

# OPN Lite 4 Coronavirus (COVID-19) question specification

## ***Sponsor page wording***

This survey contains questions relating to the recent COVID-19 pandemic, which many people refer to as Coronavirus. It is referred to throughout this survey as Coronavirus (COVID-19). All the information you provide will be used for statistical purposes only and will not be linked to any other data without your specific permission.

Given the national situation there are a lot of government departments and academics who will be using the information from this survey to help make decisions. The questions are being asked on behalf of the following organisations:

Cabinet Office

Scottish Government

Welsh Government

Department for Education (DfE)

Department for Health and Social Care (DHSC)

HMT

Office for National Statistics (ONS)

Public Health England (PHE)

Public Health Wales (PHW)

The Scientific Advisory Group on Emergencies

The Civil Contingencies Secretariat

UK Sport

***Cov\_1 to 5: Appear after the MCZ questions in the OPN core***

ASK ALL

**COV\_1**

**And how often do you feel lonely?**

Often/always

Some of the time

Occasionally

Hardly ever

Never

Don't Know

Prefer not to say

ASK ALL

**COV\_2**

**To what extent do you agree with the following statement?**

**If I needed help, there are people who would be there for me.**

Strongly agree

Somewhat agree

Neither agree nor disagree

Somewhat disagree

Strongly disagree

Don't know

Prefer not to say

ASK ALL

**COV\_3**

**Is there anyone living with you who is sick, disabled, or over 70 whom you look after or give special help to?**

Yes

No

**If skipped represent question with 'Don't know' 'Prefer not to answer' options**

ASK ALL

**COV\_3a**

**Is there anyone within your household that is pregnant?**

- Yes, me
- Yes, other person
- No
- Don't know
- Prefer not to say

ASK IF HEALILL = 1

**COV\_4**

**Thinking about your health, do you currently have any of the following health conditions, problems or illnesses?**

**Please select all apply**

- Alzheimer's disease or dementia
- Angina or long-term heart problem
- Asthma
- Autism spectrum disorder (ASD) or Asperger's (Asperger syndrome)
- Cancer
- Chronic obstructive pulmonary disease (COPD) or long-term lung problem
- Diabetes
- Epilepsy or other conditions that affect the brain
- High blood pressure
- Kidney or liver disease
- Stroke or cerebral haemorrhage or cerebral thrombosis
- Rheumatoid arthritis
- Other (please specify)

**If skipped represent question with 'Don't know' 'Prefer not to answer' options**

ASK IF COV\_4 = Other

**COV\_4Sp**

**Please specify the other condition(s), problem(s) or illness(s) that you currently have**

STRING[200]

**If skipped represent question with 'Don't know' 'Prefer not to answer' options**

ASK IF COV\_4 = Cancer

COV\_5

**Are you currently having treatment for your cancer?**

Yes, chemotherapy

Yes, radiotherapy

Yes, other

No

Not sure

Prefer not to say

**(No DK)**

ASK ALL

**CigNow**

**Do you smoke cigarettes even if occasionally?**

Please do not include electronic cigarettes or vaping.

Yes

No

**If skipped represent question with 'Don't know' 'Prefer not to answer' options**

ASK IF CigNow=2

**CigEver**

**Have you ever smoked cigarettes regularly?**

Please do not include electronic cigarettes or vaping.

Yes

No

If skipped represent question with 'Don't know' 'Prefer not to answer' options

*The following questions are after the entire OPN core:*

**COV\_IntroD1**

**Thank you for taking part in this survey. As you are probably aware, there have been lots of news stories recently about a virus spreading around the world. The disease is called Covid-19, though many people refer to it as 'Coronavirus'. In the questions that we ask you, we refer to it as Coronavirus (COVID-19).**

ASK ALL

**COV\_D6**

**In the last seven days, have you been officially diagnosed with the Coronavirus (COVID-19) by a medical professional?**

Yes

No

Don't Know

Prefer not to say

ASK IF COV\_C6 = 2

**COV\_D7**

**In the past seven days, have you had Coronavirus (COVID-19) symptoms?**

Yes

(Symptoms include, a high temperature or new continuous cough, or both)

No

Don't Know  
Prefer not to say

ASK ALL

**COV\_D8**

**In the past seven days, has anyone else in your household had Coronavirus (COVID-19) symptoms?**

Yes  
(Symptoms include, a high temperature or new continuous cough, or both)  
No  
Not applicable  
Don't Know  
Prefer not to say

