

AAPI COVID-19 Needs Assessment Survey

Q1) What is your race? *Select all that apply.*

- ☐ Asian
- ☐ Native Hawaiian or Pacific Islander
- ☐ Native American or Alaskan Native
- ☐ African American or Black
- ☐ White, Non-Hispanic/Latino
- ☐ Hispanic/Latino
- ☐ Middle Eastern or North African

Q2) How important is/are your race(s) to your identity?

- ☐ Extremely important
- ☐ Very important
- ☐ Somewhat important
- ☐ Not at all important

Q3) **Only answer this question if you selected “Asian” in Q1:** What term(s) best express how you describe your ethnic identity *Select all that apply.*

- ☐ Chinese
- ☐ Filipino
- ☐ Indian
- ☐ Vietnamese
- ☐ Korean
- ☐ Japanese
- ☐ Pakistani
- ☐ Cambodian
- ☐ Hmong
- ☐ Thai
- ☐ Laotian
- ☐ Bangladeshi
- ☐ Burmese
- ☐ Indonesian
- ☐ Nepalese
- ☐ Sri Lankan
- ☐ Malaysian
- ☐ Bhutanese
- ☐ Mongolian
- ☐ Okinawan
- ☐ Other, please specify: _____

Q4) Only answer this question if you selected “Native Hawaiian or Pacific Islander” in Q1: What term(s) best expresses how you describe your ethnic identity? *Select all that apply.*

- ☐ Native Hawaiian
- ☐ Samoan
- ☐ Tongan
- ☐ Fijian
- ☐ Marshallese
- ☐ CHamoru
- ☐ Chuukese
- ☐ Other, please specify: _____

Q5) How important is your ethnicity to your identity?

- ☐ Extremely important
- ☐ Very important
- ☐ Somewhat important
- ☐ Not at all important

Q6) Which of the following do you need more help getting during the COVID-19 pandemic? *Select all that apply.*

- ☐ Food
- ☐ Housing
- ☐ Utilities (electricity, gas, water, sewer, trash collection, phone, cable)
- ☐ Internet/Wi-Fi
- ☐ Unemployment services
- ☐ Health services
- ☐ Mental health services
- ☐ Emergency services (EMS, Fire, Police)
- ☐ Legal assistance
- ☐ Childcare
- ☐ Faith-based or spiritual care
- ☐ Other, please specify: _____
- ☐ None of the above

Q7) How has the COVID-19 pandemic impacted your family's life? *Select all that apply.*

- ☐ Unable to access healthcare
- ☐ We lost work/jobs
- ☐ We lost income
- ☐ Facing discrimination
- ☐ Impacted my social/religious activities
- ☐ Disrupted education of me or my family members
- ☐ Other, please specify: _____
- ☐ None of the above

Now we are going to ask about your employment.

- Q8)** Have you, or has anyone in your household experienced a loss of employment income **since March 13, 2020**? *Select only one answer.*
- ☐ Yes
 - ☐ No
- Q9)** Do you expect that you or anyone in your household will experience a loss of employment income in the **next 4 weeks** because of the COVID-19 pandemic? *Select only one answer.*
- ☐ Yes
 - ☐ No
- Q10)** In the **last 7 days**, did you do **ANY** work for either pay or profit? *Select only one answer.*
- ☐ Yes
 - ☐ No
- Q11)** *Only answer this question if you selected “Yes” for Q10:* Are you employed by government, by a private company, a nonprofit organization or were you self-employed or working in a family business? *Select only one answer.*
- ☐ Government
 - ☐ Private company
 - ☐ Non-profit organization including tax exempt and charitable organizations
 - ☐ Self-employed
 - ☐ Working in a family business
- Q12)** *Only answer this question if you selected “No” for Q10:* What is your main reason for not working for pay or profit? *Select only one answer.* I did not work because:
- ☐ I did not want to be employed at this time
 - ☐ I am/was sick with COVID-19 symptoms
 - ☐ I am/was caring for someone with COVID-19 symptoms
 - ☐ I am/was caring for children not in school or daycare
 - ☐ I am/was caring for an elderly person
 - ☐ I was concerned about getting or spreading COVID-19
 - ☐ I am/was sick (not COVID-19 related) or disabled
 - ☐ I am retired
 - ☐ My employer experienced a reduction in business (including furlough) due to the COVID-19 pandemic
 - ☐ I am/was laid off due to the COVID-19 pandemic
 - ☐ My employer closed temporarily due to the COVID-19 pandemic
 - ☐ My employer went out of business due to the COVID-19 pandemic
 - ☐ Other; please specify: _____
- Q13)** *Only answer this question if you selected “No” for Q10:* Are you receiving pay for the time you are not working? *Select only one answer.*
- ☐ Yes, I use paid leave
 - ☐ Yes, I receive full pay but do not have to take leave
 - ☐ Yes, I receive partial pay
 - ☐ No, I receive no pay

