# BMJ Open COVID-19 welbeing study: a protocol examining perceived coercion and psychological well-being during the COVID-19 pandemic by means of an online survey, asynchronous virtual

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focus groups and individual interviews

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#### **ABSTRACT**

Introduction The COVID-19 pandemic has resulted in many countries applying restrictive measures, such as lockdown, to contain and prevent further spread. The psychological impact of lockdown and working as a healthcare worker on the frontline has been chronicled in studies pertaining to previous infectious disease pandemics that have reported the presence of depressive symptoms, anxiety, insomnia, and post-traumatic stress symptoms. Potentially linked to psychological well-being and not yet studied is the possibility that lockdown and working on the frontline of the pandemic are associated with perceptions of coercion.

Methods and analysis The present study aimed to examine perceived coercion in those who have experienced COVID-19-related lockdown and/or worked as a frontline healthcare worker across three European countries. It aimed to describe how such perceptions may impact on psychological well-being, coping and posttraumatic growth. It will employ an explanatory mixedmethods research methodology consisting of an online survey and online asynchronous virtual focus groups (AVFGs) and individual interviews.  $\chi^2$  tests and analyses of variance will be used to examine whether participants from different countries differ according to demographic factors, whether there are differences between cohorts on perceived coercion, depression, anxiety and post-traumatic growth scores. The relationship between coercion and symptoms of distress will be assessed using multiple regression. Both the AVFGs and the narrative interviews will be analysed using thematic narrative analysis. Ethics and dissemination The study has been approved by University College London's Research Ethics Committee under Project ID Number 7335/004. Results will be disseminated by means of peer-reviewed publications and

#### INTRODUCTION

COVID-19 is an infectious disease caused by a novel betacoronavirus believed to originate

at national and/or international conferences.

# Strengths and limitations of this study

- ► This study will use online quantitative and qualitative research methods to reach both the general population and key workers affected by the COVID-19 lockdown.
- ► It will adopt the use of innovative research methods, such as asynchronous virtual focus groups, to allow participants to describe experiences of lockdown and working in frontline roles during the pandemic, and to communicate with other participants openly and flexibly.
- The methods allow for replicability and cultural adaptation across different countries.
- Involvement in this study is dependent on literacy, tech literacy and internet access.

in Wuhan, China. 1-3 Early indications of the presence of this virus emerged in December 2019, when several individuals displayed clinical presentations akin to viral pneumonia.<sup>2</sup> Although our knowledge of the virus is still accumulating, severe cases of infection may lead to serious health complications and death.<sup>2</sup> As of 11 March 2020, the WHO declared the disease a pandemic. In addition to this declaration, individuals and governments were advised to take precautionary and restrictive measures to reduce virus transmission, such as social distancing, self-isolation, quarantine and lockdown, depending on prevalence and health service capacity within each country.4

The psychological impact of restrictive measures and epidemics has received some attention in the mental health literature, with studies reporting the presence of depressive symptoms, anxiety and insomnia in those who



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have experienced quarantine and those who have worked as healthcare workers during epidemics. 5-13 Such distress, as well as its possible impact on suicidality, is expected as a result of restrictive practices linked to the COVID-19 pandemic, with researchers and clinicians worldwide commenting on the effect of secondary stressors associated with both the lockdown and the threat of infection on the general population's mental health. 14-19 In healthcare workers, it has been linked to a number of COVID-related work stressors, including increased workloads, unfamiliar tasks, being at increased risk of infection and fears of infecting others. 12 20-23

Linked to psychological well-being and not yet studied

is the potential for these experiences to give rise to perceptions of coercion, both in those living under lockdown and those providing frontline healthcare. Such perceptions arise from experiencing a dearth of choice, freedom, influence or control with regard to one's situation. 24 25 These are most commonly reported when individuals experience a situation that they feel is forced on them without justification, and where they feel excluded from the decision-making process or do not have an opportunity to express their viewpoint.<sup>26</sup> Such perceptions have been commonly reported in the mental health literature, particularly in relation to restrictive measures such as involuntary admissions to hospital. which, in ways, may be comparable in populations where restrictions were severe and individuals were legally enforced to stay at home.<sup>27</sup> In mental health settings, higher levels of perceived coercion are indicative of a poorer prognosis.<sup>28</sup> It is, however, unclear as to whether a pandemic-related lockdown will give rise to similar perceptions of coercion. Understanding such perceptions is critical if governments are to secure the cooperation of their citizens in enacting mitigation (lockdown) efforts, and the cooperation and mental well-being of frontline workers, in future scenarios.

In light of the aforementioned research, the present study primarily examines perceived coercion in those who have experienced COVID-19-related lockdown and/or frontline roles across three European countries with different demographic characteristics and healthcare systems, and which enacted differentially stringent mitigation approaches. In healthcare workers, it examines how perceptions of coercion and pressures may be related to perceived risk of infection and COVID-19related stressors in the workplace. Using the transactional theory of stress and coping, it aimed to describe how such perceptions may impact on psychological well-being, coping and post-traumatic growth,<sup>29</sup> and, in healthcare workers, on professional quality of life. Finally, we will also preliminarily investigate whether there is an increase in healthcare resource usage (in the general population sample), as a coping strategy, and whether this is linked to the aforementioned constructs.

# **Key research questions**

Our research questions are the following:

- 1. What are the experiences of those who have been under lockdown or have been working as healthcare workers during the COVID-19 pandemic? How have these experiences impacted on their psychological well-being?
- 2. To what extent does the general population perceive the lockdown as coercive, pressured and procedurally just? To what extent do healthcare workers perceive having to work on the frontline with patients with COVID-19 as coercive? Do these perceptions change over time?
- 3. Are perceptions of coercion associated with psychological distress, after controlling for demographic and background factors?
- 4. Do perceptions of coercion and psychological distress in the general population and among key workers vary across affected countries after controlling for demographic and background factors?
- 5. What practical recommendations can we highlight to policy-makers and healthcare management about how to improve the psychological support provided to both the general population and health workers across affected countries?

#### **METHODS AND ANALYSIS**

This study will employ an explanatory mixed-methods research methodology consisting of (1) an online survey and (2) online asynchronous virtual focus groups (AVFGs) or individual interviews.

# Sample

# Online survey

Participants will consist of individuals who have experienced governmental lockdown and/or who are key workers during the coronavirus pandemic. Participants will be recruited from the UK, Italy and Norway with the potential to be extended to other countries. Individuals aged  $\geq 18$  years and who have experienced governmental lockdown and/or are key workers working on the frontline in the UK, Italy or Norway will be invited to participate. We aimed to recruit 2000 individuals who experienced lockdown per country, as per Martínez-Mesa *et al* and Maxwell. <sup>30 31</sup> Participants will be recruited using social media platforms such as Twitter, Facebook and Instagram. Advertisements for the study will also be cascaded via email and other social media messaging technology such as WhatsApp.

#### AVFGs and individual interviews

A sample of individuals from the quantitative study will be invited to participate in either an AVFG or individual interview, depending on preference and availability. A total of six to nine AVFGs will be conducted simultaneously, with two to three AVFGs/country. AVFGs will be limited to 6–10 participants/group. Purposive sampling will be used to select individuals according to their age, gender and geographical location, or other distinctive



factors where possible, so that each group consists of participants from a diverse range of backgrounds.

# **Setting**

The study will be completed entirely online using a general data protection regulation (GDPR)-compliant data collection tool (ISO 27001 certified). AVFG participants will be asked to log onto a virtual learning environment <sup>32–34</sup> that provides a secure and confidential space for research participants to write and interact with each other. Individual interviews will take place by telephone or using online conferencing software.

# **Procedure**

#### Online survey

Advertisements will be posted and shared on social media. Clicking on the study's link will direct participants to the survey's home page from which they can be directed to the study information page. Should they wish to participate after reading the study information, they will provide informed consent online and proceed to the online survey. After completing the survey, participants will be invited to take part in a shorter follow-up survey within a period of 3 months and/or further qualitative research. Those who wish to take part will be asked to enter their email address.

#### AVFGs or individual interviews

AVFG participants will be registered onto a virtual learning environment<sup>32</sup> 33 under a chosen alias (to preserve anonymity). Then they will familiarise themselves with the platform and documents listed as 'essential information', which include study information, addition consent form, researcher contact details and support, and netiquette guidelines. Once all participants provide consent, the first focus group question will appear as a discussion topic. Participants will be asked to engage in discussion about a different question (outlined as follows) each week for 3 weeks. Participants will be able to post as often as they wish each week, both in response to the question and in reaction to other participants' responses. Participants will receive an email notification for each new question posted. Discussion boards will be moderated two times per day by the researchers to monitor the content of what is posted and to delete if offensive, and to probe and clarify participants' responses.

