**NISRA CORONAVIRUS (COVID-19) OPINION SURVEY QUESTIONNAIRE SPECIFICATION PHASE 12**

**Household grid: Name, Age, Sex**

*MarStt*

What is *(name’s)* marital status? Is it…

1. Single, that is, never married and never registered in a civil partnership
2. Married
3. In a registered civil partnership
4. Separated, but still legally married
5. Divorced
6. Widowed
7. Separated, but still legally in a civil partnership
8. Formerly in a civil partnership which is now legally dissolved
9. Surviving partner from a civil partnership

*LivTog*

May I just check, (are you) is *(name)* currently living with someone in this household as a couple?

1. Yes - opposite sex couple
2. Yes - same sex couple
3. No

Starting with a few questions about your feelings on aspects of your life, for each question please answer on a scale of 0 to 10, where 0 is “not at all” and 10 is “completely”. There are no right or wrong answers.

**MCZ_1** Overall, how satisfied are you with your life nowadays?

**MCZ_2** Overall, to what extent do you feel that the things you do in your life are worthwhile?

**MCZ_3** Overall, how happy did you feel yesterday?

**MCZ_4** On a scale where 0 is “not at all anxious” and 10 is “completely anxious”, overall, how anxious did you feel yesterday?
COV_1     ASK ALL
How often do you feel lonely…
   1. Often/always
   2. Some of the time
   3. Occasionally
   4. Hardly ever
   5. Never?

COV_2     ASK ALL
To what extent do you agree with the following statement?
If I needed help, there are people who would be there for me.
   1. Strongly agree
   2. Somewhat agree
   3. Neither agree nor disagree
   4. Somewhat disagree
   5. Strongly disagree

DEPEND1   ASK ALL
Do you have responsibility for the care of a child?
   1. Yes
   2. No

DEPEND2   ASK ALL
Do you have responsibility for the care of a person with a disability?
   1. Yes
   2. No

DEPEND3   ASK ALL
Do you have responsibility for the care of a dependant elderly person?
   1. Yes
   2. No

COV_3     ASK ALL
Is there anyone living with you who is sick, disabled, or over 70 whom you look after or give special help to?
   1. Yes
   2. No
GenHeal5  How is your health in general? Would you say it was...
   1. Very Good
   2. Good
   3. Fair
   4. Bad
   5. or very Bad?

Hlongill  ASK ALL
Do you have any physical or mental health conditions or illnesses lasting or expected to last for 12 months or more?
   1. Yes
   2. No

REDACT  ASK IF Hlongill = Yes
Does your condition(s) or illness(es) reduce your ability to carry out day to day activities?
   1. Yes, a lot
   2. Yes, a little
   3. Not at all

COV_4  ASK ALL
Thinking about your health, do you currently have any of the following health conditions, problems or illnesses?
READ OUT ALL ANSWER CATEGORIES AND CODE ALL THAT APPLY
   1. Alzheimer’s disease or dementia
   2. Angina or long-term heart problem
   3. Asthma
   4. Autism spectrum disorder (ASD) or Asperger’s (Asperger syndrome)
   5. Cancer
   6. Chronic obstructive pulmonary disease (COPD) or long-term lung problem
   7. Diabetes
   8. Epilepsy or other conditions that affect the brain
   9. High blood pressure
   10. Kidney or liver disease
   11. Stroke or cerebral haemorrhage or cerebral thrombosis
   12. Rheumatoid arthritis
   13. Other (please specify)
   14. None of these

COV_4Sp  ASK IF COV_4 = Other
Please specify the other condition(s), problem(s) or illness(s) that you currently have
COV_Medic. ASK ALL
Since the start of the coronavirus (COVID-19) outbreak, access to medical care for existing health conditions and check ups has been reduced or put on hold. For example, out-patient hospital treatment, dentist, opticians, podiatrists, audiologists, physiotherapists, cancer treatment, counselling. Before the coronavirus (COVID-19) outbreak, were you receiving medical care for any long-term mental or physical health condition, problem or illness?

1. Yes
2. No

COV_AfMedic. ASK IF Cov_Medic = 1
Since the coronavirus (COVID-19) outbreak have you been able to access the same level of medical care for any long-term mental or physical health condition, problem or illness?

