

The Associated Press-NORC Center for Public Affairs Research

SUPPORT FOR GREATER GOVERNMENT ROLE IN HEALTH CARE FOR OLDER ADULTS

About half of adults in America think Medicare and Medicaid should play large roles in paying for ongoing living assistance for older adults, along with private insurers. And majorities of Democrats and Republicans favor policies to help Americans prepare for the costs of providing and receiving long-term care, according to a study from The Associated Press-NORC Center for Public Affairs Research.

There is bipartisan support for a host of policies to help pay for the costs of long-term care and caregiving, many of which would involve an expanded role for the federal government. Seventy-five percent of U.S. adults overall favor long-term care coverage through Medicare Advantage or supplemental insurance, and about two-thirds support a government-administered long-term care insurance program, government funding for low-income people to receive longterm care in their homes, or Social Security earnings credit for providing care to a loved one.

Tax breaks for purchasing long-term care insurance and for providing care to a family member also enjoy support from about two-thirds of the public.

Some of these policies have more support among those age 50 and older, but majorities of those age 18-49 are also in favor of them. These differences by age are seen among adults overall and within racial and ethnic groups.



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Three Things You Should Know

About The Long-Term Care Poll on Government-Health Care Policy

Among Adults Age 18 and Older:

- Most adults think private health insurers (60%) and Medicare (57%) should have a large responsibility for paying for the costs of longterm care, and about half think the same about Medicaid (53%).
- 2) Majorities of Democrats and Republicans support policies to help pay for care, like paid family leave (87% and 61%) and tax breaks for purchasing long-term care insurance (72% and 68%).
- 3) 58% of Black adults and 56% of Hispanic adults are very or extremely concerned about having access to high-quality health care when they need it compared to 44% of white adults.

Expanding Medicare coverage of certain services is also popular across age groups, racial and ethnic groups, and party identification. More than 8 in 10 adults think Medicare coverage should be expanded to cover dental care (87%), eye examinations for prescription glasses (87%), hearing aids (86%), and long-term care (81%).

Public satisfaction with the current state of health care–overall and for older adults–is quite low. Just 12% of adults think health care in general is handled very or extremely well in the United States, and few think health care for older adults, community support and resources for older adults, and the quality of care at nursing homes are handled well.

Overall, 66% of adults think it is the federal government's responsibility to make sure all Americans have health insurance coverage. Those age 18-49 are more likely to say so than those age 50 and older (73% vs. 58%). While those age 50 and older are more supportive of government policies to address the costs of care for older adults, younger adults are more supportive of a single-payer health care system for all Americans (47% vs. 38%).

The survey finds that white adults express more negative attitudes than Black or Hispanic adults about how the United States handles health care generally, the costs of prescription medication, and mental health care. On the other hand, Black and Hispanic adults express more concern than white adults about personally having access to high-quality health care when they need it (58% and 56% vs. 44%, respectively).

Women also express more concerns than men about accessing quality health care (53% vs. 42%).

Adults are broadly supportive of the government providing support for care during the COVID-19 pandemic. About two-thirds feel that the federal government's investments to make COVID-19 testing, vaccines and boosters, and treatment cheaper for individuals were good things. Older adults and Democrats are especially appreciative of these efforts, though younger adults and Republicans are also generally supportive.

The AP-NORC Center conducted this study with funding from The SCAN Foundation. The survey includes 1,505 interviews with a nationally representative sample of adults in America using the AmeriSpeak Panel[®], the probability-based panel of NORC at the University of Chicago. Interviews were conducted between July 28 and August 1, 2022, via web and phone in English and Spanish. The margin of sampling error is +/- 3.6 percentage points.

FEW GIVE THE UNITED STATES HIGH MARKS FOR HOW IT CARES FOR OLDER ADULTS.

Just 12% of adults think health care in general is handled very or extremely well in the United States. Only 11% feel the same about health care for older adults and community support and resources for older adults, respectively. Even fewer say the same about the quality of care at nursing homes.



Few adults think heath care is handled well in the United States, regardless of race. White adults, however, have more negative views than Black adults about health care in general, health care for older adults, mental health care, and prescription costs. And they have more negative views than Hispanic adults of health care in general, mental health care, and prescription costs.

