

MEASURE

AUSTIN COVID-19 COMMUNITY FEEDBACK SURVEY

REPORT

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Authors: Elena Luna, MPH, CPH, Paulette Blanc, MPH, CPHQ, Reyda Taylor, PhD., Jamelia “Meme” Styles, Mikhaila Moynihan

Contact MEASURE at hello@wemeasure.org

About MEASURE

MEASURE, an Austin-based nonprofit, works to empower people impacted by social disparities and the accompanying narrative.

MEASURE believes that, when used strategically, data provides a common language upon which community members can meet and increase their knowledge about the causes and work together to create equitable change and increased awareness.

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Executive Summary

This report summarizes the results of a community survey administered April 10, 2020- April 14, 2020. The objective of the survey was to gather information from community members in the Austin area about their experiences surrounding the COVID-19 pandemic. There were 949 survey responses.

The survey findings highlight:

- There are differences between racial groups on COVID-19's impact on life and employment.
- When accessing resources or services, most respondents are dissatisfied with their experience and the timeliness of services.
- Employment, food, and housing assistance are the areas where respondents are having difficulty in getting assistance.
- Overall top concerns around the COVID-19 pandemic from respondents include the reopening of the city and businesses prematurely, concern for marginalized communities, and access to medical care.

Key Takeaways and Recommendations

The following key takeaways and recommendations are based on survey responses, in addition to the strengths and limitations of the survey:

1. Not Whites are having their life more impacted by the COVID-19 pandemic, compared to Whites.
2. Both Whites and Not Whites reported not having their work affected by the Pandemic. This finding was not consistent with the current unemployment rate at the National level. Future surveys should consider asking a similar question.
3. Not Whites were having the most trouble accessing food, compared to Whites. It is recommended that resources that aid

with food assistance should be targeted in areas with high concentrations of Not Whites.

4. Survey respondents were most concerned about the city opening “too soon,” in response to the state’s stay-at-home order expiring on May 1st, 2020, as they did not feel that there was 1). Not enough testing centers; and 2). Confusion around face coverings and social distancing, when in public. To address these concerns, it is recommended that 1). additional testing centers should be provided in the Eastern area of Austin - an area of low-income; and 2). It is recommended that when in public, all residents wear face coverings, consistent with the CDC’s recommendation of reducing community-based transmission (CDC, 2020,b).
5. The concern for the lack of personal protective equipment for marginalized communities was a top theme. It is recommended that these communities be targeted by agencies who have the resources to provide these communities with personal protective equipment assistance that they are in need of.
6. Access or delay of medical services was an additional theme that emerged. To address this, it is recommended that a resource sheet of free or low-cost telemedicine services be made available to the public.
7. Due to the nature of the study design and sampling technique , it is recommended that future studies use 1). A more robust design; and/or 2). Identify other avenues to reach marginalized populations, like the homeless; incarcerated; undocumented; and those with low-incomes.
8. The final recommendation is a Call to Action: We ask community organizations and local resource providers to work together to

improve the overall experience and timeliness for delivering services to those in need.

Background

The leaders of Community Resilience Trust (CRT), an Austin-based organization, created a [website](#) to help Austin area residents find resources to assist them through the coronavirus pandemic. CRT and other community organizers wanted to gather data to understand what the needs are to help organizations provide more equitable responses during this current pandemic and for future disasters. The survey was designed to capture what the Austin community, particularly its underserved population, is experiencing around COVID-19, what their experiences have been like with accessing resources, and capture what resources are lacking.

Special acknowledgements to Fatima Mann, Angelica Erazo, Paulette Blanc, Mikhaila Moynihan, Amanda Rodriguez, Reyda Taylor, Precious Azuree, Kelle Coleman, Joshua Robinson, Ruben Cantu, Sandy Romero, Amanda Jasso, Kazique Prince, Tomilayo Ogungbamigbe, and Elena Luna for being a part of the survey design team.

Survey Design and Measures

The survey questions were designed by MEASURE and Mission Capital. Survey questions focused on getting participant's sentiments on the impact of the pandemic on life and employment, accessing resources, ability to take care of basic needs, and demographic characteristics. The survey draft was reviewed by the survey design team for additional feedback and finally sent to the City of Austin Equity Office and Equity Action Team for a final review. The twenty-one-item survey included questions about the impact of COVID-19 on life and employment; respondent's experience with accessing

and satisfaction of services, and current status of basic needs, in addition to demographics. All measures were self-reported (see Appendix for full survey).

Sampling and Data Collection

The target population for this study were residents of Austin, TX with a specific focus on underserved communities. Non-probability sampling was used to sample participants. Those who met the inclusion criteria of living in the Austin, TX and surrounding areas were eligible to participate.

Data was collected via a web link on SurveyMonkey. The survey was distributed through community partners (primarily those who serve the target population), using their email listservs and their social media channels. The survey was available from April 10, 2020 - April 24, 2020. The survey was available in English, Spanish, Vietnamese, Chinese, and Arabic.

Community Partners:

- Community Resilience Trust
- Mission Capital
- Hearts2Heal
- Go Austin/Vamos Austin
- Life Anew Restorative Justice
- Black Mamas ATX
- Build with Humanity, LLC
- Leadership Austin
- The City of Austin Equity Office
- Equidad ATX
- Community Advocacy & Healing Project

Data Analysis Methodology

This was a mixed-methods community-based survey that aimed to understand the needs of residents of Austin, TX, during the COVID-19 pandemic, specifically by race/ethnicity. Both qualitative and quantitative analysis will be used. Quantitative data will be analyzed using Excel. The race/ethnicity variable was dichotomized into “White” and “Not White.”

Respondents who selected “other” were not included in the final sample. Qualitative analysis will involve a Grounded Theory approach, using emergent methodology to understand the data.

