

COVID-19 Attitudes and Vaccine Sentiment in the U.S. Orthodox Jewish Community: Views Among the Chasidish, Yeshivish, and Modern Orthodox Segments

June 2021



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Introduction, Methodology & Responses

Introduction

Nishma Research has been studying the impact of the Coronavirus pandemic on the Jewish community:

- Health, Emotional, Financial & Religious Impacts of the Coronavirus Pandemic in the Jewish Community (June 2020) – A broad exploration of the impacts of the pandemic across segments of the Jewish community.
- Priorities of Trump Voters vs. Biden Voters in the Orthodox Jewish Community: A Post-Election Analysis (November 2020) – While primarily a political study, this included an assessment of the extent to which the pandemic has affected political views.
- The U.S. Jewish Community's Views on Coronavirus and COVID-19
 Vaccines (January 2021) An update on the initial study on where
 the community stands with respect to the pandemic, including a
 focus on attitudes toward vaccines.

These studies drew upon broad samples of the U.S. Jewish community, both Orthodox and non-Orthodox. Among the Orthodox, the earlier surveys includes fewer Haredi (Chasidish – the term we used in the survey, rather than Chasidic, as it is more familiar in this community – and Yeshivish) Jews than their representation in the Jewish community. The goal of this survey was to draw upon a larger and more statistically reliable sample of Haredi Jews, and to obtain their general attitudes toward the pandemic, with a focus on vaccine-related plans and attitudes.

Methodology and Responses

Reaching the Orthodox community is challenging given its relatively small size and the lack of centralized, accessible email or phone lists. In lieu of the latter, we informed the public of this survey by sending out many thousands of emails to seven mostly publication-related email lists (given the ubiquity of these publication, we felt this to be a good way to reach this community) that are comprised of Orthodox and Haredi-leaning Jews: Boro 24 (Borough Park), COL Live (Chabad), Jewish Charedi Network, Mishpacha Magazine, Yated, Yeshiva World News, and Hamodia. There is overlap among these groups and there is no consolidated group with duplications removed; we estimate that over 80,000 emails were sent.

The survey was conducted April 18-28, 2021 and received 4,130 responses. This report covers the 3,666 U.S. respondents (see on the next page the numbers of respondents in each group), and the findings shed fresh light on the heretofore less-studied Haredi segment. The groups analyzed are:

- Chasidish (1,724 total respondents), and its largest subgroups.
- Yeshivish / Agudah / Litvisch (1,212 respondents).
- Modern Orthodox (484 respondents).

See Appendix I (page 23) for demographic data on the respondents as well as guidance that may be helpful in interpreting the data.

With respect to representativeness, this is the largest survey done in the Chasidish community, and we believe the methodology we employed to be the best available at this time. While respondents come from a very wide array of Chasidish sects, it is likely that its most insular members (who speak little English and/or have very limited ability to respond to an online survey) are underrepresented. Our sense of the community suggests that those groups may have greater vaccine hesitancy than the English-speaking Internet-connected Chasidim, and so the overall COVID vaccine hesitancy rates may in fact be slightly higher than what was uncovered in our sample.

Despite the challenges inherent in reaching and surveying a small community, the study uncovers intriguing findings that are distinctive to the Jewish population. We hope these findings will help to inform how the community deals with health issues and promotes future research.

Sponsorship

This research was sponsored by Chevra Hatzalah Volunteer Ambulance Services. Chevra Hatzalah is keenly interested in the health of the Orthodox Jewish community, and the goal of this research is to provide information that will help the community in achieving better health. We thank them for sponsoring an important study. The research, analysis, findings and conclusions were conducted by Nishma Research, an independent firm.

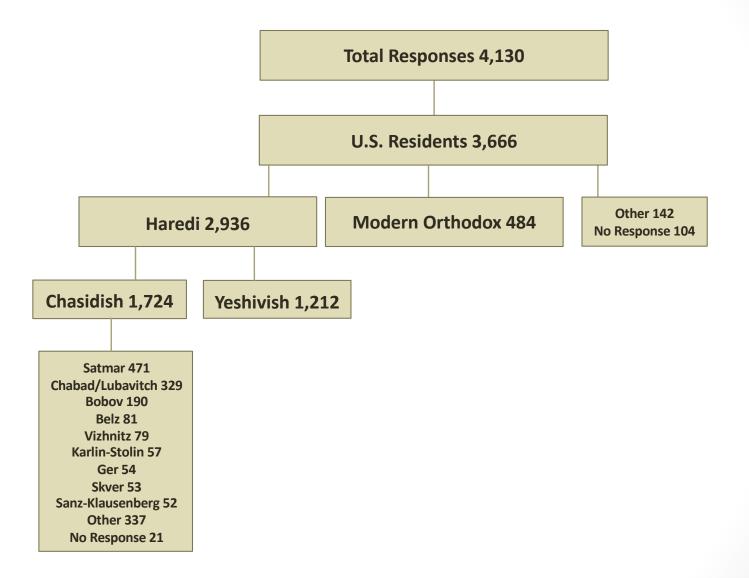
Contact

Nishma Research continues to conduct research on issues that are important to the Jewish and Orthodox community. We welcome feedback, questions, and suggestions.

Mark L. Trencher – Email: mark@nishmaresearch.com West Hartford, Connecticut – June 2021



Number of Survey Responses by Sub-Groups





Summary of Key Findings (Page 1 of 2)

This study is based an April 2021 survey of 3,666 American Orthodox Jews, including 2,936 Haredi (1,724 Chasidish, 1,212 Yeshivish) and 484 Modern Orthodox (MO).

Incidence of COVID-19 and Vaccinations – The incidence of COVID-19 is extremely high among the Haredi, especially among Chasidim, and this drives vaccination rates and attitudes. The % vaccinated ranges from 74% of Modern Orthodox, to 55% of Yeshivish, and 21% of Chasidish and, not surprisingly, these rates are inversely correlated with prior incidence of COVID. But overall, NYC Orthodox vaccination rates are comparable to the estimated 52% of the NYC population that had been vaccinated at the time the survey was conducted.

