American Experiences Survey:<br>A Nationally Representative Multi-Mode Survey<br>January 2024 Omnibus Results

## Overview of Methodology

Each month, Consumer Reports fields the American Experiences Survey (AES) to track consumer attitudes and behaviors over time. January results are based on interviews conducted from January 5 -16, 2024. This document includes the following sections of the omnibus survey for this month: prescription drug costs, pesticides, sustainability claims, home efficiency, and home, renters, and/or auto insurance.

The survey was administered by NORC at the University of Chicago through its AmeriSpeak® Panel to a nationally representative sample. Interviews were administered both online and by phone. In total NORC collected 2,068 interviews, 1,957 by web mode and 111 by phone mode, 1,967 in English and 101 in Spanish. Final data are weighted by age, gender, race/Hispanic ethnicity, housing tenure, telephone status, education, and Census Division to be proportionally representative of the US adult population.

Key demographic characteristics (after weighting is applied) of this sample are presented below:
$51 \%$ female; median age of 47 years old; $61 \%$ white, non-Hispanic; $35 \% 4$-year college graduates; and $60 \%$ have a household income of $\$ 50,000$ or more.

The margin of error for results based on the total sample is $+/-2.76$ percentage points at the $95 \%$ confidence level. Smaller subgroups will have larger error margins, and only those subgroups for which there are at least 100 unweighted cases are included.

## TOPLINE RESULTS

The January omnibus contained six blocks of questions, one for each topic listed above plus an additional section for internal use. Respondents saw the blocks in a random order.

The questions presented below were shown to respondents in this order within sections unless otherwise noted. Where appropriate, question wording, response answer choices, or direction of scales were randomized or rotated and those instances are noted below.

Prepared by CR Survey Research Department, January 2024
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PD1. [RESPONDENTS ARE PROMPTED TWICE TO RESPOND IF THEY DO NOT DO SO INITIALLY.]

| In the past 12 months, have you had a prescription filled in person at a pharmacy--that is, at a physical |  |
| :--- | :--- |
| store--for medication for yourself or anyone else in your household? |  |
| Please only respond for prescriptions filled at a pharmacy, not any given in a hospital or delivered to your home. |  |
| Please do not include medication for pets. |  |
|  |  |
| Yes | Total |
| No | $\%$ |
| Unsure | 80 |
| Base: All respondents | 18 |

PD2. [SHOW QUESTION IF PD1 = 'YES.' RESPONDENTS ARE PROMPTED ONCE TO RESPOND IF THEY DO NOT DO SO INITIALLY. ROTATE RESPONSE SCALE.]

| How did you pay for the prescription you had filled most recently? |  |
| :--- | :---: |
|  |  |
|  | Total |
|  | $\%$ |
| It was entirely covered by insurance | 31 |
| It was partially covered by insurance and I paid the rest | 60 |
| I paid entirely out-of-pocket | 9 |
| Base: Respondents who had a prescription filled in the past $\mathbf{1 2}$ months | 1,664 |

PD3. [SHOW QUESTION IF PD2 = 'I PAID ENTIRELY OUT-OF-POCKET.' RESPONSE OPTIONS DISPLAYED IN THIS ORDER: 'I DO NOT HAVE INSURANCE'; 'I HAVE INSURANCE, BUT THE INSURANCE DOES NOT COVER THIS PRESCRIPTION'; I HAVE INSURANCE, BUT I CHOSE NOT TO USE IT.']

| You said that you paid for your most recent prescription entirely out-of-pocket. Which of the following <br> best describes your situation? |  |
| :--- | :---: |
|  |  |
|  | Total |
| I have insurance, but the insurance does not cover this prescription | $\%$ |
| I do not have insurance | 50 |
| I have insurance, but I chose not to use it | 42 |
| Base: Respondents who paid for their most recent prescription entirely out of pocket | 9 |

PD4. [RANDOMIZE RESPONSE OPTIONS, HOLDING 'OTHER'; 'NOT APPLICABLE; I HAVE NOT DONE ANYTHING TO LOWER THE COST'; AND 'NOT APPLICABLE; I HAVE NOT HAD ANY PRESCRIPTIONS FILLED' AT END IN THAT ORDER. BOTH 'NOT APPLICABLE' RESPONSES WERE EXCLUSIVE.]

