



Health Care Is A Human Right - Survey

Identifying Our Needs: The Problem

1. **Do you currently have health insurance?** YES NO
 - a. If yes what type? Thru Employer Spouse's or Parent's Policy Medicaid Medicare
Other _____
 - b) What's the longest period of time you have gone without health insurance? _____
2. **Have you ever had problems getting the health care you need?** YES NO
 - a) If yes, what were/are the reasons? _____
3. **Have you ever had to forgo needed health care because of costs?** YES NO
 - a) If YES, what type of care? Regular Check-Up Surgery Prescription Drugs
 Mental Health Care Dental Care Vision Other: _____
 - b) What costs have been difficult for you: Premiums Deductibles Co-pays
 Co-insurance Paying bills out-of-pocket Other: _____
4. **Have you, or someone in your family, ever experienced any of the following:**
 - a) Stayed in a job only to keep your health insurance? YES NO
If yes, please describe: _____
 - b) Been discriminated against when trying to get healthcare because of your race, immigration status, gender, sexual orientation, age, or disability? YES NO
If yes, please describe: _____
 - c) Developed more serious health problems or delayed treatment because of concerns around cost?
 YES NO
If yes, please describe: _____
 - d) Have had problems paying medical bills? YES NO
If yes, please describe: _____

Claiming Our Rights: The Action

5. **Do you think we should make sure that everyone in Maryland can get the health care they need?** YES NO
6. **Do you believe that health care is a human right?** YES NO
 - a) Do you believe our government has an obligation to protect the human right to health care?
 YES NO NOT SURE
 - b) Would you say that the human right to health care is protected here in Maryland?
 YES NO NOT SURE
7. **Do you feel that you have a say in decisions about our health care system?** YES NO

Responsibilities of Government: The Solution

8. What do you think of the idea of a universal health care system which would be publicly funded from our taxes rather than paying premiums and deductibles to insurers and medical care providers?
[] LIKE IT [] DON'T LIKE [] NOT SURE

a) If you could change anything about our health care system, what would it be?

9. Any other comments you'd like to make?

About you (this will help us analyze the results of this survey)

Which Maryland county or city do you live in? _____

Your gender:

[] Female [] Male [] Transgender Other: _____

Your race or ethnicity:

[] White [] African American [] Latin American
[] Asian [] Native/Indigenous [] Other: _____

Your age: _____

Thank you for completing this survey!

Do you want to get involved?

It is not necessary to give your personal information to do the survey. You can choose to remain anonymous. However, if you would like to get involved in our *Health Care Is a Human Right* Campaign, for example by telling your story, we need some way to get in touch with you!

Name: _____

Phone: _____

Address: _____

Email: _____

[] YES, I would like more information about the Health care Is a Human Right Campaign
[] YES, I would like to get involved!

This survey was collected:

Organizer _____ Location _____ Date _____