

HRS PERSPECTIVES ON THE PANDEMIC SPRING 2021 MAIL SURVEY -- EARLY RELEASE VERSION 1

HHID Household ID
PN Person number

SECTION A

Mailing

- A Mailing A
- B Mailing B
- C Mailing C

Language

English English questionnaire
Spanish Spanish questionnaire

A1_21S

A1. Have you had, or do you now have, COVID-19? (Mark [X] ONE box.)

- 9 Missing/Blank
- 8 Multiple selections
- 1 Yes
- 2 Not sure but probably yes
- 5 No
- 6 Not sure but probably no

A2_21S

A2. Did a doctor or other health care provider tell you that you had COVID-19? (Mark [X] ONE box.)

- 9 Missing/Blank
- 8 Multiple selections
- 1 Yes
- 5 No

A3_21S

A3. Has anyone else you know been diagnosed with COVID-19? (Mark [X] ONE box.)

- 9 Missing/Blank
- 8 Multiple selections
- 1 Yes
- 5 No
- 8 Don't Know

A4_1_21S

A4. Who was diagnosed with COVID-19? (Mark [X] all that apply.)

My spouse/partner

- 0 My spouse/partner- not selected
- 1 My spouse/partner- selected

A4_2_21S

A4. Who was diagnosed with COVID-19? (Mark [X] all that apply.)

A different household member

- 0 A different hh member- not selected
- 1 A different hh member- selected

A4_3_21S

A4. Who was diagnosed with COVID-19? (Mark [X] all that apply.)

Someone outside my household

- 0 Someone outside my hh -not selected
- 1 Someone outside my hh - selected

A5_21S

A5. Has anyone you know died from COVID-19? (Mark [X] ONE box.)

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Yes
- 5 No
- 8 Don't Know

A6_1_21S

A6. What was this person's relationship to you? (If more than one person you know has died from COVID-19, mark [X] all that apply.)

Spouse/Partner

- 0 Spouse/Partner-not selected
- 1 Spouse/Partner-selected

A6_2_21S

A6. What was this person's relationship to you? (If more than one person you know has died from COVID-19, mark [X] all that apply.)

Child

- 0 Child-not selected
- 1 Child- selected

A6_3_21S

A6. What was this person's relationship to you? (If more than one person you know has died from COVID-19, mark [X] all that apply.)

Parent

- 0 Parent-not selected
- 1 Parent-selected

A6_4_21S

A6. What was this person's relationship to you? (If more than one person you know has died from COVID-19, mark [X] all that apply.)

Sibling

- 0 Sibling-not selected
- 1 Sibling-selected

A6_5_21S

A6. What was this person's relationship to you? (If more than one person you know has died from COVID-19, mark [X] all that apply.)

Other family member

- 0 Other family member-not selected
- 1 Other family member-selected

A6_6_21S

A6. What was this person's relationship to you? (If more than one person you know has died from COVID-19, mark [X] all that apply.)

Friend

- 0 Friend-not selected
- 1 Friend-selected

A6_7_21S

A6. What was this person's relationship to you? (If more than one person you know has died from COVID-19, mark [X] all that apply.)

Co-worker

- 0 Co-worker-not selected
- 1 Co-worker-selected

A6_8_21S

A6. What was this person's relationship to you? (If more than one person you know has died from COVID-19, mark [X] all that apply.)

Aquaintance/ neighbor

- 0 Acquaintance/neighbor-not selected
- 1 Acquaintance/neighbor- selected

A7_21S

A7. Several months ago we sent our participants a kit to test for antibodies to the virus that causes COVID-19. Antibodies show if you have ever had the virus in the past, not if you have an active infection. Did you return that test kit? (Mark [X] ONE box.)

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Yes
- 5 No
- 6 I live in a nursing home
- 7 I don't recall receiving a test

A8_21S

A8. Have you been tested for antibodies at any other time? (Mark [X] ONE box.)

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Yes, and at least one test was positive
- 2 Yes, and always tested negative
- 5 No
- 8 Don't Know

A9_21S

A9. Have you ever been tested for an active infection with COVID-19? This test might have been called a viral test. Viral tests check specimens from your nose or your mouth (saliva) to find out if you are currently infected with COVID-19. (Mark [X] ONE box)

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Yes
- 5 No

A10_21S

A10. Have you been tested only once, or multiple times? (Mark [X] ONE box.)

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Once
- 2 Multiple Times
- 8 Don't Know

A11_21S

A11. Did the test (or any of the tests if you had more than one), indicate that you had COVID-19? (Mark [X] ONE box)

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Yes
- 5 No
- 6 Not so far but I am waiting for results

A12_month_21S

A12. What was the date of the most recent positive test?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 January
- 2 February
- 3 March
- 4 April
- 5 May
- 6 June
- 7 July
- 8 August
- 9 September

- 10 October
- 11 November
- 12 December

A12_year_21S

A12. What was the date of the most recent positive test?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 2019 2019
- 2020 2020
- 2021 2021

A13a_21S

A13. Several vaccines are now available for COVID-19. Please tell us if you agree or disagree with the following statements about the vaccines.

a. The vaccines are safe and have few side effects

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Strongly Agree
- 2 Somewhat Agree
- 3 Neutral
- 4 Somewhat Disagree
- 5 Strongly Disagree
- 8 Don't Know

A13b_21S

b. Vaccinated people have good protection from serious illness with COVID-19

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Strongly Agree
- 2 Somewhat Agree
- 3 Neutral
- 4 Somewhat Disagree
- 5 Strongly Disagree
- 8 Don't Know

A13c_21S

c. Vaccinated people are less likely to spread COVID-19

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Strongly Agree
- 2 Somewhat Agree
- 3 Neutral
- 4 Somewhat Disagree
- 5 Strongly Disagree
- 8 Don't Know

A13d_21S

d. Life won't go back to normal unless most people are vaccinated

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Strongly Agree
- 2 Somewhat Agree
- 3 Neutral
- 4 Somewhat Disagree
- 5 Strongly Disagree
- 8 Don't Know

A14_21S

Are you more concerned about severity of the COVID-19 illness, or are you more concerned about the COVID-19 vaccine side effects? (Mark [X] ONE box.)

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 I am more concerned about COVID-19 illness
- 2 I am more concerned about COVID-19 vaccine
- 3 I am equally concerned about both
- 4 I am not concerned about either
- 8 Don't Know

A15a_21S

A15. Getting a vaccine for COVID-19 is a personal choice. Below are some reasons people give for why they did or will get a coronavirus vaccine. Please indicate how important each reason is for you.

a. I want to protect my family

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Very important
- 2 Somewhat important
- 3 Not important

A15b_21S

b. I want to protect my community

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Very important
- 2 Somewhat important
- 3 Not important

A15c_21S

c. I want to protect myself

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Very important
- 2 Somewhat important
- 3 Not important

A15d_21S

d. My age and health conditions make it important that I receive a vaccine

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Very important
- 2 Somewhat important
- 3 Not important

A15e_21S

e. My doctor recommends I get a vaccine

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Very important
- 2 Somewhat important
- 3 Not important

A15f_21S

f. A vaccine will help me avoid getting seriously ill from the coronavirus

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Very important
- 2 Somewhat important
- 3 Not important

A15g_21S

g. It would allow me to feel safe socializing with other people

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Very important
- 2 Somewhat important
- 3 Not important

A15h_21S

h. It would allow me to feel safe sending my child to school

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Very important

- 2 Somewhat important
- 3 Not important

A15i_21S

i. It would allow me to feel safe going back to work or volunteer activities

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Very important
- 2 Somewhat important
- 3 Not important

A15j_21S

j. Other

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Very important
- 2 Somewhat important
- 3 Not important

A16a_21S

A16. Below are some reasons people give for why they might NOT get a COVID-19 vaccine. Please indicate how important each reason is for you.

a. I am concerned about the side effects and safety

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Very important
- 2 Somewhat important
- 3 Not important

A16b_21S

b. I am concerned that the COVID-19 vaccine was developed too fast

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Very important
- 2 Somewhat important
- 3 Not important

A16c_21S

c. I don't think the vaccine has been tested on enough people like me yet

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Very important
- 2 Somewhat important
- 3 Not important

