Normalization and Civility: Attitudes and Trends Around Mask Wearing Among MacEwan Students in Fall 2024

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Abstract

COVID-19 remains a prominent threat years after its initial sweep across the globe. Despite this, public health measures have fallen to the wayside; vaccine supplies face delays, rapid test kits are difficult to access, and mask-wearing now lacks the attention it received years prior. In this project, I examined current attitudes and trends around mask-wearing among MacEwan University students. Using grounded theory (Starks & Trinidad, 2007), I conducted one focus group with three MacEwan students, and qualitative observations from three different locations at MacEwan University. Mask-wearing on campus has become less common overall, and the mask's once-salient status as an emotionally and politically charged symbol has lessened compared to previous pandemic years. Further, mask-wearing is not seen as a necessity to maintain public health or an intrusion on one's autonomy, but as an individual choice for individual protection, adopted only in particular circumstances. As COVID-19 and other health crises continue to threaten our health and well-being, examining current attitudes around mask-wearing and mask mandates can provide direction for further action to mitigate COVID-19 and prevent future pandemics.

Keywords: COVID-19, face masks, mask-wearing, public health, qualitative research

Introduction

Four years have passed since the first COVID-19 cases and ensuing lockdowns hit Alberta. Public health measures such as mask-wearing bylaws and stay-at-home mandates have been lifted, even though COVID-19 continues to circulate. COVID-19 cases, hospitalizations, and deaths rose with the Fall 2024 surge of respiratory viruses, vastly outpacing other viruses such as influenza (Lee, 2024). Testing for COVID-19 has become much less accessible; rapid test kit supplies are dwindling, and some establishments no longer offer kits to customers free of charge (Fikowski, 2024). Vaccine distribution also saw delays in 2024, with updated COVID-19 vaccines only available in Alberta by mid-October (Tran, 2024). As of late, mask-wearing has received little mainstream news attention compared to other COVID-19-related topics such as vaccines (Tran, 2024) and rapid tests (Fikowski, 2024), despite the continuing danger that COVID-19 poses (Government of Alberta, 2024, "Summary" section) and the relative ease with which people can wear masks to protect themselves and others (Cheng et al., 2022).

While ongoing mitigations against common illnesses are needed year-round, not having them in place during seasonal spikes in illness can be especially detrimental, overwhelming healthcare facilities and allowing viruses to continue spreading and mutating. In the wake of climbing COVID-19 statistics and weakened efforts to combat the virus compared to the first few years of the COVID-19 pandemic, I aim to investigate how mask-wearing is viewed and treated

nowadays. Especially without a formal mandate in place, such an investigation may provide avenues through which mask-wearing can once again become common practice in Alberta's COVID-19 management. In this study, I utilize a semi-structured focus group with three MacEwan University students and qualitative observations on the MacEwan campus, analyzed through grounded theory, to examine how MacEwan students view mask-wearing.

Literature Review

Current COVID-19 statistics in Alberta show that COVID-19 is still the most prevalent respiratory virus circulating in the province. Since August 25, 2024, Alberta has seen disproportionately more lab-confirmed cases of COVID-19 (over 6000 as of late November 2024) compared to other common respiratory viruses (about 300 each for influenza and respiratory syncytial virus) (Government of Alberta, 2024, "Summary" section). Further, compared to influenza and RSV respectively, COVID-19 has caused significantly more hospitalizations (1684 vs. 78 and 120), ICU admissions (89 vs. 7 and 20), and deaths (178 vs. 3 and 0) (Government of Alberta, 2024, "Summary" section). These statistics, of course, do not include COVID-19 cases that have either gone unconfirmed, have been confirmed through at-home rapid tests, or have been treated or recovered from without hospital stays or more intensive intervention. They also do not include cases in which a hospitalized person has tested positive for COVID-19, but their hospital stay was "unrelated" to COVID-19 and therefore not published as a COVID-19 hospitalization (Lee, 2024, para. 11). Despite these statistics, mitigation efforts against COVID-19 such as vaccinations, social distancing, and mask-wearing have all lacked news coverage and policy attention compared to 2020. Of those mitigation efforts, wearing masks or face coverings has been lauded as one of the cheapest and most accessible methods to curb the spread of COVID-19 (Cheng et al., 2022; Courtice et al., 2023). Some establishments and governments have required them in the past, including the city of Edmonton, which mandated mask-wearing between August 2020 and March 2022 (*Temporary Mandatory Face Coverings Bylaw*, 2021; Gibson, 2022).