Survey Results

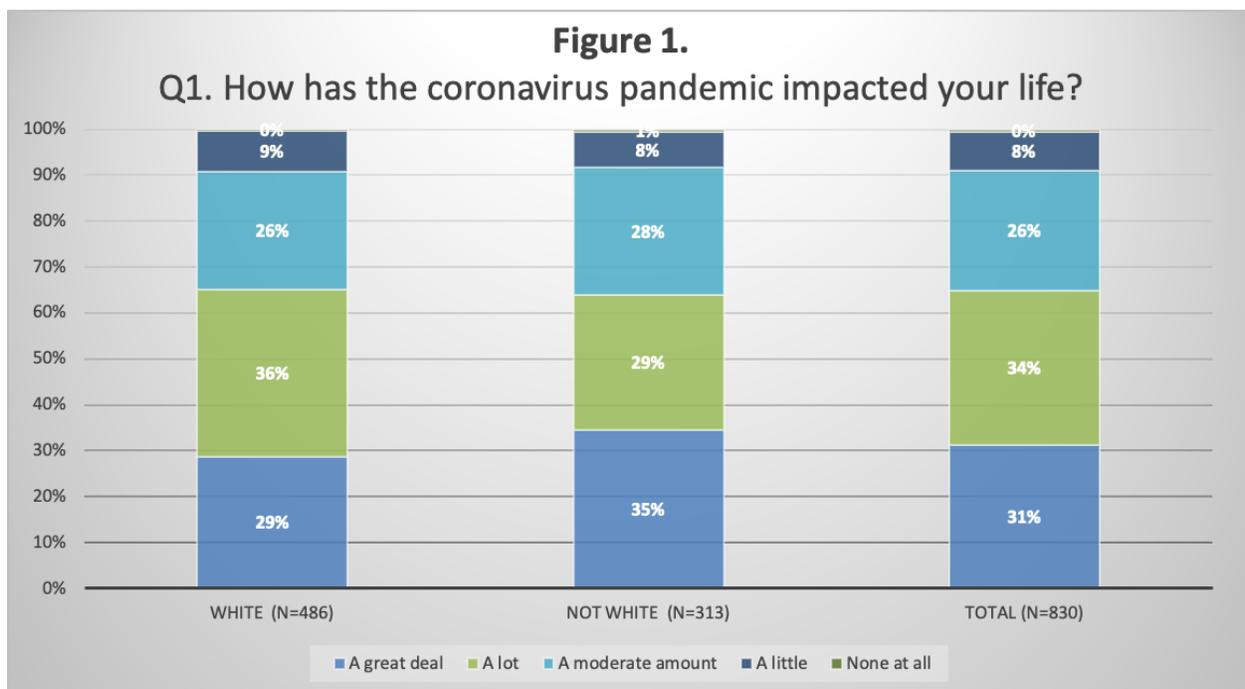
For this section, the main findings will be shared. A total of 949 (n=949) people responded to the survey. The demographics of survey respondents include age groups with majority (52.6%) in the 35-64 years old group; the racial groups were majority in the White group (58.3%) and Not White (38.0%); average household size of 2.6 persons; and an average number of 0.8 dependents. See Table 1.

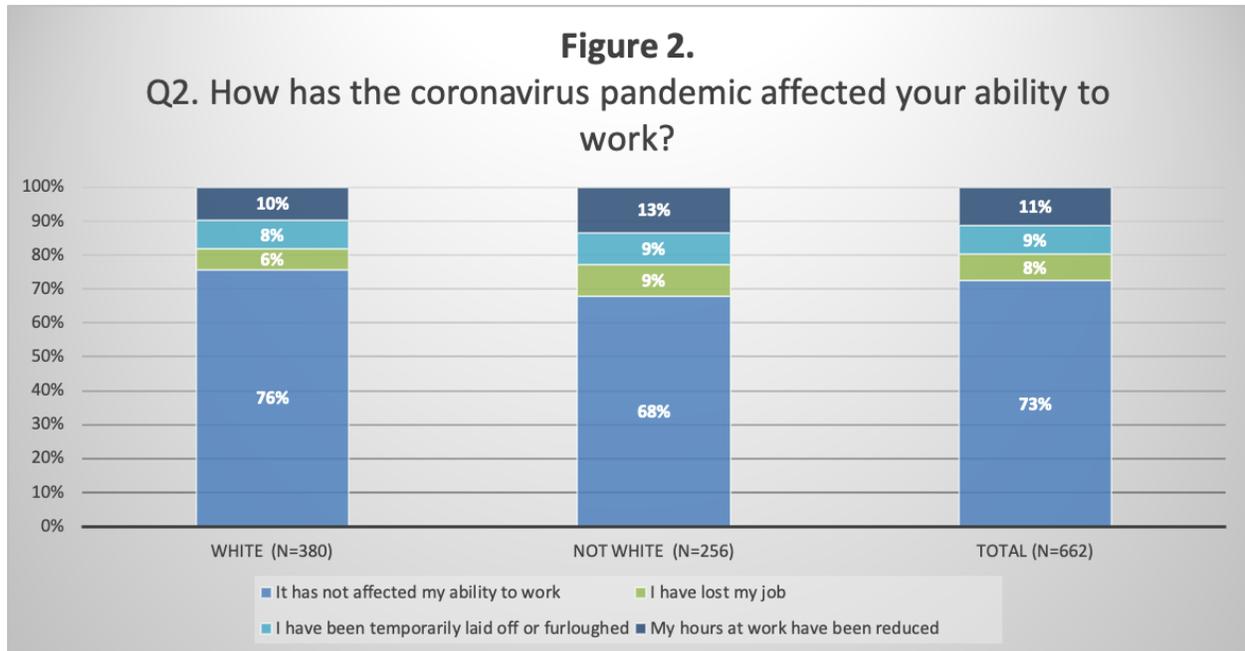
Table 1. Survey Respondents Demographics

DEMOGRAPHICS	RESPONSES (%)
AGE (N=836)	
0-17 Years Old	8 (0.8%)
18-34 Years Old	226 (23.8%)
35-64 Years Old	499 (52.6%)
65 Years Old Or Older	103 (10.9%)
RACE (N=834)	
White	486 (58.3%)
Not White	317 (38.0%)
Prefer Not To Say	31 (3.7%)
GENDER (N= 833)	
Woman	675 (81.0%)
Man	124 (14.9%)
Non-binary	17 (2.0%)

Prefer Not To Say	15 (1.8%)
Other	2 (0.2%)
HOUSEHOLD SIZE (N= 834)	Average of 2.6 persons
NUMBER OF DEPENDENTS (N=834)	Average of 0.8 dependents

For those who responded to the question: “How has the coronavirus pandemic impacted your life?” The majority (35%) of not white respondents (n=313) selected “a great deal.” For white respondents , 35% selected “alot.” See Figure 1. When respondents were asked: “how has the Pandemic affected your ability to work?” The majority of both White (76%) and Non white (68%) respondents selected “it has not affected my ability to work.” See Figure 2.





When respondents were asked “have you used or plan to seek aid from community or government resources or services to assist you through the coronavirus?”, the majority (69.8%) said no. See Figure 3. Those who answered yes, received follow up questions. When respondents, who answered yes to the previous question, were asked about “how satisfied they were with accessing services,” the majority (41%) of White participants were “dissatisfied;” and the majority (42%) of Not white participants were “neither satisfied or dissatisfied.” See Figure 4. For the question that assesses the “amount of time it took to receive the help or services needed,” the majority of both White (49%) and Not White (44%) respondents were “dissatisfied.” See Figure 5. When participants were asked about what “services or resources they were having trouble accessing at this time,” food assistance was the most concerning issue for Not Whites (32%), followed by unemployment assistance (30%), medical care (23%), and housing assistance (18%). For the same question, Whites were in most need of unemployment assistance

(39%), followed by medical care (18%), food assistance (11%), and housing assistance (10%). See Figure 6.

