

June Covid19 Participant Experience Cope Survey

What should I know before participating?

The All of Us Research Program is interested in understanding the changes in your experiences and health during the time of the coronavirus disease 2019 (COVID-19) pandemic. Help us learn more by completing this survey. Participating in this survey may help researchers around the world better understand the impact of COVID-19 during this challenging time. The All of Us Research Program will repeat this survey throughout the pandemic.

The questions in this survey may be sensitive and may cause worry or anxiety. Remember, your privacy is very important to us. Your name and identity will be separated from your answers before information is shared with approved researchers.

No one will monitor your answers in real time. But, based on your answers, the system may suggest free phone and text resources to help you.

You can choose not to answer any question at any time. This survey will take approximately 20 to 30 minutes to complete.

Yes, I'm ready to take the survey now. Yes, I would like to take the survey at a later time. No, I do not want to take the survey.

Please answer each question as honestly as possible. We are looking for your own answers, and not what you think your doctors, family, or friends want you to say.

Don't feel like you must spend a long time on each question. The first answer that comes to you is usually the best one. If you aren't sure how to answer a question, choose the best answer from the options given.

Some questions also let you say if you don't know an answer or would rather not answer. Some of the questions may be sensitive. You can choose not to answer any question.

COVID-19 Related Impact

Please indicate how much you felt each of the following within the last week. Please choose the answer that best applies to your situation within the past 7 days.

In the past 7 days, I thought about COVID-19 when I didn't mean to.

- Not at all A
- little bit
- Moderately
- Quite a bit
- Extremely

In the past 7 days, I felt watchful or on-guard.

- Not at all A
- little bit
- Moderately
- Quite a bit
- Extremely

In the past 7 days, other things kept making me think about COVID-19.

- Not at all A
- little bit
- Moderately
- Quite a bit
- Extremely

In the past 7 days, I was aware that I still had a lot of feelings about COVID-19, but I didn't deal with them.

- Not at all A
- little bit
- Moderately
- Quite a bit
- Extremely

In the past 7 days, I tried not to think about COVID-19.

- Not at all A
- little bit
- Moderately
- Quite a bit
- Extremely

In the past 7 days, I had trouble concentrating.

Not at all A
little bit
Moderately
Quite a bit
Extremely

In the past month, how has the COVID-19 outbreak affected you? Please select all that apply.

Worked remotely or from home more than you usually do
Worked more hours than usual Worked reduced hours Was
not able to work due to COVID-19 related illness I became
unemployed Had difficulty arranging for childcare Incurred
increased costs for childcare expenses Worked with children
at home with me Income or pay has been reduced Not paid at
all Had serious financial problems None of the above

In the past month, have you experienced the following as a result of COVID-19? Select all that apply.

Not enough money to pay rent Not enough
money to pay for gas Not enough money to pay
for food Not enough money to pay for
medications Did not have a regular place to
sleep or stay None of the above

In the past month, have the following behaviors increased in your household? Select all that apply.

Interpersonal conflict with family members or loved ones
Snapping at or yelling at family members Interpersonal
conflict with friends or coworkers None of the above

In the past month, to cope with social distancing and isolation, are you doing any of the following? Select all that apply.

Taking breaks from watching, reading, or listening to news stories, including social media Increasing watching,
reading, or listening to news stories, including social media Taking care of your body, such as taking deep breaths,
stretching, or meditating Engaging in healthy behaviors like trying to eat healthy, well-balanced meals, exercising
regularly, getting plenty of sleep, or avoiding alcohol and drugs Making time to relax Connecting with others,
including talking with people you trust about your concerns and how you are feeling Contacting a healthcare
provider Smoking more cigarettes or vaping more Drinking alcohol more than usual Using prescription drugs (like
valium, etc.) more than usual Using non-prescription drugs more than usual Using cannabis or marijuana more
than usual Eating high fat or sugary foods more than usual Cutting or self-injury more than usual Over exercise
Eating more food than usual Eating less food than usual None of the above