White adults have more negative views than Black and Hispanic adults about health care in the United States.

Percent of adults who say each is handled not too or not at all well



Forty-eight percent of adults are very or extremely concerned about having access to high-quality health care when they need it, and another 30% are moderately worried.

Age is not associated with differences in concern about personally accessing high-quality care. But women, Black and Hispanic adults, and those making less than \$50,000 a year are all more concerned than their counterparts about having access to high-quality health care.

Women, Black and Hispanic adults, and those with lower incomes are most concerned about accessing quality health care.

■ Extremely/Very concerned ■ Moderately concerned ■ Not too/Not at all concerned

Percent of adults



need it?

Source: AP-NORC/TSF poll conducted July 28-August 1, 2022, with 1,505 adults age 18 and older nationwide.

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MORE THAN HALF OF THE PUBLIC THINKS HEALTH CARE COVERAGE IS THE FEDERAL GOVERNMENT'S RESPONSIBILITY AND SUPPORT POLICIES TO BOOST COVERAGE.

Two-thirds of adults (66%) think it is the federal government's responsibility to make sure all Americans have health care coverage. This represents an increase compared to April 2019 when 57% said the same.¹ Adults age 18-49 are more likely than those age 50 and older to hold this view.

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¹ "Is it the responsibility of the federal government to make sure that all Americans have health care coverage, or not?" <u>https://apnorc.org/wp-content/uploads/2022/09/APNORC_TSF_July22_topline-POSTED.pdf</u>

Younger adults are more likely than those age 50 and older to see universal health care coverage as a responsibility of the federal government.

Percent of adults

■ Yes, a federal government reponsibility ■ No, not a federal government responsibility



Question: Is it the responsibility of the federal government to make sure that all Americans have health care coverage, or not?

Source: AP-NORC/TSF poll conducted July 28-August 1, 2022, with 1,505 adults age 18 and older nationwide.

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This belief also varies based on where people live. Even controlling for other factors like age and partisanship, only 53% of rural adults think health care access should be the responsibility of the federal government compared to 74% of urban adults. Those who live in suburban areas fall in between (65%).

A majority of adults (62%) also believe that paying more in taxes to make health care cheaper is worth the tradeoff, whereas 36% would pay more for health care to keep taxes the same. A similar proportion of adults (roughly 6 in 10) supported the idea that lower health care costs would be worth increased taxes in 2020.² Urbanicity is again associated with these attitudes, with two-thirds (67%) of suburbanites in support compared to roughly half (52%) of rural adults. Urbanites fall in between.

² "Which of the following statements comes closest to your opinion, even if neither is exactly right? When it comes to the health care system..." https://apnorc.org/wp-content/uploads/2022/09/APNORC_TSF_July22_topline-POSTED.pdf

Most adults believe paying more in taxes to keep health care cheaper is worth the tradeoff, though this varies by urbanicity.

Percent of adults who say...



Source: AP-NORC/TSF poll conducted July 28-August 1, 2022, with 1,505 adults age 18 and older nationwide.

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Majorities of adults support changes to the American health care system that would result in increased government involvement in health care. More than half (58%) support a public option for purchasing health insurance through the government. More than two-thirds (68%) favor requiring the government and private insurance plans to cover telehealth, and 80% support allowing the federal government and private insurance to negotiate for lower prescription drug prices. Less than half, however, support the creation of a new single payer health care system that would cover all Americans.



Support for these policies varies according to a number of social and demographic factors.

A policy of requiring government and private insurance plans to cover the cost of care provided through telehealth programs draws broad support across party lines, with about half or more of Democrats, independents, and Republicans in favor.



Questions: [Requiring government and private insurance plans to cover the cost of care provided through telehealth programs, including for prescription consultations, physical or occupational therapy, and mental health services] Would you favor, oppose, or neither favor nor oppose the following?

Source: AP-NORC/TSF poll conducted July 28-August 1, 2022, with 1,505 adults age 18 and older nationwide.



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Allowing the federal government to negotiate drug prices is more popular with older adults. Those age 50 and older are more likely than those age 18-49 to support this policy (87% vs. 74%). Similar trends exist among older and younger Black adults (85% vs. 64%) and Hispanic adults (84% vs. 59%).





