CENTER for RETIREMENT RESEARCH at BOSTON COLLEGE

EXPERIENCES, BEHAVIORS, AND ATTITUDES ABOUT COVID-19 FOR PEOPLE WITH DISABILITIES OVER TIME

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Abstract

This paper examines high-frequency patterns that occur in the experiences with, behaviors during, and attitudes toward COVID-19 among people with disabilities since the pandemic began. It also examines the timing and predictors of plans to apply for Social Security benefits as a result of the pandemic. It uses biweekly and monthly data from the Understanding Coronavirus in America survey of the *Understanding America Study* and from the *Household Pulse Survey*. All analyses are descriptive.

The paper highlights the following findings:

- People with and without disabilities held largely similar beliefs about safety related to COVID-19, such as the perceived safety of attending large gatherings and the effectiveness of wearing masks. However, people with disabilities engaged in behavior consistent with decreasing the risk of infection for longer periods during the pandemic relative to people without disabilities.
- People with disabilities reported different levels of economic benefit receipt throughout the pandemic. They were more likely to report receiving economic stimulus funds and were less likely to report applying for or (if employed) receiving unemployment insurance early in the pandemic compared with people without disabilities.
- People with disabilities reported higher levels of uncertainty, especially when assessing plans for receiving the COVID vaccine.
- Respondents reported that COVID-19 impacted recent applications and plans to apply for Social Security Administration (SSA) programs including Old-Age and Survivors Insurance, Social Security Disability Insurance (SSDI), or Supplemental Security Income benefits. Controlling for other covariates, respondents who noted that COVID-19 impacted their plans were more likely to have applied for or planned to apply for these benefits. Those who recently applied to SSDI were more likely to report that COVID influenced their decision to apply earlier, rather than later, on average.

The policy implications of the findings are as follows:

- During future public health emergencies, people with disabilities and others who engaged in protective behaviors longer through the pandemic might benefit from supports, such as dedicated grocery store hours or stimulus payments, for longer periods of time.
- Rapid research and knowledge sharing focused on people with disabilities could encourage safe returns to pre-pandemic activities.
- If respondents' self-reported plans come to fruition, SSA might observe an increase in applications to various programs after 2020 due in part to the pandemic and might anticipate more increases after future public health emergencies.

Introduction

Evidence from early in the COVID-19 pandemic suggests that people with disabilities experienced worse health, financial, and work impacts than people without disabilities (Brown et al. 2022; Gleason et al. 2021; Jesus et al. 2021; Landes et al. 2022; Shenk et al. 2022; Yuan et al. 2022). Yet, because the pandemic varied in intensity over time and across geographies, its effects might not have been felt evenly across groups—such as people with or without disabilities, certain age groups, and people with other shared characteristics. Examining trends over time might help uncover new evidence about the pandemic's effect on people with disabilities, including their plans to apply for Social Security Administration (SSA) benefits.

Our study is meant to inform SSA's understanding of how behaviors, perceptions, and the work- and benefits-related impacts of the COVID-19 pandemic have evolved over time for people with disabilities and shed light on the potential future demand for SSA programs. This study addresses the following questions:

- What are the trends over time in the pandemic's impact on people with disabilities' experiences with COVID-19, economic well-being, and health?
- What are the predictors of recent applications and plans to apply for SSA benefits as a result of the pandemic?

We found that people with disabilities continued to engage in protective behaviors later in the pandemic and had higher perceived chances of infection, hospitalization, and death due to COVID-19 throughout the pandemic. We also found differences in economic experiences between people with and without disabilities. Finally, people reporting that COVID-19 affected their decisions to apply for benefits and had a positive association with recent applications and plans to apply for SSA programs including Old-Age and Survivor's Insurance (OASI), Social Security Disability Insurance (SSDI), or Supplemental Security Income (SSI) benefits.

Background

The COVID-19 pandemic's intensity and effects have varied over time, with uneven consequences across demographic groups and geography. COVID-19 cases have spiked in different regions of the United States through multiple waves and variants (Frey 2021). The first

year of the pandemic disproportionately impacted older adults as well as racial and ethnic minorities and those with disabilities (Boserup et al. 2020; Garcia et al. 2021; Gold et al. 2020; Shenk et al. 2022). In addition to being at greater risk for hospitalization and mortality, workers ages 65 and older experienced steeper declines in employment than younger workers during the first year of the pandemic (Bui et al. 2020; Goda et al. 2023; Jacobson et al. 2020). However, during the second year of the pandemic, as COVID-19 vaccinations became widely available, mortality rates dropped for Hispanic, Black, American Indian, and Alaska Native populations and adults 80 years or older, while mortality rates increased for White populations and younger adults (Elo et al. 2022; Lundberg et al. 2022).

Existing evidence suggests that people with disabilities were particularly susceptible to negative impacts of COVID-19. People with disabilities or compromised immune systems faced heightened challenges and concerns due to limited information early in the pandemic about the potential side effects of COVID, its vaccines, and long COVID. Lund and Ayers (2022) explore these and other challenges in their conceptualization of four "waves" of disability discrimination in the United States, including (1) disruptions to health care; (2) barriers to accommodations, resources, and supplies; (3) vaccine access; and (4) long COVID and its connection to disability. For example, in the early weeks and months of the pandemic, people with disabilities, in particular, were particularly affected by transportation challenges and service disruptions that could have had health implications (Cochran 2020; Schwartz et al. 2021). However, despite recent calls to increase attention on disability (Lund et al. 2020; Reed et al. 2020), evidence about the effects of the COVID-19 pandemic on people with disabilities remains relatively sparse and focused on narrow subpopulations or outcome domains.

People with disabilities had high comorbidity patterns with COVID-19, particularly in the first year of the pandemic, and many studies show this pattern extended into the second year. In 2020, COVID-19 hospital patients with disabilities were more likely to have longer hospital stays and a higher readmission risk, compared with people without disabilities (Brown et al. 2022). Similarly, beneficiaries whose disability made them eligible for Medicare had higher COVID-19 hospitalization rates through November 2021 than those who were eligible for Medicare only based on age (Yuan et al. 2022). Older adults with disabilities were more likely than older adults without disabilities to report delaying many types of health care, such as surgeries and prescriptions, during the first year of the pandemic (Shenk et al. 2022). Those with

an intellectual or developmental disability such as cerebral palsy or Down syndrome were at particular risk for COVID-19 in 2020, with higher rates of COVID-related mortality compared with those without an intellectual or developmental disability, even after controlling for age (Landes et al. 2022). Intellectual disability was the strongest risk factor for COVID-19 diagnosis through November 2020, and other than age was the most important predictor of COVID-19 mortality, compared with race, ethnicity, sex, and comorbidities, such as diabetes and obesity (Gleason et al. 2021).

People with disabilities faced barriers to COVID-19 vaccinations and, in some cases, additional concerns about the vaccine. Although evidence suggests that rates of vaccine hesitancy were similar for people with and without disabilities, people with paralysis had particular concerns about negative side effects (including mortality) and efficacy (Forber-Pratt et al. 2022). Myers et al. (2022) suggest that although vaccine hesitancy as measured in February 2021 was not as high among people with disabilities compared with people without disabilities, it was high for certain subgroups, such as women, rural residents, and younger adults with disabilities. Between May and June of 2021, adults with disabilities were less likely to report being vaccinated despite being less likely to report vaccine hesitation (Ryerson et al. 2021). They reported difficulties including lack of accessible appointment systems, lack of transportation, and lack of knowledge about vaccination sites (Ryerson et al. 2021; Lund and Ayers 2022).

People with disabilities were more likely to suffer negative financial consequences due to lockdowns in the early months of the pandemic (Jesus et al. 2021). Early in the pandemic, many people with disabilities became unemployed: their employment rate fell sharply (by about 15 percent) between February and April 2020 (Houtenville et al. 2021). Although people with disabilities had a lower employment rate than those without disabilities before the pandemic, they were more likely to become unemployed than people without disabilities (Jashinsky et al. 2021). However, although employment rates dropped more quickly among people with disabilities than among those without disabilities, many remained in the labor force, and employment rates gradually recovered between 2020 and 2022 (Goda et al. 2022; Houtenville et al. 2021; Ne'eman and Maestas 2023). And, although remote options can make work more accessible to workers with disabilities, and more people with disabilities worked remotely before the pandemic than those without disabilities, in the first year of the pandemic, fewer people with

disabilities worked remotely than those without disabilities (Ameri et al. 2022; Gaffney et al. 2021). Many employers have since established policies to return remote teleworkers to the office, and rates by disability status of working remotely because of the pandemic converged in 2022 (Ameri et al. 2022; Lund and Ayers 2022). Less is known about the pandemic's impacts on the economic security of people with disabilities over time.

Although evidence suggests the pandemic had immediate negative effects on employment, there is limited evidence about the pandemic's longer-term impacts on retirement, the onset of disability, and implications for SSA program participation (Pohl and Mann 2022). For example, although more older workers became unemployed than younger workers, retirement rates have increased only for workers ages 70 or older (Quinby et al. 2021). Although many exited the labor force to claim disability benefits early in 2020, this trend slowed by June 2020. However, SSDI claims remained elevated through March 2022 (Goda et al. 2022). Emerging evidence suggests that burdensome health symptoms persist for a nontrivial share of patients who survive COVID-19, including ongoing functional limitations and reports of new disabilities (Al-Aly et al. 2021; Hodgson et al. 2021). Emerging statistics also suggest that people with disabilities are more likely than those without disabilities to experience long COVID. Although the duration of long- COVID is unknown, persistent health effects paired with the exhaustion of social benefit expansions might impact people's plans to apply for SSA benefits.

Although some effects of the COVID-19 pandemic have become clearer since 2020, less is known about how those effects have evolved over time. Throughout the pandemic, uncertainty about social mitigation strategies also varied by time, geography, and population (Richtel 2021). In particular, there is little evidence about the pandemic's effects on people with disabilities and how their beliefs and behaviors changed over time.

We sought to fill the gaps in knowledge about COVID-19 and disability using appropriate data that accounts for the dynamic nature of COVID-19 impacts. We compared trends over time in personal experiences, work and financial security, and COVID-related measures of economic security between adults with and without disabilities. We then examined the COVID-19 pandemic's impact on decisions to apply for SSA benefits. This evidence might shed light on the potential future demand for SSA programs.

Data

We used two complementary data sources for this study: the Understanding America Study (UAS) and the *Household Pulse Survey* (HPS).

Understanding America Study

The UAS is a nationally representative panel of households in the United States and includes surveys that collect data on topics including demographics, health and retirement, consumer behavior, education, employment, and lifestyle and beliefs. For this analysis, we used Waves 2–29 of the UAS's Understanding Coronavirus in America survey, which tracked changes in behaviors and beliefs about COVID-19 between April 2020 and July 2021. Waves 2–24 were administered every other week, and Waves 25–29 were administered monthly. Our final sample included 5,978 participants who responded to at least one wave of the UAS's COVID survey.

Respondents were asked to self-report their behavior and attitudes throughout the pandemic. They selected what types of behaviors they exhibited in the past seven days, and what types of behaviors they avoided in the past seven days. Respondents were asked whether they agreed or disagreed with statements regarding the safety of certain activities during the pandemic and perceptions of those with COVID-19. They estimated their risk of COVID-related complications, and the number of close friends and family members who had COVID-related complications or received the vaccine. Respondents were also asked about their work and financial security, including whether they received economic benefits from the government in the past 14 days or in the past month. They also estimated their perceived risk of losing their job, running out of money, and being evicted.

The UAS survey has a number of advantages, including its broad swath of COVID-related questions that are consistent across data waves. In addition, the UAS is a high-frequency panel survey (one or two surveys per month), meaning that this data source consistently and regularly tracks changes in COVID-related outcomes for the same group of respondents across time. Attrition was relatively low[1] and weights are available to account for sample attrition and selection. Despite these advantages, the UAS has a limited sample size, which makes complex analyses challenging. In addition, we suspected the SSA-related disability status questions might be subject to data quality issues and therefore could not be used confidently.

[1] More information on response rates and attrition can be found here: https://uasdata.usc.edu/index.php

Household Pulse Survey

Given the UAS's limited sample size, we used the HPS to benchmark our analysis. The HPS is a cross-sectional survey administered by the U.S. Census Bureau that collects data on how COVID-19 impacted households. The survey is administered in phases. Within a given phase, the survey is administered approximately weekly. For this analysis, we used Phases 1, 2, 3, 3.1, 3.2, 3.3, and 3.4 of the HPS, which correspond to the first 45 weeks of the survey and took place between April 2020 and May 2022. Although this survey is intended to be cross-sectional, approximately 175,000 participants were surveyed more than once during the initial phase of the survey. We used only the latest response for each of these participants. Our final sample included 3,314,406 participants who responded to the HPS; in each week of the survey, the number of respondents varied between 20,000 and 110,000.

HPS respondents and UAS respondents were asked similar questions related to COVID-19 behaviors and attitudes. HPS respondents were also asked whether COVID-19 affected their plans to apply for SSA benefits, and if so, whether they applied earlier, later, or not at all. In addition, respondents selected which types of SSA benefits they either applied for recently or were planning to apply for.

Although the HPS has a large sample size, it has a number of limitations. The biggest challenge is that the survey is cross-sectional, so it does not track the same respondents over time. In addition, it asks a limited number of COVID-related questions, and those questions change over time. Similar to the UAS, an analysis of the disability measures in the HPS led us to suspect some issues with data quality. These challenges make it difficult to compare responses over time.

Comparability Across Data Sources

To leverage the relative advantages of the two data sources, we first examined and ensured comparability across the two data sources across the timing of the surveys, question definitions, and sample selection. Appendix Table 1 displays the overlap in timing of the two data sources across all relevant waves of data. We conducted a detailed comparison of a selection of outcomes in the HPS to the outcomes in the UAS, as we describe in the Methods and Results sections.

Definitions of Disability

The UAS measures disability by asking respondents to select their applicable labor status categories. If the respondent selected "disabled" alone or along with another response option, we coded them in that data wave as having a disability. We then carried forward the selected disability status for waves in which the respondent did not participate in the survey or participated but did not answer this question.

The HPS also uses labor status to measure disability. Respondents were first asked whether they are working for pay. If they selected no, they were asked to select their main reason for not working. We coded respondents who selected "I am/was sick (not coronavirus related) or disabled" as having a disability. Respondents were not able to indicate that they were disabled if they were working; thus, our analysis includes people who were working and had an unmeasured disability in the not disabled group.

There were 40 respondents in the UAS who changed their self-reports of disability. Although we were interested in changes in reported disability status over time, there was no pattern of change in disability status; some respondents switched from disabled to not disabled, some switched from not disabled to disabled, and some switched back and forth more than once. While we acknowledge that transitions into and out of disability can and do occur, a careful analyses of these data led us to conclude that these patterns were likely to represent measurement errors resulting from self-reporting, and that we could not interpret these patterns in a meaningful manner. Appendix Table 2 describes the differences in demographic characteristics between the switchers and the remaining respondents.

Other Measures and Covariates

We used similar demographic measures from the UAS and *HPS* for descriptive statistics. The respondents' ages were provided directly in the UAS data, and we calculated ages from the HPS data using the respondents' birth years and survey dates. The UAS asked respondents whether they were male or female, while the HPS had additional categories for people who identified as transgender or did not choose any of the gender options. Because our sample size was limited, we omitted categories other than male and female. One data source sometimes had more detailed demographic information than the other; for the comparison, we collapsed categories of household income, labor status, and marital status to match across data sources.

Although race categories were more detailed in the UAS than in the *HPS*, we left them as is and omitted the "other" category from the *HPS* data when conducting our analysis. The UAS asked respondents how many people other than themselves live in their household, while the *HPS* asked how many people live in their household overall. We added one to the UAS responses to make them comparable to the *HPS*. Both the UAS and HPS asked respondents whether they are Hispanic. Only the UAS asked respondents whether they were born in the United States and whether they have a number of specific health conditions.

In our analyses that used only *HPS* data, we included as covariates age and gender as described, as well as race, whether respondents were Hispanic, level of education, marital status, reason for not working, and household income, as these measures were originally coded in the *HPS*. We also included the reason for not working for people who were not employed, which we collapsed into fewer categories (see Table 1). Two covariates changed across time: (1) unemployment insurance and (2) stimulus payments. In Phase 2 and 3, respondents were asked whether they received unemployment insurance since March 13, 2020, and whether they had used a stimulus payment to meet their spending needs in the last seven days. In later phases, they were asked whether they received unemployment insurance since January 1, 2021, and whether they received a stimulus payment in the last seven days.

Methods

We first compared the baseline demographic information of the UAS sample by disability status using t-tests for binary and continuous outcomes and Chi-squared tests for categorical outcomes. We then repeated this process for our HPS sample so we could compare the characteristics of the two samples.

Estimating Time Trends in the Impacts of the Pandemic

To measure trends in pandemic impacts, we first tabulated the responses to each categorical outcome of interest to determine what share of the respondents chose each categorical response option. We then dichotomized the response options so that one represented a response of "yes" or "agree," and zero represented a response of "no" or "disagree." We produced longitudinal descriptive statistics from the UAS COVID survey summarizing and comparing outcomes for people with a disability with those without a disability from April 2020

to July 2021. To achieve this objective, we estimated logistic regression models for each wave of the survey. We weighted these models using wave-specific respondent-level weights provided by the UAS and included age, gender, and race and ethnicity as covariates. We then used the means of the outcomes for those with and without a disability in a given wave to create line graphs of outcomes over time. Our equation uses the following specification:

$$\log(y)_i = \alpha + \beta_1 d_i + \beta_2 s_i + \varepsilon_i,$$

where, for person i, y_i = COVID-related outcomes for person i, d_i denotes the disability status of person i, and s_i represents a vector of individual-level covariates that include age, gender, and race and ethnicity. For our continuous outcomes, we estimated linear regression models rather than logistic regression models but used the same weights and covariates. As a sensitivity analysis, we estimated the same regression models and logistic regression models for Waves 12 (August 2020), 25 (February 2021), and 29 (June 2021), but added the covariates of age, sex, race and ethnicity, and marital status (see Appendix Table 3).

Ensuring Comparability Across Data Sources

We compared distributions for the variables that were similar across the UAS and HPS. We created "ever" indicators for applying for unemployment insurance since the start of the pandemic, being diagnosed with COVID, and receiving the COVID vaccine, and we set those indicators equal to 1 if a respondent said "yes" to these questions in any data wave in the UAS or any week of the HPS.[2] We also created point-in-time indicators for very early, early, middle, and late UAS and HPS time periods; we set the indicator equal to 1 if a respondent said "yes" in a given UAS data wave that we could match to a week (or to weeks) of the HPS based on survey timing, or vice versa. These indicators and timing are detailed in Appendix Tables 4 and 5. We estimated logistic regression models that compared outcomes for people with a disability with those without a disability for our HPS sample, following the same model specification used in the UAS and described earlier. These models were weighted using week-specific respondent-level weights provided by the HPS. We compared the results from the UAS with the results from the HPS.

[2] In the UAS, this indicator reflected multiple data waves per person. Because the Household Pulse Survey is cross-sectional, each respondent was asked these questions only once.

These benchmarks ensure our estimates from the UAS analysis are robust and document findings that might have low precision because of the sample size.

Estimating Timing and Predictors of Plans to Apply

We then focused our analysis on respondents' plans to apply to SSA programs in the HPS because of sample size restrictions in the UAS. The HPS asks about respondents' recent applications or plans to apply to SSA programs including OASI, SSDI, and SSI. We use the three phases of HPS data in which plans to apply were assessed: Phase 2, Phase 3, and Phase 3.1. These phases provide three, nationally representative cross-sectional assessments of current applications and future plans to apply from August 2020 to July 2021. We assessed three programs separately (OASI, SSDI, and SSI) and modeled respondents in two groups: (1) those who applied or attempted to apply recently and (2) those who had not yet applied but indicated they were likely to apply in the future. In Phases 2 and 3, recent applications were assessed by responses to a survey question that asked whether respondents applied or attempted to apply for Social Security benefits (Retirement, Disability, or Survivors benefits), SSI benefits, or Medicare benefits after March 13, 2020. In Phase 3.1, the survey question asked whether respondents applied or attempted to apply since January 1, 2021. If they had applied, they were asked to select which programs they had applied to. If they had not yet applied, they were asked how likely they were to apply in the next 12 months (Phases 2 and 3) or during 2021 (Phase 3.1). Those who said they were extremely likely, very likely, or somewhat likely to apply were then asked which programs they were likely to apply to.

This approach resulted in six outcomes of interest: (1) whether an respondent applied to OASI; (2) whether a respondent applied to SSDI; (3) whether a respondent applied to SSI; (4) whether a respondent indicated they were likely to apply to OASI in the near future; (5) whether a respondent indicated they were likely to apply to SSDI in the near future; and (6) whether a respondent indicated they were likely to apply to SSI in the near future.

For each of these six outcomes, we estimated a weighted logit model. Our primary explanatory variable of interest was whether COVID-19 had affected a respondents' decision to apply. There were four possible responses: (1) COVID-19 did not affect their decision to apply; (2) COVID-19 led them to not apply; (3) COVID-19 led them to apply or plan to apply earlier than expected; (4) COVID-19 led them to apply or plan to apply later than expected. This

question was not assessed for those already receiving benefits. Therefore, the primary explanatory variable of interest was relevant for those who have recently applied or state they are likely to apply. For ease of interpretation, we dichotomized these responses, meaning we coded responses indicating COVID-19 impacted their plans to apply in any way as one, and coded those that stated that COVID-19 did not impact their plans to apply as zero.[3] We controlled for demographic characteristics, labor market status, whether they received unemployment insurance, and whether they received a stimulus payment, and we excluded respondents that were missing any of these demographic measures. Our equation uses the following specification:

$$\log(y)_i = \alpha + \beta_1 c_i + \beta_2 d_i + \beta_3 l_i + \beta_4 u_i + \beta_5 s_i + \varepsilon_i,$$

where, for person i, y_i = SSA outcomes for person i (applied or likely to apply to OASI, SSDI, or SSI), c_i denotes whether the decision to apply for SSA benefits was impacted by COVID-19 for person i, l_i denotes the labor market status and thus disability status for person i, u_i denotes whether person i received unemployment insurance, s_i denotes whether person i received a stimulus check, and d_i represents a vector of individual-level covariates that include age, gender, race, education, marital status, and income. We then repeated this process first using data from Phase 2 and then using data from the last five weeks of Phase 3. These models are descriptive and are not intended to be causal.

In addition to these logistic models, we also created six subsamples based on our outcomes of interest: (1) those who applied for OASI, (2) those who applied for SSDI, (3) those who applied for SSI, (4) those who were likely to apply for OASI, (5) those who were likely to apply for SSDI, and (6) those who were likely to apply for SSI. Individual respondents could fall into multiple subsamples if they applied or planned to apply for multiple SSA programs. We summarized demographic information for each subsample[4] using weighted regression models for continuous demographic measures and weighted logit regression models for binary demographic

[3] We also ran models using data from Phase 3.1, leaving a four-categorical response; model results were similar. Results are available upon request.
[4] We report results for data from Phase 3.1 for the sake of streamlining results. Descriptive statistics from Phase 2 and Phase 3 are very similar and available upon request.

measures. We used a t-test to compare those who decided to apply for benefits earlier because of COVID-19 with those who decided to apply for benefits later because of COVID-19.

