

# COVID-19 TRACKING STUDY

Prepared for:

Hawaii State Department of Health

Submitted by Anthology Marketing Group

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[ANTHOLOGY®]

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## METHODOLOGY

The State of Hawaii Department of Health has contracted Anthology Research to conduct a quantitative study in the form of a mixed-mode survey of Hawaii residents.

A total of 445 surveys were conducted beginning on December 30, 2020 and ending January 11, 2021. Each respondent was screened to ensure they were at least 18 years of age and a full-time resident of the state of Hawaii. The margin of error for a sample of this size is +/- 4.65 percentage points with a 95% confidence level.

The online sample was derived from a database purchased from Dynata and supplemented by Anthology Research's proprietary panel of respondents. The telephone sample was generated based on output from Anthology's Random Digit Dialing software.

The data was weighted to reflect population estimates of adults 18 years and older by major ethnic groups by island.

## EXECUTIVE SUMMARY

The State of Hawaii Department of Health's communications campaign has been successful in reaching a vast majority (89%) of local residents. The four broadcast spots all tested relatively well with mean scores falling just below the top box (9-10).

A challenge for local health officials is the obvious impact that COVID-fatigue is having on Hawaii residents when it comes to messaging and communications:

- When sources of coronavirus information is tracked we find declines across the board for each applicable test subject.
- The proportion that feel personally threatened by COVID-19 is trending downward over the last two reporting periods.

A definite area of concern is the increasing proportion of local residents who view the pandemic more as an economic and financial disaster than one related to health outcomes. This number has increased seven-points to 37% in the current study. We see this mindset has a direct correlation to other unwanted behaviors and perceptions regarding the pandemic.

What is encouraging is that the proportion who admit to following all suggested COVID-19 guidelines has risen to 65%, its highest point to date.

Overall, two in five (41%) respondents have been tested for COVID-19 with household penetration increasing to 55% statewide.

Roughly four in five (82%) respondents admit to suffering from some form of mental health issue over the course of the last six months of the pandemic.

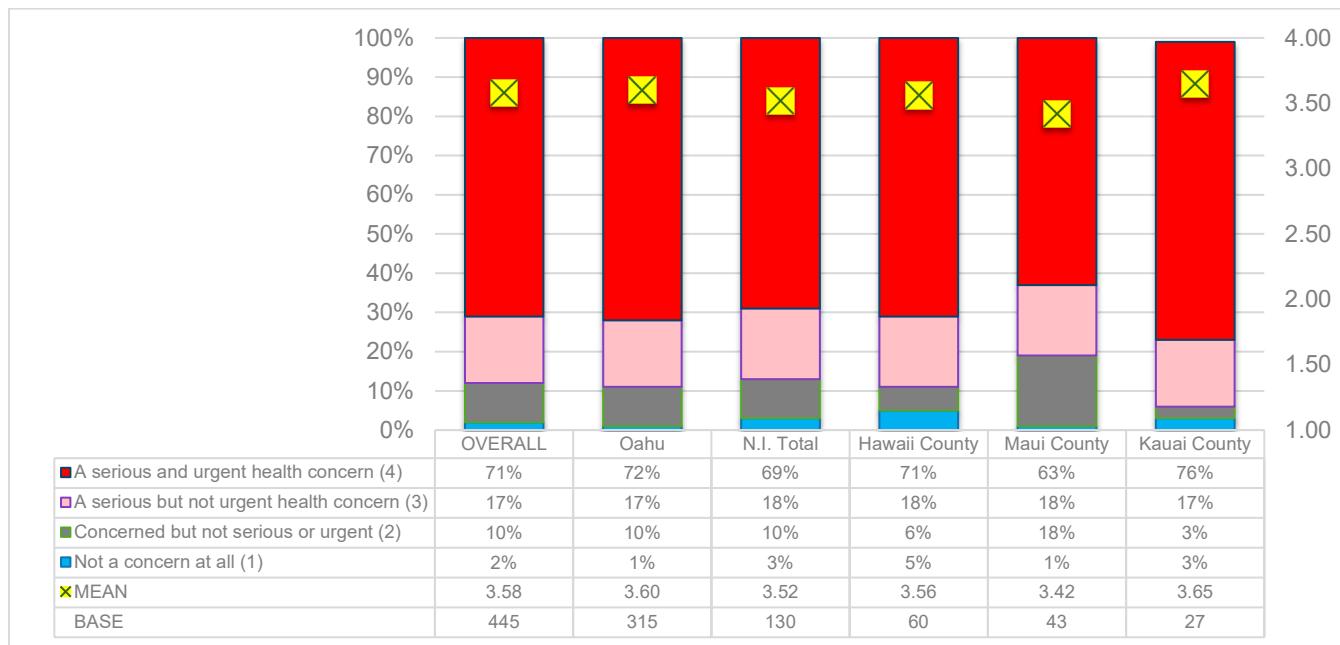
Hawaii CARES had aided name awareness amongst only 29% of those polled.

A little more than half (55%) of those polled say they will signup for the vaccine as soon as they are eligible with another 36% preferring to take a wait and see approach. At this point few Hawaii residents are opposed to ever getting vaccinated.

Segments who are less likely to get the vaccination as soon as they are eligible include: *young adults, females, those without a college degree, and less affluent segments of the sample*. 42% who live with a minor indicate they will not let that child get vaccinated.

## COVID-19 THREAT PERCEPTIONS

At the outset of the study, Hawaii residents were asked how serious of a health concern they viewed the COVID-19 virus. They were instructed to quantify their perceptions using a standard four-point rating scale highlighted in the graphic below. In addition to the percent results a mean or average score was also computed. The higher the mean score (closer to 4.00) the greater the level of concern.



Seventy-one percent of the residents polled agrees that COVID-19 poses a serious and urgent health concern locally. Another 17% feel it is a serious health concern but not something that is of any urgency. Of the remainder, one in 10 are concerned but do not view the coronavirus as something that is serious or urgent while two percent are not concerned at all. When these results are looked at in the aggregate they result in a mean or average score of 3.58 out of a possible 4.00.

- Those who perceive the threat of COVID-19 more in terms of its financial or economic impact (50%) were less likely to view the pandemic as a serious and urgent health concern (top box) compared to those who view the pandemic more in terms of its overall health impact (83% top box).
- Those who recall being exposed to advertising from the Department of Health (73%) were significantly more likely to view COVID-19 as a serious and urgent health concern (top box) than were those not exposed to marketing from the state agency (57% top box).

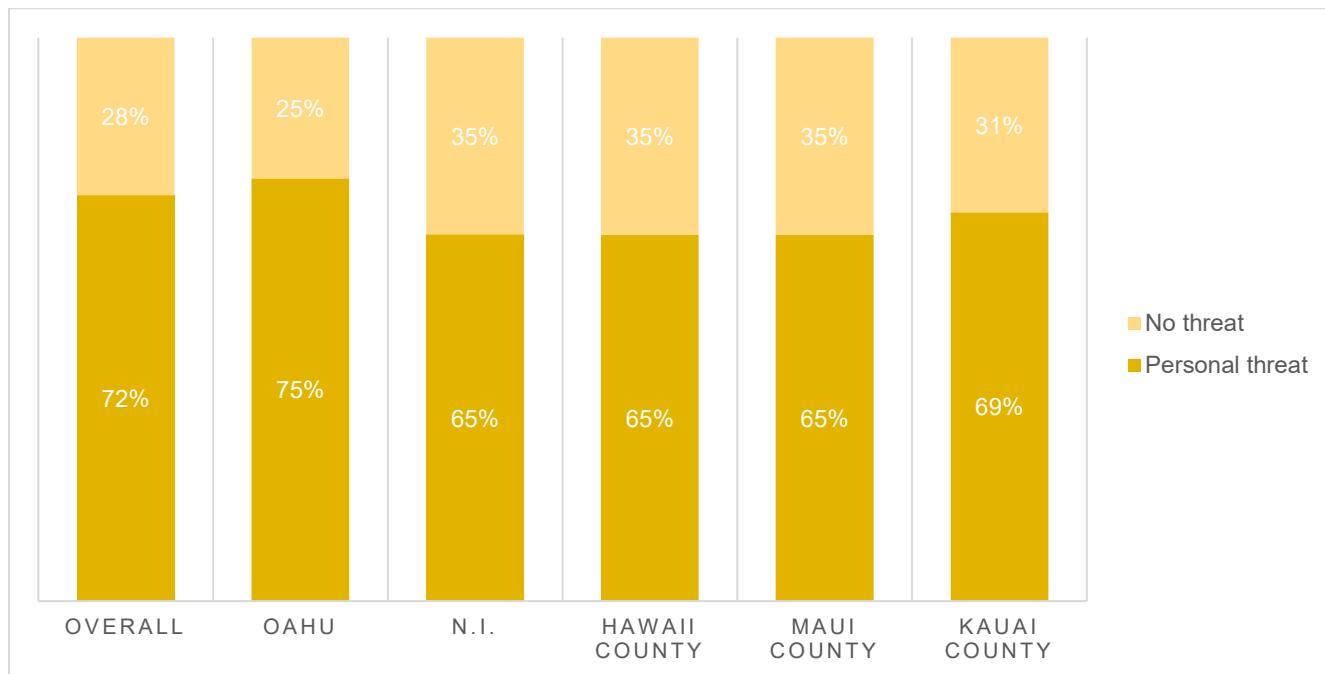
- Female (76% top box) respondents view the pandemic as a more serious and urgent health threat than do males (66% top box).
- The level of concern one has as it relates to COVID-19 increases with age. For example, among young adults under the age of 35, 56% believe that the pandemic poses a serious and urgent health concern (top box). This number rises to 63% among those between the ages of 35 and 49, rising further to 83% amongst those 50 to 64 and eventually topping out at 84% amongst seniors.

The table below tracks the results over the course of the study. The graphic below highlights little to no change in resident perceptions.



## PERSONAL THREAT

Each respondent was then asked if they viewed COVID-19 as a direct, personal threat.



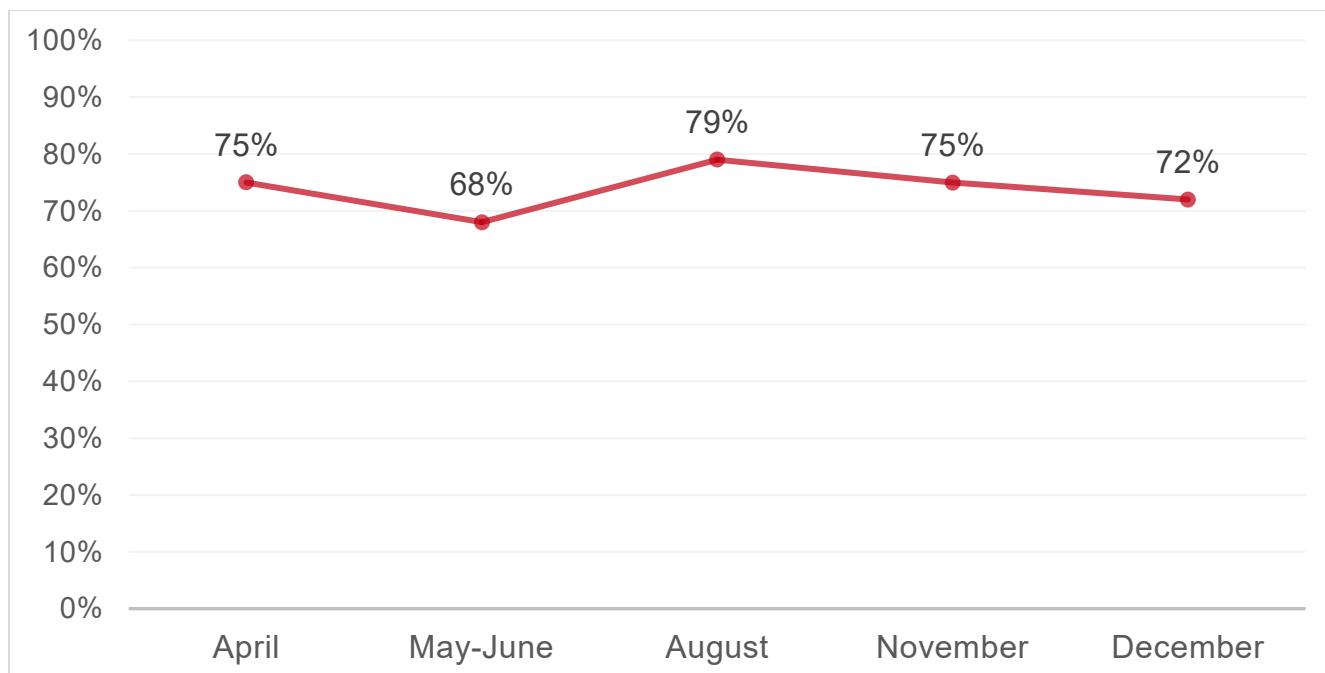
Three in four (72%) respondents views COVID-19 as a real danger and personal threat to their well-being.

When the results are segmented by area we find that those on Oahu (75%) view COVID-19 as more of a personal threat compared to their Neighbor Island (65%) counterparts.

- *Among those who have not been exposed to or do not recall advertising from DOH, 39% do not consider COVID-19 to be a personal threat. As a point of comparison, this number shrinks to 27% among those who recall marketing and communications from DOH.*
- *Locals, born and raised in Hawaii (75%), were more likely to feel personally threatened by COVID-19 than are transplants to the state (67%).*
- *The likelihood one feels threatened by COVID-19 increases with age. For example, among those adults under the age of 35, 63% feel personally threatened by the coronavirus. This number increases to 67% amongst those between the ages of 35 and 49 and eventually tops out at 80% among adults between the ages of 50 and 64.*

- Those who view the threat of COVID-19 more in terms of its financial/ economic impact (54%) were less likely to feel personally threatened by the coronavirus compared to those who view the threat of COVID-19 more in terms of its negative health impact (82%).
- Among the major ethnic groups in the state, Caucasians (62%) feel the least threatened by COVID-19 while Japanese (81%) respondents were likely to feel the most threatened.

The table below tracks the proportion of respondents that view COVID-19 as a real danger and personal threat over the course of the study. When the results are tracked we note a small, but steady decline in this number over the last three reporting periods.



Next, those respondents who believe that COVID-19 poses a personal threat (n=329) were asked to identify, using a provided list, what worries them most about the virus. The top responses are highlighted in the table below.

	NOV-20 n=403	DEC-20 n=329	CHANGE
Getting the disease	86%	84%	▼2.0
Difficulty seeing family outside Hawaii	49%	51%	▲2.0
Health condition the virus might worsen	46%	39%	▼7.0
Potential job loss	20%	22%	▲2.0
Childcare issues	9%	8%	▼1.0

Most in this segment are simply worried about contracting COVID-19 (84%). Half (51%) are disappointed that the pandemic has made it difficult to visit family members outside of the state. Two in five (39%) are concerned that pre-existing conditions would worsen if they contracted the virus while 22% fear potential job loss.

When these results are tracked we note a seven-point decline in the number in this segment who worry about the impact the virus could have on pre-existing conditions.

- *Forty-three percent of those who view the virus as a direct personal threat and views COVID-19's impact as primarily financial in scope, worry about potential job loss.*
- *Concerns related to the impact that COVID-19 may have on pre-existing conditions becomes more of an issue as respondents get older. For example, among those under the age of 35, 34% are concerned about the impact the virus may have on pre-existing health conditions. As a point of comparison, this number rises to 55% amongst seniors in this subset of the sample.*
- *Among those in this subset of the sample with at least one child in their home, 29% list the inability or difficulty in obtaining childcare as a reason they fear the virus.*

Those 116 respondents who are not concerned about the threat that COVID-19 poses to them personally were also asked why they felt this way. They were asked to select, from a list of options highlighted below, (the responses highlighted in blue were volunteered and not part of the aided list of options) all those that applied to their own personal situation.

