

Massachusetts Statewide Digital Equity Survey

The Massachusetts Broadband Institute (MBI) wants to hear from you about your experiences with getting and using internet service! This survey is completely anonymous and should be completed by one individual per household. **Your feedback is vital to understand barriers to internet access, affordability, and adoption to help close the digital divide.** Thank you for your time and participation.

Section 1: Please answer the following questions.

1. What is your zip code? _____
2. Which Massachusetts municipality do you live in? _____

Do you have internet service in your home?

- YES** – Please proceed to Section 2 below
- NO** – Please skip to Section 3 (flip this page over)

Section 2: Please answer the following questions only if you CAN connect to the internet from home.

3. Who is your internet service provider? _____
4. What kind of internet service do you have at home? Please check all that apply.
 - A data plan for a smartphone, hotspot, or tablet
 - Home wireline connection (cable, fiber, DSL, etc.)
 - Dial-up internet
 - Satellite internet
5. How well does your home internet service work?
 - Good enough to meet my household's needs
 - Not good enough to meet my household's needs
 - I don't know
6. Is your home internet service bundled with other services such as telephone or TV?
 - Yes
 - No
7. How much do you pay for the internet every month? \$_____
8. How hard is it for you to pay your internet bill?
 - Very hard
 - Somewhat hard
 - Not too hard
 - Not at all hard
9. Have you heard about the Affordable Connectivity Program (ACP) that provides discounted internet service for low-income households?
 - Yes
 - No
 - I don't know

For more information and to find out if you qualify for ACP, call the Federal Communication Commission's ACP Support Center: 877-384-2575.

When complete, skip to section 4 below.

Section 3: Please answer the following questions only if you CANNOT connect to the internet at home.

10. If you do not have internet service in your home, what is the reason?

- Service is not available in my area
- Service is too expensive
- I am concerned about online privacy or safety
- I don't feel confident navigating the internet or using online tools
- I can't afford or access a device to use the internet
- I don't want / don't use the internet.
- Other (please specify): _____

11. If you do not have internet at home, where do you go to use the internet? Please check all that apply.

- A workplace
- A friend or family member's home
- School, college, or university
- A library or community center
- A business such as a restaurant, cafe, or bookstore (e.g., McDonald's, Taco Bell, Starbucks, etc.)
- A public space such as a park or government building
- On public transit
- I do not regularly access internet in these or any other spaces
- Other (please specify): _____

When complete, proceed to section 4 below.

Section 4: All respondents should answer these questions.

12. Does everyone in your household have access to the computer devices they need to meet their everyday needs for internet use? (Computers, smartphones, tablets, or other internet enabled devices)?

- Yes
- No

13. Which of the following devices do you use most of the time to connect to the internet? (Check all that apply)

- Cellphone
- Desktop computer
- Laptop computer
- Tablet (or similar device)
- Other (please specify): _____

14. How much would you be able to pay for a laptop or desktop computer?

- \$0-50
- \$50-100
- \$100-150
- \$150-250
- \$250-500
- More than \$1,000

15. Are you able to regularly use the internet for online activities?

- Yes
- No

16. Please rank the level of difficulty for what you use the internet for. (Easy, Not easy, Hard)

	<i>Easy</i>	<i>Not easy</i>	<i>Hard</i>
Searching and applying for a job	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Health care or telehealth services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Participating in your local community	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
General internet searching	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Transportation information	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Searching and/or applying for benefits or resources for you or your family	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

17. If you do not have regular access to the internet, what would most like to use it for if you could?
- | | |
|--|--|
| <input type="checkbox"/> Searching and applying for a job | <input type="checkbox"/> Searching and/or applying for benefits or resources for you and your family |
| <input type="checkbox"/> Health care or telehealth services | <input type="checkbox"/> Something else |
| <input type="checkbox"/> Participating in your local community | <input type="checkbox"/> I don't want to use the internet regularly |
| <input type="checkbox"/> General internet searching | |
| <input type="checkbox"/> Transportation information | |
18. What kind of digital skills support would you be most interested in?
- | | |
|--|--|
| <input type="checkbox"/> In person classes | <input type="checkbox"/> In person support from a friend or instructor |
| <input type="checkbox"/> Online classes | <input type="checkbox"/> A do-it-yourself training module |
19. How concerned are you, if at all, about internet safety?
- | | |
|---|---|
| <input type="checkbox"/> Very concerned | <input type="checkbox"/> Not very concerned |
| <input type="checkbox"/> Somewhat concerned | <input type="checkbox"/> Not at all concerned |
20. What are you most concerned about? (Select all that apply)
- | | |
|---|---|
| <input type="checkbox"/> That my data could get stolen or used without my consent | <input type="checkbox"/> That I could be tracked or surveilled |
| <input type="checkbox"/> That I or a loved one could get scammed or tricked | <input type="checkbox"/> That I or a loved one could be harassed or abused online |
21. Are you aware of tools or resources you can use to stay safe online?
- | | |
|---|---|
| <input type="checkbox"/> Yes, I have tools and resources I use stay safe online | <input type="checkbox"/> I know of tools or resources to stay safe online, but they don't work for me |
| <input type="checkbox"/> No, I don't know of any tools or resources to stay safe online | <input type="checkbox"/> Other (please specify) : _____ |
22. How accessible are online government services like benefits portals, RMV services, or paying for permits or tickets to you?
- | | |
|--|--|
| <input type="checkbox"/> Very accessible | <input type="checkbox"/> Not very accessible |
| <input type="checkbox"/> Somewhat accessible | <input type="checkbox"/> Not at all accessible |
23. When you have used online government services like benefits portals, RMV services, or paying for permits or tickets, how well did they work for you?
- | | |
|--|--|
| <input type="checkbox"/> Very well | <input type="checkbox"/> Not too well |
| <input type="checkbox"/> Somewhat well | <input type="checkbox"/> Not well at all |

When complete, proceed to section 5 below.