Results

Sample Characteristics

We compared the characteristics of people with and without disabilities in the UAS and HPS. About 9 percent of respondents in the UAS had a disability, compared with about 2 percent participating in the HPS (Table 1). Some of these differences might be due to different definitions of disability (respondents in the UAS can be employed and disabled and in the HPS respondents can only self-report being disabled if they are not working).[5] Across both surveys, those with disabilities were more likely to be older, living in households with fewer members, female, Black, and divorced or never married, and to have less than a bachelor's degree. The HPS respondents' household income and education levels were higher than those of the UAS respondents.

[5] Of all UAS respondents, 6.8 percent reported being disabled and also not working.

Table 1. *Baseline Demographic Information for Understanding America Survey (UAS) Respondents Versus Household Pulse Survey Respondents*

	UAS					HH Pulse				
	Whole sample	With disability	Without disability	p-value	Significance	Whole sample	With disability	Without disability	p-value	Significance
Mean										
Age	51.0	55.3	50.5	0.00	***	51.7	53.0	51.7	0.00	***
Number of household members	2.7	2.4	2.7	0.00	***	2.8	2.6	2.8	0.00	***
Percentage of sample										
Gender				0.01	##				0.00	###
Male	41.3	36.1	41.8	0.01	**	40.3	29.7	40.6	0.00	***
Female	58.7	63.9	58.2	0.01	**	59.4	69.7	59.1	0.00	***
Race				0.00	###				0.00	###
White	82.4	76.3	83.0	0.00	***	82.0	78.4	82.2	0.00	***
Black	8.9	14.5	8.3	0.00	***	8.1	12.1	7.9	0.00	***
Asian	2.8	0.4	3.0	0.00	***	5.1	2.1	5.1	0.00	***
American Indian/Alaska Native	0.9	1.3	0.9	0.30						
Hawaiian/Pacific Islander	0.4	0.9	0.3	0.02	**					
Mixed	4.6	6.6	4.4	0.02	**					
Hispanic	7.5	4.9	7.8	0.01	**	9.3	9.6	9.1	0.00	***
Born in the United States	93.0	95.9	92.7	0.01	***					
Level of education				0.00	###				0.00	###
Less than high school	0.8	2.1	0.6	0.00	***	0.7	1.7	0.6	0.00	***
Some high school	4.2	14.6	3.2	0.00	***	1.5	3.9	1.4	0.00	***
High school or equivalent	17.5	26.6	16.6	0.00	***	11.8	21.7	11.4	0.00	***
Some college	22.1	28.3	21.4	0.00	***	21.5	32.7	21.2	0.00	***
Associate degree	14.7	18.2	14.3	0.02	**	10.6	14.5	10.4	0.00	***
Bachelor's degree	23.4	7.7	24.9	0.00	***	28.9	16.4	29.3	0.00	***
Graduate degree	17.4	2.6	18.8	0.00	***	25.2	9.0	25.7	0.00	***
Marital status				0.00	###				0.00	###
Married	57.7	39.5	59.5	0.00	***	58.0	39.1	58.5	0.00	***
Divorced, separated, widowed	21.9	39.9	20.1	0.00	***	22.4	38.9	22.0	0.00	***
Never married	20.4	20.6	20.3	0.89		19.6	22.0	19.5	0.00	***
Labor status				0.00	###				0.00	###
Working	55.3	0.0	60.8	0.00	***	59.3	0.0	61.0	0.00	
Retired	18.9	0.0	20.7	0.00	***	20.4	0.0	20.8	0.00	
Disabled	6.8	75.7	0.0	0.00	***	2.2	100.0	0.0		

Not working for other reason	12.2	0.0	13.4	0.00	***	17.8	0.0	18.2	0.00	***
Mixed	6.8	24.3	5.1	0.00	***					
Household income				0.00	###				0.00	###
Less than $25K	19.0	58.2	15.1	0.00	***	10.6	44.8	9.8	0.00	***
$25K–$35K	9.1	15.2	8.5	0.00	***	8.7	14.2	8.6	0.00	***
$35K–$50K	12.3	10.7	12.5	0.22		10.9	11.7	10.9	0.00	***
$50K–$75K	20.1	10.9	21.0	0.00	***	17.5	12.9	17.6	0.00	***
$75K–$100K	14.2	3.6	15.3	0.00	***	14.6	7.1	14.8	0.00	***
$100K–150K	14.4	0.7	15.7	0.00	***	18.3	5.9	18.6	0.00	***
More than $150K	10.9	0.7	11.9	0.00	***	19.5	3.4	19.9	0.00	***
N	5,978	534	5,441			3,314,406	69,966	3,179,794		
Percentage of sample	100	8.9	91.0			100	2.1	95.9		

Notes: T-test significance is shown in each applicable row using *. For categorical variables, Chi-square significance is shown in the variable heading row. Chi-square significance is shown using #. Blank columns indicate a p-value that is not significant at the $p < 0.10$ level. * $p < 0.10$; ** $p < 0.05$; *** $p < 0.01$
Sources: Understanding America Study (Understanding Coronavirus in America survey) (UAS) and *Household Pulse Survey* (HPS).

Time Trends in Behaviors, Attitudes, and Outcomes Related to COVID-19

Using the longitudinal data in the UAS, we examine differences over time in various experiences related to COVID-19.

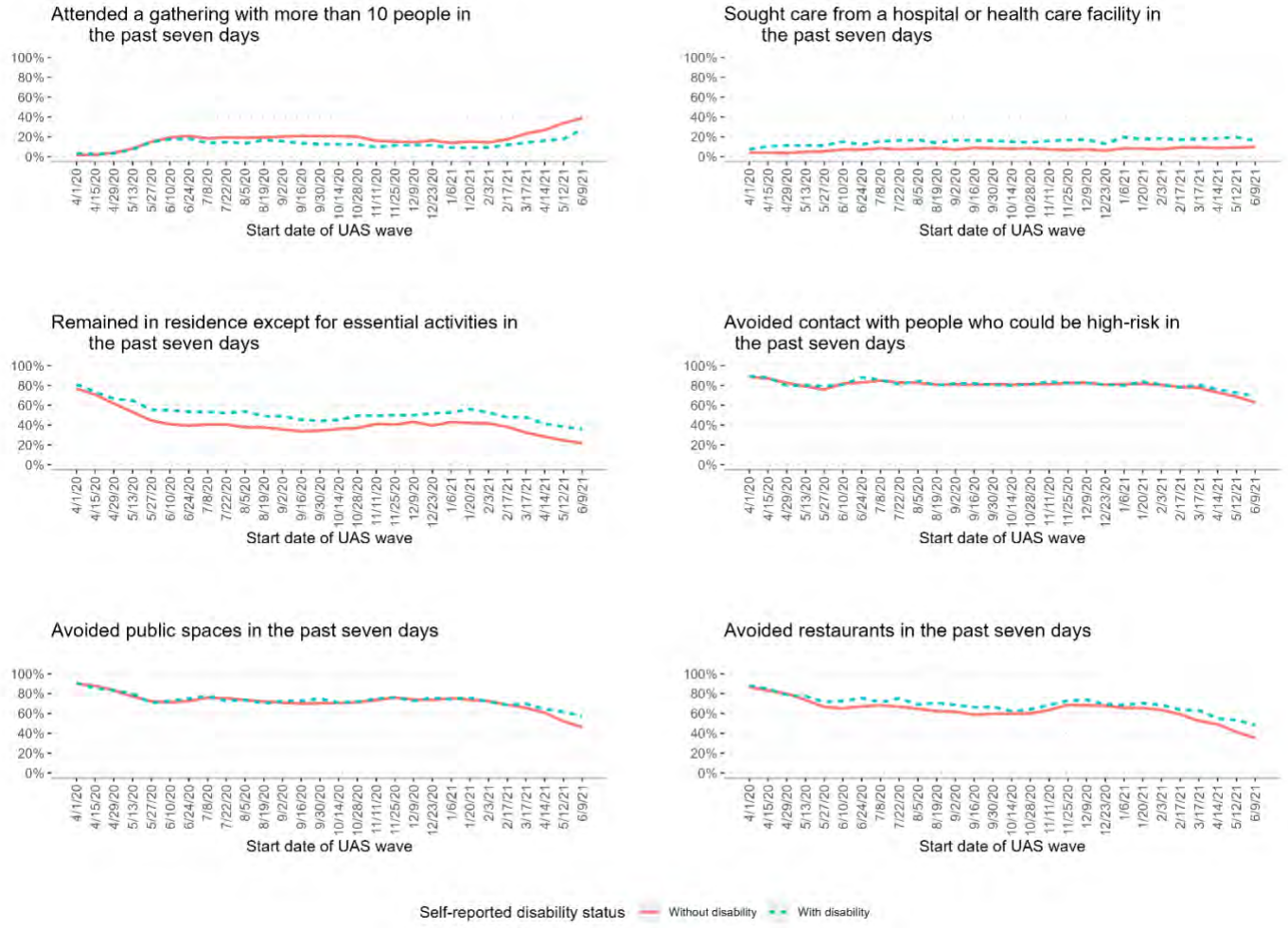
First, we examined behaviors related to risk of infection of COVID-19. Across a number of behaviors, people with disabilities tended to engage in behavior consistent with decreasing the risk of COVID infection over time. Figure 1 highlights time trends in select behaviors, comparing people with and without disabilities. As Figure 1 shows, people with disabilities were less likely to report that during the past seven days they attended a gathering of 10 or more people, and more likely to report that during the past seven days they avoided restaurants and remained at home; these differences remained across the duration of the study period. (Appendix Table 6 reports whether differences are statistically significant across survey waves; nearly all differences were statistically significant across all waves for these three measures in Figure 1.) Moreover, differences between people with and without disabilities diverged over time. For example, the share of people who reported attending a gathering with more than 10 people in the past seven days was similar and not statistically significantly different across disability status from April to June 2020. In late April of 2020, the percentage of people with a disability who responded positively was 2.5 percent relative to 2.0 percent of people without a disability, a difference of half a percentage point. However, by March of 2021, the difference in positive responses was nearly 10 percentage points. Although both groups were more likely to report having attended a gathering with more than 10 people than they were in early 2020, the values were 23.4 percent of people without a disability compared with only 14.1 percent for people with a disability. Across the three measures of behavior in Figure 1, the data suggests people with disabilities engaged in protective behaviors for longer periods during the pandemic relative to people without disabilities.

For protective behaviors that most people reported, such as avoiding public places, there were fewer differences between people with and without disabilities. As Figure 2 shows, a large majority of the sample reported avoiding contact with people at high risk of infection and avoiding public places. There were few differences between people with and without disabilities until the last two months of the study period, in which statistically significant differences emerged: people with disabilities reported more protective behaviors than people without.

One exception to the trend of avoiding public spaces was in seeking care from a hospital or health care facility. Across the study period, people with disabilities were more likely to visit a hospital or health care facility than people without disabilities (Figure 1). (Differences were statistically significant across all survey waves, as seen in Appendix Table 6).

In summary, people with and without disabilities engaged in very similar behaviors related to avoiding public spaces and social interactions toward the beginning of the pandemic. However, behaviors diverged over time, such that people with disabilities were more likely to continue avoiding social and public interactions than people without disabilities.

Figure 1. *Time Trends in Behaviors Associated with Risk of COVID-19 Infection*



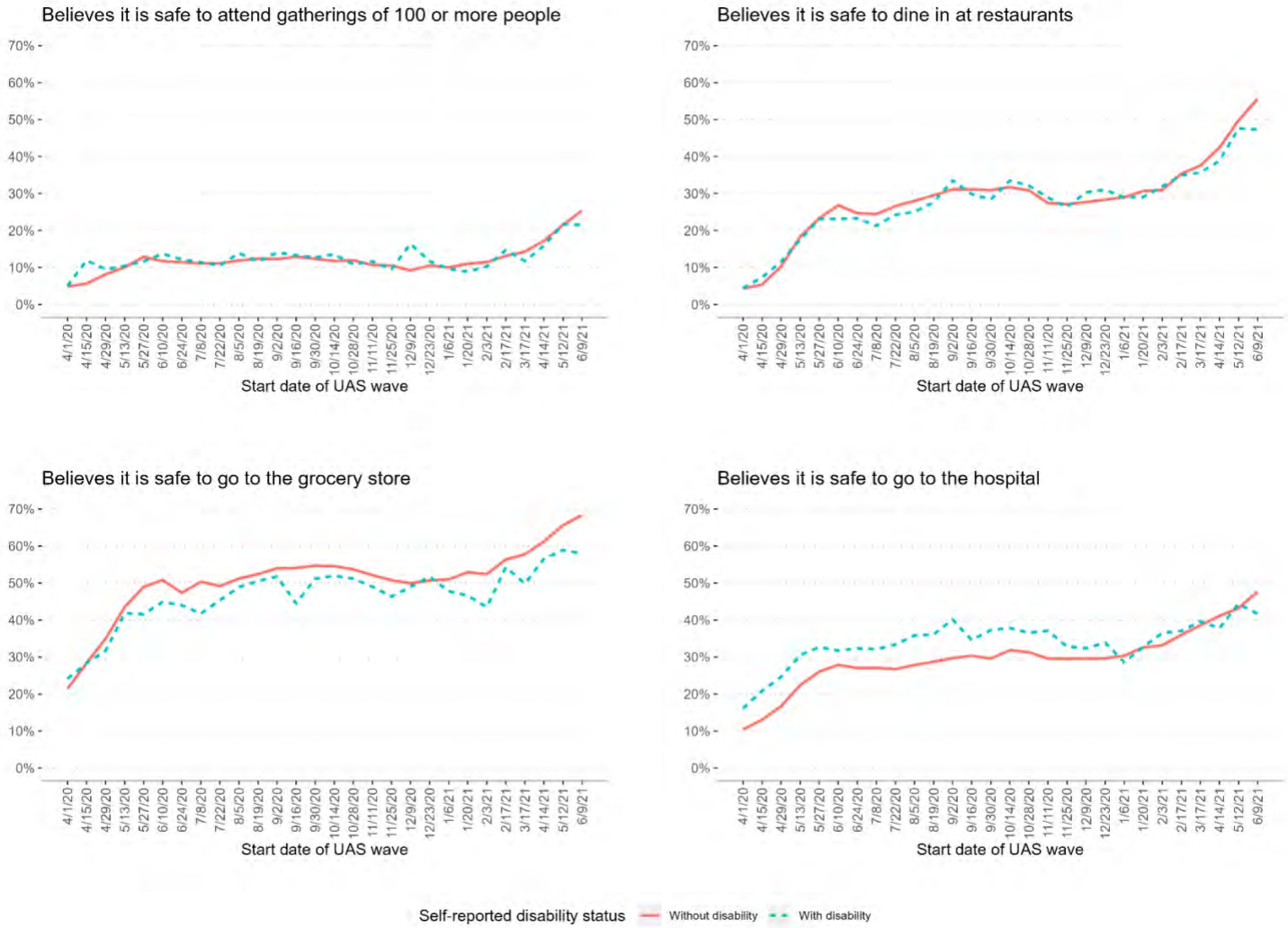
Note: See Appendix Table 6 for data and results of statistical tests by data wave.
Source: UAS (Understanding Coronavirus in America survey).

Time Trends in Beliefs About Safety Related to COVID-19: Behaviors, Preventative Measures, and Perception of Others

Although there were differences in behaviors between people with and without disabilities, beliefs about safety related to COVID-19 were largely similar between both groups. With a small number of exceptions in some waves, people with and without disabilities had similar beliefs about the safety of gatherings of 100 people or more and dining in a restaurant (Figure 2). Moreover, the percentage of people who believed that various activities were safe increased in similar fashion over the course of the pandemic for both people with and without disabilities. Mirroring behaviors about visiting the hospital, there were differences in beliefs about the safety of visiting a hospital; people with disabilities were more likely to report that they believe it is safe to go the hospital.

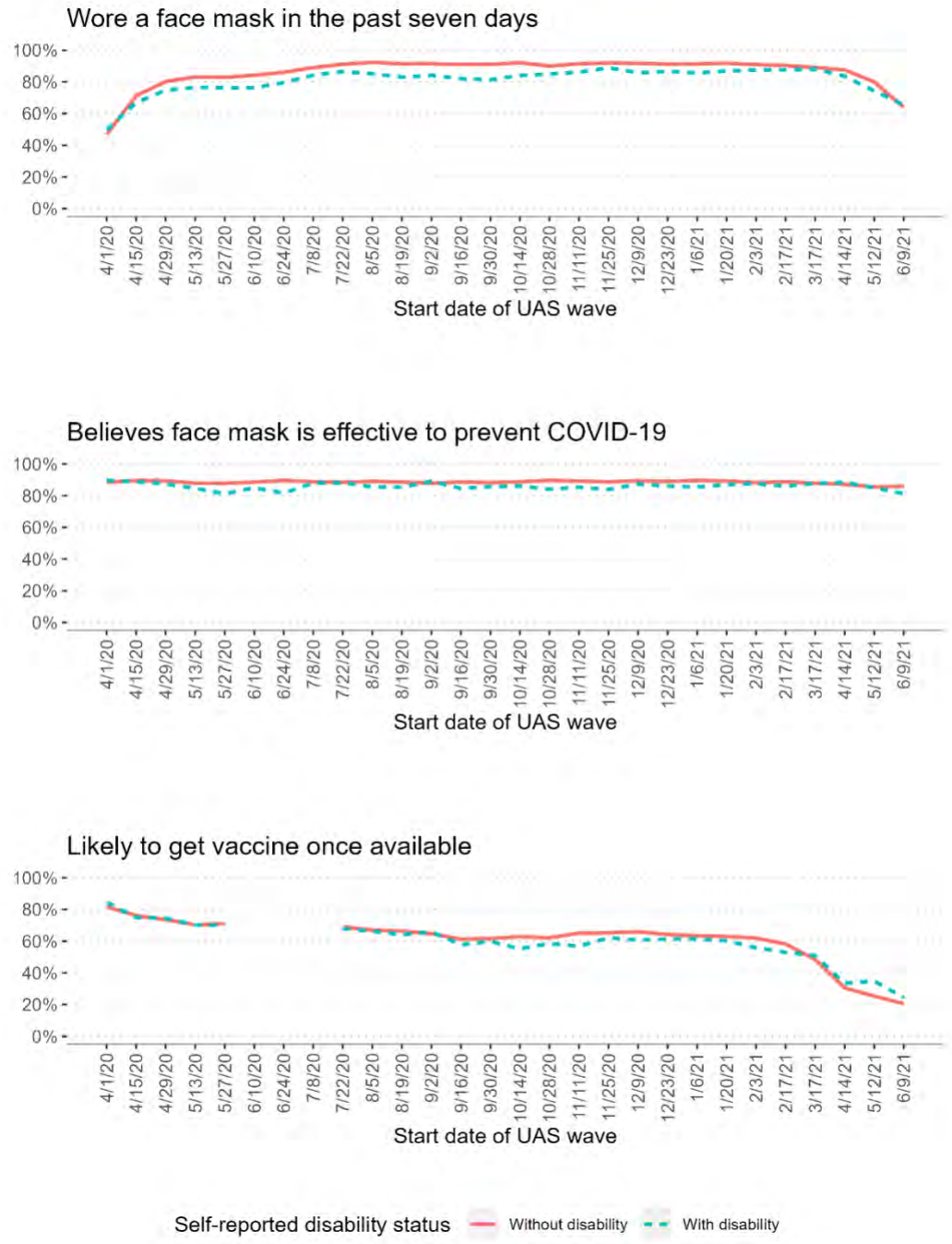
We also examined differences in beliefs about COVID-19 prevention measures, including mask wearing and vaccinations (Figure 3). Most respondents reported they believe masks are an effective measure to protect against COVID-19, though there were some statistically significant differences between people with and without a disability; higher shares of people without disabilities reported a belief in mask efficacy. There were small differences in reports about mask wearing over time. There were no statistically significant differences in the share of respondents who reported wearing a mask at the beginning and end of the pandemic study period. However, people with disabilities were more likely to report wearing a mask most of the time between May 2020 to February 2021 (Survey Waves 3–23). As opposed to most other measures assessed, beliefs about mask efficacy did not change over time. However, the share of respondents reporting they wore a mask in the past seven days decreased over time. There were very few statistically significant differences in respondents' likelihood of receiving a vaccine; in early April 2020, 8.6 percent of people with a disability and 81.7 percent of people without a disability reported that they were likely to get a vaccine against COVID-19 once it became available. By April 2021, after COVID-19 vaccines became available to most of the U.S. population older than age 18, differences in the share of people with and without a disability who reported they were likely to get a vaccine remained relatively constant (33.5 percent relative to 30.5 percent, respectively).

Figure 2. *Time Trends in Beliefs About Safety of Behaviors Related to COVID-19*



Note: See Appendix Table 7 for data and results of statistical tests by data wave.
Source: UAS (Understanding Coronavirus in America survey).

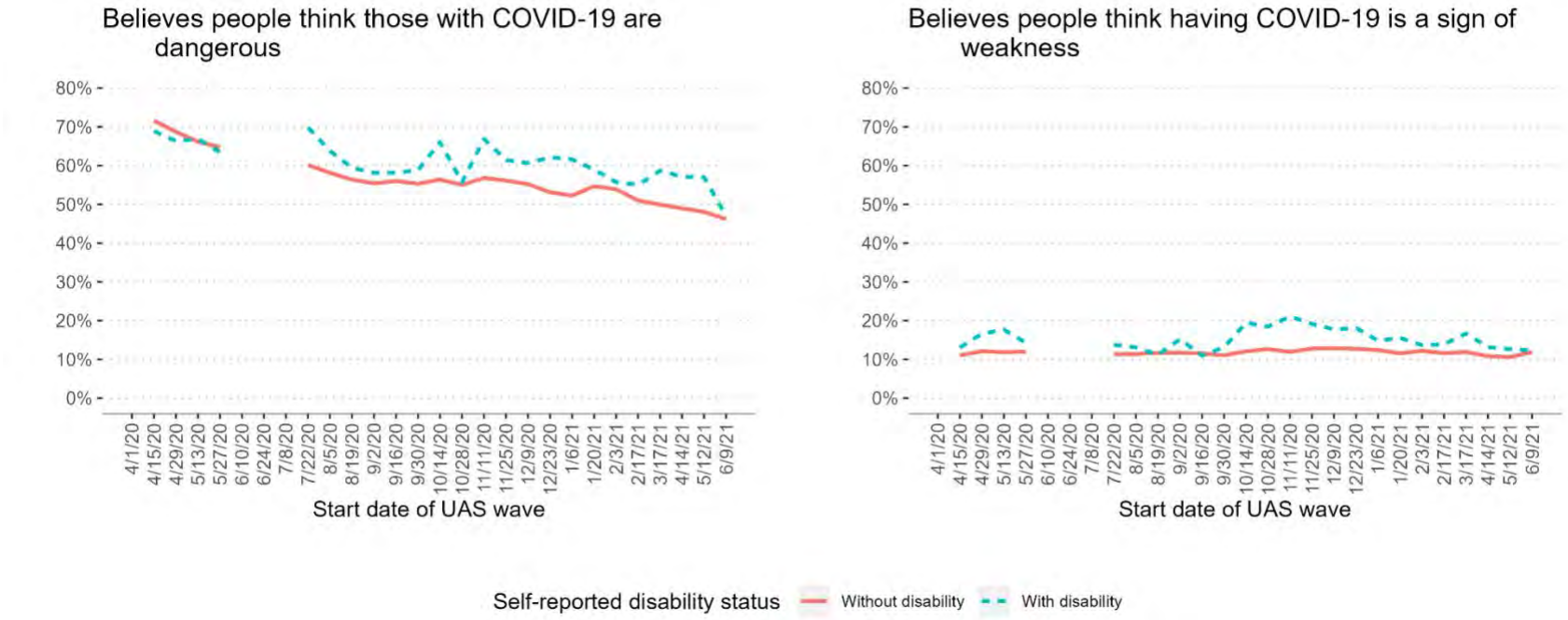
Figure 3. *Time Trends in Beliefs About Preventative Measures Related to COVID-19*



Note: See Appendix Table 8 for data and results of statistical tests by data wave.
Source: UAS (Understanding Coronavirus in America survey).