	NOV-20 n=130	DEC-20 n=116	CHANGE
I am healthy/ don't believe I will become ill	54%	49%	▼5.0
I do not venture outside my home much	34%	45%	▲11.0
I am young, primarily affects older people	27%	25%	▼2.0
I live alone	12%	8%	▼4.0
We protect ourselves and follow CDC guidelines	8%	5%	▼3.0
I do not believe the virus is as serious as portrayed	4%	8%	▲4.0

Among this subset (n=116) of the sample, half (49%) feels the way they do due to the mindset that their relatively good health is sufficient protection against them becoming seriously ill. A near equal (45%) number are confident because they seldom venture outside of their homes. One in four (25%) feel their relative youth shields them from serious illness as their belief is that the virus more adversely affects the elderly.

Next, Hawaii residents were asked how their perceptions of the danger the coronavirus poses has changed, if at all, since the start of the pandemic. The table below highlights the percent results as well as the mean or average score. The higher the mean score (closer to 3.00) the more concerned they have become.

	OVERALL	Personal Threat	Not a threat
More concerned (3)	41%	49%	20%
Same level of concern (2)	49%	48%	50%
Less concerned (1)	11%	4%	29%
MEAN	2.30	2.45	1.91

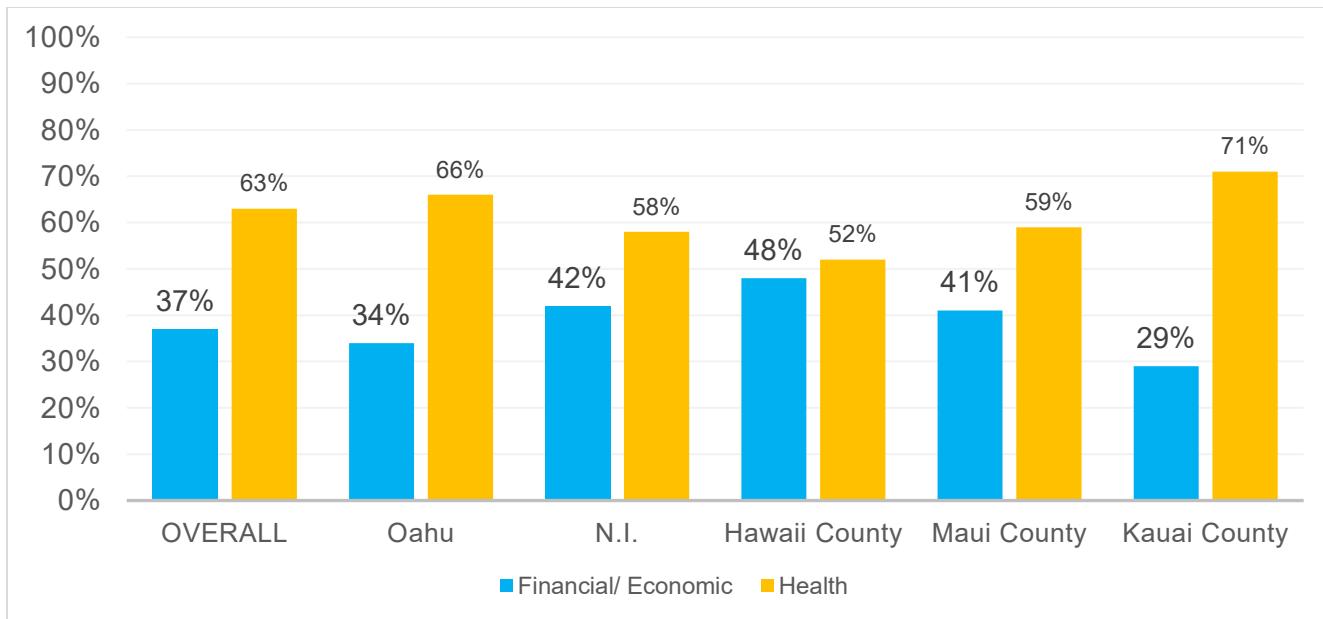
Overall, 41% of those polled are more concerned about COVID-19 today than they were in the beginning stages of the pandemic. Half (49%) feel their perceptions have not changed regarding its dangers. One in ten (11%) are actually now less concerned about the coronavirus than they were before. When these results are looked at in the aggregate they result in a mean or average score of 2.30 out of a possible 3.00.

When the results are segmented by whether or not the individual felt personally threatened by COVID-19, we find that those who do feel threatened (49% more concerned) were more likely to be more concerned than they were during the early stages of the pandemic while the opposite is true amongst those who do not view the virus as a personal threat (29% less concerned).

- *Those who admit to not being exposed to DOH advertising (28%) were significantly more likely to be less concerned about COVID-19 than they were at the start of the pandemic. As a point of comparison, among those who do recall marketing from DOH, just nine percent feel less concerned about the coronavirus as compared to before.*
- *One in five (19%) Caucasians indicate they are less concerned about COVID-19 than they were during the early stages of the pandemic. As a point of comparison, the proportion of Japanese residents who feel the same is just six percent.*
- *Female (45% more concerned) respondents were more likely to say their level of concern related to the pandemic has increased compared to males (36% more concerned).*

## COVID-19 THREAT – ECONOMIC VS HEALTH

Those taking part in the research were then asked which aspect of COVID-19 worries them the most: the financial and economic impact the virus has on the community or the potential negative health impact should I or someone in my family contract the virus.

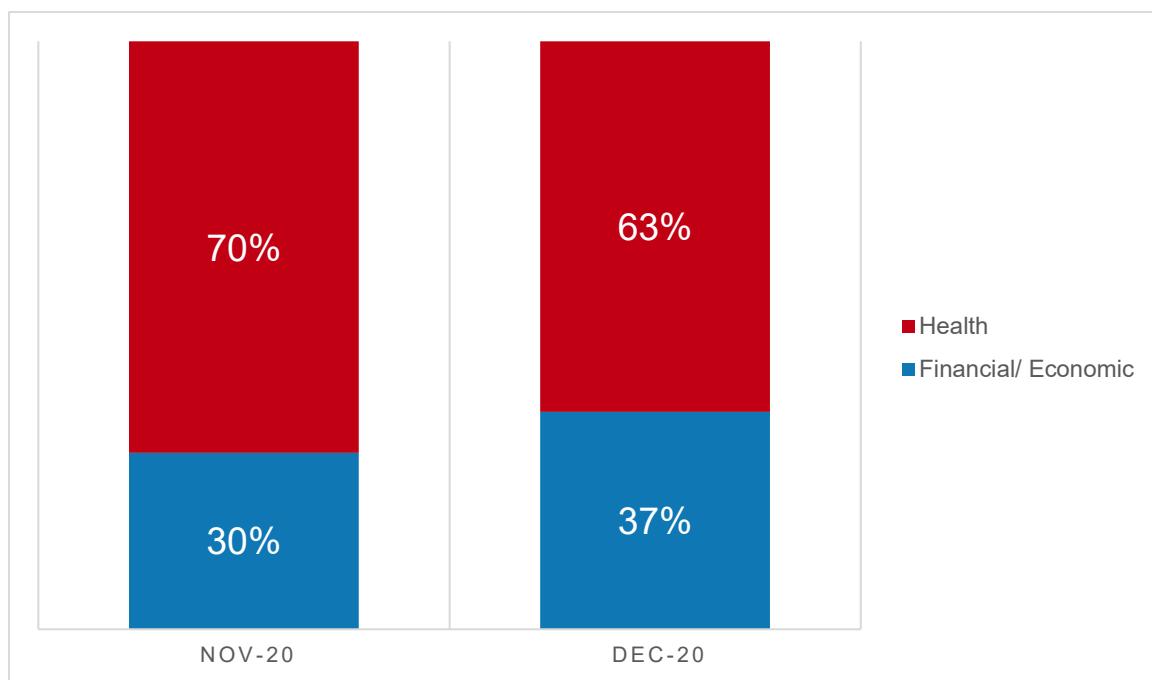


Two-thirds (63%) of those polled views the impact of the virus more in terms of its potential negative health impact. The remaining 37% tends to fixate on the financial or economic damage the pandemic has inflicted.

- *Sixty percent of those who do not feel threatened by COVID-19 believe the impact of the virus is more financial/ economical. As a point of comparison, amongst those who do feel personally threatened by the virus, just 28% views its impact more in financial terms.*
- *Half (47%) of those who are skeptical about the government's claims regarding the seriousness of the virus views COVID-19's impact as more financial/ economical.*
- *Sixty-two percent of those who do not intend to take the vaccine views COVID-19's impact on the community more in terms of its financial impact.*
- *Female respondents were more likely to focus on COVID-19's health impact while larger proportions of males tended to view the pandemic as an economic crisis.*

- Less educated and less affluent segments of the sample were more likely to view COVID-19 in terms of its financial impact. For example, 44% of those without a college degree, felt that the coronavirus was more of a financial disaster. As a point of comparison, the proportion of college graduates who felt the same falls to 31%.
- The perception of the threat of COVID-19 being more financial than health-related is more pronounced amongst respondents under the age of 50. For example, half (50%) of young adults under the age of 35 views the virus more in terms of its economic impact.

When the results are tracked we note a seven-point decline in those who view COVID-19's impact more as a health-crisis than an economic one.



## COVID-19 TESTING/ EXPOSURE

In this section of the study Hawaii residents were asked if they or anyone in their families had been tested thus far for COVID-19. Later they were asked if they knew of anyone, including themselves with a positive test result or who had been hospitalized due to virus complications.

	DEC 2020
Personally tested for COVID-19	41%
Someone in HSE tested for COVID-19	55%
Know someone with COVID-19	56%
Know someone hospitalized with COVID-19	27%

Overall, two in five (41%) respondents indicate they have been tested for COVID-19. Household penetration rises to 55% indicating a little more than half of those polled live in homes where at least one individual has been tested for COVID-19.

- *Males (47%) were significantly more likely to have been tested for COVID-19 since the start of the pandemic compared to females (35%).*

Fifty-six percent say they know of a positive COVID-19 diagnosis while one in four (27%) know of someone that has been hospitalized due to COVID-19 complications.

- *Those who feel personally threatened by COVID-19 (61% vs 45% not threatened) were more likely to know of a positive test result.*
- *The likelihood of knowing of a positive test result increases as respondents become more affluent. For example, among those who reside in the bottom income tier (<\$50K), 47% know of a positive test result. This number increases as respondents become more affluent topping out at 68% among those living in homes with combined incomes in excess of \$100K.*
- *Among the major ethnic groups in the state, Caucasians (69%) were the most likely to know of a positive test result. As a point of comparison, just 48% of Japanese know of a positive test result while this number rises to 61% amongst Native Hawaiians.*

## COVID-19 MITIGATION PRACTICES

Hawaii residents were then asked to rate their own personal adherence to COVID-19 suggested guidelines as a whole. They were instructed to quantify their perceptions using the four-point rating scale highlighted in the table below. In addition to the percent results a mean or average score was also computed. The higher the mean score the greater their perceived level of compliance.

	April	May-June	August	November	December	CHANGE
I believe I am following all of the guidelines and mandates (4)	56%	48%	48%	62%	65%	▲3.0
I believe I am doing most of the things being asked of Hawaii residents (3)	40%	47%	49%	35%	32%	▼3.0
I am picking and choosing those things I am willing to do (2)	3%	4%	2%	2%	2%	—
I am not really paying attention to or following the guidelines and mandates (1)	0%	0%	0%	1%	1%	—
MEAN	3.52	3.44	3.45	3.58	3.61	▲

Overall, 65% of those polled believe they are following all suggested COVID-19 guidelines. Another 32% are of the opinion they are following most of what is being suggested to the general public. Of the remainder, very few admit to not following what is being asked of them. When these results are looked at in the aggregate they result in a mean or average score of 3.61 out of a possible 4.00.

When these results are tracked we note no significant differences in perception over the course of the study.

- *Those who view COVID-19 as a direct personal threat (70%) were more likely to feel they are following all suggested guidelines compared to those who do not view the virus as a direct, personal threat (51%).*
- *Research respondents who were exposed to DOH marketing (66%) were more likely to be following all suggested COVID-19 guidelines compared to those who do not recall marketing from the department (56%).*

Next, those 149 respondents who indicated in the prior question they were not following all suggested COVID-19 guidelines were asked why this was. They were asked to select all applicable options from a list.

	November N=202	December N=149
Guidelines are too confusing/ Not clear what is being asked of me	24%	34%
My job parameters does not allow me to follow all suggested guidelines	26%	18%
Things have improved/ fewer infections	NA	18%
Unsure about what guidelines are most important to follow	17%	17%
I am young, so not in danger like older segments	4%	11%
I am in good health and do not believe I will get sick/ become seriously ill	11%	11%

Among these 149 individuals, 34% simply find what is being asked of them oftentimes confusing and contradictory. Eighteen percent work in jobs where the environment does not allow them to follow at least portions of what is being asked of the public while another 18% feel that things have improved to a point where they no longer feel it necessary to follow all or most of the guidelines. Seventeen percent are unsure about priorities in terms of what is being asked of them while 11% cite their youth or relatively good health as insulating them from becoming seriously ill.

### MASKING/ SOCIAL DISTANCING OBSTACLES

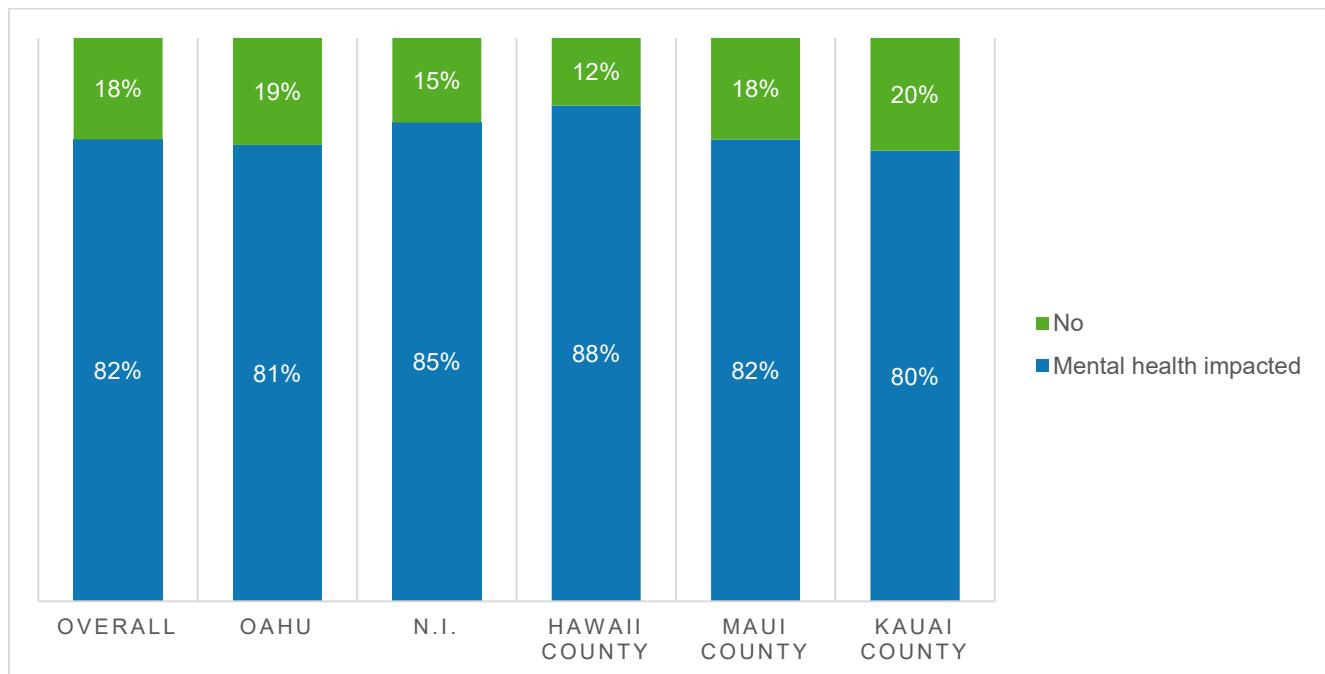
Each respondent was asked to identify situations where they find it difficult to wear a mask or practice social distancing. The top responses given are highlighted in the table below.

