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# BMJ Open

## Priority populations' experiences of isolation, quarantine and distancing for COVID-19: a protocol for an observational cohort, the Optimise Study.

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9 **distancing for COVID-19: a protocol for an observational cohort, the**  
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45 **Trial registration number:** NCT05323799  
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49 **Trial progression:** The study commenced recruitment in September 2020 and closed  
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52 recruitment in August 2022; with data collection continuing to August 2024.  
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57 **Protocol version:** 3.0 dated 24-Aug-2021  
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Data category	Information
Primary registry and trial identifying number	ClinicalTrials.gov NCT05323799
Date of registration in primary registry	April 12, 2022
Source(s) of monetary or material support	Victorian Government Department of Jobs Precincts and Regions, Macquarie Group Foundation, Burnet Institute donors
Primary sponsor	Burnet Institute
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Contact for scientific queries	AP, PhD Burnet Institute
Scientific title	Priority populations' experiences of isolation, quarantine and distancing for COVID-19: a protocol for an observational cohort, the Optimise Study.
Countries of recruitment	Australia
Health condition(s) or problem(s) studied	Coronavirus disease (COVID-19) caused by the SARS-CoV-2 virus and related social, health and economic impacts
Intervention(s)	N/A
Key inclusion and exclusion criteria	Ages eligible for study: $\geq 18$ years Sexes eligible for study: both Accepts healthy volunteers: Yes
	Inclusion criteria: adult patient ( $\geq 18$ years), residents of Victoria, Australia, have access to the internet to complete online surveys or a phone to undertake phone interviews. Exclusion criteria: Currently in hospital or too unwell to participate at recruitment; Not currently residing in Victoria at recruitment, Aged $<18$ years
Study type	Observational
Date of first enrolment	September 2020
Target sample size	1000
Recruitment status	Recruitment closed – follow up data collection ongoing
Primary outcome(s)	<ul style="list-style-type: none"> <li>Uptake of COVID-19 risk mitigation strategies over time – e.g. isolation, quarantine, vaccines, mask wearing, physically distancing</li> </ul>

	<ul style="list-style-type: none"><li>• Knowledge of COVID-19 restrictions and confidence in government decision-making over time</li><li>• Average number of contacts with key people per day over time and in different settings</li></ul>
Key secondary outcomes	<ul style="list-style-type: none"><li>• Changes in work and finances as a result of COVID-19;</li><li>• Changes in lifestyle and social engagement as a result of COVID-19; and</li><li>• Changes in physical and mental health as a result of COVID-19;</li></ul>

## Abstract

**Background:** Longitudinal studies can provide timely and accurate information to evaluate and inform COVID-19 control and mitigation strategies and future pandemic preparedness. Social and behavioural data are important inputs for epidemic modelling, and can support responsive government policy by ensuring that decisions reflect community attitudes, experiences and needs. The Optimise Study is a multidisciplinary research platform established in the Australian state of Victoria in September 2020 to collect epidemiological, social, psychological and behavioural data from priority populations to understand changing public attitudes, behaviours and experiences of COVID-19.

**Methods and Analysis:** This protocol paper describes the data collection procedures for the Optimise Study, an ongoing longitudinal cohort of Victorian adults and their social networks. Participants complete a schedule of monthly quantitative surveys and daily diaries for up to 24 months, plus additional surveys annually for up to 48 months. In addition, brief snapshot surveys are sent to participants to gather information about the acceptability of new policies at pertinent times in the COVID-19 epidemic. Cohort participants are recruited for qualitative interviews at key time points to enable in-depth exploration of people's lived experiences. Separately, community representatives are invited to participate in community engagement

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3 groups, which meet regularly to review study findings and interpret research findings to inform  
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7 policy and practice recommendations.  
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11 **Ethics and dissemination:** The Optimise longitudinal cohort and qualitative interviews are  
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14 approved by the Alfred Hospital Human Research Ethics Committee (# 333/20). The Optimise  
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17 Study CEG is approved by the La Trobe University Human Ethics Committee (# HEC20532).  
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20 All participants provide informed verbal consent to enter the cohort, with additional consent  
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23 provided prior to any of the sub studies. Localised and timely data collection is imperative for  
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26 informing public health policy that is both community-centred and evidence-led.  
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### 32 **Keywords**

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35 COVID-19; pandemic; social network; coronavirus; public health; longitudinal cohort;  
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38 protocol; Australia  
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### 42 **‘Strengths and limitations of this study’:**

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45 • The Optimise study is a longitudinal cohort of Victorian adults and their social  
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48 networks (Sept 2020 – Aug 2024); where participants’ are followed for up to 24-48  
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51 months and data can be linked to map social connections.  
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55 • It combines quantitative data collection with qualitative interviews and focus group  
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58 discussions at key time points with purposively recruited cohort participants to capture  
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4 in-depth information about opinions, attitudes and beliefs about and adoption of  
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7 COVID-19 mitigation strategies.  
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11 • The key study outcomes are timely empirical data on participants behaviours, attitudes  
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13 and experiences of COVID-19 and government responses, from priority populations  
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15 and identify factors that influence adoption of risk mitigation strategies.  
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21 • It is the largest social networks study conducted in Australia, involving linked data from  
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23 individuals and their social network in the form of contact diaries, to explore how social  
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25 connection can influence attitudes and behaviours within networks and inform dynamic  
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27 social network and transmission models.  
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35 • Snowball sampling methods used for recruitment of social network data means that the  
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37 study populations is not representative of the broader Victorian population.  
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## Introduction

Since its emergence in late 2019, the SARS-CoV-2 (COVID-19) pandemic has caused substantial morbidity and mortality globally, with variants causing continuing waves of infection (1). In early 2020 Australia experienced its first wave of COVID-19 cases, peaking on 28th March 2020. COVID-19 cases in Australia first declined in April 2020 after federal and state governments closed borders and introduced strict restrictions on population movement (2).

Throughout 2020 and 2021, Australia experienced waves of infection concentrated in the states of Victoria and New South Wales, countered by COVID-19 mitigation strategies including case and contact identification and management (test, trace, isolate and quarantine) and vaccine rollout (3). Victoria, Australia's second most populous state, was particularly affected, enduring multiple waves of infection and prolonged public health restrictions (4). Strategies included mandating masks in public indoor and outdoor settings to strict stay-at-home ('lockdown') orders, with people allowed to leave home for four reasons: to care for others, purchase groceries and medicine, exercise for an hour, and perform essential work (5). Additional orders were closure of non-essential businesses, restriction of movement to within

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4 5km of home, curfews, domestic travel restrictions, border closures and mandatory hotel  
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7 quarantine of returned travellers (6).  
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11 Australia's early public health responses to COVID-19 in 2020-2021 were successful, with  
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14 fewer cases and deaths than most high-income Western countries throughout the first two years  
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17 of the pandemic (7). This can be attributed to the strong and timely public health responses  
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20 outlined above (8), high coverage of free COVID-19 testing through Australia's universal  
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23 health system, and implementation of high-volume PCR testing centres. Moreover, after an  
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26 initially delayed vaccine roll-out (9-11), Australia achieved two-dose coverage of over 90%  
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29 for people aged 12+ years by March 2022 (12). Mathematical modelling has also informed the  
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32 response (3, 13-15). Ensuring models are parameterised with localised and real-time empirical  
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35 data – both disease (e.g., cases) and social (e.g., estimated uptake of mitigation strategies)  
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38 epidemiological data – has been critical to prediction accuracy and effective policies.  
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46 However, challenges remain. Since the Omicron variant emerged in Australia in December  
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49 2021, three distinct waves of transmission have occurred, partly due to lower vaccine efficacy  
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52 against newer variants, waning vaccine effectiveness, and diluted public health prevention  
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55 strategies, increasing absenteeism and stress on hospital systems (16, 17). To 28 August 2022,  
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58 9,992,378 cases and 14,014 COVID-19-associated deaths were reported and 63,121,445  
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4 COVID-19 vaccine doses administered (18). Combatting new variants in coming years will  
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7 require governments to respond rapidly to adaptive public health advice and sustain health  
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10 system capacity. Crucially, future responses will occur in a context of community fatigue,  
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13 related both to the disease and associated social restrictions. This will reduce government's  
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16 appetite to reintroduce mitigation policies and the community's willingness to follow them,  
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19 lowering their effectiveness. Government, public health officials and the community must  
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22 balance the need to contain COVID-19 with the social, health and economic consequences of  
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27 restrictions (19-21).

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31 As the pandemic has continued, COVID-19 outbreaks have occurred within 'essential'  
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34 industries such as meat-processing factories and health and aged care, despite strict public  
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37 health restrictions. These outbreaks highlighted socioeconomic inequities, with many essential  
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40 industries employing disadvantaged people such as migrant workers in low-wage positions on  
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43 casual contracts (22). Many cannot work from home, have little or no sick leave, and eschew  
44  
45  
46 isolation or quarantine for fear of losing employment (23). Moreover, many migrant families  
47  
48  
49 and households live communally and share transportation, making physical distancing near  
50  
51  
52 impossible (24). Collectively, these economic, behavioural and social factors increase risk of  
53  
54  
55  
56  
57  
58 COVID-19 transmission among these and other priority populations. We refer to populations  
59  
60



1  
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3  
4 at heightened risk of COVID-19 transmission or illness as priority populations/groups; and  
5  
6  
7 understanding their transmission dynamics and social networks and predicting COVID-19  
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9  
10 outbreaks to enable targeted support and resourcing is critical.  
11  
12  
13

14 The Victorian population is culturally and linguistically diverse, with 28% born overseas in  
15  
16  
17 more than 200 countries; another 21% have at least one parent born overseas. Twenty-six per  
18  
19  
20 cent speak a language other than English at home: 3.2% Mandarin, 1.3% Arabic and 0.1%  
21  
22  
23  
24 Dinka (25). Following early outbreaks of COVID-19 within Victorian African and Chinese  
25  
26  
27 communities and widespread media reporting (26), there arose concern about stigma towards  
28  
29  
30 these communities and the lack of culturally appropriate information (27). Understanding the  
31  
32  
33 experience and needs of communities who face additional barriers to accessing pandemic  
34  
35  
36 information and support is vital. Moreover, determining how social relationships influence  
37  
38  
39 attitudes and behaviours within these communities, alongside other individual-level factors  
40  
41  
42 such as confidence in government and fear of COVID-19, can inform the development of  
43  
44  
45 culturally appropriate and effective information and support services (28).  
46  
47  
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52 To inform ongoing COVID-19 control measures and help prevent harmful health consequences  
53  
54  
55 of COVID-19, including the growing burden of long COVID and the socio-economic pressures  
56  
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3 of a prolonged pandemic, it is important to understand communities' experiences, attitudes,  
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5  
6 behaviours and needs over time.  
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## 10 *Objectives*

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16 The Optimise Study is a multidisciplinary research platform with four main objectives:

- 17  
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21 • collect empirical data (behaviours, attitudes and experiences of COVID-19 and  
22  
23 government responses) from priority populations and identify factors that influence  
24  
25 adoption of risk mitigation strategies;  
26  
27  
28
- 29  
30  
31 • describe and monitor the unintended health, social and economic consequences of  
32  
33 COVID-19 transmission prevention measures;  
34  
35  
36
- 37  
38 • collect empirical data on social contacts and mixing patterns, particularly for key  
39  
40 priority groups, to inform dynamic social network and transmission models and explore  
41  
42 how social connection influences attitudes and behaviours within networks; and  
43  
44  
45
- 46  
47 • test the acceptability, feasibility and effectiveness of new and existing intervention  
48  
49 strategies (diagnostic, therapeutic, behavioural, and social) to guide the Australian  
50  
51 Government's COVID-19 response strategy.  
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## Methods and analysis

The Optimise Study has three components:

- a longitudinal cohort study of Victorian adults and their social networks (Sept 2020 – Aug 2024); participants' are followed for up to 24-48 months and data can be linked to map social connections. In addition, brief snapshot surveys were introduced to gather rapid information about the acceptability of new policies and ongoing behaviours (Sept 2021–Aug 2023);
- qualitative interviews and focus group discussions (FGDs) at key time points with purposively recruited cohort participants to capture in-depth information about opinions, attitudes and beliefs about and adoption of COVID-19 mitigation strategies; and
- community engagement groups (CEGs), formed to interpret the cohort and qualitative interview research findings to inform recommendations for policy and practice.

Optimise Study collaborators implement additional sub-studies of specific priority populations to increase the breadth and depth of the findings. Information is reported frequently to

1  
2  
3 governments and the community. Data collection procedures are described below. We used the  
4  
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7 SPIRIT reporting guidelines (52).  
8  
9

## 10 11 *Longitudinal cohort*

### 12 13 14 15 16 **Study design**

17  
18  
19  
20 The longitudinal cohort and social network study aims to recruit approximately 1,000  
21  
22  
23 Victorians. It involves social network analysis to inform responses to COVID-19, so uses  
24  
25  
26 snowball sampling for recruitment and collects data on the interactions and connections  
27  
28  
29 between participants to understand transfer of knowledge, attitudes and practices (29, 30). It  
30  
31  
32 targets priority populations considered to be at risk of contracting COVID-19, developing  
33  
34  
35 severe COVID-19, experiencing negative impacts of government restrictions introduced to  
36  
37  
38 reduce COVID-19 transmission, or having difficulty understanding or following restrictions.  
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42  
43  
44 ‘Seed’ participants are from selected priority populations, meaning the cohort does not  
45  
46  
47 represent the broader Victorian population.  
48  
49

50  
51  
52 Optimise recruits from two groups:

- 53  
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55 • Group 1 – people diagnosed with COVID-19 (within the past 7 days) or notified as  
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59 “close contacts” of a person with COVID-19; and  
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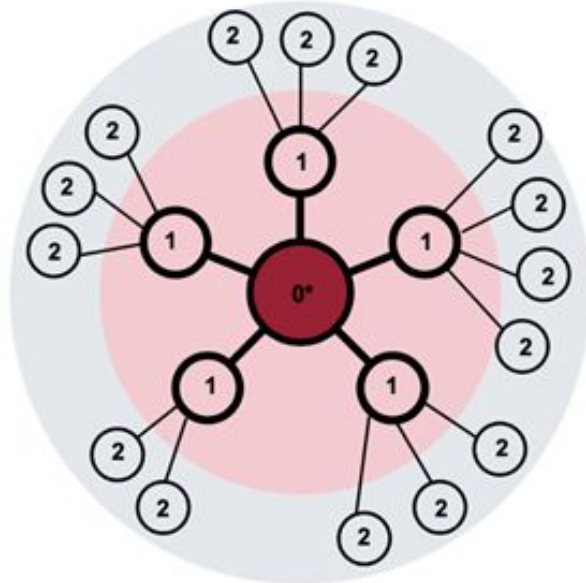
- Group 2 – people not currently infected with COVID-19 but at heightened risk of infection and/or adverse outcomes of COVID-19 infection and/or public health measures (e.g., worse employment conditions, housing, or access to primary healthcare).

Over the study, participants complete 16 data collection tools at baseline (one Key People nomination, one baseline survey, then 14 prospective daily diaries) then five data collection points each month (one monthly follow-up survey and four follow-up diaries), plus additional surveys if they test positive for COVID-19 or are a close contact.

### Sampling and sample size

Snowball sampling was used to recruit individuals and their contacts. Seeds are sampled purposively from priority populations (Layer 0) and asked to nominate people they consider 'key' in their day-to-day lives (meaning relatives, people with whom they live, discuss personal matters, give or receive practical support, interact frequently, and/or share hobbies or sport; 'key people' hereafter). Layer 0's key people are recruited (Layer 1 participants), and nominate their own key people (Layer 2) (Figure 1). Layer 2 participants are asked to nominate key people, for the purposes of social network analysis, but they are not recruited.

Figure 1. Example of snowball recruitment for Optimise Study



The study aimed to recruit ~1000 participants, based on 200 seed participants and anticipating 1–2 key people recruited from each participant in Layers 1 and 2. Sample size calculations were based on targets for priority groups. Layer 0 target numbers were revised as the study progressed to respond to pandemic dynamics and emerging priority populations, and because fewer key people (Layers 1 and 2) were recruited than anticipated. Additional priority populations and targets were introduced throughout the follow-up period as the epidemiology evolved and new priority populations were identified. Priority populations and targets are shown in Table 1. Definitions of priority populations, sampling strategies and COVID-19 case definitions are included in **Supplementary file 1**.

## Participants

Participants are eligible if they are in a target group and meet the following inclusion criteria:

- aged  $\geq 18$  years;
- resident of Victoria, Australia;
- willing and able to provide informed consent to participate in a survey/interview over the phone in English, or in Arabic, Mandarin or Dinka when a bilingual data collector is available;
- provide a valid email\* and phone number; and
- have access to the internet to complete online surveys or a phone to undertake phone interviews.

Participants are excluded if they are:

- in hospital or too unwell to participate at recruitment;
- not currently residing in Victoria; or
- aged  $< 18$  years.

\*Participants completing all tools by phone do not require an email address for study communications, but, if available it is recorded to assist with conflict resolution in social network analysis.

**Table 1. Seed participants by subgroups**

Target group	Target number of seed participants
<b>Initial targets *</b>	
Group 1	
Recent COVID-19 cases	30
Group 2	
Healthcare workers	20
Aged-care workers	20
High-risk workplace (factory/distribution workers)	20
People residing in regional centres	30
People with pre-existing chronic illnesses	40
People speaking a language other than English at home	40
<b>Total</b>	<b>200</b>
<b>Additional targets*</b>	
Group 1	
Hotel quarantine workers	20
Group 2	
People aged 18–24	20
Arabic/Mandarin/Dinka (AMD)-speaking participants	40
<b>Total</b>	<b>80</b>

\*During 2021, young people and people working in hotel quarantine programs emerged as groups with high COVID-19 incidence, so additional seed sets were added to the recruitment target. Recruitment targets for people



1  
2  
3 who spoke AMD as their preferred language were added in response to concern about stigma towards African and  
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5  
6 Chinese communities and lack of culturally appropriate information.  
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9

## 10 **Recruitment**

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13  
14 Seeds are recruited through paid and unpaid social media advertisements and flyers distributed  
15  
16  
17 via community and industry groups, community-based organisations and professional  
18  
19 networks. Targeted social media advertisements reach priority groups based on age range,  
20  
21 location, setting, gender and self-nominated interests (e.g., health and social welfare).  
22  
23  
24 Advertisements and flyers direct potential participants to the study website, where they can  
25  
26  
27 submit an expression of interest (EOI) (32). The EOI includes questions to categorise seeds  
28  
29  
30 and assess their eligibility (Table 1).  
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39 In September 2021, specific recruitment and data collection strategies were developed to  
40  
41  
42 enable people born overseas or speaking a language other than English at home to participate.  
43  
44  
45 Trained bilingual data collectors from AMD-speaking communities were employed to support  
46  
47  
48 recruitment and data collection in participants' languages. Data collectors utilise online  
49  
50  
51 advertisements, flyers and posters translated into AMD (with English). Flyers and posters are  
52  
53  
54 distributed to community service organisations and promoted on local AMD-language radio  
55  
56  
57 stations and social media platforms, including WeChat, Weibo and WhatsApp.  
58  
59  
60

1  
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4 EOI forms translated into Arabic and simplified Chinese were available on the study website;

5  
6  
7 Dinka is primarily a verbal language, so the EOI form is in English with some accompanying

8  
9  
10 Dinka translation. Bilingual data collectors aimed to prioritise recruitment of participants who

11  
12  
13 face additional barriers to accessing information and support during the COVID-19 pandemic.

14  
15  
16 They used the following additional recruitment criteria: people with: low English proficiency,

17  
18  
19 low technological proficiency (i.e., could not self-complete surveys), have recently emigrated

20  
21  
22 to Australia, and are ineligible for government support.

23  
24  
25 When feasible, each participant is assigned a single data collector responsible for

26  
27  
28 communication and follow-up to promote continuity and rapport. All potential participants

29  
30  
31 receive an initial phone call from a data collector who explains the study, including its aims,

32  
33  
34 procedures, participation requirements, and reimbursements. When a potential participant

35  
36  
37 expresses interest, the data collector administers the screening questions, confirms eligibility,

38  
39  
40 and records consent (see Supplementary file 2). Informed consent are provided by all

41  
42  
43 participants to enter the cohort, collected verbally and documented in the study database, with

44  
45  
46 additional consent provided prior to any of the substudies. Data collectors abandon recruitment

47  
48  
49 after three unsuccessful contact attempts or if the study candidate declines.

## Data collection procedures

We collect data across a broad range of domains, including socio-demographics, work and study circumstances, finances, health behaviours, access to services and information, social connectedness, mental health, knowledge of COVID-19, attitudes towards COVID-19 prevention measures, and contact with people. Data collection follows a standardised and high-frequency procedure, including once-off surveys, baseline surveys and contact diaries, repeated monthly follow-up surveys, repeated weekly follow-up contact diaries, and COVID-19 event-based diaries. Recruitment into the longitudinal cohort commenced in September 2020 and closed in December 2021 when the target sample size was achieved. Once funding was secured to support recruitment of new priority populations, including from AMD-speaking communities, follow-up was extended and participants could complete up to 24 months of follow-up surveys and diaries to allow ongoing generation of data to inform public health policy (Sept 2020 – Aug 2022). In addition to the standardised longitudinal data collection, cross-sectional snapshot surveys were developed and deployed ad hoc across 2021–23 to collect more in-depth data on participants' behaviours and attitudes to new government policies and COVID-19 mitigation strategies.

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3  
4 Participants can withdraw from the study at any time by emailing the study team or sending an  
5  
6  
7 SMS. We unenroll participants who have not completed a baseline survey within 10 days of  
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10 recruitment and are unresponsive to repeated follow-up attempts.  
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### 13 14 **Baseline data collection**

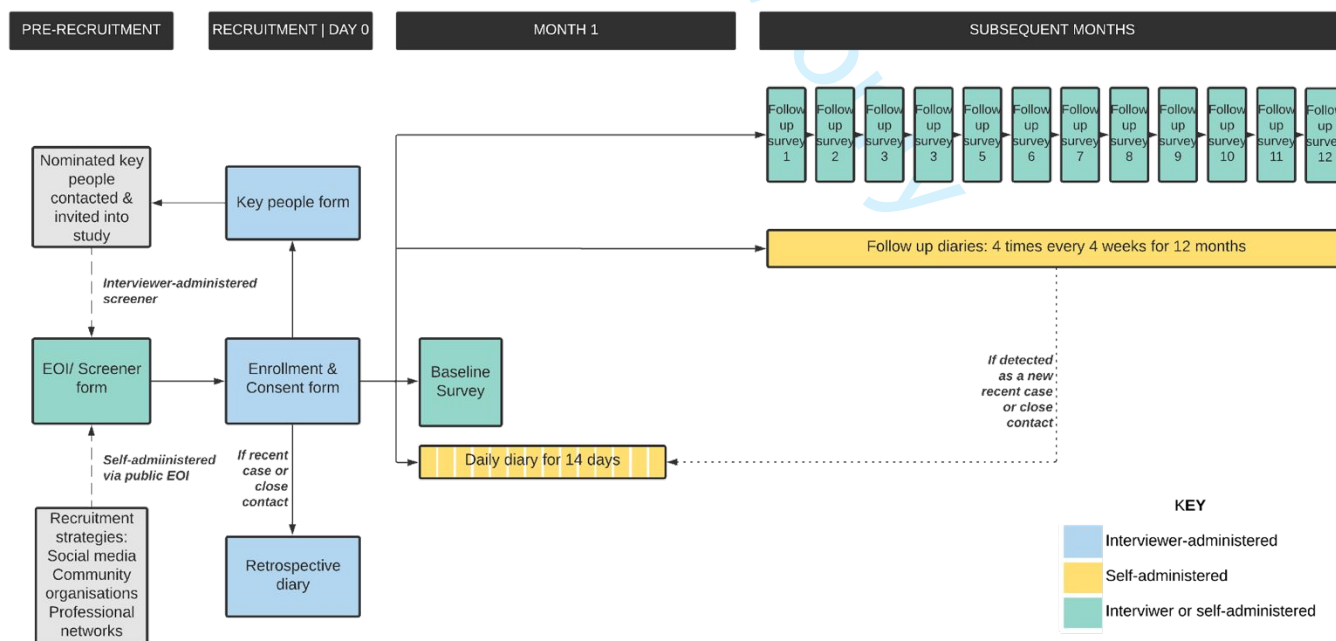
15  
16  
17  
18  
19 An interview guide for all data collection tools was translated into AMD through an accredited  
20  
21  
22 translation service and reviewed by our bilingual data collectors for cultural appropriateness.  
23

24  
25  
26 Following consent, participants complete a phone interview with a data collector who  
27  
28  
29 administers the key people form and asks participants to designate their preferred data  
30  
31  
32 collection method:  
33

- 34  
35  
36 • all tools are interviewer-administered by telephone in the relevant language;  
37  
38
- 39  
40 • self-complete daily contact diaries and follow-up contact diaries in English, Mandarin  
41  
42  
43 and Arabic. Consent, key people, retrospective diary, baseline and follow-up surveys  
44  
45  
46 are administered over the phone with a bilingual data collector; or  
47  
48
- 49  
50  
51 • participants who speak a language other than English at home and are fluent in English  
52  
53  
54 can self-complete all tools in English.  
55  
56  
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Participants are automatically assigned to the relevant data collection tools and subsequent schedule of surveys and diaries for the follow up period (see Figure 2 and Table 2). For self-administered tools, the participant is sent a secure link by email and/or SMS (as preferred). Automated reminder emails or SMS are sent to participants with surveys due for completion each Monday at 8am. For interviewer-administered tools, a data collector contacts participants when a survey or diary is due. Participants have seven days to complete assigned tools before they expire. Up to three SMS, email and phone reminders prompt participants to complete baseline and follow up surveys for interviewer-administered surveys. Individual reminders are not provided for daily diaries.

Figure 2. Overview of standardised quantitative data collection tools and scheduling for a 12-



month period\*

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2  
3 \* As recruitment was extended to include additional recruitment targets – the following up period was extended to a maximum of 24 months.  
4  
5  
6

7 All participants complete a key people form during the baseline interview, allowing data  
8  
9  
10 collectors to target eligible individuals for recruitment. Participants can nominate a maximum  
11  
12  
13 of 50 key people all together, but a maximum of eight per participant are selected for attempted  
14  
15  
16 recruitment (Layers 1 and 2). If the participant gives permission and contact details for more  
17  
18  
19 than eight key people, a key people with the most in-person contact, are prioritised for  
20  
21  
22 recruitment.  
23  
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28 Participants then complete a baseline survey about demographics, impacts of COVID-19,  
29  
30  
31 baseline behaviours (including social, health and lifestyle factors) before the pandemic, and  
32  
33  
34 attitudes to, knowledge and uptake of COVID-19-related mitigation strategies. A baseline  
35  
36  
37 prospective daily diary is then completed online on days 1–14 after recruitment to collect  
38  
39  
40 information on participant's health, isolation/quarantine status, mood, and detailed data on their  
41  
42  
43 contacts in the previous day. For participants who complete the baseline diaries with the  
44  
45  
46 assistance of a data collector, instead of daily interviews, the diaries are completed across two  
47  
48  
49 interviews, with data collected retrospectively for the previous 7 days.  
50  
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52  
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54

55 For participants who report testing COVID-19 positive or being a close contact in the 7 days  
56  
57  
58 before baseline (Group 1), a retrospective diary is administered with interviewer assistance to  
59  
60

1  
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3 establish a timeline of COVID-19 events and capture experiences of quarantine, isolation and  
4  
5  
6  
7 adoption of public health directions.  
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11 **Table 2. Overview of data collection tools and scheduling**  
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13

<b>Data collection tool</b>	<b>Participants</b>	<b>Administration</b>	<b>Expected time to complete (minutes)</b>	<b>Frequency</b>	<b>Schedule</b>
EOI / Screener form	Layer 0	Self	5	Once	Pre-recruitment
	Layer 1 & 2	Interviewer	5	Once	Day 0
Key people form (baseline)	All participants	Interviewer	15	Once	Day 0
Retrospective diary	Participants classified as a recent COVID-19 case of close contact at recruitment	Interviewer	15	Once	Day 0
Baseline surveys	All participants	Self or interviewer-administered	30	Once	Day 0-7
Prospective Daily diary	All participants	Self or interviewer-administered	5-10	Daily	Days 1-14
Follow up surveys	All participants	Self or interviewer-administered	20	Monthly	Every 4 weeks starting from week 5
Key people form (follow-up)	All participants	Incorporated into follow-up surveys	N/A	Monthly	Repeated every 4 weeks
Follow up diary	All participants	Self or interviewer-administered	5-10	4 days/month	Starting from week 5 or directly after daily diary completed

COVID-19 event-based diaries	Participants classified as a recent COVID-19 case or close contact in diaries or surveys	Self or interviewer-administered	5-10	Triggered by event	Manually assigned at timepoint where the participant tests positive or is a household like contact
Snapshot surveys	All participants	Self or interviewer-administered	5-10	Ad hoc	Sept 2021 - Aug 2023

### Follow-up data collection

Follow-up commences 28 days after recruitment; all participants receive individualised links via email or SMS, or a phone call from a data collector, to complete a follow-up survey. The follow up surveys collect the same content as the baseline surveys, but cover the previous four weeks. Follow-up surveys also ask participants about face-to-face and digital contact with key people in the previous 4 weeks and allow them to nominate new key people.

Participants are invited to complete four follow-up diaries in a month scheduled randomly for two weekdays and two weekend days to capture data on COVID-19 testing, COVID-related symptoms, being a 'close contact' in the previous 7 days, and information on mood and details of people with whom they interacted 'yesterday'. The follow-up diaries are designed to assess social interactions, cooperation with government restrictions, and COVID-19-related health,



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3  
4 and enable timely identification of COVID-19 diagnoses or close contacts and trigger a manual  
5  
6  
7 assignment of a COVID-19 event-based diary (described below). After 12 months, all  
8  
9  
10 participants receive a message at the start of their next follow-up survey and follow-up diary  
11  
12  
13 congratulating them on their participation and informing them that the study is continuing. If  
14  
15  
16 they complete these tools, they are automatically assigned to another 12 months of follow-up  
17  
18  
19 surveys and diaries.  
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### 25 **COVID-19 event-based diaries**

26  
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28  
29 If participants reported that they had tested positive for COVID-19 or are identified as a close  
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31  
32 contact in any of the monthly follow-up surveys or diaries, they are invited to complete an  
33  
34  
35 event-based diary to collect information on testing experience, health status, symptoms, disease  
36  
37  
38 severity and ability to complete their 7 days of isolation or quarantine. It also collects detailed  
39  
40  
41 data on personal interactions in the period starting two days before symptoms developed or  
42  
43  
44 they tested positive (whichever came first).  
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### 50 **Snapshot surveys**

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54 To inform ongoing changes in Victorian Government policy during the pandemic, we design  
55  
56  
57 (upon request, within 10 business days) and deploy ad hoc cross-sectional snapshot surveys to  
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3 collect more in-depth data on participants' opinions, behaviours and attitudes to new  
4  
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6  
7 government policies and COVID-19 mitigation strategies. Distinct from the 24-month follow  
8  
9  
10 up cohort schedule, snap-short surveys are deployed on an ad-hoc basis. All cohort participants  
11  
12  
13 are invited to complete a snapshot survey, self-completed and in English, within 7 days;  
14  
15  
16  
17 meanwhile, bilingual data collectors administer 15 phone surveys in AMD.

### 21 Data collection tools

22  
23  
24  
25 Data collection tools, their rationales and key domains are described below:

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31  
32 • *EOI/screen (see Supplementary file 3A)* – publicly available form to register interest in  
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the study, assess study eligibility and key target recruitment group membership, collect  
contact details and preferences for data collector call-back.
- *Key people form (see Supplementary file 3B)* – collects data on key people to inform  
snowball recruitment, social network mapping, and analysis of COVID-19 infection  
spread and social network influence on behaviours and attitudes. Based on previous  
social network analysis forms (33).

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- ***Baseline retrospective daily diary (see Supplementary file 3C)*** – collects data from participants recently diagnosed with COVID-19 and/or notified as a close contact in the previous 7 days. This interviewer-administered survey targets the timing and sequence of events surrounding COVID-19 transmission over the previous 14 days, including interactions with healthcare services and the Victorian Government COVID-19 contact tracing team, living arrangements, and isolation or quarantine. Data collected includes testing and diagnosis, potential exposure, and symptomatic period.
  - ***Baseline survey (see Supplementary file 3D)*** — collects data (within 7 days of recruitment) on demographics; health and wellbeing; healthcare utilisation; COVID-related health and attitudes; vaccination attitude, uptake and barriers; and knowledge of and attitude to public health measures and restrictions. Questions on residence type, tenure and unpaid care and responsibilities follow the 2016 Census of Population and Housing (34). Occupation and industry questions follow the Australian and New Zealand Standard Industrial Classification, 2006 (35). Financial hardship questions (e.g., missing meals) follow the Household Expenditure Survey and Survey of Income and Housing 2009–10 (36). Social connectedness questions (e.g., frequency of visiting friends) follow Dias et al. (2018) (37). Long-term illness, age and disability questions

1  
2  
3 follow the Australian Longitudinal Study on Women's Health (38). Mental health was  
4  
5  
6 assessed by the Generalized Anxiety Disorder 7-item (GAD-7) (39) and Personal  
7  
8  
9 Wellbeing Index-Adult (40). Questions about confidence in government agencies  
10  
11  
12 follow the 2019 Canterbury Wellbeing Survey (41).  
13  
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15

- 16  
17 • ***Baseline prospective daily diary (see Supplementary file 3E)*** – collects data via self-  
18  
19 administered online surveys every day for 14 days after recruitment and consent. Each  
20  
21 diary asks about health (adapted from FluTracking) (42), isolation/quarantine status,  
22  
23 mood, and personal interactions on the previous day. Data collected for each contact  
24  
25 named includes details about the relationship, age and gender, location where contact  
26  
27 occurred (inside/outside), purpose and duration of contact, and if physical contact  
28  
29 occurred. If the participant cannot name all contacts due to high number, confidentiality  
30  
31 or preference, they are asked to estimate the number of additional contacts per location.  
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- 45 • ***Follow-up survey (see Supplementary file 3F)*** – collects data every four weeks, starting  
46  
47 from week 5. This survey includes the same domains as the baseline survey but targets  
48  
49 current circumstances and changes in the previous 4 weeks to enable assessment of  
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51  
52 COVID-19 impacts and behaviours and attitudes.  
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- ***Follow-up daily diary (see Supplementary file 3G)*** – collects data for 2 weekdays and two weekend days every 4 weeks (average 1 day/week), starting from week 5. In addition to asking about contacts on the previous day, the follow-up diary elicits information on health, isolation and quarantine status in the previous 7 days. The 7-day recall enables detection of participants with new COVID-19 events, including diagnosis and notification as a close contact, and establish a timeline of related events. If new COVID-19 events are detected and confirmed with the participant (case or close contact), then the participant will be invited to complete a COVID-19 event-based diary.
  - ***COVID-19 event-based diary (see Supplementary file 3H)*** – collects data from participants diagnosed with COVID-19 and/or notified as a close contact of a case during the follow-up period. They are manually assigned an event-based diary scheduled for 7 days after their date of diagnosis or notification of being a household contact. The diary captures participants' health status and recent COVID-19 transmission or exposure information, including interaction with healthcare services and the Victorian Department of Health, living arrangements, and isolation or

1  
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3 quarantine. Data collected includes testing and diagnosis, potential exposure, and  
4  
5  
6  
7 symptomatic period.  
8  
9

- 10 • *Snapshot surveys (see Supplementary file 4 A-F)* – collects data from participants at  
11  
12  
13  
14 key time points in the epidemic to assess behaviours and attitudes to COVID-19 topics  
15  
16  
17 and government policies. Topics include behaviours over Summer 2021–22, incentives  
18  
19  
20 and barriers to vaccination, concerns about children returning to school, influence of  
21  
22  
23 potential cessation of the Victorian pandemic declaration, impacts of long COVID, and  
24  
25  
26  
27 COVID-19 testing, prevention and response in schools.  
28  
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30

### 31 32 **Reimbursement** 33 34

35  
36 Participants are reimbursed monthly for their efforts with electronic gift vouchers redeemable  
37  
38  
39 at major retailers. Initially, participants were reimbursed \$35 (AUD) for the baseline survey  
40  
41  
42 and \$15 if at least 10 (of 14) baseline prospective daily diaries were completed. For each month  
43  
44  
45 of follow-up, participants received \$2.50 per follow-up daily diary and \$25 per follow-up  
46  
47  
48 survey completed. Participants who test positive for COVID-19 or are a notified close contact  
49  
50  
51 are invited to complete an event-based diary each day for 14 days (\$15). This was simplified  
52  
53  
54 in December 2020 to \$50 for all recruitment and baseline data collection, \$35 each month for  
55  
56  
57 completion if any follow-up was completed in that month (minimum one follow-up diary), and  
58  
59  
60

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3  
4 \$15 for COVID-19 event-based diaries. If a participant is retained for 12 months, and  
5  
6  
7 completes a baseline and at least one follow-up survey a month, they are reimbursed \$470.  
8  
9

10 AMD-speaking participants are offered more flexible reimbursement methods (bank transfer  
11  
12  
13 or a mailed visa debit card) to overcome cultural and linguistic issues with electronic gift cards.  
14  
15  
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### 17 **Data collection and management**

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22 To facilitate collection of social network data, we use NetCollect (Version 2.1.94, SNA  
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To facilitate collection of social network data, we use NetCollect (Version 2.1.94, SNA  
Toolbox), a purpose-built online data-capture platform (33). The software and data are hosted  
on the Burnet Institute's local servers. NetCollect automatically sends survey links via email  
or SMS according to each participants' data collection schedule, starting from date of consent.

A data management plan and data dictionaries were developed and shared with all study  
collaborators. Quantitative data preparation, cleaning and analyses are conducted using R  
version 4.1.2 (43). Data cleaning and analysis code is stored in Git for version control. Survey  
and network data are automatically extracted every fortnight via an application programming  
interface. To ensure timely identified of new COVID-19 cases and close contacts across the  
follow period, NetCollect was programmed to notify Slack (a data communication platform)  
of notifications from survey responses. Slack prompts a data collector to contact the participant  
and invite them to complete retrospective diaries.

## Data preparation for social network analysis

NetCollect offers data matching algorithms to identify and eliminate duplicate contact nominations within a person's social networks. This conflict resolution process involves reviewing all study participants, key people and daily contacts for similarities in name and other characteristics and identifying probable matches according to specific rules. From this, Optimise and Swinburne University of Technology Social Network Research Lab study researchers review and verify matches manually through a separate algorithm. Multiple nominations of one individual are combined into a single record that contains all network information. Data analytics capacity is currently being integrated into NetCollect to support social network exploration and visualisation without data export to third-party software.

## Data analysis and key outcomes

Each month the study executive identifies a topic for reporting, which informs the selection of key outcomes of interest. The topic is often related to a critical issue affecting the community and/or a government decision, such as a testing uptake, and acceptance of public health restrictions or a new vaccine roll-out. These topics inform the qualitative interviews and CEG discussions.



1  
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4 Data from the longitudinal surveys and diaries are analysed with respect to six focus areas:  
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7

- 8 • uptake of COVID-19 risk mitigation strategies including isolation, quarantine,  
9  
10 vaccines, mask wearing, physically distancing;  
11  
12
- 13 • knowledge of COVID-19 restrictions and confidence in government decision-making;  
14  
15
- 16 • average number of contacts with key people per day and in different settings;  
17  
18
- 19 • changes in work and finances due to COVID-19 pandemic restrictions;  
20  
21
- 22 • changes in lifestyle and social engagement due to COVID-19; and  
23  
24
- 25 • changes in physical and mental health due to COVID-19.  
26  
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35 For monthly reporting, a specific relevant topic from above focus area and we report on key  
36

37 outcomes from the above each month:  
38  
39

- 40  
41  
42 • what proportions of people are adopting risk mitigation strategies and are they  
43  
44 experiencing any unintended health/financial/well-being consequences?  
45  
46
- 47 • do sociodemographic covariates influence adoption of risk mitigation strategies and  
48  
49 experience of unintended health/financial/well-being consequences?  
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- does adoption of risk mitigation strategies and experience of unintended health/financial/well-being consequences vary over time?

Ordinal, nominal and binary data are summarised using frequencies and proportions for serial cross-sectional data. Chi-squared tests assess dependencies between survey responses for key outcomes and demographic variables, including gender, age group, employment status, healthcare worker status, if they have children (specifically in relation to vaccine uptake), country of birth, language spoken at home and household income. Continuous outcomes are assessed using mean, median and quantiles. T-tests and Wilcoxon tests are used to detect differences between demographic groups. Composite variables are formed as appropriate and any standard scales (i.e., GAD-7 and Personal Wellbeing Index) are assessed using standard methodology (39, 40). Missing data are assessed for causes (i.e., missing completely at random, missing at random and missing not at random) and handled using multiple imputation or full information direct maximum likelihood if appropriate.

MPNet version 1.04 (44) is used for the statistical analysis of social network data using exponential random graph models and auto-logistic actor attribute models. This approach is used to consider whether individual mental health, vaccination attitudes and other characteristics are linked to specific network substructures in which individuals are embedded.

## ***Qualitative interviews and focus groups***

### **Study population and recruitment**

Approximately 40 cohort participants are purposively sampled and recruited for in-depth interviews (n=25) and two FGDs (n=15) annually to capture experiences in different restriction periods and COVID-19 epidemic contexts. Participants invited to participate in a qualitative interview or FGD are sent an additional participant information and consent form; verbal consent is obtained before interview or FGD commencement and documented in a consent database.

### **Qualitative data collection tools and key measures**

Interviews and FGDs are conducted by Zoom or telephone (interview only) and last approximately one hour. They are facilitated by an experienced qualitative researcher using a semi-structured guides (*Supplementary file 5 A-C*) that evolve in line with changes in the COVID-19 context, trends identified in the quantitative data, and/or changes in state and federal government COVID-19 responses. Interview and FGD participants receive a \$50 electronic gift voucher as reimbursement.

### **Data collection and management**

1  
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4 Qualitative interviews and FGDs are audio-recorded and data transcribed verbatim by an  
5  
6  
7 external transcription service within two weeks. Audio files and transcripts are stored on a  
8  
9  
10 secure Burnet Institute server. Following transcription, the audio files are destroyed. De-  
11  
12  
13 identified transcripts and baseline demographic data are uploaded to a central NVivo (version  
14  
15  
16  
17 10) file (45) stored securely on a Burnet Institute server.

### 21 **Data analysis and key outcomes**

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26  
27  
28 Qualitative analysis has preliminary, rapid and in-depth components. For preliminary analysis,  
29  
30  
31 interviewers complete a participant template following an interview to provide a high-level  
32  
33  
34 summary and initial reflections based on audio recordings. For rapid analysis, interviewers  
35  
36  
37 spend approximately one hour coding transcripts using NVivo (45), applying pre-set coded  
38  
39  
40 themes and coding emerging themes. A summary of findings informs recommendations for  
41  
42  
43 policy and practice in monthly reports to the Victorian Government. In-depth inductive  
44  
45  
46 analyses, undertaken by members of the qualitative research team, identify new themes that  
47  
48  
49 are then aligned with existing evidence on COVID-19 and broader related community, health  
50  
51  
52 and resilience topics.  
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## *Community engagement groups*

### **Study population and recruitment**

To augment the longitudinal data, the CEGs provide interpretation of the cohort findings, generate new research topics/questions and assist in developing recommendations in response to these findings for government reports. The initial CEG comprised representatives of populations prioritised in the Optimise cohort (not participants): healthcare workers, international students, older people, people with chronic disease, young people, people who have had COVID-19, people living in regional Victoria and people living in crisis accommodation.

In September 2021, as additional target groups were added to the cohort, a culturally and linguistically diverse (CALD) CEG was recruited to better represent the needs of multicultural (including Afghan, Fijian and Pasifika, Indian and South Asian) communities. Recruitment for both CEGs occurred through community leaders, representatives of community organisations, and referrals through exiting organisational research networks.

## CEG data collection tools and key measures

CEG teleconferences are held monthly with up to 10 participants per meeting. The topic under discussion is informed by the key issue identified for reporting in the monthly report provided to Government (For more detail on topic guides see *Supplementary file 6*). A draft of the monthly Optimise report is provided to the CEG a week in advance of the meeting with the meeting agenda.

Each CEG meeting lasts approximately 90 minutes. Participants give their perceptions of the implications of the monthly report findings for their communities and their recommendations for government messaging or pandemic response.

Each CEG meeting lasts approximately 90 minutes. Participants are asked to review and interpret study findings for the past month, and give their perceptions of the implications of the findings for their communities and make recommendations for government messaging or pandemic response.

CEG members receive a stipend of \$112.50/meeting for their participation (including preparation time), paid as a digital gift voucher.

## Data collection and management

Each CEG meeting is audio-recorded, detailed notes are taken and key quotations are transcribed by study researchers. Identifying information is redacted or concealed with pseudonyms. The digital records are stored on a password-protected La Trobe University network drive accessible only to study researchers.

## Data analysis and key outcomes

CEG meeting data is analysed using framework thematic analysis, and summary notes of the discussion are circulated to members for approval. The CEG findings are then incorporated into the monthly Optimise report provided to the Victorian Government. Outcomes include:

- reflections on the monthly report findings based on personal experience and community insights;
- perceived implications of the findings for their communities; and
- recommendations for government messaging or pandemic response.

## Ethics, involvement and dissemination

### *Ethical considerations*

The Optimise longitudinal cohort and qualitative interviews are approved by the Alfred Hospital Human Research Ethics Committee (# 333/20). The Optimise Study CEG is approved by the La Trobe University Human Ethics Committee (# HEC20532). All participants provide informed verbal consent to enter the cohort, which is documented in the study database, with additional consent provided prior to any of the sub studies. The Optimise Study involves collecting personal and identifiable data for social network analysis, participant follow-up and reimbursement. A distress protocol was developed to manage any participant who indicates significant distress or thoughts of self-harm or suicide during an interview, and a list of support services is offered after baseline and follow-up surveys. Data is treated confidentially with access restricted to the study team. Additional security measures and access restrictions apply to participant contact information for reimbursements. All participants and nominated contacts are automatically assigned a unique identification number. Deidentified data is extracted for data analysis from NetCollect using only the unique identifier and is only available to authorised study staff and collaborators. Identifiable data is extracted by the data management



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4 team and utilised by authorised staff for follow up contact with participants, network data  
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7 linkage and reimbursements. Data used for quality assurance, reporting and analysis is re-  
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9  
10 identifiable and is stored on a secure server at the Burnet Institute. Non-identifiable data is  
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12  
13 retained for seven years.  
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### 18 ***Patient and public involvement***

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23 We piloted the study tools on a small group of COVID-19 patients and members of the public  
24  
25  
26 before recruitment began. Extensive consultation with bilingual data collectors was undertaken  
27  
28  
29 to inform translations of all study tools and adaptation of the study design for people unable to  
30  
31  
32 participate in English. Community representatives are invited to participate in community  
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34  
35 engagement groups, which review study findings and interpret research findings to inform  
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38 policy and practice recommendations.  
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### 44 ***Publication and dissemination***

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49 Reports are published on a public website: <https://optimisecovid.com.au/study-findings/>.  
50  
51  
52 Seventeen monthly reports and four special issue snapshot reports have been developed to date,  
53  
54  
55 on thematic topics including testing and strategies to improve uptake; vaccine confidence and  
56  
57  
58 preparedness; social networks and mixing patterns; gendered impacts of COVID-19; impact  
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3 on income and finances, and impact of government restrictions on risk mitigation strategies;  
4  
5  
6 school-based testing; reimbursement for vaccination; and impact of COVID on CALD  
7  
8  
9 communities [20]. Publications related to the Optimise study and any sub-studies that are  
10  
11 prepared and submitted to peer-reviewed journals, follow the Optimise Authorship Guidelines,  
12  
13 which outline procedures for producing outputs (research articles, commentary pieces,  
14  
15 external-facing reports) using data collated under the auspices of the Optimise Study and  
16  
17 ensures people who contribute to Optimise have an opportunity to be first authors, co-authors,  
18  
19 or acknowledged on outputs.  
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## 31 **Trial status**

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36 Recruitment into the longitudinal cohort component occurred from September 2020 to  
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38 September 2021, with 24 months of follow-up. Monthly longitudinal surveys ceased in August  
39  
40 2022, after which data collection shifted to annual follow up periods until August 2024. Data  
41  
42 collection through qualitative FGDs, CEGs and snapshot surveys continued, with the most  
43  
44 recent snapshot survey deployed in December 2022 – January 2023. Low COVID19 case  
45  
46 numbers in Victoria in 2020 and much of 2021 (31) meant that recruitment of recent COVID-  
47  
48 19 cases and close contacts into Group 1 was limited, but recruitment into Group 2 met or  
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4 exceeded most recruitment targets (Table 3). A total of 779 participants were recruited and  
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6  
7 completed a baseline survey and contributed to the longitudinal cohort between September  
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9  
10 2020 – August 2022, of which 651 were still in active in August 2022.

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14 As of August 2022, the Optimise Study had collected data from 712 participants; 651  
15  
16  
17 participants remain active (Table 3), and 51 participants have withdrawn.

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21  
22 Seven rapid snapshot surveys were deployed between September 2021 and January 2023. The  
23  
24  
25 August 2022 snapshot survey examined the frequency and impacts of long COVID; of 653  
26  
27  
28 participants invited to complete the survey, 499 (76%) responded and almost half (243/499) of  
29  
30  
31 participants had been infected with COVID-19 at least once since the beginning of the  
32  
33  
34 pandemic (December 2019). Twenty-four semi-structured qualitative interviews have been  
35  
36  
37 conducted (7 in December 2020, 17 over May–June 2021), contributing to monthly reports.  
38  
39  
40

41  
42 Three FGDs were held in July 2022 (n=20), targeting participants who reported having long  
43  
44  
45 COVID and generating insights into the snapshot survey reports. Seven CEG members were  
46  
47  
48 recruited in January 2021. They participated in 10 CEGs between February and November  
49  
50  
51 2021, contributing to monthly reports. Twelve CALD CEG members were recruited in  
52  
53  
54 September 2021, and contributed to 2 CALD CEGs between September and October 2021.  
55  
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4 The two CEGs were combined and another 4 CEG meetings held between March and  
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6  
7 September 2022 to provide insights into the snapshot surveys.  
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For peer review only

Table 3. Active cohort participants, August 2022

	Total	
	n	%
Total	651	100
Age		
15-24	99	15.3
25-34	131	20.2
34-44	105	16.2
45-54	108	16.7
55-64	115	17.7
> 64	90	13.8
Sex		
Male	166	25.5
Female	484	74.3
Other	1	0.2
Aboriginal or Torres Strait Islander		
Yes	3	0.5
No	648	99.5
Country of Birth		
Australia	417	64.1
Other	234	35.9
Language Spoken at home		
English	532	81.7
Language other than English (LOTE)	119	18.3
LOTE spoken at home (top 3)	119	
Arabic	32	26.9
Mandarin	32	26.9
Hindi or Urdu	11	9.2
Group 1 target population		
Recent COVID-19 case	9	1.4
Close contact	17	2.6
Quarantine worker	29	7.6
Group 2 target population <sup>1</sup>		

Pre-existing chronic health condition	170	26.3
Aged care worker	31	4.8
Healthcare worker	117	18.1
Regional Victoria	116	18.0
High-risk workplace <sup>3</sup>	31	4.8
CALD recruited through bilingual data collectors <sup>2</sup>	71	10.7
Arabic	33	47.1
Chinese	29	41.4
Dinka	8	11.4
Young people	93	14.7
Recruitment layer		
0	372	57.1
1	171	26.3
2	105	16.1
3 <sup>4</sup>	2	0.3
4 <sup>4</sup>	1	0.2

<sup>1</sup> Based on screener survey. Categories are not mutually-exclusive and percentage does not total 100%.

<sup>2</sup> Based on reporting speaking an LOTE at home or identifying as Aboriginal and/or Torres Strait Islander

<sup>3</sup> Includes factory, distribution and meat work settings

<sup>4</sup> Individuals that are nominated by Layer 2 or Layer 3 participants and had already been recruited into the study, are classified as layer 3 and 4.

## Discussion

The is the largest social networks study conducted in Australia. Our preliminary data demonstrates high willingness to engage in a complex, data-intensive longitudinal study of COVID-19. Localised and timely data collection is imperative for informing public health policy that is both community-centred and evidence-led. The Optimise platform provides empirical and timely information about key populations at risk of contracting COVID-19 and/or experiencing negative impacts of associated government restrictions. The frequent and detailed information being collected by the Optimise study improves understanding of the economic and social barriers faced by priority populations. It informs responsive government policy that is more likely to be accepted and adhered to because it reflects community values, attitudes and motivations (16, 46) (28, 47). It also provides unique and detailed information about social contacts and mixing patterns to shape transmission models, and insights into how social connectedness influences behaviours, attitudes and perceptions. To date, the Optimise platform has generated 17 briefing reports and 7 publications, which have directly informed the Victorian Government's COVID-19 policy and practice (8, 14, 15, 48-51).

## Abbreviations

Arabic/Mandarin/Dinka (AMD)

Culturally and linguistically diverse (CALD)

Community engagement group (CEG)

Expression of interest (EOI)

Focus group discussion (FGD)

Generalized Anxiety Disorder 7-item (GAD-7)

Language other than English (LOTE)

## Declarations

### Ethics approval and consent to participate

Ethics approval for Optimise was provided by the Alfred Human Research Ethics Committee, Approval Number 333/20. All participants completed informed electronic consent to participant in the study. The Optimise Study CEG is approved by the La Trobe University Human Ethics Committee (# HEC20532). All CEG participants completed informed electronic consent to participant in the study. The study was undertaken in accordance with the National



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4 Health and Medical Research Council National Statement on Ethical Conduct in Human  
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7 Research.

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13 **Consent for publication**

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16  
17 Not Applicable.

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23 **Availability of data and materials**

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25  
26  
27 The data presented in this study may be requested from the corresponding author. The data are  
28  
29  
30 not publicly available due to ethical considerations and data privacy restrictions.  
31  
32

33  
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36  
37 **Competing interests**

38  
39  
40 Burnet Institute has received investigator initiated clinical research funding form Gilead  
41  
42  
43 Sciences, AbbVie, and Merck unrelated to this grant.  
44  
45

46  
47 **Funding statement**

48  
49  
50 Optimise received funding support from the Victorian Government Department of Jobs,  
51  
52  
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55  
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57  
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3  
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5  
6

7 MH receives funding support from a National Health and Medical Research Council  
8  
9

10 Investigator grant.  
11  
12  
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16

17 **Roles and responsibilities – committees:** The Optimise Executive Committee, comprised of  
18  
19

20 AP, SF-L, LG, SH, NS, DL, MS, KB and MH, directed and oversaw the study.  
21  
22  
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27 **Roles and responsibilities – sponsor and funder:** The study sponsor was the Burnet Institute,  
28  
29

30 and Burnet staff were responsible for developing the study design; collecting, managing,  
31  
32

33 analysing and interpreting data; writing the report; and submitting the report for publication.  
34  
35  
36

37 The study funders had no role in study design; collection, management, analysis, and  
38  
39

40 interpretation of data; writing the report; or the decision to submit the report for publication.  
41  
42  
43

44 However, government funding bodies provided input into research questions related to their  
45  
46

47 COVID-19 polices, which were incorporated into data collection tools.  
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54 **Authors' contributions**  
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60

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3  
4 AP, SF-L, LG, SH, NS, DL, MS, KB, MH led the development of overall study design, data  
5  
6  
7 collection tools, oversight of the study and write-up of manuscript.  
8  
9

10 AB, KH, AJT, AW, FS, BM, JO, AA, SC, TN, LN, KY, PK, DO, EJLK, MVC, RR, JSD  
11  
12  
13 contributed to the study design, development of data collection tools, data collection,  
14  
15  
16 management and analysis.  
17  
18

19  
20 LG, SM, KB, DH, JW contributed to development of qualitative data tools and study design.  
21  
22

23  
24 AH, PW, GRPS, GR, HCG, PM, BR, MAK, JC, CB, JK contributed to development of social  
25  
26  
27 network collection tools, study design and analysis.  
28  
29

30  
31 SF-L, AC, AJT, KY, PK, DO, EJLK, MVC, TK, YZ, LE, Al-Q, DM, contributed to tailoring  
32  
33  
34 the methodology for inclusion of CALD participants, and overseeing translation of tools into  
35  
36  
37 three community languages.  
38  
39

40  
41 All authors contributed to study design provided editorial comments and feedback and  
42  
43  
44 approved the final manuscript.  
45  
46

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48  
49

50  
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52  
53  
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56  
57 Monash University, Victorian Department of Health and Human Services, Centre for Culture  
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5  
6  
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16  
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26  
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29  
30  
31  
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33  
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36  
37  
38 McVernon, Dr Lena Sancu, Dr Brett Sutton, Mr Danny Vadasz.

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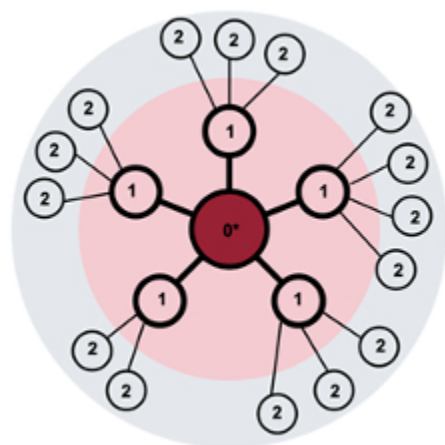


Figure 1. Example of snowball recruitment for Optimise Study

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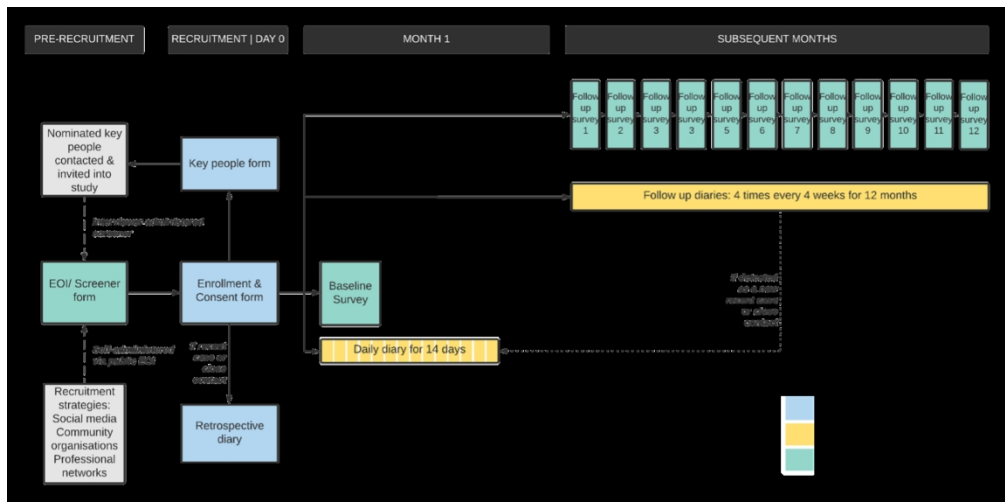


Figure 2. Overview of standardised quantitative data collection tools and scheduling for a 12-month period  
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## Supplementary File 1

Table 1 - Definitions for key groups, sampling strategies and COVID-19 case definitions

<p>COVID-19 Case Definitions</p>	<p><b>COVID-19 Case</b> : A person that test positive for COVID-19</p> <p><b>Close contact</b>: (as per DHHS): Spending more than 4 hours with someone who has COVID-19 inside a house, accommodation or care facility. Aka household/household-like contact. notified by health department they were a close contact of a person who tested positive for COVID-19</p> <p><b>Contact</b>: Someone that a participant has had a face-to-face conversation with, shared a close space with (e.g., room, car, public transport), or had physical contact with (e.g., handshake, hug, kiss, contact sport). This is distinct to the Government definitions of 'close contact'. Participants are asked to list their contacts in the daily diary and monthly surveys.</p> <p><b>Isolation</b>: Requirement to isolate from other people at home or another location, if deemed appropriate, if you have confirmed COVID-19 or have been tested for COVID-19 due to symptoms (prior to a negative result) in order to prevent the spread of COVID-19. This is distinct from Stage 3 and 4 measures which are sometimes referred to as "iso" or lockdown.</p> <p><b>Quarantine</b>: Requirement to be physically distant from other people if you are well but have been in recent contact with someone with COVID-19 whilst that person was potentially infectious.</p> <p><b>Physical distancing</b>: Practicing of keeping physical space (&gt;1.5 metres) between oneself and others and avoiding physical contact to prevent the spread of COVID-19.</p>
<p>Key Groups</p>	<p><b>Aged care worker</b>: For the purpose of recruitment, defined as self-identifying as an aged care worker. Aged care workers provide care, supervision and support for aged people in residential establishments, clinics, hospitals and private residence. Roles include personal care, domestic duties and management of illness.</p> <p><b>Chronic illness or medical condition requiring ongoing medical care</b>: defined as a condition that lasts 1 year or more and requires ongoing medical attention and/or limits activities of daily living. They are long lasting conditions with persistent effects. For the purpose of recruitment, potential defined as self-identifying to have a chronic illness or other medical condition requiring ongoing medical care.</p> <p><b>Culturally and/or linguistically diverse (CALD)</b>: People of CALD backgrounds were born overseas, have a parent born overseas or speak a variety of languages. In the Optimise Study individuals will be defined as CALD if they report being born overseas, speaking a language other than English at home, or of Aboriginal and Torres Strait Islander origin.</p> <p><b>AMDS (Arabic Mandarin Dinka Speaking Participants)</b>: People who speak Arabic, Mandarin, or Dinka as their primary language spoken at home will be defined as AMDS, as a subgroup of CALD participants.</p>



	<p><b>Factory/distribution/manufacturing worker:</b> Defined by working in one of the following workplaces: Warehousing / Distribution / Freight forwarding; Supermarket and medical distribution center; Abattoir or meat processing, including seafood and poultry; Food, beverage, and fiber manufacturing; or caravan manufacturing.</p>
	<p><b>Healthcare workers:</b> For the purpose of recruitment, defined as <u>self-identifying</u> as a healthcare professional (healthcare worker). A healthcare worker is a worker who is a regulated health professional, including: Aboriginal and Torres Strait Islander health practice; Chinese medicine (acupuncturists, Chinese herbal medicine practitioners and Chinese herbal dispenser); chiropractic; dental (dentists, dental specialists, dental hygienists, dental prosthetists, dental therapists and oral health therapists); medical; medical radiation practice (diagnostic radiographers, nuclear medicine technologists and radiation therapists); nursing and midwifery (registered nurses, enrolled nurses, nurse practitioners, and midwives); occupational therapy; optometry; pharmacy; physiotherapy; podiatry; psychology.</p>
	<p><b>Regional town centers: These are locations outside of major cities such as Melbourne:</b> Regional centers are hubs for larger regional areas they provide surrounding areas access to education, jobs, personal and professional services, recreation and opportunities for cultural participation. They are determined by function rather than size. For example: Geelong, Ballarat, Bendigo</p>
	<p><b>Recent COVID-19 cases:</b> People who have received a positive test result for COVID-19 in previous 7 days</p>
	<p><b>Young Person:</b> Person aged 18-24 years at recruitment</p>
Sampling Groups	<p><b>Group 1 seeds:</b> Victoria adults who had recently been notified with a diagnosis of COVID-19 or were identified as a 'close contact'. The checklist for Covid contacts is found here <a href="#">link</a></p> <p><b>Group 2 seeds:</b> Members of the general community, with quotas to focus recruitment of specific key at-risk populations.</p> <p><b>Key people (formally 'key relationships' and 'close ties'):</b> Key people who are part of the participants' life on a daily or weekly basis, such as family, friends, partners, housemates, neighbours, co-workers:</p> <ul style="list-style-type: none"> <li>- someone they would discuss private, personal matters with</li> <li>- someone who provides important practical assistance or support</li> <li>- co-workers who they frequently deal with</li> <li>- people they share activities with, such as hobbies, sport, religious gatherings, visiting relatives</li> </ul> <p>It is <i>not</i> limited to people who participants are emotionally bonded to. It can include people who they are only in contact with digitally, and those who don't live in Victoria or Australia. Key people will be used to assess how social networks influence COVID-19 transmission as well as influence individuals' behaviour and attitudes. Key people also provide a sampling frame for snowball recruitment.</p> <p><b>Seeds:</b> The initial study recruits who meet cohort-specific criteria and are first to participate in the study (Wave 0). Seeds subsequently identify other potential participants for the study. This snowball method coupled with purposive sampling will enable social network analysis of specific outcomes.</p>

	<p><b>Snowball Layer:</b> Each successive round of recruitment based on referral from <b>seeds</b> and subsequent participants. Wave 1 consists of the 'key people' referred and recruited by seeds; Wave 2 consists of the 'key people' referred and recruited by Wave 1 participants.</p>
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## Supplementary file 2 - Consent form for longitudinal cohort participation

### Explanatory Statement

<b>Title</b>	<b>The Optimising Isolation, Quarantine and Distancing Study for COVID19 (Optimise COVID19 Study)</b>
<b>Principal Investigators</b>	Professor Margaret Hellard, Dr Katherine Gibney, Dr Alisa Pedrana, Prof Mark Stooove, Prof Lisa Gibbs, Dr Angela Davis, Dr Nick Scott, Prof Dean Lusher, Prof David Wilson, Assoc Prof Joe Doyle, Dr Freya Shearer, Dr. Nic Geard, Prof Sophie Hill.
<b>Associate Investigators</b>	Prof Jodie McVernon, Dr Karen Block, Prof David Anderson, Prof Allen Cheng, Ms Ali Coelho, Prof Sally Green, Mr Danny Vadasz, Dr Brett Sutton, Prof Alex Collie
<b>Location</b>	Burnet Institute, 85 Commercial Road, Melbourne, Victoria, Australia 3004

#### 1. Introduction

You are invited to take part in this research project because you have expressed interest in participating in our study to understand people's experience of COVID-19 and the measures to prevent infection in the community. This Explanatory Statement gives you information about the research project. It explains what is involved to help you decide if you want to take part. Please read this information carefully. Ask questions about anything that you don't understand or want to know more about. Participation in this research is voluntary (if you don't wish to take part, you don't have to). If you decide you want to take part in the project, you will be asked to complete **an initial interview** over the phone with one of the project researchers, this will include completion of a registration form, an **online questionnaire**, and electronic **daily diary** entry for 14 days. You will be asked to repeat a monthly online questionnaire and will receive notification to complete follow up diaries (single day) 4 times/month for 12 months (average once weekly).

In doing so you are telling us that you:

- understand what you have read;
- consent to take part in the research project;
- consent to be involved in the procedures described;
- consent to the use of your personal and health information as described.

You now have a copy of this Explanatory Statement to keep and print for yourself. We will require you to provide verbal consent prior to the **study procedures** taking place.

#### 2. What is the purpose of this research project?

The purpose of this project is to find out how members of the public experience COVID-19 and the measures taken to prevent infection and how experiences change over time. The researchers are interested in hearing about how your living situation, work, responsibilities, physical health, mental health and lifestyle have been affected by COVID-19 and preventative measures such as physical distancing. We are also interested in your understanding of local requirements relating to COVID-19.

The information gathered in this research project will be used to inform a strategic approach in how to continue to ensure new infections are reduced, while understanding the economic, physical and social impacts that physical distancing and self-isolation have on individuals.

### 3. What does participation in this research project involve?

#### a) Questionnaires and daily diaries

Participation in this study involves completing the following online questionnaires and diaries. You will be sent online access to the questionnaire and diary surveys and asked to capture the details as listed in the table. If you are not comfortable or not able to complete the surveys yourself online, you will have the option to be assisted by a researcher over the phone.

ENROLMENT INTERVIEW	BASELINE QUESTIONNAIRE	DAILY DIARY	FOLLOW UP QUESTIONNAIRES
DAY 0	DAY 0	INITIAL: DAILY FOR DAYS 1-14 FOLLOW UP DIARY (SINGLE DAY) 4 TIMES/MONTH FOR 12 MONTHS.	DAY 30 AND REPEATED EVERY MONTH FOR UP TO 12 MONTHS
PHONE	ONLINE (OPTION FOR PHONE)	ONLINE (OPTION FOR PHONE)	OPTION FOR PHONE / ONLINE
KEY PEOPLE FORM		DAILY RESPIRATORY/COVID SYMPTOMS Testing Diagnosis Isolation/quarantine	TOPICS INCLUDED IN QUESTIONNAIRE: CHANGE IN LIVING SITUATION Change in work, study or responsibilities Lifestyle, social engagement & support Changes to physical health or healthcare COVID-related health and isolation
	TOPICS INCLUDED IN QUESTIONNAIRE: LIVING SITUATION WORK, STUDY & RESPONSIBILITIES LIFESTYLE, SOCIAL ENGAGEMENT & SUPPORT PHYSICAL HEALTH & HEALTHCARE UTILISATION MENTAL HEALTH & WELLBEING COVID HEALTH Attitudes and experiences of government measures to prevent COVID	DAILY DOCUMENTATION OF SOCIAL CONTACTS:  - DEMOGRAPHICS OF CONTACT  - RELATIONSHIP TO CONTACT  - LOCATION OF CONTACT  - TYPE /PURPOSE OF CONTACT  - LENGTH OF CONTACT  MOOD	MENTAL HEALTH & WELLBEING ATTITUDES AND EXPERIENCES OF GOVERNMENT MEASURES TO PREVENT COVID
	EXPECTED TO TAKE 30 MINUTES IF SELF-COMPLETED	EXPECTED TO TAKE 5-10MINUTES FOR EACH DAY	Expected to take 20 minutes if self-completed

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The overall study will take place over 15 months. Individuals will be recruited to participate at different times in the study. Depending on when you are recruited, you will be asked to repeat a fortnightly daily diary and monthly questionnaire for up to 12 months (52 weeks). A researcher will confirm the expected follow up required for you.

If you meet certain criteria during the observed follow up period (e.g. recently diagnosed with COVID-19, recently notified as a close contact of someone with confirmed COVID-19), then a researcher will invite you to complete another 14-day daily diary. You will be reimbursed an additional \$15 on top of the standard reimbursement fee for this activity (see below).

We will also ask you if you are willing to be contacted about participating in related research activities, such as a qualitative interview, as described below, or research studies in COVID-19 exploring types of diagnostic tests (to also involve blood & swab collection). If you agree, you may be contacted separately and invited to participate. They are both optional and will not impact your involvement in this study.

Qualitative interviews will be used to better understand peoples' experiences of isolation and quarantine. Interviews may take place either via telephone/zoom, depending on preference. The interview will take approximately an hour, it will be audio recorded and then after it is typed up (transcribed) the audio will be destroyed. The interview will be viewed by staff that have been trained to perform the transcription duties of the project compliant with Burnet Institute confidentiality policies. A pseudonym will be allocated to you, so that your real name and identity isn't known. All interview transcripts will be stored under the requirements of Burnet Institute's security requirements; on a secure password protected server.

#### Will I be reimbursed for being in the study ?

You will be reimbursed for your time in completing the project questionnaires and diaries according to the following schedule:

- \$50 in the first month following completion of the baseline survey;
- \$35 in subsequent months where you actively participate in completing diaries /questionnaires.

If you are invited to participate in extra activities during the course of the study, you will be reimbursed on top of the rates above. You will receive your reimbursement once a month via electronic gift card vouchers which can be used across a range of retailers.

#### **b) Nomination of people who have a key role in your life (key people)**

To better understand how the community is responding to COVID-19 and the measures to prevent infection, we would like to ask you to nominate up to 15 people you consider to have a key role in your life on a daily or weekly basis. These may include your family, friends, neighbours, co-workers, or others. Our research is interested seeing how people's social connections affect their health and wellbeing as well as how they influence how COVID-19 might spread through a community. We would like to ask some of your key people to also be involved in completing similar surveys to what is outlined for your involvement in the study. We will ask you to provide a name and contact number for these people so that we can contact them to invite them to participate. These details will only be used for this purpose, and no other personal information from your study participation will be shared with anyone. Each key person nominated will have the right to refuse participation, this will not affect your

1  
2  
3 study participation. If they refuse, we will not contact them again, their details will be retained until  
4 the completion of the study.  
5

#### 6 7 **4. What are the possible benefits?**

8 Possible benefits to you include having a say in the development of research and programs to promote  
9 the health of the general public and improve our national response to epidemics of novel diseases  
10 such as COVID-19.  
11

#### 12 13 **5. What are the possible risks?**

14 You may feel uncomfortable talking and answering questionnaires about your experience of COVID-  
15 19 and the impacts on your personal living situation, finances, and wellbeing. However, you are free  
16 to not answer any question you don't feel comfortable answering. The researcher will make  
17 themselves available before and after the interview (within work hours) to answer any questions  
18 that may arise or any concerns you have.  
19

20  
21 We would encourage you to answer truthfully and please be assured that all your responses will  
22 remain confidential and will not be passed to any authorities. However, you should be aware that  
23 should you become involved in a criminal or civil case, in certain limited circumstances, a court of law  
24 may be persuaded to order disclosure of particular information relating to you which would otherwise  
25 remain confidential.  
26

27  
28 You are free to stop participating if you become upset or distressed as a result of your participation.  
29 If this happens, please notify the researcher as soon as possible, and they will discuss with you the  
30 option of arranging for counselling or other appropriate support if you wish. The researcher will give  
31 you advice and information about several free options for support after the interview and help you to  
32 choose the best option for you and help you make contact.  
33

#### 34 35 **6. Do I have to take part in this research project?**

36 Participation in any research project is voluntary (if you do not wish to take part, you do not  
37 have to). If you decide to take part and later change your mind, you are free to withdraw from  
38 the project at a later stage. If you decide to withdraw, please notify a member of the research  
39 team as soon as possible. If you withdraw, you will not be contacted for any further  
40 participation, but it will not be possible to remove any data that we have previously collected  
41 about you.  
42

#### 43 44 45 **7. How will I be informed of the results of this research project?**

46 On completion of the research any identifying information will be removed. The findings will  
47 report on summary data that can't be linked to any single person. If you're interested in the  
48 results, you can find them on the Optimise Study website ([www.optimisecovid.com.au](http://www.optimisecovid.com.au)) or a  
49 short summary can be mailed to you.  
50

#### 51 52 **8. What will happen to information about me?**

53 It is anticipated that the results of this research will be published and/or presented in a  
54 variety of forums, including to the Government. In any publication and/or presentation,  
55 information will be provided in such a way that you cannot be identified.  
56

57  
58 Your personal information and survey data will be stored in a password-protected database  
59 on a secure server at the Burnet Institute. The database for the study has been designed  
60

1  
2  
3 and supported by SNA toolbox, to review the Privacy Policy and terms of use of how data is  
4 collected, used and stored (<https://www.snatoolbox.com/>). Members of the software  
5 service providers are part of the study team. A unique identification number will be  
6 assigned to you at the start of the study and this will help us link the information you  
7 provide over time. This information will be re-identifiable: the code is used so that the  
8 research team can identify you if necessary; for example, to contact you for follow up  
9 questionnaires.  
10  
11

12  
13 Restricted members of the study team have access to your personal data. They will only use  
14 personal data to contact you and your key people for the purposes of recruitment and  
15 follow up. Optimise researchers will have access to your de-identified data as well as your  
16 postcode. De-identified data means all personal information (name and email) is replaced  
17 with a unique ID. Any summaries that may be produced will not contain any identifying  
18 information.  
19  
20

21 To help us map your social network over time, we need to retain and store your personal  
22 details and the links to the people you nominated and any other contacts until the end of  
23 the study. These data will be stored separately from your de-identified survey data to help  
24 protect your privacy and confidentiality. Documentation that captures your verbal consent  
25 will be stored separate from your data. All data collected will be retained for 7 years and  
26 then destroyed.  
27  
28

### 29 30 **9. Can I access research information kept about me?**

31 In accordance with relevant Australian and/or Victorian privacy and other relevant laws, you have the  
32 right to access the information collected and stored by the researchers about you. Please contact one  
33 of the researchers named at the end of this document if you would like to access your information.  
34 Furthermore, in accordance with regulatory guidelines, the information collected in this research  
35 project will be kept for at least 7 years.  
36  
37

### 38 39 **10. Is this research project approved?**

40 The ethical aspects of this research project have been approved by the Alfred Hospital Ethics  
41 Committee. This project will be carried out according to the *National Statement on Ethical Conduct  
42 in Human Research (2007)* produced by the National Health and Medical Research Council of Australia.  
43 This statement has been developed to protect the interests of people who agree to participate in  
44 human research studies.  
45  
46

### 47 48 **11. Who can I contact?**

#### 49 **For further information:**

50 If you want any further information concerning this project, you can contact one of the Principal  
51 Researchers:

52 Professor Margaret Hellard, (03) 9282 2163, [margaret.hellard@burnet.edu.au](mailto:margaret.hellard@burnet.edu.au)

53 Dr Katherine Gibney, [katherine.gibney@unimelb.edu.au](mailto:katherine.gibney@unimelb.edu.au)

54 Study team contact details: [email: optimise@burnet.edu.au](mailto:email:optimise@burnet.edu.au)

55 Text: 0447 045 460

56 Phone (03) 9282 2182

#### 57 58 59 **For complaints:**

1  
2  
3 If you have any complaints about any aspect of the project, the way it is being conducted or any  
4 questions about being a research participant in general, then you may contact:  
5  
6  
7

8	Position	<i>Complaints Officer, Office of Ethics &amp; Research Governance, Alfred</i>
9		<i>Health</i>
10	Telephone	<i>03 9076 3619</i>
11	Email	<i>research@alfred.org.au</i>
12		
13		

14 Please quote the following project number: 333/20  
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For peer review only



### Supplementary file 3 - A Expression of interest/screen

The Optimise Study is a research project that aims to find out how Victorians are experiencing COVID-19 and responding to the measures introduced to stop the spread of the virus. The information gathered in this research project will help guide Victoria's approach to COVID-19. It will be used to prevent new infections and reduce the health, social and economic impacts of COVID-19 restriction and prevention measures.

You can access more information about the study [here](#)

Please answer the following questions to see if you can take part.

