## **Appendix A: Sample of Survey Items**

Assessing Psychological Resilience of Health Profession Graduate Students During the COVID-19 Pandemic

Q1 –	Description of study and consent to participate Demographic data
Q9	Which of the following experiences have you had? (select all that apply)
	have been tested for COVID-19 (1)
	have tested positive for COVID-19 (2)
	have had to quarantine because of actual/suspected exposure to COVID-19 (3)
	have had close contact (Interacted with face-face for more than 15 min) with someone then tested positive for COVID-19 (4)
	have had a family member or close friends who have tested positive for COVID-19 (5)
(6)	have had a close friend or family member who required hospitalization for COVID-19
	have had a close friend or family member die from COVID-19 (7)
	have worked face to face with patients who were actively positive for COVID-19 (8)
19	have worked face to face with patients who had previously tested positive for COVID-(9)
CO	I have worked with patients who have since died of COVID-19 or are likely to die of VID-19 (10)

Q10 During the COVID-19 Pandemic, which of the following have you felt? (select all that apply).

Pride in myself for contributing on the "front lines" (1)						
Excited about increased clinical opportunities/ responsibilities available to me because of COVID-19 (2)						
Guilt about "not contributing enough" (3)						
Fearful of contracting COVID-19 (4)						
Fearful of infecting family/ loved ones (5)						
Lonely/ isolated (6)						
Burned out (7)						
Forced/ pressured to go into a dangerous situation related to COVID-19 as part of my health professional program (8)						
Resentful toward my training program (9)						
Frustrated by all the restrictions/ changes (10)						
Q11 How do you rate the support you've felt from <b>The University of Florida as an institution</b> during the COVID-19 pandemic?						
O Very Satisfied (1)						
O Moderately Satisfied (2)						

- O Slightly Satisfied (3)
- O Neutral (4)

- Slightly Dissatisfied (5)
- O Moderately Dissatisfied (6)
- O Very Dissatisfied (7)

Q12 How do you rate the support you've felt from **your specific professional training program** during the COVID-19 pandemic?

○ Very Satisfied (1)
O Moderately Satisfied (2)
O Slightly Satisfied (3)
O Neutral (4)
O Slightly Dissatisfied (5)
O Moderately Dissatisfied (6)
○ Very Dissatisfied (7)

Q13 How satisfied are you with the accessibility of COVID-19 testing at UF?

○ Very Satisfied (1)
O Moderately satisfied (2)
<ul> <li>Slightly satisfied (3)</li> </ul>
O Neutral (4)
<ul> <li>Slightly dissatisfied (5)</li> </ul>
O Moderately dissatisfied (6)
○ Very dissatisfied (7)

Q14 How satisfied are you with accessing and using COVID-19 related PPE while at UF?

Very Satisfied (1)
Moderately satisfied (2)
Slightly satisfied (3)
Neutral (4)
Slightly dissatisfied (5)
Moderately dissatisfied (6)
Very dissatisfied (7)

Q15 How much has the format of your lecture- based or didactic educational experiences changed during the COVID-19 Pandemic?

0	Significant positive change (1)
0	Moderate positive change (2)
$\bigcirc$	Minimal positive change (3)

O No change (4)

O Minimal negative change (5)

O Moderate negative change (6)

○ Significant negative change (7)

O N/A (8)

Q16 How much has the format of your clinical/ patient-centered educational experiences changed during the COVID-19 Pandemic?

$\bigcirc$ Significant positive change (1)
$\bigcirc$ Moderate positive change (2)
O Minimal positive change (3)
O No change (4)
O Minimal negative change (5)
O Moderate negative change (6)
O Significant negative change (7)
O N/A (8)

Q17 Taken as a whole, how do you feel the COVID-19 Pandemic has affected your education and training?

O Very Positive Impact (	1)
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- O Moderately Positive Impact (2)
- Slightly Positive Impact (3)
- O Neutral Impact (4)
- Slightly Negative Impact (5)
- O Moderately Negative Impact (6)
- Very Negative Impact (7)

Q18 How satisfied are you with your current level of in person contact (classroom lectures, patient/ research participant contact, rotations, lab activities, hands on training, etc.)?

○ Very Satisfied (1)
O Moderately Satisfied (2)
O Slightly Satisfied (3)
O Neutral (4)
O Slightly Dissatisfied (5)
O Moderately Dissatisfied (6)
○ Very Dissatisfied (7)

Q19 How have your personal experiences during the COVID-19 pandemic affected your decision to pursue a career in healthcare?

O Strongly Reinforced (1)						
O Moderately Reinforced (2)						
○ Slightly Reinforced (3)						
O No effect (4)						
$\bigcirc$ Slightly Weakened (5)						
$\bigcirc$ Moderately Weakened (6)						
$\bigcirc$ Strongly Weakened (7)						

Q20 How has the COVID-19 pandemic impacted the educational opportunities available to you?

- Significantly more opportunities (1)
- Somewhat more opportunities (2)
- Slightly more opportunities (3)
- $\bigcirc$  No change in opportunities (4)
- Slightly fewer opportunities (5)
- Somewhat fewer opportunities (6)
- Significantly fewer opportunities (7)

Q21 How has COVID-19 impacted how you view the faculty in your program?

- Very Positive Change (1)
- Moderately Positive Change (2)
- Slightly Positive Change (3)
- O Neutral/ No Change (4)
- Slightly Negative Change (5)
- Moderately Negative Change (6)
- Very Negative Change (7)

Q22 How has COVID-19 impacted your overall wellbeing?

○ Very Positive Change (1)

O Moderately Positive Change (2)

Slightly Positive Change (3)

 $\bigcirc$  Neutral/ No change (4)

Slightly Negative Change (5)

O Moderately Negative Change (6)

○ Very Negative Change (7)

Q23 What is your current level of stress?