A16d_21S

d. I think the COVID-19 vaccine will not work

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Very important
- 2 Somewhat important
- 3 Not important

A16e_21S

e. I already had COVID-19 and should be immune

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Very important
- 2 Somewhat important
- 3 Not important

A16f_21S

f. The vaccine could give me COVID-19

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Very important
- 2 Somewhat important
- 3 Not important

A16g_21S

g. COVID-19 is not a serious illness

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Very important
- 2 Somewhat important
- 3 Not important

A16h_21S

h. I don't like vaccines

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Very important
- 2 Somewhat important
- 3 Not important

A16i_21S

i. I believe vaccines are dangerous

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Very important
- 2 Somewhat important
- 3 Not important

A16j_21S

j. I don't like needles

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Very important
- 2 Somewhat important
- 3 Not important

A16k_21S

k. I don't think I need a vaccine against COVID-19

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Very important
- 2 Somewhat important
- 3 Not important

A16l_21S

l. My doctor says I should not get a COVID-19 vaccine

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Very important
- 2 Somewhat important
- 3 Not important

A16m_21S

m. I am not a member of any group that is at high risk from COVID-19

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Very important
- 2 Somewhat important
- 3 Not important

A16n_21S

n. Other

- 9 Missing/Blank

- 8 Multiple Selections (In Error)
- 1 Very important
- 2 Somewhat important
- 3 Not important

A17a_21S

A17. There are different types of places the COVID-19 vaccine is or could be offered. If you were to receive a COVID-19 vaccine, how willing would you be to receive it at each one of these places? For each location listed below, please mark [X] how willing you would be to receive a COVID-19 vaccine at that location. PLEASE ANSWER A17 EVEN IF YOU HAVE ALREADY RECEIVED A COVID-19 VACCINE

a. Doctor's office or clinic

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Definitely Willing
- 2 Somewhat Willing
- 3 Not too Willing

A17b_21S

b. Hospital

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Definitely Willing
- 2 Somewhat Willing
- 3 Not too Willing

A17c_21S

c. Pharmacy

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Definitely Willing
- 2 Somewhat Willing
- 3 Not too Willing

A17d_21S

d. Grocery store

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Definitely Willing
- 2 Somewhat Willing
- 3 Not too Willing

A17e_21S

e. Local health department

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Definitely Willing
- 2 Somewhat Willing
- 3 Not too Willing

A17f_21S

f. Local police or fire station

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Definitely Willing
- 2 Somewhat Willing
- 3 Not too Willing

A17g_21S

g. Local school

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Definitely Willing
- 2 Somewhat Willing
- 3 Not too Willing

A17h_21S

h. Local sports stadium

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Definitely Willing
- 2 Somewhat Willing
- 3 Not too Willing

A17i_21S

i. At your workplace

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Definitely Willing
- 2 Somewhat Willing
- 3 Not too Willing

A17j_21S

j. In your home

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Definitely Willing
- 2 Somewhat Willing
- 3 Not too Willing

A17k_21S

k. Other location

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Definitely Willing
- 2 Somewhat Willing
- 3 Not too Willing

A18_21S

A18. Several vaccines are now available for the coronavirus. Have you gotten a vaccine? (Mark [X] ONE box.)

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Yes, I've had two shots
- 2 Yes, I've had one shot and am waiting for second
- 3 Yes, I've had one shot and don't need a second
- 4 I have an appointment to get one soon
- 5 No

A18a_month_21S

A18a. What was the date of your most recent vaccine?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 January
- 2 February
- 3 March
- 4 April
- 5 May
- 6 June
- 7 July
- 8 August
- 9 September
- 10 October
- 11 November
- 12 December

A18a_year_21S

A18a. What was the date of your most recent vaccine?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 2020 2020
- 2021 2021

A19_1_21S

A19. Please tell us about your experience getting the vaccine or appointment. Mark (X) all that apply.

I had to make many phone calls

- 0 I had to make may phone calls-not selected
- 1 I had to make may phone calls- selected

A19_2_21S

I had difficulty using online tools to find appointments

- 0 Difficulty using online tools to get appt-not selected
- 1 Difficulty using online tools to get appt- selected

A19_3_21S

I got help from friends or family finding available vaccine appointments

- 0 Got help from friends or family finding available appts- not selected
- 1 Got help from friends or family finding available appts- selected

A19_4_21S

I had no difficulty

- 0 I had no difficulty-not selected
- 1 I had no difficulty- selected

A20_21S

A20. Have you tried to schedule an appointment to get a vaccine? (Mark [X] ONE box.)

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Yes
- 5 No

A21_1_21S

A21. What was the outcome when you tried to schedule an appointment? (Mark [X] all that apply.)

There were no appointments available

- 0 There were no appointments available - not selected
- 1 There were no appointments available - selected

A21_2_21S

The available appointments did not work for my schedule

- 0 The available appts did not work for my schedule-not selected
- 1 The available appts did not work for my schedule-selected

A21_3_21S

I was told I am not eligible

- 0 I was told I am not eligible- not selected
- 1 I was told I am not eligible- selected

A21_4_21S

I had trouble understanding the system

- 0 I had trouble understanding the system - not selected
- 1 I had trouble understanding the system - selected

A21_5_21S

I had technical issues

- 0 I had technical issues - not selected
- 1 I had technical issues - selected

A21_6_21S

I was able to schedule an appointment but I missed my appointment

- 0 Able to schedule appointment but missed it-not selected
- 1 Able to schedule appointment but missed it-selected

A21_97_21S

Other

- 0 Other Specify: not selected
- 1 Other Specify: selected

A22_21S

A22. Have you visited a vaccine provider without an appointment?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Yes
- 5 No

A23_1_21S

A23. What was the outcome when you visited a vaccine provider without an appointment? (Mark [X] all that apply.)

There were no walk-in vaccinations available

- 0 There were no walk-in vaccinations available -not selected
- 1 There were no walk-in vaccinations available - selected

A23_2_21S

The wait time was too long

- 0 The wait time was too long - not selected
- 1 The wait time was too long - selected

A23_3_21S

I was told I am not eligible

- 0 I was told I am not eligible - not selected
- 1 I was told I am not eligible - selected

A23_97_21S

Other

- 0 Other Specify: not selected
- 1 Other Specify: selected

A24_1_21S

A24. Why haven't you tried to get the vaccine? (Mark [X] all that apply.)

I am not eligible to get a vaccine

- 0 I am not eligible to get a vaccine-not selected
- 1 I am not eligible to get a vaccine- selected

A24_2_21S

I don't want to get vaccinated

- 0 I don't want to get vaccinated-not selected
- 1 I don't want to get vaccinated- selected

A24_3_21S

I don't know how to schedule an appointment

- 0 I don't know how to schedule an appointment- not selected
- 1 I don't know how to schedule an appointment- selected

A24_4_21S

I don't know where to go for a vaccine

- 0 I don't know where to go for a vaccine- not selected
- 1 I don't know where to go for a vaccine- selected

A24_5_21S

I am waiting for a vaccine provider to contact me

- 0 I am waiting for a provider to contact me- not selected
- 1 I am waiting for a provider to contact me- selected

A24_6_21S

The vaccine providers are too far away

- 0 The vaccine providers are too far away- not selected
- 1 The vaccine providers are too far away- selected

A24_7_21S

There is a vaccine shortage in my community

- 0 There is a vaccine shortage in my community- not selected
- 1 There is a vaccine shortage in my community- selected

A24_8_21S

I don't have access to transportation

- 0 I don't have access to transportation- not selected
- 1 I don't have access to transportation- selected

A24_9_21S

I don't have access to a phone or computer

- 0 I don't have access to a phone or computer- not selected
- 1 I don't have access to a phone or computer- selected

A24_10_21S

I don't have time

- 0 I don't have time- not selected
- 1 I don't have time- selected

A24_11_21S

I am physically unable to travel

- 0 I am physically unable to travel- not selected
- 1 I am physically unable to travel- selected

A24_97_21S

Other

- 0 Other Specify: - not selected
- 1 Other Specify: - selected

A25_21S

A25. How likely are you to take a vaccine once it is available to you? (Mark [X] ONE box)

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Very likely
- 2 Somewhat likely
- 3 Not very likely
- 4 Not at all likely

SECTION B

The questions in Section B are only for people who have had the coronavirus. Please answer this section only if you answered "Yes" or "Probably Yes" when you were asked whether you had the coronavirus (Question A1).