Should participants prefer to take part in an interview rather than an AVFG, the researcher will email them a copy of the information sheet and consent form and arrange a time for interview. All interviews will be audio-recorded and then transcribed. The interviews are expected to last up to 1 hour. All identifiable data will be stored on Data Safe Haven, in accordance with University College London (UCL) policy.

# Instruments

# Online survey

All participants will complete a questionnaire constructed by the researchers that asks individuals about general demographic details and their clinical background at baseline. Participants will also complete the following measures at baseline and within a 3-month follow-up period: (1) an adapted version of the MacArthur Admission Experience Survey<sup>24</sup> to measure the extent to which individuals perceive their circumstances as coerced, pressured and procedurally just in the general population and a Perceived Coercion Scale for Healthcare Workers constructed by researcher AS, (2) the Depression, Anxiety and Stress Scale<sup>35</sup> to indicate the presence of depression, anxiety, stress and post-traumatic growth; (3) the Post-traumatic Growth Inventory-Short Form<sup>36</sup> to assess whether individuals experience positive outcomes relating to the COVID-19 pandemic; and (4) the brief COPE<sup>37</sup> to observe individuals' methods of coping within the context of the COVID-19 pandemic. Healthcare workers will also be asked to complete an adapted version of the Perceived SARS Related Risk Scale<sup>38</sup> and the Professional Quality of Life measure.<sup>39</sup> The adapted versions of the scales may undergo minor modification after piloting. A copy of the survey can be accessed online (www.thec ovid19wellbeingstudy.org). A copy of the survey questions is attached as an online supplemental file with this article.

# **AVFGs**

Members of the general population taking part in the AVFGs will be asked to answer the following questions and to engage with other participants' responses:

Week 1: Can you tell us about how you felt when you were first told to stay home during the coronavirus pandemic? Looking back on the lockdown, have your feelings changed towards it? If yes, in what way? Did you agree or disagree with the governmental lockdown? In what way? How do you feel about the lockdown being lifted? What are your feelings regarding a future potential lockdown?

Week 2: Did you self-isolate prior to the lockdown or did you remain home solely because the lockdown came in? For example, did you first experience forced isolation due to confirmation of illness? Did you first practice self-isolation due to you or someone in your household being symptomatic, or having a condition that places you at a greater health risk? Or was your first experience of isolation a result of governmental lockdown? Did you feel you had any control over your isolation? Was it something you chose initially or something you felt was forced on you? How did this make you feel?

Week 3: What has been the impact of the lockdown on your psychological well-being? Have you, someone in your household or someone you know experienced an onset of coronavirus-type symptoms? How did this impact you emotionally? What support do you feel you need for your emotional well-being? What have you done so far to try to stay well?

Healthcare workers will be asked to answer and engage with other participants' responses for the following questions:

Week 1: Can you tell us about how you felt when you first started working with patients confirmed with or suspected of having COVID-19? Were you asked or told to work with this patient group? Did you volunteer to work with this patient group? Did you feel that working with this patient group is part of your work role, in spite of potential risk? How have your feelings changed about working with this patient group between then and now, if at all?

Week 2: Under what circumstances did you work with patients confirmed with or suspected of having COV-ID-19? Are you redeployed or did you remain in your workplace? Did you feel that you were adequately physically protected? Did you feel adequately supported within your workplace? Did you feel your needs were considered? Did you encounter barriers to accessing protection or support within your workplace? In what way?

Week 3: What has been the impact of working as a key worker with individuals with COVID-19 on your psychological well-being? What supports do you feel you need for your emotional well-being? Did you seek psychological support, and from whom? What have you done so far to try to stay psychologically well?

#### Individual interviews

Semistructured interviews will be adopted to enable the researchers to capture detailed insights about each individual's personal experiences and perceptions and the context in which these occur. These interviews will focus on individuals' perceptions regarding lockdown (inclusive of perceived coercion, pressures, and procedural justice), their experiences of isolation and their psychological well-being. Individuals who identify themselves as healthcare workers in the online survey may be invited to interview depending on their availability. These interviews will be slightly tailored to focus on clinicians' experiences and perceptions of working during the coronavirus pandemic (inclusive of perceived coercion, pressures and procedural justice), and their psychological well-being.

#### **Analysis**

#### Online survey

All numerical data will be inputted into a statistical analysis software programme (SPSS) version 26. The data will be tested for normality by conducting quartile–quartile plots and Kolmogorov-Smirnov tests for each measure (and subscale, where applicable). Following the aforementioned initial management of the data, we will describe demographic and background characteristics according to country and respondent type. A multiple regression model will be used with perceived coercion as the main predictor and measures of psychological distress (ie, depression, anxiety and post-traumatic stress) as the main outcome variables. The secondary outcome variables will include measures of adaptability (ie, coping and post-traumatic growth) and demographic (ie, age, gender, ethnicity and education level) and background

variables (ie, job role and work environment) as covariates. In healthcare workers, COVID-19-related stressors and perceptions of COVID-related risk will also be analysed as possible predictors, mediators and/or moderators. Further exploratory analysis may be conducted to assess for interaction between variables. Analyses of variance will be used to examine whether there are differences between UK, Italian and Norwegian cohorts on perceived coercion, stress, depression, anxiety, trauma scores and professional quality of life.

# AVFGs and individual interviews

The qualitative substudy will employ a phenomenological approach as its focus is on understanding the subjective experiences of individual participants and the meaning that participants attribute to these experiences. It will also employ an interpretative framework, using the stresscoping paradigm, whereby the focus of our questions and analysis will be on creating a picture of what influences individuals' appraisals of perceived coercion, pressures and procedural justice and how these appraisals influence and are influenced by coping. Focus group data will be downloaded directly as text from the virtual learning environment platform. Interviews will be audio-recorded and transcribed. Computer Assisted Qualitative Data Analysis Software, such as NVivo, will be used to code the transcripts. 40 Text scripts and transcripts will be analysed, adapting Braun and Clarke's thematic analysis. 41 This will involve both sequencing events and experiences, and grouping commonalities and experiences within chronological sequences, and between the two types of participants. Themes and narratives will be explored by two researchers with one principally analysing the data and the second overseeing the emerging themes. Any disagreements will be discussed and resolved within the wider research team. Concepts from the narratives will be both derived inductively from the data and applied deductively to our theoretical framework.

#### **Patient and public involvement**

No patient involvement. The background questionnaire was co-constructed with the authors who are healthcare workers. The questionnaire was also piloted with healthcare professionals who gave feedback on it.

# **ETHICS AND DISSEMINATION**

This study received approval by UCL's Research Ethics Committee as application 7335/004.

# **Informed consent**

Individuals who click on the study's advertisement on social media will be brought to the survey's home page. Should they wish to proceed, they will be brought to an information page detailing the purpose of the study, how their confidentiality and anonymity will be preserved and how their data will be treated. Should individuals wish to participate after reading the information page, they will



be asked to provide informed consent online. At the end of the survey, participants will be asked if they would like to take part in a follow-up assessment and/or an online focus group or interview. Those who wish to take part will be asked to enter their email address.

Participants who provide their email address and show a preference to take part in an online group will be registered onto a virtual learning environment (ie, Blackboard) under an alias chosen by them in order to preserve their anonymity. Once registered, they will be asked to log in and familiarise themselves with both the platform and all documents listed as 'essential information' within it. Essential information will include the study's information sheet and separate consent form, contact details for the researchers and support, and netiquette guidelines. Once all participants provide consent online, the first focus group question will appear as a discussion topic. Should participants prefer to take part in an interview, the researcher will email them a copy of the information sheet and consent form and arrange a time for interview.

#### **Data protection and confidentiality**

An online data collection tool that is GDPR compliant and certified to ISO 27001 standard will be used for the online survey. Participants will be given the opportunity to choose their own pseudonym for the AVFGs to help preserve their anonymity. All data collected during the course of the research will be kept strictly confidential. All identifiable information will be stored on UCL's Data Safe Haven, a GDPR-compliant, encrypted system for the duration of the study. Audio recordings will be kept on Data Safe Haven until these are transcribed into an anonymous format. Non-identifiable data will be stored on a password-protected, encrypted drive on a UCL desktop for a period of 5 years.

