

SAPRIN Covid-19 Questionnaire for all individuals eligible for Individual Health Surveillance 18th May 2021

Mental health		
PHQ2_1	Over the past 14 days, how often have you been bothered by having little interest or pleasure in doing things?	Not at all; Several days; More than half the days; Nearly every day
PHQ2_2	Over the past 14 days, how often have you been bothered by feeling down, depressed or hopeless?	Not at all; Several days; More than half the days; Nearly every day
GAD2_1	Over the past 14 days, how often have you been bothered by feeling nervous, anxious or on edge?	Not at all; Several days; More than half the days; Nearly every day
GAD2_2	Over the past 14 days, how often have you been bothered by not be able to stop or control worrying.	Not at all; Several days; More than half the days; Nearly every day

Risk perception		
rk11	How likely is it that you will get COVID-19?	Certain; Very likely; Somewhat likely; Not very likely; No chance at all; I've already had Covid-19; Don't know
rk12	Do you know anyone who has been diagnosed as having COVID-19?	Yes; No; Don't know
rk13	How concerned are you about your exposure to COVID-19?	Not at all; Slightly concerned; Moderately concerned; Very concerned; Not applicable
Information and Trust		
	Thinking about how the Covid-19 pandemic has been handled, I would like to read you some statements and see if you strongly agree, agree, don't have an opinion, disagree, or strongly disagree.	
xx13	"The government cannot be trusted to tell the truth about Covid-19"	Strongly agree; Agree; Neither agree nor disagree; Disagree; Strongly disagree
xx15	"I trust the public health measures that the government is taking to combat Covid-19"	Strongly agree; Agree; Neither agree nor disagree; Disagree; Strongly disagree
xx16	"Government is not giving enough clear information about Covid-19"	Strongly agree; Agree; Neither agree nor disagree; Disagree; Strongly disagree
xx17	"Information about coronavirus is being withheld from the public"	Strongly agree; Agree; Neither agree nor disagree; Disagree; Strongly disagree

Stereotype stigma -ask only the household proxy respondent; Nodal option to ask everyone eligible for Individual Health Surveillance		
st11	People with coronavirus did something wrong and deserve to be punished	Strongly disagree; Disagree; Agree; Strongly agree
st12	People with coronavirus are irresponsible.	Strongly disagree; Disagree; Agree; Strongly agree
st13	People with coronavirus bring shame on their families	Strongly disagree; Disagree; Agree; Strongly agree

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st14	People with coronavirus are dirty.	Strongly disagree; Disagree; Agree; Strongly agree
st15	People with coronavirus are cursed	Strongly disagree; Disagree; Agree; Strongly agree
st15	If someone you knew had coronavirus and recovered, you would be afraid to visit them	Strongly disagree; Disagree; Agree; Strongly agree

Anticipated stigma- ask only the household proxy respondent; Nodal option to ask everyone eligible for Individual Health Surveillance		
	Think about how other people would treat you if you were to get coronavirus. How likely is it that people would treat you in the following ways?	
st21	A friend or family member would be angry with me.	Very unlikely; Unlikely; Likely; Very likely
st22	A friend or family member will blame me for getting sick.	Very unlikely; Unlikely; Likely; Very likely
st23	A friend or family member will think it was my fault that I got sick with coronavirus.	Very unlikely; Unlikely; Likely; Very likely
st24	My employer will fire me.	Very unlikely; Unlikely; Likely; Very likely
st25	Someone at work will discriminate against me.	Very unlikely; Unlikely; Likely; Very likely
st26	Someone at work will blame me for getting sick.	Very unlikely; Unlikely; Likely; Very likely
st27	It would be hard to tell other people	Very unlikely; Unlikely; Likely; Very likely
st28	I would feel ashamed	Very unlikely; Unlikely; Likely; Very likely
COVID-19 Diagnosis		
covid_member_intid	Have you ever been tested for COVID-19?	Yes; No
covid_member_name	Have you previously been diagnosed with COVID-19?	Yes; No
covid_member_age	When were you diagnosed with COVID-19?	date
prior_covid_hosp	Have you been hospitalized for COVID-19?	Yes; No
COVID-19 Vaccines		
vaccinated	Have you been vaccinated against Covid-19	Yes No
Vaccinated_dose1_when	When did you receive your first dose?	date
Vaccine-dose1	Which vaccine did you receive for your first dose?	Jansen/J&J [IF Jansen/J&J, NO 2 nd Dose Qs] Pfizer/BioNTech Moderna Astra-Zeneca/Oxford/ChadOx Don't know Other (specify)
vaccinated_where_dose1	Where did you receive your first dose?	Local clinic/hospital names; private practitioner, chemist, mobile vaccine facility (place)