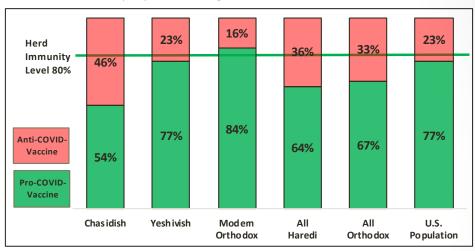
Perceptions of Coronavirus as a Threat – Few Haredi see coronavirus as a major communal threat (about 20% vs. 59% of MO); and few Chasidim wear face masks (24%, vs. 61% of Yeshivish and 84% of MO).

Sources of Coronavirus / COVID-19 Information – Respondents rely on many information sources. There are similarities across groups, with much reliance on medical professionals and social media (in the 40% range). Haredi often rely on Jewish newspapers and personal connections.

Belief that COVID-19 Vaccines are Safe and Effective – The Chasidish community less often believe vaccines are safe (34%) and effective (46%), with about 40% saying they are not sure. Yeshivish and Modern Orthodox views on safety and effectiveness are in the 60%-70% range.

COVID-19 Vaccination Intentions; Overall Vaccine Sentiment Score – There are extremely wide differences among the
Orthodox segments in terms of how many have been vaccinated and what people's plans are. Overall, the Chasidish have more negative vaccine sentiment (46% plan to not get a COVID vaccine) than the other groups, but there are substantial differences among the Chasidish groups (page 17).

Understanding COVID-Vaccine Sentiment – Let us first stipulate that we use the terms "pro-COVID-vaccine" and "anti-COVID-vaccine" (or refer to "vaccine hesitancy) in this report to reflect people's views at this time, specifically relating to their COVID vaccine activity and plans. It is not our intention to label people as ideological "anti-Vaxxers."



- Effect of Having Had COVID A leading driver of COVID vaccine hesitancy is the very high percentage especially among Haredi who had COVID and thus state that they have some protection at least for now due to the resulting antibodies. Indeed, every 4% increase in the incidence of COVID results in a 3% decrease in Pro-COVID-Vaccine sentiment.
- Reasons for Hesitancy While COVID vaccine hesitancy varies substantially among the groups, the hesitant offer essentially similar reasons: they had COVID and have immunity, they are not at risk due to age and health; and similar concerns: safety, side effects, the quick development time. Some respondents express suspicion, cite political motivations and objections to being coerced.
- Variability in Views There are significant differences between the segments, but also across Chasidish sects. For example, those who see COVID-19 as a major threat range between 11% and 54%; and some



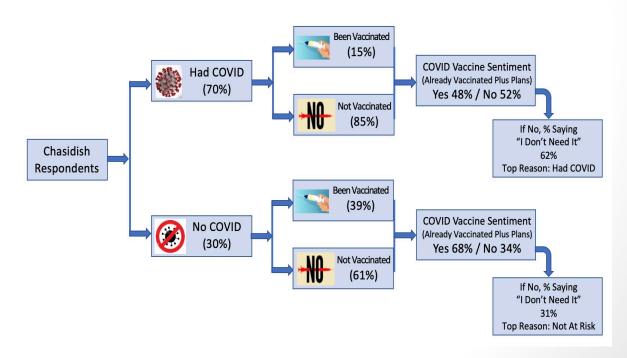
Summary of Key Findings (Page 2 of 2)

Chasidish groups have fewer than one-fourth who see vaccines as safe and effective, vs. more than half who see vaccines as safe and effective in other Chasidish groups. There are even large differences between left- and right-leaning Modern Orthodoxy.

- Demographic Drivers of Vaccine Views Women are more
 worried by COVID; but they also have more uncertainties and
 more COVID vaccine hesitancy; younger respondents take
 COVID less seriously and are much more COVID vaccine
 hesitant; and those with less than a college degree take
 COVID less seriously and have the highest level of COVID
 vaccine hesitancy among the demographic groups examined.
 Finally, those who rely on social media for information are
 slightly more COVID vaccine hesitant, while those who rely on
 medical providers are less COVID vaccine hesitant.
- Future Reconsideration Majorities of the vaccine-hesitant say they are pretty sure they will not reconsider their views, even as they see the results from those being vaccinated. This highlights a challenge of addressing the hesitancy.
- Finally, living in a geographically dense and homogeneous community, as is typical of Chasidish sects, substantially drives up the incidence of COVID, and significantly decreases COVID vaccine sentiment.
- Potential for COVID Vaccine
 Education The findings suggest that people need to learn more about COVID and the vaccines. The next steps for health educators are to

identify groups that can most benefit from education (based on COVID incidence, rates of vaccination, ease of targeting, and likelihood of change), and effective types of messaging (recognizing the many concerns and explaining and providing needed information). Across Orthodoxy, a primary target segment for education and health messaging will likely be the Chasidish – in Brooklyn (given the geographic density), and particularly women, who are more negative on the vaccine. Additionally,, a key target group is the many who have had COVID, with focus on the elderly and health-compromised.

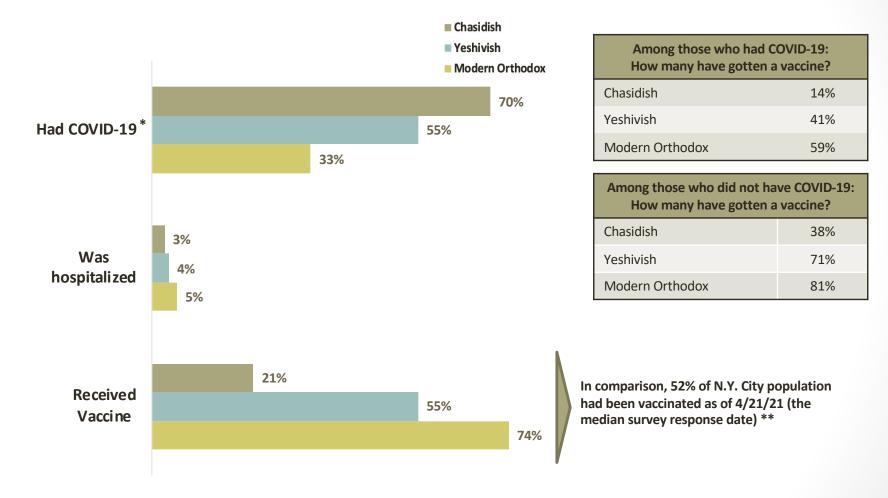
Awareness, Utilization and Value of Chevra Hatzalah's Services – Chevra Hatzalah has high awareness (86% very aware, 94% very or somewhat aware) and high utilization (84% have called in an emergency). These ratings are even higher in the Chasidish community (97% aware and 88% have called). Chevra Hatzalah is very highly valued by the community, with nearly all respondents (94%) rating it as very important.





