

Precautions / Recommendations / Difficulty / Necessity

Thinking about the actions some people did or avoided, could you tell how difficult and necessary they were?*

Difficult but necessary	Difficult but not really necessary	Easy but necessary	Easy but not really necessary	No Response
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Randomized Version 1 or 2

- 2 Wash your hands with soap
- 1 Use hand sanitizer
- 1 Pray or meditate
- 2 Take your temperature
- 1 Cough or sneeze into your elbow or tissue
- 2 Avoid touching your face with your hands
- 1 Disinfect spaces in your living area
- 2 Delay opening or disinfect mail / packages
- 1 Stay at least six feet away from other people
- 2 Work or study at home rather than going to work or school
- 1 Avoid having visitors at your own residence
- 2 Only exercise outside alone (or with people you live with)
- 2 Stay at home
- 2 Avoid close contact with people who are sick
- 1 Avoid close contact with people who could be high-risk
- 1 Avoid touching door knobs and surfaces outside your home
- 1 Avoid shaking hands
- 1 Avoid going to a friend, neighbor, or relative's residence
- 2 Cancel or avoid going to a doctor, clinic, or hospital
- 1 Avoid going to restaurants/bars even when they were open
- 2 Avoid social gatherings
- 1 Avoid going out for shopping
- 2 Avoid religious services even when they were open
- 2 Wear gloves when you go out of your home
- 2 Cancel or postpone travel
- 1 Avoid letting your children play with other children
- 1 Avoid public transportation
- 1 Avoid close interactions with people you live with
- 2 Wear a facemask whenever I left the house
- 1 Wear a facemask when I was at work or school

2 Wear a facemask whenever I entered a store or restaurant

2 Wear a facemask whenever I was within 6 feet of another person

Personal Experience with Coronavirus

2) Have you been tested for the coronavirus and what was the result? *

- I have been tested and I tested positive (I had coronavirus)
- I have been tested and I tested negative (I did not have coronavirus)
- I have been tested but I do not know the result
- I have not been tested
- No Response

3) Whether or not you have had a test, has any healthcare professional diagnosed you as having or probably having the coronavirus?

*

- Yes
- No
- No Response

4) Do you personally think you've been infected with the coronavirus? *

- Yes
- No
- No Response

5)

Have you been tested for the coronavirus **antibodies** and what was the result?

*

- I have been tested and I tested positive (I had antibodies against coronavirus)
- I have been tested and I tested negative (I did not have antibodies)
- I have been tested but I do not know the result
- I have not been tested

No Response

6) How serious were your symptoms compared to a common cold?*

- I did not experience symptoms
- Less than a common cold
- About the same as a common cold
- Worse than a common cold
- Much worse than a common cold
- Hospitalized
- No Response

7) Where did you seek medical care for coronavirus? *

- I did not seek care
- Hospital or emergency room
- Health clinic
- My primary care doctor or another doctor
- Other
- No Response

8) Do you know who you got it from?*

- fairly sure
- not exactly

9) Who most likely gave it to you?*

- Someone I lived with
- Family member I did not live with
- Friend or acquaintance I did not live with

- Someone I worked with
- A client or customer at my workplace
- Stranger
- Health care professional
- Service worker (shopper, cashier, waiter)

**10) Even if you don't know for sure, who most likely gave it to you?
(may check more than one)***

- Someone I lived with
- Family member I did not live with
- Friend or acquaintance I did not live with
- Someone I worked with
- A client or customer at my workplace
- Stranger
- Health care professional
- Service worker (shopper, cashier, waiter)

11) Do you know where you got it?*

- fairly sure
- not exactly

12) Where did you most likely get it?*

- In my place of residence
- In the residence of another person
- Restaurant or bar
- Outdoor event such as concert, wedding
- Indoor event such as church, performance
- Work or school

- Hospital, clinic, medical facility
- Shop or store

**13) Even if you don't know for sure, where did you most likely get it?
(may check more than one)***

- In my place of residence
- In the residence of another person
- Restaurant or bar
- Outdoor event such as concert, wedding
- Indoor event such as church, performance
- Work or school
- Hospital, clinic, medical facility
- Shop or store

14) How likely is it that you were infected by the following?*

	Very likely	Somewhat likely	Somewhat unlikely	Very unlikely	No Response
Touching infected droplets on surfaces such as doorknobs	()	()	()	()	()
Direct contact with an infected person (handshake or hug)	()	()	()	()	()

Close prolonged contact with someone who had it	()	()	()	()	()
Breathing particles from someone who was far away	()	()	()	()	()
Being around an infected person who showed no symptoms	()	()	()	()	()
Being around an infected person who had visible symptoms	()	()	()	()	()
Being in an empty room where an infected person had been	()	()	()	()	()