#### **Dissemination**

Participants will not be identifiable in any ensuing reports or publications. Results will be disseminated by means of peer-reviewed publications and at national and/or international conferences. We will aim to publish the findings in an open-access journal to make the study's findings accessible to the general population. A summary of the findings will be shared on our website (thecovid19wellbe ingstudy.org)

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**Contributors** VR and AS constructed the initial protocol. VR and ASS drafted this protocol article. SK contributed to the quantitative and psychological designs of the study. SE contributed to the research ethics design of the study. EB and CM contributed to the design of the healthcare professional questions. EP constructed

the health economics questions. All authors contributed to and reviewed the present protocol.

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# The COVID-19 Wellbeing Study: Perceived Coercion and Psychological Wellbeing

Start of Block: Welcome to the COVID-19 Wellbeing Study!

Introduction

The COVID-19 Wellbeing Study:

Perceived coercion and psychological wellbeing during the COVID-19 pandemic

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www.thecovid19wellbeingstudy.org

You are being invited to take part in a research project. Before you decide, it is important for you to understand why the research is being done and what participation will involve. Please take your time to read the following information carefully and discuss it with others if you wish. Ask us if there is anything that is not clear or if you would like more information. The data collected for this project will also form part of a clinical psychology doctoral thesis for Veronica Ranieri and Andrea Stoltenberg. Thank you for reading this.

# 1. What is the project's purpose?

The aim of the study is to understand the lived experiences of those who have been placed under governmental lockdown or have worked as key workers working during the COVID-19 pandemic. We would like to primarily understand how these experiences, and other background factors, have impacted on your perceptions of coercion and psychological wellbeing resulting from the lockdown or working as a key worker during the COVID-19 pandemic. Previous research has identified that an individual's perceptions or appraisal of a situation may impact on their psychological wellbeing and coping mechanisms. When a situation is perceived negatively, it can lead to experiences of psychological distress and differences in the type or frequency of

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coping mechanisms we use to help manage the situation. We are, therefore, interested in how you experienced the extent to which you perceived the lockdown as coercive or pressured, and your psychological wellbeing.

# 2. Why have I been chosen?

We are inviting you to take part as someone who has experienced governmental lockdown or has worked as a key worker during the COVID-19 pandemic. We are inviting all individuals aged 18 years or older who have experienced governmental lockdown or have worked as key workers during the COVID-19 pandemic and are ordinarily resident in the UK, Italy or Norway to participate.

# 3. Do I have to take part?

Participation in this study is voluntary. You may discontinue participating in the survey at any time without giving a reason by leaving the survey's webpage. Your data will only be stored should you complete the survey.

# 4. What will happen to me if I take part?

If you would like to take part, we would ask that you fill in the online survey over the next few pages. The survey will ask questions relating to perceived coercion, psychological wellbeing, coping mechanisms, costs and healthcare usage and questions about your circumstances. We think that it may take you twenty minutes to fill it out.

We would also like to invite you to repeat part of the survey (looking at perceived coercion, psychological wellbeing and coping only), and an online focus group or one-time interview to better understand your experiences. If you would like to take part in the second part of the study, please include your email address on the last page of the online survey. We will store email addresses separately from the survey data and will contact you using the email address you provide at a later time.

# 5. What are the possible disadvantages and risks of taking part?

We do not expect that taking part in this survey will place you at risk of harm. However, you may feel some emotional distress during or after the survey due to the nature of the topic. Should you experience significant distress, arising during or as a consequence of the research, please tell us. We will urge you to contact a health professional such as your General Practitioner and can redirect you to services available in your area. On our website www.thecovid19wellbeingstudy.org you will also be able to find multiple contact details for organisations providing support, such as the Samaritans on 116 123; SANEline on 0300 304 7000 and the The Mix for those under 25, on 0808 808 4994.

#### 6. What are the possible benefits of taking part?

Whilst there are no immediate benefits for those people participating in the project, it is hoped that this work will help shape future clinical practice, government policy, and research, in relation to supporting individuals during pandemics.

# 7. What if something goes wrong?

Should you encounter any difficulties during the online survey, please contact Veronica at v.ranieri@ucl.ac.uk or Andrea at andrea.stoltenberg.19@ucl.ac.uk

Should you have queries regarding the overall conduct of the study, please contact Sarah at sarah.edwards@ucl.ac.uk or Sunjeev at sunjeev.kaboj@ucl.ac.uk

Should you feel that your concern is not adequately addressed by the research team and wish to raise a complaint, please contact the Chair of the UCL Research Ethics Committee at ethics@ucl.ac.uk

# 8. Will my taking part in this project be kept confidential?

All the information that we collect about you during the course of the research will be kept strictly confidential. You will not be able to be identified in any ensuing reports or publications. Any identifiable information (ie. your email) will be stored on UCL's Data Safe Haven, a GDPR-compliant, encrypted system for the duration of the study. The data will be analysed by the research team.

# 9. What will happen to the results of the research project?

The results of this research may feature in peer-reviewed publications, national or international conferences or media. You will not be identifiable in any ensuing reports or publications. We will add any outputs from the study onto our website for you to access once analysed and written.

# 10. What if I change my mind and would like to withdraw my information?

As this is an anonymous survey, we will be unable to identify your data from it to withdraw it. If you have left your email address in the final page to take part in a follow-up survey or qualitative sub-study, we can delete your email address from our records at any time. Should you wish to withdraw your email address, please email this request in writing to Veronica at v.ranieri@ucl.ac.uk or Andrea at andrea.stoltenberg.19@ucl.ac.uk

# 11. Local Data Protection Privacy Notice

Notice:

The controller for this project will be University College London (UCL). The UCL Data Protection Officer provides oversight of UCL activities involving the processing of personal data, and can be contacted at data-protection@ucl.ac.uk

This 'local' privacy notice sets out the information that applies to this particular study. Further information on how UCL uses participant information can be found in our 'general' privacy notice found at https://www.ucl.ac.uk/legal-services/privacy/ucl-general-privacy-notice-participants-and-researchers-health-and-care-research-studies

The information that is required to be provided to participants under data protection legislation (GDPR and DPA 2018) is provided across both the 'local' and 'general' privacy notices.

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The categories of personal data used will be as follows: age, geographical region, employment status and household income, psychological and physical health, and healthcare resource usage

The lawful basis that would be used to process your personal data will be performance of a task in the public interest. The lawful basis used to process special category personal data will be for scientific and historical research or statistical purposes.

Your personal data will be processed so long as it is required for the research project. We will anonymise all personal data you provide, and will endeavour to minimise the processing of personal data wherever possible.

If you are concerned about how your personal data is being processed, or if you would like to contact us about your rights, please contact UCL in the first instance at data-protection@ucl.ac.uk.

# 12. Who is organising and funding the research?

The research is led by researchers at University College London (UCL). UCL is sponsoring the research.

Thank you for reading this information sheet and for considering taking part in this research study.

#### Consent

The COVID-19 Wellbeing Study

Perceived coercion and psychological wellbeing during the COVID-19 pandemic

Department:

Psychology & Language Sciences / Science & Technology Studies

Name and Contact Details of the Researcher(s):

Dr Veronica Ranieri T: +447474187218 E: v.ranieri@ucl.ac.uk

Ms Andrea Stoltenberg T: +447858923670 E: andrea.stoltenberg.19@ucl.ac.uk

Prof Sarah Edwards E: sarah.edwards@ucl.ac.uk Prof Sunjeev Kamboj E: sunjeev.kamboj@ucl.ac.uk

Name and Contact Details of the UCL Data Protection Officer: Alexandra Potts data-protection@ucl.ac.uk

This study has been approved by the UCL Research Ethics Committee as application 7335/004

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Please complete this form after you have read the Information Sheet about the research.
Thank you for considering taking part in this research. If you have any questions arising from the Information Sheet or explanation already given to you, please ask the researcher before you decide whether to join in.
I confirm that I understand that by selecting each box below I am consenting to this element of the study. I understand that by not giving consent for any one element that I may be deemed ineligible for the study.
1 *I confirm that I have read and understood the Information Sheet for the above study. I have had an opportunity to consider the information and what will be expected of me. I have also had the opportunity to ask questions which have been answered to my satisfaction.
○ Yes (1)
2 *I consent to participate voluntarily in the study. Data from incomplete surveys will not be kept.
I understand that my personal information (such as age, gender, geographical region, emotional and physical wellbeing scores and healthcare resource usage data) will be used for the purposes explained to me. I understand that according to data protection legislation, 'public task' will be the lawful basis for processing, and 'research purposes' will be the lawful basis for processing special category data.
○ Yes (1)
3 *I understand that I will be unable to withdraw my data after I complete the anonymous

survey. Should I wish to take part in a repeat of part of the survey (looking at perceived coercion, psychological wellbeing and coping only), and/or further online focus group or interview, I will provide an email address of my choosing for the researcher to contact me on.

