

Consortium PSYCHIATRICUM

Appendix to: Olga A. Karpenko, Timur S. Syunyakov, Maya A. Kulygina et al. Impact of COVID-19 pandemic on anxiety, depression and distress – online survey results amid the pandemic in Russia. Consortium Psychiatricum 2020; published online September 3. DOI: [10.17650/2712-7672-2020-1-1-8-20](https://doi.org/10.17650/2712-7672-2020-1-1-8-20).

This appendix is a part of the original submission and has been peer reviewed. The appendix posted as it was supplied by the authors.

Survey: “Personal experience during the COVID-19 pandemic”

1. General information:

Gender:

- Male
- Female

Age: ____ years

City and region: _____

Please specify your profession and specialism: _____

Place of residence:

- Capital
- City
- Town
- Suburb
- Rural area

Type of residence:

- Separate house
- Apartment
- Shared apartment
- Other

Living space:

- My living space is enough for me.
- My living space is not enough for me.

Marital status:

- Married/have a partner
- Single

Please specify who lives with you:

- I live with my spouse/partner.
- I live with my family and children.
- I live with my family and older relatives (parents, grandparents, etc.).
- I live with my family, including children and older relatives.
- I live alone.

Level of education:

- Higher
- Higher medical
- Specialized secondary
- Specialized medical
- School

Occupation:

- Study
- Work
- I do not work
- Retired
- Disabled
- Maternity leave

Specify your job situation during the COVID-19 pandemic:

- My work format changed, and I work from home.
- My work format hasn't changed, and I work from home as usual.
- My work format hasn't changed, and I go to my workplace regularly.
- My work stopped temporarily, but I get my salary.
- My work stopped temporarily, and I don't get any salary.
- I was fired due to the current situation.
- I don't need to work.
- I am a business owner, and my business is operational.
- I am a business owner, but my business is not operational.

Please describe your physical health:

- I am fairly healthy.
- I sometimes have problems with my health.
- I have chronic somatic disease(s).
- Please specify _____
- I have a disability.

Please describe your mental health:

- I have never had any mental health problems.

I have had some mental health problems in the past.

Please specify _____

I am experiencing mental health problems now.

Please specify _____

COVID-19 history:

- Me or someone I know was infected by coronavirus.
- Me or someone I know was hospitalized because of coronavirus.
- Someone I know died because of coronavirus.
- I do not have personal experience of coronavirus.
- I am a medical professional, and I work with COVID patients.

2. Hospital Anxiety and Depression Scale (HADS) [1]

3. Please share your personal views of COVID-19

1. **In my opinion, the situation with the COVID-19 pandemic is really serious and represents a great danger to health.**
Yes
No
Difficult to answer
2. **In my opinion, it is necessary to follow all the recommendations of the authorities (WHO, government, Ministry of Health, etc.).**
Yes
No
Selectively
3. **I monitor coronavirus information carefully.**
Yes
No
Occasionally
4. **In my opinion, the government is hiding the real picture of what is going on with coronavirus.**
Yes
No
Difficult to answer
5. **I think there is no real pandemic. The authorities just need to study how prepared our society is to deal with extraordinary situations.**
Yes
No
Difficult to answer
6. **I consider that the threat of coronavirus is artificially exaggerated to serve certain people's interests.**
Yes
No
Difficult to answer
7. **I suspect that the coronavirus originated from a laboratory and was intentionally launched for some purpose.**
Yes
No
Difficult to answer
8. **I am prepared to wait out the quarantine and have taken all the recommended precautions.**
Yes
No
Difficult to answer
9. **I do not think that my psychological condition has changed.**
Yes
No
Difficult to answer

10. **I am very worried about the situation.**
Yes
No
Difficult to answer
11. **I am worried about my health and the health of my loved ones.**
Yes
No
12. **I believe that the medical services are doing their best to stop the infection.**
Yes
No
Difficult to answer
13. **I am satisfied with the government's actions during this pandemic.**
Yes
No
Partly
14. **I am worried about possible social chaos and unrest.**
Yes
No
Slightly
15. **I worry about the economic situation in my country.**
Yes
No
Slightly
16. **I worry about my family's financial situation.**
Yes
No
Slightly
17. **I feel that I may need psychological support.**
Yes
No
Difficult to answer

Is there anything else you want to share about the COVID-19 pandemic?