First name: \_\_\_\_\_

Last name: \_\_\_\_\_

Email address: \_\_\_\_\_

Contact number: +61 \_\_\_\_\_

#### Screening form to assess eligibility

1. Please select your current age group:

- a. Less than 18 years>> Sorry, only people aged over 18 are eligible to participate. [end survey]
- b. 18 to 24 years
- c. 25 to 34 years
- d. 35 to 44 years
- e. 45 to 54 years
- f. 55 to 64 years
- g. 65 to 74 years
- h. 75+ years

2. What is your postcode?

*If postcode doesn't start with 3 >> Sorry, only people who live in Victoria are eligible to participate [end of survey]*

3. What is your current gender identity?

- a. Man
- b. Woman
- c. Trans man
- d. Trans woman

- 1  
2  
3 e. Non-binary/gender fluid  
4 f. My gender is not listed, *please specify* \_\_\_\_\_  
5 g. Prefer not to say  
6  
7 4. What sex were you assigned at birth?  
8 a. Male  
9 b. Female  
10 c. Indeterminate/intersex/unknown  
11 d. Prefer not to say  
12  
13 5. Are you of Aboriginal or Torres Strait Islander origin?  
14 a. No  
15 b. Yes, Aboriginal  
16 c. Yes, Torres Strait Islander  
17 d. Yes, Aboriginal and Torres Strait Islander  
18 e. I don't wish to say  
19  
20 6. Have you been **diagnosed** with COVID-19 in the past 7 days?  
21 a. Yes  
22 b. No  
23 c. I don't wish to say  
24  
25 7. Have you been notified as a **close contact** of someone with confirmed COVID-19 in  
26 the past 7 days?  
27 a. Yes  
28 b. No  
29 c. I don't wish to say  
30  
31 8. Do you have a chronic illness or medical condition that you currently need ongoing  
32 medical care for?  
33 a. Yes  
34 b. No  
35 c. I don't wish to say  
36  
37 9. How many people, including yourself, live in your household? If you live in more than  
38 one place, consider your main household. \_\_\_ \_\_\_  
39  
40 10. Do you speak a language other than English at home?  
41 a. Yes, specify \_\_\_\_\_ [most common language list]  
42 b. No >> skip to Q11  
43 c. I don't wish to say >> skip to Q11  
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3 11. If yes, how would you describe your ability in speaking and understanding English?  
4

- 5 a. Native speaker/bilingual  
6  
7 b. Fluent  
8  
9 c. Intermediate  
10  
11 d. Beginner  
12  
13 e. Don't know

14 12. Are you a healthcare professional (healthcare worker)?  
15

- 16 a. Yes  
17  
18 b. No  
19  
20 c. I don't wish to say  
21

22 13. Are you an aged care worker?  
23

- 24 a. Yes  
25  
26 b. No  
27  
28 c. I don't wish to say  
29

30 14. Do you work in one of the following workplaces:  
31

32 Warehousing / Distribution / Freight forwarding;  
33 Supermarket and medical distribution centre; or  
34 Abattoir or meat processing (including seafood and poultry)?  
35 Food, beverage and fibre manufacturing  
36 Caravan manufacturing  
37

- 38 a. Yes  
39  
40 b. No  
41  
42

43 15. Do you work in hotel quarantine or border security?  
44

- 45 a. Yes  
46  
47 b. No  
48  
49 c. I don't wish to say  
50

51 16. *If female sex at birth:* Are you currently pregnant or have you given birth in the past 6  
52 weeks?  
53

- 54 a. Yes  
55  
56 b. No  
57  
58 c. I don't wish to say  
59  
60

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2  
3 17. Do you self-identity as having been affected by the bushfires of the summer of  
4  
5 2019/2020?

- 6  
7 a. Yes  
8  
9 b. No  
10  
11 c. I don't wish to say

12 18. How did you find out about the Optimise study?

- 13 a. Through my workplace  
14 b. Through a health service  
15 c. Via social media  
16 d. Friend/family  
17 e. Other, *please specify* \_\_\_\_\_  
18

19 19. Please provide a contact phone number \_\_\_\_\_  
20

21 20. Please provide your email address \_\_\_\_\_  
22

23 21. Please provide a first name or preferred name \_\_\_\_\_  
24

25 22. What is your preferred time of day for us to contact you?  
26

27 **[If language spoken at home is not English]** In OPTIMISE we offer data collection  
28 interviews in Arabic, Mandarin, and Dinka.

29 We have the following options available for you to complete surveys to match your  
30 needs:  
31

- 32 • **Self-completion of all surveys in English.**  
33

34 For this option, all surveys will be sent to you via email, sms or both for you to  
35 complete on your own with your mobile device or computer. These surveys are all in  
36 English.  
37

- 38  
39 • **Partial self completion of surveys in Arabic/Mandarin - monthly surveys  
40 completed over the phone with an interviewer.**  
41

42 For this option you can complete regular contact diaries that have been translated into  
43 Arabic or Mandarin. These survey links will be sent to your mobile device or laptop for  
44 you to complete in your own time. The Baseline and Monthly Follow-up surveys will be  
45 completed over the phone with an interviewer who speaks Arabic/Mandarin.  
46  
47

- 48 • **All surveys completed over the phone with data collector in  
49 Arabic/Mandarin/Dinka.**  
50

51 This option is for participants who would not usually be able to complete surveys, or  
52 those who are unable to complete surveys on a mobile or computer. An interview will  
53 be scheduled each week for you to speak with a data collector to complete the surveys  
54 you have been assigned.  
55  
56

57 23. How would you like to complete the surveys?  
58

- 59 ○ Self-complete all surveys in English  
60

- Self-complete diaries in [Arabic/Chinese] interviewer assisted for monthly surveys
- All surveys to be administered by data collector in Arabic/Mandarin/Dinka

24. *Wave 1 and 2 participants only (interviewer-administered)*: Is the candidate eligible for study participation? *Consider age and Victorian residence only*

- a. Yes
- b. No

Thank you for your responses. If you meet our study requirements, a researcher will be in contact with you.

### Supplementary file 3 - B - Key people form

#### Key people form

##### *\* Interviewer-administered*

We'd like to ask you some questions about people who have a key role in your life. We know social connections are important for people's health and wellbeing and make a big difference to our lives. So, we want to understand the impact of people around you on you, as well as how you may impact those around you. We also want to know about how your social connections influence how COVID-19 might spread through the community.

We'd like to ask you some questions about key people who are a part of your life on a daily or weekly basis. I'm going to give you some prompts to help you think about this. Nominate as many or as few people as you like, but we would like you to focus on the key people. They could be your family, friends, partner, housemates, neighbours, co-workers or others in your life. If there is no-one you consider to be a key person in your life, then do not nominate anyone. You can also nominate people who you are staying in contact with only online or by phone, including people who are not in Australia.

At regular time points, we will ask you again about these key people to assess how frequently you have contact with them.

When you nominate people, we will ask you to provide names, phone numbers and where they live (suburb if in Australia, else country).

We are asking for this detail so we can invite your contacts into the study if you are OK with that. We also plan to build a social map to see how different people in the study might be connected. For this, we need enough information to identify if any of your key people are also key people of another person in the study. We want to understand how networks of people are connected and understand how connections impact wellbeing, as well as behaviours and potential COVID-19 spread.

We would like to recruit some of your key people to participate in this study. However, you can tell us if you would prefer that we don't do this. You can also ask that we wait one day before contacting people so that you can talk to them first to let them know that we may be contacting them. You can share a link to the study website for them to read about the study before we contact them. We won't be recruiting your key people living outside of Victoria or Australia into the study, but please nominate them if they are key people in your life.

1  
2  
3 When we contact these individuals, we will let them know that they have been  
4 nominated by you; are you happy for us to do that? We won't share any other  
5 personal information about you or other people you nominate with the key  
6 people you nominate or between participants.  
7  
8

9  
10 Do you have any questions?

11 Now I'm going to talk you through the prompts. Please list your key people  
12 starting with those who have the most important role in your life within each  
13 area. Thinking about family, friends, your partner(s), housemates, neighbours,  
14 co-workers or others:  
15

- 16 • **“With whom do you discuss important personal matters?” (e.g.,**  
17 **personal problems, other matters)**

18  
19  
20  
21 [add names] [System will limit it to 10 nominations for this specific question]

- 22  Refuses to answer
- 23  No key people in this group

- 24  
25  
26  
27 • **“Who provides you with important practical assistance or support?”**

28  
29  
30 [add names] [if the same person from above is mentioned, please confirm it is  
31 the same person] [System will limit it to 10 nominations for this specific  
32 question]

- 33  Refuses to answer
- 34  No key people in this group

- 35  
36  
37  
38 • **“Who are important co-workers (i.e., colleagues, superiors, junior**  
39 **staff) that you frequently deal with for your work?” If you are a**  
40 **student, you can also consider your classmates and or**  
41 **supervisors/lecturers/tutors that you frequently deal with for your**  
42 **study.**

43  
44  
45  
46 [add names] [if the same person from above is mentioned, please confirm it is  
47 the same person] [System will limit it to 10 nominations for this specific  
48 question]

- 49  Refuses to answer
- 50  No key people in this group

- 51  
52  
53  
54 • **“Thinking of important activities in your life (e.g., hobbies, sport,**  
55 **leisure, religious gatherings, visiting older relatives), who are the key**  
56 **people you frequently deal with personally when undertaking these**  
57  
58  
59  
60

1  
2  
3 **activities? They may help you get the activity done or be a person you**  
4 **share the activity with.”**  
5  
6

7 [add names] [if the same person from above is mentioned, please confirm it is  
8 the same person] [System will limit it to 10 nominations for this specific  
9 question]

- 10  
11  Refuses to answer  
12  
13  No key people in this group  
14

- 15 • **Is there anyone else you live with who has not been listed as a key**  
16 **person in other categories?**  
17  
18

19 [add names] [if the same person from above is mentioned, please confirm it is  
20 the same person] [System will limit it to 10 nominations for this specific  
21 question]

- 22  
23  Refuses to answer  
24  
25  No additional household members  
26

27 ***NB: If asked for a number by the participant, say: “there is no specific***  
28 ***instruction on how many relationships to aim for but if we run out of space the***  
29 ***system will notify us...”***  
30  
31

32  
33 *If a participant doesn't want to provide real names or contact details, ask them*  
34 *to provide a pseudonym that is memorable to them. We are still interested in*  
35 *knowing about who helps them or influences them, even if we can't recruit*  
36 *them into the study.*  
37  
38

39  
40 ***\*\*\* If the participant stops eliciting names, ask “Is there anyone else?” \*\*\****  
41 ***Stop once they clearly and categorically state there is no-one else, they wish to***  
42 ***nominate.***  
43  
44

45  
46 **I'm now going to go through the names of people you nominated and ask**  
47 **you a few questions about them.**  
48

49 Please let me know if there is anyone that you would like us not to contact?  
50 Perhaps they are unwell or not based in Australia.  
51

52 We won't attempt to contact anyone for at least 24 hours. This will give you an  
53 opportunity to contact them first and let them know that they might be invited  
54 into a research study. I can email or SMS you a referral card now that you can  
55 pass on so that they have some information on the study.  
56  
57

58 **Do you have any questions?**  
59  
60



Full Name	Relationship to you Select one	Do you live in the same household with this person?	Age	Gender	Location (Suburb)	How much face-to-face contact have you had with this person over the last 4 weeks?	How much digital contact have you had with this person over the last 4 weeks?	<i>(If case)</i> Did you nominate this person as a close contact to DHHS?	Are you happy for us to contact them and recruit them into this study?	Phone number (if agrees to contact)	Would this participant be able to self-complete surveys in English?
	a. Family b. Friend c. Partner d. Co-worker e. Other	Yes No	<5 5-9 10-14 15-17 18-19 20-29 30-39 40-49 50-59 60-69 70-79 80+	a. Man b. Woman c. Non-binary/not listed d. Unknown	Suburb/postcode if in Australia (lookup table) Else "other" and specify town/city (Australia) or country	a. Daily / Most days b. Few times a week c. Once a week d. Once or twice e. None	a. Daily / Most days b. Few times a week c. Once a week d. Once or twice e. None	Yes No Don't know	a. Yes b. No – do not contact		a. Yes b. No c. Could complete surveys in Arabic/Mandarin

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For peer review only

### Supplementary file 3 - C - Baseline Retrospective daily diaries

We are interested in understanding the timeline of key events that have occurred over the **past 7 days** in relation to COVID-19. Please have your calendar in front of you, if possible. We are interested in the period between [Day -7] to [Day -1]. Can you please talk me through your experiences in relation to covid? I will then ask some directed questions to make sure I understand properly.

Question visible to:		F	Sa	Su	M	T	W	Th
		24	25	26	27	28	29	30
	<b>TESTING</b>							
C, CC	1. Have you been <b>tested</b> for COVID-19 (coronavirus) in the past week? Y <input checked="" type="checkbox"/> N <input type="checkbox"/> → If yes, Mark the date(s) they got tested for COVID-19							
C, CC	2. Did you receive a <b>result</b> for COVID-19 test in the past week? Y <input type="checkbox"/> N <input type="checkbox"/> → If yes, Mark the date(s) you received a result → [For each date marked]: What was the result? Positive <input checked="" type="checkbox"/> Negative <input type="checkbox"/> Indeterminate <input type="checkbox"/> → <i>If positive</i> : Who first notified you about your positive test result? Testing Centre / Health service <input type="checkbox"/> Laboratory <input type="checkbox"/> Government/DHHS Hotline <input type="checkbox"/> Unsure <input type="checkbox"/> Other known setting, <i>specify</i> _____							
C, CC	3. Has anyone else in your household been diagnosed with COVID-19 in the past week? Y <input type="checkbox"/> N <input type="checkbox"/>							
	<b>SYMPTOMS</b>							
C, CC	4. Did you experience any COVID-19 related <b>symptoms</b> in the past week? Y <input type="checkbox"/> N <input type="checkbox"/> <i>Consider cough, fever, shortness of breath, sore throat, fatigue, aches and pains, headache, runny or stuffy nose, loss of taste/smell, nausea, vomiting, or diarrhoea</i> → If yes, mark each day they experienced symptoms → Overall, how would you describe the severity of symptoms you have experienced so far? Mild <input type="checkbox"/> Moderate <input type="checkbox"/> Severe <input type="checkbox"/>							
C, CC	5. Did you seek <b>medical care or professional health advice</b> in relation to your COVID-19 the past week? Y <input type="checkbox"/> N <input type="checkbox"/> → If yes, Mark the date(s) they sought care / advice							
	<b>COMMUNICATION</b>							
C	6. Were you contacted by someone on behalf of the Government/DHHS for the purpose of <b>contact tracing</b> in the past week? i.e. to discuss who you had close contact* with while infectious? Y <input type="checkbox"/> N <input type="checkbox"/> → If yes, Mark the date(s) they were contacted for contact tracing							
C, CC	7. Were you contacted by the Government/DHHS, health service or community services <b>by phone</b> to check up on your health status in the past week? Y <input type="checkbox"/> N <input type="checkbox"/>							

Question visible to:	F	Sa	Su	M	T	W	Th
	24	25	26	27	28	29	30
→ If yes, Mark the date(s) they were phoned							
C, CC 8. Were you contacted by the Government/DHHS, health service or community services by <b>SMS</b> in the past week? Y <input type="checkbox"/> N <input type="checkbox"/> → If yes, Mark the date(s) you received these							
C, CC 9. Did someone from the Government/DHHS visit you in <b>person</b> at your house ( <b>door knock</b> ) in the past week? Y <input type="checkbox"/> N <input type="checkbox"/> → If yes, Mark the date(s) the DHHS visited you							
<b>ISOLATION / QUARANTINE</b>							
C 10. Are you still in <b>isolation</b> ? Y <input type="checkbox"/> N <input type="checkbox"/> → If No, mark the day you were released from isolation? → Who notified you of your clearance from Isolation? Government/DHHS via phone <input type="checkbox"/> Government/DHHS via SMS <input type="checkbox"/> Testing Centre / Health service <input type="checkbox"/> Workplace / Friend / Family member <input type="checkbox"/> Unsure <input type="checkbox"/> Other, <i>specify</i> _____ <input type="checkbox"/>							
CC 11. Are you still in <b>quarantine</b> ? Y <input type="checkbox"/> N <input type="checkbox"/> → If no, mark the day they were released from quarantine? → Who notified you of your clearance from Quarantine? Government/DHHS via phone <input type="checkbox"/> Government/DHHS via SMS <input type="checkbox"/> Testing Centre / Health service <input type="checkbox"/> Workplace / Friend / Family member <input type="checkbox"/> Unsure <input type="checkbox"/> Other, <i>specify</i> _____ <input type="checkbox"/>							
C, CC 12. Did you <b>leave</b> your living premises for any reason during your <b>isolation/quarantine</b> period in <u>the past week</u> ? Y <input type="checkbox"/> N <input type="checkbox"/> → If yes, Mark the dates where you left our premises → For what reason: Medical Care <input type="checkbox"/> Exercise <input type="checkbox"/> Work <input type="checkbox"/> To get essential food <input type="checkbox"/> To get essential medicine <input type="checkbox"/> To pick up/drop of a household member from work, school, childcare, appointments <input type="checkbox"/> Visit someone in hospital <input type="checkbox"/> Emergency Situation <input type="checkbox"/> Other, <i>specify</i> _____ <input type="checkbox"/>							
C, CC 13. Did you have any <b>visitors*</b> to your living premises while you were in isolation/quarantine in <u>the past week</u> ? Y <input type="checkbox"/> N <input type="checkbox"/> → If yes, Mark the dates where you had visitors → For what reason: Medical Care <input type="checkbox"/> Personal care <input type="checkbox"/>							

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		24	25	26	27	28	29	30
	Emergency Situation <input type="checkbox"/>							
	Household assistance <input type="checkbox"/>							
	Other, <i>specify</i> _____							

Additional notes:

For peer review only

## Supplementary file 3 - D- Baseline survey

## BASELINE QUESTIONNAIRE

## ● Pre-questions

Date of entry

Who is filling out this survey?

 Participant Researcher >> Namecode \_\_\_ \_\_

## 1 Sociodemographics

1.2 What is your current postcode? \_\_\_ \_\_\_ \_\_\_ \_\_\_ *Write 9999 if you don't wish to say*

1.3 What is your month and year of birth? [Jan-Dec] [1900 – 2005]

1.4 a) What country were you born in?

 Australia >> [skip to 1.6](#) Other, *please specify* [most common countries, other] \_\_\_\_\_*b) If other:* What year did you arrive in Australia? [1900-2020] \_\_\_\_\_

1.5 What is the main language that you speak at home?

 English Other, *specify* [most common languages, other] \_\_\_\_\_

1.6 What is your current residential status in Australia?

 Permanent resident/Australian citizen Other

1.7 Are you of Aboriginal or Torres Strait Islander origin?

 No Yes, Aboriginal Yes, Torres Strait Islander Yes, Aboriginal and Torres Strait Islander Prefer not to say

1.8 What is your current gender identity?

 Man Woman Trans man Trans woman Non-binary/gender fluid My gender is not listed, *please specify* \_\_\_\_\_ Prefer not to say

1.9 What sex were you assigned at birth?

 Male Female Indeterminate/intersex/unknown

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3  Prefer not to say  
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5 1.10 Are you an active member of any religious group or church?  
6  Yes  
7  No  
8  Prefer not to say  
9  
10 1.11 What is the highest level of education you have completed?  
11  Primary school or less  
12  High school (not completed)  
13  High school (completed)  
14  TAFE / Trade Certificate  
15  University – undergraduate degree (e.g. Bachelor degree) completed  
16  University – postgraduate course (e.g. Masters, Doctorate) completed  
17  Prefer not to say

## 2 Living situation

The following questions about where you are currently living, regardless whether this is your usual place of residence.

- 26 2.1 a) What type of accommodation do you currently live in? If you live in more than one  
27 place, describe your main residence.  
28  House/townhouse  
29  Flat/unit/apartment  
30  Caravan/cabin/boat/motor home  
31  Student accommodation or workers' quarters  
32  Room in a hostel or boarding house  
33  Hotel / motel  
34  Residential home or institution (e.g. aged residential care)  
35  Temporary accommodation (refuge, crisis or support accommodation) >> skip to  
36 Q3.2  
37  No dwelling/ improvised dwelling / motor vehicle / tent >> skip to Q3.2  
38  Other, *please specify*: \_\_\_\_\_

- 45 b) Is the place where you currently live....?  
46  Owned outright / with a mortgage (by you or your partner)  
47  Rented (including paying board/fees)  
48  Public or community housing  
49  Rent free – living with a relative or someone else (including couchsurfing)  
50  Other, *please specify*: \_\_\_\_\_

We are now going to ask you about people living in your household\*.

\* This includes people who regularly sleep at the household, **at least once a week**. If you have more than one household where you regularly sleep, consider your MAIN household.

- 57 2.2 How many adults (18 years and older), including yourself, currently live in your  
58 household \_\_ \_\_ [1 – 100]  
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60 2.3 How many children (under 18 years old) currently live in your household \_\_ \_\_

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- 2.4 Does your current household have internet access? (This includes fixed or mobile broadband services such as ADSL, Cable, Wireless and Satellite connections. Don't consider mobile phone data)
- Yes
- No
- Don't know
- 2.5 a) Has your living situation changed due to COVID-19 and the measures to prevent its spread? Consider where you live or who you live with
- Yes
- No >> [skip to Work, Study & Responsibilities](#)
- a) *If yes: Why has your living situation changed? Select all that apply*
- Could no longer afford previous rent/mortgage
- Temporarily moved for self-isolation/quarantine
- Moved to be with partner/family/friends
- Moved to be away from vulnerable house members
- Moved due to concern for safety at usual residence
- Other people have moved out due to COVID-19
- Children or family have moved back in due to COVID-19
- Other people have moved in due to COVID-19
- Other, *specify* \_\_\_\_\_

### 3 Work, study & responsibilities

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These questions are about your circumstances at the beginning of 2020 before the COVID-19/coronavirus pandemic reached Australia (e.g. February 2020), compared to your circumstances now.

#### Let's talk about your work and income in early 2020 (e.g. February 2020)

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- 3.1 a) What was your employment status in early 2020? *Select the best response*
- Full time
- Part time
- Casual
- Self-employed
- Not employed and looking for work >> [skip to 3.2](#)
- Not employed and not looking for work >> [skip to 3.2](#)
- Full time carer/home responsibilities >> [skip to 3.2](#)
- Retired >> [skip to 3.2](#)
- Other, *specify* \_\_\_\_\_
- a) *If any employment:* Approximately how many hours of **paid work** did you do in a typical week in early 2020? \_\_\_\_\_
- 3.2 *If employed in early 2020:* What was your **main** occupation in early 2020? *Please choose the one option that best describes your main job.*
- Managers



- Professionals
- Technician and Trade Workers
- Community and Personal Service Workers
- Clerical and Administrative Workers
- Sales Workers
- Machinery Operators and Drivers
- Labourers
- Don't Know
- Other, *specify* \_\_\_\_\_

3.3 *If employed in early 2020*: What industry did you work in for your **main** job in early 2020? *Select one only*

- Agriculture, forestry and fishing
- Mining
- Manufacturing
- Electricity, gas, water and waste services
- Construction
- Wholesale trade
- Retail trade
- Accommodation and food services (includes hospitality)
- Transport, postal and warehousing
- Information media and telecommunications
- Financial and insurance services
- Rental, hiring and real estate services
- Professional, scientific and technical services
- Administrative and support services
- Public administration and safety
- Education and training
- Health care and social assistance (includes aged care)
- Arts and recreation services
- Other, *specify* \_\_\_\_\_
- Don't know
- Prefer not to say

3.4 *If employed in early 2020*: What was your job title in your **main** job in early 2020?

\_\_\_\_\_

3.5 *If employed in early 2020*: What was your usual work environment in early 2020 (e.g. February)? *Select one*

- Attended a single workplace/location
- Attended multiple workplaces/locations
- Worked from home
- Both attended workplace(s) and worked from home

Other, please describe \_\_\_\_\_

3.6 What sources of income did you have in early 2020 (select all that apply)?

Work/salary

Government allowance/Centrelink payment/Age pension

Parents

Partner

Scholarship for school/university

Rental income

Other investments

Monetary support from a charity or community-organisation

Other, specify \_\_\_\_\_

No income >> skip to Q 4.8

Prefer not to say

**The next two questions ask about your financial circumstances in 2019 (pre-COVID-19).**

Firstly, we ask about the combined income of the members of your household.

Note: if you live in a shared or group house please just mark your own income.

3.7 Before tax and other deductions are taken out, how much **combined income** did your **household** earn per week in 2019 (pre-COVID-19)? Please include all income sources (including wages, investments and government pensions and benefits). If you live in a shared or group house please just mark your own income

\$200,000 or more per year (\$3,840 or more per week)

\$150,000 - \$199,999 per year (\$2,880 - \$3,839 per week)

\$125,000 - \$149,999 per year (\$2,400 - \$2,879 per week)

\$100,000 - \$124,999 per year (\$1,920 - \$2,399 per week)

\$80,000 - \$99,999 per year (\$1,530 - \$1,919 per week)

\$60,000 - \$79,999 per year (\$1,150 - \$1,529 per week)

\$50,000 - \$59,999 per year (\$960 - \$1,149 per week)

\$40,000 - \$49,999 per year (\$770 - \$959 per week)

\$30,000 - \$39,999 per year (\$580 - \$769 per week)

\$20,000 - \$29,999 per year (\$380 - \$579 per week)

\$10,000 - \$19,999 per year (\$190 - \$379 per week)

\$1 - \$9,999 per year (\$1 - \$189 per week)

No income

Don't know

Prefer not to say

3.8 During **2019 (pre-COVID-19)** did any of the following happen to you or your household because of a **shortage of money**? If you live in a shared or group house please consider your personal circumstances only.

	Yes	No
Could not pay electricity, gas or telephone bills on	<input type="radio"/>	<input type="radio"/>

time		
Could not pay for car registration or insurance on time	<input type="radio"/>	<input type="radio"/>
Pawned or sold something	<input type="radio"/>	<input type="radio"/>
Went without meals	<input type="radio"/>	<input type="radio"/>
Unable to heat your home	<input type="radio"/>	<input type="radio"/>
Sought assistance from welfare / community organisations	<input type="radio"/>	<input type="radio"/>
Sought financial help from friends or family	<input type="radio"/>	<input type="radio"/>
Other financial hardships	<input type="radio"/> <i>Specify</i> _____	<input type="radio"/>

**We are interested in whether you have had any changes to your work situation and/or income since COVID-19 was identified in Australia and government measures were introduced.**

3.9 What sources of income do you currently have? *Select all that apply*

- Work/salary >> [generates logic for currently working](#)
- Government allowance (e.g. Centrelink payment, Age pension)
- Parents or other family
- Partner
- Scholarship for school/university
- Rental income
- Other investments
- Monetary support from a charity or community-organisation
- Other, *specify* \_\_\_\_\_
- No income
- Prefer not to say

3.10

a) Have you received any **new** financial support, Centrelink, rent or mortgage support since 1<sup>st</sup> March 2020?

- Yes >> [go to b](#)
- No
- Don't know
- Prefer not to say

b) *If yes*, Which new payments or support have you received since 1<sup>st</sup> March 2020? *Select all that apply*

- Centrelink payments (e.g. JobSeeker, Age pension, Government allowance)
- Rental reductions
- Paused or deferred mortgage payments (excluding if banks have done this automatically)
- JobKeeper payments to you or your employer

- Early access to Superannuation
- Other, *specify* \_\_\_\_\_
- Prefer not to say

3.11 Has your work situation or income changed since 1<sup>st</sup> March 2020? Consider change in personal or household income, loss of job, change in hours worked and/or change of job.

- Yes >> go to Q 3.12
- No >> skip to Q 3.19 if paid work early 2020, else 3.22

3.12 a) If yes, which of the following events have you personally experienced since 1<sup>st</sup> March 2020?

	Yes	No
a) Change of personal / household income	<input type="radio"/>	<input type="radio"/>
b) Loss of job	<input type="radio"/>	<input type="radio"/>
c) Change in hours worked	<input type="radio"/>	<input type="radio"/>
d) Started a new job	<input type="radio"/>	<input type="radio"/>

b) Was this change(s) due to COVID-19?

- Yes
- No
- Prefer not to say

3.13 *If 3.11= yes:* Before income tax and other deductions are taken out, how much **combined income** does your **household** currently earn per week? Please include all income sources (including wages, investments and government pensions and benefits). If you live in a shared or group house please just mark your own income

- \$200,000 or more per year (\$3,840 or more per week)
- \$150,000 - \$199,999 per year (\$2,880 - \$3,839 per week)
- \$125,000 - \$149,999 per year (\$2,400 - \$2,879 per week)
- \$100,000 - \$124,999 per year (\$1,920 - \$2,399 per week)
- \$80,000 - \$99,999 per year (\$1,530 - \$1,919 per week)
- \$60,000 - \$79,999 per year (\$1,150 - \$1,529 per week)
- \$50,000 - \$59,999 per year (\$960 - \$1,149 per week)
- \$40,000 - \$49,999 per year (\$770 - \$959 per week)
- \$30,000 - \$39,999 per year (\$580 - \$769 per week)
- \$20,000 - \$29,999 per year (\$380 - \$579 per week)
- \$10,000 - \$19,999 per year (\$190 - \$379 per week)
- \$1 - \$9,999 per year (\$1 - \$189 per week)
- Don't know
- No income

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3  Prefer not to say
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5 3.14 *If 3.11=yes* a) What is your current employment status? *Select the best response*
- 6  Full time
- 7  Part time
- 8  Casual
- 9  Self-employed
- 10  Not employed and looking for work
- 11  Not employed and not currently looking for work
- 12  Full time carer/home responsibilities
- 13  Retired
- 14  Other, *specify* \_\_\_\_\_
- 15 3.15 *If 3.11 =yes & 3.9[work=1]*: Considering a typical week, approximately how many hours
- 16 of **paid work** do you currently work? \_\_\_\_\_
- 17 3.16 *If 3.12d=yes*: What is your **main** occupation currently? *Please choose the one option*
- 18 *that best describes your main job.*
- 19  Managers
- 20  Professionals
- 21  Technician and Trade Workers
- 22  Community and Personal Service Workers
- 23  Clerical and Administrative Workers
- 24  Sales Workers
- 25  Machinery Operators and Drivers
- 26  Labourers
- 27  Don't Know
- 28 3.17 *If 3.12d=yes*: What industry do you currently work in for your main job? *Select one only*
- 29  Agriculture, forestry and fishing
- 30  Mining
- 31  Manufacturing
- 32  Electricity, gas, water and waste services
- 33  Construction
- 34  Wholesale trade
- 35  Retail trade
- 36  Accommodation and food services
- 37  Transport, postal and warehousing
- 38  Information media and telecommunications
- 39  Financial and insurance services
- 40  Rental, hiring and real estate services
- 41  Professional, scientific and technical services
- 42  Administrative and support services
- 43  Public administration and safety
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- Education and training
- Health care and social assistance (includes aged care) >>complete module on health & social care
- Arts and recreation services
- Other, specify \_\_\_\_\_
- Don't know

3.18 *if 3.12d=yes*: What is the title of your current job (select your **main** job)?

\_\_\_\_\_

3.19 *if 3.9[work=1]*: What is your current work environment? *Select one*

- Attend a single workplace/location
- Attended multiple workplaces/locations
- Work from home
- Both workplace(s) and work from home
- Other, please describe \_\_\_\_\_

3.20 *(if 3.9[work=1], if 3.19 does not contain "Work from home")*: What is the postcode of your main workplace?

- Enter postcode: \_ \_ \_ \_ \_
- No fixed postcode
- Don't know

3.21 *if 3.9[work=1]*: How many people do you directly supervise or manage at work in your **current** position(s)? \_ \_ \_ *If none, write "0"*.

3.22 Since 1<sup>st</sup> March 2020, did any of the following happen to you or your household because of a **shortage of money**? *If you live in a shared or group house, please consider your personal circumstances only. \*Not required*

	Yes	No
Could not pay electricity, gas or telephone bills on time	<input type="radio"/>	<input type="radio"/>
Could not pay for car registration or insurance on time	<input type="radio"/>	<input type="radio"/>
Pawned or sold something	<input type="radio"/>	<input type="radio"/>
Went without meals	<input type="radio"/>	<input type="radio"/>
Unable to heat your home	<input type="radio"/>	<input type="radio"/>
Sought assistance from welfare / community organisations	<input type="radio"/>	<input type="radio"/>
Sought financial help from friends or family	<input type="radio"/>	<input type="radio"/>
Other financial hardships	<input type="radio"/> Specify _____	<input type="radio"/>

### Impacts of COVID-19 on your work performance

if 3.9[work=1]:

3.23 Have you experienced any of the following changes to your work in the past 4 weeks as a result of COVID-19 and the measures taken to prevent its spread?

	Yes	No	
a. My work tasks or role have changed	<input type="checkbox"/>	<input type="checkbox"/>	
	Decreased	Stayed the same	Increased
b. Workload	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Work productivity / accomplishments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Ability to concentrate on work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Working outside of usual hours (compared to early 2020, e.g. February)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3.24 (If 3.23a=yes / if 3.23(b|c|d|e != stayed the same)) Which factor(s) contributed most to these changes to your work performance? *Select up to three*

- Childcare responsibilities
- Schooling children from home
- Care of others
- Physical health
- Emotional health (e.g. anxiety)
- Unsuitable environment for working (e.g. privacy, comfort, equipment, internet connection)
- Workplace closed temporarily
- Reduced commuting time
- Working on COVID response (healthcare, aged care sector)
- Stressful work environment
- Other, specify \_\_\_\_\_

### Let's talk about your study and education before and since COVID-19

3.25 a) In February 2020, were you enrolled in or had you accepted an enrolment offer for any study for 2020 (school, university, TAFE etc)?

- Yes
- No >> skip to 3.27

a) If yes: At what level were you enrolled to study?

- High school
- TAFE, college or diploma

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3  University – undergraduate course (e.g. Bachelor degree)  
4  University – postgraduate course (e.g. Masters, Doctorate)  
5  
6 3.26 What are your study circumstances now? *Select all that apply*  
7  Still going to school/university/class  
8  Still studying, by distance/online  
9  On hold/deferred  
10  Withdrawn/dropped out  
11  Completed study (including awaiting graduation)  
12  Other, *specify* \_\_\_\_\_  
13  Don't know  
14  Prefer not to say  
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21 a) Have you newly enrolled in study since 1<sup>st</sup> March 2020?  
22  Yes >> [go to b](#)  
23  No  
24  
25 b) *If 3.27a)= yes:* At what level are you enrolled to study?  
26  High school  
27  TAFE, college or diploma  
28  University – undergraduate course (e.g. Bachelor degree)  
29  University – postgraduate course (e.g. Masters, Doctorate)  
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### Let's talk about your other non-paid care responsibilities before and since COVID-19

- 34 3.28 a) Were you responsible for unpaid care of children OR providing unpaid care to  
35 another person due to the disability, long term illness or old age in early 2020 (e.g.  
36 February)?  
37  Yes >> Average hours per week: \_\_\_ \_\_\_  
38  No >> [skip to 3.29](#)  
39  Don't know >> [skip to 3.29](#)  
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43 a) What is your relationship to the person(s) in your care? *Select all that apply*  
44  My child(ren) or dependents  
45  Grandchild(ren)  
46  Child(ren) not related  
47  Parent(s)  
48  Grandparent(s)  
49  Other family member(s)  
50  Someone other than a family member  
51  Other  
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53  
54 3.29 a) Are you currently responsible for unpaid care of children OR unpaid care due to the  
55 disability, long term illness or old age of another person?  
56  Yes >> Average hours per week: \_\_\_ \_\_\_  
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- No >> skip to Q3.30
  - Don't know >> skip to Q3.30

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a) What is your relationship to the person(s) in your care? *Select all that apply*

- My child(ren) or dependents
- Grandchild(ren)
- Child(ren) not related
- Parent(s)
- Grandparent(s)
- Other family member(s)
- Caring for someone other than a family member
- Other

**The next few questions ask about the childcare and schooling requirements for your children/dependants**

*Limited to those with children*

3.30 Which childcare services did you regularly use in early 2020 (e.g. February 2020)? *Select all that apply*

- Day care >> ave. days per week \_\_\_\_
- After school care >> ave. days per week \_\_\_\_
- Informal care (e.g. grandparent, babysitter) >> ave. days per week \_\_\_\_
- Other, *please specify* \_\_\_\_\_ >> ave. days per week \_\_\_\_
- Did not use childcare services
- Not applicable >> [go to 3.32](#)

3.31 a) Have your childcare arrangements changed because of COVID-19 and the measures to prevent its spread?

- Yes >> [go to b](#)
- No >> [go to 3.32](#)
- Don't know >> [go to b](#)

b) *If 3.31a) =yes*: Which childcare services do you currently use? *Select all that apply*

- Day care >> ave. days per week \_\_\_\_
- After school care >> ave. days per week \_\_\_\_
- Informal care (e.g. grandparent, babysitter) >> ave. days per week \_\_\_\_
- Other, *please specify* \_\_\_\_\_ >> ave. days per week \_\_\_\_
- Do not use childcare services

3.32 a) Have the schooling arrangements for your child(ren) or dependant(s) changed because of COVID-19 and the measures to prevent its spread?

- Yes >> [go to b](#)
- No >> [skip to Lifestyle, social engagement and support](#)
- Not applicable >> [skip to Lifestyle, social engagement and support](#)
- Don't know >> [go to b](#)

a) What is the current schooling arrangement for your child(ren) or dependant(s)?

Select all that apply

- Attending school
- Remote learning online
- Being home schooled
- Other, please specify \_\_\_\_\_

4 Lifestyle, social engagement and support

4.1 Please estimate how many **days per week** you did the following things: *If you prefer not to answer, please tick the box*

	In an average week in <u>early 2020</u> (e.g. <u>February</u> )	In the <u>past week</u>
Consumed any alcohol	[0-7, prefer not to say] ____	[0-7, prefer not to say] ____
<i>(If any)</i> Consumed six or more alcoholic drinks in a single day	[0-7, prefer not to say] ____	[0-7, prefer not to say] ____
Smoked cigarettes or other tobacco	[0-7, prefer not to say] ____	[0-7, prefer not to say] ____
Used recreational drugs (including illicit drugs and pharmaceuticals)	[0-7, prefer not to say] ____	[0-7, prefer not to say] ____
Exercised for 30 minutes or more	[0-7, prefer not to say] ____	[0-7, prefer not to say] ____
Used online gambling or betting	[0-7, prefer not to say] ____	[0-7, prefer not to say] ____

4.2 In early 2020 (e.g., February 2020), prior to COVID-19, how often did you:

	Never	Less than monthly	Once or twice a month	Weekly	Daily or almost daily
...Do voluntary work with a community organisation?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...Visit friends locally?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...Speak to your neighbours?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...Mind a friend's or neighbour's child?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...Take part in a sporting, social or religious group or club? <i>(Include virtual/online participation)</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...Go out to a local café, restaurant, pub or show?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

... Go to a public meeting or signed a petition?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
... Attend indoor movie theatres, stadiums, galleries, or museums	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
... Attend an indoor gym / sports and recreation facility	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
... Use public transport (i.e. train, bus, tram)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
... Travel within Australia (>100km from your place of residence)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

4.3

- a) Have you taken part in a sporting, social or religious group or club in the **past 4 weeks**? Consider both in-person and virtual (online) involvement

Yes

No >>skip to 4.4

b) How many groups or clubs were you involved in during the **past 4 weeks**? \_\_\_\_  
 [repeat for number of groups/clubs reported]

	Group 1	Group 2	Group 3	Group 4
a) Name of group/club				
b) Where is the group/club primarily located? <i>Write down the suburb, if known. If online/virtual contact only, write "online"</i>				
c) How often did you take part in the group in the <b>past 4 weeks</b> ?	Daily / Most days Few times a week Once a week Once or twice			

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4.4 How many people **can you rely on** for practical assistance or emotional support during the pandemic if you need it?

- No-one  
 One person  
 2 - 5 people  
 More than 5 people

4.5 How many people **will rely on you** for practical assistance or emotional support during the pandemic if they need it?

- No-one  
 One person  
 2 - 5 people  
 More than 5 people

## 5 COVID-19 assessment

5.1 Have you been away from your main living premises in the **past four weeks** for more than two nights?

- Yes  
 No >> skip to 5.5

5.2 *If yes to 5.1:* In total, approximately how many nights did you spend away from your main living premises in the **past four weeks**? \_\_\_ \_\_\_

5.3 *If yes to 5.1:* What is the postcode where you spent the most time away from your living premises? \_\_\_ \_\_\_ \_\_\_ \_\_\_

5.4 *If yes to 5.1:* Did you spend any time in a "COVID-19 hotspot\*" that you know of?

- Yes  
 No  
 Prefer not to say

\*Pop-up Information box:

- An extreme risk zone means a specified location assessed as extreme risk for COVID-19 transmission
- A **red zone** means a specified location assessed as high risk for COVID-19 transmission,
- An **orange zone** means a specified location assessed as medium risk for COVID-19 transmission.

5.5 Have you **ever** been tested for COVID-19/Coronavirus infection?

- Yes >> go to 5.6  
 No >> skip to Q6.14a)  
 Prefer not to say >> skip to Q6.14a)

5.6 *If tested:* How many times have you been tested? \_\_\_ \_\_\_

5.7 *If tested:* When was your **last** test? \_\_\_ \_\_\_ / \_\_\_ \_\_\_ / \_\_\_ \_\_\_

5.8 *If tested:* What was the result of your **last** test?

- Positive >> go to 5.10  
 Negative >> go to 5.9  
 Indeterminate >> go to 5.9

- 1  
2  
3  Haven't received a result yet >> [go to 5.9](#)
- 4  Prefer not to say >> skip to Q5.9
- 5.9 *If tested & last test was not positive:* Have you **ever** tested positive for COVID-19/Coronavirus
- 6  Yes >> [go to 5.10](#)
- 7  No >> [skip to Q5.11](#)
- 8  Prefer not to say >> [skip to Q5.11](#)
- 9.10 *If ever positive/last test positive:* How severe were your COVID-19 symptoms and complications? If you are still sick with COVID-19, consider your symptoms to date. *Select one only*
- 10  Mild, no significant symptoms
- 11  Significant symptoms managed in self-isolation
- 12  Symptoms requiring hospital treatment (1 day or less)
- 13  Symptoms requiring hospital treatment (more than 1 day)
- 14.11 *If ever tested:* Why were you last tested for COVID-19? *Tick all that apply*
- 15  I had symptoms
- 16  I had close contact with someone with confirmed COVID-19
- 17  I work in a high-risk setting
- 18  Had recently returned from overseas / cruise ship travel
- 19  There were cases of COVID-19 where I live (suburb, neighbourhood, apartment block)
- 20  There were cases reported in places I regularly visit, work or study
- 21  Required before returning to work
- 22  I had to have a test to clear isolation
- 23  Community testing blitz (door knocking)
- 24  I stayed in, or travelled through a COVID-19 hotspot or location with reported COVID-19 cases
- 25  I was in a place listed as an "orange zone"
- 26  Other, *specify* \_\_\_\_\_
- 27.12 *If tested, or if close contact (based on screening):* Did you apply for any of the following government support packages? *Select all that apply*
- 28  COVID-19 worker support payment (one-off \$1500 payment to Victorian workers who are self-isolating or quarantining without access to sick leave)
- 29  Pandemic Leave Disaster Payment (one-off payment to Victorian workers who can't earn an income because they must self-isolate or quarantine)
- 30  COVID-19 test isolation payment (one-off payment while waiting for results of COVID-19 test)
- 31  Lockdown hardship payments (\$750) for unemployed public housing residents
- 32  Emergency relief package (Care packages for people who do not have family and friend support and are unable to order groceries online)

- Crisis Payment for National Health Emergency (COVID-19)
- Emergency Accommodation during isolation or quarantine
- Other, *specify* \_\_\_\_\_
- None of the above

*If ever tested or if close contact:* The following questions ask about self-isolation or quarantine.

Self-isolation or quarantine applies to people who:

- 1) Have been diagnosed with COVID-19;
- 2) Are waiting to receive their COVID-19 test result and have symptoms indicative of potential COVID-19;
- 3) Have been told that they are a primary close contact of someone with confirmed COVID-19;
- 4) Have been told that they are a secondary close contact of someone with confirmed COVID-19, with instruction to self-isolate until their primary close contact tests negative;
- 5) Have returned from a designated “red zone” with instruction to quarantine;
- 6) Have returned from a designated “orange zone” with instruction to self-isolate until receiving a negative test result;
- 7) Have returned from overseas.

These terms are different to the general “Stay at Home” or “Stage 3 or 4 restriction” measures which are sometimes referred to as “iso” or “lockdown”.

5.13 *If ever tested or if close contact:* Have you had any difficulties with the following during self-isolation/quarantine?

	Yes	No	Not applicable
Difficulty accessing instructions about self-isolation/quarantine	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Difficulty understanding instructions about self-isolation/quarantine	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Separating from others in your household	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Getting supplies (Food, clothes, and house supplies, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Getting medicines & prescriptions	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Accessing medical care (for COVID-19 or any health condition)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other, <i>specify</i> _____	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

5.14 a) Do you personally know anyone who has been diagnosed with COVID-19/Coronavirus?

- Yes
- No >> [skip to 5.15](#)
- Don't know / Prefer not to say >> [skip to 5.15](#)

b) How many people do you personally know who have been diagnosed? \_\_\_\_

c) How many people do you personally know who have been hospitalised (for more than 1 day) and/or who have died from COVID-19? \_\_\_\_

1  
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4  
5 5.15 How likely do you believe it is that you will be infected with COVID-19 at some point in  
6 the future?

7  Unlikely

8  Somewhat likely

9  Very likely

10  Don't know / Not sure

11  N/A – Have already been infected with COVID-19 >> [skip to Q5.17](#)

12  
13  
14  
15 5.16 If you were infected with COVID-19 in the future, how severe do you think it would be  
16 for your health?

17  Life threatening

18  Very severe (e.g., requiring hospitalization)

19  Moderate (e.g., requiring self-care and rest in bed)

20  Mild (e.g., capable of continuing with daily tasks normally)

21  No symptoms

22  Don't know / not sure

23  
24  
25  
26 5.17 How likely do you think it is that people in your family and friends might become  
27 infected with COVID-19 at some point in the future?

28  Unlikely

29  Somewhat likely

30  Very likely

31  Don't know / Not sure

32  
33  
34  
35 5.18 How worried are you about the COVID-19 outbreak in Australia?

36  Very worried

37  Fairly worried

38  A little worried

39  Not at all worried

40  Don't know/ not sure

## 41 42 43 44 45 6 COVID-19 Vaccination Module

46  
47 *In this section of the survey, we ask about your **experiences with** vaccines in general.*

### 48 **Historical Vaccination Practices**

49 6.1 a) Do you usually get vaccinated for seasonal influenza (“the flu”)?

50  Always

51  Sometimes

52  Never

53  Prefer not to say

54  
55  
56  
57  
58 a) In what year did you last receive the seasonal influenza vaccination (‘flu  
59 vaccine’)  
60

Year

- 2020
- 2019
- 2018
- 2017
- 2016
- 2015
- 2014
- 2013
- 2012
- 2011
- 2010 or before
- Don't remember/Prefer not to say

a) . In what month did you last receive the seasonal influenza vaccination ('flu vaccine')

- 01 - January
- 02 - February
- 03 - March
- 04 - April
- 05 - May
- 06 - June
- 07 - July
- 08 - August
- 09 - September
- 10 - October
- 11 - November
- 12 - December
- Prefer not to say
- Don't remember

a) *[If Q 6.1 is not = Never]* Do you plan to get the 2021 seasonal influenza vaccination ('flu vaccine') when one is available?

- Yes
- No
- Undecided
- Prefer not to say

6.2 Have you ever been vaccinated before going on an overseas trip (as an adult/ (For e.g., Yellow Fever, Hepatitis B or Typhoid Vaccines)?

- Yes
- No, I have not travelled to countries where vaccinations are recommended
- No, even though I was advised to take vaccines for overseas travel



- 1  
2  
3  No, I was exempt for medical reasons (e.g. allergies, pregnancy, other underlying  
4 medical condition?)  
5  
6  I don't know/ cannot remember  
7  
8  Prefer not to say  
9

10  
11  
12 Vaccine acceptance: COVID-19 vaccines will become available to the majority of Australian's this year  
13

14 6.3 Do you think you would have a COVID-19 vaccine?

- 15  I have already been fully vaccinated >> skip to Q6.5  
16  I have been partially vaccinated >> skip to Q6.5  
17  
18  Definitely yes >> skip to Q6.5  
19  
20  Probably yes  
21  
22  I'm not sure yet  
23  
24  Probably not  
25  
26  Definitely not  
27  
28  Prefer not to say

29 6.4 For what reason(s) **would you NOT have** a COVID-19 vaccine yourself? *Select all that*  
30 *apply*

- 31  *At this stage I have no concerns about the vaccine*  
32  
33  It will not be needed as most people will have developed immunity by natural  
34 infection  
35  
36  I don't think the vaccine is necessary because COVID-19 is not that serious in most  
37 people  
38  
39  It may not work well enough to be worth having  
40  
41  I am worried that it's not safe and hasn't been tested enough for safety  
42  
43  I am worried that I may develop a blood clot after getting the COVID-19 vaccine.  
44  
45  I am worried that I might catch COVID-19 from the vaccine  
46  
47  I am worried that I would get sicker if I got COVID after the vaccine  
48  
49  I do not want to/can't pay for the vaccine  
50  
51  I do not want the vaccine if there is more than one dose  
52  
53  I do not want to attend a health care provider to have the vaccine due to the risk of  
54 catching COVID-19  
55  
56  I do not accept any vaccines for myself so would not accept a COVID-19 vaccine  
57  
58  Other, *please specify* \_\_\_\_\_

59 *[for participants with children only]*

60 6.5 If / when COVID-19 vaccines are approved for use in children under 18 years and are  
available, would you get the COVID-19 vaccine for your child/ren?

- My child/ren have already been vaccinated >> Q 6.7 (concerns about vaccine)

- 1  
2  
3  Definitely yes >> skip to Q6.7  
4  Probably yes  
5  I'm not sure yet  
6  Probably not  
7  Definitely not  
8  Prefer not to say  
9  N/A – no dependent child/ren >> skip to Q 6.7

14  
15 6.6 For what reason(s) **would you NOT get** a COVID-19 vaccine for your child/ren? *Select*  
16 *all that apply*

- 17  *At this stage I have no concerns about the vaccination for my children should it*  
18 *become available*  
19  It will not be needed as most people will have had the infection by then  
20  I don't think the vaccine is necessary because COVID-19 is not that serious in children  
21  It may not work well enough to be worth having  
22  I am worried that it's not safe and hasn't been tested enough for safety  
23  I am worried that I my child may develop a blood clot after getting the COVID-19  
24 vaccine  
25  I am worried that my child might catch COVID-19 from the vaccine  
26  I am be worried that my child would get sicker if they got COVID after the vaccine  
27  I do not want to/be able to pay for the vaccine  
28  I do not want my Child/re to have the vaccine if there was more than one dose  
29  I do not want to attend a health care provider with my child to have the vaccine due  
30 to the risk of catching COVID-19  
31  I do not accept any vaccines for my child so would not accept a COVID-19 vaccine  
32  Other, *please specify* \_\_\_\_\_

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42 6.7 Do you have any concerns about the vaccine? If so, what are your main concerns  
43 (select all that apply):

- 44  I am worried that it may affect my future fertility  
45  I am worried that it may affect my present or future pregnancy or breastfeeding  
46  I am worried about potential side effects  
47  I am worried about serious reactions  
48  I am worried that long term effects are not well understood  
49  A COVID-19 vaccination could give me COVID-19  
50  The COVID-19 vaccine may interact with my current medications  
51  A COVID-19 vaccination is too new for me to be confident about getting vaccinated  
52 with it  
53  Information on side effects following immunisation is not readily available  
54  I have no safety concerns

Other, please specify \_\_\_\_\_

*In this section, we ask about your experience with COVID-19 vaccines.*

### COVID-19 vaccines

6.8 a) *[If Q6.3 ==yes]* Which COVID-19 vaccine did you have?

- Pfizer-BioNTech (COMIRNATY)
- Oxford-AstraZeneca (COVID-19 Vaccine AstraZeneca)
- Other vaccine – Please specify \_\_\_\_\_
- Unsure/ don't know
- Prefer not to say

a) *[If Q6.3 ==yes]* How many doses of the COVID-19 vaccine have you received?

- 1 dose
- 2 doses
- Unsure / Don't know

*[If NO I have NOT already received a vaccine at Q5.1 (9.16 in baseline-revised*

a) *[If Q6.8b ==1 dose]* For what reason have you not received the second dose of vaccine?

- The next dose is not due yet
- I don't intend to receive it
- I experienced a bad side effects and I have chosen not to get a second vaccine
- My doctor recommended that I should not get a second vaccine
- There are no vaccine bookings available in my area
- Prefer not to say

6.9 *[If Q6.3 not equals yes]* For what reason have you not had a COVID-19 vaccine?

- I'm booked to receive it in the coming weeks
- I am eligible, but there are no vaccine bookings available in my area
- I believe I am currently eligible but have not yet booked an appointment
- I do not believe I am currently eligible for COVID-19 vaccines (for example based on age, underlying conditions, pregnancy or allergy to vaccine ingredients)
- I would prefer to choose which vaccine I receive, and I was unable to do so
- I was offered a vaccine, but I declined.
- I do not intend to get the COVID-19 vaccine

- I don't know/ unsure
- Prefer not to say

**Perceived knowledge sufficiency**

6.10 To what extent do you agree or disagree with the following statements?

	Totally Disagree	Somewh at disagree	Neutral	Some what Agree	Totally Agree	Prefer not to say
<b>a)</b> Adequate information about COVID-19 <b>illness</b> is available for the public to make an informed decision about whether to get vaccinated						
<b>b)</b> Adequate information about COVID-19 <b>vaccines</b> is available for the public to make an informed decision about whether to get vaccinated						
<b>c)</b> Adequate information about who is eligible to receive a COVID-19 vaccine is available						
<b>d)</b> Adequate information about where to go to receive COVID-19 vaccines is available						
<b>e)</b> Adequate information about how to book or make an appointment to receive a COVID-19 vaccine is available						
<b>f)</b> Adequate information about how much it will cost to receive a COVID-19 vaccine is available						
<b>g)</b> Adequate information on side effects following COVID-19 <b>vaccination</b> is readily available						
<b>h)</b> Adequate information about what the benefits are for getting vaccinated is available						
<b>i)</b> Adequate information about what the risks are for getting vaccinated – such as the potential risk of developing a blood clot						

and or other side effects is  
available

### General COVID-19 vaccination beliefs and attitudes

6.11 To what extent do you agree or disagree with the following statements?

	Totally Disagree	Somewhat disagree	Neutral	Somewhat Agree	Totally Agree	Prefer Not to say
a) I understand the reasons it is important that as many people as possible in Australia get vaccinated against COVID-19						
b) I understand that I will need to get two injections, with a gap in time between the first and second to be properly vaccinated against COVID-19						
c) Without a COVID-19 vaccine, people are likely to catch COVID-19						
d) If a person was fully vaccinated against COVID-19 they cannot get sick from the virus						
e) If a person was fully vaccinated then they cannot pass the virus on to others						

<p>f) It is important for someone to get a vaccine to protect those that cannot get vaccinated</p>						
<p>g) I am worried that the vaccines will not work as well against the new strains of the virus</p>						
<p>h) My family would approve of me having a COVID-19 vaccination</p>						
<p>i) My friends would approve of me having a COVID-19 vaccination</p>						
<p>j) If a COVID-19 vaccination were recommended by the <u>government</u>, I would get vaccinated</p>						
<p>k) If a COVID-19 vaccination were recommended by a <u>health care professional</u> (e.g., GP or nurse), I would get vaccinated</p>						
<p>l) If a COVID-19 vaccination were recommended by my <u>employer</u>, I would get vaccinated</p>						
<p>m) I do not mind getting a COVID-19</p>						

vaccination, as long as I am not among the first people to get it.						
n) People should have a choice of what type of vaccines to take						
o) People who live in an area where there are none or only few cases, should not need to be vaccinated.						

### Return to 'normal' life

6.12 To what extent do you agree or disagree with the following statements?

	Totally Disagree	Somewh at disagree	neutra l	Somewh at Agree	Totally Agree	Prefer Not to say
a) Once a person is vaccinated, they should no longer be required to follow social distancing and other measures for COVID-19						
b) Once a person is vaccinated, they should no longer need to isolate or quarantine due to the reduced the spread of COVID-19?						
c) Once a person is vaccinated, they should no longer need to be tested for COVID if they have COVID like						

	Totally Disagree	Somewh at disagree	neutra l	Somewh at Agree	Totally Agree	Prefer Not to say
symptoms.						
<b>d)</b> People who have been vaccinated should not be required to get tested if there is a positive wastewater test for the COVID-19 virus in their community.						
<b>e)</b> If you were vaccinated overseas, the two-week quarantine period should be reduced.						
<b>f)</b> COVID-19 vaccines will allow us to get back to 'normal'.						
<b>g)</b> COVID-19 vaccines should be required for international travel to / from Australia.						

7 Physical health and health care

7.1 *If sex at birth!=male:* Are you currently pregnant?

- Yes
- No
- Don't know/prefer not to answer

7.2 a) Do you have any health conditions that are chronic or have ongoing impact on your daily life or medical needs? This includes both physical and mental health conditions

- Yes
- No >> skip to 7.3
- Don't know >> skip to 7.3
- Prefer not to say >> skip to 7.3



b) *If yes:* Which medical conditions has a doctor or healthcare professional told you that you have? *Check all that apply*

- Alcohol or drug dependence
- Alzheimer's or dementia
- Arthritis
- Asthma
- Autism spectrum disorder
- Any autoimmune disease (e.g. lupus, multiple sclerosis, rheumatoid arthritis, psoriasis, Crohn's disease, inflammatory bowel disease)
- Bowel disease
- Brain injury
- Cancer (active/current)
- Depression or anxiety disorder
- Other mental health condition
- Diabetes
- Epilepsy or seizures
- Hearing loss
- Heart disease or history of heart attack
- Hypertension / high blood pressure
- Immune disorder (immunocompromised, primary or acquired immune deficiency)
- Intellectual disability
- Chronic kidney disease
- Liver disease
- Chronic lung disease (e.g. COPD, emphysema)
- Menopausal symptoms
- Musculoskeletal condition
- Spinal cord injury
- Stroke
- Vision impairment
- Other, *specify* \_\_\_\_\_
- Prefer not to say

c) Do these health need(s) require ongoing regular medical appointments (e.g. repeat prescriptions, specialist appointments, physical therapy, periodic check ups)?

- Yes
- No
- I don't know

The next two questions ask about your access to healthcare in **2019 (pre-covid-19)**

7.3 In 2019, how many times did you access a health service or practitioner for any health condition? (Consider GP, hospital, specialist, dentist, community health and allied health services. Include telehealth consultations).

- 1  
2  
3  Never  
4  One or more times >> *Please estimate how many times:* \_\_ \_\_  
5  Prefer not to say  
6  
7 7.4 How easy was it for you to access the healthcare you need in **2019**?  
8  Very easy  
9  Somewhat easy  
10  Somewhat difficult  
11  Very difficult  
12  N/A – I didn't need to access healthcare in 2019  
13  Don't know/ Prefer not to say  
14  
15  
16  
17

The next set of questions ask about your access and utilisation of healthcare in the **past three months**.

- 18  
19  
20 7.5 How many times did you access a health service or practitioner for any health condition  
21 in the past three months? (Consider GP, hospital, specialist, dentist, community health  
22 and allied health services. Include telehealth consultations)  
23  Never  
24  One or more times >> *Please estimate how many times:* \_\_ \_\_  
25  Prefer not to say  
26  
27 7.6 What type of a health practitioner did you access? *Select all that apply*  
28  A General Practitioner (GP)  
29  A specialist doctor  
30  A dentist  
31  An alternative health care provider (e.g naturopath, chiropractor etc)  
32  A hospital doctor in outpatients  
33  A hospital doctor in the emergency department  
34  A midwife  
35  A counsellor or other mental health worker  
36  A community nurse, practice nurse or nurse practitioner  
37  A physiotherapist, dietitian or exercise physiologist  
38  Other  
39  
40  
41  
42  
43  
44  
45  
46 7.7 How easy has it been for you to access the healthcare you need in the past three  
47 months?  
48  Very easy  
49  Somewhat easy  
50  Somewhat difficult  
51  Very difficult  
52  N/A – haven't needed healthcare >> [skip to Q7.12](#)  
53  Don't know/ Prefer not to say  
54  
55  
56  
57 7.8 Has COVID-19 changed your access or utilisation of healthcare?  
58  Yes  
59  
60

- 1  
2  
3  No >>skip to Q 7.10  
4  Don't know >>skip to Q 7.10  
5  
6 7.9 *If yes: What changes have you experienced? Select all that apply*  
7  
8  My face-to-face appointments were rescheduled to Telehealth appointments  
9  My appointment(s) were cancelled/postponed by the clinic  
10  My elective surgery / procedure was delayed or cancelled  
11  I couldn't contact my usual healthcare provider  
12  I couldn't afford to access my usual healthcare  
13  I couldn't access my usual healthcare  
14  I ran out of medication  
15  Other, specify \_\_\_\_\_  
16  
17 a) Were you offered any alternatives to your usual medical appointments or  
18 prescription services? *E.g. telehealth, online prescription services, in-home services*  
19  Yes  
20  No  
21  Don't know  
22  
23 b) If yes, what were you offered? *Select all that apply*  
24  Telehealth consultation(s) >> go to d  
25  Online prescription services  
26  Repeat prescriptions /multi-month medication  
27  In-home services  
28  Other, specify \_\_\_\_\_  
29  
30 c) How satisfied were you with telehealth consultation(s)?  
31  Very satisfied  
32  Somewhat satisfied  
33  Neutral  
34  Somewhat dissatisfied  
35  Very dissatisfied  
36  
37 7.10 Have you experienced any of the following concerns in relation to your usual healthcare  
38 in the past 3 months? *Select all that apply*  
39  I delayed or avoided seeking care  
40  I felt anxious about attending due to COVID-19  
41  I couldn't access telehealth consultation(s)  
42  Other, specify \_\_\_\_\_  
43  No concerns in relation to your usual healthcare  
44  
45 7.11 a) Do you regularly need help with daily tasks because of long-term illness, age or  
46 disability (e.g. help with personal care, getting around, preparing meals etc)?  
47  Yes  
48  No >> skip to Mental Health And Wellbeing  
49  Prefer not to say >> skip to Mental Health And Wellbeing  
50  
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a) *If yes:* Have you experienced any disruptions to receiving this help or care due to COVID-19 or the measures taken to prevent infection?

- Yes
- No
- Prefer not to say

## 8 Mental health and wellbeing

The following section asks about experiences affecting your wellbeing. **For emotional support, Beyond Blue and Lifeline offer tips, brief counselling and referrals.** More information will be available at the end of the survey.

8.1 Over the last 2 weeks, how often have you been bothered by the following problems? \*  
*Not required*

	Not at all	Several days	Over half the days	Nearly every day
Feeling nervous, anxious, or on edge	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Not being able to stop or control worrying	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Worrying too much about different things	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Trouble relaxing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Being so restless that it's hard to sit still	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Becoming easily annoyed or irritable	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Feeling afraid as if something awful might happen	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

The following questions ask how satisfied you feel, on a scale from zero to 10. Zero means you feel no satisfaction at all and 10 means you feel completely satisfied.

8.2 Thinking about your own life and personal circumstances, how satisfied are you with ...  
*\* Not required*

	0 No satisfaction at all	1	2	3	4	5	6	7	8	9	10 Completely satisfied
... your standard of living?	0	1	2	3	4	5	6	7	8	9	10
... your health?	0	1	2	3	4	5	6	7	8	9	10
... what you are achieving in life?	0	1	2	3	4	5	6	7	8	9	10
... your personal relationships?	0	1	2	3	4	5	6	7	8	9	10
... how safe you feel?	0	1	2	3	4	5	6	7	8	9	10
... feeling part of your community?	0	1	2	3	4	5	6	7	8	9	10
... your future security?	0	1	2	3	4	5	6	7	8	9	10

8.3 To what extent has COVID-19 had negative effects on your mental health (e.g. feeling stressed, lonely, anxious, angry etc) in the past 4 weeks?

- To a great extent
- Somewhat
- Very little
- Not at all
- I don't know/Prefer not to answer

### 9 Measures to prevent COVID-19

9.1 Where are the **main** places you receive or access information to stay informed about COVID-19? *Select up to three sources.*

- Australian Government health authorities (e.g. Department of Health website, Coronavirus Australia app, hotline, Government WhatsApp channel)
- Daily government press conferences/media releases (e.g., by the Premier, Health Minister and/or Chief Health Officer)
- Doctor or other health professional
- News media (including online, television, radio, print)
- Friend or family
- My workplace / co-workers
- Social media (e.g. Facebook, Twitter, Instagram, Weibo, WeChat, Australia Today, Yi Yi)
- A community/religious/cultural leader
- The World Health Organization (WHO)
- Other, please specify \_\_\_\_\_
- I haven't accessed COVID-19 information

9.2 Have you downloaded the **COVIDSafe App**?

- Yes
- I tried but it was unsuccessful (e.g. not compatible)
- No, I haven't tried
- Don't know

9.3 How often have you taken the following measures to protect yourself and others from COVID-19 (coronavirus) in the past 4 weeks?

	Always	Most of the time	Sometimes	Never	Not applicable to me
Using hand sanitizer and/or washing your hands immediately after being in a public place	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Coughing/sneezing into your elbow or tissue	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Keeping 1.5 metres away	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

from people who are not members of your household as much as you can					
Disinfecting surfaces and objects	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Avoiding seeing people who are older/vulnerable	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Avoiding non-essential shopping (in person – don't consider online shopping)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Avoiding social gatherings	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Wearing or carrying face covering in public <i>A face covering needs to cover both your nose and mouth. It could be a face mask or shield.</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

9.4 Have you ever received a fine for not following COVID directives (i.e. stay-at-home, self-isolation, mask wearing, curfew)?

- Yes
- No
- Prefer not to say

9.5 Have you ever experienced or witnessed racism **in relation to COVID-19** and the measures to prevent its spread? *Select all that apply*

- Yes, I experienced racism
- Yes, I witnessed racism
- No
- Prefer not to say

**The next questions are specific to your places of work.**

*If report working in workplace currently*

9.6 *Skip to 9.8 if reported HCW or aged care worker in screener, or if report health/social assistance industry:* Do you currently work in a facility or service providing healthcare or social assistance? *This includes people working in administration, management, cleaning, support services, and health professionals*

- Yes
- No
- Don't know

*If report working in workplace currently but not HCW/in healthcare setting*

9.7 How often have you taken the following measures to protect yourself and others from COVID-19 (coronavirus) in the past 4 weeks **when at your workplace(s)**?

	Always	Most of the time	Sometimes	Never	Not applicable to me
Wearing or carrying face covering <i>A face covering needs to cover both your nose and mouth. It could be a face mask or shield.</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Regularly using hand sanitizer and/or washing your hands	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Keeping 1.5 metres away from other people as much as you can	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Disinfecting surfaces and objects (implemented yourself or by your workplace)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Avoiding shared use of phones, desks, offices, or other work tools and equipment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Using personal protective equipment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

*If report being a HCW or age care worker in screening, or if health and social assistance industry:*

	General practice and general community-based services	Specialist community-based services	Residential care	Ambulance services	Quarantine or Border security worker
<ul style="list-style-type: none"> <li>● Inpatient services</li> <li>● Outpatient clinics</li> <li>● Emergency departments</li> <li>● Other hospital-based settings</li> </ul>	<ul style="list-style-type: none"> <li>● General practice</li> <li>● Community health services</li> <li>● Allied health practices</li> <li>● Community Pharmacy</li> <li>● Dentistry</li> <li>● Health</li> </ul>	<ul style="list-style-type: none"> <li>● Specialist medical/surgical</li> <li>● Diagnostic service/pathology</li> <li>● Home and community care</li> <li>● Alcohol and other drug treatment</li> </ul>	<ul style="list-style-type: none"> <li>● Aged care</li> <li>● Residential care</li> </ul>	<ul style="list-style-type: none"> <li>● Ambulance service</li> <li>● Aero-medical service</li> </ul>	<ul style="list-style-type: none"> <li>● Hotel quarantine</li> <li>● Specialised health hotels</li> <li>● Complex care hotel workers</li> <li>● Border health screening</li> </ul>

	promotion ● University	service ● Community mental health service ● Palliative care service ● Other specialist			
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9.8 What kind of **setting(s)** do you currently work in? *See examples of each setting above. Select all that apply*

- Hospital >>  Inpatient services  Outpatient clinics  Emergency departments  Other
- General practice and general community-based health services
- Specialist community-based services
- Residential care
- Ambulance services
- Other setting

9.9 Do you provide direct patient care?

- Yes – including in person care
- Yes – telehealth *only* >> skip to Q9.11
- No

9.10 Repeat questions for each setting selected:

- a) Does your [insert setting] workplace provide COVID-19 (coronavirus) testing?
- Yes
  - No
  - Don't know

b) In the past 4 weeks, how often was appropriate PPE (personal protective equipment) **available** at your [insert setting] workplace? *Appropriate PPE is dependent on your setting, patient contact, and guidelines and may have changed over time.*

- All of the time
- Most of the time
- Some of the time
- Rarely
- Never
- Don't know
- Prefer not to say

c) In the past 4 weeks, how often did you **use** appropriate PPE during patient interactions?



- 1  
2  
3  All of the time  
4  Most of the time  
5  Some of the time  
6  Rarely  
7  Never  
8  Don't know  
9  Prefer not to say  
10  
11  
12

13 ***If report being a quarantine worker/border security:***

14 The following questions are specific to your hotel quarantine and/or border security  
15 workplace

16 9.11 How do you receive updates and important communication from your workplace? Tick

17 all that apply

- 18  Phone  
19  Email  
20  WhatsApp  
21  WeChat/Weibo  
22  In-person meetings  
23  Other, *specify* \_\_\_\_\_  
24  I don't receive updates/important communication  
25  
26  
27  
28  
29  
30

31 9.12 To what extent do you agree with the following statements:

32 d) I have received adequate training to work safely with people potentially infected  
33 with COVID-19

- 34  Totally agree  
35  Somewhat agree  
36  Neutral  
37  Somewhat disagree  
38  Totally disagree  
39  Prefer not to answer  
40  
41  
42  
43  
44

45 e) I feel well supported by my workplace management/supervisor

- 46  Totally agree  
47  Somewhat agree  
48  Neutral  
49  Somewhat disagree  
50  Totally disagree  
51  Prefer not to answer  
52  
53  
54

55 f) I feel like I would be well supported if I was exposed to COVID-19 at work

- 56  Totally agree  
57  Somewhat agree  
58  Neutral  
59  
60

Somewhat disagree

Totally disagree

Prefer not to answer

g) I feel like I would be well supported if I become infected with COVID-19

Totally agree

Somewhat agree

Neutral

Somewhat disagree

Totally disagree

Prefer not to answer

9.13 How acceptable do you think it is to require quarantine workers to test frequently for COVID-19 ?

Totally unacceptable

Somewhat unacceptable

Neutral

Somewhat acceptable

Highly acceptable

Prefer not to answer

The next two questions ask about your knowledge of the **current** measures to prevent the spread of COVID-19 (coronavirus) where you live

9.14 How many visitors (excluding their dependents) are you currently allowed to have to your home? Do not count *visitors that are excluded by current government exemptions, e.g. intimate partner, carer*

None

1

Up to 2

Up to 3

Up to 5

Up to 10

Up to 15

Up to 20

Up to 30

Up to 50

Up to 100

Unlimited

Don't know

9.15 How many people are currently allowed to gather in outdoor spaces for social gatherings?

No social gatherings allowed

- 1  
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3  
4  
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6  
7  
8  
9  
10  
11  
12  
13  
14  
15  
16  
17
- Up to 2
  - Up to 3
  - Up to 5
  - Up to 10
  - Up to 20
  - Up to 50
  - Up to 100
  - Up to 200
  - Unlimited
  - Don't know

18 9.16 Are the following activities currently allowed where you live?

	Not allowed	Allowed <u>with</u> restrictions	Allowed <u>without</u> restrictions	Don't know
Dining indoors at café/restaurant/pub	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Community sports played outdoors	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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The next set of questions asks about your acceptance of actual, planned, or theoretical actions that the Australian government has taken to control the COVID-19 pandemic.

35  
36  
37  
38  
39  
40

9.17 How acceptable do you think the following Government actions are given the current COVID-19 pandemic in Australia?

	Totally unacceptable	Somewhat unacceptable	Neutral	Somewhat acceptable	Highly acceptable
Cancelling public events of over 100 people (e.g. sports, concert, festival)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Closing bars, cafes and restaurants except for take-away/delivery service	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Remote learning for school children of non-essential workers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Limiting the number of people who can attend a	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

wedding or funeral					
Requiring people to stay at home except for essential work, shopping for essential supplies, medical reasons, or exercise	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Requiring individuals returning from overseas to quarantine in hotels for 14 days	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Requiring COVID-19 testing before allowing individuals to go back to work	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Requiring everyone to wear a face mask in public	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Fining people who break the rules around government restrictions aimed at preventing COVID-19 transmission e.g physical distancing/"Stay at Home" orders/ "COVIDSafe Summer" restrictions	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Restricting travel between states/territories	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Requiring a permit to travel between States					
Closing borders with limited travel to and from other countries	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Temporarily closing down workplaces deemed non-essential (in-person retail, manufacturing, administration)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Hard lockdown of public housing residents	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Curfew across Melbourne	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Exercise limited to certain number of hours per day within a five-kilometre radius of your home	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
A mandatory COVID-19 vaccine for certain high-risk groups, such as healthcare workers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Restricting the number of visitors allowed to hospitals / care facilities					
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9.18 How much do you agree or disagree with the following statements?

h) I have confidence in the **Victorian** Government's approach for dealing with COVID-19

- Strongly disagree
- Disagree
- Neither agree nor disagree
- Agree
- Strongly agree

i) I have confidence in the **Australian** Government's approach for dealing with COVID-19

- Strongly disagree
- Disagree
- Neither agree nor disagree
- Agree
- Strongly agree

9.19 What are your top 3 biggest concerns about the current or potential effects of the COVID-19 (coronavirus) pandemic at the moment? *Select up to 3 concerns. You can specify your own concern if it is not listed below.*

- Being infected with COVID-19
- Friends or family being infected with COVID-19
- Infections and death from COVID-19 across the community
- Your mental/emotional health
- Friends' or family's mental health and wellbeing
- Schools closing for a long time
- Regular health services not being available
- Your personal financial situation
- The impacts on jobs and unemployment
- Economic recession
- Your living situation
- Getting access to essential products or services
- Fulfilling work or study requirements
- The quality of your relationships (family, friends, romantic or sexual)
- Your physical fitness
- Your personal safety
- Other, specify \_\_\_\_\_
- I have no concerns about COVID-19

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3  
4  
5 9.20 Anything else that you would like to say about your experience with COVID-19 that we  
6 haven't covered today?  
7  
8  
9

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10  
11 **For up to date information on COVID-19 please see the [Department of Health website](#)**  
12 **and/or download the official government "Coronavirus Australia" app. Information is also**  
13 **available in [languages other than English](#).**

14  
15  
16 **For specific information about vaccines for COVID-19, please see the Department of Health**  
17 **COVID-19 vaccination website <https://www.coronavirus.vic.gov.au/vaccine>.**

18  
19  
20 **If you are worried that you are someone in your family may have COVID-19, call the 24/7**  
21 **hotline on 1800 675 398. You can find out about [symptoms](#) and [where to get tested](#)**  
22 **through the DHHS.**

23  
24  
25 **For emotional support, [Beyond Blue](#) (1800 512 348) and [Lifeline](#) (13 11 14) offer tips, brief**  
26 **counselling and referrals. If you are struggling to cope, you can reach out to a counsellor**  
27 **at the [Suicide Call Back Service](#) on 1300 659 467.**

28  
29  
30 **For help and support for domestic or family violence and abuse, contact [1800RESPECT](#) on**  
31 **1800 373 732, [Safe Steps](#) on 1800 015 188 or [inTouch Multicultural Centre against Family](#)**  
32 **[Violence](#) on 1800 755 988.**

33  
34  
35 **If you are experiencing financial hardship during the COVID-19 pandemic, you can apply**  
36 **for [financial assistance](#). You can also visit the [WIRE](#) website or the [Salvation Army](#) to find**  
37 **out about financial resources which may be useful to you.**  
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## Optimise Daily Diary (14 consecutive days)

### Supplementary file 3 – E - Baseline prospective daily diaries

Please complete the following sections based on your feelings and activities **YESTERDAY, {yesterday}**

#### Mood

- How often did you experience **negative** emotions {yesterday}? (e.g. Unpleasant, sad, angry, upset, bored, disappointed, nervous, annoyed):  
 Never  Rarely  Sometimes  Often  All day
- How often did you experience **positive** emotions {yesterday}? (e.g. happy, content, cheerful, excited, calm, serene, ecstatic):  
 Never  Rarely  Sometimes  Often  All day

#### Health

- {yesterday}, Did you experience any of the following symptoms:

Symptom	No	Mild	Moderate	Severe
Cough	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fever	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Shortness of breath	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sore throat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fatigue	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Aches and Pains	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Headache	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Runny or stuffed nose	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Loss of taste / smell	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Nausea and/or vomiting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Diarrhoea	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- If experienced symptoms:* Did you seek medical care or professional health advice for yourself {yesterday}?  
 Yes  
 No >> skip to Q6
- If yes, what type? Select all that apply  
 Went to GP  
 Teleconsult with GP  
 Pharmacist  
 Aboriginal and Torres Strait Islander Health Clinic  
 Visited emergency department  
 Hospital inpatient  
 COVID-19 Clinic/Drive-Through  
 Telephoned coronavirus (COVID-19) hotline  
 Other, *please specify* \_\_\_\_\_
- Did you have a test for coronavirus (i.e. COVID-19) {yesterday}? (*Please select the option that best applies*)  
 Yes  
 No >> skip to Q8
- If tested:* What was your reason for testing for coronavirus (i.e. COVID-19) {yesterday}? *Select all that apply*  
 I had symptoms

## Optimise Daily Diary (14 consecutive days)

- I had close contact with someone with confirmed COVID-19  
 I work in a high-risk setting  
 I recently returned from overseas travel  
 There were cases of COVID-19 in a place I live (suburb, neighbourhood, apartment block)  
 There were cases reported in places I regularly visit, work or study  
 Required before returning to work  
 I had to have a test to clear isolation  
 Community testing blitz (door knocking)  
 I stayed in, or travelled through a COVID-19 hotspot or location with reported COVID-19 cases  
 I was in a place listed as an "orange zone"  
 Other, *specify* \_\_\_\_\_
8. *If tested*: What information were you given when you got a test? *Select all that apply*
- What to do while waiting for a result  
 How to get your results, including a contact number  
 Requirements for self-isolation  
 Cleaning and hygiene practices  
 Requirements for household members and caregivers  
 What to do if your symptoms get worse  
 Information on financial support and emergency relief packages  
 Length of the self-isolation period  
 Other  
 I didn't receive any information
9. Did you receive a result for your COVID-19 test {yesterday}?
- Yes  
 No >> skip to Q13
10. *If received a result*: What was the result?
- Positive  
 Negative  
 Indeterminate
11. *If received a result*: Who notified you about your positive test result? *Select all that apply*
- Testing Centre / Health service  
 Laboratory  
 Government/DHHS Hotline  
 Unsure
12. *If received result*: a) Between when you were tested and when you received your test result, did you leave your living premises for any reason?
- Yes >> go to b  
 No >> skip to Q13
- b) If yes, what reasons did you leave your living premises for? *Select all that apply*
- Medical care  
 Exercise  
 To get essential food  
 To get essential medicine  
 Work  
 To pick up/drop off a household member from work, school, childcare, appointments  
 To visit family, friends or partner  
 To visit someone in hospital  
 Emergency situation  
 Other, *specify* \_\_\_\_\_
13. *If positive*: What is the setting where you were likely exposed to COVID-19?
- Workplace  
 Household  
 Overseas/international travel  
 COVID-19 hotspot or location with reported COVID-19 cases



## Optimise Daily Diary (14 consecutive days)

- Other known setting, *specify* \_\_\_\_\_  
 Unknown setting >> skip to Q 13
- b) What was the **first** date that you were likely exposed to COVID-19? \_\_/\_\_/\_\_
14. Were you notified as a 'close contact' of someone with confirmed COVID-19 {yesterday}?
- Yes  
 No >> skip to Q16  
 Don't know
- b) *If yes:* Who notified you that you were a close contact? *Select all that apply*
- Government/DHHS Hotline  
 Testing Centre / Health service  
 Workplace / Friend / Family member  
 Unsure  
 Other, specify \_\_\_\_\_
15. *If close contact:* What is the setting where you were potentially exposed to COVID-19?
- Workplace  
 Household  
 COVID-19 hotspot or location with reported COVID-19 cases  
 Other known setting, specify \_\_\_\_\_  
 Unknown setting >> skip to Q 16
- b) *If not unknown:* What was the **last** date that you were potentially exposed or in contact with this person while they were infected with COVID-19? \_\_/\_\_/\_\_
- c) *If household:* Are you able to effectively separate from the person(s) with COVID-19 in your household? (e.g. stay in a different room, sleep in a separate bedroom, use a separate bathroom where possible, maintain distance)
- Yes  
 No  
 Don't know

### The following questions ask about self-isolation or quarantine.

Self-isolation or quarantine applies to people who:

- 1) Have been diagnosed with COVID-19;
- 2) Are waiting to receive their COVID-19 test result and have symptoms indicative of potential COVID-19;
- 3) Have been told that they are a primary close contact of someone with confirmed COVID-19;
- 4) Have been told that they are a secondary close contact of someone with confirmed COVID-19, with instruction to self-isolate until their primary close contact tests negative;
- 5) Have returned from a designated "red zone" with instruction to quarantine;
- 6) Have returned from a designated "orange zone" with instruction to self-isolate until receiving a negative test result;
- 7) Have returned from overseas.