Jewish

Incidence of COVID-19 and Vaccinations – The incidence of COVID-19 is extremely high among the Haredi, especially among Chasidim, and this drives vaccination rates. The % vaccinated ranges from 74% of Modern Orthodox, to 55% of Yeshivish, and 21% of Chasidish and, not surprisingly, these rates are inversely correlated with prior incidence of COVID. But overall, NYC Orthodox vaccination rates are comparable to the estimated 52% of the NYC population that had been vaccinated at the time the survey was conducted...



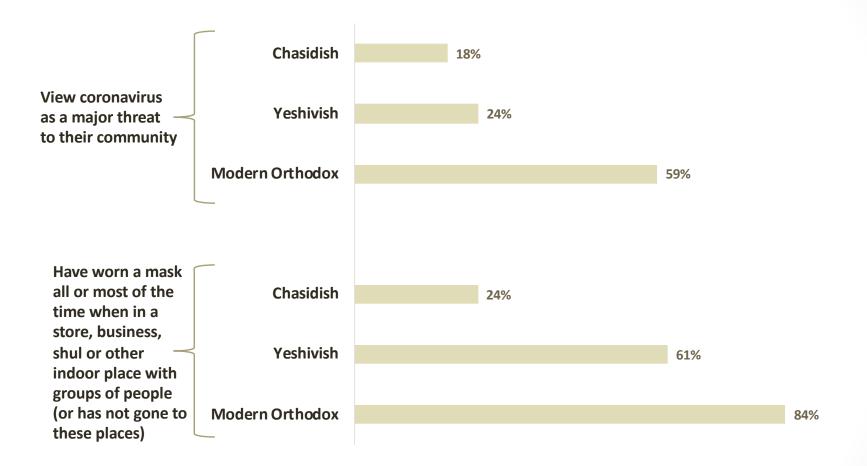
^{*} Incidence of COVID-19 is self-reported, i.e., we don't ask whether respondents had a COVID test, a subsequent antibody test, or received a positive diagnosis from a healthcare provider.

See Q6 in Appendix II – Survey Questionnaire. Average n (number of responses to the survey question) = 1590 Chasidish, 1144 Yeshivish, 466 Modern Orthodox.

^{**} https://www1.nyc.gov/site/doh/covid/covid-19-data-vaccines.page



Perceptions of Coronavirus as a Threat – Very few Haredi see coronavirus as a major threat to their community; very few Chasidim wear face masks, although these are more common among the Yeshivish.



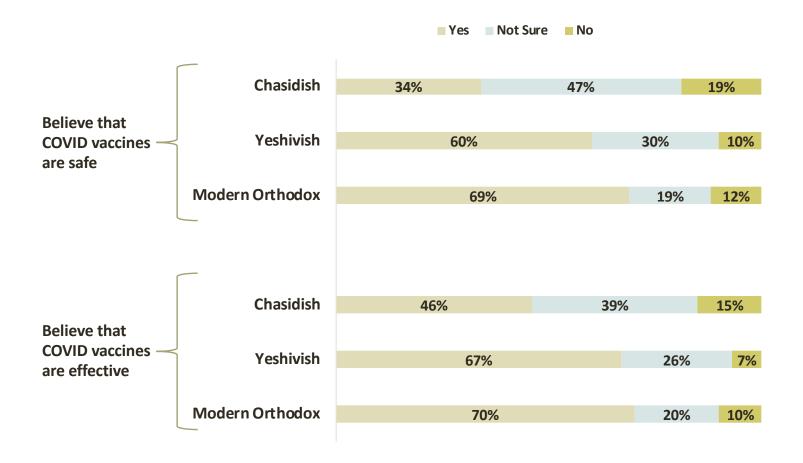


Sources of Coronavirus / COVID-19 Information – Respondents rely on a wide array of information sources. There are similarities across the groups, with much reliance on medical professionals and social media. Haredi rely more on Jewish newspapers and personal connections.

Sources of Information About Coronavirus and COVID-19			
(Listed in descending order for all respondents combined)	Chasidish	Yeshivish	Modern Orthodox
Medical professionals	37%	49%	43%
Social media	41%	35%	47%
Personal connections	38%	42%	28%
Jewish newspapers	38%	41%	25%
Secular newspapers	22%	27%	45%
Websites (non-Government)	21%	30%	17%
Government websites	18%	22%	34%
Radio	10%	24%	21%
Religious leaders	17%	16%	8%
Spouse	12%	15%	10%
Television	7%	12%	32%
Political leaders	5%	4%	5%
Other	7%	5%	4%



Belief that COVID-19 Vaccines are Safe and Effective – The Chasidish community has much lower levels of belief in the vaccines' safety and effectiveness, with many saying they are not sure. Yeshivish and Modern Orthodox have much higher and virtually identical levels of belief.



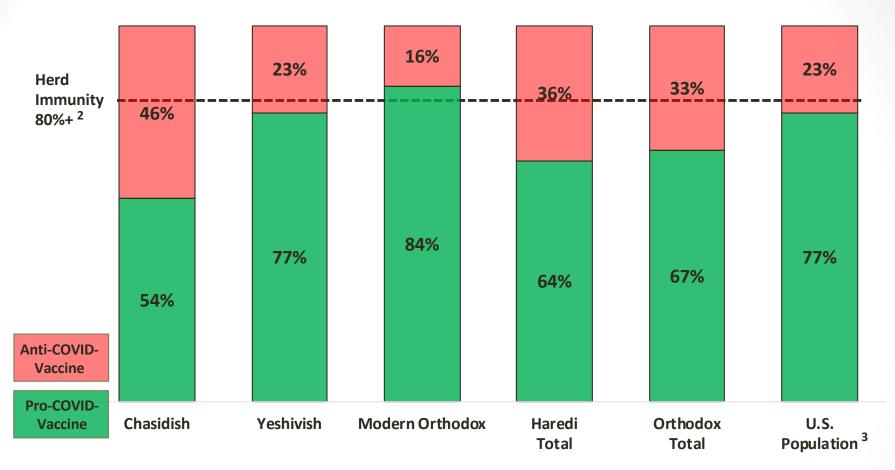
COVID-19 Vaccination and Intentions – There are extremely wide differences among the Orthodox segments in terms of how many have been vaccinated and what people's plans are moving forward.