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This email address will be stored separately from my survey data and will not be used to identify me.
○ Yes (1)
4 *I understand that my data gathered in this study will be stored anonymously and securely. I understand that the information I have submitted will be published as peer-reviewed publications and I can access a copy of these online or on www.thecovid19wellbeingstudy.org. It will not be possible to identify me in any publications.   Yes (1)
5 *I understand that my information may be subject to review by responsible individuals from University College London for monitoring and audit purposes.
I understand the potential risks of participating and the support that will be available to me should I become distressed during the course of the research.
I understand that no promise or guarantee of benefits have been made to encourage me to participate.
I understand that I will not benefit financially from this study or from any possible outcome it may result in in the future.
I am aware of who I should contact if I wish to lodge a complaint.
○ Yes (1)
End of Block: Welcome to the COVID-19 Wellbeing Study!
Start of Block: Demographic & Background Questions
1 What country do you reside in?

5 What is your ethnicity?

3 What is your age?		
(Please specify in years)		
4 Which gender do you identify with?		
(Please select option that applies)		
○ Female (1)		
○ Male (2)		
O Non-binary (3)		
O Agender (4)		
O Prefer not to say (5)		
Other (6)	 	-

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(Please select option that applies)						
O Asian/Asian British (1)						
O Black/African/Caribbean/Black British (2)						
○ Mixed/multiple ethnic groups (3)						
O White (4)						
O Prefer not to say (5)						
Other ethnic group (6)						
6 What is your nationality?						
(If you have dual nationality, please pick the option that you most closely identify with)						
(If you have dual nationality, please pick the option that you most closely identify with)						
(If you have dual nationality, please pick the option that you most closely identify with)  ▼ Stateless (1) Prefer not to say (198)						
▼ Stateless (1) Prefer not to say (198)						
▼ Stateless (1) Prefer not to say (198)  7 What is your marital status?						
▼ Stateless (1) Prefer not to say (198)  7 What is your marital status?  (Please select option that applies)						
▼ Stateless (1) Prefer not to say (198)  7 What is your marital status?  (Please select option that applies)  ○ Single (1)						
▼ Stateless (1) Prefer not to say (198)  7 What is your marital status?  (Please select option that applies)  ○ Single (1)  ○ Married/in a relationship (2)						

9 What is your current employment status?

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(Please select option(s) that applies/apply)								
Employed full-time (more than 35 hours a week) (1)								
Employed part-time (less than 35 hours a week) (2)								
Redeployed (3)								
Self-employed (4)								
Furloughed (on payroll but not working at same capacity as pre-covid) (5)								
Unemployed (currently looking for work) (6)								
Unemployed (not currently looking for work) (7)								
Student (8)								
Studying and employed (9)								
Studying and self-employed (10)								
Retired (11)								
Unable to work (ie. due to COVID-19, other illnesses or other factors) (12)								
On maternity leave (13)								
On leave (other than maternity leave) (14)								
Skip To: 12 If What is your current employment status? (Please select option(s) that applies/apply) = Furloughed (on payroll but not working at same capacity as pre-covid)  Skip To: 12 If What is your current employment status? (Please select option(s) that applies/apply) =								
Unemployed (currently looking for work)  Skip To: 12 If What is your current employment status? (Please select option(s) that applies/apply) = Unemployed (not currently looking for work)								

Skip To: 12 If What is your current employment status? (Please select option(s) that applies/apply) = Student
Skip To: 12 If What is your current employment status? (Please select option(s) that applies/apply) = Studying and self-employed
Skip To: 12 If What is your current employment status? (Please select option(s) that applies/apply) = Retired
Skip To: 12 If What is your current employment status? (Please select option(s) that applies/apply) = Unable to work (ie. due to COVID-19, other illnesses or other factors)
Skip To: 12 If What is your current employment status? (Please select option(s) that applies/apply) = Self-employed
11 Are you generally able to follow government recommendations at your workplace to prevent he spread of COVID-19?
Please select option that applies)
○ Yes, very (1)
O Yes, a little (2)
O Not at all (3)
O Not applicable (4)
12 Have you experienced a loss of income since the COVID-19 pandemic?
Please select option that applies)
○ Yes, a significant loss (1)
○ Yes, some loss (2)
O No loss (3)
O No, a gain (4)
O Prefer not to say (5)

13 Are you a key worker during the COVID-19 pandemic in one of the following areas?					
(Please select option that applies)					
O Health and social care (1)					
O Education and childcare (2)					
O Public service (3)					
○ Transport (4)					
O Food and other necessary goods (5)					
O Public safety and national security (6)					
O Local and national government (7)					
Utilities, communications and financial services (8)					
O Not a key worker (9)					
End of Block: Demographic & Background Questions					
Start of Block: Employment - Healthcare workers only					
Display This Question:					

If Are you a key worker during the COVID-19 pandemic in one of the following areas? (Please select o... = Health and social care

14 If a healthcare professional, do you work as a:
O Doctor (1)
O Midwife (2)
O Nurse (3)
O Paramedic (4)
O Pharmacist (5)
Allied health professional (6)
Other (Please specify) (7)
Display This Question:  If Are you a key worker during the COVID-19 pandemic in one of the following areas? (Please select o = Health and social care
15 How many years of work experience do you have as a healthcare worker?
1-5 years (1)
O 6-10 years (2)
O 11-15 years (3)
16+ years (4)
Display This Question:
If Are you a key worker during the COVID-19 pandemic in one of the following areas? (Please select

o... = Health and social care

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16 Which of these types of healthcare facility do you currently work in:
Accident and Emergency department (1)
Intensive Care Unit (ICU) (2)
Other hospital department (3)
Outpatient department (4)
Pharmacy (5)
Other (please specify) (6)
Display This Overtices
Display This Question:  If Are you a key worker during the COVID-19 pandemic in one of the following areas? (Please select o = Health and social care
17 Have you been redeployed during the COVID-19 pandemic?
○ Yes (1)
O No (2)
Display This Question:  If Are you a key worker during the COVID-19 pandemic in one of the following areas? (Please select o = Health and social care
Display This Question:  If Are you a key worker during the COVID-19 pandemic in one of the following areas? (Please select
Display This Question:  If Are you a key worker during the COVID-19 pandemic in one of the following areas? (Please select o = Health and social care  18 Have you had direct contact with confirmed or suspected COVID-19 patients during the
Display This Question:  If Are you a key worker during the COVID-19 pandemic in one of the following areas? (Please select o = Health and social care  18 Have you had direct contact with confirmed or suspected COVID-19 patients during the pandemic?

Skip T	Го: 20 I	f Have	you hao	l direct d	contact w	th confirm	ned or sus	spected C	;OVID-19	patients d	during the
oande	emic? =	: Yes, ı	many tim	nes							

Skip To: 20 If Have you had direct contact with confirmed or suspected COVID-19 patients during the pandemic? = Yes, a few times

# Display This Question:

o = Health and social care
19 Have you worked in (a) ward(s) or location(s) where confirmed or suspected COVID-19 patients are cared for?
○ Yes, many times (1)
○ Yes, a few times (2)
O No, never (3)
District Oversion
Display This Question:  If Are you a key worker during the COVID-19 pandemic in one of the following areas? (Please select o = Health and social care
20 Have you moved to a different accommodation in response to COVID-19 (e.g. to reduce time spent travelling and/or to protect your family from indirect exposure)
○ Yes (1)
O No (2)
Display This Question:

If Are you a key worker during the COVID-19 pandemic in one of the following areas? (Please select o... = Health and social care

21 Do you normally live:

(Please select option(s) that apply/applies)
Alone (1)
With partner/spouse (2)
With children (3)
With parents (4)
With other members of family (5)
With friends (6)
With housemates (7)
End of Block: Employment - Healthcare workers only
Start of Block: Household
Start of Block: Household  22 Are/were you in lockdown?
22 Are/were you in lockdown?
22 Are/were you in lockdown? (Please select option that applies)
22 Are/were you in lockdown?  (Please select option that applies)  Alone (1)
22 Are/were you in lockdown?  (Please select option that applies)  Alone (1)  With partner/spouse (2)
22 Are/were you in lockdown?  (Please select option that applies)  Alone (1)  With partner/spouse (2)  With children (3)
22 Are/were you in lockdown?  (Please select option that applies)  Alone (1)  With partner/spouse (2)  With children (3)  With parents (4)

23 Since the lockdown came into effect, have you experienced a change in how close you feel to the people in your household?
(Please select option that applies)
○ Yes, I feel a lot closer to them (1)
O Yes, I feel somewhat closer to them (2)
O No change (3)
○ Yes, I feel somewhat less close to them (4)
Yes, I feel a lot less close to them (5)
O Not applicable (6)
24 Do you have any caring responsibilities for:
(Please select all that apply)
Young children or adolescents (1)
Spouse/partner (2)
Older adults (3)
No caring responsibilities (4)
Other (5)
End of Block: Household
Start of Block: Health & Wellbeing

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25 Are you currently living with a condition that is considered high risk during the COVID-19 pandemic?