Figure 4 presents time trends on beliefs about those with COVID-19. Overall, people with disabilities tended to agree with the statement "People think those with COVID-19 are dangerous" for most of the pandemic study period. There are few statistically significant differences between people with and without disabilities in whether they agree with the statement "People think having COVID-19 is a sign of weakness."

Figure 4. *Time Trends in Perceptions About Others with COVID-19*



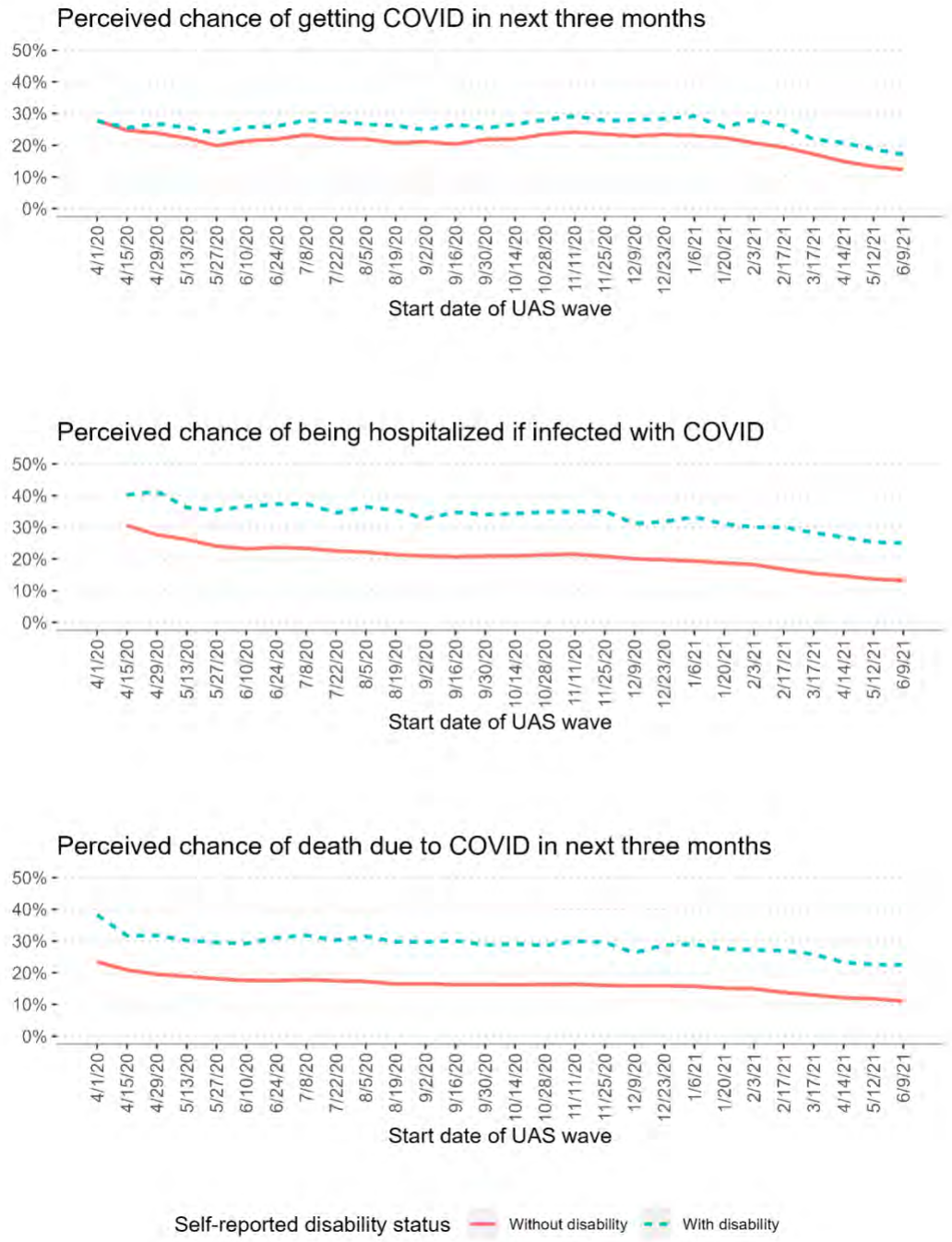
Note: See Appendix Table 9 for data and results of statistical tests by data wave.
Source: UAS (Understanding Coronavirus in America survey).

Time Trends in Perceptions About Personal Risk and Infection Related to COVID-19

Figure 5 presents time trends on the perceived chance of becoming infected with COVID-19, and associated risks of hospitalization and mortality. Across the pandemic study period, people with disabilities consistently reported perceiving a higher chance of getting infected with COVID-19 and a higher chance of being hospitalized or dying if infected. In particular, the perceived chance of death from COVID-19 was approximately twice as high for people with disabilities as for people without.

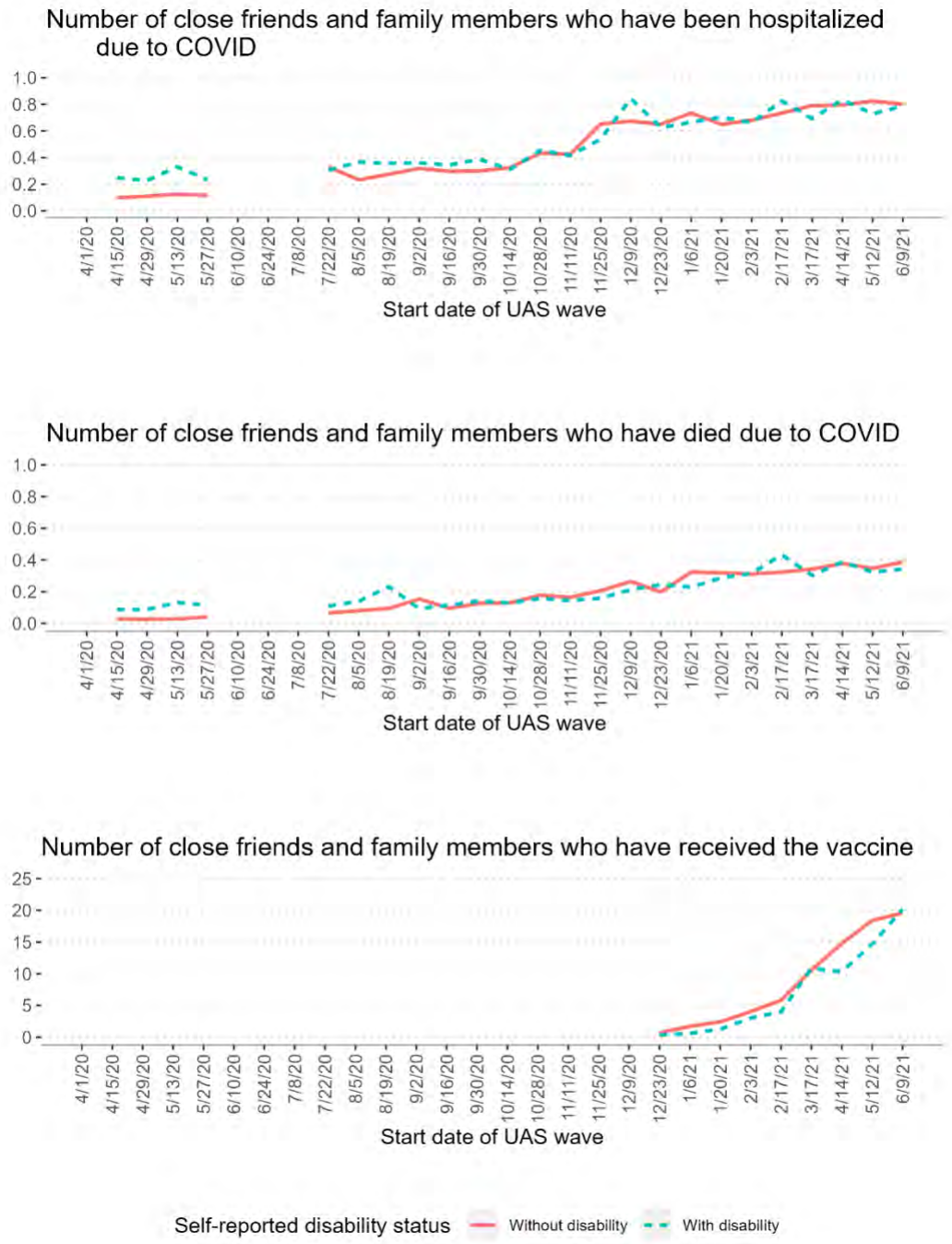
Despite strong differences in the self-perception of infection, there were few differences observed in the number of friends and family members being hospitalized or dying due to COVID-19 across disability status (Figure 6). People with disabilities reported a higher number of friends being hospitalized or dying due to COVID-19 in May and June of 2020. After that, there were no statistically significant differences in the two groups across measures of hospitalization or death. Conversely, people without disabilities reported higher shares of friends receiving at least one dose of a COVID-19 vaccine in the first two months of in which the question was asked, January 2021, but very few differences for the remaining time period after February 2021.

Figure 5. *Time Trends in Perceived Risk of COVID-19 Infection and Related Complications*



Note: See Appendix Table 10 for data and results of statistical tests by data wave.
Source: UAS (Understanding Coronavirus in America survey).

Figure 6. *Time Trends in COVID-19 Experiences among Friends and Family Members*



Note: See Appendix Table 11 for data and results of statistical tests by data wave.
Source: UAS (Understanding Coronavirus in America survey).

Time Trends in Economic and Financial Circumstances

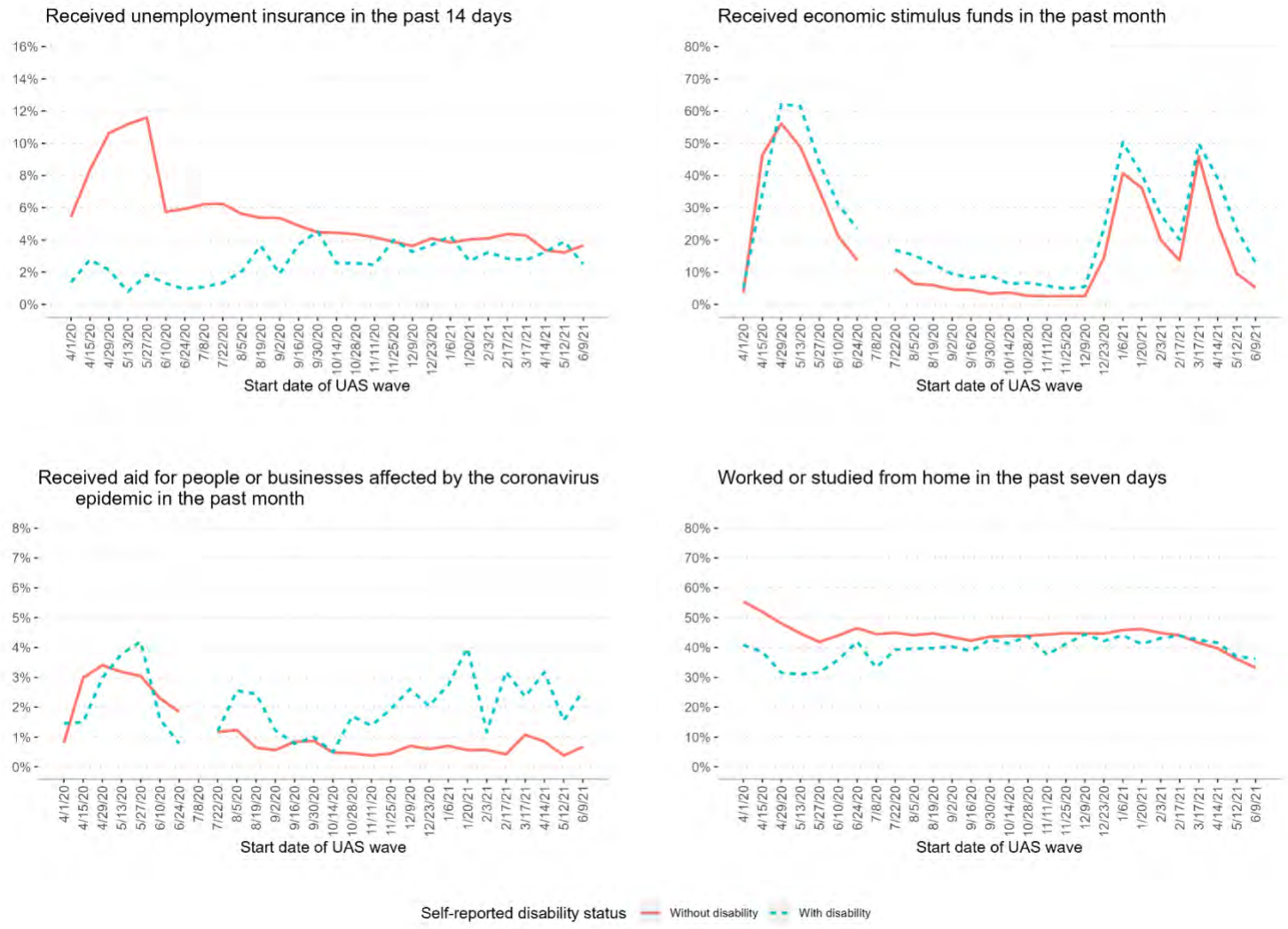
Next, we turn to beliefs and actions related to the economic aspects of the COVID-19 pandemic. There were statistically significant differences between people with and without disabilities across a number of domains (Figures 7 and 8). Across nearly the entire pandemic study period, people with disabilities were more likely to report receiving economic stimulus funds by an average of 5.8 percentage points. Among those respondents who were employed, people with disabilities were 3 to 11 percentage points less likely to report receiving unemployment insurance between April and September 2020, depending on the time period. After that, differences were no longer statistically significant. Conversely, differences in the percentage of respondents receiving aid for people or businesses affected by COVID-19 emerged in November 2020 and remained through the rest of the study period; people with disabilities were at least twice as likely to report receiving aid. In the beginning of the pandemic period, from April to July 2020, people with disabilities were less likely to report working from home by 5 to 15 percentage points. However, after that time period, there were few statistically significant differences across the two groups.

Figure 8 displays differences in perceptions of economic and financial security related to the COVID-19 pandemic. Perhaps most strikingly, across the entire pandemic study period, people with disabilities consistently perceived a greater likelihood of running out of money because of COVID-19.[6] On average, people with disabilities perceived a 26.4 percent likelihood of running out of money, an average 12.6 percentage points higher than people without disabilities. Likewise, people with disabilities consistently reported lower confidence of coming up with $2,000 for an unexpected expense within the next month. People without disabilities were approximately twice as likely to report having the confidence to come up with these funds across the entire pandemic study period.[7] People with disabilities also had higher perceived likelihood of eviction toward the middle (August to October 2020) and tail end of the pandemic study period. The particularly large gap at the end of the study period (11.6 percent likelihood for people with disabilities compared with 6.0 percent for people without disabilities) might reflect early discussions about the lifting of President Biden's eviction moratorium. There were

[6] In other models that control for income, these differences remain statistically significant.
[7] It is worth noting that this question does not ask anything specific about COVID-19 and therefore might represent documented long-standing disparities in income and wealth between people with and without disabilities.

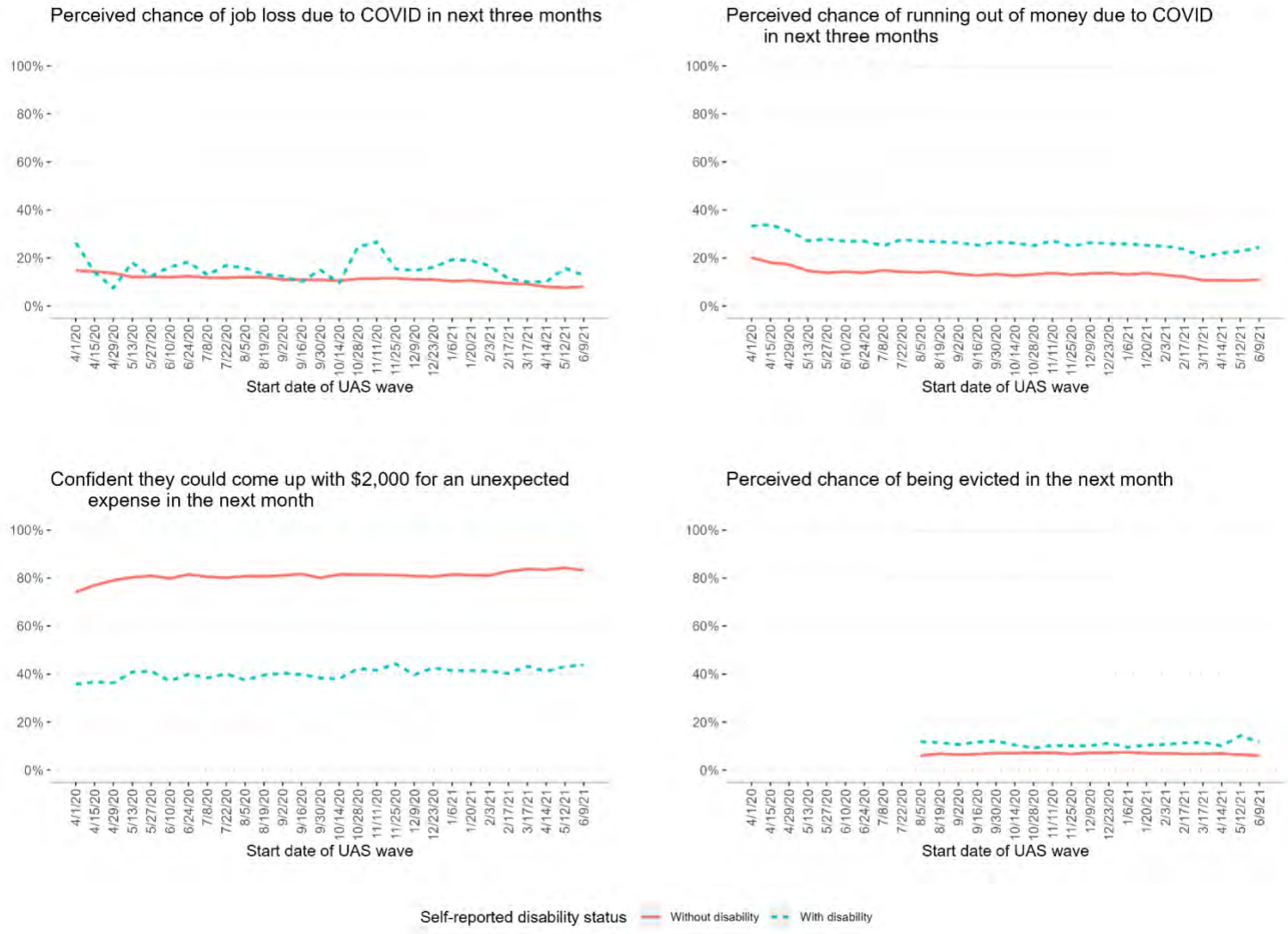
few statistically significant differences across the two groups in the perceived chance of job loss across the pandemic study period.

Figure 7. *Time Trends in Work and Receipt of Economic Benefits*



Note: See Appendix Table 12 for data and results of statistical tests by data wave.
Source: UAS (Understanding Coronavirus in America survey).

Figure 8. *Time Trends in Financial Security*



Notes: See Appendix Table 13 for data and results of statistical tests by data wave.
Source: UAS (Understanding Coronavirus in America survey).

As a sensitivity analysis, we re-examined these longitudinal differences after controlling for several additional individual sociodemographic characteristics including age, sex, race and ethnicity, and marital status.[8] In many cases, differences between people with and without disabilities are no longer statistically significant. This finding is perhaps not surprising, as these unadjusted observed differences represent not just COVID-specific circumstances but also long-standing disparities between people with and without disabilities.

Assessing Uncertainty in the Pandemic

Next, we sought to better understand differences in the levels of uncertainty related to various social mitigation strategies associated with the pandemic. To achieve this objective, we took advantage of the fact that a number of questions assessed in the UAS allowed for a response of "unsure." Although "unsure" responses could be considered measurement error, we posit that for certain questions, "unsure" can assess underlying uncertainty about specific actions or behaviors to mitigate pandemic risk associated with various risk profiles. Figure 9 displays a selection of measures related to these behaviors and their assessed uncertainty. These measures include the perceived effectiveness of wearing a face mask (Panel A); the perceived safety of attending a large gathering (Panel B), dining in a restaurant (Panel C), going to a grocery store (Panel D), or going to a hospital (Panel E); and plans for vaccination against COVID-19 (Panel F).

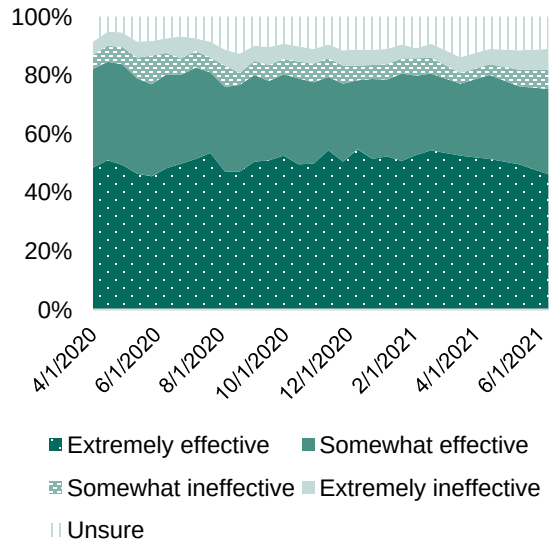
In all cases, the share of respondents exhibiting uncertainty is larger for people with disabilities than for people without. Moreover, the share of those who are uncertain increases over time for people with disabilities at a faster rate than those without disabilities, meaning that the higher levels of uncertainty around social mitigation strategies for people with disabilities grows larger over the course of the pandemic study period. Even for behaviors in which people with disabilities are more likely to engage—such as visiting a hospital—levels of uncertainty are higher. Notably, the gap in levels of uncertainty between people with and without disabilities was particularly large when assessing plans for vaccinations against COVID-19.

[8] Results for these analyses are available upon request.

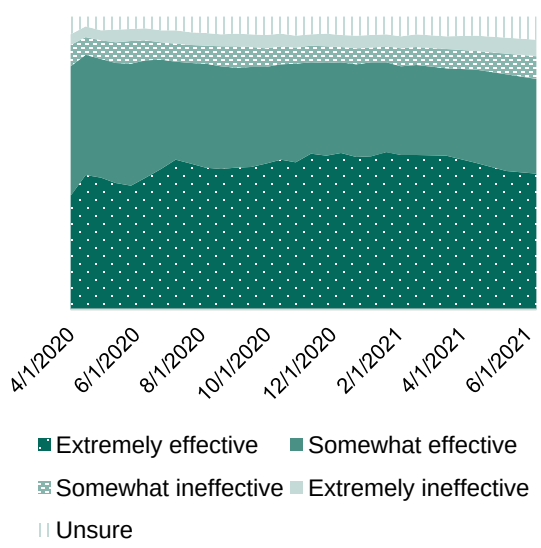
Figure 9. *Measures of Uncertainty About Social Mitigation Strategies Over Time*

Panel A: How effective is wearing face mask for keeping you safe from coronavirus?