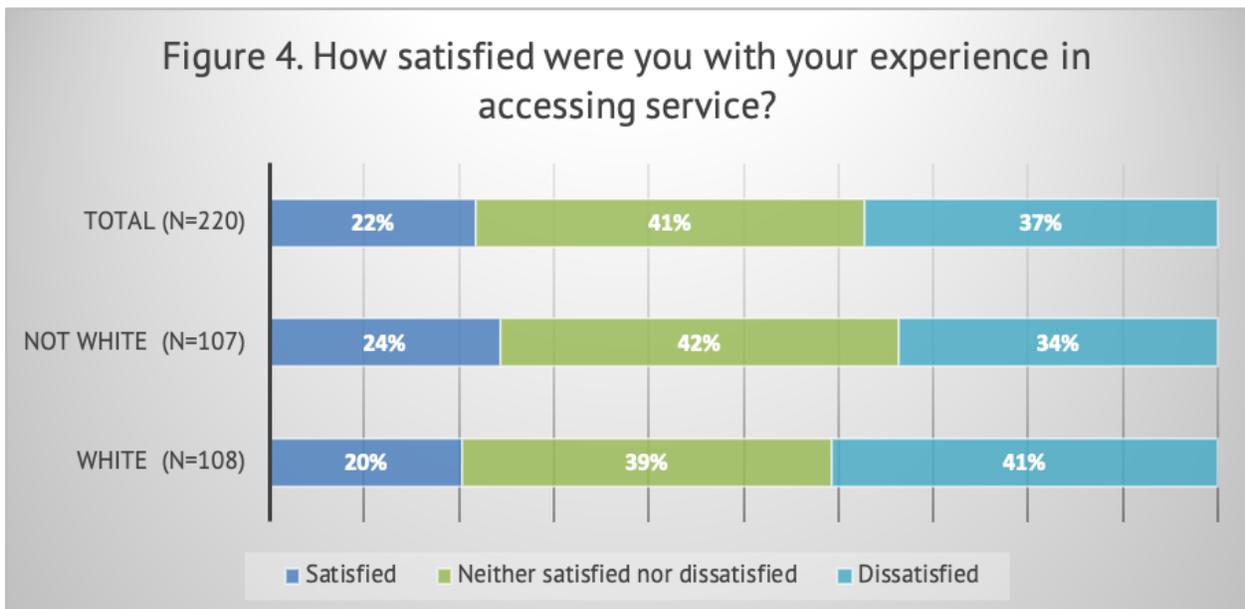
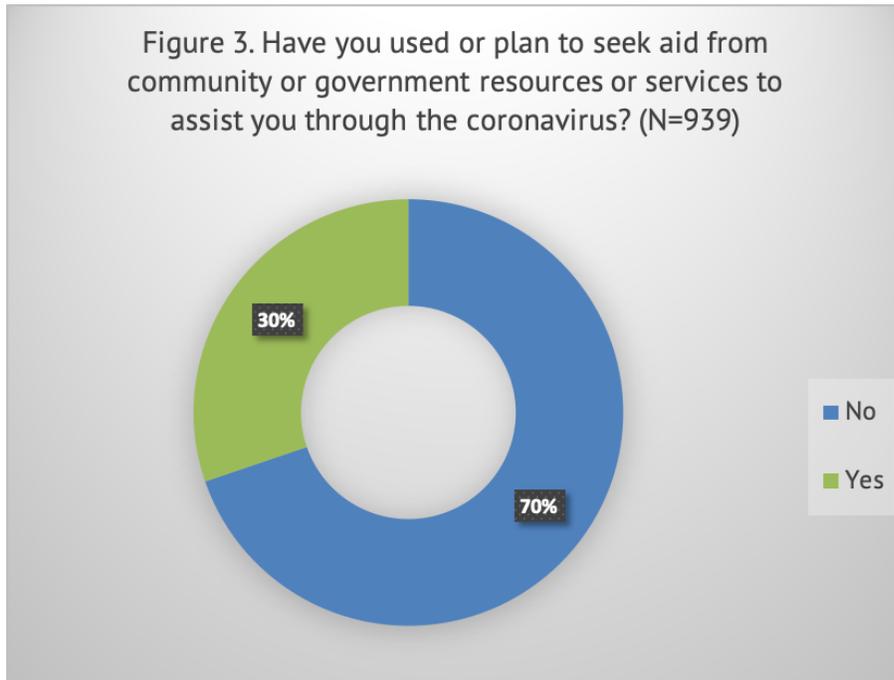


Figure 5. How satisfied were you with the amount of time it took to receive the help or services you needed?

