

## Consent - block 1



### The COVID-19 pandemic and your life

We're inviting you to take part in a survey about coronavirus (COVID-19). It's called **TeenCovidLife**. We want to know how COVID-19 is affecting you. If you want to take part, you'll be asked how it has changed things for you at home, at school, and your plans for the future. The survey will also ask about your health and well-being.

If you took part in survey 1 or survey 2 and gave us your email, we've sent you an invite. Please use the link sent to you. It will make the survey shorter and easier to finish.

**If you didn't take part in any TeenCovidLife survey, or didn't give us your email, you can still take part now. Please keep reading.**

You can read more information about the project on the next page. You'll be asked 2 questions after you have read it all. This is not a test. It is to make sure we explain our study well. It also checks that you know what you're agreeing to.

PRESS **NEXT** TO READ MORE ABOUT THE STUDY

## **Why are we doing this research?**

Our survey wants to know how COVID-19 is affecting you. Once we know, we can think about how to address the concerns of young people. We can then support young people where necessary and prepare for the future. You can find out more about the survey at the link below.

## **[What is CovidLife? | The University of Edinburgh](#)**

## **What is involved?**

We'll start by asking some general questions about you. We'll ask for your email address. You don't need to provide an email address if you don't want to. We won't ask for any other details that identify you. We will also want to know your age. If you go to school, we'll ask which year you are in at school. Most questions will ask you to pick your answer from a list of options. Some questions are specific to COVID-19. Other questions are more general. We'll ask about how your life has changed and how you are coping with these changes. We hope you'll be able to answer them all. You can skip any you don't want to answer.

This survey will take about 20-25 minutes to complete.

We'll email you about future surveys, if you provide an email address. This allows us to see the long term effects of COVID-19. We'll do a final survey after the restrictions are lifted. It's up to you whether you do any other surveys.

The information you provide will be looked at by the **Generation Scotland** team. They work at the **University of Edinburgh**. Other researchers and **NHS** partners will also be able to work on this information. Only anonymised data will be shared with other researchers, which means that no-one will know which responses were yours. You can find more information about these groups at the links below.

## **[Generation Scotland | The University of Edinburgh](#)**

## **[University of Edinburgh | The University of Edinburgh](#)**

## [NHS sites | NHS](#)

### **Who can take part?**

Taking part is open to **anyone in Scotland aged 12–17 years old**. You must have access to the internet to join.

### **What will happen to the details I give you?**

All of your details will be safely and securely stored. If you provide your email address, it will be kept separate from your answers. Your email won't be given to anyone. We'll also ask for the first part of your home postcode and the name of your school. This will tell us about the area you live in. It can tell us about shops, transport and parks.

We'll remove any identifying information before researchers can look at it. We'll report what we find in tables and graphs. These will be found on **our website** and social media. The local government may also receive a report. We'll also write a final report which you'll be able to read online. The report will be at the link below:

## [What we've found | The University of Edinburgh](#)

### **How do I stop taking part?**

You can email us to stop taking part at any time. You don't have to give a reason.

### **Ethics approval**

In the UK, **ethics committees** must review health research studies before they start. They check that our research is well made and protects our volunteers. This study was approved by the **East of Scotland NHS Research Ethics Committee**. They have said it is OK for us to do this research. You can read more at the link below.

## [East of Scotland NHS Research Ethics Committee | NHS Tayside](#)

### **How long will my data be stored for?**

Once the study has finished, your answers will be **securely stored**. They will stay with the University of Edinburgh for at least ten years. You can read more at the link below.

## [FAQs | The University of Edinburgh](#)

### **Concerns**

If you're worried about how your data is looked after, you can email the University of Edinburgh at [dpo@ed.ac.uk](mailto:dpo@ed.ac.uk). You can also email [dpo@ed.ac.uk](mailto:dpo@ed.ac.uk) if you'd like to talk to someone about your rights.

