NCHA III Spring 2022 COVID-19 Questions

QCOVID1 Have you ever had COVID-19 (the novel coronavirus disease)?

- Yes (1)
- No (6)
- Unsure (7)

(if they select “yes” in QCOVID1)

QCOVID1A How severe were any symptoms that you experienced?

- Severe (e.g., difficulty breathing or speaking, low blood pressure, high fever of 103 F (39.4 C or higher) (1)
- Moderate (e.g., some shortness of breath, cough, fever of 100.4 F (38 C) or higher) (2)
- Mild (e.g., cold-like symptoms) (3)
- No symptoms (asymptomatic) (4)

(if they select “yes” in QCOVID1)

QCOVID1B Were you hospitalized because of your COVID-19 symptoms?

- Yes (1)
- No (2)

(if they select “yes” in QCOVID1)
QCOVID1C Did you/are you experiencing symptoms that have continued more than 4 weeks after your initial COVID-19 illness, and were not experienced before the illness? Examples include fatigue, brain fog, heart racing, headaches, or worsening mood.

- Yes (1)
- No (2)

QCOVID2 Have you had a loved one, close family member, or friend die due to COVID-19?

- Yes (1)
- No (2)

QCOVID3 Do you have a loved one, close family member, or friend that has been dealing with long term effects (or a long recovery) following a COVID-19 illness?

- Yes (1)
- No (2)

QCOVID5 Please indicate the extent to which you agree or disagree with the following statements: I believe that my campus has done enough to protect students from COVID-19.

- Strongly disagree (1)
- Disagree (2)
- Neither disagree nor agree (3)
- Agree (4)
- Strongly agree (5)
QCOVID6A I follow my campus policies related to COVID-19.

- Strongly disagree (1)
- Disagree (2)
- Neither disagree nor agree (3)
- Agree (4)
- Strongly agree (5)
- N/A, my campus does not have policies related to COVID-19 (6)

QCOVID8 I believe that students at my school are taking precautions to protect one another from COVID-19.

- Strongly disagree (1)
- Disagree (2)
- Neither disagree nor agree (3)
- Agree (4)
- Strongly agree (5)

QCOVID13 Over the past 30 days, on average, how much have you been concerned with the following?
<table>
<thead>
<tr>
<th>How long the COVID-19 pandemic will last (QCOVID13A)</th>
<th>Not concerned at all (1)</th>
<th>Slightly concerned (2)</th>
<th>Moderately concerned (3)</th>
<th>Very concerned (4)</th>
<th>Extremely concerned (5)</th>
</tr>
</thead>
<tbody>
<tr>
<td>(if they select “unsure” or “no” in QCOVID1)</td>
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<td>That you will get COVID-19 (QCOVID13B)</td>
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<td>(if they select “yes” in QCOVID1)</td>
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<td>That you will get COVID-19 again (QCOVID13C)</td>
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<td>That someone you care about will get COVID-19 (QCOVID13D)</td>
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<td>Someone you care about will die from COVID-19 (QCOVID13E)</td>
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<td>Not being able to spend time with people you care about (QCOVID13F)</td>
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<td>Uncertainty of the future (QCOVID13G)</td>
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Note: COVID14 appears after question N3Q54B in the survey
QCOVID14 If you have received counseling or therapy (either in-person or by telehealth) in the past 12 months, how has your access to mental health care been affected by the COVID-19 pandemic?

- Much more difficult or limited access (1)
- Somewhat more difficult or limited access (2)
- No significant change in access (3)
- Somewhat less difficult or limited access (4)
- Much less difficult or limited access (5)
- Don’t know or not applicable (have not tried to access care since the pandemic began) (6)

QCOVID15 As a result of the COVID-19 pandemic, have you experienced any discriminatory or hostile behavior due to your race/ethnicity (or what someone thought was your race/ethnicity)?

- Yes (1)
- No (2)

QCOVID16 As a result of the COVID-19 pandemic, have you witnessed (online exchanges or in-person) any discriminatory or hostile behavior or exchanges towards others due to their race/ethnicity (or what someone thought was their race/ethnicity)?

- Yes (1)
- No (2)
QCOVID17A How has your current financial situation been affected by the COVID-19 pandemic?

- A lot more stressful (1)
- Somewhat more stressful (2)
- No significant change (3)
- Somewhat less stressful (4)
- A lot less stressful (5)

QCOVID18A How has your current overall level of stress been impacted by the COVID-19 pandemic?

- Significantly increased my level of stress (1)
- Somewhat increased my level of stress (2)
- No change in my level of stress (3)
- Somewhat decreased my level of stress (4)
- Significantly decreased my level of stress (5)

QCOVIDR19B How would you describe your COVID-19 vaccination status (not including “boosters”)?

- I have received all doses required to be fully vaccinated against COVID-19 (1)
- I have started the vaccination process, but need another dose (2)
- I plan to get vaccinated (3)
- I will only get vaccinated if required (4)
- I will not get vaccinated (5)
(if they select yes in QCOVID19B)

QCOVID19C Have you had an additional or “booster” dose of a COVID-19 vaccine?

- Yes (1)
- I plan to get an additional or “booster” dose when I am eligible to do so (2)
- I will only get an additional or “booster” dose if required (3)
- I am not sure if I will get an additional or “booster” dose (4)
- I will not get an additional or “booster” dose (5)

(if they select yes in QCOVID1 AND if they select I have received all the injections required to be fully vaccinated against COVID–19 in QCOVID19B)

QCOVID23 Did you test positive for COVID-19 after you were fully vaccinated (2 weeks after your second dose in a 2-dose series, such as the Pfizer or Moderna vaccines, or 2 weeks after a single-dose vaccine, such as Johnson & Johnson's Janssen vaccine)?

- Yes (1)
- No (2)

QCOVID21 Were it not for the COVID-19 pandemic, I would prefer to take most of my classes:

- In-person (1)
- Online (2)