

(MS544) COVID-19 EMPLOYMENT EXPERIENCES

qIntro

In this survey, we would like to learn about your life and work experiences during the COVID-19 pandemic. We expect this survey will take 6 minutes to complete. This study is being conducted by a research team at the University of Minnesota. Thank you for your participation!

CONSENT:

- YES, I agree to participate in this study. (1)
- NO, I decline to participate in this study. (2)

CONDITION	f('qIntro')==2'	
	true	false
	Question Copy of end - no nav()	

i138

Thank you. You will be redirected back to the panel portal in 10 seconds. Please click the button below if you do not wish to wait.

Back to the portal

STOP	Screened -
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END	Condition f('qIntro')==2'
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q1

[Not required]

What is your current employment situation?

- 1. Unemployed and looking for work prior to COVID-19 (1)
- 2. Full-time employee (2)
- 3. Part-time employee (3)
- 4. Laid off due to COVID-19 (4)
- 5. Furloughed due to COVID-19 (5)
- 6. Freelancing or self-employed (6)
- 7. Disabled (7)
- 8. Retired (8)
- 9. Homemaker (9)
- 10. Other, please specify: (10)_____ [Other]

CONDITION

f('q1').any('2','3','6')

true

false

Question ()

q2a

[Not required]

How, if at all, have your work hours changed due to COVID-19?

- Stayed the same (1)
- Decreased (2)
- Increased (3)

q2b

[Not required]

How, if at all, have your wages changed due to COVID-19?

By wages, we mean your hourly wage OR your salary amount, as applicable.

- Stayed the same (1)
- Decreased (2)
- Increased (3)

q2c

[Not required]

How, if at all, has your work location changed due to COVID-19?

- Stayed the same - still working on-site (1)
- Stayed the same - still working from home/remotely (2)
- Newly working on-site (3)
- Newly working from home/remotely (4)
- Other (please specify): (5) _____ [Other]

q3

[Not required]

What is your JOB TITLE and describe your work in a sentence or two:

END

Condition f('q1').any('2','3','6')

n31*[Not required]*

Since the start of the COVID-19 pandemic in the United States, how often have you...

	Never (1)	Rarely (2)	Sometimes (3)	Often (4)	Always (5)
...been worried about your financial situation? (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...felt satisfied with your financial situation? (2)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...felt overwhelmed by your financial obligations? (3)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...felt that you did not have enough money? (4)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

n31a*[Not required]*

Now we will ask you about how things have changed for you recently. If things have not changed, say "No different".

Since the start of the COVID-19 pandemic in the United States, to what extent have things gotten worse or better for you?

	Gotten a great deal worse (1)	Gotten a little worse (2)	No different (3)	Gotten a little better (4)	Gotten a lot better (5)
Friends valuing my company (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Being valued by the people around me (2)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Feeling important to my friends (3)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

n32*[Not required]*

	Hardly ever (1)	Some of the time (2)	Often (3)
How often do you feel that you lack companionship? (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
How often do you feel left out? (2)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
How often do you feel isolated from others? (3)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

n33*[Not required]*

How true or false is the following statement for you?

I have had an illness or symptoms that I thought were or could be COVID-19.

- Definitely false (1)
- Mostly false (2)
- Don't know (3)
- Mostly true (4)
- Definitely true (5)

n34

[Not required]

Since the start of the COVID-19 pandemic in the United States, how frequently have you followed the news related to the pandemic?

- Never (1)
- Rarely (2)
- Occasionally (3)
- A moderate amount (4)
- A great deal (5)

n35

[Not required]

How knowledgeable would you rate yourself with regards to COVID-19 (e.g., symptoms, how to prevent getting the virus, and prevalence in your state)?

- Not at all knowledgeable (1)
- Slightly knowledgeable (2)
- Somewhat knowledgeable (3)
- Moderately knowledgeable (4)
- Extremely knowledgeable (5)

q4

[Not required]

Now we're going to ask you some questions about feelings you might have. Some of these questions have to do with how much control you feel you have over your life. Some of these questions might make you feel uncomfortable. Remember that you don't have to answer any question that you don't want to answer.

	Strongly disagree (1)	Disagree (2)	Agree (3)	Strongly agree (4)	Don't Know (5)
I can do just about anything I really set my mind to. (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
There is really no way I can solve some of the problems I have. (2)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Sometimes I feel that I'm being pushed around in life. (3)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I have little control over the things that happen to me. (4)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
What happens to me in the future mostly depends on me. (5)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I often feel helpless in dealing with the problems of life. (6)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
There is little I can do to change many of the important things in my life. (7)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

q5

[Not required]

Over the LAST TWO WEEKS, how often have you been bothered by any of the following problems?

	Not at all (1)	Several days (2)	More than half the days (3)	Nearly every day (4)
Little interest or pleasure in doing things (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Feeling down, depressed, or hopeless (2)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Trouble falling or staying asleep, or sleeping too much (3)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Feeling tired or having little energy (4)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Poor appetite or overeating (5)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Feeling bad about yourself – or that you are a failure or have let yourself or your family down (6)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Trouble concentrating on things, such as reading the newspaper or watching television (7)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Moving or speaking so slowly that other people could have noticed? Or the opposite – being so fidgety or restless that you have been moving around a lot more than usual (8)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

q8

[Not required]

Using a scale of 1 to 10 where 1 means "very dissatisfied" and 10 means "very satisfied", how do you feel about your life as a whole right now?

- 1 (1)
- 2 (2)
- 3 (3)
- 4 (4)
- 5 (5)
- 6 (6)
- 7 (7)
- 8 (8)
- 9 (9)
- 10 (10)

q10a

[Not required]

To what extent has the Coronavirus pandemic impacted your life negatively?

- Not at all (1)
- Slightly (2)
- Somewhat (3)
- Moderately (4)
- To a great extent (5)

q11a

[Not required ♦ Columns=70]

Think about your recent day to day experiences during the coronavirus. How has life changed for you in ways that are undesirable, negative, or bad? Be specific and include as many details as possible.

q10b

[Not required]

To what extent has the Coronavirus pandemic impacted your life positively?

- Not at all (1)
- Slightly (2)
- Somewhat (3)
- Moderately (4)
- To a great extent (5)

q11b

[Not required ♦ Columns=70]

Still thinking about your recent day to day experiences during the pandemic, are there aspects of your experience that feel rewarding, positive, or good? Be specific and include as many details as possible.

q12

[Numeric ♦ Not required ♦ Lower limit=1 ♦ Lower limit type=GreaterOrEqual ♦ Upper limit=10 ♦ Upper limit type=SmallerOrEqual]

Think of this ladder as representing where people stand in the United States. At the top of the ladder are the people who are the best off, those who have the most money, most education, and best jobs. At the bottom are the people who are the worst off, those who have the least money, least education, and worst jobs or no job. The higher you are on this ladder, the closer you are to the people at the very top. Where would you place yourself on this ladder?

CS_001 - CS_001

[Not required]

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

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