

SURVEY NAME

JUNE 25 SURVEY

DATE

Saturday, June 25, 2022

POWERED BY



Demographics

Total responses

501

Age groups

18 - 24 (16.17%), 25 - 34 (28.74%), 35 - 44 (25.35%), 45 - 54 (15.77%), > 54 (13.97%)

Country

United States

Gender

Male (52.5%), Female (47.5%)

Residential Postal Code

76901 US,35645 US,32811 US,32907 US,77581 US,33881 US,38666 US,75070 US,36587 US,78209 US,24612 US,21921 US,45069 US,74136 US,32911 US,62060 US,71112 US,78660 US,

17011 US,32618 US,22060 US,39532 US,24540 US,91011 US,95001 US,35404 US,15009 US,92880 US,22191 US,22801 US,02451 US,20619 US,81631 US,32063 US,32566 US,33141 US,98121 US,34608 US,22407 US,29579 US,77015 US,67526 US,30504 US,02072 US,80207 US,60629 US,48185 US,30062 US,27302 US,38614 US,89101 US,28466 US,30306 US,02108 US,17740 US,54902 US,11225 US,47951 US,77423 US,72019 US,58701 US,58801 US,91706 US,95209 US,33147 US,32244 US,07506 US,47970 US,85215 US,11237 US,92544 US,30101 US,20149 US,76875 US,67212 US,33647 US,19104 US,25271 US,74851 US,77373 US,60025 US,21244 US,93280 US,10457 US,61032 US,24502 US,58102 US,30813 US,13502 US,20147 US,14207

23320 US,26301 US,32829 US,76013 US,29010
US,72201 US,10469 US,98006 US,36535
US,90813 US,06902 US,77021 US,53189
US,44203 US,85381 US,89120 US,84104
US,33033 US,73072 US,48706 US,06516
US,43215 US,37203 US,75232 US,53081
US,27870 US,75110 US,34788 US,74464
US,83401 US,43031 US,75604 US,40175
US,37748 US,77584 US,80526 US,19122
US,64134 US,10001 US,33805 US,98208
US,62223 US,71107 US,48228 US,32805
US,45406 US,27262 US,33179 US,78130
US,17057 US,92352 US,34450 US,90706
US,45239 US,56303 US,28516 US,73156
US,97876 US,50677 US,49445 US,60614
US,37407 US,33178 US,07304 US,92115
US,33170 US,45356 US,06058 US,48213
US,94502 US,94122 US,33311 US,27317
US,58201 US,15627 US,59601 US,33511
US,30291 US,10011 US,90242 US,08003
US,01107 US,90018 US,30328 US,78076
US,30117 US,44236 US,95820 US,18015
US,11520 US,11233 US,44056 US,10471

US,93657 US,95382 US,32825 US,62704
US,20155 US,48188 US,43110 US,08062
US,10128 US,10566 US,15104 US,40026
US,78363 US,27401 US,94536 US,23430
US,17263 US,04106 US,32257 US,34452
US,29801 US,53204 US,30559 US,22153
US,72404 US,97914 US,89030 US,31404
US,21234 US,37801 US,76643 US,35603
US,15236 US,91303 US,60651 US,28073
US,10032 US,39056 US,68901 US,70126
US,66207 US,28645 US,45231 US,11377
US,46703 US,85710 US,79382 US,06708
US,20901 US,19403 US,78212 US,77018
US,76140 US,10123 US,77089 US,77498
US,40229 US,03768 US,90035 US,46164
US,21701 US,16509 US,47542 US,95835
US,21793 US,28209 US,74055 US,27405
US,48227 US,43232 US,25302 US,92886
US,75401 US,64127 US,38069 US,65265
US,61820 US,72530 US,23462 US,22003
US,72714 US,84042 US,43211 US,32159
US,70114 US,30034 US,85614 US,97402
US,10309 US,96753 US,29568 US,78750