1. Yes, treatment started or continued as normal [Include telephone and video call appointments]
2. Yes, treatment started or continued but was reduced
3. Treatment for some, but not all health conditions [Include telephone and video call appointments]
4. No, treatment was cancelled
5. No, not receiving treatment
6. Not applicable

COV_Reduce. ASK IF Cov_AfMedic = 2 OR 3 OR 4
What effect, if any, has reduced access to treatment or no treatment had on any of your long-term mental or physical health conditions, problems or illnesses?

1. My health has improved
2. My health has stayed the same
3. My health has gotten worse
4. Other (please specify)

COV_ReduceSp. ASK IF COV_Reduce = Other
Please specify the other effects that reduced access to treatment or no treatment has had. STRING[200]
COV_5   ASK IF COV_4 = Cancer
Are you currently having treatment for your cancer?
   1. Yes, chemotherapy
   2. Yes, radiotherapy
   3. Yes, other
   4. No

COV_NewPro   ASK ALL
In the past seven days, have you had any new or worsening health problems?
   1. Yes
   2. No

COV_Prof   ASK IF COV_NewPro=1 (Yes)
Have you sought any professional health advice for these health problems?
   1. Yes
   2. No

COV_NoProfA   ASK IF COV_Prof = 2 (No)
Why did you not seek any professional health advice for these health problems?
READ OUT ALL ANSWER CATEGORIES AND CODE ALL THAT APPLY
   1. I was concerned about catching the coronavirus (COVID-19) while receiving care
   2. I was concerned about spreading the coronavirus (COVID-19) to others
   3. I wanted to avoid putting pressure on the NHS
   4. I did not think it was serious enough to seek advice
   5. I was concerned about leaving home
   6. I did not know how to access help
   7. I was not able to access help
   8. I thought help was unavailable
   9. Other (please specify)
   10. None of the above (* EXCLUSIVE CODE *)

COV_NoProfSp   ASK IF COV_NoProfA= Other
Please specify the reasons you did not seek professional health advice for these health problems…STRING[200]
DRINK1. **ASK ALL**
Since the outbreak of the Coronavirus (COVID-19) pandemic, would you say that on the whole you have been drinking more alcohol, about the same or less?
1. Drinking more
2. About the same
3. Drinking less
4. I haven’t drank since March 2020
5. Not Applicable - I don't drink at all

DRINKOFT1. **ASK IF** (DRINK1 = Option 1-4)
Thinking now about all kinds of drinks, how often did you have an alcoholic drink of any kind in the 12 months before the outbreak of the Coronavirus (COVID-19) pandemic in March 2020?
**RUNNING PROMPT**
1. Almost every day
2. 5 or 6 days a week
3. 3 or 4 days a week
4. Once or twice a week
5. Once or twice a month
6. Once every couple of months
7. Once or twice a year
8. Not at all in last 12 months?

DRINKOFT2. **ASK IF** DRINK1 = Option 1 (drink more) or 3 (less)
Thinking now about all kinds of drinks, how often have you had an alcoholic drink of any kind since the outbreak of the Coronavirus (COVID-19) pandemic in March 2020?
**RUNNING PROMPT**
1. Almost every day
2. 5 or 6 days a week
3. 3 or 4 days a week
4. Once or twice a week
5. Once or twice a month
6. Once every couple of months
7. Once or twice since March 2020
8. Not at all since March 2020

CigNow.  **ASK ALL**
Do you smoke cigarettes even if occasionally?
Please do not include electronic cigarettes or vaping.
1. Yes
2. No
CigEver

ASK IF CigNow=2

Have you ever smoked cigarettes regularly?
Please do not include electronic cigarettes or vaping

1. Yes
2. No

Paidwork

Did you do any paid work in the 7 days ending Sunday the (date), either as an employee or as self-employed?

1. Yes
2. No

Anywork

ASK IF Paidwork = No

Did you . . .

1. Have a job or business you were away from, or
2. Were you waiting to take up a job already obtained
3. Were you looking for work, or
4. Were you intending to look for work, but were prevented by temporary sickness or injury
5. Were you on a government training scheme?
6. None of these

UnpaidO

ASK IF ((anywork = 2 OR 3 OR 4 OR 6)

Did you do any unpaid work in the seven days ending Sunday the (date) for any business that YOU own?

1. Yes
2. No

Unpaidr

ASK IF (unpaid = no)

...or that a relative owns?

1. Yes
2. No

last4wk

ASK IF (anywork = 2 OR 3 OR 4 OR 6)

Thinking of the 4 weeks ending Sunday the (date), were you looking for any kind of paid work or government training scheme at any time in those 4 weeks?

