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| **Point-To-Note:**  The study instrument is intended for capturing the community responses to the ongoing Coronavirus Disease 2019 (COVID-19) in Hong Kong. If you use or adapt it to collect data on the COVID19 response, please cite the following acknowledgments.  **Acknowledgement:**  We thank Prof. Kin On KWOK, Ms. Wan In WEI, Prof. Samuel Yeung Shan WONG and the research team in the Division of Infectious Diseases of JC School of Public Health and Primary Care, The Chinese University of Hong Kong, Hong Kong Special Administrative Region, China for permission to use their survey instrument and translating it into English (<https://www.medrxiv.org/content/10.1101/2020.02.26.20028217v1>). |

**Section A. Introduction**

We would like to invite you to join this survey conducted by JC School of Public Health and Primary Care of The Chinese University of Hong Kong. This survey aims to study your risk perception towards Coronavirus Disease 2019 (COVID-19). It take about 20 minutes to complete this survey. Participation is voluntary. Information collected from this survey is kept confidential. Only individuals aged 18 or above and those who always live in Hong Kong can participate. The first 1000 respondents are eligible for HKD10 cash coupon. For enquiries, please contact the research team (Tel: XXXXXXX).

\*0. Survey date: \_\_\_\_\_ (dd) / \_\_\_\_\_\_\_ (mm) / \_\_\_\_\_\_\_\_ (yyyyy)

\*1. Are you willing to participate in this study?

* Yes 🡪 Q2
* No 🡪 End

\*2. Are you 18 years old or above?

* Yes 🡪 Q3
* No 🡪 End

\*3. In the last month, on average, did you live in Hong Kong for at least 5 days per week?

* Yes 🡪 Q4
* No 🡪 End

\*4. From which channels do you know about this survey? (Multiple answers allowed)

* E-mail
* Promotional leaflets
* Phone messages
* Whatsapp
* Wechat
* Others (please specify: \_\_\_\_\_\_\_ )

\*5. What is your sex?

* Male
* Female

\*6. Which age group do you belong to?

* 18-24
* 25-34
* 35-44
* 45-54
* 55-64
* 65 or above

\*7. In the past 7 days, which district did you **mainly** live in?

* Central and Western
* Eastern
* Southern
* Wan Chai
* Sham Shui Po
* Kowloon City
* Kwun Tong
* Wong Tai Sin
* Yau Tsim Mong
* Islands
* Kwai Ching
* North
* Sai Kung
* Sha Tin
* Tai Po
* Tsuen Wan
* Tuen Mun
* Yuen Long

**Section B. Health status**

\*8. How do you perceive your health status?

* Very good
* Good
* Fair
* Bad
* Very bad

\*9. In the past 14 days, did you visit Chinese medicine practitioner or western medicine doctor?

* Yes
* No

\*10. In the past 14 days, did you experience any respiratory symptom(s)?

(for example: fever, sore throat, cough etc)

* Yes 🡪 Q11
* No 🡪 Q12

\*11. What symptoms did you have? (Multiple answers allowed)

* Persistent fever (body temperature ≥ 38°C for at least one day)
* Shivering
* Headache
* Muscle pain
* Cough
* Difficulty in breathing
* Dizziness
* Runny nose
* Sore throat
* Others (please specify: \_\_\_\_\_\_\_\_ )

**Section C. Travel history**

\*12. In the last month, did you travel outside Hong Kong?

* Yes 🡪 Q13
* No 🡪 Q14

\*13. In the last month, where did you leave Hong Kong for? (Multiple answers allowed)

* Macau
* Guangdong province, China
* Hubei province, China (Wuhan as the capital city)
* Other provinces in China (except Macau, Guangdong and Hubei)
* Outside China

\*14. Do you need to travel to the Mainland China regularly?

* Yes 🡪 Q15
* No 🡪 Q16

\*15. In general, how frequent do you travel to the Mainland China? (Please select the best description)

* Daily
* Weekly
* Monthly
* Every three months
* At least every 3 months to travel once

**Section D. Anxiety level I**

\*16. Does COVID-19 affect your daily life?

* Not at all
* A bit
* Greatly
* Not sure

\*17. Are you worried about COVID-19?

