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UNDERSTANDING ONE COLLEGE STUDENTS' ATTITUDES TOWARDS COVID-19 POLICIES

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ABSTRACT

Since late 2019, the Coronavirus (Covid-19) has so far killed over 949,000 people in the United States citizens (and counting), changing many people's everyday lives. To mitigate these harms, many governments and institutions have implemented policies designed to slow the spread of the virus. Many of these policies have been politicized and are now controversial. We attempt to understand the attitudes to those policies based on students' responses from one college – The College of New Jersey (TCNJ), a medium size US based liberal arts college. A better understanding of how the TCNJ student population perceives and is responding to college policies may provide meaningful insights into how TCNJ (and similarly situated institutions) can more effectively manage this and future pandemics.

KEYWORDS: COVID Policies, Students' Compliance

1. INTRODUCTION and BACKGROUND

This paper analyzes student compliance with TCNJ's Covid-19 policies to reveal, and possibly correlate, identifiable characteristics with compliance outcomes. In so doing, we will also identify what students assess as more and less effective compliance incentives.

To meet these endpoints, a survey is employed that asks respondents to rank which measures were likely to result in compliance, broken out by individual policy – i.e., masking, social distancing, vaccination, and reporting symptoms. The potential answer menu was TCNJ policy, punishment, social pressure, health concerns, or alternative reasons. The general impact of TCNJ's Covid-19 policies on students' assessment of the quality of their education and social experience is also assessed. Overall policy compliance is measured by a variable polagree, which is the main dependent variable in the analysis.

Survey respondents were also asked 3 Likert scale questions to three given statements about different institutions and Covid-19 vaccinations. This section measures student trust in policy makers.

Students also provided such demographic data as race, class year, major, school, family income, overall family and student health, family vaccination status, political affiliation, living arrangements (on or off –campus), religiosity, and personal contact (themselves, or through others personally known to them, such as family members) with those who have had Covid-19 and, if so, disease severity.

Our main hypothesis is that the more selected demographic criteria a student meets, the more complaint s/he will be with TCNJ’s Covid-19 policies. Those criteria are:

Experience with Covid-19;

Pursuing a health science major;

Being underclassmen (such that TCNJ represents their first meaningful adult experience consistently requiring independent decision-making);

Do not closely affiliate with a particular religious doctrine;

Lean Democratic and/or liberal in their political affiliation;

Have themselves, or family/friends, with pre-existing health related concerns; and

Are not White.

Plainly, the demographic criteria chosen embed certain assumptions about general attitudes and proclivities rooted in how a respondent engages politically, religiously, and personally (i.e., own health and life experiences), as generally expressed in our literature survey. The validity of the hypothesis as applied to TCNJ is tested by looking at differences in mean policy adherence agreeance in our survey population and measuring the effect of the above-listed demographic variables through a regression analysis.

2. TCNJ’s Covid-19 Policy Fall 2021

Covid-19 policies at TCNJ and many other institutions have changed over time as the virus has developed. This survey was conducted virtually via qualtrics during the Fall 2021 semester. Respondents were asked to react to the policies overall, and also focus on their level of adherence to three individual policies (masking, reporting symptoms, and mandatory vaccination) promulgated by TCNJ President Foster on August 27, 2021, while outlining plans for the Fall semester.

More specifically, masking was described as “[a] temporary universal indoor masking policy” to remain “in place until local and state virus transmission levels are reduced.” (Foster, IMPORTANT

2021) This temporary policy was in force from the fall of 2021 to the first half of the spring 2022 semester.

The second policy - reporting symptoms – was to be done via the Roar Application, which is used by TCNJ to promote clubs and organizations but was adapted to include a Covid-19 tracking capability. This policy embraced self-testing requirements that differed based on vaccination status. Fully vaccinated students were only required to self-test if they were symptomatic or in contact (defined as being within 6 feet for a total of 15 minutes or more over 24 hours) with a confirmed positive case. (Foster, IMPORTANT 2021). The contrast, “all unvaccinated individuals (this includes those who have an approved medical or religious exemption) and who come to campus will need to complete the daily self-checkup” (Foster, IMPORTANT 2021).