These terms are different to the general "Stay at Home" or "Stage 3 or 4 restriction" measures which are sometimes referred to as "iso" or "lockdown".

16. Were you in isolation/quarantine {yesterday}? *See definition above*
- Yes  
 No – I was never in isolation/quarantine >>skip to Q19  
 No – I was released from isolation/quarantine by the DHHS (by SMS/phone call/door knock)  
 No – I stopped isolation/quarantine on my own  
 Don't know
- b. If yes, where were you self-isolating {yesterday}?
- At home  
 Hotel  
 Other premises
17. Did someone from the government/DHHS, health service or a community service contact you {yesterday} by any means (i.e. phone, SMS, door knock)?
- Yes  
 No >>skip to Q20
18. If yes, do you know who contacted you? *Select all that apply*

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- DHHS/government
- Health service (e.g. hospital)
- Community service
- Other
- Don't know

19. How were you contacted? *Select all that apply*

- Phone call
- SMS
- Door knock

20. What was the contact in regards to? *Select all that apply*

- COVID-19 test results
- Your health
- Isolation / quarantine
- To notify you that you are a close contact of someone with COVID-19
- Contact tracing – to discuss who you were in close contact with while you were infectious
- To discuss access to essential needs (e.g. food, medicine)
- Related to the health or tests results of your child
- Other, *specify* \_\_\_\_\_

### Contacts

**We would like you to know about every person that you have contact with {yesterday}.**

**A contact** is defined as someone you either:

- Had a face-to-face conversation with, OR
- Shared a closed space with (e.g. room, car, bus, lift, train carriage), OR
- Had physical contact with (e.g. handshake, hug, kiss, contact sport).

Consider people you live with, people who visited your home, and people you were in contact with when you left home. Don't forget about the times you used public or shared transport.

**Do not include people that you exclusively contacted by phone/video call.**

21. Did you have contact with anyone {yesterday}?

- Yes
- No >> end of survey

22. Were any of these contacts someone you know by name or someone who you will regularly see again?

- Yes
- No >> skip to Q24

23. Please type in the **full name(s)** (First name Last name, if know. Else, nickname) of **every person** you had contact with yesterday (from 5am {yesterday} until 5am today):

- If you had contact with the same person several times during the assigned day, only record them once, and record the total time you spent with them over the day. Each person you have contact with during the day should have only one line in the diary.
  - List people who you know or are familiar with by First Name and Last Name.
  - Type in the contacts full name, if you know it, in the first box and press "enter" or select the create button.
  - To select previous contacts or your key people, click on the blue box on the right of the text box and search or click on their name in the list.
  - We will then ask a few questions about these contacts in the boxes below.
  - If you don't know their age, then please estimate
  - If you were in contact with people and you only know their first name or don't know by name but will likely regularly see again, list them using a memorable nickname (e.g. Bob the barista). This will make it easier to list them again in future diaries.
- You don't need to list all contacts you had if:

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- They are too numerous to list or you don't know them by name (e.g., if you work at a supermarket with many customers)
  - You are a health care worker referring to contact with patients
- You will be asked to summarise these contacts at the end.

For peer review only

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	Full Name (First Name Last Name, if known. Else, nickname )	Age range (years )	Gender	Relationship to you <i>Select one</i>	What was the purpose or circumstances of the contact? <i>Select all that apply</i>	In what setting did you have contact? <i>Select all that apply</i>	How many <b>other people</b> were at this location at the same time as you, <b>excluding</b> you and members of your household? <i>If you had contact with this person at more than one location, answer for the most crowded location you shared with this person yesterday</i>	Did you have contact indoors or outdoors? <i>Select all that apply</i>	How long did you spend with this person <b>in total</b> ?	How much time did you spend within <b>close</b> contact of this person (within 1.5 metres of each other or within a closed space?)	Did you have any physical contact?
1	_____	<5 5-9 10-14 15-19 20-29 30-39 40-49 50-59 60-69 70-79 80+	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Non-binary <input type="checkbox"/> Unknown	<input type="checkbox"/> Partner (incl. spouse, boy/girlfriend) <input type="checkbox"/> Parent <input type="checkbox"/> Child <input type="checkbox"/> Grandparent <input type="checkbox"/> Grandchild <input type="checkbox"/> Sibling <input type="checkbox"/> Other family member <input type="checkbox"/> Friend <input type="checkbox"/> Work colleague <input type="checkbox"/> Client/patient <input type="checkbox"/> Classmate <input type="checkbox"/> Carer <input type="checkbox"/> Healthcare provider <input type="checkbox"/> Partner/family of someone I live with <input type="checkbox"/> Other	<input type="checkbox"/> Live together <input type="checkbox"/> Providing care <input type="checkbox"/> Receiving care <input type="checkbox"/> Buying/receiving food <input type="checkbox"/> Buying/receiving medical supplies <input type="checkbox"/> Non-essential shopping <input type="checkbox"/> Medical <input type="checkbox"/> Work <input type="checkbox"/> Study/education <input type="checkbox"/> Social <input type="checkbox"/> Sport/exercise <input type="checkbox"/> Worship/religious <input type="checkbox"/> Other, <i>specify</i> _____	<input type="checkbox"/> Home <input type="checkbox"/> Other private residence <input type="checkbox"/> School/university <input type="checkbox"/> Childcare <input type="checkbox"/> Transport <input type="checkbox"/> Health service <input type="checkbox"/> Shop / retail <input type="checkbox"/> Restaurant / café <input type="checkbox"/> Bar / nightclub <input type="checkbox"/> Indoor sports / recreational facility (e.g. gym) <input type="checkbox"/> Entertainment facility (e.g. cinema, music/arts venue) <input type="checkbox"/> Public space (e.g. park, beach, sports field) <input type="checkbox"/> Place of worship <input type="checkbox"/> Workplace not otherwise listed (e.g. office, factory)	<input type="checkbox"/> None <input type="checkbox"/> 1-2 <input type="checkbox"/> 3-5 <input type="checkbox"/> 6-10 <input type="checkbox"/> 11-20 <input type="checkbox"/> 21-100 <input type="checkbox"/> More than 100	<input type="checkbox"/> Indoor <input type="checkbox"/> Outdoor	<input type="checkbox"/> Less than 5 minutes <input type="checkbox"/> 5 to 14 minutes <input type="checkbox"/> 15 to 60 minutes <input type="checkbox"/> 1 to 2 hours <input type="checkbox"/> 2 to 8 hours <input type="checkbox"/> More than 8 hours	<input type="checkbox"/> Less than 5 minutes <input type="checkbox"/> 5 to 14 minutes <input type="checkbox"/> 15 to 60 minutes <input type="checkbox"/> 1 to 2 hours <input type="checkbox"/> 2 to 8 hours <input type="checkbox"/> More than 8 hours	<input type="checkbox"/> Yes <input type="checkbox"/> No

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						<input type="checkbox"/> Other, <i>specify</i>						
--	--	--	--	--	--	--	--	--	--	--	--	--

For peer review only

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[add contact] [complete contact diary]

The following questions ask about contacts you were unable to list from yesterday because you had contact with a large number of people or people you don't know by name.

24. Have you included all contacts you had yesterday?

- Yes >> End of survey
- No

25. If, no, what was the setting of these additional contacts?

- Home, estimated number: \_\_ \_\_
- Other private residence, estimated number: \_\_ \_\_
- School/university, estimated number: \_\_ \_\_
- Childcare, estimated number: \_\_ \_\_
- Transport, estimated number: \_\_ \_\_
- Health service, estimated number: \_\_ \_\_
- Shop / retail, estimated number: \_\_ \_\_
- Restaurant / café, estimated number: \_\_ \_\_
- Bar / nightclub, estimated number: \_\_ \_\_
- Indoor sports / recreational facility (e.g. gym) , estimated number: \_\_ \_\_
- Entertainment facility (e.g. cinema, music/arts venue) , estimated number: \_\_ \_\_
- Public space (e.g. park, beach, sports field) , estimated number: \_\_ \_\_
- Place of worship, estimated number: \_\_ \_\_
- Workplace not otherwise listed (e.g. office, factory) , estimated number: \_\_ \_\_
- Other, *specify* \_\_\_\_\_, estimated number: \_\_ \_\_

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### Supplementary file 3 – F - Follow up surveys

# FOLLOW UP QUESTIONNAIRE

## Pre-questions

1. Date of entry
2. Who is filling out this survey?
  - Participant
  - Researcher >> Namecode \_\_ \_\_

### 1 Living situation

- 1.1 Has your living situation changed in the past 4 weeks? This includes where you live and who you live with
- Yes
  - No >> skip to Work, Study & Responsibilities

If yes:

a) What is your current postcode? \_\_ \_\_ \_\_ \_\_ Write 9999 if you don't wish to say

b) Was the reason you changed living situation due to COVID and the measures to prevent its spread?

- Yes >> go to c
- No >> go to d

c) Why has your living situation changed? *Select all that apply*

- Could no longer afford previous rent
  - Temporarily moved for self-isolation/quarantine
  - Moved to be with partner/family/friends
  - Moved to be away from vulnerable house members
  - Moved due to concern for safety at usual residence
  - Other people have moved out due to COVID-19
  - Children or family have moved back in due to COVID-19
  - Other people have moved in due to COVID-19
  - Returned to my usual residence
  - Other, *specify* \_\_\_\_\_
- d) What type of accommodation do you currently live in?
- House/townhouse
  - Flat/unit/apartment
  - Caravan/cabin/boat/motor home
  - Student accommodation or workers' quarters
  - Room in a hostel or boarding house
  - Hotel / motel
  - Residential home or institution (e.g. aged residential care)
  - Temporary accommodation (refuge, crisis or support accommodation) >> skip to Q 1.2
  - No dwelling/ improvised dwelling / motor vehicle / tent >> skip to Q 1.2
  - Other, *please specify*: \_\_\_\_\_

e) Is the place where you currently live...?

- Owned outright / with a mortgage (by you or your partner)
- Rented (including paying board/fees)
- Public or community housing
- Rent free – living with a relative or someone else (including couchsurfing)
- Other, *please specify*: \_\_\_\_\_

We are now going to ask you about people currently living in your household\*.

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\* This includes people who regularly sleep at the household, **at least once a week**. If you have more than one household where you regularly sleep, consider your MAIN household.

1.2 How many adults (18 years and older), including yourself, currently live in your household \_\_\_ \_\_

1.3 How many children (under 18 years old) currently live in your household? \_\_\_ \_\_

1.4 Does your current household have internet access? (This includes fixed or mobile broadband services such as ADSL, Cable, Wireless and Satellite connections. Don't consider mobile phone data)

- Yes  
 No  
 Don't know

### 2 Work, study & responsibilities

**We are interested in changes to your work or income in the past 4 weeks**

2.1 What sources of income do you currently have? *Select all that apply*

- Work/salary >> generates logic for currently working  
 Government allowance (e.g. Centrelink payment, Age pension)  
 Parents or other family  
 Partner  
 Scholarship for school/university  
 Rental income  
 Other investments  
 Monetary support from a charity or community-organisation  
 Other, *specify* \_\_\_\_\_  
 No income >> skip to Q 2.6  
 Prefer not to say

2.2 a) Have you received any **new** financial support, Centrelink, rent or mortgage support in the past 4 weeks?

- Yes >> go to b  
 No  
 Don't know

b) *If yes*, Which new payments or support have you received in the past 4 weeks? *Select all that apply*

- Centrelink payments  
 Rental reductions  
 Paused or deferred mortgage payments (excluding if banks have done this automatically)  
 JobKeeper payments to me or my employer  
 Early access to Superannuation  
 Other, *specify* \_\_\_\_\_  
 Prefer not to say

2.3 Has your work situation or income changed in the past 4 weeks? Consider change in personal or household income, loss of job, change in hours worked and/or change of job.

- Yes >> go to Q 2.4  
 No >> skip to Q 2.15 if paid work previously, else 2.16

2.4 Which of the following events have you personally experienced in the past 4 weeks?

	Yes	No
a) Change of personal/household income	<input type="radio"/>	<input type="radio"/>
b) Loss of job	<input type="radio"/>	<input type="radio"/>
c) Change in hours worked	<input type="radio"/>	<input type="radio"/>
d) Started a new job	<input type="radio"/>	<input type="radio"/>



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b) Was this change(s) due to COVID-19?

- Yes  
 No  
 Prefer not to say

2.5 **If 2.3= yes:** Before income tax and other deductions are taken out, how much **combined income** does your **household** currently earn per week? Please include all income sources (including wages, investments and government pensions and benefits). If you live in a shared or group house please just mark your own income

- \$200,000 or more per year (\$3,840 or more per week)  
 \$150,000 - \$199,999 per year (\$2,880 - \$3,839 per week)  
 \$125,000 - \$149,999 per year (\$2,400 - \$2,879 per week)  
 \$100,000 - \$124,999 per year (\$1,920 - \$2,399 per week)  
 \$80,000 - \$99,999 per year (\$1,530 - \$1,919 per week)  
 \$60,000 - \$79,999 per year (\$1,150 - \$1,529 per week)  
 \$50,000 - \$59,999 per year (\$960 - \$1,149 per week)  
 \$40,000 - \$49,999 per year (\$770 - \$959 per week)  
 \$30,000 - \$39,999 per year (\$580 - \$769 per week)  
 \$20,000 - \$29,999 per year (\$380 - \$579 per week)  
 \$10,000 - \$19,999 per year (\$190 - \$379 per week)  
 \$1 - \$9,999 per year (\$1 - \$189 per week)  
 No income  
 Don't know  
 Prefer not to say

2.6 **If 2.3= yes:** a) What is your current employment status? Select the best response

- Full time  
 Part time  
 Casual  
 Self-employed  
 Not currently employed and looking for work  
 Not currently employed and not currently looking for work  
 Full time carer/home responsibilities  
 Retired  
 Other, *specify* \_\_\_\_\_

2.7 **If 2.3= yes & currently employed:** Considering a typical week, approximately how many hours of **paid work** do you currently work? \_\_\_\_\_

2.8 **If (2.4d)=yes:** What is your **main** occupation currently? Please choose the one option that best describes your main job.

- Managers  
 Professionals  
 Technician and Trade Workers  
 Community and Personal Service Workers  
 Clerical and Administrative Workers  
 Sales Workers  
 Machinery Operators and Drivers  
 Labourers  
 Don't Know

2.9 **If (2.4d)=yes:** What industry do you work in for your main job? *Select one only*

- Agriculture, forestry and fishing  
 Mining

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- Manufacturing
- Electricity, gas, water and waste services
- Construction
- Wholesale trade
- Retail trade
- Accommodation and food services (including hospitality)
- Transport, postal and warehousing
- Information media and telecommunications
- Financial and insurance services
- Rental, hiring and real estate services
- Professional, scientific and technical services
- Administrative and support services
- Public administration and safety
- Education and training
- Health care and social assistance (includes aged care)
- Arts and recreation services
- Other, *specify* \_\_\_\_\_
- Don't know

2.10 *If (2.4d)=yes:* What is the title of your **current** job (select your **main** job)? \_\_\_\_\_

2.11 *If (2.4d)=yes:* How many people do you directly supervise or manage at work in your **current** position(s)?  
 \_\_\_ \_\_\_ *If none, write "0".*

2.12 *If currently working:* What is your **current** work environment? Select one

- Attend a single workplace/location
- Attend multiple workplaces/locations
- Work from home
- Both attend workplace(s) and work from home
- Other, *please describe* \_\_\_\_\_

2.13 *(for everyone currently working, if not only working from home):* What is the postcode of your main workplace?

- Enter postcode: \_\_\_ \_\_\_ \_\_\_
- No fixed postcode
- Don't know
- Other, *please describe* \_\_\_\_\_

2.14 Did any of the following happen to you or your household because of a **shortage of money in the past 4 weeks**? *If you live in a shared or group house please consider your personal circumstances only. \* Not required*

	Yes	No
Could not pay electricity, gas or telephone bills on time	<input type="radio"/>	<input type="radio"/>
Could not pay for car registration or insurance on time	<input type="radio"/>	<input type="radio"/>
Pawned or sold something	<input type="radio"/>	<input type="radio"/>
Went without meals	<input type="radio"/>	<input type="radio"/>
Unable to heat your home	<input type="radio"/>	<input type="radio"/>
Sought assistance from welfare / community organisations	<input type="radio"/>	<input type="radio"/>
Sought financial help from friends or family	<input type="radio"/>	<input type="radio"/>

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Other financial hardships	○ Specify _____	○
---------------------------	--------------------	---

### Impacts of COVID-19 on your work performance

*If report income from work in past 4 weeks*

2.15 Have you experienced any of the following changes to your work in the past 4 weeks as a result of COVID-19 and the measures taken to prevent infection?

	Yes	No	
a. My work tasks or role have changed	<input type="checkbox"/>	<input type="checkbox"/>	
	Decreased	Stayed the same	Increased
b. Workload	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Work productivity / accomplishments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Ability to concentrate on work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Working outside of usual hours (compared to early 2020, e.g. February)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2.16 ((If a=yes | if (b|c|d|e != stayed the same))) Which factor(s) contributed most to these changes to your work performance? Select up to three

- Childcare responsibilities
- Schooling children from home
- Care of others
- Physical health
- Emotional health (e.g. anxiety)
- Unsuitable environment for working (e.g. privacy, comfort, equipment, internet connection)
- Return to usual workplace
- Reduced commuting time
- Increased commuting time
- Workplace closed temporarily
- Working on COVID response (healthcare, aged care sector)
- Stressful work environment
- Other, *specify* \_\_\_\_\_

### Let's talk about your study and education now

2.17 a) Have your study circumstances changed in the past 4 weeks?

- Yes
- No >> skip to 2.18

b) What are your study circumstances now?

- Still going to school/university/class

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- Still studying, by distance/online
- On hold
- Withdrawn/dropped out
- Resumed studying, by distance/online
- Resumed going to school/university/class
- Completed study (including awaiting graduation)
- Newly enrolled in study >> [go to c](#)
- Other, *specify* \_\_\_\_\_
- Don't know
- Prefer not to say

c) *If newly enrolled*: At what level are you enrolled to study?

- High school
- TAFE, college or diploma
- University – undergraduate course (e.g. Bachelor degree)
- University – postgraduate course (e.g. Masters, Doctorate)

### Let's talk about your other non-paid care responsibilities in the past 4 weeks

2.18 a) Were you responsible for unpaid care of children OR providing unpaid care to another person due to the disability, long term illness or old age in the past 4 weeks?

- Yes >> Average hours per week: \_\_\_
- No >> skip to 2.19 (if have children), else 3.1
- Don't know >> skip to 2.19 (if have children), else 3.1

a) What is your relationship to the person(s) in your care? *Select all that apply*

1.1.a..1 My child(ren) or dependant(s)

- Grandchild(ren)
- Child(ren) not related
- Parent(s)
- Grandparent(s)
- Other family member(s)
- Someone other than a family member
- Other

### The next few questions ask about the childcare and schooling requirements for your children/dependants in the past 4 weeks

2.19 a) *If report living with children*: Have your childcare arrangements changed during the past 4 weeks?

- Yes >> go to b
- No >> go to 2.20
- Don't know >> [go to b](#)
- Not applicable >> [go to 2.20](#)

a) *If yes*: Which childcare services do you currently use? *Select all that apply*

- Day care >> ave. days per week \_\_\_
- After school care >> ave. days per week \_\_\_
- Informal care (e.g. grandparent, babysitter) >> ave. days per week \_\_\_
- Other, *please specify* \_\_\_\_\_ >> ave. days per week \_\_\_
- Do not currently use childcare services

2.20 Have the schooling arrangements for your child(ren) or dependant(s) changed in the past 4 weeks?

- Yes >> go to b
- No >> skip to section 4
- Not applicable >> skip to section 4
- Don't know >> [go to b](#)

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b) What is the current schooling arrangement for your child(ren) or dependant(s)?

Select all that apply

- Attending school
- Remote learning online
- Being home schooled
- Other, please specify \_\_\_\_\_

### 3 Lifestyle, social engagement and support

3.1 Please estimate how many **days per week** you spent doing the following things during the past week:

Consumed any alcohol	[0-7, prefer not to say] —
<i>(If any)</i> Consumed six or more alcohol drinks in a single day	[0-7, prefer not to say] —
Smoked cigarettes or other tobacco	[0-7, prefer not to say] —
Used recreational drugs (including illicit drugs and pharmaceuticals)	[0-7, prefer not to say] —
Exercised for 30 minutes or more	[0-7, prefer not to say] —
Used online gambling or betting	[0-7, prefer not to say] —

3.2 Over the past 4 weeks, have often did you:

	Never	Once or twice	Weekly	Daily or almost daily
...Do voluntary work with a community organisation?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...Visit friends locally?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...Speak to your neighbours?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...Mind a friend's or neighbour's child?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...Take part in a sporting, social or religious group or club? <i>(Include virtual/online participation)</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...Go out to a local café, restaurant, pub or show?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
... Go to a public meeting or signed a petition?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
... Attend indoor movie theatres, concert venues, stadiums, galleries, or museums	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
... Attend an indoor gym / sports and recreation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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facility				
... Use public transport (i.e. train, bus, tram)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
... Travel within Australia (>100km from your place of residence)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

If yes to sporting, social or religious group or club?: a) How many sporting, social or religious groups or clubs were you involved in during the **past 4 weeks**? Consider both in-person and virtual (online) involvement \_\_\_\_

[Repeat for number of groups/clubs selected]

	Group 1	Group 2	Group 3	Group 4
b) Name of group/club				
c) Where is the group/club primarily located? Write down the suburb, if known. If online/virtual contact only, write "online"				
d) How often did you take part in the group in the <b>past 4 weeks</b> ?	Once or twice Weekly Daily or almost daily			

4 Key people

4.1 You have previously nominated the key people in your life\*. How frequently have you had contact with your key people in the **past 4 weeks**?

Name [prepopulate list of ties]	How much <b>face-to-face</b> contact have you had with this person over <b>past 4 weeks</b> ?	How much <b>digital</b> contact have you had with this person over the <b>past 4 weeks</b> ?
Key people 1 name	<input type="checkbox"/> Daily / Most days <input type="checkbox"/> Few times a week <input type="checkbox"/> Once a week <input type="checkbox"/> Once or twice <input type="checkbox"/> None	<input type="checkbox"/> Daily / Most days <input type="checkbox"/> Few times a week <input type="checkbox"/> Once a week <input type="checkbox"/> Once or twice <input type="checkbox"/> None

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Key people 2 name	<input type="checkbox"/> Daily / Most days	<input type="checkbox"/> Daily / Most days
	<input type="checkbox"/> Few times a week	<input type="checkbox"/> Few times a week
	<input type="checkbox"/> Once a week	<input type="checkbox"/> Once a week
	<input type="checkbox"/> Once or twice	<input type="checkbox"/> Once or twice
	<input type="checkbox"/> None	<input type="checkbox"/> None

\* It is important for the study to ask about the key people you nominated at the beginning of the study, even if you don't have contact with them anymore. However, sometimes things happen and our important personal relationships with others change. If having a particular contact on your list is causing distress please contact your Optimise Project representative or email [optimise@burnet.edu.au](mailto:optimise@burnet.edu.au) and we will amend this list for you.

The key people in your life may be family, friends, partner, housemates, neighbours, co-workers or others who are a part of your life on a daily or weekly basis:

- "With whom do you discuss important personal matters?" (e.g., personal problems, other matters) OR
- "Who provides you with important practical assistance or support?" OR
- "Who are important co-workers (i.e., colleagues, superiors, junior staff) that you frequently deal with for your work?" If you are a student, you can also consider your classmates and or supervisors/lecturers/tutors that you frequently deal with for your study OR
- "Thinking of important activities in your life (e.g., hobbies, sport, leisure, religious gatherings, visiting older relatives), who are the key people you frequently deal with personally when undertaking these activities? They may help you get the activity done or be a person you share the activity with."
- Is there anyone else you live with who has not been listed as a key person in other categories?

4.2 Do you have any new key people to add?

- Yes, how many? \_\_ \_\_
- No

4.3 Please provide the details of your new key people

Full Name	Relationship to you Select one	Do you live in the same household with this person?	Age	Gender	Suburb (if outside of Australia, select other)	How much face-to-face contact have you had with this person over the past 4 weeks	How much digital contact have you had with this person over the past 4 weeks?
	a. Family b. Friend c. Partner d. Co-worker e. Other	Yes No	<5 5-9 10-14 15-19 20-29 30-39 40-	a. Man b. Woman c. Non-binary/not listed d. Unknown		a. Daily / Most days b. Few times a week c. Once a week d. Once or twice e. None	a. Daily / Most days b. Few times a week c. Once a week d. Once or twice

Optimise Daily Diary (14 consecutive days)

			49				e. None
			50-				
			59				
			60-				
			69				
			70-				
			79				
			80+				

Name	Thinking about this person, please select which category suits their role in your life, <i>Select all that apply</i>				
	Discuss important personal matters (e.g. personal problems, other matters)	Provides you with practical assistance or support	Is an important co-worker (i.e. colleague, supervisor, junior staff) that you frequently deal with for your work	Someone you frequently deal with when undertaking activities (e.g. hobbies, sport, leisure, religious gatherings, visiting older relatives), They may help you get the activity done or be a person you share the activity with.	Someone who you live with who hasn't been listed in the above categories.
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Full Name	Are you happy for us to contact this participant about participating in this study?	Please enter a contact number
	Yes No Require more information	+61_____

5 COVID-19 health and exposure

These questions refer to the past four weeks

Pop up information box:

Click here to see the Victorian Government’s latest guidelines on COVID-19 symptoms to watch out for: <https://www.coronavirus.vic.gov.au/symptoms-and-risks>

Click here to see the Victorian Government’s latest guidelines on isolation for people who tested positive to COVID-19 and their household and household-like contacts [www.coronavirus.vic.gov.au/checklist](http://www.coronavirus.vic.gov.au/checklist)



## Optimise Daily Diary (14 consecutive days)

5.1. How many times have you been infected with confirmed COVID-19 since the start of the pandemic (December 2019)?

Infection is defined by at least one positive PCR test or positive RAT

[Please enter a number between 0 – 10]

5.2. Have you been tested for COVID-19/coronavirus infection in the past four weeks? *Please include Rapid Antigen Tests (RATs), PCR tests, and/or any other kind of COVID-19 test*

Yes >> date of most recent test \_\_/\_\_/\_\_

No >>[skip to Q5.17](#)

5.3. *If tested*: What type of test/s did you undertake in the past four weeks? *Select all that apply*

Rapid Antigen Test (RAT)

PCR test

Other, please specify \_\_\_\_\_

5.4. *If tested*: How many times did you test negative on a COVID-19 PCR test in the past four weeks?

[Enter number from 0 to 50]

5.5. *If tested*: How many times did you test negative on a Rapid Antigen Tests/s (RAT) in the past four weeks

[Enter number from 0 to 50]

5.6. *If tested*: How many times did you test negative on other COVID-19 tests in the past four weeks? [Enter number from 0 to 50]

5.7. *If tested*: Why were you last tested for COVID-19? *Select all that apply*

I had COVID-19-like symptoms

I had household or household-like contact\* with someone who tested positive to COVID-19

I work in a high-risk setting

Had recently returned from overseas travel

There were cases reported in places I regularly visit, work or study

Required before returning to work

Community testing blitz

I routinely test as part of my work

I had to test to attend a healthcare appointment or similar

I had to test as a requirement for interstate travel or overseas travel

I had to test as a requirement for returning from interstate or overseas travel

Testing before going to see someone who is vulnerable to COVID-19 (e.g., elderly, immunocompromised people)

Testing before going to a large gathering

I did test/s for my own peace of mind (that is, none of the reasons above)

Other, *specify* \_\_\_\_\_

5.8. *If tested*: What information were you given when you got a test? *Select all that apply*

How to perform a Rapid Antigen Test (RAT)

How to report a positive Rapid Antigen Test (RAT) result

What to do while waiting for a PCR result

How to get your PCR result, including a contact number

Requirements for self-isolation

Cleaning and hygiene practices

When to leave isolation

How to notify household and/or household like contacts

Testing and/or isolation requirements for household and/or household like contacts

Information on whether I should get confirmatory PCR

Information on repeating Rapid Antigen Tests

## Optimise Daily Diary (14 consecutive days)

- What to do if your symptoms get worse
- Information on financial support and emergency relief packages
- Length of the self-isolation period
- Other, *specify* \_\_\_\_\_
- I didn't receive any information

5.9. *If tested*: Have you tested positive for COVID-19 in the past four weeks?

- Yes >> Trigger manual assign diary
- No
- Indeterminate
- Haven't received a result yet

c) *If Yes to testing positive*: Did you test positive on a PCR test in the past 4 weeks?

- Yes
- No
- Prefer not to say

d) *If Yes to testing positive*: Did you test positive on a Rapid Antigen Test (RAT) in the past 4 weeks?

- Yes
- No
- Prefer not to say

e) *If Yes to testing positive*: Did you test positive on other CoVID-19 Test/s in the past 4 weeks?

- Yes
- No
- Prefer not to say

5.10. *If tested and tested positive on RAT*: Did you report your positive Rapid Antigen Test (RAT) to the state/territory Government?

- Yes
- No
- Prefer not to say

5.11. *If received a positive result*: When did you receive your positive COVID-19 test result? \_\_/\_\_/\_\_  
If you have tested positive multiple times in the past 4 weeks, select the date of the first positive test result.

5.12. *If tested and received result*: Between when you were tested and when you received your test result, did you leave your living premises for any reason?

- Yes >> go to Q5.14
- No >> skip to Q5.15 if positive/else Q5.17

5.13. *If tested and has not received result*: Between when you were tested and now, have you left your living premises for any reason?

- Yes >> go to Q5.14
- No >> skip to Q5.15 if positive/else Q5.17

5.14. *If left home (Q 5.12 and 5.13)*: If yes, what reasons did you leave your living premises for? *Select all that apply*

- Medical care
- Exercise
- To get essential food
- To get essential medicine
- Work
- To pick up/drop off a household member from work, school, childcare, appointments

## Optimise Daily Diary (14 consecutive days)

- To visit family, friends or partner
- To visit someone in hospital
- Emergency situation
- Other, specify \_\_\_\_\_

5.15. *If tested positive:* Were you contacted by someone on behalf of the Government/DHHS for the purpose of contact tracing, i.e., to discuss who you had close contact with while infectious?

- Yes
- No >> skip to Q5.16

f) *If yes:* When did you receive the contact tracing \_\_ / \_\_ / \_\_

5.16. *If tested positive:* What is the setting where you were likely exposed to COVID-19?

- Workplace
- Household (my own)
- Household (other than my own)
- Other household-like setting (indoor hospitality venue)
- Overseas/international travel
- Other known setting, *specify* \_\_\_\_\_
- Unknown setting >> skip to Q17

b) *If not unknown:* What was the **first** date that you were likely exposed to COVID-19? \_\_ / \_\_ / \_\_

5.17. **Have you been notified as household/ household-like contact** of someone with confirmed COVID-19 in the past four weeks?

*Close contact, now called a household or household-like contact has spent more than four hours with someone who tested positive for COVID-19 inside a house, accommodation, or care facility.*

- Yes >> Trigger manual assign diary
- No >> skip to Q5.19
- Don't know >> skip to 5.Q19

5.18. *If Yes:* When were you *first* notified as a **household/ household-like** contact ? \_\_ / \_\_ / \_\_

5.19. Who notified you that you were a **household/ household-like** contact? *Select all that apply*

- Government/DHHS Hotline
- Testing Centre / Health service
- Person with COVID-19 in my household
- Person with COVID that I spent >4hrs with in household-like setting
- Other household member
- Workplace
- Friend/Family member
- Social media
- Unsure
- Other, *specify* \_\_\_\_\_

5.20. *If household/ household-like contact:* What is the setting where you were potentially exposed to COVID-19?

- Workplace
- Household (my own)
- Household (other than my own)
- Other Household-like setting (Indoor hospitality venue)
- Other known setting, *specify* \_\_\_\_\_

## Optimise Daily Diary (14 consecutive days)

- Unknown setting
- b) *If not unknown*: What was the **last** date that you were potentially exposed or in contact with this person while they were infected with COVID-19? \_\_/\_\_/\_\_
- c) *If household (my own)*: Were/are you able to effectively separate from the person(s) with COVID-19 in your household? (e.g., stay in a different room, sleep in a separate bedroom, use a separate bathroom where possible, maintain distance)
- Yes
- No
- Don't know

5.21. Did you have any COVID-19-like symptoms in the past four weeks? *Please select Yes if you have had any COVID-like symptoms, even if you believe these symptoms were not related to a COVID-19 infection.*

- Yes
- No >>skip to Q5.23
- Prefer not to say
- b) *If Yes to symptoms*: Did you first experience these symptoms in the last 4 weeks?
- Yes
- No >>skip to Q5.22
- c) *If symptoms started in past 4 weeks*: When did your symptoms first start? \_\_/\_\_/\_\_  
 \_/ \_\_ [Date Validation: 4 weeks before survey invitation]

5.22. *If Yes to symptoms*: Which symptoms did you experience? *Select all that apply*

- Cough
- Fever
- Shortness of breath
- Sore throat
- Fatigue
- Aches and Pains
- Headache
- Runny or stuffy nose
- Loss of taste/smell
- Nausea and/or vomiting
- Diarrhoea
- Other, *specify* \_\_\_\_\_

5.23. *If Yes to symptoms and No to testing*: What was your reason for not testing for COVID-19 whilst you had COVID-19-like symptoms? *Select all that apply*

- Fear of swab procedure/discomfort
- I didn't want to wait in testing queue
- I left a testing centre because of long que/wait time for PCR testing
- I was turned away from the testing centre
- Testing centre too far away
- Worried about being infected at testing centre
- Time constraints (e.g., work/care responsibilities)
- Did not know where to go to have a test
- Unable to find or access Rapid Antigen Tests (RATs)
- Did not want to pay for Rapid Antigen Tests (RATs)
- Could not afford Rapid Antigen Tests (RATs)
- I was very sure symptoms were not related to COVID-19 (e.g., pre-existing health conditions)
- I was pretty sure symptoms were not related to COVID-19 (e.g., allergies, common cold, side effects of COVID-19 vaccine)

## Optimise Daily Diary (14 consecutive days)

- I was pretty sure symptoms were from tobacco use and not related to COVID-19
- Symptoms were only mild
- Did not think you were eligible for COVID testing
- No private transport to get to testing centre
- Chose to stay home (self-isolate) instead
- Did not want to isolate/quarantine after testing
- Other, *specify* \_\_\_\_\_

5.24. *If Yes symptoms but No to test:* Did you isolate for 7 days because you had symptoms despite not being able to get tested?

- Yes
- No
- I am currently isolating
- Prefer not to say

5.25. *If tested, or if close contact:* Did you apply for any of the following government support packages in the past 4 weeks? Select all that apply

- None of the above
- COVID-19 worker support payment (one-off \$1500 payment to Victorian workers who are self-isolating or quarantining without access to sick leave)
- Pandemic Leave Disaster Payment (one-off payment to Victorian workers who can't earn an income because they must self-isolate or quarantine)
- COVID-19 test isolation payment (one-off payment while waiting for results of COVID-19 test)
- Lockdown hardship payments (\$750) for unemployed public housing residents
- Emergency relief package (Care packages for people who do not have family and friend support and are unable to order groceries online)
- Crisis Payment for National Health Emergency (COVID-19)
- Emergency Accommodation during isolation or quarantine
- Other, specify \_\_\_\_\_

5.26. Do you personally know anyone who has been diagnosed with COVID-19/Coronavirus in the past 4 weeks?

- Yes >> go to 5.27 and 5.28
- No >> skip to Q 5.29
- Don't know / Prefer not to say >> skip to Q 5.29

5.27. How many people do you personally know who have ever been diagnosed with COVID-19? \_\_ \_\_ [please enter a number between 1-1000]

5.28. How many people do you personally know who have ever been hospitalised (for more than 1 day) and/or who have died from COVID-19? \_\_ \_\_

5.29. How likely do you believe it is that you will be infected with COVID-19 at some point in the future?

- Unlikely
- Somewhat likely
- Very likely
- Don't know / Not sure
- Prefer not to say

## Optimise Daily Diary (14 consecutive days)

5.30. If you were infected with COVID-19 in future, how severe do you think it would be for your health?

- Life threatening
- Very severe (e.g., requiring hospitalization)
- Moderate (e.g., requiring self-care and rest in bed)
- Mild (e.g., capable of continuing with daily tasks normally)
- No symptoms
- Don't know / not sure

5.31. How likely do you think it is that people in your family and friends might become infected with COVID-19 at some point in the future?

- Unlikely
- Somewhat likely
- Very likely
- Don't know / Not sure
- Prefer not to say

5.32. How worried are you about the COVID-19 outbreak in Australia?

- Very worried
- Fairly worried
- A little worried
- Not at all worried
- Don't know/ not sure

## 6. COVID-19 Vaccination module [Repeated monthly]

**Vaccine acceptance: COVID-19 vaccines will become available to the majority of Australian's this year.**

**[ONLY SHOWN TO PARTICIPANTS WHO HAVE COMPLETED BASELINE VACCINE MODULE OR 7A. COVID-19 ADDITIONAL VACCINE MODULE]**

6.1. How many doses of COVID-19 vaccine have you received? State the total number of doses regardless of the vaccine type (AstraZeneca, Pfizer, Moderna, etc)

- I am not vaccinated
- 1 dose
- 2 doses
- 3 doses
- 4 doses
- 5 doses
- >5 doses
- Unsure / don't know

6.2. [if 6.1 does not equal 'I am not vaccinated'] In the past four weeks, have you received a COVID-19 vaccine?

- Yes
- No
- Prefer not to say

## Optimise Daily Diary (14 consecutive days)

6.3. [If Q6.1 equals "I am not vaccinated"] Do you think you would have a COVID-19 vaccine?

- Definitely yes
- Probably yes
- I'm not sure yet
- Probably not
- Definitely not
- Prefer not to say

6.4. [ if Q6.1 does not equal 'i am not vaccinated'] Do you think you would have further doses of the vaccine if recommended?

- Definitely yes
- Probably yes
- I'm not sure yet
- Probably not
- Definitely not
- Prefer not to say

6.5. [ if 6.4 != Definitely yes] For what reasons would you be uncertain about receiving a subsequent vaccine dose in the future? *Select all that apply.*

- I do not believe I am currently eligible for further COVID-19 vaccines (for example based on age, underlying conditions, pregnancy or allergy to vaccine ingredients)
- I experienced bad side effects and I have chosen not to get a further vaccine dose
- My doctor has recommended that I should not get a further dose
- I do not wish to comply with vaccine mandates
- I believe my immunity is already strong enough and I do not need another dose
- I would prefer to choose which vaccine I receive, and I do not believe I am able to do so
- It is too inconvenient to go and get a vaccine
- There are no bookings in my area
- Prefer not to say
- Other (please specify)

6.6. [If Q6.3 not equals ""Definitely yes"] For what reason(s) would you NOT have a COVID-19 vaccine yourself? *Please select all that apply*

- It will not be needed as most people will have developed immunity by natural infection
- I don't think the vaccine is necessary because COVID-19 is not that serious in most people
- It may not work well enough to be worth having
- I am worried that it's not safe and hasn't been tested enough for safety
- I am worried that I may develop a blood clot after getting the COVID-19 vaccine.
- I am worried that I might catch COVID-19 from the vaccine
- I am worried that I would get sicker if I got COVID after the vaccine
- I do not want to/can't pay for the vaccine
- I do not want the vaccine if there is more than one dose
- I do not want to attend a health care provider to have the vaccine due to the risk of catching COVID-19
- I do not accept any vaccines for myself so would not accept a COVID-19 vaccine
- Other, please specify \_\_\_\_\_

## Optimise Daily Diary (14 consecutive days)

6.7. Would you get the COVID-19 vaccine for your child/ren aged under 5 years?

- N/A – no dependent child/ren aged under 5 years
- My child/ren aged under 5 years have already been vaccinated with at least one dose
- Definitely yes Probably yes
- I'm not sure yet
- Probably not
- Definitely not
- Prefer not to say

6.8. Would you get the COVID-19 vaccine for your child/ren aged 5-11 years?

- N/A – no dependent child/ren aged 5-11 years
- My child/ren 5-11 years have already been vaccinated with at least one dose
- Definitely yes
- Probably yes
- I'm not sure yet
- Probably not
- Definitely not
- Prefer not to say

6.9. Would you get the COVID-19 vaccine for your child/ren aged over 11 years?

- N/A – no dependent child/ren aged over 11 years
- My child/ren aged over 11 years have already been vaccinated with at least one dose
- Definitely yes Probably yes
- I'm not sure yet
- Probably not
- Definitely not
- Prefer not to say

6.10. [ if (6.7 not equal NA and not equal "already vaccinated") OR (6.8 not equal NA and not equal "already vaccinated") OR (6.9 not equal NA and not equal "already vaccinated")]

For what reason(s) would you NOT get a COVID-19 vaccine for your child/ren? *Please select all that apply*

- At this stage I have no concerns about the vaccination for my children should it become available
- It will not be needed as most people will have had the infection by then
- I don't think the vaccine is necessary because COVID-19 is not that serious in children
- It may not work well enough to be worth having
- I am worried that it's not safe and hasn't been tested enough for safety
- I am worried that my child may develop a blood clot after getting the COVID-19 vaccine
- I am worried that my child may develop heart inflammation (myo/pericarditis) after getting the COVID-19 vaccine
- I am worried about my child experiencing general side effects after getting the COVID-19 vaccine (fatigue, nausea, etc)
- I am worried that my child might catch COVID-19 from the vaccine
- I am be worried that my child would get sicker if they got COVID after the vaccine
- I do not want to/cannot pay for the vaccine



## Optimise Daily Diary (14 consecutive days)

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- I do not want my child/ren to have the vaccine if there was more than one dose
  - I do not want to attend a health care provider with my child to have the vaccine due to the risk of catching COVID-19
  - I do not accept any vaccines for my child so would not accept a COVID-19 vaccine
  - Other, please specify \_\_\_\_\_

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11  
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6.11. Do you have any concerns about the vaccine, irrespective of your vaccination status?  
If so, what are your main concerns *Please select all that apply:*

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- I am worried that it may affect my future fertility
  - I am worried that it may affect my present or future pregnancy or breastfeeding
  - I am worried about potential side effects
  - I am worried about serious reactions
  - I am worried that long term effects are not well understood
  - A COVID-19 vaccination could give me COVID-19
  - The COVID-19 vaccine may interact with my current medications
  - A COVID-19 vaccination is too new for me to be confident about getting vaccinated with it
  - Information on side effects following immunisation is not readily available
  - I have no safety concerns
  - Other, please specify \_\_\_\_\_

29  
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6.12. [If Q6.1 != I am not vaccinated] Why did you decide to get a COVID-19 vaccine?  
*Please select all that apply*

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- To protect my personal health
  - To protect vulnerable people
  - To protect the health of my family and friends
  - To reduce COVID-19 transmission in the community
  - To comply with a vaccine mandate related to my employment
  - To engage in activities where vaccination is required (large events, restaurants, etc)
  - To reduce the need for/the length of public health restrictions (e.g. lockdowns, density limits, etc)
  - To travel interstate or internationally
  - Prefer not to say
  - Other (please specify)

### Perceived knowledge sufficiency

59  
60

## Optimise Daily Diary (14 consecutive days)

6.13. To what extent do you agree or disagree with the following statements?

	Totally Disagree	Somewhat disagree	Neutral	Somewhat Agree	Totally Agree	Prefer not to say
a) Adequate information about COVID-19 illness is available for the public to make an informed decision about whether to get vaccinated						
b) Adequate information about COVID-19 vaccines is available for the public to make an informed decision about whether to get vaccinated						
c) Adequate information about who is eligible to receive a COVID-19 vaccine is available						
d) Adequate information about where to go to receive COVID-19 vaccines is available						
e) Adequate information about how to book or make an appointment to receive a COVID-19 vaccine is available						
f) Adequate information about how much it will cost to receive a COVID-19 vaccine is available						
g) Adequate information on side effects following COVID-19 vaccination is readily available						
h) Adequate information about what the benefits are for getting vaccinated is available						
i) Adequate information about what the risks are for getting vaccinated –such as the potential risk of developing a blood clot and side effects is available						

### Return to 'normal' life

6.14. To what extent do you agree or disagree with the following statements?

## Optimise Daily Diary (14 consecutive days)

	Totally Disagree	Somewh at disagree	neutra l	Somewh at Agree	Totally Agree	Prefer Not to say
a. Once a person is vaccinated, they should still be required to follow social distancing and other measures for COVID-19						
b. Once a person is vaccinated, they should still need to isolate if they test positive for COVID-19.						
c. Once a person is vaccinated, they should still need to quarantine in accordance with the current health advice to reduce COVID-19 transmission (e.g. a close household contact of a person with COVID-19).						
d. Once a person is vaccinated, they should still get tested for COVID if they have COVID like symptoms.						
e. Once a person is vaccinated, they should still need to wear a mask when required.						

## 7. Physical health and health care

7.1. *If sex at birth!=male:* Are you currently pregnant?

- Yes  
 No  
 Don't know/prefer not to answer

The following questions ask about changes to your health and healthcare access in the **past three months**.

7.2. a) **In the past 3 months did you develop or get diagnosed with any new health conditions that are chronic or have ongoing impact on your daily life or medical needs? This includes both physical and mental health conditions**

## Optimise Daily Diary (14 consecutive days)

- Yes
- No >> [go to 7.3](#)
- Don't know >> [go to 7.3](#)
- Prefer not to say >> [go to 7.3](#)

### **b) If yes: Which new medical conditions has a doctor or healthcare professional told you that you have in the past 3 months? Check all that apply**

- Alcohol or drug dependence
- Alzheimer's or dementia
- Arthritis
- Asthma
- Autism spectrum disorder
- Any autoimmune disease (e.g. lupus, multiple sclerosis, rheumatoid arthritis, psoriasis Crohn's disease, inflammatory bowel disease)
- Bowel disease
- Brain injury
- Cancer (active/current)
- Depression or anxiety disorder
- Other mental health condition
- Diabetes
- Epilepsy or seizures
- Hearing loss
- Heart disease
- Hypertension / high blood pressure
- Intellectual disability
- Immune disorder (immunocompromised, primary or acquired immune deficiency)
- Chronic kidney disease
- Liver disease
- Chronic lung disease (e.g. COPD, emphysema)
- Menopausal symptoms
- Musculoskeletal condition
- Spinal cord injury
- Stroke
- Vision impairment
- Other, *specify* \_\_\_\_\_
- Prefer not to say

### **7.3. Do these health need(s) require ongoing regular medical appointments (e.g. repeat prescriptions, specialist appointments, physical therapy, periodic check ups)?**

- Yes
- No
- I don't know

### **7.4. Did you access a health service or practitioner in the past 3 months? (consider GP, hospital, specialist, dentist, community health and allied health services. Include telehealth consultations)**

- No
- Yes >> 7.4b) Please estimate how many times \_\_\_

### **7.5. What type of a health practitioner did you access in the past 3 months?? Select all that apply**

## Optimise Daily Diary (14 consecutive days)

- A General Practitioner (GP)
- A specialist doctor
- A dentist
- An alternative health care provider (e.g. naturopath, chiropractor etc)
- A hospital doctor in outpatients
- A hospital doctor in the emergency department
- A midwife
- A counsellor or other mental health worker
- A community nurse, practice nurse or nurse practitioner
- A physiotherapist, dietitian or exercise physiologist
- Other

### 7.6. How easy has it been for you to access the healthcare you need in the past 3 months?

- Very easy
- Somewhat easy
- Somewhat difficult
- Very difficult
- N/A – haven't needed healthcare in the past 3 months >> skip to Q7.9
- Don't know/ Prefer not to say

### 7.7. Has COVID-19 changed your access or utilisation of healthcare in the past 3 months?

- Yes
- No >>skip to Q 7.9
- Don't know >>skip to Q 7.9

### 7.8. *If yes:* What changes have you experienced in the past 3 months?

- My face-to-face appointments were rescheduled to Telehealth appointments
- My appointment(s) were cancelled/postponed by the clinic
- My elective surgery / procedure was delayed or cancelled
- I couldn't contact my usual healthcare provider
- I couldn't afford to access my usual healthcare
- I couldn't access my usual healthcare
- I ran out of medication
- Other, *specify* \_\_\_\_\_

### 7.9. Were you offered any alternatives to your usual medical appointments or prescription services in the past 3 months? *E.g. telehealth, online prescription services, in-home services*

- Yes
- No
- Don't know

### 7.10. If yes, what were you offered? *Select all that apply*

- Telehealth consultation(s) >> go to d
- Online prescription services
- Repeat prescriptions /multi-month medication
- In-home services

## Optimise Daily Diary (14 consecutive days)

Other, specify \_\_\_\_\_

### 7.11. How satisfied were you with telehealth consultation(s)?

- Very satisfied
- Somewhat satisfied
- Neutral
- Somewhat dissatisfied
- Very dissatisfied

### 7.12. How you experienced any of the following concerns in relation to your usual healthcare in the past 3 months?

- I delayed or avoided seeking care due to COVID-19
- I felt anxious about attending due to COVID-19
- I couldn't access telehealth consultation(s)
- Other, *specify* \_\_\_\_\_

### 7.13. *If reported requiring care at baseline:* You previously reported that you regularly need help with daily tasks due to long-term illness, age or disability. Have you experienced any disruptions to receiving this help or care in the past 3 months?

- Yes
- No
- Not applicable – I no longer regularly need help with daily tasks due to illness, age or disability
- Prefer not to say

## 8. Mental health

The following section asks experiences affecting your wellbeing. **For emotional support, Beyond Blue and Lifeline offer tips, brief counselling and referrals.** More information will be available at the end of the survey.

8.1. Over the last 2 weeks, how often have you been bothered by the following problems? \* *Not required*

	Not at all	Several days	Over half the days	Nearly every day
Feeling nervous, anxious, or on edge	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Not being able to stop or control worrying	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Worrying too much about different things	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Trouble relaxing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Being so restless that it's hard to sit still	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Becoming easily annoyed or irritable	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Feeling afraid as if something awful might happen	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

The following questions ask how satisfied you feel, on a scale from zero to 10. Zero means you feel no satisfaction at all and 10 means you feel completely satisfied.

## Optimise Daily Diary (14 consecutive days)

8.2. Thinking about your own life and personal circumstances, how satisfied are you currently with ... \* *Not required*

	0 No satisfaction at all	1	2	3	4	5	6	7	8	9	10 Completely satisfied
... your standard of living?	0	1	2	3	4	5	6	7	8	9	10
... your health?	0	1	2	3	4	5	6	7	8	9	10
... what you are achieving in life?	0	1	2	3	4	5	6	7	8	9	10
... your personal relationships?	0	1	2	3	4	5	6	7	8	9	10
... how safe you feel?	0	1	2	3	4	5	6	7	8	9	10
... feeling part of your community?	0	1	2	3	4	5	6	7	8	9	10
... your future security?	0	1	2	3	4	5	6	7	8	9	10

8.3. To what extent has COVID-19 had negative effects on your mental health (e.g. feeling stressed, lonely, anxious, angry etc) in the past 4 weeks?

- To a great extent
- Somewhat
- Very little
- Not at all
- I don't know/I prefer not to answer

### 9. Measures to prevent COVID-19

9.1. Where are the **main** places you received or accessed information to stay informed about COVID-19 in the past 4 weeks? *Select up to three sources.*

- Australian Government health authorities (e.g. Department of Health website, Coronavirus Australia app, hotline, Government WhatsApp channel)
- Daily government press conferences/media releases (e.g., by the Premier, Health Minister and/or Chief Health Officer)
- Doctor or other health professional
- News media (including online, television, radio, print)
- Friend or family
- My workplace / co-workers
- Social media (e.g. Facebook, Twitter, Instagram, Weibo, WeChat, Australia Today, Yi Yi)
- A community/religious/cultural leader
- The World Health Organization (WHO)
- Other, *please specify* \_\_\_\_\_
- I didn't access COVID-19 information in the past 4 weeks

9.2. How often have you taken the following measures to protect yourself and others from COVID-19 (coronavirus) in the past 4 weeks?

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	Always	Most of the time	Sometimes	Never	Not applicable to me
Using hand sanitizer and/or washing your hands immediately after being in a public place	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Coughing/sneezing into your elbow or tissue	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Keeping 1.5 metres away from people who are not members of your household as much as you can	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Disinfecting surfaces and objects	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Avoiding seeing people who are older/vulnerable	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Avoiding non-essential shopping (in person – don't consider online shopping)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Avoiding social gatherings	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Wearing or carrying a face covering in public. <small>A face covering needs to cover both your nose and mouth. It could be a face mask or shield.</small>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Avoiding public transport	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

9.3. Have you received a fine for not following COVID directives (i.e. stay-at-home, self-isolation, mask wearing, curfew) in the past 4 weeks?

- Yes  
 No



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Prefer not to say

9.4. Have you experienced or witnessed racism **in relation to COVID-19** and the measures to prevent its spread in the past 4 weeks? *Select all that apply*

Yes, I experienced racism

Yes, I witnessed racism

No

Prefer not to say

### The next questions are specific to your places of work.

9.5. *If report working in workplace currently*: Do you currently work in a facility or service providing healthcare or social assistance? This includes people working in administration, management, cleaning, support services, and health professionals

Yes >> skip to Q9.7

No

Don't know

9.6. *If attending a workplace and not in health setting*: How often have you taken the following measures to protect yourself and others from COVID-19 (coronavirus) in the past 4 weeks **when at your workplace(s)**?

	Always	Most of the time	Sometimes	Never	Not applicable to me
Wearing a face covering <i>A face covering needs to cover both your nose and mouth. It could be a face mask or shield.</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Regularly using hand sanitizer and/or washing your hands	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Keeping 1.5 metres away from other people as much as you can	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Disinfecting surfaces and objects (implemented yourself or by your workplace)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Avoiding shared use of phones, desks, offices, or other work tools and equipment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Using personal protective equipment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

*If work in a facility or service providing healthcare or social assistance*

Hospital	General practice and general	Specialist community-based services	Residential care	Ambulance services
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Optimise Daily Diary (14 consecutive days)

	<b>community-based services</b>			
<input type="checkbox"/> Inpatient services <input type="checkbox"/> Outpatient clinics <input type="checkbox"/> Emergency departments <input type="checkbox"/> Other hospital-based settings	<input type="checkbox"/> General practice <input type="checkbox"/> Community health services <input type="checkbox"/> Allied health practices <input type="checkbox"/> Community Pharmacy <input type="checkbox"/> Dentistry <input type="checkbox"/> Health promotion <input type="checkbox"/> University	<input type="checkbox"/> Specialist medical/surgical <input type="checkbox"/> Diagnostic service <input type="checkbox"/> Home and community care <input type="checkbox"/> Alcohol and other drug treatment service <input type="checkbox"/> Community mental health service <input type="checkbox"/> Palliative care service <input type="checkbox"/> Other specialist	<input type="checkbox"/> Aged care <input type="checkbox"/> Residential care	<input type="checkbox"/> Ambulance service <input type="checkbox"/> Aero-medical service

9.7. *If report working in a setting providing healthcare or social assistance: What kind of setting(s) do you currently work in? See examples of each setting above. Select all that apply*

- Hospital >>  Inpatient services  Outpatient clinics  Emergency departments  Other
- General practice and general community-based health services
- Specialist community-based services
- Residential care
- Ambulance services
- Other setting, specify \_\_\_\_\_

9.8. Do you provide direct patient care?

- Yes, – including in person care
- Yes – telehealth only >> skip to Q9.10
- No

9.9. Repeat questions for each setting selected:

9.9.1. Does your [insert name] workplace currently provide COVID-19 (coronavirus) testing?

- Yes
- No
- Don't know

9.9.2. In the past 4 weeks, how often was appropriate PPE (personal protective equipment) **available** at your [insert name] workplace? *Appropriate PPE is dependent on your setting, patient contact, and guidelines and may have changed over time.*

- Yes, all of the time
- Yes, most of the time
- Yes, some of the time

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- Yes, occasionally**
- Never**
- Don't know**
- Prefer not to say**

**9.9.3.** In the past 4 weeks, how often did you **use** appropriate PPE during patient interactions?

- Yes, all of the time**
- Yes, most of the time**
- Yes, some of the time**
- Yes, occasionally**
- Never**
- Don't know**
- Prefer not to say**

9.10. *If selected "work" as a source of income:* Did you work in hotel quarantine and/or border security in the past 4 weeks?

- Yes
- No >> *Skip to Q9.14*

The following questions are specific to your hotel quarantine and/or border security workplace

9.11. How did you receive updates and important communication from your workplace in the past 4 weeks?

*Tick all that apply*

- Phone
- Email
- WhatsApp
- Weibo, WeChat
- In-person meetings
- Other, *specify* \_\_\_\_\_
- I don't receive updates/important communication

9.12. To what extent do you agree with the following statements:

9.12.1. I have received adequate training to work safely with people potentially infected with COVID-19

- Totally agree
- Somewhat agree
- Neutral
- Somewhat disagree
- Totally disagree
- Prefer not to answer

9.12.2. I feel well supported by my workplace management/supervisor

- Totally agree
- Somewhat agree
- Neutral
- Somewhat disagree
- Totally disagree
- Prefer not to answer

9.12.3. I feel like I would be well supported if I was exposed to COVID-19 at work

- Totally agree

## Optimise Daily Diary (14 consecutive days)

- Somewhat agree
- Neutral
- Somewhat disagree
- Totally disagree
- Prefer not to answer

9.12.4. I feel like I would be well supported if I become infected with COVID-19

- Totally agree
- Somewhat agree
- Neutral
- Somewhat disagree
- Totally disagree
- Prefer not to answer

9.13. How acceptable do you currently think it is to require quarantine workers to test frequently for COVID-19?

- Totally unacceptable
- Somewhat unacceptable
- Neutral
- Somewhat acceptable
- Highly acceptable
- Prefer not to answer

The next few questions ask about the **current** measures to prevent the spread of COVID-19 (coronavirus) where you live

The next set of questions asks about your acceptance of actual, planned, or theoretical actions that the Australian government has taken to control the COVID-19 pandemic.

9.14. How acceptable do you think the following Government actions are given the current COVID-19 pandemic in Australia?

	Totally unacceptable	Somewhat unacceptable	Neutral	Somewhat acceptable	Highly acceptable
Cancelling public events of over 100 people (e.g. sports, concert, festival)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Closing bars, cafes and restaurants except for take-away/delivery service	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Remote learning for school children	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Limiting the number of people who can attend	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

## Optimise Daily Diary (14 consecutive days)

a wedding or funeral					
Requiring people to stay at home except for essential work, shopping for essential supplies, medical reasons, or exercise	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Requiring individuals returning from overseas to quarantine in hotels for 14 days	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Requiring COVID-19 testing before allowing individuals to go back to work	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Requiring everyone to wear a face mask in public	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Fining people who break the rules for physical distancing/"Stay at Home" orders	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Restricting travel between states/territories	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Closing borders to all other countries	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Temporarily closing down workplaces deemed non-essential (in-person retail, manufacturing, administration)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
A mandatory COVID-19 vaccine for certain high-risk groups, such as healthcare workers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Optimise Daily Diary (14 consecutive days)

Requiring QR code check-ins at hospitality venues, shops and events					
Requiring proof of vaccination at hospitality venues and events					

9.15. How much do you agree or disagree with the following statements?

9.15.1. I have confidence in the **Victorian** Government’s approach for dealing with COVID-19

- Strongly disagree
- Disagree
- Neither agree nor disagree
- Agree
- Strongly agree

9.15.2. I have confidence in the **Australian** Government’s approach for dealing with COVID-19

- Strongly disagree
- Disagree
- Neither agree nor disagree
- Agree
- Strongly agree

9.16. What are your **top 3 biggest** concerns about the current or potential effects of COVID-19 (coronavirus) at the moment? Select up to 3 concerns. You can specify your own concern if it is not listed below.

- Being infected with COVID-19
- Friends or family being infected with COVID-19
- Infections and death from COVID across the community
- Your mental/emotional health
- Friends’ or family’s mental health and wellbeing
- Schools closing for a long time
- Regular health services not being available
- Your personal financial situation
- Economic recession
- The impacts on jobs and unemployment
- Your living situation
- Getting access to essential products or services
- Fulfilling work or study requirements
- The quality of your relationships (family, friends, romantic or sexual)
- Your physical fitness
- Your personal safety
- Other, *specify* \_\_\_\_\_
- I have no concerns about COVID-19

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9.17. Anything else that you would like to say about your experience with COVID-19 that we haven't covered today? \_\_\_\_\_

**For up to date information on COVID-19 please see the [Department of Health website](#) and/or download the official government "Coronavirus Australia" app. Information is also available in [languages other than English](#).**

**For specific information about vaccines for COVID-19, please see the Department of Health COVID-19 vaccination website <https://www.coronavirus.vic.gov.au/vaccine>.**

**If you are worried that you or someone in your family may have COVID-19, call the 24/7 hotline on 1800 675 398. You can find out about [symptoms](#) and [where to get tested](#) through the DHHS.**

**For emotional support, [Beyond Blue](#) (1800 512 348) and [Lifeline](#) (13 11 14) offer tips, brief counselling and referrals. If you are struggling to cope, you can reach out to a counsellor at the [Suicide Call Back Service](#) on 1300 659 467.**

**For help and support for domestic or family violence and abuse, contact [1800RESPECT](#) on 1800 373 732 or [Safe Steps](#) on 1800 015 188 or [inTouch Multicultural Centre against Family Violence](#) on 1800 755 988.**

**If you are experiencing financial hardship during the COVID-19 pandemic, you can apply for [financial assistance](#). You can also visit the [WIRE](#) website or the [Salvation Army](#) to find out about financial resources which may be useful to you.**

## Optimise Follow Up Diary

### Supplementary file 3 – G - Follow up daily diaries

#### COVID health in past week

These questions refer to the past 7 days, from {allocated date -6} to {allocated date}

Pop up information box:

Click here to see the Victorian Government's latest guidelines on COVID-19 symptoms to watch out for: <https://www.coronavirus.vic.gov.au/symptoms-and-risks>

Click here to see the Victorian Government's latest guidelines on isolation for people who tested positive to COVID-19 and their household and household-like contacts

26. Have you been tested for COVID-19/coronavirus infection in the past 7 days? *Please include Rapid Antigen Tests (RATs), PCR tests, and/or any other kind of COVID-19 test*
- Yes >> date of most recent test \_\_/\_\_/\_\_
- No >>skip to Q16
27. *If tested:* What type of test/s did you undertake in the past 7 days? *Select all that apply*
- Rapid Antigen Test (RAT)
- PCR test
- Other, please specify \_\_\_\_\_
28. *If tested:* How many times did you test negative on a COVID-19 PCR test in the past 7 days?  
[Enter number from 0 to 50]
29. *If tested:* How many times did you test negative on a Rapid Antigen Tests/s (RAT) in the past 7 days  
[Enter number from 0 to 50]
30. *If tested:* How many times did you test negative on other COVID-19 tests in the past 7 days  
[Enter number from 0 to 50]
31. *If tested:* Why were you last tested for COVID-19? *Select all that apply*
- I had COVID-19-like symptoms
- I had household or household-like contact\* with someone who tested positive to COVID-19
- I work in a high-risk setting
- Had recently returned from overseas travel
- There were cases reported in places I regularly visit, work or study
- Required before returning to work
- Community testing blitz
- I routinely test as part of my work
- I had to test to attend a healthcare appointment or similar
- I had to test as a requirement for interstate travel or overseas travel
- I had to test as a requirement for returning from interstate or overseas travel
- Testing before going to see someone who is vulnerable to COVID-19 (e.g., elderly, immunocompromised people)
- Testing before going to a large gathering
- I did test/s for my own peace of mind (that is, none of the reasons above)
- Other, *specify* \_\_\_\_\_
32. *If tested:* What information were you given when you got a test? *Select all that apply*
- How to perform a Rapid Antigen Test (RAT)
- How to report a positive Rapid Antigen Test (RAT) result
- What to do while waiting for a PCR result
- How to get your PCR result, including a contact number
- Requirements for self-isolation
- Cleaning and hygiene practices
- When to leave isolation



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- How to notify household and/or household like contacts  
 Testing and/or isolation requirements for household and/or household like contacts  
 Information on whether I should get confirmatory PCR  
 Information on repeating Rapid Antigen Tests  
 What to do if your symptoms get worse  
 Information on financial support and emergency relief packages  
 Length of the self-isolation period  
 Other, *specify* \_\_\_\_\_  
 I didn't receive any information
33. *If tested*: Have you tested positive for COVID-19 in the past 7 days?
- Yes >> (trigger manual assign contact diary)  
 No >> (no follow up required)  
 Indeterminate >> (no follow up required)  
 Haven't received a result yet >> (no follow up required)
- b) *If Yes to testing on a PCR and testing positive*: Did you test positive on a PCR test in the past 7 days?
- Yes  
 No  
 Prefer not to say
- c) *If Yes to testing on a RAT and testing positive*: Did you test positive on a Rapid Antigen Test (RAT) in the past 7 days?
- Yes  
 No  
 Prefer not to say
- d) *If Yes to testing on other test and testing positive*: Did you test positive on other CoVID-19 Test/s in the past 7 days?
- Yes  
 No  
 Prefer not to say
34. *If tested and tested positive on RAT*: Did you report your positive Rapid Antigen Test (RAT) to the state/territory Government?
- Yes  
 No  
 Prefer not to say
35. *If received a positive result*: When did you receive your positive COVID-19 test result? \_\_ / \_\_  
If you have tested positive multiple times in the past 7 days, select the date of the first positive test result.
36. *If tested and received result*: Between when you were tested and when you received your test result, did you leave your living premises for any reason?
- Yes >> go to Q13  
 No >> skip to Q14 if positive/else Q16
37. *If tested and has not received result*: Between when you were tested and now, have you left your living premises for any reason?
- Yes >> go to Q13  
 No >> skip to Q14 if positive/else Q16
38. *If left home (Q 11 and 12)*: If yes, what reasons did you leave your living premises for? *Select all that apply*
- Medical care  
 Exercise  
 To get essential food  
 To get essential medicine  
 Work  
 To pick up/drop off a household member from work, school, childcare, appointments

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- To visit family, friends or partner  
 To visit someone in hospital  
 Emergency situation  
 Other, specify \_\_\_\_\_
39. *If tested positive*: Were you contacted by someone on behalf of the Government/DHHS for the purpose of contact tracing, i.e., to discuss who you had close contact with while infectious?
- Yes  
 No >> skip to Q15
- d) *If yes*: When did you receive the contact tracing \_\_ / \_\_ / \_\_
40. *If tested positive*: What is the setting where you were likely exposed to COVID-19?
- Workplace  
 Household (my own)  
 Household (other than my own)  
 Other household-like setting (indoor hospitality venue)  
 Overseas/international travel  
 Other known setting, *specify* \_\_\_\_\_  
 Unknown setting >> skip to Q16
- e) *If not unknown*: What was the **first** date that you were likely exposed to COVID-19? \_\_ / \_\_ / \_\_
41. **Have you been notified as household/ household-like contact** of someone with confirmed COVID-19 in the past 7 days?  
*Close contact, now called a household or household-like contact has spent more than four hours with someone who tested positive for COVID-19 inside a house, accommodation, or care facility.*
- Yes >> (trigger manual assign contact diary)  
 No >> skip to Q18  
 Don't know >> skip to Q18
- b) *If Yes*: When were you *first* notified as a **household/ household-like** contact ? \_\_ / \_\_ / \_\_
- c) Who notified you that you were a **household/ household-like** contact? *Select all that apply*
- Government/DHHS Hotline  
 Testing Centre / Health service  
 Person with COVID-19 in my household  
 Person with COVID that I spent >4hrs with in household-like setting  
 Other household member  
 Workplace  
 Friend/Family member  
 Social media  
 Unsure  
 Other, *specify* \_\_\_\_\_
42. *If household/ household-like contact*: What is the setting where you were potentially exposed to COVID-19?
- Workplace  
 Household (my own)  
 Household (other than my own)  
 Other Household-like setting (Indoor hospitality venue)  
 Other known setting, *specify* \_\_\_\_\_  
 Unknown setting
- f) *If not unknown*: What was the **last** date that you were potentially exposed or in contact with this person while they were infected with COVID-19? \_\_ / \_\_ / \_\_
- g) *If household (my own)*: Were/are you able to effectively separate from the person(s) with COVID-19 in your household? (e.g., stay in a different room, sleep

## Optimise Follow Up Diary

in a separate bedroom, use a separate bathroom where possible, maintain distance)

- Yes
- No
- Don't know

43. Did you have any COVID-19-like symptoms in the past 7 days? *Please select Yes if you have had any COVID-like symptoms, even if you believe these symptoms were not related to a COVID-19 infection.*

- Yes
- No >>skip to Q22
- Prefer not to say

b) *If Yes to symptoms:* Did you first experience any of these symptoms in the last 14 days?

- Yes
- No >>skip to Q19

c) *If Yes: sym. start in last 14 days:* When did your symptoms first start?

\_\_/\_\_/\_\_ [ Date Validation: 14 days before survey invitation]

44. *If Yes to symptoms:* Which symptoms did you experience? *Select all that apply*

- Cough
- Fever
- Shortness of breath
- Sore throat
- Fatigue
- Aches and Pains
- Headache
- Runny or stuffy nose
- Loss of taste/smell
- Nausea and/or vomiting
- Diarrhoea
- Other, *specify* \_\_\_\_\_

45. *If Yes to symptoms and No to testing:* What was your reason for not testing for COVID-19 whilst you had COVID-19-like symptoms? *Select all that apply*

- Fear of swab procedure/discomfort
- I didn't want to wait in testing queue
- I left a testing centre because of long que/wait time for PCR testing
- I was turned away from the testing centre
- Testing centre too far away
- Worried about being infected at testing centre
- Time constraints (e.g., work/care responsibilities)
- Did not know where to go to have a test
- Unable to find or access Rapid Antigen Tests (RATs)
- Did not want to pay for Rapid Antigen Tests (RATs)
- Could not afford Rapid Antigen Tests (RATs)
- I was very sure symptoms were not related to COVID-19 (e.g., pre-existing health conditions)
- I was pretty sure symptoms were not related to COVID-19 (e.g., allergies, common cold, side effects of COVID-19 vaccine)
- I was pretty sure symptoms were from tobacco use and not related to COVID-19
- Symptoms were only mild
- Did not think you were eligible for COVID testing
- No private transport to get to testing centre
- Chose to stay home (self-isolate) instead
- Did not want to isolate/quarantine after testing
- Other, *specify* \_\_\_\_\_

46. *If Yes symptoms but No to test:* Did you isolate for 7 days because you had symptoms despite not being able to get tested?

- Yes
- No

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- I am currently isolating  
 Prefer not to say

*If you've tested positive to COVID-19 in the past 7 days a researcher will be in touch with you.*

*If you've been notified as a household or household like contact in the past 7 days, a researcher will be in touch with you.*

Please complete the following sections based on your feelings and activities **YESTERDAY, {ALLOCATED DAY}**

### Mood

47. How often did you experience **negative** emotions {yesterday}? (e.g., unpleasant, sad, angry, upset, bored, disappointed, nervous, annoyed):

- Never  Rarely  Sometimes  Often  All day

48. How often did you experience **positive** emotions {yesterday}? (e.g., happy, content, cheerful, excited, calm, serene, ecstatic):

- Never  Rarely  Sometimes  Often  All day

## Optimise Follow Up Diary

### Contacts

**We would like you to know about every person that you have contact with yesterday, {ALLOCATED DAY}.**

**A contact** is defined as someone you either:

- Had a face-to-face conversation with, OR
- Shared a closed space with (e.g. room, car, bus, lift, train carriage), OR
- Had physical contact with (e.g. handshake, hug, kiss, contact sport).

Consider people you live with, people who visited your home, and people you were in contact with when you left home. Don't forget about the times you used public or shared transport.

Do not include people that you exclusively contacted by phone/video call.

49. Did you have contact with anyone {yesterday}?

- Yes
- No >> end of survey

50. Were any of these contacts someone you know by name or someone who you will regularly see again?

- Yes
- No >> skip to Q20

51. Please type in the **full name(s)** (First name Last name, if known. Else, nickname) of **every person** you had contact with yesterday (from 5am {yesterday} until 5am today):

- If you had contact with the same person several times during the assigned day, only record them once, and record the total time you spent with them over the entire day. Each person you have contact with during the day should have only one line in the diary.
- List people who you know or are familiar with by First Name and Last Name.
- Type in the contacts full name, if you know it, in the first box and press "enter" or select the create button.
- To select previous contacts or your key people, click on the blue box on the right of the text box and search or click on their name in the list.
- We will then ask a few questions about these contacts in the boxes below.
- If you don't know their age, then please estimate.
- You don't need to list all contacts you had if:
  - They are too numerous to list or you don't know them by name (e.g., if you work at a supermarket with many customers)
  - You are a health care worker referring to contact with patients
 You will be asked to summarise these contacts at the end.

## Optimise Follow Up Diary

	Full Name (First Name Last Name, if known. Else, nickname)	Age range (years)	Gender	Relationship to you <i>Select one</i>	What was the purpose or circumstances of the contact? <i>Select all that apply</i>	In what setting did you have contact? <i>Select all that apply</i>	How many <b>other people</b> were at this location at the same time as you, <b>excluding</b> you and members of your household? <i>If you had contact with this person at more than one location, answer for the most crowded location you shared with this person yesterday</i>	Did you have contact indoors or outdoors? <i>Select all that apply</i>	How long did you spend with this person <b>in total</b> ?	How much time did you spend within <b>close</b> contact of this person (within 1.5 metres of each other or within a closed space?)	Did you have any physical contact?
1	_____	<5 5-9 10-14 15-19 20-29 30-39 40-49 50-59 60-69 70-79 80+	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Non-binary <input type="checkbox"/> Unknown	<input type="checkbox"/> Partner (incl. spouse, boy/girlfriend) <input type="checkbox"/> Parent <input type="checkbox"/> Child <input type="checkbox"/> Grandparent <input type="checkbox"/> Grandchild <input type="checkbox"/> Sibling	<input type="checkbox"/> Live together <input type="checkbox"/> Providing care <input type="checkbox"/> Receiving care <input type="checkbox"/> Buying/receiving food <input type="checkbox"/> Buying/receiving medical supplies <input type="checkbox"/> Non-essential shopping <input type="checkbox"/> Medical	<input type="checkbox"/> Home <input type="checkbox"/> Other private residence <input type="checkbox"/> School/university <input type="checkbox"/> Childcare <input type="checkbox"/> Transport <input type="checkbox"/> Health service <input type="checkbox"/> Shop / retail	<input type="checkbox"/> None <input type="checkbox"/> 1-2 <input type="checkbox"/> 3-5 <input type="checkbox"/> 6-10 <input type="checkbox"/> 11-20 <input type="checkbox"/> 21-100 <input type="checkbox"/> More than 100	<input type="checkbox"/> Indoor <input type="checkbox"/> Outdoor	<input type="checkbox"/> Less than 5 minutes <input type="checkbox"/> 5 to 14 minutes <input type="checkbox"/> 15 to 60 minutes <input type="checkbox"/> 1 to 2 hours <input type="checkbox"/> 2 to 8 hours <input type="checkbox"/> More than 8 hours	<input type="checkbox"/> Less than 5 minutes <input type="checkbox"/> 5 to 14 minutes <input type="checkbox"/> 15 to 60 minutes <input type="checkbox"/> 1 to 2 hours <input type="checkbox"/> 2 to 8 hours	<input type="checkbox"/> Yes <input type="checkbox"/> No

Optimise Follow Up Diary

				<input type="checkbox"/> Other family member <input type="checkbox"/> Friend <input type="checkbox"/> Work colleague <input type="checkbox"/> Client/patient <input type="checkbox"/> Classmate <input type="checkbox"/> Carer <input type="checkbox"/> Healthcare provider <input type="checkbox"/> Partner/family of someone I live with <input type="checkbox"/> Other	<input type="checkbox"/> Work <input type="checkbox"/> Study/education <input type="checkbox"/> Social <input type="checkbox"/> Sport/exercise <input type="checkbox"/> Worship/religions <input type="checkbox"/> Other, <i>specify</i> _____	<input type="checkbox"/> Restaurant / café <input type="checkbox"/> Bar / nightclub <input type="checkbox"/> Indoor sports / recreational facility (e.g. gym) <input type="checkbox"/> Entertainment facility (e.g. cinema, music/arts venue) <input type="checkbox"/> Public space (e.g. park, beach, sports field) <input type="checkbox"/> Place of worship <input type="checkbox"/> Workplace not otherwise listed (e.g. office, factory) <input type="checkbox"/> Other, <i>specify</i> _____					<input type="checkbox"/> More than 8 hours
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## Optimise Follow Up Diary

[add contact] [complete contact diary]

The following questions ask about contacts you were unable to list from yesterday because you had contact with a large number of people or people you don't know by name.