85255 US,35674 US,38326 US,94089 US,17046
US,75050 US,41271 US,90034 US,35951
US,64501 US,45011 US,97396 US,63645
US,06483 US,23608 US,33028 US,11222
US,92832 US,79072 US,32210 US,08330
US,28306 US,29624 US,27601 US,30125
US,11214 US,38401 US,03102 US,93906
US,86442 US,02139 US,19966 US,20011
US,75224 US,52003 US,34482 US,36107
US,37879 US,76354 US,97210 US,93534
US,11235 US,45208 US,33484 US,15430
US,49091 US,46410 US,54956 US,44224
US,70006 US,46201 US,73120 US,72032
US,93010 US,48235 US,32209 US,27529
US,37416 US,75019 US,26201 US,75201
US,19952 US,64055 US,55905 US,77077
US,80123 US,16066 US,48127 US,47711
US,67601 US,81501 US,06096 US,29812
US,35960 US,35216 US,31824 US,23860
US,19605 US,19021 US,10002 US,33510
US,76035 US,77095 US,30631 US,89129

Q1

TYPE: SINGLE SELECTION

Have you received a COVID vaccine?

#	ANSWERS	ANSWERS(%)	COUNT	STRATIFIED ANSWERS(%)	STRATIFIED COUNT
A1	No	24.55%	123	24.07%	120.58
A2	Yes, 1 dose	10.98%	55	9.45%	47.36
A3	Yes, 2 doses	33.33%	167	31.95%	160.08
A4	Yes, 3 doses	24.75%	124	25.31%	126.78
A5	Yes, 4+ doses	6.39%	32	9.22%	46.19

COMPLETES 501

Q2

TYPE: SINGLE SELECTION

Were you injured from the COVID vaccine?

#	ANSWERS	ANSWERS(%)	COUNT	STRATIFIED ANSWERS(%)	STRATIFIED COUNT
A1	No	82.80%	313	83.25%	316.71
A2	Yes	17.20%	65	16.75%	63.7

COMPLETES 378

Q3

TYPE: SINGLE SELECTION

Did your COVID vaccine injury result in Myocarditis, Pericarditis, or another heart related condition?

#	ANSWERS	ANSWERS(%)	COUNT	STRATIFIED ANSWERS(%)	STRATIFIED COUNT
A1	No	55.38%	36	60.81%	38.74
A2	Yes	44.62%	29	39.19%	24.97

COMPLETES 65

Q4

TYPE: SINGLE SELECTION

Did your injury from the COVID vaccine require you to seek medical help?

#	ANSWERS	ANSWERS(%)	COUNT	STRATIFIED ANSWERS(%)	STRATIFIED COUNT
A1	No	35.38%	23	44.82%	28.55
A2	Yes	64.62%	42	55.18%	35.15

COMPLETES 65

Q5

TYPE: SINGLE SELECTION

Did your injury from the COVID vaccine require a hospital stay?

#	ANSWERS	ANSWERS(%)	COUNT	STRATIFIED ANSWERS(%)	STRATIFIED COUNT
A1	No	52.31%	34	62.59%	39.87
A2	Yes	47.69%	31	37.41%	23.83

COMPLETES 65

Q6

TYPE: SINGLE SELECTION

How serious is your COVID vaccine injury?

#	ANSWERS	ANSWERS(%)	COUNT	STRATIFIED ANSWERS(%)	STRATIFIED COUNT
A1	Very serious	20.00%	13	18.91%	12.04
A2	Serious	26.15%	17	21.52%	13.71
A3	Somewhat serious	18.46%	12	20.66%	13.16
A4	Not serious	35.38%	23	38.91%	24.79

COMPLETES 65

Q7

TYPE: MULTIPLE SELECTION

Which of the following are true about your COVID vaccine injury? (check all that apply)

#	ANSWERS	RESPONDENTS(%)	ANSWERS(%)	COUNT	STRATIFIED RESPONDENTS(%)	STRATIFIED ANSWERS(%)	STRATIFIED COUNT
A1	It will likely shorten my lifespan	35.38%	22.12%	23	31.76%	19.88%	20.23
A2	I am now unable to hold a job	15.38%	9.62%	10	16.37%	10.25%	10.43
A3	I am now unable to work a full day	27.69%	17.31%	18	25.28%	15.82%	16.11
A4	It impacts my personal life	26.15%	16.35%	17	26.76%	16.75%	17.05
A5	It is a minor annoyance	35.38%	22.12%	23	40.13%	25.12%	25.56
A6	None of the above	20.00%	12.50%	13	19.47%	12.19%	12.4

COMPLETES 65

Q8

TYPE: SINGLE SELECTION

Which COVID vaccine product did you receive?