If you have any other worries about the study, you can get in touch with the Generation Scotland team at: [genscot@ed.ac.uk](mailto:genscot@ed.ac.uk)

### **Questions for you**

Once you've answered these questions correctly, you can complete the consent page. Don't worry if you get a question wrong. You can read the information again and come back to the questions. You can always get in touch to ask us for more information. If there's anything we need to explain more clearly, we'd be happy to help. If you agree to take part, you'll be taken directly to the survey. You can start answering questions straight away.

### **Question 1**

After reading the information above, which statement do you understand to be **TRUE**?

Please select **one** option:

- All survey questions will be about COVID-19
- The survey will include questions about COVID-19 and some more general questions
- There will only be one survey
- The survey will take an hour to complete

### **Question 2**

After reading the information above, which statement do you understand to be

**FALSE**?

Please select **one** option:

- In the future, I may be contacted to complete more surveys
- I do not have to take part in additional surveys or studies in the future
- I can withdraw consent at any time by contacting Generation Scotland
- If I am re-contacted by Generation Scotland, I must complete additional surveys

To take part you must complete the **consent form**. After this, we can take you to the study.

PRESS **NEXT** TO BE TAKEN TO THE CONSENT FORM

### **Consent form**

Please read the following statements and tick the boxes to agree

- 1 - I understand that taking part in this project is voluntary.
- 2 - I live in Scotland.
- 3 - I am aged 12 – 17 years old.
- 4 - I understand that if I wish to be sent future surveys, I need to provide an email address.
- 5 - I understand that my results will not identify me. I know they will be included in research. I also understand it will not be possible to remove or change my answers once submitted.
- 6 - I understand I can stop taking part in future surveys at any point.
- 7 - I understand that the data gathered in this study will be stored securely. I know it will not be possible to identify me in any reports from this research.
- 8 - I agree to take part in this Generation Scotland survey. I understand that by checking this box I am giving my signature to this agreement.

### **IntroNEW - block 1**

## Introduction

Thank you for agreeing to complete this **TeenCovidLife** survey.

Please answer all questions as well as you can. Your answers will **not be used to identify you**. We will not share your answers with your parents or guardians.

Some questions are personal. We hope that you will answer them all. Some questions have a 'prefer not to answer' option. You can choose this if you don't want to tell us this information. You can skip any question you don't want to answer.

This survey will take **about 20 minutes** to complete. Please complete the survey in one sitting.

Responses cannot be changed once you have pressed the 'Next' button. **Please be sure you are happy with your answers before proceeding.**

PRESS **NEXT** TO START THE SURVEY

## **Background Info - block 1**

### Information about you

To start, we are going to ask you for some information about you.

Please enter your email address

Your email address will only be used to send you TeenCovidLife surveys and to keep you informed of our results. We **will not** pass this on to third parties.

Email address

Confirm email address

What are the first 5 digits of your postcode? (e.g., AB12 3\*\*)

What was the sex you were assigned at birth?

- Male
- Female
- Prefer not to answer

Is this the same as your gender identity?

- Yes
- No

What is your gender identity?

- Male / Man
- Female / Woman
- Non-binary
- Other (please specify)
- Prefer not to answer

How old are you?

Are you a secondary school pupil?

- Yes
- No

## School and Work - block 1

Which year are you in at school?

Were you a school pupil last year (i.e., did you leave school in 2020)?

- Yes
- No

What are you doing now or planning to do next?

- Studying at college
- Studying at university
- In employment
- Apprentice
- Something else
- Don't know

Have your education or employment plans changed as a result of COVID-19?

- Yes
- No
- Don't know
- Prefer not to say

Did you have a job **before** the first COVID-19 lockdown?

- Yes
- No

Do you have a job **at the moment**?

- Yes
- No

Have any of the following happened to you **since** the COVID-19 pandemic started?

- Lost job
- Furloughed
- Pay cut
- Assigned as a key worker
- None of the above

Does your work require you to be in **close contact (i.e., within 2 meters) with others**, who you do not live with, including while travelling to work?

- All of the time
- Most of the time
- Some of the time

- Rarely
- Not at all
- Doesn't apply to me

In your place of work, do you have access to necessary personal protective equipment (PPE)?