52. Have you included all contacts you had yesterday?

- Yes >> End of survey
- No

53. If no, what was the setting of these additional contacts?

- Home, estimated number: \_\_ \_\_
- Other private residence, estimated number: \_\_ \_\_
- School/university, estimated number: \_\_ \_\_
- Childcare, estimated number: \_\_ \_\_
- Transport, estimated number: \_\_ \_\_
- Health service, estimated number: \_\_ \_\_
- Shop / retail, estimated number: \_\_ \_\_
- Restaurant / café, estimated number: \_\_ \_\_
- Bar / nightclub, estimated number: \_\_ \_\_
- Indoor sports / recreational facility (e.g. gym) , estimated number: \_\_ \_\_
- Entertainment facility (e.g. cinema, music/arts venue) , estimated number: \_\_ \_\_
- Public space (e.g. park, beach, sports field) , estimated number: \_\_ \_\_
- Place of worship, estimated number: \_\_ \_\_
- Workplace not otherwise listed (e.g. office, factory) , estimated number: \_\_ \_\_
- Other, specify \_\_\_\_\_, estimated number: \_\_ \_\_



### Supplementary file 3 – H - COVID-19 event-based diaries

#### Information piped from Follow-up Diary [not visible to participants]:

1. Have you tested positive for COVID-19 in the past 7 days?

- Yes  
 No  
 Indeterminate  
 Haven't received a result yet

2. Have you been told that you are a household/ household-like contact of someone with confirmed COVID-19 in the past 7 days?

*Close contact, now called a household or household-like contact has spent more than four hours with someone who tested positive for COVID-19 inside a house, accommodation or care facility.*

- Yes  
 No

Please complete the following questions based on your feelings and activities in *THE 7 DAYS FOLLOWING YOUR POSITIVE TEST RESULT (ISOLATION PERIOD) OR THE 7 DAYS FOLLOWING BEING NOTIFIED THAT YOU ARE A HOUSEHOLD CONTACT ( HOUSEHOLD CONTACT PERIOD).*

#### Mood

- How often did you experience **negative** emotions in the *7 days of your isolation/household contact period?* (e.g., unpleasant, sad, angry, upset, bored, disappointed, nervous, annoyed):  
 Never    Rarely    Sometimes    Often    All day
- How often did you experience **positive** emotions in the *7 days of your isolation/household contact period?* (e.g., happy, content, cheerful, excited, calm, serene, ecstatic):  
 Never    Rarely    Sometimes    Often    All day

#### Health

- Have you been tested for COVID-19/coronavirus infection in the 7 days of your isolation/household contact period? *Please include Rapid Antigen Tests (RATs), PCR tests, and/or any other kind of COVID-19 test.*  
 Yes >> date of most recent test \_\_/\_\_/\_\_  
 No
- If tested:* What type of test(s) did you undertake in the 7 days of your isolation/household contact period? *Select all that apply*  
 Rapid Antigen Test (RAT)  
 PCR test  
 Other, please specify \_\_\_\_\_
- If tested:* How many times did you test negative on a COVID-19 PCR test in the 7 days of your isolation/household contact period?  
[Enter number from 0 to 50]
- If tested:* How many times did you test negative on a Rapid Antigen Tests (RAT) in the 7 days of your isolation/household contact period?  
[Enter number from 0 to 50]
- If tested:* How many times did you test negative on other COVID-19 tests in the 7 days of your isolation/household contact period?  
[Enter number from 0 to 50]
- If tested:* Why were you last tested for COVID-19 in the 7 days of your isolation/household contact period? *Select all that apply*

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- Confirmatory PCR test after a positive Rapid Antigen Test (RAT)
  - I wanted to test before leaving isolation/quarantine after 7 days
  - I wanted to test to see if I was negative and could leave isolation/quarantine before 7 days
  - I had COVID-19-like symptoms
  - Had recently returned from overseas travel
  - Required before returning to work
  - I had to test to attend a healthcare appointment or similar
  - I did test for my own peace of mind (that is, none of the reasons above)
  - Other, *specify* \_\_\_\_\_
9. *If tested:* What information were you given when you got a test? *Select all that apply*
- How to perform a Rapid Antigen Test (RAT)
  - How to report a positive Rapid Antigen Test (RAT) result
  - What to do while waiting for a PCR result
  - How to get your PCR result, including a contact number
  - Requirements for self-isolation
  - Cleaning and hygiene practices
  - When to leave isolation
  - How to notify household and/or household like contacts
  - Testing and/or isolation requirements for household and/or household like contacts
  - Information on whether you should get a confirmatory PCR test
  - Information on repeating Rapid Antigen Tests (RATs)
  - What to do if your symptoms get worse
  - Information on financial support and emergency relief packages
  - Length of the self-isolation period
  - Other
  - I didn't receive any information
10. *If tested:* Have you tested positive for COVID-19 in the 7 days of your isolation/household contact period (*not including any initial positive tests*)?
- Yes
  - No
  - Indeterminate
  - Haven't yet received a result
  - Prefer not to say
- b) *If Yes to testing on a PCR and testing positive:* Did you test positive on a PCR test in the 7 days of your isolation period?
- Yes
  - No
  - Prefer not to say
- c) *If Yes to testing on a RAT and testing positive:* Did you test positive on a Rapid Antigen Test (RAT) in the 7 days of your isolation period?
- Yes
  - No
  - Prefer not to say
- d) *If Yes to testing on another test and testing positive:* Did you test positive on other COVID-19 Test(s) in the 7 days of your isolation period?
- Yes
  - No
  - Prefer not to say
11. *If tested and tested positive on RAT:* Did you report your positive Rapid Antigen Test (RAT) to the state/territory Government?
- Yes
  - No
  - Prefer not to say

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12. *If tested positive:* When did you receive your positive COVID-19 test result? \_\_/\_\_/\_\_  
If you have tested positive multiple times in the 7 days of your isolation period, select the date of the first positive result.

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Pop up information box:

Click here to see the Victorian Government’s latest guidelines on COVID-19 symptoms to watch out for: <https://www.coronavirus.vic.gov.au/symptoms-and-risks>

Click here to see the Victorian Government’s latest guidelines on isolation and quarantine for people who tested positive to COVID-19 and their household and household-like contacts: <https://www.coronavirus.vic.gov.au/checklist>

13. Did you have any COVID-19-like symptoms in

the 7 days of your isolation/household contact period? *Please select **Yes** if you have had **any** COVID-like symptoms, even if you believe these symptoms were not related to a COVID-19 infection.*

- Yes
- No
- Prefer not to say

a) Did you first experience these symptoms in the 7 days of your isolation/household contact period?

- Yes
- No >> skip to Q.14

b) If Yes to first experience symptoms in the 7 days: When did your symptoms first start?

\_\_ / \_\_ / \_\_

14. *If Yes to symptoms:* Which symptoms did you experience? Select all that apply

- Cough
- Fever
- Shortness of breath
- Sore throat
- Fatigue
- Aches and Pains
- Headache
- Runny or stuffy nose
- Loss of taste / smell
- Nausea and/or vomiting
- Diarrhoea
- Other: *specify* \_\_\_\_\_

15. *If experienced symptoms:* Did you seek medical care or professional health advice for yourself?

- Yes
- No

16. *If Yes to medical care:* What type of medical care or professional health service did you seek? *Select all that apply*

- Went to GP
- Teleconsult with GP
- Pharmacist
- Aboriginal and Torres Strait Islander Health Clinic
- Visited emergency department
- Hospital inpatient
- COVID-19 clinic/drive-through
- Telephoned coronavirus (COVID-19) hotline
- Other, *please specify* \_\_\_\_\_

17. *If Yes to symptoms and No to testing:* What was your reason for not testing for COVID-19 whilst you had COVID-19-like symptoms? Select all that apply

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- No need to retest as I have had a COVID-19 positive result in the last 7 days
  - Fear of swab procedure/discomfort
  - I didn't want to wait in testing queue
  - I left a testing centre because of long queue/wait time for PCR testing
  - I was turned away from the testing centre
  - Testing centre too far away
  - Worried about being infected at testing centre
  - Time constraints (e.g., work/care responsibilities)
  - Did not know where to go to have a test
  - Unable to find or access Rapid Antigen Tests (RATs)
  - Did not want to pay for Rapid Antigen Tests (RATs)
  - Could not afford Rapid Antigen Tests (RATs)
  - I was **very** sure symptoms were not related to COVID-19 (e.g., pre-existing health conditions)
  - I was **pretty** sure symptoms were not related to COVID-19 (e.g., allergies, common cold, side effects of COVID-19 vaccine)
  - I was pretty sure symptoms were from tobacco use and not related to COVID-19
  - Symptoms were only mild
  - Did not think I was eligible for COVID testing
  - No private transport to get to testing centre
  - Chose to stay home (self-isolate) instead
  - Did not want to isolate/quarantine after testing
  - Other, *specify* \_\_\_\_\_

## Isolation

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Pop up information box: Click here to see the Victorian Government's latest guidelines on self-isolation and quarantine: <https://www.coronavirus.vic.gov.au/checklist>

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The following questions ask about self-isolation or quarantine. Self-isolation or quarantine applies to people who:

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- 1) Have been diagnosed with COVID-19;
  - 2) Are waiting to receive their COVID-19 test result and have symptoms indicative of potential COVID-19;
  - 3) Have been told that they are a household or household-like contact of someone with confirmed COVID-19 but **COULD NOT** follow the below requirements in the 7-day contact period:
    - a) Continually test negative using a Rapid Antigen Test (RAT) on at least 5 days out of the 7-day period, ensuring the tests are spaced 24 hours apart;
    - b) Wear a mask indoors when outside home:

18. If  
case: In the 7  
days of your  
isolation  
period, did you  
leave your  
living premises  
for any reason?

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- Yes
  - No
  - Prefer not to say

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b) *If yes:* What reasons did you leave your living premises for? *Select all that apply*

- Medical care
- Exercise
- To get essential food
- To get essential medicine
- Work with an exemption/permit
- Work without an exemption/permit
- To pick up/drop off a household member from work, school, childcare, appointments

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- To visit family, friends or partner
  - To visit someone in hospital
  - Emergency situation
  - Other, *specify* \_\_\_\_\_
19. If case: Did you isolate after you tested positive for COVID-19?
- Yes
  - No
  - Prefer not to say
- b) *If yes to isolating*: How many days did you isolate for?  
[enter number from 1 to 8 or more]
- c) *If < 7 days isolation*: For what reasons did you not isolate for 7 days?
- My living situation was not suitable for isolation
  - I was worried for my wellbeing if I continued to isolate
  - I was worried for my job security/financial circumstances if I continued to isolate
  - I returned to work with an exemption/permit
  - I returned to work without an exemption/permit
  - I had no symptoms so thought I could end isolation early
  - I tested negative on a Rapid Antigen Test (RAT) so thought it was OK to finish isolation early
  - I tested negative on a PCR so thought it was OK to finish isolation early
  - I needed to leave isolation early to provide care for others
  - Other, *specify* \_\_\_\_\_
- d) *If Yes to isolate*: Where did you self-isolate?
- At home
  - Hotel
  - Other premises
20. If case: Did someone from the government/DHHS, health service or a community service contacted you by any means in the 7days of your isolation period(i.e., phone, SMS, door knock)?
- Yes
  - No
  - Prefer not to say
21. *If Yes to contacted*: Do you know who contacted you? *Select all that apply*
- DHHS/government
  - Health service (e.g. hospital)
  - Community service
  - Other
  - Don't know
22. *If contacted*: How were you contacted? *Select all that apply*
- Phone call
  - SMS
  - Door knock
  - Email
  - Other, *specify* \_\_\_\_\_
23. *If contacted*: What was the contact in regard to? *Select all that apply*
- COVID-19 test results
  - Your health
  - Isolation/quarantine
  - To notify you that you are a close contact of someone with COVID-19
  - Contact tracing—to discuss who you were in close contact with while you were infectious
  - To discuss access to essential needs (e.g., food, medicine)
  - Related to the health or tests results of your child
  - Other, *specify* \_\_\_\_\_

<i>If Case: The following questions ask about your ability to self-contact trace after testing positive to COVID-19</i>	None	Some	Most	All
24. How many of your household / household-like contacts did you inform to get tested and isolate for seven days?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
25. How many of your social contacts did you inform to monitor for symptoms and get tested if any develop?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

26. *If household contact:* Were you able to effectively separate from the person(s) with COVID-19 in your household? (e.g., stay in a different room, sleep in a separate bedroom, use a separate bathroom where possible, maintain distance)
- Yes
- No
- Don't know
27. *If household contact:* Did you stay home (self-quarantine) after being told you were a household/household-like contact?
- Yes
- No
- Prefer not to say
- a) *If yes:* How many days did you stay home (self-quarantine)?  
[Enter number from 1 to 8 or more]
- b) *If yes:* Did you follow the recommendation and test for COVID-19 on Day 1 and 6 after exposure?
- Yes
- No
- Prefer not to say
28. *If household contact:* Did you leave home in the 7 days after being told you were a household/household-like contact?
- Yes
- No
- Prefer not to say
- a) *If Yes:* Which of the following government recommendations for household/household-like contacts were you able to follow? [Select all that apply]
- Use a Rapid Antigen Test (RAT) and receive a negative result at least 5 of the 7 days
- Wear a mask indoors when not in your home
- Avoid sensitive settings (health care facilities)
- Notify your employer/education place you were a close contact
- b) *If Yes:* How many Rapid Antigen Tests (RATs) did you take during the 7 days after being notified as a household/household-like contact?  
[Enter a number between 0 and 50]
29. *If household contact and answered yes to left home in the 7 days:* Did you do any of the following during the 7 days after being notified as a household/household-like contact? Select all that apply
- Avoided attending your workplace (i.e., worked from home or took leave)
- Avoided attending your place of education

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- Wore a mask at all times when outside your home
  - Avoided seeing anyone older/vulnerable
  - Changed plans for gatherings with family and/or friends (i.e., changed to an outdoor venue)
  - Left home when you had symptoms potentially related to COVID-19 but tested negative on a Rapid Antigen Test (RAT)
  - Attended your workplace even if you still had symptoms related to your COVID-19 infection
  - Attended community or religious gatherings as normal
  - Attended large gatherings and events as normal
  - Visited family and friends as normal
  - Took public transport
  - Other, specify \_\_\_\_\_
  - Prefer not to say

For peer review only



## Contacts

***If covid case: We would like to know about every person that you had contact with in the period starting two days before you developed symptoms or two days before you first tested positive, whichever came first until you began isolating.***

***If household/household-like contact: We would like to know about every person that you had contact with in the two days before you became aware that you were a household or household like contact.***

**A contact** is defined as someone you either:

- Had a face-to-face conversation with, OR
- Shared a closed space with (e.g. room, car, bus, lift, train carriage), OR
- Had physical contact with (e.g. handshake, hug, kiss, contact sport).

Consider people you live with, people who visited your home, and people you were in contact with when you left home. Don't forget about the times you used public or shared transport.

***Do not include people that you exclusively contacted by phone/video call.***

30. Did you have contact with anyone during this time?

- Yes  
 No

31. Were any of these contacts someone you know by name or someone who you will regularly see again?

- Yes  
 No

32. Please type in the **full name(s)** (First name Last name, if know. Else, nickname) of **every person** you had contact within this time:

- If you had contact with the same person several times during the assigned time period only record them once, and record the total time you spent with them over the time period. Each person you had contact with during this time should have only one line in the diary.
  - List people who you know or are familiar with by First Name and Last Name.
  - Type in the contacts full name, if you know it, in the first box and press "enter" or select the create button.
  - To select previous contacts or your key people, click on the blue box on the right of the text box and search or click on their name in the list.
  - We will then ask a few questions about these contacts in the boxes below.
  - If you don't know their age, then please estimate
  - If you were in contact with people and you only know their first name or don't know by name but will likely regularly see again, list them using a memorable nickname (e.g. Bob the barista). This will make it easier to list them again in future diaries.
- You don't need to list all contacts you had if:
- They are too numerous to list or you don't know them by name (e.g., if you work at a supermarket with many customers)
  - You are a health care worker referring to contact with patients
- You will be asked to summarise these contacts at the end.

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33 34 35 36 37 38 39 40 41 42	<5 5-9 10-14 15-19 20-29 30-39 40-49 50-59 60-69 70-79	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Non-binary <input type="checkbox"/> Unknown	<input type="checkbox"/> Partner (incl. spouse, boyfriend/girlfriend) <input type="checkbox"/> Parent <input type="checkbox"/> Child	<input type="checkbox"/> Live together <input type="checkbox"/> Providing care <input type="checkbox"/> Receiving care <input type="checkbox"/> Buying/receiving food <input type="checkbox"/> Buying/receiving medical supplies	<input type="checkbox"/> Home <input type="checkbox"/> Other private residence <input type="checkbox"/> School/university <input type="checkbox"/> Childcare <input type="checkbox"/> Transport <input type="checkbox"/> Health service <input type="checkbox"/> Shop / retail	<input type="checkbox"/> None <input type="checkbox"/> 1-2 <input type="checkbox"/> 3-5 <input type="checkbox"/> 6-10 <input type="checkbox"/> 11-20 <input type="checkbox"/> 21-100 <input type="checkbox"/> More than 100	<input type="checkbox"/> Indo or Outdoor	<input type="checkbox"/> Less than 5 minutes <input type="checkbox"/> 5 to 14 minutes <input type="checkbox"/> 15 to 60 minutes	<input type="checkbox"/> Less than 5 minutes <input type="checkbox"/> 5 to 14 minutes <input type="checkbox"/> 15 to 60 minutes <input type="checkbox"/> 1 to 2 hours <input type="checkbox"/> 2 to 8 hours	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not necessary (i.e. did not)

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3	80+	<input type="checkbox"/> Grandparent <input type="checkbox"/> Grandchild <input type="checkbox"/> Sibling <input type="checkbox"/> Other family member <input type="checkbox"/> Friend <input type="checkbox"/> Work colleague <input type="checkbox"/> Client/patient <input type="checkbox"/> Classmate <input type="checkbox"/> Carer <input type="checkbox"/> Healthcare provider <input type="checkbox"/> Partner/family of someone I live with <input type="checkbox"/> Other	<input type="checkbox"/> Non-essential shopping <input type="checkbox"/> Medical <input type="checkbox"/> Work <input type="checkbox"/> Study/education <input type="checkbox"/> Social <input type="checkbox"/> Sport/exercise <input type="checkbox"/> Worship/religions <input type="checkbox"/> Other, <i>specify</i> _____	<input type="checkbox"/> Restaurant / café <input type="checkbox"/> Bar / nightclub <input type="checkbox"/> Indoor sports / recreational facility (e.g. gym) <input type="checkbox"/> Entertainment facility (e.g. cinema, music/arts venue) <input type="checkbox"/> Public space (e.g. park, beach, sports field) <input type="checkbox"/> Place of worship <input type="checkbox"/> Workplace not otherwise listed (e.g. office, factory) <input type="checkbox"/> Other, <i>specify</i> _____	<input type="checkbox"/> 1 to 2 hours <input type="checkbox"/> 2 to 8 hours <input type="checkbox"/> More than 8 hours	<input type="checkbox"/> More than 8 hours	have contact for at least 4 hours indoors)
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3 [add contact] [complete contact diary]

4 The following questions ask about contacts you were unable to list from **within** the two days  
5 before you developed COVID-19 symptoms or were notified as a household/household-like  
6 contact until you began isolating because you had contact with a large number of people or  
7 people you don't know by name.  
8

9 33. Have you included all contacts you had?

- 10  Yes >> End of survey  
11  No

12 34. If, no, what was the setting of these additional contacts?

- 13  Home, estimated number: \_\_ \_\_  
14  Other private residence, estimated number: \_\_ \_\_  
15  School/university, estimated number: \_\_ \_\_  
16  Childcare, estimated number: \_\_ \_\_  
17  Transport, estimated number: \_\_ \_\_  
18  Health service, estimated number: \_\_ \_\_  
19  Shop / retail, estimated number: \_\_ \_\_  
20  Restaurant / café, estimated number: \_\_ \_\_  
21  Bar / nightclub, estimated number: \_\_ \_\_  
22  Indoor sports / recreational facility (e.g. gym) , estimated number: \_\_ \_\_  
23  Entertainment facility (e.g. cinema, music/arts venue) , estimated number: \_\_ \_\_  
24  Public space (e.g. park, beach, sports field) , estimated number: \_\_ \_\_  
25  Place of worship, estimated number: \_\_ \_\_  
26  Workplace not otherwise listed (e.g. office, factory) , estimated number: \_\_ \_\_  
27  Other, *specify* \_\_\_\_\_, estimated number: \_\_ \_\_

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29 35. *If positive case:* How many additional contacts would be considered household or household-like  
30 contacts?

- 31  Estimated number: \_\_\_\_

32 36. *If additional household contacts is not zero and positive case:* Of these household or household-like  
33 contacts, approximately how many were you able to inform needed to get tested and isolate?

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## Supplementary file 4 – A - Snapshot Surveys - Rapid vaccination

<b>1. Thinking generally (your experiences and/or those of the people around you), to what extent do you agree or disagree that the following <u>act as barriers to people getting vaccinated against COVID-19?</u></b>						
	Totally Agree	Somewhat Agree	Neutral	Somewhat Disagree	Totally Disagree	Prefer not to say
The time it takes for people to book a vaccination appointment						
The time it takes for people to attend a vaccination appointment						
Finding a convenient vaccination location close to people's homes or where they work						
People being concerned about lost income/money because they need to take time off work to get vaccinated or if they get side effects						
People being concerned about losing their job or shifts because of the need to take time off work						
Vaccination not being important in people's lives compared to other demands						
People believing they are currently at low risk of getting COVID, getting seriously ill from COVID or passing on COVID						
People believing there is a lack of available vaccine making it hard to book an appointment						

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People not being able to access the vaccine they would prefer						
People being concerned about vaccine side effects						
People being concerned about the COVID vaccine safety						
People can't get information about the vaccine that is easy to understand, plain and clear.						
People can't get information about the vaccine in their own language of choice.						
People believing the COVID vaccines don't work well enough						
People being hesitant or suspicious of any vaccines – not just COVID vaccines						
People being suspicious about why the government wants everyone to get vaccinated						
People don't like the idea of being forced to get a vaccine (i.e. vaccine passports or mandatory vaccination) as it infringes on their personal freedoms and civil liberty.						

**2. Thinking generally (your experiences and/or those of the people around you), to what extent do you agree or disagree that the following would motivate people to get vaccinated?**

	Totally Agree	Somewhat Agree	Neutral	Somewhat Disagree	Totally Disagree	Prefer not to say
Receiving clear and brief information that getting vaccinated will protect <b>them</b> from getting COVID						
Receiving clear and brief information that getting						

1 2 3 4 5 6	vaccinated will protect <b><u>other people</u></b> from getting COVID					
7 8 9 10 11 12 13 14	Receiving clear and brief information that getting vaccinated will protect <b><u>other people who can't currently get vaccinated</u></b> from getting COVID (e.g., children aged under 12)					
15 16 17 18 19 20 21	Receiving information about the benefits of the vaccine from a trusted person (e.g. family member, doctor, local faith leader or community leaders)					
22 23 24 25	Getting vaccinated means you can safely visit and socialise with family and friends					
26 27 28 29	Getting vaccinated means you can attend places of worship					
30 31 32 33 34 35 36 37	Getting vaccinated means you can attend special events such as weddings and cultural festivals (e.g. Chinese New Year or Eid al-Adha)					
38 39 40	Getting vaccinated means you can travel between states					
41 42 43 44	Getting vaccinated means you can travel overseas					
45 46 47 48 49 50	Getting vaccinated means you can attend sporting events, theatres, concerts and other entertainment venues					
51 52 53 54 55	Getting vaccinated means you can enter restaurants, pubs and other hospitality venues					
56 57 58 59 60	Getting vaccinated means you can work if a workplace mandated vaccination					

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<b>3. Which of the following are the best ways to encourage people to get vaccinated sooner? You can select up to five (5) options.</b>	
Offering vaccinations in workplaces	
Offering vaccinations through local cultural or community hubs and/or places of worship	
Offering vaccinations to students and their families through schools	
Offering vaccinations through local sporting clubs	
Offering vaccinations at shopping centres and supermarkets	
Providing access to translators and people who speak community languages at vaccination centres	
Ensuring people do not need to wait for weeks after booking an appointment to get vaccinated	
Paying people an incentive to get vaccinated	
Paying compensation to people for lost income because of the need to take time off work to get vaccinated	
Paying people small non-monetary incentives to get vaccinated, such as phone credits or retail vouchers	



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4. **Which of the following are the best sources of information to improve people's knowledge about a COVID-19 vaccine and counter misinformation? You can select up to five (5) options.**

Mainstream media (e.g., radio, print, television in English)	
Multicultural media in languages other than English	
Social media (e.g., Facebook, Twitter, SnapChat, Instagram, TikTok, WeChat)	
Community-based social media groups (e.g. WhatsApp, WeChat, Messenger, Telegram, Signal)	
Politicians	
Doctors and other health professionals	
Local community leaders	
Local church and faith leaders	
Entertainment or sporting personalities	
Friends and family	

## Supplementary file 4 – B - Snapshot Surveys - Rapid Return to School 2022 Survey

### Rapid Return to School 2022 survey

#### Screening

With a high number of COVID-19 cases in the community, the Victorian government is interested in knowing what can be done to reduce the spread of infection whilst keeping schools open. We are interested in the experiences and thoughts of all the Optimise participants; however, there are options of 'Not sure' or 'Not applicable' for all questions because we know not all Optimise participants are parents or guardians or may not have much experience with children returning to school.

1. Are you the parent or legal guardian of any of the following? *Select all that apply*  
(For each: enter how many in each category. 1–5)
  - a. Child(ren) aged 0 to 5 years who are not enrolled at preschool/kindergarten/primary school)
  - b. Child(ren) enrolled at preschool/kindergarten
  - c. Child(ren) enrolled at primary school
  - d. Child(ren) enrolled at secondary school
  - e. Child(ren) enrolled at a specialist school
  - f. Child(ren) aged 5 to 23 years and not currently enrolled at primary or secondary school or a specialist school
  - g. Child(ren) older than 23 years
  - h. Child(ren) aged 5–18 who are normally home-schooled outside of COVID-19 restrictions
  - i. I am not a parent or legal guardian
2. Do you work at a kindergarten, primary or secondary school?
  - a. Yes
  - b. No
  - c. Prefer not to say
3. [If 2 == yes] What level of school do you work at?
  - a. Preschool/kindergarten
  - b. Primary school
  - c. Secondary school
  - d. Specialist School
  - e. Other

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6 People with COVID-19 infection can have severe symptoms, mild symptoms, or no symptoms.  
7 Rapid antigen tests can detect COVID-19 in people regardless of whether they have symptoms or not.  
8 The individual can do the test themselves using a nasal/saliva swab (a cotton swab on a long handle  
9 that gets inserted into the nose/mouth) without the need to visit a healthcare facility. The test results  
10 are available in 15 minutes. The test is suitable for all ages.  
11 Regular testing of school students might help detect cases that occur in schools more quickly and may  
12 reduce the transmission of COVID-19 within the school environment. In addition, regular testing  
13 following contact with a child or teacher with COVID-19 infection may enable school students to stay  
14 at school rather than isolate at home.  
15 Governments in Australia and around the world are using rapid antigen tests for testing school  
16 students because they are safe, easy to use, can give quick results and reduce the need to close  
17 schools if there is a single case of COVID-19.  
18 We are interested in your views on this issue.  
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24 Question 1. Biggest concerns

25 **Which of the following were your biggest concerns about schools returning for Term One 2022? Select up to three (3)**  
26 *options.*

27 I did not have any concerns about schools returning for Term One 2022	
28 Frequency of testing being recommended	
29 Children contracting COVID-19	
30 Vaccination levels in the school	
31 Air quality in classrooms	
32 Disruptions to onsite learning (i.e., school closures)	
33 Masks being worn properly in classrooms	
34 Parents not having enough information about the number of students in the school 35 with COVID-19	
36 Parents not having enough information to know what to do if their child is exposed to 37 COVID-19	

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## Question 2. Mask use in schools

Children aged eight years and older are currently required to wear masks of any kind (including cloth) in the classroom, but surgical and N95 masks are recommended to be worn.

**Thinking about mask use by children, how often do you think the following is happening or could happen in the classroom?**

	Always	Most of the time	Sometimes	Never	Don't know/Not sure
Children, aged <b>8 years and older</b> , <b>are</b> wearing any masks (including cloth) properly (over the mouth and nose) while in the classroom					
Children aged <b>8 years and older</b> <b>could</b> wear a surgical or N95 mask properly (over the mouth and nose) while in the classroom					
Children aged <b>5–7 years</b> <b>could</b> wear masks of any kind (including cloth) properly (over the mouth and nose) while in the classroom					

## Question 3. COVID-19 prevention in schools

<b>To what extent do you agree or disagree with the following statements about COVID-19 prevention measures in both primary and secondary schools?</b>						
	Totally Agree	Somewhat Agree	Neutral	Somewhat Disagree	Totally Disagree	Don't know/ Not sure
It is acceptable to ask children aged 8 years and older to wear a surgical or N95 mask in the classroom						
Keeping classrooms at a comfortable temperature would make it easier for children to wear any type of mask in the classroom.						
Keeping classrooms at a comfortable temperature would make it easier for children to wear a surgical or N95 mask in the classroom.						
It is acceptable to send children to primary or secondary school, if there was a confirmed case of COVID-19 detected at the <i>school</i> , <b>but not in the child's class</b>						
It is acceptable to send children to primary or secondary school, if there was a confirmed case of COVID-19 detected <b>in the child's class</b>						

## Question 4. Acceptability of testing frequency

Testing in kindergartens and schools is currently voluntary for students aged three and older. Staff and students are recommended to test twice weekly via Rapid Antigen Tests provided for free by the school.

**To what extent do you agree or disagree that the following testing methods are acceptable in primary and secondary schools?**

	Totally Agree	Somewhat Agree	Neutral	Somewhat Disagree	Totally Disagree	Prefer not to say
Recommending students test twice a week on a voluntary basis (the current recommendation)						
Recommending twice weekly testing until at least the end of Term One						
Recommending twice weekly testing until there are fewer than 5,000 cases per day in Victoria						
Recommending twice weekly testing until there are fewer than 2,000 cases per day in Victoria						
Recommending twice weekly testing only when there is an outbreak at the student's school						
Recommending students test only when the student has COVID-19-like symptoms						
<b>Requiring</b> students to test twice a week, with proof of negative test required to attend school						
<b>Requiring</b> students to test if they are in the class of a confirmed positive case						

## Question 5. Acceptability of closing schools due to COVID-19 case numbers

To what extent do you agree that the following responses would be acceptable based on COVID-19 prevalence in the community?						
	Totally Agree	Somewhat Agree	Neutral	Somewhat Disagree	Totally Disagree	Prefer not to say
Closing schools for <b>one week</b> when community cases in Victoria exceed <b>10,000</b> cases per day						
Closing schools for <b>one week</b> when community cases in Victoria exceed <b>20,000</b> cases per day						
Closing schools for <b>two weeks</b> when community cases in Victoria exceed <b>10,000</b> cases per day.						
Closing schools for <b>two weeks</b> when community cases in Victoria exceed <b>20,000</b> cases per day.						
Closing schools for the <b>entire time</b> community cases in Victoria exceed <b>10,000</b> cases per day.						
Closing schools for the <b>entire time</b> community cases in Victoria exceed <b>20,000</b> per day.						
Having students attend school on alternate days to reduce density the <b>entire time</b> cases in Victoria exceed <b>10,000</b> cases per day						
Having students attend school on alternate days to reduce density the <b>entire time</b> cases in Victoria exceed <b>20,000</b> cases per day						
Keep schools open regardless of the community case numbers of COVID-19						

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We are interested in the experiences and thoughts of all the Optimise participants. The following questions are specific to people that are parent, guardians, or care givers of children, but you can answer **thinking about the experiences of parents, guardians, or care givers you know** and there are options of 'Not sure' or 'Not applicable' because we know not all Optimise participants are parents or guardians or may not have much experience with children returning to school.

Question 6. Household testing

Testing in kindergartens and schools is currently voluntary for students aged three years and older. Staff and students are recommended to test twice weekly via Rapid Antigen Tests provided for free by the school.

**How often is your household likely to participate in twice weekly testing under the following circumstances?**

	Always	Most of the time	Sometimes	Never	Don't know/ Not sure	Not Applicable
If it is <b>recommended</b> by the government, as is currently in practice						
If it is <b>required</b> by the government						
If the government provides <b>nasal</b> swab tests						
If the government provides <b>saliva</b> tests						



## Question 7. Barriers to tests and masks

To what extent do you agree with the following statements about the current implementation of testing in schools?							
	Totally Agree	Somewhat Agree	Neutral	Somewhat Disagree	Totally Disagree	Prefer not to say	Not Applicable
I have had enough Rapid Antigen Tests to do the recommended amount of testing (noting that twice-weekly testing is recommended in mainstream schools and daily testing is recommended in specialist schools)							
I am confident myself or my child are performing the Rapid Antigen Test properly							
I have received adequate information about the COVID-19 testing requirements for school children							
I find the current testing requirements manageable							
One or more of my children find nasal tests too invasive to perform the test							
If my child had a positive Rapid Antigen Test, I would know how to report it to the school.							
If my child had a positive rapid antigen test (RAT) I would report it to the Victorian Government							
COVID-19 prevention measure of recommending or requiring Rapid Antigen tests is inclusive of children with disabilities							
COVID-19 prevention measure of recommending or requiring Rapid Antigen tests is inclusive of children who speak a language other than English at home							

Question 8. Mask use in practice

To what extent do you agree with the following statements about the current implementation of mask use in schools?							
	Totally Agree	Somewhat Agree	Neutral	Somewhat Disagree	Totally Disagree	Prefer not to say	Not Applicable
I have adequate access to surgical/N95 masks for my children to wear at school							
One or more of my children have difficulty wearing masks in the classroom because they are uncomfortable							
One or more of my children have difficulty wearing masks in the classroom because it is too hot							
One or more of my children have difficulty wearing masks in the classroom because they don't fit properly							
One or more of my children have difficulty wearing masks in the classroom due to health reasons (e.g., sensory sensitivities, respiratory conditions)							
COVID-19 prevention measure of requiring mask use is inclusive of children with disabilities							
COVID-19 prevention measure of requiring mask use is inclusive of children who speak a language other than English at home							

## Question 9.

It is recommended in Victorian schools to make physical changes to ventilation, airflow, classroom structures and/or operations to reduce the risk COVID-19 transmission.

**To your knowledge, has the school/s that one of more of your children attend made these changes?**

- a. All of them
- b. Most of them
- c. Some of them
- d. None of them
- e. I don't know/not sure
- f. Not applicable to me

For peer review only

**Supplementary file #4 – C - Snapshot Surveys – Summer Snapshot Surveys****Summer Snapshot Survey**

With the large increases in the number of people with COVID-19 during the 2021/2022 summer, the Victorian community faced many challenges navigating how to reduce the risk of infection and spread.

We are interested in your individual experiences of the pandemic during January 2022, particularly the challenges of testing, self-isolation, and how you made decisions around attending events or gatherings whilst at the same time trying to reduce your risk of infection.

The information we are gathering here is information is crucially important for government to understand and respond to the issues being experienced by Victorians

**1. Did you test positive for COVID-19 during January 2022?**

- a. Yes, on Rapid Antigen Test (RAT) only
- b. Yes, on PCR test only
- c. Yes, on both a Rapid Antigen Test (RAT) and a PCR test
- d. No
- e. Prefer not to say

**2. How many times did you test negative on a COVID-19 PCR test during January 2022?**

[Enter number from 0 to 50]

**3. How many times did you test negative on a Rapid Antigen Tests/s (RAT) during January 2022?**

[Enter number from 0 to 50]

**4. Were you a close (household or household-like) contact of someone who tested positive for COVID-19 during January 2022?**

**Reminder, close contact**, now called a household or household-like contact has spent more than four hours with someone who tested positive for COVID-19 inside a house, accommodation, or care facility.

- a. Yes
- b. No
- c. Prefer not to say

## Testing

<p><b>5. Thinking about all the times you tested for COVID-19 during January 2022 (PCR and/or Rapid Antigen Test [RAT]), what were your reason/s for testing? (select all that apply)</b></p> <p><b>Reminder, close contact</b>, now called a household or household-like contact has spent more than four hours with someone who tested positive for COVID-19 inside a house, accommodation, or care facility.</p>	
I did not get tested during January 2022	
I had COVID-19-like symptoms whilst in isolation because I was a close contact	
I had COVID-19-like symptoms but was not a close contact (so not required to isolate)	
I did not have COVID-19-like symptoms but was in isolation because I was close contact	
I did not have COVID-19-like symptoms but was an "other contact" (e.g., social, workplace, education) and so decided to test	
I did not have COVID-19-like symptoms and was a close contact, but I had an exemption to return to work and was asked to test every day for five days (e.g., essential worker exemption)	
I routinely test as part of my work	
I had to test to attend a healthcare appointment or similar	

I had to test for interstate or overseas travel	
I did test/s for my own peace of mind (that is, none of the reasons above)	

### Experiences

<p><b>6. Which of the following experiences did you have during January 2022? (select all that apply)</b></p> <p><b>Reminder</b>, the requirement to submit a positive Rapid Antigen Test (RAT) result began on the 6<sup>th</sup> January 2022.</p>	
I had a positive PCR and/or rapid antigen test (RAT) and was able to personally contact <b>all my close contacts</b> within one to two days to let them know	
I had a positive PCR and/or Rapid Antigen Test (RAT) and was able to personally contact <b>most of my close contacts</b> within one to two days to let them know	
I had a positive PCR and/or Rapid Antigen Test (RAT) and was able to personally contact <b>some of my close contacts</b> within one to two days to let them know	
I had a positive PCR and/or Rapid Antigen Test (RAT) and was <b>not</b> able to personally contact <b>any of my close contacts</b> within one to two days to let them know	
I tested positive on a Rapid Antigen Test (RAT) in Victoria, before 6th January 2022, but was unable to get a confirmatory PCR test	
I tested positive on a Rapid Antigen Test (RAT) in Victoria, after 6th January 2022, and reported it to the Victorian Government	
I tested positive on a Rapid Antigen Test (RAT) in Victoria, after 6th January 2022, and did not report it to the Victorian Government	

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4	I tested positive on a PCR and/or Rapid Antigen Test (RAT) and found it
5	challenging to meet the requirement to isolate for seven days
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9	I had COVID-19-like symptoms, was unable to get tested for either PCR or
10	Rapid Antigen Test (RAT), but isolated for seven days anyway
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14	I had COVID-19-like symptoms, was unable to get tested for either PCR or
15	Rapid Antigen Test (RAT), and did not isolate
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19	I was a close contact but was unable to get tested by either PCR or Rapid
20	Antigen Test (RAT)
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24	I had COVID-19 like symptoms and/or was a close contact but was delayed in
25	getting a <b>PCR</b> test for more than two days because the testing sites were not
26	open or closed while I was in the queue
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30	I had COVID-19 like symptoms and/or was a close contact but was delayed in
31	getting tested for more than two days because I could not buy or access a
32	Rapid Antigen Test (RAT)
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35	None of the above events apply to me
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<b>7. How often did the following apply to you and/or your dependants during January 2022?</b>						
	Always	Most of the time	Someti mes	Never	Prefer not to say	Not applica ble
Tested with a PCR and/or a Rapid Antigen Test (RAT) test when COVID-19-like symptoms occurred						
Had access to a Rapid Antigen Test (RAT) when I needed to test						
Rapid Antigen Tests (RAT) were too expensive for me to buy when I needed them including for family members						

peer review only

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## Risk reduction

8. During January 2022, how often did you do the following?						
	Always	Most of the time	Sometimes	Never	Prefer not to say	Not Applicable
Avoided <b>outdoor</b> gatherings with family and friends due to concerns about COVID-19						
Avoided <b>indoor</b> gatherings with family and friends due to concerns about COVID-19						
Avoided social gatherings with those vulnerable to COVID-19 (e.g., elderly, immunocompromised people)						
Asked others to take a rapid antigen test (RAT) prior to attending a social gathering						
Avoided any crowded place						
Avoided going to bars and restaurants						
Avoided taking public transport						
Wore a mask when required to do so						
Stayed physically distanced at 1.5 m in public areas						
Stayed physically distanced at 1.5m at gatherings with family and friends						

9. During the December-January period, did you do any of the following in the lead up to a significant cultural/family event (Christmas Eve or Day, New Year, Lunar New Year, etc.)?	
Took a PCR or Rapid Antigen test (RAT) to check I was negative before attending an event	
Strictly isolated for several days before the event to reduce my chance of catching COVID-19 and not being able to attend the event	
Reduced social activity for several days before the event to reduce my chance of catching COVID-19 and not being able to attend the event	
Avoided large crowds for several days before the event to reduce my chance of catching COVID-19 and not being able to attend the event	
Changed the event plans to reduce the risk of COVID-19, e.g., moved from indoors to outdoor settings or reduced the size of the gathering	
None of the above apply to me	

For up to date information on COVID-19 please see the [Department of Health website](#) and/or download the official government “Coronavirus Australia” app. Information is also available in [languages other than English](#).

If you are worried that you or someone in your family may have COVID-19, call the 24/7 hotline on 1800 675 398. You can find out about [symptoms](#) and [where to get tested](#) through the DHHS.

For emotional support, [Beyond Blue](#) (1800 512 348) and [Lifeline](#) (13 11 14) offer tips, brief counselling and referrals. If you are struggling to cope, you can reach out to a counsellor at the [Suicide Call Back Service](#) on 1300 659 467.

For help and support for domestic or family violence and abuse, contact [1800RESPECT](#) on 1800 373 732, [Safe Steps](#) on 1800 015 188 or [inTouch Multicultural Centre against Family Violence](#) on 1800 755 988.

If you are experiencing financial hardship during the COVID-19 pandemic, you can apply for [financial assistance](#). You can also visit the [WIRES](#) website or the [Salvation Army](#) to find out about financial resources which may be useful to you.

## Supplementary file #4 – D - Snapshot Surveys – Impact of removing COVID-19 restrictions

### Examining the impact of removing COVID-19 public health orders on COVID-19 isolation, quarantine and testing

In March 2020 the Victorian Government declared a State of Emergency to combat COVID-19 and help to provide the Chief Health Officer with the powers needed to manage the pandemic. The State of Emergency framework was designed to respond to serious but short-term events.

In December 2021 the State of Emergency ended and was replaced by the pandemic management framework. This legislation is specifically designed to assist in the prevention and management of public health risks posed by pandemics (COVID-19 and future pandemics). A pandemic declaration was made by the Premier that came into effect on 15 December 2021 giving the Victorian Minister for Health the authority to make pandemic orders to protect public health for Victoria and combat COVID-19.

Over the course of the COVID-19 pandemic there have been various Government-issued pandemic orders, including requirements to wear a face mask, requirements that people who have COVID-19 to stay at home, limiting the amount of people who can go to a venue, and orders aimed at protecting people most at risk of serious illness, for example, by limiting entry to aged care facilities. Failure or refusal to comply with these orders has the potential to result in penalties (e.g. fines).

Unless extended, the Pandemic Declaration currently in place is due to expire at 11.59pm 12 July 2022. If this was to happen, pandemic orders will no longer be able to be issued by the Minister for Health.

#### Screening

1. Have you ever tested positive for COVID-19?
  - a. Yes
  - b. No
  - c. Prefer not to say
2. Have you received two or more COVID-19 vaccinations?
  - a. Yes
  - b. No
  - c. Prefer not to say
3. Are you currently required to attend your workplace (i.e., cannot work from home)?
  - a. Yes
  - b. No
  - c. I am not currently employed
  - d. Prefer not to say
4. When was your most recent COVID-19 infection?
  - a. I have never been infected
  - b. <3 months ago
  - c. 3–6 months ago
  - d. 6–12 months ago
  - e. >12 months ago

**The following questions relate to the current pandemic declaration and requirements**

**Testing positive for COVID**

**5. Under the current pandemic declaration and requirements (by Public Health Orders), if you tested positive for COVID-19, how likely would you be to do the following in the 7-days after testing positive?**

	Very Likely	Likely	Neutral	Unlikely	Very Unlikely	Don't know/ Not sure	Not applicable
Stay home (self-isolate) for 7 days from testing positive regardless of symptoms							
Stay home (self-isolate) only for the days that you have symptoms related to your COVID-19 infection							
Inform your household/household-like contacts of your positive result							
Notify your employer or education facility of your positive test result							
If you were to leave home, wear a face mask indoors when not at your home							
If you were to leave home, avoid specific settings (e.g., hospitals or care facilities)							
If you were to leave home, avoid seeing anyone older/vulnerable							
Attend your workplace even if you still had symptoms related to your COVID-19 infection							
Attend your workplace <b>only</b> if you no longer had symptoms related to your COVID-19 infection							

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Leave home to shop for groceries and supplies							
Visit your family and friends as normal							
Attend large gatherings and events as normal							
Take public transport							

For peer review only

**Household/household-like contacts of person with COVID-19**

Currently, household/household-like contacts don't have to quarantine at all during the 7-day period since exposure, and can leave home each day provided they can meet the following requirements:

1. Continually test negative using a rapid antigen test (RAT), on at least 5 days out of the 7-day period (ensuring tests are spaced at least 24 hours apart)
2. Wear a face mask indoors when outside their home
3. Avoid sensitive settings (e.g., do not visit hospitals or care facilities)
4. Notify their employer or education facility

If contacts do not follow these steps, they must quarantine for the 7-day period and are required to get tested on Day 1 and Day 6.

<https://www.health.vic.gov.au/covid-19/quarantine-isolation-and-testing-order>

<https://www.coronavirus.vic.gov.au/checklist-contacts>

**6. Under the current pandemic declaration and requirements (by Public Health Orders), if you were a COVID-19 household/household-like (close) contact, how likely would you be to do the following in the 7-days after being exposed to COVID-19?**

	Very Likely	Likely	Neutral	Unlikely	Very Unlikely	Don't know/ Not sure	Not applicable
Stay home (self-quarantine) for 7-days from exposure to a positive COVID-19 case							
Stay home (self-quarantine) on any days you have symptoms potentially related to COVID-19.							
If you were to leave home, follow <u>all</u> the current requirements described above (rapid antigen test (RAT) negative, wear a face mask, avoid care facilities, notify employer/education place)							
Leave home if you have symptoms potentially related to COVID-19 but test negative on a rapid antigen test (RAT)							
Continue to follow the current requirements and use a rapid antigen test (RAT) for at least 5 of the 7 days from your exposure							
Use a rapid antigen test (RAT) <b>only</b> if you develop symptoms potentially related to COVID-19							
If you were to leave home, wear a face mask indoors when not at your home							

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4	If you were to leave home, avoid							
5	visiting sensitive settings (e.g.,							
6	hospitals or care facilities)							
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8	If you were to leave home, avoid							
9	seeing anyone older/vulnerable							
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12	Notify your employer or education							
13	facility you are a							
14	household/household-like (close)							
15	contact							
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17	Attend your workplace even if you							
18	have symptoms potentially related							
19	to a COVID-19 infection							
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21	Attend your workplace only if you							
22	do not have symptoms potentially							
23	related to COVID-19							
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26	Leave home to shop for groceries							
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**The following questions relate to if the pandemic declaration ceases**

**Testing positive for COVID**

**7.If the pandemic declaration ceases and you tested positive for COVID-19 and there are recommendations (but not requirements), how likely would you be to do the following in the 7-days after testing positive?**

	Very Likely	Likely	Neutral	Unlikely	Very Unlikely	Don't know/ Not sure	Not applicable
Stay home (self-isolate) for 7 days from testing positive regardless of symptoms							
Stay home (self-isolate) only for the days that you have symptoms related to your COVID-19 infection							
Inform your household/household-like contacts of your positive result							
Notify your employer or education facility of your positive test result							
If you were to leave home, wear a face mask indoors when not at your home							
If you were to leave home, avoid specific settings (e.g., hospitals or care facilities)							
If you were to leave home, avoid seeing anyone older/vulnerable							
Attend your workplace even if you still had symptoms related to your COVID-19 infection							
Attend your workplace only if you no longer had symptoms related to your COVID-19 infection							



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Leave home to shop for groceries and supplies							
Visit your family and friends as normal							
Attend large gatherings and events as normal							
Take public transport							

For peer review only

**Household/household-like contacts of person with COVID-19**

Currently, household/household-like contacts don't have to quarantine at all during the 7-day period since exposure, and can leave home each day provided they can meet the following requirements:

1. Continually test negative using a rapid antigen test (RAT), on at least 5 days out of the 7-day period (ensuring tests are spaced at least 24 hours apart)
2. Wear a face mask indoors when outside their home
3. Avoid sensitive settings (e.g., do not visit hospitals or care facilities)
4. Notify their employer or education facility

If contacts do not follow these steps, they must quarantine for the 7-day period and are required to get tested on Day 1 and Day 6.

<https://www.health.vic.gov.au/covid-19/quarantine-isolation-and-testing-order>

<https://www.coronavirus.vic.gov.au/checklist-contacts>

**8. If the pandemic declaration ceases and you were a COVID-19 household/household-like (close) contact, and there are recommendations (but not requirements), how likely would you be to do the following in the 7-days after being exposed to COVID-19?**

	Very Likely	Likely	Neutral	Unlikely	Very Unlikely	Don't know/ Not sure	Not applicable
Stay home (self-quarantine) for 7-days from exposure to a positive COVID-19 case							
Stay home (self-quarantine) on any days you have symptoms potentially related to COVID-19							
If you were to leave home, follow <u>all</u> the current requirements described above (rapid antigen test (RAT) negative, wear a face mask, avoid care facilities, notify employer/education place)							
Leave home if you have symptoms potentially related to COVID-19 but test negative on a rapid antigen test (RAT)							
Continue to follow the current requirements and use a rapid antigen test (RAT) for at least 5 of the 7 days from your exposure							
Use a rapid antigen test (RAT) <b>only</b> if you develop symptoms potentially related to COVID-19							
If you were to leave home, wear a face mask indoors when not at your home							

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4	If you were to leave home, avoid							
5	visiting sensitive settings (e.g.,							
6	hospitals or care facilities)							
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8	If you were to leave home, avoid							
9	seeing anyone older/vulnerable							
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12	Notify your employer or education							
13	facility you are a							
14	household/household-like (close)							
15	contact							
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17	Attend your workplace even if you							
18	have symptoms potentially related							
19	to COVID-19							
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21	Attend your workplace only if you							
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**These are general question about your views on preventing COVID-19 transmission**

**9. To what extent do you agree or disagree with the following statements about potential COVID-19 prevention measures for people who test positive to COVID-19 and household/household-like contacts**

	Totally Agree	Somewhat Agree	Neutral	Somewhat Disagree	Totally Disagree	Don't know/ Not sure
It would be acceptable to continue <b>requiring</b> all people who test positive for COVID-19 to isolate for 7 days						
It would be acceptable to only <b>recommend</b> that all people who test positive for COVID-19 to isolate for 7 days						
It would be acceptable to <b>require</b> all people who are household or household-like contacts to leave home in their 7-day contact period <b>only</b> if they comply with advice on testing, masks, and settings to avoid etc.						
It would be acceptable to <b>only recommend</b> that all people who are household or household-like contacts to leave home in their 7-day contact period <b>only</b> if they follow advice on testing, masks, and settings to avoid etc.						
It would be acceptable to provide <b>no advice</b> to people who are household or household-like contacts and allow them to make their own choices about quarantine, testing, attending work etc.						
It would be acceptable for different work/education places to decide whether they allow people who tests positive to COVID-19 to attend the workplace						
It would be acceptable to <b>require</b> health and aged care workers who test positive for COVID-19 to not attend work for the 7-days after their test positive						

**These questions are about the need for isolation and quarantine if there was COVID-19 in the community**

**10. To what extent do you agree or disagree to the following statements on isolation and quarantining, based on COVID-19 infections in the community**

	Totally Agree	Somewhat Agree	Neutral	Somewhat Disagree	Totally Disagree	Don't know/ Not sure
If COVID-19 cases in Victoria are consistently >20,000 per day, people positive for COVID-19 should be <b>required</b> to isolate for at least 7 days						
If COVID-19 cases in Victoria are consistently >20,000 per day, household/household-like contacts for COVID-19 should be <b>required</b> to quarantine for at least 7 days						
If hospital admissions for COVID-19 in Victoria consistently increased, people positive for COVID-19 should be <b>required</b> to isolate for at least 7 days						
If hospital admissions for COVID-19 in Victoria consistently increased, household/household-like contacts for COVID-19 should be <b>required</b> to quarantine for at least 7 days						
Regardless of cases or hospitalisation numbers, there should only be <b>recommendations</b> on isolation for people who test positive for COVID-19						
Regardless of cases or hospitalisation numbers, there should only be <b>recommendations</b> on quarantine for people who are household/household-like contacts						

## Supplementary file 4 – E - Snapshot Surveys – Long COVID Snapshot Survey

Some people who have been infected with COVID-19 can experience long-term effects from their infection, known as long COVID or post-COVID conditions. Long COVID can include a wide range of new, returning, or ongoing health problems and these conditions can last weeks, months or years. We are interested in your experiences of and concerns about long COVID. We acknowledge this is only a short survey (to not take up too much of your time) and appreciate that this can only capture some of what can be a complex and challenging situation for people.

### 1. How many times have you had COVID-19 since the start of the pandemic (December 2019)?

(Had COVID-19 means tested positive by PCR or rapid antigen test (RAT) or both, with at least one month since last testing positive)

- a. I have never had COVID-19
- b. Once
- c. Twice
- d. Three times
- e. Four times
- f. Five or more times
- g. Prefer not to say

### 2. When was your most recent COVID-19 infection?

- a. I have never been infected with COVID-19
- b. Less than 1 month ago
- c. One to three months ago
- d. Four to twelve months ago
- e. More than 12 months ago
- f. Prefer not to say

### 3. How many of your family or friends have experienced long COVID?

- a. None
- b. Fewer than five
- c. Five to ten
- d. More than ten
- e. Prefer not to say

### 4. How many of your family or friends have required your support to help them manage their long COVID?

- a. None

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- b. Fewer than five
- c. Five to ten
- d. More than ten
- e. Prefer not to say

For peer review only

**5. To what extent do you agree or disagree with the following statements about long-COVID?**

	Totally Agree	Somewh at Agree	Neutral	Somewh at Disagree	Totally Disagree	Don't know/No t sure
The risk of <b>long COVID</b> motivates me to wear a face mask outside my home						
The risk of <b>long COVID</b> motivates me to maintain physical distancing						
The risk of <b>long COVID</b> motivates me to get vaccinated/stay up-to-date with vaccines						
The risk of <b>long COVID</b> motivates me to work and/or study from home as much as possible						
The risk of <b>long COVID</b> motivates me to avoid attending small social gatherings (i.e., family dinners, holiday parties)						
The risk of <b>long COVID</b> motivates me to avoid large social gatherings (i.e., concerts, large weddings)						
To prevent <b>long COVID</b> it would be acceptable for the Victorian Government to <b>require</b> social distancing in indoor public settings						
To prevent <b>long COVID</b> it would be acceptable for the Victorian Government to <b>require</b> wearing a face mask outside of your own home						
I know where to find information about <b>long COVID</b>						
I know where I could seek health care if I experienced <b>long COVID</b>						
The government is providing enough information about <b>long COVID</b> and the risks associated with having <b>long COVID</b>						



**6. What are your three biggest concerns about long COVID?  
(Select up to three)**

I do not have any concerns about long COVID

I will develop long COVID

I will get repeat COVID-19 infections and develop long COVID because of reinfections

Someone in my family will get long COVID

A vulnerable person I know will get long COVID

Long COVID could affect my physical health

Long COVID could affect my mental health

Long COVID could affect my ability to work and my finances

Long COVID could affect my ability to take care of my family

Healthcare professionals don't know enough about long COVID

Long COVID will result in significant social, economic, and health system burden into the future.

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3 The following section asks some additional questions about personal experiences of long  
4 COVID. The additional questions will be asked only if you have/have had long COVID, and  
5 will take approximately 10 minutes to complete.  
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9 **7. Have you ever experienced long COVID?**

10 (Long COVID is experiencing new health problems that have persisted for more than one  
11 month after being infected with COVID-19)  
12

- 13 a. No >>END  
14 b. Yes, but I would like to end the survey now >>END  
15 c. Yes, and I have been diagnosed with long COVID by a health professional  
16 d. Yes, I think I have/have had long COVID but I have not been diagnosed by a  
17 health professional  
18 e. Prefer not to say>>END  
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23 **8. *If Yes (7c) or Yes (7d):* How many COVID-19 infections did you have prior to developing**  
24 **long COVID (including the infection that you suspect led to long COVID)?**  
25

- 26 a. One  
27 b. Two  
28 c. Three  
29 d. Four  
30 e. Five or more  
31 f. Prefer not to say  
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35 **9. *If Yes (7c) or Yes (7d):* How many COVID-19 vaccinations had you had prior to developing**  
36 **long COVID?**  
37

- 38 a. None  
39 b. One  
40 c. Two  
41 d. Three  
42 e. Four  
43 f. Five  
44 g. Prefer not to say  
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49 **10. *If Yes (7c) or Yes (7d):* How many times have you been reinfected with COVID-19 since**  
50 **you developed long COVID?**  
51

- 52 a. None  
53 b. One  
54 c. Two  
55 d. Three  
56 e. Four  
57 f. Five or more times  
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- g. I've stopped testing
- h. Prefer not to say

**11. *If Yes (7c) or Yes (7d):* How many COVID-19 vaccinations have you had since you developed long COVID?**

- a. None
- b. One
- c. Two
- d. Three
- e. Four
- f. Five or more
- g. Prefer not to say

**12. *If Yes (7c) or Yes (7d):* At their worst, how would you describe the severity of your long COVID symptoms?**

- f. Mild
- g. Moderate
- h. Severe
- i. Prefer not to say

**13. If Yes (7c) or Yes (7d): Which symptoms did you experience or are you continuing to experience?**

**(Select all that apply)**

Please refer to symptoms which were new or have worsened since the COVID-19 infection

Fatigue/extreme tiredness

Cough

Shortness of breath or difficulty breathing

Chest pains

Heart palpitations

Problems with memory or concentration/brain fog

Feelings of pins-and-needles

Sleep difficulties

Muscle and joint pain

Changes to smell or taste

Dizziness when you stand up (light-headedness)

Headaches

Stomach pain

Diarrhea

Hair loss

Rash

Not enough energy to exercise

Changes in menstrual cycles

Depression

Anxiety

Prefer not to say

**14. If Yes (7c) or Yes (7d): Where have you accessed information and/or support for your long COVID?**

**(Select all that apply)**

Have not sought any information or help

General Practitioner (GP)

Specialist doctor

Post COVID clinic

Alternative health care provider (e.g., naturopath, chiropractor etc)

Mental health professional/practitioner

Department of Health: Coronavirus website or hotline

Internet search

Family

Friends

Religious community/groups

Co-workers

Social media (e.g., long COVID Facebook groups)

Website or direct contact with a research organisation

Prefer not to say

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5	<b>15. If Yes (7c) or Yes (7d): What experiences have you had since developing long COVID</b>
6	<b>(Select all that apply)</b>
7	
8	I have not been able to work/study as much as I want to
9	
10	I have had to change jobs
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12	I have lost income
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14	I have been unable to care for people that depend on me
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16	I have socialised less
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18	I have exercised less
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20	I take extra precautions to avoid reinfection
21	
22	My quality of life has declined
23	
24	Changes to my mood
25	
26	Changes to my physical appearance
27	
28	Changes in my personal relationships
29	
30	I have had difficulty accessing specialist healthcare for long COVID
31	
32	I have had difficulty finding information about long COVID that I understand
33	
34	I have had difficulty accessing income support due to long COVID
35	
36	I have not had any of the above experiences since developing long COVID
37	
38	Prefer not to say

39 **For up to date information on COVID-19 please see the Australian Government**  
 40 **[Department of Health and Aged Care website](#) and/or download the official government**  
 41 **[“Coronavirus Australia” app](#). Information is also available in [languages other than English](#).**  
 42 **For further information about long COVID please see the [World Health Organization’s](#)**  
 43 **[website](#).**

44  
 45 **If you are worried that you are someone in your family may have COVID-19, call the 24/7**  
 46 **hotline on 1800 675 398. You can find out about [symptoms](#) and [where to get tested](#)**  
 47 **through Coronavirus (COVID-19) Victoria.**

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 49 **For emotional support, [Beyond Blue](#) (1800 512 348) and [Lifeline](#) (13 11 14) offer tips, brief**  
 50 **counselling and referrals. If you are struggling to cope, you can reach out to a counsellor**  
 51 **at the [Suicide Call Back Service](#) on 1300 659 467.**

52  
 53 **For help and support for domestic or family violence and abuse, contact [1800RESPECT](#) on**  
 54 **1800 373 732, [Safe Steps](#) on 1800 015 188 or [inTouch Multicultural Centre against Family](#)**  
 55 **[Violence](#) on 1800 755 988.**

56  
 57 **If you are experiencing financial hardship during the COVID-19 pandemic, you can apply**  
 58 **for [financial assistance](#). You can also visit the [WIRES](#) website or the [Salvation Army](#) to find**  
 59 **out about financial resources which may be useful to you**

## Supplementary file 4 – F - Snapshot Surveys – Long COVID cohort follow-up snapshot survey

Thank you for your participation in the Optimise Study. You recently informed us that you had been diagnosed with, or suspected you had long COVID (Long COVID is experiencing new health problems that have persisted for more than one month after being infected with COVID-19). We would like to ask you some further questions about your experience of long COVID. To thank you for completing this survey you will be reimbursed \$35.

### Life before long COVID

1. **We would like to know when you developed long COVID. Thinking about the COVID-19 infection that you suspect led to long COVID, what was the first date you tested positive for COVID-19 for that infection?**

(If your infection was not confirmed by a test, please give the date of onset of COVID-19 symptoms.)

[day/month/year chooser from 01 December 2019 to 31 August 2022]

2. **How many times had you been infected with COVID-19 prior to developing long COVID (including the infection that you suspect led to long COVID)?**
  - a. Once – I developed long COVID from my first COVID-19 infection
  - b. Twice
  - c. Three times
  - d. Four times
  - e. Five or more times
3. **How many COVID-19 vaccinations had you had prior to developing long COVID?**
  - a. None
  - b. One
  - c. Two
  - d. Three
  - e. Four
  - f. Five or more

### Experiences of long COVID

4. **Do you still have long COVID?**
  - a. Yes, I am still experiencing symptoms >> go to 6
  - b. No, all my symptoms have completely resolved >> go to 5
  - c. Prefer not to say >> go to 6
5. **[If 4b] How long do you think you had long COVID for? Please give the number of months from the date given in question 1.**

[Numeric answer] months  
[minimum 1, maximum 36]

### Effects of long COVID on life

6. **How many days per week did you spend exercising for 30 minutes or more during the past week?**

[numeric answer between 0 and 7, or 9999 for prefer not to say]

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7. Thinking about how you have been feeling in the past week, in general, would you say your health is:
- Excellent
  - Very good
  - Good
  - Fair
  - Poor
8. Compared to before you developed long COVID, how would you rate your health in general now?
- Much better now than before long COVID
  - Somewhat better now than before long COVID
  - About the same
  - Somewhat worse now than before long COVID
  - Much worse now than before long COVID

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During the past four weeks, as a result of your long COVID, have you had any of the following problems with your work or other regular daily activities?

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9. Cut down the **amount of time** you spent on work or other activities
- Yes
  - No
10. **Accomplished less** than you would like
- Yes
  - No
11. Were limited in the **kind** of work or other activities
- Yes
  - No
12. Had difficulty performing the work or other activities (for example, it took extra effort)
- Yes
  - No

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*For up to date information on COVID-19 please see the Australian Government [Department of Health and Aged Care website](#) and/or download the official government “[Coronavirus Australia](#)” app. Information is also available in [languages other than English](#). For further information about long COVID please see the [World Health Organization’s website](#).*

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*If you are worried that you or someone in your family may have COVID-19, call the 24/7 hotline on 1800 675 398. You can find out about [symptoms](#) and [where to get tested](#) through [Coronavirus \(COVID-19\) Victoria](#).*

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*For emotional support, [Beyond Blue](#) (1800 512 348) and [Lifeline](#) (13 11 14) offer tips, brief counselling and referrals. If you are struggling to cope, you can reach out to a counsellor at the [Suicide Call Back Service](#) on 1300 659 467.*

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*For help and support for domestic or family violence and abuse, contact [1800RESPECT](#) on 1800 373 732, [Safe Steps](#) on 1800 015 188 or [inTouch Multicultural Centre against Family Violence](#) on 1800 755 988.*

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*If you are experiencing financial hardship during the COVID-19 pandemic, you can apply for [financial assistance](#). You can also visit the [WIRES](#) website or the [Salvation Army](#) to find out about financial resources which may be useful to you*



## Supplementary file 5 – A - Qualitative interview guide 1

### Qualitative Interview Guide

*This semi-structured interview guide is designed to explore and understand the participant's experiences during the COVID19 pandemic. The guide aims to cover the following major domains:*

- *Impacts and changes to their usual life and networks*
- *Positives and challenges experienced by these changes*
- *Changes to attitudes, beliefs, and opinions throughout the fluctuating pandemic response*
- *Access to necessities such as income, social connection and support*
- *An understanding of how things could be improved for the future*

*As each participant's experience is both unique and complex and situated within an ever-changing socio-political context and response, the semi-structured nature of this guide will allow researchers to adapt and evolve in real-time alongside the current context. We anticipate that the interview guide will need to expand and evolve to cover context that will be relevant at the time of participant's interviews. The above points have been listed as the most applicable domains coverage for the interview with the participant cohort.*

*We do not plan to submit amendments to the format of the interview guide prior to future adaptive changes inclusive of these domains. If there are new identified domains during the study that the investigators do not deem fit within the submitted interview guide an amendment will be submitted at that time.*

#### **Introduction**

- Your name, background, where you're interviewing from (i.e. private location), confirm that the participant is happy to conduct the interview from where they're located.

Are you happy to conduct the interview from where you're sitting right now? Let me know if this changes at any time during the interview.

#### **Prior to commencing recording**

Confirm participant has received and read the Participant Information and Consent Form (PICF), ask if they have any questions about the study or the list of support services and refresh on the purpose of the study. Explain risk management strategies as outlined in PICF:

I would like to remind you that:

- You are free to not answer any question you don't feel comfortable answering
- You are free to stop participating if you become upset or distressed
- I will be available to talk after the interview if you have any concerns
- I can provide you advice and information about services if you would like any support
- Everything we talk about in this interview is confidential and no identifiable information about you is passed onto the government. We're interested in understanding your experiences and how we can improve the COVID-19 experience for yourself and the community

Thank you for completing our other surveys so far, we've got some of that information so hopefully you won't be repeating yourself.

Any questions so far?

The researchers supervising this work are Professor Margaret Hellard and Professor Lisa Gibbs, the information sheet that we had sent you have their details on page 4 if you have any questions following today's interview that you would like to like to discuss, they would be happy to speak with you.

- Are you Ok for me to start recording? (is yes, start, if no discuss and/or terminate)
- Are you Ok for me to begin the interview? (is yes, start, if no discuss and/or terminate)

## Section 1 - Lived experience of COVID19 pandemic

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1. To start, can you tell me a bit about yourself?

Probe for:

- Living situation – who, where, what, when, why, how long
- Community
- Family/ Friends
- Employment/Income
- Information access
- People who depend on you – physically, emotionally, socially, financially
- People you depend on - physically, emotionally, socially, financially
- Health (including chronic illness, mental health, pregnancy)

2. What has been your experience of the COVID19 pandemic so far?

a. Prompt: how has COVID19 affected you?

3. Can you talk me through a typical day for you right now?

a. Prompt: weekday vs weekend

4. In what ways, if any, has COVID19 changed things for you/since we last spoke?

- Routines and habits
- Positives, challenges, goals, aspirations
- Thoughts, feelings, actions, conversations
- Things that have helped to improve circumstances/make things more manageable

5. In practice how have you found following the restrictions so far?

Probe for;

- Why
- Changes over time
- Responsibility for self and others (necessities, healthy behaviours, family/friends, work, general public)

6. Did the restrictions create any specific issues for you or those around you? If so, can you describe?

a. Prompt: household and other relationships

b. Have there been any changes to your personal safety during COVID-19?

7. Has there been anything surprising or unexpected that has come out of the pandemic for you?

## Section 2 - COVID19 Health Literacy & Risk Perception

8. Do you remember when you first heard about COVID19? What did you think at that time?

Probe for:

- Information access, engagement, quality
- Impact of change on attitudes and behaviours

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4 9. How do you think and feel about COVID19 the disease now?  
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6 Probe for:

- 7 • Perceptions of personal and community risk
- 8 • Knowledge of transmission
- 9 • Knowledge and perceptions of public health response/guidelines
- 10 • Testing
- 11 • Impact on attitudes (fear, safety)
- 12 • Impact on behaviour (relating to themselves and to others)
- 13 • Impact on health and wellbeing
- 14
- 15

### 16 Section 3 - Support

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18

19 10. You have shared a lot about your experience with me today. Looking back on your COVID19  
20 experience so far, if you could change anything, what would you have done differently?  
21

22 11. Can you think of three things that would have helped you to manage things better during the  
23 pandemic restrictions? (Why and how do you think these could have been different?)  
24

25 Probe for;

- 26 • Concerns, barriers, enablers
- 27 • Information, Structures, Services, Policy
- 28
- 29

30 12. If you were going to give advice to a friend about how best to manage these experiences what would  
31 you say to them?  
32

33 13. Is there anything else you would like to say about your experiences of COVID-19?  
34

35 14. What do you think will happen in the next few years with COVID-19?

- 36 a. If a vaccine is made available, would you get it immediately? (why/why not)
- 37 i. Are there any circumstances that would change your mind? (i.e. legislation,  
38 education, views of family/friends, more time, higher number of cases?)
- 39 b. As above for dependents
- 40 c. How do you view a COVID19 vaccine compared to other vaccines, for example, the flu shot  
41 or measles mumps rubella (MMR) vaccine?  
42
- 43
- 44

45 15. What are your plans for the rest of the day/week/next few months?

- 46 a. (Use judgement as to suitability of this question)
- 47
- 48

49 **End recording**

50  
51 Thank you for your time and for providing us with this valued information.

52  
53 We would like to give you a \$50 voucher to thank you for your time. We will send it to the email address  
54 that we have on file. We will also send you a list of support services that we are sending to everyone who  
55 participates in the research - just in case they are needed.  
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## Supplementary file 5 – B - Qualitative focus group discussion guide

# COVID-19 vaccination and testing

## Focus Group Discussion guide

### Overview

*This Focus Group Discussion (FGD) guide is designed to explore and understand the group's experiences of COVID-19 vaccination and testing during the COVID-19 pandemic. The guide aims to cover the following major domains:*

- *Understanding of COVID-19 disease, vaccination and public health measures*
- *Attitudes, beliefs and opinions towards COVID-19 testing after vaccination*
- *Barriers and enablers to accessing information, services and support*
- *Impacts and changes to their usual life and networks*
- *An understanding of how things could be improved for the future*

***NB. The specific questions listed in this discussion guide are potential prompts only, to stimulate discussion in each domain if needed.***

Setting		Date	
No. of participants		Start time	
Facilitator		End time	
Assistant			

### Introduction

- Participant's and facilitator's names
- Purpose of The Optimise Study and the FGD
- Confirmation of receipt and understanding of the Participant Information and Consent Form (PICF) and consent to participate. Opportunity for questions or concerns to be raised.
- Explain risk management strategies as outlined in PICF:

I would like to remind everyone that:

- You are free to not answer any question you don't feel comfortable answering
- You are free to stop participating at any time, especially if you feel upset
- I will be available to talk after the interview if you have any concerns and I can provide you advice and information about services if you would like any support
- Everything we talk about in this interview is confidential and no identifiable information about you is passed onto the government. I encourage you all to respect the privacy and anonymity of the other participants here today including after leaving the discussion here today, this includes not revealing the identities of other participants nor indicating who made specific comments during the discussion.
- Are you OK for me to start the discussion and the recording? (is yes, start, if no discuss and/or terminate)

**START RECORDING**

What has been your experience of the COVID-19 vaccination and rollout so far?

**Understanding of the vaccine and testing requirements**

What has been most helpful to you in understanding what is happening with this pandemic?

What's your understanding of how the vaccine works inside the body?

What's your understanding of how the vaccine works to reduce the spread of COVID-19 in the community?

- a) E.g. reducing severity of disease, hospitalisations and deaths; herd immunity
- b) Effectiveness of vaccines on new strains of the virus

Why is it important that people get tested for COVID-19? When should they be getting tested?

What contribution does waste water testing make to public health measures?

What are your thoughts about workplaces that require staff to get vaccinated?

**Barriers and enablers to testing after receiving the vaccine**

After a person has been vaccinated, what are your thoughts about whether they need to keep getting tested for COVID-19? When should they be getting tested? Are there circumstances where this wouldn't apply or may be less important?

What are some motivations behind getting tested after someone's been vaccinated?

What are some of the barriers to getting tested after someone's been vaccinated?

Can you think of any circumstances that would change whether someone gets tested? (i.e. location of testing centres, long lines at testing centres, higher number of cases, workplace rules, views of family/friends)

Do you feel differently about certain groups like children or the elderly getting tested after being vaccinated?

**Information and access**

Where do you like to receive information about the vaccine and testing requirements?

E.g. ABC News, Vic DoH website, Facebook, friends, colleagues

What do you look for when seeking information about testing requirements?

E.g. signs of credible and reliable information

Do you know how and where you can access vaccinations and testing?

Is there anything more you'd like to know about testing or vaccination? How would you like to receive this information?

**Concerns and support**

Is there anything that concerns you about what happens after receiving the vaccine?

What could be done to alleviate some of these concerns?

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3 For those who might be less likely to be tested after receiving the vaccine, what do you think could be done to  
4 support them and increase the likelihood of getting tested?  
5

6 Is there anything that could improve the current systems for testing and vaccinations?  
7

8 E.g. Information, support, services, improved accessibility, shorter wait times  
9  
10

## 11 The future

12 What do you think will happen in the next few years in relation to COVID-19 and public health measures?  
13  
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16  
17 We're about at the end of the discussion, thank you for sharing so much about your experience with the group  
18 today. Was there anything else anyone would like to share before we finish?  
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## 21 END RECORDING

22 Thank you for your time and for providing us with this valued information.  
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25 We would like to give each of you a \$50 voucher to thank you for your time. We will send it to the email  
26 address that we have on file, you should receive this within the next month.  
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## Supplementary file 5 – C - Qualitative focus group discussion guide

### Long COVID

### Focus Group Discussion guide

#### Overview

*This Focus Group Discussion (FGD) guide is designed to explore and understand the group's experiences of long COVID-19. The guide aims to cover the following major domains:*

- *Understanding of long COVID information and support services*
- *Attitudes, beliefs and experiences of long COVID.*
- *Barriers and enablers to accessing information, services and support for people experiencing long COVID.*
- *Impacts and changes to usual life and networks caused by long COVID.*
- *An understanding of how things could be improved for the future for people who experience long COVID.*

***NB. The specific questions listed in this discussion guide are potential prompts only, to stimulate discussion in each domain if needed.***

<b>Setting</b>		<b>Date</b>	
<b>No. of participants</b>		<b>Start time</b>	
<b>Facilitator</b>		<b>End time</b>	
<b>Assistant</b>			

#### Introduction

- Participant's and facilitator's names
- Purpose of The Optimise Study and the FGD
- Confirmation of receipt and understanding of the Participant Information and Consent Form (PICF) and consent to participate. Opportunity for questions or concerns to be raised.
- Explain risk management strategies as outlined in PICF:

I would like to remind everyone that:

- You are free to not answer any question you don't feel comfortable answering
- You are free to stop participating at any time, especially if you feel upset
- I will be available to talk after the interview if you have any concerns and I can provide you advice and information about services if you would like any support
- Everything we talk about in this interview is confidential and no identifiable information about you is passed onto the government. I encourage you all to respect the privacy and anonymity of the other participants here today including after leaving the discussion here today, this includes not revealing the identities of other participants nor indicating who made specific comments during the discussion.
- Are you OK for me to start the discussion and the recording? (is yes, start, if no discuss and/or terminate)
- Talking about your experiences of long COVID can trigger intense emotions. If you experience distress or discomfort from participating in this focus group, you can take a break any time that you want. If you need more support, I will stay online after the session to see if anyone would like to have a chat,

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3 we also provided information at the end of your participant information letter about relevant support  
4 services.  
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For peer review only



**START RECORDING****Understanding of long COVID**

What has been most helpful to you in understanding what is long COVID?

What's your understanding of how long COVID affects your body?

Do you think people with long COVID should still get tested if they are a close contact or have COVID-related symptoms? When should they be getting tested? Are there circumstances where this wouldn't apply or may be less important?

Should people with long COVID still get the flu vaccine?