Section 5: All respondents should answer these questions. We collect demographic information so that we can make sure we are representing all neighborhoods, towns, cities and groups across the Commonwealth.

24. What is your age?

- | | |
|-----------------------------------|---|
| <input type="checkbox"/> 18 to 24 | <input type="checkbox"/> 60 to 74 |
| <input type="checkbox"/> 25 to 34 | <input type="checkbox"/> 75 and older |
| <input type="checkbox"/> 35 to 44 | <input type="checkbox"/> Prefer not to answer |
| <input type="checkbox"/> 45 to 59 | |

25. What is your gender identity?

- | | |
|-------------------------------------|---|
| <input type="checkbox"/> Woman | <input type="checkbox"/> Gender fluid |
| <input type="checkbox"/> Man | <input type="checkbox"/> Other |
| <input type="checkbox"/> Non-binary | <input type="checkbox"/> Prefer not to answer |

26. How many people, including yourself, currently live in your household? (Note: A household is defined as all the people who currently occupy the housing unit where you live).

- | | |
|----------------------------|---|
| <input type="checkbox"/> 1 | <input type="checkbox"/> 6 |
| <input type="checkbox"/> 2 | <input type="checkbox"/> 7 |
| <input type="checkbox"/> 3 | <input type="checkbox"/> 8 or more |
| <input type="checkbox"/> 4 | <input type="checkbox"/> Prefer not to answer |
| <input type="checkbox"/> 5 | |

27. How many children under age 18, currently live in your household? (Note: A household is defined as all the people who currently occupy the housing unit where you live).

- | | |
|----------------------------|---|
| <input type="checkbox"/> 0 | <input type="checkbox"/> 4 |
| <input type="checkbox"/> 1 | <input type="checkbox"/> 5 or more |
| <input type="checkbox"/> 2 | <input type="checkbox"/> Prefer not to answer |
| <input type="checkbox"/> 3 | |

28. What is the highest level of school you have completed or the highest degree you have received?

- | | |
|---|--|
| <input type="checkbox"/> Less than high school, or high school incomplete (Up to grades 9-11 or Grade 12 with NO diploma) | <input type="checkbox"/> Four-year college or university degree/Bachelor's degree (e.g., BS, BA, AB) |
| <input type="checkbox"/> High school graduate (Grade 12 with diploma or GED certificate) | <input type="checkbox"/> Postgraduate or professional degree, including master's, doctorate, medical or law degree (e.g., MA, MS, PhD, MD, JD) |
| <input type="checkbox"/> Two-year associate degree from a college or university | <input type="checkbox"/> Prefer not to answer |

29. Are you of Hispanic, Latino, or Spanish origin, such as Mexican, Puerto Rican, or Cuban?

- Yes
 No
 Prefer not to answer

30. Which of the following best describes your race? (Select all that apply)

- | | |
|--|---|
| <input type="checkbox"/> White or Caucasian | <input type="checkbox"/> Pacific Islander/Native Hawaiian |
| <input type="checkbox"/> Black or African-American | <input type="checkbox"/> Some other race (please specify) _____ |
| <input type="checkbox"/> Asian or Asian-American | <input type="checkbox"/> Prefer not to answer |
| <input type="checkbox"/> Native American/American Indian/Alaska Native | |

31. Do you belong to a North American Indigenous, Native, or Tribal group?
- Yes Prefer not to answer
- No
32. What is your total annual household income from all sources, and before taxes?
- Less than \$22,000 \$45,000 to \$52,999
- \$22,000 to \$29,999 \$53,000 to \$59,999
- \$30,000 to \$36,999 \$60,000 or more
- \$37,000 to \$44,999 Prefer not to answer
33. Do you identify as a person with a disability? *(Note: Disability is defined as physical, emotional, or mental health conditions that result in limitations of activities or restrictions to full participation at school, at work, at home, or in the community).*
- Yes
- No
- Prefer not to answer
34. If you identify as a person with a disability, do you have difficulty in any of the following areas? Please check all that apply.
- Seeing even if wearing glasses Communicating, for example understanding or being understood
- Hearing even if using a hearing aid Prefer not to answer
- Walking or climbing steps I do not identify as a person with a disability
- Remembering or concentrating
- Self-care
35. Do you identify as a member of the LGBTQIA+ community?
- Yes
- No
- Prefer not to answer
36. Did you serve on active duty in the U.S. Armed Forces?
- Yes
- No
- Prefer not to answer
37. Do you live in affordable housing? *(Note: Affordable housing is defined as housing subsidized by a housing authority, paid for through a voucher, or in a building run by a private developer.)*
- Yes
- No
- Prefer not to answer
38. Where did you hear about this survey? Please check all that apply.
- From a government website, email list, flyer, or other outreach From an organization's website, email list, flyer, or other outreach
- From a friend, colleague, or acquaintance Other (Please specify) _____
- From a community meeting, community anchor such as a library or school, or other local institution

Thank you for taking the survey!

Your response will help shape Massachusetts's policies and future funding allocations to close the digital divide for all its residents. If you would like to learn more, please visit <https://broadband.masstech.org/>.