**COV\_IntroD2**

**There is a lot of information around about the Coronavirus (COVID-19) and how it is affecting peoples lives. We would like to know how it is affecting your life and your opinions on this. There is no right or wrong answer.**

ASK ALL

**COV\_D9**

**Due to the Coronavirus (COVID-19) outbreak, have you been given 'key worker' status?**

Yes  
No  
Don't know  
Prefer not to say

ASK ALL

**COV\_D10**

**How worried or unworried are you about the effect that Coronavirus (COVID-19) is having on your life right now?**

- Very worried
- Somewhat worried
- Neither worried nor unworried
- Somewhat unworried
- Not at all worried
- Don't know
- Prefer not to say

ASK IF COV\_D10 = 1 OR 2

**COV\_D11M**

**In which way is Coronavirus (COVID-19) affecting your life?**

Please select all that apply

- My health is being affected
- My work is being affected
- Schools and universities are being affected
- My household finances are being affected
- My well-being is being affected  
[for example, boredom, loneliness, anxiety and stress]
- My relationships are being affected
- My caring responsibilities are being affected
- My access to paid or unpaid care is being affected
- Availability of groceries, medication and essentials are being affected
- Access to groceries, medication and essentials are being affected
- Transport is being affected
- Personal travel plans are being affected  
[for example, holidays and gap year]
- Work travel plans are being affected

Life events are being affected  
[for example, weddings and funerals]  
I am unable to make plans

Other (please specify)

**If skipped represent question with 'Don't know' 'Prefer not to answer' options**

ASK IF COV\_D11M = Other

**COV\_D11MSp**

**Please specify the other ways in which Coronavirus (COVID-19) is affecting your life**

STRING[200]

**If skipped represent question with 'Don't know' 'Prefer not to answer' options**

ASK IF COV\_D11M > 1 option (This is just routed off COV\_D11M not COV\_D11MSp)

**COV\_D12**

**Of the worries you told us about, which one are you most concerned about?**

[feed forward the options from above if more than one selected]

Other

**If skipped represent question with 'Don't know' 'Prefer not to answer' options**

ASK IF COV\_D11M = 2 (WORK)

**COV\_D13M**

**In the past seven days, how has your work been affected?**

Please select all that apply

Increase in hours worked

[for example, over-time]

Decrease in hours worked

[for example, reduced opening times, availability of work]



I have been furloughed

[this is where your employer has kept you on the payroll if they are unable to operate or have no work for you to do because of coronavirus (COVID-19)]

Temporary closure of own business

[include potential closure and actual closure]

Permanent closure of own business

[include potential closure and actual closure]

Redundancy

Asked to take leave

[Include paid and unpaid leave]

Unable to take leave

Working long hours with no breaks or reduced breaks

Finding working from home difficult

I am worried about my health and safety at work

Asked to work from home

I have to work around childcare

I have to work around other caring responsibilities

Other (please specify)

**If skipped represent question with 'Don't know' 'Prefer not to answer' options**

ASK IF COV\_D13M = Other

**COV\_D13MSp**

**Please specify the other ways in which Coronavirus (COVID-19) has affected your work**

STRING[200]

**If skipped represent question with 'Don't know' 'Prefer not to answer' options**

ASK IF COV\_D11M = 4 (HOUSEHOLD FINANCES)

**COV\_D14M**

**In the past seven days, how have your household finances been affected?**

Please select all that apply

Reduced income

Use of my savings to cover living costs

Unable to save as usual

Had to borrow money or use credit

[For example, using credit cards, overdrafts, or taking out loans, including borrowing from friends, family, neighbours or other personal connection]

Delay to sick pay

Delay to State welfare benefits

[for example, Universal Credit]

Had to use food banks

Struggling to pay bills

[for example, food, energy]

Care costs increased

[For example, childcare, social care]

Providing financial support to friends and family

Pension value is being affected by economic instability

Savings value is being affected by economic instability

Other (please specify)

**If skipped represent question with 'Don't know' 'Prefer not to answer' options**

ASK IF COV\_D14M = Other

**COV\_D14MSp**

**Please specify the other ways in which Coronavirus (COVID-19) has affected your household finances**

STRING[200]

**If skipped represent question with 'Don't know' 'Prefer not to answer' options**

ASK IF COV\_D11M = 3 (SCHOOLS AND UNIVERSITIES)

