Questionnaire on Behavioural insights and perceived consequences of Coronavirus Disease 2019 (COVID-19): an international survey

I Introduction

Dear Participant,

Thank you for taking part in this study to help improve actions taken in response to COVID -19 pandemic and to inform the response to similar future outbreaks. This study will involve answering a 30-minute survey which will be asking you questions relating to the coronavirus. Please do not start until you will have enough time to complete it in one go. This study is conducted by a member of the Association of Pacific Rim Universities (APRU) Global Health Program. By taking part, you are agreeing that you have read and understood the information about the study below. Please ensure you have read and understood this information before continuing.

What is this project about, and do I have to take part?

This study aims to inform governmental outbreak response measures to COVID-19, including policies, intervention and communications. Participation is open to people at the age of 18 or over, living in countries and regions of APRU and is entirely voluntary.

What are the benefits and risks of taking part?

By completing the survey, you will be eligible to enter a luck draw which consists of 6 prizes for 6 awardees, each valued at US\$50 regardless of which country you are from. There are no foreseeable risks for you when taking part in the survey other than time spent on the survey and potential discomfort. Should you feel uncomfortable and want to leave the study you are free to do so without any consequences.

What will you ask and what will happen to the information I give you?

You will be asked questions about yourself, your knowledge of the coronavirus, the actions you have taken to protect yourself from the virus, your trust in various stakeholders, your opinions of COVID-19 policies in your countries and regions, and your own fears and worries relating to the coronavirus pandemic. However, you will not be asked to provide any personally identifiable information. Your anonymous data will be collected and analysed by the research team. Your data will be shared with the research team, but your data will be completely anonymous, and it will not be possible to identify you individually from your answers. This study has received approval from the WHO Research Ethics Review Committee and Survey and Behavioural Research Ethics Committee (SBREC) of the Chinese University of Hong Kong.

For how long will my data be stored?

In order to help inform future pandemic and epidemic preparedness, the data you have provided will be helpful even beyond the current coronavirus pandemic. Your anonymous data will therefore be stored securely for up to 10 years after the end of the research for this study. At this point the data will be reviewed, and if they are still deemed to be of public interest, they may be retained for longer. If not, your data will be permanently deleted.

Local Data Protection Privacy Notice and concerns

Notice: The controller for this project will be the APRU Global Health Program team members. The data will be collected by them. All the survey data will be stored in a software which is password protected. The information that is required to be provided to participants under data protection legislation. The survey is in the public interest and is necessary for research and public health purposes.

If you are concerned about this study, or how your data is being processed, or if you would like to contact us about your rights, please get in touch with Professor WONG, Chi Sang Martin of the Chinese University of Hong Kong in the first instance at wong_martin@cuhk.edu.hk via any languages (English preferred)

Consent

I understand that:

- My participation is completely voluntary.
- All my answers will be used for scientific research to improve actions taken in response to the coronavirus pandemic and to inform the response to similar future outbreaks.
- My data will be stored securely, however, no personal data will be stored, and my answer will be completely anonymous.
- My anonymized data gathered in this study will be shared with relevant researchers and institutions.
- Because I am submitting anonymous data, it will not be possible to withdraw my answers after they have been submitted.

Please note that you can stop the survey at any time. This will <u>not</u> entail any penalty, and it will <u>not</u> affect the services (health care services or others) that you receive. By selecting the "agree box", you are agreeing that you are at least 18 years old, that you have read the information about the study, and that you voluntarily agree to take part in it.

[*] I agree to participate in this study	[*] I do not agree to participate in this study
Name:	Date:
	Only required if you are interested in entering the random lucky will be given and winners will be notified by email.)