1. Yes
2. No
If place  
ASK IF (last4wk = yes)
If a job or a place on a government scheme had been available in the week ending Sunday the *(date) would you have been able to start in the next two weeks?
1. Yes
2. No

Nreason  
ASK IF (last4wk = no) OR (ifplace = no)
What was the main reason you did not seek any work in the last 4 weeks, or would not be able to start in the next 2 weeks?
1. Student
2. looking after family/home
3. temporarily sick or injured
4. long-term sick or disabled
5. retired from paid work
6. other reason
7. waiting to take up a job already obtained

COV_Vac1  
ASK ALL
A mass vaccination is currently rolling out for Coronavirus (COVID-19) in Northern Ireland. Have you received the vaccine for the Coronavirus (COVID-19)?
6. Yes
7. No

COV_Barr  
Ask if COV_Vac1=YES
Did you experience any of the following difficulties when going to get your vaccine?
INTERVIEWER READ OUT ALL ANSWER CATEGORIES AND SELECT ALL THAT APPLY
1. Difficulty travelling to receive the vaccine
2. Cost of travel to receive the vaccine
3. Felt unsafe going to receive the vaccine due to the risk of catching the Coronavirus (COVID-19)
4. Difficulty with accessibility at the vaccination centre, GP surgery or pharmacy
5. Difficulty finding help for caring responsibilities while I got vaccinated
6. Long wait at the vaccination centre, GP surgery or pharmacy
7. Difficulty taking time off work
8. Other, please specify
9. I did not experience any difficulties

COV_BarrSp  
ASK IF COV_Barr = Other, please specify
Please specify the other difficulties you faced when going to get your vaccine
STRING[200]
**COV_Vac1a.** Ask if COV_Vac1=YES
How many vaccine doses have you received?
  1. First dose
  2. Both doses

**COV_Vac2.** Ask if COV_Vac1=YES
Did you experience any side effects after receiving the vaccine for the coronavirus (COVID-19)?
  1. Yes
  2. No

**COV_Vac3.** ASK IF COV_Vac2=YES
What were the side effects?
INTERVIEWER READ OUT ALL ANSWER CATEGORIES AND SELECT ALL THAT APPLY
  1. Sore arm where the needle went in
  2. Feeling tired
  3. Headache
  4. Feeling achy
  5. Allergic reaction
  6. Other side effects – please specify

**COV_Vac3oth.** ASK IF COV_Vac3 = Other
Please specify these other side effects? STRING [300]

**COV_Vac4.** ASK IF COV_Vac2 = YES
Would you describe the side effects as mild or severe?
  1. Mild
  2. Severe

**COV_Vac5.** ASK IF COV_Vac2 = YES
How long did the side effects last?
  1. Up to one day/24 hours
  2. 1-2 days
  3. 3-4 days
  4. 5-6 days
  5. A week
  6. 1-2 weeks
  7. Longer than 2 weeks
COV_Vac6. [Ask if COV_Vac1=no]
How likely or unlikely are you to have the vaccine for the Coronavirus (COVID-19)?
1. Very likely
2. Fairly likely
3. Fairly unlikely
4. Very unlikely

COV_Vac7. Ask if COV_Vac6 = Fairly Unlikely or Very Unlikely
For what reason(s) are you unlikely to have a vaccine for the Coronavirus (COVID-19)? INTERVIEWER READ OUT ALL ANSWER CATEGORIES & SELECT ALL THAT APPLY
1. I do not think it will work
2. I am worried the vaccine will give me the Coronavirus (COVID-19)
3. I am worried about the side effects
4. I am worried about the effect on an existing health condition
5. I am worried about the long term effects on my health
6. I do not think it will be safe
7. I am worried it might be painful
8. I am pregnant and afraid of the effects on my baby
9. I do not think I need the vaccine as I have already tested positive for the Coronavirus (COVID-19)
10. I do not think I need the vaccine as I have already had the Coronavirus (COVID-19) although I did not have a positive test
11. I do not feel the Coronavirus (COVID-19) is a personal risk
12. I would wait to see how well the vaccine works
13. I am against vaccines in general
14. I do not have the time
15. Other (please specify)

COV_Vac7oth. ASK if COV_Vac7 = Other
Please specify the other reasons you are unlikely to have a vaccine for the Coronavirus (COVID-19)

