





Views on advice to "shield" during the coronavirus (COVID-19) outbreak

Thank you for completing this survey. The information you provide will help us provide support for other people who are "shielding". Please ensure you have read the enclosed information sheet and completed the consent form before completing the survey.

| Q1 | Overall, how worried are you about coronavirus? (Please select the option that BEST applies to you) | | | | | | |
|----|---|--------------------|-------------------------------------|--|--|--|--|
| | Extremely worried | | | | | | |
| | Very worried | | | | | | |
| | Somewhat worried | | | | | | |
| | Not very worried | | | | | | |
| | Not at all worried | | | | | | |
| | Don't know | | | | | | |
| Q2 | Thinking about before the coronavirus select one option on each row) | outbreak, for each | of the following questions. (Please | | | | |
| | | Yes | No | | | | |
| | In general, did you have health problems that required you to limit your activities? | | | | | | |
| | Did you need someone to help you on a regular basis? | | | | | | |
| | In general, did you have health problems that required you to stay at home? | | | | | | |
| | If you needed help, could you count on someone close to you? | | | | | | |
| | Did you regularly use a stick, walker or wheelchair to move about? | | | | | | |
| Q3 | In general, before the coronavirus outle supplies and basic care? (Please tick | | d support with getting essential | | | | |
| | Yes, from my family | | | | | | |
| | Yes, from my friends | | | | | | |
| | Yes, from my neighbours | | | | | | |
| | Yes, from community support (e.g. local volunteers or Facebook group) | | | | | | |
| | Yes, from an organisation (e.g. NHS, local council, Government, charity) | | | | | | |
| | I did not need any additional support | | | | | | |
| | Other | | | | | | |
| | If other, please provide details: | | | | | | |
| | | | | | | | |
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Advice to "shield"

The following questions refer to when you were contacted by your GP or NHS England because you have a specific medical condition, which increases the risk of severe illness from coronavirus. You were strongly advised to stay at home at all times and minimise fact-to-face contact with other people, this is called "shielding". Shielding means:

- 1. Do not leave your home.
- 2. Do not attend any gathering, including with friends and family in private spaces, for example family homes.
- 3. Do not have any visitors to your home, except essential carers.
- 4. Strictly avoid contact with someone who is displaying symptoms of coronavirus.

The Government initially advised people to shield for 12 weeks (until the end of June) and is regularly monitoring this position.

| Q4 | When I was advised to "shield", I felt I received all the information I needed. (Please select the option that BEST applies to you) |
|----|--|
| | Strongly agree Tend to agree |
| | Neither agree or disagree |
| | Tend to disagree |
| | Strongly disagree |
| Q5 | When I was advised to "shield", I initially decided I would (Please select the option that BEST applies to you) |
| | Try to follow the advice in full |
| | Try to follow the advice, but not completely |
| | Not try to follow it at all |
| Q6 | Since you were advised to "shield", have you asked for support with getting essential supplies and basic care? (Please tick all that apply) |
| | Yes, from my family |
| | Yes, from my friends |
| | Yes, from my neighbours |
| | Yes, from community support (e.g. local volunteers or Facebook group) |
| | Yes, from an organisation (e.g. NHS, local council, Government, charity) |
| | I have not asked for any additional support |
| | Other |
| | If other, please provide details: |
| | |
| | |

| Q7 | supplies and basic care? (Please tick all that apply) | getting essential |
|----|--|-------------------|
| | Yes, from my family Yes, from my friends Yes, from my neighbours Yes, from community support (e.g. local volunteers or Facebook group) Yes, from an organisation (e.g. NHS, local council, Government, charity) I have not received any additional support Other (please provide details) | |
| | If other, please provide details: | |
| | | |
| Q8 | Since being advised to "shield", have you experienced any of the followable (Please tick all that apply) | owing symptoms? |
| | A new continuous cough A high temperature/fever Shortness of breath/difficulties breathing Runny or blocked nose Aches and pains Chest pains Chills/shivering Sore throat Diarrhoea Headache Stomach ache Feeling tired or having low engergy Loss of sense of smell or taste None of these Don't know | |
| Q9 | You reported a new continuous cough. Was this a: (Please select one Dry cough Wet cough (with mucus or phlegm) Don't know | e option) |