| Which, if any, of the following did you do to lower the cost of any prescriptions you had filled in the past 12 months? |  |
| :---: | :---: |
| Select all that apply. |  |
|  |  |
|  | Total |
|  | \% |
| Filled a prescription for a longer period of time, such as getting 60 or 90 days' worth of the medication at once rather than 30 | 26 |
| Used a coupon from a discounter like GoodRx | 16 |
| Used an insurance mail order program | 10 |
| Used a copay card from a drug manufacturer | 7 |
| Asked a pharmacist if they could offer a lower price | 7 |
| Paid without using insurance because it was cheaper | 6 |
| Filled a prescription though a health clinic, patient assistance program, or charitable care | 5 |
| Used an online discount pharmacy, such as Amazon, Costco, or CostPlus Drugs | 5 |
| Used a pharmacy outside the U.S. to fill a prescription | 2 |
| Other, please specify | 5 |
| Not applicable; I have not done anything to lower the cost of any prescriptions in the past 12 months | 34 |
| Not applicable; I have not had any prescriptions filled in the past 12 months | 9 |
| Base: All respondents | 2,068 |

PD5. [RANDOMIZE RESPONSE OPTIONS, HOLDING 'OTHER'; 'I HAVE NOT HAD TO DO ANYTHING IN PARTICULAR'; AND 'NOT APPLICABLE; I HAVE NOT HAD ANY PRESCRIPTIONS FILLED' AT END IN THAT ORDER. 'I HAVE NOT HAD TO DO ANYTHING IN PARTICULAR' AND 'NOT APPLICABLE' WERE EXCLUSIVE.]

| Which, if any, of the following have you done in the past 12 months in order to be able to pay for |  |
| :--- | :---: |
| prescription medications? |  |
| Select all that apply. |  |
|  | Total |
|  | $\%$ |
| Delayed or chose not to see a healthcare provider | 6 |
| Delayed or chose not to get a recommended medical test or treatment | 6 |
| Delayed paying a credit card bill | 5 |
| Delayed paying utilities, including phone bill | 5 |
| Delayed paying rent or mortgage bills | 3 |
| Other, please specify | 2 |
| I have not had to do anything in particular to help pay for prescription medication | 70 |
| Not applicable; l have not had any prescriptions filled in the past 12 months | 11 |
| Base: All respondents | 2,068 |

## PEST_INTRO.

This section is about pesticides. Pesticides are chemicals applied to fruits and vegetables to kill weeds or insects that would otherwise damage or kill the plant.

PEST1. [RANDOMIZE RESPONSE OPTIONS, KEEPING 'WHEN IT COSTS LESS' AND 'WHEN IT COSTS THE SAME' TOGETHER AND HOLDING 'WHEN I FEEL LIKE IT,' 'I TRY TO BUY ORGANIC PRODUCE WHENEVER POSSIBLE,' 'OTHER,' 'NEVER,' AND 'NOT APPLICABLE' AT END IN THAT ORDER. 'I TRY TO BUY ORGANIC PRODUCE WHENEVER POSSIBLE,' 'NEVER,' AND 'NOT APPLICABLE' WERE EXCLUSIVE.]

Under what circumstances, if at all, do you buy organic fruits and vegetables?
This can be fresh produce, frozen, canned, pureed (such as in applesauce or baby food), or in any other form.
Select all that apply.

|  | Total |
| :--- | :---: |
|  | $\%$ |
| When it costs the same as conventional produce | 35 |
| When it costs less than conventional produce | 31 |
| When it is convenient | 23 |
| When it is a type of produce where I think organic is healthier than conventional | 18 |
| When the organic version looks as good as or better than the conventional version | 17 |
| When I will eat the food | 13 |
| When it is a type of produce where I think organic tastes better than conventional | 13 |
| When children will eat the food | 7 |
| When I feel like it--no particular reason | 18 |
| Itry to buy organic produce whenever possible | 15 |
| Other, please specify | 1 |
| Never; I buy produce, but I do not ever buy organic produce | 14 |
| Not applicable; I do not buy produce at all | 2 |
| Base: All respondents | 2,068 |

PEST2. [RESPONDENTS ARE PROMPTED ONCE TO RESPOND IF THEY DO NOT DO SO INITIALLY. ROTATE RESPONSE SCALE.]

| How concerned or not concerned are you about pesticides in your fruit and vegetables? |  |
| :--- | :---: |
|  |  |
|  | Total |
| Very concerned | $\%$ |
| Somewhat concerned | 24 |
| Not too concerned | 43 |
| Not concerned at all | 27 |
| Base: All respondents | 6 |

PEST3. [SHOW QUESTION IF PEST2 = 'NOT TOO CONCERNED' OR 'NOT CONCERNED AT ALL.' RANDOMIZE RESPONSE OPTIONS, HOLDING 'OTHER' AT END.]

You said you are either not very or not at all concerned about pesticides in your food. Which, if any, of the following are reasons you are not concerned?