**COV\_D15M**

**In the past seven days, how have schools and universities being affected?**

Please select all that apply

My child is unable to attend pre-school and childcare activities

My child is unable to attend school

My child is unable to attend college or university

I am unable to attend school

I am unable to attend college or university

I am unable to attend sixth form

Uncertainty about exams and qualifications

Quality of education being affected

Worried about a move to home schooling

[for example, teaching over the internet]

Other (please specify)

**If skipped represent question with 'Don't know' 'Prefer not to answer' options**

ASK IF COV\_D15M = Other

**COV\_D15MSp**

**Please specify the other ways in which Coronavirus (COVID-19) has affected your schools and universities**

STRING[200]

**If skipped represent question with 'Don't know' 'Prefer not to answer' options**

ASK IF (HASDEP>0 (Has children 16 and under) AND COV\_D9=1)

**COV\_D16**

**In the past seven days, have you sent the {TEXTFILL child/children} within your household to nursery or school?**

Yes

No

**If skipped represent question with 'Don't know' 'Prefer not to answer' options**

ASK IF COV\_D16 = 2 (NO)

**COV\_D17**

**There may be many reasons as to why key workers have not sent the {TEXTFILL children/Child} within their household to nursery or school over the past seven days.**

**For what reasons did the {TEXTFILL children/Child} within your household not attend nursery or school?**

Please select all that apply

I was concerned about their health and wellbeing

{Child/children} said they did not want to go

It was not convenient

Someone in the household was self-isolating due to Coronavirus (COVID-19) symptoms

Alternative care was available

Nursery was closed

I did not work

Not eligible

Other

Don't know

Prefer not to say

ASK IF HASDEP > 0 (HAS Children)

**COV\_D18**

**In the past seven days, have you home schooled your {TEXTFILL child/children} due to the Coronavirus (COVID-19) outbreak?**

Yes

No

**If skipped represent question with 'Don't know' 'Prefer not to answer' options**

ASK IF COV\_D18 = 1

**COV\_D19**

**How much do you agree or disagree with the following statement on home schooling?**

**I am confident in my abilities to home school the {TEXTFILL children/Child} within my household**

- Strongly agree
- Somewhat agree
- Neither agree nor disagree
- Somewhat disagree
- Strongly disagree
- Don't know
- Prefer not to say

ASK IF COV\_D18 = 1

**COV\_D20**

**How much do you agree or disagree with the following statement on home schooling?**

**The {TEXTFILL children/Child} within my household are continuing to learn whilst being homeschooled**

- Strongly agree
- Somewhat agree
- Neither agree nor disagree
- Somewhat disagree
- Strongly disagree
- Don't know
- Prefer not to say

ASK IF COV\_D18 = 1

**COV\_D21**

**How much do you agree or disagree with the following statement on home schooling?**

**Homeschooling is putting a strain on my relationships with others in the household**

- Strongly agree
- Somewhat agree
- Neither agree nor disagree
- Somewhat disagree
- Strongly disagree
- Don't know
- Prefer not to say

ASK IF COV\_D18 = 1

**COV\_D22**

**How much do you agree or disagree with the following statement on home schooling?**

**Homeschooling is negatively affecting my job**

- Strongly agree
- Somewhat agree
- Neither agree nor disagree
- Somewhat disagree
- Strongly disagree
- Not applicable
- Don't know
- Prefer not to say

ASK IF COV\_D18 = 1

**COV\_D23**

**How much do you agree or disagree with the following statement on home schooling?**

**Homeschooling is negatively affecting my well-being**

- Strongly agree
- Somewhat agree
- Neither agree nor disagree
- Somewhat disagree
- Strongly disagree

Don't know  
Prefer not to say

ASK IF COV\_D18 = 1

**COV\_D24**

**How much do you agree or disagree with the following statement on home schooling?**

**Homeschooling is negatively affecting the well-being of the {TEXTFILL children/Child} in my household**

Strongly agree  
Somewhat agree  
Neither agree nor disagree  
Somewhat disagree  
Strongly disagree  
Don't know  
Prefer not to say

ASK IF COV\_D18 = 1

**COV\_D25**

**How much do you agree or disagree with the following statement on home schooling?**

**I have access to the resources I need to help me homeschool my {TEXTFILL children/Child}well**

Strongly agree  
Somewhat agree  
Neither agree nor disagree  
Somewhat disagree  
Strongly disagree  
Don't know  
Prefer not to say

ASK IF COV\_D15M = (4(SCHOOL) OR 5(UNI/COLLEGE) OR 6(SIXTH))