	TOTAL n=445
Not an issue/ do not have problems adhering	31%
Visiting businesses – retail/ grocer/ banks	17%
During exercising/ working out	12%
Restaurants/ dining	8%
Outdoors	7%
Workplace	7%

Among some of the situations mentioned include when visiting various local businesses, when exercising, dining out, and when they are at work.

## MENTAL HEALTH DURING THE PANDEMIC

At the outset of this section of the study Hawaii residents were asked if they have experienced any of the following mental health issues over the last six months: *anxiety, depression, loneliness, panic attacks, or suffering from overall mental stress*. Please note that no formal, detailed definition of each stated mental health issue was provided to research respondents when this question was posed to them.



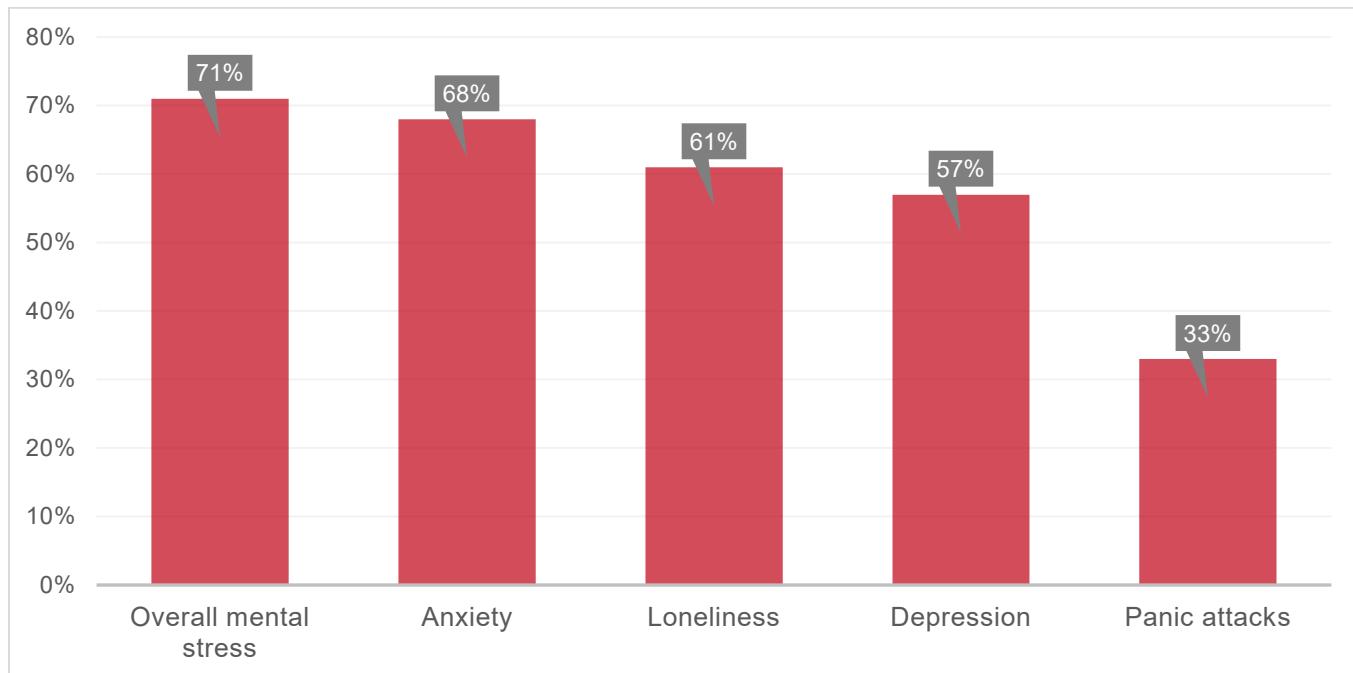
The results from this initial section of the study reveals a solid majority of those polled have been impacted by at least one of the mental health issues being tested over the course of the last six months.

The typical respondent has experienced 2.90 of the six mental health issues being tested.

- Those who do not view COVID-19 as a personal threat (74%) were less likely to have experienced any of these mental health issues when compared to those who view COVID-19 as a direct personal threat (85%).
- Mental health issues over the course of the last six months are more likely to be present among less affluent segments of the sample. For example, among those who reside in homes in the bottom income tier (<\$50K) we find 91% suffering from one or more of the mental health issues being tested over the last six months. As a point of comparison, we see this number fall to 75% among those residing in homes with combined incomes in excess of \$100K.

- Mental health issues over the last six months are more likely to be present among younger segments of the sample. Among young adults under the age of 35, 93% have experienced at least one of the mental health issues being tested in the last six months. As a point of comparison, this number falls to 65% amongst seniors. Another way to examine this is to look at the mean number of mental health issues faced by each age segment. In this instance young adults under the age of 35 have experienced 3.83 of the six mental health issues being tested over the course of the last six months. As a point of comparison, this number declines with age eventually bottoming out at 1.73 among seniors.
- Those who live with a child under 18 in their homes (91%) were more likely to have experienced mental health issues over the course of the last six months than were those who do not live with a minor (79%). Those who live with at least one child have experienced an average of 3.31 mental health issues of the six being tested.
- Females (3.14 mean) were more likely to report/ experience a wider range of mental health issues compared to males (2.68 mean).

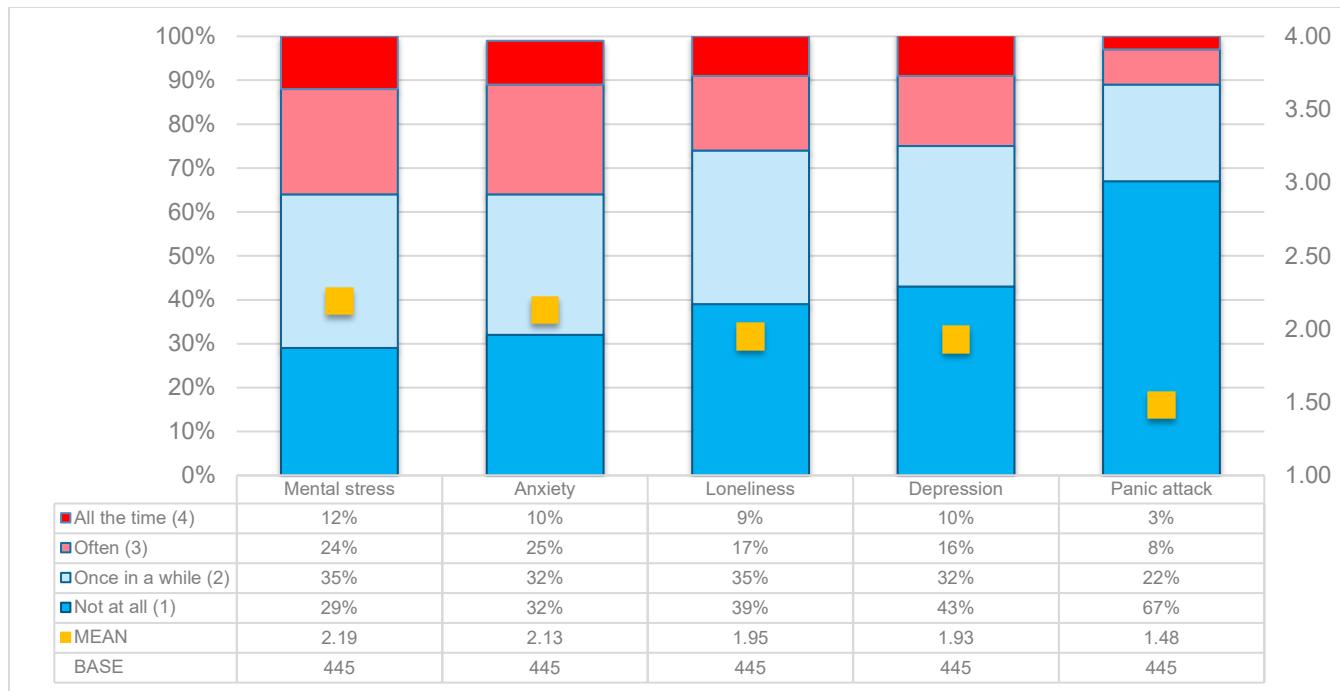
Next, we examine the impact of the five mental health issues being tested individually. The table below highlights the proportion of respondents impacted by each issue over the course of the last six months.



Overall, 71% of those polled have suffered mental stress at some point over the course of the last six months. Sixty-eight percent have experienced feelings of anxiety during this time period while 61% have felt loneliness during the pandemic. Fifty-seven percent have felt depressed at some point over the last six months while a third (33%) have suffered a panic attack.

- *Those who view the pandemic more in terms of its financial impact were more likely to have experienced overall mental stress and depression over the last six months.*
- *Over the course of the last six months females were more likely to have experienced anxiety and panic attacks.*
- *Those who reside in homes in the bottom income tier (<\$50K) were significantly more likely to have been impacted by the following in recent months: anxiety, loneliness, depression, and panic attacks.*
- *Mental health issues are particularly evident among younger segments of the sample. This is particularly true among young adults under the age of 35. For example, 85% in this age group has suffered from mental stress, 86% has dealt with anxiety, while 81% has had bouts of loneliness. Eighty percent under 35 has suffered at times from depression recently while 52% say they have suffered a panic attack.*
- *Those who live with children in their homes were more likely to have had suffered from overall mental stress, depression, and panic attacks in the last six months.*

Next, we look at the five mental health issues in question and measure frequency. Research respondents were instructed to quantify the frequency they experienced each issue using the four-point rating scale highlighted in the table below. In addition to the percent results a mean or average score was also computed. The higher the mean score (closer to 4.00) the more frequent the occurrence.



The results from this section reveals the issue that occurs with the most frequency is feeling mental stress. Twelve percent of the sample feels this was a regular occurrence experiencing it all the time over the last six months. Feelings of anxiety are being experienced by 10% of the sample all of the time while a near equal number (9%) suffers from loneliness all of the time over the last six months. Depression was also an issue that 10% of the sample experiences on a regular basis while panic attacks were the least likely to occur with great regularity.

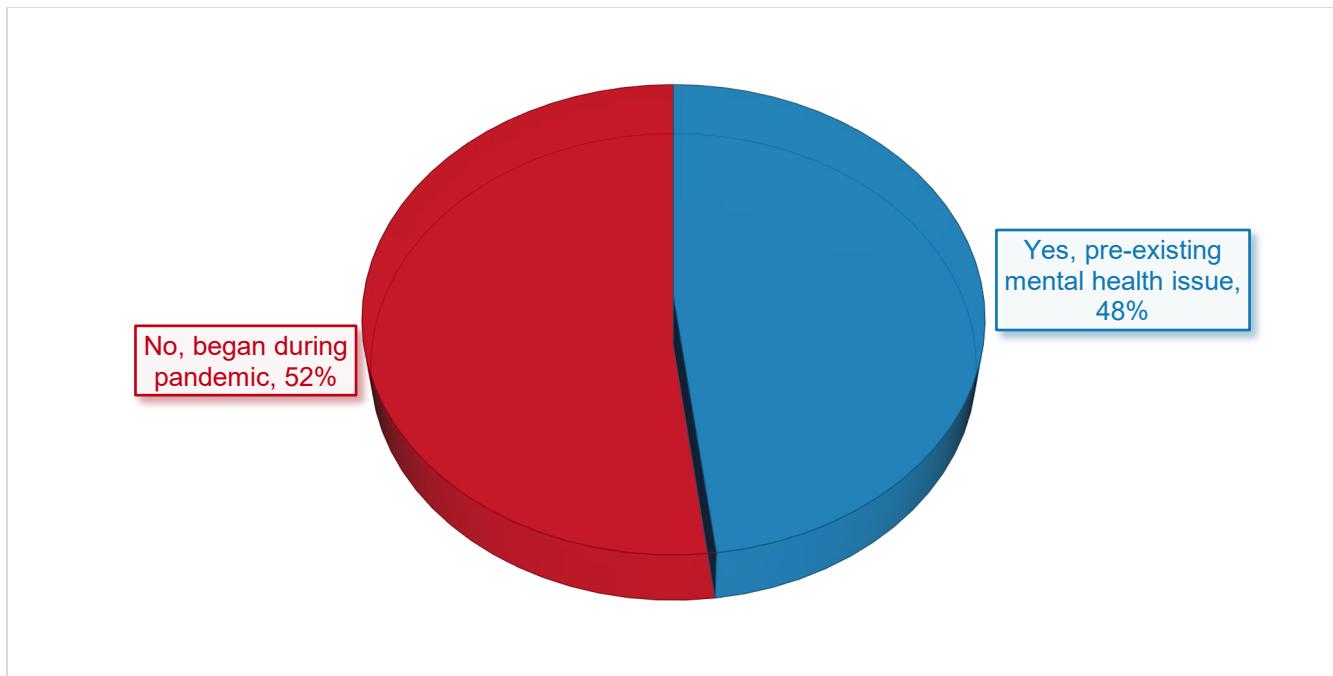
## SEGMENTATION RECAP

In this section we examine statistically significant differences between various segments of the sample based on the frequency of occurrence. These results highlights the segments where the following mental health issues occur on a more frequent basis.

