### (MS569) OMNIBUS SURVEY [W8 2000 MARCH 2021]

#### Survey\_intro

This Omnibus survey will ask you questions about a variety of topics. You will be compensated \$3 for completion.

#### A\_intro

With telehealth, you can use a computer or smartphone to communicate with a doctor about a health issue. Two common types of telehealth visits are telephone (voice only) and video visits. With a telephone visit, you can get advice about a health issue by telephone. With a video visit, you interact with a doctor by video using platforms like Zoom or FaceTime. Both kinds of visits can be with a personal doctor who you also see in-person OR with an unfamiliar doctor you have never seen in-person. The following questions ask about your experiences with telehealth.

### A1

Since the pandemic started in March 2020, did you communicate about your physical or mental health with a doctor or other health care provider in any of the following ways? Check ALL that apply.

- $\Box$  My own personal doctor or provider by telephone (1)
- □ My own personal doctor or provider by video (2)
- A new/unfamiliar doctor or provider by telephone (3)
- $\Box$  A new/unfamiliar doctor or provider by video (4)
- O None of these (5) [*Exclusive*]

#### A2

Since March 2020, did you have a telephone (voice only) visit with any of the following types of health care providers? Check ALL that apply.

- Primary care doctor (e.g., general practitioner, family medicine physician, internist) (1)
- □ Mental health care provider (e.g., psychiatrist, psychologist, social worker) (2)
- □ Medical specialist (e.g., cardiologist, dermatologist, endocrinologist) (3)
- Dediatrician for care for a child in your household (4)
- O None of these (5) [*Exclusive*]

### A3

Since March 2020, did you have a video visit with any of the following types of health care providers? Check ALL that apply.

- Primary care doctor (e.g., general practitioner, family medicine physician, internist) (1)
- □ Mental health care provider (e.g., psychiatrist, psychologist, social worker) (2)
- □ Medical specialist (e.g., cardiologist, dermatologist, endocrinologist) (3)
- Dediatrician for care for a child in your household (4)
- O None of these (5) [*Exclusive*]

### A4

Since March 2020, have you had a telehealth visit with a health care provider through a telehealth company that is independent of the clinics or offices that you go to for in-person care? Examples of telehealth companies include, but are not limited to, Teladoc, Doctor on Demand, and LiveHealthOnline. Check ALL that apply.

 $\Box$  Yes, for a physical health issue (1)

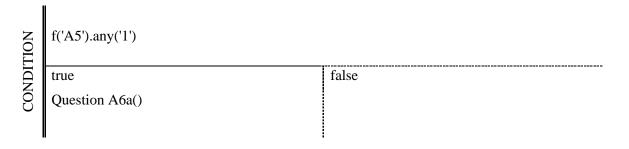
- $\Box$  Yes, for a mental health or substance use issue (2)
- **O** No (3) [*Exclusive*]