**COV\_D26**

**How much do you agree or disagree with the following statement on continuing your education from home?**

**I am confident that I can continue my studies effectively whilst being at home**

- Strongly agree
- Somewhat agree
- Neither agree nor disagree
- Somewhat disagree
- Strongly disagree
- Don't know
- Prefer not to say

ASK IF COV\_D15M = (4(SCHOOL) OR 5(UNI/COLLEGE) OR 6(SIXTH))

**COV\_D27**

**How much do you agree or disagree with the following statement on continuing your education from home?**

**Home education is putting a strain on my relationships with others in the household**

- Strongly agree
- Somewhat agree
- Neither agree nor disagree
- Somewhat disagree
- Strongly disagree
- Not applicable
- Don't know
- Prefer not to say

ASK IF COV\_D15M = (4(SCHOOL) OR 5(UNI/COLLEGE) OR 6(SIXTH))

**COV\_D28**



**How much do you agree or disagree with the following statement on continuing your education from home?**

**Home education is negatively affecting my well-being**

- Strongly agree
- Somewhat agree
- Neither agree nor disagree
- Somewhat disagree
- Strongly disagree
- Not applicable
- Don't know
- Prefer not to say

ASK IF COV\_D15M = (4(SCHOOL) OR 5(UNI/COLLEGE) OR 6(SIXTH))

**COV\_D29**

**How much do you agree or disagree with the following statement on continuing your education from home?**

**I have access to the resources I need to continue my studies from home**

- Strongly agree
- Somewhat agree
- Neither agree nor disagree
- Somewhat disagree
- Strongly disagree
- Don't know
- Prefer not to say

ASK IF COV\_D15M = (4(SCHOOL) OR 5(UNI/COLLEGE) OR 6(SIXTH))

**COV\_D30**

**How much do you agree or disagree with the following statement on continuing your education from home?**

**I am concerned that my future life plans will be negatively affected**

Strongly agree  
Somewhat agree  
Neither agree nor disagree  
Somewhat disagree  
Strongly disagree  
Don't know  
Prefer not to say

ASK IF COV\_D11M = 7 (CARING RESPONSIBILITIES)

**COV\_D31M**

**In the past seven days, how have your caring responsibilities been affected?**

Please select all that apply

I am spending more time caring for others  
I am unable to care for someone I usually support  
[for example, unable to spend as much time as would like to or unable to travel to them]  
I am having to organise remote support for someone vulnerable  
[for example, online grocery shopping]  
Paid care support is reduced  
[for example, childcare, respite care, social care support]  
Other (please specify)

**If skipped represent question with 'Don't know' 'Prefer not to answer' options**

ASK IF COV\_D31M = Other

**COV\_D31MSp**

**Please specify the other ways in which Coronavirus (COVID-19) has affected your caring responsibilities**

STRING[200]

**If skipped represent question with 'Don't know' 'Prefer not to answer' options**

ASK IF COV\_D11M = 5 (WELLBEING)

**COV\_D32M**

**In the past seven days, how has well-being been affected?**

Please select all that apply

- Spending too much time alone
- Spending too much time with others in household
- No one to talk to about my worries
- Strain on my personal relationships
- Strain on my work relationships
- Feeling stressed or anxious
- Feeling bored
- Feeling lonely
- Finding working from home difficult
- Making my mental health worse
- Unable to exercise as normal
- Feeling worried about the future
- Other (please specify)

**If skipped represent question with 'Don't know' 'Prefer not to answer' options**

ASK IF COV\_D32M = Other

**COV\_D32MSp**

**Please specify the other ways in which Coronavirus (COVID-19) has affected your wellbeing**

STRING[200]

**If skipped represent question with 'Don't know' 'Prefer not to answer' options**

ASK IF COV\_D11M = 6 (RELATIONSHIPS)

**COV\_D33M**

**In the past seven days, which relationships have you been most worried about?**

Please select all that apply

- Partner or Spouse

Children under the age of 18  
Children over the age of 18  
Parent or step-parent  
Grandparents  
Other relatives  
Flatmates or lodgers  
Employer or colleagues  
Neighbours  
Friends  
Other (please specify)

**If skipped represent question with 'Don't know' 'Prefer not to answer' options**

ASK IF COV\_D33M = Other

**COV\_D33MSp**

**Please specify which other relationships you are have been most worried about**

STRING[200]

**If skipped represent question with 'Don't know' 'Prefer not to answer' options**

ASK ALL

**COV\_D34**

**How worried or unworried are you that Coronavirus (COVID-19) is affecting your friends and family?**

Very worried  
Somewhat worried  
Neither worried nor unworried  
Somewhat unworried  
Not at all worried  
Don't know  
Prefer not to say

