Abstraction
Thomas Eric Duncan, age 42, died of the Ebola virus on October 8th, 2014, the first case on American soil. This sparked public concern about an outbreak in the United States. We conducted a 5-wave survey on a US web panel to follow risk perception of Ebola over 6 months. Using multilevel modeling, results showed that baseline (December 2014) perceived risk of Ebola for the U.S. was amplified among those who followed the news more closely, felt there was a high likelihood of a U.S. outbreak in the next five years, felt that the U.S. had had a near-miss with a large outbreak, or dreaded Ebola. However, there was a significant decline in U.S.-risk perception through May 2015. News following and feelings of a near-miss with a large outbreak were associated with greater decreases, and belief in a future outbreak with lesser decreases, in perceived U.S. risk.

Methods
The Decision Research web panel, a diverse sample of US citizens, was surveyed 5 times over the course of 6 months. Subjects were paid $4-$6 for each survey completion and a chance to win $100 for completing all 5 surveys. Survey 1 had 815 respondents. The final survey had 625 respondents.

Results - Baseline measures, December 2014

Results - Change over time & Dread of Ebola

Results - Multilevel Modeling

Conclusions

- U.S. risk perception one month after the last US death from Ebola (Nov. 2014) was predicted by news following (+), perceived dread of Ebola (+), “near miss” perceptions (+).
- Perceived risk declined linearly over time but this decline was moderated by “near miss” perceptions (+), news following (-), and perceived likelihood of an outbreak (+).
- Results support previous work on near-miss views of disasters (Dillon, Tinsley, & Burns 2014), dread as a predictor of risk (Fischhoff, Slovic, Lichtenstein, Read, & Combs, 1978), and the social amplification of risk (Kasperson et al., 1988).

Select References
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