	SIGNIFICANT STATISTICAL DIFFERENCES MEAN SCORES
<b>ANXIETY</b>	<ul style="list-style-type: none"> <li>• Those who view pandemic's impact more in financial/economic terms</li> <li>• Following all suggested guidelines</li> <li>• Females</li> <li>• Less affluent segments</li> <li>• Native Hawaiians</li> <li>• Younger segments of the sample</li> <li>• Those without a college degree</li> <li>• Those who live in larger households</li> <li>• Those who live with a child in their homes</li> </ul>
<b>DEPRESSION</b>	<ul style="list-style-type: none"> <li>• Those who view pandemic's impact more in financial/economic terms</li> <li>• Following all suggested guidelines</li> <li>• Younger segments of the sample</li> <li>• Those without a college degree</li> <li>• Those who live in larger households</li> </ul>
<b>LONELINESS</b>	<ul style="list-style-type: none"> <li>• Those who view pandemic's impact more in financial/economic terms</li> <li>• Following all suggested guidelines</li> <li>• Those who have been tested for COVID-19</li> <li>• Less affluent segments of the sample</li> <li>• Younger segments of the sample</li> <li>• Those without a college degree</li> <li>• Those who live in larger households</li> </ul>
<b>PANIC ATTACKS</b>	<ul style="list-style-type: none"> <li>• Those who view pandemic's impact more in financial/economic terms</li> <li>• Those who view COVID-19 as a personal threat</li> <li>• Females</li> <li>• Less affluent households</li> <li>• Native Hawaiians</li> <li>• Younger segments of the sample</li> <li>• Those without a college degree</li> <li>• Those who live in larger households</li> <li>• Those who live with a child in their homes</li> </ul>
<b>OVERALL MENTAL STRESS</b>	<ul style="list-style-type: none"> <li>• Those who view pandemic's impact more in financial/economic terms</li> <li>• Those who do not intend to take the vaccine</li> <li>• Less affluent segments of the sample</li> <li>• Native Hawaiians</li> <li>• Younger segments of the sample</li> <li>• Those who live in larger households</li> <li>• Those who live with a child in their homes</li> </ul>

## PRE-EXISTING CONDITION

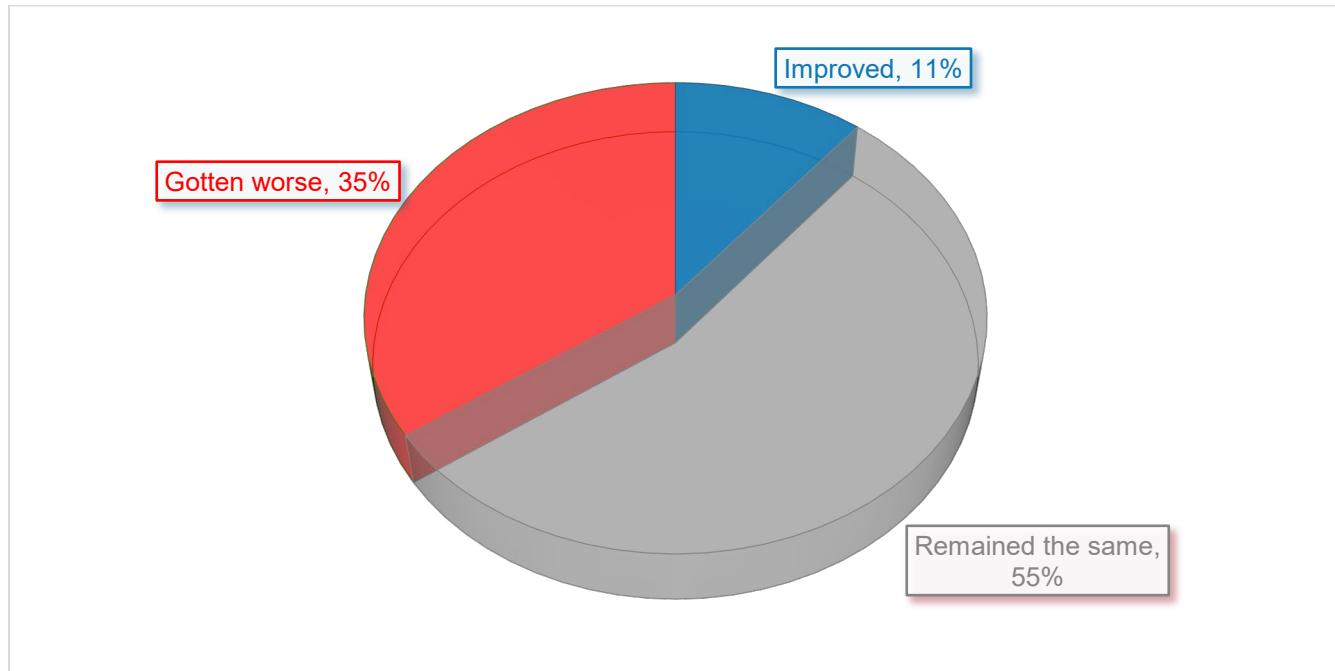
Those respondents who indicated in the prior section that they had suffered from one of the six mental health issues being discussed in this section over the last six months (n=363) were then asked if they had suffered from these issues prior to the pandemic.



The results from this section reveals the mental health impact the pandemic is having on the local population with half (52%) of those currently suffering from one or more of the six issues being tested admitting that the onslaught of symptoms began during the pandemic.

- *The pandemic is having a greater impact on males in terms of mental health. For example, 58% of males who have experienced at least one of the six mental health issues tested in this section indicated that it is a new issue for them having not suffered from it prior to the pandemic. As a point of comparison, this number drops to 47% among females.*
- *From a mental health standpoint the numbers show that Japanese residents are hit particularly hard with 68% who are currently experiencing mental health issues related to this section admitting they did not suffer from it prior to the pandemic.*

Next, in order to further probe this topic those who indicated they had some mental health issues prior to the pandemic ( $n=183$ ) were asked how COVID-19 has impacted their situation.



A third (35%) in this subset of the sample feel their condition has worsened since the start of the pandemic. Half (55%) feel there has been no change in their condition while one in ten (11%) believe their mental health has actually improved during the pandemic.

These same individuals ( $n=183$ ) were then asked what, if anything, they have done to address their mental health issue(s). The top responses are highlighted in the table below.

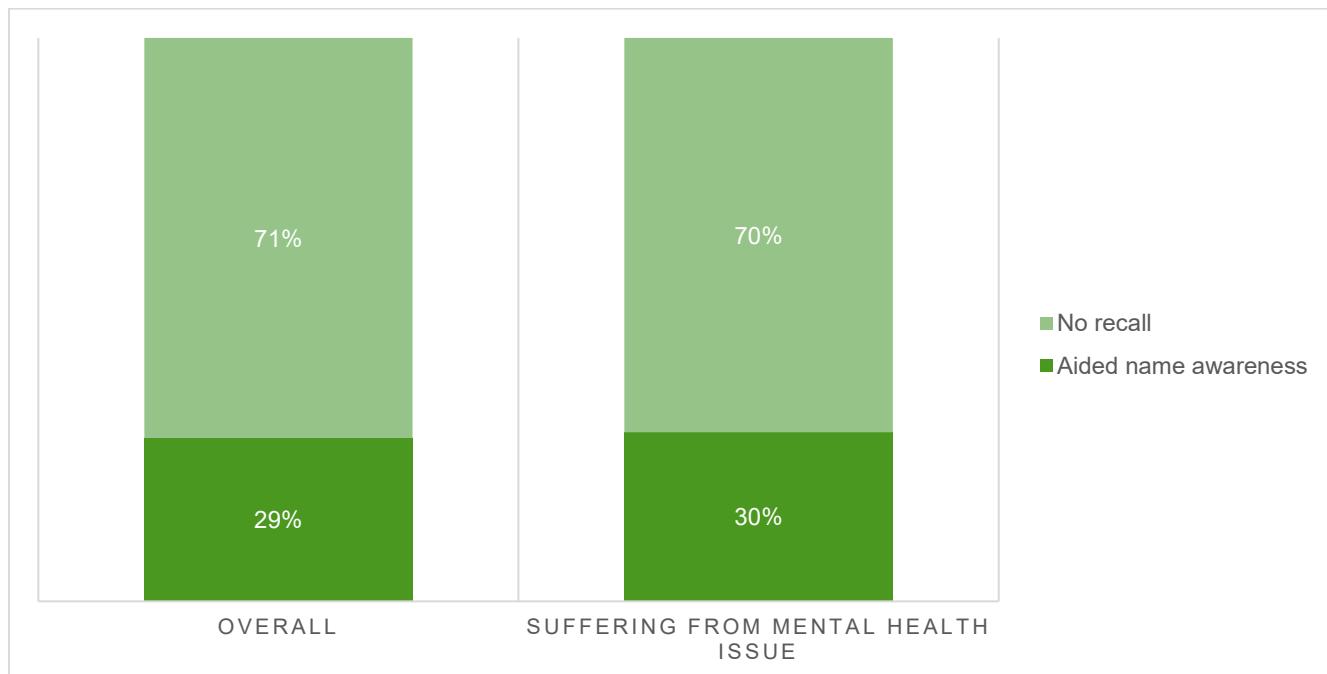
	TOTAL $n=183$
Talked to a friend or family member	65%
Spoke with a therapist	27%
Took medication	22%
Done nothing	10%
Self-help	9%
Called or texted CARES	3%

The results in this section reveal that three percent of those in this subset of the sample contacted Hawaii CARES seeking assistance. Most took it upon themselves to speak with a friend or family member or tried to remedy the situation themselves. One in four (27%) sought out a therapist while 22% took medication.

## HAWAII COORDINATED ACCESS RESOURCE SYSTEM

### AIDED NAME AWARENESS

At the outset of this section of the study Hawaii residents were asked if they had heard of Hawaii CARES prior to taking part in the research.

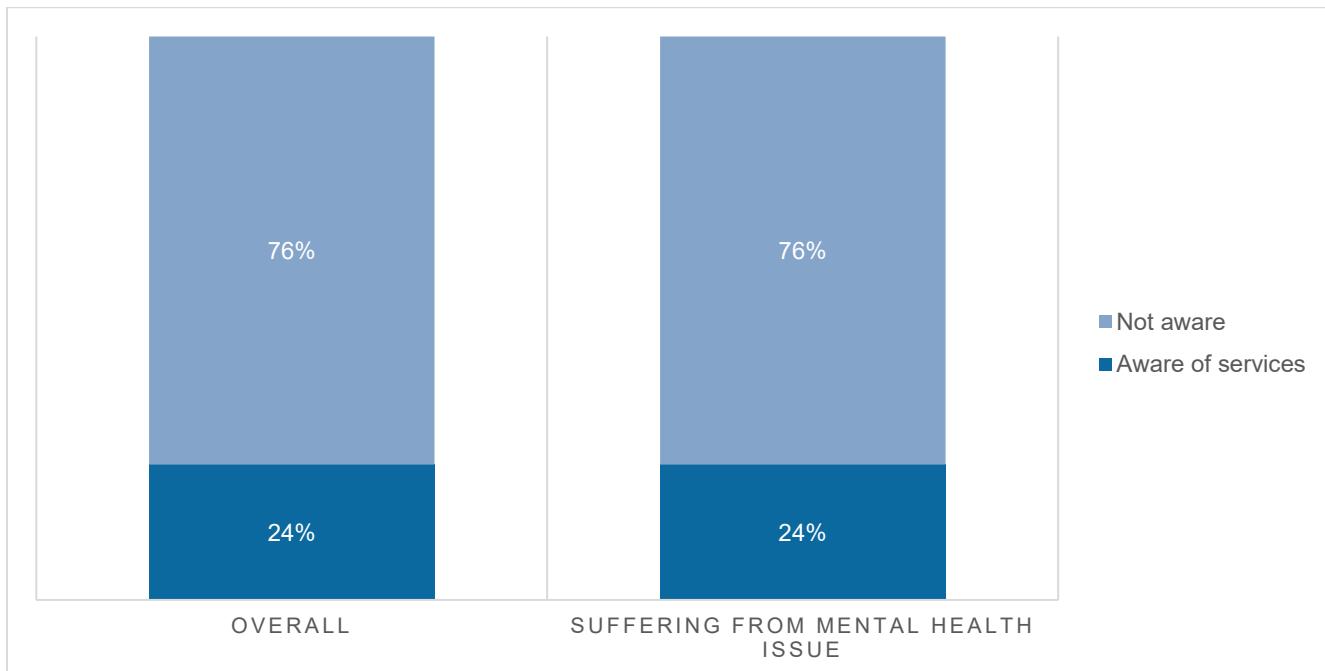


Overall, 29% of those polled had heard of this program prior to taking part in the study. This number is identical when the results are filtered to show aided name awareness among only those who indicated in the prior section that they were suffering from one of the six mental health issues being tested.

- *Aided name awareness for this program is higher among more educated segments of the sample. For example, 34% of college graduates had heard of this program prior to taking part in the study. Aided name awareness falls to 24% among those without a college degree.*

## FAMILIARITY

Next, research respondents were asked if they were aware that Hawaii CARES offers crisis support, mental health resources, substance use treatment services, and help with isolation and quarantine.



The results indicate that one in four (24%) respondents had prior awareness of the services offered by Hawaii CARES when asked in an aided fashion. These results do not differ when filtered by those who have had their mental health impacted during the pandemic.

## SERVICE APPEAL

At the conclusion of this section of the study, research respondents were asked to rate the likelihood they would use the services from Hawaii CARES. The percent results are highlighted in the table below along with a mean or average score. The higher the mean score (closer to 3.00) the greater the likelihood of usage.

	TOTAL	Oahu	N.I.	Suffering from Mental Health Issue
BASE	445	315	130	363
Very likely (3)	14%	11%	20%	15%
Somewhat likely (2)	39%	40%	38%	41%
Not likely (1)	47%	49%	42%	44%
MEAN	1.67	1.63	1.78	1.71

Overall, 14% of those polled appear very open to using this service should the need arise. Another 39% say it is somewhat likely they would contact Hawaii CARES. Of the remainder, half (47%) appear reluctant to reach out to the services being offered here.

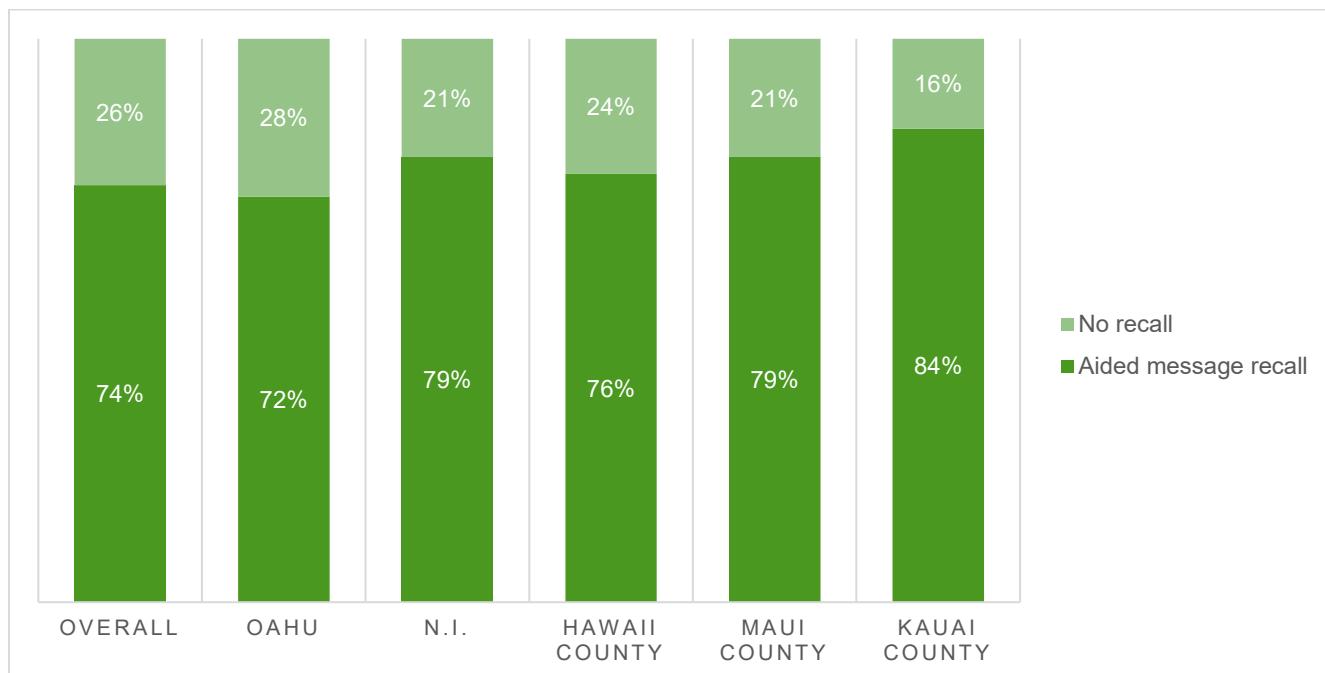
When the results are segmented by those who have suffered mental health issues since the start of the pandemic we find the numbers to be nearly identical to that of the overall sample.