Overall, white adults are more likely than Black or Hispanic adults to support the federal government and private insurance negotiating for lower prices on prescriptions drugs, and college graduates are more likely than those without a degree to feel the same. The divide by formal education is more pronounced among Black adults, with 90% of Black college graduates in favor compared to 67% of those without a college degree. In neither group does a lack of support necessarily indicate opposition; both among all adults and just among Black adults, those without a college degree are more likely to be indifferent toward the policy.

This policy enjoys more support from partisans than independents, with 89% of Democrats and 77% of Republicans in favor, compared to just 66% of independents.



Disapproval of federal drug price negotiation is low, and indifference is

Questions: [Allowing the federal government and private insurance to negotiate for lower prices on prescription drugs] Would you favor, oppose, or neither favor nor oppose the following? Source: AP-NORC/TSF poll conducted July 28-August 1, 2022, with 1,505 adults age 18 and older nationwide.



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Support for the creation of a new single-payer health care system divides along age, income, and partisan lines. Those age 18-49 are more in favor than those age 50 and older. Those with incomes above \$30,000 are more likely than those with lower incomes to oppose a single-payer health care system. Finally, while a single-payer system finds highest support among Democrats, just a quarter of independents oppose this policy compared to 54% of Republicans.



Questions: [A single-payer health care system, in which all Americans would get their health insurance from one government plan] Would you favor, oppose, or neither favor nor oppose the following?

Source: AP-NORC/TSF poll conducted July 28-August 1, 2022, with 1,505 adults age 18 and older nationwide.



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There is also broad support for the expansion of Medicare into new areas of coverage, like dental care, eye exams, hearing aids, and long-term care-all of which it does not currently cover. Support for expanding Medicare coverage in these ways has remained high since 2018, when a West Health Institute/NORC survey found that more than 7 in 10 adults supported the addition of these services.³

Large majorities think Medicare should expand to cover dental care, hearing aids, eye examinations, and long-term care. Percent of adults who say yes



the following, or not?

Source: AP-NORC/TSF poll conducted July 28-August 1, 2022, with 1,505 adults age 18 and older nationwide.

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³ West Health Institute and NORC at the University of Chicago. (February 2018). "Americans' Views of Healthcare Costs, Coverage, and Policy." https://www.norc.org/Research/Projects/Pages/americans-views-of-healthcare-costs-coverage-and-policy.aspx

Support for expanding Medicare into these areas is high across demographic groups.

Majorities of Democrats, Republicans, and independents approve of expanding Medicare to cover each of these. Similarly, both those age 18-49 and those age 50 and older think Medicare should cover each of these four items.

THE PUBLIC THINKS PRIVATE AND PUBLIC INSURERS SHOULD BE PAYING FOR THE COST OF LONG-TERM CARE.

Majorities of adults believe that Medicare and health insurance companies should be largely responsible for paying for ongoing living assistance, and about half also think Medicaid should have a large responsibility. Fewer say the same about individuals or families.

Adults of both parties put more responsibility on Medicare, Medicaid, and health insurance companies than individuals or families. However, Democrats are more likely than Republicans to put a large responsibility on Medicare (66% vs. 47%) and Medicaid (61% vs. 42%), while Republicans are more likely to put a large responsibility on individuals (35% vs. 20%) and families (29% vs. 17%). Many Democrats (66%) and Republicans (55%) believe health insurance companies should have a large responsibility when it comes to paying for care.

Most adults place responsibility for paying for ongoing living assistance on insurance companies, Medicare, and Medicaid. Percent of adults



■ Very large/Large responsibility ■ Moderate responsibility ■ Small/No responsibility

Questions: Now, thinking about who should be responsible for paying for the costs of ongoing living assistance... How much responsibility should each of the following have for paying for the costs of ongoing living assistance?

Source: AP-NORC/TSF poll conducted July 28-August 1, 2022, with 1,505 adults age 18 and older nationwide.

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And while there has been some variation over time, adults consistently place more responsibility on insurance providers—especially private insurers and Medicare—compared to individuals and families.



Questions: Now, thinking about who should be responsible for paying for the costs of ongoing living assistance... How much responsibility should each of the following have for paying for the costs of ongoing living assistance?