4. Level of distress

Instructions: First please circle the number (0-10) that best describes how much distress you have been experiencing in the past week including today

	0	1	2	3	4	5	6	7	8	9	10	
No distress	<input type="radio"/>	Extreme distress										

Second, please indicate if any of the following has been a problem for you in recent weeks. Be sure to tick YES or NO for each.

Yes	No	Problem
		Risk of COVID-19 contagion
		Threat to life due to the current pandemic situation
		Health of elderly or chronically ill relatives because of COVID-19
		Other health problems
		Dealing with children
		Dealing with your partner
		Dealing with elderly relatives
		Housekeeping (cooking, cleaning, maintenance, etc.)
		Being in self-isolation
		Violation of plans due to the pandemic
		Collapse of normal life
		Being stigmatized because of COVID-19
		Loss of work
		Work overload
		Financial problems now
		Risk of financial problems in the future

5. Quality of life

How would you describe your quality of life during the pandemic?

The quality of my life did not change.

The quality of my life improved/increased.

The quality of my life decreased.

6. Brief COPE [2]

1 = I haven't been doing this at all.

2 = I've been doing this a little bit.

3 = I've been doing this a fair amount.

4 = I've been doing this a lot.

1. I've been turning to work or other activities to take my mind off things.
2. I've been concentrating my efforts on doing something about the situation I'm in.
3. I've been saying to myself, "This isn't real."
4. I've been using alcohol or other drugs to make myself feel better.
5. I've been getting emotional support from others.
6. I've stopped trying to deal with it.
7. I've been taking action to try to make the situation better.
8. I've been refusing to believe that it has happened.

9. I've been saying things to let my unpleasant feelings escape.
10. I've been getting help and advice from other people.
11. I've been using alcohol or other drugs to help me get through it.
12. I've been trying to see it in a different light, to make it seem more positive.
13. I've been criticizing myself.
14. I've been trying to come up with a strategy about what to do.
15. I've been getting comfort and understanding from someone.
16. I've stopped trying to cope.
17. I've been looking for something good in what is happening.
18. I've been making jokes about it.
19. I've been doing something to think about it less, such as going to movies, watching TV, reading, daydreaming, sleeping or shopping.
20. I've accepted the reality of what has happened.
21. I've been expressing my negative feelings.

7. Opinions

What mental health consequences of COVID-19 do you observe in your environment? (Please indicate an approximate % for each problem.)

Do you expect any of the following actions from mental health professionals due to the pandemic?

Work with the mass media to decrease the level of negative information

Work with the government to develop strategies for stress reduction among the population

Creation of special services to deliver help during the pandemic

Hotlines for psychological help

More availability of psychiatrist consultations

More availability of family psychotherapy

More availability of drug and alcohol abuse consultations

Nothing

Other

References:

1. Zigmond AS, Snaith RP. The hospital anxiety and depression scale. *Acta psychiatrica Scandinavica*. 1983;67(6):361-70. Epub 1983/06/01. doi: 10.1111/j.1600-0447.1983.tb09716.x. PubMed PMID: 6880820.
2. Carver CS. You want to measure coping but your protocol's too long: consider the brief COPE. *Int J Behav Med*. 1997;4(1):92-100. doi: 10.1207/s15327558ijbm0401_6. PMID: 16250744.