Q14) Getting enough food can also be a problem for some people. Which of these statements best describes the food eaten in your household before **March 13, 2020**? *Select only one answer.*

- ☐ Enough of the kinds of food I (we) wanted to eat
- ☐ Enough, but not always the kinds of food I (we) wanted to eat
- ☐ Sometimes not enough to eat
- ☐ Often not enough to eat

Q15) In the **last 7 days**, which of these statements best describes the food eaten in your household? *Select only one answer.*

- ☐ Enough of the kinds of food I (we) wanted to eat
- ☐ Enough, but not always the kinds of food I (we) wanted to eat
- ☐ Sometimes not enough to eat
- ☐ Often not enough to eat

Q16) *Only answer this question if you **did not** select option 1 in Q15:* Why did you not have enough to eat (or not what you wanted to eat)? *Select all that apply.*

- ☐ Couldn't afford to buy more food
- ☐ Couldn't get out to buy food (for example, didn't have transportation, or had mobility or health problems that prevented you from getting out)
- ☐ Afraid to go or didn't want to go out to buy food
- ☐ Couldn't get groceries or meals delivered to me
- ☐ The stores didn't have the food I wanted
- ☐ None of the above

Q17) How confident are you that your household will be able to afford the kinds of food you need for the **next four weeks**? *Select only one answer.*

- ☐ Not at all confident
- ☐ Somewhat confident
- ☐ Moderately confident
- ☐ Very confident

Q18) What is your height?

- ☐ In inches: _____
- ☐ OR in centimeters: _____
- ☐ Don't know
- ☐ Decline to state

Q19) What is your weight?

- ☐ In pounds: _____
- ☐ OR in kilograms: _____
- ☐ Don't know
- ☐ Decline to state

Q20) Please write what your age was (in years) on **January 1, 2021**: _____

Q21) **Before the COVID-19 pandemic** (before March 13, 2020), would you say your health in general was excellent, very good, good, fair, or poor? *Select only one answer.*

- ☐ Excellent
- ☐ Very good
- ☐ Good
- ☐ Fair
- ☐ Poor

Q22) **Currently**, would you say your health in general is excellent, very good, good, fair, or poor? *Select only one answer.*

- ☐ Excellent
- ☐ Very good
- ☐ Good
- ☐ Fair
- ☐ Poor

Q23) Over the **last 7 days**, how often have you been bothered by **feeling nervous, anxious, or on edge**? *Select only one answer.*

- ☐ Not at all
- ☐ Several days
- ☐ More than half the days
- ☐ Nearly every day

Q24) Over the **last 7 days**, how often have you been bothered by **not being able to stop or control worrying**? *Select only one answer.*

- ☐ Not at all
- ☐ Several days
- ☐ More than half the days
- ☐ Nearly every day

Q25) Over the **last 7 days**, how often have you been bothered by **having little interest or pleasure in doing things**? *Select only one answer.*