The third policy - vaccine mandate – was added on May 7th, 2021. Under it, “[s]tudents with valid medical reasons precluding vaccination, as well as those with established and sincerely held religious beliefs that preclude receipt of vaccination, may request an exemption from the vaccine requirement.” (Foster, fall 2021) Consistent with the policy on reporting symptoms, exempted individuals were required to self-test, and each exemption had to be approved by TCNJ.

3. LITERATURE REVIEW

Since the Covid-19 pandemic is still occurring, the body of relevant literature is both dynamic and evolving. Our literature review is focused on selected articles concerning general Covid-19 statistics, behavioral economics, and the construction of surveys employed to devise and implement our survey.

Race

As stated above, race is a demographic criteria of interest. “Racial Disparities in Covid-19: Issue Brief-951,” by Samantha Artiga (VP, Kaiser Family Foundation), finds that “[p]eople of color are experiencing significantly higher rates of infections and deaths compared to White individuals.” (Artiga, 2020, P.1).

Individual Traits/Beliefs

“Determinants of Covid-19 Vaccine Hesitancy and Resistance in Russia,” by Yan Roshchina, analyzes Russia’s struggle vaccinating its citizens, which had achieved a 36% vaccination rate as of mid-October 2021. From a nationally representative data set of adult Russians, Roshchina attributes this low vaccination percentage to personality traits, religiosity, and distrust of the state. Unsurprisingly, he observes that “[m]assive vaccination hesitancy and refusal pose a great threat to public health and postpone social and economic recovery.” (Roshchina, 2021, p.2)

Behavioral Economics and Policy/Cognitive Bias

“A behavioral economics perspective on the COVID-19 vaccine amid public mistrust” by Jessica Slaeska, seeks to explain why a year ago only about half of Americans stated a willingness to be vaccinated. The reasons for this reluctance, Slaeska posits, include potential vaccine side effects, lack of trust in the government, and concern that the vaccine is too new to adequately assess its long-term safety. The paper details three distinct cognitive biases that Slaeska believes could be affecting vaccine uptake. One, confirmation bias, describes people who predominantly pay attention only to evidence that supports their views. Another, negativity bias, which is based on research that shows that negative beliefs are often powerful and difficult to forget.

Last is optimism bias, which may make individuals less worried about contracting the virus and therefore less willing to be vaccinated. Optimism bias disproportionately affects the young, who believe (probably correctly) that if infected their symptoms may not be as severe (Slaeska, 2021, p.3).

The methodology undergirding behavioral economics is complex. “The Dynamics of National Identity and Pride Formation in Ukraine,” by Larysa Tamulina, explains the measurement of behavior in a way that, in a modified form, is used in this paper. Tamulina uses several dummy variables to measure national identity through regression analysis. Her base model is ‘ $Identity_{ij} = \gamma_0 + \gamma_1 Language_{ij} + \gamma_2 Democracy_{ij} + \gamma_3 Income_{ij} + \gamma_4 War_worries_{ij} + \gamma_5 X_{ij} + \epsilon_{ij}$.’ (Tamulina, 2021, p.8) Growth in national pride is attributed to the impending war within Russia, language use, democracy, and income.

Survey Construction

The goal of our survey design was to capture students' attitudes towards and level of compliance with TCNJ's Covid-19 policies. To do so, “Fundamentals of Survey Research Methodology” by Priscillia Glasow was used as a primary source, particularly with respect to sample size (Glasow emphasizes at least thirty observations (Glasow, 2005, p.8); we obtained over 180 observations), survey question standards, and survey length, which should not be “onerous in nature” (Glasow, 2005, p.12). The Census' American Community Survey questionnaire (U.S. Census Bureau, 2022), which is answered by 98% of US households annually, was used as a model for constructing our base characteristics and demographic survey questions.

Our survey was designed to take respondents less than 5 minutes on average to complete. To minimize sample bias we relied on announcements made by faculty from different departments, random email blasts, and communications shared with TCNJ's residential communities for each respective class year.