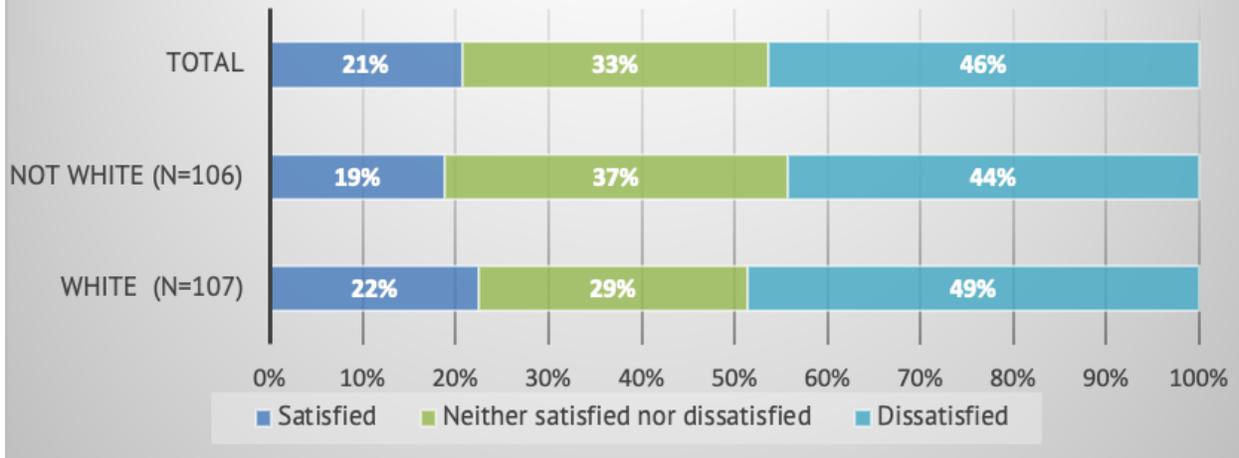
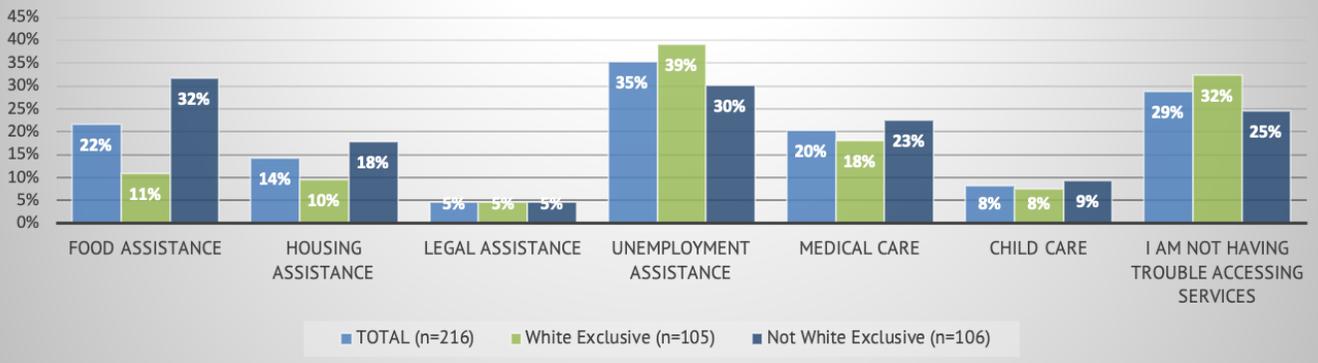
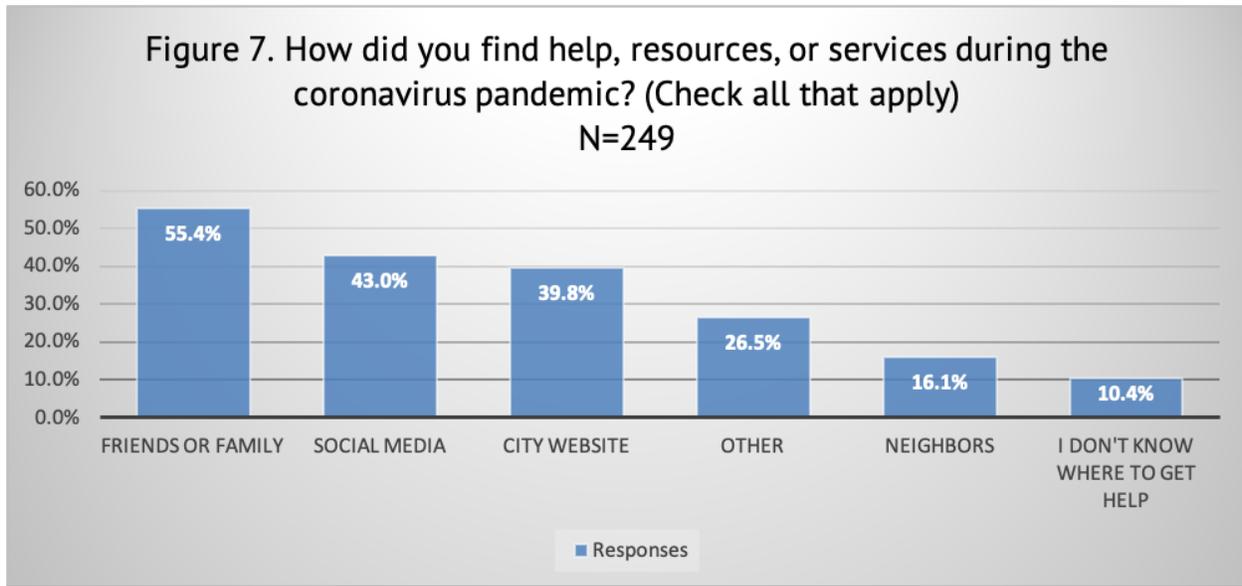


Figure 6. What services or resources are you having trouble accessing at this time? Check all that apply.



For the question asking respondents “how did you find help, resources, or services during the coronavirus pandemic”, friends or family (55%), social media (42%), and the city website (40%) were the top 3 selections. See Figure 7.



For a different question, the responses of participants who answered yes to question 4 for using or planning to seek assistance, were compared on how strongly they agreed or disagreed with a list of statements. The majority of both White (82%) and Not White (81%) of participants “strongly agreed” that they had a “safe place to stay during the pandemic.” See Figure 8. When asked if a “safe outdoor space” was accessible, the majority of both White (72%) and Not White (56%) of respondents “strongly agreed.” See Figure 9. The same trend was also observed for those respondents who are “able to pay rent or mortgage for the next 3 months,” with 40% of Whites and 36% of Not Whites “strongly agreeing.” See Figure 10. When asked about “the necessary technology to perform work and educational activities,” 68% of Whites and 50% of Not Whites “strongly agreed.” See Figure 11. When asked about “health treatments, medications, and professionals that I need to maintain my health,” 34% of White “somewhat agreed,” while 29% of Not White “strongly agreed.” See Figure 12. When asked “if able to maintain communication with people outside of my household,” 67% of White and 61% of Not Whites “strongly agreed.” See Figures 13. When asked about “access to healthy foods”, 59% of Whites and 41% of Not Whites “strongly agreed”. See Figure 14.