- ☐ Not at all
- ☐ Several days
- ☐ More than half the days
- ☐ Nearly every day

Q26) Over the **last 7 days**, how often have you been bothered by **feeling down, depressed, or hopeless**? *Select only one answer.*

- ☐ Not at all
- ☐ Several days
- ☐ More than half the days
- ☐ Nearly every day

Q27) Have you ever been told by a doctor or nurse that you have: *Select all that apply?*

- ☐ High blood pressure (hypertension)
- ☐ Diabetes (not including pre-diabetes)
- ☐ Cardiovascular disease (including blocked or hardening of the arteries, angina, or chest pain, heart attack, stroke or mini stroke)
- ☐ Congestive heart failure
- ☐ Lung disease [asthma or COPD (emphysema, chronic bronchitis)]
- ☐ Cancer that you are getting treatment for now
- ☐ Autoimmune disease (like lupus, rheumatoid arthritis, psoriasis)
- ☐ Kidney disease, including weak or failing kidneys (Do NOT include kidney stones or problems with urinating)
- ☐ Low immunity (on any medication that decreases your immunity, such as for a transplant or an immune disease)
- ☐ Anxiety
- ☐ Depression
- ☐ Post-traumatic stress disorder (PTSD)
- ☐ Other mental health conditions
- ☐ None of the above

Q28) How have you changed your food habits since the COVID-19 pandemic? *Select all that apply.*

- ☐ Did not change my food habits
- ☐ Started using online grocery and food delivery
- ☐ Ordering food from restaurants or takeout more
- ☐ Ordering food from restaurants or takeout less
- ☐ Meal rationing/skipping meals
- ☐ Using food pantry or food bank
- ☐ Using city or community-based organization food delivery program like Meals on Wheels
- ☐ Getting food from my child/children's school
- ☐ Getting food from neighbors
- ☐ Eating or using expired or spoiling food
- ☐ Cooking more at home
- ☐ Cooking less at home
- ☐ Other; please specify: _____

Q29) Compared to before COVID-19, are you **exercising (being physically active)** less, more or the same?

- ☐ A lot less
- ☐ Somewhat less
- ☐ The same
- ☐ Somewhat more
- ☐ A lot more

Q30) Compared to before COVID-19, are you **sedentary/sitting** more, less or the same amount as you were before?

- ☐ A lot less
- ☐ Somewhat less
- ☐ The same
- ☐ Somewhat more
- ☐ A lot more

Q31) What have been your greatest sources of stress from the COVID-19 pandemic? *Select all that apply.*

- ☐ Physical health concerns
- ☐ Mental health concerns
- ☐ Financial concerns
- ☐ Housing concerns
- ☐ Transportation concerns
- ☐ Caregiving responsibilities (for example, caring for children, family members)
- ☐ Impact on work
- ☐ Impact on your child
- ☐ Impact on your community
- ☐ Impact on family members
- ☐ Access to food
- ☐ Access to baby supplies (e.g., formula, diapers, wipes)
- ☐ Access to clean water for hand washing etc.
- ☐ Access to personal care products or household supplies
- ☐ Access to medical care, including mental health care
- ☐ Social distancing or being quarantined
- ☐ Discrimination due to my race/ethnicity
- ☐ I am not stressed about the COVID-19 pandemic
- ☐ None of the above

