(MS536) COVID-19 SURVEY [WAVE 1]

intro

Thank you for participating in this survey. It is the first in a series of surveys that you will be asked to complete, focused on the current coronavirus (COVID-19) pandemic. Each of these surveys will be conducted on the ALP. Every two or three weeks for the next few months, we are asking you to complete short surveys about your thoughts and experiences regarding the coronavirus to help us better understand your thinking about how it changes over time. Your responses are very important to us, as is your willingness to continue to regularly complete these surveys. We are only interested in your perspective – there are no right or wrong answers to any of these questions. If you are uncertain about the answer to a question, please give your best estimate.

The first several questions ask you to list things you know or think are true about the coronavirus (COVID-19).

Please click "Next" to continue.

SymptomFL

[Open Text • Not required]

What do you think are the main symptoms of the coronavirus (COVID-19)? Please list up to three symptoms.

(1)	 	 	_
(2)			_
(3)			

LocationFL

[Open Text • Not required]

In what locations do you think someone is most likely to catch the coronavirus (COVID-19)? Please list up to three locations.

- (1) ______ (2) ______ (3)
- PreventFL

[Open Text • Not required]

What can people do to help prevent getting or transmitting the coronavirus (COVID-19)? Please list up to three strategies.

- (1) _____ (2) _____
- (3)

TreatmentFL

[Open Text • Not required]

What treatments do you think are effective against the coronavirus (COVID-19)? Please list up to three treatments.

- (1) _____
- (2) _____(3) _____

DiseaseFL

[Open Text • Not required]

When you think of the coronavirus (COVID-19), what other diseases come to mind? Please list up to three other diseases.

(1)	
(2)	

(2) _____(3)

PercentChanceIntro

Several of the following questions will ask you about the percent chance of something happening. The percent chance must be a number from 0 to 100. Here are some descriptions corresponding to different chances of something happening:

Absolutely will not happen= 0% chance

A very small chance= Less than 1% chance

A small chance = 2 to 15% chance

A reasonable chance= 15 to 40% chance

A pretty even chance= 40 to 60% chance

A big chance = 60 to 85% chance

A very big chance= 85 to 98% chance

Almost certain= More than 99% chance

Absolutely certain= 100% chance

You can also think of percent chance as the number of times something happens out of 100.

CoronaCatch - DescriptiveVaccNorm

[*Numeric* • *Not required* • *Lower limit=0* • *Lower limit type=GreaterOrEqual* • *Upper limit=100* • *Upper limit type=SmallerOrEqual* • *Total Digits=4* • *Decimal places=1*]

What do you think is the percent chance that you will get infected with coronavirus in the next month?

N	f('CoronaCatch').between(0,1)			
CONDITIC	true Question CoronaCatchExtra()	false		

CoronaCatchExtra

[Not required]

We would like to get extra information about the last question. What do you think is the percent chance that you will get infected with coronavirus (COVID-19) in the next month?

O 0% (1)

O More than 0% and less than or equal to .001% (1 in 100,000) (2)

O More than .001% (1 in 100,000) and less than or equal to .01% (1 in 10,000) (3)

O More than .01% (1 in 10,000) and less than or equal to .1% (1 in 1,000) (4)

O More than .1% (1 in 1,000) and less than or equal to 1% (1 in 100) (5)

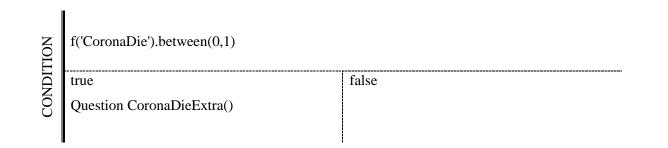
O 1% (6)

 $\begin{array}{c} \begin{array}{c} \begin{array}{c} \\ \\ \\ \end{array} \end{array} \quad Condition f('CoronaCatch').between(0,1) \end{array}$

CoronaDie -

[*Numeric* • *Not required* • *Lower limit=0* • *Lower limit type=GreaterOrEqual* • *Upper limit=100* • *Upper limit type=SmallerOrEqual* • *Total Digits=4* • *Decimal places=1*]

If you do get infected with coronavirus (COVID-19), what do you think is the percent chance that you will die from it?



CoronaDieExtra

[Not required]

We would like to get extra information about the last question. If you do get infected with coronavirus (COVID-19), what do you think is the percent chance that you will die from it?

O 0% (1)

- **O** More than 0% and less than or equal to .001% (1 in 100,000) (2)
- **O** More than .001% (1 in 100,000) and less than or equal to .01% (1 in 10,000) (3)
- More than .01% (1 in 10,000) and less than or equal to .1% (1 in 1,000) (4)
- **O** More than .1% (1 in 1,000) and less than or equal to 1% (1 in 100) (5)

O 1% (6)

END

Condition f('CoronaDie').between(0,1)
Condition I (CoronaDie). between (0, I

CoronaVacc -

[*Numeric* • *Not required* • *Lower limit=0* • *Lower limit type=GreaterOrEqual* • *Upper limit=100* • *Upper limit type=SmallerOrEqual* • *Total Digits=4* • *Decimal places=1*]

If a vaccine were now available, shown to be safe as other vaccines, and recommended for all people, what is the percent chance you would get vaccinated?