Beyond its literal use, the mask has been an object of contention throughout the pandemic, symbolizing more than just protection from COVID-19. On the one hand, the mask has been heavily associated with politics, especially in Canada and the United States of America. Two studies, one conducted in each country, found correlations between conservative or right-wing political leanings and a lower frequency of mask-wearing (Courtice et al., 2023; Gonzalez et al., 2021). Both studies found that respondents' attitudes toward and frequency of mask-wearing correlated with loyalties toward particular political figures. Conservative respondents in the USA, especially ones that voted for then-president Donald Trump, often refused to wear a mask (Gonzalez et al., 2021, p. 2378), and liberal respondents in Canada reported mask-wearing more frequently after Prime Minister Justin Trudeau recommended it in a public statement in May 2020 (Courdice et al., 2021, p. 10). These studies paint a telling picture of how politicized mask-wearing has become and how politics have drastic consequences for public health crises such as the COVID-19 pandemic.

On the other hand, the mask has also been associated with altruism, care, and selflessness (Cheng et al., 2022; Hanna et al., 2022). While this does help to advertise

mask-wearing as a mitigation strategy, this association has been to the detriment of those exempt from mandatory mask-wearing and those who find wearing masks stress-inducing. Disabled interviewees in the United Kingdom reported multiple negative experiences associated with mask-wearing mandates. Many respondents were exempt from those laws and did not have to wear a mask, but felt they were required to disclose their disability to justify their exemption (Hanna et al., 2022, p. 1491). Some reported being aggressively confronted by others, or fearing they would be, because they were exempt (Hanna et al., 2022, p. 1493). A quantitative study in Canada found that people who struggled with certain anxiety symptoms were likely to find wearing masks physically uncomfortable and emotionally distressing (Carney et al., 2024, p. 192). Both these above studies suggest that physical discomfort when wearing a mask and emotional distress associated with mask-wearing leads people to isolate at home to avoid that discomfort, even when stay-at-home mandates are not in place (Carney et al., 2024; Hanna et al., 2022). These moralizing discourses around mask-wearing have lacked nuance when it comes to people who have trouble wearing or cannot wear a mask, ostracizing them as bad or uncaring people despite their exemptions or discomfort.

Most of the literature reviewed here is quantitative; thus, it is limited by its broad scope and cannot fully capture individuals' thoughts and opinions on mask-wearing. The qualitative research included here is specific to disabled people in the UK and may not apply to other demographics, such as university students in Alberta. With COVID-19 still circulating four years after the pandemic started, further study must be conducted to examine current mitigation efforts, especially in environments where the spread of illness is likely to spike, such as on university campuses at the start of term. Conducting COVID-19-related research in university environments—places of education, critical thinking, and academic advancement—is especially crucial to diversifying the topic's landscape. As well, the literature reviewed here lacks a cohesive framework to unite the concepts they cover, such as altruism and political disparity. In this project, I will amend this lack of cohesion by using grounded theory to guide my analysis and discussion below. Through qualitative observations on campus at MacEwan University and a focus group with current MacEwan students to investigate recent trends and attitudes surrounding mask-wearing, I aim to explain: How do MacEwan University students view mask-wearing four and a half years after the rise of COVID-19?

Methods

Methodology

Because previous literature on this topic lacked a unifying framework to cover each concept that was investigated, I utilized grounded theory for this project. Grounded theory is an open methodology that allows for core themes to emerge organically from the data, by requiring the researcher to be a "faithful witness to the accounts [within]" (Starks & Trinidad, 2007, p. 1376). While themes from previous literature did also emerge, as will be discussed below, grounded theory opened my analysis to new concepts that had not been previously investigated, thereby allowing me to develop an original framework that could better unite previous and current concepts within the topic of mask-wearing against COVID-19.

Focus Group with Students

I conducted a focus group with three MacEwan students from my SOCI 418 class. Through said focus group, I could ask participants from my target population (current MacEwan University students who attend classes in-person) directly about their opinions on mask-wearing (Kamberelis & Dimitriadis, 2013). I used purposive and convenience sampling to recruit three students from my SOCI 418 class to participate in the focus group. Recruitment was done during one of our seminars in late October 2024; all students volunteered to participate in one another's focus groups based on their interest in and knowledge of the topics in question. I specifically asked for students with personal experiences wearing masks during the COVID-19 lockdown from 2020-2022 and chose the first three students who volunteered to participate.

