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
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  [ ] Cisgender  Other:________________

Your race or ethnicity:  
[ ] White  [ ] African American  [ ] Asian  
[ ] Latino  [ ] Native/Indigenous  [ ] Other:____________

Your age:________

Are you a medical practitioner? [ ] Yes [ ] No If yes, what field?_______________

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 ____________