| Q10 | When your symptoms developed, what did you do? (Please tick all that apply) |
|------|---|
| | Waited a day or two to see if my symptoms got better, before making any changes Checked what to do online Called NHS 111 Called 999 Went in person to a doctor's surgery Made a phone call to a doctor's surgery Went to a walk-in centre |
| | Went to a hospital's Accident and Emergency department Went to a pharmacist/chemist Stayed at home, not leaving home for any reason Reduced the number of times I went out Avoided contact with people inside my household |
| | Avoided contact with people outside my household Asked friends or family for advice Did nothing Don't know Something else |
| | If something else, please provide details: |
| | |
| Q11 | Do you think you have had coronavirus? (Please select the option that BEST applies to you) |
| | I have definitely had it I think I have probably had it I don't know if I have had it or not I don't think I have had it I have definitely not had it |
| Q12 | Have you had a test for coronavirus? |
| | Yes, test said I had coronavirus Yes, test said I didn't have coronavirus No, never been tested |
| Но | usehold characteristics |
| have | following questions are about where you are living while you are "shielding". If you moved since being advised to "shield", please respond to these questions for where will be spending the majority of your time while "shielding". |
| Q13 | How many people live in your household (including you)? If you were living alone, please write "1". |
| | |

| Q14 | How many people in each age grou any box for which there is no one ir | | |
|-----|--|--------------------------------|----------------------------|
| | Children aged 0-4 years | | |
| | Children aged 5-17 | | |
| | years | _ | |
| | Adults aged 18-69 years | | |
| | Adults aged 70 years | | |
| | and over | I | |
| Q15 | Which of the following best describe | , | • |
| | I live by myself | If you live by yourself, go to | o Q18 |
| | I live with family (this includes your pachildren or other family by birth or ma | | |
| | I live in shared accommodation | | |
| | Other | | |
| | If other, please provide details: | | |
| | | | |
| | | | |
| Q16 | Do you share bathroom facilities at | home? | |
| | Yes | | |
| | No | | |
| | | | |
| Q17 | Do you have a room in your home to contact with other people? | that you could live and sleep | o in without coming into |
| | Yes | | |
| | No | | |
| Q18 | Does your home include access to terrace? | any outside space, such as | a garden, yard, balcony or |
| | Yes | | |
| | No | | |
| Q19 | Do you have any pets that lived in y | your home? | |
| | Yes | | |
| | No | If you do not have pets, go | to Q21 |
| | | | |
| Q20 | Please provide details of pets that I row) | ived in your home: (Please | select one option on each |
| | Dog(s) | Yes | No |
| | Dog(s) Cat(s) | | |
| | Bird(s) | | |
| | Reptile(s) | | |
| | Other | | |
| | | | |

| | If other, please provide details: | | | | | | | | |
|-----|--|------------|--------------|--------------|------------------|-------------------|--|--|--|
| | | | | | | | | | |
| Ехр | eriences of "shieldin | g" | | | | | | | |
| | The following questions are about your experiences since being contacted by NHS England and advised to "shield". | | | | | | | | |
| | se remember that your answ r analysed individually. | ers are | always tre | eated con | fidentially | and are | | | |
| Q21 | Since being contacted by NHS England and advised to "shield", did other people in your household stay at home and avoid contact with other people (i.e. "shield" with you)? (Please select the option that BEST applies to you) Yes No They tried, but were not able to Not sure N/A - I live by myself | | | | | | | | |
| Q22 | Since being contacted by NHS En your home for each of the following | _ | | elect one or | otion on eac | • | | | |
| | | Not at all | Occasionally | | Nearly every day | Not applicable | | | |
| | To go to the shops for groceries, toiletries or medicines | | | | | | | | |
| | To go to the shops for other items | | | | | | | | |
| | For exercise | | | | | | | | |
| | For a medical need (e.g. an outpatient appointment) | | | | | | | | |
| | To go to work | | | | | | | | |
| | To take my children to or from school/day care | | | | | | | | |
| | To provide help to someone else | | | | | | | | |
| | To meet friends or family members who don't live with you | | | | | | | | |
| | To walk my dog | | | | | | | | |
| | For another reason | | | | | | | | |
| | If for another reason, please provide details: | | | | | | | | |