- Q32)** What have you done to cope with your stress related to the COVID-19 pandemic? *Select all that apply.*
- ☐ Talking with friends and family (e.g., by phone, text, or video)
 - ☐ Talking to my healthcare providers more frequently, including mental healthcare provider (e.g., therapist, psychologist, counselor)
 - ☐ Meditation and/or mindfulness practices
 - ☐ Religious or spiritual practices (e.g., praying, reading religious texts)
 - ☐ Television watching or other "screen time" activities (e.g., video games, social media)
 - ☐ Hobbies and indoor activities (e.g., painting, playing a musical instrument, reading, cooking/baking)
 - ☐ Participated in civic engagement activities (e.g., joined/participated in a community organization, registered to vote, organized/advocated for my community, attended a protest, contacted an elected official)
 - ☐ Exercise (e.g., running, walking, sports, dance)
 - ☐ Eating, including snacking
 - ☐ Sleeping, including napping or lying down in bed
 - ☐ Drinking alcohol
 - ☐ Using tobacco (e.g., smoking, vaping)
 - ☐ Using marijuana (e.g., vaping, smoking, eating) or cannabidiol (CBD)
 - ☐ Other, please specify: _____
 - ☐ I have not done any of these things to cope with the COVID-19 pandemic
- Q33)** Since becoming aware of the COVID-19 pandemic, how often have you felt happy and satisfied with your life?
- ☐ Not at all
 - ☐ Rarely
 - ☐ Sometimes
 - ☐ Often
 - ☐ Very Often
- Q34)** Are you currently covered by any of the following types of health insurance or health coverage plans? *Select all that apply.*
- ☐ Insurance through a current or former employer or union (through yourself or another family member)
 - ☐ Insurance purchased directly from an insurance company, including marketplace coverage (through yourself or another family member)
 - ☐ Medicare, for people 65 and older, or people with certain disabilities
 - ☐ Medicaid, Medical Assistance, or any kind of government-assistance plan for those with low incomes or a disability
 - ☐ TRICARE or other military health care
 - ☐ VA (including those who have ever used or enrolled for VA health care)
 - ☐ Indian Health Services
 - ☐ Other
 - ☐ I am not currently covered by any health insurance or health coverage plan
- Q35)** At any time in the **last 4 weeks**, did you DELAY getting medical care because of the COVID-19 pandemic? *Select only one answer.*
- ☐ Yes
 - ☐ No
 - ☐ I did not have any medical needs in the last 4 weeks
- Q36)** At any time in the **last 4 weeks**, did you need medical care for something other than COVID-19, but DID NOT GET IT because of the COVID-19 pandemic? *Select only one answer.*
- ☐ Yes
 - ☐ No
 - ☐ I did not have any medical needs in the last 4 weeks

- Q37)** In what ways has the COVID-19 pandemic affected your overall healthcare? *Select all that apply.*
- ☐ I did not go to healthcare appointments because I was concerned about entering my healthcare provider's office
 - ☐ My healthcare provider canceled appointments
 - ☐ My healthcare provider changed to phone or online visits
 - ☐ My healthcare provider told me to self-isolate or quarantine
 - ☐ None of these apply
- Q38)** How difficult was it to **see a healthcare provider** if you or your family needed to **BEFORE** the COVID-19 pandemic?
- ☐ Not difficult
 - ☐ Somewhat difficult
 - ☐ Very difficult
- Q39)** How difficult has it been to **see a healthcare provider** if you or your family needed to **DURING** the COVID-19 pandemic?
- ☐ Not difficult
 - ☐ Somewhat difficult
 - ☐ Very difficult
- Q40)** How difficult was it to **get routine/essential medications** for you and/or your family **BEFORE** the COVID-19 pandemic?
- ☐ Not difficult
 - ☐ Somewhat difficult
 - ☐ Very difficult
- Q41)** How difficult was it to **get routine/essential medications** for you and/or your family **DURING** the COVID-19 pandemic?
- ☐ Not difficult
 - ☐ Somewhat difficult
 - ☐ Very difficult
- Q42)** How much has the COVID-19 pandemic changed stress and discord in the family?
- ☐ Improved. Family members have become closer with one another.
 - ☐ None. There has been no change in stress and discord in the family.
 - ☐ Mild. Family members occasionally short-tempered with one another; no physical violence.
 - ☐ Moderate. Family members frequently short-tempered with one another; and/or children in the home getting in physical fights with one another.
 - ☐ Severe. Family members frequently short-tempered with one another and adults in the home throwing things at one another, and/or knocking over furniture, and/or hitting and/or harming one another.
- Q43)** What were some of the challenges of remote learning for you and/or your child? *Select all that apply.*
- ☐ Lack of technological equipment
 - ☐ Lack of WI-FI access
 - ☐ Lack of high-speed internet access
 - ☐ Inability to concentrate/study because all family members are present at home
 - ☐ Teachers/professors not accommodating of the student's circumstances
 - ☐ Language barriers in understanding the material
 - ☐ Other, please describe: _____
 - ☐ I and/or my child did not experience any challenges with remote learning
 - ☐ This question does not apply to me (I'm not a student, and I don't have a child who is a student)