Part 1: Socio-demography 1. How old are you? I amyears old.	
2. What is your sex? [1] Male [2] Female [3] Other [4] I prefer not to tell	
3. What are your height and weight when you do this survey? [1] I know my height if yes: my height is [2] I know my weight (if yes please do the next question) if yes: my height is [3] I do not know	
4. Please assess your weight change over the past six months:[1] Increased[2] Remains the same[3] Decreased[4] Don't know	
5. What is your race? [1] American Indian or Alaska Native [2] Asian [3] Black or African American [4] Native Hawaiian or Other Pacific Islander [5] White [6] Others:	
6. What is your religion? [1] Christian (Catholic protestant or any other Christian denominations) [2] Buddhist [3] Hindu [4] Muslim [5] Jewish [6] Sikh [7] No Religion [8] Any other religion:	
7. How many years of education have you completed (including non-formal education such as ptime, night)? [1] 0-9 years [2] 10-12 years (secondary school completed) [3] more than 12 years	part
8. Where do you live? [1] Rural area [2] Urban area [3] Rural–urban fringe [4] Others	
 9. Who lives in your household besides yourself? [1] I live alone [2] I live with my family members (parents, husband/wife, children, etc) [3] I live with other people [4] None of the above 	

- 10. Please assess your private financial situation over the past six months:[1] Improved[2] Remains the same[3] Worse

- [4] Don't know

Part 2: COVID-19 personal experience

Part 2: COVID-19 personal experience		
11. Do you currently suffer from COVID-19 symptoms such as fever, dry		
cough, breathing problems, sore throat, loss of smell/taste, headaches or	Yes	No
diarrhoea?		
12. Have you taken any test for SARS-CoV-2? (If no, please skip the	3.7	NT.
subsequent 2 questions and go to *)	Yes	No
13. Have you been tested positive for SARS-CoV-2?	Yes	No
14. Have you been tested positive for Anti-SARS-CoV-2 antibodies?	Yes	No
15. *Has someone close to you been infected with COVID-19 that you know		
of?	Yes	No
16. Has a person close to you died due to COVID-19?	Yes	No
17. Has anyone with whom you have had direct contact in the past two weeks	Yes	No
become infected with COVID-19 that you are aware of?	res	INO
18. Please indicate which of the following conditions apply to you?		
a) Older than 60 years	Yes	No
b) Cardiovascular disease (e.g. coronary heart disease, heart failure,	Yes	No
cardiomyopathy)	103	110
c) Hypertension	Yes	No
d) Type 2 Diabetes	Yes	No
e) Immunodeficiency, or taking medication that suppresses the immune	V	NI.
system (e.g. corticosteroid)	Yes	No
f) Chronic disease of the respiratory system (e.g. asthma, chronic bronchitis)	Yes	No
g) Chronic liver disease	Yes	No
h) Chronic kidney disease	Yes	No
i) Cancer during past 5 years	Yes	No
j) Long-standing heavy cigarette consumption (more than 20 cigarettes per day in the last 5-10 years)	Yes	No
k) Sickle cell disease	Yes	No
l) Obesity (Body mass index ≥30 kg/m2)	Yes	No
m) none of the above risk factors	Yes	No
19. Please indicate which of the following risk factors for a severe course of	103	110
COVID-19 apply to people living or working with you.		
a) Older than 60 years	Yes	No
b) Cardiovascular disease	Yes	No
c) Hypertension	Yes	No
d) Type 2 Diabetes	Yes	No
e) Immunodeficiency, or taking medication that suppresses the immune		
system (e.g. corticosteroid)	Yes	No
f) Chronic disease of the respiratory system (e.g. asthma, chronic bronchitis)	Yes	No
g) Chronic liver disease	Yes	No
h) Chronic kidney disease	Yes	No
i) Cancer during past 5 years	Yes	No
j) Long-standing heavy cigarette consumption (more than 20 cigarettes per day in the last 5-10 years)	Yes	No
k) Sickle cell disease	Yes	No
1) Obesity (Body mass index ≥30 kg/m2)	Yes	No
m) none of the above risk factors	1	No
20. Please indicate whether you are currently in quarantine.	Yes Yes	No
a) if yes: Please indicate the number of days you have been in quarantine in	1 68	INO
total since January 2020.		

