



THE UNIVERSITY OF
**WESTERN
AUSTRALIA**



FORREST
RESEARCH
FOUNDATION



Connected, Active, Resilient, & Engaged (CARE) A Study of Mental Wellbeing during Self-isolation

ID

Welcome back to the CARE Study.

You are about to complete the Baseline Survey of the study.

This survey will take about 20-minutes to complete.

Please enter your UNIQUE STUDY ID:

This is your email address you entered when you registered for the study:

Social distancing

Are you still practising social-distancing today?

Reminder: social distancing means you are staying indoors (in your home, hotel room, or other accommodation) most of the time but going outside when necessary, such as shopping for food, exercising, for medical appointments, or going to work if you are not working from home. You practice good hygiene and keep 1.5 metres away from others when outside the home.

- ☐ Yes
- ☐ No - for other reasons
- ☐ No - because I am no longer practising social-distancing

Being outside

Have you been outside of your accommodation in the last 24 hours?

Click all that apply.

- ☐ No
- ☐ Yes – for work
- ☐ Yes – for social interaction purposes
- ☐ Yes – for exercise/a walk
- ☐ Yes – for going to the shops/pharmacy etc.
- ☐ Yes – for medical appointments
- ☐ Yes – other (please specify if you wish)

Past self-isolation

The following questions are about your past experiences of self-isolation (self-quarantine) during COVID-19.

Self-isolation (self-quarantine) means you are staying indoors for at least 14-days (in your home, hotel room, or other accommodation) and not going out into public spaces or visiting other private spaces. Self-isolation (self-quarantine) can be mandatory or voluntary.

Note: Social-distancing is NOT the same as self-isolation. When you self-isolate, you do not go to the shops to buy food or medicine. You do not leave your home for exercise or walks. You would have had to rely on online ordering and family and friends to deliver supplies to you.

Have you engaged in a period of self-isolation (self-quarantine) between COVID-19 (12th March 2020) and now?

- ☐ Yes
- ☐ No
- ☐ Unsure

How many times did you undergo self-isolation (self-quarantine) since March 12 2020 (each time period being 14 continuous days or more)?

- ☐ 1
- ☐ 2
- ☐ 3

☐ 4+ (please specify how many times below)

How many days of self-isolation (self-quarantine) have you been through in total?

- ☐ 1 day
- ☐ 2 days
- ☐ 3 days
- ☐ 4 days
- ☐ 5 days
- ☐ 6 days
- ☐ 7 days
- ☐ 8 days
- ☐ 9 days
- ☐ 10 days
- ☐ 11 days
- ☐ 12 days
- ☐ 13 days
- ☐ 14 days
- ☐ 15+ days (please specify how many days below)

When did the last period of self-isolation (self-quarantine) end?

- ☐ A few days ago
- ☐ 1 week ago
- ☐ 2 weeks ago
- ☐ 3 weeks ago

☐ 4+ weeks ago (please specify how many weeks ago below)

Past week Social activity

Over the past 7 days (including today), did you interact with following categories of people (other than those living with you, if applicable)?

Note: By "interact" we mean actively engaging with another person, either in-person (face-to-face), or via video chat, phone calls, texting/messaging or exchanging emails/mail (i.e. *not just being near others but not interacting with them in any way*).

Close relations (immediate family, partner, close friends):

	No	Yes
Face to face	<input type="radio"/>	<input type="radio"/>
Video chat	<input type="radio"/>	<input type="radio"/>
Phone call	<input type="radio"/>	<input type="radio"/>
Texting/messaging	<input type="radio"/>	<input type="radio"/>
Emails/mail	<input type="radio"/>	<input type="radio"/>

Intermediate relations (relatives, friends, colleagues):

	No	Yes
Face to face	<input type="radio"/>	<input type="radio"/>
Video chat	<input type="radio"/>	<input type="radio"/>

