# Boston College daily sleep and well-being survey data during early phase of the COVID-19 pandemic

## Citation

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## Terms of Use

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# COVID19 Demographics

Your health and safety are our number one priority. If diagnosed with COVID-19, we hope and encourage you to seek the treatment and care that you need and recover quickly. Any information that you provide us moving forward will be useful in understanding the effects of COVID-19 and the culture of living though a pandemic, but please do not let keeping up with these surveys interfere with your care in any way. Feel free to only respond to the study on days that you are feeling up to it.

Subject ID:

_____
(Provided to you in email with link to demographic survey)

Date/Time (click 'Now'):

_____

What time zone do you live in?

_____

What country are you in?

_____

State/Territory/Province? (optional)

_____

Age:

_____

Per NIH, research findings may be influenced by sex and/or gender, and it is important to use these terms correctly. Women and men are characterized by both sex and gender, as highlighted in the Institute of Medicine report entitled "Exploring the Biological Contributions to Human Health: Does Sex Matter?" (2001).

Sex is a biological variable defined by characteristics encoded in DNA, such as reproductive organs and other physiological and functional characteristics. Gender refers to social, cultural, and psychological traits linked to human males and females through social context.

Biological sex:
- ◯ Female
- ◯ Male

Gender:
- ◯ Female
- ◯ Male
- ◯ Non-binary/Third Gender
- ◯ Prefer to self-describe
- ◯ Prefer not to say

Gender self description:

_____

Do you identify as Transgender?
- ◯ Yes
- ◯ No
- ◯ Prefer not to say

What is your Sexual Orientation?
- ◯ Gay/Lesbian
- ◯ Bisexual
- ◯ Straight/heterosexual
- ◯ Prefer to self-describe
- ◯ Prefer not to say

Sexual Orientation Self-Description:

_____

Ethnicity:
- ☐ Hispanic
- ☐ Not Hispanic
- ☐ Prefer not to say

Race:
- ☐ African American
- ☐ Asian
- ☐ White
- ☐ Hispanic/Latinx
- ☐ Native Hawaiian or Other Pacific Islander
- ☐ American Indian/ Alaska Native
- ☐ More than one race/ Prefer to self-describe
- ☐ Unknown
- ☐ Prefer not to say

Race Self-Description

_____

Military Status:
- ◯ Civilian
- ◯ Active Military
- ◯ Veteran

Marital status:
- ◯ Single
- ◯ In a relationship
- ◯ Married
- ◯ Separated/Divorced
- ◯ Widowed

Which of the following have you been diagnosed?
- ☐ A sensory impairment (vision or hearing)
- ☐ A mobility impairment
- ☐ A learning disability
- ☐ A mental health disorder
- ☐ A disability or impairment not listed above
- ☐ Prefer not to say
  (Please check all that apply. If none, please leave blank.)

Do you currently have any serious medical problems?
- ◯ Yes
- ◯ No

Please describe in as much detail as you feel comfortable:

_____

Number of dependents:

_____

If you have dependents, how many are children living at home with you right now?

_____

How many people total are living with you right now?

_____
(Including family and non-family members. Do not include yourself)

Approximate household annual income:

○ $0-$25,000
○ $25,001-$50,000
○ $50,001 - $75,000
○ $75,001 - $100,000
○ $100,001 - $150,000
○ $150,001 - $250,000
○ $250,000+

What is the highest level of education you have attained?

○ Some high school
○ High School Diploma or GED
○ Some college
○ College degree
○ Some post-bacc education
○ Graduate, Medical, or Professional degree

Are you currently a full-time student?

○ Yes
○ No

What type of school do you go to?

_____
(trade, vocational, 2-year college, 4-year college or university, graduate school, etc)

Year of study (e.g., freshman, sophomore, grad student, etc.):

_____

Are you currently employed?

○ Yes
○ No

What is your occupation?

_____

Are you currently working at home?

○ No
○ Yes - part-time
○ Yes - full-time

Has COVID-19 impacted your employment status?

○ Yes
○ No

Has your institution (workplace, college, etc.) taken any measures in response to the COVID-19 outbreak?

○ Yes
○ No

If yes, please describe:

_____

How long do you think it will be until things "return to normal" for you?

_____

○ Days
○ Weeks
○ Months

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Please describe any additional demographic
information that you would like us to know:

_____