

CAIR Pandemic Impact Questionnaire (C-PIQ)*

For each of the items below, please check the boxes to indicate whether it has happened to you personally or to someone close to you IN THE PAST TWO WEEKS.

Experience	Happened to me	Happened to someone close to me
1. Job has increased risk of exposure to coronavirus Specify occupation:	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
2. Lost job or lost income due to the coronavirus pandemic	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
3. Struggled with responsibilities at home due to the coronavirus pandemic	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
4. Difficulty getting food, medication, medical help or other necessities due to the coronavirus pandemic	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
5. Negatively impacted relationships with family or friends	<input type="checkbox"/> Yes <input type="checkbox"/> No	

An exposure total score is calculated by summing "yes" responses (note that yes to item 3 contributes 2 points for a range of 0-15)