What are your thoughts about how workplaces should support employees who are experiencing long COVID?

**Experiences with long COVID**

What has been your experience of long COVID so far?

How did you know you had long COVID?

**Barriers and enablers to getting support for long COVID**

What has worked for you in terms of getting support for long COVID?

What barriers have you encountered in terms of getting support for long COVID?

**Information and access**

Do you know how and where you can access information about long COVID?

Is there anything more you'd like to know about long COVID? How would you like to receive this information?

Where do you like to receive information about long COVID?

E.g. ABC News, Vic DoH website, GP, social media, friends, colleagues.

What do you look for when seeking information about long COVID?

E.g. signs of credible and reliable information

**Concerns and support**

Is there anything that concerns you about what happens when you have long COVID?

What could be done to alleviate some of these concerns?

For those who have long COVID and might be less likely to get support, what do you think could be done to support them and increase the likelihood of getting the help they need?

Is there anything that could improve the current systems for supporting people with long COVID?

E.g. Information, support, services, improved accessibility, shorter wait times

**The future**

What do you think will happen in the next few years in relation to long COVID and public health measures?

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5 We're about at the end of the discussion, thank you for sharing so much about your experience with the group  
6 today. Was there anything else anyone would like to share before we finish?  
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8

9 **END RECORDING**

10  
11 Thank you for your time and for providing us with this valued information.  
12

13 I will remain in the Zoom meeting in case someone would like to have a chat. We can also provide you  
14 information about where to get additional support if you feel that you need it.  
15

16 We would like to give each of you a \$50 voucher to thank you for your time. We will send it to the email  
17 address that we have on file, you should receive this within the next month.  
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## Supplementary file 6 - CEG Questions guides 1

Draft of the results for this month's Optimise Study report

Each month, the Optimise Study selects a specific topic emerging from the study data and prepares a report for the government (and other stakeholders). You can view previous reports here: <https://optimisecovid.com.au/study-findings/>

The topic of this month's report is income and finances. We have attached a draft of this report with this pre-reading pack. Please use the report to prompt your views about the topic in the community you are representing.

During the meeting, we will be asking you the following questions:

1. What are your reflections about any aspect of the Optimise Study's findings on income and finances?

You may like to mention:

- if any of the findings were particularly applicable to the community you represent
- if any of the findings surprised you
- any other reflections

2. How have members of your community been impacted by changes to income and/or finances?

You may like to mention:

- Employment: changes in employment status, changes in job stability, changes in work environment (e.g. working from home, home schooling), other employment issues
- Income: accessing JobSeeker/JobKeeper/other income support, relying on family and friends for income support, other income issues
- Groups in your community who are particularly at-risk of negative impacts to employment and income

3. How secure do members of your community feel their income and finances are? What would help to increase feelings of security?

After the CEG meeting, we will prepare a report for the Executive Group of the Optimise Study which will consider how best to incorporate your views into the final month's report. The report will then be sent to government and other stakeholders.

# Reporting checklist for protocol of a clinical trial.

Based on the SPIRIT guidelines.

## Instructions to authors

Complete this checklist by entering the page numbers from your manuscript where readers will find each of the items listed below.

Your article may not currently address all the items on the checklist. Please modify your text to include the missing information. If you are certain that an item does not apply, please write "n/a" and provide a short explanation.

Upload your completed checklist as an extra file when you submit to a journal.

In your methods section, say that you used the SPIRIT reporting guidelines, and cite them as:

Chan A-W, Tetzlaff JM, Gøtzsche PC, Altman DG, Mann H, Berlin J, Dickersin K, Hróbjartsson A, Schulz KF, Parulekar WR, Krleža-Jerić K, Laupacis A, Moher D. SPIRIT 2013 Explanation and Elaboration: Guidance for protocols of clinical trials. *BMJ*. 2013;346:e7586

		Reporting Item	Page Number
<b>Administrative information</b>			
Title	<a href="#">#1</a>	Descriptive title identifying the study design, population, interventions, and, if applicable, trial acronym	1
Trial registration	<a href="#">#2a</a>	Trial identifier and registry name. If not yet registered, name of intended registry	3
Trial registration: data set	<a href="#">#2b</a>	All items from the World Health Organization Trial Registration Data Set	4-5
Protocol version	<a href="#">#3</a>	Date and version identifier	3
Funding	<a href="#">#4</a>	Sources and types of financial, material, and other support	38
Roles and responsibilities: contributorship	<a href="#">#5a</a>	Names, affiliations, and roles of protocol contributors	1-3, 39

1	Roles and	<a href="#">#5b</a>	Name and contact information for the trial	4
2	responsibilities:		sponsor	
3	sponsor contact			
4	information			
5				
6				
7				
8	Roles and	<a href="#">#5c</a>	Role of study sponsor and funders, if any,	38
9	responsibilities:		in study design; collection, management,	
10	sponsor and funder		analysis, and interpretation of data; writing	
11			of the report; and the decision to submit	
12			the report for publication, including	
13			whether they will have ultimate authority	
14			over any of these activities	
15				
16				
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18				
19	Roles and	<a href="#">#5d</a>	Composition, roles, and responsibilities of	38-40
20	responsibilities:		the coordinating centre, steering	
21	committees		committee, endpoint adjudication	
22			committee, data management team, and	
23			other individuals or groups overseeing the	
24			trial, if applicable (see Item 21a for data	
25			monitoring committee)	
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30	<b>Introduction</b>			
31				
32				
33	Background and	<a href="#">#6a</a>	Description of research question and	8-10
34	rationale		justification for undertaking the trial,	
35			including summary of relevant studies	
36			(published and unpublished) examining	
37			benefits and harms for each intervention	
38				
39				
40				
41	Background and	<a href="#">#6b</a>	Explanation for choice of comparators	N/A - Longitudinal cohort –
42	rationale: choice of			no comparators required.
43	comparators			
44				
45				
46				
47	Objectives	<a href="#">#7</a>	Specific objectives or hypotheses	10-11
48				
49	Trial design	<a href="#">#8</a>	Description of trial design including type	12-13
50			of trial (eg, parallel group, crossover,	
51			factorial, single group), allocation ratio,	
52			and framework (eg, superiority,	
53			equivalence, non-inferiority, exploratory)	
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**Methods:****Participants,  
interventions, and  
outcomes**

Study setting	<a href="#">#9</a>	Description of study settings (eg, community clinic, academic hospital) and list of countries where data will be collected. Reference to where list of study sites can be obtained	11
Eligibility criteria	<a href="#">#10</a>	Inclusion and exclusion criteria for participants. If applicable, eligibility criteria for study centres and individuals who will perform the interventions (eg, surgeons, psychotherapists)	14-15
Interventions: description	<a href="#">#11a</a>	Interventions for each group with sufficient detail to allow replication, including how and when they will be administered	N/A - Longitudinal cohort – no intervention
Interventions: modifications	<a href="#">#11b</a>	Criteria for discontinuing or modifying allocated interventions for a given trial participant (eg, drug dose change in response to harms, participant request, or improving / worsening disease)	N/A - Longitudinal cohort – no intervention
Interventions: adherence	<a href="#">#11c</a>	Strategies to improve adherence to intervention protocols, and any procedures for monitoring adherence (eg, drug tablet return; laboratory tests)	N/A - Longitudinal cohort – no intervention
Interventions: concomitant care	<a href="#">#11d</a>	Relevant concomitant care and interventions that are permitted or prohibited during the trial	N/A - Longitudinal cohort – no intervention
Outcomes	<a href="#">#12</a>	Primary, secondary, and other outcomes, including the specific measurement variable (eg, systolic blood pressure), analysis metric (eg, change from baseline, final value, time to event), method of	27-28

aggregation (eg, median, proportion), and time point for each outcome. Explanation of the clinical relevance of chosen efficacy and harm outcomes is strongly recommended

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8	Participant timeline	<a href="#">#13</a>	Time schedule of enrolment, interventions 19
9			(including any run-ins and washouts),
10			assessments, and visits for participants. A
11			schematic diagram is highly recommended
12			(see Figure)
13			
14			
15			
16	Sample size	<a href="#">#14</a>	Estimated number of participants needed 15-16
17			to achieve study objectives and how it was
18			determined, including clinical and
19			statistical assumptions supporting any
20			sample size calculations
21			
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25	Recruitment	<a href="#">#15</a>	Strategies for achieving adequate 16-17
26			participant enrolment to reach target
27			sample size
28			
29			
30	<b>Methods:</b>		
31	<b>Assignment of</b>		
32	<b>interventions (for</b>		
33	<b>controlled trials)</b>		
34			
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37	Allocation:	<a href="#">#16a</a>	Method of generating the allocation N/A - Longitudinal cohort
38	sequence		sequence (eg, computer-generated random
39	generation		numbers), and list of any factors for
40			stratification. To reduce predictability of a
41			random sequence, details of any planned
42			restriction (eg, blocking) should be
43			provided in a separate document that is
44			unavailable to those who enrol participants
45			or assign interventions
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51	Allocation	<a href="#">#16b</a>	Mechanism of implementing the allocation N/A - Longitudinal cohort
52	concealment		sequence (eg, central telephone;
53	mechanism		sequentially numbered, opaque, sealed
54			envelopes), describing any steps to
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conceal the sequence until interventions  
are assigned

Allocation: [#16c](#) Who will generate the allocation sequence, N/A - Longitudinal cohort  
implementation who will enrol participants, and who will  
assign participants to interventions

Blinding (masking) [#17a](#) Who will be blinded after assignment to N/A - Longitudinal cohort  
interventions (eg, trial participants, care  
providers, outcome assessors, data  
analysts), and how

Blinding [#17b](#) If blinded, circumstances under which N/A - Longitudinal cohort  
(masking): unblinding is permissible, and procedure  
emergency for revealing a participant's allocated  
unblinding intervention during the trial

**Methods: Data  
collection,  
management, and  
analysis**

Data collection [#18a](#) Plans for assessment and collection of 17- 22  
plan outcome, baseline, and other trial data,  
including any related processes to promote  
data quality (eg, duplicate measurements,  
training of assessors) and a description of  
study instruments (eg, questionnaires,  
laboratory tests) along with their reliability  
and validity, if known. Reference to where  
data collection forms can be found, if not  
in the protocol

Data collection [#18b](#) Plans to promote participant retention and 25 -26  
plan: retention complete follow-up, including list of any  
outcome data to be collected for  
participants who discontinue or deviate  
from intervention protocols

Data management [#19](#) Plans for data entry, coding, security, and 26  
storage, including any related processes to  
promote data quality (eg, double data  
entry; range checks for data values).



Reference to where details of data management procedures can be found, if not in the protocol

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5	Statistics: outcomes	<a href="#">#20a</a>	Statistical methods for analysing primary and secondary outcomes. Reference to where other details of the statistical analysis plan can be found, if not in the protocol
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13	Statistics:	<a href="#">#20b</a>	Methods for any additional analyses (eg, subgroup and adjusted analyses)
14	additional analyses		28 – 31 – Qualitative Analysis
15			
16			
17	Statistics: analysis	<a href="#">#20c</a>	Definition of analysis population relating to protocol non-adherence (eg, as randomised analysis), and any statistical methods to handle missing data (eg, multiple imputation)
18	population and		28
19	missing data		
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26	<b>Methods:</b>		
27	<b>Monitoring</b>		
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29	Data monitoring:	<a href="#">#21a</a>	Composition of data monitoring committee (DMC); summary of its role and reporting structure; statement of whether it is independent from the sponsor and competing interests; and reference to where further details about its charter can be found, if not in the protocol. Alternatively, an explanation of why a DMC is not needed
30	formal committee		N/A - Longitudinal cohort so DMC not necessary
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44	Data monitoring:	<a href="#">#21b</a>	Description of any interim analyses and stopping guidelines, including who will have access to these interim results and make the final decision to terminate the trial
45	interim analysis		N/A - Longitudinal cohort so DMC not necessary
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52	Harms	<a href="#">#22</a>	Plans for collecting, assessing, reporting, and managing solicited and spontaneously reported adverse events and other unintended effects of trial interventions or trial conduct
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1	Auditing	<a href="#">#23</a>	Frequency and procedures for auditing trial conduct, if any, and whether the process will be independent from investigators and the sponsor	N/A - Longitudinal cohort with self-reported measures
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8	<b>Ethics and</b>			
9	<b>dissemination</b>			
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11	Research ethics approval	<a href="#">#24</a>	Plans for seeking research ethics committee / institutional review board (REC / IRB) approval	32
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17	Protocol amendments	<a href="#">#25</a>	Plans for communicating important protocol modifications (eg, changes to eligibility criteria, outcomes, analyses) to relevant parties (eg, investigators, REC / IRBs, trial participants, trial registries, journals, regulators)	N/A – Given the changing dynamic of the COVID pandemic & policy environment, we had 42 ethics Amendments which included changes to staff personnel, survey tools, recruitment methods and have all been included in this Version 3.0 dated 24-Aug-2021
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31	Consent or assent	<a href="#">#26a</a>	Who will obtain informed consent or assent from potential trial participants or authorised surrogates, and how (see Item 32)	17
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38	Consent or assent: ancillary studies	<a href="#">#26b</a>	Additional consent provisions for collection and use of participant data and biological specimens in ancillary studies, if applicable	N/A – no assent procedures
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45	Confidentiality	<a href="#">#27</a>	How personal information about potential and enrolled participants will be collected, shared, and maintained in order to protect confidentiality before, during, and after the trial	32- 33
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53	Declaration of interests	<a href="#">#28</a>	Financial and other competing interests for principal investigators for the overall trial and each study site	38
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1	Data access	<a href="#">#29</a>	Statement of who will have access to the	32
2			final trial dataset, and disclosure of	
3			contractual agreements that limit such	
4			access for investigators	
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8	Ancillary and post	<a href="#">#30</a>	Provisions, if any, for ancillary and post-	N/A - Longitudinal cohort
9	trial care		trial care, and for compensation to those	
10			who suffer harm from trial participation	
11				
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13	Dissemination	<a href="#">#31a</a>	Plans for investigators and sponsor to	33
14	policy: trial results		communicate trial results to participants,	
15			healthcare professionals, the public, and	
16			other relevant groups (eg, via publication,	
17			reporting in results databases, or other data	
18			sharing arrangements), including any	
19			publication restrictions	
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24	Dissemination	<a href="#">#31b</a>	Authorship eligibility guidelines and any	33
25	policy: authorship		intended use of professional writers	
26				
27				
28	Dissemination	<a href="#">#31c</a>	Plans, if any, for granting public access to	33
29	policy:		the full protocol, participant-level dataset,	
30	reproducible		and statistical code	
31	research			
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35	<b>Appendices</b>			
36				
37	Informed consent	<a href="#">#32</a>	Model consent form and other related	Supplementary Material File 2
38	materials		documentation given to participants and	
39			authorised surrogates	
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43	Biological	<a href="#">#33</a>	Plans for collection, laboratory evaluation,	N/A – no biological specimens
44	specimens		and storage of biological specimens for	collected
45			genetic or molecular analysis in the	
46			current trial and for future use in ancillary	
47			studies, if applicable	
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# BMJ Open

## Priority populations' experiences of isolation, quarantine and distancing for COVID-19: protocol for a longitudinal cohort study (Optimise Study)

Journal:	<i>BMJ Open</i>
Manuscript ID	bmjopen-2023-076907.R1
Article Type:	Protocol
Date Submitted by the Author:	03-Dec-2023
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<b>Primary Subject Heading</b>:	Epidemiology
Secondary Subject Heading:	Global health, Health policy, Infectious diseases, Qualitative research
Keywords:	PUBLIC HEALTH, Public health < INFECTIOUS DISEASES, COVID-19, EPIDEMIOLOGIC STUDIES



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5 **Priority populations' experiences of isolation, quarantine and**  
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9 **distancing for COVID-19: protocol for a longitudinal cohort study**  
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14 **(Optimise Study)**  
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## Abstract

**Introduction:** Longitudinal studies can provide timely and accurate information to evaluate and inform COVID-19 control and mitigation strategies and future pandemic preparedness. The Optimise Study is a multidisciplinary research platform established in the Australian state of Victoria in September 2020 to collect epidemiological, social, psychological and behavioural data from priority populations. It aims to understand changing public attitudes, behaviours and experiences of COVID-19 and inform epidemic modelling and support responsive government policy.

**Methods and analysis:** This protocol paper describes the data collection procedures for the Optimise Study, an ongoing longitudinal cohort of ~ 1,000 Victorian adults and their social networks. Participants are recruited using snowball sampling with a set of seeds and two waves of snowball recruitment. Seeds are purposively selected from priority groups, including recent COVID-19 cases and close contacts and people at heightened risk of infection and/or adverse outcomes of COVID-19 infection and/or public health measures. Participants complete a schedule of monthly quantitative surveys and daily diaries for up to 24 months, plus additional surveys annually for up to 48 months. Cohort participants are recruited for qualitative interviews at key time points to enable in-depth exploration of people's lived experiences.

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4 Separately, community representatives are invited to participate in community engagement  
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6  
7 groups, which review and interpret research findings to inform policy and practice  
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10 recommendations.

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13  
14 **Ethics and dissemination:** The Optimise longitudinal cohort and qualitative interviews are  
15  
16  
17 approved by the Alfred Hospital Human Research Ethics Committee (# 333/20). The Optimise  
18  
19  
20 Study CEG is approved by the La Trobe University Human Ethics Committee (# HEC20532).  
21  
22  
23  
24 All participants provide informed verbal consent to enter the cohort, with additional consent  
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26  
27 provided prior to any of the sub studies. Study findings will be disseminated through public  
28  
29  
30 website (<https://optimisecovid.com.au/study-findings/>) and through peer-reviewed  
31  
32  
33 publications.  
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39 **Study registration:** ClinicalTrials.gov, NCT05323799.  
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#### 48 **Keywords**

49  
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51 COVID-19; pandemic; social network; coronavirus; public health; longitudinal cohort;  
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54 protocol; Australia  
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### Strengths and limitations of this study

- The Optimise study is a longitudinal cohort of Victorian adults and their social networks (Sept 2020 – Aug 2024), where participants are followed for up to 24-48 months and data can be linked to map social connections.
- It combines quantitative data collection with qualitative interviews and focus group discussions at key time points with purposively recruited cohort participants to capture in-depth information about opinions, attitudes and beliefs about and adoption of COVID-19 mitigation strategies.
- The key study outcomes are timely empirical data on participants behaviours, attitudes and experiences of COVID-19 and government responses, from priority populations and identify factors that influence adoption of risk mitigation strategies.
- It is the largest social networks study conducted in Australia, involving linked data from individuals and their social network in the form of contact diaries, to explore how social connection can influence attitudes and behaviours within networks and inform dynamic social network and transmission models.
- Snowball sampling methods used for recruitment of social network data means that the study populations is not representative of the broader Victorian population.

## INTRODUCTION

Since its emergence in late 2019, the SARS-CoV-2 (COVID-19) pandemic has caused substantial morbidity and mortality globally, with variants causing continuing waves of infection (1). In early 2020 Australia experienced its first wave of COVID-19 cases, peaking on 28th March 2020. COVID-19 cases in Australia first declined in April 2020 after federal and state governments closed borders and introduced strict restrictions on population movement (2).

Throughout 2020 and 2021, Australia experienced waves of infection concentrated in the states of Victoria and New South Wales, countered by COVID-19 mitigation strategies including case and contact identification and management (test, trace, isolate and quarantine) and vaccine rollout (3). Victoria, Australia's second most populous state, was particularly affected, enduring multiple waves of infection and prolonged public health restrictions (4). Strategies included mandating masks in public indoor and outdoor settings to strict stay-at-home ('lockdown') orders, with people allowed to leave home for four reasons: to care for others, purchase groceries and medicine, exercise for an hour, and perform essential work (5). Additional orders were closure of non-essential businesses, restriction of movement to within

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2  
3  
4 5km of home, curfews, domestic travel restrictions, border closures and mandatory hotel  
5  
6  
7 quarantine of returned travellers (6).  
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9

10  
11 Australia's early public health responses to COVID-19 in 2020-2021 were successful, with  
12  
13  
14 fewer cases and deaths than most high-income Western countries throughout the first two years  
15  
16  
17 of the pandemic (7). This can be attributed to the strong and timely public health responses  
18  
19  
20 outlined above (8), high coverage of free COVID-19 testing through Australia's universal  
21  
22  
23 health system, and implementation of high-volume PCR testing centres. Moreover, after an  
24  
25  
26 initially delayed vaccine roll-out (9-11), Australia achieved two-dose coverage of over 90%  
27  
28  
29 for people aged 12+ years by March 2022 (12). Mathematical modelling has also informed the  
30  
31  
32 response (3, 13-15). Ensuring models are parameterised with localised and real-time empirical  
33  
34  
35 data – both disease (e.g., cases) and social (e.g., estimated uptake of mitigation strategies)  
36  
37  
38 epidemiological data – has been critical to prediction accuracy and effective policies.  
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46 However, challenges remain. Since the Omicron variant emerged in Australia in December  
47  
48  
49 2021, three distinct waves of transmission have occurred, partly due to lower vaccine efficacy  
50  
51  
52 against newer variants, waning vaccine effectiveness, and diluted public health prevention  
53  
54  
55 strategies, increasing absenteeism and stress on hospital systems (16, 17). To 28 August 2022,  
56  
57  
58 9,992,378 cases and 14,014 COVID-19-associated deaths were reported and 63,121,445  
59  
60



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3  
4 COVID-19 vaccine doses administered (18). Despite strict public health restrictions COVID-  
5  
6  
7 19 outbreaks occurred within ‘essential’ industries such as meat-processing factories and health  
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10 and aged care settings (19-21). These outbreaks highlighted socioeconomic inequities, with  
11  
12  
13 many essential industries employing disadvantaged people such as migrant workers in low-  
14  
15  
16 wage positions on casual contracts (22). Many cannot work from home, have little or no sick  
17  
18  
19 leave, and eschew isolation or quarantine for fear of losing employment (23). Moreover, many  
20  
21  
22 migrant families and households live communally and share transportation, making physical  
23  
24  
25 distancing near impossible (24). The Victorian population is culturally and linguistically  
26  
27  
28 diverse, with 28% born overseas in more than 200 countries; another 21% have at least one  
29  
30  
31 parent born overseas. Twenty-six per cent speak a language other than English at home,  
32  
33  
34 including 3.2% Mandarin, 1.3% Arabic and 0.1% Dinka (25). Following early outbreaks of  
35  
36  
37 COVID-19 within Victorian African and Chinese communities and widespread media  
38  
39  
40 reporting (26), there arose concern about stigma towards these communities and the lack of  
41  
42  
43 culturally appropriate information (27). Collectively, these economic, behavioural and social  
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46 factors increase risk of COVID-19 transmission among these and other priority populations.  
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51 We refer to populations at heightened risk of COVID-19 transmission or illness as priority  
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60 populations/groups; and understanding their transmission dynamics and social networks and

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4 predicting COVID-19 outbreaks to enable targeted support and resourcing is critical.  
5

6  
7 Combatting new variants in coming years will require governments to respond rapidly to  
8

9  
10 adaptive public health advice and sustain health system capacity. Crucially, future responses  
11

12  
13 will occur in a context of community fatigue, related both to the disease and associated social  
14

15  
16 restrictions. This will reduce government's appetite and social licence to reintroduce mitigation  
17

18  
19 policies and the community's willingness to follow them, lowering their effectiveness.  
20

21  
22  
23 Government, public health officials and the community must balance the need to contain  
24

25  
26  
27 COVID-19 with the social, health and economic consequences of restrictions  
28

29  
30  
31 On 5 May 2023, WHO Director-General announced that given the disease was now well  
32

33  
34 established and ongoing, COVID-19 no longer constituted a public health emergency of  
35

36  
37 international concern. Globally, population-level immunity has increased significantly, due to  
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39  
40 vaccine uptake along with infection-induced immunity, or the combination of both (hybrid  
41

42  
43 immunity). Countries have lifted most or all public health and social measures following  
44

45  
46 significant reduction in rates of hospitalization, admission to intensive care units and deaths  
47

48  
49 across all age groups (28-29). While this health indicators clearly mark the end to a global  
50

51  
52 emergency, the virus continues to spread and evolve and COVID-19 remains a threat,  
53

54  
55 especially to older persons and adults with underlying health conditions. WHO has recently  
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3  
4 released a 'Roadmap on uses of COVID-19 vaccines in the context of Omicron and high  
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6  
7 population immunity' (30) which assumes that the virus will continue to evolve but cause less  
8  
9  
10 severe disease with possible surge in infections that will require booster doses to maintain  
11  
12  
13 protection in the high priority groups. High priority-use groups including older adults, other  
14  
15  
16 adults with multiple comorbidities that place them at risk of severe disease, were recommended  
17  
18  
19 to have additional booster doses 6-12 months after the last dose. Booster vaccine doses were  
20  
21  
22 also recommended for additional sub-populations with special considerations including people  
23  
24  
25 with severe immunocompromising conditions, pregnant adults/adolescents, health and care  
26  
27  
28 workers with direct contact with patients.  
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33  
34 Understanding the experience and needs of high-priority groups, who may face additional  
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37 barriers to accessing information and support, particularly around future vaccine boosters is  
38  
39  
40 vital. Moreover, determining how social relationships influence attitudes and behaviours  
41  
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43 within these communities, alongside other individual-level factors such as confidence in  
44  
45  
46 government and fear of COVID-19, can inform the development of culturally appropriate and  
47  
48  
49 effective information and support services (31). Given the rapid spread of information of  
50  
51  
52 COVID-19 through social media, it will be important to understand how perceptions and  
53  
54  
55 practices around COVID-19 could be influenced by social networks online both in Australia  
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3 and internationally, and global news outlets (32). To inform ongoing COVID-19 control  
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7 measures and help prevent harmful health consequences of COVID-19, including the growing  
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9  
10 burden of long COVID and the socio-economic pressures of a prolonged pandemic, it is  
11  
12  
13 important to understand communities' experiences, attitudes, behaviours and needs over time.  
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### 16 17 18 *Objectives* 19

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22 The Optimise Study is a multidisciplinary research platform with four main objectives:  
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26  
27 • collect empirical data (behaviours, attitudes and experiences of COVID-19 and  
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29  
30 government responses) from priority populations and identify factors that influence  
31  
32  
33 adoption of risk mitigation strategies;  
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- 37  
38 • describe and monitor the unintended health, social and economic consequences of  
39  
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41 COVID-19 transmission prevention measures;  
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- 45  
46 • collect empirical data on social contacts and mixing patterns, particularly for key  
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48  
49 priority groups, to inform dynamic social network and transmission models and explore  
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52 how social connection influences attitudes and behaviours within networks; and  
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4 • test the acceptability, feasibility and effectiveness of new and existing intervention  
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6 strategies (diagnostic, therapeutic, behavioural, and social) to guide the Australian  
7  
8 Government's COVID-19 response strategy.  
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## 15 **METHODS AND ANALYSIS**

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20 The Optimise Study has three components:  
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- 23  
24 • a longitudinal cohort study of Victorian adults and their social networks (Sept 2020 –  
25  
26 Aug 2024); participants' are followed for up to 24-48 months and data can be linked to  
27  
28 map social connections. In addition, brief snapshot surveys were introduced to gather  
29  
30 rapid information about the acceptability of new policies and ongoing behaviours (Sept  
31  
32 2021–Aug 2023);  
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41  
42 • qualitative interviews and focus group discussions (FGDs) at key time points with  
43  
44 purposively recruited cohort participants to capture in-depth information about  
45  
46 opinions, attitudes and beliefs about and adoption of COVID-19 mitigation strategies;  
47  
48  
49  
50  
51 and  
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54  
55 • community engagement groups (CEGs), formed to interpret the cohort and qualitative  
56  
57 interview research findings to inform recommendations for policy and practice.  
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4 Optimise Study collaborators implement additional sub-studies of specific priority populations  
5  
6  
7 to increase the breadth and depth of the findings. Information is reported frequently to  
8  
9  
10 governments and the community. Data collection procedures are described below. We used the  
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12  
13 SPIRIT reporting guidelines (33) and details of Optimise Study registry information are  
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15  
16 detailed in **Supplementary file 1 (table 1)**.  
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19  
20

## 21 *Longitudinal cohort*

### 22 23 24 25 26 **Study design**

27  
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29  
30 The longitudinal cohort and social network study aims to recruit approximately 1,000  
31  
32  
33 Victorians. It involves social network analysis to inform responses to COVID-19, so uses  
34  
35  
36 snowball sampling for recruitment and collects data on the interactions and connections  
37  
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39 between participants to understand transfer of knowledge, attitudes and practices (34, 35). It  
40  
41  
42 targets priority populations considered to be at risk of contracting COVID-19, developing  
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44  
45 severe COVID-19, experiencing negative impacts of government restrictions introduced to  
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47  
48 reduce COVID-19 transmission, or having difficulty understanding or following restrictions.  
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54 ‘Seed’ participants are from selected priority populations, meaning the cohort does not  
55  
56  
57 represent the broader Victorian population.  
58  
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4 Optimise recruits from two groups:  
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- 8 • Group 1 – people diagnosed with COVID-19 (within the past 7 days) or notified as  
9  
10 “close contacts” of a person with COVID-19; and  
11  
12
- 13 • Group 2 – people not currently infected with COVID-19 but at heightened risk of  
14  
15 infection and/or adverse outcomes of COVID-19 infection and/or public health  
16  
17 measures (e.g., worse employment conditions, housing, or access to primary  
18  
19 healthcare).  
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28

29 Over the study, participants complete 16 data collection tools at baseline (one Key People  
30  
31 nomination, one baseline survey, then 14 prospective daily diaries) then five data collection  
32  
33 points each month (one monthly follow-up survey and four follow-up diaries), plus additional  
34  
35 surveys if they test positive for COVID-19 or are a close contact.  
36  
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42

#### 43 **Sampling and sample size** 44 45 46 47

48 Snowball sampling was used to recruit individuals and their contacts. Seeds are sampled  
49  
50 purposively from priority populations (Layer 0) and asked to nominate people they consider  
51  
52 ‘key’ in their day-to-day lives (meaning relatives, people with whom they live, discuss personal  
53  
54 matters, give or receive practical support, interact frequently, and/or share hobbies or sport;  
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4 'key people' hereafter). Layer 0's key people are recruited (Layer 1 participants), and nominate  
5  
6  
7 their own key people (Layer 2) (Figure 1). Layer 2 participants are asked to nominate key  
8  
9  
10 people, for the purposes of social network analysis, but they are not recruited.

11  
12  
13  
14 The study aimed to recruit ~1000 participants, based on 200 seed participants and anticipating  
15  
16  
17 1–2 key people recruited from each participant in Layers 1 and 2. Sample size calculations  
18  
19  
20 were based on targets for priority groups. Layer 0 target numbers were revised as the study  
21  
22  
23 progressed to respond to pandemic dynamics and emerging priority populations, and because  
24  
25  
26 fewer key people (Layers 1 and 2) were recruited than anticipated. Additional priority  
27  
28  
29 populations and targets were introduced throughout the follow-up period as the epidemiology  
30  
31  
32 evolved and new priority populations were identified. Priority populations and targets are  
33  
34  
35 shown in Table 1. Definitions of priority populations, sampling strategies and COVID-19 case  
36  
37  
38 definitions are included in **Supplementary file 1 (table 2)**.

## 39 40 41 42 43 44 45 **Participants**

46  
47  
48  
49 Participants are eligible if they are in a target group and meet the following inclusion criteria:

- 50  
51  
52  
53  
54 • aged  $\geq 18$  years;
- 55  
56  
57  
58  
59 • resident of Victoria, Australia;
- 60



- 1  
2  
3  
4 • willing and able to provide informed consent to participate in a survey/interview over  
5  
6 the phone in English, or in Arabic, Mandarin or Dinka when a bilingual data collector  
7  
8 is available;  
9  
10  
11  
12  
13  
14 • provide a valid email\* and phone number; and  
15  
16  
17  
18 • have access to the internet to complete online surveys or a phone to undertake phone  
19  
20 interviews.  
21  
22  
23  
24

25  
26 Participants are excluded if they are:

- 27  
28  
29  
30 • in hospital or too unwell to participate at recruitment;  
31  
32  
33 • not currently residing in Victoria; or  
34  
35  
36  
37 • aged <18 years.  
38  
39  
40  
41

42 \*Participants completing all tools by phone do not require an email address for study  
43  
44 communications, but, if available it is recorded to assist with conflict resolution in social  
45  
46 network analysis.  
47  
48  
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53 **Table 1.** Seed participants by subgroups  
54  
55

Target group	Target number of seed participants
--------------	------------------------------------

Initial targets *	
Group 1	
Recent COVID-19 cases	30
Group 2	
Healthcare workers	20
Aged-care workers	20
High-risk workplace (factory/distribution workers)	20
People residing in regional centres	30
People with pre-existing chronic illnesses	40
People speaking a language other than English at home	40
<b>Total</b>	<b>200</b>
Additional targets*	
Group 1	
Hotel quarantine workers	20
Group 2	
People aged 18–24	20
Arabic/Mandarin/Dinka (AMD)-speaking participants	40
<b>Total</b>	<b>80</b>

\*During 2021, young people and people working in hotel quarantine programs emerged as groups with high COVID-19 incidence, so additional seed sets were added to the recruitment target. Recruitment targets for people who spoke AMD as their preferred language were added in response to concern about stigma towards African and Chinese communities and lack of culturally appropriate information.

## Recruitment

Seeds are recruited through paid and unpaid social media advertisements and flyers distributed via community and industry groups, community-based organisations and professional networks. Targeted social media advertisements reach priority groups based on age range,

1  
2  
3 location, setting, gender and self-nominated interests (e.g., health and social welfare).

4  
5  
6  
7 Advertisements and flyers direct potential participants to the study website, where they can  
8  
9  
10 submit an expression of interest (EOI) (36). The EOI includes questions to categorise seeds  
11  
12  
13 and assess their eligibility (Table 1).

14  
15  
16  
17  
18 In September 2021, specific recruitment and data collection strategies were developed to  
19  
20  
21 enable people born overseas or speaking a language other than English at home to participate.

22  
23  
24 Trained bilingual data collectors from AMD-speaking communities were employed to support  
25  
26  
27 recruitment and data collection in participants' languages. Data collectors utilise online  
28  
29  
30 advertisements, flyers and posters translated into AMD (with English). Flyers and posters are  
31  
32  
33 distributed to community service organisations and promoted on local AMD-language radio  
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35  
36 stations and social media platforms, including WeChat, Weibo and WhatsApp.

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41  
42 EOI forms translated into Arabic and simplified Chinese were available on the study website;

43  
44  
45 Dinka is primarily a verbal language, so the EOI form is in English with some accompanying

46  
47  
48  
49 Dinka translation. Bilingual data collectors aimed to prioritise recruitment of participants who  
50  
51  
52 face additional barriers to accessing information and support during the COVID-19 pandemic.

53  
54  
55  
56 They used the following additional recruitment criteria: people with: low English proficiency,

1  
2  
3  
4 low technological proficiency (i.e., could not self-complete surveys), have recently emigrated  
5  
6  
7 to Australia, and are ineligible for government support.  
8  
9

10  
11 When feasible, each participant is assigned a single data collector responsible for  
12  
13 communication and follow-up to promote continuity and rapport. All potential participants  
14  
15 receive an initial phone call from a data collector who explains the study, including its aims,  
16  
17 procedures, participation requirements, and reimbursements. When a potential participant  
18  
19 expresses interest, the data collector administers the screening questions, confirms eligibility,  
20  
21 and records consent (see **Supplementary file 2**). Informed consent are provided by all  
22  
23 participants to enter the cohort, collected verbally and documented in the study database, with  
24  
25 additional consent provided prior to any of the substudies. Data collectors abandon recruitment  
26  
27 after three unsuccessful contact attempts or if the study candidate declines.  
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#### 42 **Data collection procedures**

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47 We collect data across a broad range of domains, including socio-demographics, work and  
48  
49 study circumstances, finances, health behaviours, access to services and information, social  
50  
51 connectedness, mental health, knowledge of COVID-19, attitudes towards COVID-19  
52  
53 prevention measures, and contact with people. Data collection follows a standardised and high-  
54  
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2  
3 frequency procedure, including once-off surveys, baseline surveys and contact diaries, repeated  
4  
5  
6  
7 monthly follow-up surveys, repeated weekly follow-up contact diaries, and COVID-19 event-  
8  
9  
10 based diaries. Recruitment into the longitudinal cohort commenced in September 2020 and  
11  
12  
13 closed in December 2021 when the target sample size was achieved. Once funding was secured  
14  
15  
16 to support recruitment of new priority populations, including from AMD-speaking  
17  
18  
19 communities, follow-up was extended and participants could complete up to 24 months of  
20  
21  
22 follow-up surveys and diaries to allow ongoing generation of data to inform public health  
23  
24  
25 policy (Sept 2020 – Aug 2022). In addition to the standardised longitudinal data collection,  
26  
27  
28 cross-sectional snapshot surveys were developed and deployed ad hoc across 2021–23 to  
29  
30  
31 collect more in-depth data on participants' behaviours and attitudes to new government policies  
32  
33  
34 and COVID-19 mitigation strategies.  
35  
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41 Participants can withdraw from the study at any time by emailing the study team or sending an  
42  
43  
44 SMS. We unenroll participants who have not completed a baseline survey within 10 days of  
45  
46  
47 recruitment and are unresponsive to repeated follow-up attempts.  
48  
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51

### 52 **Baseline data collection**

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3  
4 An interview guide for all data collection tools was translated into AMD through an accredited  
5  
6  
7 translation service and reviewed by our bilingual data collectors for cultural appropriateness.  
8  
9

10 Following consent, participants complete a phone interview with a data collector who  
11  
12  
13 administers the key people form and asks participants to designate their preferred data  
14  
15  
16  
17 collection method:

- 21 • all tools are interviewer-administered by telephone in the relevant language;
- 22  
23  
24  
25 • self-complete daily contact diaries and follow-up contact diaries in English, Mandarin  
26  
27  
28 and Arabic. Consent, key people, retrospective diary, baseline and follow-up surveys  
29  
30  
31 are administered over the phone with a bilingual data collector; or
- 32  
33  
34  
35 • participants who speak a language other than English at home and are fluent in English  
36  
37  
38 can self-complete all tools in English.  
39  
40  
41  
42

43 Participants are automatically assigned to the relevant data collection tools and subsequent  
44  
45  
46 schedule of surveys and diaries for the follow up period (see Figure 2 and Table 2). For self-  
47  
48  
49 administered tools, the participant is sent a secure link by email and/or SMS (as preferred).  
50  
51  
52  
53 Automated reminder emails or SMS are sent to participants with surveys due for completion  
54  
55  
56  
57 each Monday at 8am. For interviewer-administered tools, a data collector contacts participants  
58  
59  
60

1  
2  
3 when a survey or diary is due. Participants have seven days to complete assigned tools before  
4  
5  
6 they expire. Up to three SMS, email and phone reminders prompt participants to complete  
7  
8  
9  
10 baseline and follow up surveys for interviewer-administered surveys. Individual reminders are  
11  
12  
13 not provided for daily diaries.  
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16  
17 All participants complete a key people form during the baseline interview, allowing data  
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All participants complete a key people form during the baseline interview, allowing data collectors to target eligible individuals for recruitment. Participants can nominate a maximum of 50 key people all together, but a maximum of eight per participant are selected for attempted recruitment (Layers 1 and 2). If the participant gives permission and contact details for more than eight key people, a key people with the most in-person contact, are prioritised for recruitment.

Participants then complete a baseline survey about demographics, impacts of COVID-19, baseline behaviours (including social, health and lifestyle factors) before the pandemic, and attitudes to, knowledge and uptake of COVID-19-related mitigation strategies. A baseline prospective daily diary is then completed online on days 1–14 after recruitment to collect information on participant's health, isolation/quarantine status, mood, and detailed data on their contacts in the previous day. For participants who complete the baseline diaries with the

1  
2  
3 assistance of a data collector, instead of daily interviews, the diaries are completed across two  
4  
5  
6  
7 interviews, with data collected retrospectively for the previous 7 days.  
8  
9

10  
11 For participants who report testing COVID-19 positive or being a close contact in the 7 days  
12  
13 before baseline (Group 1), a retrospective diary is administered with interviewer assistance to  
14  
15 establish a timeline of COVID-19 events and capture experiences of quarantine, isolation and  
16  
17 adoption of public health directions.  
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26 **Table 2.** Overview of data collection tools and scheduling  
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Data collection tool	Participants	Administration	Expected time to complete (minutes)	Frequency	Schedule
EOI / Screener form	Layer 0	Self	5	Once	Pre-recruitment
	Layer 1 & 2	Interviewer	5	Once	Day 0
Key people form (baseline)	All participants	Interviewer	15	Once	Day 0
Retrospective diary	Participants classified as a recent COVID-19 case of close contact at recruitment	Interviewer	15	Once	Day 0
Baseline surveys	All participants	Self or interviewer-administered	30	Once	Day 0-7
Prospective Daily diary	All participants	Self or interviewer-administered	5-10	Daily	Days 1-14



Follow up surveys	All participants	Self or interviewer-administered	20	Monthly	Every 4 weeks starting from week 5
Key people form (follow-up)	All participants	Incorporated into follow-up surveys	N/A	Monthly	Repeated every 4 weeks
Follow up diary	All participants	Self or interviewer-administered	5-10	4 days/month	Starting from week 5 or directly after daily diary completed
COVID-19 event-based diaries	Participants classified as a recent COVID-19 case or close contact in diaries or surveys	Self or interviewer-administered	5-10	Triggered by event	Manually assigned at timepoint where the participant tests positive or is a household like contact
Snapshot surveys	All participants	Self or interviewer-administered	5-10	Ad hoc	Sept 2021 - Aug 2023

### Follow-up data collection

Follow-up commences 28 days after recruitment; all participants receive individualised links via email or SMS, or a phone call from a data collector, to complete a follow-up survey. The follow up surveys collect the same content as the baseline surveys, but cover the previous four weeks. Follow-up surveys also ask participants about face-to-face and digital contact with key people in the previous 4 weeks and allow them to nominate new key people.

1  
2  
3  
4 Participants are invited to complete four follow-up diaries in a month scheduled randomly for  
5  
6  
7 two weekdays and two weekend days to capture data on COVID-19 testing, COVID-related  
8  
9  
10 symptoms, being a 'close contact' in the previous 7 days, and information on mood and details  
11  
12  
13 of people with whom they interacted 'yesterday'. The follow-up diaries are designed to assess  
14  
15  
16 social interactions, cooperation with government restrictions, and COVID-19-related health,  
17  
18  
19 and enable timely identification of COVID-19 diagnoses or close contacts and trigger a manual  
20  
21  
22 assignment of a COVID-19 event-based diary (described below). After 12 months, all  
23  
24  
25 participants receive a message at the start of their next follow-up survey and follow-up diary  
26  
27  
28 congratulating them on their participation and informing them that the study is continuing. If  
29  
30  
31 they complete these tools, they are automatically assigned to another 12 months of follow-up  
32  
33  
34 surveys and diaries.  
35  
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### 41 **COVID-19 event-based diaries**

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46 If participants reported that they had tested positive for COVID-19 or are identified as a close  
47  
48  
49 contact in any of the monthly follow-up surveys or diaries, they are invited to complete an  
50  
51  
52 event-based diary to collect information on testing experience, health status, symptoms, disease  
53  
54  
55 severity and ability to complete their 7 days of isolation or quarantine. It also collects detailed  
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1  
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4 data on personal interactions in the period starting two days before symptoms developed or  
5  
6  
7 they tested positive (whichever came first).  
8  
9

## 10 11 **Snapshot surveys** 12

13  
14  
15 To inform ongoing changes in Victorian Government policy during the pandemic, we design  
16  
17  
18 (upon request, within 10 business days) and deploy ad hoc cross-sectional snapshot surveys to  
19  
20  
21 collect more in-depth data on participants' opinions, behaviours and attitudes to new  
22  
23  
24 government policies and COVID-19 mitigation strategies. Distinct from the 24-month follow  
25  
26  
27 up cohort schedule, snap-short surveys are deployed on an ad-hoc basis. All cohort participants  
28  
29  
30 are invited to complete a snapshot survey, self-completed and in English, within 7 days;  
31  
32  
33  
34  
35 meanwhile, bilingual data collectors administer 15 phone surveys in AMD.  
36  
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39

## 40 **Data collection tools** 41

42  
43  
44 Data collection tools, their rationales and key domains are described below:  
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50  
51 • *EOI/screen (see Supplementary file 3A)* – publicly available form to register interest in  
52  
53  
54 the study, assess study eligibility and key target recruitment group membership, collect  
55  
56  
57 contact details and preferences for data collector call-back.  
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- ***Key people form (see Supplementary file 3B)*** – collects data on key people to inform snowball recruitment, social network mapping, and analysis of COVID-19 infection spread and social network influence on behaviours and attitudes. Based on previous social network analysis forms (37).
  - ***Baseline retrospective daily diary (see Supplementary file 3C)*** – collects data from participants recently diagnosed with COVID-19 and/or notified as a close contact in the previous 7 days. This interviewer-administered survey targets the timing and sequence of events surrounding COVID-19 transmission over the previous 14 days, including interactions with healthcare services and the Victorian Government COVID-19 contact tracing team, living arrangements, and isolation or quarantine. Data collected includes testing and diagnosis, potential exposure, and symptomatic period.
  - ***Baseline survey (see Supplementary file 3D)*** — collects data (within 7 days of recruitment) on demographics; health and wellbeing; healthcare utilisation; COVID-related health and attitudes; vaccination attitude, uptake and barriers; and knowledge of and attitude to public health measures and restrictions. Questions on residence type, tenure and unpaid care and responsibilities follow the 2016 Census of Population and Housing (38). Occupation and industry questions follow the Australian and New

1  
2  
3  
4 Zealand Standard Industrial Classification, 2006 (39). Financial hardship questions  
5  
6  
7 (e.g., missing meals) follow the Household Expenditure Survey and Survey of Income  
8  
9  
10 and Housing 2009–10 (40). Social connectedness questions (e.g., frequency of visiting  
11  
12  
13 friends) follow Dias et al. (2018) (41). Long-term illness, age and disability questions  
14  
15  
16 follow the Australian Longitudinal Study on Women's Health (42). Mental health was  
17  
18  
19 assessed by the Generalized Anxiety Disorder 7-item (GAD-7) (43) and Personal  
20  
21  
22 Wellbeing Index-Adult (44). Questions about confidence in government agencies  
23  
24  
25 follow the 2019 Canterbury Wellbeing Survey (45).  
26  
27  
28  
29

- 30 • ***Baseline prospective daily diary (see Supplementary file 3E)*** – collects data via self-  
31  
32 administered online surveys every day for 14 days after recruitment and consent. Each  
33  
34  
35 diary asks about health (adapted from FluTracking) (46), isolation/quarantine status,  
36  
37  
38 mood, and personal interactions on the previous day. Data collected for each contact  
39  
40  
41 named includes details about the relationship, age and gender, location where contact  
42  
43  
44 occurred (inside/outside), purpose and duration of contact, and if physical contact  
45  
46  
47 occurred. If the participant cannot name all contacts due to high number, confidentiality  
48  
49  
50 or preference, they are asked to estimate the number of additional contacts per location.  
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- ***Follow-up survey (see Supplementary file 3F)*** – collects data every four weeks, starting from week 5. This survey includes the same domains as the baseline survey but targets current circumstances and changes in the previous 4 weeks to enable assessment of COVID-19 impacts and behaviours and attitudes.
  - ***Follow-up daily diary (see Supplementary file 3G)*** – collects data for 2 weekdays and two weekend days every 4 weeks (average 1 day/week), starting from week 5. In addition to asking about contacts on the previous day, the follow-up diary elicits information on health, isolation and quarantine status in the previous 7 days. The 7-day recall enables detection of participants with new COVID-19 events, including diagnosis and notification as a close contact, and establish a timeline of related events. If new COVID-19 events are detected and confirmed with the participant (case or close contact), then the participant will be invited to complete a COVID-19 event-based diary.
  - ***COVID-19 event-based diary (see Supplementary file 3H)*** – collects data from participants diagnosed with COVID-19 and/or notified as a close contact of a case during the follow-up period. They are manually assigned an event-based diary scheduled for 7 days after their date of diagnosis or notification of being a household

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2  
3 contact. The diary captures participants' health status and recent COVID-19  
4  
5  
6  
7 transmission or exposure information, including interaction with healthcare services  
8  
9  
10 and the Victorian Department of Health, living arrangements, and isolation or  
11  
12  
13 quarantine. Data collected includes testing and diagnosis, potential exposure, and  
14  
15  
16  
17 symptomatic period.

- 21 • *Snapshot surveys (see Supplementary file 4 A-F)* – collects data from participants at  
22  
23  
24 key time points in the epidemic to assess behaviours and attitudes to COVID-19 topics  
25  
26  
27 and government policies. Topics include behaviours over Summer 2021–22, incentives  
28  
29  
30 and barriers to vaccination, concerns about children returning to school, influence of  
31  
32  
33 potential cessation of the Victorian pandemic declaration, impacts of long COVID, and  
34  
35  
36  
37 COVID-19 testing, prevention and response in schools.  
38  
39  
40  
41

## 42 Reimbursement

43  
44  
45  
46 Participants are reimbursed monthly for their efforts with electronic gift vouchers redeemable  
47  
48  
49 at major retailers. Initially, participants were reimbursed \$35 (AUD) for the baseline survey  
50  
51  
52 and \$15 if at least 10 (of 14) baseline prospective daily diaries were completed. For each month  
53  
54  
55 of follow-up, participants received \$2.50 per follow-up daily diary and \$25 per follow-up  
56  
57  
58 survey completed. Participants who test positive for COVID-19 or are a notified close contact  
59  
60

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2  
3 are invited to complete an event-based diary each day for 14 days (\$15). This was simplified  
4  
5  
6  
7 in December 2020 to \$50 for all recruitment and baseline data collection, \$35 each month for  
8  
9  
10 completion if any follow-up was completed in that month (minimum one follow-up diary), and  
11  
12  
13 \$15 for COVID-19 event-based diaries. If a participant is retained for 12 months, and  
14  
15  
16 completes a baseline and at least one follow-up survey a month, they are reimbursed \$470.  
17  
18  
19 AMD-speaking participants are offered more flexible reimbursement methods (bank transfer  
20  
21  
22 or a mailed visa debit card) to overcome cultural and linguistic issues with electronic gift cards.  
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27

### 28 **Data collection and management**

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31  
32 To facilitate collection of social network data, we use NetCollect (Version 2.1.94, SNA  
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34  
35 Toolbox), a purpose-built online data-capture platform (37). The software and data are hosted  
36  
37  
38 on the Burnet Institute's local servers. NetCollect automatically sends survey links via email  
39  
40  
41 or SMS according to each participants' data collection schedule, starting from date of consent.  
42  
43  
44

45  
46 A data management plan and data dictionaries were developed and shared with all study  
47  
48  
49 collaborators. Quantitative data preparation, cleaning and analyses are conducted using R  
50  
51  
52 version 4.1.2 (47). Data cleaning and analysis code is stored in Git for version control. Survey  
53  
54  
55 and network data are automatically extracted every fortnight via an application programming  
56  
57  
58 interface. To ensure timely identified of new COVID-19 cases and close contacts across the  
59  
60



1  
2  
3  
4 follow period, NetCollect was programmed to notify Slack (a data communication platform)  
5  
6  
7 of notifications from survey responses. Slack prompts a data collector to contact the participant  
8  
9  
10 and invite them to complete retrospective diaries.  
11  
12  
13

#### 14 **Data preparation for social network analysis**

15  
16  
17  
18  
19 NetCollect offers data matching algorithms to identify and eliminate duplicate contact  
20  
21  
22 nominations within a person's social networks. This conflict resolution process involves  
23  
24  
25 reviewing all study participants, key people and daily contacts for similarities in name and  
26  
27  
28 other characteristics and identifying probable matches according to specific rules. From this,  
29  
30  
31  
32 Optimise and Swinburne University of Technology Social Network Research Lab study  
33  
34  
35 researchers review and verify matches manually through a separate algorithm. Multiple  
36  
37  
38 nominations of one individual are combined into a single record that contains all network  
39  
40  
41 information. Data analytics capacity is currently being integrated into NetCollect to support  
42  
43  
44 social network exploration and visualisation without data export to third-party software.  
45  
46  
47  
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49

#### 50 **Data analysis and key outcomes**

51  
52  
53  
54 Each month the study executive identifies a topic for reporting, which informs the selection of  
55  
56  
57 key outcomes of interest. The topic is often related to a critical issue affecting the community  
58  
59  
60

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3 and/or a government decision, such as a testing uptake, and acceptance of public health  
4  
5  
6  
7 restrictions or a new vaccine roll-out. These topics inform the qualitative interviews and CEG  
8  
9  
10 discussions.

11  
12  
13  
14 Data from the longitudinal surveys and diaries are analysed with respect to six focus areas:

- 15  
16  
17  
18  
19 • uptake of COVID-19 risk mitigation strategies including isolation, quarantine,  
20  
21  
22 vaccines, mask wearing, physically distancing;  
23  
24  
25  
26 • knowledge of COVID-19 restrictions and confidence in government decision-making;  
27  
28  
29  
30 • average number of contacts with key people per day and in different settings;  
31  
32  
33  
34 • changes in work and finances due to COVID-19 pandemic restrictions;  
35  
36  
37  
38 • changes in lifestyle and social engagement due to COVID-19; and  
39  
40  
41  
42 • changes in physical and mental health due to COVID-19.  
43  
44  
45

46 For monthly reporting, a specific relevant topic from above focus area and we report on key  
47  
48  
49 outcomes from the above each month:

- 50  
51  
52  
53 • what proportions of people are adopting risk mitigation strategies and are they  
54  
55  
56  
57 experiencing any unintended health/financial/well-being consequences?  
58  
59  
60

- do sociodemographic covariates influence adoption of risk mitigation strategies and experience of unintended health/financial/well-being consequences?
- does adoption of risk mitigation strategies and experience of unintended health/financial/well-being consequences vary over time?

Ordinal, nominal and binary data are summarised using frequencies and proportions for serial cross-sectional data. Chi-squared tests assess dependencies between survey responses for key outcomes and demographic variables, including gender, age group, employment status, healthcare worker status, if they have children (specifically in relation to vaccine uptake), country of birth, language spoken at home and household income. Continuous outcomes are assessed using mean, median and quantiles. T-tests and Wilcoxon tests are used to detect differences between demographic groups. Composite variables are formed as appropriate and any standard scales (i.e., GAD-7 and Personal Wellbeing Index) are assessed using standard methodology (43, 44). Missing data are assessed for causes (i.e., missing completely at random, missing at random and missing not at random) and handled using multiple imputation or full information direct maximum likelihood if appropriate.

MPNet version 1.04 (48) is used for the statistical analysis of social network data using exponential random graph models and auto-logistic actor attribute models. This approach is

1  
2  
3 used to consider whether individual mental health, vaccination attitudes and other  
4  
5  
6 characteristics are linked to specific network substructures in which individuals are embedded.  
7  
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## 10 11 *Qualitative interviews and focus groups*

### 12 13 14 15 16 **Study population and recruitment**

17  
18  
19  
20 Approximately 40 cohort participants are purposively sampled and recruited for in-depth  
21  
22  
23 interviews (n=25) and two FGDs (n=15) annually to capture experiences in different restriction  
24  
25  
26 periods and COVID-19 epidemic contexts. Participants invited to participate in a qualitative  
27  
28  
29 interview or FGD are sent an additional participant information and consent form; verbal  
30  
31  
32 consent is obtained before interview or FGD commencement and documented in a consent  
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database.

### 41 42 **Qualitative data collection tools and key measures**

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46 Interviews and FGDs are conducted by Zoom or telephone (interview only) and last  
47  
48  
49 approximately one hour. They are facilitated by an experienced qualitative researcher using a  
50  
51  
52 semi-structured guides (**Supplementary file 5 A-C**) that evolve in line with changes in the  
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COVID-19 context, trends identified in the quantitative data, and/or changes in state and

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2  
3 federal government COVID-19 responses. Interview and FGD participants receive a \$50  
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5  
6  
7 electronic gift voucher as reimbursement.  
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### 10 11 **Data collection and management** 12

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14  
15 Qualitative interviews and FGDs are audio-recorded and data transcribed verbatim by an  
16  
17  
18 external transcription service within two weeks. Audio files and transcripts are stored on a  
19  
20  
21  
22 secure Burnet Institute server. Following transcription, the audio files are destroyed. De-  
23  
24  
25 identified transcripts and baseline demographic data are uploaded to a central NVivo (version  
26  
27  
28  
29 10) file (49) stored securely on a Burnet Institute server.  
30  
31

### 32 33 **Data analysis and key outcomes** 34

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39  
40 Qualitative analysis has preliminary, rapid and in-depth components. For preliminary analysis,  
41  
42  
43 interviewers complete a participant template following an interview to provide a high-level  
44  
45  
46 summary and initial reflections based on audio recordings. For rapid analysis, interviewers  
47  
48  
49 spend approximately one hour coding transcripts using NVivo (49), applying pre-set coded  
50  
51  
52 themes and coding emerging themes. A summary of findings informs recommendations for  
53  
54  
55  
56 policy and practice in monthly reports to the Victorian Government. In-depth inductive  
57  
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1  
2  
3 analyses, undertaken by members of the qualitative research team, identify new themes that  
4  
5  
6  
7 are then aligned with existing evidence on COVID-19 and broader related community, health  
8  
9  
10 and resilience topics.  
11

## 12 13 14 *Community engagement groups*

### 15 16 17 **Study population and recruitment**

18  
19  
20  
21  
22  
23 To augment the longitudinal data, the CEGs provide interpretation of the cohort findings,  
24  
25  
26  
27 generate new research topics/questions and assist in developing recommendations in response  
28  
29  
30 to these findings for government reports. The initial CEG comprised representatives of  
31  
32  
33  
34 populations prioritised in the Optimise cohort (not participants): healthcare workers,  
35  
36  
37 international students, older people, people with chronic disease, young people, people who  
38  
39  
40 have had COVID-19, people living in regional Victoria and people living in crisis  
41  
42  
43  
44 accommodation.  
45

46  
47  
48 In September 2021, as additional target groups were added to the cohort, a culturally and  
49  
50  
51 linguistically diverse (CALD) CEG was recruited to better represent the needs of multicultural  
52  
53  
54  
55 (including Afghan, Fijian and Pasifika, Indian and South Asian) communities. Recruitment for  
56  
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3  
4 both CEGs occurred through community leaders, representatives of community organisations,  
5  
6  
7 and referrals through existing organisational research networks.  
8  
9

### 11 CEG data collection tools and key measures

12  
13  
14  
15 CEG teleconferences are held monthly with up to 10 participants per meeting. The topic under  
16  
17  
18 discussion is informed by the key issue identified for reporting in the monthly report provided  
19  
20  
21 to Government (For more detail on topic guides see **Supplementary file 6**). A draft of the  
22  
23  
24 monthly Optimise report is provided to the CEG a week in advance of the meeting with the  
25  
26  
27 meeting agenda.  
28  
29  
30

31  
32  
33 Each CEG meeting lasts approximately 90 minutes. Participants give their perceptions of the  
34  
35  
36 implications of the monthly report findings for their communities and their recommendations  
37  
38  
39 for government messaging or pandemic response.  
40  
41  
42

43  
44 Each CEG meeting lasts approximately 90 minutes. Participants are asked to review and  
45  
46  
47 interpret study findings for the past month, and give their perceptions of the implications of the  
48  
49  
50 findings for their communities and make recommendations for government messaging or  
51  
52  
53 pandemic response.  
54  
55  
56  
57  
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60

1  
2  
3  
4 CEG members receive a stipend of \$112.50/meeting for their participation (including  
5  
6  
7 preparation time), paid as a digital gift voucher.  
8  
9

### 10 11 **Data collection and management** 12

13  
14  
15 Each CEG meeting is audio-recorded, detailed notes are taken and key quotations are  
16  
17  
18 transcribed by study researchers. Identifying information is redacted or concealed with  
19  
20  
21 pseudonyms. The digital records are stored on a password-protected La Trobe University  
22  
23  
24 network drive accessible only to study researchers.  
25  
26  
27  
28  
29

### 30 31 **Data analysis and key outcomes** 32

33  
34 CEG meeting data is analysed using framework thematic analysis, and summary notes of the  
35  
36  
37 discussion are circulated to members for approval. The CEG findings are then incorporated  
38  
39  
40 into the monthly Optimise report provided to the Victorian Government. Outcomes include:  
41  
42  
43

- 44  
45 • reflections on the monthly report findings based on personal experience and community  
46  
47 insights;  
48  
49
- 50  
51 • perceived implications of the findings for their communities; and  
52  
53
- 54  
55 • recommendations for government messaging or pandemic response.  
56  
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### *Patient and public involvement*

We piloted the study tools on a small group of COVID-19 patients and members of the public before recruitment began. Extensive consultation with bilingual data collectors was undertaken to inform translations of all study tools and adaptation of the study design for people unable to participate in English. Community representatives are invited to participate in community engagement groups, which review study findings and interpret research findings to inform policy and practice recommendations.

## **ETHICS AND DISSEMINATION**

### *Ethical considerations*

The Optimise longitudinal cohort and qualitative interviews are approved by the Alfred Hospital Human Research Ethics Committee (# 333/20). The Optimise Study CEG is approved by the La Trobe University Human Ethics Committee (# HEC20532). All participants provide informed verbal consent to enter the cohort, which is documented in the study database, with additional consent provided prior to any of the sub studies. The Optimise Study involves collecting personal and identifiable data for social network analysis, participant follow-up and

1  
2  
3 reimbursement. A distress protocol was developed to manage any participant who indicates  
4  
5  
6 significant distress or thoughts of self-harm or suicide during an interview, and a list of support  
7  
8  
9 services is offered after baseline and follow-up surveys. Data is treated confidentially with  
10  
11  
12 access restricted to the study team. Additional security measures and access restrictions apply  
13  
14  
15 to participant contact information for reimbursements. All participants and nominated contacts  
16  
17  
18 are automatically assigned a unique identification number. Deidentified data is extracted for  
19  
20  
21 data analysis from NetCollect using only the unique identifier and is only available to  
22  
23  
24 authorised study staff and collaborators. Identifiable data is extracted by the data management  
25  
26  
27 team and utilised by authorised staff for follow up contact with participants, network data  
28  
29  
30 linkage and reimbursements. Data used for quality assurance, reporting and analysis is re-  
31  
32  
33 identifiable and is stored on a secure server at the Burnet Institute. Non-identifiable data is  
34  
35  
36 retained for seven years.  
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### ***Publication and dissemination***

45  
46  
47 Reports are published on a public website: <https://optimisecovid.com.au/study-findings/>.  
48  
49  
50  
51  
52 Seventeen monthly reports and four special issue snapshot reports have been developed to date,  
53  
54  
55 on thematic topics including testing and strategies to improve uptake; vaccine confidence and  
56  
57  
58 preparedness; social networks and mixing patterns; gendered impacts of COVID-19; impact  
59  
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1  
2  
3 on income and finances, and impact of government restrictions on risk mitigation strategies;  
4  
5  
6  
7 school-based testing; reimbursement for vaccination; and impact of COVID on CALD  
8  
9  
10 communities. Publications related to the Optimise study and any sub-studies that are prepared  
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12  
13 and submitted to peer-reviewed journals (50-54).  
14  
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17

### 18 *Study status*

19  
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22  
23 Recruitment into the longitudinal cohort component occurred from September 2020 to  
24  
25  
26 September 2021, with 24 months of follow-up. Monthly longitudinal surveys ceased in August  
27  
28  
29 2022, after which data collection shifted to annual follow up periods until August 2024. Data  
30  
31  
32 collection through qualitative FGDs, CEGs and snapshot surveys continued, with the most  
33  
34  
35 recent snapshot survey deployed in December 2022 – January 2023. Low COVID19 case  
36  
37  
38 numbers in Victoria in 2020 and much of 2021 (55) meant that recruitment of recent COVID-  
39  
40  
41 19 cases and close contacts into Group 1 was limited, but recruitment into Group 2 met or  
42  
43  
44 exceeded most recruitment targets (Table 3). A total of 779 participants were recruited and  
45  
46  
47 completed a baseline survey and contributed to the longitudinal cohort between September  
48  
49  
50 2020 – August 2022, of which 651 were still in active in August 2022.  
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4 As of August 2022, the Optimise Study had collected data from 712 participants; 651  
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6  
7 participants remain active (Table 3), and 51 participants have withdrawn.  
8  
9

10  
11 Seven rapid snapshot surveys were deployed between September 2021 and January 2023. The  
12  
13  
14 August 2022 snapshot survey examined the frequency and impacts of long COVID; of 653  
15  
16  
17 participants invited to complete the survey, 499 (76%) responded and almost half (243/499) of  
18  
19  
20  
21 participants had been infected with COVID-19 at least once since the beginning of the  
22  
23  
24 pandemic (December 2019). Twenty-four semi-structured qualitative interviews have been  
25  
26  
27 conducted (7 in December 2020, 17 over May–June 2021), contributing to monthly reports.  
28  
29  
30  
31 Three FGDs were held in July 2022 (n=20), targeting participants who reported having long  
32  
33  
34 COVID and generating insights into the snapshot survey reports. Seven CEG members were  
35  
36  
37 recruited in January 2021. They participated in 10 CEGs between February and November  
38  
39  
40 2021, contributing to monthly reports. Twelve CALD CEG members were recruited in  
41  
42  
43 September 2021, and contributed to 2 CALD CEGs between September and October 2021.  
44  
45  
46  
47 The two CEGs were combined and another 4 CEG meetings held between March and  
48  
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50  
51 September 2022 to provide insights into the snapshot surveys.  
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**Table 3.** Active cohort participants, August 2022

	Total	
	n	%
Total	651	100
Age		
15-24	99	15.3
25-34	131	20.2
34-44	105	16.2
45-54	108	16.7
55-64	115	17.7
> 64	90	13.8
Sex		
Male	166	25.5
Female	484	74.3
Other	1	0.2
Aboriginal or Torres Strait Islander		
Yes	3	0.5
No	648	99.5
Country of Birth		
Australia	417	64.1
Other	234	35.9
Language Spoken at home		
English	532	81.7
Language other than English (LOTE)	119	18.3
LOTE spoken at home (top 3)	119	
Arabic	32	26.9
Mandarin	32	26.9
Hindi or Urdu	11	9.2
Group 1 target population		
Recent COVID-19 case	9	1.4
Close contact	17	2.6
Quarantine worker	29	7.6
Group 2 target population <sup>1</sup>		

Pre-existing chronic health condition	170	26.3
Aged care worker	31	4.8
Healthcare worker	117	18.1
Regional Victoria	116	18.0
High-risk workplace <sup>3</sup>	31	4.8
CALD recruited through bilingual data collectors <sup>2</sup>	71	10.7
Arabic	33	47.1
Chinese	29	41.4
Dinka	8	11.4
Young people	93	14.7
Recruitment layer		
0	372	57.1
1	171	26.3
2	105	16.1
3 <sup>4</sup>	2	0.3
4 <sup>4</sup>	1	0.2

<sup>1</sup> Based on screener survey. Categories are not mutually-exclusive and percentage does not total 100%.

<sup>2</sup> Based on reporting speaking an LOTE at home or identifying as Aboriginal and/or Torres Strait Islander

<sup>3</sup> Includes factory, distribution and meat work settings

<sup>4</sup> Individuals that are nominated by Layer 2 or Layer 3 participants and had already been recruited into the study, are classified as layer 3 and 4.

## DISCUSSION

The is the largest social networks study conducted in Australia. Our baseline recruitment data demonstrates high willingness to engage in a complex, data-intensive longitudinal study of COVID-19. Localised and timely data collection is imperative for informing public health policy that is both community-centred and evidence-led. The Optimise platform provides empirical and timely information about key populations at risk of contracting COVID-19 and/or experiencing negative impacts of associated government restrictions. The frequent and detailed information being collected by the Optimise study improves understanding of the economic and social barriers faced by priority populations. However, this study has some limitations that are important to consider. The social network study design meant seed participants were recruited from priority groups, therefore, the Optimise sample was not intended to be representative of the general population of Victoria. The snowball recruitment methodology and oversampling of key groups was by design and should be considered a strength of the study, as it can increase statistical power to detect differences in the outcomes between these groups. However, it does limit generalisability. Lastly, due to low case numbers in Victoria in 2020 and much of 2021 (55) the initial target to recruit participants into Group one (COVID-19 cases and close contacts) was limited.

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4 To date, the Optimise platform has generated 17 briefing reports and 7 publications, which  
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6  
7 have directly informed the Victorian Government's COVID-19 policy and practice (8, 14, 15,  
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9  
10 50-55). It informs responsive government policy that is more likely to be accepted and adhered  
11  
12  
13 to because it reflects community values, attitudes and motivations (16, 51, 56, 57). It also  
14  
15  
16 provides unique and detailed information about social contacts and mixing patterns to shape  
17  
18  
19 transmission models, and insights into how social connectedness influences behaviours,  
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21  
22 attitudes and perceptions.  
23  
24  
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31

## 32 **Abbreviations**

33  
34  
35 Arabic/Mandarin/Dinka (AMD)

36  
37  
38 Culturally and linguistically diverse (CALD)

39  
40  
41 Community engagement group (CEG)

42  
43  
44 Expression of interest (EOI)

45  
46  
47 Focus group discussion (FGD)

48  
49  
50 Generalized Anxiety Disorder 7-item (GAD-7)

51  
52  
53 Language other than English (LOTE)  
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## Declarations

### Ethics approval and consent to participate

Ethics approval for Optimise was provided by the Alfred Human Research Ethics Committee, Approval Number 333/20. All participants completed informed electronic consent to participant in the study. The Optimise Study CEG is approved by the La Trobe University Human Ethics Committee (#HEC20532). All CEG participants completed informed electronic consent to participant in the study. The study was undertaken in accordance with the National Health and Medical Research Council National Statement on Ethical Conduct in Human Research.

### Consent for publication

Not applicable.

### Data availability statement

The data presented in this study may be requested from the corresponding author. The data are not publicly available due to ethical considerations and data privacy restrictions.

## Competing interests

Burnet Institute has received investigator initiated clinical research funding from Gilead Sciences, AbbVie, and Merck unrelated to this grant. All other authors declare no competing interests.

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**Roles and responsibilities – committees:** The Optimise Executive Committee, comprised of AP, SF-L, LG, SH, NS, DL, MS, KB and MH, directed and oversaw the study.

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2  
3  
4 **Roles and responsibilities – sponsor and funder:** The study sponsor was the Burnet Institute,  
5  
6  
7 and Burnet staff were responsible for developing the study design; collecting, managing,  
8  
9  
10 analysing and interpreting data; writing the report; and submitting the report for publication.  
11  
12

13  
14 The study funders had no role in study design; collection, management, analysis, and  
15  
16  
17 interpretation of data; writing the report; or the decision to submit the report for publication.  
18  
19

20 However, government funding bodies provided input into research questions related to their  
21  
22  
23 COVID-19 polices, which were incorporated into data collection tools.  
24  
25  
26  
27  
28  
29

### 30 **Contributors**

31  
32  
33 AP, SF-L, LG, SH, NS, DL, MS, KB, MH led the development of overall study design, data  
34  
35  
36 collection tools, oversight of the study and write-up of manuscript.  
37  
38  
39

40 AB, KH, AJT, AW, SF-L, FS, BM, JO, AA, SC, TN, LN, KY, PK, DO, EJLK, MVC, RR, FS,  
41  
42  
43 JSD, NM, MD, AC, and JK contributed to the study design, development of data collection  
44  
45  
46 tools, data collection, management and analysis.  
47  
48  
49

50 LG, AD, CH, SM, KB, DH, JW contributed to development of qualitative data tools and study  
51  
52  
53 design.  
54  
55  
56  
57  
58  
59  
60

1  
2  
3 SH, BM, RR, AP, FS, RP and DV contributed to development of community engagement  
4  
5  
6  
7 groups and analysis of social media data.  
8  
9

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12  
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21  
22

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24  
25  
26 tailoring the methodology for inclusion of CALD participants, and overseeing translation of  
27  
28  
29 tools into three community languages.  
30  
31

32  
33 All authors contributed to study design provided editorial comments and feedback and  
34  
35  
36 approved the final manuscript.  
37  
38  
39

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55  
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## 38 **FIGURE TITLES AND LEGENDS**

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42 **Figure 1.** Example of snowball recruitment for the Optimise Study  
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46 **Figure 2.** Overview of standardised quantitative data collection tools and scheduling for a 12-  
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53 \* As recruitment was extended to include additional recruitment targets – the following up period was extended to a maximum of 24 months.  
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For peer review only



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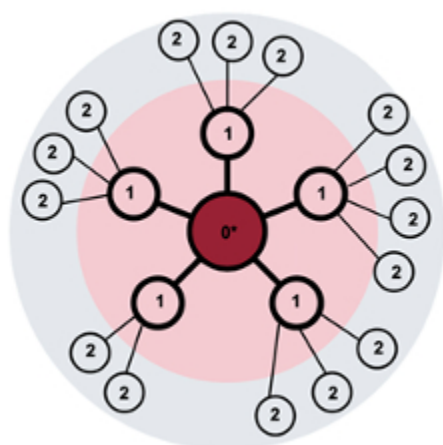


Figure 1. Example of snowball recruitment for Optimise Study  
87x84mm (72 x 72 DPI)

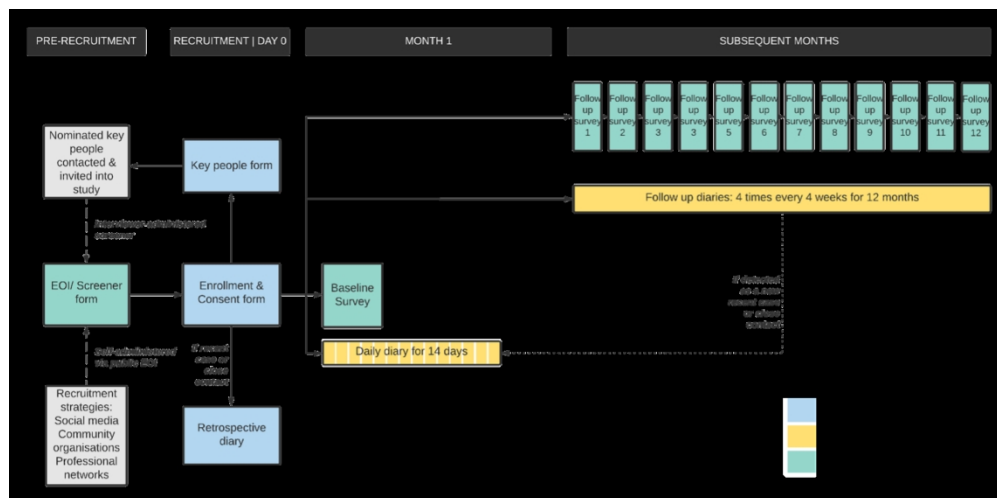


Figure 2. Overview of standardised quantitative data collection tools and scheduling for a 12-month period

183x90mm (220 x 220 DPI)

**Supplementary file 1.**

Data category	Information
Study registration number	ClinicalTrials.gov NCT05323799
Date of registration in primary registry	April 12, 2022
Source(s) of monetary or material support	Victorian Government Department of Jobs Precincts and Regions, Macquarie Group Foundation, Burnet Institute donors
Primary sponsor	Burnet Institute
Contact for public queries	AP, PhD [alisa.pedrana@burnet.edu.au]
Contact for scientific queries	AP, PhD Burnet Institute
Scientific title	Priority populations' experiences of isolation, quarantine and distancing for COVID-19: a protocol for an observational cohort, the Optimise Study.
Countries of recruitment	Australia
Health condition(s) or problem(s) studied	CORONAVIRUS DISEASE (COVID-19) CAUSED BY THE SARS-COV-2 VIRUS AND RELATED SOCIAL, HEALTH AND ECONOMIC IMPACTS
Intervention(s)	N/A
Key inclusion and exclusion criteria	<p>Ages eligible for study: ≥18 years  Sexes eligible for study: both  Accepts healthy volunteers: Yes</p> <p>Inclusion criteria: adult patient (≥ 18 years), residents of Victoria, Australia, have access to the internet to complete online surveys or a phone to undertake phone interviews.</p> <p>Exclusion criteria: Currently in hospital or too unwell to participate at recruitment; Not currently residing in Victoria at recruitment, Aged &lt;18 years</p>
Study type	Observational
Date of first enrolment	September 2020
Target sample size	1000
Recruitment status	Recruitment closed – follow up data collection ongoing
Primary outcome(s)	<ul style="list-style-type: none"> <li>• Uptake of COVID-19 risk mitigation strategies over time – e.g. isolation, quarantine, vaccines, mask wearing, physically distancing</li> <li>• Knowledge of COVID-19 restrictions and confidence in government decision-making over time</li> <li>• Average number of contacts with key people per day over time and in different settings</li> </ul>
Key secondary outcomes	<ul style="list-style-type: none"> <li>• Changes in work and finances as a result of COVID-19;</li> <li>• Changes in lifestyle and social engagement as a result of COVID-19; and</li> <li>• Changes in physical and mental health as a result of COVID-19;</li> </ul>

**Table 1 – Optimise Study registry information**

<p>COVID-19 Case Definitions</p>	<p><b>COVID-19 Case</b> : A person that test positive for COVID-19</p> <p><b>Close contact:</b> (as per DHHS): Spending more than 4 hours with someone who has COVID-19 inside a house, accommodation or care facility. Aka household/household-like contact. notified by health department they were a close contact of a person who tested positive for COVID-19</p> <p><b>Contact:</b> Someone that a participant has had a face-to-face conversation with, shared a close space with (e.g., room, car, public transport), or had physical contact with (e.g., handshake, hug, kiss, contact sport). This is distinct to the Government definitions of ‘close contact’. Participants are asked to list their contacts in the daily diary and monthly surveys.</p> <p><b>Isolation:</b> Requirement to isolate from other people at home or another location, if deemed appropriate, if you have confirmed COVID-19 or have been tested for COVID-19 due to symptoms (prior to a negative result) in order to prevent the spread of COVID-19. This is distinct from Stage 3 and 4 measures which are sometimes referred to as “iso” or lockdown.</p> <p><b>Quarantine:</b> Requirement to be physically distant from other people if you are well but have been in recent contact with someone with COVID-19 whilst that person was potentially infectious.</p> <p><b>Physical distancing:</b> Practicing of keeping physical space (&gt;1.5 metres) between oneself and others and avoiding physical contact to prevent the spread of COVID-19.</p>
<p>Key Groups</p>	<p><b>Aged care worker:</b> For the purpose of recruitment, defined as self-identifying as an aged care worker. Aged care workers provide care, supervision and support for aged people in residential establishments, clinics, hospitals and private residence. Roles include personal care, domestic duties and management of illness.</p> <p><b>Chronis illness or medical condition requiring ongoing medical care:</b> defined as a condition that lasts 1 year or more and requires ongoing medical attention and/or limits activities of daily living. They are long lasting conditions with persistent effects. For the purpose of recruitment, potential defined as self-identifying to have a chronic illness or other medical condition requiring ongoing medical care.</p> <p><b>Culturally and/or linguistically diverse (CALD):</b> People of CALD backgrounds were born overseas, have a parent born overseas or speak a variety of languages. In the Optimise Study individuals will be defined as CALD if they report being born overseas, speaking a language other than English at home, or of Aboriginal and Torres Strait Islander origin.</p> <p><b>AMDS (Arabic Mandarin Dinka Speaking Participants):</b> People who speak Arabic, Mandarin, or Dinka as their primary language spoken at home will be defined as AMDS, as a subgroup of CALD participants.</p> <p><b>Factory/distribution/manufacturing worker:</b> Defined by working in one of the following workplaces: Warehousing / Distribution / Freight forwarding; Supermarket and medical distribution center; Abattoir or meat processing, including seafood and poultry; Food, beverage, and fiber manufacturing; or caravan manufacturing.</p> <p><b>Healthcare workers:</b> For the purpose of recruitment, defined as self-identifying as a healthcare professional (healthcare worker). A healthcare worker is a worker who is a regulated health professional, including: Aboriginal and Torres Strait Islander health practice; Chinese medicine (acupuncturists, Chinese herbal medicine practitioners and Chinese herbal dispenser); chiropractic; dental (dentists, dental specialists, dental hygienists, dental prosthetists, dental therapists and oral health therapists); medical; medical radiation practice (diagnostic radiographers, nuclear medicine technologists and radiation therapists); nursing and midwifery (registered nurses, enrolled nurses, nurse</p>

	practitioners, and midwives); occupational therapy; optometry; pharmacy; physiotherapy; podiatry; psychology.
	<b>Regional town centers: These are locations outside of major cities such as Melbourne:</b> Regional centers are hubs for larger regional areas they provide surrounding areas access to education, jobs, personal and professional services, recreation and opportunities for cultural participation. They are determined by function rather than size. For example: Geelong, Ballarat, Bendigo
	<b>Recent COVID-19 cases:</b> People who have received a positive test result for COVID-19 in previous 7 days
	<b>Young Person:</b> Person aged 18-24 years at recruitment
Sampling Groups	<p><b>Group 1 seeds:</b> Victoria adults who had recently been notified with a diagnosis of COVID-19 or were identified as a 'close contact'. The checklist for Covid contacts is found here <a href="#">link</a></p> <p><b>Group 2 seeds:</b> Members of the general community, with quotas to focus recruitment of specific key at-risk populations.</p> <p><b>Key people (formally 'key relationships' and 'close ties'):</b> Key people who are part of the participants' life on a daily or weekly basis, such as family, friends, partners, housemates, neighbours, co-workers:</p> <ul style="list-style-type: none"> <li>- someone they would discuss private, personal matters with</li> <li>- someone who provides important practical assistance or support</li> <li>- co-workers who they frequently deal with</li> <li>- people they share activities with, such as hobbies, sport, religious gatherings, visiting relatives</li> </ul> <p>It is <i>not</i> limited to people who participants are emotionally bonded to. It can include people who they are only in contact with digitally, and those who don't live in Victoria or Australia. Key people will be used to assess how social networks influence COVID-19 transmission as well as influence individuals' behaviour and attitudes. Key people also provide a sampling frame for snowball recruitment.</p> <p><b>Seeds:</b> The initial study recruits who meet cohort-specific criteria and are first to participate in the study (Wave 0). Seeds subsequently identify other potential participants for the study. This snowball method coupled with purposive sampling will enable social network analysis of specific outcomes.</p> <p><b>Snowball Layer:</b> Each successive round of recruitment based on referral from <b>seeds</b> and subsequent participants. Wave 1 consists of the 'key people' referred and recruited by seeds; Wave 2 consists of the 'key people' referred and recruited by Wave 1 participants.</p>

**Table 2 - Definitions for key groups, sampling strategies and COVID-19 case definitions**

## Supplementary file 2. Consent form for longitudinal cohort participation

### Explanatory Statement

<b>Title</b>	<b>The Optimising Isolation, Quarantine and Distancing Study for COVID19 (Optimise COVID19 Study)</b>
<b>Principal Investigators</b>	Professor Margaret Hellard, Dr Katherine Gibney, Dr Alisa Pedrana, Prof Mark Stoove, Prof Lisa Gibbs, Dr Angela Davis, Dr Nick Scott, Prof Dean Lusher, Prof David Wilson, Assoc Prof Joe Doyle, Dr Freya Shearer, Dr. Nic Geard, Prof Sophie Hill.
<b>Associate Investigators</b>	Prof Jodie McVernon, Dr Karen Block, Prof David Anderson, Prof Allen Cheng, Ms Ali Coelho, Prof Sally Green, Mr Danny Vadasz, Dr Brett Sutton, Prof Alex Collie
<b>Location</b>	Burnet Institute, 85 Commercial Road, Melbourne, Victoria, Australia 3004

### 1. Introduction

You are invited to take part in this research project because you have expressed interest in participating in our study to understand people's experience of COVID-19 and the measures to prevent infection in the community. This Explanatory Statement gives you information about the research project. It explains what is involved to help you decide if you want to take part. Please read this information carefully. Ask questions about anything that you don't understand or want to know more about. Participation in this research is voluntary (if you don't wish to take part, you don't have to). If you decide you want to take part in the project, you will be asked to complete **an initial interview** over the phone with one of the project researchers, this will include completion of a registration form, an **online questionnaire**, and electronic **daily diary** entry for 14 days. You will be asked to repeat a monthly online questionnaire and will receive notification to complete follow up diaries (single day) 4 times/month for 12 months (average once weekly).

