



## SURVEY INSTRUMENT TO STUDY THE IMPACT OF COVID-19 ON MENTAL HEALTH

The following questionnaire can be used to assess the state of mental health of adults in the age bracket of 18 to 35 years during the coronavirus pandemic. The survey can be administered using Outline India's remote surveying tool *Track Your Metrics*.

No.	Questions	Type	Options	Relevance
<b>Section 1 - General Information</b>				
1	Name	Text		
2	Age (in years)	Single_multiple	1.18-21 2.22-25 3.26-30 4.31-35	
3	Gender	Single_multiple	1.Male 2.Female 3.Other 4.Prefer not to answer	
4	Height (in cms)	Numeric		
5	Weight (in kgs)	Numeric		
6	Marital status	Single_multiple	1.Married 2.Unmarried 3.Divorced 4.Widow	
<b>Section 2 - Household &amp; Living</b>				
7	Do you live alone?	Single_multiple	1.Yes 2.No	
7.A	Who do you live with?		1.Family 2.Friends 3.Acquaintances/ strangers 4.Others	If Q7 = No
7.B	Please specify	Text		If Q7.A = Others
7.C	How many people do you live with?	Numeric		If Q7 = No
7.D	How would you describe your relationship with the people who live with you?	Single_multiple	1.Loving and affectionate 2.Coordial 3.Conflicted 4.Abusive 5.Violent 6.Other	If Q7 = No



7.E	Please specify	Text		If 7.D = Other
7.F	During the past few months, have you felt lonely?	Single_multiple	1.Yes 2.No	If Q7 = Yes
8	Have you had to relocate due to the coronavirus situation?	Single_multiple	1.Yes 2.No	
9	Has your burden of household chores increased due to the coronavirus situation?	Single_multiple	1.Yes 2.No	
<b>Section 4 - Work &amp; Career</b>				
10	Which of the following options currently applies to you?	Single_multiple	1.Full-time employed 2.Part-time employed 3.Self employed 4.Unemployed 5.Homemaker 6.Student 7.Other	
10.A	Please specify	Text		If Q10 = Other
10.B	Do you have the option to 'work from home'?	Single_multiple	1.Yes 2.No	If Q10 = Full-time,Part-time
10.C	Did you lose your job as a result of the pandemic?	Single_multiple	1.Yes 2.No	If Q10 = Unemployed
10.D	Do you feel like your unemployment status is impacting your mental health negatively?	Single_multiple	1.Yes 2.No	If Q10 = Unemployed
10.E	Do you feel like your workplace acknowledges the importance of mental health?	Single_multiple	1.Yes 2.No	If Q10 = Full-time,Part-time
<b>Section 3 - During the last few months, due to the pandemic and the lockdowns</b>				
11	Do you feel more nervous, anxious or on the edge than usual?	Single_multiple	1.Yes 2.No	
12	Are you facing trouble falling asleep or staying asleep, or sleeping too much?	Single_multiple	1.Yes 2.No	
13	How many times in a week did you step out for recreational activities?	Numeric		



14	Have you been able to maintain a healthy diet?	Single_multiple	1.Yes 2.No	
15	Which option best describes your appetite while practicing self-isolation?	Single_multiple	1.Normal 2.Unusual cravings 3.Loss of appetite 4.Eating more than usual	
16	Do you involve yourself in any kind of physical activities or exercises?	Single_multiple	1.Yes 2.No	
16.A	Please specify	Text		If Q16 = Yes
17	Do you regularly interact with your family and friends (at least virtually)?	Single_multiple	1.Yes 2.No	
18	What other recreational activities have you engaged in?	Single_multiple	1.Meditation 2.Reading 3.Watching TV/ movies 4.Practicing a hobby 5.Other	
19	Do you follow coronavirus related news and updates on a regular basis?	Single_multiple	1.Yes 2.No	
19.A	Do you feel like following coronavirus related news and updates on a regular basis negatively impacts your mental health?	Single_multiple	1.Yes 2.No	If Q19 = Yes
19.B	How does following coronavirus related news and updates on a regular basis negatively impact your mental health?	Single_multiple	1.I feel anxious 2.I feel helpless 3.I feel scared 4.I worry about the state of the nation and the economy 5.Other	If 19.A = Yes
19.C	Please specify	Text		If 19.B = 5
<b>Section 4 - Mental Health &amp; Wellbeing</b>				
20	Do you feel like taking active care of your mental health is important?	Single_multiple	1.Yes 2.No	
21	Are you currently seeking any kind of mental healthcare?	Single_multiple	1.Yes 2.No	
21.A	Please specify	Text		If Q21 = Yes
22	In the past, have you seeked any kind of mental healthcare?	Single_multiple	1.Yes 2.No	



22.A	Please specify	Text		If Q22 = Yes
23	What would you say is your personality type?	Single_multiple	1.Introvert 2.Extrovert 3.Ambivert	
24	Have pandemic-related restrictions impacted your mental healthcare?	Single_multiple	1.Yes 2.No	
25	How have pandemic-related restrictions impacted your mental healthcare?	Single_multiple	1.Unable to visit therapist/ other professionals 2.Unable to purchase medicines/ supplements 3.Other	If Q24 = Yes
25.A	Please specify	Text		If Q25 = 3