Overall COVID Vaccine Sentiment – A weighted average score¹ encapsulates "Pro-COVID-Vaccine" and "Anti-COVID-Vaccine" sentiment.



¹ The Pro-COVID-Vaccine score is the projected total percentage that will be vaccinated, calculated as those who have already been vaccinated, plus those who say they will probably get the vaccine, plus 80% of those who say they will probably get the vaccine, plus 20% of those who say they will probably not get the vaccine, and excluding those who say they will definitely not get the vaccine. The-Anti-COVID-Vaccine Score is simply 100% minus the Pro-COVID-Vaccine score.



² The percentage needed for herd immunity is subjective. CDC (Centers for Disease Control and Prevention) and other sources have recently estimated it at various levels between 75% and 90%, as they factor in the transmissibility of Coronavirus variants. For example: "The spread of the new variant means that about 80% of the population would need to be vaccinated to stop COVID-19, CDC scientists said. That is about 10 percentage points higher than some federal officials originally anticipated." (Wall Street Journal, January 16, 2021)

³ Kaiser Family Foundation COVID-19 Vaccine Monitor, April 28, 2021, https://www.kff.org/coronavirus-covid-19/dashboard/kff-covid-19-vaccine-monitor-dashboard/; the response categories are Already got, Will get ASAP, Will wait and see, Will only get if required, and Will definitely not get; we have applied the above-described weights to these five options in a manner analogous to the process applied to our survey data.



Reasons for Pro- or Anti-COVID-Vaccine Sentiment – Much vaccine hesitancy is driven by the many Haredi who had COVID in the past, and thus have some protection due to the resulting antibodies. Other reasons are concerns about safety, side effects, and the quick development time. Some respondents express suspicion, cite political motivations and objections to being coerced.

	Why People Will Probably or Definitely Not Get a COVID-19 Vaccine			
Top 5 Reasons	Chasidish	Yeshivish	Modern Orthodox	
1	Concern about safety 71%	Concern about safety 77%	Concern about safety 76%	
2	Concern about side effects 58%	Concern about side effects 66%	Concern about side effects 63%	
3	I don't think I need it 57%	Concern over quick development 58%	Concern over quick development 58%	
4	Concern over quick development 50%	I don't think I need it 56%	I don't think I need it 44%	
5	Not sure it will be effective 27%	Not sure it will be effective 23%	Not sure it will be effective 37%	

- COVID-19
 Attitudes and
 Vaccine
 Sentiment in
 the U.S.
 Orthodox
 Jewish
 Community
- NISHMA RESEARCH Sociological and Marketing Research for the Jewish Community
- Respondents were given opportunities to explain why they plan to definitely or probably not get vaccinated. Those who checked "I don't think I need it" were asked why they have that view, and all those who plan to definitely or probably not get vaccinated were given the opportunity to explain their views.
- This page and the next page contain a representative sample of the over 1,200 verbatim responses, categorized by the major themes, and these are presented as is ... without edits to spelling, grammar, etc. We recommend that readers review these responses, as they present a valuable qualitative addition to the statistical data.

Reasons Given	Sample Verbatim Reponses (All Responses Available at https://bit.ly/Hatzalah-Survey-Verbatims)
Already Had COVID/ Have Antibodies	 I had covid-19, 99% people didn't get it again. I believe having had covid there is immunity. Because I recently checked my antibody level and it's pretty high. There's no need. I have antibodies. Besides, the fact that Pfizer now says we need a third shot to make it work just proves how silly this entire matter is. I don't think I need it, I had a heavy case of COVID and got high antibodies and even checked it twice since then and still have high antibodies.
Not At Risk	 Because covid is not a dangerous disease for people in my age group covid statistics demonstrate that covid is a disease that mainly affects older individuals. As a young healthy adult under the age of 30,1 refuse to get vaccinated for a virus which has a less than 1% mortality rate. My natural immune system that Hashem created will protect me better than any man made vaccine or other pharmaceutical can.
Side Effects / Unsafe	 we still know very little about the possible side effects that may stem from the vaccine, long-term or short term. I will wait a reasonable time to see the side affects and what benefit I'm getting for taking it. On the fence about the vaccine, have to wait to have more info. I'm nervous about long term side effects and issues it can cause in the future in regards to pregnancy.
Fast Development	 you don't know the side effects from the vaccine, every vaccine takes five to eight years to develop this is less than a year. This vaccine is not around long enough for me to feel comfortable putting in my body. I'd rather take my chances with natural immunity Why is it that the ebola vaccine took so long to get APPROVED in 2019 which is much after the December 2013 to January 2016 outbreak as opposed to the Covid vaccine which got approved (emergency use authorization/not approved) in record time.

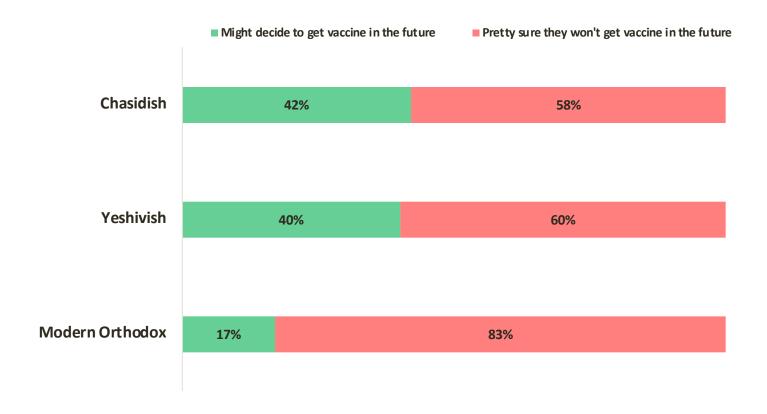
Reasons for Anti-COVID-Vaccine Sentiment: A Sample of the Verbatim Responses (Page 2 of 2)