	1	1
21. Please indicate whether you are currently under a state-imposed curfew (a		
law which says that people must not go outside after a particular time at night	Yes	No
until the morning; the time after which nobody must go outside).		
a) if yes: Please indicate how many days you have been under the state-imposed curfew in total since January 2020.		
22. Please indicate if you are currently working remotely from home.	Yes	No
a) if yes: Please indicate how many weeks you have been working remotely	168	NO
from home in total since January 2020.		
23. Please indicate whether you are engaged in an essential activity for the		
maintenance of critical infrastructure.		
a) doctors	Yes	No
b) nurses	Yes	No
c) clinical psychologists	Yes	No
d) public safety and national security guards	Yes	No
e) staff of local and national government	Yes	No
f) supermarket/grocery workers	Yes	No
g) Drivers need to cross border or deliver grocery within countries	Yes	No
h) Cargo flight pilots / ground staff		
i) professional cleaners	Yes	No
j) if other, please indicate		
24. Please indicate your work or study status		
a) full-time employed	Yes	No
b) part-time employed	Yes	No
c) not employed	Yes	No
d) self-employed	Yes	No
e) caregiver (e.g., children, elderly)	Yes	No
f) student	Yes	No
g) retired	Yes	No
h) other	Yes	No
25. Please indicate your health insurance coverage.		
a) None		
b) Partial coverage		
c) Full coverage (public)		
d) Full coverage (private)		
e). Not applicable	**	3.7
26. Please indicate whether you receive welfare benefits.	Yes	No
27. Have you ever been diagnosed by a doctor or therapist with one or more of		
the following?	37	NT.
a) Depression b) Mania/Bipolar disorder	Yes Yes	No No
c) Psychotic disorders (including schizophrenia)	Yes	No
d) Anxiety disorder	Yes	No
e) Posttraumatic stress disorder	Yes	No
f) Eating disorder	Yes	No
g) Compulsive disorders (OCD)	Yes	No
h) Substance abuse or Addiction disorder	Yes	No
i) Attention disorder (ADD or ADHD)	Yes	No
j) Somatoform disorder	Yes	No
k) Personality disorder	Yes	No
l) Autism Spectrum Disorder (including Asperger's Syndrome)	Yes	No
m) Cognitive disorder/dementia	Yes	No
28. Are you currently receiving formal mental health support or treatment,		
including psychotherapy, clinical counselling, etc.?	Yes	No
a) optional, if yes : Do you currently no longer receive psychotherapy due to the COVID-19 pandemic?	Yes	No
b) optional, if no: Does the psychotherapy currently take place in face-to-face contact?	Yes	No

	No t at all	Not satisfie d	Neutra 1	Satisfie d	Very muc h
c) optional, if in face-to-face contact: How satisfied are you with the psychotherapeutic treatment via telephone or video platforms compared to face-to-face contact?	0	1	2	3	4

Part 3: Health behaviors
Over the past 14 days I

Over the past 14 days I						
	No t at all	Seldo m	Neutra 1	Ofte n	Very muc h	NA=Not applicable
29. have consumed substantially more alcohol than usual.	0	1	2	3	4	NA
30. have smoked considerably more cigarettes than usual.	0	1	2	3	4	NA
31. have consumed considerably more drugs (e.g. tranquilizers, sleeping pills or stimulants) than usual.	0	1	2	3	4	NA
32. bought drugs, herbs, supplements or other treatments that I heard are good for treating COVID-19 (e.g. Lotus Qing-wen capsule, Shuang-huang-lian oral liquid or eucalyptus oils)	0	1	2	3	4	NA
33. exercised less than I did before the pandemic	0	1	2	3	4	NA
34. ate more unhealthy food than I did before the pandemic (such as fried food, coke, etc)	0	1	2	3	4	NA
35. postponed vaccination for myself or my child	0	1	2	3	4	NA
36. avoided people that I thought might infect me	0	1	2	3	4	NA
37. have experienced verbal abuse (e.g. threats, humiliations) by people close to me.	0	1	2	3	4	NA
38. have had more physical arguments (e.g. beating, kicking) with people close to me.	0	1	2	3	4	NA
39. have had the excessive urge to wash and/or disinfect my hands again and again so that I do not become ill from germs or contamination.	0	1	2	3	4	NA
a) if yes : I perceived the extent as nonsensical, distressing or excessive.	0	1	2	3	4	NA
40. have had the excessive urge to wash and/or disinfect my hands again and again so that I do not pass on germs or contamination to other people .	0	1	2	3	4	NA
a) if yes : I perceived the extent as nonsensical, distressing or excessive.	0	1	2	3	4	NA