FIGURE 8. I HAVE A SAFE PLACE TO STAY DURING THE PANDEMIC

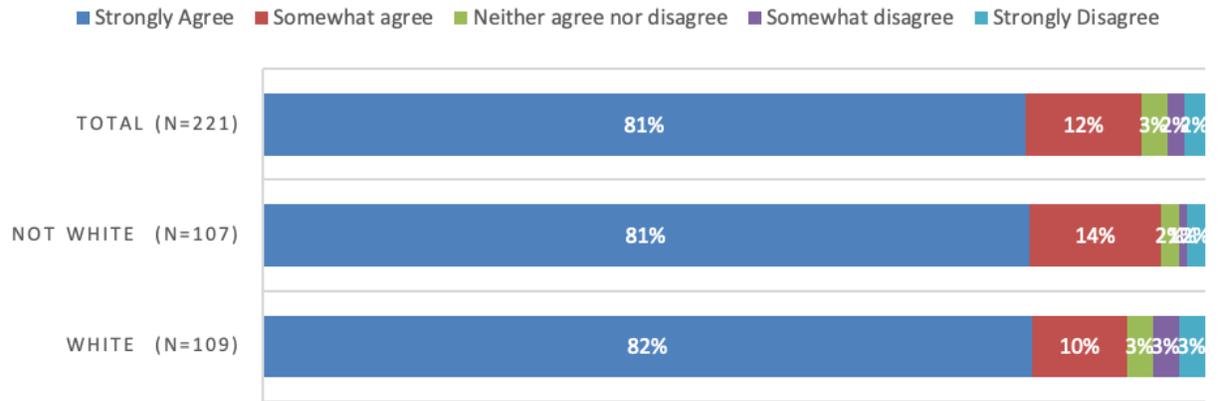


FIGURE 9. I CAN GET TO SAFE OUTDOOR PLACES

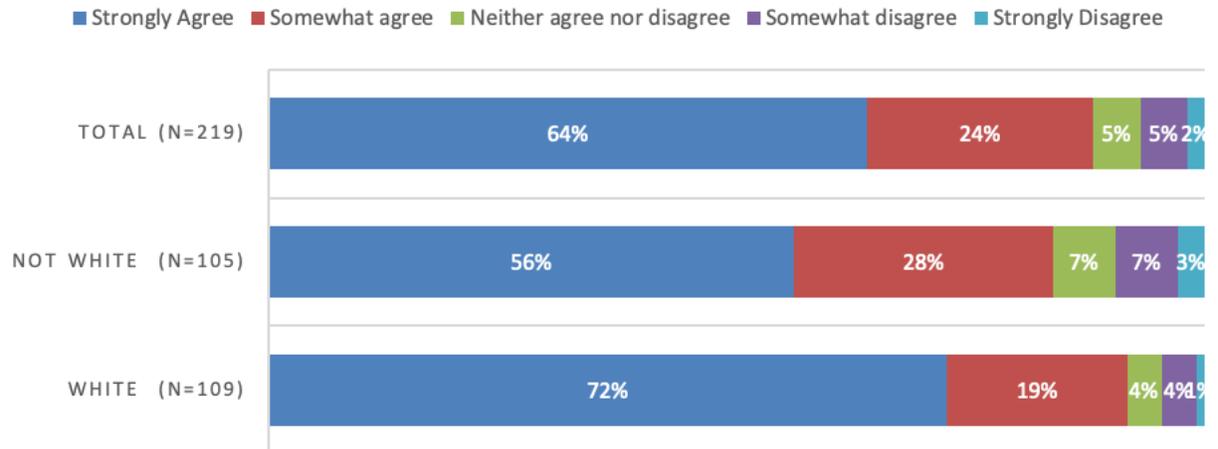


FIGURE 10. ABILITY TO PAY RENT FOR NEXT 3 MONTHS

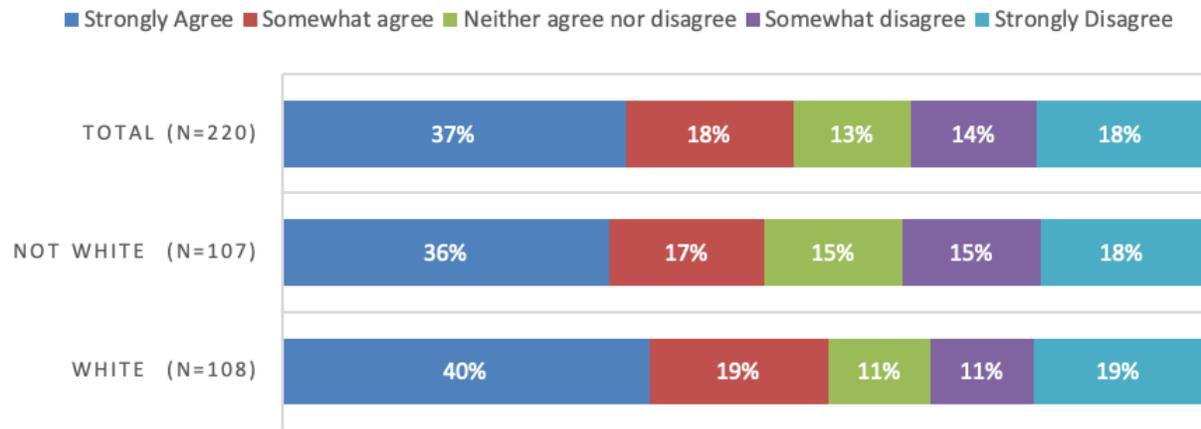


FIGURE 11. I HAVE THE NECESSARY TECHNOLOGY TO PERFORM WORK AND EDUCATIONAL ACTIVITIES

