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From: (10)(2e) @rivm.nl
Sent: Thur 6/25/2020 10:15:20 AM
Subject: Doorst: gedragsmeting Nieuw Zeeland
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[Sibley 2020 Effects of-Clean.pdf](#)

Van: (10)(2e) <(10)(2e)@rivm.nl>
Datum: 25 juni 2020 om 11:15:58 CEST
Aan: (10)(2e) <(10)(2e)@rivm.nl>
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Onderwerp: gedragsmeting Nieuw Zeeland

Ha (10)(2e)
 Misschien interessant voor de gedragsunit. Een meting uit Nieuw Zeeland gerelateerd aan het corona gebeuren (maar met nogal wat methodologisch commentaar). Ik lees dit Bulletin van (10)(2e) (10)(2e) (10)(2e) regelmatig, (10)(2e)
 Als je ooit een methode gefileerd wilt hebben, moet je hem vragen...

Mvrgr

(10)(2e)

From: (10)(2e) <(10)(2e)@deakin.edu.au>
Sent: donderdag 25 juni 2020 06:12
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Bulletin of the Australian Centre on Quality of Life

<http://www.acqol.com.au/>

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Note 1: The ACQol site is under development and some content is missing.

Note 2: Please address any intended group correspondence to the editor only.

Paper for private study

The attached paper, on the topic of life quality, is sent to you for your personal private study and discussion within ACQol. You are prohibited from further distributing this paper to any other person.

COVID-19 and lockdown in New Zealand

Background:

New Zealand is a small country of some 5 million people, tucked-away from other lands, 2,000km to the East of Australia. It has one of the most highly regarded Heads of State in Jacinta Ardern, who acted with foresight and determination when the first case of Covid-19 was reported in late February 2020. A four-level alert level system was introduced on 21 March to manage the outbreak, initially set at level-2 but rising to level-4 (nationwide lockdown) on 25th March.

As new infections fell, the levels of restriction were gradually reduced, to level 1 on 8 June, thereby removing all restrictions except border controls. By the 22nd June, a total of 1,509 cases of infection had been reported, with only currently 9 active cases and 22 recorded deaths. In the annals of the Covid-19 pandemic, New Zealand will have a special

place, as one of the most successful in controlling the spread of the disease.

This article uses data from a contemporaneously active, longitudinal, national probability panel survey (the New Zealand Attitudes and Values Study; NZAVS). Participants were originally sampled from the New Zealand electoral roll, which contains contact details of all registered voters. In terms of representativeness, the survey closely reflects the New Zealand population on socioeconomic status, region of residence, and age.

The reported data were collected opportunistically. The 11th wave of the survey had commenced in October 2019 and was ongoing when the first case of the disease in [New Zealand](#) was reported on 28 February. The recruitment period for this survey commenced on the day following level-4 lockdown (stay at home) and lasted for 18 days (March 26 to April 12, 2020). The alert level did not move back down to level 3 until 27 April, so the entire sample of 1,003 respondents was obtained during the level-4 lockdown period.

Reference: Sibley, C. G., Greaves, L. M., Satherley, N., Wilson, M. S., Overall, N. C., Lee, C. H., . . . Milfont, T. L. (2020). Effects of the COVID-19 pandemic and nationwide lockdown on trust, attitudes toward government, and well-being. *American Psychologist*. doi:<https://dx.doi.org/10.1037/amp0000662>

Author summary: This study describes the immediate effects of the COVID-19 pandemic and nationwide lockdown on levels of institutional trust and attitudes toward the nation and government and health and well-being in New Zealand, with implications for other nations. Our results suggest that a strong national response to COVID-19 may bolster national attachment and increase trust in the bodies determining and enforcing lockdown guidelines. Against a backdrop of general resilience, small increases in psychological distress serve as a warning about potential psychological consequences of lockdown and isolation.

Comment on Sibley et al (2020)

The authors chose to perform two kinds of analysis on their pre-lockdown vs. lockdown data. Their main analysis used Propensity Score Matching. Here, each of the 1,003 lockdown respondents was matched, on a variety of demographic variables, to another respondent drawn from a pool of 23,351 ‘controls’ who had completed the survey in the previous year.

This Propensity Score matching procedure has been criticized on a number of grounds. It not only loses valuable information, available from a repeated measures analysis, but has also been found to “increase imbalance, inefficiency, model dependence, and bias” (King and Nielsen 2018). Their second form of analysis is a more appropriate within-subject, repeated measurements analysis over time. This analysis uses each respondents’ pre vs lockdown scores. While both yielded much the same results, the latter procedure was more sensitive on some measures.