For example, you may be at high risk from coronavirus if you:- have had an organ transplant - are having certain types of cancer treatment - have blood or bone marrow cancer, such as leukaemia - have a severe lung condition, such as cystic fibrosis or severe asthma - have a condition that makes you much more likely to get infections - are taking medicine that weakens your immune system - are pregnant and have a serious heart condition (Please select option that applies)

○ Yes (1)
O No (2)
O Unsure (3)
O Prefer not to say (4)
26 Do you identify as having a disability or long-term condition?
(Please select option that applies)
○ Yes (1)
O No (2)
O Prefer not to say (3)

27 Have you experienced a change in your physical health since the spread of the pandemic, NOT due to symptoms of COVID-19?

(Please select option that applies)
○ Yes, I feel a lot better (1)
Yes, I feel somewhat better (2)
O Not at all (3)
○ Yes, I feel a bit worse (4)
○ Yes, I feel a lot worse (5)
Display This Question:
If Are you a key worker during the COVID-19 pandemic in one of the following areas? (Please select o != Health and social care
Or If
Are you a key worker during the COVID-19 pandemic in one of the following areas? (Please select o = Health and social care
And If
Have you had direct contact with confirmed or suspected COVID-19 patients during the pandemic? = No, never
And Have you worked in (a) ward(s) or location(s) where confirmed or suspected COVID-19 patients are = No, never
28 How many times, on average, did you attend the following services per month pre-COVID- 19?
GP (1)
Other physical health specialist (2)
Mental health worker (3)
Other (4)

Display This Question:
If Are you a key worker during the COVID-19 pandemic in one of the following areas? (Please select o != Health and social care
Or If
Are you a key worker during the COVID-19 pandemic in one of the following areas? (Please select o = Health and social care
And If
Have you worked in (a) ward(s) or location(s) where confirmed or suspected COVID-19 patients are = No, never
And Have you had direct contact with confirmed or suspected COVID-19 patients during the pandemic? = No, never
29 How many times, on average, do you attend the following services per month since the COVID-19 pandemic?
GP (1) Other physical health specialist (2)
Mental health worker (3)
Other (4)
30 Have you experienced a change in your psychological wellbeing since the COVID-19 pandemic?
(Please select option that applies)
○ Yes, I feel a lot better (1)
○ Yes, I feel somewhat better (2)
O Not at all (3)
Yes, I feel a bit worse (4)
Yes, I feel a lot worse (5)
31 Prior to the COVID-19 pandemic, did you ever receive a diagnosis of any of the following

mental health difficulties?

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(Please select all that apply)	
Agoraphobia (1)	
Depression (2)	
Bipolar disorder (3)	
Eating disorder (4)	
Anxiety and/or panic disorder (5)	
Personality disorder (6)	
Obsessive-compulsive disorder (7)	
Post-traumatic stress disorder (8)	
Psychotic spectrum disorder (9)	
Alcohol/substance use disorder (10)	
No formal diagnosis (11)	
Prefer not to say (12)	
Other (13)	

32 Have you experienced a change in your level of loneliness since the start of the lockdown?

(Please select option that applies)
O Yes, I have been feeling a lot less lonely (1)
Yes, I have been feeling somewhat less lonely (2)
O Not at all/no difference (3)
Yes, I have been been feeling a little more lonely (4)
Yes, I have been feeling a lot lonelier (5)
33 Have you experienced a change in how frequently you are in contact with family outside your household since the lockdown?
(Please select option that applies)
O Yes, we have been in contact a lot more (1)
O Yes, we have been in contact somewhat more (2)
O No change (3)
O Yes, we have been in contact somewhat less (4)
Yes, we have been in contact a lot less (5)

34 Have you experienced a change in how frequently you are in contact with friends outside

your household since the lockdown?

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Start of Block: Access to healthcare resources
End of Block: Health & Wellbeing
Yes, I have been exercising a lot less (5)
Yes, I have been exercising a bit less (4)
O No change (3)
Yes, I have been exercising somewhat more (2)
Yes, I have been exercising a lot more (1)
(Please select option that applies)
*Moderate-vigorous exercise is that which causes faster breathing, feeling warmer and raised heart rate.
35 Have you experienced a change in how frequently you engage in moderate or vigorous exercise since the lockdown?
If Are you a key worker during the COVID-19 pandemic in one of the following areas? (Please select o = Health and social care
Display This Question:
Yes, we have been n contact a lot less (5)
Yes, we have been in contact somewhat less (4)
O No change (3)
Yes, we have been in contact somewhat more (2)
Yes, we have been in contact a lot more (1)
(Please select option that applies)

# Display This Question:

If Are you a key worker during the COVID-19 pandemic in one of the following areas? (Please select o... != Health and social care

#### Or If

Are you a key worker during the COVID-19 pandemic in one of the following areas? (Please select o... = Health and social care

#### And If

Have you had direct contact with confirmed or suspected COVID-19 patients during the pandemic? = No, never

And Have you worked in (a) ward(s) or location(s) where confirmed or suspected COVID-19 patients are... = No, never

36 Have you needed medical treatment for an acute or long-term condition (that was not COVID-19) since the start of the COVID-19 pandemic?

(Please select option that applies)

O Yes	(1)
-------	-----

O No (2)

Skip To: 38 If Have you needed medical treatment for an acute or long-term condition (that was not COVID-19) sin... = No

Skip To: 37 If Have you needed medical treatment for an acute or long-term condition (that was not COVID-19) sin... = Yes

# Display This Question:

If Are you a key worker during the COVID-19 pandemic in one of the following areas? (Please select o... != Health and social care

#### Or It

Are you a key worker during the COVID-19 pandemic in one of the following areas? (Please select o... = Health and social care

# And If

Have you had direct contact with confirmed or suspected COVID-19 patients during the pandemic? = No. never

And Have you worked in (a) ward(s) or location(s) where confirmed or suspected COVID-19 patients are... = No, never

37 If yes, have you received this treatment?

(Please select option that applies)
○ Yes (1)
O No (2)
38 Have you needed psychological treatment (talking therapies) since the start of the pandemic?
(Diagon palent option that applies)
(Please select option that applies)
○ Yes (1)
○ No (2)
Skip To: End of Block If Have you needed psychological treatment (talking therapies) since the start of the pandemic? (Ple = No
39 If yes, have you received psychological treatment?
○ Yes (1)
○ No (2)
End of Block: Access to healthcare resources
Start of Block: Experiences of wellbeing during the COVID-19 pandemic
40 Do you believe you have had COVID-19?