In doing so you are telling us that you:

- understand what you have read;
- consent to take part in the research project;
- consent to be involved in the procedures described;
- consent to the use of your personal and health information as described.

You now have a copy of this Explanatory Statement to keep and print for yourself. We will require you to provide verbal consent prior to the **study procedures** taking place.

### 2. What is the purpose of this research project?

The purpose of this project is to find out how members of the public experience COVID-19 and the measures taken to prevent infection and how experiences change over time. The researchers are interested in hearing about how your living situation, work, responsibilities, physical health, mental health and lifestyle have been affected by COVID-19 and preventative measures such as physical distancing. We are also interested in your understanding of local requirements relating to COVID-19. The information gathered in this research project will be used to inform a strategic approach in how to continue to ensure new infections are reduced, while understanding the economic, physical and social impacts that physical distancing and self-isolation have on individuals.

### 3. What does participation in this research project involve?

#### a) Questionnaires and daily diaries

Participation in this study involves completing the following online questionnaires and diaries. You will be sent online access to the questionnaire and diary surveys and asked to capture the details as listed in the table. If you are not comfortable or not able to complete the surveys yourself online, you will have the option to be assisted by a researcher over the phone.

ENROLMENT INTERVIEW	BASELINE QUESTIONNAIRE	DAILY DIARY	FOLLOW UP QUESTIONNAIRES
DAY 0	DAY 0	INITIAL: DAILY FOR DAYS 1-14 FOLLOW UP DIARY (SINGLE DAY) 4 TIMES/MONTH FOR 12 MONTHS.	DAY 30 AND REPEATED EVERY MONTH FOR UP TO 12 MONTHS
PHONE	ONLINE (OPTION FOR PHONE)	ONLINE (OPTION FOR PHONE)	OPTION FOR PHONE / ONLINE
KEY PEOPLE FORM		DAILY RESPIRATORY/COVID SYMPTOMS Testing Diagnosis Isolation/quarantine	TOPICS INCLUDED IN QUESTIONNAIRE: CHANGE IN LIVING SITUATION Change in work, study or responsibilities Lifestyle, social engagement & support Changes to physical health or healthcare COVID-related health and isolation
	TOPICS INCLUDED IN QUESTIONNAIRE: LIVING SITUATION WORK, STUDY & RESPONSIBILITIES LIFESTYLE, SOCIAL ENGAGEMENT & SUPPORT PHYSICAL HEALTH & HEALTHCARE UTILISATION MENTAL HEALTH & WELLBEING COVID HEALTH Attitudes and experiences of government measures to prevent COVID	DAILY DOCUMENTATION OF SOCIAL CONTACTS:  - DEMOGRAPHICS OF CONTACT  - RELATIONSHIP TO CONTACT  - LOCATION OF CONTACT  - TYPE /PURPOSE OF CONTACT  - LENGTH OF CONTACT	MENTAL HEALTH & WELLBEING ATTITUDES AND EXPERIENCES OF GOVERNMENT MEASURES TO PREVENT COVID
		MOOD	

EXPECTED TO TAKE 30 MINUTES IF SELF-COMPLETED	EXPECTED TO TAKE 5-10MINUTES FOR EACH DAY	Expected to take 20 minutes if self-completed
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The overall study will take place over 15 months. Individuals will be recruited to participate at different times in the study. Depending on when you are recruited, you will be asked to repeat a fortnightly daily diary and monthly questionnaire for up to 12 months (52 weeks). A researcher will confirm the expected follow up required for you.

If you meet certain criteria during the observed follow up period (e.g. recently diagnosed with COVID-19, recently notified as a close contact of someone with confirmed COVID-19), then a researcher will invite you to complete another 14-day daily diary. You will be reimbursed an additional \$15 on top of the standard reimbursement fee for this activity (see below).

We will also ask you if you are willing to be contacted about participating in related research activities, such as a qualitative interview, as described below, or research studies in COVID-19 exploring types of diagnostic tests (to also involve blood & swab collection). If you agree, you may be contacted separately and invited to participate. They are both optional and will not impact your involvement in this study.

Qualitative interviews will be used to better understand peoples' experiences of isolation and quarantine. Interviews may take place either via telephone/zoom, depending on preference. The interview will take approximately an hour, it will be audio recorded and then after it is typed up (transcribed) the audio will be destroyed. The interview will be viewed by staff that have been trained to perform the transcription duties of the project compliant with Burnet Institute confidentiality policies. A pseudonym will be allocated to you, so that your real name and identity isn't known. All interview transcripts will be stored under the requirements of Burnet Institute's security requirements; on a secure password protected server.

#### [Will I be reimbursed for being in the study?](#)

You will be reimbursed for your time in completing the project questionnaires and diaries according to the following schedule:

- \$50 in the first month following completion of the baseline survey;
- \$35 in subsequent months where you actively participate in completing diaries/questionnaires.

If you are invited to participate in extra activities during the course of the study, you will be reimbursed on top of the rates above. You will receive your reimbursement once a month via electronic gift card vouchers which can be used across a range of retailers.

#### **b) Nomination of people who have a key role in your life (key people)**

To better understand how the community is responding to COVID-19 and the measures to prevent infection, we would like to ask you to nominate up to 15 people you consider to have a key role in your life on a daily or weekly basis. These may include your family, friends, neighbours, co-workers, or others. Our research is interested seeing how people's social connections affect their health and wellbeing as well as how they influence how COVID-19 might spread through a community. We would like to ask some of your key people to also be involved in completing similar surveys to what is outlined for your involvement in the study. We will ask you to provide a name and contact number for these people so that we can contact them to invite them to participate. These details will only be used for this purpose, and no other personal information from your study participation will be shared with



1 anyone. Each key person nominated will have the right to refuse participation, this will not affect your  
2 study participation. If they refuse, we will not contact them again, their details will be retained until  
3 the completion of the study.  
4

#### 5 **4. What are the possible benefits?**

6 Possible benefits to you include having a say in the development of research and programs to promote  
7 the health of the general public and improve our national response to epidemics of novel diseases  
8 such as COVID-19.  
9

#### 10 **5. What are the possible risks?**

11 You may feel uncomfortable talking and answering questionnaires about your experience of COVID-  
12 19 and the impacts on your personal living situation, finances, and wellbeing. However, you are free  
13 to not answer any question you don't feel comfortable answering. The researcher will make  
14 themselves available before and after the interview (within work hours) to answer any questions  
15 that may arise or any concerns you have.  
16  
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18

19 We would encourage you to answer truthfully and please be assured that all your responses will  
20 remain confidential and will not be passed to any authorities. However, you should be aware that  
21 should you become involved in a criminal or civil case, in certain limited circumstances, a court of law  
22 may be persuaded to order disclosure of particular information relating to you which would otherwise  
23 remain confidential.  
24  
25

26 You are free to stop participating if you become upset or distressed as a result of your participation.  
27 If this happens, please notify the researcher as soon as possible, and they will discuss with you the  
28 option of arranging for counselling or other appropriate support if you wish. The researcher will give  
29 you advice and information about several free options for support after the interview and help you to  
30 choose the best option for you and help you make contact.  
31  
32

#### 33 **6. Do I have to take part in this research project?**

34 Participation in any research project is voluntary (if you do not wish to take part, you do not have to).  
35 If you decide to take part and later change your mind, you are free to withdraw from the project at a  
36 later stage. If you decide to withdraw, please notify a member of the research team as soon as  
37 possible. If you withdraw, you will not be contacted for any further participation, but it will not be  
38 possible to remove any data that we have previously collected about you.  
39  
40

#### 41 **7. How will I be informed of the results of this research project?**

42 On completion of the research any identifying information will be removed. The findings will report  
43 on summary data that can't be linked to any single person. If you're interested in the results, you can  
44 find them on the Optimise Study website ([www.optimisecovid.com.au](http://www.optimisecovid.com.au)) or a short summary can be  
45 mailed to you.  
46  
47

#### 48 **8. What will happen to information about me?**

49 It is anticipated that the results of this research will be published and/or presented in a variety of  
50 forums, including to the Government. In any publication and/or presentation, information will be  
51 provided in such a way that you cannot be identified.  
52  
53

54 Your personal information and survey data will be stored in a password-protected database on a  
55 secure server at the Burnet Institute. The database for the study has been designed and supported  
56 by SNA toolbox, to review the Privacy Policy and terms of use of how data is collected, used and  
57 stored (<https://www.snatoolbox.com/>). Members of the software service providers are part of the  
58 study team. A unique identification number will be assigned to you at the start of the study and this  
59  
60

1 will help us link the information you provide over time. This information will be re-identifiable: the  
2 code is used so that the research team can identify you if necessary; for example, to contact you for  
3 follow up questionnaires.  
4

5 Restricted members of the study team have access to your personal data. They will only use  
6 personal data to contact you and your key people for the purposes of recruitment and follow up.  
7 Optimise researchers will have access to your de-identified data as well as your postcode. De-  
8 identified data means all personal information (name and email) is replaced with a unique ID. Any  
9 summaries that may be produced will not contain any identifying information.  
10

11  
12 To help us map your social network over time, we need to retain and store your personal details and  
13 the links to the people you nominated and any other contacts until the end of the study. These data  
14 will be stored separately from your de-identified survey data to help protect your privacy and  
15 confidentiality. Documentation that captures your verbal consent will be stored separate from your  
16 data. All data collected will be retained for 7 years and then destroyed.  
17

### 18 9. Can I access research information kept about me?

19  
20 In accordance with relevant Australian and/or Victorian privacy and other relevant laws, you have the  
21 right to access the information collected and stored by the researchers about you. Please contact one  
22 of the researchers named at the end of this document if you would like to access your information.  
23 Furthermore, in accordance with regulatory guidelines, the information collected in this research  
24 project will be kept for at least 7 years.  
25

### 26 10. Is this research project approved?

27  
28 The ethical aspects of this research project have been approved by the Alfred Hospital Ethics  
29 Committee. This project will be carried out according to the *National Statement on Ethical Conduct in*  
30 *Human Research (2007)* produced by the National Health and Medical Research Council of Australia.  
31 This statement has been developed to protect the interests of people who agree to participate in  
32 human research studies.  
33

### 34 11. Who can I contact?

#### 35 For further information:

36 If you want any further information concerning this project, you can contact one of the Principal  
37 Researchers:  
38

39 Professor Margaret Hellard, (03) 9282 2163, [margaret.hellard@burnet.edu.au](mailto:margaret.hellard@burnet.edu.au)

40 Dr Katherine Gibney, [katherine.gibney@unimelb.edu.au](mailto:katherine.gibney@unimelb.edu.au)

41 Study team contact details: [email: optimise@burnet.edu.au](mailto:email:optimise@burnet.edu.au)

42 Text: 0447 045 460

43 Phone (03) 9282 2182

#### 44 For complaints:

45 If you have any complaints about any aspect of the project, the way it is being conducted or any  
46 questions about being a research participant in general, then you may contact:  
47

48 Position	Complaints Officer, Office of Ethics & Research Governance, Alfred Health
49 Telephone	03 9076 3619
50 Email	<a href="mailto:research@alfred.org.au">research@alfred.org.au</a>

51 Please quote the following project number: 333/20  
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### Supplementary file 3A. Expression of interest/screen

The Optimise Study is a research project that aims to find out how Victorians are experiencing COVID-19 and responding to the measures introduced to stop the spread of the virus. The information gathered in this research project will help guide Victoria's approach to COVID-19. It will be used to prevent new infections and reduce the health, social and economic impacts of COVID-19 restriction and prevention measures.

You can access more information about the study [here](#)

Please answer the following questions to see if you can take part.

First name: \_\_\_\_\_

Last name: \_\_\_\_\_

Email address: \_\_\_\_\_

Contact number: +61 \_\_\_\_\_

#### Screening form to assess eligibility

1. Please select your current age group:
  - a. Less than 18 years >> Sorry, only people aged over 18 are eligible to participate. [end survey]
  - b. 18 to 24 years
  - c. 25 to 34 years
  - d. 35 to 44 years
  - e. 45 to 54 years
  - f. 55 to 64 years
  - g. 65 to 74 years
  - h. 75+ years
2. What is your postcode?  
*If postcode doesn't start with 3 >> Sorry, only people who live in Victoria are eligible to participate [end of survey]*
3. What is your current gender identity?
  - a. Man
  - b. Woman
  - c. Trans man
  - d. Trans woman
  - e. Non-binary/gender fluid
  - f. My gender is not listed, *please specify* \_\_\_\_\_
  - g. Prefer not to say
4. What sex were you assigned at birth?

- 1  
2  
3 a. Male  
4 b. Female  
5 c. Indeterminate/intersex/unknown  
6 d. Prefer not to say  
7  
8 5. Are you of Aboriginal or Torres Strait Islander origin?  
9  
10 a. No  
11 b. Yes, Aboriginal  
12 c. Yes, Torres Strait Islander  
13 d. Yes, Aboriginal and Torres Strait Islander  
14 e. I don't wish to say  
15  
16  
17 6. Have you been **diagnosed** with COVID-19 in the past 7 days?  
18  
19 a. Yes  
20 b. No  
21 c. I don't wish to say  
22  
23  
24 7. Have you been notified as a **close contact** of someone with confirmed COVID-19 in the past 7  
25 days?  
26  
27 a. Yes  
28 b. No  
29 c. I don't wish to say  
30  
31  
32 8. Do you have a chronic illness or medical condition that you currently need ongoing medical  
33 care for?  
34  
35 a. Yes  
36 b. No  
37 c. I don't wish to say  
38  
39  
40 9. How many people, including yourself, live in your household? If you live in more than one  
41 place, consider your main household. \_\_\_  
42  
43  
44 10. Do you speak a language other than English at home?  
45  
46 a. Yes, specify \_\_\_\_\_ [most common language list]  
47 b. No >> skip to Q11  
48 c. I don't wish to say >> skip to Q11  
49  
50  
51 11. If yes, how would you describe your ability in speaking and understanding English?  
52  
53 a. Native speaker/bilingual  
54 b. Fluent  
55 c. Intermediate  
56 d. Beginner  
57 e. Don't know  
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3 12. Are you a healthcare professional (healthcare worker)?  
4

- 5 a. Yes  
6 b. No  
7  
8 c. I don't wish to say  
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10 13. Are you an aged care worker?

- 11 a. Yes  
12 b. No  
13  
14 c. I don't wish to say  
15

16 14. Do you work in one of the following workplaces:

- 17 Warehouseing / Distribution / Freight forwarding;  
18 Supermarket and medical distribution centre; or  
19 Abattoir or meat processing (including seafood and poultry)?  
20 Food, beverage and fibre manufacturing  
21 Caravan manufacturing  
22

- 23 a. Yes  
24 b. No  
25  
26

27 15. Do you work in hotel quarantine or border security?

- 28 a. Yes  
29 b. No  
30  
31 c. I don't wish to say  
32

33 16. *If female sex at birth:* Are you currently pregnant or have you given birth in the past 6 weeks?  
34

- 35 a. Yes  
36 b. No  
37  
38 c. I don't wish to say  
39

40 17. Do you self-identity as having been affected by the bushfires of the summer of 2019/2020?  
41

- 42 a. Yes  
43 b. No  
44  
45 c. I don't wish to say  
46

47 18. How did you find out about the Optimise study?

- 48 a. Through my workplace  
49 b. Through a health service  
50 c. Via social media  
51 d. Friend/family  
52 e. Other, *please specify* \_\_\_\_\_  
53

54 19. Please provide a contact phone number \_\_\_\_\_  
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56 20. Please provide your email address \_\_\_\_\_  
57

58 21. Please provide a first name or preferred name \_\_\_\_\_  
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22. What is your preferred time of day for us to contact you?

[If language spoken at home is not English] In OPTIMISE we offer data collection interviews in Arabic, Mandarin, and Dinka.

We have the following options available for you to complete surveys to match your needs:

- **Self-completion of all surveys in English.**

For this option, all surveys will be sent to you via email, sms or both for you to complete on your own with your mobile device or computer. These surveys are all in English.

- **Partial self completion of surveys in Arabic/Mandarin - monthly surveys completed over the phone with an interviewer.**

For this option you can complete regular contact diaries that have been translated into Arabic or Mandarin. These survey links will be sent to your mobile device or laptop for you to complete in your own time. The Baseline and Monthly Follow-up surveys will be completed over the phone with an interviewer who speaks Arabic/Mandarin.

- **All surveys completed over the phone with data collector in Arabic/Mandarin/Dinka.**

This option is for participants who would not usually be able to complete surveys, or those who are unable to complete surveys on a mobile or computer. An interview will be scheduled each week for you to speak with a data collector to complete the surveys you have been assigned.

23. How would you like to complete the surveys?

- Self-complete all surveys in English
- Self-complete diaries in [Arabic/Chinese] interviewer assisted for monthly surveys
- All surveys to be administered by data collector in Arabic/Mandarin/Dinka

24. *Wave 1 and 2 participants only (interviewer-administered):* Is the candidate eligible for study participation? *Consider age and Victorian residence only*

- a. Yes
- b. No

Thank you for your responses. If you meet our study requirements, a researcher will be in contact with you.

## Supplementary file 3B. Key people form

### Key people form

#### *\* Interviewer-administered*

We'd like to ask you some questions about people who have a key role in your life. We know social connections are important for people's health and wellbeing and make a big difference to our lives. So, we want to understand the impact of people around you on you, as well as how you may impact those around you. We also want to know about how your social connections influence how COVID-19 might spread through the community.

We'd like to ask you some questions about key people who are a part of your life on a daily or weekly basis. I'm going to give you some prompts to help you think about this. Nominate as many or as few people as you like, but we would like you to focus on the key people. They could be your family, friends, partner, housemates, neighbours, co-workers or others in your life. If there is no-one you consider to be a key person in your life, then do not nominate anyone. You can also nominate people who you are staying in contact with only online or by phone, including people who are not in Australia.

At regular time points, we will ask you again about these key people to assess how frequently you have contact with them.

When you nominate people, we will ask you to provide names, phone numbers and where they live (suburb if in Australia, else country).

We are asking for this detail so we can invite your contacts into the study if you are OK with that. We also plan to build a social map to see how different people in the study might be connected. For this, we need enough information to identify if any of your key people are also key people of another person in the study. We want to understand how networks of people are connected and understand how connections impact wellbeing, as well as behaviours and potential COVID-19 spread.

We would like to recruit some of your key people to participate in this study. However, you can tell us if you would prefer that we don't do this. You can also ask that we wait one day before contacting people so that you can talk to them first to let them know that we may be contacting them. You can share a link to the study website for them to read about the study before we contact them. We won't be recruiting your key people living outside of Victoria or Australia into the study, but please nominate them if they are key people in your life.

When we contact these individuals, we will let them know that they have been nominated by you; are you happy for us to do that? We won't share any other personal information about you or other people you nominate with the key people you nominate or between participants.

Do you have any questions?

Now I'm going to talk you through the prompts. Please list your key people starting with those who have the most important role in your life within each area. Thinking about family, friends, your partner(s), housemates, neighbours, co-workers or others:

- **"With whom do you discuss important personal matters?" (e.g., personal problems, other matters)**

[add names] [System will limit it to 10 nominations for this specific question]

- Refuses to answer
- No key people in this group

- **"Who provides you with important practical assistance or support?"**

[add names] [if the same person from above is mentioned, please confirm it is the same person]  
[System will limit it to 10 nominations for this specific question]

- Refuses to answer  
 No key people in this group

- **“Who are important co-workers (i.e., colleagues, superiors, junior staff) that you frequently deal with for your work?” If you are a student, you can also consider your classmates and or supervisors/lecturers/tutors that you frequently deal with for your study.**

[add names] [if the same person from above is mentioned, please confirm it is the same person]  
[System will limit it to 10 nominations for this specific question]

- Refuses to answer  
 No key people in this group

- **“Thinking of important activities in your life (e.g., hobbies, sport, leisure, religious gatherings, visiting older relatives), who are the key people you frequently deal with personally when undertaking these activities? They may help you get the activity done or be a person you share the activity with.”**

[add names] [if the same person from above is mentioned, please confirm it is the same person]  
[System will limit it to 10 nominations for this specific question]

- Refuses to answer  
 No key people in this group

- **Is there anyone else you live with who has not been listed as a key person in other categories?**

[add names] [if the same person from above is mentioned, please confirm it is the same person]  
[System will limit it to 10 nominations for this specific question]

- Refuses to answer  
 No additional household members

**NB:** *If asked for a number by the participant, say: “there is no specific instruction on how many relationships to aim for but if we run out of space the system will notify us...”*

*If a participant doesn’t want to provide real names or contact details, ask them to provide a pseudonym that is memorable to them. We are still interested in knowing about who helps them or influences them, even if we can’t recruit them into the study.*

**\*\*\*** *If the participant stops eliciting names, ask “Is there anyone else?” \*\*\**

*Stop once they clearly and categorically state there is no-one else, they wish to nominate.*

**I’m now going to go through the names of people you nominated and ask you a few questions about them.**

Please let me know if there is anyone that you would like us not to contact? Perhaps they are unwell or not based in Australia.



1  
2  
3 We won't attempt to contact anyone for at least 24 hours. This will give you an opportunity to  
4 contact them first and let them know that they might be invited into a research study. I can email or  
5 SMS you a referral card now that you can pass on so that they have some information on the study.  
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8 **Do you have any questions?**  
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For peer review only

Full Name	Relationship to you Select one	Do you live in the same household with this person?	Age	Gender	Location (Suburb)	How much face-to-face contact have you had with this person over the last 4 weeks?	How much digital contact have you had with this person over the last 4 weeks?	<i>(If case)</i> Did you nominate this person as a close contact to DHHS?	Are you happy for us to contact them and recruit them into this study?	Phone number (if agrees to contact)	Would this participant be able to self-complete surveys in English?
	a. Family b. Friend c. Partner d. Co-worker e. Other	Yes No	<5 5-9 10-14 15-17 18-19 20-29 30-39 40-49 50-59 60-69 70-79 80+	a. Man b. Woman c. Non-binary/not listed d. Unknown	Suburb/postcode if in Australia (lookup table) Else "other" and specify town/city (Australia) or country	a. Daily / Most days b. Few times a week c. Once a week d. Once or twice e. None	a. Daily / Most days b. Few times a week c. Once a week d. Once or twice e. None	Yes No Don't know	a. Yes b. No – do not contact		a. Yes b. No c. Could complete surveys in Arabic/Mandarin

### Supplementary file 3C. Baseline Retrospective daily diaries

We are interested in understanding the timeline of key events that have occurred over the **past 7 days** in relation to COVID-19. Please have your calendar in front of you, if possible. We are interested in the period between [Day -7] to [Day -1]. Can you please talk me through your experiences in relation to covid? I will then ask some directed questions to make sure I understand properly.

Question visible to:		F	Sa	Su	M	T	W	Th
		24	25	26	27	28	29	30
	<b>TESTING</b>							
C, CC	1. Have you been <b>tested</b> for COVID-19 (coronavirus) in the past week? Y <input checked="" type="checkbox"/> N <input type="checkbox"/> → If yes, Mark the date(s) they got tested for COVID-19							
C, CC	2. Did you receive a <b>result</b> for COVID-19 test in the past week? Y <input type="checkbox"/> N <input type="checkbox"/> → If yes, Mark the date(s) you received a result → [For each date marked]: What was the result? Positive <input checked="" type="checkbox"/> Negative <input type="checkbox"/> Indeterminate <input type="checkbox"/> → <i>If positive</i> : Who first notified you about your positive test result? Testing Centre / Health service <input type="checkbox"/> Laboratory <input type="checkbox"/> Government/DHHS Hotline <input type="checkbox"/> Unsure <input type="checkbox"/> Other known setting, <i>specify</i> _____							
C, CC	3. Has anyone else in your household been diagnosed with COVID-19 in the past week? Y <input type="checkbox"/> N <input type="checkbox"/>							
	<b>SYMPTOMS</b>							
C, CC	4. Did you experience any COVID-19 related <b>symptoms</b> in the past week? Y <input type="checkbox"/> N <input type="checkbox"/> <i>Consider cough, fever, shortness of breath, sore throat, fatigue, aches and pains, headache, runny or stuffy nose, loss of taste/smell, nausea, vomiting, or diarrhoea</i> → If yes, mark each day they experienced symptoms							

Question visible to:		F	Sa	Su	M	T	W	Th
		24	25	26	27	28	29	30
	<p>→ Overall, how would you describe the severity of symptoms you have experienced so far? Mild <input type="checkbox"/></p> <p>Moderate <input type="checkbox"/> Severe <input type="checkbox"/></p>							
C, CC	<p>5. Did you seek <b>medical care or professional health advice</b> in relation to your COVID-19 the past week? Y <input type="checkbox"/> N <input type="checkbox"/></p> <p>→ If yes, Mark the date(s) they sought care / advice</p>							
<b>COMMUNICATION</b>								
C	<p>6. Were you contacted by someone on behalf of the Government/DHHS for the purpose of <b>contact tracing</b> in the past week? i.e. to discuss who you had close contact* with while infectious? Y <input type="checkbox"/> N <input type="checkbox"/></p> <p>→ If yes, Mark the date(s) they were contacted for contact tracing</p>							
C, CC	<p>7. Were you contacted by the Government/DHHS, health service or community services by <b>phone</b> to check up on your health status in the past week? Y <input type="checkbox"/> N <input type="checkbox"/></p> <p>→ If yes, Mark the date(s) they were phoned</p>							
C, CC	<p>8. Were you contacted by the Government/DHHS, health service or community services by <b>SMS</b> in the past week? Y <input type="checkbox"/> N <input type="checkbox"/></p> <p>→ If yes, Mark the date(s) you received these</p>							
C, CC	<p>9. Did someone from the Government/DHHS visit you <b>in person</b> at your house (<b>door knock</b>) in the past week? Y <input type="checkbox"/> N <input type="checkbox"/></p> <p>→ If yes, Mark the date(s) the DHHS visited you</p>							
<b>ISOLATION / QUARANTINE</b>								
C	<p>10. Are you still in <b>isolation</b>? Y <input type="checkbox"/> N <input type="checkbox"/></p>							

Question visible to:		F	Sa	Su	M	T	W	Th
		24	25	26	27	28	29	30
	<p>→ If No, mark the day you were released from isolation?</p> <p>→ Who notified you of your clearance from Isolation?</p> <p>Government/DHHS via phone <input type="checkbox"/></p> <p>Government/DHHS via SMS <input type="checkbox"/></p> <p>Testing Centre / Health service <input type="checkbox"/></p> <p>Workplace / Friend / Family member <input type="checkbox"/></p> <p>Unsure <input type="checkbox"/></p> <p>Other, <i>specify</i> _____ <input type="checkbox"/></p>							
CC	<p>11. Are you still in <b>quarantine</b>? Y <input type="checkbox"/> N <input type="checkbox"/></p> <p>→ If no, mark the day they were released from quarantine?</p> <p>→ Who notified you of your clearance from Quarantine?</p> <p>Government/DHHS via phone <input type="checkbox"/></p> <p>Government/DHHS via SMS <input type="checkbox"/></p> <p>Testing Centre / Health service <input type="checkbox"/></p> <p>Workplace / Friend / Family member <input type="checkbox"/></p> <p>Unsure <input type="checkbox"/></p> <p>Other, <i>specify</i> _____ <input type="checkbox"/></p>							
C, CC	<p>12. Did you <b>leave</b> your living premises for any reason during your <b>isolation/quarantine</b> period in <u>the past week</u>?</p> <p>Y <input type="checkbox"/> N <input type="checkbox"/></p> <p>→ If yes, Mark the dates where you left our premises</p> <p>→ For what reason:</p> <p>Medical Care <input type="checkbox"/></p> <p>Exercise <input type="checkbox"/></p> <p>Work <input type="checkbox"/></p> <p>To get essential food <input type="checkbox"/></p> <p>To get essential medicine <input type="checkbox"/></p> <p>To pick up/drop of a household member from work, school, childcare, appointments <input type="checkbox"/></p> <p>Visit someone in hospital <input type="checkbox"/></p> <p>Emergency Situation <input type="checkbox"/></p> <p>Other, <i>specify</i> _____ <input type="checkbox"/></p>							

Question visible to:	F Sa Su M T W Th						
	24	25	26	27	28	29	30
C, CC	13. Did you have any <b>visitors*</b> to your living premises while you were in isolation/quarantine in <u>the past week</u> ? Y <input type="checkbox"/> N <input type="checkbox"/> → If yes, Mark the dates where you had visitors → For what reason: Medical Care <input type="checkbox"/> Personal care <input type="checkbox"/> Emergency Situation <input type="checkbox"/> Household assistance <input type="checkbox"/> Other, <i>specify</i> _____						

Additional notes:

peer review only

## Supplementary file 3D. Baseline survey

### BASELINE QUESTIONNAIRE

#### • Pre-questions

Date of entry

Who is filling out this survey?

- Participant
- Researcher >> Namecode \_\_ \_\_

#### 1 Sociodemographics

1.2 What is your current postcode? \_\_\_\_ Write 9999 if you don't wish to say

1.3 What is your month and year of birth? [Jan-Dec] [1900 – 2005]

1.4 a) What country were you born in?

- Australia >> skip to 1.6
- Other, *please specify* [most common countries, other] \_\_\_\_\_

*b) If other:* What year did you arrive in Australia? [1900-2020] \_\_\_\_\_

1.5 What is the main language that you speak at home?

- English
- Other, *specify* [most common languages, other] \_\_\_\_\_

1.6 What is your current residential status in Australia?

- Permanent resident/Australian citizen
- Other

1.7 Are you of Aboriginal or Torres Strait Islander origin?

- No
- Yes, Aboriginal
- Yes, Torres Strait Islander
- Yes, Aboriginal and Torres Strait Islander
- Prefer not to say

1.8 What is your current gender identity?

- Man
- Woman
- Trans man
- Trans woman
- Non-binary/gender fluid
- My gender is not listed, *please specify* \_\_\_\_\_
- Prefer not to say

1.9 What sex were you assigned at birth?

- Male
- Female
- Indeterminate/intersex/unknown
- Prefer not to say

1.10 Are you an active member of any religious group or church?

- Yes
- No

Prefer not to say

1.11 What is the highest level of education you have completed?

Primary school or less

High school (not completed)

High school (completed)

TAFE / Trade Certificate

University – undergraduate degree (e.g. Bachelor degree) completed

University – postgraduate course (e.g. Masters, Doctorate) completed

Prefer not to say

## 2 Living situation

The following questions about where you are currently living, regardless whether this is your usual place of residence.

2.1 a) What type of accommodation do you currently live in? If you live in more than one place, describe your main residence.

House/townhouse

Flat/unit/apartment

Caravan/cabin/boat/motor home

Student accommodation or workers' quarters

Room in a hostel or boarding house

Hotel / motel

Residential home or institution (e.g. aged residential care)

Temporary accommodation (refuge, crisis or support accommodation) >> skip to

Q3.2

No dwelling/ improvised dwelling / motor vehicle / tent >> skip to Q3.2

Other, *please specify*: \_\_\_\_\_

b) Is the place where you currently live....?

Owned outright / with a mortgage (by you or your partner)

Rented (including paying board/fees)

Public or community housing

Rent free – living with a relative or someone else (including couchsurfing)

Other, *please specify*: \_\_\_\_\_

We are now going to ask you about people living in your household\*.

\* This includes people who regularly sleep at the household, **at least once a week**. If you have more than one household where you regularly sleep, consider your MAIN household.

2.2 How many adults (18 years and older), including yourself, currently live in your household \_\_\_ \_\_  
[1 – 100]

2.3 How many children (under 18 years old) currently live in your household \_\_\_ \_\_

2.4 Does your current household have internet access? (This includes fixed or mobile broadband services such as ADSL, Cable, Wireless and Satellite connections. Don't consider mobile phone data)

Yes

No

Don't know



1  
2  
3 2.5 a) Has your living situation changed due to COVID-19 and the measures to prevent its spread?

4 Consider where you live or who you live with

- 5  Yes  
6  
7  No >> skip to [Work, Study & Responsibilities](#)  
8

9 a) *If yes:* Why has your living situation changed? *Select all that apply*

- 10  Could no longer afford previous rent/mortgage  
11  Temporarily moved for self-isolation/quarantine  
12  Moved to be with partner/family/friends  
13  Moved to be away from vulnerable house members  
14  Moved due to concern for safety at usual residence  
15  Other people have moved out due to COVID-19  
16  Children or family have moved back in due to COVID-19  
17  Other people have moved in due to COVID-19  
18  Other, *specify* \_\_\_\_\_  
19  
20  
21  
22

### 23 3 Work, study & responsibilities

24 These questions are about your circumstances at the beginning of 2020 before the COVID-  
25 19/coronavirus pandemic reached Australia (e.g. February 2020), compared to your circumstances  
26 now.  
27

28 **Let's talk about your work and income in early 2020 (e.g. February 2020)**

29 3.1 a) What was your employment status in early 2020? *Select the best response*

- 30  Full time  
31  Part time  
32  Casual  
33  Self-employed  
34  Not employed and looking for work >> skip to 3.2  
35  Not employed and not looking for work >> skip to 3.2  
36  Full time carer/home responsibilities >> skip to 3.2  
37  Retired >> skip to 3.2  
38  Other, *specify* \_\_\_\_\_  
39  
40  
41  
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43 a) *If any employment:* Approximately how many hours of **paid work** did you do in a typical  
44 week in early 2020? \_\_\_\_\_

45 3.2 *If employed in early 2020:* What was your **main** occupation in early 2020? *Please choose the one*  
46 *option that best describes your main job.*

- 47  Managers  
48  Professionals  
49  Technician and Trade Workers  
50  Community and Personal Service Workers  
51  Clerical and Administrative Workers  
52  Sales Workers  
53  Machinery Operators and Drivers  
54  Labourers  
55  Don't Know  
56  
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60

Other, *specify* \_\_\_\_\_

3.3 *If employed in early 2020*: What industry did you work in for your **main** job in early 2020? *Select one only*

- Agriculture, forestry and fishing
- Mining
- Manufacturing
- Electricity, gas, water and waste services
- Construction
- Wholesale trade
- Retail trade
- Accommodation and food services (includes hospitality)
- Transport, postal and warehousing
- Information media and telecommunications
- Financial and insurance services
- Rental, hiring and real estate services
- Professional, scientific and technical services
- Administrative and support services
- Public administration and safety
- Education and training
- Health care and social assistance (includes aged care)
- Arts and recreation services
- Other, *specify* \_\_\_\_\_
- Don't know
- Prefer not to say

3.4 *If employed in early 2020*: What was your job title in your **main** job in early 2020?

\_\_\_\_\_

3.5 *If employed in early 2020*: What was your usual work environment in early 2020 (e.g. February)?

*Select one*

- Attended a single workplace/location
- Attended multiple workplaces/locations
- Worked from home
- Both attended workplace(s) and worked from home
- Other, please describe \_\_\_\_\_

3.6 What sources of income did you have in early 2020 (*select all that apply*)?

- Work/salary
- Government allowance/Centrelink payment/Age pension
- Parents
- Partner
- Scholarship for school/university
- Rental income
- Other investments
- Monetary support from a charity or community-organisation

- 1  
2  
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7
- Other, *specify* \_\_\_\_\_
- No income >> [skip to Q 4.8](#)
- Prefer not to say

8  
9

**The next two questions ask about your financial circumstances in 2019 (pre-COVID-19).**

10 Firstly, we ask about the combined income of the members of your household.

11 Note: if you live in a shared or group house please just mark your own income.

12 3.7 Before tax and other deductions are taken out, how much **combined income** did your  
13 **household** earn per week in 2019 (pre-COVID-19)? *Please include all income sources (including*  
14 *wages, investments and government pensions and benefits). If you live in a shared or group*  
15 *house please just mark your own income*

- 16  
17  \$200,000 or more per year (\$3,840 or more per week)
- 18  \$150,000 - \$199,999 per year (\$2,880 - \$3,839 per week)
- 19  \$125,000 - \$149,999 per year (\$2,400 - \$2,879 per week)
- 20  \$100,000 - \$124,999 per year (\$1,920 - \$2,399 per week)
- 21  \$80,000 - \$99,999 per year (\$1,530 - \$1,919 per week)
- 22  \$60,000 - \$79,999 per year (\$1,150 - \$1,529 per week)
- 23  \$50,000 - \$59,999 per year (\$960 - \$1,149 per week)
- 24  \$40,000 - \$49,999 per year (\$770 - \$959 per week)
- 25  \$30,000 - \$39,999 per year (\$580 - \$769 per week)
- 26  \$20,000 - \$29,999 per year (\$380 - \$579 per week)
- 27  \$10,000 - \$19,999 per year (\$190 - \$379 per week)
- 28  \$1 - \$9,999 per year (\$1 - \$189 per week)
- 29  No income
- 30  Don't know
- 31  Prefer not to say

32  
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38 3.8 During **2019 (pre-COVID-19)** did any of the following happen to you or your household because  
39 of a **shortage of money**? *If you live in a shared or group house please consider your personal*  
40 *circumstances only.*

41  
42

	Yes	No
43 Could not pay electricity, gas or telephone bills on time	<input type="radio"/>	<input type="radio"/>
44 Could not pay for car registration or insurance on time	<input type="radio"/>	<input type="radio"/>
45 Pawned or sold something	<input type="radio"/>	<input type="radio"/>
46 Went without meals	<input type="radio"/>	<input type="radio"/>
47 Unable to heat your home	<input type="radio"/>	<input type="radio"/>
48 Sought assistance from welfare / community organisations	<input type="radio"/>	<input type="radio"/>
49 Sought financial help from friends or family	<input type="radio"/>	<input type="radio"/>
50 Other financial hardships	<input type="radio"/>	<input type="radio"/>
	<i>Specify</i>	
	_____	

51  
52  
53  
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56

57  
58 **We are interested in whether you have had any changes to your work situation and/or income**  
59 **since COVID-19 was identified in Australia and government measures were introduced.**

60 3.9 What sources of income do you currently have? *Select all that apply*

- Work/salary >> [generates logic for currently working](#)
- Government allowance (e.g. Centrelink payment, Age pension)
- Parents or other family
- Partner
- Scholarship for school/university
- Rental income
- Other investments
- Monetary support from a charity or community-organisation
- Other, *specify* \_\_\_\_\_
- No income
- Prefer not to say

3.10

a) Have you received any **new** financial support, Centrelink, rent or mortgage support since 1<sup>st</sup> March 2020?

- Yes >> [go to b](#)
- No
- Don't know
- Prefer not to say

b) *If yes, Which new payments or support have you received since 1<sup>st</sup> March 2020? Select all that apply*

- Centrelink payments (e.g. JobSeeker, Age pension, Government allowance)
- Rental reductions
- Paused or deferred mortgage payments (excluding if banks have done this automatically)
- JobKeeper payments to you or your employer
- Early access to Superannuation
- Other, *specify* \_\_\_\_\_
- Prefer not to say

3.11 Has your work situation or income changed since 1<sup>st</sup> March 2020? *Consider change in personal or household income, loss of job, change in hours worked and/or change of job.*

- Yes >> [go to Q 3.12](#)
- No >> [skip to Q 3.19 if paid work early 2020, else 3.22](#)

3.12 a) If yes, which of the following events have you personally experienced since 1<sup>st</sup> March 2020?

	Yes	No
a) Change of personal / household income	<input type="radio"/>	<input type="radio"/>
b) Loss of job	<input type="radio"/>	<input type="radio"/>
c) Change in hours worked	<input type="radio"/>	<input type="radio"/>
d) Started a new job	<input type="radio"/>	<input type="radio"/>

b) Was this change(s) due to COVID-19?

- Yes

- 1  
2  
3  No  
4  Prefer not to say  
5  
6

7 3.13 *If 3.11= yes:* Before income tax and other deductions are taken out, how much **combined**  
8 **income** does your **household** currently earn per week? *Please include all income sources*  
9 *(including wages, investments and government pensions and benefits). If you live in a shared or*  
10 *group house please just mark your own income*

- 11  \$200,000 or more per year (\$3,840 or more per week)  
12  \$150,000 - \$199,999 per year (\$2,880 - \$3,839 per week)  
13  \$125,000 - \$149,999 per year (\$2,400 - \$2,879 per week)  
14  \$100,000 - \$124,999 per year (\$1,920 - \$2,399 per week)  
15  \$80,000 - \$99,999 per year (\$1,530 - \$1,919 per week)  
16  \$60,000 - \$79,999 per year (\$1,150 - \$1,529 per week)  
17  \$50,000 - \$59,999 per year (\$960 - \$1,149 per week)  
18  \$40,000 - \$49,999 per year (\$770 - \$959 per week)  
19  \$30,000 - \$39,999 per year (\$580 - \$769 per week)  
20  \$20,000 - \$29,999 per year (\$380 - \$579 per week)  
21  \$10,000 - \$19,999 per year (\$190 - \$379 per week)  
22  \$1 - \$9,999 per year (\$1 - \$189 per week)  
23  Don't know  
24  No income  
25  Prefer not to say  
26  
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34 3.14 *If 3.11=yes* a) What is your current employment status? *Select the best response*

- 35  Full time  
36  Part time  
37  Casual  
38  Self-employed  
39  Not employed and looking for work  
40  Not employed and not currently looking for work  
41  Full time carer/home responsibilities  
42  Retired  
43  Other, *specify* \_\_\_\_\_  
44  
45  
46  
47

48 3.15 *If 3.11 =yes & 3.9[work=1]:* Considering a typical week, approximately how many hours of **paid**  
49 **work** do you currently work? \_\_\_\_\_

50 3.16 *If 3.12d=yes:* What is your **main** occupation currently? *Please choose the one option that best*  
51 *describes your main job.*

- 52  Managers  
53  Professionals  
54  Technician and Trade Workers  
55  Community and Personal Service Workers  
56  Clerical and Administrative Workers  
57  Sales Workers  
58  
59  
60

- 1  
2  
3  Machinery Operators and Drivers  
4  Labourers  
5  Don't Know

6  
7 3.17 *if 3.12d=yes*: What industry do you currently work in for your main job? *Select one only*

- 8  Agriculture, forestry and fishing  
9  Mining  
10  Manufacturing  
11  Electricity, gas, water and waste services  
12  Construction  
13  Wholesale trade  
14  Retail trade  
15  Accommodation and food services  
16  Transport, postal and warehousing  
17  Information media and telecommunications  
18  Financial and insurance services  
19  Rental, hiring and real estate services  
20  Professional, scientific and technical services  
21  Administrative and support services  
22  Public administration and safety  
23  Education and training  
24  Health care and social assistance (includes aged care) >>complete module on health  
25 & social care  
26  Arts and recreation services  
27  Other, *specify* \_\_\_\_\_  
28  Don't know

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38 3.18 *if 3.12d=yes*: What is the title of your current job (select your **main** job)? \_\_\_\_\_

39 3.19 *if 3.9[work=1]*: What is your current work environment? *Select one*

- 40  Attend a single workplace/location  
41  Attended multiple workplaces/locations  
42  Work from home  
43  Both workplace(s) and work from home  
44  Other, please describe \_\_\_\_\_

45  
46  
47  
48 3.20 (*if 3.9[work=1], if 3.19 does not contain "Work from home"*): What is the postcode of your main  
49 workplace?

- 50  Enter postcode: \_ \_ \_ \_ \_  
51  No fixed postcode  
52  Don't know

53  
54 3.21 *if 3.9[work=1]*: How many people do you directly supervise or manage at work in your **current**  
55 position(s)? \_ \_ \_ *If none, write "0"*.

56  
57 3.22 Since 1<sup>st</sup> March 2020, did any of the following happen to you or your household because of a  
58 **shortage of money**? *If you live in a shared or group house, please consider your personal*  
59 *circumstances only. \*Not required*  
60

	Yes	No
Could not pay electricity, gas or telephone bills on time	<input type="radio"/>	<input type="radio"/>
Could not pay for car registration or insurance on time	<input type="radio"/>	<input type="radio"/>
Pawned or sold something	<input type="radio"/>	<input type="radio"/>
Went without meals	<input type="radio"/>	<input type="radio"/>
Unable to heat your home	<input type="radio"/>	<input type="radio"/>
Sought assistance from welfare / community organisations	<input type="radio"/>	<input type="radio"/>
Sought financial help from friends or family	<input type="radio"/>	<input type="radio"/>
Other financial hardships	<input type="radio"/> Specify _____	<input type="radio"/>

### Impacts of COVID-19 on your work performance

if 3.9[work=1]:

3.23 Have you experienced any of the following changes to your work in the past 4 weeks as a result of COVID-19 and the measures taken to prevent its spread?

	Yes	No	
a. My work tasks or role have changed	<input type="checkbox"/>	<input type="checkbox"/>	
	Decreased	Stayed the same	Increased
b. Workload	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Work productivity / accomplishments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Ability to concentrate on work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Working outside of usual hours (compared to early 2020, e.g. February)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3.24 (If 3.23a=yes | if 3.23(b/c/d/e != stayed the same)) Which factor(s) contributed most to these changes to your work performance? *Select up to three*

- Childcare responsibilities
- Schooling children from home
- Care of others
- Physical health
- Emotional health (e.g. anxiety)
- Unsuitable environment for working (e.g. privacy, comfort, equipment, internet connection)
- Workplace closed temporarily
- Reduced commuting time
- Working on COVID response (healthcare, aged care sector)
- Stressful work environment
- Other, specify \_\_\_\_\_

### Let's talk about your study and education before and since COVID-19

1  
2  
3 3.25 a) In February 2020, were you enrolled in or had you accepted an enrolment offer for any study  
4 for 2020 (school, university, TAFE etc)?

- 5  Yes  
6  
7  No >> [skip to 3.27](#)

8  
9 a) If yes: At what level were you enrolled to study?

- 10  High school  
11  TAFE, college or diploma  
12  University – undergraduate course (e.g. Bachelor degree)  
13  University – postgraduate course (e.g. Masters, Doctorate)

14  
15 3.26 What are your study circumstances now? *Select all that apply*

- 16  Still going to school/university/class  
17  Still studying, by distance/online  
18  On hold/deferred  
19  Withdrawn/dropped out  
20  Completed study (including awaiting graduation)  
21  Other, *specify* \_\_\_\_\_  
22  Don't know  
23  Prefer not to say

24  
25 3.27

26 a) Have you newly enrolled in study since 1<sup>st</sup> March 2020?

- 27  Yes >> [go to b](#)  
28  No

29 b) *If 3.27a)= yes*: At what level are you enrolled to study?

- 30  High school  
31  TAFE, college or diploma  
32  University – undergraduate course (e.g. Bachelor degree)  
33  University – postgraduate course (e.g. Masters, Doctorate)

34  
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40  
41 **Let's talk about your other non-paid care responsibilities before and since COVID-19**

42 3.28 a) Were you responsible for unpaid care of children OR providing unpaid care to another person  
43 due to the disability, long term illness or old age in early 2020 (e.g. February)?

- 44  Yes >> Average hours per week: \_\_ \_\_  
45  No >> [skip to 3.29](#)  
46  Don't know >> [skip to 3.29](#)

47 a) What is your relationship to the person(s) in your care? *Select all that apply*

- 48  My child(ren) or dependents  
49  Grandchild(ren)  
50  Child(ren) not related  
51  Parent(s)  
52  Grandparent(s)  
53  Other family member(s)  
54  Someone other than a family member



Other

3.29 a) Are you currently responsible for unpaid care of children OR unpaid care due to the disability, long term illness or old age of another person?

Yes >> Average hours per week: \_\_\_ \_\_\_

No >> skip to Q3.30

Don't know >> skip to Q3.30

a) What is your relationship to the person(s) in your care? *Select all that apply*

My child(ren) or dependents

Grandchild(ren)

Child(ren) not related

Parent(s)

Grandparent(s)

Other family member(s)

Caring for someone other than a family member

Other

**The next few questions ask about the childcare and schooling requirements for your children/dependants**

*Limited to those with children*

3.30 Which childcare services did you regularly use in early 2020 (e.g. February 2020)? *Select all that apply*

Day care >> ave. days per week \_\_\_

After school care >> ave. days per week \_\_\_

Informal care (e.g. grandparent, babysitter) >> ave. days per week \_\_\_

Other, *please specify* \_\_\_\_\_ >> ave. days per week \_\_\_

Did not use childcare services

Not applicable >> [go to 3.32](#)

3.31 a) Have your childcare arrangements changed because of COVID-19 and the measures to prevent its spread?

Yes >> [go to b](#)

No >> [go to 3.32](#)

Don't know >> [go to b](#)

b) *If 3.31a) =yes:* Which childcare services do you currently use? *Select all that apply*

Day care >> ave. days per week \_\_\_

After school care >> ave. days per week \_\_\_

Informal care (e.g. grandparent, babysitter) >> ave. days per week \_\_\_

Other, *please specify* \_\_\_\_\_ >> ave. days per week \_\_\_

Do not use childcare services

3.32 a) Have the schooling arrangements for your child(ren) or dependant(s) changed because of COVID-19 and the measures to prevent its spread?

Yes >> [go to b](#)

No >> [skip to Lifestyle, social engagement and support](#)

Not applicable >> [skip to Lifestyle, social engagement and support](#)

Don't know >> go to b

a) What is the current schooling arrangement for your child(ren) or dependant(s)? *Select all that apply*

- Attending school
- Remote learning online
- Being home schooled
- Other, please specify \_\_\_\_\_

**4 Lifestyle, social engagement and support**

4.1 Please estimate how many **days per week** you did the following things: *If you prefer not to answer, please tick the box*

	In an average week in <u>early 2020 (e.g. February)</u>	In the <u>past week</u>
Consumed any alcohol	[0-7, prefer not to say] _____	[0-7, prefer not to say] _____
<i>(If any)</i> Consumed six or more alcoholic drinks in a single day	[0-7, prefer not to say] _____	[0-7, prefer not to say] _____
Smoked cigarettes or other tobacco	[0-7, prefer not to say] _____	[0-7, prefer not to say] _____
Used recreational drugs (including illicit drugs and pharmaceuticals)	[0-7, prefer not to say] _____	[0-7, prefer not to say] _____
Exercised for 30 minutes or more	[0-7, prefer not to say] _____	[0-7, prefer not to say] _____
Used online gambling or betting	[0-7, prefer not to say] _____	[0-7, prefer not to say] _____

4.2 In early 2020 (e.g., February 2020), prior to COVID-19, how often did you:

	Never	Less than monthly	Once or twice a month	Weekly	Daily or almost daily
...Do voluntary work with a community organisation?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...Visit friends locally?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...Speak to your neighbours?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...Mind a friend's or neighbour's child?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...Take part in a sporting, social or religious group or club? <i>(Include virtual/online participation)</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...Go out to a local café, restaurant, pub or show?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
... Go to a public meeting or signed a petition?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
... Attend indoor movie theatres, stadiums, galleries, or museums	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
... Attend an indoor gym / sports and recreation facility	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
... Use public transport (i.e. train, bus, tram)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
... Travel within Australia (>100km from your place of residence)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

4.3

a) Have you taken part in a sporting, social or religious group or club in the **past 4 weeks**? Consider both in-person and virtual (online) involvement

Yes

No &gt;&gt; skip to 4.4

b) How many groups or clubs were you involved in during the **past 4 weeks**? \_\_\_\_\_

[repeat for number of groups/clubs reported]

	Group 1	Group 2	Group 3	Group 4
a) Name of group/club				
b) Where is the group/club primarily located? Write down the suburb, if known. If online/virtual contact only, write "online"				
c) How often did you take part in the group in the <b>past 4 weeks</b> ?	Daily / Most days Few times a week Once a week Once or twice			

4.4 How many people **can you rely on** for practical assistance or emotional support during the pandemic if you need it?

No-one

One person

2 - 5 people

More than 5 people

4.5 How many people **will rely on you** for practical assistance or emotional support during the pandemic if they need it?

No-one

One person

2 - 5 people

More than 5 people

## 5 COVID-19 assessment

5.1 Have you been away from your main living premises in the **past four weeks** for more than two nights?

Yes

No &gt;&gt; skip to 5.5

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13
- 5.2 *If yes to 5.1:* In total, approximately how many nights did you spend away from your main living premises in the **past four weeks**? \_\_\_ \_\_
- 5.3 *If yes to 5.1:* What is the postcode where you spent the most time away from your living premises? \_\_\_ \_\_ \_\_ \_\_
- 5.4 *If yes to 5.1:* Did you spend any time in a "COVID-19 hotspot\*" that you know of?
- Yes
- No
- Prefer not to say

14  
15  
16

\*Pop-up Information box:

- 17  
18  
19  
20  
21  
22
- An extreme risk zone means a specified location assessed as extreme risk for COVID-19 transmission
  - A **red zone** means a specified location assessed as high risk for COVID-19 transmission,
  - An **orange zone** means a specified location assessed as medium risk for COVID-19 transmission.

23  
24  
25  
26  
27

5.5 Have you **ever** been tested for COVID-19/Coronavirus infection?

- Yes >> go to 5.6
- No >> skip to Q6.14a)
- Prefer not to say >> skip to Q6.14a)

28  
29  
30  
31

5.6 *If tested:* How many times have you been tested? \_\_\_ \_\_

5.7 *If tested:* When was your **last** test? \_\_\_ \_\_ / \_\_\_ \_\_ / \_\_\_ \_\_

5.8 *If tested:* What was the result of your **last** test?

- Positive >> go to 5.10
- Negative >> go to 5.9
- Indeterminate >> go to 5.9
- Haven't received a result yet >> go to 5.9
- Prefer not to say >> skip to Q5.9

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43

5.9 *If tested & last test was not positive:* Have you **ever** tested positive for COVID-19/Coronavirus

- Yes >> go to 5.10
- No >> skip to Q5.11
- Prefer not to say >> skip to Q5.11

44  
45  
46  
47

5.10 *If ever positive/last test positive:* How severe were your COVID-19 symptoms and complications? If you are still sick with COVID-19, consider your symptoms to date. *Select one only*

- Mild, no significant symptoms
- Significant symptoms managed in self-isolation
- Symptoms requiring hospital treatment (1 day or less)
- Symptoms requiring hospital treatment (more than 1 day)

5.11 *If ever tested:* Why were you last tested for COVID-19? *Tick all that apply*

- I had symptoms
- I had close contact with someone with confirmed COVID-19
- I work in a high-risk setting
- Had recently returned from overseas / cruise ship travel

- 1  
2  
3  There were cases of COVID-19 where I live (suburb, neighbourhood, apartment  
4 block)  
5  
6  There were cases reported in places I regularly visit, work or study  
7  
8  Required before returning to work  
9  
10  I had to have a test to clear isolation  
11  
12  Community testing blitz (door knocking)  
13  
14  I stayed in, or travelled through a COVID-19 hotspot or location with reported  
15 COVID-19 cases  
16  
17  I was in a place listed as an "orange zone"  
18  
19  Other, *specify* \_\_\_\_\_

17 5.12 *If tested, or if close contact (based on screening)*: Did you apply for any of the following  
18 government support packages? *Select all that apply*

- 19  COVID-19 worker support payment (one-off \$1500 payment to Victorian workers  
20 who are self-isolating or quarantining without access to sick leave)  
21  
22  Pandemic Leave Disaster Payment (one-off payment to Victorian workers who can't  
23 earn an income because they must self-isolate or quarantine)  
24  
25  COVID-19 test isolation payment (one-off payment while waiting for results of  
26 COVID-19 test)  
27  
28  Lockdown hardship payments (\$750) for unemployed public housing residents  
29  
30  Emergency relief package (Care packages for people who do not have family and  
31 friend support and are unable to order groceries online)  
32  
33  Crisis Payment for National Health Emergency (COVID-19)  
34  
35  Emergency Accommodation during isolation or quarantine  
36  
37  Other, *specify* \_\_\_\_\_  
38  
39  None of the above

37 *If ever tested or if close contact*: The following questions ask about self-isolation or quarantine.  
38 Self-isolation or quarantine applies to people who:

- 39 1) Have been diagnosed with COVID-19;  
40 2) Are waiting to receive their COVID-19 test result and have symptoms indicative of potential  
41 COVID-19;  
42 3) Have been told that they are a primary close contact of someone with confirmed COVID-19;  
43 4) Have been told that they are a secondary close contact of someone with confirmed COVID-19,  
44 with instruction to self-isolate until their primary close contact tests negative;  
45 5) Have returned from a designated "red zone" with instruction to quarantine;  
46 6) Have returned from a designated "orange zone" with instruction to self-isolate until receiving a  
47 negative test result;  
48 7) Have returned from overseas.

49 These terms are different to the general "Stay at Home" or "Stage 3 or 4 restriction" measures which  
50 are sometimes referred to as "iso" or "lockdown".

51 5.13 *If ever tested or if close contact*: Have you had any difficulties with the following during self-  
52 isolation/quarantine?  
53

	Yes	No	Not applicable
54 Difficulty accessing instructions about self-isolation/quarantine	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
55 Difficulty understanding instructions about self- 56 isolation/quarantine	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Separating from others in your household	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Getting supplies (Food, clothes, and house supplies, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Getting medicines & prescriptions	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Accessing medical care (for COVID-19 or any health condition)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other, <i>specify</i> _____	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

5.14 a) Do you personally know anyone who has been diagnosed with COVID-19/Coronavirus?

- Yes
- No >> [skip to 5.15](#)
- Don't know / Prefer not to say >> [skip to 5.15](#)

b) How many people do you personally know who have been diagnosed? \_\_\_

c) How many people do you personally know who have been hospitalised (for more than 1 day) and/or who have died from COVID-19? \_\_\_

5.15 How likely do you believe it is that you will be infected with COVID-19 at some point in the future?

- Unlikely
- Somewhat likely
- Very likely
- Don't know / Not sure
- N/A – Have already been infected with COVID-19 >> [skip to Q5.17](#)

5.16 If you were infected with COVID-19 in the future, how severe do you think it would be for your health?

- Life threatening
- Very severe (e.g., requiring hospitalization)
- Moderate (e.g., requiring self-care and rest in bed)
- Mild (e.g., capable of continuing with daily tasks normally)
- No symptoms
- Don't know / not sure

5.17 How likely do you think it is that people in your family and friends might become infected with COVID-19 at some point in the future?

- Unlikely
- Somewhat likely
- Very likely
- Don't know / Not sure

5.18 How worried are you about the COVID-19 outbreak in Australia?

- Very worried
- Fairly worried
- A little worried
- Not at all worried
- Don't know/ not sure

## 6 COVID-19 Vaccination Module

In this section of the survey, we ask about your **experiences with** vaccines in general.

**Historical Vaccination Practices**

6.1 a) Do you usually get vaccinated for seasonal influenza (“the flu”)?

- Always
- Sometimes
- Never
- Prefer not to say

a) In what year did you last receive the seasonal influenza vaccination (‘flu vaccine’)

Year

- 2020
- 2019
- 2018
- 2017
- 2016
- 2015
- 2014
- 2013
- 2012
- 2011
- 2010 or before
- Don't remember/Prefer not to say

a) . In what month did you last receive the seasonal influenza vaccination (‘flu vaccine’)

- 01 - January
- 02 - February
- 03 - March
- 04 - April
- 05 - May
- 06 - June
- 07 - July
- 08 - August
- 09 - September
- 10 - October
- 11 - November
- 12 - December
- Prefer not to say
- Don't remember

1  
2  
3 a) *[If Q 6.1 is not = Never]* Do you plan to get the 2021 seasonal influenza  
4 vaccination ('flu vaccine') when one is available?  
5

- 6  Yes  
7  No  
8  Undecided  
9  Prefer not to say  
10  
11

12  
13 6.2 Have you ever been vaccinated before going on an overseas trip (as an adult/ (For e.g.,  
14 Yellow Fever, Hepatitis B or Typhoid Vaccines)?  
15

- 16  Yes  
17  No, I have not travelled to countries where vaccinations are recommended  
18  No, even though I was advised to take vaccines for overseas travel  
19  No, I was exempt for medical reasons (e.g. allergies, pregnancy, other underlying  
20 medical condition?)  
21  I don't know/ cannot remember  
22  Prefer not to say  
23  
24  
25

26 Vaccine acceptance: COVID-19 vaccines will become available to the majority of Australian's this  
27 year  
28

29  
30 6.3 Do you think you would have a COVID-19 vaccine?  
31

- 32  I have already been fully vaccinated >> skip to Q6.5  
33  I have been partially vaccinated >> skip to Q6.5  
34  Definitely yes >> skip to Q6.5  
35  Probably yes  
36  I'm not sure yet  
37  Probably not  
38  Definitely not  
39  Prefer not to say  
40  
41  
42

43 6.4 For what reason(s) **would you NOT have** a COVID-19 vaccine yourself? *Select all that apply*  
44

- 45  *At this stage I have no concerns about the vaccine*  
46  It will not be needed as most people will have developed immunity by natural  
47 infection  
48  I don't think the vaccine is necessary because COVID-19 is not that serious in most  
49 people  
50  It may not work well enough to be worth having  
51  I am worried that it's not safe and hasn't been tested enough for safety  
52  I am worried that I may develop a blood clot after getting the COVID-19 vaccine.  
53  I am worried that I might catch COVID-19 from the vaccine  
54  I am worried that I would get sicker if I got COVID after the vaccine  
55  I do not want to/can't pay for the vaccine  
56  I do not want the vaccine if there is more than one dose  
57  
58  
59  
60



- 1  
2  
3  I do not want to attend a health care provider to have the vaccine due to the risk of  
4 catching COVID-19  
5  
6  I do not accept any vaccines for myself so would not accept a COVID-19 vaccine  
7  
8  Other, *please specify* \_\_\_\_\_  
9

10 *[for participants with children only]*

11 6.5 If / when COVID-19 vaccines are approved for use in children under 18 years and are  
12 available, would you get the COVID-19 vaccine for your child/ren?  
13

- 14  My child/ren have already been vaccinated >> Q 6.7 (concerns about vaccine)  
15  Definitely yes >> skip to Q6.7  
16  Probably yes  
17  I'm not sure yet  
18  Probably not  
19  Definitely not  
20  Prefer not to say  
21  N/A – no dependent child/ren >> skip to Q 6.7  
22  
23  
24  
25

26 6.6 For what reason(s) **would you NOT get** a COVID-19 vaccine for your child/ren? *Select all that*  
27 *apply*  
28

- 29  *At this stage I have no concerns about the vaccination for my children should it*  
30 *become available*  
31  It will not be needed as most people will have had the infection by then  
32  I don't think the vaccine is necessary because COVID-19 is not that serious in  
33 children  
34  It may not work well enough to be worth having  
35  I am worried that it's not safe and hasn't been tested enough for safety  
36  I am worried that I my child may develop a blood clot after getting the COVID-19  
37 vaccine  
38  I am worried that my child might catch COVID-19 from the vaccine  
39  I am be worried that my child would get sicker if they got COVID after the vaccine  
40  I do not want to/be able to pay for the vaccine  
41  I do not want my Child/re to have the vaccine if there was more than one dose  
42  I do not want to attend a health care provider with my child to have the vaccine due  
43 to the risk of catching COVID-19  
44  I do not accept any vaccines for my child so would not accept a COVID-19 vaccine  
45  Other, *please specify* \_\_\_\_\_  
46  
47  
48  
49  
50  
51  
52

53 6.7 Do you have any concerns about the vaccine? If so, what are your main concerns (select all  
54 that apply):  
55

- 56  I am worried that it may affect my future fertility  
57  I am worried that it may affect my present or future pregnancy or breastfeeding  
58  I am worried about potential side effects  
59  
60

- 1  
2  
3  I am worried about serious reactions  
4  I am worried that long term effects are not well understood  
5  A COVID-19 vaccination could give me COVID-19  
6  The COVID-19 vaccine may interact with my current medications  
7  A COVID-19 vaccination is too new for me to be confident about getting vaccinated  
8  
9  
10 with it  
11  Information on side effects following immunisation is not readily available  
12  I have no safety concerns  
13  Other, *please specify* \_\_\_\_\_  
14  
15  
16  
17

18 ***In this section, we ask about your experience with COVID-19 vaccines.***

19 **COVID-19 vaccines**

20  
21 6.8 a) *[If Q6.3 ==yes]* Which COVID-19 vaccine did you have?

- 22  Pfizer-BioNTech (COMIRNATY)  
23  Oxford-AstraZeneca (COVID-19 Vaccine AstraZeneca)  
24  Other vaccine – Please specify \_\_\_\_\_  
25  Unsure/ don't know  
26  Prefer not to say  
27  
28  
29

30 a) *[If Q6.3 ==yes]* How many doses of the COVID-19 vaccine have you received?

- 31  1 dose  
32  2 doses  
33  Unsure / Don't know  
34  
35

36 *[If NO I have NOT already received a vaccine at Q5.1 (9.16 in baseline-revised*

37 a) *[If Q6.8b ==1 dose]* For what reason have you not received the second dose of  
38 vaccine?  
39

- 40  The next dose is not due yet  
41  I don't intend to receive it  
42  I experienced a bad side effects and I have chosen not to get a second vaccine  
43  My doctor recommended that I should not get a second vaccine  
44  There are no vaccine bookings available in my area  
45  Prefer not to say  
46  
47  
48

49 6.9 *[If Q6.3 not equals yes]* For what reason have you not had a COVID-19 vaccine?

- 50  I'm booked to receive it in the coming weeks  
51  I am eligible, but there are no vaccine bookings available in my area  
52  I believe I am currently eligible but have not yet booked an appointment  
53  I do not believe I am currently eligible for COVID-19 vaccines (for example based on  
54 age, underlying conditions, pregnancy or allergy to vaccine ingredients)  
55  I would prefer to choose which vaccine I receive, and I was unable to do so  
56  I was offered a vaccine, but I declined.  
57  
58  
59  
60

- 1  
2  
3  I do not intend to get the COVID-19 vaccine  
4  I don't know/ unsure  
5  Prefer not to say  
6  
7  
8  
9  
10

11 **Perceived knowledge sufficiency**

12 6.10 To what extent do you agree or disagree with the following statements?

	Totally Disagree	Somewhat disagree	Neutral	Some what Agree	Totally Agree	Prefer not to say
13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50						
a) Adequate information about COVID-19 <b>illness</b> is available for the public to make an informed decision about whether to get vaccinated						
b) Adequate information about COVID-19 <b>vaccines</b> is available for the public to make an informed decision about whether to get vaccinated						
c) Adequate information about who is eligible to receive a COVID-19 vaccine is available						
d) Adequate information about where to go to receive COVID-19 vaccines is available						
e) Adequate information about how to book or make an appointment to receive a COVID-19 vaccine is available						
f) Adequate information about how much it will cost to receive a COVID-19 vaccine is available						
g) Adequate information on side effects following COVID-19 <b>vaccination</b> is readily available						
h) Adequate information about what the benefits are for getting vaccinated is available						
i) Adequate information about what the risks are for getting vaccinated – such as the potential risk of developing a blood clot and or other side effects is available						

51 **General COVID-19 vaccination beliefs and attitudes**

52  
53 6.11 To what extent do you agree or disagree with the following statements?  
54  
55

	Totally Disagree	Somewhat disagree	Neutral	Somewhat Agree	Totally Agree	Prefer Not to say
56 57 58 59 60						

1						
2						
3						
4	a) I understand the					
5	reasons it is important					
6	that as many people as					
7	possible in Australia get					
8	vaccinated against					
9	COVID-19					
10						
11	b) I understand that I					
12	will need to get two					
13	injections, with a gap in					
14	time between the first					
15	and second to be					
16	properly vaccinated					
17	against COVID-19					
18						
19	c) Without a COVID-19					
20	vaccine, people are					
21	likely to catch COVID-					
22	19					
23						
24	d) If a person was fully					
25	vaccinated against					
26	COVID-19 they cannot					
27	get sick from the virus					
28						
29						
30	e) If a person was fully					
31	vaccinated then they					
32	cannot pass the virus					
33	on to others					
34						
35	f) It is important for					
36	someone to get a					
37	vaccine to protect					
38	those that cannot get					
39	vaccinated					
40						
41	g) I am worried that					
42	the vaccines will not					
43	work as well against					
44	the new strains of the					
45	virus					
46						
47	h) My family would					
48	approve of me having a					
49	COVID-19 vaccination					
50						
51	i) My friends would					
52	approve of me having a					
53	COVID-19 vaccination					
54						
55	j) If a COVID-19					
56	vaccination were					
57	recommended by the					
58	<u>government</u> , I would					
59	get vaccinated					
60						

1						
2						
3						
4	k) If a COVID-19					
5	vaccination were					
6	recommended by a					
7	<u>health care</u>					
8	<u>professional</u> (e.g., GP					
9	or nurse), I would get					
10	vaccinated					
11						
12	l) If a COVID-19					
13	vaccination were					
14	recommended by my					
15	<u>employer</u> , I would get					
16	vaccinated					
17						
18	m) I do not mind					
19	getting a COVID-19					
20	vaccination, as long as I					
21	am not among the first					
22	people to get it.					
23						
24	n) People should have					
25	a choice of what type					
26	of vaccines to take					
27						
28	o) People who live in					
29	an area where there					
30	are none or only few					
31	cases, should not need					
32	to be vaccinated.					
33						

### Return to 'normal' life

6.12 To what extent do you agree or disagree with the following statements?

	Totally Disagree	Somewhat disagree	neutral	Somewhat Agree	Totally Agree	Prefer Not to say
42						
43						
44						
45						
46	a) Once a person is					
47	vaccinated, they should no					
48	longer be required to follow					
49	social distancing and other					
50	measures for COVID-19					
51						
52	b) Once a person is					
53	vaccinated, they should no					
54	longer need to isolate or					
55	quarantine due to the					
56	reduced the spread of					
57	COVID-19?					
58						
59	c) Once a person is					
60						

	Totally Disagree	Somewhat disagree	neutral	Somewhat Agree	Totally Agree	Prefer Not to say
vaccinated, they should no longer need to be tested for COVID if they have COVID like symptoms.						
<b>d)</b> People who have been vaccinated should not be required to get tested if there is a positive wastewater test for the COVID-19 virus in their community.						
<b>e)</b> If you were vaccinated overseas, the two-week quarantine period should be reduced.						
<b>f)</b> COVID-19 vaccines will allow us to get back to 'normal'.						
<b>g)</b> COVID-19 vaccines should be required for international travel to / from Australia.						

**7 Physical health and health care**

7.1 *If sex at birth!=male:* Are you currently pregnant?

- Yes
- No
- Don't know/prefer not to answer

7.2 a) Do you have any health conditions that are chronic or have ongoing impact on your daily life or medical needs? This includes both physical and mental health conditions

- Yes
- No >> skip to 7.3
- Don't know >> skip to 7.3
- Prefer not to say >> skip to 7.3

b) *If yes:* Which medical conditions has a doctor or healthcare professional told you that you have? *Check all that apply*

- Alcohol or drug dependence
- Alzheimer's or dementia
- Arthritis
- Asthma

- 1  
2  
3  Autism spectrum disorder  
4  Any autoimmune disease (e.g. lupus, multiple sclerosis, rheumatoid arthritis,  
5 psoriasis, Crohn's disease, inflammatory bowel disease)  
6  Bowel disease  
7  Brain injury  
8  Cancer (active/current)  
9  Depression or anxiety disorder  
10  Other mental health condition  
11  Diabetes  
12  Epilepsy or seizures  
13  Hearing loss  
14  Heart disease or history of heart attack  
15  Hypertension / high blood pressure  
16  Immune disorder (immunocompromised, primary or acquired immune deficiency)  
17  Intellectual disability  
18  Chronic kidney disease  
19  Liver disease  
20  Chronic lung disease (e.g. COPD, emphysema)  
21  Menopausal symptoms  
22  Musculoskeletal condition  
23  Spinal cord injury  
24  Stroke  
25  Vision impairment  
26  Other, *specify* \_\_\_\_\_  
27  Prefer not to say

28  
29  
30  
31  
32  
33  
34  
35  
36  
37  
38 c) Do these health need(s) require ongoing regular medical appointments (e.g. repeat  
39 prescriptions, specialist appointments, physical therapy, periodic check ups)?

- 40  
41  Yes  
42  No  
43  I don't know  
44

45 The next two questions ask about your access to healthcare in **2019 (pre-covid-19)**

46 7.3 In 2019, how many times did you access a health service or practitioner for any health  
47 condition? (Consider GP, hospital, specialist, dentist, community health and allied health  
48 services. Include telehealth consultations).

- 49  Never  
50  One or more times >> *Please estimate how many times:* \_\_\_ \_\_\_  
51  Prefer not to say

52 7.4 How easy was it for you to access the healthcare you need in **2019**?

- 53  Very easy  
54  Somewhat easy  
55  Somewhat difficult  
56  Very difficult  
57  
58  
59  
60

N/A – I didn't need to access healthcare in 2019

Don't know/ Prefer not to say

The next set of questions ask about your access and utilisation of healthcare in the **past three months**.