- All of the time
- Most of the time
- Some of the time
- Rarely
- Not at all
- Doesn't apply to me

## You and your family - block 1

### You and your family.

We would like to know a little about the people that you live with.

**Including yourself**, how many people live in your household at the moment?

If you are part of more than one household, please choose the one you spend the most time in.

Who lives in your household with you?

If you are part of more than one household, please choose the one you spend the most time in.

Please select all that apply

- Parent(s)
- Stepparent(s)
- Parent's girlfriend or boyfriend
- Guardian(s) - for example, a foster carer
- Brother(s) and/or sister(s)
- Stepbrother(s) and/or stepsister(s)
- Grandparent(s)
- Other family member(s)
- Child/children
- Paid caregiver(s) - for example, a nanny
- Friend(s) or other non-family member(s)
- I live alone

### **Pets - block 1**

Do you have any pets?

- Yes
- No
- Prefer not to say

What kind of pet(s) do you have?

- Dog(s)
- Cat(s)
- Other pet(s)

Please indicate how much you agree with the following statements.

My pet(s) helps me cope emotionally during the COVID-19 pandemic.

- Strongly disagree
- Disagree
- Neutral
- Agree
- Strongly agree

My pet(s) keeps me fit and active during the COVID-19 pandemic.

- Strongly disagree
- Disagree
- Neutral
- Agree
- Strongly agree

My pet(s) has **positive effects** on my family at this time.

- Strongly disagree
- Disagree
- Neutral
- Agree
- Strongly agree

My pet(s) **causes problems** in my family at this time.

- Strongly disagree
- Disagree
- Neutral

- Agree
- Strongly agree

## Covid-19 and your life - block 1

### COVID-19 and your life

Now we would like to ask you some questions about how you are feeling about COVID-19 and what effect it has had on your life.

Do you think that **you** have had, or currently have COVID-19?

- Yes, I was tested for COVID-19 and it was positive
- Yes, I think I had COVID-19 but was not tested
- No

Do you think **anyone else** that you live with has had, or currently has COVID-19?

- Yes, they were tested for COVID-19 and it was positive
- Yes, they think they had COVID-19 but were not tested
- No

On a scale of 1 (no threat at all) to 10 (very serious public health threat), how serious a **public health threat** do you think COVID-19 is or might become?

Do you find the **Scottish Government** guidance on COVID-19 **easy** to understand?

- Extremely easy
- Somewhat easy
- Neither easy nor difficult
- Somewhat difficult
- Extremely difficult
- I haven't seen or read any of the Scottish Government guidance

Do you find the **UK Government** guidance on COVID-19 **easy** to understand?

- Extremely easy
- Somewhat easy
- Neither easy nor difficult
- Somewhat difficult
- Extremely difficult
- I haven't seen or read any of the UK Government guidance

Overall, what type of impact has the COVID-19 pandemic had on your life?

- Very negative impact
- Quite negative impact
- Neither negative nor positive impact
- Quite positive impact
- Very positive impact

## Your feelings - block 1

## **Your feelings**

Now we are going to ask you some questions to understand how you have been feeling recently.

How often have you felt lonely **during the past week**?

- None of the time
- Some of the time
- Most of the time
- All of the time
- Don't know
- Prefer not to answer

**Over the past week**, how often have you felt nervous or stressed because of COVID-19?

- Never
- Some of the time
- Most of the time
- All of the time
- Prefer not to answer

Please indicate for each of the five statements, which is **closest** to how you have been feeling during the **last two weeks**.

I have felt cheerful and in good spirits

- At no time

- Some of the time
- Less than half of the time
- More than half of the time
- Most of the time
- All of the time
- Prefer not to say

I have felt calm and relaxed

- At no time
- Some of the time
- Less than half of the time
- More than half of the time
- Most of the time
- All of the time
- Prefer not to say

I have felt active and vigorous

- At no time
- Some of the time
- Less than half of the time
- More than half of the time
- Most of the time
- All of the time
- Prefer not to say

I woke up feeling fresh and rested

- At no time

- Some of the time
- Less than half of the time
- More than half of the time
- Most of the time
- All of the time
- Prefer not to say

My daily life has been filled with things that interest me

- At no time
- Some of the time
- Less than half of the time
- More than half of the time
- Most of the time
- All of the time
- Prefer not to say

## Your feelings - block 2

Select one option to indicate how much you disagree or agree with each of the statements.