B1_21S

B1. Did you have to go to the emergency room because of the virus? (Mark [X] ONE box.)

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Yes
- 5 No

B2_21S

B2. Were you admitted to the hospital because of the virus? (Mark [X] ONE box.)

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Yes
- 5 No

B3_month_21S

B3. What date were you admitted for your most recent hospital stay for coronavirus? (MONTH)

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 January
- 2 February
- 3 March
- 4 April
- 5 May
- 6 June
- 7 July
- 8 August
- 9 September
- 10 October
- 11 November
- 12 December

B3_year_21S

B3. What date were you admitted for your most recent hospital stay for coronavirus? (YEAR)

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 2020 2020
- 2021 2021

B4_21S

B4. Altogether, how many nights did you spend in the hospital?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 0-200 0-200 nights

B5_21S

B5. Were you on oxygen or a ventilator while you were in the hospital? (Mark [X] ONE box.)

- 9 Missing/Blank
- 8 Multiple Selections
- 1 Oxygen only
- 2 Ventilator Only
- 3 Both oxygen and ventilator
- 4 Neither One

B6_21S

B6. Do you continue to experience health problems related to coronavirus infection? (Mark [X] ONE box.)

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Yes
- 5 No
- 8 Don't Know

SECTION C

C1a_21S

C1. Now we have some questions about health care in general, not just related to coronavirus. During the first year of the pandemic, from March 2020 to March 2021, did you start regularly taking prescription medications for any of the following common health problems...

a. for pain in your joints or muscles?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Yes
- 5 No

8 Not Sure

C1b_21S

b. for asthma or allergies or other breathing problems?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Yes
- 5 No
- 8 Not Sure

C1c_21S

c. to help you sleep?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Yes
- 5 No
- 8 Not Sure

C1d_21S

d. to help relieve anxiety or depression?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Yes
- 5 No
- 8 Not Sure

C1e_21S

e. to thin your blood or to prevent blood clots?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Yes
- 5 No
- 8 Not Sure

C2_21S

C2. Since March 2020, was there any time when you needed medical or dental care, or prescription medicine, but delayed getting it, or did not get it at all? (Mark [X] ONE box.)

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Yes
- 2 No, I did not need care during the pandemic
- 3 No, I was able to get the care I needed without delay

C3a_21S

C3. Did you delay or not get...

C3a. major surgery that would have required a hospital stay of one or more nights?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Yes
- 5 No

C4a_1_21S

C4a. Why did you delay or not get that care? (Mark [X] all that apply.)

Could not afford

- 0 Could not afford- not selected
- 1 Could not afford- selected

C4a_2_21S

Facility not available

- 0 Facility not available- not selected
- 1 Facility not available- selected

C4a_3_21S

The risk of exposure to COVID-19

- 0 The risk of exposure to COVID-19 -not selected
- 1 The risk of exposure to COVID-19 - selected

C4a_97_21S

Other reason

- 0 Other: Specify -not selected
- 1 Other: Specify - selected

C3b_21S

C3b. outpatient surgery?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Yes
- 5 No

C4b_1_21S

C4b. Why did you delay or not get that care? (Mark [X] all that apply.)

Could not afford

- 0 Could not afford- not selected
- 1 Could not afford- selected

C4b_2_21S

No facility available

- 0 Facility not available - not selected
- 1 Facility not available - selected

C4b_3_21S

The risk of exposure to COVID-19

- 0 The risk of exposure to COVID-19 - not selected
- 1 The risk of exposure to COVID-19 - selected

C4b_97_21S

Other Reason

- 0 Other Reason- not selected
- 1 Other Reason- selected

C3c_21S

C3c. a doctor visit?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Yes
- 5 No

C4c_1_21S

C4c. Why did you delay or not get that care? (Mark [X] all that apply.)

Could not afford

- 0 Could not afford- not selected
- 1 Could not afford- selected

C4c_2_21S

Facility not available

- 0 Facility not available- not selected
- 1 Facility not available- selected

C4c_3_21S

The risk of exposure to COVID-19

- 0 The risk of exposure to COVID-19 -not selected
- 1 The risk of exposure to COVID-19 -selected

C4c_97_21S

Other Reason

- 0 Other Reason- not selected
- 1 Other Reason- selected

C3d_21S

C3d. dental care?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Yes
- 5 No

C4d_1_21S

C4d. Why did you delay or not get that care? (Mark [X] all that apply.)

Could not afford

- 0 Could not afford- not selected
- 1 Could not afford- selected

C4d_2_21S

Facility not available

- 0 Facility not available- not selected
- 1 Facility not available- selected

C4d_3_21S

The risk of exposure to COVID-19

- 0 The risk of exposure to COVID-19 - not selected
- 1 The risk of exposure to COVID-19 - selected

C4d_97_21S

Other Reason

- 0 Other Reason- not selected
- 1 Other Reason- selected

C3e_21S

C3e. a prescription?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Yes
- 5 No

C4e_1_21S

C4e. Why did you delay or not get that care? (Mark [X] all that apply.)

Could not afford

- 0 Could not afford - not selected
- 1 Could not afford - selected

C4e_2_21S

Facility not available

- 0 Facility not available - not selected
- 1 Facility not available - selected

C4e_3_21S

The risk of exposure to COVID-19

- 0 The risk of exposure to COVID-19 - not selected
- 1 The risk of exposure to COVID-19 - selected

C4e_97_21S

Other Reason

- 0 Other Reason- not selected
- 1 Other Reason- selected

C3f_21S

C3f. other types of care?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Yes
- 5 No

C4f_1_21S

C4f. Why did you delay or not get that care? (Mark [X] all that apply.)

Could not afford

- 0 Could not afford- not selected
- 1 Could not afford- selected

C4f_2_21S

Facility not available

- 0 Facility not available - not selected
- 1 Facility not available - selected

C4f_3_21S

The risk of exposure to COVID-19

- 0 The risk of exposure to COVID-19 - not selected
- 1 The risk of exposure to COVID-19 - selected

C4f_97_21S

Other Reason

- 0 Other Reason - not selected
- 1 Other Reason - selected

C5a_21S

C5. Thinking about any health care that you delayed or did not get due to the pandemic, did the missed or delayed care cause...

a. a new physical health problem?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Yes
- 5 No
- 8 Not Sure

C5b_21S

b. worsening of an existing physical health problem?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Yes
- 5 No
- 8 Not Sure

C5c_21S

c. a new mental health problem?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Yes
- 5 No
- 8 Not Sure

C5d_21S

d. worsening of an existing mental health problem?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Yes
- 5 No
- 8 Not Sure

C6_21S

C6. Since March 2020, did you have a telephone or video visit with a doctor instead of an in-person visit with a doctor? (Mark [X] ONE box.)

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Yes
- 5 No

C7_21S

C7. How likely are you to use telephone or video visits with a doctor in the future? (Mark [X] ONE box.)

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Very likely
- 2 Somewhat likely
- 3 Not very likely
- 4 Not at all likely

C8a_21S

C8. Compared to before the pandemic, how have the following things changed for you?

a. Your energy level?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Much Better
- 2 Somewhat Better
- 3 No Change
- 4 Somewhat Worse
- 5 Much Worse

C8b_21S

b. Quality of sleep?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Much Better
- 2 Somewhat Better
- 3 No Change
- 4 Somewhat Worse
- 5 Much Worse

C8c_21S

c. Memory?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Much Better
- 2 Somewhat Better
- 3 No Change
- 4 Somewhat Worse
- 5 Much Worse

C8d_21S

d. Ability to concentrate?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Much Better
- 2 Somewhat Better
- 3 No Change
- 4 Somewhat Worse
- 5 Much Worse

C8e_21S

e. Mood?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Much Better
- 2 Somewhat Better
- 3 No Change
- 4 Somewhat Worse
- 5 Much Worse

C8f_21S

f. Breathing?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Much Better
- 2 Somewhat Better
- 3 No Change
- 4 Somewhat Worse
- 5 Much Worse

C8g_21S

g. Ability to walk?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Much Better
- 2 Somewhat Better
- 3 No Change
- 4 Somewhat Worse
- 5 Much Worse

C8h_21S

h. Ability to taste or smell things?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Much Better
- 2 Somewhat Better
- 3 No Change
- 4 Somewhat Worse
- 5 Much Worse

C8i_21S

i. Digestive issues such as diarrhea?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Much Better
- 2 Somewhat Better
- 3 No Change
- 4 Somewhat Worse
- 5 Much Worse

SECTION D

D1_21S

D1. Because of the continuing coronavirus crisis, starting with January 2021, some families received additional economic impact payments.