Part 4: Health literacy
How easy or difficult would you say it is to...:

41find the information you need related to COVID-19?	Very difficult	Difficult	Neutral	Easy	Very easy
42understand information about what to do if you think you have COVID-19?	1	2	3	4	5
43judge if the information about COVID-19 in the media, in general, is reliable?	1	2	3	4	5
44understand restrictions and recommendations of authorities regarding COVID-19?	1	2	3	4	5
45follow the recommendations on how to protect yourself from COVID-19?	1	2	3	4	5
46understand recommendations about when to stay at home from work/school, and when not to?	1	2	3	4	5
47follow recommendations about when to stay at home from work/school, and when not to?	1	2	3	4	5
48understand recommendations about when to engage in social activities, and when not to?	1	2	3	4	5
49follow recommendations about when to engage in social activities, and when not to?	1	2	3	4	5
50to think the restrictions (e.g. physical distancing, wearing mask or curfew) violate your rights?	1	2	3	4	5

51. How many times you have not followed any public health recommendations since the COVID-19 epidemic (gathering with friends without physical distancing, not wearing mask in public, restricting certain leisure activities, etc.)?

- [1] Never
- [2] 1-3 times
- [3] 4-7 times
- [4] more than 7 times

Part 5: Prevention own behaviors

During the last 14 days, which of the following measures have you taken to prevent infection from COVID-19?

COVID-19?						
	Not at all	Seldom	Neutral	Often	Very much	Not applicable
52. Frequently washed my hands with soap and water for at least 20 seconds	1	2	3	4	5	6
53. Avoided touching my eyes, nose and mouth with unwashed hands	1	2	3	4	5	6
54. Used disinfectants/sanitizer to clean hands when soap and water were not available	1	2	3	4	5	6
55. Avoided a social event I wanted to attend	1	2	3	4	5	6
56. Stayed at home from work/school	1	2	3	4	5	6
57. Used antibiotics/antibacterial/antimicrobial to prevent or treat COVID-19	1	2	3	4	5	6
58. Wore a mask in public	1	2	3	4	5	6
59. Ensured physical distancing in public	1	2	3	4	5	6
60. Disinfected surfaces	1	2	3	4	5	6

How necessary and useful do you consider the following behaviors since the COVID 19 pandemic?

How necessary and useful do you consider the following t	ehavio	ors since the	COVID	19 pande	mic?
	No	Disagre	Neutra	Agre	Very
	t at	e	1	e	muc
	all			1	h
61. Hygiene measures, such as					
a) keeping at least 1.5 meters distance from other	0	1	2	2	4
people	U	1	2	3	4
b) coughing or sneezing into the crook of your arm or	0	1	2	2	4
into a handkerchief	U	1	2	3	4
c) not touching mouth, eyes or nose with hands	0	1	2	3	4
d) regular washing of hands	0	1	2	3	4
e) washing hands extensively (for at least 20 seconds)	0	1	2	3	4
f) increased disinfection of hands and objects.	0	1	2	3	4
62. Reduction of social contacts, e.g.					
a) cancelling private meetings and family visits	0	1	2	3	4
b) cancelling trips to other cities	0	1	2	3	4
c) avoiding visits to canteens and restaurants	0	1	2	3	4
d) avoiding touching (e.g. shaking hands or hugging)	0	1	2	2	4
when greeting or saying goodbye to other people	0	1	2	3	4
e) moving your work to home office	0	1	2	3	4
63. Build up stocks, such as	•	•		•	•
a) soap, detergent, cleaning products, washing	0	1	_		4
powder, etc.	0	1	2	3	4
b) food (vegetables, lentils, rice, pasta)	0	1	2	3	4
c) water (20 liters per person)	0	1	2	3	4
d) toilet paper	0	1	2	3	4
e) cash	0	1	2	3	4
64. Political measures, such as	•	•		•	•
a) temporary closures of kindergartens, schools and	0	1	_		4
universities	0	1	2	3	4
b) temporary border closures/travel bans	0	1	2	3	4
c) temporary closures of playgrounds	0	1	2	3	4
d) temporary closure of bars, pubs, theatres, cinemas,	0	1			4
etc.	0	1	2	3	4
e) temporary curfews	0	1	2	3	4
f) Compulsory face masks in closed public spaces	0	1	2	3	4
g) Ban on mass gatherings in streets	0	1	2	3	4
h) mass/community test of COVID-19	0	1	2	3	4
			1	-	