| Q23 | If you left home during your isolation period, how much time did you spend indoors with other people, but keeping 2 metres away from them? |
|-----|---|
| | No time Less than 15 minutes Less than one hour Several hours One or more days N/A - I did not leave my home |
| Q24 | If you left your home during your isolation period, how much time did you spend indoors with other people and closer than 2 metres from them? |
| | No time Less than 15 minutes Less than one hour Several hours One or more days N/A - I did not leave my home |
| Q25 | If you left your home during your isolation period, how often did you have to touch any surfaces other people had touched (for example, to open doors or pay for things)? Never A few times Many times N/A - I did not leave my home |
| Q26 | Since being advised to "shield", if you have tried to get online groceries delivered, have you been able to? (Please select the option that BEST applies to you) |
| | Yes I tried, but was unable to access the website/book a delivery slot I did not try to get groceries delivered |
| Q27 | Since being advised to "shield", have you had any problems accessing healthcare? (Please select one option) |
| | I accessed healthcare but did not experience any problems I accessed healthcare and did experience problems I have not tried to access healthcare If you have not tried to access healthcare, go to Q29 |
| Q28 | Since being advised to "shield", how often have you had problems accessing healthcare? (Please select one option) |
| | Occasionally when trying to access healthcare More than half the times I tried to access healthcare Nearly every time I tried to access healthcare |

| Q29 | Since being advised to "shield", have you had any visitors in your home? (Please select the option that BEST applies to you) |
|-----|--|
| | Not at all |
| | Occasionally |
| | More than half the days |
| | Nearly every day |
| Q30 | Since being advised to "shield", how much of the time have you stayed in your room with the door closed, only coming out when necessary (e.g. to use the bathroom or prepare food)? (Please select the option that BEST applies to you) |
| | Nearly every day |
| | More than half the days |
| | Occasionally |
| | Not at all |
| | NA - I live by myself |
| Q31 | Since being advised to "shield", did any of these reasons make it difficult for you to "shield" at home (this means staying on your own in your room with the door closed, only coming out when necessary (e.g. to use the bathroom or prepare food)? (Please select all that apply) |
| | There was no room I could use to stay in on my own |
| | I had to look after other people (e.g. children, old or sick family members) |
| | Other family members wanted or needed to talk to or see me |
| | I was very ill and so family members had to come in my room to look after me |
| | None of these applied to me |
| | Other |
| | If other, please provide details |
| | |
| | |
| | |
| Q32 | Since being advised to "shield", did you use a separate bathroom or set up a bathroom rota? |
| | Yes |
| | No No |
| | N/A - I live by myself |

| Q33 | Since being advised to "shield", did you share people you were living with? | hand towels or kitchen equipment with other |
|-----|--|---|
| | Yes | |
| | No | |
| | NA - I live by myself | |
| Q34 | At the time you were contacted and advised to work outside your home? (Please select all t | |
| | I was self-employed, working outside my home | |
| | I was in full-time paid work outside my home | |
| | ☐ I was in part-time paid work outside my home ☐ I was in full-time education and studying outside | |
| | ☐ my home | |
| | I was in part-time education and studying outside my home | |
| | ☐ I was taking part in voluntary work outside my | |
| | | |
| | home (e.g. a friend or relative) | |
| | None of these applied to me | If none of these applied to you, go to Q37 |
| Q35 | Since being advised to "shield", did you contin | nue to work outside your home? |
| | Yes | |
| | No | |
| Q36 | Why did you continue to work outside your ho | me? (Please select all that apply) |
| | I worked as a key/critical worker | |
| | I could not afford to stop working | |
| | I was worried about losing my job My employer asked me to go into work | |
| | I could not do my job from home | |
| | I had an important task that I needed to do in pers | , |
| | I wanted to reduce the workload of my colleagues I needed to go into work to sustain my business | |
| | Other | |
| | If other, please provide details: | |
| | | |
| | | |