Source: AP-NORC/TSF polls conducted 2018-2022, with adults age 18 and older nationwide.



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Black adults are more likely than Hispanic adults to think individuals should have a large or moderate responsibility for paying for long-term care (72% vs. 55%). And Black adults are more likely than both Hispanic and white adults are to place at least moderate responsibility with families (69% vs. 55% and 56%, respectively).

Among Black adults, those age 18-49 place larger responsibility on families and individuals than older adults. However, Black adults age 50 and older place greater responsibility on Medicare than those age 18-49.



ADULTS AGE 50 AND OLDER ARE ESPECIALLY SUPPORTIVE OF POLICIES TO HELP PAY FOR THE COSTS OF ONGOING LIVING ASSISTANCE.

To help Americans prepare for the costs of ongoing living assistance, many support policies like a government-administered long-term care insurance program, tax breaks for purchasing long-term care insurance, and other policies. Levels of support for these policies are similar to 2021.



Source: AP-NORC/TSF polls conducted 2018-2022, with adults age 18 and older nationwide.

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Many of both Republicans and Democrats support these policies, with Republicans showing similar levels of support as Democrats for tax breaks for purchasing long-term care insurance, the ability to use non-taxable funds to pay for insurance premiums, and employers offering employee benefits for long-term care insurance plans.

Majorities of both Republicans and Democrats support policies to help Americans prepare for the costs of ongoing living assistance.

Percent of adults who favor



Questions: To help Americans prepare for the costs of ongoing living assistance, sometimes referred to as long-term care, would you favor, oppose, or neither favor nor oppose each of the following?

Source: AP-NORC/TSF poll conducted July 28-August 1, 2022, with 1,505 adults age 18 and older nationwide.



While many younger and older adults support each policy, those age 50 and older are especially supportive of each policy mentioned other than a government-administered long-term care insurance program.



Source: AP-NORC/TSF poll conducted July 28-August 1, 2022, with 1,505 adults age 18 and older nationwide.

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Among Black adults specifically, those age 50 and older are more supportive than those age 18-49 of a government-administered long-term care insurance program, the ability to get long-term care coverage through a Medicare Advantage or supplemental insurance plan, government funding for low-income people to receive care, and an employer-offered long-term care insurance benefit.



Source: AP-NORC/TSF poll conducted July 28-August 1, 2022, with 1,505 adults age 18 and older nationwide.



And among Hispanic adults, those age 50 and older are more supportive than those age 18-49 of a variety of policies. Those age 18-49 are less likely to support tax breaks for purchasing long-term care insurance and the use of non-taxable funds such as 401(k) plans to pay long-term care insurance premiums in particular.



Source: AP-NORC/TSF poll conducted July 28-August 1, 2022, with 1,505 adults age 18 and older nationwide.



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MAJORITIES ALSO SUPPORT A VARIETY OF POLICIES TO HELP PAY FOR THE COSTS OF PROVIDING ONGOING LIVING ASSISTANCE.

To help Americans prepare for the costs of <u>providing</u> ongoing living assistance, majorities also support policies like paid family leave and tax breaks for providing care to a family member. Support for these policies remains at similar levels to what was found in 2018.⁴

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⁴ "To help Americans pay for the costs of <u>providing</u> ongoing living assistance, would you favor, oppose, or neither favor nor oppose each of the following?" <u>https://apnorc.org/wp-content/uploads/2022/09/APNORC_TSF_July22_topline-POSTED.pdf</u>



Questions: To help Americans prepare for the costs of <u>providing</u> ongoing living assistance, would you favor, oppose, or neither favor nor oppose each of the following? **Source:** AP-NORC/TSF poll conducted July 28-August 1, 2022, with 1,505 adults age 18 and older nationwide.



Adults who are currently providing care are more likely to support changing Social Security rules to give earnings credit to caregivers who are out of the workforce to provide care to a family member (80% vs. 67%).

Again, majorities of both Republicans and Democrats support many of these policies to help Americans prepare for the costs of providing ongoing living assistance.

Majorities of both Republicans and Democrats support policies to help prepare for providing ongoing living assistance.

Percent of adults who favor





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Although majorities of both those age 18-49 and age 50 and older are supportive of all of the above policies, older adults are more likely to support tax breaks for people who provide care, tax breaks for employers who provide paid family leave, and a Medicare benefit to provide temporary care if the caregiver and recipient live together and are both Medicare beneficiaries.