COV_Vac8. ASK IF COV_Vac6 = Fairly Unlikely or Very Unlikely
Have you already been offered the vaccine for the Coronavirus (COVID-19)?
1. Yes
2. No
**COV_TestlikeB** ASK ALL
If testing was offered to you even if you did not have symptoms, how likely or unlikely would you be to get a test for the Coronavirus (COVID-19)?
1. Very likely
2. Fairly likely
3. Neither likely nor unlikely
4. Fairly unlikely
5. Very unlikely

**Cov_PosTest** ASK ALL
Have you tested positive for the Coronavirus (COVID-19)?
1. Yes
2. No

**COV_HadCor** ASK if Cov_PosTest = no, ‘Don’t know’ or ‘Refusal’
Do you think that you have had the Coronavirus (COVID-19)?
1. Yes
2. No

**COV_HadCorY** IF COV_HadCor = Yes or Don’t Know
For which of the following reasons do you think you may have had the coronavirus (COVID-19)?
READ OUT ALL ANSWER CATEGORIES AND SELECT ALL THAT APPLY
1. I experienced symptoms of the coronavirus (COVID-19)
2. I was in close contact with someone who tested positive for the coronavirus (COVID-19)
3. I was in close contact with someone who experienced symptoms of the coronavirus (COVID-19)
4. Other (please specify)

**COV_HadCorYSp** ASK IF COV_HadCorY = Other
Please specify for what other reasons you think that you may have had the Coronavirus (COVID-19). STRING [200]

**COV_LongCov** ASK IF Cov_PosTest = yes Or COV_HadCor = yes
For some people, the Coronavirus (COVID-19) can cause symptoms that last weeks or months after the infection has gone. This is sometimes called post-COVID-19 syndrome or ‘long COVID’. Have you experienced ‘long COVID’?
1. Yes
2. No
COV_LongCovAs  ASK IF COV_LongCov = yes or Don't Know
Has having ‘long COVID’ negatively affected any of the following aspects of your life?
READ OUT ALL ANSWER CATEGORIES AND SELECT ALL THAT APPLY
  1. Work
  2. Education
  3. Caring responsibilities
  4. General wellbeing
  5. Family life
  6. Relationships
  7. Ability to exercise
  8. Other (please specify)
  9. None of the above  (EXCLUSIVE CODE)

COV_LongCovAsSP  ASK IF COV_LongCovAs = other
Please specify any other ways that having ‘long COVID’ has negatively affected your life. [String 200]

COV_C9  ASK ALL
How worried or unworried are you about the effect that Coronavirus (COVID-19) is having on your life right now?
  1. Very worried
  2. Somewhat worried
  3. Neither worried nor unworried
  4. Somewhat unworried
  5. Not at all worried
**COV_C10M**  
ASK IF COV_C9 = 1 OR 2  
In which way is Coronavirus (COVID-19) affecting your life?  
READ OUT ALL ANSWER CATEGORIES AND CODE ALL THAT APPLY  
1. My health is being affected  
2. My work is being affected  
3. Schools, colleges and universities are being affected  
4. My household finances are being affected  
5. My well-being is being affected (for example, boredom, loneliness, anxiety and stress)  
7. My relationships are being affected  
8. My caring responsibilities are being affected  
9. My access to paid or unpaid care is being affected  
10. My exercise routine is being affected  
11. Availability of groceries, medication and essentials are being affected (for example, shops running low on stock)  
12. Access to groceries, medication and essentials are being affected (for example, not being able to shop as often, depending on others to shop for me)  
14. Transport is being affected  
15. Personal travel plans are being affected (for example, holidays and gap year)  
16. Work travel plans are being affected  
17. Life events are being affected (for example, weddings and funerals)  
18. I am unable to make plans  
19. Other (please specify)  

**COV_C10MSp**  
ASK IF COV_C10M = Other  
Please specify the other ways in which Coronavirus (COVID-19) is affecting your life...STRING[200]
**COV_C11**  
ASK IF COV_C10M > 1 option  
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

**COV_C12M**  
ASK IF COV_C10M = 2 (WORK)  
In the past seven days, how has your work been affected?  
READ OUT ALL ANSWER CATEGORIES AND CODE ALL THAT APPLY  
1. Increase in hours worked (for example, over-time)  
2. Decrease in hours worked (for example, place of work closed or reduced opening times or availability of work)  
3. 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))  
4. Temporary closure of own business (include potential closure and actual closure)  
5. Permanent closure of own business (include potential closure and actual closure)  
6. Redundancy  
7. Asked to take leave (Include paid and unpaid leave)  
8. Unable to take leave  
9. Working long hours with no breaks or reduced breaks  
10. Finding working from home difficult  
11. I am worried about my health and safety at work  
12. Asked to work from home  
13. I have to work around childcare  
14. I have to work around other caring responsibilities  
15. Other (please specify)