| Q37 | Thinking about the advice to "shield", please tell us to what extent you agree or disagree with each of the following statements. (please tick one box for each statement) | | | | | |
|-----|--|----------------|--------------------|------------------------------|------------------|----------------------|
| | | Strongly agree | N Tend to agree | leither agree or disagree | Tend to disagree | Strongly disagree |
| | If I had completely followed the advice to "shield", I would have lost touch with my friends and family | | | | | |
| | My friends or family would have disapproved if I had not completely followed the advice to "shield" | | | | | |
| | If I didn't completely follow the advice to "shield", I could have been in trouble with the police | | | | | |
| | If I completely followed the advice to "shield", it would have helped save lives | | | | | |
| | If I completely followed the advice to "shield", it would have helped protect the NHS | | | | | |
| | If I had caught coronavirus, I may have become very ill | | | | | |
| | If I had caught coronavirus, it would have had a severe impact on my family's wellbeing | | | | | |
| | If I had completely followed the advice to "shield" there would have been more conflict with the people that I was living with | | | | | |
| | If I had left home and met other people, I could have passed coronavirus to someone | | | | | |
| | If I leave home and meet other people, I could catch coronavirus | | | | | |
| | Completely following the advice to "shield" would have had a negative impact on how much money I have | | | | | |
| | If I completely follow the advice to "shield" I would not be able to carry out important religious activities | | | | | |
| | While I am "shielding", I am receiving help from someone outside my household | | | | | |
| | "Shielding" is making my physical health worse | | | | | |
| | "Shielding" is making my mental health worse | | | | | |
| | "Shielding" is making my physical health better | | | | | |
| | "Shielding" is making my mental health better | | | | | |
| | I enjoy spending more time at home while I "shield" | | | | | |

| Q38 | If you are advised to "shield" for a to follow this advice? (Please sele | | | | nk you would be |
|-----|--|-------------------|-------------------------|----------------|-----------------|
| | Highly unlikely Unlikely Neither unlikely or likely Likely Highly likely | | | | |
| Q39 | How hard would it be to follow thi you) | s advice? (Ple | ase select the | option that BE | ST applies to |
| | Very hard Hard Neither hard or easy Easy Very Easy | | | | |
| Q40 | Thinking about people in England do you think are fully following the number between 0 and 100 | | | | |
| Q41 | Since being advised to "shield", he each row) | ow often on av | erage did you | (Please ticl | k one box on |
| | | Nearly every time | More than half the time | Occasionally | Not at all |
| | wash your hands with soap and water, for more than 20 seconds | | | | |
| | clean objects or surfaces that you have touched | | | | |
| | keep 2 metres away from people you | | | | |
| | live with | | | | |
| Q42 | | ⊔ ave you (Ple | ease select on | e option on ea | ch row) |
| Q42 | live with | ave you (Ple | ease select on | - | ach row) NA |
| Q42 | Since being advised to "shield", h | , | | - | ŕ |

| | key work, etc.), to what extent do you agree or disagree with the following statements about wearing masks? (Please tick one box for each statement) | | | | | |
|-----|---|-------------------|----------------|------------------------------|------------------|----------------------|
| | | Strongly Agree | Tend to agree | Neither agree or disagree | Tend to disagree | Strongly disagree |
| | Wearing a mask outside of the home can help to protect me from getting coronavirus | | | | | |
| | Wearing a mask outside of the home can help to prevent me infecting other people with coronavirus if I happen to have it | | | | | |
| | Only health and other key workers should wear masks, even if there is an unlimited supply | | | | | |
| | The Government should advise everyone in the UK to wear masks outside of the home | | | | | |
| | The Government should ban wearing masks unless you are a health or other key worker, even if there is an unlimited supply | | | | | |
| | I would feel safer going outside if I wear a mask | | | | | |
| | I would feel more vulnerable going outside if I wear a mask | | | | | |
| | I dislike people wearing masks because I cannot see their expression | | | | | |
| | I feel suspicious of people wearing masks because they may have coronavirus | | | | | |
| Q44 | To what extent do you agree or di box for each statement) | sagree wi | th the followi | ng statemer | nts? (Pleas | se tick one |
| | | Strongly agree | Tend to agree | Neither agree or disagree | Tend to disagree | Strongly disagree |
| | If I had coronavirus I would be willing for the data from my mobile phone to be used by public health doctors to identify the places I had visited in the past 7 days | | | | | |
| | There should be a law that allows public health doctors to access the mobile phone data of people with coronavirus to identify the places they had visited in the past 7 days | | | | | |
| | During a national emergency we should be less concerned about the privacy of our data | | | | | |
| | | | | | | |

Thinking about going out in public in the current situation (i.e. not including any healthcare,

Q43

How have events affected you?