(Please select option that applies)
○ Yes (1)
O No (2)
Ounsure (3)
41 Have you been tested for COVID-19?
(Please select option that applies)
○ Yes (1)
O No (2)
Skip To: 43 If Have you been tested for COVID-19? (Please select option that applies) = No
42 If yes, have you received confirmation of having COVID-19 following testing?
○ Yes (1)
○ No (2)
O Not applicable (3)

43 Have you required medical treatment or been hospitalised for symptoms of COVID-19?

(Please select option that applies)
○ Yes (1)
O No (2)
O Not applicable (3)
Display This Question:
If Are you a key worker during the COVID-19 pandemic in one of the following areas? (Please select o != Health and social care
Or If
Are you a key worker during the COVID-19 pandemic in one of the following areas? (Please select o = Health and social care
And If
Have you had direct contact with confirmed or suspected COVID-19 patients during the pandemic? = No, never
And Have you worked in (a) ward(s) or location(s) where confirmed or suspected COVID-19 patients are = No, never
44 Are you worried about becoming infected/reinfected with COVID-19?
(Please select option that applies)
○ Yes, very (1)
O Yes, a little (2)
O Not at all (3)

Display This Question:
If Are you a key worker during the COVID-19 pandemic in one of the following areas? (Please select o != Health and social care
Or If
Are you a key worker during the COVID-19 pandemic in one of the following areas? (Please select o = Health and social care
And If
Have you had direct contact with confirmed or suspected COVID-19 patients during the pandemic? = No, never
And Have you worked in (a) ward(s) or location(s) where confirmed or suspected COVID-19 patients are = No, never
45 Are you worried about becoming severely ill with COVID-19?
(Please select option that applies)
○ Yes, very (1)
○ Yes, a little (2)
O No, not at all (3)
46 Have any of your family members or close friends experienced serious illness associated with COVID-19?
(Please select option that applies)
○ Yes, several (1)
○ Yes, one (2)
O No, none (3)

47 Have you experienced the sudden death of a relative or friend due to COVID-19?

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(Please select option that applies)
○ Yes, due to being ill with COVID-19/suspected COVID-19 (1)
<ul> <li>Yes, due to being unable to get help for another condition during the COVID-19 pandemic (2)</li> </ul>
○ Yes, for another reason (3)
O No (4)
Display This Question:
If Are you a key worker during the COVID-19 pandemic in one of the following areas? (Please select o != Health and social care
Or If
Are you a key worker during the COVID-19 pandemic in one of the following areas? (Please select o = Health and social care
And If
Have you had direct contact with confirmed or suspected COVID-19 patients during the pandemic? = No, never
And Have you worked in (a) ward(s) or location(s) where confirmed or suspected COVID-19 patients are = No, never
48 Since the spread of COVID-19, have you shielded due to medical reasons?
(Please select option that applies)
○ Yes (1)
O No (2)
Skip To: 50 If Since the spread of COVID-19, have you shielded due to medical reasons? (Please select option tha = No

Display This Question:
If Are you a key worker during the COVID-19 pandemic in one of the following areas? (Please selection! = Health and social care
Or If
Are you a key worker during the COVID-19 pandemic in one of the following areas? (Please select o = Health and social care
And If
Have you had direct contact with confirmed or suspected COVID-19 patients during the pandemic? No, never
And Have you worked in (a) ward(s) or location(s) where confirmed or suspected COVID-19 patien are = No, never
49 Are you presently shielding due to medical reasons?
(Please select option that applies)
○ Yes (1)
O No (2)

50 Since the spread of COVID-19, have you self-isolated?

(Please select option(s) that applies/apply)
Yes, because I experienced symptoms of COVID-19 (1)
Yes, because someone in my household experienced symptoms of COVID-19 (2)
Yes, because I came into contact with someone who was a confirmed case of COVID-19 (3)
Yes, because I returned from a country or region where there were many cases of COVID-19 (4)
Yes, for another reason (5)
No, I did not self-isolate (6)
Skip To: End of Block If Since the spread of COVID-19, have you self-isolated? (Please select option(s) that applies/apply) = No, I did not self-isolate
51 If you self-isolated, was this prior to the UK lockdown coming into place?
*UK lockdown came into effect on 23/03/2020
(Please select option that applies)
○ Yes (1)
O No (2)
End of Block: Experiences of wellbeing during the COVID-19 pandemic
Start of Block: Perceptions regarding the COVID-19 response

52 How confident are you:

	0 - Not confident at all (1)	1 (2)	2 (3)	3 (4)	4 (5)	5 - Very confident (6)
That access to essentials (access to food, water, medicines, deliveries) will be maintained during the pandemic and a possible second wave? (1)	0	0	0	0	0	0
In your government's response and ability to manage the spread of COVID-19? (2)	0	0	0	0	0	0
That the health system can meet essential healthcare needs and contain the spread of COVID-19?	0	0	0	0	0	0
In your own knowledge about the COVID-19 virus? (4)	0	0	0	0	0	0
In your own knowledge about the government guidelines? (5)	0	0	0	0	0	0

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53 How concerned are you about the possibility of a second wave?
(Please select option that applies)
0 - Not concerned at all (1)
O 1 (2)
O 2 (3)
O 3 (4)
O 4 (5)
5 - Very concerned (6)
54 Are you following the recommendations form the authorities to prevent the spread of COVID- 19 in your private life?
19 in your private life?
19 in your private life?  (Please select option that applies)
19 in your private life?  (Please select option that applies)  O Very much so (1)
19 in your private life?  (Please select option that applies)  Very much so (1)  Mostly (2)
19 in your private life?  (Please select option that applies)  Very much so (1)  Mostly (2)  Somewhat (3)
19 in your private life?  (Please select option that applies)  Very much so (1)  Mostly (2)  Somewhat (3)  Not much (4)

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# Display This Question:

If Have you had direct contact with confirmed or suspected COVID-19 patients during the pandemic? = Yes, many times

Or Have you had direct contact with confirmed or suspected COVID-19 patients during the pandemic? = Yes, a few times

Or Have you worked in (a) ward(s) or location(s) where confirmed or suspected COVID-19 patients are... = Yes, many times

Or Have you worked in (a) ward(s) or location(s) where confirmed or suspected COVID-19 patients are... = Yes, a few times

### 55

Below are some possible COVID-19 related stressors you may have experienced in relation to your work role since the COVID-19 outbreak.

Please indicate how much stress each of the COVID-related stressors have caused you from 0

(no stress) to 9 (severe stress). If you have not experienced the stressor, please tick Not Applicable (NA).

	0 - No Stress (1)	1 (2)	2 (3)	3 (4)	4 (5)	5 (6)	6 (7)	7 (8)	8 (9)	9 - Severe Stress (10)	NA (11)
Increased workload (1)	0	(	(	(	(	(	(	(	(	0	C
Unfamiliar work responsibilities (2)	0	(	(	(	(	(	(	(	(	$\circ$	C
Not having access to childcare (3)	0	(	(	(	(	(	(	(	(	$\circ$	C
Not being able to take leave (4)	0	(	(	(	(	(	(	(	(	$\circ$	C
Working with a larger number of severely ill patients that I am used to (5)	0	(	(	(	(	(	(	(	(	0	C
Not allowing relatives to visit their ill family member (6)	0	(	(	(	(	(	(	(	(	0	C
Inadequate personal protective equipment (PPE) provided (7)	0	(	(	(	(	(	(	(	(	0	C
Limited opportunities to connect with patients due to the PPE and/or time pressure (8)	0	(	(	(	(	(	(	(	(	0	C
Pain/discomfort related to wearing PPE for prolonged periods (9)	0	(	(	(	(	(	(	(	(	0	C
Not being able to provide adequate care to all patients due to lack of health resources (10)	0	(	(	(	(	(	(	(	(	0	C

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Rapidly changing guidelines and/or lack of clear guidelines (11)	0	(	(	(	(	(	(	(	(	$\circ$	
Lack of training in treating patients with coronavirus symptoms (12)	0	(	(	(	(	(	(	(	(	0	
Lack of testing for COVID-19 (13)	0	(	(	(	(	(	(	(	(	$\circ$	
Fear of getting infected (14)	0	(	(	(	(	(	(	(	(	$\circ$	
Fear of infecting loved ones (15)	0	(	(	(	(	(	(	(	(	$\circ$	
Fear of infecting colleagues / patients (16)	0	(	(	(	(	(	(	(	(	0	
The unpredictability of day to day circumstances at work (17)	0	(	(	(	(	(	(	(	(	0	
The uncertainty of future impact on my workplace/career (18)	0	(	(	(	(	(	(	(	(	0	
Having to isolate myself from others because of my work (19)	0	(	(	(	(	(	(	(	(	0	
Being avoided my others because of my work (20)	0	(	(	(	(	(	(	(	(	$\circ$	

End of Block: COVID-19 Related Stressors for Healthcare Workers

Start of Block: Perceived COVID-19 Related Risk Scale for Healthcare workers

# Display This Question:

If Have you had direct contact with confirmed or suspected COVID-19 patients during the pandemic? = Yes, many times

Or Have you had direct contact with confirmed or suspected COVID-19 patients during the pandemic? = Yes, a few times

Or Have you worked in (a) ward(s) or location(s) where confirmed or suspected COVID-19 patients are... = Yes, many times

Or Have you worked in (a) ward(s) or location(s) where confirmed or suspected COVID-19 patients are... = Yes, a few times

56 These statements look at your perceptions of risk in relation to working on the frontline during the COVID-19 pandemic. Please indicate to what extent you agree or disagree with the following statements.