Reasons Given	Sample Verbatim Reponses (All Responses Available at https://bit.ly/Hatzalah-Survey-Verbatims)
COVID Not So Serious	 I dont agree that covid is life- threatening. It seems to me that most xovid deaths were related to negligence and politically advised medicine withholding. I believe that xovid can be treated with strong antibiotics, serious, etc, and that the vaccine is more dangerous than the disease. I'm young and can easily survive flue like symptoms. The survival rate for COVID-19 for regular middle age health people is 99.99%.
Will Wait and See	 I might take it, but not very soon. I'll rather wait a while and see how it works out. we will have to wait for sure 5 years to see how it works. I am taking a wait-and-see approach, and if I feel the vaccine is warranted for ME, I will consider it again when it has a track record.
Other Treatments Available	 Because there is enough good treatment out there & a cure for it, so it's not necessary. i preffer not to put such a thing into my body, as long as there are effective natural way to go about it.
Distrust / Coercion	 A govmt and Big Pharma who lied to us about hydroxychloroquine and ivermectin is not too be trusted. the yoyo we've experiencedtakes away every single bit of trust we had in the government . Cause you're pushing for it, tell me how much kickback money you got for this??? Covid has become political and is not as a threat as the media, politicians, and US gov. make it seem. Nothing good is for free and so fast available for everyone! If the vaccine was so great and the virus was realy so dangerous nobody would have needed to convince anyone to take it ppl around the world would line up to get it!
Childbearing / Fertility	 Once they have gathered more evidence over time that the vaccine is safe on this population (childbearing), I will have no problem getting it. people are saying it can cause infertility, now theyre saying its not true, how do you know what to believe anymore.
Misinformation	 its NOT a vaccine (shame on YOU - don't be complicit with the known fraud!) its gene therapy and experimental and not even fda approved there have been already MASSIVE side-effects (mostly censored from media and social media) I dotn think the vaccine has more lasting immunity then covid itself This vaccine is severely dangerous!! It is not a vaccine and was never intended as a vaccine. It's a Bio-Weapon! Shame on all the Askunim that promote something so dangerous. I believe in Hashem. Hatzolah has NERVE to promote this. unknown long term risks, no medical benefit personally, I'm more likely to suffer a serious adverse incident or death from the vaccine (albeit maybe 1/100,000) than from covid The ppl behind the experimental shot called the covid vaccine are not good people & they are not God fearing people. The way the shot is manufactured is done in ways not in alignment at all with the jewish way of life. I have been studying doxycycline hyclate extensively for the past 5 years. Covid does not kill people or send them to the hospital per se.



Likelihood to Reconsider Anti-COVID-Vaccine Sentiment – Majorities of the vaccine-hesitant say they are pretty sure they will not reconsider their views, even as they see the results from those being vaccinated. This highlights a challenge of addressing the hesitancy.



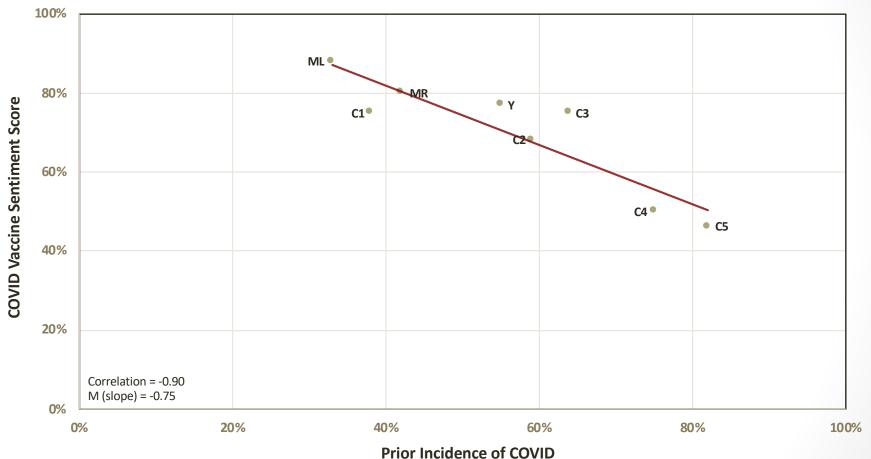




How Having COVID Affects Vaccine Sentiment

Pro-COVID-Vaccine sentiment is very strongly and inversely related to prior incidence of COVID. The "elasticity" is -0.75, meaning that every 4% increase in the incidence of COVID results in a 3% decrease in the overall group's (including those who had COVID) Pro-COVID-Vaccine sentiment (intention to be vaccinated).

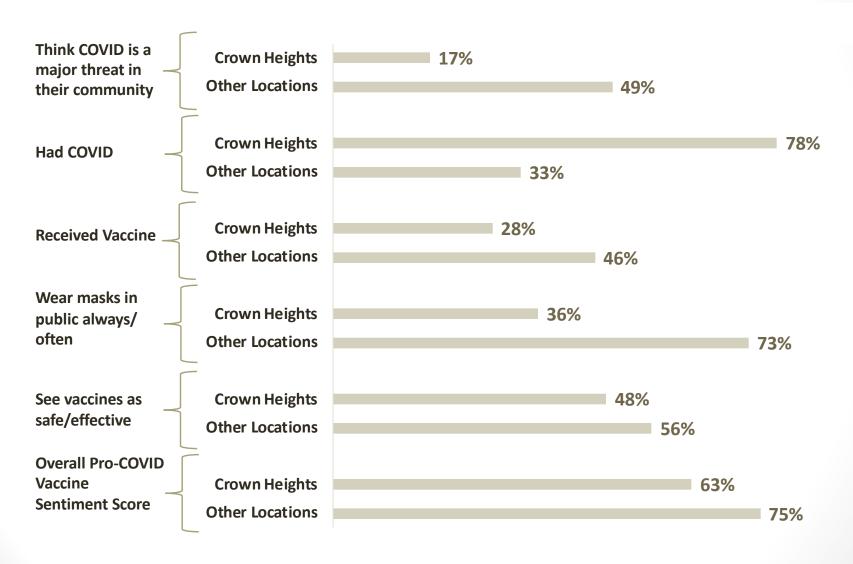




This analysis explores the relationship between incidence of COVID (explanatory variable on horizontal axis) and pro-COVID vaccine sentiment (response variable on vertical axis). Respondents divided into nine groups: ML = Left/Center leaning Modern Orthodox, MR = Right-leaning Modern Orthodox, Y = Yeshivish; followed by Chasidish segments C1 = Chabad/Lubavitch outside Brooklyn; C2 = Belz & Sanz-Klausenberg; C3 = Ger & Karlin-Stolin; C4 = Chabad/Lubavitch in Crown Heights, Satmar & Bobov; C5 = Skver & Vizhnitz.