4. DATA

The data used for this analysis was collected using an anonymous survey of current TCNJ students. The survey received the IRB approval (identified as STUDY #: FY21-060). All responses were collected in fall 2021, which predates the Omicron variant. The sample size is 183 students.

Each rank-related and Likert scale question received a number to calculate the average and much of the demographic data were converted into dummy variables. This clarified student groupings and how they affect collective ranking trends.

5. Survey Aggregate Findings

Before any statistical testing, the overall aggregate findings from the survey were reviewed. The summary tables and graphs of that data, which depict the overall TCNJ student experience, are presented in the Appendix (Preliminary aggregate findings and demographic-related information, part A.1, Policy-related findings, part A.2, and behavioral/trust-related information, part A.3).

Most respondents were vaccinated, White, female, non-Latino, sophomore social sciences majors, and registered Democrats who reported family incomes between \$50,000 and \$149,999, identified as being not religious, and characterized themselves and their families as being in good health.

These respondent characteristics were compared with TCNJ’s student population information using The National Center for Education Statistics data. The gender, race, class year, and vaccination status of our respondents and the TCNJ student body were consistent. About 77% of our sample, however, identified White as their race, while TCNJ reports that demographic at 62% (College Factual, 2022).

Policy-related findings are shown in figures 2.1, 2.2, and 2.3, Appendix subsection A.2. Response frequency for why students follow the vaccine mandate, masking, and reporting symptoms is ranked

Policy Related Findings

Figure 2.1: Why Vaccinated

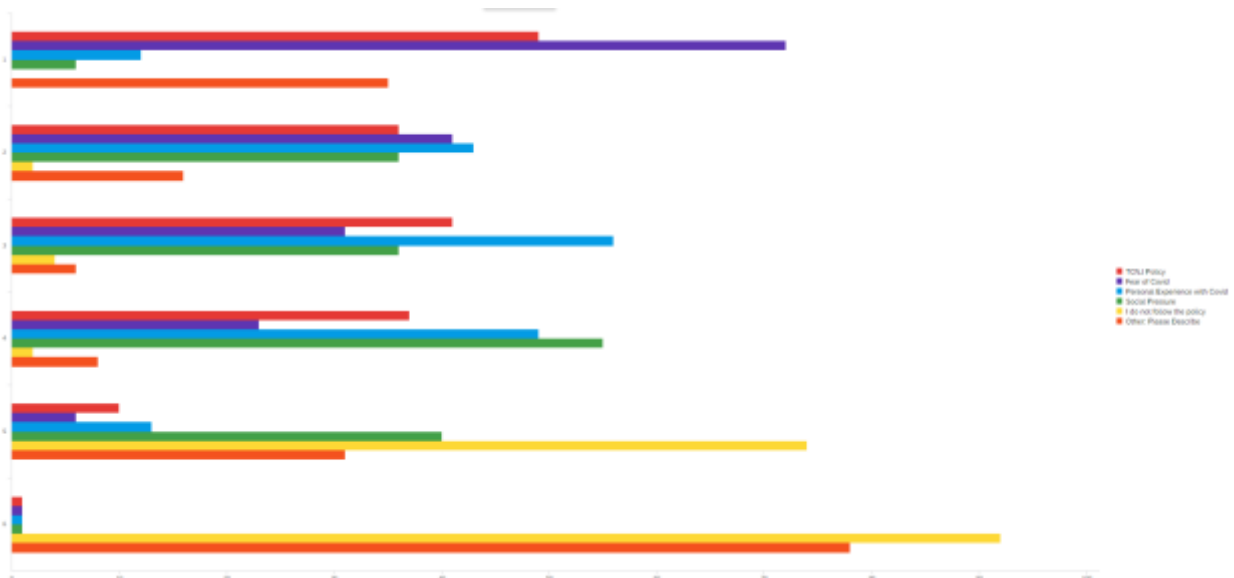


Figure 2.1 shows that students most often ranked *TCNJ Policy*, *Fear of Covid*, and *Other* (which includes caring about others) as the first reason for getting vaccinated. *Personal Experience with*

Covid, Fear of Covid, Social Pressure, and TCNJ Policy, are often ranked second. Personal Experience with Covid, TCNJ policy, and Social Pressure, are often ranked third. The figure also shows that I Do Not Follow the Policy is ranked last. This shows the effectiveness of the policy in generating vaccinations.