	No	Yes
Phone call	<input type="radio"/>	<input type="radio"/>
Texting/messaging	<input type="radio"/>	<input type="radio"/>
Emails/mail	<input type="radio"/>	<input type="radio"/>

Other relations (acquaintances, neighbours, strangers):

	No	Yes
Face to face	<input type="radio"/>	<input type="radio"/>
Video chat	<input type="radio"/>	<input type="radio"/>
Phone call	<input type="radio"/>	<input type="radio"/>
Texting/messaging	<input type="radio"/>	<input type="radio"/>
Emails/mail	<input type="radio"/>	<input type="radio"/>

Past week Physical activity

Over the past 7 days (including today), how long did you engage in the following levels of physical activity in total:

	0 minutes	Less than 30 minutes	Less than 1 hour	1-2 hours	2-3 hours	3-4 hours	4-5 hours or more
High intensity (e.g. running, cycling, swimming team sports)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Moderate intensity (e.g. gardening, brisk walking, riding a bike, yoga)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

	0 minutes	Less than 30 minutes	Less than 1 hour	1-2 hours	2-3 hours	3-4 hours	4- hou or moi
Low intensity (e.g. walking)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Past week WEMWBS

Please tick the box that best describes how you have been feeling over the past 7 days (including today):

	1 - None of the time	2 - Rarely	3 - Some of the time	4 - Often	5 - All of the time
I've been feeling optimistic about the future	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I've been feeling useful	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I've been feeling relaxed	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I've been feeling interested in other people	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I've had energy to spare	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

	1 - None of the time	2 - Rarely	3 - Some of the time	4 - Often	5 - All of the time
I've been dealing with problems well	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I've been thinking clearly	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I've been feeling good about myself	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I've been feeling close to other people	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

	1 - None of the time	2 - Rarely	3 - Some of the time	4 - Often	5 - All of the time
I've been feeling confident	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I've been able to make up my own mind about things	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I've been feeling loved	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I've been interested in new things	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I've been feeling cheerful	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Past week Optimism

For each of the statements below, please indicate the one that best applies to how you have been feeling over the past 7 days (including today):

The future seems to me to be **hopeful** and I believe that things are changing for the **better**.

Strongly agree	Somewhat agree	Neither agree nor disagree	Somewhat disagree	Strongly disagree
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

I feel that it is **possible** to reach the **goals** I would like to strive for.

Strongly agree	Somewhat agree	Neither agree nor disagree	Somewhat disagree	Strongly disagree
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Past week HADS

Please select the response that is closest to how you have been feeling over the past 7 days (including today):

There is no need to take too long over you replies, your immediate response is best.

I feel tense or 'wound up':

- ☐ Not at all
- ☐ From time to time, occasionally
- ☐ A lot of the time
- ☐ Most of the time

I still enjoy the things I used to enjoy:

- ☐ Definitely as much
- ☐ Not quite so much
- ☐ Only a little
- ☐ Hardly at all

I get a sort of frightened feeling as if something awful is about to happen:

- ☐ Not at all
- ☐ A little, but it doesn't worry me
- ☐ Yes, but not too badly
- ☐ Very definitely and quite badly

I can laugh and see the funny side of things:

- ☐ As much as I always could
- ☐ Not quite so much now
- ☐ Definitely not so much now
- ☐ Not at all

Worrying thoughts go through my mind:

- ☐ Only occasionally
- ☐ From time to time, but not too often
- ☐ A lot of the time
- ☐ A great deal of the time

I feel cheerful:

- ☐ Most of the time
- ☐ Sometimes
- ☐ Not often
- ☐ Not at all

I can sit at ease and feel relaxed:

- ☐ Definitely
- ☐ Usually
- ☐ Not Often
- ☐ Not at all

I feel as if I am slowed down:

- ☐ Not at all
- ☐ Sometimes
- ☐ Very often
- ☐ Nearly all the time

I get a sort of frightened feeling like 'butterflies' in the stomach:

