

The COVID-19 Social Monitor

Monitoring Social and Public Health

Consequences of the Pandemic in Switzerland

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Objectives

> The COVID-19 pandemic and its containment measures have challenged society in unpredictable ways. Since March 2020, residents in Switzerland have experienced substantial changes in their daily lives and activities. Our main objective is **collecting data to describe changes in relevant social and public health domains** during the course of the pandemic. We focus on individual well-being, quality of life, psychological distress, social and physical activities, health and health services use, work and protective measures.

Methods

- > **Study design:** Longitudinal online panel. Survey participants were selected by a stratified random sample considering age, gender and language regions.
- > **Survey participants and recruiting:** Survey participants were randomly selected from an existing online access panel. 8,174 individuals were contacted for the first survey round, **N=2,026** completed the questionnaire (response rate: 24.8%). Between 1,500 and 1,700 responses were collected in the follow-up rounds.
- > **Survey period:** The first survey period lasted from March 30, 2020 to April 6, 2020 (3rd week of Lockdown, calendar week 14). Subsequently, **9 survey waves** were carried out up to September.
- > **Analysis weights:** Sampling and calibration weights allow for representative analysis of the Swiss population regarding age, gender, language region, canton, and education.
- > **Statistics presented here:** fixed-effects (panel) estimates using weighted data

Preliminary results

- > **Quality of Life:** Impaired quality of life on average, but no overall decrease of life satisfaction.
- > **Psychological stress:** Higher perceived stress in the early lockdown phase compared to the time after the lockdown. Younger people experienced more stress during lockdown relative to the elderly.
- > **Loneliness:** Heightened feelings of loneliness during lockdown. Young people (18 to 29) feel lonely or very lonely particularly often during this time.
- > **Social contacts:** In the third week of lockdown, 66% of respondents met their neighbours at least once a week but only 30% of respondents met their friends on a weekly basis. In August, by contrast, 80% of the respondents met both their neighbours and/or their friends at least once a week.
- > **Adherence to protective measures:** Generally high adherence to protective measures. All age groups showed similarly high adherence during lockdown. The younger age groups exhibit a faster decrease in adherence after the easing of the lockdown.

Discussion

Our population-based online panel:

- > **provides timely information** about relevant social and public health aspects of the Swiss population during the COVID-19 pandemic
- > is able to monitor health and behavioural **changes over time** on an **individual level**
- > **provides a data source for studies** on a broad range of aspects of the COVID-19 pandemic and its impact on the population

Limitations

- > The sample is likely selective regarding education and affinity for the online environment, due to the data collection process (online survey).
- > Possible under-representation of subpopulations such as vulnerable groups, persons with serious health conditions or the very old.
- > Self-reported outcomes are prone to misdiagnosis of health conditions.

Funding

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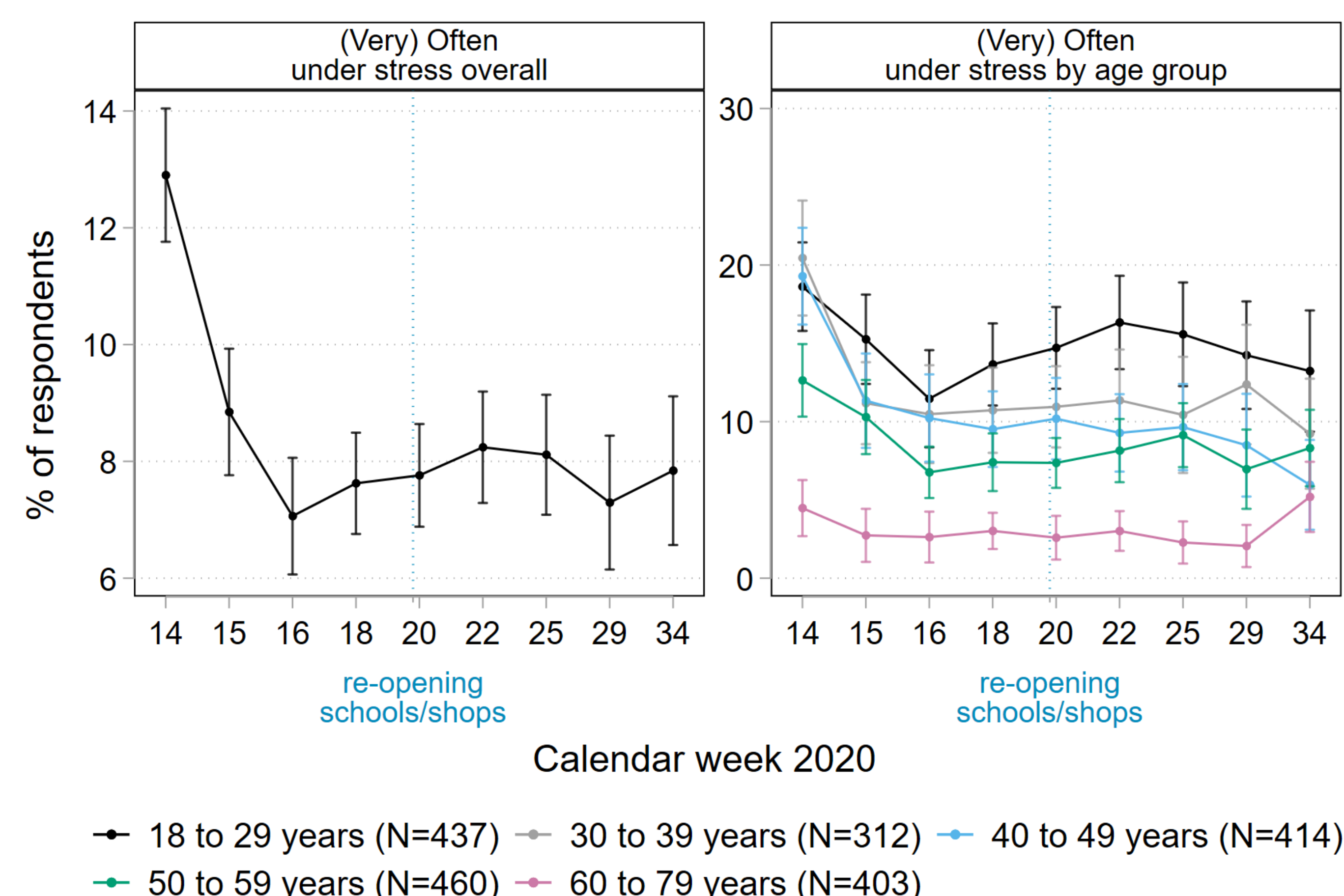