The Impact of a Geographically Dense and Homogeneous Community – We drew upon Chabad/Lubavitch data, comparing the 45% in Crown Heights with the 55% who live elsewhere. Clearly, living in a geographically dense and homogeneous community, as is typical of Chasidish sects, substantially drives up the incidence of COVID, and significantly decreases COVID vaccine sentiment.





Other Factors Affecting COVID-19 Attitudes and Vaccine Sentiment – Differences Among Orthodox Groups and Among Chasidish Sects

Differences Among Orthodox Groups				
	Seriousness of COVID-19 ¹	Vaccine Safety/ Effectiveness ²	Pro-COVID- Vaccine	Anti-COVID- Vaccine
Chasidish	24%	40%	53%	47%
– Satmar	11%	30%	41%	59%
- Chabad/Lubavitch	54%	53%	69%	31%
- Bobov	18%	45%	56%	44%
– Belz	38%	50%	68%	32%
– Vizhnitz	17%	24%	39%	61%
- Other ³	19%	41%	53%	47%
Yeshivish	61%	64%	77%	23%
Right-Leaning MO ⁴	77%	63%	80%	20%
Center-Left MO ⁴	90%	74%	88%	12%

- There are significant differences among the segments. Within Haredi Jewry, the Chasidish view COVID as much less serious than the Yeshivish and are much more vaccine hesitant.
- Within the Chasidish, we see some large differences among the sects.
- There are also large differences between leftand right-leaning Modern Orthodoxy.

¹ The % that wear a mask always or most of the time serves as a proxy for the extent to which COVID-19 is taken seriously.

² The average of the % that view the vaccines as safe and the % that view the vaccines as effective.

³ Includes Karlin-Stolin, Ger, Skver, Sanz-Klausenberg, Other sects, and those who indicated they are Chasidish but did not identify their sect.

⁴ Past Nishma studies have shown sharp differences within Modern Orthodoxy. To gauge whether similar differences manifest with respect to COVID-19, we compare the Right-Leaning Modern Orthodox (the 34% who self-identified as "To the right" ... More stringent (machmir) Centrist Orthodox), vs. the Center-Left Modern Orthodox (the 66% who self-identified as either "To the left" - Liberal Modern Orthodox, or "In the center" - Centrist Modern Orthodox).



Community

Other Factors Affecting COVID-19 Attitudes and Vaccine Sentiment – Differences by Age, Gender, Education and Sources of Information

Differences by Demographic Characteristics				
	Seriousness of COVID-19	Vaccine Safety/ Effectiveness	Pro- COVID- Vaccine	Anti- COVID- Vaccine
Gender				
– Male	40%	61%	70%	30%
– Female	58%	44%	64%	36%
Age				
- 18 to 44	42%	50%	62%	38%
-45 +	62%	62%	78%	22%
Education				
- Less than College Grad	39%	47%	61%	39%
- College Graduate	63%	64%	77%	23%
Sources of Information				
– Rely on social media	49%	50%	65%	35%
– No social media	45%	54%	68%	32%
- Rely on medical professionals	53%	61%	73%	27%
- No medical professionals	45%	54%	68%	32%

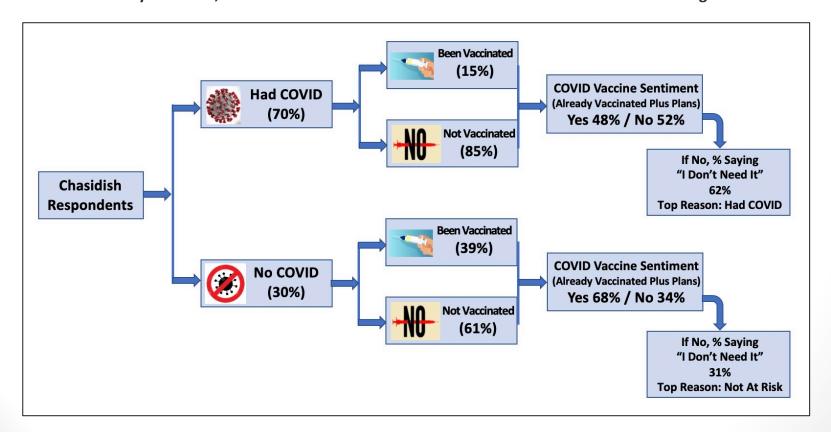
- Women are more worried by COVID; but they also have more uncertainties and more vaccine hesitancy.
- Younger respondents take COVID less seriously and are much more vaccine hesitant.
- Those with less than a college degree take COVID less seriously and have the highest level of vaccine hesitancy among the demographic groups examined.
- Those who rely on social media are slightly more vaccine hesitant, while those who rely on medical providers are less vaccine hesitant.
- It should be noted that some of the demographic differences are due to the segments in which people identify.