The focus group was held one week after recruitment in a classroom on campus; participants were briefed on the project's goals, the risks and benefits associated with the focus group, and the right to withdraw from the study. I then ensured that they had all signed the class-wide consent form to participate in students' focus groups for the course. I recorded the focus group using an audio recorder, and one of my fellow students in the class acted as an observer to take notes on the participants' gestures, body language, facial expressions, and other group dynamics that the audio recorder would not have picked up. During the focus group, I asked the participants about their memories and feelings about the COVID-19 pandemic in general, and mask-wearing more specifically. The focus group ran for just over 40 minutes.

Complete-Observer Observations

To complement the smaller scale of the focus group, I qualitatively observed an estimated one thousand students as they travelled through MacEwan's campus. Complete-observer observations meant I could observe students' habits related to mask-wearing and social distancing from an outside perspective, without influencing their actions (Murchison, 2010, p. 85). I conducted my observations at three locations on the MacEwan campus that I deemed 'high-traffic' based on the high volume of students I regularly see visiting or passing through those areas when I attend campus. These observations took place over three days in late October and early November 2024, for three separate periods of one hour and thirty minutes, between my scheduled classes. The first period took place on a Monday from 11:00 am to 12:30 pm on the second floor of Allard Hall, facing south toward the main atrium. This view gave me a line of sight onto all five floors of the building, the many staircases that crisscross between each one, and the sliding doors that face 104th Avenue. The second period took place on a Wednesday from 1:45 pm to 3:15 pm on the first floor of Building 5. I sat against the railing overlooking the science labs in the basement and faced south, with the gender-neutral bathrooms and east-most exit on my left, and the elevator and doors to Building 6 on my right. The third period also took place on a Wednesday, from 1:15 pm to 2:45 pm on the second floor of the SAMU building. I sat in the front of the kitchen area and faced south. To my right was the pedway to Building 9 (the Robbins Health Learning Centre), to my left was the pedway to Building 8 (the Christenson Family Centre for Sport and Wellness), and in front of me were three restaurants and the SAMU Lookout.

My sample included all students, staff, and visitors standing in or moving through the hallways at each of my observation sites; based on my own experience travelling through the MacEwan campus, I assumed that the majority of these observed individuals would be students. While recording my observation notes, I assumed the students' gender based on hegemonic gender norms such as estimated height (around 170 cm or taller = male, around 160 cm or shorter = female) (Statistics Canada, 2020), hair length (above the shoulders = male, at or below the shoulders = female), clothing (bulky hoodies, sports jerseys, brand name athletic shoes = male; skirts, dresses, and colours like pink and purple = female), and voice pitch (lower pitch = male, higher pitch = female). I also judged whether students were travelling together based on their direction of travel (same vs. different direction), proximity and body contact (closer proximity and contact = travelling together), and if they were talking to each other while travelling. I noted what directions students were travelling; if they were travelling in pairs, in groups, or alone; how large said groups were; the proximity within and between groups; and which students wore masks. For those mask-wearing students, I also noted the type and colour of their masks (e.g. white KN95, grey fabric, etc.).

Ethical Considerations

This project was approved on ethical grounds by the MacEwan University Research Ethics Board on August 7, 2024. Upon starting SOCI 418, all students were made aware that their participation in the course necessitated both the participation in and the conduction of a focus group, and were provided with a class-wide informed consent form to fill out prior to participation. I ensured the participants in my focus group were well aware of their right to ask questions and to withdraw their data from the study, and gave them ample opportunity to do so before writing this report. Because the focus group was face-to-face, I could not secure the participants' anonymity; instead, while writing this report, I excluded any identifying information about the participants to maintain their confidentiality (Berg & Lune, 2012, p. 93). After completing the focus group and ending the audio recording, the recording was kept on a password-protected computer and deleted from the recorder; the observer's notes were kept on that same password-protected computer and deleted from the observer's computer after I received them. I transcribed the audio recording verbatim over the following week, referring to the observer's notes (and including some of them in the transcription) when participants' tones and intended meanings weren't clear based on audio alone. Once my transcription was complete, I deleted both the recording and the observer's notes. My complete-observer observations took place at MacEwan University, a publicly accessible space. While doing my complete-observer observations, I remained as detached and uninvolved as possible; I stayed in my chosen spot for the entire hour-and-a-half duration of each period, did not speak to any students as they passed by, and did not stare at particular students longer than needed to record my notes. As such, Research Ethics Board approval was not needed for my observations.