1. With disability

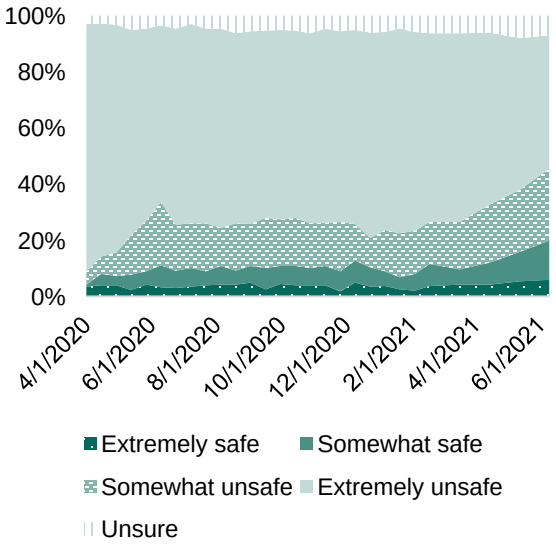


2. Without disability

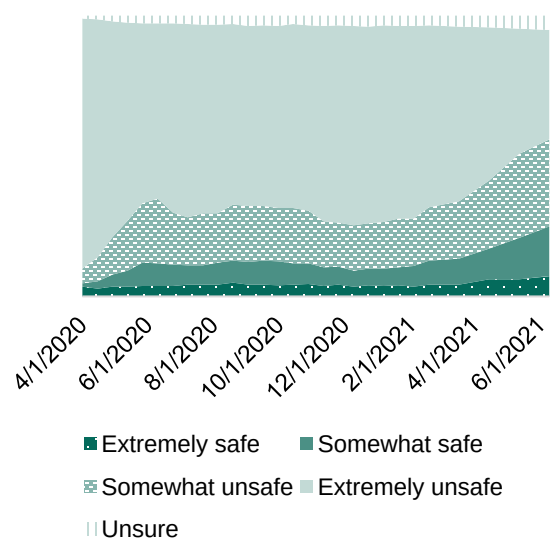


Panel B: How safe is it to attend a gathering of 100 or more people for avoiding exposure to coronavirus?

1. With disability

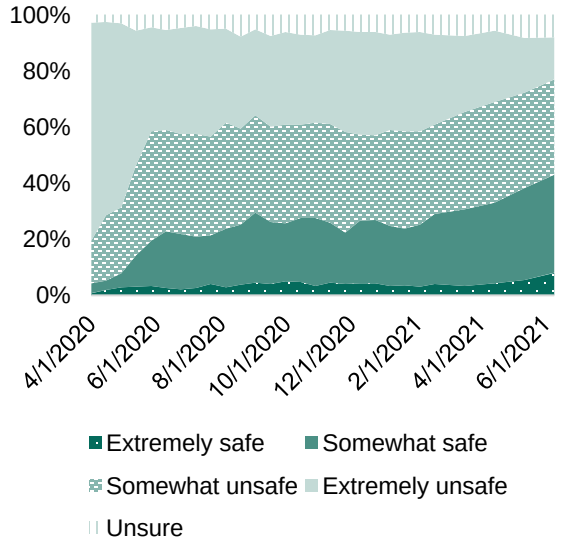


2. Without disability

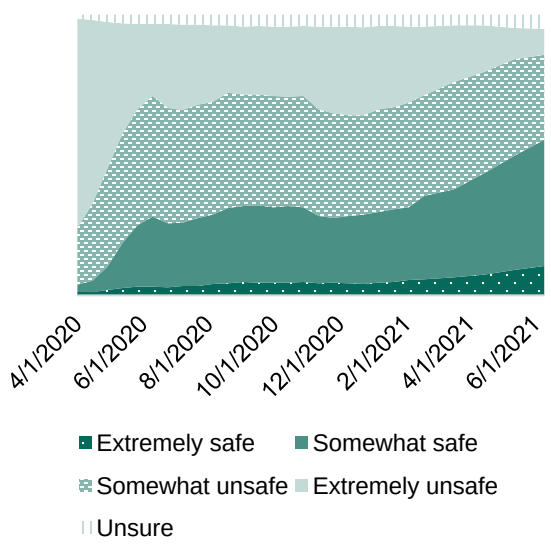


Panel C: How safe is it to dine in at a restaurant for avoiding exposure to coronavirus?

1. With disability

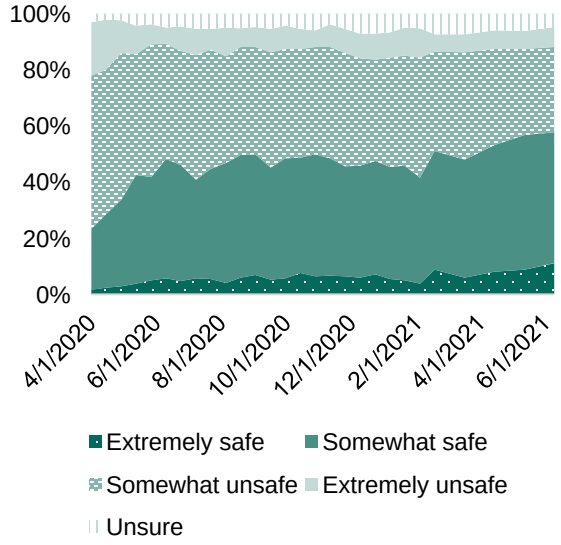


2. Without disability

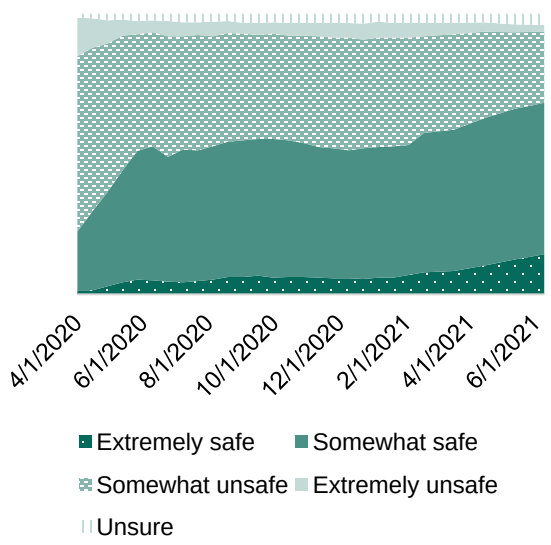


Panel D: How safe is it to go to a grocery store for avoiding exposure to coronavirus?

1. With disability

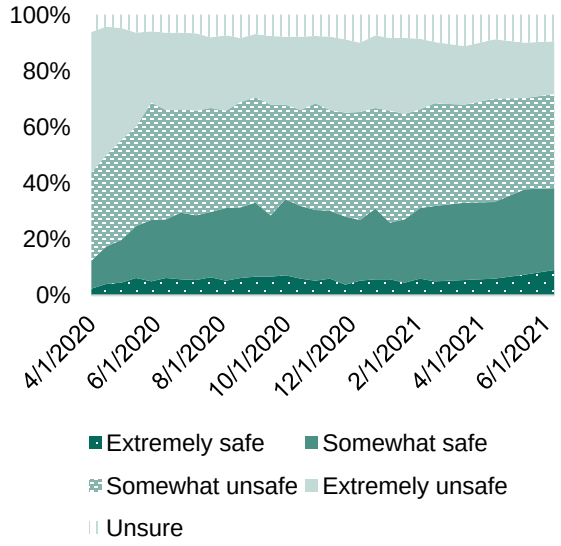


2. Without disability

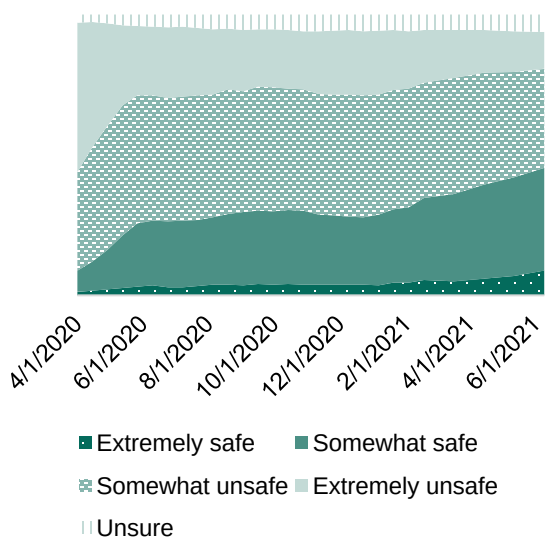


Panel E: How safe is it to go to a hospital for avoiding exposure to coronavirus?

1. With disability

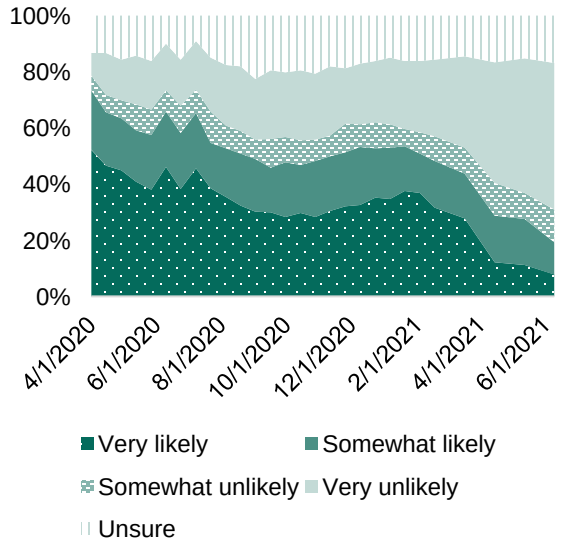


2. Without disability

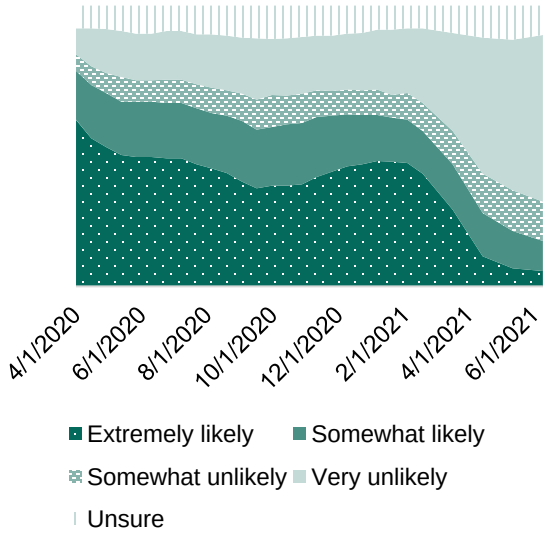


Panel F: How likely are you to get a COVID-19 vaccine once one is available?

1. With disability



2. Without disability



Source: UAS (Understanding Coronavirus in America survey)

Comparisons of UAS and HPS

Because we use the two surveys in various parts of our analysis, we first wanted to ensure that survey questions, responses, and sample distributions were comparable across the two data sources (Table 2). First, we examined personal experiences with COVID-19 by disability across

the two surveys in similar time periods and found similar patterns across the surveys. About 12 percent of the UAS respondents reported ever being diagnosed with COVID-19 through July 2021, and people with disabilities were more likely to report being diagnosed with COVID (15 versus 11 percent). Similar shares of respondents in the HPS administered in July 2021 reported being diagnosed with COVID-19 (14 percent), but there was no statistically significant difference by disability in the HPS. Through July 2021, about 66 percent of respondents in the UAS reported ever receiving the vaccine, and people with disabilities were less likely to report receiving the vaccine than those without disabilities (60 versus 67 percent). More people participating in the HPS administered in July 2021 reported receiving the vaccine (80 percent), with a similar pattern by disability. Among those who did not have the vaccine already in early 2021, about 63 percent of UAS respondents said they were likely to get the vaccine as of January 2021, with no statistically significant difference by disability. However, by mid-2021 (June–July), about one-fifth of people reported that they were likely to get it, with no statistically significant differences by disability emerging. A higher share of people participating in the HPS administered in January 2021 reported they were likely to get the vaccine (77 percent), with a similar pattern over time and disability.

Table 2. *Comparison of UAS and HPS COVID Outcomes*

	UAS					HH Pulse				
	Whole sample	With disability	Without disability	p-value	Significance	Whole sample	With disability	Without disability	p-value	Significance.
Percentage of sample (%)										
Work and COVID-related measures of economic security										
Applied for unemployment insurance (ever between February or March 2020 and March 2021)	15.7	8.5	16.5	0.00	***	19.7	10.2	20.1	0.00	***
Worked or studied from home										
August 2020	44.4	40.2	44.9	0.15		44.6	17.6	45.1	0.00	***
February–March 2021	44.1	45.0	44.0	0.77		47.5	23.5	48.1	0.00	***
Personal experience with COVID-19										
Doctor or provider told you ever had COVID (through July 2021)	11.6	14.9	11.2	0.10	*	14.1	13.4	14.1	0.62	
Received vaccine (through July 2021)	66.4	60.3	67.1	0.03	**	80.0	72.7	80.2	0.00	***
Likely to get COVID vaccine once available										
January 2021	63.4	61.3	63.6	0.52		77.1	77.1	77.0	0.97	
February–March 2021	57.9	54.2	58.2	0.31		73.3	72.9	73.4	0.77	
June–July 2021	21.2	23.4	20.9	0.60		18.3	23.8	18.2	0.05	*
Avoided restaurants										
August 2020	63.3	72.5	62.3	0.00	***	56.7	60.0	56.8	0.13	
February–March 2021	59.6	66.4	58.8	0.02	**	48.8	56.1	48.6	0.00	***
Had depression in past two weeks										
April 2020	9.1	18.0	8.1	0.00	***	18.5	37.7	18.0	0.00	***
August 2020	8.7	16.5	7.9	0.00	***	19.9	42.0	19.5	0.00	***
February–March 2021	9.2	19.2	8.2	0.00	***	21.6	43.9	21.0	0.00	***
June–July 2021	8.0	17.3	6.9	0.00	***	17.7	37.3	17.2	0.00	***
Financial security										
Received SNAP benefits										
August 2020	13.3	46.3	10.0	0.00	***	10.9	36.4	10.3	0.00	***
February–March 2021	13.6	50.2	9.6	0.00	***	11.9	38.3	11.1	0.00	***
June–July 2021	14.5	47.6	10.8	0.00	***	12.2	35.8	11.6	0.00	***

Likely to be evicted or experience foreclosure										
August 2020	52.6	57.6	52.1	0.09	*	2.2	6.7	2.1	0.00	***
February–March 2021	57.4	67.1	56.4	0.00	***	2.1	4.0	2.1	0.00	***
June–July 2021	56.9	64.3	56.1	0.01	**	1.8	2.9	1.8	0.00	***
Missed or delayed payment on mortgage or rent										
April 2020	5.7	9.1	5.4	0.06	*	14.1	11.8	14.2	0.29	
July 2020	5.0	6.2	4.9	0.46		16.1	22.1	16.0	0.00	***
N unweighted										
April 2020	5,978	536	5,439			54,825	1,158	53,051		
July 2020	5,978	538	5,437			306,917	5,935	298,262		
August 2020	5,978	539	5,436			109,051	1,912	105,983		
January 2021	5,978	543	5,432			148,915	2,984	143,889		
February–March 2021	5,978	540	5,435			233,198	4,952	225,448		
June–July 2021	5,978	549	5,426			134,329	3,030	129,451		

Notes: T-test significance is shown in each applicable row using *. Blank columns indicate a p-value that is not significant at the $p < 0.10$ level. See Appendix Table 4 for details on the timing and question wording of each survey. * $p < 0.10$; ** $p < 0.05$;*** $p < 0.01$. SNAP = Supplemental Nutrition Assistance Program.

Source: UAS (Understanding Coronavirus in America survey) and HPS.

We also examined other behaviors and outcomes related to the pandemic. About 60 percent of the UAS respondents reported in both the August 2020 and February–March 2021 surveys that they were avoiding restaurants, and more people with disabilities reported avoiding restaurants than people without disabilities (about 70 versus about 60 percent). Similar shares of respondents participating in the HPS in August 2020 reported avoiding restaurants (57 percent). However, those surveyed in February–March 2021 were less likely to avoid restaurants (49 percent). There were smaller differences by disability in the HPS. About 9 percent of the UAS respondents reported they had experienced depression in the past two weeks as of April 2020, and more than two times as many people with disabilities reported they had experienced depression compared with those without disabilities (18 versus 8 percent). About twice as many respondents (19 percent) participating in the HPS reported depression, and a similar pattern held by disability (38 versus 18 percent). There was a similar pattern in August 2020, February–March 2021, and June–July 2021.

To understand COVID-related measures of economic security, we examined applications for unemployment insurance. About 16 percent of respondents in the UAS reported applying for unemployment insurance between the start of the pandemic and March 2021. About half as many people with disabilities reported applying for unemployment insurance compared with those without disabilities (9 versus 17 percent). These shares were similar to respondents in the HPS in February 2020–March 2021.

Finally, we examined work and financial security. About 44 percent of UAS respondents reported working or studying from home in August 2020, with no statistically significant difference by disability. A similar share of respondents participating in the HPS reported working or studying from home in a similar time period (45 percent). People with disabilities were less likely to report in the HPS that they were working or studying from home (18 versus 45 percent). A similar pattern was observed in the February–March 2021 survey responses. About 13 percent of UAS respondents received Supplemental Nutrition Assistance Program (SNAP) benefits in August 2020. People with disabilities were much more likely to receive SNAP benefits (46 versus 10 percent). A similar share of respondents to the HPS received SNAP benefits (11 percent), with a smaller difference by disability (36 versus 10 percent). There was a similar pattern in the February–March 2021 and June–July 2021 survey responses. About 6 percent of UAS respondents to the April 2020 survey reported missing or delaying a

payment on their mortgage or rent, and a higher share of people with disabilities reported doing so compared with those without disabilities (9 versus 5 percent). A higher share of respondents to the April 2020 HPS reported missing or delaying such payments (14 percent), with an opposite pattern by disability (12 versus 14 percent). By July 2020, both UAS and HPS respondents with disabilities were more likely to report missing a payment on their mortgage or rent than respondents without disabilities.

Timing and Predictors of Recent Applications and Plans to Apply to SSA Programs

Given the documented differences in behaviors and attitudes related to the COVID-19 pandemic over time between people with and without disabilities, we next sought to better understand the potential implications for SSA programs. Using the HPS, we used a number of questions that assessed the influence of the COVID-19 pandemic on respondents' recent applications to various SSA programs as well as questions on the likelihood of future applications. As detailed earlier, we created six outcomes (and respective sample populations): (1) recently applied to OASI; (2) recently applied to SSDI; (3) recently applied to SSI; (4) likely to apply to OASI; (5) likely to apply to SSDI; and (6) likely to apply to SSI. We analyzed data from Phase 2 (August 19–October 26, 2020), Phase 3 (October 28, 2020–March 29, 2021), and Phase 3.1 (April 14–July 5, 2021), where respondents indicated their plans to apply.

Across the three (cross-sectional) phases of data, 2.2 percent (Phase 2), 3.7 percent (Phase 3), and 2.0 percent (Phase 3.1) of respondents report receiving one or more SSA-related benefit and another 5.7, 8.1, and 4.2 percent, respectively, report having applied recently. Of the remaining sample, in Phase 3.1, a combined 6.6 percent of respondents stated that they were at least somewhat likely to apply to SSA programs. Of those likely to apply, across all three programs (OASI, SSDI, and SSI), more respondents expected to apply earlier than planned because of COVID-19, as opposed to later or not at all (Table 3). The remaining 56.0 percent did not think that COVID-19 affected their decision to apply to SSA benefits (Table 3 also lists results for Phases 2 and 3 of data).

Table 3. *Tabulations of Likelihood to Apply to SSA Programs and Whether and How COVID-19 Influenced Those Decisions (Weighted)*

	Phase 2		Phase 3		Phase 3.1	
	Frequency	Percentage	Frequency	Percentage	Frequency	Percentage
Likelihood of applying to any SSA program						
Extremely likely	1,143	2.19	730	2.05	2,863	1.42
Very likely	1,103	2.12	626	1.76	2,758	1.36
Somewhat likely	3,205	6.15	1,862	5.23	7,703	3.81
Not likely at all	46,660	89.54	32,424	90.97	188,789	93.41
N	52,112		35,641		202,114	
Of those likely to apply to OASI					Frequency	Percentage
How pandemic affected decision to apply to SSA programs						
Decided to apply earlier	620	38.56	373	31.5	561	13.46
Decided to apply later	156	9.72	124	10.44	383	9.18
Decided not to apply	164	10.19	111	9.33	502	12.05
Did not affect decision	668	41.53	578	48.74	2,722	65.3
N	1,608		1,185		4,168	
Of those likely to apply to SSDI					Frequency	Percentage
How pandemic affected decision to apply to SSA programs						
Decided to apply earlier	423	32.37	188	20.31	498	16.52
Decided to apply later	173	13.2	137	14.78	460	15.25
Decided not to apply	128	9.76	89	9.59	306	10.14
Did not affect decision	586	44.76	512	55.33	1,752	58.09
N	1,310		926			
Of those likely to apply to SSI					Frequency	Percentage
How pandemic affected decision to apply to SSA programs						
Decided to apply earlier	319	31.01	193	31.78	280	15.91
Decided to apply later	169	16.39	128	21.16	336	19.12
Decided not to apply	192	18.66	111	18.26	329	18.7
Did not affect decision	349	33.94	175	28.8	813	46.27
N	1,029		606		1,757	

Notes: In Phases 2 and 3, respondents were asked whether they applied to SSA benefits since March 13, 2020 and if not, how likely they are to apply for benefits in the next 12 months. In Phase 3.1, respondents were asked whether they applied to SSA benefits since January 1, 2021, and if not, how likely they are to apply for benefits in 2021. Frequencies are rounded to the nearest whole number. OASI = Old Age and Survivors Insurance; SSA = Social Security Administration; SSDI = Social Security Disability Insurance; SSI = Supplemental Security Income.
Source: HPS.

Tables 4, 5, and 6 displays results for adjusted models estimating relationships for current and likely future application for all three phases of HPS data. We observe that for all six outcomes—recently applied to OASI, SSDI, or SSI, and likely to apply to OASI, SSDI, or SSI—COVID-19 had a positive impact on recent or planned application. In Phase 2, respondents who noted that COVID-19 impacted their plans to apply were 3.9 times more likely to have recently applied to OASI, 3.6 times more likely to have recently applied to SSI, and 1.4 times more likely to have applied to SSDI. Likewise, respondents who were likely to apply to OASI, SSDI, or SSI in the next six months were 3.2 times, 2.5 times, and 3.9 times more likely, respectively, to do so when responding that the pandemic influenced their decision. This pattern remained consistent when we assessed to other time periods in the HPS. Between October 2020 and March 2021, respondents were 1.9–5.7 times more likely to have recently applied or planned to apply to an SSA-related program, depending on the program. These findings were consistent between April 2021 and July 2021, as well; however, the odds ratio was slightly smaller across all model results.