Jewish

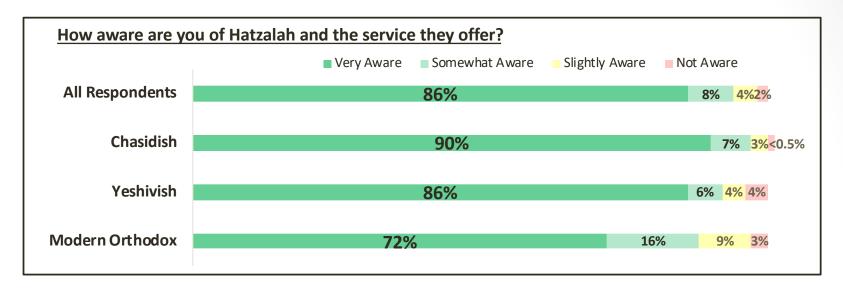
Community

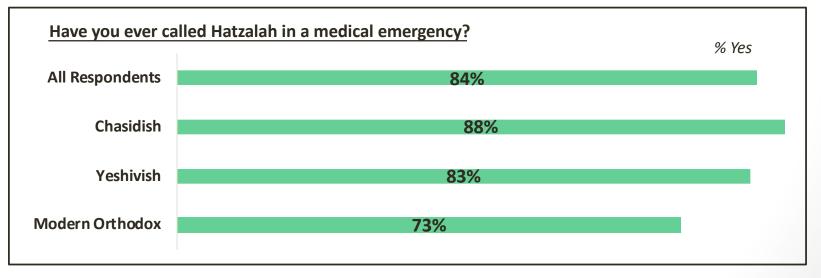
Potential for COVID Vaccine Education

- The study findings suggest that follow-up education and health messaging will likely be useful. The next steps for health educators are to identify groups that can most benefit from education (based on COVID incidence, rates of vaccination, ease of targeting, and likelihood of change), and effective types of messaging (recognizing the many concerns and explaining and providing needed information).
- Across Orthodoxy, the primary target segment is the Chasidic in Brooklyn (given the geographic density),
 and particularly women, who are more negative on the vaccine. More broadly, a key target group is the many
 who have had COVID, with focus on the elderly and health-compromised. The following chart illustrates how
 and why those who had COVID more often forego vaccination, although the medical consensus is that PostCOVID immunity is limited, and its combination with vaccination is far more effective in the long term.



Awareness and Utilization of Chevra Hatzalah's Services – Chevra Hatzalah has high awareness (86% very aware and 94% very or somewhat aware) and high utilization (84% have called in an emergency). These ratings are even higher in the Chasidish community (97% aware and 88% have called).







Chevra Hatzalah's Value to the Community – Chevra Hatzalah is very highly valued by the community, with nearly all respondents (94%) rating it as very important.









Appendix I – Demographic Summary Statistical Note

Demographic Summary

Demographic Summary	Chasidish	Yeshivish	Modern Orthodox
Gender (% Male / Female)	62% / 38%	46% / 54%	49% / 51%
Marital Status (% Married)	85%	78%	72%
Age (% 18-29 / 30-44 / 45-59 / 60+)	33% / 42% / 14% / 11%	21% / 36% / 22% / 21%	20% / 36% / 17% / 27%
– Median	35	41	48
Education (% College Graduate)	21%	58%	62%
Employment (% Full-Time)	66%	56%	61%
Household Income (% 100,000+)	36%	48%	48%
– Median	\$77K	\$97K	\$97K
Comfortable with English / Yiddish	94% / 81%	Not Asked	Not Asked
Geographic Location	As online list/publication subscribers, respondents came from a wide geographic area. But the vast majority (77%) are from the New York-New Jersey area, and of these a bit more than half are from Brooklyn, NY.		

Statistical Note

- This was an opt-in, email invitation, on-line survey. See page 3 for discussion of the methodology and sample representativeness.
- While margins of error are not so meaningful in surveys of this type, the data paint a convincing picture with respect to different segments' attitudes, and we found many striking differences between the segments.
- The following statistical measures may be helpful in comparing groups, i.e., differences at which 95% statistical significance is reached: Chasidish vs. Yeshivish A 4 percentage point difference is statistically significant; Chasidish vs. Modern Orthodox A 5 percentage point difference is statistically significant; Yeshivish vs. Modern Orthodox A 5 percentage point difference is statistically significant. For the largest Chasidish sects, Satmar, Chabad/Lubavitch, and Bobov data are statistically significantly different from that of the Chasidim overall if the differences are 5, 6, and 7 percentage points, respectively. Comparing Chabad/Lubavitch residing in Brooklyn to other Chabad/Lubavitch (page 18), a 10 percentage point difference is statistically significant.
- As is true for all surveys, responses should be viewed with appropriate understanding and caution, and through the lens of what is already known.



Appendix II – Survey Questionnaire

Survey Questionnaire (Page 1 of 3)

HATZALAH COVID-19 & HEALTH SURVEY April 2021

INTRODUCTION

Chevra Hatzalah wants to learn more about our community's views on health issues, including those dealing with Coronavirus and vaccines.

This survey is being conducted for Chevra Hatzalah by Nishma Research and will take about five minutes. Only a few of the questions require a response, but we hope you will respond as fully as possible. The survey is anonymous and will be available until Wednesday, April 28, at 10:00 pm Eastern Time.

In appreciation of your help, we will be awarding twenty \$50 Visa gift cards, and you will have a chance at the end of the survey to enter your email in order to be entered in the prize drawing. If you enter your email that information will not be attached to your responses.

*Q1. Let's get started ...

- Please check here to confirm that you are Jewish, age 18+, and wish to take this survey
- Please check here if you decide not to take this survey

*Q2. Which of these best describes how you identify Jewishly?

- Chasidish (Including Chabad)
- Yeshivish / Agudah / Litvish
- Modern or Centrist Orthodox
- Other Please describe

Ask if Q2 = Chasidish:

Q3. In which Chasidish group do you belong?

- Belz
- Bobov
- Chabad / Lubavitch
- Ger
- Karlin-Stolin
- Sanz-Klausenberg
- Satmar

- Satmar
- Skver
- Vizhnitz
- Other Please describe

Ask if O2 = Chasidish:

Q4. Please check all languages that you are comfortable speaking.

- English
- Yiddish
- Hebrew
- Russian
- Other Please describe

Q5. Do you think coronavirus is a threat at this time in your Jewish community?

- Coronavirus is still a major threat
- Coronavirus is a minor threat
- Coronavirus is not a threat

Q6. Have you ...

- Had COVID-19?
- Been hospitalized due to COVID-19?
- Received a COVID-19 vaccine?

Response Options:

- Yes
- No

Q7. In the past month, how often have you worn a mask or face covering when you were in a store, business, shul or other indoor places with groups of people?

- All or most of the time
- Some of the time
- · Hardly ever
- Never
- · Have not gone to these types of places



^{*} Indicates that a response was required

Survey Questionnaire (Page 2 of 3)

Q8. Where do you get information about coronavirus and the vaccines? Please check up to four sources that you most often rely on the most.