Their Method section informs that they intended to assess ‘Mental and physical health and subjective well-being’. The latter construct was assessed by individual items selected from two scales. One was the Personal Wellbeing Index (PWI), inappropriately referenced to (Cummins, Eckersley et al. 2003a) instead of the (International Wellbeing Group 2013). Four of the seven domains were individually assessed as health, standard of living, future security, and personal relationships. The second scale was the 5-item Satisfaction With Life Scale (SWLS; Diener, Emmons et al. 1985) from which two items were chosen, with their mean scores combined to create a single variable.

While each of these PWI and SWLS scales is a valid measure of SWB, the use of selected items from each, as presented here, is not. The reason these particular items were chosen for analysis is not revealed. Notably, in the case of the PWI, the centrally contributing domain of ‘Achieving in life’ has been omitted (International Wellbeing Group 2013 - see multiple regression section).

In a similar vein, the authors measured National Wellbeing by selecting four of the six domains in the National Wellbeing Index (Cummins 2002d), but reference the source as Tilioune et al (2006). They also changed ‘Satisfaction with government’ to ‘‘Satisfaction with government performance’, which is a quite different, more specific question.

Their results, overall, show little change for these items. None of the 5 ‘life satisfaction’ items changed over the 18-days of lockdown. Among the 4 ‘national satisfaction’ items, only one changed, with government performance satisfaction showing a solid increase, consistent with the ‘Rally Effect’. The phenomenon of ‘rally around the flag’ has been observed in response to national disasters and terrorism as a patriotic response (Skitka 2005) that is associated with increased societal trust (Toya and Skidmore 2014).

The authors also measured a wide range of other variables (e.g. Trust in police, Rumination, etc), but again these comprise a small number of items, selected through unstated criteria, from larger scales. Thus, the extent to which the reported results validly represent the intended construct is unknowable.

A final concern is that, together, the 13 comparisons of national variables, and 13 of personal variables, make a total of 26 t-test comparisons. These multiple comparisons represent a classic demonstration of an enhanced probability of Type-1 error (false positive). This requires the application of a Bonferroni correction to reduce the chance of random statistical significance. Such application effectively requires that the criterion for significance moves from $p < 0.5$ to at least $p < .01$, as noted by the authors (p.7). Despite this acknowledgement, the authors report that the lockdown group “reported less fatigue ($p = .023$)” (p.8). In a similar vein, there are 9 instances in the authors’ Tables 2 and 3, where the level of significance meets this $p < .01$ criterion. However, for 7 of these 9, Cohen’s Effect Size, of $< .2$, indicates an ‘insignificant magnitude of difference’ (Dunst and Hamby 2012). This includes their Kessler-6 result (effect size .12) claimed to represent higher ‘mental distress’ by the abstract. Of the two results that are both statistically significant and with a non-trivial effect size, both refer to governance. Both ‘Trust in politicians’ and ‘Satisfaction with government performance’ are higher during lockdown.

In summary, the two results that can be regarded as valid tests of change indicate an increased regard for governance. While this is consistent with the ‘rally effect’, it should also be noted that this has occurred in the context of a country where opinion polling indicated that 80-90% of the population agreed with, and acted on, the lockdown demand (Crothers 2020). This is in sharp contrast to the equivalent situation in the USA, where a far weaker response is described as “most state and local governments had issued stay-at-home orders that closed schools and nonessential businesses and advised residents to stay home and limit social contact” (Luchetti, Aschwanden et al. 2020) (p.3). Thus, the NZ and USA outcome results from the lockdown period are based on quite different population experiences.

Two additional observations can be made. First, other reports also find minimal change during the first three weeks of lockdown. For example, in Spain, López-Bueno, Calatayud et al. (2020) found Health Risk Behaviors to increase during the first week, but then decreased to baseline over the next two weeks. While in the USA, Luchetti, Aschwanden et al. (2020) found no increase in loneliness following 6-days of “stay-at-home” policies of most states” (April 23 and April 29), during which the number of cases rose to one million. It seems possible that periods of relative social isolation at home, over a few weeks, may not cause substantial pathological reactions in most people.

The second observation from the Sibley study is not directly related to the COVID-19 response. Rather, it concerns the level of expressed satisfaction in both personal and national domains by New Zealand respondents, which is some 5 to 10 percentage points lower than is recorded in Australia. This peculiar finding, between two apparently similar peoples, will be the topic of next week’s Bulletin.