I tend to bounce back quickly after hard times

- Strongly Disagree
- Disagree
- Neutral
- Agree
- Strongly Agree

I have a hard time making it through stressful events

- Strongly Disagree
- Disagree
- Neutral
- Agree
- Strongly Agree

It does not take me long to recover from stressful events

- Strongly Disagree
- Disagree
- Neutral
- Agree
- Strongly Agree

It is hard for me to snap back when something bad happens

- Strongly Disagree
- Disagree
- Neutral
- Agree
- Strongly Agree

I usually come through difficult times with little trouble

- Strongly Disagree
- Disagree
- Neutral
- Agree

Strongly Agree

I tend to take a long time to get over set-backs in life

Strongly Disagree

Disagree

Neutral

Agree

Strongly Agree

### Your feelings - block 3

The questions in the next section ask you about your feelings and thoughts **during the last month**. In each case, you will be asked to indicate by selecting how often you felt or thought a certain way.

**In the last month** how often have you...

...felt that you were unable to control the important things in your life?

Never

Almost never

Sometimes

Fairly often

Very often

...felt confident about your ability to handle your personal problems?

Never

Almost never

- Sometimes
- Fairly often
- Very often

...felt that things were going your way?

- Never
- Almost never
- Sometimes
- Fairly often
- Very often

...felt difficulties were piling up so high that you could not overcome them?

- Never
- Almost never
- Sometimes
- Fairly often
- Very often

## **Life Satisfaction - Block 1**

### **How satisfied are you with your life**

Next, we'd like to know how you feel about things in your life **now**.

These questions use a scale from 0 to 10. On this scale 0 means 'very unhappy', 5 means 'not happy or unhappy', and 10 means 'very happy'.

Select the answer that best fits how you feel about things in your life.

How happy are you with your life as a whole?

How happy are you with your relationships with your family?

How happy are you with your relationships with your friends?

How happy are you with what may happen to you later in your life (in the future)?

How happy are you with the school that you go to?

### **Covid worry - block 1**

**In the past month**, have you been worried about:

Your plans for the future?

- Not at all worried
- Slightly worried

- Moderately worried
- Very worried
- Extremely worried
- Doesn't apply to me

Losing your job?

- Not at all worried
- Slightly worried
- Moderately worried
- Very worried
- Extremely worried
- Doesn't apply to me

## School - block 1 - Demographics

### School

The next questions are about school.

We would like to understand how you feel about school.

What is the local authority (council) for your school?

This question is about **where your school is**.

What school do you attend within Aberdeen City?

Schools are listed in alphabetical order

What school do you attend within Aberdeenshire?  
Schools are listed in alphabetical order

What school do you attend within Angus?  
Schools are listed in alphabetical order

What school do you attend within Argyll & Bute?  
Schools are listed in alphabetical order

What school do you attend within Clackmannanshire?  
Schools are listed in alphabetical order

What school do you attend within Dumfries & Galloway?  
Schools are listed in alphabetical order

What school do you attend within Dundee City?  
Schools are listed in alphabetical order

What school do you attend within East Ayrshire?

Schools are listed in alphabetical order

What school do you attend within East Dunbartonshire?

Schools are listed in alphabetical order

What school do you attend within East Lothian?

Schools are listed in alphabetical order

What school do you attend within East Renfrewshire?

Schools are listed in alphabetical order

What school do you attend within Edinburgh City?

Schools are listed in alphabetical order

What school do you attend within Falkirk?

Schools are listed in alphabetical order

What school do you attend within Fife?