- *Amongst the major ethnic groups in the state, Caucasians (13% very likely) and Native Hawaiians (22% very likely) show a greater willingness to reach out for help from Hawaii CARES while Japanese (7% very likely) residents were the most reluctant.*

## DEPARTMENT OF HEALTH COMMUNICATIONS CAMPAIGN

### SAFELY GATHER AT HOME/ WORKPLACE

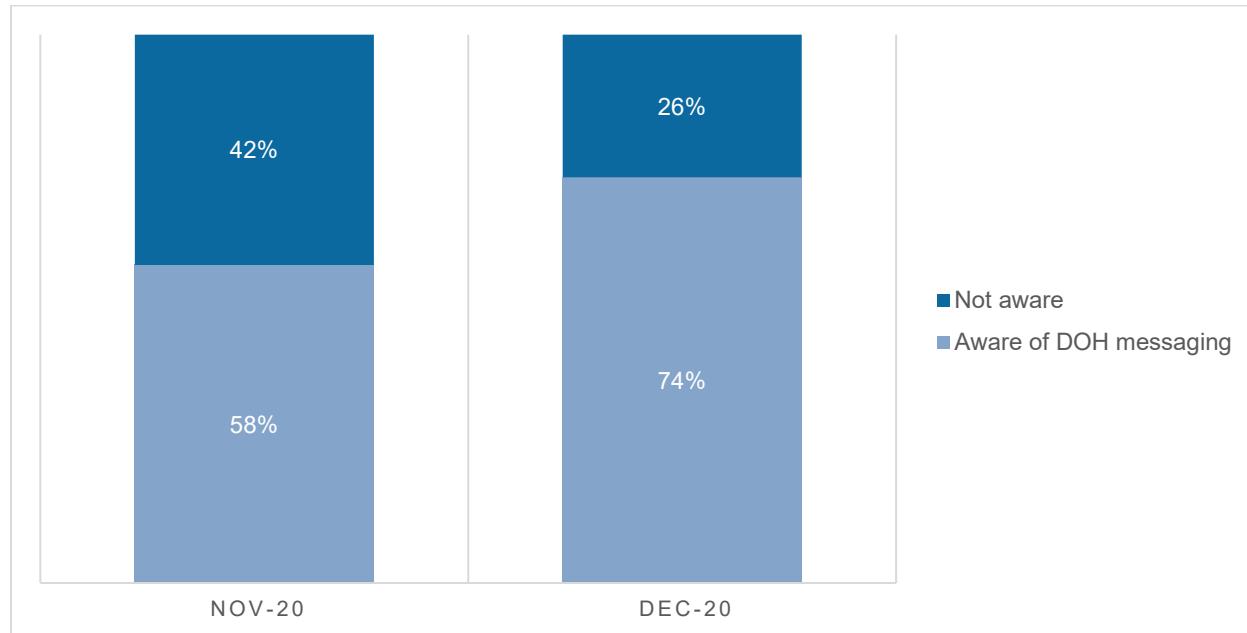
Research respondents were asked if they recall seeing or hearing any messages from the Department of Health about how you might more safely gather at home or in the workplace and still protect yourself and others from COVID-19.



Three in four (74%) Hawaii residents indicate they recall messaging from the State of Hawaii Department of Health that focused on how to more safely gather at home and/or how to navigate the workplace.

- *Seventy-one percent who do not view COVID-19 as a personal health threat were exposed to DOH messaging regarding this topic.*

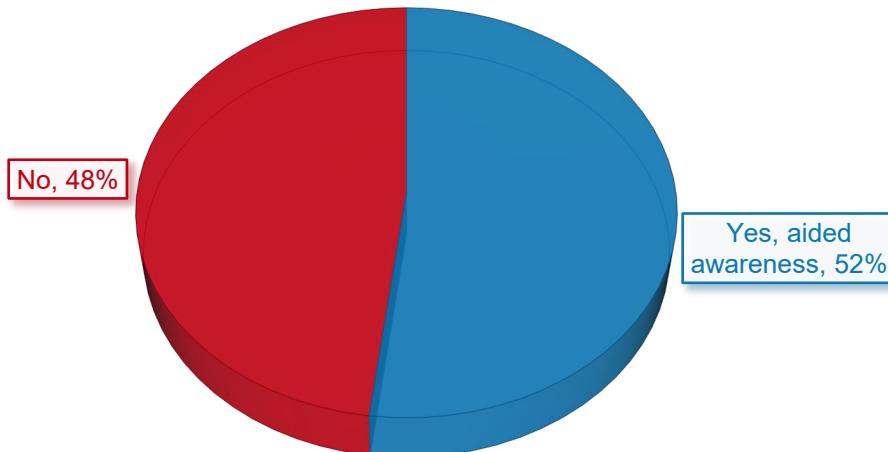
When this number is tracked we note a 16-point increase in exposure to these specific message points when compared to just a month prior.



## SURVIVOR STORIES

Research respondents were then asked if they recall seeing or hearing any messages from the Department of Health regarding COVID-19 survivor stories.

### RECALL SURVIVOR STORY ADS



Half (52%) of those polled recall seeing Department of Health marketing and communications that focused on survivor stories related to COVID-19.

- *Aided awareness of this particular message point is higher among those who reside in more affluent households. For example, among those who reside in a home in the bottom income tier (<\$50K), 44% recalled this message point from DOH. This number rises as respondents become more affluent eventually topping out at 59% amongst those respondents who live in homes with combined incomes that exceed \$100K.*

## DEPARTMENT OF HEALTH BROADCAST ADVERTISING TEST

Each respondent was shown four COVID-19 broadcast spots that were produced by the State of Hawaii Department of Health. They were then asked if they recalled seeing each one prior to taking part in the research.

		AIDED AD AWARENESS
“Ohana”		<b>62%</b>
“Lofa”		<b>52%</b>
“Live with no regrets”		<b>52%</b>
“Office”		<b>50%</b>

“Ohana” had the highest aided advertising awareness at 62%. Each of the other three spots had aided advertising awareness amongst roughly half of those polled.

- “Ohana” had higher aided advertising awareness on the Neighbor Islands (69% vs 59% on Oahu).

- Those who indicated they are currently following all suggested COVID-19 guidelines (68%) were more likely to have seen “Ohana” than were those who are not following all suggested guidelines (52%).
- Aided advertising awareness for “Ohana” increases with age starting at 48% amongst young adults under the age of 35, eventually rising to 84% amongst seniors.
- Amongst the major ethnic groups in the state, Japanese (76%) residents were the most likely to have aided advertising awareness of “Ohana.” As a point of comparison, aided ad awareness for “Ohana” falls to 49% amongst Caucasians.
- Those who view the pandemic more as a health crisis (57%) as opposed to an economic (43%) one have higher aided ad awareness of “Lofa.”
- Aided advertising awareness for “Lofa” is higher among those who are following all suggested guidelines (56%) as compared to those who are not (45%).
- Older segments of the sample were more likely to have seen “Lofa” prior to taking part in the study. Once again, younger segments of the sample were the least likely to have aided advertising awareness while seniors were the most likely to have recall of this spot.
- More educated segments of the sample have higher aided advertising awareness for “Lofa.” Fifty-seven percent of college graduates recalled seeing this spot prior to taking part in the study. Aided ad awareness falls to 45% amongst those without a college degree.
- Locals, born & raised in Hawaii (58%) were more likely to have aided advertising awareness for “Lofa” than were transplants to the state (43%).
- Neighbor Island residents (60% vs 48% Oahu) were significantly more likely to have aided advertising awareness of “Live with no regrets.”
- Those who are following all suggested COVID-19 guidelines (56%) were more likely to have aided advertising awareness of “Live with no regrets” than were those who are not following all guidelines (45%).
- Locals, born & raised in Hawaii (60%) were much more likely to have aided advertising awareness of “Live with no regrets” than were transplants to the state (39%).
- Aided ad awareness for “Office” is higher on the Neighbor Islands (57%) than it is on Oahu (47%).

- Aided ad awareness for “Office” is highest amongst older segments of the sample. For example, amongst young adults under the age of 35, just 35% recalled seeing this spot. Aided advertising awareness increases to 42% amongst those between the ages of 35 and 49, rising further to 59% amongst those between the ages of 50 and 64 and eventually tops out at 67% aided advertising awareness for “Office” amongst seniors.
- For both “Office” and “Ohana,” transplants to the state were significantly less likely to recall seeing either spot compared to locals, born and raised in Hawaii. For example, for “Ohana,” 28% of transplants to the state recalled seeing this spot prior to taking part in the study. Aided ad awareness for “Ohana” rises to 42% among locals, born and raised in Hawaii.

Research respondents were asked to rate each of the four Department of Health broadcast spots after they viewed each one. They were asked to rate each one individually in five specific areas highlighted in the table below. They were instructed to quantify their perceptions using a standard 10-point rating scale with 10 being the spot is very good in that area and one being it is doing a poor job. The table below highlights the mean or average score with the higher the mean score (closer to 10.0) the more positive the perception.

	“Ohana” 	“Lofa” 	“Live with no regrets” 	“Office” 
<b>Overall message</b>	8.23	8.17	8.20	7.92
<b>Kept my attention</b>	8.16	8.02	8.04	7.83
<b>Encouraged me to follow the mandates to wear masks, wipe surfaces, stay six feet apart from others</b>	8.10	7.95	8.00	7.83
<b>Gave me something to think about</b>	7.80	7.95	7.91	7.38
<b>Is an appropriate message for where I am in my life</b>	7.64	7.82	7.83	7.27

The results from this section of the study indicates little differentiation between the four broadcast spots being tested as we can see little to no variation in mean scores. With that being said each of the four spots tests very well among research respondents as evidenced by the fact that the lowest mean scores was a 7.27 out of a possible 10.0.

## OVERALL MESSAGE

When asked to rate each spot's overall message we find "Ohana" receiving the highest score at 8.23 though the results are bunched tightly together showing little differentiation in this area.

	"Ohana" 	"Lofa" 	"Live with no regrets" 	"Office" 
MEAN	8.23	8.17	8.20	7.92
TOP BOX (9-10)	57%	50%	55%	48%
SEGMENTATION HIGHLIGHTS	<ul style="list-style-type: none"> <li>Higher among those who view COVID-19 as personal threat</li> <li>Higher among those following all COVID-19 guidelines</li> <li>Mean scores increase with age</li> </ul>	<ul style="list-style-type: none"> <li>Higher among those who view COVID-19 as a personal threat</li> <li>Higher among those following all COVID-19 guidelines</li> <li>Higher among females</li> <li>Mean scores higher among adults over 50</li> </ul>	<ul style="list-style-type: none"> <li>Higher among those who view COVID-19 as a personal threat</li> <li>Higher among those who are following all COVID-19 guidelines</li> <li>Higher among females</li> <li>Mean scores increase with age</li> </ul>	<ul style="list-style-type: none"> <li>Higher among those who view COVID-19 as a personal threat</li> <li>Higher among those following all COVID-19 guidelines</li> <li>Higher among females</li> </ul>

## KEPT MY ATTENTION

When asked to rate each how effective each broadcast spot was in keeping their attention we find “Ohana” receiving the highest scores at 8.16. Once again, there is little to no differentiation between the four ads being tested in this area.

	“Ohana” 	“Lofa” 	“Live with no regrets” 	“Office” 
MEAN	8.16	8.02	8.04	7.83
TOP BOX (9-10)	53%	47%	52%	51%
SEGMENTATION HIGHLIGHTS	<ul style="list-style-type: none"> <li>• Higher among those who view COVID-19 as personal threat</li> <li>• Higher among those following all COVID-19 guidelines</li> <li>• Higher among females</li> <li>• Higher among those over 50</li> </ul>	<ul style="list-style-type: none"> <li>• Higher among those who view COVID-19 as a personal threat</li> <li>• Higher among those following all COVID-19 guidelines</li> <li>• Higher among females</li> <li>• Mean scores higher among adults over 50</li> </ul>	<ul style="list-style-type: none"> <li>• Higher among those who view COVID-19 as a personal threat</li> <li>• Higher among those who are following all COVID-19 guidelines</li> <li>• Higher among females</li> <li>• Higher among adults over 50</li> </ul>	<ul style="list-style-type: none"> <li>• Higher on the Neighbor Islands</li> <li>• Higher among those who view COVID-19 as a personal threat</li> <li>• Higher among those following all COVID-19 guidelines</li> <li>• Higher among females</li> </ul>

## ENCOURAGED ME TO FOLLOW MANDATES

When asked to rate each how effective each broadcast spot was in encouraging them to follow mandates we find “Ohana” receiving the highest mean score at 8.10. Once again, there is little to no differentiation between the four broadcast spots being tested.

	“Ohana” 	“Lofa” 	“Live with no regrets” 	“Office” 
MEAN	8.10	7.95	8.00	7.83
TOP BOX (9-10)	55%	48%	53%	49%
SEGMENTATION HIGHLIGHTS	<ul style="list-style-type: none"> <li>• Higher among those who view COVID-19 as personal threat</li> <li>• Higher among those following all COVID-19 guidelines</li> <li>• Higher among females</li> <li>• Highest amongst seniors</li> </ul>	<ul style="list-style-type: none"> <li>• Higher among those who view COVID-19 as a personal threat</li> <li>• Higher among those following all COVID-19 guidelines</li> <li>• Higher among females</li> <li>• Higher among those without a college degree</li> </ul>	<ul style="list-style-type: none"> <li>• Higher among those who view COVID-19 as a personal threat</li> <li>• Higher among those who are following all COVID-19 guidelines</li> <li>• Higher among females</li> <li>• Higher among adults over 50</li> </ul>	<ul style="list-style-type: none"> <li>• Higher among those who view COVID-19 as a personal threat</li> <li>• Higher among those following all COVID-19 guidelines</li> <li>• Higher among females</li> <li>• Highest amongst seniors</li> </ul>

## GAVE ME SOMETHING TO THINK ABOUT

When asked to rate each how effective each broadcast spot was in encouraging them to think about the pandemic and its effects we find “Lofa” receiving the highest score at 7.95. When the scores are compared we note little to no difference in how the four ads are perceived in this area.

	“Ohana” 	“Lofa” 	“Live with no regrets” 	“Office” 
MEAN	7.80	7.95	7.91	7.38
TOP BOX (9-10)	49%	48%	51%	42%
SEGMENTATION HIGHLIGHTS	<ul style="list-style-type: none"> <li>• Higher among those who view COVID-19 as personal threat</li> <li>• Higher among those following all COVID-19 guidelines</li> <li>• Higher among females</li> </ul>	<ul style="list-style-type: none"> <li>• Higher among those who view COVID-19 as a personal threat</li> <li>• Higher among those following all COVID-19 guidelines</li> <li>• Higher among females</li> </ul>	<ul style="list-style-type: none"> <li>• Higher among those who view COVID-19 as a personal threat</li> <li>• Higher among those who are following all COVID-19 guidelines</li> <li>• Higher among females</li> <li>• Higher among adults over 50</li> </ul>	<ul style="list-style-type: none"> <li>• Higher among those who view COVID-19 as a personal threat</li> <li>• Higher among those following all COVID-19 guidelines</li> <li>• Higher among females</li> </ul>

## APPROPRIATE MESSAGE FOR WHERE I AM IN MY LIFE

When asked to rate how effective each broadcast spot was an appropriate message for where they are in their lives we find “Live with no regrets” receiving the highest score at 7.83. When compared to the other three ads we note little to no differentiation in perception.

	“Ohana” 	“Lofa” 	“Live with no regrets” 	“Office” 
MEAN	7.64	7.82	7.83	7.27
TOP BOX (9-10)	48%	47%	51%	43%
SEGMENTATION HIGHLIGHTS	<ul style="list-style-type: none"> <li>• Higher among those who view COVID-19 as personal threat</li> <li>• Higher among those following all COVID-19 guidelines</li> <li>• Higher among females</li> </ul>	<ul style="list-style-type: none"> <li>• Higher among those who view COVID-19 as a personal threat</li> <li>• Higher among those following all COVID-19 guidelines</li> <li>• Higher among females</li> </ul>	<ul style="list-style-type: none"> <li>• Higher among those who view COVID-19 as a personal threat</li> <li>• Higher among those who are following all COVID-19 guidelines</li> <li>• Higher among females</li> <li>• Higher among those who live in larger households</li> <li>• Higher among those who live with at least one child</li> </ul>	<ul style="list-style-type: none"> <li>• Higher among those who view COVID-19 as a personal threat</li> <li>• Higher among those following all COVID-19 guidelines</li> <li>• Higher among those living with at least one child</li> </ul>

## OVERALL MESSAGE RECALL - UNAIDED

Next, the ads were grouped into two suites and then research respondents were asked to identify the different message points that each grouping was promoting. The top responses are highlighted below.