Select all that apply.

|  | Total |
| :--- | :---: |
|  | $\%$ |
| I think that any food sold in the US meets safety requirements, even if it has been treated with <br> pesticides | 52 |
| I don't think the amount of pesticides I might eat is enough to be harmful | 50 |
| I avoid buying food that has been treated with pesticides | 8 |
| I don't think pesticides are harmful | 4 |
| Other, please specify | 12 |
| Base: Respondents who are not too or not at all concerned about pesticides | 685 |

PEST4. [SHOW QUESTION IF PEST2 = 'VERY CONCERNED' OR 'SOMEWHAT CONCERNED.' RANDOMIZE RESPONSE OPTIONS, HOLDING 'OTHER' AND 'I DO NOT DO ANYTHING IN PARTICULAR'AT END IN THAT ORDER. II DO NOT DO ANYTHING IN PARTICULAR' WAS EXCLUSIVE.]

| You said you are at least somewhat concerned about pesticides in your food. Which, if any, of the |  |
| :--- | :---: |
| following are ways you try to address these concerns? |  |
| Select all that apply. |  |
|  |  |
|  | Total |
| Wash produce before eating it | $\%$ |
| Peel produce before eating it | 87 |
| Buy organic produce | 41 |
| Buy produce labeled 'pesticide-free' | 40 |
| Grow my own produce | 37 |
| Buy produce that has been pre-cleaned or processed in another way | 29 |
| Other, please specify | 25 |
| I do not do anything in particular to address these concerns | 1 |
| Base: Respondents who are veryor somewhat concerned about pesticides | 2 |

PEST5. [RANDOMIZE ITEMS.]


SCLAIM_INTRO.

Seals and claims on food packaging can communicate information about issues such how the food was produced or where it came from. Some examples are USDA Organic, Fair Trade, and Non-GMO Project Verified.

SCLAIM1. [RANDOMIZE ORDER OF SCLAIM1 AND SCLAIM2. RANDOMIZE RESPONSE OPTIONS, KEEPING 'SUSTAINABLE FISHING,' 'SUSTAINABLE COFFEE PRODUCTION,' AND 'GENERAL SUSTAINABILITY' TOGETHER IN THAT ORDER AND HOLDING 'NOT APPLICABLE' AND 'NONE OF THESE' AT END IN THAT ORDER. 'NOT APPLICABLE' AND 'NONE OF THESE' ARE EXCLUSIVE.]

Below are several types of claims or seals related to sustainability that might be on food products.
Which, if any, of the following types of claims or seals do you care about when you are shopping?
Select all that apply.

|  | Total |
| :--- | :---: |
|  | $\%$ |
| The absence of pesticides, such as Glyphosate Residue Free, Green Shield Certified, Certified <br> Pesticide Residue Free | 43 |
| General sustainability, such as USDA Organic, Certified Regenerative, or Real Organic Project | 42 |
| Sustainable fishing, such as FishWise, Dolphin Safe, or Aquaculture Stewardship Council (ASC) <br> Certified | 29 |
| Environmental impact, such as Climate Neutral Certified or Carbon Trust Verified Co2e Footprint | 20 |
| Sustainable coffee production, such as Shade-Grown, Smithsonian Bird Friendly, or Rainforest <br> Alliance People and Nature | 19 |
| Not applicable; I do not shop for food | 2 |
| None of these; I shop for food but I do not care about any of these | 31 |
| Base: All respondents |  |

SCLAIM2. [RANDOMIZE ORDER OF SCLAIM1 AND SCLAIM2. RANDOMIZE RESPONSE OPTIONS, HOLDING 'NOT APPLICABLE' AND 'NONE OF THESE' AT END IN THAT ORDER. 'NOT APPLICABLE' AND 'NONE OF THESE' ARE EXCLUSIVE.]

Below are several types of claims or seals related to the processes of making food, including how animals and people are treated, that might be on food products.

Which, if any, of the following types of claims or seals do you care about when you are shopping?

Select all that apply.

|  | Total |
| :--- | :---: |
|  | $\%$ |
| What animals are fed or treated with, such as American Grassfed, Certified Responsible <br> Antibiotic Use, or rBST Free | 43 |
| Animal welfare, such as Cage Free, Certified Humane, or Animal Welfare Approved | 42 |
| Ingredients in the food, such as Certified Gluten Free, Certified Plant Based, or No Nitrates | 39 |
| Avoiding genetically modified organisms (GMOs), such as Non-GMO Project Verified or Certified <br> Non-GMO by AGW | 38 |
| How workers are treated or paid, such as Fair Trade Certified, Food Justice Certified, or Equal <br> Exchange Fairly Traded |  |
| Not applicable; I do not shop for food | 32 |
| None of these; I shop for food but I do not care about any of these | 2 |
| Base: All respondents | 25 |