Part 6: Testing and tracing

- 65. If you have been in contact with someone who tested positive for COVID-19 and have no symptoms yourself will you get tested if you have the opportunity?
 - [1] I would get tested for sure [leads to additional answer options below]
 - [2] I may not get tested [leads to additional answer options below]
 - 65.1 For those who select "[1] I would get tested for sure":

Please elaborate on this: I would get tested for sure because... [Multiple choice]

- [1] ... I want to receive the appropriate care in case of a positive test
- [2] ...this is my responsibility as a citizen
- [3] ... I would face penalties if I did not
- [4] ... I believe this helps stop the spread of COVID-19
- [5] ...this way I can protect other people
- [6] ...my colleagues, friends and family would expect me to get tested
- [7] ...others, please specify:
- 65.2 For those who select "[2] I may not get tested":

Please elaborate on this: I may not get tested because... [Multiple choice]

- [1] ...getting tested would cost money (e.g. transportation, buying the test, taking time off work)
- [2] ...I do not know where to go to be tested
- [3] ...it is too time-consuming to get tested
- [4] ...this will result in loss of income for me due to quarantine while waiting to get the results

[7] ... I might face fines or other penalties if I had violated official COVID restrictions [8] ... I do not trust authorities with my personal data [9] ...I do not believe COVID-19 exists [10] ...there is nothing I can do, even if I get a positive test [11] ... I am not able to self-isolate in case I get a positive test [12] ... I do not think the tests are reliable [13] ... I am worried people will treat me badly if I get a positive test [14] ... I am worried I will get infected at the testing site [15] ... I think testing will be painful [16] ...thers, please specify: 66. If you test positive for COVID-19 and are asked to share with health authorities the names of people you have been in contact with – will you share all names? [1] I would share all names for sure [leads to additional answer options below] [2] I may not share all names [leads to additional answer options below] 66.1 For those who select "[1] I would get tested for sure": Please elaborate on this I would share all names for sure because... [Multiple choice] [1] ... I believe this helps stop spread of COVID-19 [2] ...this is my responsibility as a citizen [3] ...this way I can protect other people [4] ...my colleagues, friends and family would expect me to do this [5] ... I would face penalties if I did not [6] ...Others, please specify: 66.2 For those who select "[B] I may not share all names": Please elaborate on this I may not share all names because... [Multiple choice] [1] ... I could contact them myself [2] ... I believe this could result in loss of income for those people due to quarantine [3] ... I believe people would blame me for having shared their name [4] ... I do not trust authorities [5] ...my family and friends would expect me not to share names [6] ... I would cause inconvenience for the people whose names I share [7] ... I do not want others to know I tested positive [8] ...Others, please specify:

[5] ...this would result in loss of income for me if I get a positive test [6] ...people might blame me for my actions if I get a positive test