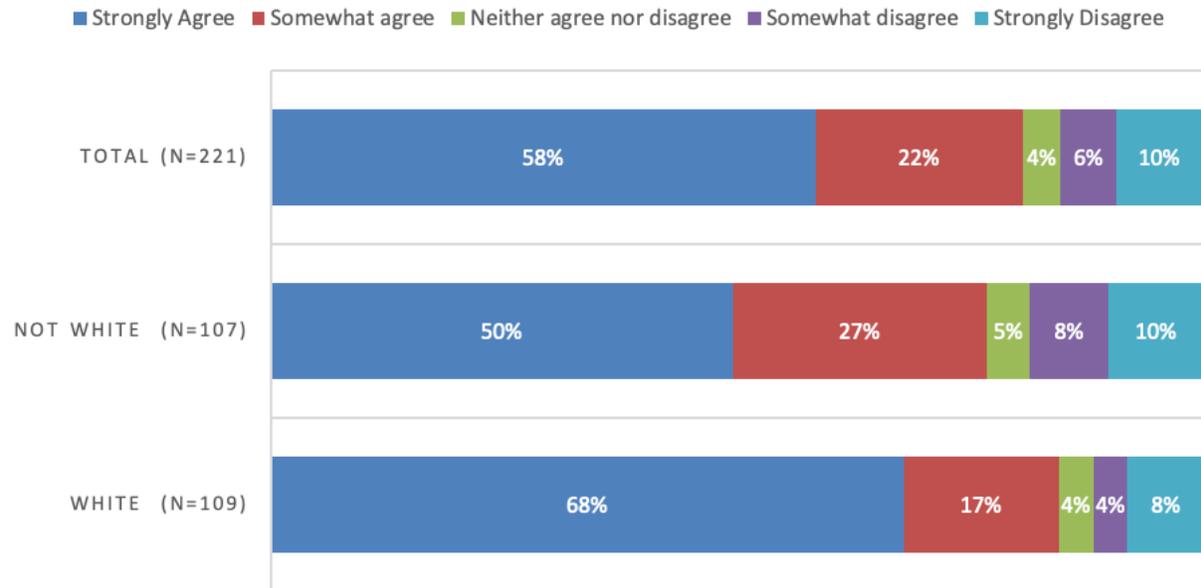


FIGURE 12. I CAN GET THE HEALTH TREATMENTS, MEDICATIONS, AND PROFESSIONALS THAT I NEED TO MAINTAIN MY HEALTH

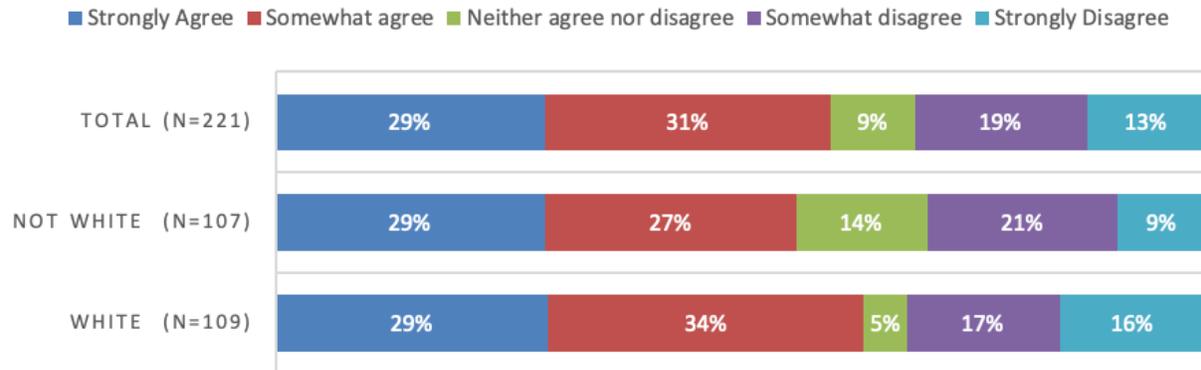


FIGURE 13. I AM ABLE TO MAINTAIN COMMUNICATION WITH PEOPLE OUTSIDE OF MY HOUSEHOLD

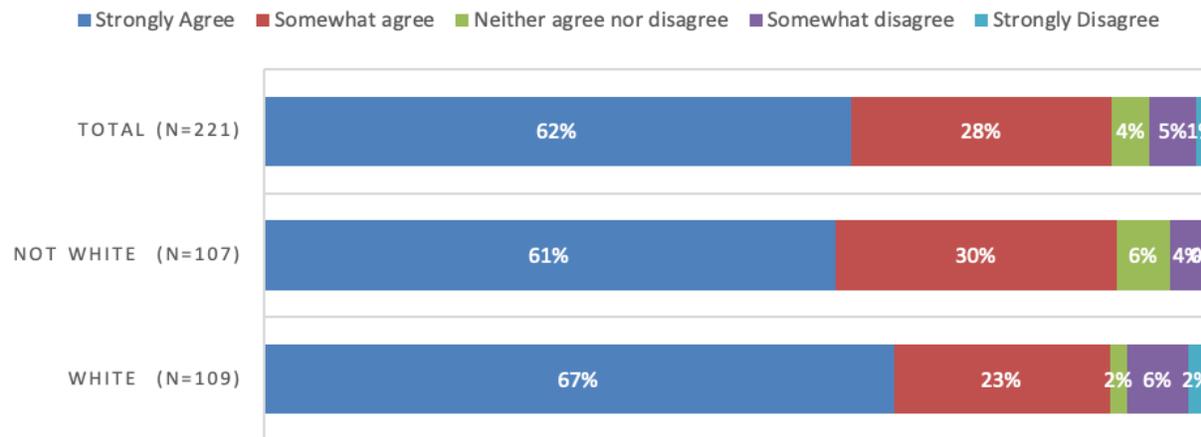
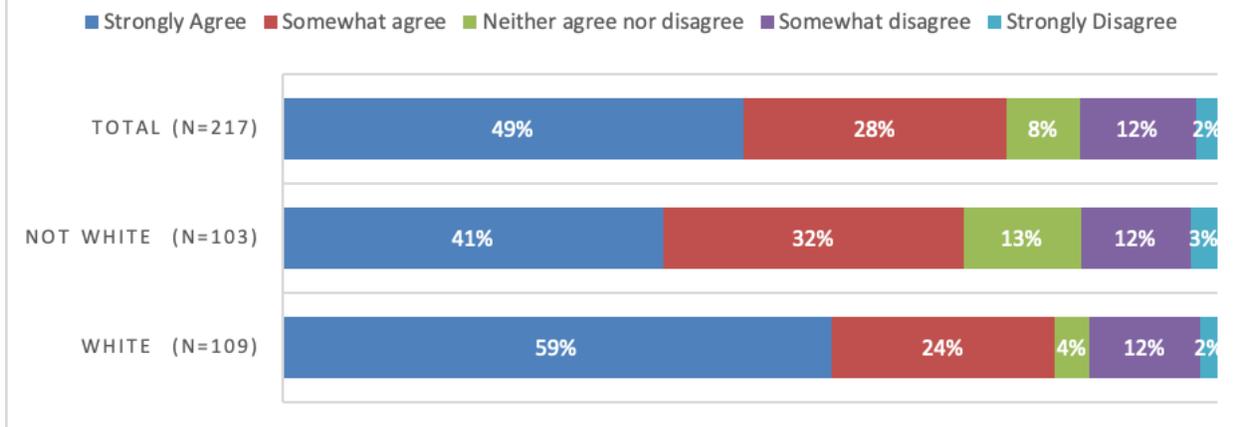
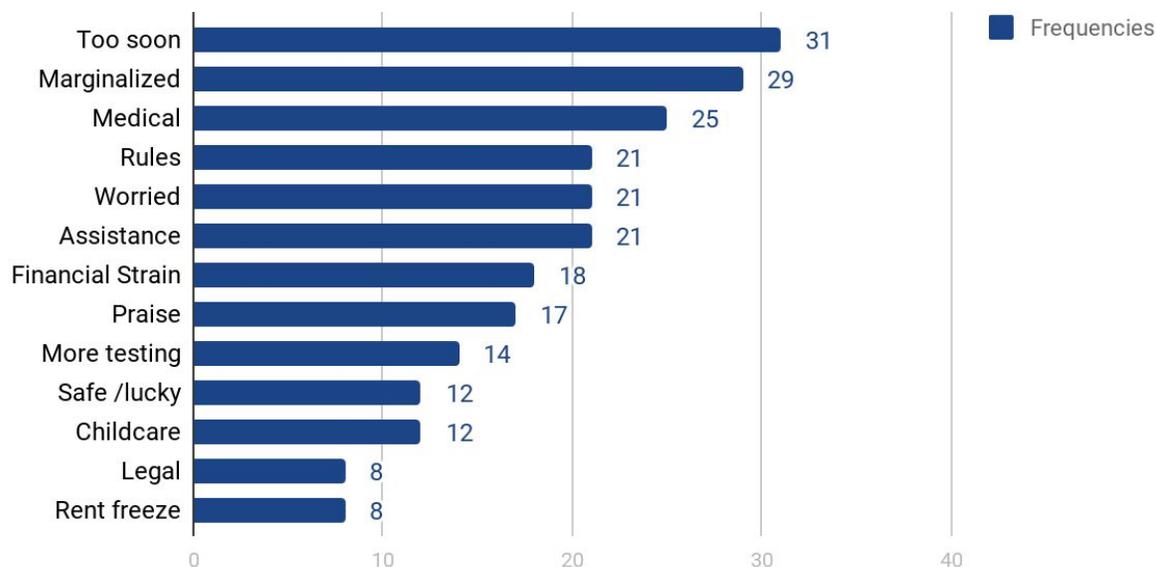