Figure 2.2: Why Masks

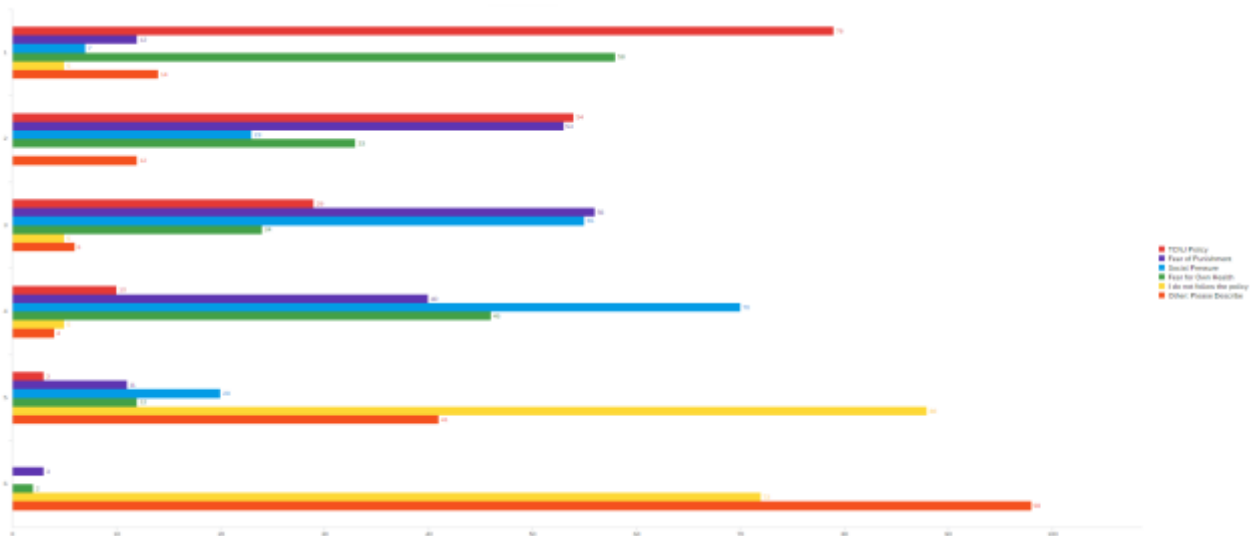


Figure 2.2 ranks why students followed TCNJ’s masking policy. Again, *TCNJ Policy* is ranked as the most important reason. *Fear of Covid* is also ranked as influential. *TCNJ Policy* and *Fear of Punishment* were ranked as the second most influential reason, and *Fear of Punishment* and *Social Pressure* were ranked third reason. *Other* and *I Do Not Follow the Policy* are ranked fourth and fifth.

Figure 2.3: Why Report



Student responses for why they reported are represented in Figure 2.3. Once again, *TCNJ Policy* is ranked first (and therefore most influential), along with *Fear of Covid*. Most often, *Fear of Punishment* ranks second and *Social Pressure* third, and *I Do Not Follow the Policy* and *Other* rank fourth and fifth, respectively.

In combination, these findings indicate that TCNJ Policy was a key reason for students’ getting vaccinated, wearing mask, and self-reporting.

Our behavioral and trust-related aggregate findings are presented in Figures 3.1, 3.2, 3.3, and 3.4, which are Likert scale responses, with the exception of the opinion question shown in figure 3.4.

