

## Pandemic Pulse: Wave 2

### Welcome to the PandemicPulse Survey

The Johns Hopkins Bloomberg School of Public Health is conducting research about how the COVID-19 pandemic has impacted people's lives. We are asking you to complete a 5-7 minute survey. Responding to this survey request is voluntary; it is your choice. If you complete and submit this survey, we will know that you consent to participate in this study. You may choose not to answer any question that we ask. Your individual responses will not be shared, but we will share grouped results. Thank you for considering participation in our study.

If you have any questions, you may contact us at [covidpulse@jh.edu](mailto:covidpulse@jh.edu)

The survey is also available in Spanish:

*Se puede cambiar el idioma en el menú arriba a la derecha*

Click 'NEXT' if you would like to take the survey.

## Pandemic Pulse: Wave 2

### Welcome to the PandemicPulse Survey

1. By clicking 'Yes' I consent to participate.

☐ Yes

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**We would first like you to provide some information about yourself.**

2. What is your **age**?

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### 3. What is your **gender**?

- ☐ Female
- ☐ Male
- ☐ Prefer not to say
- ☐ Other (specify)

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4. Are you currently **pregnant**?

- ☐ Yes
- ☐ No
- ☐ Prefer not to say

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5. What is the **5 digit zip code** where you **currently live**? (enter 5-digit ZIP code; for example, 00544 or 94305).

6. What is the **primary race/ethnicity** you identify with?

- ☐ American Indian or Alaskan Native
- ☐ Asian or Pacific Islander
- ☐ Black or African American
- ☐ Hispanic or Latino
- ☐ White/Caucasian
- ☐ Prefer not to say
- ☐ Other

7. How many people currently **live in your household**, including yourself? *I am asking about people who share your kitchen and living space at least 2 days of the week.*

8. How many individuals in each **age group** live with you? Enter 0 if none in an age group.

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\_\_\_\_\_

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\_\_\_\_\_

\_\_\_\_\_

9. Please tell me more about each of the children who lives with you

Participating in  
a nanny  
share?

\_\_\_\_\_

10/10/2019

\_\_\_\_\_

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10. What is the **highest level of school** you have completed or the highest degree you have received?

- ☐ Less than high school degree
- ☐ High school degree or equivalent (e.g., GED)
- ☐ Some college but no degree
- ☐ Associate degree
- ☐ Bachelor degree
- ☐ Graduate degree
- ☐ Prefer not to say

11. Are you currently working **outside the home**?

- ☐ Yes
- ☐ No
- ☐ Unemployed
- ☐ Retired
- ☐ Prefer not to say



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**I would like to ask you some questions about things you have done in the past 2 weeks.**

12. In the past 2 weeks, how often did you use **public transportation** (e.g., buses, metro, subway)?

- ☐ Never
- ☐ Once or twice
- ☐ 3-7 times
- ☐ More than 7 times
- ☐ Prefer not to say

13. In the past 2 weeks, how often did you **visit with** friends, neighbors or relatives **at your home or theirs**?

- ☐ Never
- ☐ Once or Twice
- ☐ 3-7 times
- ☐ More than 7 times
- ☐ Prefer not to say

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14. When you visited with friends, neighbors or relatives, did you spend time **outdoors or indoors**?

- ☐ Outdoors
- ☐ Indoors
- ☐ Both outdoors and indoors
- ☐ Prefer not to say

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15. In the past 2 weeks, how often did you go to a **grocery store or pharmacy**?

- ☐ Never
- ☐ Once or twice
- ☐ 3-7 times
- ☐ More than 7 times
- ☐ Prefer not to say

16. In the past 2 weeks, how often did you go to **another type of store, bar, restaurant, salon, theatre, stadium** or any other **indoor place** where people gather?

- ☐ Never
- ☐ Once or twice
- ☐ 3-7 times
- ☐ More than 7 times
- ☐ Prefer not to say

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17. In the past 2 weeks, did you go to a **bar where you sit or stood indoors**?

- ☐ Yes
- ☐ No
- ☐ Prefer not to say

18. In the past 2 weeks, did you eat **indoors at a restaurant**?

- ☐ Yes
- ☐ No
- ☐ Prefer not to say

19. In the past 2 weeks, did you work out **indoors at a gym**?

- ☐ Yes
- ☐ No
- ☐ Prefer not to say

20. In the past 2 weeks, did you go to a **salon/barber shop for hair, nails, tattoo** or any other service?

- ☐ Yes
- ☐ No
- ☐ Prefer not to say

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21. In the past 2 weeks, how often did you go to a **place of worship** (ex. church, mosque, temple)?