Schools are listed in alphabetical order

What school do you attend within Glasgow City?  
Schools are listed in alphabetical order

What school do you attend within the Highlands?  
Schools are listed in alphabetical order

What school do you attend within Inverclyde?  
Schools are listed in alphabetical order

What school do you attend within Midlothian?  
Schools are listed in alphabetical order

What school do you attend within Moray?  
Schools are listed in alphabetical order

What school do you attend within Na h-Eileanan Siar?  
Schools are listed in alphabetical order

What school do you attend within North Ayrshire?

Schools are listed in alphabetical order

What school do you attend within North Lanarkshire?

Schools are listed in alphabetical order

What school do you attend within Orkney Islands?

Schools are listed in alphabetical order

What school do you attend within Perth & Kinross?

Schools are listed in alphabetical order

What school do you attend within Renfrewshire?

Schools are listed in alphabetical order

What school do you attend within the Scottish Borders?

Schools are listed in alphabetical order

What school do you attend within the Shetland Islands?

Schools are listed in alphabetical order

What school do you attend within South Ayrshire?

Schools are listed in alphabetical order

What school do you attend within South Lanarkshire?

Schools are listed in alphabetical order

What school do you attend within Stirling?

Schools are listed in alphabetical order

What school do you attend within West Dunbartonshire?

Schools are listed in alphabetical order

What school do you attend within West Lothian?

Schools are listed in alphabetical order

Do you attend any of the following schools?

Schools are listed in alphabetical order

What is the name of your school?

## School - block 2 - Feelings

We are going to ask you about bullying at school. We are asking this because we want to understand how you find school.

How often do other children or young people bully you in school?

- All of the time
- Some of the time
- Never bullied
- Prefer not to say

We've collected some trusted webpages to provide help and advice for young people. These can be found at the link below, and include resources for young people who are being bullied.

[\*\*Useful COVID-19 Support Links | The University of Edinburgh\*\*](#)

How do you feel about school at present?

- I like it a lot
- I like it a bit
- I don't like it very much
- I don't like it at all
- Prefer not to say

How pressured (stressed) do you feel by the schoolwork you have to do?

- Not at all
- A little
- Some
- A lot
- Prefer not to say

### **School - block 3 - Online\_F2F**

We would like to learn how you feel about the different types of schooling you may have taken part in over the past year.

What type of schooling have you **most preferred** over the past year?

- Fully remote (all lessons are online and schoolwork is completed at home)
- "Hybrid" - partly remote and partly in person
- Fully in person

What is the main reason you preferred **fully remote schooling**?

- I don't like the social environment at school
- I learn better remotely
- I have more technology resources at home than I do at school
- I think COVID-19 is too much of a threat
- I can study my subjects at home easily

- It gives me more time for my hobbies
- I can spend more time with my family

What is the main reason you preferred **fully in-person schooling**?

- I miss social interaction with friends and other students
- I learn better in person
- My school has more technology resources than I do at home
- I participate in a free breakfast or lunch programme at school
- I don't think COVID-19 is much of a threat
- My subjects are difficult to study at home
- I want to take part in extracurricular activities, such as sports and afterschool clubs
- It gets me out of the house

Do you have the technology you need to be able to do your schoolwork remotely, if needed? For example, a laptop, internet access.

- Yes
- No

Over the past year, have you been given a device to do your schoolwork at home by your school or initiatives such as Connecting Scotland?

- Yes
- No

How much better or worse do you think online learning is compared to in-person schooling?

- Online learning is much worse
- Online learning is worse
- They're about the same
- Online learning is better
- Online learning is much better

What have been the biggest challenges for you with managing your schoolwork this school year?

- Learning remotely
- Uncertainty of pandemic
- Emotional upheaval
- Being unable to access my teacher(s)
- Unreliable internet
- Access to books and other school supplies
- Access to devices
- Cancelled exams
- None

## School - block 4 - Returning

We are interested in how the COVID-19 pandemic has impacted young people's experience of school.