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A majority of Black adults support each policy, but those who are 50 and older are more supportive than those age 18-49.



Questions: To help Americans prepare for the costs of <u>providing</u> ongoing living assistance, would you favor, oppose, or neither favor nor oppose each of the following? **Source:** AP-NORC/TSF poll conducted July 28-August 1, 2022, with 1,505 adults age 18 and older nationwide.

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Similarly, Hispanic adults age 50 and older are more likely than younger Hispanic adults to support tax breaks for people who provide care to a family member (88% vs. 64%), a Medicare benefit that provides temporary care if the caregiver and the care recipient live together and are both Medicare beneficiaries (84% vs. 54%), and tax breaks for employers who provide paid family leave to workers (80% vs. 63%).

ABOUT TWO-THIRDS SUPPORT THE GOVERNMENT'S INVESTMENT IN COVID-19 CARE, BUT MANY WORRY ABOUT THE COUNTRY'S PREPARATION FOR ANOTHER PANDEMIC.

A majority of adults think it was a good thing that the federal government invested in making COVID-19 treatment, vaccines and boosters, and testing cheaper for the public. Few think that the federal government's investment was a bad thing.



Among all adults, those age 50 and older are more likely than those age 18-49 to view the government's investments in each of these items as a good thing. Among Black adults specifically, those age 50 and older are especially likely to believe the government's help with making vaccines and boosters cheaper was a good thing, compared to only about half of younger Black adults (82% vs. 55%). Those age 50 and older are also more likely to say the same about testing (85% vs. 55%) and treatment (80% vs. 60%).



More than 8 in 10 Democrats feel that the government's investments in treatment, vaccines and boosters, and testing were good things. However, only around half of independents and Republicans feel the same. Republicans are more likely than independents and Democrats to believe that the government's investments in COVID-19 testing were a bad thing (22% vs. 14% and 5% respectively).

Fewer independents and Republicans have a positive view of the federal government's efforts to reduce the costs of COVID-19 care compared to Democrats.





Looking ahead, just 13% of adults think the United States is extremely or very well prepared to handle a future public health emergency like a pandemic. Somewhat more think their state (19%) and county (17%) are extremely or very well prepared. Thirty-four percent, however, think they personally are extremely or very well prepared.

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Few adults feel the U.S., their state, and their county are extremely or very well prepared for a future public health emergency.

Percent of adults

■ Extremely/Very well prepared ■ Somewhat well prepared ■ Not too/At all prepared



Black and Hispanic adults are more likely than white adults to report that the U.S. is extremely or very well prepared to handle a future public health emergency (21% and 20% vs. 8%, respectively). Fifty-one percent of white adults believe that the U.S. is not too or not at all prepared to handle a future public health emergency compared to only 39% of Black adults. White, Black, and Hispanic adults report similar levels of personal preparedness for a future public health emergency.

Black and Hispanic adults are more positive than white adults about U.S. preparedness for a future public health emergency.

Percent of adults



At least half of adults age 50 and older feel the U.S., their state, and their county are at least somewhat well prepared for a future public health emergency. Younger adults are more likely than adults age 50 and older to report that the U.S., their state, and their county are not too or not at all prepared for such an event. However, the two age groups rate their personal preparedness similarly. Among Black adults specifically, those age 50 and older are more likely to feel their county is extremely or very well prepared, compared to those age 18-49 (28% vs. 15%).

Adults age 50 and older are slightly more positive than adults 18-49 about preparedness for a future public health emergency.

Percent of adults

Extremely/Very well prepared Somewhat well-prepared Not too/Not at all prepared



Source: AP-NORC/TSF poll conducted July 28-August 1, 2022, with 1,505 adults age 18 and older nationwide.



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Those currently providing ongoing living assistance to a loved one express higher levels of personal preparedness for a future public health emergency than those not currently providing care (44% vs. 32%).

Democrats, Republicans, and independents all hold similar assessments about personal, local, state, and national preparedness for another public health emergency.

