

ANTIBODY TEST STUDY 5

REACT2 Round 2b Behavioural Survey

Covid-19 Testing Study

Individual level follow-up questionnaire

Study 5 (b) Version 1.2

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INTERNAL AND CLIENT USE ONLY

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Landing page

- The landing page will be the first screen that respondents see on navigating to www.xx (the URL contained in the invitation letter)
- The landing page will show some welcome text, and will include the following features and design elements, from top to bottom:
 - DHSC and IM logos
 - Accessibility options (three icons to vary the font size, and options to vary the background colour, example below). Respondents will have the option to vary these, but will not be required to make any choices.
 - Survey title (link to HH survey name)
 - Intro text and information on how to answer
 - Access code box, with text “Please enter the access code from your letter” and “Start survey” box
 - The following links:
 - [About Ipsos MORI](#)
 - Privacy Policy¹
 - Contact us²
 - FAQ³
 - Participant information sheet

¹ This will be a privacy policy unique to the individual-level survey. It will be on the IM website, and will make reference to GDPR. and this link will take respondents directly to it. The URL will also be included on the survey materials (again, following the protocol for the main survey).

² This should launch an email to the survey email address (UK-covid-test-research@ipsos.com)

³ These FAQ will expand on those included on the reverse of the invitation letters.

Confirm individual

Before we begin, we would like to inform you that Ipsos MORI is a member of the Market Research Society.

Taking part is voluntary and you can change your mind at any time.

If you would like to read our Privacy Policy, you can access it at [XX LINK]. This explains the purposes for processing your personal data as well as your rights under data protection regulations to access your personal data, withdraw consent, object to processing of your personal data and other required information.

ASK ALL

INDCONF

This survey is for [FF_Surname] [FF_Surname]. Are you [FF_Surname] [FF_Surname]?

Please select one answer

1. Yes
2. No [TERMINATE: NEED A MESSAGE ADDING HERE]

RESPCHK1

Are you willing to take part in this study?

Taking part is voluntary. If you agree, we will ask you to complete a short questionnaire, including questions on any COVID-19 symptoms you may have had since your test, numbers of people you have been in contact with, feedback on your response to your antibody test result and report on activities and behaviours since your test.

In total, this should all take around 15 minutes.

This information will be kept securely and only data without personal identifying information will be shared beyond the study team.

More information is available in the participant information sheet included on the survey landing page or with your invite letter, and you can withdraw from the study at any time.

1. Yes, I want to take part in this study
 2. No, I do not want to take part. TERMINATE (TAKE TO THANK YOU SCREEN)
-

Health

ASK ALL

NEWCOVIDA

Recently you carried out an antibody test as part of the first phase of this antibody research study. Since then, do you think you have had COVID-19?

Yes, confirmed by a positive test (swab/PCR/antigen test)

Yes, suspected by a doctor but not tested

Yes, my own suspicions

No

IF NEWCOVIDA = 1, 2 OR 3

COVIDC

How severe was your recent illness when you {IF NEWCOVIDA=1 had; IF NEWCOVIDA=2 or 3 thought you had} COVID-19?

1. No symptoms
2. Mild symptoms – didn't affect my daily life
3. Moderate symptoms – some effect on my daily life
4. Severe symptoms – significant effect on my daily life

Last test

ASK ALL

NEWQ A

When you did the antibody test as part of the first phase of this antibody research study, what was the result?

1. My previous antibody test was IgG positive
 2. My previous antibody test was IgM positive
 3. My previous antibody test was positive but I don't remember in which way
 4. My previous antibody test was negative
 5. My previous antibody test was invalid
 6. I don't remember
 7. I could not tell what the test result was
-

NEWQ B

When did you do your previous antibody test?

Please try to be as accurate as possible.

WRITE IN DATE

DAY/MONTH/YEAR

ASK ALL

COVIDCON

In the time since your antibody test, have you been in close contact with anyone with COVID-19?