ASK IF COV_C12M = Other  
**COV_C12MSp**  
Please specify the other ways in which Coronavirus (COVID-19) has affected your work…STRING[200]
COV_C13M  ASK IF COV_C10M = 4 (HOUSEHOLD FINANCES)
In the past seven days, how have your household finances been affected?
READ OUT ALL ANSWER CATEGORIES AND CODE ALL THAT APPLY
1. Reduced income
2. Use of my savings to cover living costs
3. Unable to save as usual
4. 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)
5. Delay to sick pay
6. Delay to State welfare benefits (for example, Universal Credit)
7. Had to use food banks
8. Struggling to pay bills (for example, food, energy)
9. Care costs increased (For example, childcare, social care)
10. Providing financial support to friends and family
11. Pension value is being affected by economic instability
12. Savings value is being affected by economic instability
13. Other (please specify)

COV_C13MSp  ASK IF COV_C13M = Other
Please specify the other ways in which Coronavirus (COVID-19) has affected your household finances...STRING[200]

COV_C28M  ASK IF COV_C10M = 7 (CARING RESPONSIBILITIES)
In the past seven days, how have your caring responsibilities been affected?
READ OUT ALL ANSWER CATEGORIES AND CODE ALL THAT APPLY
1. I am spending more time caring for others
2. 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)
3. I am having to organise remote support for someone vulnerable (for example, online grocery shopping)
4. Paid care support is reduced (for example, childcare, respite care, social care support)
5. Other (please specify)

COV_C28MSp  ASK IF COV_C28M = Other
Please specify the other ways in which Coronavirus (COVID-19) has affected your caring responsibilities...STRING[200]
In the past seven days, how has your well-being been affected?

READ OUT ALL ANSWER CATEGORIES AND CODE ALL THAT APPLY

1. Spending too much time alone
2. Spending too much time with others in household
3. No one to talk to about my worries
4. Strain on my personal relationships
5. Strain on my work relationships
6. Feeling stressed or anxious
7. Feeling bored
8. Feeling lonely
9. Finding working from home difficult
10. Making my mental health worse
11. Unable to exercise as normal
12. Feeling worried about the future
13. Other (please specify)

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

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

1. Less than one month
2. 1 to 3 months
3. 4 to 6 months
4. 7 to 9 months
5. 10 to 12 months
6. More than a year
7. Never
**COV_AfterPan**  ASK ALL
Which of the following activities have you been doing more of since the start of the coronavirus (COVID-19) pandemic?
READ OUT ALL ANSWER CATEGORIES AND CODE ALL THAT APPLY
1. Working from home
2. Online grocery shopping
3. Online shopping for other goods
4. Ordering take away food
5. Home hair or beauty treatments including hair cuts
6. Video calls with family or friends
7. Avoiding public transport
8. Avoiding crowded places
9. Other (please specify)
10. None of the above  (**EXCLUSIVE CODE**)  

**COV_AfterPanSp**  Ask if COV_afterpan = other
Please specify any other activities you have been doing more of since the start of the coronavirus (COVID-19) pandemic.  STRING[200]  

**COV_Cont**  Ask IF COV_AfterPan = options 1-9
Which of these activities do you think you will keep doing more often after the end of the coronavirus (COVID-19) pandemic than you did before it?
READ OUT ALL ANSWER CATEGORIES AND CODE ALL THAT APPLY
1. Working from home
2. Online grocery shopping
3. Online shopping for other goods
4. Ordering take away food
5. Home hair or beauty treatments including hair cuts
6. Video calls with family or friends
7. Avoiding public transport
8. Avoiding crowded places
9. Other (please specify)
10. None of the above  (**EXCLUSIVE CODE**)  

**COV_ContSp**  Ask if COV_Cont = other
Please specify any other activities you think you will keep doing more often after the coronavirus pandemic (COVID-19) than you did before it.  STRING[200]  

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**COV_IntHom.**  
ASK ALL  
At this time, how comfortable or uncomfortable would you be letting a survey interviewer into your home to conduct an interview?  
1. Very comfortable  
2. Comfortable  
3. Neither comfortable nor uncomfortable  
4. Uncomfortable  
5. Very uncomfortable  
6. Not applicable  