Q44) Prior to the COVID-19 pandemic, how supported did you feel by your social network?

- ☐ Not supported
- ☐ Mostly unsupported
- ☐ Somewhat unsupported
- ☐ Neutral
- ☐ Somewhat supported
- ☐ Mostly supported
- ☐ Very supported

Q45) Currently (during the COVID-19 pandemic), how supported do you feel by your social network?

- ☐ Not supported
- ☐ Mostly unsupported
- ☐ Somewhat unsupported
- ☐ Neutral
- ☐ Somewhat supported
- ☐ Mostly supported
- ☐ Very supported

Q46) Since the breakout of the COVID-19 pandemic, I have received emotional support from family or friends when needed

- ☐ Strongly agree
- ☐ Agree
- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Strongly disagree

Q47) Since the breakout of the COVID-19 pandemic, I have received tangible support (e.g., financial, practical) from family or friends when needed

- ☐ Strongly agree
- ☐ Agree
- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Strongly disagree

Q48) Since the breakout of the COVID-19 pandemic, I am (or have been) there to listen to other's problems when needed

- ☐ Strongly agree
- ☐ Agree
- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Strongly disagree

Q49) Since the breakout of the COVID-19 pandemic, I have helped others with financial or practical support

- ☐ Strongly agree
- ☐ Agree
- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Strongly disagree

Q50) Please indicate the extent to which you view the COVID-19 pandemic as having either a positive or negative impact on your life.

- ☐ Extremely negative
- ☐ Moderately negative
- ☐ Somewhat negative
- ☐ No impact
- ☐ Slightly positive
- ☐ Moderately positive
- ☐ Extremely positive

Q51) Since the breakout of the COVID-19 pandemic, I have greater appreciation for my family and close friends.

- ☐ Strongly agree
- ☐ Agree
- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Strongly disagree

Q52) Since the breakout of the COVID-19 pandemic, I have deeper appreciation for life.

- ☐ Strongly agree
- ☐ Agree
- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Strongly disagree

Q53) Since the breakout of the COVID-19 pandemic, I have been more grateful for each day.

- ☐ Strongly agree
- ☐ Agree
- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Strongly disagree

Q54) Since the breakout of the COVID-19 pandemic, I have been more accepting of things I cannot change.

- ☐ Strongly agree
- ☐ Agree
- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Strongly disagree

Q55) Since the breakout of the COVID-19 pandemic, I have found new ways of connecting with family and friends.

- ☐ Strongly agree
- ☐ Agree
- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Strongly disagree

Q56) Which state do you **CURRENTLY** live in? _____

Please answer the following questions on your beliefs about how COVID-19 is affecting people of your race/ethnicity.

