Worried Sick: Detailed Research Methodology

In 2025, CHCF commissioned Goodwin Simon Strategic Research (GSSR) to conduct research through 2026, on the opinions, experiences, and perspectives of Californians about the costs of health care. The quantitative and qualitative listening was done across geographies and other demographics, via the following methods. Note that the qualitative research (e.g., in-depth interviews and focus groups) focused on Californians who are experiencing health care affordability challenges, while the quantitative research was conducted among a representative sample of Californian adults. The research was iterative. Each phase built on the one before it, with test materials revised as GSSR learned.

Landscape research (September–October 2024). We began by mapping what was already known and how the issue was already being discussed. This included a media and influencer audit of how health care affordability is covered in the news and online, and a research audit of existing California and national public opinion data on affordability. We also conducted 13 in-depth interviews with key stakeholders identified by CHCF from industry, academia, labor, government, and advocacy. Interviews focused on the data and stories that could be most helpful in making progress on heath care affordability in California. Their input helped shape the research behind *Worried Sick*.

Mindset research (October–December 2025). To hear, in people's own words, how Californians who are struggling with the high cost of health care experience these costs and how they talk about them, GSSR conducted 18 virtual interviews among 24 California adults from October 13 to December 2, 2025 — 12 individual in-depth interviews and six dyad interviews (paired conversations between two participants). Interviews were conducted in English, Spanish, and Cantonese. Participants included a broad mix of participants by gender, ethnicity, age, region, education, ideology, party, and occupation. They spanned seven regions of the state and a range of coverage types, including Medi-Cal, employer plans, Covered California, individual plans, Medicare, and dual eligibility. This qualitative mindset phase focused on insured Californians and did not include those who are uninsured. The statewide surveys described below sampled California adults broadly, including those without insurance.

First survey (March–April 2026). GSSR conducted an online survey among 2,245 California adults from March 25 to April 5, 2026, in English and Spanish, which included oversamples of Asian, Native Hawaiian, and Pacific Islander (ANHPI), Black, and Native American adults. Respondents were drawn from an opt-in online panel, and quotas and weights were used so the data are representative of California adults. The overall margin of error for the base sample of adults statewide is plus or minus 2.7 percentage points, and larger for subgroups. Participants were shown various explanations for why health care costs are high in addition to multiple policy solutions. The survey used split samples to compare variations in wording and framing, and asked respondents to mark the specific words and phrases they found most and least compelling.

Focus groups (May–July 2026). GSSR conducted 12 synchronous online focus groups among 92 California adults from May 18 to May 28, 2026, in English, Spanish, and Cantonese. Participants included ANHPI, Black, Hispanic, and white Californians across a mix of ages, regions, and insurance types. We then extended this phase by conducting two, multi-day asynchronous focus groups (also known as an AFG or "qual boards") in English. The first AFG was conducted among 27 adults to test messenger videos and revised proposals (June–July 2026), and the second AFG was conducted among 19 adults to test additional messenger videos (September 2026). We also conducted four synchronous online focus groups among 31 participants in Spanish and Cantonese (June–July 2026).

A final dial-test survey (August–September 2026). GSSR conducted a statewide online dial-test survey of 1,488 California adults from August 24 to September 13, 2026, in English and Spanish. This final survey included respondents responding to various policy solutions. The overall margin of error for the base sample of adults statewide is plus or minus 2.8 percentage points, and larger for subgroups.