**COV_IntRea.**  
SK IF COV_IntHom = 4 or 5 (Uncomfortable/Very Uncomfortable)  
What are the reasons that you would be uncomfortable letting a survey interviewer into your home to conduct an interview?  
READ OUT ALL ANSWER CATEGORIES AND CODE ALL THAT APPLY  
1. I'm worried about spreading the coronavirus (COVID-19)  
2. I'm worried about catching the coronavirus (COVID-19)  
3. Other reasons  

**COV_IntReaSp.**  
Ask if COV_IntRea = other  
Please specify your other reasons.  
STRING[200]  

**COV_IntroC3**  
The next set of questions are about the UK economy and your household finances in view of the general economic situation.  

**COV_C39**  
ASK ALL  
How do you expect the financial position of your household to change over the next 12 months?  
1. Get a lot better  
2. Get a little better  
3. Stay the same  
4. Get a little worse  
5. Get a lot worse  

**COV_Debt.**  
ASK ALL  
Borrowing or using credit includes credit cards, overdrafts, or taking out loans, borrowing from friends, family, neighbours or other personal connections. Have you had to borrow more money or use more credit than usual since the coronavirus (COVID-19) outbreak?  
1. Yes  
2. No
COV_Money    ASK IF COV_Debt = Yes
How much more money have you borrowed or spent using credit since the coronavirus (COVID-19) outbreak?
1. Less than £250
2. £250 to £499
3. £500 to £749
4. £750 to £999
5. £1,000 to £1,999
6. £2,000 to £2,999
7. £3,000 to £3,999
8. £4,000 to £4,999
9. £5,000 to £9,999
10. £10,000 to £24,999
11. £25,000 or more

COV_Mortgage.  ASK ALL
Have you received a mortgage payment holiday since the coronavirus (COVID-19) outbreak?
1. Yes
2. No
3. Not applicable

COV_IntroC5
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.

COV_C47    ASK ALL
In the past seven days, have you self-isolated because of the Coronavirus (COVID-19) outbreak?
1. Yes
2. No

COV_C48    ASK ALL
In the past seven days, has anyone else living in your household self-isolated because of the Coronavirus (COVID-19) outbreak?
1. Yes
2. No
3. Not applicable
COV_IsoAw ASK ALL
People are advised to self-isolate at home if they are showing signs of the coronavirus (COVID-19), even if they have had the coronavirus (COVID-19) in the past. Were you aware that people who have already had the coronavirus (COVID-19) should self-isolate if they start to show symptoms again?
1. Yes
2. No

COV_IntroC6
The next question is about Social distancing, which is defined as trying to avoid contact with other people (keeping at least 2 metres (3 steps) from others).

COV_C51 ASK ALL
In the past seven days, have you avoided contact with older people or other vulnerable people because of the Coronavirus (COVID-19) outbreak?
1. Yes
2. No

COV_C52 ASK IF COV_C51 = 1
Do you have care responsibilities for any of the people you may have had to avoid contact with?
1. Yes
2. No

COV_ImpSocDis ASK ALL
How important or unimportant do you think social distancing is in slowing the spread of the coronavirus (COVID-19)?
1. Very important
2. Important
3. Neither important nor unimportant
4. Unimportant
5. Very unimportant

COV_ImpVent ASK ALL
How important or unimportant do you think ventilation is in slowing the spread of the coronavirus (COVID-19)? For example, opening windows when meeting others indoors.
1. Very important
2. Important
3. Neither important nor unimportant
4. Unimportant
5. Very unimportant
**COV_C72**  ASK ALL
Do you feel like you have enough information about how to protect yourself from the Coronavirus (COVID-19)?
1. Yes
2. No

**COV_UKInfoB**  ASK ALL
Do you feel like you have enough information about government plans for easing restrictions due to the coronavirus (COVID-19) outbreak?
1. Yes
2. No

**COV_GovM2.**  ASK ALL
To what extent do you support or oppose the easing of stay-at-home measures put in place in the country where you live?
1. Strongly support
2. Tend to support
3. Neither support nor oppose
4. Tend to oppose
5. Strongly oppose

**FOLLOW1.**  ASK ALL
Since the outbreak of the Coronavirus (COVID-19) pandemic, the Northern Ireland Executive has set out regulations and guidelines on how to respond to the Coronavirus (COVID-19) pandemic. This has covered a range of areas including social distancing, restrictions on meeting people, socialising and travel, self-isolation and the wearing of face coverings. 
To what extent, if at all, are you personally following the Northern Ireland Executive’s regulations and guidelines on how to respond to the Coronavirus (COVID-19) pandemic?
Please answer honestly and remember that all answers to this survey are anonymous.