ASK IF COV\_D34 = 1 OR 2

**COV\_D35M**

**In which way are you worried that Coronavirus (COVID-19) is affecting your friends and family?**

Please select all that apply

Their health is being affected

Work is being affected

Schools and universities are being affected

Finances are being affected

Well-being is being affected

[for example, boredom, loneliness, anxiety and stress]

Relationships are being affected

Availability of groceries, medication and essentials is being affected

Access to groceries, medication and essentials is being affected

Transport is being affected

Personal travel plans are being affected

[for example, holidays and gap year]

Work travel plans are being affected

Life events are being affected

[for example, weddings and funerals]

Other (please specify)

**If skipped represent question with 'Don't know' 'Prefer not to answer' options**

ASK IF COV\_D35M = Other

**COV\_D35MSp**

**Please specify the other ways in which Coronavirus (COVID-19) is affecting your friends and family**

STRING[200]

**If skipped represent question with 'Don't know' 'Prefer not to answer' options**

ASK IF COV\_D35M > 1 option (This is just routed off COV\_D35M not COV\_D35MSp)

**COV\_D36**

**Of the worries you told us about, which one are you most concerned about for your friends and family?**

[feed forward the options from above if more than one selected]

Other

**If skipped represent question with 'Don't know' 'Prefer not to answer' options**

ASK ALL

**COV\_D37**

**In the past seven days, have you struggled to get the groceries and toiletries that you wanted because of the Coronavirus (COVID-19) outbreak?**

Yes

No

**If skipped represent question with 'Don't know' 'Prefer not to answer' options**

ASK ALL

**COV\_D38**

**In the past seven days, have you visited a food bank?**

Yes

No

Don't know

Prefer not to say

ASK IF COV\_D38 = 1

**COV\_D39**

**Were you able to get the groceries that you needed from the food bank?**

Yes

No

Don't know

Prefer not to say

ASK ALL

**COV\_D40**

**How long do you think it will be before your life returns to normal?**

Less than one month

1 to 3 months

4 to 6 months

7 to 9 months

10 to 12 months

More than a year

Never

Not sure

Prefer not to say

**COV\_IntroD3**

**The next set of questions are about the UK economy and your household finances in view of the general economic situation.**

ASK ALL

**COV\_D41**

**How do you expect the financial position of your household to change over the next 12 months?**

Get a lot better

Get a little better

Stay the same

Get a little worse

Get a lot worse

**If skipped represent question with 'Don't know' 'Prefer not to answer' options**

ASK ALL

**COV\_D42**

**How do you expect the general economic situation in this country to develop over the next 12 months?**

- Get a lot better
- Get a little better
- Stay the same
- Get a little worse
- Get a lot worse

**If skipped represent question with 'Don't know' 'Prefer not to answer' options**

ASK ALL

**COV\_D43**

**In view of the general economic situation, do you think now is the right time to make major purchases such as furniture or electrical goods?**

- Yes, it is the right time
- Neither right nor wrong time
- No, it is the wrong time

**If skipped represent question with 'Don't know' 'Prefer not to answer' options**

ASK ALL

**COV\_D44**

**In view of the general economic situation, do you think now is the right time to save?**

- Yes, it is the right time
- Neither right nor wrong time
- No, it is the wrong time

**If skipped represent question with 'Don't know' 'Prefer not to answer' options**

ASK ALL



COV\_D45

**In view of the general economic situation, do you think you will be able to save any money in the next twelve months?**

Yes

No

Don't know

Prefer not to say

ASK ALL

COV\_D46

**Could your household afford to pay an unexpected, but necessary, expense of £850?**

Yes

No

Don't know

Prefer not to say

COV\_IntroD4

**This next set of questions is about staying at home, social distancing and self-isolating to help stop the spread of Coronavirus (COVID-19).**

**Staying at home is what we have all been asked to do to help avoid spreading the Coronavirus.**

ASK ALL

COV\_D47

**What is helping you to cope whilst staying at home?**

Please select all that apply

Spending time with others that you live with

Staying in touch with family and friends remotely

[For example, over the phone or on social media]

Using the internet to continue your usual activities  
[for example, virtual worship services]  
Cooking  
Reading  
Exercising indoors  
Exercising outdoors  
[for example, a run, walk or cycle, alone or with other people you live with]  
Following lockdown tips and guides made by celebrities and athletes  
Gardening  
Learning something new  
Watching films or using streaming services  
Watching films  
Working  
Using other online sources of support and information  
Limiting how often you listen to or watch the news  
Other (please specify)  
Or  
Struggling to find things that are helping me cope