#	ANSWERS	ANSWERS(%)	COUNT	STRATIFIED ANSWERS(%)	STRATIFIED COUNT
A1	Pfizer	43.65%	165	43.23%	164.44
A2	Moderna	33.07%	125	37.37%	142.18
A3	Johnson & Johnson	12.43%	47	10.17%	38.7
A4	Combination of more than one product	4.76%	18	4.26%	16.19
A5	Not sure	6.08%	23	4.97%	18.91

COMPLETES 378

Q9

TYPE: NUMERIC OPEN-ENDED

Besides yourself, how many people live in your household?

#	ANSWERS
A1	3
A2	0
A3	1
A4	2
A5	1
A6	5
A7	2
A8	4
A9	3
A10	0
A11	3
A12	2
A13	0
A14	5
A15	1

#	ANSWERS
A16	3
A17	6
A18	18
A19	0
A20	0
A21	0
A22	3
A23	3
A24	3
A25	4
A26	1
A27	2
A28	1
A29	1
A30	4
A31	5
A32	2
A33	0
A34	2
A35	6
A36	4
A37	1

#	ANSWERS
A38	6
A39	2
A40	6
A41	0
A42	2
A43	2
A44	4
A45	3
A46	3
A47	19
A48	2
A49	2
A50	1
A51	5
A52	4
A53	20
A54	2
A55	1
A56	4
A57	6
A58	1
A59	2

#	ANSWERS
A60	2
A61	2
A62	2
A63	0
A64	2
A65	3
A66	0
A67	1
A68	3
A69	0
A70	4
A71	2
A72	1
A73	0
A74	0
A75	2
A76	16
A77	2
A78	5
A79	8
A80	4
A81	2

#	ANSWERS
A82	6
A83	2
A84	1
A85	4
A86	4
A87	0
A88	4
A89	0
A90	3
A91	2
A92	3
A93	0
A94	9
A95	1
A96	19
A97	3
A98	0
A99	1
A10 0	2
A10 1	3
A10	3

#	ANSWERS
2	
A10 3	1
A10 4	2
A10 5	0
A10 6	0
A10 7	1
A10 8	5
A10 9	0
A11 0	1
A11 1	1
A11 2	2
A11 3	2
A11 4	1
A11 5	3
A11 6	0

#	ANSWERS
A11 7	17
A11 8	4
A11 9	5
A12 0	4
A12 1	3
A12 2	2
A12 3	1
A12 4	1
A12 5	2
A12 6	0
A12 7	2
A12 8	2
A12 9	2
A13 0	2
A13	4

#	ANSWERS
1	
A13 2	1
A13 3	6
A13 4	2
A13 5	1
A13 6	2
A13 7	5
A13 8	1
A13 9	5
A14 0	2
A14 1	5
A14 2	3
A14 3	8
A14 4	4
A14 5	2

#	ANSWERS
A14 6	3
A14 7	3
A14 8	3
A14 9	3
A15 0	5
A15 1	3
A15 2	3
A15 3	2
A15 4	1
A15 5	1
A15 6	5
A15 7	4
A15 8	2
A15 9	4
A16	7

#	ANSWERS
0	
A16 1	2
A16 2	2
A16 3	19
A16 4	7
A16 5	0
A16 6	0
A16 7	0
A16 8	3
A16 9	1
A17 0	19
A17 1	3
A17 2	5
A17 3	3
A17 4	1

#	ANSWERS
A17 5	14
A17 6	5
A17 7	6
A17 8	3
A17 9	1
A18 0	1
A18 1	0
A18 2	19
A18 3	1
A18 4	1
A18 5	2
A18 6	2
A18 7	3
A18 8	12
A18	4

#	ANSWERS
9	
A19 0	4
A19 1	5
A19 2	1
A19 3	2
A19 4	1
A19 5	0
A19 6	1
A19 7	4
A19 8	1
A19 9	5
A20 0	8
A20 1	7
A20 2	2
A20 3	3

#	ANSWERS
A20 4	3
A20 5	1
A20 6	5
A20 7	1
A20 8	3
A20 9	1
A21 0	6
A21 1	1
A21 2	0
A21 3	9
A21 4	1
A21 5	1
A21 6	1
A21 7	3
A21	2

