



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 7 Weekly Survey.  
This survey will take about 15-minutes to complete.

### **Please enter your UNIQUE STUDY ID**

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

### **Self-isolation**

**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 - daily

THE FOLLOWING QUESTIONS ARE ABOUT YOUR EXPERIENCES OVER THE PAST 24 HOURS:

**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"/>

	No	Yes
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"/>
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"/>

## WEMWBS - daily

Instructions:

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

	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"/>
I've been feeling confident	<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

	1 - None of the time	2 - Rarely	3 - Some of the time	4 - Often	5 - 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 - daily

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 - daily**

**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 & naps) during the past 24 hours?

Please rate the extent to which the following was true of your sleep 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"/>

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
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	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"/>

Optim Weekly

QUESTIONNAIRE A

Instructions:  
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

## HADS -WEEKLY

### QUESTIONNAIRE B

Instructions:

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

Don't take too long over you replies: your immediate 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

## Thwarted Belonging - Weekly

### QUESTIONNAIRE C

Instructions:

**Please rate how you have been feeling over 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"/>
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"/>

**SurveyOptOut**

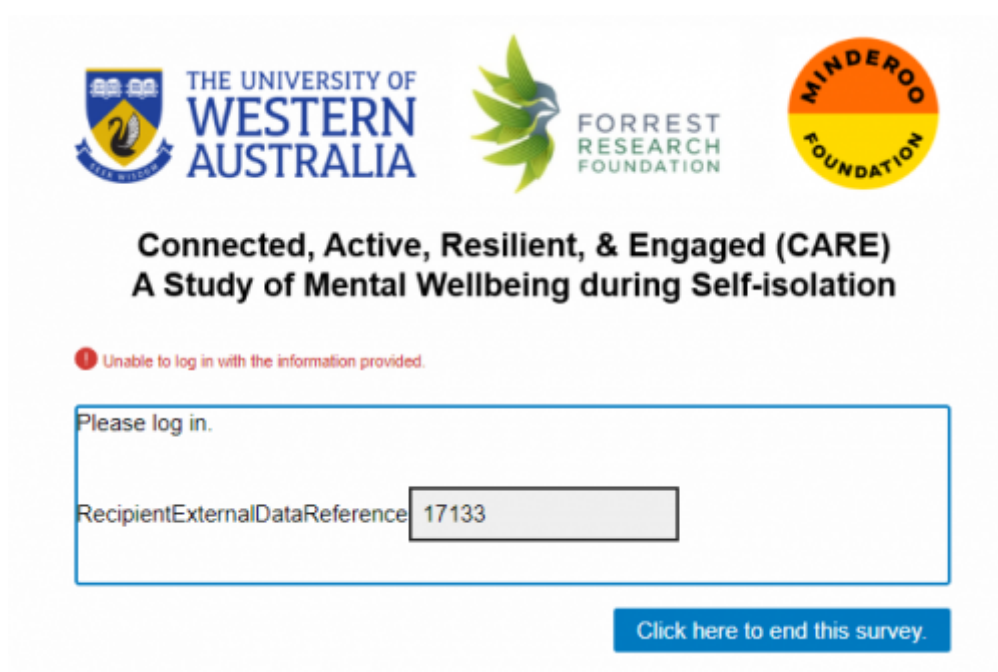
**Thank you for completing this study survey!**

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

### 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".



The screenshot shows a survey interface with logos for The University of Western Australia, Forrest Research Foundation, and Minderoo Foundation. Below the logos is the title "Connected, Active, Resilient, & Engaged (CARE) A Study of Mental Wellbeing during Self-isolation". A red error message states "Unable to log in with the information provided." Below this is a login form with the text "Please log in." and a label "RecipientExternalDataReference" next to a text box containing "17133". A blue button at the bottom right says "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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