- Q57)** Has the U.S. become more physically dangerous for people in your racial/ethnic group because of fear of COVID-19?
- ☐ Much more dangerous
 - ☐ Slightly more dangerous
 - ☐ Not more dangerous
 - ☐ Slightly less dangerous
 - ☐ Much less dangerous
- Q58)** Because of COVID-19, how likely are people of your race/ethnicity to lose their jobs?
- ☐ Much more likely
 - ☐ Slightly more likely
 - ☐ Not more likely
 - ☐ Less likely
 - ☐ Much less likely
- Q59)** How often do you worry about people thinking you have COVID-19 simply because of your race/ethnicity?
- ☐ Constantly
 - ☐ Very often
 - ☐ Somewhat often
 - ☐ Rarely
 - ☐ Never
- Q60)** How much do social and mass media reports about COVID-19 change attitudes against people of your racial/ethnic group?
- ☐ Much more positive
 - ☐ Slightly more positive
 - ☐ No change
 - ☐ Slightly more negative
 - ☐ Much more negative
- Q61)** Compared to other groups, what is the risk of getting COVID-19 for people of your race/ethnicity?
- ☐ Much more likely
 - ☐ Slightly more likely
 - ☐ Not more likely
 - ☐ Slightly less likely
 - ☐ Much less likely
- Q62)** Compared to other groups, how is the quality of COVID-19 healthcare for people of your race/ethnicity?
- ☐ Much better
 - ☐ Slightly better
 - ☐ Not better/the same
 - ☐ Slightly worse
 - ☐ Much worse

Q63) Due to COVID-19, how often have you been cyberbullied (hate messages/comments directed at you) because of your race/ethnicity?

- ☐ Never
- ☐ One or two times
- ☐ Two or three times a month
- ☐ Once a week
- ☐ Nearly every day

Q64) Since COVID-19, have you seen a change in the amount of cyberbullying of people of your race/ethnicity?

- ☐ Greatly increased
- ☐ Slightly increased
- ☐ No change
- ☐ Slightly decreased
- ☐ Greatly decreased

Q65) How much does what politicians say about COVID-19 create bias against people of your racial/ethnic group?

- ☐ Strongly increase bias
- ☐ Slightly increase bias
- ☐ No effect
- ☐ Slightly decrease bias
- ☐ Strongly decrease bias

Q66) Which of the following election and civic opportunities are you aware of? *Select all that apply.*

- ☐ November 2020 general election
- ☐ 2020 Census
- ☐ None of the above

Q67) **Only answer this question if you selected “November 2020 general election” for Q66:** Did you do any of the following? *Select all that apply.*

- ☐ Received information about November 2020 voter registration deadlines or the election.
- ☐ Registered to vote for the November 2020 Election.
- ☐ Voted by mail in the November 2020 Election.
- ☐ Voted early in the November 2020 Election.
- ☐ Voted on Election Day in the November 2020 Election.
- ☐ I did not vote in the November 2020 Election because I am not eligible to vote.
- ☐ I did not vote in the November 2020 Election because I did not receive my ballot.
- ☐ I did not vote in the November 2020 Election because I did not know who or what to vote for.
- ☐ Other reason you did not vote (please specify): _____

Q68) **Only answer this question if you selected “2020 Census” for Q66:** Did you do any of the following? *Select all that apply.*

- ☐ Received information about the 2020 Census and deadlines
- ☐ Completed the 2020 Census online
- ☐ Completed the 2020 Census over the phone
- ☐ Completed the 2020 Census on paper
- ☐ Completed the 2020 Census by speaking with an enumerator (someone who stopped by your home and interviewed you)

Q69) Is your house or apartment...? *Select only one answer.*

- ☐ Owned by you or someone in this household free and clear
- ☐ Owned by you or someone in this household with a mortgage or loan (including home equity loans)
- ☐ Rented
- ☐ Occupied without payment or rent

Q70) *Only answer this question if you selected option 3 or 4 in Q69:* Did you pay your last month's rent or mortgage on time? *Select only one answer.*

- ☐ Yes
- ☐ No
- ☐ Payment was deferred

Q71) *Only answer this question if you selected option 3 or 4 in Q69:* How confident are you that your household will be able to pay your next rent or mortgage payment on time? *Select only one answer.*

- ☐ No confidence
- ☐ Slight confidence
- ☐ Moderate confidence
- ☐ High confidence
- ☐ Payment is/will be deferred

Q72) Do you think you have or had COVID-19?