Please tell us how much you **agree or disagree** with the following statement:

It is safe for me and other pupils to return to school full-time

- Strongly agree

- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree

I worry that I am not on track with my studies

- Not at all true of me
- A little true of me
- Pretty much true of me
- Very much true of me
- Prefer not to say

I worry that my future grades will be affected by COVID-19

- Not at all true of me
- A little true of me
- Pretty much true of me
- Very much true of me
- Prefer not to say

I worry that returning to school will increase the risk of **me** getting COVID-19

- Not at all true of me
- A little true of me
- Pretty much true of me
- Very much true of me
- Prefer not to say

I worry that returning to school will increase **my family's** risk of getting COVID-19

- Not at all true of me
- A little true of me
- Pretty much true of me
- Very much true of me
- Prefer not to say

I worry that returning to school will increase **school staff and teachers'** risk of getting COVID-19

- Not at all true of me
- A little true of me
- Pretty much true of me
- Very much true of me
- Prefer not to say

### **School - block 5 - Testing**

School staff and pupils in S4 and above in Scotland are being offered twice-weekly COVID-19 tests to be completed at home.

Has your school offered any at-home COVID-19 testing?

- Yes
- No

Have you taken part in any at-home COVID-19 testing offered by your school?

- Yes
- No

Have you ever received a **positive** result from the at-home tests offered by your school?

- Yes
- No

Was this positive result **confirmed** by a second, different type of COVID-19 test?

If you have received more than one positive result from these tests, please think about the one that happened most recently.

- Yes, I was tested in another way and it was positive
- No, I was tested in another way and it was negative
- No, I was not tested again
- Don't know

What are the main reasons you **agreed** to take part in COVID-19 testing for school?

Please select up to three.

- It is socially responsible
- I do not want others to get sick
- I do not want to personally get sick
- My parents are making me
- My teachers told me I should
- My friends are doing it
- It makes me feel safer in school
- I do not want to be socially judged

Other

What are the main reasons you **have not** taken part in COVID-19 testing for school?

Please select up to three.

- I do not think it makes a difference
- I do not think the tests are accurate
- I think I will be able to tell if I develop COVID without a test
- The test itself sounds unpleasant
- I am not confident I could do the test correctly
- My friends are not doing it
- I do not want to be socially judged
- I am getting regular COVID-19 tests in another way
- I do not want to have to self-isolate if receive a positive result
- Other

## Exams - block 1

Due to the COVID-19 pandemic, exams have been cancelled in 2021. Instead, teachers will be asked to estimate the grade they think pupils would have received in their exams.

To what extent do you agree or disagree with the following statements:

Teachers estimating grades is a fair way to assess pupils in 2021.

- Strongly agree
- Agree
- Neither agree nor disagree

Disagree

Strongly disagree

On a scale from 0 to 10, where 0 means 'not worried at all' and 10 means 'very worried'...

How worried are you that exam cancellations will negatively affect **your own** grades?

How worried are you that exam cancellations will negatively affect **other students'** grades?

On a scale of 0 to 10, where 0 means 'not worried at all', and 10 means 'extremely worried'...

How worried are you that exam cancellations will affect your chances of going on to further or higher education?

How worried are you that exam cancellations will affect your chances of getting a job in the future?

## **New Skills - block 1**

Many people have been finding ways to do things differently or have started something new since the COVID-19 pandemic began.

Over the past year, have you returned to or started up a new hobby that you can do from home?

- Working out or exercise
- Relaxation or meditation
- Cooking
- Language learning
- Arts and crafts
- Singing or playing music
- Listening to music
- Reading
- Board or card games
- Video games
- Writing
- Gardening
- Other activity not listed above
- None of the above

## **Sleep - block 1**

### **Sleep**

Now we are going to ask you some questions about your sleep.

Using the statements below, please indicate how often the following things have happened **during the past month**.