Have you (or your spouse/partner) received any payments in 2021? (Mark [X] ONE box.)

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Yes
- 5 No

D2_21S

D2. How much money did you (and your spouse/partner) receive altogether?

- 9 Missing/Blank
- 0-114000** 0-114,000 dollars

D3_21S

D3. Thinking about your (and your spouse/partner's) financial situation this year, will the payment lead you to mostly increase spending, mostly to increase saving, mostly to pay off debt, or what? (Mark [X] ONE box.)

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Increase spending
- 2 Increase saving
- 3 Pay off debt
- 4 Give it to charity
- 5 Give to family or friends
- 97 Other: Specify

D4_1_21S

D4. Besides what you indicated in Question D3, will the payment lead you to do any of the following? (Mark [X] all that apply.)

Increase spending

- 0 Increase spending - not selected
- 1 Increase spending - selected

D4_2_21S

Increase saving

- 0 Increase saving - not selected
- 1 Increase saving - selected

D4_3_21S

Pay off debt

- 0 Pay off debt - not selected
- 1 Pay off debt - selected

D4_4_21S

Give it to charity

- 0 Give it to charity- not selected
- 1 Give it to charity- selected

D4_5_21S

Give to family or friends

- 0 Give to family or friends- not selected
- 1 Give to family or friends- selected

D4_97_21S

Other

- 0 Other: Specify - not selected
- 1 Other: Specify - selected

SECTION E

E1_21S

E1. What kind of work, if any, did you do in early March 2020 before the pandemic started? (Mark [X] ONE box.)

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 I worked for pay for someone else
- 2 I was self-employed (I worked for myself/in my own business)
- 3 I worked for someone else and I also worked for myself
- 4 I didn't work

E2_21S

E2. Since March 2020 was there a period of two weeks or more when you were not working? (Mark [X] ONE box.)

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Yes
- 5 No

E3_1_21S

E3. Why did you stop working? (Mark [X] all that apply.)

Lost job/laid off permanently

- 0 Lost job/laid off permanently- not selected
- 1 Lost job/laid off permanently- selected

E3_2_21S

Furloughed/laid off temporarily

- 0 Furloughed/laid off temporarily- not selected
- 1 Furloughed/laid off temporarily- selected

E3_3_21S

Vacation/voluntary time off

- 0 Vacation/voluntary time off- not selected
- 1 Vacation/voluntary time off- selected

E3_4_21S

Illness

- 0 Illness- not selected
- 1 Illness- selected

E3_5_21S

Care for others who needed me

- 0 Care for others who needed me - not selected
- 1 Care for others who needed me - selected

E3_6_21S

Quit

- 0 Quit- not selected
- 1 Quit- selected

E3_7_21S

Retired

- 0 Retired - not selected
- 1 Retired - selected

E3_97_21S

Other

- 0 Other: Specify - not selected
- 1 Other: Specify - selected

E4_21S

E4. Did you work for a month or more between March 2020 and March 2021?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Yes
- 5 No

E5_21S

E5. Because of your job, were you considered an essential worker?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Yes
- 5 No
- 8 I'm not sure

E6_21S

E6. When you worked between March 2020 and March 2021, did you work from home most of the time or did you work at your regular workplace most of the time?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Home
- 2 Regular workplace

E7_21S

E7. At your regular workplace, did you work in close physical contact (within six feet) with your co-workers? If you had more than one job since March 2020, please answer this question for the job you worked at the longest or consider to be your main job. (Mark [X] ONE box.)

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Always
- 2 Sometimes
- 3 Never

E8_21S

E8. At your regular workplace, were you in close physical contact (within six feet) with people who were not your co-workers? (Mark [X] ONE box.)

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Always
- 2 Sometimes
- 3 Never

E9_21S

E9. Regardless of whether you worked from home since March 2020, would you like to work from home after the pandemic is over? (Mark [X] ONE box.)

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Yes, all of the time
- 2 Yes, some of the time
- 3 No
- 4 My job could not be done from home

E10a_21S

E10. Compared to before the pandemic, how did the following aspects of your work change during the pandemic from March 2020 to March 2021?

a. How much physical effort it takes to do your job

- 9 Missing/Blank
- 8 Multiple Sections (In Error)
- 1 Increased
- 2 Stayed about the same
- 3 Decreased
- 4 Not Applicable

E10b_21S

b. How much stress is caused by your job_21S

- 9 Missing/Blank
- 8 Multiple Sections (In Error)
- 1 Increased
- 2 Stayed about the same
- 3 Decreased
- 4 Not Applicable

E10c_21S

c. Your enjoyment of your job

- 9 Missing/Blank
- 8 Multiple Sections (In Error)
- 1 Increased
- 2 Stayed about the same
- 3 Decreased

- 4 Not Applicable

E10d_21S

d. The risk or danger of your job

- 9 Missing/Blank
- 8 Multiple Sections (In Error)
- 1 Increased
- 2 Stayed about the same
- 3 Decreased
- 4 Not Applicable

E10e_21S

e. Your work schedule interfering with your ability to fulfill personal responsibilities

- 9 Missing/Blank
- 8 Multiple Sections (In Error)
- 1 Increased
- 2 Stayed about the same
- 3 Decreased
- 4 Not Applicable

E10f_21S

f. Job worries or problems distracting you when you are not at work

- 9 Missing/Blank
- 8 Multiple Sections (In Error)
- 1 Increased
- 2 Stayed about the same
- 3 Decreased
- 4 Not Applicable

E10g_21S

g. Not being able to get work done on time because of your home life

- 9 Missing/Blank
- 8 Multiple Sections (In Error)
- 1 Increased
- 2 Stayed about the same
- 3 Decreased
- 4 Not Applicable

E10h_21S

h. How much your family or personal life drains you of the energy you need to do your job

- 9 Missing/Blank
- 8 Multiple Sections (In Error)
- 1 Increased
- 2 Stayed about the same
- 3 Decreased
- 4 Not Applicable

E11_1_21S

E11. Consider the employer you worked for or your own business in early March 2020. Was that employer or business affected in any of the following ways because of the coronavirus pandemic? (Mark [X] All that apply.)

Closed down and remained closed

- 0 Closed down and remained closed- not selected
- 1 Closed down and remained closed- selected

E11_2_21S

Closed down for some time

- 0 Closed down for some time- not selected
- 1 Closed down for some time- selected

E11_3_21S

Amount of business decreased

- 0 Amount of business decreased- not selected
- 1 Amount of business decreased- selected

E11_4_21S

Amount of business increased

- 0 Amount of business increased- not selected
- 1 Amount of business increased- selected

E11_5_21S

Incurred major losses

- 0 Incurred major losses- not selected
- 1 Incurred major losses- selected

E11_6_21S

Switched to do something else

- 0 Switched to do something else- not selected
- 1 Switched to do something else- selected

E11_7_21S

None of the above

- 0 None of the above- not selected
- 1 None of the above- selected

E12_21S

E12. Did your employer or business apply for government loans to help get through the pandemic?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Yes
- 5 No
- 8 Don't know

E13_21S

E13. Did they receive a loan?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Yes
- 5 No
- 8 Don't know

E14_21S

E14. ANSWER THIS QUESTION ONLY IF YOU MARKED "Closed down and remained closed" AT QUESTION E11.

If your employer or your business closed down and has remained closed, do you think it will reopen after the pandemic? Mark [X] ONE box.)

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Yes
- 5 No
- 8 Don't know

SECTION F

F1_21S

F1. This section asks questions about income, spending, and financial well-being. If you live with other people, the questions in this section refer to the income, spending, and well-being of your entire household.

Since March 2020, has your household's income gone up, gone down or stayed about the same? (Mark [X] ONE box.)