7.5 How many times did you access a health service or practitioner for any health condition in the past three months? (Consider GP, hospital, specialist, dentist, community health and allied health services. Include telehealth consultations)

Never

One or more times >> *Please estimate how many times:* \_\_ \_\_

Prefer not to say

7.6 What type of a health practitioner did you access? *Select all that apply*

A General Practitioner (GP)

A specialist doctor

A dentist

An alternative health care provider (e.g naturopath, chiropractor etc)

A hospital doctor in outpatients

A hospital doctor in the emergency department

A midwife

A counsellor or other mental health worker

A community nurse, practice nurse or nurse practitioner

A physiotherapist, dietitian or exercise physiologist

Other

7.7 How easy has it been for you to access the healthcare you need in the past three months?

Very easy

Somewhat easy

Somewhat difficult

Very difficult

N/A – haven't needed healthcare >> [skip to Q7.12](#)

Don't know/ Prefer not to say

7.8 Has COVID-19 changed your access or utilisation of healthcare?

Yes

No >>[skip to Q 7.10](#)

Don't know >>[skip to Q 7.10](#)

7.9 *If yes:* What changes have you experienced? *Select all that apply*

My face-to-face appointments were rescheduled to Telehealth appointments

My appointment(s) were cancelled/postponed by the clinic

My elective surgery / procedure was delayed or cancelled

I couldn't contact my usual healthcare provider

I couldn't afford to access my usual healthcare

I couldn't access my usual healthcare

I ran out of medication

Other, *specify* \_\_\_\_\_



1  
2  
3 a) Were you offered any alternatives to your usual medical appointments or prescription  
4 services? *E.g. telehealth, online prescription services, in-home services*

- 5  Yes  
6  No  
7  Don't know

8  
9  
10 b) If yes, what were you offered? *Select all that apply*

- 11  Telehealth consultation(s) >> [go to d](#)  
12  Online prescription services  
13  Repeat prescriptions /multi-month medication  
14  In-home services  
15  Other, specify \_\_\_\_\_  
16

17  
18 c) How satisfied were you with telehealth consultation(s)?

- 19  Very satisfied  
20  Somewhat satisfied  
21  Neutral  
22  Somewhat dissatisfied  
23  Very dissatisfied

24  
25  
26 7.10 Have you experienced any of the following concerns in relation to your usual healthcare in the  
27 past 3 months? *Select all that apply*

- 28  I delayed or avoided seeking care  
29  I felt anxious about attending due to COVID-19  
30  I couldn't access telehealth consultation(s)  
31  Other, specify \_\_\_\_\_  
32  No concerns in relation to your usual healthcare

33  
34  
35 7.11 a) Do you regularly need help with daily tasks because of long-term illness, age or disability (e.g.  
36 help with personal care, getting around, preparing meals etc)?

- 37  Yes  
38  No >> [skip to Mental Health And Wellbeing](#)  
39  Prefer not to say >> [skip to Mental Health And Wellbeing](#)

40  
41  
42 a) *If yes:* Have you experienced any disruptions to receiving this help or care due to COVID-19  
43 or the measures taken to prevent infection?

- 44  Yes  
45  No  
46  Prefer not to say

## 8 Mental health and wellbeing

51 The following section asks about experiences affecting your wellbeing. **For emotional support,**  
52 **Beyond Blue and Lifeline offer tips, brief counselling and referrals.** More information will be  
53 available at the end of the survey.

54  
55 8.1 Over the last 2 weeks, how often have you been bothered by the following problems? \* *Not*  
56 *required*

	Not at all	Several days	Over half the days	Nearly every day

Feeling nervous, anxious, or on edge	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Not being able to stop or control worrying	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Worrying too much about different things	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Trouble relaxing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Being so restless that it's hard to sit still	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Becoming easily annoyed or irritable	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Feeling afraid as if something awful might happen	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

The following questions ask how satisfied you feel, on a scale from zero to 10. Zero means you feel no satisfaction at all and 10 means you feel completely satisfied.

8.2 Thinking about your own life and personal circumstances, how satisfied are you with ... \* *Not required*

	0 No satisfac tion at all	1	2	3	4	5	6	7	8	9	10 Compl etely satisfi ed
... your standard of living?	0	1	2	3	4	5	6	7	8	9	10
... your health?	0	1	2	3	4	5	6	7	8	9	10
... what you are achieving in life?	0	1	2	3	4	5	6	7	8	9	10
... your personal relationships?	0	1	2	3	4	5	6	7	8	9	10
... how safe you feel?	0	1	2	3	4	5	6	7	8	9	10
... feeling part of your community?	0	1	2	3	4	5	6	7	8	9	10
... your future security?	0	1	2	3	4	5	6	7	8	9	10

8.3 To what extent has COVID-19 had negative effects on your mental health (e.g. feeling stressed, lonely, anxious, angry etc) in the past 4 weeks?

- To a great extent
- Somewhat
- Very little
- Not at all
- I don't know/Prefer not to answer

**9 Measures to prevent COVID-19**

9.1 Where are the **main** places you receive or access information to stay informed about COVID-19? *Select up to three sources.*

- Australian Government health authorities (e.g. Department of Health website, Coronavirus Australia app, hotline, Government WhatsApp channel)
- Daily government press conferences/media releases (e.g., by the Premier, Health Minister and/or Chief Health Officer)
- Doctor or other health professional
- News media (including online, television, radio, print)
- Friend or family
- My workplace / co-workers

- 1  
2  
3  Social media (e.g. Facebook, Twitter, Instagram, Weibo, WeChat, Australia Today, Yi  
4 Yi)  
5  
6  A community/religious/cultural leader  
7  The World Health Organization (WHO)  
8  Other, please specify \_\_\_\_\_  
9  I haven't accessed COVID-19 information

9.2 Have you downloaded the **COVIDSafe App**?

- 12  
13  Yes  
14  I tried but it was unsuccessful (e.g. not compatible)  
15  No, I haven't tried  
16  Don't know

9.3 How often have you taken the following measures to protect yourself and others from COVID-19 (coronavirus) in the past 4 weeks?

	Always	Most of the time	Sometimes	Never	Not applicable to me
Using hand sanitizer and/or washing your hands immediately after being in a public place	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Coughing/sneezing into your elbow or tissue	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Keeping 1.5 metres away from people who are not members of your household as much as you can	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Disinfecting surfaces and objects	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Avoiding seeing people who are older/vulnerable	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Avoiding non-essential shopping (in person – don't consider online shopping)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Avoiding social gatherings	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Wearing or carrying face covering in public <i>A face covering needs to cover both your nose and mouth. It could be a face mask or shield.</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

9.4 Have you ever received a fine for not following COVID directives (i.e. stay-at-home, self-isolation, mask wearing, curfew)?

- 51  Yes  
52  No  
53  Prefer not to say

9.5 Have you ever experienced or witnessed racism in relation to **COVID-19** and the measures to prevent its spread? *Select all that apply*

- 57  Yes, I experienced racism  
58  Yes, I witnessed racism  
59  
60

- No
- Prefer not to say

**The next questions are specific to your places of work.**

*If report working in workplace currently*

9.6 *Skip to 9.8 if reported HCW or aged care worker in screener, or if report health/social assistance industry:* Do you currently work in a facility or service providing healthcare or social assistance? *This includes people working in administration, management, cleaning, support services, and health professionals*

- Yes
- No
- Don't know

*If report working in workplace currently but not HCW/in healthcare setting*

9.7 How often have you taken the following measures to protect yourself and others from COVID-19 (coronavirus) in the past 4 weeks when at your workplace(s)?

	Always	Most of the time	Sometimes	Never	Not applicable to me
Wearing or carrying face covering <i>A face covering needs to cover both your nose and mouth. It could be a face mask or shield.</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Regularly using hand sanitizer and/or washing your hands	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Keeping 1.5 metres away from other people as much as you can	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Disinfecting surfaces and objects (implemented yourself or by your workplace)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Avoiding shared use of phones, desks, offices, or other work tools and equipment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Using personal protective equipment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

*If report being a HCW or aged care worker in screening, or if health and social assistance industry:*

	General practice and general community-based services	Specialist community-based services	Residential care	Ambulance services	Quarantine or Border security worker
<ul style="list-style-type: none"> <li>● Inpatient services</li> <li>● Outpatient clinics</li> <li>● Emergency departments</li> </ul>	<ul style="list-style-type: none"> <li>● General practice</li> <li>● Community health services</li> <li>● Allied health</li> </ul>	<ul style="list-style-type: none"> <li>● Specialist medical/surgical</li> <li>● Diagnostic service/pathology</li> <li>● Home and</li> </ul>	<ul style="list-style-type: none"> <li>● Aged care</li> <li>● Residential care</li> </ul>	<ul style="list-style-type: none"> <li>● Ambulance service</li> <li>● Aero-medical service</li> </ul>	<ul style="list-style-type: none"> <li>● Hotel quarantine</li> <li>● Specialised health hotels</li> <li>● Complex care hotel</li> </ul>

<ul style="list-style-type: none"> <li>● Other hospital-based settings</li> </ul>	<p>practices</p> <ul style="list-style-type: none"> <li>● Community Pharmacy</li> <li>● Dentistry</li> <li>● Health promotion</li> <li>● University</li> </ul>	<p>community care</p> <ul style="list-style-type: none"> <li>● Alcohol and other drug treatment service</li> <li>● Community mental health service</li> <li>● Palliative care service</li> <li>● Other specialist</li> </ul>			<p>workers</p> <ul style="list-style-type: none"> <li>● Border health screening</li> </ul>
---	--	--	--	--	--

9.8 What kind of **setting(s)** do you currently work in? *See examples of each setting above. Select all that apply*

- Hospital >>  Inpatient services  Outpatient clinics  Emergency departments  
 Other
- General practice and general community-based health services  
 Specialist community-based services  
 Residential care  
 Ambulance services  
 Other setting

9.9 Do you provide direct patient care?

- Yes – including in person care  
 Yes – telehealth *only* >> skip to Q9.11  
 No

9.10 Repeat questions for each setting selected:

a) Does your [insert setting] workplace provide COVID-19 (coronavirus) testing?

- Yes  
 No  
 Don't know

b) In the past 4 weeks, how often was appropriate PPE (personal protective equipment) **available** at your [insert setting] workplace? *Appropriate PPE is dependent on your setting, patient contact, and guidelines and may have changed over time.*

- All of the time  
 Most of the time  
 Some of the time  
 Rarely  
 Never  
 Don't know  
 Prefer not to say

c) In the past 4 weeks, how often did you **use** appropriate PPE during patient interactions?

- 1  
2  
3  All of the time  
4  Most of the time  
5  Some of the time  
6  Rarely  
7  Never  
8  Don't know  
9  Prefer not to say  
10  
11  
12

13 ***If report being a quarantine worker/border security:***

14 The following questions are specific to your hotel quarantine and/or border security workplace

15 9.11 How do you receive updates and important communication from your workplace? Tick all that  
16 apply

- 17  
18  Phone  
19  Email  
20  WhatsApp  
21  WeChat/Weibo  
22  In-person meetings  
23  Other, *specify* \_\_\_\_\_  
24  I don't receive updates/important communication  
25  
26  
27  
28

29 9.12 To what extent do you agree with the following statements:

30 d) I have received adequate training to work safely with people potentially infected with  
31 COVID-19

- 32  Totally agree  
33  Somewhat agree  
34  Neutral  
35  Somewhat disagree  
36  Totally disagree  
37  Prefer not to answer  
38  
39  
40

41 e) I feel well supported by my workplace management/supervisor

- 42  Totally agree  
43  Somewhat agree  
44  Neutral  
45  Somewhat disagree  
46  Totally disagree  
47  Prefer not to answer  
48  
49  
50

51 f) I feel like I would be well supported if I was exposed to COVID-19 at work

- 52  Totally agree  
53  Somewhat agree  
54  Neutral  
55  Somewhat disagree  
56  Totally disagree  
57  Prefer not to answer  
58  
59  
60

1  
2  
3 g) I feel like I would be well supported if I become infected with COVID-19

- 4  Totally agree  
5  
6  Somewhat agree  
7  
8  Neutral  
9  
10  Somewhat disagree  
11  
12  Totally disagree  
13  Prefer not to answer

14 9.13 How acceptable do you think it is to require quarantine workers to test frequently for COVID-19?

- 15  Totally unacceptable  
16  
17  Somewhat unacceptable  
18  
19  Neutral  
20  
21  Somewhat acceptable  
22  
23  Highly acceptable  
24  Prefer not to answer

25 The next two questions ask about your knowledge of the **current** measures to prevent the spread of  
26 COVID-19 (coronavirus) where you live

27 9.14 How many visitors (excluding their dependents) are you currently allowed to have to your  
28 home? Do not count *visitors that are excluded by current government exemptions, e.g. intimate*  
29 *partner, carer*

- 30  
31  None  
32  
33  1  
34  
35  Up to 2  
36  
37  Up to 3  
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39  Up to 5  
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41  Up to 10  
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43  Up to 15  
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45  Up to 20  
46  
47  Up to 30  
48  
49  Up to 50  
50  
51  Up to 100  
52  
53  Unlimited  
54  
55  Don't know

56 9.15 How many people are currently allowed to gather in outdoor spaces for social gatherings?

- 57  No social gatherings allowed  
58  
59  Up to 2  
60  
61  Up to 3  
62  
63  Up to 5  
64  
65  Up to 10  
66  
67  Up to 20  
68  
69  Up to 50  
70

- Up to 100
- Up to 200
- Unlimited
- Don't know

9.16 Are the following activities currently allowed where you live?

	Not allowed	Allowed <u>with</u> restrictions	Allowed <u>without</u> restrictions	Don't know
Dining indoors at café/restaurant/pub	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Community sports played outdoors	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

The next set of questions asks about your acceptance of actual, planned, or theoretical actions that the Australian government has taken to control the COVID-19 pandemic.

9.17 How acceptable do you think the following Government actions are given the current COVID-19 pandemic in Australia?

	Totally unacceptable	Somewhat unacceptable	Neutral	Somewhat acceptable	Highly acceptable
Cancelling public events of over 100 people (e.g. sports, concert, festival)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Closing bars, cafes and restaurants except for take-away/delivery service	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Remote learning for school children of non-essential workers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Limiting the number of people who can attend a wedding or funeral	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Requiring people to stay at home except for essential work, shopping for essential supplies, medical reasons, or exercise	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Requiring individuals returning from overseas to quarantine in hotels for 14 days	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Requiring COVID-19 testing before allowing individuals to go back to work	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Requiring everyone to wear a face mask in public	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Fining people who break the rules around government restrictions aimed at preventing COVID-19 transmission e.g physical distancing/"Stay at Home" orders/"COVIDSafe Summer" restrictions	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



Restricting travel between states/territories	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Requiring a permit to travel between States					
Closing borders with limited travel to and from other countries	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Temporarily closing down workplaces deemed non-essential (in-person retail, manufacturing, administration)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Hard lockdown of public housing residents	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Curfew across Melbourne	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Exercise limited to certain number of hours per day within a five-kilometre radius of your home	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
A mandatory COVID-19 vaccine for certain high-risk groups, such as healthcare workers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Restricting the number of visitors allowed to hospitals / care facilities					

9.18 How much do you agree or disagree with the following statements?

h) I have confidence in the **Victorian** Government's approach for dealing with COVID-19

- Strongly disagree
- Disagree
- Neither agree nor disagree
- Agree
- Strongly agree

i) I have confidence in the **Australian** Government's approach for dealing with COVID-19

- Strongly disagree
- Disagree
- Neither agree nor disagree
- Agree
- Strongly agree

9.19 What are your top 3 biggest concerns about the current or potential effects of the COVID-19 (coronavirus) pandemic at the moment? *Select up to 3 concerns. You can specify your own concern if it is not listed below.*

- Being infected with COVID-19
- Friends or family being infected with COVID-19
- Infections and death from COVID-19 across the community
- Your mental/emotional health

- 1  
2  
3  Friends' or family's mental health and wellbeing  
4  Schools closing for a long time  
5  Regular health services not being available  
6  Your personal financial situation  
7  The impacts on jobs and unemployment  
8  Economic recession  
9  Your living situation  
10  Getting access to essential products or services  
11  Fulfilling work or study requirements  
12  The quality of your relationships (family, friends, romantic or sexual)  
13  Your physical fitness  
14  Your personal safety  
15  Other, specify \_\_\_\_\_  
16  I have no concerns about COVID-19

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24 9.20 Anything else that you would like to say about your experience with COVID-19 that we haven't  
25 covered today?  
26  
27 \_\_\_\_\_

28  
29 **For up to date information on COVID-19 please see the [Department of Health website](#) and/or**  
30 **download the official government "Coronavirus Australia" app. Information is also available in**  
31 **[languages other than English](#).**

32  
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34 **For specific information about vaccines for COVID-19, please see the Department of Health COVID-**  
35 **19 vaccination website <https://www.coronavirus.vic.gov.au/vaccine>.**

36  
37 **If you are worried that you are someone in your family may have COVID-19, call the 24/7 hotline**  
38 **on 1800 675 398. You can find out about [symptoms](#) and [where to get tested](#) through the DHHS.**

39  
40 **For emotional support, [Beyond Blue](#) (1800 512 348) and [Lifeline](#) (13 11 14) offer tips, brief**  
41 **counselling and referrals. If you are struggling to cope, you can reach out to a counsellor at the**  
42 **[Suicide Call Back Service](#) on 1300 659 467.**

43  
44  
45 **For help and support for domestic or family violence and abuse, contact [1800RESPECT](#) on 1800 373**  
46 **732, [Safe Steps](#) on 1800 015 188 or [inTouch Multicultural Centre against Family Violence](#) on 1800**  
47 **755 988.**

48  
49 **If you are experiencing financial hardship during the COVID-19 pandemic, you can apply for**  
50 **[financial assistance](#). You can also visit the [WIRE](#) website or the [Salvation Army](#) to find out about**  
51 **financial resources which may be useful to you.**

### Supplementary file 3E. Baseline prospective daily diaries

Please complete the following sections based on your feelings and activities **YESTERDAY, {yesterday}**

#### Mood

- How often did you experience **negative** emotions {yesterday}? (e.g. Unpleasant, sad, angry, upset, bored, disappointed, nervous, annoyed):  
 Never    Rarely    Sometimes    Often    All day
- How often did you experience **positive** emotions {yesterday}? (e.g. happy, content, cheerful, excited, calm, serene, ecstatic):  
 Never    Rarely    Sometimes    Often    All day

#### Health

- {yesterday}, Did you experience any of the following symptoms:

<i>Symptom</i>	<b>No</b>	<b>Mild</b>	<b>Moderate</b>	<b>Severe</b>
<i>Cough</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Fever</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Shortness of breath</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Sore throat</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Fatigue</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Aches and Pains</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Headache</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Runny or stuffed nose</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Loss of taste / smell</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Nausea and/or vomiting</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Diarrhoea</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- If experienced symptoms*: Did you seek medical care or professional health advice for yourself {yesterday}?  
 Yes  
 No >> skip to Q6
- If yes, what type? Select all that apply  
 Went to GP  
 Teleconsult with GP  
 Pharmacist  
 Aboriginal and Torres Strait Islander Health Clinic  
 Visited emergency department  
 Hospital inpatient  
 COVID-19 Clinic/Drive-Through  
 Telephoned coronavirus (COVID-19) hotline  
 Other, *please specify* \_\_\_\_\_
- Did you have a test for coronavirus (i.e. COVID-19) {yesterday}? (*Please select the option that best applies*)  
 Yes  
 No >> skip to Q8

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7. *If tested*: What was your reason for testing for coronavirus (i.e. COVID-19) {yesterday}?  
*Select all that apply*
- I had symptoms
  - I had close contact with someone with confirmed COVID-19
  - I work in a high-risk setting
  - I recently returned from overseas travel
  - There were cases of COVID-19 in a place I live (suburb, neighbourhood, apartment block)
  - There were cases reported in places I regularly visit, work or study
  - Required before returning to work
  - I had to have a test to clear isolation
  - Community testing blitz (door knocking)
  - I stayed in, or travelled through a COVID-19 hotspot or location with reported COVID-19 cases
  - I was in a place listed as an “orange zone”
  - Other, *specify* \_\_\_\_\_
8. *If tested*: What information were you given when you got a test? *Select all that apply*
- What to do while waiting for a result
  - How to get your results, including a contact number
  - Requirements for self-isolation
  - Cleaning and hygiene practices
  - Requirements for household members and caregivers
  - What to do if your symptoms get worse
  - Information on financial support and emergency relief packages
  - Length of the self-isolation period
  - Other
  - I didn't receive any information
9. Did you receive a result for your COVID-19 test {yesterday}?
- Yes
  - No >> skip to Q13
10. *If received a result*: What was the result?
- Positive
  - Negative
  - Indeterminate
11. *If received a result*: Who notified you about your positive test result? *Select all that apply*
- Testing Centre / Health service
  - Laboratory
  - Government/DHHS Hotline
  - Unsure
12. *If received result*: a) Between when you were tested and when you received your test result, did you leave your living premises for any reason?
- Yes >> go to b
  - No >> skip to Q13
- b) If yes, what reasons did you leave your living premises for? *Select all that apply*
- Medical care
  - Exercise
  - To get essential food
  - To get essential medicine
  - Work

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- To pick up/drop off a household member from work, school, childcare, appointments
  - To visit family, friends or partner
  - To visit someone in hospital
  - Emergency situation
  - Other, *specify* \_\_\_\_\_
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13. *If positive*: What is the setting where you were likely exposed to COVID-19?
- Workplace
  - Household
  - Overseas/international travel
  - COVID-19 hotspot or location with reported COVID-19 cases
  - Other known setting, *specify* \_\_\_\_\_
  - Unknown setting >> skip to Q 13
- b) What was the **first** date that you were likely exposed to COVID-19? \_\_/\_\_/\_\_
14. Were you notified as a 'close contact' of someone with confirmed COVID-19 {yesterday}?
- Yes
  - No >> skip to Q16
  - Don't know
- b) *If yes*: Who notified you that you were a close contact? *Select all that apply*
- Government/DHHS Hotline
  - Testing Centre / Health service
  - Workplace / Friend / Family member
  - Unsure
  - Other, *specify* \_\_\_\_\_
15. *If close contact*: What is the setting where you were potentially exposed to COVID-19?
- Workplace
  - Household
  - COVID-19 hotspot or location with reported COVID-19 cases
  - Other known setting, *specify* \_\_\_\_\_
  - Unknown setting >> skip to Q 16
- b) *If not unknown*: What was the **last** date that you were potentially exposed or in contact with this person while they were infected with COVID-19? \_\_/\_\_/\_\_
- c) *If household*: Are you able to effectively separate from the person(s) with COVID-19 in your household? (e.g. stay in a different room, sleep in a separate bedroom, use a separate bathroom where possible, maintain distance)
- Yes
  - No
  - Don't know

**The following questions ask about self-isolation or quarantine.**

Self-isolation or quarantine applies to people who:

- 1) Have been diagnosed with COVID-19;
- 2) Are waiting to receive their COVID-19 test result and have symptoms indicative of potential COVID-19;
- 3) Have been told that they are a primary close contact of someone with confirmed COVID-19;
- 4) Have been told that they are a secondary close contact of someone with confirmed COVID-19, with instruction to self-isolate until their primary close contact tests negative;
- 5) Have returned from a designated "red zone" with instruction to quarantine;
- 6) Have returned from a designated "orange zone" with instruction to self-isolate until receiving a negative test result;
- 7) Have returned from overseas.

These terms are different to the general "Stay at Home" or "Stage 3 or 4 restriction" measures which are sometimes referred to as "iso" or "lockdown".

16. Were you in isolation/quarantine {yesterday}? *See definition above*

- Yes
- No – I was never in isolation/quarantine >>skip to Q19
- No – I was released from isolation/quarantine by the DHHS (by SMS/phone call/door knock)
- No – I stopped isolation/quarantine on my own
- Don't know

b. If yes, where were you self-isolating {yesterday}?

- At home
- Hotel
- Other premises

17. Did someone from the government/DHHS, health service or a community service contact you {yesterday} by any means (i.e. phone, SMS, door knock)?

- Yes
- No >>skip to Q20

18. If yes, do you know who contacted you? *Select all that apply*

- DHHS/government
- Health service (e.g. hospital)
- Community service
- Other
- Don't know

19. How were you contacted? *Select all that apply*

- Phone call
- SMS
- Door knock

20. What was the contact in regards to? *Select all that apply*

- COVID-19 test results
- Your health
- Isolation / quarantine
- To notify you that you are a close contact of someone with COVID-19
- Contact tracing – to discuss who you were in close contact with while you were infectious
- To discuss access to essential needs (e.g. food, medicine)
- Related to the health or tests results of your child
- Other, *specify*\_\_\_\_\_

### Contacts

**We would like you to know about every person that you have contact with {yesterday}.**

**A contact** is defined as someone you either:

- Had a face-to-face conversation with, OR
- Shared a closed space with (e.g. room, car, bus, lift, train carriage), OR
- Had physical contact with (e.g. handshake, hug, kiss, contact sport).

Consider people you live with, people who visited your home, and people you were in contact with when you left home. Don't forget about the times you used public or shared transport.

*Do not include people that you exclusively contacted by phone/video call.*

21. Did you have contact with anyone {yesterday}?

- Yes
- No >> end of survey

1  
2  
3 22. Were any of these contacts someone you know by name or someone who you will regularly  
4 see again?

5  Yes

6  No >> skip to Q24

7  
8 23. Please type in the **full name(s)** (First name Last name, if know. Else, nickname) of **every**  
9 **person** you had contact with yesterday (from 5am {yesterday} until 5am today):  
10 \_\_\_\_\_

- 11 - If you had contact with the same person several times during the assigned day, only record  
12 them once, and record the total time you spent with them over the day. Each person you  
13 have contact with during the day should have only one line in the diary.  
14 - List people who you know or are familiar with by First Name and Last Name.  
15 - Type in the contacts full name, if you know it, in the first box and press "enter" or select the  
16 create button.  
17 - To select previous contacts or your key people, click on the blue box on the right of the text  
18 box and search or click on their name in the list.  
19 - We will then ask a few questions about these contacts in the boxes below.  
20 - If you don't know their age, then please estimate  
21 - If you were in contact with people and you only know their first name or don't know by  
22 name but will likely regularly see again, list them using a memorable nickname (e.g. Bob the  
23 barista). This will make it easier to list them again in future diaries.  
24 You don't need to list all contacts you had if:  
25 • They are too numerous to list or you don't know them by name (e.g., if you work at a  
26 supermarket with many customers)  
27 • You are a health care worker referring to contact with patients  
28 You will be asked to summarise these contacts at the end.  
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	Full Name (First Name Last Name, if known. Else, nickname)	Age range (years)	Gender	Relationship to you <i>Select one</i>	What was the purpose or circumstances of the contact? <i>Select all that apply</i>	In what setting did you have contact? <i>Select all that apply</i>	How many <b>other people</b> were at this location at the same time as you, <b>excluding</b> you and members of your household? <i>If you had contact with this person at more than one location, answer for the most crowded location you shared with this person yesterday</i>	Did you have contact indoors or outdoors? <i>Select all that apply</i>	How long did you spend with this person <b>in total</b> ?	How much time did you spend within <b>close</b> contact of this person (within 1.5 metres of each other or within a closed space?)	Did you have any physical contact?
1	_____	<input type="checkbox"/> <5 <input type="checkbox"/> 5-9 <input type="checkbox"/> 10-14 <input type="checkbox"/> 15-19 <input type="checkbox"/> 20-29 <input type="checkbox"/> 30-39 <input type="checkbox"/> 40-49 <input type="checkbox"/> 50-59	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Non-binary <input type="checkbox"/> Unknown	<input type="checkbox"/> Partner (incl. spouse, boyfriend/girlfriend) <input type="checkbox"/> Parent <input type="checkbox"/> Child <input type="checkbox"/> Grandparent <input type="checkbox"/> Grandchild <input type="checkbox"/> Sibling <input type="checkbox"/> Other family member <input type="checkbox"/> Friend <input type="checkbox"/> Work colleague	<input type="checkbox"/> Live together <input type="checkbox"/> Providing care <input type="checkbox"/> Receiving care <input type="checkbox"/> Buying/receiving food <input type="checkbox"/> Buying/receiving medical supplies <input type="checkbox"/> Non-essential shopping <input type="checkbox"/> Medical <input type="checkbox"/> Work <input type="checkbox"/> Study/education <input type="checkbox"/> Social <input type="checkbox"/> Sport/exercise	<input type="checkbox"/> Home <input type="checkbox"/> Other private residence <input type="checkbox"/> School/university <input type="checkbox"/> Childcare <input type="checkbox"/> Transport <input type="checkbox"/> Health service <input type="checkbox"/> Shop / retail <input type="checkbox"/> Restaurant / café <input type="checkbox"/> Bar / nightclub	<input type="checkbox"/> None <input type="checkbox"/> 1-2 <input type="checkbox"/> 3-5 <input type="checkbox"/> 6-10 <input type="checkbox"/> 11-20 <input type="checkbox"/> 21-100 <input type="checkbox"/> More than 100	<input type="checkbox"/> Indoor <input type="checkbox"/> Outdoor	<input type="checkbox"/> Less than 5 minutes <input type="checkbox"/> 5 to 14 minutes <input type="checkbox"/> 15 to 60 minutes <input type="checkbox"/> 1 to 2 hours <input type="checkbox"/> 2 to 8 hours <input type="checkbox"/> More than 8 hours	<input type="checkbox"/> Less than 5 minutes <input type="checkbox"/> 5 to 14 minutes <input type="checkbox"/> 15 to 60 minutes <input type="checkbox"/> 1 to 2 hours <input type="checkbox"/> 2 to 8 hours <input type="checkbox"/> More than 8 hours	<input type="checkbox"/> Yes <input type="checkbox"/> No



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		60- 69 70- 79 80+	<input type="checkbox"/> Client/patient <input type="checkbox"/> Classmate <input type="checkbox"/> Carer <input type="checkbox"/> Healthcare provider <input type="checkbox"/> Partner/family of someone I live with <input type="checkbox"/> Other	<input type="checkbox"/> Worship/religious <input type="checkbox"/> Other, <i>specify</i> _____	<input type="checkbox"/> Indoor sports / recreational facility (e.g. gym) <input type="checkbox"/> Entertainment facility (e.g. cinema, music/arts venue) <input type="checkbox"/> Public space (e.g. park, beach, sports field) <input type="checkbox"/> Place of worship <input type="checkbox"/> Workplace not otherwise listed (e.g. office, factory) <input type="checkbox"/> Other, <i>specify</i> _____					
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3 [add contact] [complete contact diary]

4 The following questions ask about contacts you were unable to list from yesterday because you had  
5 contact with a large number of people or people you don't know by name.

6  
7 24. Have you included all contacts you had yesterday?

8  Yes >> End of survey

9  No

10 25. If, no, what was the setting of these additional contacts?

11  Home, estimated number: \_\_ \_\_

12  Other private residence, estimated number: \_\_ \_\_

13  School/university, estimated number: \_\_ \_\_

14  Childcare, estimated number: \_\_ \_\_

15  Transport, estimated number: \_\_ \_\_

16  Health service, estimated number: \_\_ \_\_

17  Shop / retail, estimated number: \_\_ \_\_

18  Restaurant / café, estimated number: \_\_ \_\_

19  Bar / nightclub, estimated number: \_\_ \_\_

20  Indoor sports / recreational facility (e.g. gym) , estimated number: \_\_ \_\_

21  Entertainment facility (e.g. cinema, music/arts venue) , estimated number: \_\_ \_\_

22  Public space (e.g. park, beach, sports field) , estimated number: \_\_ \_\_

23  Place of worship, estimated number: \_\_ \_\_

24  Workplace not otherwise listed (e.g. office, factory) , estimated number: \_\_ \_\_

25  Other, *specify* \_\_\_\_\_, estimated number: \_\_ \_\_

## Supplementary file 3F. Follow up surveys

### FOLLOW UP QUESTIONNAIRE

#### Pre-questions

1. Date of entry
2. Who is filling out this survey?
  - Participant
  - Researcher >> Namecode \_\_ \_\_

#### 1 Living situation

- 1.1 Has your living situation changed in the past 4 weeks? This includes where you live and who you live with

- Yes
- No >> skip to Work, Study & Responsibilities

If yes:

- a) What is your current postcode? \_\_ \_\_ \_\_ \_\_ *Write 9999 if you don't wish to say*
- b) Was the reason you changed living situation due to COVID and the measures to prevent its spread?

- Yes >> go to c
- No >> go to d

- c) Why has your living situation changed? *Select all that apply*

- Could no longer afford previous rent
- Temporarily moved for self-isolation/quarantine
- Moved to be with partner/family/friends
- Moved to be away from vulnerable house members
- Moved due to concern for safety at usual residence
- Other people have moved out due to COVID-19
- Children or family have moved back in due to COVID-19
- Other people have moved in due to COVID-19
- Returned to my usual residence
- Other, *specify* \_\_\_\_\_

- d) What type of accommodation do you currently live in?

- House/townhouse
- Flat/unit/apartment
- Caravan/cabin/boat/motor home
- Student accommodation or workers' quarters
- Room in a hostel or boarding house
- Hotel / motel
- Residential home or institution (e.g. aged residential care)
- Temporary accommodation (refuge, crisis or support accommodation) >> skip to Q

#### 1.2

- No dwelling/ improvised dwelling / motor vehicle / tent >> skip to Q 1.2
- Other, *please specify*: \_\_\_\_\_

- e) Is the place where you currently live....?

- Owned outright / with a mortgage (by you or your partner)
- Rented (including paying board/fees)
- Public or community housing

Rent free – living with a relative or someone else (including couchsurfing)

Other, *please specify*: \_\_\_\_\_

We are now going to ask you about people currently living in your household\*.

\* This includes people who regularly sleep at the household, **at least once a week**. If you have more than one household where you regularly sleep, consider your MAIN household.

1.2 How many adults (18 years and older), including yourself, currently live in your household \_\_ \_\_

1.3 How many children (under 18 years old) currently live in your household? \_\_ \_\_

1.4 Does your current household have internet access? (This includes fixed or mobile broadband services such as ADSL, Cable, Wireless and Satellite connections. Don't consider mobile phone data)

Yes

No

Don't know

## 2 Work, study & responsibilities

**We are interested in changes to your work or income in the past 4 weeks**

2.1 What sources of income do you currently have? *Select all that apply*

Work/salary >> generates logic for currently working

Government allowance (e.g. Centrelink payment, Age pension)

Parents or other family

Partner

Scholarship for school/university

Rental income

Other investments

Monetary support from a charity or community-organisation

Other, *specify* \_\_\_\_\_

No income >> skip to Q 2.6

Prefer not to say

2.2 a) Have you received any **new** financial support, Centrelink, rent or mortgage support in the past 4 weeks?

Yes >> go to b

No

Don't know

b) *If yes*, Which new payments or support have you received in the past 4 weeks? *Select all that apply*

Centrelink payments

Rental reductions

Paused or deferred mortgage payments (excluding if banks have done this automatically)

JobKeeper payments to me or my employer

Early access to Superannuation

Other, *specify* \_\_\_\_\_

Prefer not to say

2.3 Has your work situation or income changed in the past 4 weeks? Consider change in personal or household income, loss of job, change in hours worked and/or change of job.

Yes >> go to Q 2.4

No >> skip to Q 2.15 if paid work previously, else 2.16

2.4 Which of the following events have you personally experienced in the past 4 weeks?

	Yes	No
a) Change of personal/household income	<input type="radio"/>	<input type="radio"/>
b) Loss of job	<input type="radio"/>	<input type="radio"/>
c) Change in hours worked	<input type="radio"/>	<input type="radio"/>
d) Started a new job	<input type="radio"/>	<input type="radio"/>

b) Was this change(s) due to COVID-19?

Yes

No

Prefer not to say

2.5 **If 2.3= yes:** Before income tax and other deductions are taken out, how much **combined income** does your **household** currently earn per week? Please include all income sources (including wages, investments and government pensions and benefits). If you live in a shared or group house please just mark your own income

\$200,000 or more per year (\$3,840 or more per week)

\$150,000 - \$199,999 per year (\$2,880 - \$3,839 per week)

\$125,000 - \$149,999 per year (\$2,400 - \$2,879 per week)

\$100,000 - \$124,999 per year (\$1,920 - \$2,399 per week)

\$80,000 - \$99,999 per year (\$1,530 - \$1,919 per week)

\$60,000 - \$79,999 per year (\$1,150 - \$1,529 per week)

\$50,000 - \$59,999 per year (\$960 - \$1,149 per week)

\$40,000 - \$49,999 per year (\$770 - \$959 per week)

\$30,000 - \$39,999 per year (\$580 - \$769 per week)

\$20,000 - \$29,999 per year (\$380 - \$579 per week)

\$10,000 - \$19,999 per year (\$190 - \$379 per week)

\$1 - \$9,999 per year (\$1 - \$189 per week)

No income

Don't know

Prefer not to say

2.6 **If 2.3= yes:** a) What is your current employment status? Select the best response

Full time

Part time

Casual

Self-employed

Not currently employed and looking for work

Not currently employed and not currently looking for work

Full time carer/home responsibilities

Retired

Other, *specify* \_\_\_\_\_

2.7 **If 2.3= yes & currently employed:** Considering a typical week, approximately how many hours of **paid work** do you currently work? \_\_\_\_\_

2.8 **If (2.4d)=yes:** What is your **main** occupation currently? Please choose the one option that best describes your main job.

1  
2  
3 Managers  
4 Professionals  
5 Technician and Trade Workers  
6 Community and Personal Service Workers  
7 Clerical and Administrative Workers  
8 Sales Workers  
9 Machinery Operators and Drivers  
10 Labourers  
11 Don't Know  
12  
13  
14

15 2.9 *If (2.4d)=yes*: What industry do you work in for your main job? *Select one only*

16 Agriculture, forestry and fishing  
17 Mining  
18 Manufacturing  
19 Electricity, gas, water and waste services  
20 Construction  
21 Wholesale trade  
22 Retail trade  
23 Accommodation and food services (including hospitality)  
24 Transport, postal and warehousing  
25 Information media and telecommunications  
26 Financial and insurance services  
27 Rental, hiring and real estate services  
28 Professional, scientific and technical services  
29 Administrative and support services  
30 Public administration and safety  
31 Education and training  
32 Health care and social assistance (includes aged care)  
33 Arts and recreation services  
34 Other, *specify* \_\_\_\_\_  
35 Don't know  
36  
37  
38  
39  
40  
41

42 2.10 *If (2.4d)=yes*: What is the title of your current job (select your **main** job)?

43 \_\_\_\_\_

44 2.11 *If (2.4d)=yes*: How many people do you directly supervise or manage at work in your **current**  
45 position(s)? \_\_\_ \_\_\_ \_\_\_ *If none, write "0"*.

46 2.12 *If currently working*: What is your current work environment? Select one

47 Attend a single workplace/location  
48 Attend multiple workplaces/locations  
49 Work from home  
50 Both attend workplace(s) and work from home  
51 Other, *please describe* \_\_\_\_\_  
52  
53  
54

55 2.13 *(for everyone currently working, if not only working from home)*: What is the postcode of your  
56 main workplace?

57 Enter postcode: \_\_\_ \_\_\_ \_\_\_ \_\_\_  
58 No fixed postcode  
59 Don't know  
60

Other, please describe \_\_\_\_\_

2.14 Did any of the following happen to you or your household because of a **shortage of money** in the past 4 weeks? *If you live in a shared or group house please consider your personal circumstances only.* \* Not required

	Yes	No
Could not pay electricity, gas or telephone bills on time	<input type="radio"/>	<input type="radio"/>
Could not pay for car registration or insurance on time	<input type="radio"/>	<input type="radio"/>
Pawned or sold something	<input type="radio"/>	<input type="radio"/>
Went without meals	<input type="radio"/>	<input type="radio"/>
Unable to heat your home	<input type="radio"/>	<input type="radio"/>
Sought assistance from welfare / community organisations	<input type="radio"/>	<input type="radio"/>
Sought financial help from friends or family	<input type="radio"/>	<input type="radio"/>
Other financial hardships	<input type="radio"/> Specify _____	<input type="radio"/>

#### Impacts of COVID-19 on your work performance

*If report income from work in past 4 weeks*

2.15 Have you experienced any of the following changes to your work in the past 4 weeks as a result of COVID-19 and the measures taken to prevent infection?

	Yes	No	
a. My work tasks or role have changed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Decreased	Stayed the same	Increased
b. Workload	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Work productivity / accomplishments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Ability to concentrate on work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Working outside of usual hours (compared to early 2020, e.g. February)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2.16 ((If a=yes | if (b|c|d|e != stayed the same))) Which factor(s) contributed most to these changes to your work performance? Select up to three

Childcare responsibilities

Schooling children from home

Care of others

- 1  
2  
3 Physical health  
4 Emotional health (e.g. anxiety)  
5 Unsuitable environment for working (e.g. privacy, comfort, equipment, internet  
6 connection)  
7  
8 Return to usual workplace  
9 Reduced commuting time  
10 Increased commuting time  
11 Workplace closed temporarily  
12 Working on COVID response (healthcare, aged care sector)  
13 Stressful work environment  
14 Other, *specify* \_\_\_\_\_  
15  
16  
17

### Let's talk about your study and education now

18  
19 2.17 a) Have your study circumstances changed in the past 4 weeks?

20 Yes

21 No >> skip to 2.18  
22

23 b) What are your study circumstances now?

24 Still going to school/university/class

25 Still studying, by distance/online

26 On hold

27 Withdrawn/dropped out

28 Resumed studying, by distance/online

29 Resumed going to school/university/class

30 Completed study (including awaiting graduation)

31 Newly enrolled in study >> [go to c](#)

32 Other, *specify* \_\_\_\_\_

33 Don't know

34 Prefer not to say  
35  
36  
37  
38

39 c) *If newly enrolled*: At what level are you enrolled to study?

40 High school

41 TAFE, college or diploma

42 University – undergraduate course (e.g. Bachelor degree)

43 University – postgraduate course (e.g. Masters, Doctorate)  
44  
45

### Let's talk about your other non-paid care responsibilities in the past 4 weeks

46  
47 2.18 a) Were you responsible for unpaid care of children OR providing unpaid care to another  
48 person due to the disability, long term illness or old age in the past 4 weeks?

49 Yes >> Average hours per week: \_\_ \_\_

50 No >> skip to 2.19 (if have children), else 3.1

51 Don't know >> skip to 2.19 (if have children), else 3.1  
52  
53

54 a) What is your relationship to the person(s) in your care? *Select all that apply*

55 1.1.a..1 My child(ren) or dependant(s)

56 Grandchild(ren)

57 Child(ren) not related

58 Parent(s)

59 Grandparent(s)  
60



- Other family member(s)  
 Someone other than a family member  
 Other

**The next few questions ask about the childcare and schooling requirements for your children/dependants in the past 4 weeks**

2.19 a) *If report living with children:* Have your childcare arrangements changed during the past 4 weeks?

- Yes >> go to b  
 No >> go to 2.20  
 Don't know >> go to b  
 Not applicable >> go to 2.20

a) *If yes:* Which childcare services do you currently use? *Select all that apply*

- Day care >> ave. days per week \_\_\_  
 After school care >> ave. days per week \_\_\_  
 Informal care (e.g. grandparent, babysitter) >> ave. days per week \_\_\_  
 Other, *please specify* \_\_\_\_\_ >> ave. days per week \_\_\_  
 Do not currently use childcare services

2.20 Have the schooling arrangements for your child(ren) or dependant(s) changed in the past 4 weeks?

- Yes >> go to b  
 No >> skip to section 4  
 Not applicable >> skip to section 4  
 Don't know >> go to b

b) What is the current schooling arrangement for your child(ren) or dependant(s)? *Select all that apply*

- Attending school  
 Remote learning online  
 Being home schooled  
 Other, *please specify* \_\_\_\_\_

**3 Lifestyle, social engagement and support**

3.1 Please estimate how many **days per week** you spent doing the following things during the past week:

Consumed any alcohol	[0-7, prefer not to say] ___
<i>(If any)</i> Consumed six or more alcohol drinks in a single day	[0-7, prefer not to say] ___
Smoked cigarettes or other tobacco	[0-7, prefer not to say] ___
Used recreational drugs (including illicit drugs and pharmaceuticals)	[0-7, prefer not to say] ___
Exercised for 30 minutes or more	[0-7, prefer not to say] ___

Used online gambling or betting	[0-7, prefer not to say] ____
---------------------------------	-------------------------------

3.2 Over the past 4 weeks, have often did you:

	Never	Once or twice	Weekly	Daily or almost daily
...Do voluntary work with a community organisation?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...Visit friends locally?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...Speak to your neighbours?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...Mind a friend's or neighbour's child?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...Take part in a sporting, social or religious group or club? ( <i>Include virtual/online participation</i> )	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...Go out to a local café, restaurant, pub or show?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
... Go to a public meeting or signed a petition?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
... Attend indoor movie theatres, concert venues, stadiums, galleries, or museums	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
... Attend an indoor gym / sports and recreation facility	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
... Use public transport (i.e. train, bus, tram)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
... Travel within Australia (>100km from your place of residence)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

*If yes to sporting, social or religious group or club?:* a) How many sporting, social or religious groups or clubs were you involved in during the **past 4 weeks**? Consider both in-person and virtual (online) involvement \_\_\_\_

[Repeat for number of groups/clubs selected]

	Group 1	Group 2	Group 3	Group 4
b) Name of group/club				
c) Where is the group/club primarily located? Write down the suburb, if known. If online/virtual contact only, write "online"				
d) How often did you take part in the group in the <u>past</u>	Once or twice Weekly Daily or almost			

4 weeks?	daily			
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#### 4 Key people

4.1 You have previously nominated the key people in your life\*. How frequently have you had contact with your key people in the past 4 weeks?

Name [prepopulate list of ties]	How much <b>face-to-face</b> contact have you had with this person over <u>past 4 weeks</u> ?	How much <b>digital</b> contact have you had with this person over the <u>past 4 weeks</u> ?
Key people 1 name	Daily / Most days Few times a week Once a week Once or twice None	Daily / Most days Few times a week Once a week Once or twice None
Key people 2 name	Daily / Most days Few times a week Once a week Once or twice None	Daily / Most days Few times a week Once a week Once or twice None

\* It is important for the study to ask about the key people you nominated at the beginning of the study, even if you don't have contact with them anymore. However, sometimes things happen and our important personal relationships with others change. If having a particular contact on your list is causing distress please contact your Optimise Project representative or email [optimise@burnet.edu.au](mailto:optimise@burnet.edu.au) and we will amend this list for you.

The key people in your life may be family, friends, partner, housemates, neighbours, co-workers or others who are a part of your life on a daily or weekly basis:

- "With whom do you discuss important personal matters?" (e.g., personal problems, other matters) OR
- "Who provides you with important practical assistance or support?" OR
- "Who are important co-workers (i.e., colleagues, superiors, junior staff) that you frequently deal with for your work?" If you are a student, you can also consider your classmates and or supervisors/lecturers/tutors that you frequently deal with for your study OR
- "Thinking of important activities in your life (e.g., hobbies, sport, leisure, religious gatherings, visiting older relatives), who are the key people you frequently deal with

personally when undertaking these activities? They may help you get the activity done or be a person you share the activity with.”

- Is there anyone else you live with who has not been listed as a key person in other categories?

4.2 Do you have any new key people to add?

Yes, how many? \_\_\_ \_\_\_

No

4.3 Please provide the details of your new key people

Full Name	Relationship to you Select one	Do you live in the same household with this person?	Age	Gender	Suburb (if outside of Australia, select other)	How much face-to-face contact have you had with this person over the past 4 weeks	How much digital contact have you had with this person over the past 4 weeks?
	a. Family b. Friend c. Partner d. Co-worker e. Other	Yes No	<5 5-9 10-14 15-19 20-29 30-39 40-49 50-59 60-69 70-79 80+	a. Man b. Woman c. Non-binary/not listed d. Unknown		a. Daily / Most days b. Few times a week c. Once a week d. Once or twice e. None	a. Daily / Most days b. Few times a week c. Once a week d. Once or twice e. None

Name	Thinking about this person, please select which category suits their role in your life, <i>Select all that apply</i>				
	Discuss important personal matters (e.g. personal problems, other matters)	Provides you with practical assistance or support	Is an important co-worker (i.e. colleague, supervisor, junior staff) that you frequently deal with for your work	Someone you frequently deal with when undertaking activities (e.g. hobbies, sport, leisure, religious gatherings, visiting older relatives), They may help you get the activity done or be a person you share the activity with.	Someone who you live with who hasn't been listed in the above categories.
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Full Name	Are you happy for us to contact this participant about participating in this study?	Please enter a contact number
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	Yes No Require more information	+61 _____
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## 5 COVID-19 health and exposure

These questions refer to the past four weeks

Pop up information box:

Click here to see the Victorian Government's latest guidelines on COVID-19 symptoms to watch out for: <https://www.coronavirus.vic.gov.au/symptoms-and-risks>

Click here to see the Victorian Government's latest guidelines on isolation for people who tested positive to COVID-19 and their household and household-like contacts  
[www.coronavirus.vic.gov.au/checklist](http://www.coronavirus.vic.gov.au/checklist)

- 5.1. How many times have you been infected with confirmed COVID-19 since the start of the pandemic (December 2019)?  
Infection is defined by at least one positive PCR test or positive RAT  
[Please enter a number between 0 – 10]
- 5.2. Have you been tested for COVID-19/coronavirus infection in the past four weeks? *Please include Rapid Antigen Tests (RATs), PCR tests, and/or any other kind of COVID-19 test*  
Yes >> date of most recent test \_\_/\_\_/\_\_  
No >>skip to Q5.17
- 5.3. *If tested:* What type of test/s did you undertake in the past four weeks? *Select all that apply*  
Rapid Antigen Test (RAT)  
PCR test  
Other, please specify \_\_\_\_\_
- 5.4. *If tested:* How many times did you test negative on a COVID-19 PCR test in the past four weeks?  
[Enter number from 0 to 50]
- 5.5. *If tested:* How many times did you test negative on a Rapid Antigen Tests/s (RAT) in the past four weeks  
[Enter number from 0 to 50]
- 5.6. *If tested:* How many times did you test negative on other COVID-19 tests in the past four weeks? [Enter number from 0 to 50]
- 5.7. *If tested:* Why were you last tested for COVID-19? *Select all that apply*  
I had COVID-19-like symptoms  
I had household or household-like contact\* with someone who tested positive to COVID-19  
I work in a high-risk setting  
Had recently returned from overseas travel  
There were cases reported in places I regularly visit, work or study  
Required before returning to work

1  
2  
3 Community testing blitz  
4 I routinely test as part of my work  
5 I had to test to attend a healthcare appointment or similar  
6 I had to test as a requirement for interstate travel or overseas travel  
7 I had to test as a requirement for returning from interstate or overseas travel  
8 Testing before going to see someone who is vulnerable to COVID-19 (e.g., elderly,  
9 immunocompromised people)  
10 Testing before going to a large gathering  
11 I did test/s for my own peace of mind (that is, none of the reasons above)  
12 Other, *specify* \_\_\_\_\_  
13  
14  
15

16 **5.8. If tested:** What information were you given when you got a test? *Select all that apply*

17 How to perform a Rapid Antigen Test (RAT)  
18 How to report a positive Rapid Antigen Test (RAT) result  
19 What to do while waiting for a PCR result  
20 How to get your PCR result, including a contact number  
21 Requirements for self-isolation  
22 Cleaning and hygiene practices  
23 When to leave isolation  
24 How to notify household and/or household like contacts  
25 Testing and/or isolation requirements for household and/or household like contacts  
26 Information on whether I should get confirmatory PCR  
27 Information on repeating Rapid Antigen Tests  
28 What to do if your symptoms get worse  
29 Information on financial support and emergency relief packages  
30 Length of the self-isolation period  
31 Other, *specify* \_\_\_\_\_  
32 I didn't receive any information  
33  
34  
35  
36

37 **5.9. If tested:** Have you tested positive for COVID-19 in the past four weeks?

- 38  Yes >> Trigger manual assign diary  
39  No  
40  Indeterminate  
41 Haven't received a result yet  
42  
43 c) *If Yes to testing positive:* Did you test positive on a PCR test in the past 4 weeks?  
44  Yes  
45  No  
46  Prefer not to say  
47  
48 d) *If Yes to testing positive:* Did you test positive on a Rapid Antigen Test (RAT) in the past  
49 4 weeks?  
50  Yes  
51  No  
52  Prefer not to say  
53  
54 e) *If Yes to testing positive:* Did you test positive on other CoVID-19 Test/s in the past 4  
55 weeks?  
56  Yes  
57  No  
58 Prefer not to say

59 **5.10. If tested and tested positive on RAT:** Did you report your positive Rapid Antigen Test (RAT) to  
60 the state/territory Government?

1  
2  
3 Yes  
4 No  
5 Prefer not to say  
6  
7

8 **5.11. If received a positive result:** When did you receive your positive COVID-19 test result? \_\_/ \_\_/  
9 \_\_/ \_\_

10 *If you have tested positive multiple times in the past 4 weeks, select the date of the first positive*  
11 *test result.*  
12  
13

14  
15 **5.12. If tested and received result:** Between when you were tested and when you received your  
16 test result, did you leave your living premises for any reason?

17 Yes >> go to Q5.14  
18 No >> skip to Q5.15 if positive/else Q5.17  
19

20  
21 **5.13. If tested and has not received result:** Between when you were tested and now, have you left  
22 your living premises for any reason?

23 Yes >> go to Q5.14  
24 No >> skip to Q5.15 if positive/else Q5.17  
25

26  
27 **5.14. If left home (Q 5.12 and 5.13):** If yes, what reasons did you leave your living premises for?  
28 *Select all that apply*

29 Medical care  
30 Exercise  
31 To get essential food  
32 To get essential medicine  
33 Work  
34 To pick up/drop off a household member from work, school, childcare, appointments  
35 To visit family, friends or partner  
36 To visit someone in hospital  
37 Emergency situation  
38 Other, specify \_\_\_\_\_  
39  
40

41  
42 **5.15. If tested positive:** Were you contacted by someone on behalf of the Government/DHHS for  
43 the purpose of contact tracing, i.e., to discuss who you had close contact with while infectious?

44 Yes  
45 No >> skip to Q5.16  
46 f) *If yes:* When did you receive the contact tracing \_\_/ \_\_/ \_\_  
47  
48

49 **5.16. If tested positive:** What is the setting where you were likely exposed to COVID-19?

50 Workplace  
51 Household (my own)  
52 Household (other than my own)  
53 Other household-like setting (indoor hospitality venue)  
54 Overseas/international travel  
55 Other known setting, *specify* \_\_\_\_\_  
56 Unknown setting >> skip to Q17  
57  
58 b) *If not unknown:* What was the **first** date that you were likely exposed to COVID-19? \_\_/ \_\_/  
59 \_\_/ \_\_  
60

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5.17. **Have you been notified as household/ household-like contact** of someone with confirmed COVID-19 in the past four weeks?

*Close contact, now called a household or household-like contact has spent more than four hours with someone who tested positive for COVID-19 inside a house, accommodation, or care facility.*

Yes >> Trigger manual assign diary

No >> skip to Q5.19

Don't know >> skip to 5.Q19

5.18. *If Yes:* When were you *first* notified as a **household/ household-like** contact? \_\_ / \_\_ / \_\_

5.19. Who notified you that you were a **household/ household-like** contact? *Select all that apply*

Government/DHHS Hotline

Testing Centre / Health service

Person with COVID-19 in my household

Person with COVID that I spent >4hrs with in household-like setting

Other household member

Workplace

Friend/Family member

Social media

Unsure

Other, *specify* \_\_\_\_\_

5.20. *If household/ household-like contact:* What is the setting where you were potentially exposed to COVID-19?

Workplace

Household (my own)

Household (other than my own)

Other Household-like setting (Indoor hospitality venue)

Other known setting, *specify* \_\_\_\_\_

Unknown setting

b) *If not unknown:* What was the **last** date that you were potentially exposed or in contact with this person while they were infected with COVID-19? \_\_ / \_\_ / \_\_

c) *If household (my own):* Were/are you able to effectively separate from the person(s) with COVID-19 in your household? (e.g., stay in a different room, sleep in a separate bedroom, use a separate bathroom where possible, maintain distance)

Yes

No

Don't know

5.21. Did you have any COVID-19-like symptoms in the past four weeks? *Please select Yes if you have had any COVID-like symptoms, even if you believe these symptoms were not related to a COVID-19 infection.*

Yes

No >>skip to Q5.23

Prefer not to say

b) *If Yes to symptoms:* Did you first experience these symptoms in the last 4 weeks?

Yes

No >>skip to Q5.22



- 1  
2  
3  
4 c) *If symptoms started in past 4 weeks*: When did your symptoms first start? \_\_ / \_\_ / \_\_  
5 [Date Validation: 4 weeks before survey invitation]  
6

7  
8 5.22. *If Yes to symptoms*: Which symptoms did you experience? *Select all that apply*

9 Cough  
10 Fever  
11 Shortness of breath  
12 Sore throat  
13 Fatigue  
14 Aches and Pains  
15 Headache  
16 Runny or stuffy nose  
17 Loss of taste/smell  
18 Nausea and/or vomiting  
19 Diarrhoea  
20 Other, *specify* \_\_\_\_\_  
21  
22  
23

24 5.23. *If Yes to symptoms and No to testing*: What was your reason for not testing for COVID-19  
25 whilst you had COVID-19-like symptoms? *Select all that apply*

26 Fear of swab procedure/discomfort  
27 I didn't want to wait in testing queue  
28 I left a testing centre because of long que/wait time for PCR testing  
29 I was turned away from the testing centre  
30 Testing centre too far away  
31 Worried about being infected at testing centre  
32 Time constraints (e.g., work/care responsibilities)  
33 Did not know where to go to have a test  
34 Unable to find or access Rapid Antigen Tests (RATs)  
35 Did not want to pay for Rapid Antigen Tests (RATs)  
36 Could not afford Rapid Antigen Tests (RATs)  
37 I was very sure symptoms were not related to COVID-19 (e.g., pre-existing health conditions)  
38 I was pretty sure symptoms were not related to COVID-19 (e.g., allergies, common cold, side  
39 effects of COVID-19 vaccine)  
40 I was pretty sure symptoms were from tobacco use and not related to COVID-19  
41 Symptoms were only mild  
42 Did not think you were eligible for COVID testing  
43 No private transport to get to testing centre  
44 Chose to stay home (self-isolate) instead  
45 Did not want to isolate/quarantine after testing  
46 Other, *specify* \_\_\_\_\_  
47  
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52 5.24. *If Yes symptoms but No to test*: Did you isolate for 7 days because you had symptoms  
53 despite not being able to get tested?

54 Yes  
55 No  
56 I am currently isolating  
57 Prefer not to say  
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- 5.25. *If tested, or if close contact:* Did you apply for any of the following government support packages in the past 4 weeks? Select all that apply
- None of the above
  - COVID-19 worker support payment (one-off \$1500 payment to Victorian workers who are self-isolating or quarantining without access to sick leave)
  - Pandemic Leave Disaster Payment (one-off payment to Victorian workers who can't earn an income because they must self-isolate or quarantine)
  - COVID-19 test isolation payment (one-off payment while waiting for results of COVID-19 test)
  - Lockdown hardship payments (\$750) for unemployed public housing residents
  - Emergency relief package (Care packages for people who do not have family and friend support and are unable to order groceries online)
  - Crisis Payment for National Health Emergency (COVID-19)
  - Emergency Accommodation during isolation or quarantine
  - Other, specify \_\_\_\_\_
- 5.26. Do you personally know anyone who has been diagnosed with COVID-19/Coronavirus in the past 4 weeks?
- Yes >> go to 5.27 and 5.28
  - No >> skip to Q 5.29
  - Don't know / Prefer not to say >> [skip to Q 5.29](#)
- 5.27. How many people do you personally know who have ever been diagnosed with COVID-19? \_\_\_ [please enter a number between 1-1000]
- 5.28. How many people do you personally know who have ever been hospitalised (for more than 1 day) and/or who have died from COVID-19? \_\_\_
- 5.29. How likely do you believe it is that you will be infected with COVID-19 at some point in the future?
- Unlikely
  - Somewhat likely
  - Very likely
  - Don't know / Not sure
  - Prefer not to say
- 5.30. If you were infected with COVID-19 in future, how severe do you think it would be for your health?
- Life threatening
  - Very severe (e.g., requiring hospitalization)
  - Moderate (e.g., requiring self-care and rest in bed)
  - Mild (e.g., capable of continuing with daily tasks normally)
  - No symptoms
  - Don't know / not sure

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3 5.31. How likely do you think it is that people in your family and friends might become infected  
4 with COVID-19 at some point in the future?

- 5 Unlikely  
6 Somewhat likely  
7 Very likely  
8 Don't know / Not sure  
9 Prefer not to say  
10  
11  
12

13 5.32. How worried are you about the COVID-19 outbreak in Australia?

- 14 Very worried  
15 Fairly worried  
16 A little worried  
17 Not at all worried  
18 Don't know/ not sure  
19  
20  
21  
22

23 6. COVID-19 Vaccination module [Repeated monthly]

24 **Vaccine acceptance: COVID-19 vaccines will become available to the majority of Australian's this**  
25 **year.**

26 **[ONLY SHOWN TO PARTICIPANTS WHO HAVE COMPLETED BASELINE VACCINE MODULE OR 7A.**  
27 **COVID-19 ADDITIONAL VACCINE MODULE]**

28 6.1. How many doses of COVID-19 vaccine have you received? State the total number of doses  
29 regardless of the vaccine type (AstraZeneca, Pfizer, Moderna, etc)

- 30 I am not vaccinated  
31 1 dose  
32 2 doses  
33 3 doses  
34 4 doses  
35 5 doses  
36 >5 doses  
37 Unsure / don't know  
38  
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44 6.2. [if 6.1 does not equal 'I am not vaccinated'] In the past four weeks, have you received a COVID-  
45 19 vaccine?

- 46 Yes  
47 No  
48 Prefer not to say  
49  
50

51 6.3. [If Q6.1 equals "I am not vaccinated"] Do you think you would have a COVID-19 vaccine?

- 52 Definitely yes  
53 Probably yes  
54 I'm not sure yet  
55 Probably not  
56 Definitely not  
57 Prefer not to say  
58  
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5 6.4. [ if Q6.1 does not equal 'i am not vaccinated'] Do you think you would have further doses of the  
6 vaccine if recommended?

- 7 Definitely yes  
8 Probably yes  
9 I'm not sure yet  
10 Probably not  
11 Definitely not  
12 Prefer not to say  
13  
14  
15

16 6.5. [ if 6.4 != Definitely yes] For what reasons would you be uncertain about receiving a subsequent  
17 vaccine dose in the future? *Select all that apply.*

- 18 I do not believe I am currently eligible for further COVID-19 vaccines (for example based on  
19 age, underlying conditions, pregnancy or allergy to vaccine ingredients)  
20 I experienced bad side effects and I have chosen not to get a further vaccine dose  
21 My doctor has recommended that I should not get a further dose  
22 I do not wish to comply with vaccine mandates  
23 I believe my immunity is already strong enough and I do not need another dose  
24 I would prefer to choose which vaccine I receive, and I do not believe I am able to do so  
25 It is too inconvenient to go and get a vaccine  
26 There are no bookings in my area  
27 Prefer not to say  
28 Other (please specify)  
29  
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32  
33

34 6.6. [If Q6.3 not equals ""Definitely yes"] For what reason(s) would you NOT have a COVID-19  
35 vaccine yourself? *Please select all that apply*

- 36 It will not be needed as most people will have developed immunity by natural infection  
37 I don't think the vaccine is necessary because COVID-19 is not that serious in most people  
38 It may not work well enough to be worth having  
39 I am worried that it's not safe and hasn't been tested enough for safety  
40 I am worried that I may develop a blood clot after getting the COVID-19 vaccine.  
41 I am worried that I might catch COVID-19 from the vaccine  
42 I am worried that I would get sicker if I got COVID after the vaccine  
43 I do not want to/can't pay for the vaccine  
44 I do not want the vaccine if there is more than one dose  
45 I do not want to attend a health care provider to have the vaccine due to the risk of catching  
46 COVID-19  
47 I do not accept any vaccines for myself so would not accept a COVID-19 vaccine  
48 Other, please specify \_\_\_\_\_  
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56 6.7. Would you get the COVID-19 vaccine for your child/ren aged under 5 years?

- 57 N/A – no dependent child/ren aged under 5 years  
58 My child/ren aged under 5 years have already been vaccinated with at least one dose  
59  
60

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3 Definitely yes Probably yes

4 I'm not sure yet

5 Probably not

6 Definitely not

7 Prefer not to say

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12 6.8. Would you get the COVID-19 vaccine for your child/ren aged 5-11 years?

13  
14 N/A – no dependent child/ren aged 5-11 years

15 My child/ren 5-11 years have already been vaccinated with at least one dose

16 Definitely yes

17 Probably yes

18 I'm not sure yet

19 Probably not

20 Definitely not

21 Prefer not to say

22  
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25 6.9. Would you get the COVID-19 vaccine for your child/ren aged over 11 years?

26  
27 N/A – no dependent child/ren aged over 11 years

28 My child/ren aged over 11 years have already been vaccinated with at least one dose

29 Definitely yes Probably yes

30 I'm not sure yet

31 Probably not

32 Definitely not

33 Prefer not to say

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38 6.10. [ if (6.7 not equal NA and not equal "already vaccinated") OR (6.8 not equal NA and not  
39 equal "already vaccinated") OR (6.9 not equal NA and not equal "already vaccinated")]

40 For what reason(s) would you NOT get a COVID-19 vaccine for your child/ren? *Please select all that*  
41 *apply*

42 At this stage I have no concerns about the vaccination for my children should it become  
43 available

44 It will not be needed as most people will have had the infection by then

45 I don't think the vaccine is necessary because COVID-19 is not that serious in children

46 It may not work well enough to be worth having

47 I am worried that it's not safe and hasn't been tested enough for safety

48 I am worried that my child may develop a blood clot after getting the COVID-19 vaccine

49 I am worried that my child may develop heart inflammation (myo/pericarditis) after getting the  
50 COVID-19 vaccine

51 I am worried about my child experiencing general side effects after getting the COVID-19 vaccine  
52 (fatigue, nausea, etc)

53 I am worried that my child might catch COVID-19 from the vaccine

54 I am be worried that my child would get sicker if they got COVID after the vaccine

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3 I do not want to/cannot pay for the vaccine

4 I do not want my child/ren to have the vaccine if there was more than one dose

5  
6 I do not want to attend a health care provider with my child to have the vaccine due to the risk  
7 of catching COVID-19

8 I do not accept any vaccines for my child so would not accept a COVID-19 vaccine

9  
10 Other, please specify \_\_\_\_\_

11  
12 6.11. Do you have any concerns about the vaccine, irrespective of your vaccination status? If so,  
13 what are your main concerns *Please select all that apply:*

14  
15 I am worried that it may affect my future fertility

16 I am worried that it may affect my present or future pregnancy or breastfeeding

17 I am worried about potential side effects

18 I am worried about serious reactions

19 I am worried that long term effects are not well understood

20 A COVID-19 vaccination could give me COVID-19

21 The COVID-19 vaccine may interact with my current medications

22 A COVID-19 vaccination is too new for me to be confident about getting vaccinated with it

23 Information on side effects following immunisation is not readily available

24 I have no safety concerns

25  
26 Other, please specify \_\_\_\_\_

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32 6.12. [If Q6.1 != I am not vaccinated] Why did you decide to get a COVID-19 vaccine? *Please select*  
33 *all that apply*

34 To protect my personal health

35 To protect vulnerable people

36 To protect the health of my family and friends

37 To reduce COVID-19 transmission in the community

38 To comply with a vaccine mandate related to my employment

39 To engage in activities where vaccination is required (large events, restaurants, etc)

40 To reduce the need for/the length of public health restrictions (e.g. lockdowns, density  
41 limits, etc)

42 To travel interstate or internationally

43 Prefer not to say

44 Other (please specify)

### Perceived knowledge sufficiency

6.13. To what extent do you agree or disagree with the following statements?

	Totally Disagree	Somewhat disagree	Neutral	Some what Agree	Totally Agree	Prefer not to say
a) Adequate information about COVID-19 illness is available for the public to make an informed decision about whether to get vaccinated						
b) Adequate information about COVID-19 vaccines is available for the public to make an informed decision about whether to get vaccinated						
c) Adequate information about who is eligible to receive a COVID-19 vaccine is available						
d) Adequate information about where to go to receive COVID-19 vaccines is available						
e) Adequate information about how to book or make an appointment to receive a COVID-19 vaccine is available						
f) Adequate information about how much it will cost to receive a COVID-19 vaccine is available						
g) Adequate information on side effects following COVID-19 vaccination is readily available						
h) Adequate information about what the benefits are for getting vaccinated is available						
i) Adequate information about what the risks are for getting vaccinated –such as the potential risk of developing a blood clot and side effects is available						

### Return to 'normal' life

6.14. To what extent do you agree or disagree with the following statements?

	Totally Disagree	Somewhat disagree	neutral	Somewhat Agree	Totally Agree	Prefer Not to say
a. Once a person is vaccinated, they should still be required to follow social distancing and other measures for COVID-19						
b. Once a person is vaccinated, they should still						

1 2 3 4 5	need to isolate if they test positive for COVID-19.					
6 7 8 9 10 11 12 13 14	c. Once a person is vaccinated, they should still need to quarantine in accordance with the current health advice to reduce COVID-19 transmission (e.g. a close household contact of a person with COVID-19).					
15 16 17 18 19	d. Once a person is vaccinated, they should still get tested for COVID if they have COVID like symptoms.					
20 21 22 23 24 25	e. Once a person is vaccinated, they should still need to wear a mask when required.					

7. Physical health and health care

7.1. *If sex at birth!=male:* Are you currently pregnant?

Yes

No

Don't know/prefer not to answer

The following questions ask about changes to your health and healthcare access in the **past three months**.

7.2. a) In the **past 3 months** did you develop or get diagnosed with any new health conditions that are chronic or have ongoing impact on your daily life or medical needs? *This includes both physical and mental health conditions*

Yes

No >> [go to 7.3](#)

Don't know >> [go to 7.3](#)

Prefer not to say >> [go to 7.3](#)

**b) If yes: Which new medical conditions has a doctor or healthcare professional told you that you have in the past 3 months? Check all that apply**

Alcohol or drug dependence

Alzheimer's or dementia

Arthritis

Asthma

Autism spectrum disorder

Any autoimmune disease (e.g. lupus, multiple sclerosis, rheumatoid arthritis, psoriasis Crohn's disease, inflammatory bowel disease)

Bowel disease

Brain injury

Cancer (active/current)

Depression or anxiety disorder



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3 Other mental health condition  
4 Diabetes  
5 Epilepsy or seizures  
6 Hearing loss  
7 Heart disease  
8 Hypertension / high blood pressure  
9 Intellectual disability  
10 Immune disorder (immunocompromised, primary or acquired immune deficiency)  
11 Chronic kidney disease  
12 Liver disease  
13 Chronic lung disease (e.g. COPD, emphysema)  
14 Menopausal symptoms  
15 Musculoskeletal condition  
16 Spinal cord injury  
17 Stroke  
18 Vision impairment  
19 Other, *specify* \_\_\_\_\_  
20 Prefer not to say  
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29 **7.3. Do these health need(s) require ongoing regular medical appointments (e.g. repeat**  
30 **prescriptions, specialist appointments, physical therapy, periodic check ups)?**

31 Yes  
32 No  
33 I don't know  
34  
35

36 **7.4. Did you access a health service or practitioner in the past 3 months? (consider GP, hospital,**  
37 **specialist, dentist, community health and allied health services. Include telehealth**  
38 **consultations)**

39 No  
40 Yes >> 7.4b) Please estimate how many times \_\_\_ \_\_\_  
41  
42  
43

44 **7.5. What type of a health practitioner did you access in the past 3 months?? *Select all that apply***

45 A General Practitioner (GP)  
46 A specialist doctor  
47 A dentist  
48 An alternative health care provider (e.g. naturopath, chiropractor etc)  
49 A hospital doctor in outpatients  
50 A hospital doctor in the emergency department  
51 A midwife  
52 A counsellor or other mental health worker  
53 A community nurse, practice nurse or nurse practitioner  
54 A physiotherapist, dietitian or exercise physiologist  
55 Other  
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7.6. **How easy has it been for you to access the healthcare you need in the past 3 months?**

Very easy

Somewhat easy

Somewhat difficult

Very difficult

N/A – haven't needed healthcare in the past 3 months >> [skip to Q7.9](#)

Don't know/ Prefer not to say

7.7. **Has COVID-19 changed your access or utilisation of healthcare in the past 3 months?**

Yes

No >>skip to Q 7.9

Don't know >>skip to Q 7.9

7.8. ***If yes:* What changes have you experienced in the past 3 months?**

My face-to-face appointments were rescheduled to Telehealth appointments

My appointment(s) were cancelled/postponed by the clinic

My elective surgery / procedure was delayed or cancelled

I couldn't contact my usual healthcare provider

I couldn't afford to access my usual healthcare

I couldn't access my usual healthcare

I ran out of medication

Other, *specify* \_\_\_\_\_

7.9. **Were you offered any alternatives to your usual medical appointments or prescription services in the past 3 months? *E.g. telehealth, online prescription services, in-home services***

Yes

No

Don't know

7.10. **If yes, what were you offered? *Select all that apply***

Telehealth consultation(s) >> [go to d](#)

Online prescription services

Repeat prescriptions /multi-month medication

In-home services

Other, *specify* \_\_\_\_\_

7.11. **How satisfied were you with telehealth consultation(s)?**

Very satisfied

Somewhat satisfied

Neutral

Somewhat dissatisfied

Very dissatisfied

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**7.12. How you experienced any of the following concerns in relation to your usual healthcare in the past 3 months?**

I delayed or avoided seeking care due to COVID-19

I felt anxious about attending due to COVID-19

I couldn't access telehealth consultation(s)

Other, *specify* \_\_\_\_\_

**7.13. *If reported requiring care at baseline:* You previously reported that you regularly need help with daily tasks due to long-term illness, age or disability. Have you experienced any disruptions to receiving this help or care in the past 3 months?**

Yes

No

Not applicable – I no longer regularly need help with daily tasks due to illness, age or disability

Prefer not to say

**8. Mental health**

The following section asks experiences affecting your wellbeing. **For emotional support, Beyond Blue and Lifeline offer tips, brief counselling and referrals.** More information will be available at the end of the survey.

8.1. Over the last 2 weeks, how often have you been bothered by the following problems? \* *Not required*

	Not at all	Several days	Over half the days	Nearly every day
Feeling nervous, anxious, or on edge	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Not being able to stop or control worrying	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Worrying too much about different things	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Trouble relaxing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Being so restless that it's hard to sit still	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Becoming easily annoyed or irritable	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Feeling afraid as if something awful might happen	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

The following questions ask how satisfied you feel, on a scale from zero to 10. Zero means you feel no satisfaction at all and 10 means you feel completely satisfied.

8.2. Thinking about your own life and personal circumstances, how satisfied are you currently with ...  
\* *Not required*

	0 No satisfaction at all	1	2	3	4	5	6	7	8	9	10 Completely satisfied
--	-----------------------------------	---	---	---	---	---	---	---	---	---	-------------------------------

... your standard of living?	0	1	2	3	4	5	6	7	8	9	10
... your health?	0	1	2	3	4	5	6	7	8	9	10
... what you are achieving in life?	0	1	2	3	4	5	6	7	8	9	10
... your personal relationships?	0	1	2	3	4	5	6	7	8	9	10
... how safe you feel?	0	1	2	3	4	5	6	7	8	9	10
... feeling part of your community?	0	1	2	3	4	5	6	7	8	9	10
... your future security?	0	1	2	3	4	5	6	7	8	9	10

8.3. To what extent has COVID-19 had negative effects on your mental health (e.g. feeling stressed, lonely, anxious, angry etc) in the past 4 weeks?

To a great extent

Somewhat

Very little

Not at all

I don't know/I prefer not to answer

#### 9. Measures to prevent COVID-19

9.1. Where are the **main** places you received or accessed information to stay informed about COVID-19 in the past 4 weeks? *Select up to three sources.*

Australian Government health authorities (e.g. Department of Health website, Coronavirus Australia app, hotline, Government WhatsApp channel)

Daily government press conferences/media releases (e.g., by the Premier, Health Minister and/or Chief Health Officer)

Doctor or other health professional

News media (including online, television, radio, print)

Friend or family

My workplace / co-workers

Social media (e.g. Facebook, Twitter, Instagram, Weibo, WeChat, Australia Today, Yi Yi)

A community/religious/cultural leader

The World Health Organization (WHO)

Other, *please specify* \_\_\_\_\_

I didn't access COVID-19 information in the past 4 weeks

9.2. How often have you taken the following measures to protect yourself and others from COVID-19 (coronavirus) in the past 4 weeks?

	Always	Most of the time	Sometimes	Never	Not applicable to me
Using hand sanitizer and/or washing your hands immediately after being in a public place	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Coughing/sneezing into your elbow or tissue	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Keeping 1.5 metres away from people who are not members of your household as much as you can	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Disinfecting surfaces and objects	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Avoiding seeing people who are older/vulnerable	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Avoiding non-essential shopping (in person – don't consider online shopping)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Avoiding social gatherings	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Wearing or carrying a face covering in public. <small>A face covering needs to cover both your nose and mouth. It could be a face mask or shield.</small>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Avoiding public transport	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

9.3. Have you received a fine for not following COVID directives (i.e. stay-at-home, self-isolation, mask wearing, curfew) in the past 4 weeks?