**RUNNING PROMPT**
1. Completely
2. Nearly all the time
3. Most of the time
4. About half of the time
5. Less than half of the time
6. Hardly any of the time
7. Not at all
8. Not aware of any regulations and guidelines
FOLLOW2. ASK IF FOLLOW1 = Option 2-7
You said you personally haven’t always followed the Northern Ireland Executive’s regulations and guidelines on how to respond to the Coronavirus (COVID-19) pandemic. In which of the following way(s) have you not followed the regulations or guidelines?
READ OUT ALL ANSWER CATEGORIES AND CODE ALL THAT APPLY
1. I’ve not always abided by social distancing rules, keeping 1-2 metres from other people
2. I’ve visited friends or family who I was not allowed to visit
3. I’ve not worn a facemask in shops (either at all or properly)
4. I’ve not followed restrictions to stay in my home during a Lockdown
5. I’ve been socialising in groups larger than those allowed by the NI Executive
6. I’ve visited someone I’m in a romantic relationship with who I was not allowed to visit
7. I’ve travelled further than necessary or further than I’ve been allowed to by the NI Executive
8. I’ve not worn a facemask on public transport (either at all or properly)
9. I’ve attended a funeral with more people than allowed in attendance
10. I’ve stayed in a pub/bar/restaurant past the curfew
11. I’ve not self-isolated when returning from a foreign country when I’m meant to
12. I’ve not self-isolated when I’ve developed coronavirus symptoms
13. I’ve not self-isolated when told to by the Public Health Agency’s contact tracing service
14. I’ve attended a wedding with more people than allowed in attendance
15. In some other way

FOLLOWOth. ASK IF FOLLOW2 = Opt15 (other)
In which other way(s) have you not followed the regulations or guidelines? STRING

COV_HomVis. ASK ALL
In the past seven days, have you had family or friends visit you at your home?
1. Yes
2. No
COV_MetDis.  ASK ALL
In the past seven days, when you have met up with people, how often have you maintained social distancing?
1. Always
2. Often
3. Sometimes
4. Not very often
5. Never
6. I have not met up with people in the last seven days

COV_Leave  ASK ALL
At this time, how comfortable or uncomfortable do you feel about leaving your home due to the coronavirus (COVID-19 outbreak)?
1. Very comfortable
2. Comfortable
3. Neither comfortable nor uncomfortable
4. Uncomfortable
5. Very uncomfortable
6. Not applicable

COV_HomRe  ASK ALL
In the past seven days, have you left your home for any reason?
1. Yes
2. No
COV_C84M  ASK IF Cov_HomRe = Yes
In the past seven days, for what reasons have you left your home?
READ OUT ALL ANSWER CATEGORIES AND CODE ALL THAT APPLY
  1. Key worker, travelling to and from work
  2. Non-key worker, travelling to and from work
  3. For voluntary work
  4. Meeting up with people in a public place
  5. Meeting up with people in a personal place (for example, visiting family and friends at their home or yours)
  6. Taking part in a regular indoor activity (for example, attending an exercise class or place of worship)
  7. To take children to or from school (or for other activities)
  8. For one form of exercise a day, for example a run, walk, or cycle – alone or with members of your household
  9. Visit a tourist attraction
  10. Shopping for basic necessities (for example food and medicine)
  11. Any medical need, or to provide care or to help a vulnerable person
  12. To run errands (for example, pay bills, withdraw money from bank, visit post office)
  13. Travel within the UK for holidays or short breaks
  14. Travel outside of the UK for work
  15. Travel outside of the UK for holidays or short breaks
  16. Other (please specify)
  17. None of the above

COV_C84MSp  ASK IF COV_C84M = Other
Please specify the reasons you have left your home STRING[200]

COV_WashH  ASK IF Cov_HomRe = Yes
In the past seven days, how often did you wash your hands with soap and water straight away after returning home from a public place?
  1. Always
  2. Often
  3. Sometimes
  4. Not very often
  5. Never
**COV_ImpHndWsh**  ASK ALL
How important or unimportant do you think hand washing is in slowing the spread of the coronavirus (COVID-19)?