* Yes 🡪 Q18
* No 🡪 Q19

\*18. Regarding COVID-19, how worried are you?

* Worried a lot
* Worried
* Neutral
* Not worried
* Not worried at all

|  |
| --- |
| For Q19-32, please select the answer which best describe your feeling in the past week. Don’t take too long over your replies, your immediate response is the best. |

\*19. I feel tense or ‘wound up’.

* Most of the time
* A lot of the time
* From time to time, occasionally
* Not at all

\*20. I get a sort of frightened feeling as if something awful is about to happen.

* Very definitely and quite badly
* Yes, but not too badly
* A little, but it doesn't worry me
* Not at all

\*21. Worrying thoughts go through my mind.

* A great deal of the time
* A lot of the time
* From time to time, but not too often
* Only occasionally

\*22. I can sit at ease and feel relaxed.

* Definitely
* Usually
* Not Often
* Not at all

\*23. I get a sort of frightened feeling like ‘butterflies’ in the stomach.

* Not at all
* Occasionally
* Quite often
* Very often

\*24. I feel restless as I have to be on the move.

* Very much indeed
* Quite a lot
* Not very much
* Not at all

\*25. I get sudden feelings of panic.

* Very often indeed
* Quite often
* Not very often
* Not at all

\*26. I still enjoy the things I used to enjoy.

* Definitely as much
* Not quite as much
* Only a little
* Hardly at all

\*27. I can laugh and see the funny side of things.

* Very definitely and quite badly
* Yes, but not too badly
* A little, but it doesn’t worry me
* Not at all

\*28. I feel cheerful.

* Not at all
* Not often
* Sometimes
* Most of the time

\*29. I feel as if I am slowed down.

* Nearly all the time
* Very often
* Sometimes
* Not at all

\*30. I have lost interest in my appearance.

* Definitely
* I don’t take as much care as I should
* I may not take quite as much care
* I take just as much care as ever

\*31. I look forward with enjoyment to things.

* As much as I ever did
* Rather less than I used to
* Definitely less than I used to
* Hardly at all

\*32. I can enjoy a good book or radio or TV program.

* Often
* Sometimes
* Not often
* Very often

**Section E. Perceived susceptibility**

\*33. If no preventive measure is taken, how likely do you think you will be infected with COVID-19?

* Very likely
* Likely
* Neutral
* Unlikely
* Very unlikely

\*34. If no preventive measure is taken, how likely do you think your family member(s) will be infected with COVID-19?

* Very likely
* Likely
* Neutral
* Unlikely
* Very unlikely

**Section F. Perceived severity**

\*35. How severe do you think the illnesses caused by COVID-19 is?

* Very severe
* Severe
* Neutral
* Not severe
* Not severe at all

\*36. How high, do you think, is the chance to have COVID-19 cured?

* Very high
* High
* Neutral
* Not high
* Not high at all

\*37. How high, do you think, is the chance of survival for COVID-19 patients?

* Very high
* High
* Neutral
* Not high
* Not high at all

**Section G. Information sources**

\*38. Are you continually alert to the disease progression of COVID-19?

* Yes
* No

\*39. Have you been actively searching for information about COVID-19?

* Yes
* No

\*40. Through which channels do you know about COVID-19? (Multiple answers allowed)

* Newspaper
* Magazine
* Radio
* Television
* Internet
* Social platforms (E.g. Whatsapp, Wechat, Facebook, Instagram)
* Your doctor
* Your family or friends
* Others (please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ )

\*41. Do you think you need to receive information about COVID-19?

* Yes 🡪 Q42
* No 🡪 Q43

\*42. What types of information about COVID-19 do you want to receive? (Multiple answers allowed)

* Symptoms / How to know if I am infected with COVID-19
* Current situation: number of infected cases
* Current situation: distribution of cases
* What to do if infected with COVID-19
* Preventive measures
* Risks and consequences
* The intervention measures against COVID-19 enacted by the Hong Kong government
* The intervention measures against COVID-19 enacted by the Chinese government
* The intervention measures against COVID-19 enacted by international organizations
* Disease progress
* Impact of COVID-19 on high-risk group
* Others (please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_)

\*43. How reliable, do you think, are these information sources?