1. Yes, I have been in contact with a confirmed/tested COVID-19 case
 2. Yes, I have been in contact with a suspected COVID-19 case
 3. No, not to my knowledge
-

ASK ALL

LEAVE 1

Did you leave home for any reason in the last 7 days, that is since <DATE/MONTH>?

1. Yes
 2. No
-

IF LEAVE 1 =1

LEAVE 2

In the last 7 days, that is since <DATE/MONTH>, for what reasons have you left home? Please select all that apply

1. For work
2. To volunteer
3. For urgent medical or dentist appointments
4. For routine medical or dentist appointments
5. To care for someone else (for example, friends or family)
6. To socialise with people in a public place
7. To socialise with people in a personal place (for example, visiting family and friends at their home)
8. For outdoor exercise (for example, going for a walk or hike, run or cycle)
9. To go shopping
10. For errands (for example, pay bills, withdraw money from bank, visit post office)
11. I have left my house for other reasons (please specify)

Contact patterns

ASK ALL

CONTACT1

Not including members of your household, how many different people did you have contact with yesterday? If you had contact with a person more than one time, please count them only once.

By contact we mean:

- Any direct skin-to-skin physical contact (e.g. kiss/embrace/handshake)
- Being less than 2 metres from another person for over 5 minutes

Enter 0 if you had no contacts yesterday outside of your household, and if you are not sure please give your best guess.

(enter number)

IF CONTACT1=1+

CONTACT4

You said that yesterday you came into contact with CONTACT1 people who are not members of your household. How many of those were in each of the following age groups?

1. 0 to 17 years old (enter number)
 2. 18 to 34 years old (enter number)
 3. 35 to 64 years old (enter number)
 4. 65+ years old (enter number)
 5. Don't know
-

IF CONTACT1 = 1+ AND LEAVE2 =1

CONTACT5

You said that yesterday you came into contact with CONTACT1 people who are not members of your household. How many of those were at your place of work?

Enter 0 if you had no contacts yesterday outside of your household that occurred at your place of work, and if you are not sure please give your best guess.

(enter number)

Test results

TESTDISCL

Have you shared the results of your antibody test with other people (in addition to filling in the survey)?

1. Yes, but only with people in my household
 2. Yes, with a range of people
 3. No, I have not told anyone
-

TESTCONF

How confident are you that the antibody test result is accurate for you?

1. Very confident
 2. Fairly confident
 3. Not very confident
 4. Not at all confident
-

TESTEXPECT

Before you took the antibody test, what result were you expecting?

1. Positive
 2. Negative
 3. Unsure
 4. Can't remember
-

IF TESTEXPECT=1

WHYPOS

Why did you expect a positive result?

Select all that apply

1. I had been confirmed with COVID-19 (confirmed with test - swab/PCR/antigen test)
 2. I suspected I'd had COVID-19 (no test)
 3. I have been in contact with a confirmed/tested COVID-19 case
 4. I have been in contact with a suspected COVID-19 case
 5. I am a healthcare worker with direct patient contact
 6. I am a healthcare worker with no patient contact
 7. I work in a care home with direct contact with clients
 8. I work in a care home without contact with clients
 9. I am an essential / key worker (not health or social)
 10. Other (please specify)
-

ASK ALL

TESTHOPE

Before you took the antibody test, what result were you hoping for?

1. Positive
 2. Negative
 3. No preference
 4. Can't remember
-

TESTFEEL

How did you feel when you got your result?

Select all that apply

1. Pleased
 2. Relieved
 3. Disappointed
 4. Confused
 5. Other (please specify)
-

FUTURE1

How likely or unlikely do you think it is that you will get COVID-19 at any point in the future?

1. Very likely
2. Fairly likely
3. Neither likely nor unlikely
4. Fairly unlikely
5. Very unlikely
6. Don't know

Behaviour change

ASK ALL

BEHAVA NEW

Since you completed the antibody test for the study did you change your behaviour by doing any of the following?