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Vaccinated_dose2	Have you received a second dose? [IF first does is Jansen/J&J, don't ask 2nd dose Questions, including this one]	Yes No
Vaccinated_dose2_when	If yes, when did you receive your second dose?	date
Vaccine-dose2	Which vaccine did you receive for your second dose?	Jansen/J&J Pfizer/BioNTech Moderna Astra-Zeneca/Oxford/ChadOx Don't know. Other (specify)
vaccinated_where_dose2	Where did you receive your second dose?	Local clinic/hospital names; private practitioner, chemist, mobile vaccine facility (place)
	If a COVID-19 vaccine was available to you right now at no cost, would you agree to be vaccinated?	Definitely would Probably would Probably would not Definitely would not
va12	What are the reasons that you would choose to get a vaccine against COVID-19? Do not read list, mark all that apply	To protect others in my family; To protect my community from COVID-19; To protect myself from getting sick with COVID-19; I have a chronic health condition; If my doctor, nurse or health worker recommends it; It would be the best way to avoid getting seriously ill from COVID-19; It would allow me to feel safe around other people; Life won't go back to normal until most people are vaccinated; Other (specify); None
va14	What are the reasons that you would choose not to get a vaccine against COVID-19? Do not read list, mark all that apply	I am allergic to vaccines; I don't like needles; I don't get vaccines in general; People in my community do not get vaccines in general; I'm not concerned about getting ill from the coronavirus; I would be concerned about getting infected with the coronavirus from the vaccine; I am concerned about side effects from the vaccine; I don't think that the vaccine will work;

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		The coronavirus outbreak is not as serious as some people say it is; It might be expensive; It will be too late because we will have already been infected; I expect vaccination site will require long/expensive travel; I expect vaccination site will be open inconvenient hours/require long wait times; Other (specify); None
Symptom Screen		
sx_pos_hhm1_sx	Do you currently have any of the following symptoms?	Fever ≥ 38°C; Cough; Chills; Sore throat; Shortness of breath / breathing difficulties; Nausea / Vomiting; Diarrhea; Myalgia / Body pains; General weakness; Irritability / Confusion; Loss of taste (ageusia); Loss of sense of smell (anosmia); Other; None
sx_pos_hhm1_sx_other	If other, specify symptom	
sx_onset_hhm1	What was your earliest date of symptoms onset?	date
Epidemiological Risk (In the 14-days before symptom onset)		
case_contact_hhm1	Have you been a close physical contact* with a known COVID-19 case? <small>*Close contact: A person having had face-to-face contact or was in a closed environment with a CoVID-19 case; this includes, amongst other, all persons living in the same household as a CoVID-19 case</small>	Yes; No; Don't Know
case_con_hhm1_set	If you have been in close physical contact with a known COVID-19 case, please indicate contact setting.	Healthcare setting; Household setting; Workplace; Public transport setting; Other;
case_contact_hhm1_desc	If Other, specify contact	

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hcw_hhm1	Are you a healthcare worker (HCW) who has been exposed to suspects of cases of COVID-19?	Yes; No; Don't Know
hcw_type_hhm1 hcw_hhm1==Yes	Healthcare worker role	Nurse; Physician; Pharmacist; Counsellor; Laboratory Worker; Other
hcw_other_hhm1	If other healthcare worker, describe	
hcf_visit_hhm1	Have you visited a healthcare facility (as a patient or visitor) in a country where COVID-19 cases have been reported?	Yes; No; Don't Know
visit_facility_type	What type of visit/facility?	Clinic visit; GP; Hospitalization
international_travel_hhm1	Have you travelled to a part of South Africa with local COVID-19 transmission or outside of South Africa in the last 14-days?	Yes; No; Don't know
travel_to_where	If yes, where did you travel to?	Foreign travel; Elsewhere in South Africa with local transmission of COVID-19; Both
travel_where_sa	Where did %rostertitle% travelled to in South Africa? (select all that applies)	Eastern Cape; Free State; Gauteng; KwaZulu-Natal; Limpopo; Mpumalanga; Northern Cape; North West; Western Cape
int_travel_hhm1	If %rostertitle% travelled outside South Africa in the last 14-days, please specify how many countries and complete section below for each country visited	
travel_history_roster	Travel History	
travel_transport_medium	By which means did you travel	Plane; Bus; Taxi; Car; Train; Other
travel_history_country	Country visited?	
travel_history_dep_date	Date of departure (travel to area)	
travel_history_ret_date	Date of return (travel from area)	
Travel and Movement		
tm01	Over the past seven days, have you left your home?	Yes; No; Don't Know
tm02 tm01==Yes	Over the past seven days, have you left your village/suburb or isigodi?	Yes; No; Don't Know
tm03 tm02==Yes	Over the past seven days, have you travelled to your local town (e.g. Mtubatuba, KwaMsane, Hlabisa, Hluhluwe, St Lucia)	Yes; No; Don't Know
tm04 tm02==Yes	Over the past seven days, have you travelled beyond the subdistrict (e.g., Mtubatuba municipality)?	Yes; No; Don't Know

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tm05	Why did you leave your home? (multi-select)	To get food/medication; To go to work; To visit friends or family; To get exercise; To provide care to a vulnerable person; Other
tm06	Other, specify?	