

SURVEY NAME

JUNE 27 SURVEY

DATE

Monday, June 27, 2022

POWERED BY

 Pollfish

Demographics

Total responses

500

Age groups

18 - 24 (15.2%), 25 - 34 (28.4%), 35 - 44 (29.2%),
45 - 54 (15.4%), > 54 (11.8%)

Country

United States

Gender

Female (52.2%), Male (47.8%)

Residential Postal Code

76901 US,30120 US,31520 US,84606 US,33881
US,38034 US,33010 US,21216 US,60619
US,28680 US,33351 US,98003 US,08620
US,45069 US,32763 US,74136 US,17111
US,37210 US,

38571 US,91744 US,31601 US,33024 US,37643
US,78660 US,36702 US,44111 US,77640
US,90604 US,33570 US,38127 US,35404
US,40019 US,47122 US,21221 US,08234
US,22801 US,79907 US,60126 US,19601
US,06883 US,94541 US,30815 US,46825
US,22407 US,18704 US,71667 US,98121
US,06770 US,89101 US,12345 US,30504
US,01020 US,63703 US,44221 US,30314
US,30318 US,28311 US,30327 US,70737
US,85308 US,28463 US,49058 US,37379
US,31905 US,38305 US,97347 US,30032
US,08104 US,24712 US,20007 US,27881
US,70118 US,84047 US,64123 US,13827
US,28083 US,29554 US,48324 US,91706
US,31210 US,27604 US,74020 US,10458
US,75051 US,47970 US,83338 US,44471
US,29006 US,19081 US,21061 US,64053

85353 US,35045 US,76115 US,95660 US,02940
US,11955 US,33157 US,62226 US,24502
US,58102 US,39208 US,44485 US,44720
US,13502 US,60657 US,93012 US,14618
US,85053 US,18702 US,27295 US,55414
US,08610 US,08724 US,43604 US,63552
US,60502 US,36539 US,11209 US,28092
US,80921 US,84403 US,72201 US,04073
US,33810 US,29526 US,21784 US,11221
US,32607 US,38016 US,36066 US,32086
US,45244 US,90733 US,76570 US,80923
US,75965 US,98503 US,32955 US,28352
US,85204 US,62526 US,28303 US,94702
US,07047 US,34741 US,27107 US,74857
US,11354 US,06704 US,10001 US,28655
US,37355 US,19406 US,31705 US,43615
US,33967 US,67214 US,70001 US,95355
US,47834 US,38355 US,28139 US,72712
US,37642 US,29349 US,78521 US,07724
US,32828 US,49401 US,91364 US,45239
US,33178 US,28516 US,80134 US,05663
US,29536 US,98056 US,27526 US,56303
US,25802 US,89410 US,44095 US,30052

US,30291 US,37312 US,30328 US,11801
US,19090 US,74431 US,37920 US,10460
US,21202 US,60053 US,48312 US,21085
US,43558 US,74403 US,75692 US,27610
US,49619 US,53202 US,36867 US,32096
US,78599 US,90620 US,29073 US,10312
US,17402 US,10019 US,78336 US,94605
US,95842 US,95403 US,34652 US,08611
US,91335 US,32821 US,48036 US,62704
US,96786 US,03060 US,13126 US,36108
US,02130 US,74006 US,30188 US,48239
US,37055 US,90220 US,90814 US,91789
US,30014 US,07055 US,30294 US,11238
US,23233 US,83837 US,47150 US,01960
US,10454 US,64108 US,93257 US,29588
US,99654 US,20902 US,32038 US,07076
US,27606 US,60423 US,24578 US,46383
US,43230 US,85339 US,43123 US,11377
US,97365 US,38018 US,33469 US,85710
US,90001 US,45056 US,28645 US,33527
US,17020 US,34655 US,68111 US,60096
US,77331 US,10472 US,90003 US,97405
US,76903 US,07869 US,11725 US,77018