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Income went up
- 2 Income went down
- 3 Stayed about the same

F2a_21S

F2. Overall, how did the following types of income change?

a. Earnings from work

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Increased
- 2 Decreased
- 3 No Change
- 4 My Household does not have this kind of income

F2b_21S

b. Income from retirement plans or other assets

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Increased
- 2 Decreased
- 3 No Change
- 4 My Household does not have this kind of income

F2c_21S

c. Income from business

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Increased
- 2 Decreased
- 3 No Change
- 4 My Household does not have this kind of income

F2d_21S

d. Income from the government, not counting the impact checks

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Increased
- 2 Decreased
- 3 No Change
- 4 My Household does not have this kind of income

F2e_21S

e. Other types of income not in this list:

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Increased
- 2 Decreased
- 3 No Change
- 4 My Household does not have this kind of income

F2f_21S

f. Other types of income not in this list:

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Increased
- 2 Decreased
- 3 No Change
- 4 My Household does not have this kind of income

F3_21S

F3. Has your household's spending gone up, gone down, or stayed the same since March 2020? (Mark [X] ONE box.)

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Spending went up
- 2 Spending went down
- 3 Stayed about the same

F4a_21S

F4. Since March 2020, how often did you experience any of the following?

a. Missed any regular payments on rent or mortgage

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Never
- 2 Sometimes
- 3 Often
- 4 Always or Nearly Always

F4b_21S

b. Missed any regular payments on credit cards or other debt

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Never
- 2 Sometimes
- 3 Often
- 4 Always or Nearly Always

F4c_21S

c. Missed any other regular payments such as utilities or insurance

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Never
- 2 Sometimes
- 3 Often
- 4 Always or Nearly Always

F4d_21S

d. Could not pay medical bills

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Never
- 2 Sometimes
- 3 Often
- 4 Always or Nearly Always

F4e_21S

e. Didn't have enough money to buy food

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Never
- 2 Sometimes
- 3 Often
- 4 Always or Nearly Always

F4f_21S

f. Had trouble buying food even though had money

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Never
- 2 Sometimes
- 3 Often
- 4 Always or Nearly Always

F4g_21S

g. Any other financial hardship not in this list

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Never
- 2 Sometimes
- 3 Often
- 4 Always or Nearly Always

SECTION G

G1_21S

**G1. Did you change where you live for one month or more since March 2020 because of the coronavirus pandemic?
(Mark [X] ONE box.)**

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Yes
- 5 No

G2_1_21S

To my/our own home

- 0 To my/our own home- not selected
- 1 To my/our own home- selected

G2_2_21S

To a child's/stepchild's home

- 0 To a child's/stepchild's home- not selected
- 1 To a child's/stepchild's home- selected

G2_3_21S

To a home of some other family member

- 0 To a home of some other family member- not selected
- 1 To a home of some other family member- selected

G2_4_21S

To a friend's home

- 0 To a friend's home- not selected
- 1 To a friend's home- selected

G2_5_21S

To a health care facility (including nursing home)

- 0 To a health care facility (including nursing home)- not selected
- 1 To a health care facility (including nursing home)- selected

G2_97_21S

Other place not listed:

- 0 Other place not listed- not selected
- 1 Other place not listed- selected

G3_21S

**G3. Did someone move in with you for a month or more since March 2020 because of the coronavirus pandemic?
(Mark [X] ONE box.)**

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Yes
- 5 No

G4_1_21S

G4. Who moved in with you and lived with you for more than a month since March 2020? (Mark [X] all that apply.)

One or more of your children (including spouse's or partner's children)

- 0 1 or more of your children (incl spouse's/partner) -not selected
- 1 1 or more of your children (incl spouse's/partner)- selected

G4_2_21S

One or more of your grandchildren (including spouse's or partner's grandchildren)

- 0 1 or more of your gchildrn (incl spouse's/partner)- not selected
- 1 1 or more of your gchildrn (incl spouse's/partner)- selected

G4_3_21S

One or more of your parents (own or spouse's or partner's)

- 0 1 or more of your parents (own or spouse's/partner's)- not selected

- 1 1 or more of your parents (own or spouse's/partner's)- selected

G4_4_21S

One or more other people

- 0 1 or more other people- not selected
1 1 or more other people- selected

G5_21S

G5. Do you currently live alone? (Mark [X] ONE box.)

- 9 Missing/Blank
-8 Multiple Selections in (Error)
1 Yes
5 No

G6_1_21S

G6. If you live with someone else, who is that? (Mark [X] all that apply.)

My spouse or partner

- 0 My spouse or partner- not selected
1 My spouse or partner- selected

G6_2_21S

One or more children or grandchildren (including spouse's or partner's)

- 0 1 or more children/ gchildrn (incl spouse's/partner)- not selected
1 1 or more children/ gchildrn (incl spouse's/partner)- selected

G6_3_21S

One or more parents (own or spouse's or partner's)

- 0 1 or more parents (own or spouse's/partner's- not selected
1 1 or more parents (own or spouse's/partner's- selected

G6_4_21S

One or more other people

- 0 1 or more other people- not selected
1 1 or more other people- selected

G7_21S

G7. The coronavirus pandemic has affected many aspects of families' lives and many people have needed help. Because of the coronavirus pandemic, did anyone living outside your household help you (and your spouse/partner) with money or paying bills, shopping for groceries, errands, rides, or chores, or with advice, encouragement, moral or emotional support? (Mark [X] ONE box.)

- 9 Missing/Blank
-8 Multiple Selections (In Error)
1 Yes
5 No

G8a_1_21S

G8. Who helped you with...

a. money or paying bills

- 0 Child(ren) or grandchild(ren) - not selected
1 Child(ren) or grandchild(ren) - selected

G8a_2_21S

a. money or paying bills

- 0 Parent(s) or other relative(s)- not selected
1 Parent(s) or other relative(s)- selected

G8a_3_21S

a. money or paying bills

- 0 Friend(s)- not selected

- 1 Friend(s)- selected

G8a_4_21S

a. money or paying bills

- 0 Neighbor(s) or other non-relative(s)- not selected
1 Neighbor(s) or other non-relative(s)- selected

G8a_5_21S

a. money or paying bills

- 0 Other- not selected
1 Other- selected

G8a_6_21S

a. money or paying bills

- 0 No one helped me/us with this- not selected
1 No one helped me/us with this- selected

G8b_1_21S

b. shopping for groceries, errands, rides, or chores

- 0 Child(ren) or grandchild(ren) - not selected
1 Child(ren) or grandchild(ren) - selected

G8b_2_21S

b. shopping for groceries, errands, rides, or chores

- 0 Parent(s) or other relative(s)- not selected
1 Parent(s) or other relative(s)- selected

G8b_3_21S

b. shopping for groceries, errands, rides, or chores

- 0 Friend(s)- not selected
1 Friend(s)- selected

G8b_4_21S

b. shopping for groceries, errands, rides, or chores

- 0 Neighbor(s) or other non-relative(s)- not selected
1 Neighbor(s) or other non-relative(s)- selected

G8b_5_21S

b. shopping for groceries, errands, rides, or chores

- 0 Other- not selected
1 Other- selected

G8b_6_21S

b. shopping for groceries, errands, rides, or chores

- 0 No one helped me/us with this- not selected
1 No one helped me/us with this- selected

G8c_1_21S

c. advice, encouragement, moral or emotional support

- 0 Child(ren) or grandchild(ren) - not selected
1 Child(ren) or grandchild(ren) - selected

G8c_2_21S

c. advice, encouragement, moral or emotional support

- 0 Parent(s) or other relative(s)- not selected
1 Parent(s) or other relative(s)- selected

G8c_3_21S

c. advice, encouragement, moral or emotional support

- 0 Friend(s)- not selected
- 1 Friend(s)- selected

G8c_4_21S

c. advice, encouragement, moral or emotional support

- 0 Neighbor(s) or other non-relative(s)- not selected
- 1 Neighbor(s) or other non-relative(s)- selected

G8c_5_21S

c. advice, encouragement, moral or emotional support

- 0 Other- not selected
- 1 Other- selected

G8c_6_21S

c. advice, encouragement, moral or emotional support

- 0 No one helped me/us with this- not selected
- 1 No one helped me/us with this- selected

G9_21S

G9. Because of the coronavirus pandemic, have you (and your spouse/partner) helped anyone living outside your household with money or paying bills, shopping for groceries, errands, rides, or chores, or with advice, encouragement, moral or emotional support? (Mark [X] ONE box.)