## A5

```
[Not required]
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Imagine that after the pandemic you have a non-emergency health issue that your doctor says can be handled inperson in the doctor's office or by video. What would you prefer?

- **O** I'd prefer an in-person visit (1)
- O I'd prefer a video visit (2)
- **O** I have no preference or equal preference (3)
- O I don't know (4)



### A6a

### [Not required]

Imagine that after the pandemic you have a non-emergency health issue that your doctor says can be handled inperson in the doctor's office or by video. What would you prefer?

- O An in-person visit with a \$30 co-pay/cost to you (1)
- **O** A video visit with a \$10 co-pay/cost to you (2)
- O I have no preference between the above options (3)
- O I don't know (4)

END	Condition f('A5').any('1')					
CONDITION	f('A5').any('2')					
	true	false				
CON	Question A6b()					

### A6b

[Not required]

Imagine that after the pandemic you have a non-emergency health issue that your doctor says can be handled inperson in the doctor's office or by video. What would you prefer?

- **O** An in-person visit with a \$10 co-pay/cost to you (1)
- **O** A video visit with a \$30 co-pay/cost to you (2)
- $\mathbf{O}$  I have no preference between the above options (3)
- O I don't know (4)

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# A7

### [Not required]

On a 1-5 scale, rate your willingness to participate in a video visit with a doctor for a non-emergency health issue...

O 1 Unwilling (1)
O 2 (2)
O 3 (3)
O 4 (4)
O 5 Very willing (5)

# **A8**

### [Not required]

After the pandemic is over, how much of your medical care would you like to have by video rather than inperson?

- **O** None: I prefer all of my care to be in-person (1)
- $\mathbf{O}$  A little (2)
- **O** Some (3)
- **O** As much as possible (4)

## B1\_v2

[Not required]

Attitudes towards other people and private institutions can range from a low level of trust to a high level of trust. How would you assess your level of trust regarding the following groups in society?

	Absolutely no trust (1)	Not so much trust (2)	Pretty much trust (3)	A lot of trust (4)
Most other people (1)	0	0	Ο	0
Banks (2)	0	Ο	Ο	0
Insurance companies (3)	0	Ο	Ο	0
Big technology companies such as Amazon, Apple, Facebook, Google, Microsoft (4)	0	О	О	О

## B2\_v1

#### [Not required]

Has the COVID-19 pandemic affected your level of trust? Using a scale from 0 to 10, where 0 indicates "trust decreased very strongly" and 10 "trust increased very strongly," please indicate how your level of trust has changed during the pandemic.

	Decreased Very Strongly 0 (1)	1 (2)	2 (3)	3 (4)	4 (5)	Has Not Changed 5 (6)	6 (7)	7 (8)	8 (9)	9 (10)	Increased Very Strongly 10 (11)
Most other people (1)	Ο	Ο	0	0	Ο	0	0	0	Ο	0	0
Banks (2)	0	Ο	0	0	0	0	0	0	Ο	0	0
Insurance companies (3)	Ο	0	0	0	Ο	0	0	0	0	0	0
Big technology companies such as Amazon, Apple, Facebook, Google, Microsoft (4)	•	0	0	0	О	О	0	0	О	О	О

## **C1**

### [Not required]

What impact has the COVID-19 pandemic had on your ability to travel (for example, driving your own vehicle, being driven by a family member or caretaker, taking public transportation, etc.) to receive the care, services, or opportunities you need?

- O Negative Impact (1)
- **O** Somewhat Negative Impact (2)
- O No impact at all (3)
- O Somewhat Positive Impact (4)
- O Positive Impact (5)

### **C2**

### [Not required]

What level of difficulty do you have moving around in your environment outside of your home (for example, yard, neighborhood, town, etc.) without help from another person?

- **O** Very difficult (1)
- **O** Difficult (2)
- O Neutral (3)
- **O** Easy (4)
- O Very Easy (5)

## **C3**

### [Not required]

How risky do you see using public transportation (for example, city buses, trams, rapid transit such as metro or subways, etc.) for daily travel during the COVID-19 pandemic?

O Not Risky (1)
O Somewhat Not Risky (2)
O Neutral (3)
O Somewhat Risky (4)
O Very Risky (5)

#### D1\_slider -

[*Numeric* • *Not required* • *Lower limit=0* • *Lower limit type=GreaterOrEqual* • *Upper limit=10* • *Upper limit type=SmallerOrEqual* • *Total Digits=4* • *Decimal places=1*]

Using a scale from 0 to 10, where 10 indicates complete trust and 0 indicates complete distrust (so 5 would indicate that you neither trust, nor distrust), please indicate your level of trust in the United States military.

#### D2

#### [Not required]

How has your trust in the United States military changed over the past 12 months?

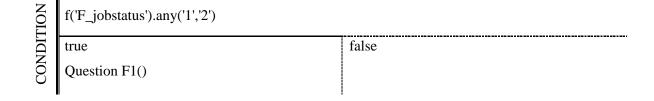
- O Increase (1)
- O Decrease (2)