Data Analysis

Data from both the focus groups and the observations were put into MAXQDA, a qualitative data analysis software, where I analyzed the data by coding line-by-line and writing memos to

clarify the codes and record any questions that arose during the process. The focus group transcription was analyzed most openly, with verb-based initial coding to intimately dissect the participants' accounts (Charmaz, 2014, p. 112). After initial coding, I consolidated the codes based on repetition (i.e. "masking on the job" plus "wearing a mask while working"), related ideas (i.e. "masking = personally offensive" and "having strong opinions about masking"), and finally, recurring overall themes. The observations did not require as much open coding because of the repetitive nature of the notes I took. I coded for gender, intra-group distance, inter-group distance, and mask-wearing students during the initial coding. While initially consolidating and analyzing these codes, no differences emerged between students that I observed as male versus female. As such, I removed gender as a determining factor and only analyzed group size, distance between people (groups aside), and types of masks worn. Throughout, I compared either set of data to locate recurring themes in both.

Results

Overall themes in the findings were primarily derived from the focus group data, which then guided the analysis of the observation data. Participants in the focus group discussed mask-wearing regarding when and why they wore masks, how mask-wearing indicated one's care for others, their encounters with those who opposed mask-wearing, and their overall preferences when wearing masks.

"A Time and a Place"

After Edmonton's city-wide mandate was lifted, focus group participants did not stop wearing masks altogether, but instead only wore masks in specific circumstances. All three participants wore masks while working at their jobs, when they were ill "even outside of COVID-19" (Participant 1), and when visiting places that required them, such as health clinics. Participant 3 showed marked understanding for the latter circumstance: "If it's somewhere and they're like, 'we prefer it' or 'please,' absolutely." Participant 2 recalled the frustration of looking for a mask to wear after supplies dwindled post-mandate: "I was going on a plane and I was a little sick, so I was gonna wear a mask, and I literally couldn't find one. . . . They had them at the airport, but they were like, ten dollars for one." Even after the city government ruled that mask-wearing wasn't mandated, participants still considered mask-wearing crucial to prevent themselves from getting sick and keep others from getting sick as well, COVID-19 or otherwise.

During the observations, students wearing masks were the minority, with only 33 out of the estimated one thousand students (3.3%) wearing some kind of mask. The reasons why those people were wearing masks could not be ascertained during the observations; they may have been ill at the time, had contact with someone who may have been ill, or preferred to wear a mask for personal protection. Regardless of the reason, mask-wearing on campus proved to be much less prevalent than earlier in the pandemic—according to the focus group participants—despite the continuing spread of COVID-19. Other places that still mandate or encourage mask-wearing, such as healthcare facilities, may have a higher percentage of people wearing masks compared to the MacEwan campus, being perceived as the 'time and place' to wear one.

"Inconvenience at Worst… Preventative Measure at Best"

Besides wearing a mask themselves when necessary to keep others safe, participants also praised others for wearing masks, emphasizing that it keeps people safe and indicates solidarity with others in the "chaos" (Participants 1 and 3) of the COVID-19 pandemic. "It makes people feel safer, it looks like you're trying to do at least something, do your part, whatever. Like, the world is crazy, we're trying our best to be kumbaya" (Participant 3). Even post-lockdown and post-mandate, the mask continues to symbolize altruism (Hanna et al., 2022).

During observations, mask-wearers were not treated any differently as they travelled on campus. Most masked people travelled alone, but some did travel as part of groups, with their mask-wearing making no visible impact on how they interacted with the group. People in groups with a mask-wearer still maintained close proximity with them (1 foot of distance on average) and sometimes made bodily contact with them by fist bumping or holding hands; mask-wearers likewise did not shy away from such proximity or contact. Overall, mask-wearing seems to be normalized at MacEwan—at least tolerated, if not respected.

"More Feelings on People's Feelings"

Participants recalled how mask-wearing had become an issue of politics and personal freedom, not just a method to slow the spread of COVID-19. Participant 3 remembered how, during Edmonton's mask-wearing mandate, some people not only refused to wear a mask, but also physically confronted those who were wearing masks. "People would come up and be like, offended that they're wearing a mask and they have opinions on . . . what they're doing with their body." Participant 1 added that, because of those people's strong anti-mask beliefs, "people wearing masks were actually like, more approachable than people not wearing masks." These accounts were all from years ago; participants couldn't recall any recent mask-related confrontations, whether toward themselves or someone else. They agreed that mask-wearing has become more normalized, and perhaps less politicized than it has previously been (Courtice et al., 2023; Gonzalez et al., 2021).