General characteristics of the sample

Characteristics		Value	Lower Bound CI 95%	Upper Bound CI 95%
Age, mean (1)		36.81	35.62	38.00
Gender (2)	Women	278 (78.98%)	74.72%	83.23%
	Men	74 (21.02%)	16.77%	25.28%
Place of residence (2)	City	50 (14.20%)	10.56%	17.85%
	Town	49 (13.92%)	10.30%	17.54%
	Suburb	23 (6.53%)	3.95%	9.12%
	Rural area	10 (2.84%)	1.11%	4.58%
	Capital	220 (62.50%)	57.44%	67.56%
Type of residence (2)	Other	4 (1.14%)	0.03%	2.24%
	Apartment	300 (85.23%)	81.52%	88.93%
	Shared apartment	8 (2.27%)	0.72%	3.83%
	Separate house	40 (11.36%)	8.05%	14.68%
Living space (amount of space per person) (2)	My living space is not enough for me.	101 (28.69%)	23.97%	33.42%
	My living space is enough for me.	251 (71.31%)	66.58%	76.03%
Marital status (2)	Single	156 (44.32%)	39.13%	49.51%
	Married/have a partner	196 (55.68%)	50.49%	60.87%
Please specify who is living with you (2)	I live with my spouse/partner.	52 (14.77%)	11.07%	18.48%
	I live alone.	49 (13.92%)	10.30%	17.54%
	I live with my family and children.	161 (45.74%)	40.53%	50.94%
	I live with my family, including children and older relatives.	31 (8.81%)	5.85%	11.77%
	I live with my family and older relatives.	59 (16.76%)	12.86%	20.66%
Level of education (2)	Higher	209 (59.38%)	54.24%	64.51%
	Higher medical	73 (20.74%)	16.50%	24.97%
	Specialized secondary	31 (8.81%)	5.85%	11.77%
	Specialized medical	10 (2.84%)	1.11%	4.58%
	School	29 (8.24%)	5.37%	11.11%

Occupation (2)	Retired	4 (1.14%)	0.03%	2.24%
	I do not work.	34 (9.66%)	6.57%	12.75%
	I do not work due to disability.	3 (0.85%)	0.00%	1.81%
	Maternity leave	16 (4.55%)	2.37%	6.72%
	Work	246 (69.89%)	65.09%	74.68%
	Study	49 (13.92%)	10.30%	17.54%
Specify your job situation during the COVID-19 pandemic (2)	I was fired due to the current situation.	2 (0.57%)	0.00%	1.35%
	The work stopped temporarily, and I do not receive a salary.	26 (7.39%)	4.65%	10.12%
	The work stopped temporarily, but I get my salary.	17 (4.83%)	2.59%	7.07%
	The work format changed, and I work remotely.	133 (37.78%)	32.72%	42.85%
	My work format has not changed, and I go to my workplace regularly.	65 (18.47%)	14.41%	22.52%
	My work format has not changed, and I work from home, as usual.	24 (6.82%)	4.19%	9.45%
	I am a business owner, but my business is not operational.	11 (3.13%)	1.31%	4.94%
	I am a business owner, and my business is operational.	4 (1.14%)	0.03%	2.24%
	I don't need to work.	70 (19.89%)	15.72%	24.06%
Please describe your physical health (2)	I have a disability.	6 (1.70%)	0.35%	3.06%
	I have chronic somatic disease(s).	51 (14.49%)	10.81%	18.17%
	I have one or more chronic somatic diseases.	7 (1.99%)	0.53%	3.45%
	I sometimes have health problems.	103 (29.26%)	24.51%	34.01%
	I am fairly healthy.	185 (52.56%)	47.34%	57.77%
Please describe your mental health (2)	I have had some mental health problems in the past.	32 (9.09%)	6.09%	12.09%
	I have had some mental health problems in the past, and I am experiencing problems now.	17 (4.83%)	2.59%	7.07%
	I am experiencing mental health problems now.	43 (12.22%)	8.79%	15.64%
	I don't have any mental health problems.	259 (73.58%)	68.37%	79.00%
	I don't currently have any mental health problems, but I have had some problems in the past.	1 (0.28%)	0.00%	0.84%

1 Mean (95% CI of the mean)

2 Frequency (% , 95% CI for relative frequency)