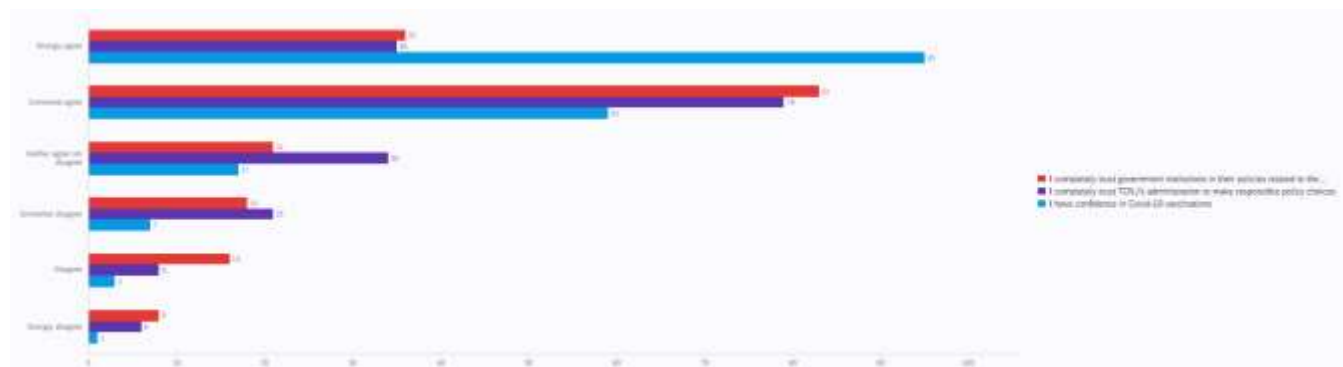
Behavioral and Trust Related findings

Figure 3.1: Agreement with TCNJ Policy



Figure 3.1 represents the *polagree* variable, showing the degree of respondents’ overall agreement with TCNJ’s Covid-19 policies. Most (138 respondents out of 183 respondents) agree with these policies to some degree. This indicates an overall acceptance of these policies by the student body.

Figure 3.2: Trust and confidence related questions



In graph 3.2, responses are presented to the statements *I completely trust government institutions in their policies related to the pandemic (CDC, FDA, The White House)*, *I completely trust TCNJ’s administration to make responsible policy choices*, and *I have confidence in Covid-19 vaccinations*. Ninety-five respondents ‘strongly agreed’ with having confidence in vaccinations, and about 35

respondents strongly agreeing with the other two statements. Interestingly, more often students would rather put their trust in government than in TCNJ.

Figure 3.3: Education Quality Policy Impact



Figure 3.3 presents students' overall social and academic satisfaction as they relate to Covid-19; specifically, whether they feel that their education or social experiences were diminished, the same, or improved due to TCNJ's Covid-19 policies. Most (124) respondents reported that it has negatively impacted social and educational quality, many felt both were diminished, but the larger impact was on social experiences rather than on educational quality. Sixty-eight respondents believed that there was a somewhat diminished impact on social quality but not on educational quality.

Figure 3.4: Opinion on Why Students Have Strong Feelings Against Vaccine.



Students' opinions on why their peers have strong feelings against vaccinations are shown in Figure 3.4. Potential answers were health-related worry, family concern, political ideology, religious concerns, polarizing media, and others. Respondents perceived political ideology as the most prominent reason for vaccine distrust, with seventy-eight participants choosing this option. Polarizing media came in as the second most influential (48 respondents).

6. METHODOLOGY

The survey of current TCNJ students relied on the honesty of participants. To encourage uncensored responses, anonymity and confidentiality were used. A lack of any specific incentive to fill out the survey also helped eliminate the selection bias that sometimes occurs due to socioeconomic factors.

The construction of the survey needed to be very particular since human participants were being used. Several direct quantifying questions that would measure compliance had to be altered. Survey responses were also not always fully complete, as respondents could (and sometimes did) stop answering or skip questions. This leaves some gaps in our data set.

With the information collected from student participants, multiple statistical tests have been conducted. T-tests were run on all demographic characteristics in Stata and have all been analyzed at a 95% confidence interval. The results are in the Appendix under analytical discovery. Within some of these groups, there are statistically significant differences in the average way that individuals rank their overall agreement with TCNJ's Covid-19 related policies.