**If skipped represent question with 'Don't know' 'Prefer not to answer' options**

ASK IF COV\_D47M = Other

**COV\_D47MSp**

**Please specify what else is helping you cope whilst staying at home**

STRING[200]

**If skipped represent question with 'Don't know' 'Prefer not to answer' options**

ASK ALL

**COV\_D48**

**Does your home have a garden?**

Yes

(includes 'private' gardens shared with others)

No

**If skipped represent question with 'Don't know' 'Prefer not to answer' options**

ASK ALL

**COV\_D49**

**In the past seven days, have you visited a park or public green space?**

Yes

No

**If skipped represent question with 'Don't know' 'Prefer not to answer' options**

**COV\_IntroD5**

**The next questions are about self-isolation, which is defined as staying at home because you have symptoms or have been in contact with someone who has symptoms.**

ASK ALL

**COV\_D50**

**In the past seven days, have you self-isolated because of the Coronavirus (COVID-19) outbreak?**

Yes

No

**If skipped represent question with 'Don't know' 'Prefer not to answer' options**

ASK ALL

**COV\_D51**

**In the past seven days, has anyone else living in your household self-isolated because of the Coronavirus (COVID-19) outbreak?**

Yes

No

Not applicable

Don't know

Prefer not to say

ASK ALL

**COV\_D52**

**In the past seven days, do you know someone living outside of your household who has self-isolated because of the Coronavirus (COVID-19) outbreak?**

Yes

No

Not applicable

Don't know

Prefer not to say

**COV\_IntroD6**

**We would now like you to think about when you have had direct physical contact with people within and outside of your household in the last 24 hours. Examples of direct physical contact may include, shaking or holding hands, hugging and making contact when passing objects.**

ASK ALL

**COV\_D53**

**Over the last 24 hours, how many people within your household have you had direct physical contact with?**

[0..2000]

Not applicable

Don't know

Prefer not to say

ASK ALL

**COV\_D54**

**Over the last 24 hours, how many people at work have you had direct physical contact with?**

[0..2000]

Not applicable, I worked from home

Not applicable for other reasons

Don't know

Prefer not to say

ASK ALL

**COV\_D55**

**Over the last 24 hours, how many people at school or university have you had direct physical contact with?**

[0..2000]

Not applicable, I'm not in school or university

Not applicable, I am studying at home

Not applicable for other reasons

Don't know

Prefer not to say

ASK ALL

COV\_D56

**Over the last 24 hours, how many people have you had direct physical contact with when shopping for basic necessities? For example food, toiletries and medicine**

[0..2000]

Not applicable

Don't know

Prefer not to say

ASK ALL

COV\_D57

**Over the last 24 hours, how many people outside of your household have you had direct physical contact with when exercising?**

[0..2000]

Not applicable

Don't know

Prefer not to say

ASK ALL

**COV\_D58**

**Over the last 24 hours, how many people have you had direct physical contact with when travelling?**

[0..2000]

Not applicable

Don't know

Prefer not to say

**COV\_IntroD7**

**We would now like you to think about when you have had physical contact with people within and outside of your household in the past seven days.**

ASK ALL

**COV\_D59**

**In the past seven days, have you avoided contact with older people or other vulnerable people because of the Coronavirus (COVID-19) outbreak?**

Yes

No

**If skipped represent question with 'Don't know' 'Prefer not to answer' options**

ASK IF COV\_D59 = 1

**COV\_D60**

**Do you have care responsibilities for any of the people you may have had to avoid contact with?**

Yes

No

**If skipped represent question with 'Don't know' 'Prefer not to answer' options**

**COV\_IntroD8**

**Now we would like you to think about your local area and how people are supporting each other during the Coronavirus (COVID-19) outbreak.**

ASK ALL

**COV\_D61**

**To what extent do you agree or disagree with the following statement?**

**If I need help, other local community members would support me during the Coronavirus (COVID-19) outbreak.**

Strongly agree

Somewhat agree

Neither agree nor disagree

Somewhat disagree

Strongly disagree

Don't know

**If skipped represent question with 'Prefer not to answer' options**

ASK ALL

**COV\_D62**

**In the past seven days how many times have you checked on neighbours who might need help?**



- Never
- 1 to 2 times
- 3 to 4 times
- 5 to 6 times
- 7 or more
- Not applicable