1. Very important
2. Important
3. Neither important nor unimportant
4. Unimportant
5. Very unimportant

**COV_FacCov**  ASK ALL
In the past seven days, have you used a face covering when outside your home to help slow the spread of the coronavirus (COVID-19)?

1. Yes
2. No

**COV_ImpFceCov**  ASK ALL
How important or unimportant do you think wearing a face covering is in slowing the spread of the coronavirus (COVID-19)?

1. Very important
2. Important
3. Neither important nor unimportant
4. Unimportant
5. Very unimportant

**GHQQ1.**  ASK ALL
We should like to know how your health has been in general over the past few weeks. Please answer ALL the questions by selecting the answer which you think most applies to you.

Have you recently been able to concentrate on whatever you are doing

RUNNING PROMPT

1. Better than usual
2. Same as usual
3. Less than usual
4. Much less than usual?

**GHQQ2.**  ASK ALL
Have you recently lost much sleep over worry

RUNNING PROMPT

1. Not at all
2. No more than usual
3. Rather more than usual
4. Much more than usual?
GHQQ3. ASK ALL
Have you recently felt that you are playing a useful part in things
RUNNING PROMPT
 1  More so than usual
 2  Same as usual
 3  Less so than usual
 4  Much less useful?

GHQQ4. ASK ALL
Have you recently felt capable of making decisions about things
RUNNING PROMPT
 1  More so than usual
 2  Same as usual
 3  Less so than usual
 4  Much less capable?

GHQQ5. ASK ALL
Have you recently felt under constant strain
RUNNING PROMPT
 1  Not at all
 2  No more than usual
 3  Rather more than usual
 4  Much more than usual?

GHQQ6. ASK ALL
Have you recently felt you couldn't overcome your difficulties
RUNNING PROMPT
 1  Not at all
 2  No more than usual
 3  Rather more than usual
 4  Much more than usual?

GHQQ7. ASK ALL
Have you recently been able to enjoy your normal day-to-day activities
RUNNING PROMPT
 1  More so than usual
 2  Same as usual
 3  Less so than usual
 4  Much less able?
GHQQ8.  ASK ALL
Have you recently been able to face up to your problems
RUNNING PROMPT
1  More so than usual
2  Same as usual
3  Less so than usual
4  Much less able?

GHQQ9.  ASK ALL
Have you recently been feeling unhappy and depressed
RUNNING PROMPT
1  Not at all
2  No more than usual
3  Rather more than usual
4  Much more than usual?

GHQQ10.  ASK ALL
Have you recently been losing confidence in yourself
RUNNING PROMPT
1  Not at all
2  No more than usual
3  Rather more than usual
4  Much more than usual?

GHQQ11.  ASK ALL
Have you recently been thinking of yourself as a worthless person
RUNNING PROMPT
1  Not at all
2  No more than usual
3  Rather more than usual
4  Much more than usual?

GHQQ12.  ASK ALL
Have you recently been feeling reasonably happy, all things considered
RUNNING PROMPT
1  More so than usual
2  Same as usual
3  Less so than usual
4  Much less happy?
ETHNIC What is your ethnic group?

1. White
2. Irish Traveller
3. White and Black Caribbean
4. White and Black African
5. White and Asian
6. Other Mixed/Multiple background
7. Indian
8. Pakistani
9. Bangladeshi
10. Chinese
11. Other Asian background
12. African
13. Caribbean
14. Other Black/African/Caribbean
15. Arab
16. Any other ethnic background

relq2 What is your religion?

1. No religion
2. Catholic
3. Presbyterian
4. Church of Ireland
5. Methodist
6. Baptist
7. Free Presbyterian
8. Brethren
9. Protestant - not specified
10. Christian - not specified
11. Buddhist
12. Hindu
13. Jewish
14. Muslim
15. Sikh
16. Any other religion, please describe

relq2ot (ASK IF relq2 = other) Please describe your religion.
Natind How would you describe your national identity?

PLEASE CHOOSE ALL THAT APPLY

1. British
2. Irish
3. Northern Irish
4. English
5. Scottish
6. Welsh
7. Other

Natindo (ASK IF Natind = other) Please describe...STRING[60]

RecallP ASK IF ONSFollow = Disagree to follow up

We may in the future invite you to take part in other surveys, either carried out by ourselves or one of our research partners. If we do, we will write to inform you and you will be free to decide at the time whether you want to take part.

1. Objection
2. No objection