



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 Day 1 Brief Daily Survey.
This survey should take less than 5-minutes to complete.

Please enter your UNIQUE STUDY ID:

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

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

Been outside

Have you been outside of your accommodation in the past 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)

Social activity

Did you have social interaction with people, other than those living with you (if applicable), in the past 24 hours?

- ☐ Yes
- ☐ No

Which of the following categories of people did you interact with in the past 24 hours (other than those living with you?)

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"/>

	No	Yes
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"/>
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"/>

Physical activity

How long did you engage in the following levels of physical activity in the past 24 hours?

	None	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"/>
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"/>

WEMWBS

Instructions:

Please indicate how often you have experienced the following feelings/thoughts over the past 24 hours:

	None of the time	Rarely	Some of the time	Often	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"/>

	None of the time	Rarely	Some of the time	Often	All of the time
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"/>
	None of the time	Rarely	Some of the time	Often	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"/>
I've been feeling confident	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	None of the time	Rarely	Some of the time	Often	All of the time
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"/>

DEP ANX

To what extent did you feel down-hearted and blue in the past 24 hours?

- ☐ 1 - Not at all
- ☐ 2 - A little bit
- ☐ 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 in the past 24 hours?

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

Sleep

How long did it take for you to fall asleep last night?

- ☐ 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 plus day-time naps) during the past 24 hours? (please input a number between 0-24)**Please rate the severity of your sleep quality-related problems (if any) last night:**

	None	Mild	Moderate	Severe	Very Severe
I had difficulty falling asleep	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I had difficulty staying asleep	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I had problems with waking up too early	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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 would like to be invited to complete the next survey
- ☐ No I wish to cease my participation in the CARE Study

Isolation 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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