T-test:

The t-tests conducted within this section inform whether respondents with certain key demographics will react to Covid-19 policies differently by considering whether there are statistically significant differences between the mean policy agreement of two chosen groups. The overall Covid-19 policy agreement is measured with the variable *polagree* is on a Likert scale from one to five. The first t-test examines whether there is a statistically significant difference in the way students of different class standings react to TCNJ's Covid-19 policies. The test was run on the dummy variable *under*. This variable, which represents the respondents' class year, takes on the value of 0 for 'Freshman' and 'Sophomore' and 1 if the respondent indicates 'Junior,' 'Senior,' or 'Grad'. The t statistic is 1.0705, there are 180 degrees of freedom, and the p-value is 0.2858. Based on the p-value we fail to reject the null hypothesis that there is a significant difference in the mean policy agreement of lower- and upper-class students.

The second t-test 4.2 examines whether there is a statistically significant difference in the way students with different health outcomes react to TCNJ Covid-19 policies. This variable *reshealth* measures the implications of pre-existing personal health conditions. Health indicators that are better than fair is represented by a 0, and worse than fair is chosen by a 1. The t statistic is -1.0933, the degrees of freedom are 179, and the p-value is 0.2757. Based on the p-value we fail to reject the null hypothesis that there is a significant difference in the mean policy agreement of those with worse than fair health and those with better than fair health.

The third test examines whether there is a statically significant difference in the way students react to TCNJ Covid-19 policies based on their political affiliation. The variable *republican* is a dummy variable, which is given a 0 value. Any other party is represented by a 1. The t statistic is -6.0623, the degrees of freedom are 178, and the p-value is 0.00. Based on this test we reject the null hypothesis. The mean policy agreeance for respondents who identify as Republican is 2.3478 out of 5. The mean

for all other groups was 3.9745. This shows that respondents who identify as Republican are less likely to agree with TCNJ's Covid-19 policies.

The fourth t-test examines whether there is a statistically significant differences in reactions to TCNJ's Covid-19 policies based on where a respondent resides. The variable *oncampus* looks at whether a student lives on or off-campus, with 'on-campus' shown as a 0 and 'off-campus' as a 1. The t statistic is 3.2542, the degrees of freedom are 180, and the p-value is 0.0014. Based on this test we reject the null hypothesis. The mean value of agreeance is 3.9407 for on-campus students and 3.23 for off-campus students. This shows that those who live on-campus are more likely to agree with TCNJ's Covid-19 policies.

The fifth t-test examines whether there is a statistically significant difference in how White and non-White students agree with TCNJ's Covid-19 policies. This t-test is run for the dummy variable *nonwhite* is represented by the value of 0, and 'White' with the value of 1. The t statistic is 1.8801, there are 180 degrees of freedom, and the p-value is 0.0617. The p-value is borderline but slightly greater than .05. Based on this test we fail to reject the null hypothesis that there is a statistically significant difference between how much White and non-White respondents agree with TCNJ's Covid-19 policies.

T-test 4.6 examines whether there is a statistically significant difference in how respondents perceive TCNJ's Covid-19 policies based on their religiosity. *Nonreligious* is a dummy variable. If the respondent indicates that they are 'not religious, then the value of their response will be a 0. If the respondent indicates that they are any degree religious, they will be represented by a 1. The t statistic is 0.7599, the degrees of freedom are 175, and the p-value is 0.4483. Based on this test we fail to reject the null hypothesis that there is a statistically significant difference in mean policy agreement based on if a respondent is religious or not.

T-test 4.7 examines whether there is statistically significant difference in how individuals perceive TCNJ's Covid-19 policies based on their experiences with Covid-19. The variable *nocovexp* looks for differences in agreement with policies between groups with no personal experience with Covid, versus respondents with personal experiences. *Nocovexp* is a dummy variable. 0 stands for no experience and 1 stand for experience. The t statistic is 1.0745, the degrees of freedom are 179, and the p-value is 0.2841. Based on this test we fail to reject the null hypothesis that there is a statistically significant difference between groups with personal experiences with Covid-19 when compared to those without.

The eighth t-test examines whether there is a statistically significant difference by gender in how TCNJ's Covid-19 policies, where *Male* is a dummy variable given a 0, and 'female' or 'other' are given a 1. The t statistic is -3.680, the degrees of freedom are 180, and the p-value is 0.003. Based on this test we reject the null hypothesis and conclude that there is a statistically significant difference in mean policy agreeance between males and non-males. The mean value for policy agreement with

males is 3.3088 and the mean if not a male is 4.026. This shows that those who are not male tend to agree with the college's Covid-19 policies more on average than males.