	Stro ngly disa gre e (1)	Disagree (2)	Slightly disagree (3)	Neither agree nor disagree (4)	Slightly agree (5)	Agree (6)	Strongly agree (7)	NA (8)
I believe that my job is putting me at great risk (1)		0	0	0	0	0	0	0
I am afraid of falling ill with COVID-19 as a result of my job (2)		0	0	0	0	0	0	0
I feel I have little control over whether I will get infected or not at work (3)		0	0	0	0	0	0	0
I think I would get seriously ill if I were to get COVID-19 (4)		0	0	0	0	$\circ$	0	0
I believe that I will not receive adequate care from my hospital if I were to fall ill with COVID-19 (5)		0	0	0	0	0	0	0
I am afraid of getting infected during my commute to work (6)		0	0	0	0	0	0	0

End of Block: Perceived COVID-19 Related Risk Scale for Healthcare workers

Start of Block: Perceived Coercion Scale for Healthcare Workers (PSC-HCW)

### Display This Question:

If Have you had direct contact with confirmed or suspected COVID-19 patients during the pandemic? = Yes, many times

Or Have you had direct contact with confirmed or suspected COVID-19 patients during the pandemic? = Yes, a few times

Or Have you worked in (a) ward(s) or location(s) where confirmed or suspected COVID-19 patients are... = Yes, many times

Or Have you worked in (a) ward(s) or location(s) where confirmed or suspected COVID-19 patients are... = Yes, a few times

57 These statements look at your perceptions regarding having to work with confirmed/suspected COVID-19 patients, including working in locations where confirmed/suspected COVID-19 patients are cared for.

Please indicate how much you agree or disagree with the following statements. Please try to answer each question individually, no matter how similar it may sound to another.

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	Stro ngly disa gree (1)	Disagree (2)	Somewhat disagree (3)	Neither agree nor disagree (4)	Somewhat agree (5)	Agree (6)	Strongly agree (7)
I had more influence than other health professionals on deciding whether I worked with patients with COVID- 19/suspected COVID-19 (1)	С	0	0	0	0	0	0
Superiors expected me to work with patients with COVID- 19/suspected COVID-19 in spite of the risk (2)	С	0	0	0	0	0	0
I chose to work with patients with COVID- 19/suspected COVID-19 (3)	С	0	0	0	0	0	0
I worried about not living up to my profession if I refused to work with patients with COVID- 19/suspected COVID-19 (4)	С	0	0	0		0	0
Somebody pressured me to work with patients with COVID- 19/suspected COVID-19 (5)	С	0	0	0	0	0	0
If I wished to, I could have refused to work with patients with COVID- 19/suspected COVID-19 (6)	С	0	0	0	0	0	0

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potential burden on my colleagues if I refused to work with patients with COVID- 19/suspected COVID-19 (7)	С	0	0	0	0	0	0
I had a lot of control over whether I worked with patients with COVID- 19/suspected COVID-19 (8)	С	0	0	0	0	0	0
My peers expected me to work with patients with COVID- 19/suspected COVID-19 in spite of the risk (9)	С	0	0	0	0	0	0
Somebody forced me to work with patients with COVID- 19/suspected COVID-19 (10)	С	0	0	0	0	0	0
I worried about the potential personal consequences of refusing to work with patients with COVID-19/suspected COVID-19 (11)	С	0	0	0	0	0	0
I did not feel professionally obliged to work with patients with COVID- 19/suspected COVID-19 (12)	С	0	0	0	0	0	0

I was willing to work with patients with COVID- 19/suspected COVID-19 (13)	С	0	0	0	0	$\circ$	0
The public expected me to work with patients with COVID-19/suspected COVID-19 in spite of the risk (14)	С	0	0	0	0	0	0
I worried about what others would think of me if I refused to work with patients with COVID- 19/suspected COVID-19 (15)	С	0	0	0	0	0	0
My needs were considered with regards to having to work with patients with COVID- 19/suspected COVID-19 (16)	С	0	0	0	0	0	0

# End of Block: Perceived Coercion Scale for Healthcare Workers (PSC-HCW)

# Start of Block: Professional Quality of Life Scale (ProQOL)

Display This Question:

If Have you had direct contact with confirmed or suspected COVID-19 patients during the pandemic? = Yes, many times

Or Have you had direct contact with confirmed or suspected COVID-19 patients during the pandemic? = Yes, a few times

Or Have you worked in (a) ward(s) or location(s) where confirmed or suspected COVID-19 patients are... = Yes, many times

Or Have you worked in (a) ward(s) or location(s) where confirmed or suspected COVID-19 patients are... = Yes, a few times

58 When you help people, you have direct contact with their lives. As you may have found, your compassion for those you help can affect you in positive and negative ways. Below are some questions about your experiences, both positive and negative, as a healthcare worker. Consider

each of the following questions about you and your current work situation. Select the number that honestly reflects how frequently you experienced these things in the last 30 days.

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	Never (1)	Rarely (2)	Sometimes (3)	Often (4)	Very often (5)
I am happy (1)	0	$\circ$	$\circ$	$\circ$	$\circ$
I am preoccupied with more than one person I care for (2)	0	0	0	0	0
I get satisfaction from being able to help people (3)	0	0	0	0	0
I feel connected to others (4)	0	$\circ$	$\circ$	$\circ$	$\circ$
I jump or am startled by unexpected sounds (5)	0	0	0	0	0
I feel invigorated after working with those I help (6)	0	0	0	0	0
I find it difficult to separate my personal life from my life as a healthcare worker (7)	0	0	0	0	0
I am not as productive at work because I am losing sleep over traumatic experiences of a person I helped (8)	0	0	0	0	0
I think that I might have been affected by the traumatic stress of those I help (9)	0	0	0	0	0

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0	0	0	0	0
0	0	0	0	0
0	0	0	0	0
0	0	0	0	0
0	0	0	0	0
0	0	0	0	$\circ$
0	0	0	0	0
0	0	0	0	$\circ$
0	$\circ$	0	0	$\circ$
0	0	0	0	0

I have happy thoughts and feelings about those I help and how I could help them (20)	0	0	0	0	0
I feel overwhelmed because my case workload seems endless (21)	0	0	0	0	0
I believe I can make a difference through my healthcare work (22)	0	0	0	0	0
I avoid certain activities or situations because they remind me of frightening experiences (23)	0	0	0	0	0
I am proud of what I can do to help (24)	0	$\circ$	$\circ$	$\circ$	$\circ$
As a result of my helping, I have intrusive frightening thoughts (25)	0	0	0	0	0
I feel "bogged down" by the system (26)	0	$\circ$	$\circ$	$\circ$	$\circ$
I have thoughts that I am a "success" as a healthcare worker (27)	0	0	0	0	0

I can't recall important parts of my work with trauma victims (28)	0	0	0	0	0
I am a very caring person (29)	0	0	0	0	$\circ$
I am happy that I chose to do this work (30)	$\circ$	$\circ$	$\circ$	0	0

# End of Block: Professional Quality of Life Scale (ProQOL)

# Start of Block: Perceptions of Coercion, Pressures, and Procedural Justice

# Display This Question:

If Are you a key worker during the COVID-19 pandemic in one of the following areas? (Please select o... != Health and social care

#### Or I

Are you a key worker during the COVID-19 pandemic in one of the following areas? (Please select o... = Health and social care

# And If

Have you had direct contact with confirmed or suspected COVID-19 patients during the pandemic? = No. never

And Have you worked in (a) ward(s) or location(s) where confirmed or suspected COVID-19 patients are... = No, never

### 59

Perceived Coercion

These statements look at your views regarding being at home during the lockdown.

Please try to answer each question individually, no matter how similar it may sound to another.