CoronaFluWorry

[Not required]

How worried are you that you might get sick from the coronavirus (COVID-19)?

- **O** Very worried (1)
- O Somewhat worried (2)
- O Not very worried (4)
- O Not at all worried (5)

CVFinancialWorry

[Not required]

How worried are you that your household finances will be impacted negatively by the coronavirus (COVID-19) and its effects?

- **O** Very worried (1)
- O Somewhat worried (2)
- O Not very worried (4)
- O Not at all worried (5)

CVProtectiveBehavior

Which, if any, of the following have you done or are you doing to help prevent getting or transmitting the coronavirus (COVID-19)?

select all that apply

- □ Wear a face mask (1)
- □ Wash hands frequently and for at least 20 seconds (2)
- Use hand sanitizer (3)
- Avoid coughing into your hands (4)
- \Box Stay at home (5)
- Avoid other people, especially crowds (6)
- Cancel travel plans (7)
- □ Stay home if not feeling well (8)
- Avoid contact with high-risk groups (for example, those over 60 years old) (9)
- □ Monitor yourself closely for symptoms (for example, taking temperature regularly) (10)
- Taking vitamins or other supplements (11)
- □ Other (please specify): (12)_____[*Other*]
- None of the above (13) [*Exclusive*]

CVPolicies

What policies do you think would be most effective in reducing the spread of coronavirus (COVID-19)?

select all that apply

- The U.S. government advising self-quarantine for people who recently arrived in the U.S. from China (a)
- The U.S. government advising self-quarantine for people who recently arrived in the U.S. from other countries affected
- by coronavirus (COVID-19) (b)
- Banning travel to the U.S. from China (c)
- □ Banning travel to the U.S. from other countries affected by coronavirus (COVID-19) (d)
- Closing schools in the U.S. (e)
- Closing workplaces in the U.S. (f)
- Closing bars, restaurants, and other non-essential businesses (g)
- Cancelling public events in the U.S. (h)

□ Increased public education about how to stop coronavirus (COVID-19) spreading (i)

• None of the above (1) [*Exclusive*]

HadCV

[Not required]

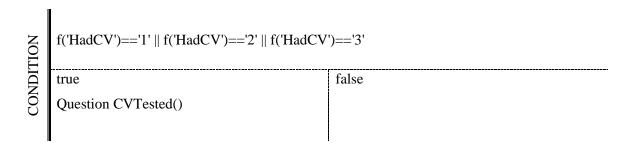
Since January 2020, have you had an illness that you think was or could be the coronavirus (COVID-19)?

O Yes, and I've had it confirmed by a healthcare provider (either with or without testing) (1)

O I got sick, but I don't know if it was the coronavirus (COVID-19) (2)

O I thought I had the coronavirus (COVID-19), but later found out it wasn't the coronavirus (3)

- **O** No (4)
- O I don't know (5)



CVTested

[Not required]

Were you tested for the coronavirus (COVID-19), which involves being swabbed in your nose or throat by a health professional?

- **O** Yes (1)
- **O** No (2)
- **O** I don't know or don't remember (3)

KnowCV

[Not required]

Do you personally know anyone that you think or know has or has had the coronavirus (COVID-19)?

O Yes, I personally know someone I am certain has had the coronavirus (COVID-19) (1)

- **O** Yes, I personally know someone I think has had the coronavirus (COVID-19) (2)
- O No, I don't personally know anyone that I think or am certain has had the coronavirus (COVID-19) (4)

CVSymptoms

Since January 1, 2020, have you had any of the following symptoms? *select all that apply*

Fever (1)
 Cough (2)

 \Box Sore throat (3)

Runny nose (4)

 $\Box \text{ Shortness of breath (5)}$

O I've had none of the above symptoms since January 2020 (6) [Exclusive]

GAD1

[Not required]

We'd like to know over the PAST TWO WEEKS how often have you been bothered by the following problems:

Feeling nervous, anxious, or on edge?

- O Not at all (0)
- O Several days (1)
- **O** More than half the days (2)
- O Nearly everyday (3)
- O Don't know (888)

GAD2

[Not required]

We'd like to know over the PAST TWO WEEKS how often have you been bothered by the following problems:

Not being able to stop or control worrying?

- **O** Not at all (0)
- O Several days (1)
- O More than half the days (2)
- O Nearly everyday (3)
- O Don't know (888)

PHQ1

[Not required]

We'd like to know over the PAST TWO WEEKS how often have you been bothered by the following problems:

Had little interest or pleasure in doing things?

- **O** Not at all (0)
- O Several days (1)
- O More than half the days (2)
- O Nearly everyday (3)
- **O** Don't know (888)

PHQ2

[Not required]

We'd like to know over the PAST TWO WEEKS how often have you been bothered by the following problems:

Feeling down, depressed, or hopeless?

Not at all (0)
Several days (1)
More than half the days (2)
Nearly everyday (3)
Don't know (888)

CS_001 - CS_001

[Not required]

Could you tell us how interesting or uninteresting you found the questions in this interview?

- **O** Very interesting (1)
- O Interesting (2)
- **O** Neither interesting nor uninteresting (3)
- **O** Uninteresting (4)
- O Very uninteresting (5)