**If skipped represent question with 'Don't know' and 'Prefer not to answer' options**

ASK ALL

**COV\_D63**

**In the past seven days how many times have you gone shopping or done other tasks (such as dog walking) for neighbours?**

- Never
- 1 to 2 times
- 3 to 4 times
- 5 to 6 times
- 7 or more
- Not applicable

**If skipped represent question with 'Don't know' and 'Prefer not to answer' options**

ASK ALL

**COV\_D64**

**Do you think people are doing things to help others more, about the same, or less since the Coronavirus (COVID-19) outbreak?**

- More
- About the same
- Less
- Don't know

**If skipped represent question with 'Prefer not to answer' options**

**COV\_D65**

**How safe or unsafe do you feel in your home since the Coronavirus (COVID-19) outbreak?**

Very safe

Safe

Neither safe nor unsafe

Unsafe

Very unsafe

Don't know

Prefer not to say

**COV\_D66**

**What do you think has happened to the level of anti-social behaviour in your local area since the Coronavirus (COVID-19) outbreak?**

Gone up a lot

Gone up a little

Stayed about the same

Gone down a little

Gone down a lot

Don't know

Prefer not to say

**COV\_IntroD9**

**We would like to know about your personal experience of finding information about the Coronavirus (COVID-19).**

ASK ALL

**COV\_D67**

**Do you feel like you have enough information about how to protect yourself from the Coronavirus (COVID-19)?**

Yes

No

Not sure

Prefer not to say

ASK ALL

**COV\_D68**

**Do you feel like you have enough information about the UK's plan for dealing with the Coronavirus (COVID-19)?**

Yes

No

Not sure

Prefer not to say

ASK ALL

**COV\_D69**

**Official government advice is that people in the UK must stay in their homes and should only go out under a limited number of circumstances, to help slow the spread of coronavirus.**

**To what extent do you support or oppose the stay at home measures put in place by the Government?**

Strongly support

- Tend to support
- Neither support nor oppose
- Tend to oppose
- Strongly oppose
- Don't know
- Prefer not to say

ASK ALL

**COV\_D70**

**The official NHS guidance and government advice statements on how to reduce the spread of Coronavirus (COVID-19) is being updated regularly. Which of the following NHS guidance and official government advice statements are you aware of?**

Please select all that apply

- Everyone must stay at home to help stop the spread of coronavirus.  
[This includes people of all ages – even if you do not have any symptoms or other health conditions.]
- You can only leave your home to shop for basic essentials – only when you really need to
- You can only leave your home to do one form of exercise a day – such as a run, walk or cycle, alone or with other people you live with
- You can only leave your home for any medical need – for example, to visit a pharmacy or deliver essential supplies to a vulnerable person
- You can only leave your home to travel to and from work – but only where this is absolutely necessary
- Those who are 'high risk' should not leave their home – they should not go out to do shopping, visit friends or family, or attend any gatherings
- Those who are 'high risk' should avoid close contact with other people in their home as much as possible
- Wash your hands with soap and water often – do this for at least 20 seconds
- Always wash your hands when you get home or into work
- Use hand sanitiser gel if soap and water are not available
- Cover your mouth and nose with a tissue or your sleeve (not your hands) when you cough or sneeze
- Put used tissues in the bin immediately and wash your hands afterwards
- Try to avoid close contact with people who are unwell

Try to keep at least 2 metres (3 steps) from other people, particularly older people or those with long-term health conditions  
Self-isolate at home for seven days if you have a high temperature.  
Self-isolate at home for seven days if you have a new, continuous cough  
Families urged to stay at home for 14 days if any member of the household is ill  
Everyone to stop non-essential contact with others  
do not touch your eyes, nose or mouth if your hands are not clean  
Use the NHS 111 online coronavirus service (only call 111 if you cannot get help online)  
Other government advice (please specify)

Or

None of these

**If skipped represent question with 'Don't know' 'Prefer not to answer' options**

ASK IF COV\_D70M = Other government advice

**COV\_D70MSp**

**Please specify what other NHS guidance and government advice statements you are aware of**

STRING[200]

**If skipped represent question with 'Don't know' 'Prefer not to answer' options**

**COV\_IntroD10**

**We would like to know about the actions you personally are taking to protect yourself and others against the Coronavirus (COVID-19). There is no right or wrong answer to these questions, but please answer as accurately as you can.**