Table 4. *Estimates of the Effect of COVID-19 on Decision to Apply for Benefits and Application to SSA Programs in Phase 2 of HPS*

	Applied to OASI		Applied to SSDI		Applied to SSI		Likely apply to OASI		Likely apply to SSDI		Likely apply to SSI	
Odds ratio												
COVID-19 affected decision to apply for benefits	3.9	***	1.4	*	3.6	***	3.2	***	2.5	***	3.9	***
Age (mean)	1.1	***	1.0	***	1.0		1.1	***	1.0	***	1.0	
Gender												
Female	0.9		1.0		1.0		0.7	***	1.0		0.8	*
Race												
Black	0.8		0.9		1.1		1.1		1.1		1.1	
Asian	0.9		0.5	**	0.6		1.2		0.2	***	1.7	**
Other	1.5		1.7	**	3.4	***	1.1		1.0		1.8	**
Hispanic	0.9		0.6	**	1.1		0.7	**	0.7	*	0.9	
Level of education												
Some high school	0.5		0.2	***	0.3	***	2.2	*	2.4		0.7	
High school or equivalent	0.4	**	0.2	***	0.2	***	2.1	*	2.6	*	0.7	
Some college	0.4	*	0.2	***	0.2	***	1.7		2.7	*	0.7	
Associate degree	0.5		0.2	***	0.2	***	1.6		2.3		0.9	
Bachelor's degree	0.4	**	0.1	***	0.1	***	1.4		1.5		0.6	
Graduate degree	0.4	*	0.1	***	0.2	***	1.5		2.3		0.8	
Marital status												
Widowed	3.9	***	2.1	**	2.0	*	1.3		1.0		1.2	
Divorced	1.0		1.0		1.2		0.9		1.5	***	1.5	**
Separated	1.0		2.4	***	0.7		1.3		2.6	***	1.0	
Never married	1.3		1.1		1.5	*	1.1		1.3	**	1.1	
Reason for not working												
No desire	5.6	***	0.8		1.8		0.6		2.7	**	0.4	
COVID	1.1		1.8	***	1.1		1.2	*	1.6	***	1.2	
Caring for children	0.9		1.8	*	0.4	**	1.3		2.6	***	1.3	
Caring for elderly	2.3	**	3.3	***	1.2		1.4		2.7	**	0.6	
Retired	9.6	***	6.4	***	9.5	***	3.3	***	1.7		1.0	
Disabled	0.6		16.3	***	3.8	***	0.6		14.4	***	3.0	***
Other	1.3		3.4	***	1.1		0.9		2.0	***	0.9	
Household income												
$25K–$35K	0.6	**	0.5	***	0.8		0.9		0.7	**	0.6	***
$35K–$50K	0.9		0.4	***	1.2		1.1		0.5	***	0.7	
$50K–$75K	0.9		0.3	***	0.4	***	1.0		0.5	***	0.7	**
$75K–$100K	0.9		0.3	***	0.5	**	1.0		0.3	***	0.6	*
$100K–$150K	1.1		0.3	***	1.0		0.9		0.3	***	0.4	***
$150K–$200K	0.5	**	0.1	***	0.5		0.5	**	0.2	**	0.3	***
More than $200K	0.6		0.5	**	1.6		0.7		0.4	*	0.4	*
Received unemployment insurance	0.8		0.3	***	0.3	***	0.9		0.9		0.5	***

Received a stimulus payment	1.6	***	1.5	***	1.4	*	1.0		1.2		1.4	***
N	54,874		54,874		54,874		52,112		52,112		52,000	

Notes: In Phase 2, respondents were asked whether they applied to SSA benefits since March 13, 2020 and if not, how likely they were to apply for benefits in the next 12 months. Similarly, they were asked whether they received unemployment insurance since March 13, 2020. We assume they received a stimulus payment if they responded that they used funds from a stimulus payment to meet their spending needs in the past seven days. The reference category is White, non-Hispanic males who were married and working, had less than high school education level, had a household income of less than $25,000 per year, and did not receive unemployment insurance or stimulus funds. * $p < 0.10$; ** $p < 0.05$; *** $p < 0.01$. OASI = Old Age and Survivors Insurance; SSA = Social Security Administration; SSDI = Social Security Disability Insurance; SSI = Supplemental Security Income.
Source: HPS.

Table 5. *Estimates of the Effect of COVID-19 on Decision to Apply for Benefits and Application to SSA Programs in Phase 3 of HPS*

	Applied to OASI		Applied to SSDI		Applied to SSI		Likely apply to OASI		Likely apply to SSDI		Likely apply to SSI	
Odds ratio												
COVID-19 affected decision to apply for benefits	4.5	***	1.9	***	2.7	***	3.0	***	2.1	***	5.7	***
Age (mean)	1.2	***	1.0	***	1.0	***	1.1	***	1.0	***	1.0	
Gender												
Female	0.8		0.9		0.8		0.9		0.9		0.5	***
Race												
Black	1.6	**	1.9	***	1.4		0.9		1.1		1.2	
Asian	1.4		0.7		1.0		1.5	**	0.4	***	1.4	
Other	0.9		2.6	***	1.4		0.7		1.0		0.6	**
Hispanic	0.7	*	1.0		1.3		1.2		0.6	**	1.1	
Level of education												
Some high school	0.1	***	0.3	***	0.6		4.3	*	3.3	**	0.8	
High school or equivalent	0.3	*	0.4	***	0.3	***	2.9	*	4.4	***	0.6	
Some college	0.3	**	0.3	***	0.3	***	3.1	*	4.8	***	0.6	
Associate degree	0.3	**	0.4	***	0.3	***	3.3	*	4.8	***	0.8	
Bachelor's degree	0.3	**	0.3	***	0.3	***	2.4		2.4	*	0.7	
Graduate degree	0.3	**	0.4	***	0.3	***	1.7		3.7	**	0.5	
Marital status												
Widowed	3.0	***	1.0		1.1		1.9	**	1.0		1.7	
Divorced	1.0		1.2		1.7	**	0.9		1.2		1.0	
Separated	0.6		1.9	*	1.6		1.0		1.5		1.3	
Never married	1.4		1.0		1.8	*	1.9	***	0.9		1.2	
Reason for not working												
No desire	3.4	*	4.9	***	4.3	**	4.1	***	14.1	***	7.7	***
COVID	1.7	***	2.0	***	1.1		1.5	***	2.5	***	2.3	***
Caring for children	0.9		2.0	**	0.8		0.6		2.8	***	2.3	**
Caring for elderly	1.3		1.5		0.3		2.2		1.7		0.9	
Retired	24.8	***	3.8	***	3.3	*	1.5		4.4	*	1.0	
Disabled	0.6		29.6	***	3.8	***	0.8		27.5	***	3.4	**
Other	2.0	***	4.7	***	2.5	***	1.3		2.5	***	2.2	**
Household income												
$25K–$35K	0.9		0.5	***	0.4	***	0.8		0.5	***	0.8	
$35K–$50K	0.9		0.5	***	0.7		0.8		0.3	***	0.8	
$50K–$75K	0.7		0.3	***	0.3	**	0.6	***	0.4	***	0.5	***
$75K–$100K	0.8		0.3	***	0.3	***	0.8		0.3	***	0.5	**
$100K–$150K	0.6		0.2	***	0.3	***	1.0		0.2	***	0.3	***

$150K–$200K	0.6		0.3	***	0.2	***	0.9		0.2	***	0.3	*
More than $200K	0.7		0.1	***	0.3	***	0.8		0.1	***	0.2	***
Received unemployment insurance	1.7	***	0.6	***	0.7	*	1.0		0.7	*	0.8	
Received a stimulus payment	1.4	**	1.0		1.3		1.0		1.0		1.3	*
N	38,668		38,668		38,668		35,642		35,642		35,642	

Notes: In Phase 3, respondents were asked whether they applied to SSA benefits since March 13, 2020 and if not, how likely they were to apply for benefits in the next 12 months. Similarly, they were asked whether they received unemployment insurance since March 13, 2020. We assumed they received a stimulus payment if they responded that they used funds from a stimulus payment to meet their spending needs in the past seven days. The reference category is non-Hispanic white males who were married and working, had less than high school education level, had a household income of less than $25,000 per year, and did not receive unemployment insurance or stimulus funds. * $p < 0.10$; ** $p < 0.05$; *** $p < 0.01$. OASI = Old Age and Survivors Insurance; SSA = Social Security Administration; SSDI = Social Security Disability Insurance; SSI = Supplemental Security Income.
Source: HPS.

Table 6. *Estimates of the Effect of COVID-19 on Decision to Apply for Benefits and Application to SSA Programs in Phase 3.1 of HPS*

	Applied to OASI		Applied to SSDI		Applied to SSI		Likely apply to OASI		Likely apply to SSDI		Likely apply to SSI	
Odds ratio												
COVID-19 affected decision to apply for benefits	1.9	***	1.5	***	1.7	***	1.8	***	1.9	***	3.1	***
Age (mean)	1.1	***	1.0	***	1.0	**	1.1	***	1.0	***	1.0	
Gender												
Female	0.9		1.0		1.1		0.7	***	0.9		0.6	***
Race												
Black	1.1		1.6	***	1.1		1.1		1.0		1.1	
Asian	0.8		0.5	***	0.8		1.7	***	0.5	***	1.7	***
Other	1.1		1.5	**	1.9	***	1.2		1.6	***	2.1	***
Hispanic	0.9		0.7	**	0.9		1.0		0.5	***	0.9	
Level of education												
Some high school	0.9		0.8		0.7		0.7		0.7		0.7	
High school or equivalent	1.3		0.7		0.7		0.9		0.6	*	0.7	
Some college	1.3		0.7		0.5		0.9		0.6		0.7	
Associate's degree	1.1		0.5	*	0.5		0.7		0.6		0.7	
Bachelor's degree	1.0		0.4	***	0.3	**	0.7		0.4	***	0.5	**
Graduate degree	0.9		0.3	***	0.4		0.6		0.3	***	0.4	***
Marital status												
Widowed	1.5	**	0.8		2.1	**	2.0	***	0.9		1.5	
Divorced	1.1		1.2	*	1.9	***	1.1		1.6	***	1.6	***
Separated	0.7		1.5	*	2.0	**	1.0		1.4		1.6	**
Never Married	0.9		1.0		2.3	***	1.5	***	1.2	*	1.5	***
Reason for not working												
No desire	1.6		3.0	***	3.5	***	2.6	*	3.0	***	1.4	
COVID	1.0		4.7	***	3.0	***	1.6	***	3.6	***	3.0	***
Caring for children	1.0		2.8	***	2.4	***	0.9		3.9	***	2.1	***
Caring for elderly	0.8		4.4	***	3.4	***	2.1	***	7.3	***	3.3	***
Retired	6.0	***	4.0	***	4.0	***	1.8	***	1.6	***	1.7	*
Disabled	1.8	***	41.7	***	16.3	***	1.2		26.0	***	6.5	***
Other	1.5	*	5.9	***	3.1	***	1.1		4.1	***	2.4	***
Household income												
$25K–$35K	1.0		0.6	***	0.4	***	1.0		0.7	**	0.7	*
$35K–$50K	0.9		0.4	***	0.2	***	0.9		0.6	***	0.5	***
$50K–$75K	1.0		0.5	***	0.4	***	0.7	**	0.4	***	0.4	***
$75K–$100K	0.9		0.3	***	0.3	***	0.8		0.4	***	0.4	***

$100K–$150K	0.8		0.2	***	0.1	***	0.7	**	0.3	***	0.2	***
$150K–$200K	0.7	*	0.3	***	0.2	***	0.6	***	0.2	***	0.2	***
More than $200K	0.6	*	0.3	**	0.4		0.4	***	0.2	***	0.2	***
Received unemployment insurance	1.5	***	1.3	*	1.1		1.0		1.0		0.9	
Received stimulus	1.3	*	1.4	**	1.8	***	1.3	**	1.0		0.9	
N	210,772		210,772		210,772		202,114		202,114		202,114	

Notes: In Phase 3.1, respondents were asked whether they applied to SSA benefits since January 1, 2021 and if not, how likely they were to apply for benefits during 2021. Similarly, they were asked whether they received unemployment insurance since January 1, 2021 and whether they received a stimulus payment in the last seven days. The reference category is White, non-Hispanic males who were married and working, had less than high school education level, had a household income of less than $25,000 per year, and did not receive unemployment insurance or stimulus funds. * $p < 0.10$; ** $p < 0.05$; *** $p < 0.01$. OASI = Old Age and Survivors Insurance; SSA = Social Security Administration; SSDI = Social Security Disability Insurance; SSI = Supplemental Security Income.
Source: HPS.

In addition to the influence of COVID-19, we observed a number of other demographic characteristics associated with recent application or plans to apply. In most models, people who were married were less likely to have recently applied or planned to apply relative to widows or respondents who were separated or divorced. As expected, older ages were associated with higher likelihood of a recent application or plans to apply for OASI but not SSDI or SSI. Income, when statistically significant, exhibited an expected relationship: people with higher incomes were less likely to report having applied or being likely to apply. There was no consistent relationship by race and ethnicity or gender in recent or planned application.

These results also provide insight into the relationships of other pandemic-related payment programs, including the economic stimulus payments and expanded unemployment insurance. In unadjusted descriptive statistics (Appendix Tables 14–19) based on the time period from April 2021 to July 2021, comparing those who reported that COVID-19 influenced their decisions or plans to apply earlier versus later in the pandemic, people who planned to apply later than expected to OASI and SSDI were approximately two times more likely to have received an economic stimulus payment in the last three months. There was no statistically significant difference for likely future SSI applications. Those who had recently applied for SSDI were more likely to report COVID influenced their decision to apply earlier, rather than later, if they recently received a stimulus payment. Respondents planning to apply to OASI or SSDI were much more likely to plan to apply earlier than expected as compared with later (no other significant differences were observed). This finding might reflect a job loss that incentivized decisions toward earlier retirement or SSDI application.

Discussion and Conclusion

We examined longitudinal patterns in attitudes, behaviors, and experiences related to COVID-19 and compared them between people with and people without disabilities. We found important differences in a number of outcomes, and those differences diverged as the pandemic evolved. We also found that people with and without disabilities exhibited similar perceptions of the risk associated with social activities during COVID-19 and had similar views on the effectiveness of social mitigation strategies encouraged at the time to reduce infection. However, despite similar attitudes and perceptions of risk, people with disabilities were more likely to engage in activities that were more risk averse and, moreover, higher shares of people

with disabilities tended to engage in risk-averse behavior for longer than those without. People with disabilities were also much more likely to have a higher perceived chance of infection, hospitalization, and death due to COVID-19 compared with people without disabilities, perhaps in part because they had more friends or family who were hospitalized or died due to COVID-19 in the earlier part of the pandemic. People with disabilities were much more likely to report financial hardship—both due to COVID-19 and more generally—despite being much less likely to have received pandemic-related payments, such as stimulus payments or unemployment insurance. Finally, people with disabilities had higher levels of uncertainty about the effectiveness of various social mitigation strategies throughout the pandemic study period.

Given these documented differences in experiences and attitudes for people with disabilities, we sought to understand the potential effects of the pandemic on SSA programs serving people with disabilities. We found that for each of the Household Pulse data waves, approximately 7.5–9 percent of respondents said that they planned to apply to one or more SSA programs in the next year. Moreover, we found that the pandemic did influence individual decisions to apply earlier or later, with especially strong relationships for those who responded that the pandemic affected their decision to apply earlier. We find some descriptive evidence of a relationship between application and receipt of other pandemic-related economic payments, such as stimulus payments, but patterns are somewhat ambiguous.

Taken together, these findings reveal new evidence about differences in the behavior and attitudes related to COVID-19 for people with disabilities. Moreover, they suggest that evidence from the early part of the pandemic regarding disparities between people with and without disabilities persisted, and even expanded, as the pandemic evolved. Finally, based on self-reports, the pandemic does appear to have influenced the likelihood of applications and plans to apply to a number of SSA programs serving people with disabilities.

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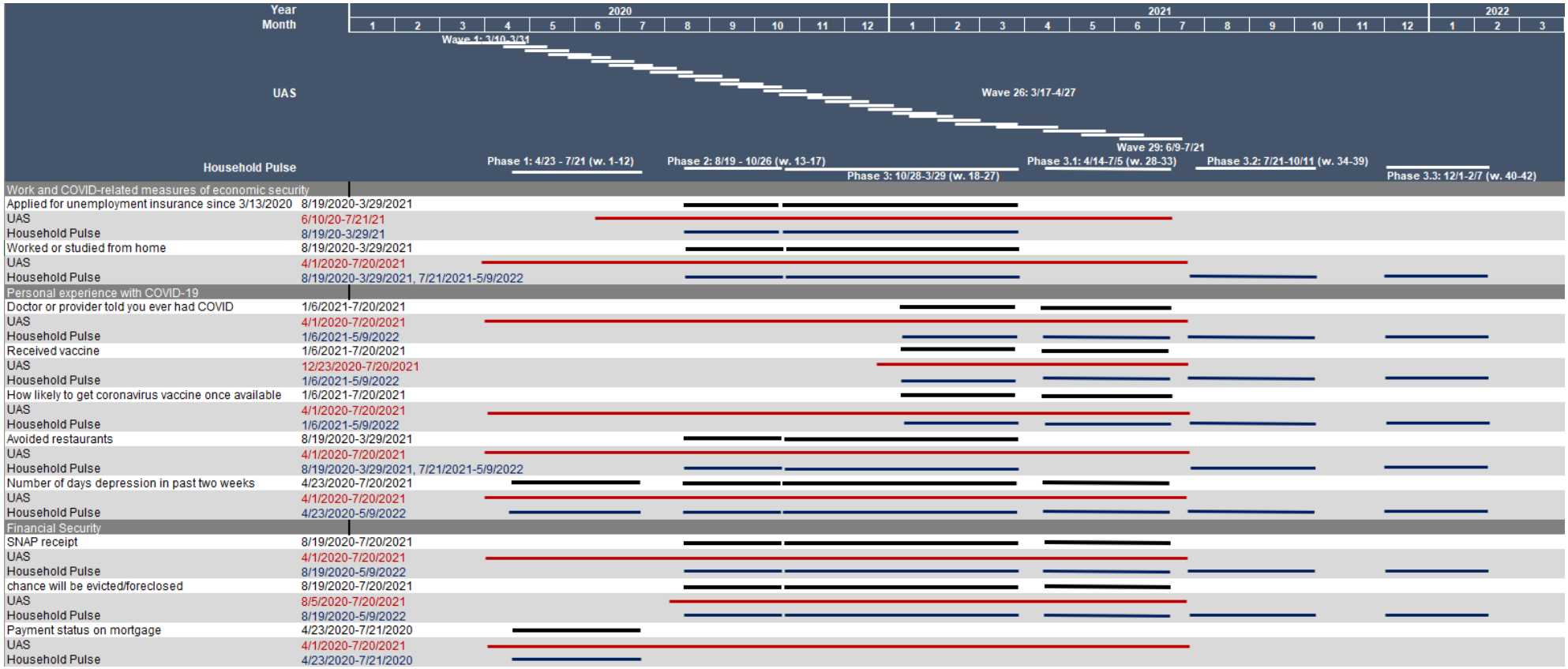
Appendix Table 1. *Gantt Chart of UAS and HH Pulse Survey Timing*



Appendix Table 2. *Baseline Demographic Information for UAS Respondents that Change Self-Reported Disability Status Over Time*

	Whole Sample	With Disability	Without Disability	Switchers	p-value	Sig.
Mean						
Age	51.0	55.4	50.5	52	0.00	***
Number of HH members	2.7	2.4	2.7	2.6	0.00	***
Percent of sample (%)						
Gender					0.04	##
Male	41.3	36.3	41.7	47.5	0.04	**
Female	58.7	63.7	58.3	52.5	0.04	**
Race					0.00	###
White	82.4	76.5	83.0	77.5	0.00	***
Black	8.9	14.5	8.3	15.0	0.00	***
Asian	2.8	0.4	3.0	2.5	0.00	***
AI/AN	0.9	1.3	0.9	0.0	0.45	
Hawaiian/PI	0.4	0.8	0.3	2.5	0.02	**
Mixed	4.6	6.6	4.5	2.5	0.08	*
Hispanic	7.5	4.8	7.8	12.5	0.02	**
Born in the US	93.0	96.0	92.7	92.5	0.02	**
Level of Education					0.00	###
Less than high school	0.8	2.1	0.6	0.0	0.00	***
Some high school	4.2	15.0	3.2	7.5	0.00	***
High school or equivalent	17.5	26.7	16.6	27.5	0.00	***
Some college	22.1	28.6	21.5	17.5	0.00	***
Associate's degree	14.7	18.0	14.3	17.5	0.06	*
Bachelor's degree	23.4	7.3	25.0	22.5	0.00	***
Graduate degree	17.4	2.3	18.9	7.5	0.00	***
Marital Status					0.00	###
Married	57.7	39.9	59.5	45.0	0.00	***
Divorced/Separated/Widowed	21.9	39.9	20.1	32.5	0.00	***
Never Married	20.4	20.2	20.4	22.5	0.94	
Labor Status					0.00	###
Working	55.3	0.0	60.9	30.0	0.00	***
Sick Leave	0.5	0.0	0.5	2.5	0.05	**
Unemployed-looking	4.6	0.0	5.0	12.5	0.00	***
Unemployed-on layoff	1.6	0.0	1.7	10.0	0.00	***
Retired	18.9	0.0	20.8	2.5	0.00	***
Disabled-not working	6.8	76.8	0.0	10.0	0.00	***
Other	5.5	0.0	6.1	5.0	0.00	***
Mixed	6.8	23.2	5.0	27.5	0.00	***
Household Income					0.00	###
Under $25K	19.0	59.1	15.0	35.0	0.00	***
Between $25K and $35K	9.1	15.0	8.5	12.5	0.00	***
Between $35K and $50K	12.3	10.4	12.5	20.0	0.13	
Between $50K and $75K	20.1	10.7	21.0	20.0	0.00	***
Between $75K and $100K	14.2	3.5	15.3	7.5	0.00	***
Between $100K and 150K	14.4	0.6	15.8	5.0	0.00	***
Over $150K	10.9	0.8	12.0	0.0	0.00	***

Health Conditions						
Diabetes	12.4	31.3	10.5	20.0	0.00	***
Cancer	7.0	8.9	6.8	10.0	0.16	
Heart disease	7.1	17.4	6.2	5.0	0.00	***
High blood pressure	33.4	54.1	31.3	52.5	0.00	***
Asthma	11.8	20.7	10.9	20.0	0.00	***
COPD	4.7	20.7	3.1	2.5	0.00	***
Kidney disease	2.9	7.7	2.4	7.5	0.00	***
Autoimmune disorder	6.6	16.0	5.7	10.0	0.00	***
Mental health condition	12.3	34.9	10.0	32.5	0.00	***
N	5,978	521	5,414	40		

Notes: T-test significance is shown in each applicable row using *. For categorical variables, Chi-square significance is shown in the variable heading row. Chi-square significance is shown using #. Blank columns indicate a p-value that is not significant at the $p < 0.10$ level. * $p < 0.10$; ** $p < 0.05$; *** $p < 0.01$. Abbreviations: HH = Household, PI =Pacific Islander, COPD = Chronic obstructive pulmonary disease.
Source: UAS (Understanding Coronavirus in America survey).