Please select any that apply

1. I cancelled my usual social activities
2. I didn't go out to a place of work
3. I didn't attend lectures in person (if a student)
4. I didn't go shopping for non-essential things
5. I didn't go to a grocery store or pharmacy
6. I didn't leave the house
7. I wore a face mask outside my home
8. I tried to avoid physical contact with people
9. I followed handwashing recommendations
10. I used hand sanitiser more than usual
11. I followed coughing and sneezing recommendations
12. I used tissues more than usual
13. I wore gloves while going out of my home
14. I avoided public transport
15. I avoided going to restaurants/bars/pubs
16. I avoided going for walks or exercise outside
17. I avoided taking my children out of my home
18. None of these

ASK ALL

BEHAVA new2

Please tell us about your activities since you completed the antibody test for the study?

Please select any that apply

1. I resumed my usual social activities
2. I go out to a place of work
3. I attend lectures in person (if a student)
4. I go shopping for non-essential things
5. I go to a grocery store or pharmacy
6. I leave the house
7. I don't wear a face mask outside my home
8. I don't avoid physical contact with people
9. I don't follow handwashing recommendations
10. I don't use hand sanitiser more than usual
11. I don't follow coughing and sneezing recommendations
12. I don't use tissues more than usual
13. I don't wear gloves while going out of my home
14. I take public transport
15. I go to restaurants/bars/pubs
16. I go for walks or exercise outside
17. I take my children out of my home
18. None of these

Demographics

ASK ALL

DEMNEW1

Has your work situation changed since you completed the antibody test for the study?

1. Yes - I have been furloughed
 2. Yes - I have been made redundant
 3. Yes – I am not working (but I have not been furloughed or made redundant)
 3. Yes – I have gone back to work after being furloughed
 - 4.
 5. Yes – I have started a new job
 6. No
 7. Not applicable to my job situation
-

EMPL

At present are you...?

If you are furloughed, please select the job that you are furloughed from at the moment. If you are not furloughed, please select your current job.

1. Employee in full time-job (30+hours a week)
 2. Employee in part-time job (less than 30 hours a week)
 3. Self-employed
 4. Government supported training
 5. Unemployed and available for work
 6. Wholly retired from work
 7. Full-time education at school, college or University
 8. Looking after home/ family
 9. Permanently sick / disabled
 10. Doing something else
 11. Prefer not to say
-

IF EMPL = 1, 2 or 3

WORKTYP1

Are you ...

Select all that apply

1. A healthcare worker with direct patient contact
 2. A healthcare worker with no patient contact
 3. Working in a care home with direct contact with clients
 4. Working in a care home without contact with clients
 5. An essential/ key worker (as currently defined by the [Government](#))
 6. None of these
 7. Don't know
-

IF WORKTYP1= 5, 6, 7

WORKTYP2

Do you have a job that currently requires you to work outside your home in any of the following public facing roles?

1. Construction
2. Delivering to homes
3. Food retail, other shop work
4. Logistics / other transportation
5. Manufacturing
6. Policing or prisons, fire & rescue, coastguard
7. Public transport (including taxis)
8. School, nursery or childcare
9. Armed forces
10. I am required to work outside of my home for other reasons [please specify]
11. No, not currently required to work outside my home

ASK ALL

RESPCHK2

Are you willing to carry out the antibody test again as part of this study?

Taking part is voluntary. If you agree, we will send you a COVID-19 self-testing antibody kit which involves pricking the tip of your finger to get a blood spot for testing. We will provide full instructions with the kit. After receiving the testing kit, you are still able to change your mind about taking part.

Once you have done the test, we would also like you to complete a short questionnaire, that will ask you to record your test result and any COVID-19 symptoms you may have had in recent weeks.

This information will be kept securely and only data without personal identifying information will be shared beyond the study team.

We will send more information with the test, and you can withdraw from the study at any time.

1. Yes, I want to take part in this study
2. No, I do not want to take part.

LINKAGE

Imperial College London would like your permission to link information held by NHS Digital and other UK NHS bodies about you to this survey data to follow your health status for up to 20 years. All such data will be held securely by Imperial College London and kept confidential.

Do you give permission for Imperial College London to do this?

1. Yes
2. No

TAKE TO THANK YOU SCREEN AND CLOSE