STUDY METHODOLOGY

This study, funded by <u>The SCAN Foundation</u>, was conducted by The Associated Press-NORC Center for Public Affairs Research. Staff from NORC at the University of Chicago, The Associated Press, and The SCAN Foundation collaborated on all aspects of the study.

Data were collected using the AmeriSpeak Omnibus®, a monthly multi-client survey using NORC's probability-based panel designed to be representative of the U.S. household population. The survey was part of a larger study that included questions about other topics not included in this report. During the initial recruitment phase of the panel, randomly selected U.S. households were sampled with a

known, non-zero probability of selection from the NORC National Sample Frame or a secondary national address frame, both with over 97% coverage of all U.S. addresses, and then contacted by U.S. mail, email, telephone, or field interviewers (face to face). The panel provides sample coverage of approximately 97% of the U.S. household population. Those excluded from the sample include people with P.O. Box only addresses, some addresses not listed in the USPS Delivery Sequence File, and some newly constructed dwellings population. Of note for this study, the panel would also exclude adults who live in some institutional types of settings, such as skilled nursing facilities or nursing homes, depending on how addresses are listed for the facility.

Interviews for this survey were conducted between July 28 and August 1, 2022, with adults age 18 and older representing the 50 states and the District of Columbia. Panel members were randomly drawn from AmeriSpeak, and 1,505 completed the survey–1,434 via the web and 71 via telephone. Panel members were invited by email or phone from a NORC telephone interviewer. Interviews were conducted in English and Spanish. Respondents were offered a small monetary incentive (\$3) for completing the survey.

The final stage completion rate is 17.7%, the weighted household panel recruitment rate is 19.5%, and the weighted household panel retention rate is 77.0%, for a cumulative response rate of 2.7%. The overall margin of sampling error is +/- 3.6 percentage points at the 95% confidence level including the design effect. The margin of sampling error may be higher for subgroups.

In addition, African American and Hispanic respondents were sampled at a higher rate than their proportion of the population for reasons of analysis. The overall margin of sampling error for the 350 completed interviews with African American respondents is +/- 7.5 percentage points at the 95 percent confidence level including the design effect. The overall margin of sampling error for the 375 completed interviews with Hispanic respondents is +/- 8.0 percentage points at the 95 percent confidence level including the design effect.

Sampling error is only one of many potential sources of error, and there may be other unmeasured error in this or any other survey.

Quality assurance checks were conducted to ensure data quality. In total, 71 interviews were removed for nonresponse to at least 50% of the questions asked of them, for completing the survey in less than one-third the median interview time for the full sample, or for straight-lining all grid questions asked of them. These interviews were excluded from the data file prior to weighting.

Once the sample has been selected and fielded, and all the study data have been collected and made final, a poststratification process is used to adjust for any survey nonresponse as well as any noncoverage or under- and oversampling resulting from the study-specific sample design. Poststratification variables included age, gender, census division, race/ethnicity, and education. Weighting variables were obtained from the 2022 Current Population Survey. The weighted data reflect the U.S. population of adults age 18 and over.

For more information, visit <u>www.apnorc.org</u> or <u>www.longtermcarepoll.org</u>, or email <u>info@apnorc.org</u>.

CONTRIBUTING RESEARCHERS

From NORC at the University of Chicago

From The Associated Press

Dan Malato Semilla Stripp Ridgley Knapp Jennifer Benz Lindsey Witt-Swanson Chanteria Milner Emily Swanson Hannah Fingerhut

ABOUT THE SCAN FOUNDATION

The SCAN Foundation is an independent public charity dedicated to creating a society where older adults can access health and supportive services of their choosing to meet their needs. Our mission is to advance a coordinated and easily navigated system of high-quality services for older adults that preserve dignity and independence. For more information, visit <u>www.thescanfoundation.org</u> and <u>@TheSCANFndtn</u>.

ABOUT THE ASSOCIATED PRESS-NORC CENTER FOR PUBLIC AFFAIRS RESEARCH

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The two organizations have established The AP-NORC Center for Public Affairs Research to conduct, analyze, and distribute social science research in the public interest on newsworthy topics, and to use the power of journalism to tell the stories that research reveals. In its 10 years, The AP-NORC Center has conducted more than 250 studies exploring the critical issues facing the public, covering topics like health care, the economy, COVID-19, trust in media, and more.

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