

COVID-19 Experiences (COVEX)

Suggested citation

Fisher, P.W., Desai, P., Klotz, J., Turner, J.B., Reyes-Portillo, J.A., Ghisolfi, I., Canino, G., and Duarte, C.S. (2020) COVID-19 Experiences (COVEX).

Section 4: Employment/School Changes

Now we are going to change the subject and ask you about work.

1. Which of the following best describes your work situation in the two weeks prior to the COVID-19 outbreak?

- Working full time → **GO TO 1B**
- Working part time → **GO TO 1B**
- Self-employed → **GO TO 1B**
- Looking for work, unemployed → **GO TO 1A**
- Unemployed, not looking → **GO TO 1A**
- Temporarily laid off → **GO TO 1A**
- Retired → **GO TO 1A**
- Homemaker → **GO TO 1A**
- Maternity Leave → **GO TO 1A**
- Illness/sick leave → **GO TO 1A**
- Disabled → **GO TO 1A**
- Other → **GO TO 1B**

If not working before COVID-19 outbreak, ask;

1a. Did you start a new job during the COVID-19 outbreak?

- No → **GO TO 5**
- Yes → **GO TO 4**

1b. What setting(s) were you working in the two weeks before the COVID-19 outbreak? [check all that apply]

- At home
- In a medical setting (hospital, clinic, doctor's office, urgent care center, etc.)
- In an office or apartment building
- In a private household(s) (nanny, housekeeper, etc.)
- In a setting with regular customer interaction (delivery, transport, retail, food service, restaurant, etc.)
- In the community as a first responder (police, EMS, firefighter, etc.)
- In a warehouse or factory
- Outside (gardening, construction, road work, etc.)
- Other _____

1c. What kind of work did you do? _____

if employed before COVID-19 outbreak, ask;

2. Did you lose any job(s) during the covid-19 outbreak?

- No → **GO TO 2B**
- Yes, I was laid off from a job
- Yes, I was furloughed from a job
- Yes, I lost all my jobs → **GO TO 2B**

If laid off or furloughed, ask;

2a. Did you continue to work at all during the COVID-19 outbreak?

- No → **GO TO 5**
- Yes

2b. Did you start or get [a new/another] job during the COVID-19 outbreak?

- No
- Yes

If currently working, ask:

3. Did you experience significant changes with your job (e.g. workload, hours, pay, etc.) because of or during the outbreak? [check all that apply]

- No
- Yes, switched to working remotely
- Yes, increase in work hours
- Yes, decrease in work hours
- Yes, increase in workload
- Yes, decrease in workload
- Yes, salary or wages cut
- Yes, salary or wages increased
- Yes, other significant change: _____

4. What setting(s) have you been working in since the COVID-19 outbreak began? [check all that apply]

- At home
- In a medical setting (hospital, clinic, doctor's office, urgent care center, etc.)
- In an office or apartment building
- In a private household(s) (nanny, housekeeper, etc.)
- In a setting with regular customer interaction (delivery, transport, retail, food service, restaurant, etc.)
- In the community as a first responder (police, EMS, firefighter, etc.)
- In a warehouse or factory
- Outside (gardening, construction, road work, etc.)
- Other _____

5. In the weeks before COVID-19 outbreak began, were you a student (enrolled in an academic program)?

- Full time student
- Part time student
- No → **GO TO 6 IF WORKING DURING OUTBREAK; GO TO 8 IF NOT WORKING**

If a full or part time student, ask:

5a. After the COVID-19 outbreak began, did you continue to be a student?

- No → **GO TO 6 IF WORKING DURING OUTBREAK; GO TO 8 IF NOT WORKING**
- No, graduated or finished program early → **GO TO 6 IF WORKING DURING OUTBREAK; GO TO 8 IF NOT WORKING**
- Yes

If still enrolled in school, ask:

5b. Since the COVID-19 outbreak, has your school offered classes remotely?

- No → **GO TO 6 IF WORKING DURING OUTBREAK; GO TO 8 IF NOT WORKING**
- Yes

If still enrolled in school, ask:

5c. Did you experience an increase or decrease in schoolwork (time spent working)?

- Increase
- Decrease
- No change

If working at home or in school virtually, ask:

6. [Has it been/Was it] hard to get your [work/schoolwork] done because of other responsibilities at home (taking care of children, family, tension, space)?

- No
- Yes

If working at home or in school virtually, ask:

7. [Has it been/Was it] hard to get your [work/school work] done because of your home environment (internet, computers, tension, space)?

- No
- Yes

8. Did anyone in your house lose their job or lose a significant amount of their income as a result of the COVID-19 outbreak?

- No
- Yes

If yes, ask:

8a. Who lost their job or a significant amount of income as a result of the COVID-19 outbreak?

- Partner
- Parents
- My children
- Siblings
- Grandparents
- Other family members (e.g. aunt, uncle, cousin)
- Friend(s)
- Other household members/roommates
- Other, specify: _____