“Ohana”	“Office”	“Lofa”	“Live with no regrets”
			
47% Practice social distancing/ 6ft apart		44% Wear a mask	
22% Preference- gather outdoors/ fewer people		24% COVID-19 is deadly/ dangerous/ serious	
22% Stay safe/ healthy		20% Social distancing	
18% Wear a mask		17% Follow suggested guidelines	
14% Follow COVID-19 guidelines		14% Avoid social gatherings/ large groups	
13% Sanitize/ clean surfaces		10% Stay safe/ healthy	
6% Wash hands		10% Anyone can get COVID-19	
		8% Do your part/ consider others	

For the first suite of ads (Ohana/ Office), we find the three primary message points identified by research participants were to practice social distancing, if you do gather do so outdoors and in smaller groups, and to stay safe and healthy.

For the second suite of ads (Lofa/ Live with no regrets) the top three message points were to wear a mask, the seriousness of COVID-19, and to practice social distancing.

## NET DOH EXPOSURE

At the conclusion of this section of the study we measure the total proportion of the sample that the State of Hawaii Department of Health has reached during the pandemic. The way that this net overall reach is computed is by calculating the proportion of surveyed respondents who have been exposed to DOH messaging in the various possible ways highlighted in the table below.

<i>Q14 Do you recall seeing or hearing any messages from the Department of Health about how you might more safely gather at home or in the workplace and still protect yourself and others from COVID-19</i>	<i>Q15 Do you recall seeing or hearing any messages from the Department of Health that told survivor stories?</i>	<i>Aided Awareness “Ohana”</i>	<i>Aided Awareness “Office”</i>	<i>Aided Awareness “Lofa”</i>	<i>Aided Awareness “Live with no regrets”</i>	<i>NET OVERALL REACH</i>
<b>74%</b>	<b>52%</b>	<b>62%</b>	<b>50%</b>	<b>52%</b>	<b>52%</b>	<b>89%</b>

The results show that nearly everyone (89%) polled has at some point during the pandemic been exposed to information being provided by the State of Hawaii Department of Health.

## COMMUNITY SPREAD VS RETURN OF TOURISM

Each respondent was presented with the following:

*"Before this interview, were you aware that the COVID virus is mostly being spread from one Hawaii resident to another and is not being passed to residents by visitors coming to our islands?"*

They were then asked which of the following four options highlighted in the table below best mirrored their own personal opinion regarding this topic.

	TOTAL	Oahu	N.I.	Hawaii County	Maui County	Kauai County
BASE	445	315	130	60	43	27
Yes, aware of this	74%	77%	67%	72%	69%	50%
Did not know but not surprised	13%	12%	14%	11%	15%	20%
Did not know but am surprised	5%	4%	7%	8%	6%	5%
Did not know and not sure I believe it	9%	7%	12%	8%	10%	25%

Three in four (74%) surveyed was aware that most of the community spread is the result of resident behavior and not tourists. Thirteen percent admit they were unaware of this revelation but not surprised with five percent unaware but were surprised to learn this fact. Nine percent were unaware of this and after hearing it are skeptical.

When segmented by area we find that Oahu (77%) respondents were more likely to be aware of the facts contained in this statement, more so than their Neighbor Island (67%) counterparts.

- *Those who indicated they are following all suggested COVID-19 guidelines (78%) were more likely to be aware of the information contained in this section than were those who are not following all suggested guidelines (67%).*
- *Awareness of the information contained in this section increases as respondents become more affluent. For example, among those who live in homes in the bottom income tier (<\$50K), 67% were aware of this information prior to taking part in the study. Aided awareness increases to 72% among those living in homes with combined incomes between \$50K to \$100K, and eventually tops out at 82% among those living in homes with combined incomes that exceed \$100K.*

## VACCINES

### GENERAL PERCEPTIONS

At the outset of this section of the study research respondents were asked which of the following options best mirrors their own personal views regarding vaccines in general. The graphic below highlights the percent results as well as the mean or average score. The higher the mean score (closer to 3.00) the more strongly they favor vaccinations in general.

	TOTAL	Oahu	N.I.	Hawaii County	Maui County	Kauai County
BASE	445	315	130	60	43	27
Generally in favor of vaccines	71%	72%	69%	63%	75%	69%
I favor some, but not all vaccines	24%	23%	27%	34%	19%	27%
Generally opposed to vaccines	5%	5%	4%	3%	6%	3%
MEAN	2.66	2.67	2.64	2.59	2.70	2.66

A majority (71%) of those polled say they are generally in favor of vaccines. One in four (24%) favor some but not all vaccines while just five percent oppose vaccines of all types. When these results are looked at in the aggregate they result in a mean or average score of 2.66 out of a possible 3.00.

- *Those who have been exposed to DOH advertising and/or communications (74% generally favor) generally feel more positively towards vaccines compared to those who were not exposed to marketing and communications from DOH (64% generally favor).*
- *More affluent and educated segments of the sample tend to be more likely to favor vaccines in general. For example, among those with a college degree, 80% say they are generally in favor of vaccines. As a point of comparison, the proportion of residents without a college degree who are generally in favor of all vaccines falls to 60%.*
- *Those who live with a child under 18 in their household (59%) were less likely to be in favor of all vaccines when compared to those who live in homes without child (75%).*

## COVID-19 VACCINE

In this section of the study, Hawaii residents were asked if they will take the coronavirus vaccine when it becomes available to them.

	TOTAL	Oahu	N.I.	Hawaii County	Maui County	Kauai County
BASE	445	315	130	60	43	27
I will get vaccinated as soon as the vaccine is available to me	55%	58%	48%	52%	48%	33%
I will wait for a while before I get vaccinated	36%	33%	45%	37%	47%	59%
NET	91%	91%	93%	89%	95%	92%
I will not get vaccinated against COVID-19	9%	9%	8%	10%	4%	8%
MEAN	2.47	2.50	2.40	2.42	2.44	2.24

A solid majority (91%) appear open to getting the COVID-19 vaccine at some point in time. A little more than half (55%) say they will get vaccinated as soon as they are eligible. Another 36% want to wait a bit before getting vaccinated. Just one in 10 (9%) respondents admit they will not take the vaccine.

- *Those who view the threat of COVID-19 primarily in terms of its economic and financial impact (14% will not get vaccinated) are significantly less likely to get the vaccine compared to those who view COVID-19 as more of a health crisis (5% will not get vaccinated).*
- *Male (60%) respondents were more likely to than females (50%) to say they will get vaccinated as soon as they are eligible while females were more likely to take a more cautious wait and see approach to the vaccine (41% female vs 32% male I will wait for a while before getting vaccinated).*
- *Trust in the vaccine appears to be lower among less affluent and less educated segments of the sample. For example, among those with a college degree, 64% intends to get the vaccine as soon as it become available to them. As a point of comparison, this number drops to 45% among those without a college degree.*
- *The likelihood of getting the vaccine as soon as it becomes available to them is lowest among young adults. Just 35% of those under the age of 35 intends to get the vaccine when it becomes available to them. This number rises to 51% among those between the ages of 35 and 49, rising further to 61% among those between the ages of 50 and 64 and eventually tops out at 78% among seniors.*

- *Those who live in homes with at least one senior were more likely to say they will get the vaccine as soon as it becomes available to them (69% vs 44% no senior in HSE).*

## VACCINE OBSTACLES

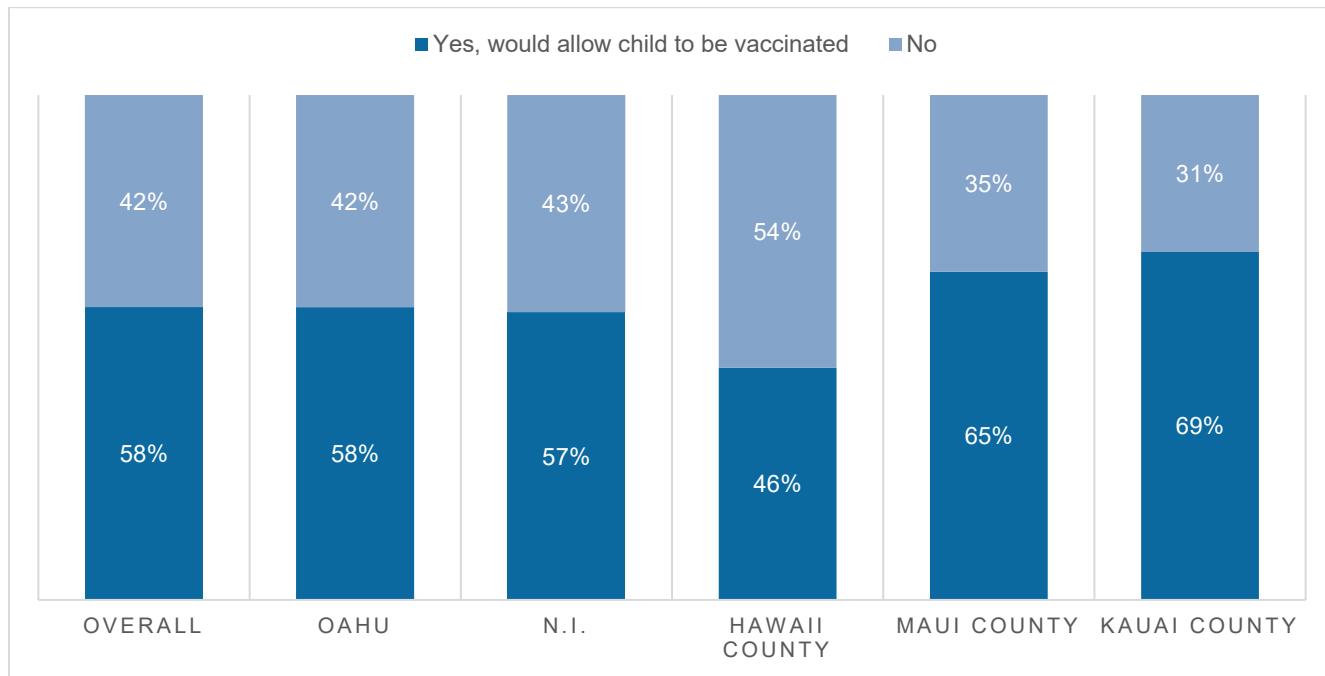
Next, those 195 respondents who indicated they will not take the vaccine or that they will wait before getting vaccinated were asked for their reasoning behind this decision. The top responses given are highlighted in the table below.

	TOTAL n=195
Don't know what the side effects/ long-term effects are	40%
Vaccine was rushed into production	11%
High-risk/ elderly should get it before I do	11%
Taking a wait and see approach	9%
Vaccine has not been tested long enough	7%
Need to be convinced it's safe	7%
Vaccine may not work/ be effective	5%
Not worried about COVID	5%

Two in five (40%) in this subset worry about potential side-effects and/or the unknowns regarding any negative long-term impacts from getting the vaccine. Roughly one in ten are concerned because they feel the vaccine has been rushed through the development and vetting process (11%), while others feel that more high-risk individuals should be vaccinated first (11%), or that they are simply taking a wait and see approach (9%).

## VACCINE ADVOCACY

Regardless of whether or not they intend to take the vaccine themselves, each respondent that lives with at least one child was asked if they would allow the minors in their household to be vaccinated.



Overall, 58% of those who live with a child under the age of 18 say they would allow the minor(s) in their homes to get the COVID-19 vaccine.

- *Males (69%) are more likely to advocate for children in their household getting vaccinated than are females (47%).*
- *The research shows that parents and guardians who are less affluent and less educated were less likely to get their child vaccinated against COVID-19. For example, 57% of those with children who reside in homes in the bottom income tier (<\$50K) say they will not have their child vaccinated. This number drops to just 30% among those parents and guardians who live in homes with combined incomes that exceed \$100K. Similarly, 71% of those who live in homes with at least one child say they will have their child vaccinated. As a point of comparison, this number drops to 47% among those with children who do not have a college degree.*

## VACCINE PERCEPTIONS

In this next section those taking part in the research were presented with seven statements related to the vaccine. In each instance they were asked how strongly they agreed or disagreed with each. They were instructed to quantify their perceptions using a standard four-point rating scale highlighted in the table below. In addition to the percent results a mean or average score was also computed. The higher the mean score (closer to 4.00) the stronger the level of agreement with the statement.

	MEAN	Strongly Agree (4)	Somewhat Agree (3)	Somewhat Disagree (2)	Strongly Disagree (1)	DK/Rf
If my physician says we should have it we will be vaccinated	3.17	41%	32%	10%	8%	9%
The COVID vaccine will be just as safe as the flu vaccine	2.97	24%	38%	12%	7%	18%
I/my family will get this vaccine as soon as it is available	2.95	42%	22%	15%	15%	5%
The COVID vaccine will be very safe by the time it is released <i>in the United States</i>	2.93	23%	45%	12%	8%	12%
I/my family will wait until others have safely been vaccinated with no ill effects	2.62	24%	33%	14%	23%	6%
I feel the development of this vaccine has been rushed and this makes me hesitant to get it or to recommend others get it	2.55	21%	33%	18%	23%	6%
COVID-19 is decreasing in our community so there is really no need to be vaccinated	1.46	3%	6%	21%	62%	8%

The results show that six of the seven statements tested have mean scores above 2.50 signifying net agreement with these statements. The lone exception was the statement declaring that there is no need to vaccinate because COVID-19 is on the decline.

The top statement with the highest level of agreement was that if their physician recommended the vaccine they will get it.

## SEGMENTATION RECAP

In this section we examine statistically significant differences between various segments of the sample based on the level of agreement with each of the message points being tested.