When it's time to go to bed, I want to stay up and do other things

- Never
- Once in a while
- Sometimes
- Quite often
- Frequently, but not always
- Always

In general, I am ready for bed at bedtime

- Never
- Once in a while
- Sometimes
- Quite often
- Frequently, but not always
- Always

In general, I try to "put off" or delay going to bed

- Never
- Once in a while
- Sometimes
- Quite often
- Frequently, but not always
- Always

When it's time to go to sleep, I have trouble settling down

- Never
- Once in a while

- Sometimes
- Quite often
- Frequently, but not always
- Always

In general, I need help getting to sleep (for example, I need to listen to music, watch TV or take medication)

- Never
- Once in a while
- Sometimes
- Quite often
- Frequently, but not always
- Always

After waking up during the night, I have trouble going back to sleep

- Never
- Once in a while
- Sometimes
- Quite often
- Frequently, but not always
- Always

After waking up during the night, I have trouble getting comfortable

- Never
- Once in a while
- Sometimes
- Quite often

- Frequently, but not always
- Always

After waking up during the night, I need help to go back to sleep (for example, I need to watch TV or read)

- Never
- Once in a while
- Sometimes
- Quite often
- Frequently, but not always
- Always

In the morning, I wake up and feel ready to get up for the day

- Never
- Once in a while
- Sometimes
- Quite often
- Frequently, but not always
- Always

In the morning, I wake up feeling rested and alert

- Never
- Once in a while
- Sometimes
- Quite often
- Frequently, but not always
- Always

## Social Media & Happiness – block 1

### How you spend your time

This question is about how much time you spend **looking at and using** social media.

**Compared to January and February 2021**, do you spend:

- More time using social media **now**
- The same amount of time using social media **now**
- Less time using social media **now**
- Don't use social media
- Don't know

**Compared to this time last year**, how do you feel overall now?

- A lot happier **this year**
- A little happier **this year**
- About the same **this year**
- A little sadder **this year**
- A lot sadder **this year**

## COVID-19 measures – block 1

### Your feelings on health advice

We have heard lots of new health advice during the COVID-19 pandemic.

We would like to know how you feel about this health advice. We would also like to know how you feel about vaccines.

Are you following government guidance on handwashing?

- Always
- Most of the time
- Some of the time
- Never

Are you trying to keep your distance from other people who don't live with you when leaving your home?

- Always
- Most of the time
- Some of the time
- Never

What is the main reason you keep your distance from other people when leaving your home?

- It is socially responsible
- I do not want others to get sick
- I do not want to personally get sick
- My parents are making me
- I prefer to stay at home anyway
- There is nothing else going on
- My friends told me I should
- I do not want to be socially judged
- Other

How often do you wear face coverings on public transport and in shops?

- Always
- Most of the time
- Some of the time
- Never
- I don't go on public transport or in shops

How much do you agree or disagree with the following statements.

People should wear a face covering when entering enclosed spaces (e.g., on public transport or in shops).

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree

People should wear a face covering when entering school buildings.

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree

People who have been in close contact with someone who tested positive for COVID-19 are told to stay at home (self-isolate) for up to 10 days. They must stay home even if they feel well.

If you are asked to stay at home because you have been in **close contact** with someone who **tested positive for COVID-19**, how likely are you to stay at home, **even if you feel well**?

- Very likely
- Quite likely
- Not that likely
- Not at all likely

## **Covid-19 Vaccines - Block 1**

### **COVID-19 Vaccines**

In Scotland, the COVID-19 vaccines are going to be offered to adults aged over 18 or those aged over 16 with an underlying health condition.

At the moment, there is no plan for COVID-19 vaccines to be given to people under 16. This is because evidence suggests that people under 16 have low risk of getting seriously ill from COVID-19.

We would like to know how much you agree or disagree with the following statement regarding the Scottish vaccine rollout.

How worried are you about...

People under 16 **not** being included on the current vaccine roll-out plans.

- Not at all worried

- Slightly worried
- Moderately worried
- Very worried
- Extremely worried

## More about you - block 1

### More about you

We have a few more questions about you.