- ☐ Not at all
- ☐ Occasionally
- ☐ Quite Often
- ☐ Very Often

I have lost interest in my appearance:

- ☐ I took just as much care as ever
- ☐ I may not have taken quite as much care
- ☐ I didn't take as much care as I should
- ☐ Definitely

I feel restless, I have to be on the move:

- ☐ Not at all
- ☐ Not very much
- ☐ Quite a lot
- ☐ Very much indeed

I look forward with enjoyment to things:

- ☐ As much as I ever did
- ☐ Rather less than I used to

- ☐ Definitely less than I used to
- ☐ Hardly at all

I get sudden feelings of panic:

- ☐ Not at all
- ☐ Not very often
- ☐ Quite often
- ☐ Very often indeed

I can enjoy a good book or radio or TV program:

- ☐ Often
- ☐ Sometimes
- ☐ Not often
- ☐ Very seldom

Past week Thwarted Belonging

Please rate how you have been feeling during the past 7 days (including today):

	1 - Not at all true for me	2	3	4 - Somewhat true for me	5	6	7 - True for me
1. I feel isolated	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. I don't matter to other people	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

	1 - Not at all true for me	2	3	4 - Somewhat true for me	5	6	7 - True for me
3. Nobody cares about me	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. I feel there is no one I can talk to	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

	1 - Not at all true for me	2	3	4 - Somewhat true for me	5	6	7 - True for me
5. I don't fit in	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. I don't play an important role in other people's lives	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7. I am alone in this world	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Past week sleep & mood

How long did it take, on average, for you to fall asleep over the past 7 days (including today)?

- ☐ Less than 10 minutes
- ☐ 10-15 minutes
- ☐ 16-30 minutes
- ☐ 31-45 minutes

- ☐ 46-60 minutes
- ☐ More than 60 minutes

How many hours did you sleep (at night + day-time naps), on average, over the past 7 days (including today)?

To what extent did you feel down-hearted and blue over the past 7 days (including today)?

- ☐ 1 - Not at all
- ☐ 2 - Slightly
- ☐ 3 - Somewhat
- ☐ 4 - Every now and then
- ☐ 5 - Moderately
- ☐ 6 - A lot
- ☐ 7 - Quite a lot
- ☐ 8 - A great deal
- ☐ 9 - Extremely

To what extent did you feel nervous and/or worried, over the past 7 days (including today)?

- ☐ 1 - Not at all
- ☐ 2 - Slightly
- ☐ 3 - Somewhat
- ☐ 4 - Every now and then
- ☐ 5 - Moderately
- ☐ 6 - A lot

- ☐ 7 - Quite a lot
- ☐ 8 - A great deal
- ☐ 9 - Extremely

Problem Solving Exercise

PROBLEM SOLVING EXERCISE

Instructions:

Welcome to the Problem Solving Exercise, where we ask you to imagine 2 upcoming challenges that one might encounter when undergoing periods of self-isolation, and to have a go at coming up with the steps to solve these challenges.

By imagine, we mean "seeing" with your "mind's eye", "hearing" with your "mind's ear" and so on, i.e. when we generate mental pictures and/or movie clips in our imagination.

For this exercise, we have provided you with 1 top challenge, and you will have the opportunity to nominate 1 top challenge of your own and have a go at solving it.

For this challenge:

- You will be presented with the **beginning** and **ending**, your job is to come up with **the steps required to achieve the ending**.
- Please try to come up with as many steps as required to meet the challenge, providing **as much detail as you can** about

your **thoughts, feelings, and actions** relating to these problem-solving steps.

Please see below for a worked example.

Example challenge:

1. You **would** like to keep the kitchen clean and tidy.
2. The story **begins** with you feeling frustrated about the increasing messiness and clutter around your house.
3. The story **ends** with you feeling great about having a clean and tidy kitchen.