O Extreme (1)

 $\bigcirc$  Very high (2)

 $\bigcirc$  Somewhat high (3)

O Moderate (4)

 $\bigcirc$  Somewhat low (5)

$\bigcirc$	Very	low	(6)
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O None (7)

Q24 Which of the following best describes you?

I enjoy my work (school). I have no symptoms of burnout (1)

Occasionally I am under stress and I don't always have as much energy as I once did, but I don't feel burned out. (2)

 $\bigcirc$  I am definitely burning out and have one or more symptoms of burnout, such as physical and emotional exhaustion. (3)

The symptoms of burnout that I'm experiencing won't go away. I think about frustrations at work (school) a lot. (4)

I feel completely burned out and often wonder if I can go on. I am at the point where I may need some changes or many need to seek some sort of help. (5)

Q25 How concerned have COVID-19 made you about your ability to graduate "on time"?

Not concerned at all (1)

Slightly concerned (2)

O Moderately concerned (3)

 $\bigcirc$  Very concerned (4)

•	Never (1)	Rarely (2)	Somewhat (3)	Often (4)	Always (5)
Drinking Alcohol (1)	0	$\bigcirc$	0	$\bigcirc$	$\bigcirc$
Drug Use (2)	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$
Eating (3)	0	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$
Hobbies (4)	0	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$
Journaling (5)	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$
Mediation/ Mindfulness (6)	0	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$
Outdoor Activities (7)	0	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$
Physical Activity/ Exercise (8)	0	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$
Reading (9)	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$
Sex/ Masturbation (10)	0	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$
Social Interactions with Family/ Friends in Person (11)	0	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$
Social Interactions with Family/ Friends Virtually (12)	0	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$
Social Media (13)	0	$\bigcirc$	$\bigcirc$	$\bigcirc$	0

Q26 How often did you utilize the following strategies to cope with stress **before the COVID-19 pandemic**?

Spiritual or Religious Practices (14)	$\bigcirc$	$\bigcirc$	0	$\bigcirc$	$\bigcirc$
TV/ Movies (15)	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$
Video Games (16)	0	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$

	Never (1)	Rarely (2)	Somewhat (3)	Often (4)	Always (5)
Drinking Alcohol (1)	0	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$
Drug use (2)	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$
Eating (3)	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$
Hobbies (4)	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$
Journaling (5)	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$
Meditation/ Mindfulness (6)	0	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$
Outdoor Activities (7)	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$
Physical Activity/ Exercise (8)	0	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$
Reading (9)	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$
Sex/ Masturbation (10)	0	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$
Social Interaction with Family/ Friends in Person (11)	0	$\bigcirc$	$\bigcirc$	$\bigcirc$	0
Social Interaction with Family/ Friends Virtually (12)	0	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$
Social Media (13)	0	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$

Q27 How often have you utilized the following strategies to cope with stress **during the COVID-19 pandemic**?

Spiritual or Religious Practices (14)	$\bigcirc$	$\bigcirc$	0	0	$\bigcirc$
TV/Movies (15)	0	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$
Video Games (16)	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$

Q28 How has COVID affected the quantity/ quality of your social interactions with your friends & family?

○ Very Positive Change (1)
O Moderately Positive Change (2)
O Slightly Positive Change (3)
O Neutral/ No Change (4)
<ul> <li>Slightly Negative Change (5)</li> </ul>
O Moderately Negative Change (6)
○ Very Negative Change (7)

Q29 How has COVID affected your sleep?

○ Very Positive Change (1)

O Moderately Positive Change (2)

Slightly Positive Change (3)

O Neutral/ No change (4)

Slightly Negative Change (5)

Moderately Negative Change (6)

○ Very Negative Change (7)

Q30 How has COVID affected your physical activity?

○ Very Positive Change (1)

Moderately Positive Change (2)

Slightly Positive Change (3)

O Neutral/ No Change (4)

Slightly Negative Change (5)

O Moderately Negative Change (6)

○ Very Negative Change (7)

Q31 How has COVID affected your ability to pursue your hobbies?

○ Very Positive Change (1)

O Moderately Positive Change (2)

Slightly Positive Change (3)

O Neutral/ No Change (4)

Slightly Negative Change (5)

Moderately Negative Change (6)

○ Very Negative Change (7)

Q32 How has COVID affected the way you conceptualize/ view society?

○ Very Positive Change (1)

Moderately Positive Change (2)

Slightly Positive Change (3)

O Neutral/ No Change (4)

Slightly Negative Change (5)

O Moderately Negative Change (6)

○ Very Negative Change (7)

Q33 How has COVID affected the way you conceptualize/ view yourself?

Very Positive Change (1)

Moderately Positive Change (2)

Slightly Positive Change (3)

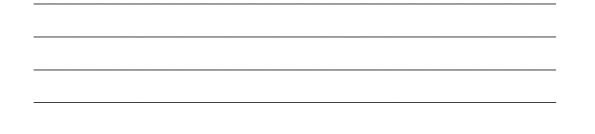
O Neutral/ No Change (4)

Slightly Negative Change (5)

Moderately Negative Change (6)

○ Very Negative Change (7)

Q34- 44 **10-Item Connor-Davidson Resilience Scale (Copyrighted, used with permission)** Q45 Please list any other comments you would like to share about your experiences as a health profession student during the COVID-19 pandemic.



Q46 If you are struggling emotionally and/or are concerned about your ability to cope, please reach out to the following resources for support: o UF Crisis line: 352-392-1575 or U Matter We Care: https://umatter.ufl.edu/ o UF Counseling and Wellness Center: https://counseling.ufl.edu/ o Alachua County Crisis Center: 352-264-6789 o National Suicide Prevention Lifeline: 1-800-273-TALK