T-test 4.9 examines whether there is statistically significant difference in how non-health science majors and health science majors perceive TCNJ's Covid-19 policies, where *Nonhealthscience* is a dummy variable assigned a 0 to students who have a major unrelated to the health science fields, and 1 to School of Science, or the School of Health and Exercise Science, majors. The t statistic is -0.1956, the degrees of freedom are 180, and the p-value is 0.8451. Based on this test, we fail to reject the null hypothesis that there is a statistically significant difference in mean policy agreement between health and non-health science majors.

The tenth t-test examines whether there is a statistically significant in how those whose family members are vaccinated perceive TCNJ's Covid-19 policies. *Lessfamvax* is a dummy variable that represents how the degree to which the respondent's family is vaccinated. Less than half is assigned a 0, and half or more a 1. The t statistic is -3.1884, the degrees of freedom are 180, and the p-value is 0.0017. Based on this test we reject the null hypothesis and conclude that there is a statistically significant difference in mean policy agreement for groups who have more family vaccinated and who have less family vaccinated. The mean value for those with less family vaccinated is 2.5 and those with half or more than half is 3.8313. This shows that respondents with half or more of their families vaccinated are in greater agreement with TCNJ's Covid-19 policies.

T-test 4.11 tests examines whether there is a statistically significant difference in how Latino and non-Latino respondents perceive TCNJ's Covid-19 policies. The variable *latino* is a dummy variable. Those who identify as Latino receive a value of 1, and those who do not receive a value of 0. The t statistic is -2.1719, the degrees of freedom are 180, and the p-value is 0.0312. Based on this test we can reject the null hypothesis and conclude that there is a statistically significant difference in policy agreement between Latino and non-Latino respondents. Those who identify as Latino have a mean policy agreement of 4.25 and those who do not have a mean of 3.6688. This shows that those who are Latino agree with TCNJ's Covid-19 policies more than non-Latinos.

The 4.12 t-test examines whether there is a statistically significant difference in how TCNJ's Covid-19 policies are perceived by respondents with family and friends in better than fair health versus in less than fair health. This variable *famhealth* measures the implications of pre-existing health conditions with people to whom respondents are close. Better than fair health is represented by a 0 and worse than fair is represented by a 1. The t statistic is 0.2432, the degrees of freedom are 179, and the p-value is 0.8082. Based on this test we fail to reject the null hypothesis that there is a statistically significant difference between respondents that have family and friends with better than fair health and with less than fair health.

The final t-test examines whether that there is a statistically significant difference in how those with a household income above or below \$150,000 perceive TCNJ's Covid-19 policies. The variable

abovincome is a dummy variable. Respondents who report an annual household income of above \$150,000 received a 0, those who are unsure or report a value of under \$150,000 received a 1. The t statistic is -0.0669, the degrees of freedom are 140, and the p-value is 0.9468. We fail to reject the null hypothesis that there is a statistically significant difference in mean policy agreeance for those with a household income above \$150,000 and those with a household income under \$150,000.

Regression analysis:

Using our survey data, the following regression model was created to attempt to predict policy agreeance:

$$\text{polagree}_i = \alpha + \beta \text{republican}_i + \gamma_1 \text{oncampus}_i + \gamma_2 \text{male}_i + \gamma_3 \text{lessfamvax}_i + \gamma_4 \text{latino}_i + e_i$$

Here the dependent variable is *polagree*, which measures how much a respondent agrees with TCNJ's Covid-19 related policies., scored via a Likert scale between 1 and 5. The higher the agreement with TCNJ's policies, the larger the number. The independent variables in the model are *republican*, *oncampus*, *male*, *lessfamvax*, and *latino*. These explanatory variables were chosen due to their significant t-test results.