	SIGNIFICANT STATISTICAL DIFFERENCES MEAN SCORES
<b>Neighbor Island residents</b> gave higher mean i scores compared to those on Oahu	<ul style="list-style-type: none"> <li>I feel development of this vaccine has been rushed and this makes me hesitant to get it or to recommend others get it</li> </ul>
<b>Those who view COVID as primarily a health crisis</b> gave higher mean agreement scores compared to those who view the pandemic more in economic and financial terms.	<ul style="list-style-type: none"> <li>The COVID vaccine will be very safe by the time it is released in the United States</li> <li>The COVID vaccine will be just as safe as the flu</li> <li>I/my family will get this vaccine as soon as it is available</li> <li>If my physician says we should have it we will be vaccinated</li> </ul>
<b>Stronger agreement among those who view the pandemic in financial and economic terms</b>	<ul style="list-style-type: none"> <li>I/my family will wait until others have safely been vaccinated with no ill effects</li> <li>I feel development of this vaccine has been rushed and this makes me hesitant to get it or to recommend others to get it</li> <li>COVID-19 is decreasing in our community so there is really no need to be vaccinated</li> </ul>
<b>Those who intend to get the vaccine</b> agree with the following more strongly	<ul style="list-style-type: none"> <li>The COVID vaccine will be very safe by the time it is released in the United States</li> <li>The COVID vaccine will be just as safe as the flu</li> <li>I/my family will get this vaccine as soon as it is available</li> <li>If my physician says we should have it we will be vaccinated</li> </ul>
<b>Stronger agreement among those who do not intend to get vaccinated</b>	<ul style="list-style-type: none"> <li>I feel development of this vaccine has been rushed and this makes me hesitant to get it or to recommend others to get it</li> <li>COVID-19 is decreasing in our community so there is really no need to be vaccinated</li> </ul>
<b>Males</b> gave higher agreement mean scores than females	<ul style="list-style-type: none"> <li>I/my family will get this vaccine as soon as it is available</li> </ul>
<b>More affluent</b> segments of the sample more likely to agree with the following:	<ul style="list-style-type: none"> <li>I/my family will get this vaccine as soon as it is available</li> </ul>
<b>Less affluent</b> segments of the sample were more likely to agree with the following:	<ul style="list-style-type: none"> <li>I/my family will wait until others have safely been vaccinated with no ill effects</li> <li>I feel development of this vaccine has been rushed and this makes me hesitant to get it or to recommend others to get it</li> </ul>
<b>Native Hawaiians</b> were less likely to agree with the following:	<ul style="list-style-type: none"> <li>The COVID vaccine will be very safe by the time it is released in the United States</li> <li>The COVID vaccine will be just as safe as the flu</li> <li>I/my family will get this vaccine as soon as it is available</li> <li>If my physician says we should have it we will be vaccinated</li> </ul>
<b>Younger segments</b> of the sample were the least likely to agree with the following:	<ul style="list-style-type: none"> <li>The COVID vaccine will be very safe by the time it is released in the United States</li> <li>The COVID vaccine will be just as safe as the flu</li> <li>I/my family will get this vaccine as soon as it is available</li> <li>If my physician says we should have it we will be vaccinated</li> </ul>
<b>Younger segments</b> of the sample were more likely to agree with the following:	<ul style="list-style-type: none"> <li>I/my family will wait until others have safely been vaccinated with no ill effects</li> <li>I feel development of this vaccine has been rushed and this makes me hesitant to get it or to recommend others to get it</li> <li>COVID-19 is decreasing in our community so there is really no need to be vaccinated</li> </ul>

<i>Those with a college degree were more likely to agree with the following compared to those without a degree</i>	<ul style="list-style-type: none"> <li>• The COVID vaccine will be very safe by the time it is released in the United States</li> <li>• The COVID vaccine will be just as safe as the flu</li> <li>• I/my family will get this vaccine as soon as it is available</li> <li>• If my physician says we should have it we will be vaccinated</li> </ul>
<i>Stronger sense of agreement among less educated segments or those without a college degree</i>	<ul style="list-style-type: none"> <li>• I/my family will wait until others have safely been vaccinated with no ill effects</li> <li>• I feel development of this vaccine has been rushed and this makes me hesitant to get it or to recommend others to get it</li> <li>• COVID-19 is decreasing in our community so there is really no need to be vaccinated</li> </ul>
<i>Locals, born &amp; raised in Hawaii more likely to agree with statement compared to transplants to the state</i>	<ul style="list-style-type: none"> <li>• I/my family will wait until others have safely been vaccinated with no ill effects</li> <li>• I feel development of this vaccine has been rushed and this makes me hesitant to get it or to recommend others to get it</li> </ul>
<i>Those who live with a child in their household more likely to agree with statement</i>	<ul style="list-style-type: none"> <li>• I/my family will wait until others have safely been vaccinated with no ill effects</li> <li>• I feel development of this vaccine has been rushed and this makes me hesitant to get it or to recommend others to get it</li> <li>• COVID-19 is decreasing in our community so there is really no need to be vaccinated</li> </ul>
<i>Stronger sense of agreement among those that live in homes without any children</i>	<ul style="list-style-type: none"> <li>• I/my family will get this vaccine as soon as it is available</li> </ul>

The table below tracks the mean scores from the benchmark. These results indicate positive trending as far as the vaccine is concerned among Hawaii residents.

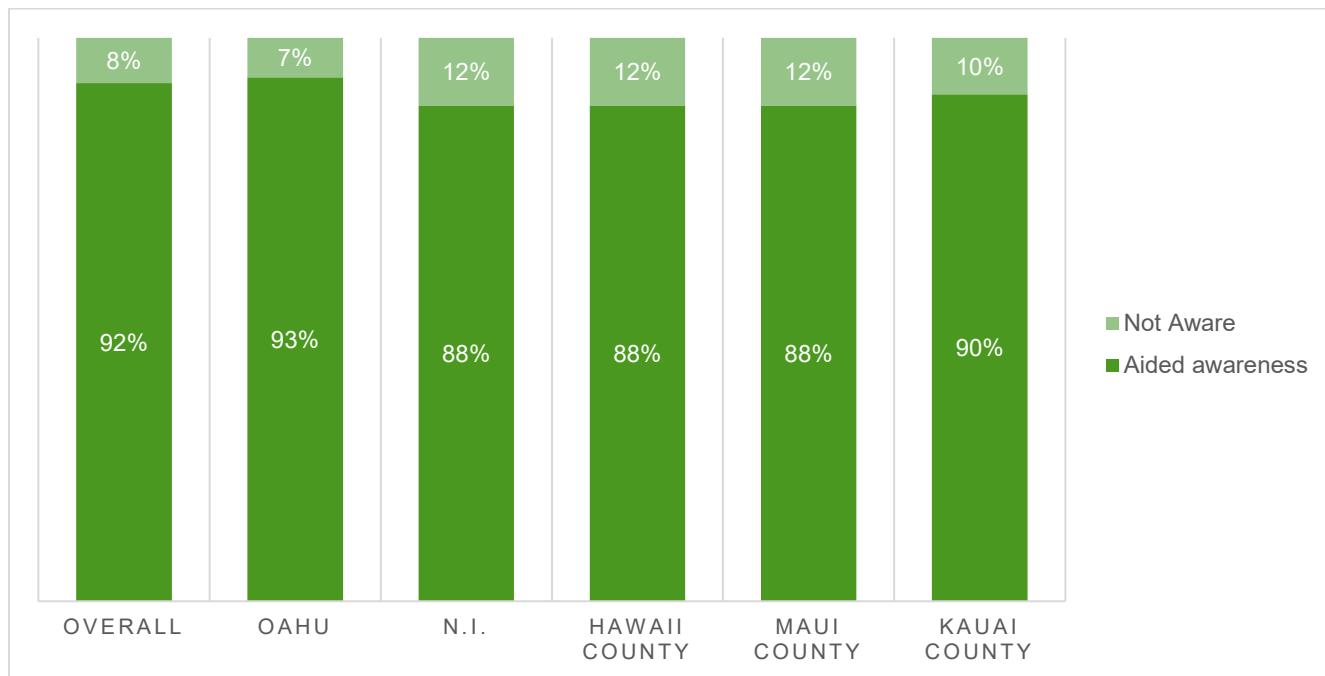
	NOV-20	DEC-20	CHANGE
If my physician says we should have it we will be vaccinated	3.07	3.17	▲
I/my family will wait until others have safely been vaccinated with no ill effects	2.97	2.62	▼
I feel the development of this vaccine has been rushed and this makes me hesitant to get it or to recommend others get it	2.90	2.55	▼
The COVID vaccine will be just as safe as the flu vaccine	2.70	2.97	▲
The COVID vaccine will be very safe by the time it is released in the U.S.	2.68	2.93	▲
I/my family will get this vaccine as soon as it is available	2.68	2.95	▲
COVID-19 is decreasing in our community so there is really no need to be vaccinated	1.69	1.46	▼

## VACCINE DISTRIBUTION

At the outset of this section of the study each respondent was presented with the following:

*When the vaccine is available in Hawaii, because of the limited supply, priorities will need to be set for the order in which our residents can receive it. The first groups of people to be vaccinated will be health care workers, first responders and then our kupuna who live in congregate settings*

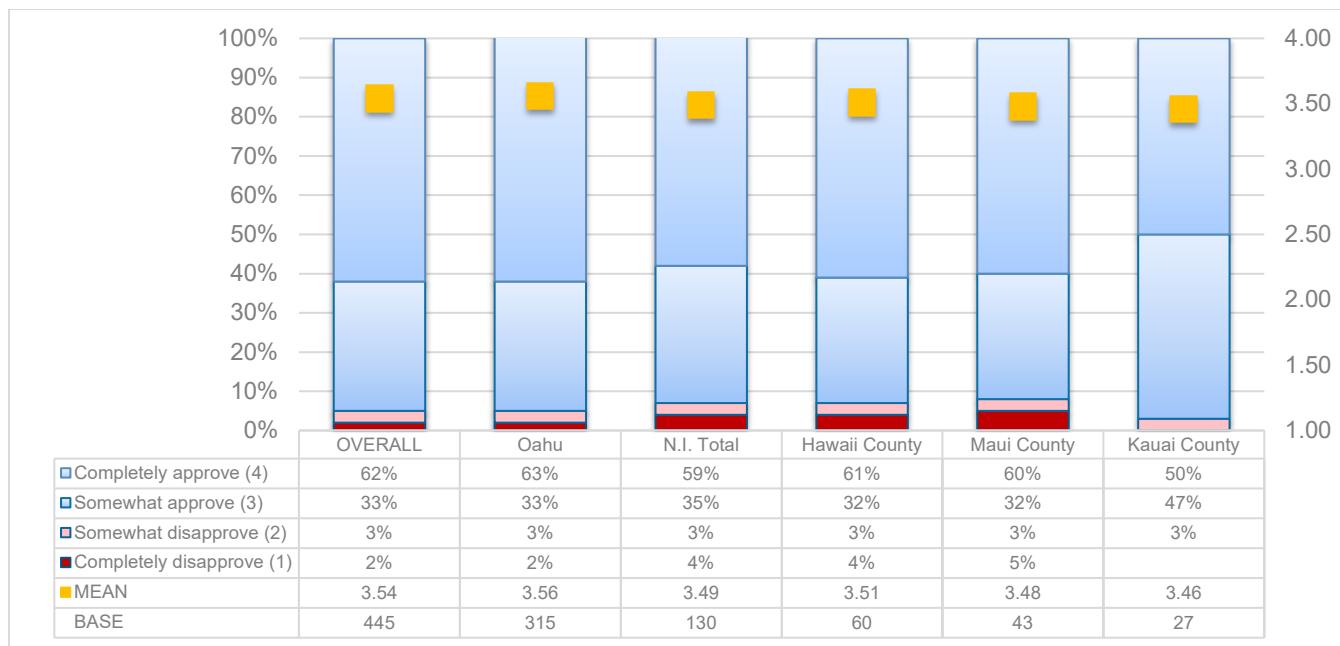
They were then asked if they were aware of this prior to taking part in the study.



A solid majority (92%) were aware of the information presented in this section of the study.

- *Aided awareness of the vaccine rollout is higher among more affluent and educated segments of the sample. For example, 81% of those surveyed that live in homes in the bottom income tier (<\$50K) was aware of the information presented above. As a point of comparison, aided awareness increases to 97% among those who live in homes with combined incomes that exceed \$100K.*

Next, research respondents were asked for their thoughts regarding this distribution plan. They were instructed to quantify their perceptions using a standard four-point rating scale highlighted in the table below. In addition to the percent results a mean or average score was also computed. The higher the mean score the stronger the level of approval.



A majority (62%) of those polled completely approves of the vaccine distribution plan as described in this section. A third (33%) somewhat approves while just five percent express any reservations. When these results are looked at in the aggregate they result in a mean or average score of 3.54 out of a possible 4.00.

- Those who indicate a willingness to get vaccinated react more favorably to this plan. Sixty-four percent completely approves of what they read while 33% somewhat approves of what they understand to be the plan.*
- Approval of the plan is higher among more educated and affluent respondents. Sixty-seven percent with a college degree completely approves of the plan that was described to them. By comparison, among those without a college degree, 55% completely approves.*
- General approval of the vaccine distribution plan tends to improve as respondents get older, eventually topping out amongst seniors.*

## VACCINE INFLUENCERS – MEDICAL PROFESSIONALS

At the outset of this section of the study research respondents were asked what influence, if any, does the fact that local doctors and nurses have started receiving the COVID-19 vaccine. The table below highlights the percent results as well as the mean or average score. The higher the mean score (closer to 3.00) the more positive the impact.

	TOTAL	Oahu	N.I.	Hawaii County	Maui County	Kauai County
BASE	445	315	130	60	43	27
Makes me more comfortable (3)	41%	42%	37%	44%	29%	36%
Makes me somewhat more comfortable (2)	33%	33%	35%	32%	42%	28%
Does not affect my comfort level (1)	26%	25%	28%	23%	30%	37%
MEAN	2.14	2.17	2.09	2.21	1.99	1.99

Promoting the ongoing vaccination of health care professionals like doctors and nurses has a net positive effect on Hawaii residents. Two in five (41%) indicate that knowing these individuals are already being vaccinated makes them feel more comfortable about getting the vaccine themselves. A third (33%) of those polled indicate this makes them somewhat more comfortable about the vaccine. Of the remainder, 26% feel knowing this has no influence on them.

- *The ongoing vaccination of doctors and nurses has little effect on those who say they will not get the vaccine. Among this subset of the sample, eight percent feel this makes them feel more comfortable about getting the vaccine while another five percent say knowing this makes them feel somewhat more comfortable. The remaining 87% say this has no impact on their decision-making process.*

## VACCINE INFLUENCERS – OTHER

In this next section of the study we test the impact that different members of the community may have in helping to reinforce the idea that as many people as possible need to get vaccinated. The table below highlights the percent results as well as the mean or average score. The higher the mean score (closer to 3.00) the more influence each segment has on the general public.

	Local community leaders	Government officials	Health department leaders
BASE	445	445	445
A lot more confidence (3)	29%	28%	37%
Somewhat more confident (2)	28%	28%	26%
Does not affect my confidence level (1)	43%	44%	37%
MEAN	1.86	1.83	2.00

The results show that all three groups have a net positive effect on resident perceptions. For example each of the three segments received a mean score above 1.50 out of a possible 3.00 signifying a generally positive impact.

As far as health department officials are concerned, knowing or seeing evidence that these individuals are being vaccinated against COVID-19 would make 37% of those polled a lot more confident in getting the vaccine themselves. Another 26% would feel somewhat more confident while the remaining 37% believe this information would have no impact on them. Combined these scores result in a mean average of 2.00 out of a possible 3.00 the highest among the three segments tested.

Overall, 29% would feel a lot more confident knowing local community leaders were being vaccinated while 28% would feel a lot more confident knowing that government officials are being vaccinated.

- *Seeing local community leaders and government officials get vaccinated has a greater impact on those who live with at least one child in their homes compared to those who do not live with a child. For example, knowing that government officials were getting vaccinated, 47% of those who do not live with a child indicate that this would have no impact on their thinking. As a point of comparison, this number shrinks to 36% among those who live with children.*

All three groups have fairly minimal effects on those who have no intention of taking the vaccine. For example, 11% who say they will not get vaccinated indicate that knowing health department leaders were vaccinated would make them feel a lot more confident about the vaccine.

## EMPLOYMENT

Each respondent was asked if they were employed outside of their homes prior to the COVID-19 outbreak.

	FILTER: <65	OVERALL	OAHU	N.I.
YES, employed outside of my home	75%	66%	69%	59%
NO, not employed outside of home	25%	34%	31%	41%

Overall, 66% of those polled indicate they were employed outside of their homes prior to the start of the COVID-19 outbreak. When the results are filtered to include only those respondents under the age of 65, this outside employment figure rises to 75%.

These individuals were then asked to choose from a list of options the one that best described their current employment situation. The top responses (5%+) are highlighted below.

	TOTAL n=290
No change in employment	37%
Laid off or furloughed – not employed	17%
Working from home for my employer – full employment	11%
Laid off or furloughed – but called back	10%
Laid off or furloughed – found other employment	6%

## HOUSEHOLD PROFILE

Research respondents were asked to identify the number of individuals in their households.

	April	May-June	August	November	December
One person	16%	19%	14%	17%	22%
Two persons	39%	43%	37%	36%	34%
Three or more	45%	38%	48%	47%	44%
MEAN	2.80	2.60	3.02	2.80	2.72

The typical respondent resides in a home comprised of 2.72 individuals. Twenty-two percent live alone while 34% live in homes containing two individuals. Almost half (44%) live in homes of three or more persons.

## CHILD IN HOUSEHOLD UNDER 18

Research respondents were asked to identify the number of individuals in their households under the age of 18.