The following questions all relate to how recent events might have affected you.

| Q45 | Thinking over the last two weeks , ho (Please tick one box for each row) | ow often have | e you been both | ered by the foll | owing problems? |
|-----|---|---------------|-------------------|-------------------------|------------------|
| | | Not at all | Several days | More than half the days | Nearly every day |
| | Feeling down, depressed, or hopeless | | | | |
| | Little interest or pleasure in doing things | | | | |
| | Feeling tired or having no energy | | | | |
| | Trouble falling or staying asleep, or sleeping too much | | | | |
| | Poor appetite or overeating | | | | |
| | Feeling bad about yourself – or that you are a failure or have let yourself or your family down | | | | |
| | Trouble concentrating on things, such as reading the newspaper or watching television | | | | |
| | Moving or speaking so slowly that other people have noticed? Or the opposite, being so fidgety or restless that you have been moving around a lot more than usual? | | | | |
| | Thoughts that you would be better off dead, or of hurting yourself in some way? | | | | |
| Q46 | In the past month , thinking about a syou(Please tick one box for each ro | | nt related to the | coronavirus ou | tbreak, have |
| | | Y | 'es | ١ | No |
| | had nightmares associated with your involvement with the event(s) or thought about your involvement with the event(s) when you did not want to? | | | | |
| | tried hard not to think about your involvement with the event(s) or went out of your way to avoid situations that reminded you of your involvement with the event(s)? | [| | [| |
| | been constantly on guard, watchful, or easily startled? | | | | |
| | felt numb or detached from people, activities, or your surroundings? | [| | [| |
| | felt guilty or unable to stop blaming yourself or others for your involvement with the coronavirus outbreak or any problems your involvement with the event(s) may have caused? | | | | |

| Q47 | Thinking over the last two weeks , it (Please tick one box for each row) | now often have | you been bothe | ered by the fol | lowing problems? |
|-----|---|----------------|----------------|----------------------------|------------------|
| | Faciling porveys, apvious or an adge | Not at all | Several days | More than half the days | Nearly every day |
| | Feeling nervous, anxious or on edge | | | | |
| | Not being able to stop or control worrying | | | | |
| | Worrying too much about different things | | | | |
| | Trouble relaxing | | | | |
| | Being so restless that it is hard to sit still | | | | |
| | Becoming easily annoyed or irritable | | | | |
| | Feeling afraid as if something awful might happen | | | | |
| Q48 | Over the last two weeks, please is to "shield"? | ndicate how a | angry you have | been feeling | about being told |
| | ☐ Not at all ☐ Somewhat | | | | |
| | Moderately | | | | |
| | Very much | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

About you

| Q49 | What is your age? |
|-----|---|
| | ☐ 18 to 24☐ 25 to 44☐ 45 to 69☐ 69+ |
| Q50 | Are you Male Female Other Prefer not to say |
| Q51 | To which of these groups do you consider you belong? White-British White-Irish White-other Chinese Asian Black or Black British African Mixed Other Would prefer not to say |
| Q52 | Which of the following best describes your education level? Degree or above Below degree level Other None (no formal qualification) Would prefer not to say |
| Q53 | Which of the following best describes your current employment status? (if you have more than one job, please select the option that best describes your main job, i.e. the job you do most often) Working full time (30 hours a week or more) Usually working full time (30 hours a week or more), but currently on leave or furloughed Working part-time (8-29 hours a week) Usually working part-time (8-29 hours a week), but currently on leave or furloughed Stay at home parent/homemaker/housewife or househusband Unemployed (registered or in process of registering) Unemployed (not registered but looking for work) Retired Student Don't know Would prefer not to say Other |

| Please use this shielding": | space to provide any add | ditional comments ab | out your experience of |
|-----------------------------|--------------------------|----------------------|------------------------|
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Thank you for your participation. The information you have shared will help us provide support for people who are "shielding".

If you have any queries, please email coronavirusevaluation@phe.gov.uk

Please return your completed survey and consent form in the reply-paid envelope provided.