

**In the past week:** 

	Not at all	Slightly	Moderately	Very	Extremely
How worried have you been about coronavirus (COVID-19)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
How worried have others around you been about coronavirus (COVID-19)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
How much do you think your life has changed due to coronavirus (COVID-19)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
How hopeful are you that the coronavirus/COVID-19 crisis in your area will end soon?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

	Very slightly or not at all	Slightly	Moderately	Quite a bit	Extremely
COVID-19 presents a lot of uncertainty about the future. In the past 7 days, including today, how stressful have you found this uncertainty to be?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



**These questions ask about your feelings and thoughts in the last month. Please indicate how often you felt or thought a certain way.**


	Never	Almost Never	Sometimes	Fairly often	Very Often
In the last month, how often have you felt that you were unable to control the important things in your life?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
In the last month, how often have you felt confident about your ability to handle your personal problems?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
In the last month, how often have you felt that things were going your way?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
In the last month, how often have you felt difficulties were piling up so high that you could not overcome them?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**In the past week...** 

	Never	Almost Never	Sometimes	Often	Almost Always
I felt like I couldn't do anything right	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I felt everything in my life went wrong	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I felt unhappy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I felt lonely	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I felt sad	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I felt alone	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I could not stop feeling sad	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
It was hard for me to have fun	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I felt angry or frustrated	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

How do you think your mental health (emotional well-being) is in the past week compared to normal?

- much worse
- a little worse
- about the same
- a little better
- much better


**Next are items that describe how kids feel. Please rate how each item describes you now or within the past week. Please answer with one of the following options: Not True, Somewhat True, or Very True.** 

	Not true	Somewhat true	Very true	Don't know
I felt attentive (that is, alert or able to pay attention)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I felt delighted	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I felt calm	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I felt at ease (Definition: relaxed, comfortable)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I felt enthusiastic (Definition: very excited)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I felt interested	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I felt confident	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I felt energetic	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I felt able to concentrate	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**In the past week...**



	Never	Almost Never	Sometimes	Often	Almost Always
I felt scared	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I worried about what could happen to me	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I felt worried	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I felt like something awful might happen	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I worried when I went to bed at night	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I felt nervous	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I worried when I was at home	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I got scared really easily	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**Below is a list of comments made by people after a stressful life event. Thinking about the coronavirus situation, please check each item showing how often these comments were true for you in the past week. If they did not occur this week, check "not at all".** 

	Not at all	Rarely	Sometimes	Often
Do you think about it even when you don't mean to?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Do you try to remove it from your memory?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Do you have waves of strong feelings about it?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Do you stay away from reminders of it (e.g. places or situations?)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Do you try not to talk about it?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Do pictures about it pop into your mind?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Do other things keep making you think about it?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Do you try not to think about it?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I felt angry or frustrated	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**Compared before you had to stay at home due to the coronavirus:** 

	Noticeably Decreased	Somewhat Decreased	Has Not Changed	Somewhat Increased	Noticeably Increased	Not applicable
How has the frequency of your on-line communication changed?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
How has the frequency of your communication changed during this time with friends?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
How has the frequency of your communication changed during this time with parents?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
How has the frequency of your communication changed during this time with siblings?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>


**Compared before you had to stay at home due to the coronavirus:** 

	Noticeably more negative	Somewhat more negative	Has not changed	Somewhat more positive	Noticeably more positive	Not applicable
How has the tone of your communication changed during this time with friends?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
How has the tone of your communication changed during this time with parents?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
How has the tone of your communication changed during this time with siblings?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



**Please rate how often you have done the things below in the last week:**


	I have not done this in the last week	I did this some of the time last week	I did this most or the time last week	I did this all the time last week
I stay away from people (other than those who live in my house)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I avoid news or information about bad illnesses or viruses	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I wash my hands at times other than just after I use the bathroom or before eating	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I wear a mask over my face or protective gear (e.g. gloves, things to cover my clothes)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I use Purell/other hand sanitizer	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I use Clorox/cleaners to wipe down surfaces	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I avoid touching things (e.g., phone, doorknobs)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I avoid touching people (e.g., hugging, shaking hands)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I exercise or play outside	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I stay away from people inside my house (e.g., stay in another room or a certain distance away)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I do schoolwork on a computer	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**Please indicate how true the statement is for you in the past week:** 

Not true for me at all      Somewhat true      Mostly true      Definitely true

Being afraid of an illness or virus has caused me to feel very strong emotions in my body (e.g. anger, anxiety, sadness, irritable feelings, etc.).

Being afraid of an illness or virus has gotten in the way of enjoying my life (e.g. caused fights in my house, kept me from connecting with others, made me feel isolated or hopeless about the future, etc.).