FIGURE 14. I CAN GET NUTRITIOUS OR HEALTHY FOODS



For the qualitative analysis, respondents were asked if there was anything else that they wanted the city, county, or state governments to know about how the coronavirus pandemic is affecting the respondents, their household, and their community. A total of 309 responses were received. Of those responses, the main themes that emerged included financial strain, assistance, childcare, marginalized communities, opening too soon, more testing, rent freeze, rules, and medical. In the following section, each of these themes will be discussed in detail. Also see Figure 15.

Figure 15. Is there anything else that you want city, county, or state governments to know about how the coronavirus pandemic is affecting you, your household, or your community?



Financial Strain: Financial concerns was referenced 18 times in the qualitative data. Respondents mentioned being “broke” and “laid off,” in addition to the long wait times for unemployment. Some had already exhausted their unemployment yet remain unemployed. Nonprofits and women-owned businesses expressed being underfunded during normal times and having trouble accessing the appropriate government assistance.

Assistance: A need for government assistance, emerged 21 times in the data. For instance, one respondent mentioned that “staying home was not the issue; the issue was needing assistance with food stamps, property tax relief, utilities, and unemployment.”

Child care: Emerging 12 times in the data, childcare was also a concern. A number of respondents expressed that working without childcare is

not sustainable. Some parents who are working also mentioned that subsidized child care would help with the cost. Respondents also mentioned finding ways to keep children entertained. One respondent described “checking out toys from the libraries.”

Marginalized communities: Many respondents (29 times) were described a special concern for those who are homeless, undocumented, low-income, elderly, and/or disabled and their ability to access services. Some respondents expressed concern about the homeless not having PPE and potentially “being the cause of a greater outbreak.” During this pandemic, racism was mentioned as “getting worse,” since high-risk populations are not getting the “healthcare they need” because of the inequities that people of color face.

Too soon: The most referenced concern in the qualitative data (referenced 31 times), was concern about reopening and/or scaling back on the Shelter in Place order for residents of Austin, TX. Many were concerned that the order was or might be lifted too soon, in reference to the May 1st order from the Governor of Texas. For example, one respondent urged officials to “not reopen before adequate testing and supplies are available,” as it will “prevent additional cases.” If the Shelter in Place order is lifted, some respondents said that their participation in the economy will not change. For instance, one respondent said that he or she “will not participate in this economy any more or any less than they are now.”

More Testing: A concern about increased testing for COVID-19 emerged 14 times in the data. As one respondent described, “there is not enough data to see who is being impacted.” Even for those who

want to be tested, like this respondent, they were denied testing because they did not “meet the criteria even though they showed symptoms. Additionally, “drive-thru testing centers are not available in Eastern Austin,” a low-income area of Austin, TX.

Rent Freeze: Challenges related to rent or mortgages emerged 8 times in the data. Some respondents asked for “exemptions or freezes for rents and mortgages.” For example, one respondent, who identified as a student, stated how “they pay more than the average rates so that they can live close to campus, but now, because of the situation, they are stuck paying high rent for a place that they are not living at.”

Rules: 21 respondents expressed concerns about the face coverings and social distancing when in public spaces. As one respondent described, “individuals are not taking this [the Pandemic] seriously” and that those individuals are not “following the rules.” The majority of respondents also agreed that face coverings and social distancing should be “enforced everywhere” and that those who do not comply with the orders should be “fined.”

Medical: Challenges obtaining medical services, including dental and mental health services or the delayment of these services, due to Pandemic, emerged 25 times in the data. One participant described the impact on their mental health as “being tremendous to cope with their anxiety and depression.” Another respondent described their girlfriend’s dental situation: “Her temporary crowns are breaking and she can’t see a dentist due to regulations. Soon, she won’t have any usable molars at all.” A different respondent said that they were

“uninsured and scared to get medical help. I don’t know where to go. I don’t know where to start.”

Discussion

There are three main findings from the quantitative portion of this mixed-methods community-based study. First, most of the survey respondents had their life impacted by the pandemic. However, those who identified as Not White reported having their life more impacted, compared to those who identified as White. Second, when respondents were asked about how the pandemic has affected their ability to work, both the majority of White and Not White reported that the Pandemic had not affected their ability to work. This was an interesting finding, since unemployment for April 2020 was 14% - the highest reported rate since 2010 (U.S. Bureau of Labor Statistics, 2020). Another survey revealed that nearly 40 percent of those in households making less than \$40,000 a year had lost a job in March of 2020 (Powell, 2020). As companies globally transition to remote work, lack of access to technology could further inequities in employment (Jan, 2020). This digital divide can also be seen when respondents were asked about access to technology; more Not White respondents indicated that they did not have access. Given the necessity of taking the survey digitally to maintain social distancing, this survey data may be skewed towards people with access to technology. Last, food assistance was the resource that the majority of Not Whites were having trouble accessing, compared to Whites who were needing most assistance with accessing unemployment (U.S. Bureau of Labor Statistics, 2020 and Texas Health and Human Services, 2020). These findings are both consistent with state and national data. Data from Health and Human Services revealed that there was an 11% increase in enrollment for the Supplemental Nutritional Assistance Program, from April 2019 to April 2020 (Texas Health and Human Services, 2020,a).

From the qualitative data, the top themes that emerged include the city reopening too soon, marginalized communities, and access or delay to medical services. Respondents were most distressed about reopening the city too soon. They felt like there was not enough testing and/or that there was not a testing facility close enough to where they lived. When these responses were collected in April, there were only four drive-thru testing centers in Travis County. To date, the number of testing centers have expanded, however; there are still fewer testing centers located in the Eastern part of Austin, compared to the more affluent West part of Austin (Texas Health and Human Services, 2020,b). Respondents also mentioned that rules for face coverings and social distancing were not being followed, which was concerning, as the number of new COVID-19 cases is still on the rise in Texas. To date, the confirmed number of Covid-19 cases for Travis County is 2.37 per every 1,000 persons (Texas Department of Health and Human Services, 2020, C). Compare that rate to the rate for when this survey was first administered, which was 0.19 per every 1,000 persons (Texas Department of Health and Human Services, 2020, C).