References: *see end of Bulletin*

Further discussion of this paper, for circulation to members, is invited. Send to: (10)(2e) @deakin.edu.au. Substantive comments received by midnight OZ time, on Sunday 28th June, will be published in the following Bulletin. Such comments may offer a novel extension to the view that has been put, an alternative and informed view, or offer a critique.

ACQol members are invited to send papers, queries or comments, on the topic of life quality, for distribution and discussion by members under these same conditions.

Website additions and changes

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WebMaster

New health resources entries: <http://www.acqol.com.au/instruments#usesful-sites>

[Vision Center](#)

<https://www.visioncenter.org/eye-conditions/>

Vision Center is an informational web guide created for those seeking eye surgery and other vision correction options.

[Alcohol Rehab Help](#)

<https://alcoholrehabhelp.org/>

Alcohol Rehab Help is an informational web guide created for people struggling with alcohol use disorders (AUD) and co-occurring mental health disorders. Not only do we offer information on Alcohol Use Disorder, but we also have comprehensive information regarding treatment options.

Brief report

Sourced from the Analysis & Policy Observatory

Wilson, S., Pallant, J., Bednall, T., & Gray, S. (2020). *AUSTRALIAN LEADERSHIP INDEX: 2019 NATIONAL SURVEY REPORT*. Melbourne: Swinburne University of Technology
<https://apo.org.au/sites/default/files/resource-files/2020-06/apo-nid306040.pdf>

Key findings from the Australian Leadership Index

1. Overall, the public takes a dim view of the state of leadership for the greater good in Australia. The majority of Australians feel that institutions and sectors do not do enough to lead for the greater good.
2. There is a significant gap between public perceptions and expectations across all indicators of leadership for the greater good across all sectors. Australian institutions are not living up to the expectations of the general public.
3. At the sector-level, the government sector is perceived as the worst performer in terms of leadership for the greater good, followed closely by the private sector. By contrast, the public sector is seen as showing the most leadership for the greater good.
4. At the institution-level, charitable organisations are perceived as showing the most leadership for the greater good. In stark contrast, the Federal Government is perceived as showing the least leadership for the greater good.
5. Community expectations of leadership for the greater good are highest for the government sector, and especially of the Federal Government. By contrast, community expectations are lowest for the private sector, especially of Small and Medium-sized Enterprises.
6. The most pronounced gaps between perceptions and expectations of leadership relate to the accountability, transparency and ethicality of institutional leadership. This finding is consistent across the government, public, private and not-for-profit sectors alike.

Media news

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Executive Volunteer, Bulletin Co-Editor – Media

Why Don't American Workers Want to Go Back to Their Offices?

How has COVID-19 impacted the way workers feel about their workplace?

<https://www.psychologytoday.com/au/blog/functioning-flourishing/202006/why-don-t-american-workers-want-go-back-their-offices>

(10)(2e)

New research suggests that only 21.6 percent of American workers feel positive about heading back to their offices as workplaces begin to re-open across the country. Citing fear for their health due to COVID-19, and the newly-discovered flexibility working from home can bring, the study conducted by The Wellbeing Lab and George Mason University's Center for the Advancement of Wellbeing of 1,000 workers representative of the U.S. workforce right now, suggests that re-engaging workers in offices could be challenging.

Additional recommend reading

'Today's Research', edited by Dr Bob Murray, provides a weekly digest of research, mainly in biology and the social

sciences.

https://fortinberrymurray.us13.listmanage.com/subscribe?u=6a411e8ce902df7c73232a8f2&id=4ee17adb2b&mc_cid=e1c ac10cf4&mc_eid=e9a2e6453f

Membership changes

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Membership Registrar

Welcome to new members

[Mr Ross Carlyopn](#)

President, Strength Potential Incorporated

Keywords: youth mentoring strengths schooling

[Ms. Adriana Marcelino da Martins](#)

Speech-language pathologist,

Keywords: palliative care, intellectual disability

[Professor Isabella Sulis](#)

Associate Professor of Social Statistics, University of Cagliari

Keywords: measurement models, social indicators, assessment in education, missing data, multi-level analysis.

----- References

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King, G. and R. Nielsen (2018). "Why propensity scores should not be used for matching." Copy at <http://j.mp/1sexgVw> Download Citation BibTex Tagged XML Download Paper **378**: https://scholar.google.com.au/scholar?hl=en&as_sdt=0%2C5&q=Why+Propensity+Scores+Should+Not+Be+Used+for+Matching&btnG=#d=gs_cit&u=%2Fscholar%3Fq%3Dinfo%3AFitTck6e6koJ%3Ascholar.google.com%2F%26output%23Dcite%26scip%23D20%26hl%23Den.

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