Appendix Table 3. *Adjusted Models of Time Trends in Behaviors and Experiences with COVID-19, from UAS*

	Wave 12					Wave 25					Wave 29				
	Whole Sample	With Disability	Without Disability	p-value	Sig.	Whole Sample	With Disability	Without Disability	p-value	Sig.	Whole Sample	With Disability	Without Disability	p-value	Sig.
Percent of sample (%)															
Behaviors during COVID-19															
Attended a gathering with more than 10 people in the past 7 days	19.3	21.5	19.2	0.46		16.9	14.8	17.1	0.43		38.1	36.8	38.1	0.73	
Sought care from a hospital or health care facility in the past 7 days	9.2	10.5	9.0	0.40		9.9	13.0	9.5	0.10		10.5	11.4	10.4	0.62	
Remained in residence except for essential activities in the past 7 days	38.4	41.6	38.1	0.28		39.2	40.9	39.0	0.59		22.9	25.2	22.6	0.36	
Avoided contact with high-risk people in the past 7 days	80.6	79.6	80.6	0.73		78.4	76.8	78.5	0.61		63.4	64.6	63.2	0.72	
Avoided public spaces in the past 7 days	71.7	68.4	72.0	0.25		68.8	65.4	69.1	0.28		46.8	49.5	46.5	0.39	
Avoided restaurants in the past 7 days	63.0	68.6	62.4	0.08	*	59.4	61.3	59.2	0.56		36.3	39.6	35.8	0.26	
Beliefs about safety during COVID-19															
Believes it is safe to attend gatherings of 100 or more people	12.2	13.2	12.2	0.71		13.3	16.0	13.0	0.28		25.0	23.6	25.1	0.63	
Believes it is safe to dine in at restaurants	29.5	31.7	29.3	0.49		35.4	37.8	35.2	0.49		54.9	55.4	55.0	0.91	
Believes it is safe to go to the grocery store	52.4	59.0	51.7	0.05	**	56.2	60.8	55.7	0.18		67.8	67.4	67.8	0.91	
Believes it is safe to go to the hospital	29.2	37.0	28.5	0.01	**	36.0	39.3	35.7	0.34		47.1	45.0	47.3	0.54	
Perceptions about those with COVID-19															
Believes people think those with COVID-19 are dangerous	56.6	55.9	56.8	0.81		51.4	51.4	51.5	0.98		46.1	45.2	46.3	0.78	
Believes people think those who had COVID-19 are dangerous	27.5	31.5	27.1	0.16		21.0	23.7	20.6	0.28		17.4	16.4	17.6	0.64	
Believes people think having COVID-19 is a sign of weakness	11.4	10.1	11.5	0.56		11.7	11.5	11.7	0.95		11.8	11.5	11.9	0.88	
Believes if they caught COVID-19 it would be a sign of weakness	8.8	7.1	9.1	0.33		10.7	13.1	10.4	0.29		10.7	11.2	10.7	0.83	
Beliefs about COVID-19 prevention															
Worn a facemask in the past 7 days	90.7	82.1	91.4	0.00	***	90.0	87.4	90.3	0.20		63.7	62.0	63.9	0.58	
Believes face mask is effective to prevent COVID-19	88.2	85.5	88.5	0.21		88.3	86.1	88.5	0.32		85.4	82.6	85.7	0.25	
Likely to get vaccine once available	66.4	64.5	66.5	0.58		57.6	53.8	58.0	0.33		20.8	19.2	21.1	0.71	
Work and receipt of economic benefits															
Received unemployment insurance the past 14 days	5.2	3.1	5.5	0.17		4.3	2.5	4.5	0.19		3.5	2.8	3.6	0.60	
Received economic stimulus funds in the past month	6.7	9.3	6.4	0.10		14.3	15.3	14.2	0.67		5.8	10.7	5.2	0.00	***

Received aid for people or businesses affected by the coronavirus epidemic in the past month	1.0	1.5	0.9	0.56		1.0	2.3	0.7	0.08	*	1.2	1.8	1.0	0.29	
Worked or studied from home in the past 7 days	44.0	45.7	43.9	0.60		44.0	47.5	43.6	0.27		33.5	39.2	32.8	0.07	*
Financial security															
Confident they could come up with $2000 for an unexpected expense in the next month	77.4	64.3	79.3	0.00	***	79.3	69.6	80.8	0.00	***	79.8	70.0	81.5	0.00	***
Mean															
Risk of COVID-19-related complications															
Perceived chance of being hospitalized if infected with COVID	22.6	24.5	22.4	0.31		17.9	20.7	17.6	0.12		14.2	16.1	13.9	0.26	
Perceived chance of death due to COVID in next 3 months	17.6	19.7	17.4	0.27		15.0	18.2	14.7	0.06	*	12.1	15.1	11.7	0.07	*
Perceived chance of getting COVID in next 3 months	21.2	21.8	21.2	0.70		20.0	22.5	19.7	0.13		12.8	13.1	12.7	0.80	
Financial security															
Perceived chance of job loss due to COVID in next 3 months	12.0	8.6	12.0	0.30		9.2	8.5	9.3	0.89		8.0	9.3	7.9	0.71	
Perceived chance of running out of money due to COVID in next 3 months	15.3	18.8	15.0	0.07	*	13.2	17.1	12.7	0.03	**	12.1	17.9	11.5	0.00	***
Perceived chance of being evicted in the next month	7.2	7.2	7.2	0.99		6.9	6.3	7.0	0.72		6.2	8.4	6.0	0.29	
COVID-19 experience of friends and family															
Number of close friends and family that have been hospitalized due to COVID	0.3	0.2	0.3	0.56		0.8	0.8	0.7	0.75		0.8	0.7	0.8	0.59	
Number of close friends and family that have died due to COVID	0.1	0.2	0.1	0.17		0.3	0.4	0.3	0.30		0.4	0.3	0.4	0.30	
Number of close friends and family that have received the vaccine						5.7	4.7	5.8	0.32		19.9	23.4	19.5	0.50	
N	4,456	425	4,028			4,416	417	3,996			4,205	396	3,806		

Notes: We adjust for age, sex, marital status and race and ethnicity. T-test significance is shown in each applicable row using *. For categorical variables, Chi-square significance is shown in the variable heading row. Chi-square significance is shown using #. Blank columns indicate a p-value that is not significant at the $p < 0.10$ level. * $p < 0.10$; ** $p < 0.05$; *** $p < 0.01$.
Source: UAS (Understanding Coronavirus in America survey).

Appendix Table 4. *Comparison of UAS and HH Pulse COVID Question Wording and Timing*

	UAS		HH Pulse			
	Description	Time period	Description	Time period	Timing of question	Overlapping time period
Work and COVID-related measures of economic security						
Applied for unemployment insurance	Have you applied for unemployment insurance since February 2020?	6/10/20-7/20/21	Since March 13, 2020, have you applied for Unemployment Insurance (UI) benefits?	8/19/20-3/29/21	Ever since	8/19/2020-3/29/2021
Worked or studied from home	Which of the following have you done in the last seven days to keep yourself safe from coronavirus… Worked or studied at home?	4/1/2020-7/20/2021	In the last 7 days, have you or your household done any of the following… Teleworked or worked from home?	8/19/2020-3/29/2021, 7/21/2021-5/9/2022	Last week	8/19/2020-3/29/2021
Personal experience with COVID-19						
Doctor or provider told you ever had COVID	Whether or not you have had a coronavirus test, has a doctor or another healthcare professional diagnosed you as having or probably having the coronavirus?	4/1/2020-7/20/2021	Has a doctor or other health care provider ever told you that you have COVID-19?	1/6/2021-5/9/2022	Ever	1/6/2021-7/20/2021
Received vaccine	Have you gotten vaccinated for the coronavirus?	12/23/2020-7/20/2021	Have you received a COVID-19 vaccine?	1/6/2021-5/9/2022	Ever	1/6/2021-7/20/2021
Likely to get coronavirus vaccine once available	How likely are you to get vaccinated for coronavirus once a vaccine is available to the public?	4/1/2020-6/22/2020, 6/24/2020-7/20/2020, 7/22/2020-7/20/2021	Once a vaccine to prevent COVID-19 is available to you, would you definitely, probably, be unsure about, probably not, or definitely not get a vaccine?	1/6/2021-3/29/2021, 4/14/2021-5/9/2022	Current	1/6/2021-3/29/2021, 4/14/2021-7/20/2021
Avoided restaurants	Which of the following have you done in the last seven days to keep yourself safe from coronavirus... Avoided eating at restaurants?	4/1/2020-7/20/2021	In the last 7 days, which of the following changes have you or your household made to your spending or shopping... Avoided eating at restaurants?	8/19/2020-3/29/2021, 7/21/2021-5/9/2022	Last week	8/19/2020-3/29/2021
Had depression in past two weeks	Over the past fourteen days, how often bothered by any of the following problems... feeling down, depressed, or hopeless?	4/1/2020-7/20/2021	Over the last 7 days, how often bothered by...feeling down, depressed, or hopeless?	4/23/2020-5/9/2022	Last week/ 2 weeks	4/23/2020-7/20/2021

Work and Financial Security						
SNAP receipt	In the past month, did you or anyone in your household receive any of the following government benefits... Supplemental Nutrition Assistance Program (SNAP or Food Stamps)?	4/1/2020-7/20/2020, 7/22/2020-7/20/2021	Do you or does anyone in your household receive benefits from the Supplemental Nutrition Assistance Program (SNAP) or the Food Stamp Program?	8/19/2020-5/9/2022	Last month/ current	8/19/2020-7/20/2021
Likely to be evicted/foreclosed	What is the percent chance that you will be evicted, go into foreclosure, or be forced by a landlord to move from your current residence in the next thirty days?	8/5/2020-7/20/2021	How likely is it that your household will have to leave this home or apartment within the next two months because of eviction? How likely is it that your household will have to leave this home within the next two months because of foreclosure?	8/19/2020-5/9/2022	Current	8/19/2020-7/20/2021
Missed or delayed payment on mortgage or rent	In the past month, did you miss or delay payment on your mortgage, or did you pay less than the full amount?	4/1/2020-6/22/2020, 6/24/2020-7/20/2020, 7/22/2020-7/20/2021	Did you pay your last month's rent or mortgage on time?	4/23/2020-7/21/2020	Last month	4/23/2020-7/21/2020

Abbreviations: UI = Unemployment Insurance, SNAP = Supplemental Nutrition Assistance Program.
Sources: UAS (Understanding Coronavirus in America survey) and HPS.

Appendix Table 5. *Data Waves Used for Comparison of UAS and HH Pulse COVID Point-in-Time Outcomes*

Variable	UAS				HH Pulse			
	Really early	Early	Middle	Late	Really early	Early	Middle	Late
Likely to get coronavirus vaccine once available		January 2021 (wave 22)	Feb/March 2021 (wave 25)	June/July 2021 (wave 29)		January 2021 (week 22-23)	Feb/March 2021 (week 25-27)	June/July 2021 (week 32-33)
Avoided restaurants		August 2020 (wave 12)	Feb/March 2021 (wave 25)			August 2020 (week 13)	Feb/March 2021 (week 25-27)	
Had depression in past two weeks	April 2020 (wave 4)	August 2020 (wave 12)	Feb/March 2021 (wave 25)	June/July 2021 (wave 29)	April 2020 (week 1)	August 2020 (week 13)	Feb/March 2021 (week 25-27)	June/July 2021 (week 32-33)
Worked or studied from home		August 2020 (wave 12)	Feb/March 2021 (wave 25)			August 2020 (week 13)	Feb/March 2021 (week 25-27)	
SNAP receipt		August 2020 (wave 12)	Feb/March 2021 (wave 25)	June/July 2021 (wave 29)		August 2020 (week 13)	Feb/March 2021 (week 25-27)	June/July 2021 (week 32-33)
Likely to be evicted/ foreclosed		August 2020 (wave 12)	Feb/March 2021 (wave 25)	June/July 2021 (wave 29)		August 2020 (week 13)	Feb/March 2021 (week 25-27)	June/July 2021 (week 32-33)
Missed or delayed payment on mortgage or rent	April 2020 (wave 4)	July 2020 (wave 8)			April 2020 (week 1)	July 2020 (week 9-12)		

Source: UAS (Understanding Coronavirus in America survey) and HPS.

Appendix Table 6. *Behaviors during COVID-19, by Disability Status*

	Attended a gathering with more than 10 people in the past 7 days					Remained in residence except for essential activities in the past 7 days					Avoided restaurants in the past 7 days				
	Whole Sample	With Disability	Without Disability	p-value	Sig.	Whole Sample	With Disability	Without Disability	p-value	Sig.	Whole Sample	With Disability	Without Disability	p-value	Sig.
Percent of sample (%)															
4/1/2020	1.9	3.4	1.7	0.14		77.3	81.2	76.9	0.15		86.6	88.3	86.4	0.45	
4/15/2020	2.0	2.5	2.0	0.61		71.1	73.7	70.8	0.33		83.3	85.1	83.1	0.43	
4/29/2020	3.9	3.3	3.9	0.67		62.2	66.5	61.8	0.14		80.0	78.4	80.1	0.51	
5/13/2020	8.2	7.4	8.3	0.63		54.3	64.9	53.2	0.00	***	74.0	77.6	73.7	0.18	
5/27/2020	15.0	14.8	15.1	0.90		45.7	55.5	44.7	0.00	***	67.0	71.5	66.5	0.10	
6/10/2020	19.1	17.5	19.3	0.50		42.3	55.1	41.0	0.00	***	65.9	72.7	65.2	0.01	**
6/24/2020	20.8	18.3	21.0	0.33		40.9	53.5	39.7	0.00	***	67.9	75.6	67.2	0.01	***
7/8/2020	18.0	13.8	18.4	0.07	*	41.9	53.5	40.7	0.00	***	68.5	71.3	68.1	0.28	
7/22/2020	19.0	14.7	19.4	0.09	*	41.8	52.1	40.7	0.00	***	67.6	75.3	66.9	0.00	***
8/5/2020	18.7	13.5	19.3	0.03	**	39.4	53.8	37.9	0.00	***	65.2	69.1	64.8	0.15	
8/19/2020	19.2	16.7	19.5	0.31		38.8	49.0	37.8	0.00	***	63.2	70.7	62.4	0.01	***
9/2/2020	19.8	15.7	20.3	0.09	*	36.9	49.1	35.7	0.00	***	62.4	68.6	61.8	0.03	**
9/16/2020	20.3	13.6	21.0	0.01	***	35.0	45.6	33.9	0.00	***	59.4	66.3	58.7	0.02	**
9/30/2020	20.0	12.6	20.8	0.00	***	35.4	44.3	34.5	0.00	***	60.2	66.8	59.6	0.02	**
10/14/2020	20.0	12.6	20.8	0.00	***	37.0	45.3	36.1	0.00	***	60.1	62.4	59.8	0.42	
10/28/2020	19.4	12.4	20.1	0.00	***	38.3	49.7	37.0	0.00	***	60.4	64.1	59.9	0.18	
11/11/2020	15.5	9.7	16.1	0.01	***	42.1	49.5	41.3	0.01	**	64.0	68.5	63.5	0.10	
11/25/2020	14.9	11.4	15.3	0.09	*	41.6	50.2	40.7	0.00	***	69.1	72.8	68.7	0.18	
12/9/2020	14.5	11.8	14.8	0.24		44.0	50.1	43.4	0.04	**	68.9	73.9	68.3	0.06	*
12/23/2020	15.9	11.3	16.4	0.04	**	40.9	51.9	39.7	0.00	***	67.9	69.3	67.8	0.62	
1/6/2021	13.5	9.2	13.9	0.05	*	44.1	52.8	43.2	0.00	***	66.1	68.8	65.7	0.31	
1/20/2021	14.8	9.0	15.4	0.01	***	43.6	56.3	42.2	0.00	***	66.0	70.4	65.6	0.11	
2/3/2021	14.0	9.5	14.5	0.04	**	42.8	52.7	41.7	0.00	***	64.1	68.7	63.6	0.11	
2/17/2021	16.9	12.0	17.5	0.03	**	39.3	47.9	38.3	0.00	***	59.5	63.7	59.0	0.15	
3/17/2021	22.5	14.1	23.4	0.00	***	34.0	47.9	32.5	0.00	***	53.6	63.0	52.6	0.00	***
4/14/2021	25.8	16.3	26.9	0.00	***	29.6	41.3	28.3	0.00	***	49.7	54.9	49.1	0.09	*
5/12/2021	32.3	17.9	33.9	0.00	***	26.2	38.5	24.8	0.00	***	42.7	53.4	41.4	0.00	***
6/9/2021	37.8	27.7	38.8	0.00	***	23.3	35.9	21.9	0.00	***	36.5	48.3	35.1	0.00	***

	Avoided contact with high-risk people in the past 7 days					Avoided public spaces in the past 7 days					Sought care from a hospital or health care facility in the past 7 days				
	Whole Sample	With Disability	Without Disability	p-value	Sig.	Whole Sample	With Disability	Without Disability	p-value	Sig.	Whole Sample	With Disability	Without Disability	p-value	Sig.
Percent of sample (%)															
4/1/2020	88.8	89.6	88.7	0.70		90.0	90.8	89.9	0.67		4.4	7.5	4.0	0.03	**
4/15/2020	87.3	88.1	87.2	0.72		87.7	85.4	87.9	0.26		4.6	10.5	4.0	0.00	***
4/29/2020	82.5	79.8	82.7	0.25		83.4	83.3	83.4	0.98		4.4	11.4	3.7	0.00	***
5/13/2020	79.3	80.2	79.2	0.72		77.2	79.8	77.0	0.30		5.5	11.4	4.8	0.00	***
5/27/2020	76.3	79.6	76.0	0.20		72.2	70.4	72.3	0.51		6.0	11.3	5.4	0.00	***
6/10/2020	82.1	80.7	82.2	0.58		71.4	72.8	71.2	0.58		8.0	15.2	7.2	0.00	***
6/24/2020	83.4	88.3	83.0	0.04	**	72.8	75.0	72.6	0.42		7.6	12.4	7.1	0.00	***
7/8/2020	85.1	85.8	85.0	0.73		76.0	77.6	75.8	0.50		9.1	15.6	8.4	0.00	***
7/22/2020	83.0	81.2	83.1	0.44		75.2	72.7	75.4	0.34		8.2	16.3	7.3	0.00	***
8/5/2020	82.9	84.7	82.7	0.45		73.7	73.6	73.6	1.00		8.8	16.8	8.0	0.00	***
8/19/2020	80.7	80.3	80.8	0.87		72.0	70.1	72.1	0.48		9.1	14.0	8.6	0.00	***
9/2/2020	81.2	82.0	81.1	0.72		71.1	72.7	70.9	0.54		8.1	16.7	7.1	0.00	***
9/16/2020	80.8	82.0	80.7	0.62		70.3	72.9	70.0	0.33		9.6	16.4	8.9	0.00	***
9/30/2020	81.2	80.7	81.3	0.83		70.6	74.9	70.2	0.12		9.2	16.0	8.4	0.00	***
10/14/2020	80.9	80.1	80.9	0.76		70.7	70.9	70.6	0.92		8.7	15.3	8.0	0.00	***
10/28/2020	81.2	81.3	81.2	0.95		71.3	72.0	71.2	0.79		9.0	14.5	8.4	0.00	***
11/11/2020	81.4	83.9	81.2	0.30		73.7	74.8	73.5	0.65		8.2	15.9	7.4	0.00	***
11/25/2020	82.7	82.5	82.7	0.96		76.1	76.4	76.1	0.92		7.8	16.8	6.8	0.00	***
12/9/2020	82.9	82.6	82.9	0.91		73.9	72.5	74.0	0.61		8.3	17.2	7.4	0.00	***
12/23/2020	80.9	81.1	80.8	0.93		73.9	75.9	73.7	0.43		7.0	13.1	6.3	0.00	***
1/6/2021	81.4	80.1	81.5	0.60		75.2	74.2	75.4	0.69		9.5	19.9	8.3	0.00	***
1/20/2021	82.0	83.9	81.8	0.41		74.0	76.2	73.7	0.40		9.2	17.6	8.2	0.00	***
2/3/2021	80.5	80.9	80.5	0.89		72.4	71.8	72.5	0.83		8.6	18.4	7.5	0.00	***
2/17/2021	78.6	78.2	78.6	0.91		68.8	68.7	68.8	0.97		10.1	17.1	9.3	0.00	***
3/17/2021	77.9	80.5	77.7	0.32		66.0	69.8	65.6	0.19		10.4	18.0	9.5	0.00	***
4/14/2021	73.3	76.1	72.9	0.31		61.2	64.3	60.8	0.28		9.8	18.4	8.8	0.00	***
5/12/2021	69.2	72.8	68.8	0.22		53.1	61.7	52.0	0.00	***	10.3	19.7	9.2	0.00	***
6/9/2021	63.6	69.1	63.0	0.07	*	47.3	56.9	46.2	0.00	***	10.5	16.1	9.8	0.00	***

Notes: T-test significance is shown in each applicable row using *. Blank columns indicate a p-value that is not significant at the $p < 0.10$ level. * $p < 0.10$; ** $p < 0.05$; *** $p < 0.01$.
Source: UAS (Understanding Coronavirus in America survey).