- ☐ Definitely yes
- ☐ Probably yes
- ☐ Unsure
- ☐ Probably not
- ☐ Definitely not

Q73) Have you been tested for COVID-19?

- ☐ No, I never tried to get tested
- ☐ No, I tried to get tested but was not able to
- ☐ Yes, once
- ☐ Yes, 2-3 times
- ☐ Yes, more than 3 times

Q74) Did you have any of the following? *Select all that apply.*

- ☐ Symptoms of COVID-19
- ☐ A positive test for COVID-19
- ☐ Close contact with someone who had COVID-19
- ☐ A healthcare provider ever told you that you had COVID-19
- ☐ None of the above

Q75) Have you ever had an overnight stay in a hospital for suspected or diagnosed COVID-19?

- ☐ Yes
- ☐ No

Q76) Which of the following occurred as a result of your symptoms? *Select all that apply.*

- ☐ I was kept overnight in a hospital because a healthcare provider thought I had COVID-19
- ☐ I saw a healthcare provider in person, such as in a clinic, doctor's office, urgent care, or Emergency Room (ER)/Emergency Department (ED)
- ☐ I spoke to a healthcare provider over the phone, by email, or online
- ☐ I self-isolated or quarantined at home
- ☐ None of the above

Q77) How likely are you to get vaccinated for COVID-19 once a vaccination is available to the public?

- ☐ Very unlikely
- ☐ Somewhat unlikely
- ☐ Somewhat likely
- ☐ Very likely
- ☐ Unsure

The following questions ask about behaviors to stop the spread of COVID-19. For each question, please indicate how often you do these activities.

Q78) How often do you wear a face mask or cover your face with a scarf, bandana, etc. when in public spaces?

- ☐ Not at all
- ☐ Some of the time
- ☐ Much of the time
- ☐ All of the time

Q79) How often do you engage in "social distancing" (keeping at least 6 feet away from other people) when in public places?

- ☐ Not at all
- ☐ Some of the time
- ☐ Much of the time
- ☐ All the time

Q80) Have you isolated yourself due to known or suspected exposure to COVID-19?

- ☐ Yes, I have isolated myself
- ☐ No, I had wanted to isolate myself but couldn't
- ☐ No, I didn't want to isolate myself when I had known or suspected exposure to COVID-19
- ☐ No, I never had known or suspected exposure to the COVID-19

Q81) What year were you born? _____

- ☐ I don't know
- ☐ Decline to state

Q82) *Only answer this question if you selected "I don't know" for Q81.*

About how old are you? _____

Q83) What country were you born in? _____

Q84) *Only answer this question if you did not write "United States" for Q83: About how long have you been in the United States? Round to the nearest year.*

Q85) What term(s) best expresses how you describe your gender identity? *Select all that apply.*

- ☐ Man
- ☐ Woman
- ☐ Non-binary
- ☐ Transgender
- ☐ Other; please specify: _____

Q86) What is the highest degree or level of school you have completed, inside or outside the US? *Select only one answer.*

- ☐ Less than 9th grade
- ☐ Some high school
- ☐ High school graduate or equivalent (GED)
- ☐ Technical, trade, or vocational
- ☐ Some college, but degree not received or is in progress
- ☐ Associate degree (AA, AS)
- ☐ Bachelor's degree (BA, BS, AB)
- ☐ Graduate degree (Master's, Professional, Doctorate)

Q87) What is your marital status? *Select only one answer.*

- ☐ Married or with a partner
- ☐ Widowed
- ☐ Divorced
- ☐ Separated
- ☐ Single

Q88) How many total people (adults and children) **currently** live in your household, including yourself? *Please enter a number.* _____

Q89) How many people under 18 years-old **currently** live in your household? *Please enter a number.*

Q90) How many people aged 65 or older **currently** live in your household? *Please enter a number.*

Q91) Are **you** an ESSENTIAL WORKER (e.g., healthcare, delivery worker, store worker, security, building maintenance)?