What is your ethnic origin?  
Please select one option

- White – Scottish
- White – English
- White – Welsh
- White – Northern Irish
- White – Irish
- White – Gypsy or Irish Traveller
- White – Polish
- Any other White background
- Asian or Asian British – Indian
- Asian or Asian British – Pakistani
- Asian or Asian British – Bangladeshi
- Asian or Asian British – Chinese
- Any other Asian background
- Black or Black British – African
- Black or Black British – Caribbean

- Any other Black/African/Caribbean background
- Arab or Arab British
- Mixed – White and Black Caribbean
- Mixed – White and Black African
- Mixed – White and Asian
- Any other Mixed/Multiple ethnic background
- Any other ethnic group
- Prefer not to answer

In general, would you say your health is

- Excellent
- Very good
- Good
- Fair
- Poor

Do you have a long-term illness, disability or medical condition (like diabetes, arthritis, allergy, or cerebral palsy) that has been diagnosed by a doctor?

- Yes
- No
- Prefer not to say

Has a doctor or health professional ever told you that you have attention deficit hyperactivity disorder (ADHD)?

- Yes
- No
- Don't know

Prefer not to say

Has a doctor or health professional ever told you that you have Autism, Asperger's syndrome or autistic spectrum disorder?

Yes

No

Don't know

Prefer not to say

Do you have caring responsibilities for any of the following people who live with you?

Select all that apply, or select None of the above

Parent(s)

Stepparent(s)

Parent's girlfriend or boyfriend

Guardian(s) – for example a foster carer

Brother(s) and/or sister(s)

Stepbrother(s) and/or stepsister(s)

Grandparent(s)

Other family member(s)

Child/children

Friend(s) or other non-family member(s)

Prefer not to answer

None of the above

What type of accommodation do you live in?

House or bungalow

Flat or apartment

- Hostel
- Mobile home or caravan
- Sheltered housing
- Homeless
- Other
- Don't know
- Prefer not to answer

## Social Emotional Health - block 1

### Almost finished!

We just have a few more questions.

Here are some statements about how you think and feel **now**.

Read each sentence and select the answers that best says how true the sentence is for you.

I can work out my problems

- Not at all true of me
- A little true of me
- Pretty much true of me
- Very much true of me
- Prefer not to say

I can do most things if I try

- Not at all true of me
- A little true of me

- Pretty much true of me
- Very much true of me
- Prefer not to say

There are many things that I do well

- Not at all true of me
- A little true of me
- Pretty much true of me
- Very much true of me
- Prefer not to say

At my school, there is a teacher or some other adult who always wants me to do my best

- Not at all true of me
- A little true of me
- Pretty much true of me
- Very much true of me
- Prefer not to say

At my school, there is a teacher or some other adult who listens to me when I have something to say

- Not at all true of me
- A little true of me
- Pretty much true of me
- Very much true of me
- Prefer not to say

At my school, there is a teacher or some other adult who believes that I will be a success

- Not at all true of me
- A little true of me
- Pretty much true of me
- Very much true of me
- Prefer not to say

My family members really help and support one another

- Not at all true of me
- A little true of me
- Pretty much true of me
- Very much true of me
- Prefer not to say

There is a feeling of togetherness in my family

- Not at all true of me
- A little true of me
- Pretty much true of me
- Very much true of me
- Prefer not to say

My family really gets along well with each other

- Not at all true of me
- A little true of me
- Pretty much true of me

- Very much true of me
- Prefer not to say

I have a friend my age who really cares about me

- Not at all true of me
- A little true of me
- Pretty much true of me
- Very much true of me
- Prefer not to say

I have a friend my age who talks with me about my problems

- Not at all true of me
- A little true of me
- Pretty much true of me
- Very much true of me
- Prefer not to say

I have a friend my age who helps me when I'm having a hard time

- Not at all true of me
- A little true of me
- Pretty much true of me
- Very much true of me
- Prefer not to say

Each day I look forward to having a lot of fun

- Not at all true of me
- A little true of me

- Pretty much true of me
- Very much true of me
- Prefer not to say

I usually expect to have a good day

- Not at all true of me
- A little true of me
- Pretty much true of me
- Very much true of me
- Prefer not to say

Overall, I expect more good things to happen to me than bad things

- Not at all true of me
- A little true of me
- Pretty much true of me
- Very much true of me
- Prefer not to say

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