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Yes
- 5 No

G10a_1_21S

G10. Whom did you help with...

a. money or paying bills

- 0 Child(ren) or grandchild(ren) - not selected
- 1 Child(ren) or grandchild(ren) - selected

G10a_2_21S

a. money or paying bills

- 0 Parent(s) or other relative(s)- not selected
- 1 Parent(s) or other relative(s)- selected

G10a_3_21S

a. money or paying bills

- 0 Friend(s)- not selected
- 1 Friend(s)- selected

G10a_4_21S

a. money or paying bills

- 0 Neighbor(s) or other non-relative(s)- not selected
- 1 Neighbor(s) or other non-relative(s)- selected

G10a_5_21S

a. money or paying bills

- 0 Other- not selected
- 1 Other- selected

G10a_6_21S

a. money or paying bills

- 0 I/we helped no one with this- not selected
- 1 I/we helped no one with this- selected

G10b_1_21S

b. shopping for groceries, errands, rides, or chores

- 0 Child(ren) or grandchild(ren) - not selected
- 1 Child(ren) or grandchild(ren) - selected

G10b_2_21S

b. shopping for groceries, errands, rides, or chores

- 0 Parent(s) or other relative(s)- not selected
- 1 Parent(s) or other relative(s)- selected

G10b_3_21S

b. shopping for groceries, errands, rides, or chores

- 0 Friend(s)- not selected
- 1 Friend(s)- selected

G10b_4_21S

b. shopping for groceries, errands, rides, or chores

- 0 Neighbor(s) or other non-relative(s)- not selected
- 1 Neighbor(s) or other non-relative(s)- selected

G10b_5_21S

b. shopping for groceries, errands, rides, or chores

- 0 Other- not selected
- 1 Other- selected

G10b_6_21S

b. shopping for groceries, errands, rides, or chores

- 0 I/we helped no one with this- not selected
- 1 I/we helped no one with this- selected

G10c_1_21S

c. advice, encouragement, moral or emotional support

- 0 Child(ren) or grandchild(ren) - not selected
- 1 Child(ren) or grandchild(ren) - selected

G10c_2_21S

c. advice, encouragement, moral or emotional support

- 0 Parent(s) or other relative(s)- not selected
- 1 Parent(s) or other relative(s)- selected

G10c_3_21S

c. advice, encouragement, moral or emotional support

- 0 Friend(s)- not selected
- 1 Friend(s)- selected

G10c_4_21S

c. advice, encouragement, moral or emotional support

- 0 Neighbor(s) or other non-relative(s)- not selected
- 1 Neighbor(s) or other non-relative(s)- selected

G10c_5_21S

c. advice, encouragement, moral or emotional support

- 0 Other- not selected
- 1 Other- selected

G10c_6_21S

c. advice, encouragement, moral or emotional support

- 0 I/we helped no one with this- not selected
- 1 I/we helped no one with this- selected

SECTION H

H1a_21S

H1. On a scale from 0 to 10 where 0 means "not at all worried" and 10 means "very worried," during the first year of the pandemic from March 2020 to March 2021, how worried were you about...

a. your own health?

- 9 Missing/Blank
- 8 Multiple Selections (In error)
- 0 Not at all worried
- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10 Very Worried

H1b_21S

b. the health of others in your family?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 0 Not at all worried
- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10 Very worried

H1c_21S

c. your financial situation?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 0 Not at all worried
- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10 Very worried

H1d_21S

d. being able to get help if you needed it from family, friends, or others?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 0 Not at all worried
- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10 Very Worried

H1e_21S

e. what will happen in the future?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 0 Not at all worried
- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10 Very worried

H2a_21S

H2. On a scale from 0 to 10 where 0 means "no control at all" and 10 means "very much control," during the first year of the pandemic from March 2020 to March 2021 how would you rate...

a. the amount of control you had over your health?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 0 No control at all
- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10 Very much control

H2b_21S

b. the amount of control you had over your social life?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 0 No control at all
- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10 Very much control

H2c_21S

c. the amount of control you had over your financial situation ?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 0 No control at all
- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10 Very much control

H3a_21S

H3. During the first year of the pandemic from March 2020 to March 2021, to what degree did you feel...

a. hopeful?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Very much
- 2 Quite a bit
- 3 Moderately
- 4 A little
- 5 Not at all

H3b_21S

b. happy?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Very much
- 2 Quite a bit
- 3 Moderately
- 4 A little
- 5 Not at all

H3c_21S

c. calm?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Very much
- 2 Quite a bit
- 3 Moderately
- 4 A little
- 5 Not at all

H3d_21S

d. content?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Very much
- 2 Quite a bit
- 3 Moderately
- 4 A little
- 5 Not at all

H3e_21S

e. determined?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Very much
- 2 Quite a bit
- 3 Moderately
- 4 A little
- 5 Not at all

H3f_21S

f. bored?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Very much
- 2 Quite a bit
- 3 Moderately
- 4 A little
- 5 Not at all

H3g_21S

g. distressed?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Very much
- 2 Quite a bit
- 3 Moderately
- 4 A little
- 5 Not at all

H3h_21S

h. afraid?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Very much
- 2 Quite a bit
- 3 Moderately
- 4 A little
- 5 Not at all

H3i_21S

i. worried?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Very much
- 2 Quite a bit
- 3 Moderately
- 4 A little
- 5 Not at all

H3j_21S

j. lonely?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Very much
- 2 Quite a bit
- 3 Moderately
- 4 A little
- 5 Not at all

H3k_21S

k. sad?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Very much
- 2 Quite a bit
- 3 Moderately
- 4 A little
- 5 Not at all

H3l_21S

l. nervous?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Very much
- 2 Quite a bit
- 3 Moderately
- 4 A little
- 5 Not at all

H4_21S

H4. Since March 2020, was there ever a time when you felt sad, blue, or depressed FOR TWO WEEKS OR MORE IN A ROW?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Yes
- 5 No
- 8 Don't know

H5_21S

H5. Since March 2020, was there EVER A TIME LASTING TWO WEEKS OR MORE when you lost interest in most things like hobbies, work, or activities that usually give you pleasure?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Yes
- 5 No
- 8 Don't know

H6_21S

H6. ANSWER H6-H8 ONLY IF YOU MARKED "YES" TO QUESTION H4 OR "YES" TO QUESTION H5. ALL OTHERS SHOULD SKIP TO QUESTION H9.

Please think of the two-week period when these feelings of sadness or loss of interest were at their worst. During that two-week period did the feelings or loss of interest usually last all day long, most of the day, about half the day, or less than half the day?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 All day long
- 2 Most of the day
- 3 About half the day
- 4 Less than half the day

H7_21S

H7. Did you feel this way every day, almost every day, or less often during the two weeks?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 All day long
- 2 Most of the day
- 3 About half the day
- 4 Less than half the day

H8a_21S

H8. During those two weeks did...

a. you feel tired out or low energy all the time?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Yes
- 5 No
- 8 Don't Know

H8b_21S

b. you lose your appetite?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Yes
- 5 No
- 8 Don't Know

H8c_21S

c. your appetite increase?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Yes
- 5 No
- 8 Don't Know

H8d_21S

d. you have more trouble falling asleep than you usually do?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Yes
- 5 No
- 8 Don't Know

H8e_21S

e. you have a lot more trouble concentrating than usual?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Yes
- 5 No
- 8 Don't Know

H8f_21S

f. you feel down on yourself, no good, or worthless?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Yes
- 5 No
- 8 Don't Know

H8g_21S

g. you think a lot about death -- either your own, someone else's, or death in general?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Yes
- 5 No
- 8 Don't Know

H9a_21S

H9. The next two questions are about the amount of contact with those family and friends who do not live with you. First, think about the amount of in-person contact you had. Compared with the months prior to March 2020 how did the amount of in-person contact you had change during the first year of the pandemic from March 2020 to March 2021? Did the amount of in-person contact with...

a. your children

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Increase
- 2 Decrease
- 3 About the same
- 4 Doesn't apply to me