- ☐ Yes
- ☐ No
- ☐ Unsure

Q92) **Only answer this question if you selected “Yes” for Q91:** Are **you** a first responder, healthcare provider, or other worker in a facility treating COVID-19?

- ☐ Yes
- ☐ No

Q93) Are **any other adults living in the home** an ESSENTIAL WORKER (e.g., healthcare, delivery worker, store worker, security, building maintenance)?

- ☐ Yes
- ☐ No
- ☐ There is no other adult living in my home besides me

Q94) Only answer this question if you selected “Yes” for Q93: Are **they** a first responder, healthcare provider or other worker in a facility treating COVID-19?

- ☐ Yes
- ☐ No

Q95) In 2019 what was your total household income before taxes? *Select only one answer.*

- | | |
|-------------------------------------------|---------------------------------------------|
| <input type="radio"/> Less than \$5,000 | <input type="radio"/> \$50,000 - \$74,999 |
| <input type="radio"/> \$5,000 - \$11,999 | <input type="radio"/> \$75,000 - \$99,999 |
| <input type="radio"/> \$12,000 - \$24,999 | <input type="radio"/> \$100,000 - \$149,999 |
| <input type="radio"/> 25,000 - \$34,999 | <input type="radio"/> \$150,000 - \$199,999 |
| <input type="radio"/> \$35,000 - \$49,999 | <input type="radio"/> \$200,000 and above |

Q96) Which one applies to you? *Your information will only be used for statistical analyses conducted by the research team and will not be used for any other purpose or shared with any other parties.*

- ☐ US citizen
- ☐ Temporary resident/green card
- ☐ Permanent resident/green card
- ☐ Visa holder, (enter type of visa): _____
- ☐ Temporary Protected Status (TPS)
- ☐ Deferred Action for Childhood Arrivals (DACA)
- ☐ Refugee
- ☐ Undetermined
- ☐ Prefer not to answer
- ☐ Other, please describe: _____

Q97) What are the main ways you get information about the pandemic? *Select all that apply.*

- ☐ Government health websites (like the CDC or Department of Health)
- ☐ Searching for information online (like Google)
- ☐ Social media (like Facebook, Instagram, and Twitter)
- ☐ Television news or radio
- ☐ Newspaper, magazines
- ☐ Family/friends
- ☐ Health care providers, like doctors
- ☐ Community or faith leaders
- ☐ Other, please specify: _____
- ☐ None of the above

Q98) How often do you get information about the pandemic?

- | | |
|----------------------------------------------|------------------------------------------------|
| <input type="radio"/> Less than once a month | <input type="radio"/> Several times a week |
| <input type="radio"/> Once a month | <input type="radio"/> Once a day |
| <input type="radio"/> Several times a month | <input type="radio"/> 2-10 times a day |
| <input type="radio"/> Once a week | <input type="radio"/> More than 10 times a day |

Q99) How informed would you say you are about the current pandemic?

- ☐ Not very informed
- ☐ Somewhat informed
- ☐ Very informed

Q100) Does information about COVID-19 ever make you feel anxious/overwhelmed?

- ☐ Yes - Often
- ☐ Yes - Sometimes
- ☐ No

Q101) We are interested in understanding geographic differences in experiences with COVID-19 pandemic. To help us analyze survey responses across the entire United States, please provide your **CURRENT 5-digit ZIP code (i.e., where you CURRENTLY live)** below. Your address information will only be used for statistical analyses conducted by the research team and will not be used for any other purpose or shared with any other parties.

Q102) How did you learn about this survey?

- ☐ Referred by someone who also took the survey
- ☐ Referred by an organization; Please specify the organization:

☐ Other; please specify: _____