#	ANSWERS
8	
A21 9	5
A22 0	2
A22 1	4
A22 2	4
A22 3	4
A22 4	2
A22 5	2
A22 6	3
A22 7	3
A22 8	10
A22 9	2
A23 0	8
A23 1	1
A23 2	2

#	ANSWERS
A23 3	0
A23 4	2
A23 5	17
A23 6	2
A23 7	3
A23 8	4
A23 9	4
A24 0	4
A24 1	3
A24 2	2
A24 3	4
A24 4	3
A24 5	2
A24 6	3
A24	3

#	ANSWERS
7	
A24 8	5
A24 9	0
A25 0	4
A25 1	3
A25 2	16
A25 3	3
A25 4	3
A25 5	6
A25 6	3
A25 7	1
A25 8	5
A25 9	3
A26 0	2
A26 1	2

#	ANSWERS
A26 2	1
A26 3	7
A26 4	5
A26 5	2
A26 6	1
A26 7	4
A26 8	15
A26 9	4
A27 0	0
A27 1	1
A27 2	4
A27 3	2
A27 4	0
A27 5	3
A27	3

#	ANSWERS
6	
A27 7	3
A27 8	6
A27 9	5
A28 0	1
A28 1	9
A28 2	4
A28 3	3
A28 4	2
A28 5	11
A28 6	3
A28 7	5
A28 8	1
A28 9	4
A29 0	2

#	ANSWERS
A29 1	2
A29 2	2
A29 3	10
A29 4	2
A29 5	19
A29 6	1
A29 7	2
A29 8	2
A29 9	5
A30 0	4
A30 1	3
A30 2	1
A30 3	1
A30 4	1
A30	2

#	ANSWERS
5	
A30 6	0
A30 7	1
A30 8	4
A30 9	1
A31 0	2
A31 1	0
A31 2	0
A31 3	3
A31 4	3
A31 5	5
A31 6	2
A31 7	1
A31 8	0
A31 9	5

#	ANSWERS
A32 0	2
A32 1	2
A32 2	4
A32 3	2
A32 4	1
A32 5	6
A32 6	7
A32 7	3
A32 8	1
A32 9	5
A33 0	9
A33 1	2
A33 2	4
A33 3	4
A33 4	1

#	ANSWERS
4	
A33 5	1
A33 6	1
A33 7	4
A33 8	7
A33 9	4
A34 0	5
A34 1	3
A34 2	1
A34 3	2
A34 4	4
A34 5	2
A34 6	1
A34 7	2
A34 8	3

#	ANSWERS
A34 9	1
A35 0	1
A35 1	2
A35 2	4
A35 3	3
A35 4	3
A35 5	1
A35 6	4
A35 7	3
A35 8	0
A35 9	3
A36 0	1
A36 1	4
A36 2	12
A36	4

#	ANSWERS
3	
A36 4	6
A36 5	1
A36 6	2
A36 7	2
A36 8	3
A36 9	3
A37 0	2
A37 1	3
A37 2	4
A37 3	20
A37 4	1
A37 5	0
A37 6	1
A37 7	1

#	ANSWERS
A37 8	2
A37 9	0
A38 0	4
A38 1	3
A38 2	6
A38 3	6
A38 4	0
A38 5	1
A38 6	7
A38 7	4
A38 8	2
A38 9	2
A39 0	3
A39 1	3
A39	3

#	ANSWERS
2	
A39 3	0
A39 4	4
A39 5	10
A39 6	2
A39 7	1
A39 8	3
A39 9	6
A40 0	2
A40 1	7
A40 2	7
A40 3	4
A40 4	2
A40 5	4
A40 6	0

#	ANSWERS
A40 7	4
A40 8	2
A40 9	5
A41 0	0
A41 1	9
A41 2	3
A41 3	2
A41 4	1
A41 5	2
A41 6	0
A41 7	1
A41 8	2
A41 9	0
A42 0	4
A42	1

#	ANSWERS
1	
A42 2	0
A42 3	6
A42 4	3
A42 5	4
A42 6	0
A42 7	2
A42 8	2
A42 9	4
A43 0	2
A43 1	1
A43 2	20
A43 3	0
A43 4	4
A43 5	2

#	ANSWERS
A43 6	1
A43 7	4
A43 8	3
A43 9	4
A44 0	1
A44 1	4
A44 2	3
A44 3	1
A44 4	1
A44 5	5
A44 6	3
A44 7	2
A44 8	4
A44 9	5
A45	3