H9b_21S

b. your grandchildren

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Increase
- 2 Decrease
- 3 About the same
- 4 Doesn't apply to me

H9c_21S

c. your parents or in-laws

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Increase
- 2 Decrease
- 3 About the same
- 4 Doesn't apply to me

H9d_21S

d. other family members

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Increase
- 2 Decrease
- 3 About the same
- 4 Doesn't apply to me

H9e_21S

e. your friends

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Increase
- 2 Decrease
- 3 About the same
- 4 Doesn't apply to me

H9f_21S

f. your neighbors

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Increase
- 2 Decrease
- 3 About the same
- 4 Doesn't apply to me

H10a_21S

H10. Now, please think about the other kinds of contact you had with those family and friends who do not live with you, such as telephone or internet contact using phone, email, Facetime, Facebook, Skype, Zoom, or social media. Compared with the months prior to March 2020 how did the amount of this type of contact you had change during the first year of the pandemic from March 2020 to March 2021? Did the amount of this type of contact with...

a. your children

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Increase
- 2 Decrease
- 3 About the same
- 4 Doesn't apply to me

H10b_21S

b. your grandchildren

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Increase
- 2 Decrease
- 3 About the same
- 4 Doesn't apply to me

H10c_21S

c. your parents or in-laws

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Increase
- 2 Decrease
- 3 About the same
- 4 Doesn't apply to me

H10d_21S

d. other family members

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Increase
- 2 Decrease
- 3 About the same
- 4 Doesn't apply to me

H10e_21S

e. your friends

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Increase
- 2 Decrease
- 3 About the same
- 4 Doesn't apply to me

H10f_21S

f. your neighbors

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Increase
- 2 Decrease
- 3 About the same
- 4 Doesn't apply to me

H11a_21S

H11. Since March 2020, how has the quality of any of your relationships with people outside your household changed? Is the quality of your relationship with...

a. your children

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Better
- 2 Worse
- 3 About the same
- 4 Doesn't apply to me

H11b_21S

b. your grandchildren

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Better
- 2 Worse
- 3 About the same
- 4 Doesn't apply to me

H11c_21S

c. your parents or in-laws

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Better
- 2 Worse
- 3 About the same
- 4 Doesn't apply to me

H11d_21S

d. other family members

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Better
- 2 Worse
- 3 About the same
- 4 Doesn't apply to me

H11e_21S

e. your friends

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Better
- 2 Worse
- 3 About the same
- 4 Doesn't apply to me

H11f_21S

f. your neighbors

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Better
- 2 Worse
- 3 About the same
- 4 Doesn't apply to me

H12_21S

H12. Since March 2020, how often have you experienced discrimination in everyday life (for example, because of your race/ethnicity, age, gender, financial status, disability, weight, physical appearance, religion, or other reason)? (Mark [X] ONE box.)

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Often
- 2 Sometimes
- 3 Hardly ever
- 4 Never

H13_21S

H13. Is this about the same, more, or less often than before the outbreak? (Mark [X] ONE box.)

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 About the same
- 2 More often
- 3 Less often

H14a_21S

H14. During the first year of the pandemic from March 2020 to March 2021, how often did you...

a. wear a mask around other people outside your home (for example, in shops)?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Always
- 2 Most of the time
- 3 Half the time
- 4 Less than half the time
- 5 Never
- 6 Doesn't apply to me

H14b_21S

b. keep distance from others when you went outside your home?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Always
- 2 Most of the time
- 3 Half the time
- 4 Less than half the time
- 5 Never
- 6 Doesn't apply to me

H14c_21S

c. wash your hands with soap or use hand sanitizers after being around others?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Always
- 2 Most of the time
- 3 Half the time
- 4 Less than half the time
- 5 Never
- 6 Doesn't apply to me

H15a_21S

H15. Compared to the months before March 2020, how much did your activities change during the first year of the pandemic from March 2020 to March 2021? Was there a change in how often you...

a. left your home?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Did more often
- 2 Did less often
- 3 About the same
- 4 Did not do before March 2020 and do not do now

H15b_21S

b. went shopping?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Did more often
- 2 Did less often
- 3 About the same
- 4 Did not do before March 2020 and do not do now

H15c_21S

c. traveled to visit family members?

- 9 Missing/Blank

- 8 Multiple Selections (In Error)
- 1 Did more often
- 2 Did less often
- 3 About the same
- 4 Did not do before March 2020 and do not do now

H15d_21S

d. traveled to visit friends?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Did more often
- 2 Did less often
- 3 About the same
- 4 Did not do before March 2020 and do not do now

H15e_21S

e. attended religious services outside your home?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Did more often
- 2 Did less often
- 3 About the same
- 4 Did not do before March 2020 and do not do now

H15f_21S

f. prayed, meditated or did other spiritual activities at home?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Did more often
- 2 Did less often
- 3 About the same
- 4 Did not do before March 2020 and do not do now

H15g_21S

g. exercised at home?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Did more often
- 2 Did less often
- 3 About the same
- 4 Did not do before March 2020 and do not do now

H15h_21S

h. walked outside your home?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Did more often
- 2 Did less often
- 3 About the same
- 4 Did not do before March 2020 and do not do now

H15i_21S

i. did hobbies, crafts, or puzzles?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Did more often
- 2 Did less often
- 3 About the same
- 4 Did not do before March 2020 and do not do now

H15j_21S

j. watched TV, Netflix, stream movies, or shows?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Did more often
- 2 Did less often
- 3 About the same

- 4 Did not do before March 2020 and do not do now

H15k_21S

k. volunteered?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Did more often
- 2 Did less often
- 3 About the same
- 4 Did not do before March 2020 and do not do now

H15l_21S

l. did garden work or home repairs?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Did more often
- 2 Did less often
- 3 About the same
- 4 Did not do before March 2020 and do not do now

H15m_21S

m. read books, magazines, or newspapers (in print or digitally)?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Did more often
- 2 Did less often
- 3 About the same
- 4 Did not do before March 2020 and do not do now

H15n_21S

n. ate or drank in a restaurant, café, or bar?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Did more often
- 2 Did less often
- 3 About the same
- 4 Did not do before March 2020 and do not do now

H15o_21S

o. spent time in a public park, beach, or nature area?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Did more often
- 2 Did less often
- 3 About the same
- 4 Did not do before March 2020 and do not do now

H15p_21S

p. visited an arts or cultural site (for example, museum, theater, art gallery)?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Did more often
- 2 Did less often
- 3 About the same
- 4 Did not do before March 2020 and do not do now

H15q_21S

q. exercised in a recreational facility (for example, gym, studio, pool)?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Did more often
- 2 Did less often
- 3 About the same
- 4 Did not do before March 2020 and do not do now

H15r_21S

r. provided or assisted your children or grandchildren with home schooling?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Did more often
- 2 Did less often
- 3 About the same
- 4 Did not do before March 2020 and do not do now

H15s_21S

s. cooked meals?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Did more often
- 2 Did less often
- 3 About the same
- 4 Did not do before March 2020 and do not do now

H15t_21S

t. drank alcohol?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Did more often
- 2 Did less often
- 3 About the same
- 4 Did not do before March 2020 and do not do now

H15u_21S

u. ate chips, candies, or other junk food?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Did more often
- 2 Did less often
- 3 About the same
- 4 Did not do before March 2020 and do not do now

H15v_21S

v. used cigarettes, e-cigarettes, or other tobacco?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Did more often
- 2 Did less often
- 3 About the same
- 4 Did not do before March 2020 and do not do now

H16_21S

H16. Since March 2020, have you learned how to use a new technology device (for example, an iPad), application, or computer program? (Mark [X] ONE box.)