The output shows that the sum of squares (being the amount of variance explained by the regression) for the model is 84.3527. The residual sum of squares (amount of variance not explained by the model) is 225.8472. The output also shows the R-squared value as .2719. R-squared values range from 0 to 1. This means that 27.19% of agreement with TCNJ's Covid-19 policies can be explained by the chosen independent variables.

The R-squared value indicates that the regression model is weak, which undercuts its predictive value. The weak R-squared value does not, however, affect the model's ability to measure the relationship between the independent and dependent variables. The regression output shows that the variables *male*, *oncampus*, *republican*, and *latino* are statistically significant. *Male* has a coefficient of .55369, *oncampus* has a coefficient of -.5320, *republican* has a coefficient of 1.1809, and *latino* has a coefficient of .5022. These coefficients mean that if a respondent indicates that they are female, live on- campus, have a political affiliation other than Republican, or if they are Latino, then they will positively affect the response variable *polagree*.

7. Shortcomings and Challenges

While the results of our survey do shed light on how individuals react to described policies, the degree of insight provided should be assessed in the context of certain analytical and data shortcomings. One is the need to phrase questions to protect respondents, which limited the scope of quantitative and direct questions. For example, the inability to ask respondents directly how often they followed a given policy constrained our ability to quantify behavior. An additional challenge speaks to student participation. Due to specific requirements set by the IRB, we did not offer any raffles, treats, or extra credit for responding to the survey. Accordingly, all were volunteers, which was likely a substantial

factor in an observed low participation rate, and corresponding decrease in the expected sample size. This contributed to the smaller R-squared value.

The survey distribution timeline may also have impacted participation. Surveys could only be collected during the month of November due to TCNJ Covid-19 policy changes occurring in December because of the Omicron variant, which spread more quickly and was believed to be less severe. Due to Omicron and Delta's differences, responses from those months could be significantly different and alter the findings.

Another challenge was matching survey respondents to the overall demographics within TCNJ and, as previously noted, as to race we were unable to do so. This survey data therefore does not fully represent TCNJ's total student population.

8. CONCLUSION

T-tests and regression analysis were utilized to understand the impact of specific characteristics on respondents' agreement with TCNJ's Covid-19 policies. The survey measured whether or not respondents follow policies and why using demographics, trust, and quality-related measures. The aggregate details of the survey indicate that students follow TCNJ's Covid-19 policies because they are promulgated by TCNJ, suggesting that consequence avoidance for nonadherence in combination with trust in the administration drove compliance. As to trust, however, we observed that students trust the science behind Covid-19 vaccinations more than government agencies or TCNJ's administration, and that the belief (or lack thereof) in science loosely correlates even in an active college population with political self-identification.

Fear of Covid was the other reason for student compliance, which is logically linked to trust insofar as respondents who question the science would arguably be less fearful of the virus.

Unsurprisingly, students also reported a modest but discernible decrease in the quality of their college experience – at least socially - due to TCNJ's Covid-19 policies and, presumably, the reality of living through a pandemic.

Our t-tests are generally consistent with these survey findings. They reveal statistically significant differences in mean policy agreement between Republicans and Non-Republicans, males, and females, those with fewer family members vaccinated and those with more, those who are Latino versus other ethnic groups, and on and off campus residents. Our regression results show that being a female who lives on-campus, is not Republican, and is are Latino positively affects the response variable *polagree*.

Notably, several expected – and widely assumed - associations were not supported by the survey. Perhaps the most facially striking of these is the lack of a relationship between exposure to Covid-19 personally, or through a family member, and support for TCNJ's Covid-19 policies. One reason for this apparent disconnect may be disease severity. One could, for example, imagine one set of reactions

form an encounter with mortality or lingering, cognitive disability from Covid-19, and another set from a mild or even asymptomatic case with no readily long-term consequences.

Other observed non-associative characteristics include class year, current state of a respondent's own health, White versus Non-white (expecting the Latino subset), religiosity, whether the respondent was a Health Science major, and family income.

While this study is too narrow to support broad policy prescriptions, it does provide a narrow window into how the behavior and perceptions of students in college were (and were not) shaped by internal and external attributes – and makes plain that official policy and official consequences have, and likely will continue to, drive compliance in college populations.

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