34234 US,73103 US,65101 US,43211 US,08648
US,27292 US,44223 US,63138 US,43221
US,17042 US,30058 US,33133 US,44308
US,67213 US,90009 US,48504 US,77036
US,44902 US,94089 US,70514 US,78228
US,55363 US,06106 US,62666 US,38080
US,98199 US,30238 US,20019 US,80303
US,40241 US,19124 US,85208 US,46803
US,49418 US,98312 US,80101 US,24401
US,23608 US,32953 US,13207 US,37857
US,68873 US,33065 US,38116 US,17518
US,87124 US,46226 US,34610 US,34947
US,11211 US,32724 US,30501 US,90037
US,32926 US,98034 US,07082 US,78542
US,37160 US,32221 US,91709 US,30092
US,78702 US,07456 US,27519 US,06051
US,77303 US,30260 US,34224 US,29909
US,45879 US,19702 US,11235 US,63334
US,54648 US,92020 US,77002 US,29201
US,90077 US,06820 US,26764 US,33027
US,27529 US,30680 US,37416 US,30071
US,60477 US,24089 US,43950 US,41571
US,27408 US,34480 US,89115 US,60435

US,46250 US,68104 US,40299 US,31419
US,85648 US,33435 US,23860 US,15601
US,52807 US,77042 US,27587 US,35216
US,48910 US,89431 US,22403 US,94533
US,54115 US,90621 US,49417 US,95824
US,33510 US,91352 US,48089 US,33594
US,61874 US,17851 US,79336 US

Q1

TYPE: SINGLE SELECTION

Have you received a COVID vaccine?

#	ANSWERS	ANSWERS(%)	COUNT	STRATIFIED ANSWERS(%)	STRATIFIED COUNT
A1	No	26.40%	132	25.83%	129.13
A2	Yes, 1 dose	8.60%	43	8.70%	43.49
A3	Yes, 2 doses	38.00%	190	33.28%	166.39
A4	Yes, 3 doses	22.20%	111	24.96%	124.81
A5	Yes, 4+ doses	4.80%	24	7.24%	36.18

COMPLETES 500

Q2

TYPE: SINGLE SELECTION

Were you injured from the COVID vaccine?

#	ANSWERS	ANSWERS(%)	COUNT	STRATIFIED ANSWERS(%)	STRATIFIED COUNT
A1	No	82.61%	304	87.29%	323.72
A2	Yes	17.39%	64	12.71%	47.15

COMPLETES 368

Q3

TYPE: SINGLE SELECTION

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

#	ANSWERS	ANSWERS(%)	COUNT	STRATIFIED ANSWERS(%)	STRATIFIED COUNT
A1	No	28.12%	18	34.93%	16.47
A2	Yes	71.88%	46	65.07%	30.68

COMPLETES 64

Q4

TYPE: SINGLE SELECTION

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

#	ANSWERS	ANSWERS(%)	COUNT	STRATIFIED ANSWERS(%)	STRATIFIED COUNT
A1	No	53.12%	34	56.19%	26.49
A2	Yes	46.88%	30	43.81%	20.66

COMPLETES 64

Q5

TYPE: SINGLE SELECTION

Did your COVID vaccine injury result in Myocarditis?

#	ANSWERS	ANSWERS(%)	COUNT	STRATIFIED ANSWERS(%)	STRATIFIED COUNT
A1	No	67.19%	43	70.25%	33.12
A2	Yes	32.81%	21	29.75%	14.03

COMPLETES 64

Q6

TYPE: SINGLE SELECTION

Did your COVID vaccine injury result in Pericarditis?

#	ANSWERS	ANSWERS(%)	COUNT	STRATIFIED ANSWERS(%)	STRATIFIED COUNT
A1	No	78.12%	50	80.42%	37.92
A2	Yes	21.88%	14	19.58%	9.23

COMPLETES 64

Q7

TYPE: SINGLE SELECTION

Did your COVID vaccine injury result in any other heart related condition?

#	ANSWERS	ANSWERS(%)	COUNT	STRATIFIED ANSWERS(%)	STRATIFIED COUNT
A1	No	62.50%	40	69.12%	32.59
A2	Yes	37.50%	24	30.88%	14.56

COMPLETES 64

Q8

TYPE: SINGLE SELECTION

How serious is your COVID vaccine injury?