Part 7: COVID-19 vaccine

There are currently no vaccines available to prevent COVID-19, but many researchers are working to develop and test vaccines. Please share your position on a potential future COVID-19 vaccine:

develop and test vaccines: I lease share your position on a potential lataire covid 17 vaccine.					
	Strongly	Disagree	Neutral	Agree	Strongly
	disagree				agree
67. Are you willing to receive the COVID-19 vaccine?	1	2	3	4	5
68. I believe a vaccine can help control the spread of COVID-19	1	2	3	4	5
69. If I knew I had been infected with COVID- 19 before, I would not get the vaccine even if it were available	1	2	3	4	5
70. When everyone else is vaccinated against COVID-19, then I don't have to get vaccinated	1	2	3	4	5
71. I am willing to participate in clinical trials or donate plasma for development of vaccine	1	2	3	4	5

If a COVID-19 vaccine is made available in my country, my decision of whether or not to get

vaccinated would depend on:

	Not	Disagree	Neutral	Agree	Very
	at				much
	all				so
72. Country in which the vaccine is produced	1	2	3	4	5
73. Recommendation from my family doctor	1	2	3	4	5
74. Recommendation of the Ministry of Health	1	2	3	4	5
75. Whether the vaccine has been in use for 2 years or	1	2	3	4	5
more					
76. Whether the vaccine with no serious side-effects					
77. Whether the vaccine is used in other countries	1	2	3	4	5
78. My risk of getting infected with COVID-19 at the	1	2	3	4	5
time when the vaccine is available					
79. How easy it is to get the vaccine (e.g. available out-	1	2	3	4	5
of-hours or in pharmacies)					
80. Whether the vaccine is free of charge	1	2	3	4	5
81. Whether restrictions on movement and gathering in	1	2	3	4	5
groups would be lifted if most people got the vaccine					

- 82. Apart from COVID-19, I think everyone should be vaccinated according to the national vaccination schedule
 - [1] Yes; [2] No [3] Don't know
- 83. Have you ever been vaccinated against influenza?

[1] Yes; [2] No

84. how much	are you willing to pay	by yourself (o	ut of pocket) fo	or a COVID-19	vaccine?
less than	in your country's	s currency.			
The country	you live in is	•			

Part 8: Resilience

Please consider your experience to general life stressors during the COVID-19 pandemic:

	Strongly disagree	Disagree	Neutral	Agree	Strongly agree
85. I tend to bounce back quickly after hard	1	2	3	4	5
times		_			
86. I have a hard time making it through	1	2	3	4	5
stressful events					
87. It does not take me long to recover from a	1	2	3	4	5
stressful event					
88. It is hard for me to snap back when	1	2	3	4	5
something bad happens					
89. I usually come through difficult times with	1	2	3	4	5
little trouble					
90. I tend to take a long time to get over set-	1	2	3	4	5
backs in my life					

Part 9: Mental Health

Please choose one option per row below. COVID-19 to me feels ...

	Not at	Disagre	Neutra	Agre	Very
	all	e	1	e	much
91. Spreading slowly	0	1	2	3	4
92. Something I think about all the time	0	1	2	3	4
93. Fear-inducing	0	1	2	3	4
94. Media hyped	0	1	2	3	4
95. Something that makes me feel helpless	0	1	2	3	4
96. Highly stressful	0	1	2	3	4

How do you currently perceive the risk of the COVID-19 pandemicb? "I am worried that..."

	Not	at	Disagre	Neutra	Agre	Very
	all		e	1	e	much
97. I have no means of control over the COVID-19 pandemic	0		1	2	3	4
98. I will become infected with COVID-19	0		1	2	3	4
99. people close to me are going to be infected with COVID-19	0		1	2	3	4
100. the consequences of the COVID-19 pandemic will greatly affect me personally	0		1	2	3	4
101. I will die of COVID-19	0		1	2	3	4

The following is a list of statements that deal with the handling and impact of the COVID-19 pandemic. Please indicate the extent to which the following statements have applied to you in the past two weeks. "Because of the COVID-19 pandemic, over the past 14 days"