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Very reliable | Reliable | Neutral | Unreliable | Very unreliable |
| Newspaper |  |  |  |  |  |
| Magazine |  |  |  |  |  |
| Radio |  |  |  |  |  |
| Television |  |  |  |  |  |
| Official websites, like the government |  |  |  |  |  |
| Unofficial websites |  |  |  |  |  |
| Social platforms(whatsapp,  wechat, facebook, Instagram) |  |  |  |  |  |
| Your doctor |  |  |  |  |  |
| Your family or friends |  |  |  |  |  |

**Section H. Knowledge**

\*44. How well do you know about COVID-19?

* Not well at all
* Not well
* Normal
* Well
* Very well

\*45. How likely is COVID-19 transmitted through the following routes?

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Very likely | Likely | Neutral | Unlikely | Very unlikely |
| Have face-to-face conversation with asymptomatic COVID-19 patients (without body touch) |  |  |  |  |  |
| Have face-to-face conversation with symptomatic COVID-19 patients (without body touch) |  |  |  |  |  |
| Having body touch with asymptomatic COVID-19 patients |  |  |  |  |  |
| Having body touch with symptomatic COVID-19 patients |  |  |  |  |  |
| Respiratory droplets |  |  |  |  |  |
| Aerosol (when infected persons cough or sneeze) |  |  |  |  |  |
| Contaminated environment |  |  |  |  |  |
| Consumption of wild animals |  |  |  |  |  |
| Visiting wet markets |  |  |  |  |  |
| Consumption of seafood imported from Wuhan |  |  |  |  |  |
| Consumption/use of products imported from Wuhan |  |  |  |  |  |

**Section I. Preventive measures**

\*46. To combat COVID-19, do you adopt the following preventive measures?

|  |  |  |  |
| --- | --- | --- | --- |
|  | Yes | No | Not Applicable |
| Wear face masks |  |  |  |
| Wash hands frequently (With soap or hand sanitizer) |  |  |  |
| Disinfect home |  |  |  |
| Cover nose and mouth when sneezing or coughing |  |  |  |
| Avoid contacting people who has fever or respiratory symptoms |  |  |  |
| Avoid contacting people who have been to Wuhan within one month |  |  |  |
| Avoid going out |  |  |  |
| Avoid crowded areas |  |  |  |
| Avoid going to wet market |  |  |  |
| Avoid going to hospital or clinic |  |  |  |
| Avoid taking public transportation |  |  |  |
| Avoid going to work |  |  |  |
| Avoid going to school or avoid letting kids go to school |  |  |  |
| Avoid social events |  |  |  |
| Avoid visiting Wuhan |  |  |  |
| Avoid visiting Hubei province |  |  |  |
| Avoid visiting mainland China |  |  |  |
| Leaving Hong Kong for a while |  |  |  |

\*47. How effective, do you think, are the following measures in preventing COVID-19?

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Very effective | Effective | Neutral | Ineffective | Very ineffective |
| Wear face masks |  |  |  |  |  |
| Wash hands frequently (With soap or hand sanitizer) |  |  |  |  |  |
| Disinfect home |  |  |  |  |  |
| Cover nose and mouth when sneezing or coughing |  |  |  |  |  |
| Avoid contacting people who has fever or respiratory symptoms |  |  |  |  |  |
| Avoid contacting people who have been to Wuhan within one month |  |  |  |  |  |
| Avoid going out |  |  |  |  |  |
| Avoid crowded areas |  |  |  |  |  |
| Avoid going to wet market |  |  |  |  |  |
| Avoid going to hospital or clinic |  |  |  |  |  |
| Avoid taking public transportation |  |  |  |  |  |
| Avoid going to work |  |  |  |  |  |
| Avoid going to school or avoid letting kids go to school |  |  |  |  |  |
| Avoid social events |  |  |  |  |  |
| Avoid visiting Wuhan |  |  |  |  |  |
| Avoid visiting Hubei province |  |  |  |  |  |
| Avoid visiting mainland China |  |  |  |  |  |
| Leaving Hong Kong for a while |  |  |  |  |  |

**Section J. Comparison with other diseases**

\*48. How severe will the situation be if infected with the following diseases?