Example description of steps to achieve the story ending:

"I would make a plan of which part of the kitchen to clean and where to start, I would start with the counter tops because it's the easiest. I would then get the equipment ready (cleaning wipes and sprays, vacuum, dust pan, mop etc). Then I would put on some nice music to get into a good mood, and start with putting things away, then wiping down surfaces, and finally i would vacuum the floor and mop it. I would feel like I have accomplished something and enjoy a clean kitchen for the next few days."

Challenge:

Feeling isolated and lonely

1. You **would** like to feel more connected to other people.
2. The story **begins** with you feeling isolated and lonely.
3. The story **ends** with you feeling connected and closer to people.

Please have a go at coming up with the steps you would take to achieve the story ending, **providing as much detail as you can** about your **thoughts, feelings, and actions related to these problem-solving steps.**

Please provide the steps you would take to achieve the story ending:

Now, please pick your own top challenge that you are most worried/concerned about and want to solve:

My own challenge:

"I would like to feel/be..."

If you would like to skip this challenge, please select "No I would not like to try to solve this challenge" and continue to the next page.

- ☐ Yes I would like to try to solve this challenge
- ☐ No I would not like to try to solve this challenge

The story begins with you feeling/being...

The story ends with you feeling/being...

Please provide the steps you would take to achieve the story ending:

Mental Imagery Problem Solving Exercise

Experience of mental imagery during the Problem Solving Exercise

People often experience mental imagery when thinking through the steps of the problem solving exercise you just completed.

By mental imagery we mean mental pictures &/or movie clips in your mind's eye, which can consist of:

- scenes (e.g. settings and surroundings)
- actions (e.g. bodily movements, acts of speaking)
- people (yourself, others)
- emotions (yourself, others)

When you were coming up with steps to achieve the story ending during the Problem Solving Exercise, **how much of the time did mental imagery relating to the following pop into your mind**

Scenes (e.g. settings and surroundings)

- ☐ Not at all
- ☐ Sometimes
- ☐ About half the time
- ☐ Most of the time
- ☐ All/almost all of the time

Actions (e.g. bodily movements, acts of speaking)

- ☐ Not at all
- ☐ Sometimes
- ☐ About half the time
- ☐ Most of the time
- ☐ All/almost all of the time

People (yourself, others)

- ☐ Not at all
- ☐ Sometimes
- ☐ About half the time

- ☐ Most of the time
- ☐ All/almost all of the time

Emotions (yourself, others)

- ☐ Not at all
- ☐ Sometimes
- ☐ About half the time
- ☐ Most of the time
- ☐ All/almost all of the time

How **vivid** were these mental pictures/movie clips, on average?

- ☐ Perfectly clear and lively as real seeing
- ☐ Clear and lively
- ☐ Moderately clear and lively
- ☐ Dim & vague, flat
- ☐ No image at all, you only “know” that you are thinking of the object

SurveyOptOut

Thank you for completing this study survey!

In 24 hours, we will send you the invitation to the next survey, is this ok?

- ☐ Yes I am willing to be invited to complete the next survey
- ☐ No I wish to cease my participation in the CARE Study

Please note:

If you click "**Yes I would like to be invited to complete the next survey**", and get a message similar to the one depicted in the picture below, **please ignore this, simply continue to the next page** by pressing "Click here to end this survey".



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Connected, Active, Resilient, & Engaged (CARE)
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Unable to log in with the information provided.

Please log in.

RecipientExternalDataReference 17133

Click here to end this survey.

Distancing Ended

Since you are no longer practising social-distancing, you no longer need to complete daily surveys that track your daily experience of social-distancing.

Thank you very much for your time and efforts, your responses have provided us with important information that may help others in similar situations.

In order to understand the short to medium impacts of social-distancing on mental wellbeing, we are inviting people like yourself to complete 4 follow-up surveys over the next 6-months.

If you would like to help us understand the impact of social-distancing over time by agreeing to receive follow-up survey invitations, please indicate so below:

- ☐ Yes I would like to receive invitations to complete follow-up surveys
- ☐ No I wish to cease my participation in the CARE Study

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