## INSURANCE

INS_SCREEN. [PROMPT RESPONDENT ONCE IF NO RESPONSE INITIALLY SELECTED. RESPONSE OPTIONS DISPLAYED IN THIS ORDER: "HOMEOWNERS INSURANCE," "RENTERS INSURANCE," "AUTO INSURANCE," "NONE OF THESE." "NONE OF THESE" WAS EXCLUSIVE. IF "NONE OF THESE" SELECTED, OR IF NO RESPONSE ("DON'T KNOW" OR NO ANSWER BY PHONE OR SKIPPING THE QUESTION ENTIRELY ONLINE), RESPONDENTS WERE SENT TO THE NEXT SECTION.]

| Which, if any, of the following types of insurance policies do you currently have? |  |
| :--- | :---: |
| Select all that apply. |  |
|  | Total |
|  | $\%$ |
| Auto insurance | 83 |
| Homeowners Insurance | 57 |
| Renters insurance | 15 |
| None of these | 11 |
| Base: All respondents | 2,068 |

INS_SCREEN2. [SHOW IF ANY ANSWER BUT "NONE OF THESE" SELECTED IN INS_SCREEN. PROMPT RESPONDENT ONCE IF NO RESPONSE INITIALLY SELECTED. SHOW EACH TYPE OF INSURANCE IF IT WAS SELECTED IN INS_SCREEN. GRID ITEMS DISPLAYED IN THIS ORDER: "HOMEOWNERS INSURANCE," "RENTERS INSURANCE," "AUTO INSURANCE." RESPONDENTS WHO SAID "I AM OR MY SPOUSE/PARTNER IS THE POLICYHOLDER" FOR AT LEAST ONE TYPE OF INSURANCE CONTINUED IN THIS SECTION; THOSE WHO GAVE ANY OTHER RESPONSE, OR DID NOT RESPOND, FOR ALL THREE TYPES OF INSURANCE WERE SENT TO THE NEXT SECTION.]


INS3. [SHOW IF INS_SCREEN2 = "I AM OR MY SPOUSE/PARTNER IS THE POLICYHOLDER" FOR BOTH HOMEOWNERS AND AUTO INSURANCE.]

| You said that you have both home and auto insurance. Have you bundled your insurance一that is, both |  |
| :--- | :---: |
| your home and auto are with the same company? |  |
|  |  |
|  | Total |
| Yes | $\%$ |
| No | 70 |
| Unsure | 29 |
| Base: Respondents with both homeowners and auto insurance | 1 |

INS4. [SHOW IF INS_SCREEN2 = "I AM OR MY SPOUSE/PARTNER IS THE POLICYHOLDER" FOR BOTH RENTERS AND AUTO INSURANCE.]

| You said that you have both renters and auto insurance. Have you bundled your insurance--that is, both <br> your renters insurance and auto insurance are with the same company? |  |
| :--- | :--- |
|  |  |
|  | Total |
| Yes | $\%$ |
| No | 65 |
| Unsure | 32 |
| Base: Respondents with both renters and auto insurance | 3 |

INS5. [SHOW EACH TYPE OF INSURANCE IF INS_SCREEN2 = "I AM OR MY SPOUSE/PARTNER IS THE POLICYHOLDER" FOR THAT TYPE OF INSURANCE. GRID ITEMS DISPLAYED IN THIS ORDER: "HOMEOWNERS INSURANCE," "RENTERS INSURANCE," "AUTO INSURANCE." RESPONSE OPTIONS DISPLAYED IN THE FOLLOWING ORDER: "ONLY WHEN I WANT OR NEED TO FIND A NEW PROVIDER"; "I SHOP AROUND REGULARLY"; "WHEN I SEE A BETTER PREMIUM OR INCENTIVE BEING ADVERTISED"; "I NEVER COMPARE PREMIUMS"; "OTHER, PLEASE SPECIFY."]


INS6. [SHOW EACH TYPE OF INSURANCE IF INS_SCREEN2 = "I AM OR MY SPOUSE/PARTNER IS THE POLICYHOLDER" FOR THAT TYPE OF INSURANCE. GRID ITEMS DISPLAYED IN THIS ORDER: "HOMEOWNERS INSURANCE," "RENTERS INSURANCE," "AUTO INSURANCE."]


INS7. [SHOW EACH TYPE OF INSURANCE IF INS_SCREEN2 = "I AM OR MY SPOUSE/PARTNER IS THE POLICYHOLDER" FOR THAT TYPE OF INSURANCE. GRID ITEMS DISPLAYED IN THIS ORDER: "HOMEOWNERS INSURANCE," "RENTERS INSURANCE," "AUTO INSURANCE." ROTATE RESPONSE SCALE.]