- ☐ Never
- ☐ Once or twice
- ☐ 3-7 times
- ☐ More than 7 times
- ☐ Prefer not to say

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22. Did you go to a place of worship for a **religious service**?

- ☐ Yes
- ☐ No
- ☐ Prefer not to say

23. Did you go to a place of worship for another purpose such as a **meeting, camp or meal**?

- ☐ Yes
- ☐ No
- ☐ Prefer not to say

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24. In the past 2 weeks, how often have you spent time outdoors at a **beach, pool, bar, restaurant or some other outdoor location** where other people gather?

- ☐ Never
- ☐ Once or twice
- ☐ 3-7 times
- ☐ More than 7 times
- ☐ Prefer not to say

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25. In the past 2 weeks, did you go to a **bar where you sit or stood outdoors**?

- ☐ Yes
- ☐ No
- ☐ Prefer not to say

26. In the past 2 weeks, did you eat **outdoors at a restaurant**?

- ☐ Yes
- ☐ No
- ☐ Prefer not to say

27. In the past 2 weeks, did you participate in an **outdoor group fitness activity**?

- ☐ Yes
- ☐ No
- ☐ Prefer not to say



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28. In the past 2 weeks, how often did you go to a **social gathering or event** where there were **more than 10 people**?

- ☐ Never
- ☐ Once or twice
- ☐ 3-7 times
- ☐ More than 7 times
- ☐ Prefer not to say

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29. In the past 2 weeks, how often did you go to a **social gathering or event** where there were **more than 100 people**?

- ☐ Never
- ☐ Once or Twice
- ☐ 3-7 times
- ☐ More than 7 times
- ☐ Prefer not to say

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30. In the past 2 weeks, thinking about all of the times you **interacted with people inside (like at a friend's home, store, restaurant or bar)**, how often did you practice **social distancing** (e.g., maintain 6 foot distance)?

- ☐ Never
- ☐ Sometimes
- ☐ Always
- ☐ Prefer not to say

31. In the past 2 weeks, thinking about all of the times you **interacted with people inside (like at a friend's home, store, restaurant or bar)**, how many non-household members did you spend **at least 15 minutes with in close contact** (e.g., less than 6 feet between you)?

32. In the past 2 weeks, thinking about all of the time you **interacted with people inside (like at a friend's home, store, restaurant or bar)**, how often did you wear a **mask**?

- ☐ Never
- ☐ Sometimes
- ☐ Always
- ☐ Prefer not to say

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33. In the past 2 weeks, thinking about all of the times you **interacted with people during any outdoor activity (like a beach, pool or outdoor bar or restaurant)**, how often did you practice **social distancing (e.g., maintain 6 foot distance)**?

- ☐ Never
- ☐ Sometimes
- ☐ Always
- ☐ Prefer not to say

34. In the past 2 weeks, thinking about all of times you **interacted with people during any outdoor activity (like a beach, pool or outdoor bar or restaurant)**, how many non-household members did you **spend at least 15 minutes with in close contact** (e.g., less than 6 feet between you)?

35. In the past 2 weeks, thinking about all of all of the times you **interacted with people during any outdoor activity (like a beach, pool or outdoor bar or restaurant)**, how often did you wear a **mask**?

- ☐ Never
- ☐ Sometimes
- ☐ Always
- ☐ Prefer not to say

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36. In the past 2 weeks, **did you travel** for vacation, work or some other purpose?

- ☐ Yes
- ☐ No
- ☐ Prefer not to say

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37. **Where** did you travel to? Please write the city and state and Country (if outside the US)

CITY

STATE/COUNTRY

38. **How** did you get to your destination?

- ☐ Car
- ☐ RV
- ☐ Train
- ☐ Bus
- ☐ Plane
- ☐ Boat
- ☐ Other
- ☐ Prefer not to say

39. What was the **main reason** that you traveled?

- ☐ Work
- ☐ See family or friends
- ☐ Vacation or Recreation
- ☐ Medical
- ☐ Other
- ☐ Prefer not to say

40. How many **nights** did you stay?

41. Did you travel **alone**?

- ☐ Yes
- ☐ No
- ☐ Prefer not to say

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42. How many **other people** traveled with you?

43. **Who** traveled with you?