#	ANSWERS	ANSWERS(%)	COUNT	STRATIFIED ANSWERS(%)	STRATIFIED COUNT
A1	Very serious	18.75%	12	14.22%	6.71
A2	Serious	29.69%	19	29.63%	13.97
A3	Somewhat serious	25.00%	16	25.49%	12.02
A4	Not serious	26.56%	17	30.66%	14.46

COMPLETES 64

Q9

TYPE: MULTIPLE SELECTION

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

#	ANSWERS	RESPONDENTS(%)	ANSWERS(%)	COUNT	STRATIFIED RESPONDENTS(%)	STRATIFIED ANSWERS(%)	STRATIFIED COUNT
A1	It will likely shorten my lifespan	31.25%	17.39%	20	28.19%	16.66%	13.29
A2	I am now unable to hold a job	26.56%	14.78%	17	24.04%	14.21%	11.34
A3	I am now unable to work a full day	20.31%	11.30%	13	19.35%	11.43%	9.12
A4	It impacts my personal life	45.31%	25.22%	29	42.77%	25.28%	20.17
A5	It is a minor annoyance	39.06%	21.74%	25	38.43%	22.72%	18.12
A6	None of the above	17.19%	9.57%	11	16.40%	9.69%	7.73

COMPLETES 64

Q10

TYPE: SINGLE SELECTION

Which COVID vaccine product did you receive?

#	ANSWERS	ANSWERS(%)	COUNT	STRATIFIED ANSWERS(%)	STRATIFIED COUNT
A1	Pfizer	45.65%	168	43.13%	159.97
A2	Moderna	35.87%	132	39.81%	147.64
A3	Johnson & Johnson	10.87%	40	10.29%	38.15
A4	Combination of more than one product	5.43%	20	4.33%	16.06
A5	Not sure	2.17%	8	2.44%	9.06

COMPLETES 368

Q11

TYPE: SINGLE SELECTION

Besides yourself, how many people live in your household?

#	ANSWERS	ANSWERS(%)	COUNT	STRATIFIED ANSWERS(%)	STRATIFIED COUNT
A1	0 (I live by myself)	13.00%	65	17.98%	89.89
A2	1 other person	25.00%	125	29.88%	149.39
A3	2 to 4 other people	47.80%	239	40.46%	202.29
A4	5 to 7 other people	13.60%	68	10.76%	53.82
A5	8+ other people	0.60%	3	0.92%	4.61

COMPLETES 500

Q12

TYPE: SINGLE SELECTION

Did anyone else in your household receive at least 1 COVID vaccine?

#	ANSWERS	ANSWERS(%)	COUNT	STRATIFIED ANSWERS(%)	STRATIFIED COUNT
A1	No	27.13%	118	26.56%	108.94
A2	Yes	71.03%	309	72.21%	296.13
A3	Not sure	1.84%	8	1.23%	5.04

COMPLETES 435

Q13

TYPE: NUMERIC OPEN-ENDED

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

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

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

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

#	ANSWERS
A60	3
A61	4
A62	1
A63	20
A64	2
A65	1
A66	4
A67	2
A68	3
A69	1
A70	2
A71	2
A72	2
A73	3
A74	1
A75	2
A76	3
A77	2
A78	2
A79	3
A80	2
A81	1

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

#	ANSWERS
2	
A10 3	1
A10 4	3
A10 5	20
A10 6	3
A10 7	1
A10 8	3
A10 9	4
A11 0	1
A11 1	4
A11 2	3
A11 3	2
A11 4	2
A11 5	1
A11 6	5

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

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

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

#	ANSWERS
0	
A16 1	1
A16 2	1
A16 3	5
A16 4	1
A16 5	1
A16 6	1
A16 7	2
A16 8	1
A16 9	1
A17 0	20
A17 1	2
A17 2	20
A17 3	1
A17 4	2

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

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

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

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

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

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

#	ANSWERS
A26 2	3
A26 3	1
A26 4	2
A26 5	1
A26 6	2
A26 7	2
A26 8	2
A26 9	4
A27 0	2
A27 1	1
A27 2	2
A27 3	18
A27 4	4
A27 5	1
A27	3

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

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

#	ANSWERS
5	
A30 6	5
A30 7	1
A30 8	1
A30 9	1

COMPLETES 309

Q14

TYPE: SINGLE SELECTION

Were any of your household injured from the COVID vaccine?