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Yes
- 5 No

H17a_21S

H17. In your neighborhood, compared to before the coronavirus pandemic started in March 2020, what is the availability now of...

a. community events and gatherings (for example, fairs, markets, live music)?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 More
- 2 About the same
- 3 Less
- 4 Does not apply to my neighborhood
- 8 Don't Know

H17b_21S

b. places to shop?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 More
- 2 About the same
- 3 Less
- 4 Does not apply to my neighborhood
- 8 Don't Know

H17c_21S

c. places to eat and drink?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 More
- 2 About the same
- 3 Less
- 4 Does not apply to my neighborhood
- 8 Don't Know

H17d_21S

d. places to receive healthcare?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 More
- 2 About the same
- 3 Less
- 4 Does not apply to my neighborhood
- 8 Don't Know

H17e_21S

e. places to be physically active?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 More
- 2 About the same
- 3 Less
- 4 Does not apply to my neighborhood
- 8 Don't Know

H17f_21S

f. places to learn (for example, museums, galleries, libraries, classes)?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 More
- 2 About the same
- 3 Less
- 4 Does not apply to my neighborhood
- 8 Don't Know

H17g_21S

g. places to socialize with people around your own age?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 More
- 2 About the same
- 3 Less
- 4 Does not apply to my neighborhood
- 8 Don't Know

H17h_21S

h. places to socialize with people of different ages?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 More
- 2 About the same
- 3 Less
- 4 Does not apply to my neighborhood
- 8 Don't Know

H18a_21S

H18. In your opinion, during the first year of the pandemic from March 2020 to March 2021, did the government in your state and local area do too much or too little of the following steps to slow the spread of the virus?

a. Requiring masks?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Definitely too much
- 2 Somewhat too much
- 3 About Right
- 4 Somewhat too little
- 5 Definitely too little

H18b_21S

b. Closing schools?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Definitely too much
- 2 Somewhat too much
- 3 About Right
- 4 Somewhat too little
- 5 Definitely too little

H18c_21S

c. Closing places of worship?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Definitely too much
- 2 Somewhat too much
- 3 About Right
- 4 Somewhat too little
- 5 Definitely too little

H18d_21S

d. Closing restaurants?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Definitely too much
- 2 Somewhat too much
- 3 About Right
- 4 Somewhat too little
- 5 Definitely too little

H18e_21S

e. Closing bars?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Definitely too much
- 2 Somewhat too much
- 3 About Right
- 4 Somewhat too little
- 5 Definitely too little

H18f_21S

f. Closing hair salons?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Definitely too much
- 2 Somewhat too much
- 3 About Right
- 4 Somewhat too little
- 5 Definitely too little

H18g_21S

g. Closing gyms?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)

- 1 Definitely too much
- 2 Somewhat too much
- 3 About Right
- 4 Somewhat too little
- 5 Definitely too little

H18h_21S

h. Closing movie theaters?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Definitely too much
- 2 Somewhat too much
- 3 About Right
- 4 Somewhat too little
- 5 Definitely too little

H18i_21S

i. Banning evictions?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Definitely too much
- 2 Somewhat too much
- 3 About Right
- 4 Somewhat too little
- 5 Definitely too little

H18j_21S

j. Banning utility shut-offs?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Definitely too much
- 2 Somewhat too much
- 3 About Right
- 4 Somewhat too little
- 5 Definitely too little

H19_21S

H19. During the first year of the pandemic from March 2020 to March 2021, how often would you say that people in your area wore masks that cover their nose and mouth when in public places such as stores? (Mark [X] ONE box.)

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Most of the time
- 2 More than half the time
- 3 Half the time
- 4 Less than half the time
- 5 Rarely or never

H20_21S

H20. These next questions are about household pets. Did you have one or more pets in early March 2020? (Mark [X] ONE box.)

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Yes
- 5 No, didn't have pets in early March 2020 but have gotten pets since
- 6 No, didn't have pets in early March 2020 & have not gotten since

H21_1_21S

H21. What kind of pets did you have in early March 2020? (Mark [X] all that apply.)

Dog

- 0 Dog- not selected
- 1 Dog- selected

H21_2_21S

Cat

- 0 Cat- not selected
- 1 Cat- selected

H21_3_21S

Bird

- 0 Bird- not selected
- 1 Bird- selected

H21_4_21S

Small furry animal like a ferret, rabbit, hamster, guinea pig

- 0 Small furry animal like ferret, rabbit, hamster, guinea pig-not selected
- 1 Small furry animal like ferret, rabbit, hamster, guinea pig- selected

H21_5_21S

Scaly animal like a lizard, gecko, snake

- 0 Scaly animal like a lizard, gecko, snake - not selected
- 1 Scaly animal like a lizard, gecko, snake - selected

H21_6_21S

Fish

- 0 Fish- not selected
- 1 Fish- selected

H21_97_21S

Other

- 0 Other:Specify - not selected
- 1 Other:Specify - selected

H22_21S

H22. Compared to the months prior to March 2020, did you spend more, less, or about the same amount of time with your pet(s) during the first year of the pandemic from March 2020 to March 2021? (Mark [X] ONE box.)

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 More
- 2 Less
- 3 About the same

H23_21S

H23. Compared to the months prior to March 2020, did you worry about your pet(s) more, less, or about the same during the first year of the pandemic from March 2020 to March 2021? (Mark [X] ONE box.)

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 More
- 2 Less
- 3 About the same

H24_21S

H24. Have you gotten any new pets since March 2020? (Mark [X] ONE box.)

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Yes
- 5 No

H25_1_21S

H25. What kind of new pet(s) did you get since March 2020? (Mark [X] all that apply.)

Dog

- 0 Dog- not selected
- 1 Dog- selected

H25_2_21S

Cat

- 0 Cat- not selected
- 1 Cat- selected

H25_3_21S

Bird

- 0 Bird- not selected
- 1 Bird- selected

H25_4_21S

Small furry animal like a ferret, rabbit, hamster, guinea pig

- 0 Small furry animal like ferret, rabbit, hamster, guinea pig-not selected
- 1 Small furry animal like ferret, rabbit, hamster, guinea pig- selected

H25_5_21S

Scaly animal like a lizard, gecko, snake

- 0 Scaly animal like a lizard, gecko, snake - not selected
- 1 Scaly animal like a lizard, gecko, snake - selected

H25_6_21S

Fish

- 0 Fish- not selected
- 1 Fish- selected

H25_97_21S

Other:

- 0 Other:Specify - not selected
- 1 Other:Specify - selected

H26a_21S

H26. Think back to how you felt in early March 2020 before the pandemic started. Since that time, has your pet (or all of your pets if you have more than one), helped to...

a. reduce your anxiety?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Yes
- 5 No
- 6 Does not apply

H26b_21S

b. make you happier?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Yes
- 5 No
- 6 Does not apply

H26c_21S

c. make other people in your household happier?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Yes
- 5 No
- 6 Does not apply

H27a_21S

H27. Even in hard times, sometimes people experience good things and learn new things about themselves. Please think about your own experiences since March 2020. How much do you agree or disagree with the following statements?

a. I tend to recover quickly after difficult times like this one.

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Strongly disagree
- 2 Disagree

- 3 Slightly disagree
- 4 Slightly agree
- 5 Agree
- 6 Strongly agree

H27b_21S

b. I have learned some positive things from this situation about myself.

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Strongly disagree
- 2 Disagree
- 3 Slightly disagree
- 4 Slightly agree
- 5 Agree
- 6 Strongly agree

H27c_21S

c. I found greater meaning in work or my other activities and hobbies.

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Strongly disagree
- 2 Disagree
- 3 Slightly disagree
- 4 Slightly agree
- 5 Agree
- 6 Strongly agree

H27d_21S

d. I now feel more in touch with people in my local community.

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Strongly disagree
- 2 Disagree
- 3 Slightly disagree
- 4 Slightly agree
- 5 Agree
- 6 Strongly agree

H27e_21S

e. I found new ways to connect socially with other people

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Strongly disagree
- 2 Disagree
- 3 Slightly disagree
- 4 Slightly agree
- 5 Agree
- 6 Strongly agree

H27f_21S

f. I am now more appreciative of things that I had taken for granted before.

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Strongly disagree
- 2 Disagree
- 3 Slightly disagree
- 4 Slightly agree
- 5 Agree
- 6 Strongly agree

H30_21S

Were the questions in this questionnaire answered by the person to who this questionnaire was addressed, or did someone else answer for that person?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 1 Yes, questions answered by the person to whom questionnaire addressed
- 2 Questions were answered by that person's spouse or partner
- 3 Questions were answered by that person's son or daughter
- 97 Questions answered by someone else: say if you are a relative, a friend, a care provider, or what:

Approximately, how long did it take you to complete this questionnaire?

- 9 Missing/Blank
- 8 Multiple Selections (In Error)
- 2-4320** 2 - 4320 Minutes