- ☐ People you live with
- ☐ People you don't live with
- ☐ Both people you live with and don't live with
- ☐ Prefer not to say

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The next few questions are about your experiences with COVID-19 since the pandemic began.

44. Have you **ever** thought you had COVID-19?

- ☐ Yes
- ☐ No
- ☐ Prefer not to say

45. Have you **ever wanted or needed** to get tested for COVID-19?

- ☐ Yes
- ☐ No
- ☐ Prefer not to say

46. Have you **ever been tested** for COVID-19?

- ☐ Yes
- ☐ No
- ☐ Prefer not to say



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47. Have you ever **tested positive** for COVID-19?

- ☐ Yes
- ☐ No
- ☐ Prefer not to say

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**The next few questions are about your experiences with COVID-19 in the past 2 weeks**

48. In the past 2 weeks, have you had **symptoms of COVID-19** (such as fever, cough, chills, body aches, shortness of breath, extreme tiredness, sore throat, loss of smell or taste)?

- ☐ Yes
- ☐ No
- ☐ Prefer not to say

49. In the past 2 weeks, do you feel like you were **exposed to COVID-19**?

- ☐ Yes
- ☐ No
- ☐ Prefer not to say

50. In the past 2 weeks, have you **wanted or needed** to get a test for COVID-19?

- ☐ Yes
- ☐ No
- ☐ Prefer not to say

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51. In the past 2 weeks, were you **able to get tested** for COVID-19?

- ☐ Yes
- ☐ No
- ☐ Prefer not to say

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52. What is the **main reason** you didn't get tested?

- ☐ Afraid to get tested
- ☐ Didn't know where to go
- ☐ Testing center too far
- ☐ Couldn't get an order from a doctor to get tested
- ☐ Language barriers
- ☐ Too long of a line to get tested
- ☐ Other reasons
- ☐ Prefer not to say

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53. What **type of test** did you get?

- ☐ Swab in your nose
- ☐ Saliva test
- ☐ Blood test
- ☐ Prefer not to say

54. **How long** did you wait from the time you needed / wanted a COVID-19 test to the time you got one?

- ☐ Same day
- ☐ 1-2 days
- ☐ 3-5 days
- ☐ 6-7 days
- ☐ More than 1 week
- ☐ Prefer not to say

55. **How long** did it take you to get your COVID-19 test results after you got tested?

- ☐ Same day
- ☐ 1-2 days
- ☐ 3-5 days
- ☐ 6-7 days
- ☐ More than 1 week
- ☐ Didn't receive test results
- ☐ Prefer not to say

56. While you waited for your COVID-19 test results, did you stay in **isolation or quarantine**?

- ☐ Yes
- ☐ No
- ☐ Prefer not to say

57. Have you tested **positive** for COVID-19 in the past 2 weeks?

- ☐ Yes
- ☐ No
- ☐ Didn't receive results
- ☐ Prefer not to say

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58. Were you **hospitalized** after your COVID-19 positive test?

- ☐ Yes
- ☐ No
- ☐ Prefer not to say

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59. When you received your test results, **were you provided with instructions** on what to do next (e.g., isolate, visit a hospital, ask your contacts to get tested)?

- ☐ Yes
- ☐ No
- ☐ Prefer not to say

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**I would like to ask you some questions about your experience with antibody testing for COVID-19. Antibody testing tells you whether you have been infected with COVID-19 in the past even if you are not currently infected, and is usually performed on a sample of your blood.**

60. Have you ever been tested for **antibodies to COVID-19**?

- ☐ Yes
- ☐ No
- ☐ Don't Know
- ☐ Prefer not to say



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61. Have you ever **tested positive** for antibodies to COVID-19?

- ☐ Yes
- ☐ No
- ☐ Don't Know
- ☐ Prefer not to say

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**The next questions are about COVID-19 antibody testing in the past 2 weeks.**

62. In the past 2 weeks, have you been tested for **COVID-19 antibodies**?

- ☐ Yes
- ☐ No
- ☐ Don't know
- ☐ Prefer not to say

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63. Was your COVID-19 **antibody test** positive?

- ☐ Yes
- ☐ No
- ☐ Don't Know
- ☐ Prefer not to say

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64. In the past 2 weeks, did you want to get tested for **COVID-19 antibodies**?

- ☐ Yes
- ☐ No
- ☐ Don't Know
- ☐ Prefer not to say

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65. If **COVID-19 antibody testing** were freely available, where would you want to get tested?