[Multiple responses up to 4]

- Secular (non-Jewish) newspapers
- Jewish newspapers
- Television
- Radio
- Social media (Facebook, WhatsApp, etc.)
- Government websites
- Other websites
- Your spouse
- Personal connections (other family, friends, people in your community)
- Medical professionals
- Political leaders
- · Religious leaders
- Other Please describe

Q9. Do you believe the COVID-19 vaccines are <u>safe</u>? Please check the answer that is closest to your overall view.

- Yes
- No
- Not Sure

Q10. Do you believe the COVID-19 vaccines are <u>effective</u>? Please check the answer that is closest to your overall view.

- Yes
- No
- Not Sure

Skip if Q6c (Received a COVID-19 vaccine) = Yes

Q11. What are your plans regarding getting the COVID-19 vaccine?

- I will definitely get a vaccine
- I will probably get a vaccine
- I will probably not get a vaccine
- I will definitely not get a vaccine

Ask if Q11 = Probably or definitely not:

Q12. Why will you probably or definitely not get a vaccine? Please check up to your top four reasons.

[Multiple responses up to 4]

• I don't think I need it

- I am concerned about how guickly the vaccines were developed
- I am concerned about the vaccines' safety
- I am not sure it will be effective
- I am generally against vaccines
- I am concerned about side effects
- I am concerned about the cost
- I have been advised by religious leader(s) to not get the vaccine
- I have been advised by people I know to not get the vaccine

Ask if Q12a (I don't think I need it) is checked:

Q13. You checked "I don't think I need it (the vaccine)." Why do you say that? [Open-Ended]

Ask if Q11 = Probably or definitely not:

Q14. Now that people are getting the vaccine, as more information becomes available about it, would you say:

- You might decide to get the vaccine in the future
- You're pretty sure you won't get the vaccine in the future

Ask if Q11 = Probably or definitely not:

Q15. What else would you like to tell us about the reasons why you will probably or definitely not get the vaccine? [Open-Ended]

Q16. How aware are you of Hatzalah and the service they offer?

- I am very aware of Hatzalah
- I am somewhat aware
- · I am only slightly aware
- I am not aware

Ask if Q16 = Very aware, somewhat aware, or slightly aware

Q17. Have you ever called Hatzalah in a medical emergency?

- Yes
- No

Ask if Q16 = Very aware or somewhat aware

Q18. How do you rate Hatzalah in terms of its value to the community?

- Hatzalah is very important to the community
- Somewhat important
- Slightly important
- Not very important
- Don't know



Survey Questionnaire (Page 3 of 3)

*Q19. What is your gender?

- Male
- Female

Q20. What is your marital/relationship status

- Married
- Single
- Divorced or Separated
- Widowed
- Other

*Q21. What is your age?

- 18 to 29
- 30 to 44
- 45 to 59
- 60 to 74
- 75 or older
- Would rather not say

Q22. What is the highest level of schooling you have completed?

- High school graduate or less
- Some college, less than four-year Bachelor's degree
- Four-year Bachelor's degree
- Postgraduate or professional schooling/degree (e.g., master's, doctorate, medical, law)

Q23. Which of the following best describes your employment status?

- Employed or self-employed full-time
- Employed or self-employed part-time
- Retired
- Homemaker
- Student
- · Working or volunteering non-paid
- Disabled/handicapped
- Not employed

Q24. What is your total annual household income?

- Under \$50,000
- \$50,000 to \$74,999
- \$75,000 to \$99,999
- \$100,000 to \$139,999
- \$140,000 to \$199,999
- \$200,000 or moreWould rather not say

Q25. If you live in the U.S., what are the first three digits of your primary residential zip code? ______

Ask if Q2 = Modern or Centrist Orthodox:

Q26. Where do you see yourself within the range of Modern or Centrist Orthodoxy?

- "To the left" ... Liberal Modern Orthodox
- "In the center" ... Centrist Modern Orthodox
- "To the right" ... More stringent (machmir) Centrist Orthodox

Thank you very much for sharing your thoughts. Your response is very important to us. Q27.

- Please check here to be entered into our prize drawing for a \$50 Visa gift card
- Please check here to get a summary of the survey findings
- Please check here if you are OK with getting occasional (not often) invitations to research in the Jewish community

If either box in Q27 is checked:

Please enter your email address. Your email will be totally confidential. It will not be used for any other purposes and will not be attached to your survey responses. [Small text box, formatted for email address]

We encourage you to share this survey with family, friends, colleagues, social media, etc. [Link provided]

You may now close this browser window or tab to exit the survey. Thank you!



- COVID-19
 Attitudes and
 Vaccine
 Sentiment in
 the U.S.
 Orthodox
 Jewish
 Community
- NISHMA RESEARCH Sociological and Marketing Research for the Jewith Community

- Nishma Research was founded in 2015, with the purpose of informing the Jewish community through communal and organizational studies.
 "Nishma" means "we listen" – and our mission involves conducting research on topics that will promote greater listening among the diverse strands of the Jewish people.
- Nishma is a full-service research firm that supports synagogues, schools, community organizations, and other researchers. We conduct custom research, data collection, analysis, and presentation employing quantitative and qualitative research approaches.
- Nishma has conducted eight broad Jewish communal studies: (1) a 2016 survey of people who have left Orthodoxy ("off the derech"), across all segments of Modern Orthodox and Haredi Jewry; (2) a 2017 broad demographic and attitudinal profile of American Modern Orthodoxy; (3) a 2019 study of the future of Modern Orthodoxy as it confronts challenges and opportunities emanating from its interaction with secular society; (4) a 2019 study that explored the motivations, challenges and religious journeys of Baalei Teshuvah; (5) an early 2020 study of the political views of Orthodox Jews, including differences between Modern Orthodox and Haredi; and (6) a mid-2020 study of the health, emotional, financial and religious impacts of the coronavirus pandemic;(7) a 2020 post-election survey that identified the key issues that drove voting decisions and identified areas of commonality vs. disagreement within the Orthodox community; and (8) an early 2021 study of the broad U.S. Jewish Community's Views on Coronavirus and COVID-19 Vaccines, including drivers of pro-vaccine vs. anti-vaccine sentiment.
- Nishma Research has funded 80% of its studies to date and makes all reports and findings available free
 to the public. We appreciate the opportunity to share our findings, which, to date, have been discussed
 at over 40 venues.