As mentioned before, there were no visible acknowledgements made by anyone observed regarding someone's mask or lack thereof. People also made no efforts to move out of the way of people wearing masks, even if there was enough space to do so. Observed students may have held anti-mask beliefs, but there were no outward confrontations like what the focus group participants discussed. The fact that there are no active mask mandates at MacEwan University may have influenced this: because mask-wearing is not being enforced on campus, those who want to wear a mask can do so without confrontation, and those who do not want to wear one are free to do so as well.

Mask Preferences

Surgical masks were most common among the observed students, with 15 out of 33 masked students wearing a surgical mask. Participant 1 considered the surgical mask their default when choosing what mask to wear, calling it "normal" and "classic." Both Participants 1 and 2 preferred black surgical masks to light blue ones because they looked more aesthetically

pleasing. In contrast, only 2 of the 15 observed people wearing surgical masks wore black ones; the rest were light blue, affirming blue surgical masks as the default/"classic" mask.

N95 and KN95 masks were the next most common, with 14 out of 33 people wearing either type. Focus group participants shared similar sentiments about KN95 masks being "the fancy ones" (Participant 1) and "hardcore" (Participant 3). Participant 1 heavily established KN95s as their least favourite type of mask: "I look like . . . I should wear like, a hazmat suit, almost? . . . . It just makes me look almost like— like scary or something. Like I'm on the cover of like, a zombie [film]." Applying the same sentiments to the observed students, they may have preferred N95s and KN95s for the "hardcore" protection that they offered.

All three participants vastly preferred reusable fabric masks, praising their customizability in aesthetic style and sizing. Participant 3 emphasized that reusable masks became an accessory to coordinate with the rest of their outfits: "'What am I feeling today . . . who am I going to see?' It's gonna dictate my mask choice." Participant 2 called reusable masks "game-changer[s]" because they could fit their face more comfortably than surgical or KN95 masks, which helped immensely when they had to wear a mask for long spans of time. Comparatively, reusable masks were the least common masks observed, with only 4 out of 33 mask-wearing people wearing a reusable mask. Two of those reusable masks were black, one was grey, and one was salmon pink. The lack of colour variety in these masks does not negate the focus group participants' emphasis on style in reusable masks. Rather, it aligns with Participants 1 and 2's aesthetic preference for black surgical masks, once again putting aesthetics to the forefront for the observed students in question (Appendix A).

Discussion

Mask-wearing to protect oneself and others from illness still occurs at MacEwan University four and a half years post-COVID-19 lockdown, though those who do wear masks are a small minority among the thousands of students who frequent MacEwan's campus. At least according to the focus group participants, mask-wearing is still seen as an act that signals a person's effort to care for others in chaotic times; they praised people who wore masks both during Edmonton's mask-wearing mandate between 2020 and 2022, and recently with no mandate in place. That latter point—the fact that people still wear masks because they choose to, rather than to comply with a bylaw—especially demonstrates how the mask still represents selflessness and care today (Cheng et al., 2022; Hanna et al., 2022). These mask-as-altruism attitudes weren't apparent during my observation sessions, especially because there were no mask-wearing mandates in place, institutionally or governmentally, over which to confront people who weren't wearing masks (Hanna et al., 2022) or commend people who were. Even so, the continuance of mask-wearing suggests some awareness within the MacEwan student body that COVID-19 is still a danger to protect oneself against, or that masks can help to prevent other illnesses, too.

Focus group participants also discussed how they associated the face mask with politics, specifically linking the refusal to wear a mask with right-wing politics (Courtice et al., 2023; Gonzalez et al., 2021). However, they tended to do so in the past tense, indicating that the mask is not as salient a political symbol as it was when the lockdowns or mask-wearing mandates were in effect. Face-to-face confrontations over mask-wearing—politically charged or

otherwise—also did not occur during the observation periods. One might want to say that anti-mask views are therefore on the decline, but such attitudes may very well still be present. Instead, at least on the MacEwan campus, people may be less willing to outwardly express their anti-mask attitudes than they might be through other platforms such as anonymous surveys (Courtice et al., 2023; Gonzalez et al., 2021). Without government mandates in place to "tell [people] what to do" (Participant 3), mask-wearing has apparently lost its potential to cause conflicts that it once held during the first few years of the pandemic. If a new mask mandate were to be instated, however, such politically charged conflicts may once again occur, regardless of how necessary and effective that mandate would be to curb the continuing spread of COVID-19.