#	ANSWERS
0	
A45 1	3
A45 2	2
A45 3	5
A45 4	7
A45 5	2
A45 6	0
A45 7	1
A45 8	2
A45 9	2
A46 0	5
A46 1	3
A46 2	4
A46 3	2
A46 4	14

#	ANSWERS
A46 5	1
A46 6	4
A46 7	17
A46 8	6
A46 9	1
A47 0	8
A47 1	4
A47 2	3
A47 3	3
A47 4	2
A47 5	0
A47 6	3
A47 7	3
A47 8	1
A47	1

#	ANSWERS
9	
A48 0	5
A48 1	0
A48 2	3
A48 3	4
A48 4	2
A48 5	3
A48 6	3
A48 7	3
A48 8	5
A48 9	5
A49 0	2
A49 1	4
A49 2	3
A49 3	5

#	ANSWERS
A49 4	3
A49 5	3
A49 6	0
A49 7	15
A49 8	3
A49 9	12
A50 0	2
A50 1	4

COMPLETES 501

Q10

TYPE: SINGLE SELECTION

Did anyone else in your household receive a COVID vaccine?

#	ANSWERS	ANSWERS(%)	COUNT	STRATIFIED ANSWERS(%)	STRATIFIED COUNT
A1	No	35.13%	176	37.02%	185.47
A2	Yes	59.68%	299	58.77%	294.45
A3	Not sure	5.19%	26	4.21%	21.07

COMPLETES 501

Q11

TYPE: NUMERIC OPEN-ENDED

How many of your household members received at least one COVID vaccine?

ANSWERS

A1	4
A2	3
A3	5
A4	5
A5	3
A6	16
A7	1
A8	2
A9	1
A10	5
A11	2
A12	3
A13	1
A14	2
A15	3

#	ANSWERS
A16	4
A17	2
A18	4
A19	1
A20	2
A21	1
A22	2
A23	2
A24	10
A25	2
A26	1
A27	1
A28	2
A29	2
A30	3
A31	1
A32	3
A33	1
A34	5
A35	4
A36	20
A37	1

#	ANSWERS
A38	3
A39	4
A40	6
A41	1
A42	3
A43	2
A44	2
A45	1
A46	2
A47	3
A48	3
A49	1
A50	2
A51	7
A52	1
A53	3
A54	17
A55	4
A56	1
A57	5
A58	4
A59	2

#	ANSWERS
A60	1
A61	1
A62	4
A63	3
A64	3
A65	1
A66	3
A67	3
A68	3
A69	17
A70	2
A71	1
A72	2
A73	2
A74	5
A75	4
A76	2
A77	1
A78	1
A79	4
A80	12
A81	2

#	ANSWERS
A82	5
A83	2
A84	1
A85	1
A86	5
A87	5
A88	3
A89	6
A90	2
A91	1
A92	2
A93	3
A94	2
A95	2
A96	3
A97	4
A98	1
A99	2
A10 0	7
A10 1	1
A10	2

#	ANSWERS
2	
A10 3	1
A10 4	2
A10 5	2
A10 6	1
A10 7	3
A10 8	2
A10 9	3
A11 0	2
A11 1	1
A11 2	1
A11 3	2
A11 4	2
A11 5	1
A11 6	10

#	ANSWERS
A11 7	4
A11 8	1
A11 9	1
A12 0	5
A12 1	5
A12 2	5
A12 3	2
A12 4	3
A12 5	1
A12 6	6
A12 7	1
A12 8	14
A12 9	2
A13 0	1
A13	3

#	ANSWERS
1	
A13 2	2
A13 3	3
A13 4	2
A13 5	1
A13 6	4
A13 7	2
A13 8	2
A13 9	3
A14 0	3
A14 1	9
A14 2	2
A14 3	8
A14 4	4
A14 5	1

#	ANSWERS
A14 6	8
A14 7	2
A14 8	4
A14 9	1
A15 0	2
A15 1	4
A15 2	3
A15 3	2
A15 4	2
A15 5	4
A15 6	16
A15 7	1
A15 8	2
A15 9	6
A16	2

#	ANSWERS
0	
A16 1	4
A16 2	1
A16 3	3
A16 4	2
A16 5	2
A16 6	1
A16 7	12
A16 8	1
A16 9	4
A17 0	3
A17 1	2
A17 2	1
A17 3	3
A17 4	3