ASK ALL

**COV\_D71**

**In the past seven days, have you washed your hands with soap and water to avoid infection?**

Yes

No

Don't know

Prefer not to say

ASK IF COV\_D71 = 1

**COV\_D72**

**This week, have you washed your hands with soap and water more or less than last week?**

More than last week

Same as last week

Less than last week

Don't know

Prefer not to say

ASK ALL

**COV\_D73**

**In the past seven days, have you cleaned your hands with a sanitiser to avoid infection?**

Yes

No

Don't know

Prefer not to say

ASK IF COV\_D73 = 1

**COV\_D74**

**This week, have you used sanitiser more or less than last week?**

More than last week

Same as last week  
Less than last week  
Don't know  
Prefer not to say

ASK IF (COV\_D71 = 1 OR COV\_D73 = 1)

**COV\_D75**

**Have you washed your hands with soap and water or sanitiser straight away when arriving at home?**

Yes

No

Not applicable

**If skipped represent question with 'Don't know' 'Prefer not to answer' options**

ASK ALL

**COV\_D76**

**In the past seven days, have you used tissues to catch coughs or sneezes?**

Yes

No

Not applicable

Don't know

Prefer not to say

ASK IF (WRKING = 1 OR CASWRK = 1) OR (OWNBUS = 1)

**COV\_D77**

**In the past seven days, have you worked from home because of the Coronavirus (COVID-19) outbreak?**

Yes

Not able to work from home

No

**If skipped represent question with 'Don't know' 'Prefer not to answer' options**

### **COV\_IntroD11**

**These next questions ask about reasons for leaving home since the Coronavirus (COVID-19) outbreak.**

ASK ALL

### **COV\_D78M**

**In the past seven days, for what reasons have you left your home?**

**Please select all apply**

Key worker, travelling to and from work

Non-key worker, travelling to and from work

For voluntary work

Meeting up with people in a public place

Meeting up with people in a personal place

[for example, visiting family and friends at their home or yours]

Taking part in a regular indoor activity

(for example, attending an exercise class or place of worship)

To take children to or from school (or for other activities)

For one form of exercise a day, for example a run, walk, or cycle – alone or with members of your household

Visit a tourist attraction

shopping for basic necessities

[for example food and medicine]

any medical need, or to provide care or to help a vulnerable person

To run errands

[for example, pay bills, withdraw money from bank, visit post office]

Travel within the UK for holidays or short breaks

Travel outside of the UK for work



Travel outside of the UK for holidays or short breaks

Other (please specify)

OR

None of the above

**If skipped represent question with 'Don't know' 'Prefer not to answer' options**

ASK IF COV\_D78M = Other

**COV\_D78MSp**

**Please specify the reasons you have left your home**

STRING[200]

**If skipped represent question with 'Don't know' 'Prefer not to answer' options**

***Outro and thank you page:***

Thank you, you are almost done.

Your help so far has been invaluable.

To receive your £10 gift voucher please provide an email address:

[OPEN TEXT]

Your name and email address will be shared with [Sodexo](#) to send your gift voucher and will not be used for any other purposes without your permission.

You will receive instructions by email about how to claim your voucher within 20 days of completing the survey.

**NEXT PAGE**

We would like to contact you in future to let you know about the findings from this study and invite you to take part in future research.

Are you happy for us to use your email address for these purposes?

Yes / No

To take part in future research by phone, please provide your telephone number:

[OPEN TEXT]

***Final page:***

**Thank you for your help!**

**The official advice for England:**

<https://www.nhs.uk/conditions/coronavirus-covid-19/>

**The official advice for Scotland:**

<https://www.nhsinform.scot/illnesses-and-conditions/infections-and-poisoning/coronavirus-covid-19>

**The official advice for Wales:**

[https://www.nhsdirect.wales.nhs.uk/coronavirus\(2019ncov\)/](https://www.nhsdirect.wales.nhs.uk/coronavirus(2019ncov)/)

**Find guidance, advice and tips on how to maintain your mental wellbeing by visiting the NHS websites:**

<https://www.nhs.uk/conditions/stress-anxiety-depression/>

<https://www.nhs.uk/oneyou/every-mind-matters/>

*NEXT PAGE*

**Feedback question**

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**Thank you for providing your information. Your information has been submitted and your survey locked.**

**We are continuously looking to improve our survey. If you have any comments or feedback about any aspects you can write these in the box below. This could include comments about our letters, our questions or the design.**

**How easy or difficult did you find this survey to use?**

- Very difficult
- Difficult
- Neither difficult or easy
- Easy
- Very easy

**Feedback**

**Submit**

[Previous](#)