"Because of the COVID-19 pandemic, over the				1		1
	Not	at	Disagre	Neutra	Agre	Very
	all		e	1	e	much
102. have had upsetting dreams that replay						
part of the experience of the COVID-19	0		1	2	3	4
pandemic or are clearly related to it.						
103. had the feeling that I have experienced	0		1	_	2	4
this COVID-19 pandemic in the past.	0		1	2	3	4
104. have avoided internal reminders of the						
experience of the COVID-19 pandemic (e.g.	0		1	2	3	4
thoughts, feeling, or physical sensations).						
105. have avoided external reminders of the						
experience of the COVID-19 pandemic (e.g.						
people, places, conversations, objects,	0		1	2	3	4
activities, or situations).						
106. have been "super-alert", watchful, or on	<u> </u>		_		_	
guard.	0		1	2	3	4
107. have been feeling jumpy or easily						
startled.	0		1	2	3	4
108. have suffered from unforeseeable severe						
anxiety attacks (panic) with physical						
symptoms (e.g. palpitations, chest pain,	0		1	2	3	4
dizziness).						
a) Optional (if >0): During such an						
anxiety attack I was afraid of dying,	0		1	2	3	4
losing control or one's mind.	0		1	2	3	-
109. have suffered from sleep problems, such						
as	0		1	2	3	4
a) difficulty falling asleep (< 30 minutes)	0		1	2	3	4
b) difficulty sleeping through the night	0		1	2	3	4
c) early morning awakening	0		1	2	3	4
d) fearful dreams or nightmares not about	0		1	2	3	4
the COVID-19 pandemic						
e) fearful dreams or nightmares about the	0		1	2	3	4
COVID-19 pandemic					-	
110. have felt or behaved in a more irritable,	0		1	2	3	4
rageful, angry	Ľ		-	ļ -	ļ -	
111. have felt there is greater solidarity and	0		1	2	3	4
cohesion in our society and community.	Ľ		-		ļ	-
112. have felt I am an integral part of our	0		1	2	3	4
society or community.			±	_		
113. have felt our nation is growing closer	0		1	2	3	4
together.			1			1

114. have felt there is less solidarity and cohesion in our society (e.g. excessive shopping, corona parties).	0	1	2	3	4
115. have felt the crisis divides our global community.	0	1	2	3	4

"Because of the COVID-19 pandemic, over the past 14 days I have felt stressed or burdened a lot by..."

"Because of the COVID-19 pandemic, o	ver the pas	t 14 days L	have felt st	tressed of		
	Not at	Disagre	Neutra	Agre	Very	NA=Not
	all	e	1	e	muc	applicabl
			•		h	e
116. the current pandemic.	0	1	2	3	4	NA
117. living in a small accommodation.	0	1	2	3	4	NA
118. being in quarantine.	0	1	2	3	4	NA
119. childcare or care of other people	0	1	2	3	4	NA
120. taking over school lessons.	0	1	2	3	4	NA
121. the curfew.	0	1	2	3	4	NA
122. working from home.	0	1	2	3	4	NA
123. worries about my health.	0	1	2	3	4	NA
124. worries of not being able to get medical care.	0	1	2	3	4	NA
125. worries about being infected by COVID-19 when I have had first signs of symptoms such as fever, dry cough, breathing problems, sore throat, loss of smell/taste, headache or diarrhea.	0	1	2	3	4	NA
126. increased conflicts with people close to me.	0	1	2	3	4	NA
127. financial worries.	0	1	2	3	4	NA
128. uncertainties regarding my job, training place, studies or school.	0	1	2	3	4	NA
129. concerns for my own personal safety.	0	1	2	3	4	NA
130. concerns for the health and wellbeing of family members or friends.	0	1	2	3	4	NA
131. fears of what the future will bring, or that I won't be able to cope with everything.	0	1	2	3	4	NA
132. knowing people that have gotten sick or died.	0	1	2	3	4	NA
133. increased racism or discrimination.	0	1	2	3	4	NA
134. increased in family cohesion.	0	1	2	3	4	NA
135. reduced in family cohesion	0	1	2	3	4	NA

We would now like for you to indicate your general well-being: Over the past 14 days...

