In light of the sudden arrival of the novel coronavirus, and as part of our mission to collect and leverage sound health data to inform or evaluate policy decisions for states and federal organizations, the State Health Access Data Assistance Center (SHADAC) created a survey to determine the impacts of the coronavirus pandemic on health issues including stress levels and resulting coping mechanisms and responses.

The SHADAC COVID-19 survey was conducted as part of the AmeriSpeak omnibus survey conducted by NORC at the University of Chicago.

The survey was conducted using a mix of phone and online modes from April 24 and 26, 2020, among a nationally representative sample of 1,007 respondents age 18 and older.

Acknowledgement: We appreciate contributions to the survey by Sarah Gollust of the University of Minnesota School of Public Health and Brendan Saloner of the Johns Hopkins University Bloomberg School of Public Health.
STRESS AND COPING RESPONSES
While the percent of establishments offering coverage increased from 45.3% to 46.9% between 2016 and 2017 (not shown), there were no significant changes in the percent of employee offer, employee eligibility, or employee take-up.

Only one state (South Carolina) saw a change in the percent of eligible employees enrolled in ESI between 2016 and 2017, where the percent of eligible employees increased from 73.8% to 80.3%.

Offer, eligibility, and take-up rates continued to vary by state in 2017:

i. Employee offer rates ranged from 92.3% in the District of Columbia to 69.5% in Wyoming.

ii. The percent of employees eligible for ESI at offering establishments varied from a high of 82.3% in Alabama to a low of 71.1% in Vermont.

iii. The percent of ESI-eligible employees who enrolled (take-up rate) ranged from a high of 80.3% in South Carolina down to 66.0% in New Mexico.

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**Percent of U.S. Adults who Reported Changes in Stress due to COVID and Resulting Levels of Coping Responses**

- **Addtional stress 90.4%**
- **No additional stress 9.6%**
- **No coping response 16.6%**
- **One or more coping responses 73.8%**

**Source:** SHADAC analysis of the SHADAC COVID-19 Survey, April 24-26, 2020.
Percent of U.S. Adults who Reported Utilizing a Coping Mechanism in Response to COVID-related Stress

- Talking more with friends/family: 40.5%
- Increased social media use: 30.3%
- Eating more: 30.2%
- Eating more unhealthy foods: 25.0%
- Exercising less: 22.9%
- Exercising more: 19.2%
- Increased alcohol use: 15.4%
- Increased smoking or vaping: 7.9%

Percent of U.S. Adults who Reported No Additional COVID-related Stress by Political Affiliation

- Total: 9.6%
- Independent: 10.0%
- Democrat: 7.5%
- Republican: 11.5%

*Statistically significant difference from the Total category at a 95% confidence level.

COPING RESPONSES: EATING MORE
COPING RESPONSES: EATING MORE

Percent of U.S. Adults who Reported Eating More and/or Eating More Unhealthy Foods, due to COVID by Age

<table>
<thead>
<tr>
<th>Age Group</th>
<th>% Reporting Eating More</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total</td>
<td>48.2%</td>
</tr>
<tr>
<td>18-29</td>
<td>43.6%</td>
</tr>
<tr>
<td>30-49</td>
<td>38.2%</td>
</tr>
<tr>
<td>50-64</td>
<td>33.6%</td>
</tr>
<tr>
<td>65+</td>
<td>27.1%*</td>
</tr>
</tbody>
</table>

*Statistically significant difference from the Total category at a 95% confidence level.

Percent of U.S. Adults who Reported Eating More and/or Eating More Unhealthy Foods, due to COVID by Gender

*Statistically significant difference from the Total category at a 95% confidence level.

Percent of U.S. Adults who Reported Eating More and/or Eating More Unhealthy Foods due to COVID by Race/Ethnicity

- Total: 38.2%
- Non-White: 41.1%
- White: 36.5%

*Statistically significant difference from the Total category at a 95% confidence level.

COPING RESPONSES: EATING MORE

Percent of U.S. Adults who Reported Eating More and/or Eating More Unhealthy Foods due to COVID by Health Status

- **Total**: 38.2%
- **Excellent, very good, or good**: 35.2%
- **Fair or poor**: 50.3%

*Statistically significant difference from the Total category at a 95% confidence level.

**Source:** SHADAC analysis of the SHADAC COVID-19 Survey, April 24-26, 2020.
COPING RESPONSES: DRINKING MORE
Percent of U.S. Adults who Reported Increased Alcohol Consumption due to COVID by Age

*Statistically significant difference from the Total category at a 95% confidence level.

COPING RESPONSES: DRINKING MORE

Percent of U.S. Adults who Reported Increased Alcohol Consumption due to COVID by Gender

*Statistically significant difference from the Total category at a 95% confidence level.

COPING RESPONSES: DRINKING MORE

Percent of U.S. Adults who Reported Increased Alcohol Consumption due to COVID by Race/Ethnicity

*Statistically significant difference from the Total category at a 95% confidence level.
Percent of U.S. Adults who Reported Increased Alcohol Consumption due to COVID by Health Status

- Total: 15.4%
- Excellent, very good, or good: 15.0%
- Fair or poor: 17.2%

*Statistically significant difference from the Total category at a 95% confidence level.

Percent of U.S. Adults who Reported Increased Alcohol Consumption due to COVID by Education Level

- 15.4% Total
- 13.9% High school graduate or GED
- 16.3% Some college
- 16.3% Bachelor's degree or higher

*Statistically significant difference from the Total category at a 95% confidence level.