INS8. [SHOW EACH TYPE OF INSURANCE IF INS_SCREEN2 = "I AM OR MY SPOUSE/PARTNER IS THE POLICYHOLDER" FOR THAT TYPE OF INSURANCE. GRID ITEMS DISPLAYED IN THIS ORDER: "HOMEOWNERS INSURANCE," "RENTERS INSURANCE," "AUTO INSURANCE."]

| When it comes to each kind of insurance below, did you ever choose not to file a claim because you were <br> worried your premium would go up or your insurer would drop you? <br>  <br>  <br> Auto insurance <br>  <br> Yes |  |
| :--- | :---: |
| No | Total |
| Not applicable; I have not had a reason to file a claim |  |
| Base: Respondents with auto insurance | $\%$ |
| Homeowners insurance | 34 |
| Yes | 46 |
| No | 20 |
| Not applicable; I have not had a reason to file a claim | 1,648 |
| Base: Respondents with homeowners insurance |  |
| Renters insurance | $\%$ |
|  | 23 |
| Yes | 51 |
| No | 26 |
| Not applicable; I have not had a reason to file a claim | 1,168 |
| Base: Respondents with rentersinsurance | $\%$ |

HE1. [RESPONDENTS ARE PROMPTED ONCE TO RESPOND IF THEY DO NOT DO SO INITIALLY. RANDOMIZE RESPONSE OPTIONS, HOLDING 'NONE OF THE ABOVE' AT END.]

| In the past five years, which, if any, of the following have you done or bought for your home? |  |
| :--- | :---: |
| Select all that apply. |  |
|  | Total |
|  | $\%$ |
| Bought a new large appliance, such as a refrigerator, dishwasher, or clothes washer or dryer | 46 |
| Bought a new water heater | 19 |
| Replaced windows, exterior doors, or garage doors | 19 |
| Installed a smart thermostat | 18 |
| Bought a battery-powered lawnmower | 9 |
| Installed new insulation | 8 |
| Installed a heat pump or mini-split heating system | 7 |
| Installed solar panels | 5 |
| None of the above | 35 |
| Base: All respondents | 2,068 |

HE2. [SHOW IF ANY RESPONSE SELECTED IN HE1 OTHER THAN 'NONE OF THE ABOVE.' SHOW EACH ITEM IF THAT RESPONSE WAS SELECTED IN HE1. RANDOMIZE ITEMS.]

| You said that you have done the following at some point in the past five years. For each, was the main |  |
| :--- | :---: |
| reason you did it to save money on energy or fuel costs? |  |
|  |  |
| Installing solar panels | Total |
|  |  |
| Yes, mainly to save money on energy | $\%$ |
| No, mainly for some other reason | 91 |
| Base: Respondents who installed solar panels in the past five years | 9 |
| Installing new insulation | 96 |
|  |  |
| Yes, mainly to save money on energy | $\%$ |
| No, mainly for some other reason | 72 |
| Base: Respondents who installed new insulation in the past five years | 28 |

HE2. [CONTINUED.]


HE3. [RANDOMIZE RESPONSE OPTIONS, HOLDING 'I DO NOT TAKE ANY OF THESE ACTIONS TO SAVE MONEY ON ENERGY COSTS' AT END.]

Which, if any, of the following habits or actions do you do in order to save money on energy?
Please include all actions you take for this purpose. Do not include actions you take for a reason other than lowering your bills.

|  | Total |
| :--- | :---: |
|  | $\%$ |
| Adjust or program thermostat to lower temperature sometimes, such as at night or when people <br> are not home | 54 |
| Use a ceiling, standing, or table fan | 54 |
| Open and close windows to manage temperature rather than using heating or cooling systems | 44 |
| Cover windows, such as with curtains, shades, or awnings, during the day when it is hot | 44 |
| Use a small appliance, such as microwave or slow cooker, instead of the main oven | 44 |
| Wash laundry in cold water | 43 |
| Seal windows, doors, and gaps that let in air through walls and floors | 30 |
| Run appliances, such as dishwasher or clothes dryer, at night when energy costs are lower | 28 |
| Remove appliances from power when not in use, such as by unplugging or using a smart plug or | 26 |
| smart power strip | 26 |
| Hang clothes up to dry rather than using a clothes dryer | 19 |
| Reduce temperature on water heater | 15 |
| I do not take any of these actions to save money on energy costs | 10 |
| Base: All respondents | 2,068 |

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