We would now like for your	All of	Most of	More than	Less than	Some of	At no
	the time	the time	half the	half the	the time	time
			time	time		
136 I have felt cheerful and in good spirits	1	2	3	4	5	6
137 I have felt calm and relaxed	1	2	3	4	5	6
138 I have felt active and vigorous	1	2	3	4	5	6
139 I woke up feeling fresh and rested	1	2	3	4	5	6

140 my daily life has	1	2	3	4	5	6
been filled with things						
that interest me						

Part 10: Trust and use of sources of information

How much do you **trust** information about COVID-19 from the following sources?

Trow mach do you trust miorination about C	Very	Little	Neutral	Many	A great
	little	trust		trust	deal of
	trust				trust
141. Television	1	2	3	4	5
142. Newspapers	1	2	3	4	5
143. Health workers	1	2	3	4	5
144. Friends or family	1	2	3	4	5
145. Social media	1	2	3	4	5
146. Radio	1	2	3	4	5
147. Ministry of Health	1	2	3	4	5
148. Institute of Public Health/Center for	1	2	3	4	5
Disease Control					
149. Celebrities and social media	1	2	3	4	5
influencers					
150. World Health Organization (WHO)	1	2	3	4	5
151. COVID-19 Hotlines	1	2	3	4	5
152. National COVID-19 information	1	2	3	4	5
website					
153. COVID-19 information from	1	2	3	4	5
University websites					

How often do you use the following sources for information about COVID-19?

	Never	Rarely	Sometimes	Often	Very
					often
154. Television	1	2	3	4	5
155. Newspapers	1	2	3	4	5
156. Health workers	1	2	3	4	5
157. Friends or family	1	2	3	4	5
158. Social media (e.g. facebook, twitter,	1	2	3	4	5
LinkedIn, general webpage)					
159. Radio	1	2	3	4	5
160. Ministry of Health	1	2	3	4	5
161. Institute of Public Health/Center for	1	2	3	4	5
Disease Control					
162. Celebrities and social media influencers	1	2	3	4	5
163. World Health Organization (WHO)	1	2	3	4	5
164. COVID-19 Hotlines	1	2	3	4	5
165. National COVID-19 information website	1	2	3	4	5
166. COVID-19 information from University	1	2	3	4	5
websites					

Part 11: Frequency of Information

167. How often do you seek information about COVID-19 (from all sources combined)?

- [1] Never
- [2] Several times a month
- [3] Several times a week
- [4] Several times a day

Part 12: Trust in institutions

How much confidence do you have that the following can handle the COVID-19 challenge well?

	Very low confidence	Low confidence	Neutral	High confidence	Very high confidence	Not
168. Your family	1	2	3	4	5	6
doctor						
169. Your employer	1	2	3	4	5	6
170. Hospitals	1	2	3	4	5	6
171. Ministry of	1	2	3	4	5	6
Health						
172. The Government	1	2	3	4	5	6
173. The World	1	2	3	4	5	6
Health Organization						
(WHO)						
174. Institute of Public	1	2	3	4	5	6
Health /Center for						
disease Control						
175. Schools	1	2	3	4	5	6
176. Public	1	2	3	4	5	6
transportation						
companies						
177. Police	1	2	3	4	5	6
178. Your	1	2	3	4	5	6
church/place of						
worship						

Part 13: Perceptions

Please consider the decisions that are made in your living country to reduce spread of COVID-19, I think that....

	is certainly not true	is not true	is between not true and true	is true	is certainly true
179many very important things happen in the world, which the public is never informed about	1	2	3	4	5
180politicians usually do not tell us the true motives for their decisions	1	2	3	4	5
181government agencies closely monitor all citizens	1	2	3	4	5
182events which superficially seem to lack a connection are often the result of secret activities	1	2	3	4	5
183there are secret organizations that greatly influence political decisions	1	2	3	4	5

Thank you very much!

Your participation provides valuable insights for all of us to react appropriately in the current COVID-19 situation and to reach all citizens with useful information in a timely manner. For information about COVID-19, please visit the following websites: https://www.cdc.gov/coronavirus/2019-nCoV/index.html. If you have any questions, please contact Professor WONG, Chi Sang Martin of the Chinese University of Hong Kong at: wong.martin@cuhk.edu.hk.