	True (1)	False (2)
I had more influence than anyone else on whether I stayed at home during the lockdown (1)	0	0
I had a lot of control over whether I stayed at home or went out during the lockdown (2)	0	
I chose to stay at home during the lockdown (3)	0	0
I felt free to do what I wanted about staying home or going out during the lockdown (4)	0	$\circ$
Although it was required by law, it was my choice to say at home during the lockdown (5)	0	

# Display This Question:

If Are you a key worker during the COVID-19 pandemic in one of the following areas? (Please select o... != Health and social care

#### Or It

Are you a key worker during the COVID-19 pandemic in one of the following areas? (Please select o... = Health and social care

### And If

Have you had direct contact with confirmed or suspected COVID-19 patients during the pandemic? = No, never

And Have you worked in (a) ward(s) or location(s) where confirmed or suspected COVID-19 patients are... = No, never

# 60 Perceived pressures

	Yes (1)	No (2)
Did anyone (ie friends, family, partner, government or others) try to talk you into staying at home during the lockdown? (1)	0	0
Did anyone (ie friends, family, partner, government or others) offer or promise you anything to stay at home during the lockdown? (2)	0	0
Did anyone (ie friends, family, partner, government or others) threaten you into staying at home during the lockdown? (3)	0	0
Did anyone (ie friends, family, partner, government or others) force you to stay at home during the lockdown?  (4)	0	0

# Display This Question:

If Perceived pressures = Did anyone (ie friends, family, partner, government or others) try to talk you into staying at home during the lockdown? [Yes]

Or Perceived pressures = Did anyone (ie friends, family, partner, government or others) offer or promise you anything to stay at home during the lockdown? [Yes]

Or Perceived pressures = Did anyone (ie friends, family, partner, government or others) threaten you into staying at home during the lockdown? [Yes]

Or Perceived pressures = Did anyone (ie friends, family, partner, government or others) force you to stay at home during the lockdown? [ Yes ]

# 61 Procedural Justice

	Very much (1)	Mostly /some (2)	A little (3)	Not at all (4)
To what extent did those (ie. friends, family, partner, government or other) who told you to stay home during the lockdown act out of concern? (1)	0	0	0	0
How much respect did those (ie. friends, family, partner, government or other) who told you to stay home during the lockdown treat you with? (2)	0	0	0	0
How seriously did those (ie. friends, family, partner, government or other) who told you to stay home during the lockdown consider what you had to say?		0		0
How fairly were you treated in being asked to stay home during the lockdown? (4)	0	0	0	0

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Display This Question:
If Are you a key worker during the COVID-19 pandemic in one of the following areas? (Please selec o != Health and social care
Or If
Are you a key worker during the COVID-19 pandemic in one of the following areas? (Please select o = Health and social care
And If
Have you had direct contact with confirmed or suspected COVID-19 patients during the pandemic? No, never
Or Have you worked in (a) ward(s) or location(s) where confirmed or suspected COVID-19 patients are = No, never
62 Did you experience any pressure from others (ie. friends family, government or others) to leave the house or return to pre-lockdown activities once lockdown ended?
(Please select option that applies)
O Very much (1)
O Some (2)
A little (3)

End of Block: Perceptions of Coercion, Pressures, and Procedural Justice

Start of Block: The Depression, Anxiety and Stress Scale

O Not applicable to me as I am under lockdown (5)

O Not at all (4)

63 Please read each statement and tick the option which indicates how much the statement applied to you over the past week. There are no right or wrong answers.

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	Did not apply to me (1)	Applied to me to some degree, or some of the time (2)	Applied to me to a considerable degree (3)	Applied to me very much or most of the time (4)
I was aware of dryness in my mouth (1)	0	0	0	0
I found it hard to wind down (2)	0	$\circ$	$\circ$	$\circ$
I couldn't seem to experience any positive feeling at all (3)	0	0	0	0
I experienced breathing difficulty (4)	0	0	0	0
I found it difficult to work up the initiative to do things (5)	0	$\circ$	0	0
I tended to overreact to situations (6)	0	0	0	0
I experienced trembling (eg. in the hands) (7)	0	0	0	0
I felt that I was using a lot of nervous energy (8)	0	0	0	0
I was worried about situations in which I might panic and make a fool of myself (9)	0	0	0	0
I felt that I had nothing to look forward to (10)	0	0	0	0
I found myself getting agitated (11)	0	$\circ$	$\circ$	$\circ$

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$\bigcirc$	$\bigcirc$	$\bigcirc$	$\circ$
0	0	0	0
0	0	0	0
$\circ$	$\circ$	$\circ$	$\circ$
0	0	0	0
0	0	0	0
0	0	0	0
0	0	0	0
0	0	0	0
0	0	0	0

End of Block: The Depression, Anxiety and Stress Scale

Start of Block: Brief COPE

64 This questionnaire asks you to indicate what you generally do and feel, when you experience stressful event. Obviously, different events bring out somewhat different responses, but think about what you usually do when you are under a lot of stress. Please try to respond to each

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item separately. There are no "right" or "wrong" answers, so you choose the most accurate answer for YOU, not what you think "most people" would say or do.

	I haven't been doing this at all (1)	I've been doing this a little bit (2)	I've been doing this a medium amount (3)	I've been doing this a lot (4)
I've been turning to work or other activities to take my mind off things. (1)	0	0	0	0
l've been concentrating my efforts on doing something about the situation I'm in. (2)	0	0	0	0
I've been saying to myself "this isn't real". (3)	0	0	0	0
I've been using alcohol or other drugs to make myself feel better. (4)	0	0	0	0
I've been getting emotional support from others. (5)	0	0	0	0
I've been giving up trying to deal with it. (6)	0	0	0	0
I've been taking action to try to make the situation better.	0	0	0	0
I've been refusing to believe that it has happened.	0	0	0	0

l've been saying things to let my unpleasant feelings escape. (9)	0	0	0	0
l've been getting help and advice from other people. (10)	0	0	0	0
I've been using alcohol or other drugs to help me get through it. (11)	0	0	0	0
I've been trying to see it in a different light, to make it seem more positive. (12)	0	0	0	0
I've been criticizing myself. (13)	0	$\circ$	0	0
I've been trying to come up with a strategy about what to do. (14)	0	0	$\circ$	0
l've been getting comfort and understanding from someone. (15)	0	0	0	0
I've been giving up the attempt to cope. (16)	0	0	0	0
I've been looking for something good in what is happening. (17)	0	0	$\circ$	0
I've been making jokes about it. (18)	0	0	$\circ$	$\circ$

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I've been doing something to think about it less, such as going to movies, watching TV, reading, daydreaming, sleeping, or shopping. (19)	0		0	0
I've been accepting the reality of the fact that it has happened. (20)	0	0	0	0
l've been expressing my negative feelings. (21)	0	0	0	0
I've been trying to find comfort in my religion or spiritual beliefs. (22)	0	0	0	0
I've been trying to get advice or help from other people about what to do. (23)	0	0	0	0
I've been learning to live with it. (24)	0	$\circ$	0	$\circ$
l've been thinking hard about what steps to take. (25)	0	0	0	0
I've been blaming myself for things that happened. (26)	0	0	0	0
l've been praying or meditating. (27)	0	$\circ$	$\circ$	0

I've been making fun of the situation. (28)	0	0	0	0
End of Block: Brie	f COPE			

Start of Block: Post-Traumatic Growth Inventory - Short Form

65 Please indicate for each of the statements below the degree to which this change occured in your life as a result of the pandemic, using the following scale:

	0 - I did not experience this change as a result of the pandemic. (1)	1 (2)	2 (3)	3 (4)	4 (5)	5 - I experienced this change to a very great degree as a result of the pandemic. (6)
I changed my priorities about what is important in life. (1)	0	0	0	0	0	0
I have a greater appreciation for the value of my own life. (2)	0	0	0	0	0	0
I am able to do better things with my life. (3)	0	0	0	0	0	0
I have a better understanding of spiritual matters. (4)	0	0	0	0	0	0
I have a greater sense of closeness with others. (5)	0	0	0	0	0	0
I established a new path for my life. (6)	0	$\circ$	$\circ$	$\circ$	$\circ$	$\circ$
I know better that I can handle difficulties. (7)	0	0	0	0	0	0
I have a stronger religious faith. (8)	0	0	0	0	0	0

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I discovered that I'm stronger than I thought I was. (9)	0	0	0	0	0	0					
I learned a great deal about how wonderful people are. (10)	0	0	0	0	0	0					
End of Block: Post-Traumatic Growth Inventory - Short Form											
Start of Block: I	End of survey										
End  you for taking the time to participate in the COVID-19 Wellbeing Study online survey.											
We are hoping to repeat part of this survey in up to 3 months' time.											
We would also like to further speak to you about your perceptions of coercion and psychological wellbeing, by means of an online focus group or individual interview.											
66 If you are hap speaking to us a below:			-		•						
End of Block: End of survey											

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