- ☐ At home
- ☐ At healthcare provider
- ☐ Drive-thru testing location
- ☐ Pharmacy
- ☐ Don't Know
- ☐ Prefer not to say

66. Do you think people should be **checked for COVID-19 antibodies (prior infection)** prior to doing the following:

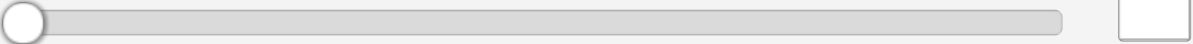
	Yes	No	Unsure	Prefer not to say
<b>Domestic travel</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>International travel</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>Return to work</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>Going back to school</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>Admission into large venues</b> (movie theaters, sporting events, casinos, etc)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>Attending large gatherings</b> of more than 100 people	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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The next few questions are about things that you think might happen as a result of the COVID-19 pandemic in the next 3 months

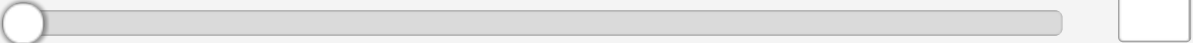
67. **On a scale of 0 to 100 percent**, what do you believe is the chance that you will get COVID-19 in the next three months? If you're not sure, please give your best guess.

0% 100%



68. **On a scale of 0 to 100 percent**, if you do get COVID-19, what do you believe is the percent chance you will die from it? If you're not sure, please give your best guess.

0% 100%



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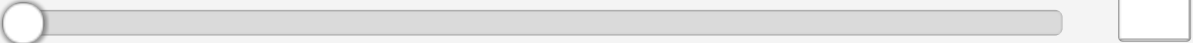
69. Have you **lost your job** due to COVID-19?

- ☐ Yes
- ☐ No
- ☐ Prefer not to say

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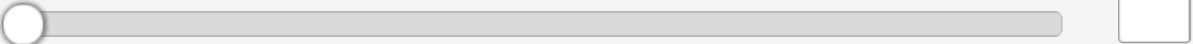
70. COVID-19 may cause economic challenges for some people regardless of whether they are actually infected. **On a scale of 0 to 100 percent**, what is the percent chance that **you will lose your job** because of COVID-19 within the next three months?

0% 100%



71. COVID-19 may cause economic challenges for some people regardless of whether they are actually infected. **On a scale of 0 to 100 percent**, what is the percent chance **you will run out of money** because of COVID-19 in the next three months?

0% 100%





The following questions are about activities that you might do in the next week.

72. How **safe or unsafe** do you think the following activities are in terms of your getting COVID-19 or giving it to someone else?

[illegible]

73. How **safe or unsafe** do you think the following activities are in terms of your getting COVID-19 or giving it to someone else?

[illegible]

## Pandemic Pulse: Wave 2

The last few questions are about your beliefs about COVID-19.

74. Please indicate whether you **agree or disagree** with these statements about COVID-19.

	Agree	Disagree	Unsure	Prefer not to say
People of <b>all ages</b> can get COVID-19	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
People who have recovered from COVID-19 can <b>stop social distancing measures and stop using masks</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
People can get <b>COVID-19</b> more than once	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

75. Please indicate whether you **agree or disagree** with these statements about COVID-19.

	Agree	Disagree	Unsure	Prefer not to say
Currently, there is <b>no medication</b> that is confirmed to be effective against COVID-19	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
COVID-19 was <b>manufactured in a lab</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>A safe and effective COVID-19 vaccine</b> will be available by September	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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### We would like to ask you a couple of more questions before finishing the survey

76. Generally speaking, do you usually think of yourself as a Republican, a Democrat, an Independent or something else ?

- ☐ Republican
- ☐ Democrat
- ☐ Independent
- ☐ Something else
- ☐ Prefer not to say

77. What is your current annual household income from all sources?

- ☐ Less than \$10,000
- ☐ \$10,000 to \$19,999
- ☐ \$20,000 to \$29,999
- ☐ \$30,000 to \$39,999
- ☐ \$40,000 to \$49,999
- ☐ \$50,000 to \$69,999
- ☐ \$70,000 to \$84,999
- ☐ \$85,000 to \$99,999
- ☐ \$100,000 to \$149,999
- ☐ \$150,000 to \$199,999
- ☐ \$200,000 or more
- ☐ Prefer not to say

78. Do you own a smartphone?

- ☐ Yes
- ☐ No
- ☐ Prefer not to say

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**Thank you very much for participating in the Pandemic Pulse Survey!**