COPING RESPONSES: DRINKING MORE

Percent of U.S. Adults who Reported Increased Alcohol Consumption due to COVID by Political Affiliation

*Statistically significant difference from the Total category at a 95% confidence level.

COPING RESPONSES: SMOKING/VAPING MORE
COPING RESPONSES: SMOKING/VAPING MORE

Percent of U.S. Adults who Reported Increased Smoking/Vaping Use due to COVID by Race/Ethnicity

*Statistically significant difference from the Total category at a 95% confidence level.

Percent of U.S. Adults who Reported Increased Smoking/Vaping Use due to COVID by Health Status

- Total: 7.9%
- Excellent, very good, or good: 5.8%
- Fair or poor: 16.1%

*Statistically significant difference from the Total category at a 95% confidence level.

COPING RESPONSES: SMOKING/VAPING MORE

Percent of U.S. Adults who Reported Increased Smoking/Vaping Use due to COVID by Education Level

- Total: 7.9%
- High school graduate or GED: 11.9%
- Some college: 6.0%
- Bachelor's degree or higher: 5.3%*

*Statistically significant difference from the Total category at a 95% confidence level.

COPING RESPONSES: TALKING MORE WITH FRIENDS/FAMILY
Percent of U.S. Adults who Reported Talking More with Friends and Family due to COVID by Age

*Statistically significant difference from the Total category at a 95% confidence level.

COPING RESPONSES: TALKING MORE

Percent of U.S. Adults who Reported Talking More with Friends and Family due to COVID by Gender

<table>
<thead>
<tr>
<th></th>
<th>Total</th>
<th>Male</th>
<th>Female</th>
</tr>
</thead>
<tbody>
<tr>
<td>Talking More</td>
<td>40.5%</td>
<td>33.6%*</td>
<td>46.9%*</td>
</tr>
</tbody>
</table>

*Statistically significant difference from the Total category at a 95% confidence level.

COPING RESPONSES: TALKING MORE

Percent of U.S. Adults who Reported Talking More with Friends and Family due to COVID by Health Status

- **40.4%** in the Total category
- **43.2%*** in the Excellent, very good, or good category
- **29.5%*** in the Fair or poor category

*Statistically significant difference from the Total category at a 95% confidence level.

**Source:** SHADAC analysis of the SHADAC COVID-19 Survey, April 24-26, 2020.
COPING RESPONSES: EXERCISING MORE
Percent of U.S. Adults who Reported Exercising More due to COVID by Age

*Statistically significant difference from the Total category at a 95% confidence level.

Percent of U.S. Adults who Reported Exercising More due to COVID by Gender

*Statistically significant difference from the Total category at a 95% confidence level.

COPING RESPONSES: EXERCISING MORE

Percent of U.S. Adults who Reported Exercising More due to COVID by Health Status

*Statistically significant difference from the Total category at a 95% confidence level.

COPING RESPONSES: EXERCISING MORE

Percent of U.S. Adults who Reported Exercising More due to COVID by Education Level

- Total: 19.2%
- High school graduate or GED: 12.5%
- Some college: 17.5%
- Bachelor's degree or higher: 27.6%

*Statistically significant difference from the Total category at a 95% confidence level.

COPING RESPONSES: EXERCISING MORE

Percent of U.S. Adults who Reported Changing Exercising Frequency due to COVID by Political Affiliation

- Total: 41.8%
- Independent: 39.3%
- Democrat: 48.0%
- Republican: 34.8%

*Statistically significant difference from the Total category at a 95% confidence level.

COPING RESPONSES: CHANGING SOCIAL MEDIA USE
COPING RESPONSES: CHANGING SOCIAL MEDIA USE

Percent of U.S. Adults who Reported Changing Social Media Use (Increase/Decrease) due to COVID by Age

0.0% 10.0% 20.0% 30.0% 40.0% 50.0%

Total 18-29 30-49 50-64 65+

35.8% 47.2% 36.7% 32.8% 28.4%*

*Statistically significant difference from the Total category at a 95% confidence level.

Percent of U.S. Adults who Reported Changing Social Media Use (Increase/Decrease) due to COVID by Gender

- Total: 35.8%
- Male: 28.3%
- Female: 42.8%

*Statistically significant difference from the Total category at a 95% confidence level.

Percent of U.S. Adults who Reported Changing Social Media Use (Increase/Decrease) due to COVID by Health Status

- Total: 35.7%
- Excellent, very good, or good: 32.6%
- Fair or poor: 47.9%*

*Statistically significant difference from the Total category at a 95% confidence level.

Percent of U.S. Adults who Reported Changing Social Media Use due to COVID by Education Level

- **Total:** 35.8%
- **High school graduate or GED:** 33.6%
- **Some college:** 37.1%
- **Bachelor’s degree or higher:** 36.9%

*Statistically significant difference from the Total category at a 95% confidence level.

**Source:** SHADAC analysis of the SHADAC COVID-19 Survey, April 24-26, 2020.
For more detail on the results from the SHADAC COVID-19 survey, conducted as part of the NORC AmeriSpeak omnibus survey, SHADAC has produced two issue briefs highlighting important findings.

The first brief covers topics relating to loss of health insurance coverage and delayed medical care due to cost.

The second brief covers topics relating to increased stress and resultant coping responses.
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