#	ANSWERS
A17 5	19
A17 6	1
A17 7	2
A17 8	2
A17 9	2
A18 0	1
A18 1	4
A18 2	4
A18 3	2
A18 4	1
A18 5	3
A18 6	1
A18 7	2
A18 8	2
A18	3

#	ANSWERS
9	
A19 0	1
A19 1	1
A19 2	2
A19 3	2
A19 4	7
A19 5	1
A19 6	4
A19 7	1
A19 8	4
A19 9	4
A20 0	5
A20 1	1
A20 2	1
A20 3	2

#	ANSWERS
A20 4	2
A20 5	1
A20 6	2
A20 7	3
A20 8	2
A20 9	3
A21 0	1
A21 1	10
A21 2	3
A21 3	2
A21 4	1
A21 5	1
A21 6	3
A21 7	1
A21	1

#	ANSWERS
8	
A21 9	4
A22 0	2
A22 1	2
A22 2	2
A22 3	4
A22 4	2
A22 5	1
A22 6	4
A22 7	2
A22 8	1
A22 9	3
A23 0	6
A23 1	1
A23 2	5

#	ANSWERS
A23 3	4
A23 4	1
A23 5	3
A23 6	4
A23 7	6
A23 8	1
A23 9	6
A24 0	2
A24 1	4
A24 2	3
A24 3	2
A24 4	3
A24 5	1
A24 6	2
A24	5

#	ANSWERS
7	
A24 8	2
A24 9	5
A25 0	1
A25 1	1
A25 2	1
A25 3	20
A25 4	1
A25 5	2
A25 6	1
A25 7	1
A25 8	3
A25 9	1
A26 0	1
A26 1	2

#	ANSWERS
A26 2	3
A26 3	2
A26 4	2
A26 5	4
A26 6	3
A26 7	3
A26 8	2
A26 9	3
A27 0	2
A27 1	2
A27 2	1
A27 3	3
A27 4	2
A27 5	1
A27	2

#	ANSWERS
6	
A27 7	17
A27 8	2
A27 9	5
A28 0	2
A28 1	1
A28 2	3
A28 3	3
A28 4	1
A28 5	5
A28 6	1
A28 7	4
A28 8	3
A28 9	4
A29 0	3

#	ANSWERS
A29 1	2
A29 2	5
A29 3	15
A29 4	3
A29 5	3
A29 6	3
A29 7	3
A29 8	16
A29 9	2

COMPLETES 299

Q12

TYPE: SINGLE SELECTION

Besides yourself, was anyone in your household injured from the COVID vaccine?

#	ANSWERS	ANSWERS(%)	COUNT	STRATIFIED ANSWERS(%)	STRATIFIED COUNT
A1	No	86.96%	260	88.73%	261.26
A2	Yes	13.04%	39	11.27%	33.2

COMPLETES 299

Q13

TYPE: NUMERIC OPEN-ENDED

How many household members (besides yourself) were injured from the COVID vaccine?

#	ANSWERS
A1	1
A2	14
A3	4
A4	11
A5	2
A6	12
A7	2
A8	3
A9	3
A10	1
A11	1
A12	1
A13	19
A14	4
A15	4

#	ANSWERS
A16	1
A17	1
A18	2
A19	5
A20	12
A21	1
A22	2
A23	2
A24	13
A25	4
A26	15
A27	4
A28	2
A29	11
A30	2
A31	3
A32	1
A33	1
A34	1
A35	2
A36	1
A37	1

ANSWERS

A38 3

A39 18

COMPLETES 39

Q14

TYPE: SINGLE SELECTION

Did anyone in your household develop Myocarditis, Pericarditis, or another heart related condition following the COVID vaccine?

#	ANSWERS	ANSWERS(%)	COUNT	STRATIFIED ANSWERS(%)	STRATIFIED COUNT
A1	No	43.59%	17	43.27%	14.36
A2	Yes	56.41%	22	56.73%	18.83

COMPLETES 39

Q15

TYPE: SINGLE SELECTION

Did anyone in your household die from the COVID vaccine?