Most noteworthy within my results, and yet unexplored in previous literature, is the civility surrounding mask-wearing at MacEwan University. Focus group participants discussed the political contention around mask-wearing in the past tense, but discussed the selflessness and care that comes with mask-wearing in both the past and present tense, indicating the latter's continuing relevance. The participants' discussion of aesthetics when it comes to mask-wearing further indicates that the mask has become an everyday part of people's lives. Rather than something required via mask-wearing mandates, people can more easily choose whether to wear a mask—as well as what type, according to their tastes—at their discretion and without fear of confrontation. During my observation periods, students wearing masks were seamlessly integrated with the rest of the student body; they made no concerted effort to avoid closer proximity or physical contact with students not wearing masks, and vice versa for students not wearing masks. Mask-wearing students are still the minority, but they blend in, rather than stand out, and are not ostracized or subjugated (at least, not openly) for wearing masks. In both the focus group and the observations, mask-wearing appears to be normalized, rather than problematized. Whether this normalization is due to the lack of institutional or governmental mandates, the particular environment of the university, the amount of time that has passed since the COVID-19 pandemic's onset, a combination of those, or some other factor, remains to be further investigated.

Conclusion

This study investigated current trends and attitudes about mask-wearing among MacEwan students. Students who still regularly wear masks on campus are a small minority, but are not regarded any differently than those who do not regularly wear masks. For some students, the mask still endures as a symbol of political differences (though less prominently now compared to when mask-wearing mandates were in effect) and consideration for others' well-being. Compared to what was observed at MacEwan University, mask-wearing may be more common in some circumstances than others, such as when visiting health facilities, or when one is sick and wishes to protect others from catching their illness. Overall, with little attention from government bodies, institutions, and mainstream news outlets, mask-wearing has been normalized as an individual choice rather than a collective requirement to either follow or rally against. Where the mask once stood out as an object of debate and conflict, as demonstrated by previous literature on the subject, it is now a commonplace accessory to see out in public,

and the minority of people still wearing masks are treated with civility rather than harassed, questioned, or otherwise marginalized.

While this study adds more recent qualitative data to the ongoing academic conversation around mask-wearing and COVID-19, it was limited in time and scale for both data collection methods. Only one three-person focus group was conducted; the data thus lacks generalizability. As well, I was already familiar with the participants through our SOCI 418 course, and all our grades in the course were dependent on participating in and conducting focus groups; both our familiarity and the use of coercion within the course presented conflicts of interest for this study. The observation time totalled 4.5 hours, in only three locations across campus, over three days in late October and early November. Because I was the only observer during the observations, I may have missed some data that would have altered the results. Longer observation sessions, conducted over multiple weeks or months, with multiple researchers to cross-reference their findings, would have also changed the final results. Overall, I completed this project within three months; the turnaround was very tight compared to the depth of the data I gathered for analysis. If I had more time and attention for the project, from the literature review and data collection to coding and thematic analysis, I would have also produced more nuanced results.

Future research into mask-wearing and COVID-19 could take multiple forms. As previous research has been primarily quantitative in nature, more qualitative research would better diversify the topic's academic landscape. Within university settings, qualitative surveys could reach a larger student population than focus groups while still asking them directly for their opinions on mask-wearing. Said surveys could be conducted in multiple universities, with results compared between student bodies, potentially on an annual or semi-annual basis to examine how student attitudes change over those years. Such research could also be conducted in non-university environments, such as health facilities, businesses, or public schools, to see how attitudes compare between environments.

Continuing research on mask-wearing is vitally important when considering the ongoing risk that COVID-19 poses years after its initial sweep across the globe. While this project does not provide definitive predictions on the future of mask-wearing, the results do provide some possible directions for future policies and campaigns surrounding mask-wearing, should it ever need to be mandated again. Most critically, to further encourage mask-wearing, we should continue framing mask-wearing as a selfless and compassionate act, decenter or directly combat any political divides that may reappear because of new mask-wearing mandates, and improve ease of access to a variety of mask styles and colours that people can choose from according to personal preference. By continuing to investigate mask-wearing attitudes, especially regarding this shift from a symbol of conflict to an everyday accessory, we can tailor future public health campaigns to foster and maintain this normalization and civility detailed herein. With this data in hand, we can better equip ourselves to foster collective action against COVID-19, and other health crises when they inevitably arise.

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Appendix A:

	White	Black	Grey	Light Blue	Salmon Pink
Surgical mask		2		13	
N95 mask	3	5			
KN95 mask	4	2			
Fabric mask		2	1		1