Appendix A- Patient Survey on Demographics, Pregnancy, and Experiences with Peripartum Depression

Start of Block: Default Question Block

Q1 What is your age?

* 18-24 years old (1)
* 25-34 years old (2)
* 35-44 years old (3)
* 45+ years old (4)

Q3 What is your gender?

* Male (1)
* Female (2)
* Other (3) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Prefer not to answer (4)

Q4 Which best describes your race?

* White (1)
* Black or African American (2)
* American Indian or Alaska Native (3)
* Asian (4)
* Native Hawaiian or Pacific Islander (5)
* Other (6) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Prefer not to answer (7)

Q5 Are you Hispanic or Latino?

* Yes (1)
* No (2)

Q22 Education level (please select the highest you have completed)

* No schooling completed (1)
* Nursery school to 8th grade (2)
* Some high school, no diploma (3)
* High School Graduate, diploma or the equivalent (Example: GED) (4)
* Some college credit, no degree (5)
* Trade/Technical/Vocational training (6)
* Associate Degree (7)
* Bachelor's Degree (8)
* Master's Degree (9)
* Professional Degree (10)
* Doctoral Degree (11)

Q23 Employment Status

* Employed for wages (1)
* Self-employed (2)
* Out of work and looking for work (3)
* Out of work but not currently looking for work (4)
* Homemaker (5)
* Student (6)
* Military (7)
* Retired (8)
* Unable to work (9)
* Prefer not to answer (10)

Q6 What is your marital status?

* Single (Never Married) (1)
* Married (2)
* Widowed (3)
* Divorced (4)
* Separated (5)

Q24 Number of people currently living in your home:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Q2 What is your annual household income?

* Under $20,000 (1)
* $20,001-$40,000 (2)
* $40,001-$60,000 (3)
* $60,001-$80,000 (4)
* Over $80,000 (5)

Q25 What languages do you speak in your home?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Q26 What is your current Zip code?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Q7 How many children do you have?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Q8 How many pregnancies have you had?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Q9 Are you currently pregnant?

* Yes (1)
* No (2)

Q10 How long ago did you have your most recent child?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Q11 With your most recent/current pregnancy, have you experienced episodes of depression, feeling down, or what is sometimes called the baby blues?

* Yes (1)
* No (2)

Display This Question:

If With your most recent/current pregnancy, have you experienced episodes of depression, feeling dow... = Yes

Q13 When did you experience these episodes?

* During pregnancy (1)
* After delivery (2)
* Both (3)

Display This Question:

If With your most recent/current pregnancy, have you experienced episodes of depression, feeling dow... = Yes

Q16 Did you speak with a doctor about these feelings?

* Yes (1)
* No (2)

Q17 Did you have episodes of depression or feeling down with your previous pregnancies or following the birth of other children?

* Yes (1)
* No (2)

Q18 When you are interested in learning more about something like your pregnancy or how you are feeling do you:

* Look for information on the Internet (1)
* Speak with your Doctor (2)
* Look in books or other written source of information (3)
* Speak with friends or family (4)
* Look for information from social media (5)

Q19 Do you currently own a cell phone?

* Yes (1)
* No (2)

Q20 Do you use apps like:

* Games (1)
* Kindle (2)
* Spotify (3)
* Pregnancy related apps (4)
* Healthcare apps (tracking activity) (5)
* Banking apps (6)
* Uber/Lyft (7)
* Shopping apps (Amazon, Target, Walmart) (8)
* Netflix (9)
* Google Maps (10)
* Snapchat (11)
* Instagram (12)
* Facebook (13)
* Twitter (14)
* WhatsApp (15)

Q21 What is your favorite app?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

End of Block: Default Question Block