#	ANSWERS	ANSWERS(%)	COUNT	STRATIFIED ANSWERS(%)	STRATIFIED COUNT
A1	No	69.23%	27	69.32%	23.01
A2	Yes	30.77%	12	30.68%	10.18

COMPLETES 39

Q16

TYPE: SINGLE SELECTION

Now, please think about COVID infection. Did you ever have a COVID infection?

#	ANSWERS	ANSWERS(%)	COUNT	STRATIFIED ANSWERS(%)	STRATIFIED COUNT
A1	No	69.57%	208	70.59%	207.86
A2	Yes	30.43%	91	29.41%	86.59

COMPLETES 299

Q17

TYPE: SINGLE SELECTION

Did you contract a COVID infection before or after receiving the COVID vaccine?

#	ANSWERS	ANSWERS(%)	COUNT	STRATIFIED ANSWERS(%)	STRATIFIED COUNT
A1	Before	39.56%	36	35.78%	30.98
A2	After	42.86%	39	42.04%	36.4
A3	Both before and after the vaccine	17.58%	16	22.18%	19.21

COMPLETES 91

Q18

TYPE: SINGLE SELECTION

Did any of your household members contract a COVID infection?

#	ANSWERS	ANSWERS(%)	COUNT	STRATIFIED ANSWERS(%)	STRATIFIED COUNT
A1	No	57.58%	171	58.38%	169.99
A2	Yes	35.35%	105	34.00%	99.0
A3	Not sure	7.07%	21	7.62%	22.2

COMPLETES 297

Q19

TYPE: SINGLE SELECTION

Did any of your household members die from having a COVID infection?

#	ANSWERS	ANSWERS(%)	COUNT	STRATIFIED ANSWERS(%)	STRATIFIED COUNT
A1	No	83.81%	88	86.71%	85.84
A2	Yes	16.19%	17	13.29%	13.15

COMPLETES 105

Q20

TYPE: SINGLE SELECTION

Do you believe that the medical treatment(s) given to your household member for COVID may have caused their death? (Said another way, do you believe the person would have survived their COVID infection if it were not for medical treatment they received?)

#	ANSWERS	ANSWERS(%)	COUNT	STRATIFIED ANSWERS(%)	STRATIFIED COUNT
A1	No	23.53%	4	23.51%	3.09
A2	Yes	64.71%	11	64.74%	8.52
A3	Not sure	11.76%	2	11.75%	1.55

COMPLETES 17

Q21

TYPE: MULTIPLE SELECTION

Which medical treatment do you believe caused the death of your household member?

#	ANSWERS	RESPONDENTS(%)	ANSWERS(%)	COUNT	STRATIFIED RESPONDENTS(%)	STRATIFIED ANSWERS(%)	STRATIFIED COUNT
A1	Intubation	36.36%	26.67%	4	28.97%	20.49%	2.47
A2	Ventilation	72.73%	53.33%	8	74.85%	52.93%	6.37
A3	Remdesivir	27.27%	20.00%	3	37.59%	26.58%	3.2
A4	Other drugs or medications	0.00%	0.00%	0			

COMPLETES 11

Q22

TYPE: SINGLE SELECTION

Had your household member who died from a COVID infection received at least one COVID vaccine?

#	ANSWERS	ANSWERS(%)	COUNT	STRATIFIED ANSWERS(%)	STRATIFIED COUNT
A1	No	35.29%	6	30.01%	3.95
A2	Yes	47.06%	8	51.77%	6.81
A3	Not sure	17.65%	3	18.22%	2.4

COMPLETES 17

Q23

TYPE: SINGLE SELECTION

Are you planning on getting future COVID vaccines?

#	ANSWERS	ANSWERS(%)	COUNT	STRATIFIED ANSWERS(%)	STRATIFIED COUNT
A1	No	38.32%	192	35.76%	179.14
A2	Yes	44.51%	223	45.82%	229.58
A3	Not sure	17.17%	86	18.42%	92.28

COMPLETES 501

Q24

TYPE: SINGLE SELECTION

If the CDC were to say that COVID vaccines had a 5% chance of disabling you for life, would you still plan to get it in the future?

#	ANSWERS	ANSWERS(%)	COUNT	STRATIFIED ANSWERS(%)	STRATIFIED COUNT
A1	No	33.01%	102	30.05%	96.72
A2	Yes	38.51%	119	38.26%	123.13
A3	Not sure	28.48%	88	31.69%	102.0

COMPLETES 309