Appendix Table 7. *Beliefs about Safety during COVID-19, by Disability Status*

	Believes it is safe to attend gatherings of 100 or more people					Believes it is safe to dine in at restaurants					Believes it is safe to go to the grocery store				
	Whole Sample	With Disability	Without Disability	p-value	Sig.	Whole Sample	With Disability	Without Disability	p-value	Sig.	Whole Sample	With Disability	Without Disability	p-value	Sig.
Percent of sample (%)															
4/1/2020	4.9	5.0	4.9	0.93		4.3	4.4	4.3	0.93		21.6	24.1	21.4	0.32	
4/15/2020	6.2	11.9	5.6	0.00	***	5.5	7.3	5.3	0.21		28.4	28.4	28.3	0.99	
4/29/2020	8.3	9.5	8.2	0.47		10.4	11.6	10.3	0.53		34.7	31.7	35.0	0.28	
5/13/2020	10.1	10.4	10.0	0.87		18.2	17.5	18.3	0.76		43.4	41.8	43.5	0.59	
5/27/2020	12.7	11.7	12.9	0.61		23.2	23.1	23.3	0.94		48.3	41.6	49.0	0.02	**
6/10/2020	11.9	13.7	11.7	0.38		26.5	23.1	26.8	0.20		50.2	44.9	50.8	0.07	*
6/24/2020	11.5	12.2	11.4	0.74		24.5	23.3	24.7	0.64		47.0	44.0	47.3	0.31	
7/8/2020	11.1	11.4	11.1	0.90		24.1	21.3	24.4	0.25		49.6	41.7	50.4	0.01	***
7/22/2020	11.0	10.6	11.1	0.79		26.4	24.3	26.6	0.41		48.8	45.4	49.2	0.24	
8/5/2020	12.1	13.9	11.9	0.38		27.7	25.0	28.0	0.32		51.0	48.9	51.2	0.49	
8/19/2020	12.3	11.5	12.4	0.72		29.3	27.6	29.5	0.54		52.3	50.5	52.4	0.57	
9/2/2020	12.4	14.0	12.3	0.43		31.3	33.6	31.1	0.43		53.8	51.8	54.0	0.49	
9/16/2020	13.0	13.3	12.9	0.86		31.0	29.9	31.1	0.69		53.2	44.5	54.1	0.00	***
9/30/2020	12.4	12.7	12.3	0.86		30.7	28.4	30.9	0.40		54.4	51.2	54.7	0.28	
10/14/2020	11.9	13.6	11.8	0.42		31.8	33.5	31.7	0.58		54.3	52.0	54.6	0.44	
10/28/2020	11.8	10.8	11.9	0.59		30.9	32.1	30.9	0.67		53.5	51.2	53.7	0.44	
11/11/2020	10.8	11.6	10.7	0.63		27.5	28.9	27.4	0.61		51.8	49.0	52.1	0.34	
11/25/2020	10.4	9.5	10.5	0.63		27.0	26.3	27.1	0.79		50.3	46.3	50.8	0.18	
12/9/2020	9.8	16.4	9.2	0.00	***	27.9	30.3	27.7	0.39		49.9	48.9	50.0	0.76	
12/23/2020	10.6	11.7	10.5	0.57		28.6	31.0	28.3	0.38		50.8	51.7	50.7	0.76	
1/6/2021	10.0	9.6	10.0	0.85		28.9	28.9	29.0	0.97		50.6	47.8	51.0	0.34	
1/20/2021	10.8	8.9	11.0	0.32		30.5	29.0	30.7	0.60		52.3	46.6	52.9	0.05	*
2/3/2021	11.3	10.3	11.4	0.60		31.0	31.9	30.9	0.76		51.6	43.5	52.4	0.01	***
2/17/2021	13.3	14.7	13.1	0.51		35.3	34.9	35.4	0.89		56.2	54.3	56.4	0.54	
3/17/2021	14.0	11.7	14.3	0.30		37.3	35.7	37.5	0.57		57.0	49.9	57.8	0.02	**
4/14/2021	17.1	15.9	17.2	0.63		42.0	38.9	42.4	0.30		60.8	56.5	61.2	0.17	
5/12/2021	21.5	21.7	21.5	0.96		49.5	47.6	49.8	0.53		65.0	58.9	65.6	0.04	**
6/9/2021	25.0	21.5	25.4	0.19		54.7	47.3	55.6	0.01	**	67.4	58.0	68.4	0.00	***

Appendix Table 7. *Beliefs about Safety during COVID-19, by Disability Status (continued)*

	Believes it is safe to go to the hospital				
	Whole Sample	With Disability	Without Disability	p-value	Sig.
Percent of sample (%)					
4/1/2020	10.9	16.1	10.4	0.01	**
4/15/2020	13.7	20.8	13.0	0.00	***
4/29/2020	17.4	24.6	16.7	0.00	***
5/13/2020	23.1	30.5	22.4	0.00	***
5/27/2020	26.6	32.7	26.0	0.02	**
6/10/2020	28.2	31.7	27.9	0.20	
6/24/2020	27.5	32.3	27.0	0.08	*
7/8/2020	27.5	32.1	27.1	0.09	*
7/22/2020	27.3	33.4	26.7	0.03	**
8/5/2020	28.6	35.8	27.8	0.01	***
8/19/2020	29.4	36.1	28.7	0.02	**
9/2/2020	30.7	40.2	29.7	0.00	***
9/16/2020	30.7	34.6	30.3	0.19	
9/30/2020	30.3	37.3	29.6	0.01	**
10/14/2020	32.4	37.9	31.8	0.06	*
10/28/2020	31.8	36.6	31.3	0.09	*
11/11/2020	30.3	37.1	29.6	0.02	**
11/25/2020	29.8	32.8	29.5	0.28	
12/9/2020	29.8	32.3	29.6	0.38	
12/23/2020	30.0	33.9	29.6	0.17	
1/6/2021	30.2	28.6	30.4	0.57	
1/20/2021	32.6	32.7	32.6	0.97	
2/3/2021	33.5	36.5	33.2	0.29	
2/17/2021	36.1	37.1	36.0	0.75	
3/17/2021	38.6	39.7	38.6	0.75	
4/14/2021	40.7	37.8	41.1	0.34	
5/12/2021	43.3	44.4	43.2	0.73	
6/9/2021	47.0	41.7	47.7	0.09	*

Notes: T-test significance is shown in each applicable row using *. Blank columns indicate a p-value that is not significant at the $p < 0.10$ level. * $p < 0.10$; ** $p < 0.05$; *** $p < 0.01$.
Source: UAS (Understanding Coronavirus in America survey).

Appendix Table 8. *Beliefs about Preventative Measures Related to COVID-19, by Disability Status*

	Worn a face mask in the past 7 days					Believes face mask if effective to prevent COVID					Likely to get vaccine once available[a]				
	Whole Sample	With Disability	Without Disability	p-value	Sig.	Whole Sample	With Disability	Without Disability	p-value	Sig.	Whole Sample	With Disability	Without Disability	p-value	Sig.
Percent of sample (%)															
4/1/2020	47.0	49.7	46.8	0.39		88.6	89.6	88.5	0.61		82.0	84.6	81.7	0.29	
4/15/2020	70.9	67.0	71.3	0.12		89.5	88.8	89.5	0.72		76.1	74.9	76.2	0.66	
4/29/2020	79.8	74.7	80.3	0.03	**	89.2	87.5	89.4	0.34		73.6	74.5	73.5	0.76	
5/13/2020	82.6	76.6	83.1	0.01	***	87.6	84.6	87.9	0.15		70.3	70.3	70.3	0.99	
5/27/2020	82.4	76.2	82.9	0.01	***	87.3	81.3	87.8	0.00	***	71.0	69.8	71.1	0.69	
6/10/2020	83.5	76.3	84.2	0.00	***	88.2	84.9	88.5	0.11		0.0	0.0	0.0		
6/24/2020	85.5	79.5	86.1	0.00	***	88.9	81.7	89.6	0.00	***	69.9	70.5	69.8	0.83	
7/8/2020	88.6	84.2	89.0	0.02	**	88.7	87.9	88.7	0.72		0.0	0.0	0.0		
7/22/2020	90.8	86.5	91.1	0.02	**	88.4	88.2	88.4	0.93		69.0	68.0	69.0	0.73	
8/5/2020	91.7	85.1	92.3	0.00	***	88.7	85.5	89.0	0.09	*	67.0	66.3	67.0	0.81	
8/19/2020	90.7	83.0	91.4	0.00	***	88.3	85.3	88.6	0.15		66.2	64.1	66.4	0.49	
9/2/2020	90.9	84.1	91.5	0.00	***	88.0	89.1	87.9	0.59		64.9	65.9	64.8	0.74	
9/16/2020	90.3	82.1	91.0	0.00	***	88.3	84.5	88.6	0.09	*	61.0	57.7	61.3	0.32	
9/30/2020	90.3	81.3	91.1	0.00	***	88.0	85.7	88.3	0.27		61.5	59.9	61.6	0.62	
10/14/2020	91.4	84.1	92.1	0.00	***	88.5	86.1	88.7	0.23		62.2	55.2	62.9	0.03	**
10/28/2020	89.6	84.9	90.0	0.01	**	89.2	84.1	89.6	0.01	**	61.8	58.6	62.1	0.30	
11/11/2020	91.0	86.1	91.4	0.01	***	88.9	85.3	89.2	0.08	*	64.4	56.7	65.1	0.01	**
11/25/2020	91.7	88.9	92.0	0.10		88.3	83.9	88.7	0.05	**	64.9	62.2	65.2	0.36	
12/9/2020	91.2	85.8	91.7	0.00	***	89.3	87.3	89.4	0.33		65.5	60.8	65.9	0.12	
12/23/2020	90.9	86.7	91.3	0.02	**	88.8	86.2	89.0	0.20		64.0	61.4	64.2	0.40	
1/6/2021	90.9	85.6	91.4	0.00	***	89.2	85.4	89.5	0.07	*	63.3	61.4	63.4	0.54	
1/20/2021	91.4	87.0	91.8	0.01	**	89.1	87.0	89.3	0.30		62.7	60.2	63.0	0.43	
2/3/2021	90.6	87.5	90.9	0.08	*	88.2	87.5	88.2	0.74		61.4	55.8	61.9	0.09	*
2/17/2021	90.1	87.7	90.3	0.19		88.5	86.0	88.7	0.25		57.7	53.0	58.2	0.18	
3/17/2021	89.0	88.0	89.1	0.60		87.9	87.7	87.9	0.93		48.7	50.9	48.4	0.59	
4/14/2021	87.2	83.6	87.5	0.09	*	87.3	88.4	87.1	0.60		30.8	33.5	30.5	0.55	
5/12/2021	79.5	74.3	80.0	0.03	**	85.5	85.0	85.5	0.81		26.7	34.8	25.3	0.05	*
6/9/2021	64.0	65.5	63.8	0.57		85.5	81.3	85.9	0.07	*	20.9	24.3	20.5	0.41	

[a] Of those that have not yet received the coronavirus vaccine

Notes: T-test significance is shown in each applicable row using *. Blank columns indicate a p-value that is not significant at the $p < 0.10$ level. * $p < 0.10$; ** $p < 0.05$; *** $p < 0.01$.

Source: UAS (Understanding Coronavirus in America survey).

Appendix Table 9. *Perceptions about Others with COVID-19, by Disability Status*

	Worn a face mask in the past 7 days					Believes face mask if effective to prevent COVID-19				
	Whole Sample	With Disability	Without Disability	p-value	Sig.	Whole Sample	With Disability	Without Disability	p-value	Sig.
Percent of sample (%)										
4/1/2020	47.0	49.7	46.8	0.39		88.6	89.6	88.5	0.61	
4/15/2020	70.9	67.0	71.3	0.12		89.5	88.8	89.5	0.72	
4/29/2020	79.8	74.7	80.3	0.03	**	89.2	87.5	89.4	0.34	
5/13/2020	82.6	76.6	83.1	0.01	***	87.6	84.6	87.9	0.15	
5/27/2020	82.4	76.2	82.9	0.01	***	87.3	81.3	87.8	0.00	***
6/10/2020	83.5	76.3	84.2	0.00	***	88.2	84.9	88.5	0.11	
6/24/2020	85.5	79.5	86.1	0.00	***	88.9	81.7	89.6	0.00	***
7/8/2020	88.6	84.2	89.0	0.02	**	88.7	87.9	88.7	0.72	
7/22/2020	90.8	86.5	91.1	0.02	**	88.4	88.2	88.4	0.93	
8/5/2020	91.7	85.1	92.3	0.00	***	88.7	85.5	89.0	0.09	*
8/19/2020	90.7	83.0	91.4	0.00	***	88.3	85.3	88.6	0.15	
9/2/2020	90.9	84.1	91.5	0.00	***	88.0	89.1	87.9	0.59	
9/16/2020	90.3	82.1	91.0	0.00	***	88.3	84.5	88.6	0.09	*
9/30/2020	90.3	81.3	91.1	0.00	***	88.0	85.7	88.3	0.27	
10/14/2020	91.4	84.1	92.1	0.00	***	88.5	86.1	88.7	0.23	
10/28/2020	89.6	84.9	90.0	0.01	**	89.2	84.1	89.6	0.01	**
11/11/2020	91.0	86.1	91.4	0.01	***	88.9	85.3	89.2	0.08	*
11/25/2020	91.7	88.9	92.0	0.10		88.3	83.9	88.7	0.05	**
12/9/2020	91.2	85.8	91.7	0.00	***	89.3	87.3	89.4	0.33	
12/23/2020	90.9	86.7	91.3	0.02	**	88.8	86.2	89.0	0.20	
1/6/2021	90.9	85.6	91.4	0.00	***	89.2	85.4	89.5	0.07	*
1/20/2021	91.4	87.0	91.8	0.01	**	89.1	87.0	89.3	0.30	
2/3/2021	90.6	87.5	90.9	0.08	*	88.2	87.5	88.2	0.74	
2/17/2021	90.1	87.7	90.3	0.19		88.5	86.0	88.7	0.25	
3/17/2021	89.0	88.0	89.1	0.60		87.9	87.7	87.9	0.93	
4/14/2021	87.2	83.6	87.5	0.09	*	87.3	88.4	87.1	0.60	
5/12/2021	79.5	74.3	80.0	0.03	**	85.5	85.0	85.5	0.81	
6/9/2021	64.0	65.5	63.8	0.57		85.5	81.3	85.9	0.07	*

Notes: T-test significance is shown in each applicable row using *. Blank columns indicate a p-value that is not significant at the $p < 0.10$ level. * $p < 0.10$; ** $p < 0.05$; *** $p < 0.01$.
Source: Understanding America Study (Understanding Coronavirus in America survey)

Appendix Table 10. *Perceived Risk of COVID-19 Infection and Related Complications, by Disability Status*

	Perceived chance of getting COVID in next 3 months					Perceived chance of being hospitalized if infected with COVID					Perceived chance of death due to COVID in next 3 months[a]				
	Whole Sample	With Disability	Without Disability	p-value	Sig.	Whole Sample	With Disability	Without Disability	p-value	Sig.	Whole Sample	With Disability	Without Disability	p-value	Sig.
Mean															
4/1/2020	27.7	27.8	27.7	1.00							24.8	38.3	23.4	0.00	***
4/15/2020	24.8	25.5	24.7	0.56		31.5	40.2	30.6	0.00	***	21.9	31.7	20.9	0.00	***
4/29/2020	24.1	26.7	23.8	0.05	**	28.9	41.3	27.7	0.00	***	20.6	31.8	19.5	0.00	***
5/13/2020	22.5	25.6	22.2	0.02	**	27.1	36.2	26.1	0.00	***	19.9	30.2	18.8	0.00	***
5/27/2020	20.3	23.9	19.9	0.01	***	25.1	35.4	24.0	0.00	***	19.2	29.6	18.1	0.00	***
6/10/2020	21.8	25.7	21.4	0.00	***	24.5	36.6	23.2	0.00	***	18.7	29.2	17.6	0.00	***
6/24/2020	22.3	25.9	21.9	0.01	**	24.9	37.3	23.6	0.00	***	18.7	31.1	17.5	0.00	***
7/8/2020	23.7	27.9	23.3	0.00	***	24.7	37.5	23.4	0.00	***	19.1	31.8	17.8	0.00	***
7/22/2020	22.6	27.7	22.0	0.00	***	23.7	34.5	22.5	0.00	***	18.7	30.2	17.5	0.00	***
8/5/2020	22.3	26.6	21.9	0.00	***	23.5	36.5	22.2	0.00	***	18.6	31.5	17.2	0.00	***
8/19/2020	21.3	26.2	20.7	0.00	***	22.7	35.4	21.4	0.00	***	17.7	29.8	16.4	0.00	***
9/2/2020	21.4	24.8	21.1	0.01	***	22.0	32.7	20.9	0.00	***	17.7	29.7	16.5	0.00	***
9/16/2020	20.9	26.6	20.4	0.00	***	22.0	34.8	20.7	0.00	***	17.5	30.1	16.2	0.00	***
9/30/2020	22.1	25.4	21.8	0.02	**	22.2	34.0	20.9	0.00	***	17.4	28.7	16.3	0.00	***
10/14/2020	22.4	26.6	22.0	0.00	***	22.2	34.3	21.0	0.00	***	17.4	29.0	16.2	0.00	***
10/28/2020	23.9	28.0	23.5	0.00	***	22.6	34.9	21.3	0.00	***	17.5	28.6	16.3	0.00	***
11/11/2020	24.6	29.2	24.2	0.00	***	22.8	34.9	21.5	0.00	***	17.7	29.9	16.4	0.00	***
11/25/2020	23.9	27.7	23.5	0.01	***	22.2	35.1	20.8	0.00	***	17.4	29.6	16.0	0.00	***
12/9/2020	23.4	28.0	22.9	0.00	***	21.1	31.2	20.1	0.00	***	16.8	26.3	15.8	0.00	***
12/23/2020	23.8	28.3	23.4	0.00	***	20.9	31.8	19.7	0.00	***	17.1	28.8	15.9	0.00	***
1/6/2021	23.6	29.2	23.0	0.00	***	20.7	33.3	19.3	0.00	***	17.0	29.0	15.7	0.00	***
1/20/2021	22.7	25.7	22.4	0.03	**	20.0	31.0	18.7	0.00	***	16.4	27.5	15.2	0.00	***
2/3/2021	21.4	28.1	20.7	0.00	***	19.3	30.0	18.2	0.00	***	16.1	27.2	14.9	0.00	***
2/17/2021	20.0	26.1	19.3	0.00	***	18.0	30.0	16.7	0.00	***	15.1	27.1	13.8	0.00	***
3/17/2021	17.6	21.9	17.2	0.00	***	16.7	28.3	15.5	0.00	***	14.2	25.8	13.0	0.00	***
4/14/2021	15.5	20.8	14.9	0.00	***	15.8	26.9	14.7	0.00	***	13.2	23.3	12.1	0.00	***
5/12/2021	13.9	18.8	13.3	0.00	***	14.9	25.3	13.7	0.00	***	13.0	22.5	11.8	0.00	***
6/9/2021	12.8	17.1	12.4	0.00	***	14.4	25.0	13.2	0.00	***	12.2	22.5	11.0	0.00	***

Notes: T-test significance is shown in each applicable row using *. Blank columns indicate a p-value that is not significant at the $p < 0.10$ level. * $p < 0.10$; ** $p < 0.05$; *** $p < 0.01$.

Source: UAS (Understanding Coronavirus in America survey).

Appendix Table 11. *COVID-19 Experiences among Friends and Family Members, by Disability Status*

	Number of close friends and family that have been hospitalized due to COVID					Number of close friends and family that have died due to COVID					Number of close friends and family that have received the vaccine				
	Whole Sample	With Disability	Without Disability	p-value	Sig.	Whole Sample	With Disability	Without Disability	p-value	Sig.	Whole Sample	With Disability	Without Disability	p-value	Sig.
Mean															
4/1/2020															
4/15/2020	0.1	0.2	0.1	0.13		0.0	0.1	0.0	0.24						
4/29/2020	0.1	0.2	0.1	0.09	*	0.0	0.1	0.0	0.04	**					
5/13/2020	0.1	0.3	0.1	0.05	*	0.0	0.1	0.0	0.01	**					
5/27/2020	0.1	0.2	0.1	0.06	*	0.0	0.1	0.0	0.03	**					
6/10/2020															
6/24/2020	0.2	0.3	0.2	0.29		0.1	0.1	0.1	0.20						
7/8/2020															
7/22/2020	0.3	0.3	0.3	0.86		0.1	0.1	0.1	0.18						
8/5/2020	0.2	0.4	0.2	0.24		0.1	0.1	0.1	0.13						
8/19/2020	0.3	0.4	0.3	0.26		0.1	0.2	0.1	0.15						
9/2/2020	0.3	0.4	0.3	0.77		0.1	0.1	0.2	0.19						
9/16/2020	0.3	0.3	0.3	0.66		0.1	0.1	0.1	0.51						
9/30/2020	0.3	0.4	0.3	0.50		0.1	0.1	0.1	0.75						
10/14/2020	0.3	0.3	0.3	0.88		0.1	0.1	0.1	0.98						
10/28/2020	0.4	0.5	0.4	0.84		0.2	0.2	0.2	0.64						
11/11/2020	0.4	0.4	0.4	0.94		0.2	0.1	0.2	0.64						
11/25/2020	0.6	0.5	0.7	0.51		0.2	0.2	0.2	0.31						
12/9/2020	0.7	0.8	0.7	0.59		0.3	0.2	0.3	0.55						
12/23/2020	0.6	0.6	0.7	0.85		0.2	0.2	0.2	0.46		0.6	0.3	0.7	0.00	***
1/6/2021	0.7	0.7	0.7	0.65		0.3	0.2	0.3	0.24		1.6	0.6	1.7	0.00	***
1/20/2021	0.7	0.7	0.6	0.70		0.3	0.3	0.3	0.62		2.3	1.3	2.4	0.00	***
2/3/2021	0.7	0.7	0.7	0.89		0.3	0.3	0.3	0.95		3.9	3.0	4.0	0.42	
2/17/2021	0.7	0.8	0.7	0.52		0.3	0.4	0.3	0.26		5.6	4.0	5.8	0.02	**
3/17/2021	0.8	0.7	0.8	0.45		0.3	0.3	0.3	0.59		10.6	10.9	10.6	0.92	
4/14/2021	0.8	0.8	0.8	0.80		0.4	0.4	0.4	0.92		14.3	10.3	14.8	0.01	***
5/12/2021	0.8	0.7	0.8	0.46		0.3	0.3	0.3	0.71		18.0	14.7	18.4	0.19	
6/9/2021	0.8	0.8	0.8	0.92		0.4	0.3	0.4	0.54		19.7	20.2	19.6	0.92	

Notes: T-test significance is shown in each applicable row using *. Blank columns indicate a p-value that is not significant at the $p < 0.10$ level. * $p < 0.10$; ** $p < 0.05$; *** $p < 0.01$.

Source: UAS (Understanding Coronavirus in America survey).

Appendix Table 12. *Work and Receipt of Economic Benefits, by Disability Status*

	Received unemployment insurance in the past 14 days					Received economic stimulus funds in the past month					Received aid for people or businesses affected by the coronavirus epidemic in the past month				
	Whole Sample	With Disability	Without Disability	p-value	Sig.	Whole Sample	With Disability	Without Disability	p-value	Sig.	Whole Sample	With Disability	Without Disability	p-value	Sig.
Percent of sample (%)															
4/1/2020	4.7	1.4	5.4	0.02	**	3.7	5.1	3.6	0.31		0.9	1.5	0.8	0.41	
4/15/2020	7.4	2.8	8.3	0.01	***	45.3	34.5	46.3	0.00	***	2.9	1.5	3.0	0.24	
4/29/2020	9.2	2.1	10.6	0.00	***	56.7	62.1	56.1	0.07	*	3.4	3.0	3.4	0.75	
5/13/2020	9.4	0.8	11.2	0.00	***	49.9	61.5	48.8	0.00	***	3.2	3.8	3.2	0.60	
5/27/2020	9.9	1.8	11.6	0.00	***	36.2	44.0	35.4	0.01	***	3.2	4.2	3.0	0.33	
6/10/2020	5.3	1.3	5.7	0.01	***	22.1	31.0	21.2	0.00	***	2.2	1.6	2.3	0.50	
6/24/2020	5.5	1.0	5.9	0.02	**	14.6	23.5	13.7	0.00	***	1.8	0.8	1.8	0.15	
7/8/2020	5.8	1.1	6.2	0.01	**										
7/22/2020	5.8	1.3	6.2	0.01	**	11.5	16.8	11.0	0.01	***	1.2	1.2	1.2	0.97	
8/5/2020	5.3	2.1	5.6	0.05	*	7.2	15.3	6.4	0.00	***	1.3	2.6	1.2	0.16	
8/19/2020	5.2	3.6	5.4	0.33		6.6	12.5	6.0	0.00	***	0.8	2.4	0.6	0.07	*
9/2/2020	5.1	1.9	5.4	0.05	*	5.0	9.5	4.6	0.00	***	0.6	1.2	0.6	0.16	
9/16/2020	4.8	3.7	4.9	0.50		4.8	8.2	4.5	0.01	**	0.8	0.8	0.8	0.91	
9/30/2020	4.5	4.5	4.5	0.97		3.8	8.9	3.3	0.00	***	0.9	1.0	0.9	0.86	
10/14/2020	4.3	2.6	4.4	0.24		3.9	6.4	3.7	0.04	**	0.5	0.5	0.5	0.96	
10/28/2020	4.2	2.6	4.4	0.26		3.0	6.6	2.7	0.00	***	0.5	1.7	0.5	0.09	*
11/11/2020	4.0	2.5	4.2	0.27		2.8	5.8	2.5	0.00	***	0.5	1.4	0.4	0.02	**
11/25/2020	3.9	4.0	3.9	0.94		2.8	4.8	2.6	0.04	**	0.6	1.9	0.5	0.01	**
12/9/2020	3.6	3.3	3.6	0.82		2.8	5.5	2.6	0.01	**	0.8	2.6	0.7	0.02	**
12/23/2020	4.1	3.7	4.1	0.79		15.2	23.5	14.4	0.00	***	0.7	2.0	0.6	0.04	**
1/6/2021	3.9	4.2	3.8	0.80		41.6	50.3	40.7	0.00	***	0.9	2.7	0.7	0.01	***
1/20/2021	3.9	2.7	4.0	0.39		36.5	40.3	36.1	0.18		0.7	4.0	0.6	0.00	***
2/3/2021	4.0	3.2	4.1	0.59		20.7	27.6	20.0	0.00	***	0.6	1.2	0.6	0.21	
2/17/2021	4.2	2.8	4.4	0.36		14.2	20.1	13.6	0.01	***	0.8	3.2	0.4	0.00	***
3/17/2021	4.2	2.8	4.3	0.35		46.3	49.9	45.9	0.25		1.2	2.4	1.1	0.14	
4/14/2021	3.4	3.3	3.4	0.94		26.3	39.1	24.9	0.00	***	1.1	3.2	0.9	0.00	***
5/12/2021	3.3	3.9	3.2	0.64		11.1	23.2	9.7	0.00	***	0.6	1.6	0.4	0.05	**
6/9/2021	3.6	2.5	3.7	0.45		5.9	12.8	5.2	0.00	***	0.8	2.5	0.7	0.02	**

Appendix Table 12. *Work and Receipt of Economic Benefits, by Disability Status (continued)*

	Worked or studied from home in the past 7 days				
	Whole Sample	With Disability	Without Disability	p-value	Sig.
Percent of sample (%)					
4/1/2020	54.0	40.9	55.4	0.00	***
4/15/2020	50.8	38.5	52.0	0.00	***
4/29/2020	46.7	31.6	48.1	0.00	***
5/13/2020	43.5	31.0	44.8	0.00	***
5/27/2020	40.9	31.7	41.9	0.00	***
6/10/2020	43.3	35.9	44.0	0.01	**
6/24/2020	46.1	42.0	46.5	0.18	
7/8/2020	43.5	33.2	44.5	0.00	***
7/22/2020	44.4	39.3	44.9	0.08	*
8/5/2020	43.8	39.6	44.1	0.16	
8/19/2020	44.3	39.8	44.8	0.12	
9/2/2020	43.2	40.3	43.5	0.32	
9/16/2020	42.0	38.8	42.3	0.29	
9/30/2020	43.6	42.7	43.6	0.77	
10/14/2020	43.6	41.4	43.8	0.45	
10/28/2020	43.9	43.7	43.9	0.96	
11/11/2020	43.7	37.6	44.4	0.03	**
11/25/2020	44.5	41.2	44.8	0.27	
12/9/2020	44.7	44.4	44.7	0.92	
12/23/2020	44.4	42.2	44.7	0.43	
1/6/2021	45.7	44.1	45.8	0.58	
1/20/2021	45.7	41.2	46.2	0.12	
2/3/2021	44.7	43.2	44.9	0.59	
2/17/2021	44.1	43.9	44.0	0.96	
3/17/2021	41.7	42.6	41.6	0.77	
4/14/2021	39.9	41.6	39.7	0.57	
5/12/2021	36.2	37.1	36.1	0.77	
6/9/2021	33.6	36.2	33.3	0.34	

Notes: T-test significance is shown in each applicable row using *. Blank columns indicate a p-value that is not significant at the $p < 0.10$ level. * $p < 0.10$; ** $p < 0.05$; *** $p < 0.01$.
Source: UAS (Understanding Coronavirus in America survey).