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Very severe | Severe | Neutral | Not severe | Not severe at all |
| Seasonal influenza |  |  |  |  |  |
| Diabetes |  |  |  |  |  |
| Cancer |  |  |  |  |  |
| Heart diseases |  |  |  |  |  |
| Acquired immune deficiency syndrome |  |  |  |  |  |
| 2009 pandemic influenza |  |  |  |  |  |
| 2003 severe acute respiratory syndrome |  |  |  |  |  |
| COVID-19 |  |  |  |  |  |

**Section K. Basic information**

\*49. Your highest education attainment is:

* No schooling/ Pre-primary
* Primary
* Lower secondary
* Upper secondary
* Post-secondary: Diploma/ Certificate
* Post-secondary: Degree course
* Above degree

\*50. In the past 7 days, your economic status is:

* Employees 🡪 Q51
* Employers 🡪 Q51
* Unemployed 🡪 Q52
* House-makers 🡪 Q52
* Students 🡪 Q51
* Retired 🡪 Q52

\*51. Are you a medical worker (Doctor/Nurse/Paramedic) or studying medical courses?

* Yes
* No

\*52. Do you hire domestic helper at home?

* Yes
* No

\*53. Do you have children at home?

* No
* One child
* Two children
* Three children or more

\*54. Do you have any chronic diseases?

* Yes 🡪 Q55
* No 🡪 Q56

\*55. What chronic disease(s) do you have? (multiple choices allowed)

* Eye conditions (E.g. glaucoma, cataract, blindness)
* Ear, nose & throat condition (E.g. allergic rhinitis, deaf, whizzing)
* Cancer (please specify in the area below)
* Seizure
* Stroke
* Hypertension
* Heart disease
* Asthma
* Emphysema, bronchitis, Bronchiectasis
* Tuberculosis
* Thyroid glands disease
* Diabetes mellitus
* Hyperlipidemia
* Kidney condition (for example: kidney failure, nephritis)
* Liver condition (for example: Hepatitis B/C, cirrhosis)
* Bowel condition (for example: gastric ulcer)
* Anemia
* Genetic blood disorders (for example: thalassemia, haemophilia)
* Skeletomuscular disorders (for example: arthritis, rheumatism, gout, osteoporosis)
* Autoimmune disorder (for example: systemic lupus erythematosus, rheumatoid arthritis)
* Skin condition (for example: eczema, psoriasis)
* Depression
* Anxiety
* Schizophrenia
* Aftereffetcs (for example: dysfunction of extremity)
* Others (please specify in the area below)

|  |
| --- |
| Box to specify conditions, if needed: |

\*56. With reference to the past month, what is your household income?

* HKD 10,000 or below
* HKD 10,001 – HKD 20,000
* HKD 20,001 – HKD 30,000
* HKD 30,001 – HKD 40,000
* HKD 40,001 – HKD 50,000
* HKD 50,001 – HKD 60,000
* > HKD 60,001
* Not disclosed

**Section L. Incentive**

Thank you for completing the survey! To compensate your time, we have prepared HKD 10 cash coupon to mail to the first 1000 participants who completed the survey. If you want to receive the coupon, please provide your contact on next page.

\*57. Do you want to receive the cash coupon?

* Yes 🡪 Q58
* No 🡪 Q59

58. Please fill in your mailing address below. The coupon delivery will be arranged after completion of the study. **Once submitted, no amendment can be made.**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Room: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Floor: : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Block: : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Building: : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street: : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

District: : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Section M. Anxiety level II**

\*59. We really appreciate your patience. Here comes the **last part** of the survey. We prepare 40 sentences for respondents to measure their anxiety level towards COVID-19. Please answer it with your instinct. It takes extra 2-3 minutes to complete. Are you willing to answer them?

* Yes 🡪 Q 60-99
* No 🡪 End

|  |
| --- |
| Q60-Q99  Only respondents who answered “Yes” to Q59 were asked about the 40 questions of the state trait anxiety inventory (STAI). These 40 questions are copy-righted items (so cannot be copied and pasted here), and you need to pay Mindgarden to use them. |

\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\* The end \*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*