Figure 1: (Very) often under stress – by age group. Fixed-effects estimation. Proportion reporting “very often” and “often” vs. “sometimes”, “rarely” and “never”.

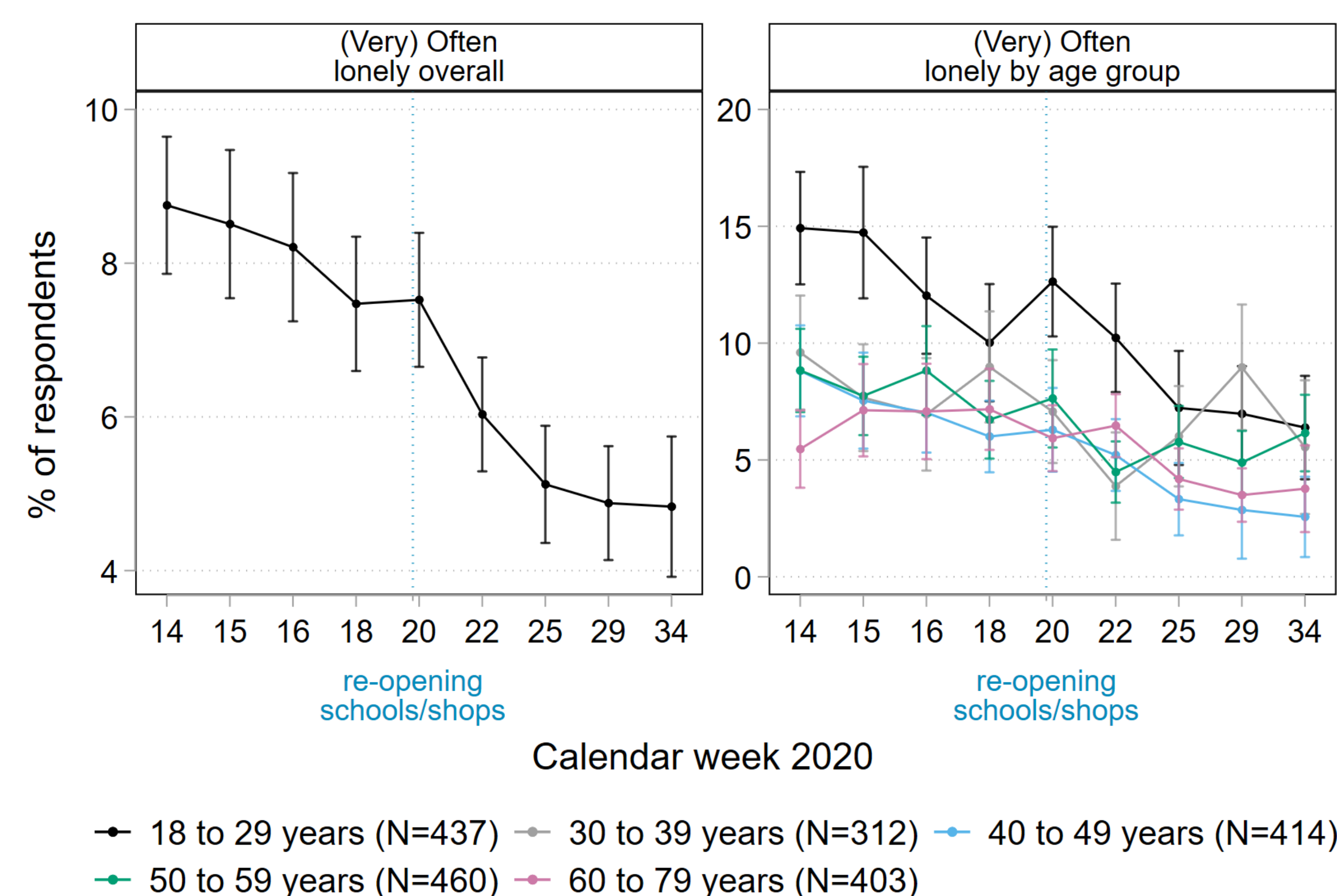


Figure 2: (Very) often lonely – by age group. Fixed-effects estimations. Proportion reporting “very often” and “often” vs. “sometimes”, “rarely” and “never” grouped by age.

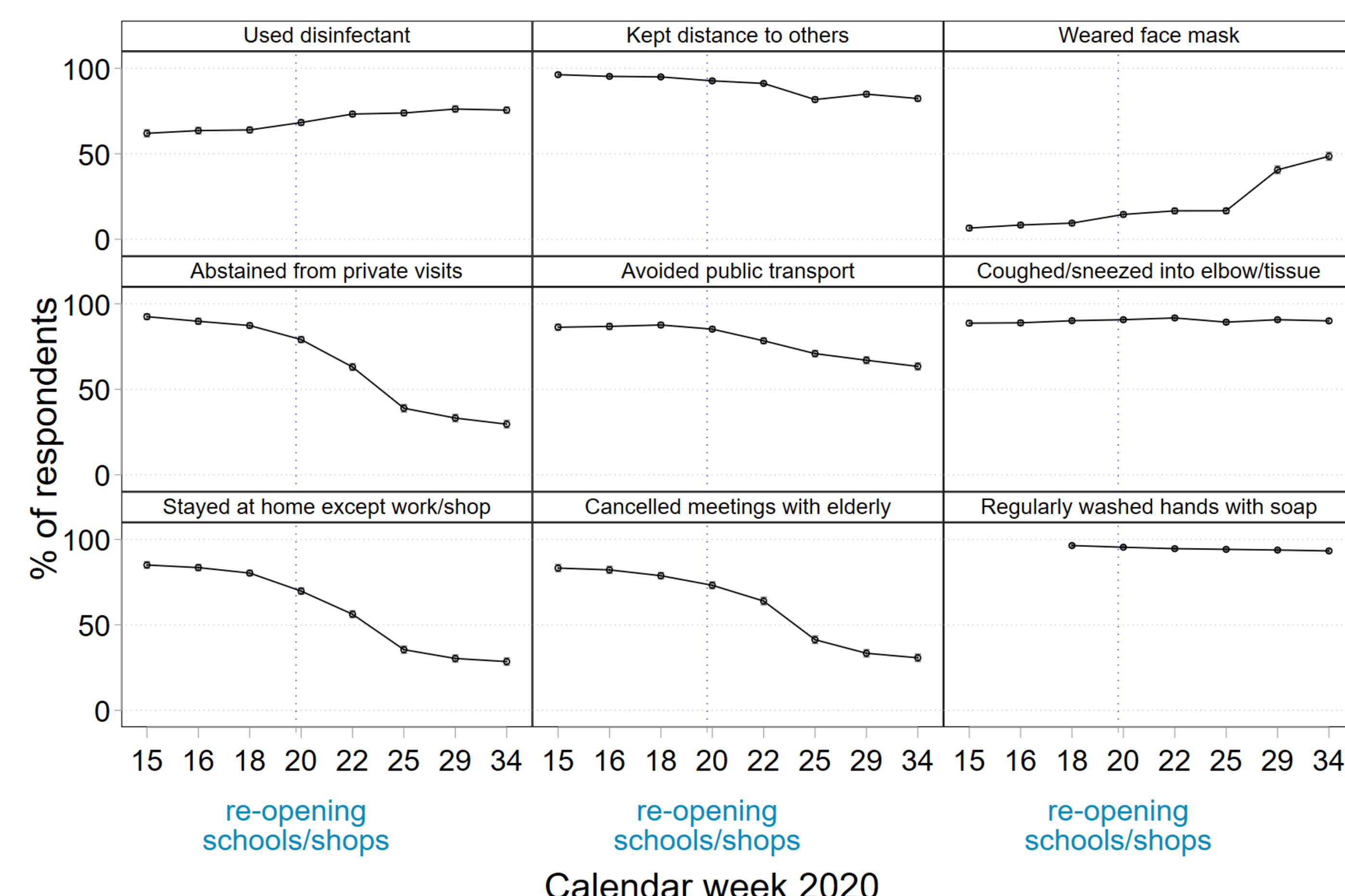


Figure 3: Adherence to protection measures (“always” or “mostly”). Fixed-effects estimations. Proportion reporting “always” and “mostly” vs. “sometimes”, “rarely” and “never”.