- O No Change (3)

#### **F\_jobstatus**

[Not required]

Are you currently:

- **O** Working at a job or business (1)
- **O** Not working now, but worked in the past 6-months (2)
- O Not working now and have not worked for pay in the past 6-months (3)



### F1

[Not required]

Since the beginning of the pandemic (March 2020), how often has your work been stressful?

- O Never (1)
- O Hardly ever (2)
- O Sometimes (3)
- O Often (4)
- O Always (5)

## F2

[Not required]

What is the likelihood that you will leave your job by summer 2021, compared to the likelihood you would have left your job before COVID-19?

- O Likely to leave before COVID-19, but unlikely now (1)
- **O** Unlikely to leave before, but likely now (2)
- **O** Likely to leave both before and now (3)
- **O** Unlikely to leave both before and now (4)

Condition f('F\_jobstatus').any('1','2')

# **E1**

### [Not required]

Information from the scientific community (e.g., doctors, nurses, public health professionals) is trustworthy.

- O Definitely True (1)
- O Probably True (2)
- O Not Sure (3)
- **O** Probably False (4)
- O Definitely False (5)

## E2

### [Not required]

How much do you believe that the government's actions concerning the COVID-19 pandemic will be in your personal best interest?

- O Not at All (1)
- O Little (2)
- **O** Some (3)
- O Very Much (4)

## E3

### [Not required]

Which of the following best describes your actions regarding the COVID-19 vaccine:

- O I have already received at least one dose of a federally approved COVID-19 vaccine (1)
- **O** I have scheduled an appointment to get a COVID-19 vaccine (2)
- O I am planning to get the COVID-19 vaccine but do not yet have an appointment (3)
- **O** I am not planning to get a COVID-19 vaccine (4)
- **O** I have not yet decided about getting a COVID-19 vaccine (5)

E4

[Not required • Ranking]

Rank the following public health messages according to how persuasive you find each (1 = most persuasive; 4 = least persuasive).

Please enter a 1, 2, 3, and 4 with one number in each of the 4 spaces below.

\_\_\_ Save your lungs: wear a mask.

Wearing your mask keeps you from inhaling and exhaling water droplets that can spread COVID-19. COVID-19 can damage your lungs, leading to breathing problems. To learn more, visit www.cdc.gov/coronavirus/2019-ncov/index.html (1)

\_\_\_\_ Save your heart: keep 6' away.

COVID-19 can weaken your heart, making you more likely to experience heart failure later in life. Keeping 6' away from others works to stop the spread. Do your part to save your heart. (2)

\_\_\_\_\_ Protect your elderly relatives: Social Distance.

20% of people experience COVID-19 symptoms for at least 3 weeks or more. Mild COVID-19 cases can lead to severe health effects later. Thank you for keeping your loved ones safe. (3)

Protect your family: Stay at home. Staying home is the best way to prevent future COVID-19 infections, even though it's hard. Thank you for keeping your loved ones safe. (4)

### G1

[Not required]

Who did you vote for in the 2020 presidential election?

O Joseph R. Biden (1)

- O Donald J. Trump (2)
- O Other candidate (3)
- O Did not vote (4)

## G2

[Not required]

If you voted in the 2020 presidential election, how did you vote?

**O** In person at a polling place (1)

O Requested and returned an absentee ballot because I could not vote in person on election day (2)

**O** Voted by mail (returned ballot by postal service) (3)

**O** Voted by mail (returned ballot to drop-box, polling place or to local registrar's office) (4)

**O** Other (5) [*Other*]

## G3

#### [Not required]

Overall, did you think that local officials instituted sufficient measures to protect your physical health during the 2020 presidential election?

- **O** Yes (1)
- **O** No (2)
- O Somewhat (3)
- O Not sure (4)

### **G4**

[Not required]

Overall, did you think that local officials instituted sufficient measures to ensure your vote was accurately counted during the 2020 presidential election?

- **O** Yes (1)
- **O** No (2)
- O Somewhat (3)
- O Not sure (4)

## **G5**

[Not required]

Overall, did you think that election officials across the country instituted sufficient measures to ensure that all votes were accurately counted 2020 presidential election?

- **O** Yes (1)
- **O** No (2)
- O Somewhat (3)
- O Not sure (4)

### CS\_001 - CS\_001

[Not required]

Could you tell us how interesting or uninteresting you found the questions in this interview?

- **O** Very interesting (1)
- **O** Interesting (2)
- **O** Neither interesting nor uninteresting (3)
- **O** Uninteresting (4)
- O Very uninteresting (5)