Second, respondents were worried about the lack of personal protective equipment, like hand sanitizer and face masks for the homeless. Within this theme, respondents also mentioned their worry about future health disparities that people of color are already burdened by (National Academics of Science, Engineering, & Medicine, 2017).

Finally, access or delay of medical services, including mental-health and dental services were raised. Pandemics can be overwhelming, as it might be difficult for some people to cope with the stress; and those who might react

more strongly toward stress include those with an already underlying mental health condition (CDC, 2020,a).

Strengths and Limitations. The internal and external validity of this survey is restricted by the cross-sectional design, in addition to the sampling technique that was used. Since cross-sectional studies simultaneously assess both the exposure and outcome, there should be no evidence of causality, which is the case in this descriptive study. The external validity of this study is also low, as random sampling was used. This type of sampling is prone to selection bias, information bias, and confounding. In this study, we observed selection bias, as evidenced by the majority of respondents identifying as White women, between the ages of 35 - 64 years old.

Although there are multiple limitations for this type of study design, it is important to note that this survey was one of the early attempts at gathering data around experiences in Austin, TX, regarding COVID-19. With that, this survey was useful for the burden of the disease, which will help inform government agencies and nonprofits on how to allocate their resources.

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Appendix

Survey Questionnaire

Austin area community organizers want to understand what the Austin community needs in order to get through the coronavirus pandemic to better serve the community now and in the future.

All responses will be anonymous. We are using SurveyMonkey to collect and store answers to this survey. Please see SurveyMonkey's [privacy policy](#) and [security statement](#) for further details about how they store and protect data.

MEASURE, Mission Capital, and Community Resilience Trust will collect and analyze all responses and then share the findings with the community. If you have questions about this survey and how data will be used, please contact MEASURE at hello@wemeasure.org.

Your participation is completely voluntary. Completing the survey will take about 7-8 minutes of your time.

1. How has the coronavirus pandemic impacted your life?

A great deal

A lot

A moderate amount

A little

None at all

Other (please specify)

2. How has the coronavirus pandemic affected your ability to work?

It has not affected my ability to work

I have lost my job

I have been temporarily laid off or furloughed

My hours at work have been reduced

Other (please specify)

3. Have there been any delays in the court system or your legal processes due to the coronavirus?

Yes

No

Not applicable

4. Have you used or plan to seek aid from community or government resources or services to assist you through the coronavirus?

- Yes
- No

5. How satisfied were you with your experience in accessing service?

- Satisfied
- Neither satisfied nor dissatisfied
- Dissatisfied

6. How satisfied were you with the amount of time it took to receive the help or services you needed?

- Satisfied
- Neither satisfied nor dissatisfied
- Dissatisfied

7. How did you find help, resources, or services during the coronavirus pandemic? (check all that apply)

- City website
- Friends or family members
- Neighbors
- Social media (Facebook, Twitter, etc.)
- I don't know where to get help
- Other (please specify)

8. What services or resources are you having trouble accessing at this time? Check all that apply.

- | | |
|--|---|
| <input type="checkbox"/> Food assistance | <input type="checkbox"/> Medical care |
| <input type="checkbox"/> Housing assistance | <input type="checkbox"/> Child care |
| <input type="checkbox"/> Legal assistance | <input type="checkbox"/> I am not having trouble accessing services |
| <input type="checkbox"/> Unemployment assistance | |
| <input type="checkbox"/> Other (please specify) | |

9. Please consider your current situation during this coronavirus pandemic. How strongly do you agree or disagree with the following statements?

	Strongly Agree	Somewhat agree	Neither agree nor disagree	Somewhat disagree	Strongly Disagree
I have a safe place to stay during the pandemic	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I can get to safe outdoor spaces	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am able to pay my rent or mortgage for the next 3 months	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I have the necessary technology to perform work and educational activities (for example: computer, internet)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I can get the health treatments, medications, and professionals that I need to maintain my health	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I can get nutritious or healthy food	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am able to maintain communication with people outside of my household	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

10. What is your age?

- 0-17 years old
- 18-34 years old
- 35-64 years old
- 65 years old or older

11. What is your race? (Check all that apply)

- | | |
|---|--|
| <input type="checkbox"/> Black, Afro-Caribbean, or African American | <input type="checkbox"/> Native Hawaiian or Other Pacific Islander |
| <input type="checkbox"/> East Asian or Asian American | <input type="checkbox"/> South Asian or Indian American |
| <input type="checkbox"/> Latino or Hispanic American | <input type="checkbox"/> White or Euro-American |
| <input type="checkbox"/> Middle Eastern or Arab American | <input type="checkbox"/> Other |
| <input type="checkbox"/> Native American or Alaskan Native | <input type="checkbox"/> Prefer not to say |

12. What is your gender identity?

- Man
- Woman
- Non-binary
- Prefer not to say
- Self-Identify (please specify)

13. Are you transgender?

- Yes
- No
- Prefer not to say

14. What is your zipcode?

15. Which of the following best describes the principal industry of your job?

16. How many people are in your household?

- | | |
|-------------------------|----------------------------------|
| <input type="radio"/> 1 | <input type="radio"/> 6 |
| <input type="radio"/> 2 | <input type="radio"/> 7 |
| <input type="radio"/> 3 | <input type="radio"/> 8 |
| <input type="radio"/> 4 | <input type="radio"/> 9 |
| <input type="radio"/> 5 | <input type="radio"/> 10 or more |

17. How many dependents do you have?

- | | |
|-------------------------|----------------------------------|
| <input type="radio"/> 0 | <input type="radio"/> 6 |
| <input type="radio"/> 1 | <input type="radio"/> 7 |
| <input type="radio"/> 2 | <input type="radio"/> 8 |
| <input type="radio"/> 3 | <input type="radio"/> 9 |
| <input type="radio"/> 4 | <input type="radio"/> 10 or more |
| <input type="radio"/> 5 | |

18. What are the age ranges of your dependents? (check all that apply)

- 0-17 years old
- 18-34 years old
- 35-64 years old
- 65 years old or older

19. Have you had any medical care delayed because of the coronavirus pandemic?

- Yes
- No

20. Has anyone in your household had any medical care delayed because of the coronavirus pandemic?

- Yes
- No

21. Is there anything else that you want city, county, or state governments to know about how the coronavirus pandemic is affecting you, your household, or your community?