that 10 to 20 carefully selected informants are sufficient to reach data saturation for studies about lived experiences.

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And in the next slides we'll show you three pie charts that visualize different dimensions of the demographics of our research population; among them, 71% were women and 29% were men. Age-wise, 42% were between the age of 18 to 30 years old; 32% were between 30 to 50; and 26% of them were over 50 years old. Because we hypothesized that people with different socioeconomic status would display different attitudes towards control measures, okay, we talked about the findings which we were surprised. We were we also assessed the socio-economic status of our participants with an instrument we designed, called qualitative socioeconomic status, where we assess the education, housing status, employment status, income, migration status, and family background in our in-depth interview, and classified informants into low, middle, and high, QSES. In our sample, 39% of them had a low QSES; 39% of them have middle QSES; and the left 21% had high QSES.

#### Kate:

All right, thank you, Yifeng. So I'm going to talk quickly about some of the results that we found. So there are really three main reasons that both our interviewees and others that we were able to access through the other methods that Yifeng spoke of, gave us or articulated for why they were so willing to comply with various control measures over a long period of time. And the first one perhaps shouldn't be surprising. It's what we refer to as 'enlightened self-interest' which was basically that those in China complied with these measures' in large part' for the same reason most people comply with things because they were trying to protect themselves and their families. So we found that the Chinese government did a really excellent job of instilling fear in people of COVID, and that was of course, you know, reinforced by the experiences that people in China had. So obviously, the first batch of cases that arose in the first outbreak arose in China in early 2020. And you see that on the graph, on the right, this really key piece of data which is that following early May of 2020, there were very very low levels of case counts and deaths in COVID all the way up through the present. There's a small sort of increase with the Omicron variant, but still very low, comparatively. And so the proof is sort of in the pudding, and that people felt like: well, when we didn't have these measures everyone was dying, and now that we do, they're not. So we want to protect ourselves. And frankly, what was going on in the rest of the world was really good evidence for them that this was the right way of thinking about it. The other part that was somewhat more surprising was that a lot of what was driving people was also fear of their own financial ruin. And in this way people were thinking about this a little bit in the inverse of how we might think about it in the U.S. or how many people think about it in the U.S. And that people really were taking the long view. Feeling that they needed to comply now in order to protect the economy in the long run and protect their own financial futures in the long run. And so they're able to see in ways that, you know, others in other places perhaps were not that even if they did have a really serious financial impact in the short term, that perhaps this was necessary overall.

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So the second reason had to do with nationalism. And we found that people really had quite sincere feelings of nationalistic pride in what China was able to do in controlling COVID. That although there was a short period of frustration at the very beginning and anger - it quickly got overshadowed by very consistent levels of nationalistic pride and willingness to to do what they needed to do for the nation. And that really related also to what Yifeng showed at the very beginning in terms of shaming. So anyone who did not comply was really called out as someone who was bringing shame to China. And not just, you know, to themselves or their immediate neighborhood. Now, some of this also related to the way in which the government, as it often is able to do in China, was very effectively able to deflect blame. So anytime there was discontent in a local area, the government was very adept at making sure that that

discontent was directed toward local officials, and would quickly fire local officials or have other punishments that allow people to feel satisfied that something had been done. The other part of this that perhaps is - might be more surprising to the audience here - is that pretty much everyone we spoke to was quite convinced that COVID had not originated in China. So there was a broad belief that COVID had actually been brought to China from outside. And here on the right, I know it's in Chinese, but this gives a timeline that was going around social media quite a bit. And was also in, you know, published in actual news articles about the theoretical trajectory of COVID as having originated potentially in a lab in the United States and being brought by military personnel to the World Military Games that were held in Wuhan in October 2019. And this also refers to cases that supposedly happened before the outbreak in Wuhan in Italy and France and in other parts of the world as well. So people were quite convinced that China was not actually to blame for this pandemic.

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And finally, this was perhaps the most interesting to us in terms of our findings - is that people really had a very clear-eyed view of what kind of information they were being given by the government. And basically, what this comes down to is that they knew that the information being shared with them about the pandemic was not - likely not entirely accurate. And yet they were okay with that. And this comes down to what I talked about in previous work I did about the differentiation between true and correct data. True data being that which represents what actually is happening on the ground, and correct data being that which is seen as the appropriate information to be sharing. And the thing that was interesting here was that while government officials talk in these terms and have a clear understanding of what is, sort of, the full truth and what is the part of the truth that can be conveyed to others, that ordinary citizens also shared a similar understanding. And we're, we're quite content to receive the information that they thought the government had carefully selected for them. And their view was that more information is not necessarily better. That if it's not going to make them safer, why do they need to know about it? That it can't be 100% perfect anyway because this is a rapidly evolving situation and that sharing full information could create social harm. So there's a widespread feeling that if the government shared everything that it knew, this would likely cause chaos, confusion, panic, and other social ills.

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So just by way of conclusion, we found that compliance with these measures resulted in a large part, really at its foundation, from the state's impressive capabilities in pandemic control, as well as the drive towards self-preservation, which goes together. They trusted the government could do this and they felt they needed to comply with what the government told them in order to protect themselves. We found that nationalistic sentiments expressed in news outlets and on social media, from our interviews anyway, were quite sincere, people were quite proud of their country. We found that transient shifts in attitudes and periodic criticisms did not result in loss of support for the central state and we argued that there are interesting insights to be found into the relationship between compliance and data. So although we in no way mean to suggest that the U.S., for example, should not be sharing incomplete information with the American public, that not sharing that complete information is not necessarily associated with lower compliance. And the relationship between these two things is not very simple. And finally, we feel that this study has implications for public health management globally in that it shows a case in which when people trusted in the state that it knows what it is doing and has the public's best interest in mind, that mass compliance with even the strictest control measures is possible.

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And these are our funders and our research assistants. Thank you very much!