	April	May-June	August	November	December
Yes, household contains child	28%	25%	28%	27%	24%
No one under 18	72%	75%	72%	73%	76%

The research shows that households polled containing at least one child continues to remain fairly consistent with 24% in the current study being identified as having at least one child.

## PROFILE OF RESPONDENTS

	APRIL	MAY-JUNE	AUGUST	November	December
SENIOR 60+ IN HOUSEHOLD	56%	56%	38%	52%	45%
YEARS IN HAWAII					
Born and Raised	62%	57%	58%	60%	61%
Transplant	38%	43%	42%	40%	39%
AGE					
18-34	21%	19%	20%	24%	28%
35-49	24%	22%	27%	25%	23%
50-64	27%	26%	31%	26%	28%
65+	28%	32%	22%	26%	21%
MEAN	51.00	52.50	49.93	49.73	47.90
ETHNICITY					
Caucasian	28%	28%	28%	29%	29%
Japanese	28%	28%	28%	28%	28%
Hawaiian	18%	18%	18%	19%	19%
Filipino	13%	13%	13%	12%	12%
Other	11%	11%	12%	11%	11%
EDUCATION					
Less than H.S.	2%	1%	2%	2%	1%
H.S. graduate	10%	11%	15%	14%	15%
Some college	30%	29%	27%	30%	31%
College graduate	33%	39%	34%	36%	34%
Post-graduate degree	24%	20%	20%	17%	20%
HOUSEHOLD INCOME					
<\$50K	22%	27%	22%	28%	26%
\$50K-\$100K	36%	35%	33%	33%	37%
\$100K+	35%	31%	34%	29%	31%
GENDER					
Male	50%	44%	50%	42%	50%
Female	50%	56%	50%	58%	50%

**APPENDIX/ QRE**

Hello, I'm \_\_\_\_\_ from Anthology Research, a market research company based here in Hawaii and we're conducting a study today/this evening for the Hawaii State Department of Health about the COVID-19 outbreak in our state. May I speak to someone 18 years of age or older who lives in this household?

We are not trying to sell or promote any product or service. This is market research only and we are only interested in understanding your opinions and knowledge.

**PROVIDE INFORMATION HERE ABOUT WHO TO CONTACT (and a telephone number) FOR ANY QUESTIONS ABOUT VALIDITY****(VERIFY IF PERSON IS 18 YEARS OLD OR OLDER. IF NO ONE AVAILABLE, TERMINATE)**

A. Are you a resident of Hawaii (lives in the state at least 6 months out of the year)?

- 1 Yes
- 2 No (**TERMINATE**)

B. On what island do you reside?

- 1 Oahu
- 2 Hawaii Island
- 3 Maui
- 4 Kauai
- 5 Lanai or Molokai
- 6 Prefer not to answer (**TERMINATE**)

**CHECK QUOTAS AND CONTINUE IF NEEDED**

C. (**IF OAHU**) Which of the following best describes where you live?

- 1 Metropolitan Honolulu
- 2 East Honolulu
- 3 Windward Oahu / North Shore
- 4 Central Oahu
- 5 West Oahu

D. (**IF HAWAII**) Which of the following best describes where you live?

- 1 East Hawaii/ Hilo
- 2 West Hawaii/ Kona

1. Overall, when thinking about COVID-19 (sometimes referred to as coronavirus), which do you worry about more at this time, the financial effect on you and your family or the potential health effects if you or others were to contract the coronavirus?
  - 1 Financial effects on myself, my family and household
  - 2 The potential health effects if I or someone in my family were to contract the coronavirus
2. Compared to how you felt in March and April of this year, are you more concerned, at the same level of concern or less concerned now about Covid-19 as a health threat than you were at that time?
  1. Are more concerned
  2. Feel the same level of concern
  3. Am less concerned
3. Overall, would you rate this illness as a being a very serious and urgent health concern in Hawaii, a serious but not urgent health concern, a concern but not serious or urgent or is it not a concern at all?
  1. A serious and urgent health concern
  2. A serious but not urgent health concern
  3. A concern but not serious or urgent
  4. Not a concern at all
4. As a result of what you have seen or heard, do you think COVID-19 poses a real danger or threat to you personally?
  1. Yes (**CONTINUE**)
  2. No (**GO TO Q4b**)
- 4a. (**IF YES IN Q4**) What is the danger to you, what do you worry about? (**DEVELOP CODE LIST**)
  1. I might get the disease
  2. I have other health conditions and the virus might worsen my health
  3. I have to find childcare for my children
  4. I might lose my job
  5. I can't see my family (inside or outside of Hawaii)
  6. Other (specify \_\_\_\_\_)
  7. Passing the disease to others
  8. Financial impacts to myself and the community

- 4b. (**IF NO IN Q4**) Why do you feel it is not a danger to you?
1. I am healthy and I don't think I will get sick
  2. I am young so not in danger like older people are
  3. I don't go outside my home much at this point in my life anyway
  4. I live alone
  5. Other (specify \_\_\_\_\_)
  6. We follow the CDC guidelines (e.g., social distancing, washing hands, wearing masks)
  7. Do not believe the virus is as serious/ deadly as it is being portrayed
  8. I am immune/already had Covid/ I am immunized

5. In the last 6 months, how often, if at all, have you experienced any of the following?

		All of the time	Often	Once in a while	Not at all
1	Anxiety	1	2	3	4
2	Depression	1	2	3	4
3	Loneliness	1	2	3	4
4	Panic attack	1	2	3	4
5	Overall mental stress	1	2	3	4

**(IF EXPERIENCING ANY OF THE ABOVE AT ANY LEVEL[Q5])**

- 5a. Did you have any of these conditions before the pandemic?
1. Yes
  2. No

**(IF YES TO Q5a)**

- 5b. Has your mental health improved, remained the same or gotten worse since the pandemic?
1. Has improved
  2. Has remained the same
  3. Has gotten worse since the pandemic

**(IF YES TO Q5a)**

- 5c. What, if anything, have you done to address this mental health issue? (**Select all that apply**)
- 1 Saw a therapist
  - 2 Took medication
  - 3 Talked to a friend or family member Called or texted Hawaii CARES (Hawaii Coordinated Access Resource Entry System) or other helpline
  - 4 Other (please specify \_\_\_\_\_ )
  - 5 Done nothing
  - 6 Self-help - meditation, exercise, hobbies
- 5d. Before this survey, had you heard of Hawaii CARES (Hawaii Coordinated Access Resource Entry System)?

- 1. Yes
  - 2. No
  - 3. Not sure
9. Are you aware that Hawaii CARES offers crisis support, mental health resources, substance use treatment services and help with isolation and quarantine?
- 1. Yes
  - 2. No
  - 3. Not sure
- 9a. How likely would you be to contact them if you were in need of services?
- 1. Very likely
  - 2. Somewhat likely
  - 3. Not likely

**NOTE: IF YOU OR SOMEONE YOU KNOW NEEDS HELP, HERE IS THEIR CONTACT INFORMATION**

FYI, Hawaii CARES is formerly the Crisis Line of Hawaii- call 1 800-753-6879 or text ALOHA to 741741. They are available 24 hours a day, seven days a week.

10. Please answer yes or no to each of the following...

	Yes	No	Don't know
1 Have you been tested for the COVID-19 virus?	1	2	3
2 Has anyone else living in your household been tested for COVID-19?	1	2	3
3 Do you personally know someone (including yourself or someone else) who has tested positive for COVID-19?	1	2	3
4 Do you personally know someone (including yourself or someone else) who has been hospitalized with COVID-19?	1	2	3

11. Overall, which of the following best describes how well you are adhering to the government/Department of Health requests and mandates?
- 1. I believe I am following ALL of the guidelines/mandates that are applicable to me
  - 2. I believe I am doing MOST of the things being asked of Hawaii residents
  - 3. I am picking and choosing those things I am willing to do
  - 4. I am not really paying attention to or following the guidelines and mandates

- 11a. **(IF SELECTED CODE 2, 3 OR 4 ABOVE, ASK)** Why aren't you following all of the guidelines and mandates all of the time? **(SELECT ALL THAT APPLY)**
1. Too much trouble
  2. I am healthy and I don't think I will get sick
  3. I am young so not in danger like older people are
  4. I work in a position where I cannot follow the guidelines (health care worker, first responder, etc.)
  5. Too confusing, not really clear on what I should be doing
  6. Not sure what is most important to do
  7. Things have improved (fewer people are getting sick) so I don't need to be as careful
  8. There will be a vaccine available to me soon so I don't need to worry as much
  9. Other (specify \_\_\_\_\_)
  10. I do what I want/ guidelines are too strict
  11. I try to but can't follow all the guidelines all the time
  12. Sometimes I forget
  13. Do not believe the virus is as serious/ deadly as it is being portrayed
12. In what settings do you find it difficult to wear a mask or practice social distancing? Please be as specific as you can.

13. Before the COVID-19 virus hit Hawaii, were you employed and working for an employer outside of your home?
1. Yes (**CONTINUE**)
  2. No (**GO TO Q14**)
- 13a. **(IF SAID YES in Q13, ASK)** At this time, which of the following best describes your personal situation...? **(ONE ANSWER ONLY)**
1. No changes in my employment of any kind
  2. I was laid off or furloughed and am currently not employed.
  3. I was laid off or furloughed but am now back working for the same employer at a place of business
  4. I was laid off or furloughed but I have found other employment
  5. I was working from home but am now back at my employer's place of business
  6. I am currently working from home for my employer with reduced hours

- 7 I am currently working from home for my employer with full employment
- 8 Other arrangement (specify \_\_\_\_\_)
- 9 Working but a reduced pay or hours
- 10 I quit my job to reduce exposure to covid for myself or family
- 11 Retired

14. Do you recall seeing or hearing any messages from the Department of Health about how you might more safely gather at home or in the workplace and still protect yourself and others from COVID-19?
- 1. Yes
  - 2. No
15. Do you recall seeing or hearing any messages from the Department of Health that told survivor stories?
- 1. Yes
  - 2.
  - 3. No

**IN THIS NEXT SECTION, THERE ARE TWO - TWO AD SETS (AD SET 1 – SURVIVORS AND ROTATE AD SET 2 – COVID RULES) ROTATE AD SETS**

Please view two recent ads and then answer a couple of questions about them...

1. Now that you had seen this ad, do remember seeing it before this survey?
- 1. Yes
  - 2. No
2. How would you rate this ad on each of the following? Use a scale of one to ten with 10 being very good and one being very poor.
- 1 Overall rating of this message
  - 2 Kept my attention
  - 3 Encouraged me to follow the mandates to wear masks, wipe surfaces, stay six feet from others
  - 4 Gave me something to think about
  - 5 Is an appropriate message for where I am in my life

**REPEAT ABOVE FOR SECOND AD SET**

**(ASK THIS QUESTION FOR EACH AD SET)**

16. What is the overall message being delivered to Hawaii residents in these two ads? What are they telling you? **(RECORD VERBATIM)**

Now a couple of questions on related but different topics...

17. Before this interview, were you aware that the COVID virus is mostly being spread from one Hawaii resident to another and is not being passed to residents by visitors coming to our islands?
- 1 Yes, aware of this
  - 2 Did not know this but not surprised
  - 3 Did not know this and am surprised to learn this
  - 4 Did not know this and not sure I believe it
18. Think next about your feelings about inoculations/ vaccines in general.... Are you generally in favor or opposed to vaccinations for yourself and your family, including any children you might have?
- 1 Generally in favor of vaccines
  - 2 I favor some, but not all vaccines
  - 3 Generally opposed to vaccines
19. It is expected that a vaccine effective against coronavirus might be available to Hawaii residents very soon. Which of the following best describes your thinking concerning this vaccine?
- 1 I will get vaccinated as soon as the vaccine is available to me
  - 2 I will wait for a while before I get vaccinated
  - 3 I will not get vaccinated against COVID-19
- 19a. **(IF SAID 2 OR 3 IN Q19)** Why don't you plan to get the COVID vaccine as soon as it is available to you? What worries or fears do you have about getting it? **(OPEN END)**

20. And how about any children living in your household, will you have them vaccinated against coronavirus?

1. Yes
2. No
3. There are no children 17 or younger in my household

### **ASK EVERYONE**

21. Overall how do you feel about the COVID vaccination? Do you agree or disagree with the following statements?

	Strongly agree	Somewhat agree	Somewhat disagree	Strongly disagree
1	The COVID vaccine will be very safe by the time it is released in the United States			
2	The COVID vaccine will be just as safe as the flu vaccine			
3	I/my family will get this vaccine as soon as it is available			
4	I/my family will wait until others have safely been vaccinated with no ill effects			
5	If my physician says we should have it we will be vaccinated			
6	I feel development of this vaccine has been rushed and this makes me hesitant to get it or to recommend others get it			
7	COVID-19 is decreasing in our community so there is really no need to be vaccinated			

22. Does knowing that our doctors and nurses have started receiving vaccinations make you more comfortable about getting vaccinated yourself?

1. Makes me a lot more comfortable
2. Makes me somewhat more comfortable
3. Does not affect my comfort level

23. If you knew that each of the following were also being vaccinated against COVID, would you have more confidence in getting vaccinated yourself? Would knowing that each of the following were being vaccinated give you...?

	A lot more confidence	Some more confidence	Would not change level of confidence
1	Local community leaders	1	2
2	Government officials	1	2
3	Health department leaders	1	2

24. When the vaccine is available in Hawaii, because of the limited supply, priorities will need to be set for the order in which our residents can receive it. The first groups of people to be vaccinated will be health care workers, first responders and then our kupuna who live in congregate settings. Prior to this interview, were you aware of this?

1. Yes
2. No

25. How do you feel about this plan, do you completely approve of this plan, somewhat approve, somewhat disapprove or completely disapprove of this distribution plan?

- 1 Completely approve
- 2 Somewhat approve
- 3 Somewhat disapprove
- 4 Completely disapprove

And now to ensure we have a good cross section of Hawaii residents participating in this study, we have a few last questions for classification purposes...

D1. Including yourself, how many persons live in your household? [Record] \_\_\_\_\_

D2. How many, if any, are 17 years of age or younger? [Record] \_\_\_\_\_

D3. And how many, if any, are 60 years of age or older? [Record] \_\_\_\_\_

D4. What was your age on your last birthday? [Record age] \_\_\_\_\_

D5. What was the highest level of schooling you completed?

- 1 Less than high school graduate
- 2 High school graduate
- 3 Some college
- 4 College graduate (bachelor's degree)
- 5 Post graduate and beyond
- 6 Refused

D6. Were you born in Hawaii?

- 1 Yes
- 2 No

D7. What is your ethnic identification?

**(IF ANY PART HAWAIIAN, SELECT HAWAIIAN/PART-HAWAIIAN)**

**(IF MORE THAN ONE BUT NOT HAWAIIAN, SELECT THE ONE WITH WHICH YOU IDENTIFY THE MOST - IF CAN'T CHOOSE, CHOOSE MIXED)**

- 1 Caucasian
- 2 Japanese
- 3 Chinese
- 4 Filipino
- 5 Hawaiian/Part-Hawaiian
- 6 African American
- 7 Other (specify: \_\_\_\_\_)
- 8 Mixed (no Hawaiian)

D8. Following are listed some broad categories of income – please indicate which category includes your annual household's total income for 2019. Please consider and include in your thinking the income of all persons living in your household as well as income from all sources including investments, retirement funds, etc.

- 1      Less than \$25,000
- 2      \$25,000 but less than \$50,000
- 3      \$50,000 but less than \$75,000
- 4      \$75,000 but less than \$100,000
- 5      \$100,000 to \$150,000
- 6      \$150,000 or more
- 7      [DON'T KNOW/REFUSED]

D9. Gender

- 1      Male
- 2      Female

THANK YOU SO MUCH FOR TAKING PART IN THIS SURVEY. WE APPRECIATE YOUR HELP.