#	ANSWERS	ANSWERS(%)	COUNT	STRATIFIED ANSWERS(%)	STRATIFIED COUNT
A1	No	86.73%	268	89.83%	266.02
A2	Yes	13.27%	41	10.17%	30.11

COMPLETES 309

Q15

TYPE: NUMERIC OPEN-ENDED

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

#	ANSWERS
A1	2
A2	1
A3	3
A4	1
A5	3
A6	4
A7	1
A8	5
A9	2
A10	4
A11	1
A12	10
A13	10
A14	3
A15	5

#	ANSWERS
A16	2
A17	1
A18	1
A19	1
A20	1
A21	1
A22	1
A23	1
A24	10
A25	10
A26	1
A27	2
A28	1
A29	3
A30	14
A31	1
A32	3
A33	1
A34	5
A35	3
A36	3
A37	1

#	ANSWERS
A38	2
A39	18
A40	1
A41	2

COMPLETES 41

Q16

TYPE: SINGLE SELECTION

Did anyone in your household develop Myocarditis following the COVID vaccine?

#	ANSWERS	ANSWERS(%)	COUNT	STRATIFIED ANSWERS(%)	STRATIFIED COUNT
A1	No	53.66%	22	60.97%	18.36
A2	Yes	46.34%	19	39.03%	11.75

COMPLETES 41

Q17

TYPE: SINGLE SELECTION

Did anyone in your household develop Pericarditis following the COVID vaccine?

#	ANSWERS	ANSWERS(%)	COUNT	STRATIFIED ANSWERS(%)	STRATIFIED COUNT
A1	No	60.98%	25	65.31%	19.67
A2	Yes	39.02%	16	34.69%	10.44

COMPLETES 41

Q18

TYPE: SINGLE SELECTION

Did anyone in your household develop any other heart related conditions following the COVID vaccine?

#	ANSWERS	ANSWERS(%)	COUNT	STRATIFIED ANSWERS(%)	STRATIFIED COUNT
A1	No	48.78%	20	48.43%	14.58
A2	Yes	51.22%	21	51.57%	15.53

COMPLETES 41

Q19

TYPE: SINGLE SELECTION

Did anyone in your household die from the COVID vaccine?

#	ANSWERS	ANSWERS(%)	COUNT	STRATIFIED ANSWERS(%)	STRATIFIED COUNT
A1	No	65.85%	27	73.03%	21.99
A2	Yes	34.15%	14	26.97%	8.12

COMPLETES 41

Q20

TYPE: SINGLE SELECTION

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

#	ANSWERS	ANSWERS(%)	COUNT	STRATIFIED ANSWERS(%)	STRATIFIED COUNT
A1	No	65.60%	328	67.78%	338.9
A2	Yes	34.40%	172	32.22%	161.1

COMPLETES 500

Q21

TYPE: SINGLE SELECTION

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

#	ANSWERS	ANSWERS(%)	COUNT	STRATIFIED ANSWERS(%)	STRATIFIED COUNT
A1	Before	44.19%	76	41.58%	66.99
A2	After	41.28%	71	44.82%	72.2
A3	Both before and after the vaccine	14.53%	25	13.60%	21.91

COMPLETES 172

Q22

TYPE: SINGLE SELECTION

Did any of your household members contract a COVID infection?

#	ANSWERS	ANSWERS(%)	COUNT	STRATIFIED ANSWERS(%)	STRATIFIED COUNT
A1	No	62.00%	310	66.52%	332.59
A2	Yes	34.40%	172	30.22%	151.12
A3	Not sure	3.60%	18	3.26%	16.29

COMPLETES 500

Q23

TYPE: SINGLE SELECTION

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

#	ANSWERS	ANSWERS(%)	COUNT	STRATIFIED ANSWERS(%)	STRATIFIED COUNT
A1	No	89.53%	154	91.54%	138.33
A2	Yes	10.47%	18	8.46%	12.79

COMPLETES 172

Q24

TYPE: SINGLE SELECTION

Did your household member who died from a COVID infection receive at least one COVID vaccine?