Appendix Table 13. *Financial Security, by Disability Status*

	Perceived chance of job loss due to COVID in the next 3 months					Perceived chance of running out of money due to COVID in next 3 months					Perceived chance of being evicted in the next month				
	Whole Sample	With Disability	Without Disability	p-value	Sig.	Whole Sample	With Disability	Without Disability	p-value	Sig.	Whole Sample	With Disability	Without Disability	p-value	Sig.
Mean															
4/1/2020	14.9	26.3	14.8	0.13		21.5	33.4	20.2	0.00	***					
4/15/2020	14.4	14.2	14.4	0.95		19.6	33.9	18.1	0.00	***					
4/29/2020	13.6	7.5	13.7	0.08	*	18.6	31.3	17.4	0.00	***					
5/13/2020	12.2	18.1	12.1	0.32		15.8	27.2	14.7	0.00	***					
5/27/2020	12.2	12.5	12.2	0.92		15.3	27.9	13.9	0.00	***					
6/10/2020	12.1	16.2	12.0	0.27		15.5	27.0	14.3	0.00	***					
6/24/2020	12.5	18.3	12.4	0.42		15.1	27.0	13.9	0.00	***					
7/8/2020	11.8	13.0	11.8	0.66		15.8	25.1	14.9	0.00	***					
7/22/2020	11.9	17.0	11.8	0.17		15.5	27.7	14.2	0.00	***					
8/5/2020	12.1	15.8	12.1	0.36		15.3	27.0	14.1	0.00	***	6.5	11.9	6.0	0.00	***
8/19/2020	12.1	13.3	12.1	0.69		15.5	26.8	14.3	0.00	***	7.3	11.5	6.9	0.01	***
9/2/2020	11.0	12.4	11.0	0.61		14.6	26.4	13.4	0.00	***	6.8	10.7	6.4	0.01	***
9/16/2020	10.9	10.1	11.0	0.74		13.9	25.4	12.7	0.00	***	7.1	11.7	6.7	0.01	***
9/30/2020	11.0	15.1	10.9	0.34		14.5	26.6	13.3	0.00	***	7.5	12.1	7.1	0.01	***
10/14/2020	10.6	9.6	10.6	0.75		13.9	26.2	12.6	0.00	***	7.4	10.5	7.1	0.08	*
10/28/2020	11.5	24.6	11.3	0.07	*	14.3	25.1	13.2	0.00	***	7.4	9.3	7.2	0.23	
11/11/2020	11.7	26.7	11.5	0.05	*	15.1	27.2	13.8	0.00	***	7.5	10.3	7.3	0.09	*
11/25/2020	11.6	15.5	11.6	0.28		14.2	24.9	13.1	0.00	***	7.0	10.2	6.7	0.04	**
12/9/2020	11.2	14.8	11.2	0.31		14.7	26.3	13.5	0.00	***	7.5	10.2	7.3	0.09	*
12/23/2020	11.1	16.1	11.0	0.36		15.0	26.1	13.8	0.00	***	7.6	11.3	7.3	0.02	**
1/6/2021	10.5	19.3	10.4	0.04	**	14.4	25.9	13.2	0.00	***	7.6	9.5	7.5	0.20	
1/20/2021	10.7	19.0	10.7	0.16		14.9	25.4	13.7	0.00	***	7.4	10.5	7.1	0.02	**
2/3/2021	10.1	16.8	10.0	0.29		14.1	24.9	12.9	0.00	***	7.3	10.7	7.0	0.03	**
2/17/2021	9.4	11.4	9.4	0.72		13.4	23.7	12.2	0.00	***	7.1	11.3	6.8	0.01	**
3/17/2021	9.2	10.2	9.2	0.69		11.7	20.6	10.8	0.00	***	7.2	11.5	6.8	0.01	***
4/14/2021	8.0	10.0	8.0	0.62		11.8	22.1	10.7	0.00	***	7.2	10.2	6.9	0.06	*
5/12/2021	7.8	15.8	7.7	0.12		11.9	22.8	10.7	0.00	***	7.2	14.4	6.5	0.00	***
6/9/2021	8.1	12.9	8.0	0.23		12.3	24.5	10.9	0.00	***	6.5	11.6	6.0	0.01	***

Appendix Table 13. *Financial Security, by Disability Status (continued)*

	Worked or studied from home in the past 7 days				
	Whole Sample	With Disability	Without Disability	p-value	Sig.
Percent of sample (%)					
4/1/2020	70.7	35.8	74.1	0.00	***
4/15/2020	73.6	36.7	77.0	0.00	***
4/29/2020	75.4	36.4	79.0	0.00	***
5/13/2020	76.8	40.9	80.3	0.00	***
5/27/2020	77.5	41.2	81.0	0.00	***
6/10/2020	76.1	37.2	79.9	0.00	***
6/24/2020	78.1	40.0	81.5	0.00	***
7/8/2020	76.8	38.4	80.5	0.00	***
7/22/2020	76.7	40.1	80.1	0.00	***
8/5/2020	77.1	37.5	80.8	0.00	***
8/19/2020	77.2	39.5	80.7	0.00	***
9/2/2020	77.6	40.4	81.1	0.00	***
9/16/2020	78.3	39.9	81.7	0.00	***
9/30/2020	76.6	38.4	80.1	0.00	***
10/14/2020	77.8	38.0	81.5	0.00	***
10/28/2020	78.0	42.3	81.4	0.00	***
11/11/2020	77.8	41.6	81.4	0.00	***
11/25/2020	78.0	44.3	81.3	0.00	***
12/9/2020	77.3	39.7	80.9	0.00	***
12/23/2020	77.2	42.7	80.6	0.00	***
1/6/2021	78.0	41.5	81.5	0.00	***
1/20/2021	77.6	41.4	81.2	0.00	***
2/3/2021	77.6	41.3	81.1	0.00	***
2/17/2021	79.1	40.3	82.8	0.00	***
3/17/2021	80.2	43.2	83.7	0.00	***
4/14/2021	79.8	41.1	83.5	0.00	***
5/12/2021	80.4	43.2	84.2	0.00	***
6/9/2021	79.5	43.8	83.2	0.00	***

Notes: T-test significance is shown in each applicable row using *. Blank columns indicate a p-value that is not significant at the $p < 0.10$ level. * $p < 0.10$; ** $p < 0.05$; *** $p < 0.01$.
Source: UAS (Understanding Coronavirus in America survey).

Appendix Table 14. *Demographic Information for HH Pulse Respondents in Phase 3.1 that Applied for OASI Benefits, by COVID's Effect on Decision to Apply*

	Has not affected my decision	Applied earlier than expected	Applied later than expected	p-value	Sig.
Mean					
Age	63.4	62.1	60.5	0.38	
Percent of sample (%)					
Gender				0.64	
Male	48.5	51.2	47.3	0.64	
Female	51.5	48.8	52.7	0.64	
Race				0.11	
White	76.7	71.3	71.2	0.99	
Black	11.4	11.3	14.4	0.50	
Asian	4.6	9.3	2.5	0.03	**
Other	7.4	8.1	11.9	0.38	
Hispanic	14.9	19.7	19.6	0.99	
Level of Education				0.85	
Less than high school	5.4	7.2	3.2	0.41	
Some high school	4.2	3.5	3.6	0.96	
High school or equivalent	33.7	35.5	29.4	0.53	
Some college	20.0	16.7	18.1	0.76	
Associate's degree	8.4	11.6	10.9	0.86	
Bachelor's degree	13.9	15.2	21.4	0.20	
Graduate degree	14.5	10.3	13.3	0.40	
Marital Status				0.02	##
Married	61.6	64.8	56.2	0.25	
Divorced/Separated/Widowed	28.9	30.3	30.1	0.97	
Never Married	9.5	4.9	13.7	0.01	***
Working	39.2	31.3	24.7	0.27	
Reason for not working					
Didn't want to	2.5	0.0	0.2		
COVID	2.9	13.8	14.1	0.96	
Caring for children	0.8	1.0	5.4	0.01	**
Caring for elderly	0.5	0.9	4.3	0.02	**
Retired	47.2	33.2	41.9	0.30	
Disabled	2.4	1.7	0.9	0.50	
Other	4.5	17.8	8.7	0.11	
Household Income				0.08	#
Under $25K	15.1	14.2	27.9	0.02	**
Between $25K and $35K	9.5	15.4	12.9	0.65	
Between $35K and $50K	11.0	11.5	9.0	0.57	
Between $50K and $75K	19.6	20.7	13.8	0.25	
Between $75K and $100K	14.2	10.9	17.8	0.35	
Between $100K and 150K	14.7	16.0	9.9	0.14	
Over $150K	15.9	11.3	8.7	0.52	
Received UI	8.0	20.6	18.4	0.72	
Received stimulus	19.7	21.9	32.2	0.26	
N	2,642	927	125		

Notes: T-test significance between applying earlier and applying later is shown in each applicable row using *. T-test significance is shown in each applicable row using *. For categorical variables, Chi-square significance is shown in the variable heading row. Chi-square significance is shown using #. Blank columns indicate a p-value that is not significant at the $p < 0.10$ level. * $p < 0.10$; ** $p < 0.05$; *** $p < 0.01$. OASI = Old Age and Survivors Insurance, UI = Unemployment Insurance.
Source: HPS.

Appendix Table 15. *Demographic Information for HH Pulse Respondents in Phase 3.1 that Applied for SSDI Benefits, by COVID's Effect on Decision to Apply*

	Has not affected my decision	Applied earlier than expected	Applied later than expected	p-value	Sig.
Mean					
Age	46.8	48.8	43.8	0.01	***
Percent of sample (%)					
Gender				0.25	
Male	45.3	44.4	34.7	0.25	
Female	54.7	55.6	65.3	0.25	
Race				0.09	#
White	65.1	61.5	51.3	0.27	
Black	21.0	28.6	28.3	0.97	
Asian	2.6	1.6	5.7	0.05	*
Other	11.3	8.3	14.8	0.10	
Hispanic	16.5	22.5	23.2	0.92	
Level of Education				0.21	
Less than high school	7.2	5.8	4.4	0.66	
Some high school	10.8	5.9	23.7	0.01	**
High school or equivalent	38.9	40.0	36.1	0.68	
Some college	21.0	30.3	22.3	0.18	
Associate's degree	10.1	6.4	5.7	0.78	
Bachelor's degree	7.3	8.2	6.0	0.36	
Graduate degree	4.8	3.5	1.7	0.11	
Marital Status				0.38	
Married	42.0	41.2	47.2	0.52	
Divorced/Separated/Widowed	27.2	32.2	23.2	0.16	
Never Married	30.8	26.5	29.5	0.73	
Working	23.3	16.7	13.9	0.54	
Reason for not working					
Didn't want to	2.1	0.5	2.7	0.14	
COVID	12.5	27.5	31.7	0.66	
Caring for children	4.4	3.5	5.5	0.34	
Caring for elderly	2.0	2.5	1.7	0.55	
Retired	5.9	9.3	1.8	0.01	***
Disabled	31.5	16.5	29.9	0.07	*
Other	18.4	23.5	12.9	0.04	**
Household Income				0.07	#
Under $25K	43.0	45.3	45.4	0.99	
Between $25K and $35K	14.9	13.1	19.6	0.45	
Between $35K and $50K	10.1	11.6	11.9	0.95	
Between $50K and $75K	14.0	14.5	11.0	0.40	
Between $75K and $100K	7.4	5.9	7.7	0.58	
Between $100K and 150K	4.9	4.4	0.5	0.00	***
Over $150K	5.7	5.2	3.9	0.69	
Received UI	17.2	27.5	24.5	0.77	
Received stimulus	26.1	33.5	12.4	0.00	***
N	1,326	523	207		

Notes: T-test significance between applying earlier and applying later is shown in each applicable row using *. T-test significance is shown in each applicable row using *. For categorical variables, Chi-square significance is shown in the variable heading row. Chi-square significance is shown using #. Blank columns indicate a p-value that is not significant at the $p < 0.10$ level. * $p < 0.10$; ** $p < 0.05$; *** $p < 0.01$. OASI = Old Age and Survivors Insurance, UI = Unemployment Insurance.
Source: HPS.

Appendix Table 16. *Demographic Information for HH Pulse Respondents in Phase 3.1 that Applied for SSI Benefits, by COVID's Effect on Decision to Apply*

	Has not affected my decision	Applied earlier than expected	Applied later than expected	p-value	Sig.
Mean					
Age	46.7	44.3	41.9	0.42	
Percent of sample (%)					
Gender				0.63	
Male	41.4	42.2	37.3	0.63	
Female	58.6	57.8	62.7	0.63	
Race				0.64	
White	60.7	63.5	54.1	0.38	
Black	20.0	20.2	18.1	0.78	
Asian	2.2	6.4	9.4	0.57	
Other	17.1	9.8	18.4	0.27	
Hispanic	23.5	21.5	30.9	0.30	
Level of Education				0.50	
Less than high school	13.2	3.4	3.5	0.98	
Some high school	10.5	5.8	15.9	0.15	
High school or equivalent	40.7	46.9	39.6	0.55	
Some college	15.8	23.5	21.5	0.76	
Associate's degree	8.6	5.1	9.0	0.24	
Bachelor's degree	5.0	10.1	6.4	0.24	
Graduate degree	6.3	5.2	4.1	0.61	
Marital Status				0.67	
Married	27.0	27.3	33.4	0.53	
Divorced/Separated/Widowed	31.5	29.1	23.8	0.49	
Never Married	41.5	43.6	42.8	0.94	
Working	23.7	30.4	32.6	0.83	
Reason for not working					
Didn't want to	4.5	3.7	0.3	0.05	**
COVID	13.7	27.3	14.3	0.05	*
Caring for children	6.5	3.1	5.6	0.25	
Caring for elderly	3.0	1.4	4.4	0.18	
Retired	7.3	8.6	4.4	0.38	
Disabled	23.8	9.0	25.8	0.05	*
Other	17.5	16.5	12.7	0.57	
Household Income				0.25	
Under $25K	58.8	51.3	44.0	0.53	
Between $25K and $35K	12.2	18.1	14.1	0.52	
Between $35K and $50K	6.9	8.1	5.4	0.40	
Between $50K and $75K	9.2	7.2	26.9	0.01	**
Between $75K and $100K	3.6	8.6	4.0	0.20	
Between $100K and 150K	2.0	2.6	1.3	0.33	
Over $150K	7.3	4.3	4.2	0.99	
Received UI	17.2	24.1	13.9	0.12	
Received stimulus	36.6	27.6	27.3	0.97	
N	544	238	138		

Notes: T-test significance between applying earlier and applying later is shown in each applicable row using *. T-test significance is shown in each applicable row using *. For categorical variables, Chi-square significance is shown in the variable heading row. Chi-square significance is shown using #. Blank columns indicate a p-value that is not significant at the $p < 0.10$ level. * $p < 0.10$; ** $p < 0.05$; *** $p < 0.01$. OASI = Old Age and Survivors Insurance, UI = Unemployment Insurance.
Source: HPS.

Appendix Table 17. *Demographic Information for HH Pulse Respondents in Phase 3.1 that Were Likely to Apply for OASI Benefits, by COVID's Effect on Decision to Apply*

	Has not affected my decision	Applied earlier than expected	Applied later than expected	p-value	Sig.
Mean					
Age	55.3	59.5	51.4	0.00	***
Percent of sample (%)					
Gender				0.01	###
Male	56.9	41.5	62.0	0.01	***
Female	43.1	58.5	38.0	0.01	***
Race				0.08	#
White	72.7	76.6	64.2	0.06	*
Black	10.6	8.4	19.6	0.01	**
Asian	8.9	8.8	11.1	0.52	
Other	7.7	6.2	5.1	0.65	
Hispanic	18.5	13.7	28.5	0.01	**
Level of Education				0.00	###
Less than high school	5.2	2.2	19.7	0.01	***
Some high school	6.4	1.9	3.9	0.35	
High school or equivalent	36.4	26.4	30.0	0.60	
Some college	19.4	20.7	22.7	0.73	
Associate's degree	8.6	12.3	8.2	0.19	
Bachelor's degree	13.7	19.5	11.5	0.03	**
Graduate degree	10.4	16.9	3.9	0.00	***
Marital Status				0.01	##
Married	58.9	55.0	42.7	0.12	
Divorced/Separated/Widowed	20.6	36.2	35.7	0.96	
Never Married	20.5	8.8	21.6	0.01	**
Working	63.2	48.5	46.0	0.76	
Reason for not working					
Didn't want to	2.2	0.8	2.1	0.16	
COVID	7.8	26.9	26.2	0.95	
Caring for children	1.4	0.6	1.7	0.11	
Caring for elderly	2.4	4.2	1.6	0.19	
Retired	14.3	5.4	4.5	0.56	
Disabled	1.6	2.5	1.2	0.24	
Other	6.9	11.0	16.7	0.26	
Household Income				0.00	###
Under $25K	16.1	15.3	20.4	0.32	
Between $25K and $35K	9.7	12.4	32.6	0.01	**
Between $35K and $50K	12.9	18.3	17.1	0.83	
Between $50K and $75K	17.0	17.5	10.3	0.06	*
Between $75K and $100K	14.7	12.6	10.6	0.53	
Between $100K and 150K	16.2	13.3	3.0	0.00	***
Over $150K	13.4	10.6	6.1	0.05	*
Received UI	8.0	30.1	13.5	0.01	***
Received stimulus	19.7	16.7	33.2	0.01	***
N	2,750	815	294		

Notes: T-test significance between applying earlier and applying later is shown in each applicable row using *. T-test significance is shown in each applicable row using *. For categorical variables, Chi-square significance is shown in the variable heading row. Chi-square significance is shown using #. Blank columns indicate a p-value that is not significant at the $p < 0.10$ level. * $p < 0.10$; ** $p < 0.05$; *** $p < 0.01$. OASI = Old Age and Survivors Insurance, UI = Unemployment Insurance.
Source: HPS.

Appendix Table 18. *Demographic Information for HH Pulse Respondents in Phase 3.1 that Were Likely to Apply for SSDI Benefits, by COVID's Effect on Decision to Apply*

	Has not affected my decision	Applied earlier than expected	Applied later than expected	p-value	Sig.
Mean					
Age	44.3	44.1	45.5	0.39	
Percent of sample (%)					
Gender				0.35	
Male	46.4	42.1	48.9	0.35	
Female	53.6	57.9	51.1	0.35	
Race				0.38	
White	67.5	74.1	69.4	0.47	
Black	19.1	12.7	9.5	0.32	
Asian	2.5	3.3	9.2	0.18	
Other	10.8	9.9	12.0	0.54	
Hispanic	14.4	19.4	20.8	0.81	
Level of Education				0.01	##
Less than high school	4.2	3.3	14.5	0.03	**
Some high school	9.6	6.7	18.3	0.05	**
High school or equivalent	38.4	30.1	30.0	0.98	
Some college	24.8	30.8	19.1	0.01	***
Associate's degree	10.3	10.9	7.3	0.14	
Bachelor's degree	8.9	10.8	7.0	0.07	*
Graduate degree	3.8	7.4	3.9	0.05	*
Marital Status				0.81	
Married	42.7	38.5	42.2	0.60	
Divorced/Separated/Widowed	25.7	29.7	29.2	0.96	
Never Married	31.6	31.9	28.6	0.58	
Working	33.0	32.5	15.5	0.00	***
Reason for not working					
Didn't want to	3.4	1.4	1.4	0.94	
COVID	11.5	29.7	30.1	0.96	
Caring for children	7.8	5.4	9.7	0.28	
Caring for elderly	5.6	3.5	4.6	0.61	
Retired	2.5	1.6	2.4	0.48	
Disabled	17.6	11.8	18.7	0.22	
Other	18.5	14.0	17.6	0.39	
Household Income				0.00	###
Under $25K	34.1	33.2	45.0	0.09	*
Between $25K and $35K	17.4	17.2	16.7	0.94	
Between $35K and $50K	16.8	15.8	19.6	0.52	
Between $50K and $75K	12.7	12.4	11.0	0.70	
Between $75K and $100K	8.0	8.3	4.3	0.08	*
Between $100K and 150K	8.1	6.5	2.1	0.00	***
Over $150K	2.8	6.6	1.3	0.00	***
Received UI	16.5	26.0	15.0	0.03	**
Received stimulus	18.5	12.4	30.1	0.00	***
N	1,765	649	402		

Notes: T-test significance between applying earlier and applying later is shown in each applicable row using *. T-test significance is shown in each applicable row using *. For categorical variables, Chi-square significance is shown in the variable heading row. Chi-square significance is shown using #. Blank columns indicate a p-value that is not significant at the $p < 0.10$ level. * $p < 0.10$; ** $p < 0.05$; *** $p < 0.01$. OASI = Old Age and Survivors Insurance, UI = Unemployment Insurance.
Source: HPS.

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