#	ANSWERS	ANSWERS(%)	COUNT	STRATIFIED ANSWERS(%)	STRATIFIED COUNT
A1	No	50.00%	9	41.85%	5.35
A2	Yes	44.44%	8	36.72%	4.7
A3	Not sure	5.56%	1	21.43%	2.74

COMPLETES 18

Q25

TYPE: SINGLE SELECTION

Was your household member who died from a COVID infection treated in a hospital, nursing home, or other medical care facility?

#	ANSWERS	ANSWERS(%)	COUNT	STRATIFIED ANSWERS(%)	STRATIFIED COUNT
A1	No	22.22%	4	34.47%	4.41
A2	Yes	77.78%	14	65.53%	8.38

COMPLETES 18

Q26

TYPE: SINGLE SELECTION

Was your household member who died from a COVID infection intubated?

#	ANSWERS	ANSWERS(%)	COUNT	STRATIFIED ANSWERS(%)	STRATIFIED COUNT
A1	No	28.57%	4	27.89%	2.34
A2	Yes	57.14%	8	54.61%	4.58
A3	Not sure	14.29%	2	17.51%	1.47

COMPLETES 14

Q27

TYPE: SINGLE SELECTION

Was your household member who died from a COVID infection placed on a ventilator?

#	ANSWERS	ANSWERS(%)	COUNT	STRATIFIED ANSWERS(%)	STRATIFIED COUNT
A1	No	14.29%	2	12.56%	1.05
A2	Yes	78.57%	11	76.27%	6.39
A3	Not sure	7.14%	1	11.16%	0.94

COMPLETES 14

Q28

TYPE: SINGLE SELECTION

Was your household member who died from a COVID infection treated with Remdesivir?

#	ANSWERS	ANSWERS(%)	COUNT	STRATIFIED ANSWERS(%)	STRATIFIED COUNT
A1	No	28.57%	4	31.52%	2.64
A2	Yes	57.14%	8	55.80%	4.68
A3	Not sure	14.29%	2	12.68%	1.06

COMPLETES 14

Q29

TYPE: SINGLE SELECTION

Was your household member who died from a COVID infection treated with other drugs or medications?

#	ANSWERS	ANSWERS(%)	COUNT	STRATIFIED ANSWERS(%)	STRATIFIED COUNT
A1	No	28.57%	4	24.19%	2.03
A2	Yes	71.43%	10	75.81%	6.35
A3	Not sure	0.00%	0		

COMPLETES 14

Q30

TYPE: SINGLE SELECTION

Do you think your household member's medical treatment for COVID contributed to or caused their death?

#	ANSWERS	ANSWERS(%)	COUNT	STRATIFIED ANSWERS(%)	STRATIFIED COUNT
A1	No	28.57%	4	29.95%	2.51
A2	Yes	64.29%	9	62.14%	5.21
A3	Not sure	7.14%	1	7.91%	0.66

COMPLETES 14

Q31

TYPE: SINGLE SELECTION

Are you planning on getting future COVID vaccines?

#	ANSWERS	ANSWERS(%)	COUNT	STRATIFIED ANSWERS(%)	STRATIFIED COUNT
A1	No	37.00%	185	34.94%	174.69
A2	Yes	41.40%	207	41.85%	209.24
A3	Not sure	21.60%	108	23.21%	116.07

COMPLETES 500

Q32

TYPE: SINGLE SELECTION

If the CDC said COVID vaccines had a 1 in 10 chance of causing death, would you still get future COVID vaccines?

#	ANSWERS	ANSWERS(%)	COUNT	STRATIFIED ANSWERS(%)	STRATIFIED COUNT
A1	No	34.92%	110	35.26%	114.7
A2	Yes	36.51%	115	36.24%	117.88
A3	Not sure	28.57%	90	28.50%	92.72

COMPLETES 315

Q33

TYPE: SINGLE SELECTION

If the CDC said COVID vaccines had a 1 in 10 chance of causing serious injury or permanent disability, would you still get future COVID vaccines?

#	ANSWERS	ANSWERS(%)	COUNT	STRATIFIED ANSWERS(%)	STRATIFIED COUNT
A1	No	41.27%	130	38.92%	126.59
A2	Yes	31.11%	98	31.17%	101.39
A3	Not sure	27.62%	87	29.92%	97.33

COMPLETES 315