Yes

No

Prefer not to say

9.4. Have you experienced or witnessed racism **in relation to COVID-19** and the measures to prevent its spread in the past 4 weeks? *Select all that apply*

Yes, I experienced racism

Yes, I witnessed racism

No

Prefer not to say

**The next questions are specific to your places of work.**

9.5. *If report working in workplace currently:* Do you currently work in a facility or service providing healthcare or social assistance? This includes people working in administration, management, cleaning, support services, and health professionals

Yes >> skip to Q9.7

No

Don't know

9.6. *If attending a workplace and not in health setting:* How often have you taken the following measures to protect yourself and others from COVID-19 (coronavirus) in the past 4 weeks **when at your workplace(s)?**

	Always	Most of the time	Sometimes	Never	Not applicable to me
Wearing a face covering <i>A face covering needs to cover both your nose and mouth. It could be a face mask or shield.</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Regularly using hand sanitizer and/or washing your hands	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Keeping 1.5 metres away from other people as much as you can	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Disinfecting surfaces and objects (implemented yourself or by your workplace)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Avoiding shared use of phones, desks, offices, or other work tools and equipment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Using personal protective equipment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

*If work in a facility or service providing healthcare or social assistance*

Hospital	General practice and general community-based services	Specialist community-based services	Residential care	Ambulance services
<input type="checkbox"/> Inpatient services <input type="checkbox"/> Outpatient clinics <input type="checkbox"/> Emergency departments <input type="checkbox"/> Other hospital-based settings	<input type="checkbox"/> General practice <input type="checkbox"/> Community health services <input type="checkbox"/> Allied health practices <input type="checkbox"/> Community Pharmacy <input type="checkbox"/> Dentistry <input type="checkbox"/> Health promotion <input type="checkbox"/> University	<input type="checkbox"/> Specialist medical/surgical <input type="checkbox"/> Diagnostic service <input type="checkbox"/> Home and community care <input type="checkbox"/> Alcohol and other drug treatment service <input type="checkbox"/> Community mental health service <input type="checkbox"/> Palliative care	<input type="checkbox"/> Aged care <input type="checkbox"/> Residential care	<input type="checkbox"/> Ambulance service <input type="checkbox"/> Aero-medical service

		<b>service</b> <input checked="" type="checkbox"/> <b>Other specialist</b>		
--	--	---	--	--

9.7. *If report working in a setting providing healthcare or social assistance: What kind of setting(s) do you currently work in? See examples of each setting above. Select all that apply*

- Hospital >>  Inpatient services  Outpatient clinics  Emergency departments  Other  
 General practice and general community-based health services  
 Specialist community-based services  
 Residential care  
 Ambulance services  
 Other setting, *specify* \_\_\_\_\_

9.8. Do you provide direct patient care?

- Yes, – including in person care  
 Yes – telehealth only >> skip to Q9.10  
 No

9.9. Repeat questions for each setting selected:

9.9.1. Does your [insert name] workplace currently provide COVID-19 (coronavirus) testing?

- Yes  
 No  
 Don't know

9.9.2. In the past 4 weeks, how often was appropriate PPE (personal protective equipment) **available** at your [insert name] workplace? *Appropriate PPE is dependent on your setting, patient contact, and guidelines and may have changed over time.*

- Yes, all of the time**  
**Yes, most of the time**  
**Yes, some of the time**  
**Yes, occasionally**  
**Never**  
**Don't know**  
**Prefer not to say**

9.9.3. In the past 4 weeks, how often did you **use** appropriate PPE during patient interactions?

- Yes, all of the time**  
**Yes, most of the time**  
**Yes, some of the time**  
**Yes, occasionally**  
**Never**  
**Don't know**  
**Prefer not to say**

1  
2  
3 9.10. *If selected "work" as a source of income:* Did you work in hotel quarantine and/or border  
4 security in the past 4 weeks?

5  
6 Yes

7 No >> *Skip to Q9.14*

8 The following questions are specific to your hotel quarantine and/or border security workplace

9  
10 9.11. How did you receive updates and important communication from your workplace in the past  
11 4 weeks? *Tick all that apply*

12  Phone

13  Email

14  WhatsApp

15  Weibo, WeChat

16  In-person meetings

17  Other, *specify* \_\_\_\_\_

18  I don't receive updates/important communication

19  
20  
21  
22 9.12. To what extent do you agree with the following statements:

23 9.12.1. I have received adequate training to work safely with people potentially infected with  
24 COVID-19

25  Totally agree

26  Somewhat agree

27  Neutral

28  Somewhat disagree

29  Totally disagree

30  Prefer not to answer

31  
32  
33  
34  
35 9.12.2. I feel well supported by my workplace management/supervisor

36 Totally agree

37 Somewhat agree

38 Neutral

39 Somewhat disagree

40 Totally disagree

41 Prefer not to answer

42  
43  
44  
45 9.12.3. I feel like I would be well supported if I was exposed to COVID-19 at work

46 Totally agree

47 Somewhat agree

48 Neutral

49 Somewhat disagree

50 Totally disagree

51 Prefer not to answer

52  
53  
54  
55 9.12.4. I feel like I would be well supported if I become infected with COVID-19

56 Totally agree

57 Somewhat agree



- 1  
2  
3 Neutral  
4 Somewhat disagree  
5  
6 Totally disagree  
7  
8 Prefer not to answer  
9

10 9.13. How acceptable do you currently think it is to require quarantine workers to test frequently  
11 for COVID-19?

- 12 Totally unacceptable  
13 Somewhat unacceptable  
14  
15 Neutral  
16 Somewhat acceptable  
17  
18 Highly acceptable  
19  
20 Prefer not to answer

21 The next few questions ask about the **current** measures to prevent the spread of COVID-19  
22 (coronavirus) where you live

23  
24  
25 The next set of questions asks about your acceptance of actual, planned, or theoretical actions that  
26 the Australian government has taken to control the COVID-19 pandemic.

27 9.14. How acceptable do you think the following Government actions are given the current  
28 COVID-19 pandemic in Australia?  
29

	Totally unacceptable	Somewhat unacceptable	Neutral	Somewhat acceptable	Highly acceptable
Cancelling public events of over 100 people (e.g. sports, concert, festival)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Closing bars, cafes and restaurants except for take-away/delivery service	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Remote learning for school children	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Limiting the number of people who can attend a wedding or funeral	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Requiring people to stay at home except for essential work, shopping for essential supplies, medical reasons, or exercise	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Requiring individuals returning from overseas to quarantine in hotels for 14 days	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

1 2 3 4 5 6 7	Requiring COVID-19 testing before allowing individuals to go back to work	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8 9 10	Requiring everyone to wear a face mask in public	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
11 12 13 14 15	Fining people who break the rules for physical distancing/"Stay at Home" orders	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
16 17 18	Restricting travel between states/territories	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
19 20 21 22	Closing borders to all other countries	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
23 24 25 26 27 28	Temporarily closing down workplaces deemed non-essential (in-person retail, manufacturing, administration)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
29 30 31 32 33	A mandatory COVID-19 vaccine for certain high-risk groups, such as healthcare workers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
34 35 36 37	Requiring QR code check-ins at hospitality venues, shops and events					
38 39 40 41 42	Requiring proof of vaccination at hospitality venues and events					

43  
44  
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46 9.15. How much do you agree or disagree with the following statements?

47 9.15.1. I have confidence in the **Victorian** Government's approach for dealing with COVID-19

48 Strongly disagree

49 Disagree

50 Neither agree nor disagree

51 Agree

52 Strongly agree

53  
54  
55  
56 9.15.2. I have confidence in the **Australian** Government's approach for dealing with COVID-19

57 Strongly disagree

58 Disagree

Neither agree nor disagree

Agree

Strongly agree

9.16. What are your **top 3 biggest** concerns about the current or potential effects of COVID-19 (coronavirus) at the moment? Select up to 3 concerns. You can specify your own concern if it is not listed below.

Being infected with COVID-19

Friends or family being infected with COVID-19

Infections and death from COVID across the community

Your mental/emotional health

Friends' or family's mental health and wellbeing

Schools closing for a long time

Regular health services not being available

Your personal financial situation

Economic recession

The impacts on jobs and unemployment

Your living situation

Getting access to essential products or services

Fulfilling work or study requirements

The quality of your relationships (family, friends, romantic or sexual)

Your physical fitness

Your personal safety

Other, *specify* \_\_\_\_\_

I have no concerns about COVID-19

9.17. Anything else that you would like to say about your experience with COVID-19 that we haven't covered today?

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**For up to date information on COVID-19 please see the [Department of Health website](#) and/or download the official government "Coronavirus Australia" app. Information is also available in [languages other than English](#).**

**For specific information about vaccines for COVID-19, please see the Department of Health COVID-19 vaccination website <https://www.coronavirus.vic.gov.au/vaccine>.**

**If you are worried that you or someone in your family may have COVID-19, call the 24/7 hotline on 1800 675 398. You can find out about [symptoms](#) and [where to get tested](#) through the DHHS.**

**For emotional support, [Beyond Blue](#) (1800 512 348) and [Lifeline](#) (13 11 14) offer tips, brief counselling and referrals. If you are struggling to cope, you can reach out to a counsellor at the [Suicide Call Back Service](#) on 1300 659 467.**

**For help and support for domestic or family violence and abuse, contact [1800RESPECT](#) on 1800 373 732 or [Safe Steps](#) on 1800 015 188 or [inTouch Multicultural Centre against Family Violence](#) on 1800 755 988.**

**If you are experiencing financial hardship during the COVID-19 pandemic, you can apply for [financial assistance](#). You can also visit the [WIRE](#) website or the [Salvation Army](#) to find out about financial resources which may be useful to you.**

### Supplementary file 3G. Follow up daily diaries

#### COVID health in past week

These questions refer to the past 7 days, from {allocated date -6} to {allocated date}

Pop up information box:

Click here to see the Victorian Government's latest guidelines on COVID-19 symptoms to watch out for: <https://www.coronavirus.vic.gov.au/symptoms-and-risks>

Click here to see the Victorian Government's latest guidelines on isolation for people who tested positive to COVID-19 and their household and household-like contacts

26. Have you been tested for COVID-19/coronavirus infection in the past 7 days? *Please include Rapid Antigen Tests (RATs), PCR tests, and/or any other kind of COVID-19 test*
- Yes >> date of most recent test \_\_/\_\_/\_\_
  - No >>skip to Q16
27. *If tested:* What type of test/s did you undertake in the past 7 days? *Select all that apply*
- Rapid Antigen Test (RAT)
  - PCR test
  - Other, please specify \_\_\_\_\_
28. *If tested:* How many times did you test negative on a COVID-19 PCR test in the past 7 days?  
[Enter number from 0 to 50]
29. *If tested:* How many times did you test negative on a Rapid Antigen Tests/s (RAT) in the past 7 days  
[Enter number from 0 to 50]
30. *If tested:* How many times did you test negative on other COVID-19 tests in the past 7 days  
[Enter number from 0 to 50]
31. *If tested:* Why were you last tested for COVID-19? *Select all that apply*
- I had COVID-19-like symptoms
  - I had household or household-like contact\* with someone who tested positive to COVID-19
  - I work in a high-risk setting
  - Had recently returned from overseas travel
  - There were cases reported in places I regularly visit, work or study
  - Required before returning to work
  - Community testing blitz
  - I routinely test as part of my work
  - I had to test to attend a healthcare appointment or similar
  - I had to test as a requirement for interstate travel or overseas travel
  - I had to test as a requirement for returning from interstate or overseas travel
  - Testing before going to see someone who is vulnerable to COVID-19 (e.g., elderly, immunocompromised people)
  - Testing before going to a large gathering
  - I did test/s for my own peace of mind (that is, none of the reasons above)
  - Other, *specify* \_\_\_\_\_
32. *If tested:* What information were you given when you got a test? *Select all that apply*
- How to perform a Rapid Antigen Test (RAT)

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- How to report a positive Rapid Antigen Test (RAT) result
  - What to do while waiting for a PCR result
  - How to get your PCR result, including a contact number
  - Requirements for self-isolation
  - Cleaning and hygiene practices
  - When to leave isolation
  - How to notify household and/or household like contacts
  - Testing and/or isolation requirements for household and/or household like contacts
  - Information on whether I should get confirmatory PCR
  - Information on repeating Rapid Antigen Tests
  - What to do if your symptoms get worse
  - Information on financial support and emergency relief packages
  - Length of the self-isolation period
  - Other, *specify* \_\_\_\_\_
  - I didn't receive any information
33. *If tested*: Have you tested positive for COVID-19 in the past 7 days?
- Yes >> (trigger manual assign contact diary)
  - No >> (no follow up required)
  - Indeterminate >> (no follow up required)
  - Haven't received a result yet >> (no follow up required)
    - b) *If Yes to testing on a PCR and testing positive*: Did you test positive on a PCR test in the past 7 days?
      - Yes
      - No
      - Prefer not to say
    - c) *If Yes to testing on a RAT and testing positive*: Did you test positive on a Rapid Antigen Test (RAT) in the past 7 days?
      - Yes
      - No
      - Prefer not to say
    - d) *If Yes to testing on other test and testing positive*: Did you test positive on other CoVID-19 Test/s in the past 7 days?
      - Yes
      - No
      - Prefer not to say
34. *If tested and tested positive on RAT*: Did you report your positive Rapid Antigen Test (RAT) to the state/territory Government?
- Yes
  - No
  - Prefer not to say
35. *If received a positive result*: When did you receive your positive COVID-19 test result? \_\_/\_\_/\_\_\_\_
- If you have tested positive multiple times in the past 7 days, select the date of the first positive test result.
36. *If tested and received result*: Between when you were tested and when you received your test result, did you leave your living premises for any reason?
- Yes >> go to Q13
  - No >> skip to Q14 if positive/else Q16

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37. *If tested and has not received result*: Between when you were tested and now, have you left your living premises for any reason?
- Yes >> go to Q13
  - No >> skip to Q14 if positive/else Q16
38. *If left home (Q 11 and 12)*: If yes, what reasons did you leave your living premises for?  
*Select all that apply*
- Medical care
  - Exercise
  - To get essential food
  - To get essential medicine
  - Work
  - To pick up/drop off a household member from work, school, childcare, appointments
  - To visit family, friends or partner
  - To visit someone in hospital
  - Emergency situation
  - Other, specify \_\_\_\_\_
39. *If tested positive*: Were you contacted by someone on behalf of the Government/DHHS for the purpose of contact tracing, i.e., to discuss who you had close contact with while infectious?
- Yes
  - No >> skip to Q15
- d) *If yes*: When did you receive the contact tracing \_\_ / \_\_ / \_\_
40. *If tested positive*: What is the setting where you were likely exposed to COVID-19?
- Workplace
  - Household (my own)
  - Household (other than my own)
  - Other household-like setting (indoor hospitality venue)
  - Overseas/international travel
  - Other known setting, *specify* \_\_\_\_\_
  - Unknown setting >> skip to Q16
- e) *If not unknown*: What was the **first** date that you were likely exposed to COVID-19? \_\_ / \_\_ / \_\_
41. **Have you been notified as household/ household-like contact** of someone with confirmed COVID-19 in the past 7 days?  
*Close contact, now called a household or household-like contact has spent more than four hours with someone who tested positive for COVID-19 inside a house, accommodation, or care facility.*
- Yes >> (trigger manual assign contact diary)
  - No >> skip to Q18
  - Don't know >> skip to Q18
- b) *If Yes*: When were you *first* notified as a **household/ household-like** contact? \_\_ / \_\_ / \_\_
- c) Who notified you that you were a **household/ household-like** contact? *Select all that apply*
- Government/DHHS Hotline
  - Testing Centre / Health service
  - Person with COVID-19 in my household
  - Person with COVID that I spent >4hrs with in household-like setting
  - Other household member
  - Workplace

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- Friend/Family member  
 Social media  
 Unsure  
 Other, *specify* \_\_\_\_\_
42. *If household/ household-like contact*: What is the setting where you were potentially exposed to COVID-19?
- Workplace  
 Household (my own)  
 Household (other than my own)  
 Other Household-like setting (Indoor hospitality venue)  
 Other known setting, *specify* \_\_\_\_\_  
 Unknown setting
- f) *If not unknown*: What was the **last** date that you were potentially exposed or in contact with this person while they were infected with COVID-19? \_\_/\_\_/\_\_
- g) *If household (my own)*: Were/are you able to effectively separate from the person(s) with COVID-19 in your household? (e.g., stay in a different room, sleep in a separate bedroom, use a separate bathroom where possible, maintain distance)
- Yes  
 No  
 Don't know
43. Did you have any COVID-19-like symptoms in the past 7 days? *Please select Yes if you have had any COVID-like symptoms, even if you believe these symptoms were not related to a COVID-19 infection.*
- Yes  
 No >>skip to Q22  
 Prefer not to say
- b) *If Yes to symptoms*: Did you first experience any of these symptoms in the last 14 days?
- Yes  
 No >>skip to Q19
- c) *If Yes: sym. start in last 14 days*: When did your symptoms first start?  
 \_\_/\_\_/\_\_ [Date Validation: 14 days before survey invitation]
44. *If Yes to symptoms*: Which symptoms did you experience? *Select all that apply*
- Cough  
 Fever  
 Shortness of breath  
 Sore throat  
 Fatigue  
 Aches and Pains  
 Headache  
 Runny or stuffy nose  
 Loss of taste/smell  
 Nausea and/or vomiting  
 Diarrhoea  
 Other, *specify* \_\_\_\_\_
45. *If Yes to symptoms and No to testing*: What was your reason for not testing for COVID-19 whilst you had COVID-19-like symptoms? *Select all that apply*
- Fear of swab procedure/discomfort  
 I didn't want to wait in testing queue  
 I left a testing centre because of long que/wait time for PCR testing  
 I was turned away from the testing centre  
 Testing centre too far away

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- Worried about being infected at testing centre
  - Time constraints (e.g., work/care responsibilities)
  - Did not know where to go to have a test
  - Unable to find or access Rapid Antigen Tests (RATs)
  - Did not want to pay for Rapid Antigen Tests (RATs)
  - Could not afford Rapid Antigen Tests (RATs)
  - I was very sure symptoms were not related to COVID-19 (e.g., pre-existing health conditions)
  - I was pretty sure symptoms were not related to COVID-19 (e.g., allergies, common cold, side effects of COVID-19 vaccine)
  - I was pretty sure symptoms were from tobacco use and not related to COVID-19
  - Symptoms were only mild
  - Did not think you were eligible for COVID testing
  - No private transport to get to testing centre
  - Chose to stay home (self-isolate) instead
  - Did not want to isolate/quarantine after testing
  - Other, *specify* \_\_\_\_\_

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46. *If Yes symptoms but No to test*: Did you isolate for 7 days because you had symptoms despite not being able to get tested?

- Yes
- No
- I am currently isolating
- Prefer not to say

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*If you've tested positive to COVID-19 in the past 7 days a researcher will be in touch with you.  
If you've been notified as a household or household like contact in the past 7 days, a researcher will be in touch with you.*

35  
36  
37

Please complete the following sections based on your feelings and activities **YESTERDAY**,  
**{ALLOCATED DAY}**

38  
39  
40  
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42

**Mood**

47. How often did you experience **negative** emotions {yesterday}? (e.g., unpleasant, sad, angry, upset, bored, disappointed, nervous, annoyed):

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- Never    Rarely    Sometimes    Often    All day

48. How often did you experience **positive** emotions {yesterday}? (e.g., happy, content, cheerful, excited, calm, serene, ecstatic):

- Never    Rarely    Sometimes    Often    All day



## Contacts

We would like you to know about every person that you have contact with yesterday, {ALLOCATED DAY}.

**A contact** is defined as someone you either:

- Had a face-to-face conversation with, OR
- Shared a closed space with (e.g. room, car, bus, lift, train carriage), OR
- Had physical contact with (e.g. handshake, hug, kiss, contact sport).

Consider people you live with, people who visited your home, and people you were in contact with when you left home. Don't forget about the times you used public or shared transport.

Do not include people that you exclusively contacted by phone/video call.

49. Did you have contact with anyone {yesterday}?

- Yes
- No >> end of survey

50. Were any of these contacts someone you know by name or someone who you will regularly see again?

- Yes
- No >> skip to Q20

51. Please type in the **full name(s)** (First name Last name, if known. Else, nickname) of **every person** you had contact with yesterday (from 5am {yesterday} until 5am today):

- If you had contact with the same person several times during the assigned day, only record them once, and record the total time you spent with them over the entire day. Each person you have contact with during the day should have only one line in the diary.
- List people who you know or are familiar with by First Name and Last Name.
- Type in the contacts full name, if you know it, in the first box and press "enter" or select the create button.
- To select previous contacts or your key people, click on the blue box on the right of the text box and search or click on their name in the list.
- We will then ask a few questions about these contacts in the boxes below.
- If you don't know their age, then please estimate.
- You don't need to list all contacts you had if:
  - They are too numerous to list or you don't know them by name (e.g., if you work at a supermarket with many customers)
  - You are a health care worker referring to contact with patients
 You will be asked to summarise these contacts at the end.

	Full Name (First Name Last Name, if known. Else, nickname)	Age range (years)	Gender	Relationship to you <i>Select one</i>	What was the purpose or circumstances of the contact? <i>Select all that apply</i>	In what setting did you have contact? <i>Select all that apply</i>	How many <b>other people</b> were at this location at the same time as you, <b>excluding</b> you and members of your household? <i>If you had contact with this person at more than one location, answer for the most crowded location you shared with this person yesterday</i>	Did you have contact indoors or outdoors? <i>Select all that apply</i>	How long did you spend with this person <b>in total</b> ?	How much time did you spend within <b>close</b> contact of this person (within 1.5 metres of each other or within a closed space?)	Did you have any physical contact?
1	_____	<5 5-9 10-14 15-19 20-29 30-39 40-49 50-59	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Non-binary <input type="checkbox"/> Unknown	<input type="checkbox"/> Partner (incl. spouse, boyfriend/girlfriend) <input type="checkbox"/> Parent <input type="checkbox"/> Child <input type="checkbox"/> Grandparent <input type="checkbox"/> Grandchild <input type="checkbox"/> Sibling <input type="checkbox"/> Other family member <input type="checkbox"/> Friend <input type="checkbox"/> Work colleague	<input type="checkbox"/> Live together <input type="checkbox"/> Providing care <input type="checkbox"/> Receiving care <input type="checkbox"/> Buying/receiving food <input type="checkbox"/> Buying/receiving medical supplies <input type="checkbox"/> Non-essential shopping <input type="checkbox"/> Medical <input type="checkbox"/> Work <input type="checkbox"/> Study/education <input type="checkbox"/> Social <input type="checkbox"/> Sport/exercise	<input type="checkbox"/> Home <input type="checkbox"/> Other private residence <input type="checkbox"/> School/university <input type="checkbox"/> Childcare <input type="checkbox"/> Transport <input type="checkbox"/> Health service <input type="checkbox"/> Shop / retail <input type="checkbox"/> Restaurant / café <input type="checkbox"/> Bar / nightclub <input type="checkbox"/> Indoor sports / recreational	<input type="checkbox"/> None <input type="checkbox"/> 1-2 <input type="checkbox"/> 3-5 <input type="checkbox"/> 6-10 <input type="checkbox"/> 11-20 <input type="checkbox"/> 21-100 <input type="checkbox"/> More than 100	<input type="checkbox"/> Indoor <input type="checkbox"/> Outdoor	<input type="checkbox"/> Less than 5 minutes <input type="checkbox"/> 5 to 14 minutes <input type="checkbox"/> 15 to 60 minutes <input type="checkbox"/> 1 to 2 hours <input type="checkbox"/> 2 to 8 hours <input type="checkbox"/> More than 8 hours	<input type="checkbox"/> Less than 5 minutes <input type="checkbox"/> 5 to 14 minutes <input type="checkbox"/> 15 to 60 minutes <input type="checkbox"/> 1 to 2 hours <input type="checkbox"/> 2 to 8 hours <input type="checkbox"/> More than 8 hours	<input type="checkbox"/> Yes <input type="checkbox"/> No

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		60-69 70-79 80+		<input type="checkbox"/> Client/patient <input type="checkbox"/> Classmate <input type="checkbox"/> Carer <input type="checkbox"/> Healthcare provider <input type="checkbox"/> Partner/family of someone I live with <input type="checkbox"/> Other	<input type="checkbox"/> Worship/religious <input type="checkbox"/> Other, <i>specify</i> _____	facility (e.g. gym) <input type="checkbox"/> Entertainment facility (e.g. cinema, music/arts venue) <input type="checkbox"/> Public space (e.g. park, beach, sports field) <input type="checkbox"/> Place of worship <input type="checkbox"/> Workplace not otherwise listed (e.g. office, factory) <input type="checkbox"/> Other, <i>specify</i> _____					
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3 [add contact] [complete contact diary]

4 The following questions ask about contacts you were unable to list from yesterday because you had  
5 contact with a large number of people or people you don't know by name.

6 52. Have you included all contacts you had yesterday?

- 7  
8  Yes >> End of survey  
9  No

10 53. If no, what was the setting of these additional contacts?

- 11  Home, estimated number: \_\_ \_\_  
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13  Other private residence, estimated number: \_\_ \_\_  
14  School/university, estimated number: \_\_ \_\_  
15  Childcare, estimated number: \_\_ \_\_  
16  Transport, estimated number: \_\_ \_\_  
17  Health service, estimated number: \_\_ \_\_  
18  Shop / retail, estimated number: \_\_ \_\_  
19  Restaurant / café, estimated number: \_\_ \_\_  
20  Bar / nightclub, estimated number: \_\_ \_\_  
21  Indoor sports / recreational facility (e.g. gym) , estimated number: \_\_ \_\_  
22  Entertainment facility (e.g. cinema, music/arts venue) , estimated number: \_\_ \_\_  
23  Public space (e.g. park, beach, sports field) , estimated number: \_\_ \_\_  
24  Place of worship, estimated number: \_\_ \_\_  
25  Workplace not otherwise listed (e.g. office, factory) , estimated number: \_\_ \_\_  
26  Other, specify \_\_\_\_\_, estimated number: \_\_ \_\_  
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## Supplementary file 3H. COVID-19 event-based diaries

**Information piped from Follow-up Diary [not visible to participants]:**

1. Have you tested positive for COVID-19 in the past 7 days?

- Yes  
 No  
 Indeterminate  
 Haven't received a result yet

2. Have you been told that you are a household/ household-like contact of someone with confirmed COVID-19 in the past 7 days?

*Close contact, now called a household or household-like contact has spent more than four hours with someone who tested positive for COVID-19 inside a house, accommodation or care facility.*

- Yes  
 No

Please complete the following questions based on your feelings and activities in *THE 7 DAYS FOLLOWING YOUR POSITIVE TEST RESULT (ISOLATION PERIOD) OR THE 7 DAYS FOLLOWING BEING NOTIFIED THAT YOU ARE A HOUSEHOLD CONTACT (HOUSEHOLD CONTACT PERIOD)*.

**Mood**

- How often did you experience **negative** emotions in the *7 days of your isolation/household contact period?* (e.g., unpleasant, sad, angry, upset, bored, disappointed, nervous, annoyed):  
 Never    Rarely    Sometimes    Often    All day
- How often did you experience **positive** emotions in the *7 days of your isolation/household contact period?* (e.g., happy, content, cheerful, excited, calm, serene, ecstatic):  
 Never    Rarely    Sometimes    Often    All day

**Health**

- Have you been tested for COVID-19/coronavirus infection in the 7 days of your isolation/household contact period? *Please include Rapid Antigen Tests (RATs), PCR tests, and/or any other kind of COVID-19 test.*  
 Yes >> date of most recent test \_\_/\_\_/\_\_  
 No
- If tested:* What type of test(s) did you undertake in the 7 days of your isolation/household contact period? *Select all that apply*  
 Rapid Antigen Test (RAT)  
 PCR test  
 Other, please specify \_\_\_\_\_
- If tested:* How many times did you test negative on a COVID-19 PCR test in the 7 days of your isolation/household contact period?  
[Enter number from 0 to 50]
- If tested:* How many times did you test negative on a Rapid Antigen Tests (RAT) in the 7 days of your isolation/household contact period?  
[Enter number from 0 to 50]
- If tested:* How many times did you test negative on other COVID-19 tests in the 7 days of your isolation/household contact period?  
[Enter number from 0 to 50]

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8. *If tested*: Why were you last tested for COVID-19 in the 7 days of your isolation/household contact period? *Select all that apply*
- Confirmatory PCR test after a positive Rapid Antigen Test (RAT)
  - I wanted to test before leaving isolation/quarantine after 7 days
  - I wanted to test to see if I was negative and could leave isolation/quarantine before 7 days
  - I had COVID-19-like symptoms
  - Had recently returned from overseas travel
  - Required before returning to work
  - I had to test to attend a healthcare appointment or similar
  - I did test for my own peace of mind (that is, none of the reasons above)
  - Other, *specify* \_\_\_\_\_
9. *If tested*: What information were you given when you got a test? *Select all that apply*
- How to perform a Rapid Antigen Test (RAT)
  - How to report a positive Rapid Antigen Test (RAT) result
  - What to do while waiting for a PCR result
  - How to get your PCR result, including a contact number
  - Requirements for self-isolation
  - Cleaning and hygiene practices
  - When to leave isolation
  - How to notify household and/or household like contacts
  - Testing and/or isolation requirements for household and/or household like contacts
  - Information on whether you should get a confirmatory PCR test
  - Information on repeating Rapid Antigen Tests (RATs)
  - What to do if your symptoms get worse
  - Information on financial support and emergency relief packages
  - Length of the self-isolation period
  - Other
  - I didn't receive any information
10. *If tested*: Have you tested positive for COVID-19 in the 7 days of your isolation/household contact period (*not including any initial positive tests*)?
- Yes
  - No
  - Indeterminate
  - Haven't yet received a result
  - Prefer not to say
- b) *If Yes to testing on a PCR and testing positive*: Did you test positive on a PCR test in the 7 days of your isolation period?
- Yes
  - No
  - Prefer not to say
- c) *If Yes to testing on a RAT and testing positive*: Did you test positive on a Rapid Antigen Test (RAT) in the 7 days of your isolation period?
- Yes
  - No
  - Prefer not to say
- d) *If Yes to testing on another test and testing positive*: Did you test positive on other COVID-19 Test(s) in the 7 days of your isolation period?
- Yes
  - No

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3  Prefer not to say  
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6 11. *If tested and tested positive on RAT:* Did you report your positive Rapid Antigen Test (RAT)  
7 to the state/territory Government?

8  Yes

9  No

10  Prefer not to say

11 12. *If tested positive:* When did you receive your positive COVID-19 test result? \_\_/\_\_/\_\_  
12 If you have tested positive multiple times in the 7 days of your isolation period, select the  
13 date of the first positive result.  
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For peer review only

Pop up information box:

Click here to see the Victorian Government's latest guidelines on COVID-19 symptoms to watch out for: <https://www.coronavirus.vic.gov.au/symptoms-and-risks>

Click here to see the Victorian Government's latest guidelines on isolation and quarantine for people who tested positive to COVID-19 and their household and household-like contacts: <https://www.coronavirus.vic.gov.au/checklist>

13. Did you have any COVID-19-like symptoms in the 7 days of your isolation/household contact period? *Please select **Yes** if you have had **any** COVID-like symptoms, even if you believe these symptoms were not related to a COVID-19 infection.*
- Yes
- No
- Prefer not to say
- a) Did you first experience these symptoms in the 7 days of your isolation/household contact period?
- Yes
- No >> skip to Q.14
- b) If Yes to first experience symptoms in the 7 days: When did your symptoms first start?  
 \_\_ / \_\_ / \_\_
14. *If Yes to symptoms:* Which symptoms did you experience? Select all that apply
- Cough
- Fever
- Shortness of breath
- Sore throat
- Fatigue
- Aches and Pains
- Headache
- Runny or stuffy nose
- Loss of taste / smell
- Nausea and/or vomiting
- Diarrhoea
- Other: *specify* \_\_\_\_\_
15. *If experienced symptoms:* Did you seek medical care or professional health advice for yourself?
- Yes
- No
16. *If Yes to medical care:* What type of medical care or professional health service did you seek? *Select all that apply*
- Went to GP
- Teleconsult with GP
- Pharmacist
- Aboriginal and Torres Strait Islander Health Clinic
- Visited emergency department
- Hospital inpatient
- COVID-19 clinic/drive-through



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- Telephoned coronavirus (COVID-19) hotline
- Other, *please specify* \_\_\_\_\_
17. *If Yes to symptoms and No to testing:* What was your reason for not testing for COVID-19 whilst you had COVID-19-like symptoms? Select all that apply
- No need to retest as I have had a COVID-19 positive result in the last 7 days
- Fear of swab procedure/discomfort
- I didn't want to wait in testing queue
- I left a testing centre because of longqueue/wait time for PCR testing
- I was turned away from the testing centre
- Testing centre too far away
- Worried about being infected at testing centre
- Time constraints (e.g., work/care responsibilities)
- Did not know where to go to have a test
- Unable to find or access Rapid Antigen Tests (RATs)
- Did not want to pay for Rapid Antigen Tests (RATs)
- Could not afford Rapid Antigen Tests (RATs)
- I was **very** sure symptoms were not related to COVID-19 (e.g., pre-existing health conditions)
- I was **pretty** sure symptoms were not related to COVID-19 (e.g., allergies, common cold, side effects of COVID-19 vaccine)
- I was pretty sure symptoms were from tobacco use and not related to COVID-19
- Symptoms were only mild
- Did not think I was eligible for COVID testing
- No private transport to get to testing centre
- Chose to stay home (self-isolate) instead
- Did not want to isolate/quarantine after testing
- Other, *specify* \_\_\_\_\_

### Isolation

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Pop up information box: Click here to see the Victorian Government's latest guidelines on self-isolation and quarantine: <https://www.coronavirus.vic.gov.au/checklist>

The following questions ask about self-isolation or quarantine.

Self-isolation or quarantine applies to people who:

- 1) Have been diagnosed with COVID-19;
  - 2) Are waiting to receive their COVID-19 test result and have symptoms indicative of potential COVID-19;
  - 3) Have been told that they are a household or household-like contact of someone with confirmed COVID-19 but COULD NOT follow the below requirements in the 7-day contact period:
    - a) Continually test negative using a Rapid Antigen Test (RAT) on at least 5 days out of the 7-day period, ensuring the tests are spaced 24 hours apart;
    - b) Wear a mask indoors when outside home;
    - c) Not visit hospitals or care facilities;
    - d) Notify their employer or education facility.;
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18. If case: In the 7 days of your isolation period, did you leave your living premises for any reason?

- 1  
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3  Yes  
4  No  
5  Prefer not to say  
6  
7 b) *If yes:* What reasons did you leave your living premises for? *Select all that apply*  
8  Medical care  
9  Exercise  
10  To get essential food  
11  To get essential medicine  
12  Work with an exemption/permit  
13  Work without an exemption/permit  
14  To pick up/drop off a household member from work, school, childcare,  
15 appointments  
16  To visit family, friends or partner  
17  To visit someone in hospital  
18  Emergency situation  
19  Other, *specify* \_\_\_\_\_  
20  
21 19. If case: Did you isolate after you tested positive for COVID-19?  
22  Yes  
23  No  
24  Prefer not to say  
25  
26 b) *If yes to isolating:* How many days did you isolate for?  
27 [enter number from 1 to 8 or more]  
28 c) *If < 7 days isolation:* For what reasons did you not isolate for 7 days?  
29  My living situation was not suitable for isolation  
30  I was worried for my wellbeing if I continued to isolate  
31  I was worried for my job security/financial circumstances if I continued to isolate  
32  I returned to work with an exemption/permit  
33  I returned to work without an exemption/permit  
34  I had no symptoms so thought I could end isolation early  
35  I tested negative on a Rapid Antigen Test (RAT) so thought it was OK to finish  
36 isolation early  
37  I tested negative on a PCR so thought it was OK to finish isolation early  
38  I needed to leave isolation early to provide care for others  
39  Other, *specify* \_\_\_\_\_  
40  
41 d) *If Yes to isolate:* Where did you self-isolate?  
42  At home  
43  Hotel  
44  Other premises  
45  
46 20. If case: Did someone from the government/DHHS, health service or a community service  
47 contacted you by any means in the 7days of your isolation period(i.e., phone, SMS, door  
48 knock)?  
49  Yes  
50  No  
51  Prefer not to say  
52  
53 21. *If Yes to contacted:* Do you know who contacted you? *Select all that apply*  
54  DHHS/government  
55  Health service (e.g. hospital)  
56  Community service  
57  Other  
58  Don't know  
59  
60 22. *If contacted:* How were you contacted? *Select all that apply*

- Phone call
- SMS
- Door knock
- Email
- Other, specify \_\_\_\_\_

23. *If contacted*: What was the contact in regard to? *Select all that apply*

- COVID-19 test results
- Your health
- Isolation/quarantine
- To notify you that you are a close contact of someone with COVID-19
- Contact tracing—to discuss who you were in close contact with while you were infectious
- To discuss access to essential needs (e.g., food, medicine)
- Related to the health or tests results of your child
- Other, *specify* \_\_\_\_\_

<i>If Case: The following questions ask about your ability to self-contact trace after testing positive to COVID-19</i>	None	Some	Most	All
24. How many of your household / household-like contacts did you inform to get tested and isolate for seven days?	○	○	○	○
25. How many of your social contacts did you inform to monitor for symptoms and get tested if any develop?	○	○	○	○

26. *If household contact:* Were you able to effectively separate from the person(s) with COVID-19 in your household? (e.g., stay in a different room, sleep in a separate bedroom, use a separate bathroom where possible, maintain distance)
- Yes
  - No
  - Don't know
27. *If household contact:* Did you stay home (self-quarantine) after being told you were a household/household-like contact?
- Yes
  - No
  - Prefer not to say
- a) *If yes:* How many days did you stay home (self-quarantine)?  
[Enter number from 1 to 8 or more]
- b) *If yes:* Did you follow the recommendation and test for COVID-19 on Day 1 and 6 after exposure?
- Yes
  - No
  - Prefer not to say
28. *If household contact:* Did you leave home in the 7 days after being told you were a household/household-like contact?
- Yes
  - No
  - Prefer not to say
- a) *If Yes:* Which of the following government recommendations for household/household-like contacts were you able to follow? [Select all that apply]
- Use a Rapid Antigen Test (RAT) and receive a negative result at least 5 of the 7 days
  - Wear a mask indoors when not in your home
  - Avoid sensitive settings (health care facilities)
  - Notify your employer/education place you were a close contact
- b) *If Yes:* How many Rapid Antigen Tests (RATs) did you take during the 7 days after being notified as a household/household-like contact?  
[Enter a number between 0 and 50]
29. *If household contact and answered yes to left home in the 7 days:* Did you do any of the following during the 7 days after being notified as a household/household-like contact? Select all that apply

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- Avoided attending your workplace (i.e., worked from home or took leave)
  - Avoided attending your place of education
  - Wore a mask at all times when outside your home
  - Avoided seeing anyone older/vulnerable
  - Changed plans for gatherings with family and/or friends (i.e., changed to an outdoor venue)
  - Left home when you had symptoms potentially related to COVID-19 but tested negative on a Rapid Antigen Test (RAT)
  - Attended your workplace even if you still had symptoms related to your COVID-19 infection
  - Attended community or religious gatherings as normal
  - Attended large gatherings and events as normal
  - Visited family and friends as normal
  - Took public transport
  - Other, specify \_\_\_\_\_
  - Prefer not to say

## Contacts

*If covid case: We would like to know about every person that you had contact with in the period starting two days before you developed symptoms or two days before you first tested positive, whichever came first until you began isolating.*

*If household/household-like contact: We would like to know about every person that you had contact with in the two days before you became aware that you were a household or household like contact.*

**A contact** is defined as someone you either:

- Had a face-to-face conversation with, OR
- Shared a closed space with (e.g. room, car, bus, lift, train carriage), OR
- Had physical contact with (e.g. handshake, hug, kiss, contact sport).

Consider people you live with, people who visited your home, and people you were in contact with when you left home. Don't forget about the times you used public or shared transport.

*Do not include people that you exclusively contacted by phone/video call.*

30. Did you have contact with anyone during this time?

- Yes  
 No

31. Were any of these contacts someone you know by name or someone who you will regularly see again?

- Yes  
 No

32. Please type in the **full name(s)** (First name Last name, if know. Else, nickname) of **every person** you had contact within this time:

- If you had contact with the same person several times during the assigned time period only record them once, and record the total time you spent with them over the time period. Each person you had contact with during this time should have only one line in the diary.
- List people who you know or are familiar with by First Name and Last Name.
- Type in the contacts full name, if you know it, in the first box and press "enter" or select the create button.
- To select previous contacts or your key people, click on the blue box on the right of the text box and search or click on their name in the list.
- We will then ask a few questions about these contacts in the boxes below.
- If you don't know their age, then please estimate
- If you were in contact with people and you only know their first name or don't know by name but will likely regularly see again, list them using a memorable nickname (e.g. Bob the barista). This will make it easier to list them again in future diaries.

You don't need to list all contacts you had if:

- They are too numerous to list or you don't know them by name (e.g., if you work at a supermarket with many customers)
- You are a health care worker referring to contact with patients

You will be asked to summarise these contacts at the end.

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For peer review only

Full Name (First Name Last Name, if known. Else, nickname)	Age range (years)	Gender	Relationship to you <i>Select one</i>	What was the purpose or circumstances of the contact? <i>Select all that apply</i>	In what setting did you have contact? <i>Select all that apply</i>	How many <b>other people</b> were at this location at the same time as you, <b>excluding</b> you and members of your household? <i>If you had contact with this person at more than one location, answer for the most crowded location you shared with this person yesterday</i>	Did you have contact indoors or outdoors? <i>Select all that apply</i>	How long did you spend with this person <b>in total</b> ?	How much time did you spend within <b>close</b> contact of this person (within 1.5 metres of each other or within a closed space?)	Did you have any physical contact?	<i>If covid case:</i> Did you advise them that they should get tested and isolate for 7-days?
_____	<5 5-9 10-14 15-19 20-29 30-39 40-49 50-59 60-69 70-79 80+	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Non-binary <input type="checkbox"/> Unknown	<input type="checkbox"/> Partner (incl. spouse, boy/girlfriend) <input type="checkbox"/> Parent <input type="checkbox"/> Child <input type="checkbox"/> Grandparent <input type="checkbox"/> Grandchild <input type="checkbox"/> Sibling <input type="checkbox"/> Other family member <input type="checkbox"/> Friend <input type="checkbox"/> Work colleague <input type="checkbox"/> Client/patient <input type="checkbox"/> Classmate <input type="checkbox"/> Carer	<input type="checkbox"/> Live together <input type="checkbox"/> Providing care <input type="checkbox"/> Receiving care <input type="checkbox"/> Buying/receiving food <input type="checkbox"/> Buying/receiving medical supplies <input type="checkbox"/> Non-essential shopping <input type="checkbox"/> Medical <input type="checkbox"/> Work <input type="checkbox"/> Study/education <input type="checkbox"/> Social <input type="checkbox"/> Sport/exercise <input type="checkbox"/> Worship/religious <input type="checkbox"/> Other, <i>specify</i>	<input type="checkbox"/> Home <input type="checkbox"/> Other private residence <input type="checkbox"/> School/university <input type="checkbox"/> Childcare <input type="checkbox"/> Transport <input type="checkbox"/> Health service <input type="checkbox"/> Shop / retail <input type="checkbox"/> Restaurant / café <input type="checkbox"/> Bar / nightclub <input type="checkbox"/> Indoor sports / recreational facility (e.g. gym) <input type="checkbox"/> Entertainment facility (e.g. cinema, music/arts venue)	<input type="checkbox"/> None <input type="checkbox"/> 1-2 <input type="checkbox"/> 3-5 <input type="checkbox"/> 6-10 <input type="checkbox"/> 11-20 <input type="checkbox"/> 21-100 <input type="checkbox"/> More than 100	<input type="checkbox"/> Indoor <input type="checkbox"/> Outdoor or	<input type="checkbox"/> Less than 5 minutes <input type="checkbox"/> 5 to 14 minutes <input type="checkbox"/> 15 to 60 minutes <input type="checkbox"/> 1 to 2 hours <input type="checkbox"/> 2 to 8 hours <input type="checkbox"/> More than 8 hours	<input type="checkbox"/> Less than 5 minutes <input type="checkbox"/> 5 to 14 minutes <input type="checkbox"/> 15 to 60 minutes <input type="checkbox"/> 1 to 2 hours <input type="checkbox"/> 2 to 8 hours <input type="checkbox"/> More than 8 hours	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not necessary (i.e. did not have contact for at least 4 hours indoors)

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			<input type="checkbox"/> Healthcare provider		<input type="checkbox"/> Public space (e.g. park, beach, sports field)							
			<input type="checkbox"/> Partner/family of someone I live with		<input type="checkbox"/> Place of worship							
			<input type="checkbox"/> Other		<input type="checkbox"/> Workplace not otherwise listed (e.g. office, factory)							
					<input type="checkbox"/> Other, <i>specify</i>							

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[add contact] [complete contact diary]

The following questions ask about contacts you were unable to list from **within** the two days before you developed COVID-19 symptoms or were notified as a household/household-like contact until you began isolating because you had contact with a large number of people or people you don't know by name.

33. Have you included all contacts you had?

- Yes >> End of survey  
 No

34. If, no, what was the setting of these additional contacts?

- Home, estimated number: \_\_ \_\_  
 Other private residence, estimated number: \_\_ \_\_  
 School/university, estimated number: \_\_ \_\_  
 Childcare, estimated number: \_\_ \_\_  
 Transport, estimated number: \_\_ \_\_  
 Health service, estimated number: \_\_ \_\_  
 Shop / retail, estimated number: \_\_ \_\_  
 Restaurant / café, estimated number: \_\_ \_\_  
 Bar / nightclub, estimated number: \_\_ \_\_  
 Indoor sports / recreational facility (e.g. gym) , estimated number: \_\_ \_\_  
 Entertainment facility (e.g. cinema, music/arts venue) , estimated number: \_\_ \_\_  
 Public space (e.g. park, beach, sports field) , estimated number: \_\_ \_\_  
 Place of worship, estimated number: \_\_ \_\_  
 Workplace not otherwise listed (e.g. office, factory) , estimated number: \_\_ \_\_  
 Other, *specify* \_\_\_\_\_, estimated number: \_\_ \_\_

35. *If positive case*: How many additional contacts would be considered household or household-like contacts?

- Estimated number: \_\_\_\_\_

36. *If additional household contacts is not zero and positive case*: Of these household or household-like contacts, approximately how many were you able to inform needed to get tested and isolate?

[Numeric 0:200]

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4 **Supplementary file 4A. Snapshot Surveys - Rapid vaccination**  
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7 **1. Thinking generally (your experiences and/or those of the people around you), to what extent do you agree or disagree that the following act as barriers to people getting vaccinated against COVID-19?**  
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	Totally Agree	Somewhat Agree	Neutral	Somewhat Disagree	Totally Disagree	Prefer not to say
10 The time it takes for people to book a vaccination appointment						
11 The time it takes for people to attend a vaccination appointment						
12 Finding a convenient vaccination location close to people's homes or where they work						
13 People being concerned about lost income/money because they need to take time off work to get vaccinated or if they get side effects						
14 People being concerned about losing their job or shifts because of the need to take time off work						
15 Vaccination not being important in people's lives compared to other demands						
16 People believing they are currently at low risk of getting COVID, getting seriously ill from COVID or passing on COVID						
17 People believing there is a lack of available vaccine making it hard to book an appointment						
18 People not being able to access the vaccine they would prefer						
19 People being concerned about vaccine side effects						
20 People being concerned about the COVID vaccine safety						

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3	People can't get information about the vaccine that is easy to understand, plain and clear.					
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7	People can't get information about the vaccine in their own language of choice.					
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10	People believing the COVID vaccines don't work well enough					
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12						
13	People being hesitant or suspicious of any vaccines – not just COVID vaccines					
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18	People being suspicious about why the government wants everyone to get vaccinated					
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23	People don't like the idea of being forced to get a vaccine (i.e. vaccine passports or mandatory vaccination) as it infringes on their personal freedoms and civil liberty.					
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**2. Thinking generally (your experiences and/or those of the people around you), to what extent do you agree or disagree that the following would motivate people to get vaccinated?**

	Totally Agree	Somewhat Agree	Neutral	Somewhat Disagree	Totally Disagree	Prefer not to say
Receiving clear and brief information that getting vaccinated will protect <b>them</b> from getting COVID						
Receiving clear and brief information that getting vaccinated will protect <b>other people</b> from getting COVID						
Receiving clear and brief information that getting vaccinated will protect <b>other people who can't currently get vaccinated</b> from getting COVID (e.g., children aged under 12)						
Receiving information about the benefits of the vaccine from a trusted person (e.g. family member, doctor, local faith leader or community leaders)						
Getting vaccinated means you can safely visit and socialise with family and friends						

1 2 3 4 5 6	Getting vaccinated means you can attend places of worship						
7 8 9 10 11	Getting vaccinated means you can attend special events such as weddings and cultural festivals (e.g. Chinese New Year or Eid al-Adha)						
12 13 14	Getting vaccinated means you can travel between states						
15 16 17	Getting vaccinated means you can travel overseas						
18 19 20 21 22	Getting vaccinated means you can attend sporting events, theatres, concerts and other entertainment venues						
23 24 25 26	Getting vaccinated means you can enter restaurants, pubs and other hospitality venues						
27 28 29 30	Getting vaccinated means you can work if a workplace mandated vaccination						

31 32 33 34		<b>3. Which of the following are the best ways to encourage people to get vaccinated sooner? You can select up to five (5) options.</b>
35 36 37 38 39	Offering vaccinations in workplaces	
40 41 42 43 44	Offering vaccinations through local cultural or community hubs and/or places of worship	
45 46 47 48 49	Offering vaccinations to students and their families through schools	
50 51 52 53 54 55 56 57 58 59 60	Offering vaccinations through local sporting clubs	

1 2 3 4 5 6 7 8	Offering vaccinations at shopping centres and supermarkets	
9 10 11 12 13	Providing access to translators and people who speak community languages at vaccination centres	
14 15 16 17 18	Ensuring people do not need to wait for weeks after booking an appointment to get vaccinated	
19 20 21 22 23 24	Paying people an incentive to get vaccinated	
25 26 27 28 29	Paying compensation to people for lost income because of the need to take time off work to get vaccinated	
30 31 32 33 34 35	Paying people small non-monetary incentives to get vaccinated, such as phone credits or retail vouchers	

**4. Which of the following are the best sources of information to improve people's knowledge about a COVID-19 vaccine and counter misinformation? You can select up to five (5) options.**

36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60	Mainstream media (e.g., radio, print, television in English)	
	Multicultural media in languages other than English	
	Social media (e.g., Facebook, Twitter, SnapChat, Instagram, TikTok, WeChat)	
	Community-based social media groups (e.g. WhatsApp, WeChat, Messenger, Telegram, Signal)	
	Politicians	
	Doctors and other health professionals	
	Local community leaders	
	Local church and faith leaders	
	Entertainment or sporting personalities	
	Friends and family	

**Supplementary file 4B. Snapshot Surveys - Rapid Return to School 2022 Survey****Rapid Return to School 2022 survey****Screening**

With a high number of COVID-19 cases in the community, the Victorian government is interested in knowing what can be done to reduce the spread of infection whilst keeping schools open. We are interested in the experiences and thoughts of all the Optimise participants; however, there are options of 'Not sure' or 'Not applicable' for all questions because we know not all Optimise participants are parents or guardians or may not have much experience with children returning to school.

1. Are you the parent or legal guardian of any of the following? *Select all that apply*  
(For each: enter how many in each category. 1–5)
  - a. Child(ren) aged 0 to 5 years who are not enrolled at preschool/kindergarten/primary school)
  - b. Child(ren) enrolled at preschool/kindergarten
  - c. Child(ren) enrolled at primary school
  - d. Child(ren) enrolled at secondary school
  - e. Child(ren) enrolled at a specialist school
  - f. Child(ren) aged 5 to 23 years and not currently enrolled at primary or secondary school or a specialist school
  - g. Child(ren) older than 23 years
  - h. Child(ren) aged 5–18 who are normally home-schooled outside of COVID-19 restrictions
  - i. I am not a parent or legal guardian
2. Do you work at a kindergarten, primary or secondary school?
  - a. Yes
  - b. No
  - c. Prefer not to say
3. [If 2 == yes] What level of school do you work at?
  - a. Preschool/kindergarten
  - b. Primary school
  - c. Secondary school
  - d. Specialist School
  - e. Other

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6 People with COVID-19 infection can have severe symptoms, mild symptoms, or no symptoms.  
7 Rapid antigen tests can detect COVID-19 in people regardless of whether they have symptoms or not.  
8 The individual can do the test themselves using a nasal/saliva swab (a cotton swab on a long handle  
9 that gets inserted into the nose/mouth) without the need to visit a healthcare facility. The test results  
10 are available in 15 minutes. The test is suitable for all ages.  
11 Regular testing of school students might help detect cases that occur in schools more quickly and may  
12 reduce the transmission of COVID-19 within the school environment. In addition, regular testing  
13 following contact with a child or teacher with COVID-19 infection may enable school students to stay  
14 at school rather than isolate at home.  
15 Governments in Australia and around the world are using rapid antigen tests for testing school  
16 students because they are safe, easy to use, can give quick results and reduce the need to close  
17 schools if there is a single case of COVID-19.  
18 We are interested in your views on this issue.  
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24 Question 1. Biggest concerns

25 **Which of the following were your biggest concerns about schools returning for Term One 2022? Select up to**  
26 **three (3) options.**

27 I did not have any concerns about schools returning for Term One 2022	
28 Frequency of testing being recommended	
29 Children contracting COVID-19	
30 Vaccination levels in the school	
31 Air quality in classrooms	
32 Disruptions to onsite learning (i.e., school closures)	
33 Masks being worn properly in classrooms	
34 Parents not having enough information about the number of students in the 35 school with COVID-19	
36 Parents not having enough information to know what to do if their child is 37 exposed to COVID-19	

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## Question 2. Mask use in schools

Children aged eight years and older are currently required to wear masks of any kind (including cloth) in the classroom, but surgical and N95 masks are recommended to be worn.

**Thinking about mask use by children, how often do you think the following is happening or could happen in the classroom?**

	Always	Most of the time	Sometimes	Never	Don't know/Not sure
Children, aged <b>8 years and older</b> , <u>are</u> wearing any masks (including cloth) properly (over the mouth and nose) while in the classroom					
Children aged <b>8 years and older</b> <u>could</u> wear a surgical or N95 mask properly (over the mouth and nose) while in the classroom					
Children aged <b>5–7 years</b> <u>could</u> wear masks of any kind (including cloth) properly (over the mouth and nose) while in the classroom					



## Question 3. COVID-19 prevention in schools

To what extent do you agree or disagree with the following statements about COVID-19 prevention measures in both primary and secondary schools?						
	Totally Agree	Somewhat Agree	Neutral	Somewhat Disagree	Totally Disagree	Don't know/ Not sure
It is acceptable to ask children aged 8 years and older to wear a surgical or N95 mask in the classroom						
Keeping classrooms at a comfortable temperature would make it easier for children to wear any type of mask in the classroom.						
Keeping classrooms at a comfortable temperature would make it easier for children to wear a surgical or N95 mask in the classroom.						
It is acceptable to send children to primary or secondary school, if there was a confirmed case of COVID-19 detected at the <i>school</i> , <b>but not in the child's class</b>						
It is acceptable to send children to primary or secondary school, if there was a confirmed case of COVID-19 detected <b>in the child's class</b>						

Question 4. Acceptability of testing frequency

Testing in kindergartens and schools is currently voluntary for students aged three and older. Staff and students are recommended to test twice weekly via Rapid Antigen Tests provided for free by the school.

**To what extent do you agree or disagree that the following testing methods are acceptable in primary and secondary schools?**

	Totally Agree	Somewhat Agree	Neutral	Somewhat Disagree	Totally Disagree	Prefer not to say
Recommending students test twice a week on a voluntary basis (the current recommendation)						
Recommending twice weekly testing until at least the end of Term One						
Recommending twice weekly testing until there are fewer than 5,000 cases per day in Victoria						
Recommending twice weekly testing until there are fewer than 2,000 cases per day in Victoria						
Recommending twice weekly testing only when there is an outbreak at the student's school						
Recommending students test only when the student has COVID-19-like symptoms						
<b>Requiring</b> students to test twice a week, with proof of negative test required to attend school						
<b>Requiring</b> students to test if they are in the class of a confirmed positive case						

## Question 5. Acceptability of closing schools due to COVID-19 case numbers

To what extent do you agree that the following responses would be acceptable based on COVID-19 prevalence in the community?						
	Totally Agree	Somewhat Agree	Neutral	Somewhat Disagree	Totally Disagree	Prefer not to say
Closing schools for <b>one week</b> when community cases in Victoria exceed <b>10,000</b> cases per day						
Closing schools for <b>one week</b> when community cases in Victoria exceed <b>20,000</b> cases per day						
Closing schools for <b>two weeks</b> when community cases in Victoria exceed <b>10,000</b> cases per day.						
Closing schools for <b>two weeks</b> when community cases in Victoria exceed <b>20,000</b> cases per day.						
Closing schools for the <b>entire time</b> community cases in Victoria exceed <b>10,000</b> cases per day.						
Closing schools for the <b>entire time</b> community cases in Victoria exceed <b>20,000</b> per day.						
Having students attend school on alternate days to reduce density the <b>entire time</b> cases in Victoria exceed <b>10,000</b> cases per day						
Having students attend school on alternate days to reduce density the <b>entire time</b> cases in Victoria exceed <b>20,000</b> cases per day						
Keep schools open regardless of the community case numbers of COVID-19						

We are interested in the experiences and thoughts of all the Optimise participants. The following questions are specific to people that are parent, guardians, or care givers of children, but you can answer **thinking about the experiences of parents, guardians, or care givers you know** and there are options of 'Not sure' or 'Not applicable' because we know not all Optimise participants are parents or guardians or may not have much experience with children returning to school.

#### Question 6. Household testing

Testing in kindergartens and schools is currently voluntary for students aged three years and older. Staff and students are recommended to test twice weekly via Rapid Antigen Tests provided for free by the school.

**How often is your household likely to participate in twice weekly testing under the following circumstances?**

	Always	Most of the time	Sometimes	Never	Don't know/ Not sure	Not Applicable
If it is <b>recommended</b> by the government, as is currently in practice						
If it is <b>required</b> by the government						
If the government provides <b>nasal</b> swab tests						
If the government provides <b>saliva</b> tests						

## Question 7. Barriers to tests and masks

To what extent do you agree with the following statements about the current implementation of testing in schools?							
	Totally Agree	Somewhat Agree	Neutral	Somewhat Disagree	Totally Disagree	Prefer not to say	Not Applicable
I have had enough Rapid Antigen Tests to do the recommended amount of testing (noting that twice-weekly testing is recommended in mainstream schools and daily testing is recommended in specialist schools)							
I am confident myself or my child are performing the Rapid Antigen Test properly							
I have received adequate information about the COVID-19 testing requirements for school children							
I find the current testing requirements manageable							
One or more of my children find nasal tests too invasive to perform the test							
If my child had a positive Rapid Antigen Test, I would know how to report it to the school.							
If my child had a positive rapid antigen test (RAT) I would report it to the Victorian Government							
COVID-19 prevention measure of recommending or requiring Rapid Antigen tests is inclusive of children with disabilities							
COVID-19 prevention measure of recommending or requiring Rapid Antigen tests is inclusive of children who speak a language other than English at home							

Question 8. Mask use in practice

<b>To what extent do you agree with the following statements about the current implementation of mask use in schools?</b>							
	Totally Agree	Somewhat Agree	Neutral	Somewhat Disagree	Totally Disagree	Prefer not to say	Not Applicable
I have adequate access to surgical/N95 masks for my children to wear at school							
One or more of my children have difficulty wearing masks in the classroom because they are uncomfortable							
One or more of my children have difficulty wearing masks in the classroom because it is too hot							
One or more of my children have difficulty wearing masks in the classroom because they don't fit properly							
One or more of my children have difficulty wearing masks in the classroom due to health reasons (e.g., sensory sensitivities, respiratory conditions)							
COVID-19 prevention measure of requiring mask use is inclusive of children with disabilities							
COVID-19 prevention measure of requiring mask use is inclusive of children who speak a language other than English at home							

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3 Question 9.

4 It is recommended in Victorian schools to make physical changes to ventilation, airflow, classroom  
5 structures and/or operations to reduce the risk COVID-19 transmission.  
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7 **To your knowledge, has the school/s that one of more of your children attend made these**  
8 **changes?**

- 9 a. All of them  
10 b. Most of them  
11 c. Some of them  
12 d. None of them  
13 e. I don't know/not sure  
14 f. Not applicable to me  
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For peer review only

**Supplementary file 4C. Snapshot Surveys – Summer Snapshot Surveys****Summer Snapshot Survey**

With the large increases in the number of people with COVID-19 during the 2021/2022 summer, the Victorian community faced many challenges navigating how to reduce the risk of infection and spread.

We are interested in your individual experiences of the pandemic during January 2022, particularly the challenges of testing, self-isolation, and how you made decisions around attending events or gatherings whilst at the same time trying to reduce your risk of infection. The information we are gathering here is information is crucially important for government to understand and respond to the issues being experienced by Victorians

**1. Did you test positive for COVID-19 during January 2022?**

- a. Yes, on Rapid Antigen Test (RAT) only
- b. Yes, on PCR test only
- c. Yes, on both a Rapid Antigen Test (RAT) and a PCR test
- d. No
- e. Prefer not to say

**2. How many times did you test negative on a COVID-19 PCR test during January 2022?**

[Enter number from 0 to 50]

**3. How many times did you test negative on a Rapid Antigen Tests/s (RAT) during January 2022?**

[Enter number from 0 to 50]

**4. Were you a close (household or household-like) contact of someone who tested positive for COVID-19 during January 2022?**

**Reminder, close contact**, now called a household or household-like contact has spent more than four hours with someone who tested positive for COVID-19 inside a house, accommodation, or care facility.

- a. Yes
- b. No
- c. Prefer not to say



## Testing

<p><b>5. Thinking about all the times you tested for COVID-19 during January 2022 (PCR and/or Rapid Antigen Test [RAT]), what were your reason/s for testing? (select all that apply)</b></p> <p><b>Reminder, close contact</b>, now called a household or household-like contact has spent more than four hours with someone who tested positive for COVID-19 inside a house, accommodation, or care facility.</p>	
I did not get tested during January 2022	
I had COVID-19-like symptoms whilst in isolation because I was a close contact	
I had COVID-19-like symptoms but was not a close contact (so not required to isolate)	
I did not have COVID-19-like symptoms but was in isolation because I was close contact	
I did not have COVID-19-like symptoms but was an "other contact" (e.g., social, workplace, education) and so decided to test	
I did not have COVID-19-like symptoms and was a close contact, but I had an exemption to return to work and was asked to test every day for five days (e.g., essential worker exemption)	
I routinely test as part of my work	
I had to test to attend a healthcare appointment or similar	
I had to test for interstate or overseas travel	

I did test/s for my own peace of mind (that is, none of the reasons above)	
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**Experiences**

<p><b>6. Which of the following experiences did you have during January 2022? (select all that apply)</b></p> <p><b>Reminder</b>, the requirement to submit a positive Rapid Antigen Test (RAT) result began on the 6<sup>th</sup> January 2022.</p>	
I had a positive PCR and/or rapid antigen test (RAT) and was able to personally contact <b>all my close contacts</b> within one to two days to let them know	
I had a positive PCR and/or Rapid Antigen Test (RAT) and was able to personally contact <b>most of my close contacts</b> within one to two days to let them know	
I had a positive PCR and/or Rapid Antigen Test (RAT) and was able to personally contact <b>some of my close contacts</b> within one to two days to let them know	
I had a positive PCR and/or Rapid Antigen Test (RAT) and was <b>not</b> able to personally contact <b>any of my close contacts</b> within one to two days to let them know	
I tested positive on a Rapid Antigen Test (RAT) in Victoria, before 6th January 2022, but was unable to get a confirmatory PCR test	
I tested positive on a Rapid Antigen Test (RAT) in Victoria, after 6th January 2022, and reported it to the Victorian Government	
I tested positive on a Rapid Antigen Test (RAT) in Victoria, after 6th January 2022, and did not report it to the Victorian Government	
I tested positive on a PCR and/or Rapid Antigen Test (RAT) and found it challenging to meet the requirement to isolate for seven days	
I had COVID-19-like symptoms, was unable to get tested for either PCR or Rapid Antigen Test (RAT), but isolated for seven days anyway	

1 2 3 4 I had COVID-19-like symptoms, was unable to get tested for either PCR or Rapid 5 Antigen Test (RAT), and did not isolate 6 7	
8 9 I was a close contact but was unable to get tested by either PCR or Rapid Antigen Test 10 (RAT) 11 12	
13 14 I had COVID-19 like symptoms and/or was a close contact but was delayed in getting a 15 <b>PCR</b> test for more than two days because the testing sites were not open or closed 16 while I was in the queue 17	
18 19 I had COVID-19 like symptoms and/or was a close contact but was delayed in getting 20 tested for more than two days because I could not buy or access a Rapid Antigen Test 21 (RAT) 22	
23 24 None of the above events apply to me 25 26	

7. How often did the following apply to you and/or your dependants during January 2022?						
	Always	Most of the time	Sometimes	Never	Prefer not to say	Not applicable
Tested with a PCR and/or a Rapid Antigen Test (RAT) test when COVID-19-like symptoms occurred						
Had access to a Rapid Antigen Test (RAT) when I needed to test						
Rapid Antigen Tests (RAT) were too expensive for me to buy when I needed them including for family members						

## Risk reduction

8. During January 2022, how often did you do the following?						
	Always	Most of the time	Sometimes	Never	Prefer not to say	Not Applicable
Avoided <b>outdoor</b> gatherings with family and friends due to concerns about COVID-19						
Avoided <b>indoor</b> gatherings with family and friends due to concerns about COVID-19						
Avoided social gatherings with those vulnerable to COVID-19 (e.g., elderly, immunocompromised people)						
Asked others to take a rapid antigen test (RAT) prior to attending a social gathering						
Avoided any crowded place						
Avoided going to bars and restaurants						
Avoided taking public transport						
Wore a mask when required to do so						
Stayed physically distanced at 1.5 m in public areas						
Stayed physically distanced at 1.5m at gatherings with family and friends						

9. During the December-January period, did you do any of the following in the lead up to a significant cultural/family event (Christmas Eve or Day, New Year, Lunar New Year, etc.)?

1 2 3 4 5 6	Took a PCR or Rapid Antigen test (RAT) to check I was negative before attending an event	
7 8 9 10	Strictly isolated for several days before the event to reduce my chance of catching COVID-19 and not being able to attend the event	
11 12 13 14	Reduced social activity for several days before the event to reduce my chance of catching COVID-19 and not being able to attend the event	
15 16 17 18 19	Avoided large crowds for several days before the event to reduce my chance of catching COVID-19 and not being able to attend the event	
20 21 22 23 24	Changed the event plans to reduce the risk of COVID-19, e.g., moved from indoors to outdoor settings or reduced the size of the gathering	
25 26 27 28 29 30	None of the above apply to me	

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**For up to date information on COVID-19 please see the [Department of Health website](#) and/or download the official government “Coronavirus Australia” app. Information is also available in [languages other than English](#).**

**If you are worried that you or someone in your family may have COVID-19, call the 24/7 hotline on 1800 675 398. You can find out about [symptoms](#) and [where to get tested](#) through the DHHS. For emotional support, [Beyond Blue](#) (1800 512 348) and [Lifeline](#) (13 11 14) offer tips, brief counselling and referrals. If you are struggling to cope, you can reach out to a counsellor at the [Suicide Call Back Service](#) on 1300 659 467.**

**For help and support for domestic or family violence and abuse, contact [1800RESPECT](#) on 1800 373 732, [Safe Steps](#) on 1800 015 188 or [inTouch Multicultural Centre against Family Violence](#) on 1800 755 988.**

**If you are experiencing financial hardship during the COVID-19 pandemic, you can apply for [financial assistance](#). You can also visit the [WIRES](#) website or the [Salvation Army](#) to find out about financial resources which may be useful to you.**

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**Supplementary file 4D. Snapshot Surveys – Impact of removing COVID-19 restrictions****Examining the impact of removing COVID-19 public health orders on COVID-19 isolation, quarantine and testing**

In March 2020 the Victorian Government declared a State of Emergency to combat COVID-19 and help to provide the Chief Health Officer with the powers needed to manage the pandemic. The State of Emergency framework was designed to respond to serious but short-term events.

In December 2021 the State of Emergency ended and was replaced by the pandemic management framework. This legislation is specifically designed to assist in the prevention and management of public health risks posed by pandemics (COVID-19 and future pandemics). A pandemic declaration was made by the Premier that came into effect on 15 December 2021 giving the Victorian Minister for Health the authority to make pandemic orders to protect public health for Victoria and combat COVID-19.

Over the course of the COVID-19 pandemic there have been various Government-issued pandemic orders, including requirements to wear a face mask, requirements that people who have COVID-19 to stay at home, limiting the amount of people who can go to a venue, and orders aimed at protecting people most at risk of serious illness, for example, by limiting entry to aged care facilities. Failure or refusal to comply with these orders has the potential to result in penalties (e.g. fines).

Unless extended, the Pandemic Declaration currently in place is due to expire at 11.59pm 12 July 2022. If this was to happen, pandemic orders will no longer be able to be issued by the Minister for Health.

**Screening**

1. Have you ever tested positive for COVID-19?
  - a. Yes
  - b. No
  - c. Prefer not to say
2. Have you received two or more COVID-19 vaccinations?
  - a. Yes
  - b. No
  - c. Prefer not to say
3. Are you currently required to attend your workplace (i.e., cannot work from home)?
  - a. Yes
  - b. No
  - c. I am not currently employed
  - d. Prefer not to say
4. When was your most recent COVID-19 infection?
  - a. I have never been infected
  - b. <3 months ago
  - c. 3–6 months ago
  - d. 6–12 months ago

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e. >12 months ago

For peer review only



The following questions relate to the current pandemic declaration and requirements

Testing positive for COVID

5. Under the current pandemic declaration and requirements (by Public Health Orders), if you tested positive for COVID-19, how likely would you be to do the following in the 7-days after testing positive?

	Very Likely	Likely	Neutral	Unlikely	Very Unlikely	Don't know/ Not sure	Not applicable
Stay home (self-isolate) for 7 days from testing positive regardless of symptoms							
Stay home (self-isolate) only for the days that you have symptoms related to your COVID-19 infection							
Inform your household/household-like contacts of your positive result							
Notify your employer or education facility of your positive test result							
If you were to leave home, wear a face mask indoors when not at your home							
If you were to leave home, avoid specific settings (e.g., hospitals or care facilities)							
If you were to leave home, avoid seeing anyone older/vulnerable							
Attend your workplace even if you still had symptoms related to your COVID-19 infection							
Attend your workplace <b>only</b> if you no longer had symptoms related to your COVID-19 infection							
Leave home to shop for groceries and supplies							

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Visit your family and friends as normal							
Attend large gatherings and events as normal							
Take public transport							

For peer review only

### Household/household-like contacts of person with COVID-19

Currently, household/household-like contacts don't have to quarantine at all during the 7-day period since exposure, and can leave home each day provided they can meet the following requirements:

1. Continually test negative using a rapid antigen test (RAT), on at least 5 days out of the 7-day period (ensuring tests are spaced at least 24 hours apart)
2. Wear a face mask indoors when outside their home
3. Avoid sensitive settings (e.g., do not visit hospitals or care facilities)
4. Notify their employer or education facility

If contacts do not follow these steps, they must quarantine for the 7-day period and are required to get tested on Day 1 and Day 6.

<https://www.health.vic.gov.au/covid-19/quarantine-isolation-and-testing-order>

<https://www.coronavirus.vic.gov.au/checklist-contacts>

**6. Under the current pandemic declaration and requirements (by Public Health Orders), if you were a COVID-19 household/household-like (close) contact, how likely would you be to do the following in the 7-days after being exposed to COVID-19?**

	Very Likely	Likely	Neutral	Unlikely	Very Unlikely	Don't know/ Not sure	Not applicable
Stay home (self-quarantine) for 7-days from exposure to a positive COVID-19 case							
Stay home (self-quarantine) on any days you have symptoms potentially related to COVID-19.							
If you were to leave home, follow <u>all</u> the current requirements described above (rapid antigen test (RAT) negative, wear a face mask, avoid care facilities, notify employer/education place)							
Leave home if you have symptoms potentially related to COVID-19 but test negative on a rapid antigen test (RAT)							
Continue to follow the current requirements and use a rapid antigen test (RAT) for at least 5 of the 7 days from your exposure							
Use a rapid antigen test (RAT) <b>only</b> if you develop symptoms potentially related to COVID-19							
If you were to leave home, wear a face mask indoors when not at your home							

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If you were to leave home, avoid visiting sensitive settings (e.g., hospitals or care facilities)							
If you were to leave home, avoid seeing anyone older/vulnerable							
Notify your employer or education facility you are a household/household-like (close) contact							
Attend your workplace even if you have symptoms potentially related to a COVID-19 infection							
Attend your workplace only if you do not have symptoms potentially related to COVID-19							
Leave home to shop for groceries and supplies							
Visit your family and friends as normal							
Attend large gatherings and events as normal							
Take public transport							

The following questions relate to if the pandemic declaration ceases

**Testing positive for COVID**

**7.If the pandemic declaration ceases and you tested positive for COVID-19 and there are recommendations (but not requirements), how likely would you be to do the following in the 7-days after testing positive?**

	Very Likely	Likely	Neutral	Unlikely	Very Unlikely	Don't know/ Not sure	Not applicable
Stay home (self-isolate) for 7 days from testing positive regardless of symptoms							
Stay home (self-isolate) only for the days that you have symptoms related to your COVID-19 infection							
Inform your household/household-like contacts of your positive result							
Notify your employer or education facility of your positive test result							
If you were to leave home, wear a face mask indoors when not at your home							
If you were to leave home, avoid specific settings (e.g., hospitals or care facilities)							
If you were to leave home, avoid seeing anyone older/vulnerable							
Attend your workplace even if you still had symptoms related to your COVID-19 infection							
Attend your workplace only if you no longer had symptoms related to your COVID-19 infection							
Leave home to shop for groceries and supplies							

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Visit your family and friends as normal							
Attend large gatherings and events as normal							
Take public transport							

For peer review only

### Household/household-like contacts of person with COVID-19

Currently, household/household-like contacts don't have to quarantine at all during the 7-day period since exposure, and can leave home each day provided they can meet the following requirements:

1. Continually test negative using a rapid antigen test (RAT), on at least 5 days out of the 7-day period (ensuring tests are spaced at least 24 hours apart)
2. Wear a face mask indoors when outside their home
3. Avoid sensitive settings (e.g., do not visit hospitals or care facilities)
4. Notify their employer or education facility

If contacts do not follow these steps, they must quarantine for the 7-day period and are required to get tested on Day 1 and Day 6.

<https://www.health.vic.gov.au/covid-19/quarantine-isolation-and-testing-order>

<https://www.coronavirus.vic.gov.au/checklist-contacts>

**8. If the pandemic declaration ceases and you were a COVID-19 household/household-like (close) contact, and there are recommendations (but not requirements), how likely would you be to do the following in the 7-days after being exposed to COVID-19?**

	Very Likely	Likely	Neutral	Unlikely	Very Unlikely	Don't know/ Not sure	Not applicable
Stay home (self-quarantine) for 7-days from exposure to a positive COVID-19 case							
Stay home (self-quarantine) on any days you have symptoms potentially related to COVID-19							
If you were to leave home, follow <u>all</u> the current requirements described above (rapid antigen test (RAT) negative, wear a face mask, avoid care facilities, notify employer/education place)							
Leave home if you have symptoms potentially related to COVID-19 but test negative on a rapid antigen test (RAT)							
Continue to follow the current requirements and use a rapid antigen test (RAT) for at least 5 of the 7 days from your exposure							
Use a rapid antigen test (RAT) <b>only</b> if you develop symptoms potentially related to COVID-19							
If you were to leave home, wear a face mask indoors when not at your home							

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If you were to leave home, avoid visiting sensitive settings (e.g., hospitals or care facilities)							
If you were to leave home, avoid seeing anyone older/vulnerable							
Notify your employer or education facility you are a household/household-like (close) contact							
Attend your workplace even if you have symptoms potentially related to COVID-19							
Attend your workplace only if you do not have symptoms potentially related to COVID-19							
Leave home to shop for groceries and supplies							
Visit your family and friends as normal							
Attend large gatherings and events as normal							
Take public transport							



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3 **These are general question about your views on preventing COVID-19 transmission**  
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5 **9. To what extent do you agree or disagree with the following statements about potential COVID-19 prevention**  
6 **measures for people who test positive to COVID-19 and household/household-like contacts**  
7

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	Totally Agree	Somewhat Agree	Neutral	Somewhat Disagree	Totally Disagree	Don't know/ Not sure
It would be acceptable to continue <b>requiring</b> all people who test positive for COVID-19 to isolate for 7 days						
It would be acceptable to only <b>recommend</b> that all people who test positive for COVID-19 to isolate for 7 days						
It would be acceptable to <b>require</b> all people who are household or household-like contacts to leave home in their 7-day contact period <b>only</b> if they comply with advice on testing, masks, and settings to avoid etc.						
It would be acceptable to <b>only recommend</b> that all people who are household or household-like contacts to leave home in their 7-day contact period <b>only</b> if they follow advice on testing, masks, and settings to avoid etc.						
It would be acceptable to provide <b>no advice</b> to people who are household or household-like contacts and allow them to make their own choices about quarantine, testing, attending work etc.						
It would be acceptable for different work/education places to decide whether they allow people who tests positive to COVID-19 to attend the workplace						
It would be acceptable to <b>require</b> health and aged care workers who test positive for COVID-19 to not attend work for the 7-days after their test positive						

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55 **These questions are about the need for isolation and quarantine if there was COVID-19 in the**  
56 **community**  
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**10. To what extent do you agree or disagree to the following statements on isolation and quarantining, based on COVID-19 infections in the community**

	Totally Agree	Somewhat Agree	Neutral	Somewhat Disagree	Totally Disagree	Don't know/ Not sure
If COVID-19 cases in Victoria are consistently >20,000 per day, people positive for COVID-19 should be <b>required</b> to isolate for at least 7 days						
If COVID-19 cases in Victoria are consistently >20,000 per day, household/household-like contacts for COVID-19 should be <b>required</b> to quarantine for at least 7 days						
If hospital admissions for COVID-19 in Victoria consistently increased, people positive for COVID-19 should be <b>required</b> to isolate for at least 7 days						
If hospital admissions for COVID-19 in Victoria consistently increased, household/household-like contacts for COVID-19 should be <b>required</b> to quarantine for at least 7 days						
Regardless of cases or hospitalisation numbers, there should only be <b>recommendations</b> on isolation for people who test positive for COVID-19						
Regardless of cases or hospitalisation numbers, there should only be <b>recommendations</b> on quarantine for people who are household/household-like contacts						

**Supplementary file 4E. Snapshot Surveys – Long COVID Snapshot Survey**

Some people who have been infected with COVID-19 can experience long-term effects from their infection, known as long COVID or post-COVID conditions. Long COVID can include a wide range of new, returning, or ongoing health problems and these conditions can last weeks, months or years. We are interested in your experiences of and concerns about long COVID. We acknowledge this is only a short survey (to not take up too much of your time) and appreciate that this can only capture some of what can be a complex and challenging situation for people.

**1. How many times have you had COVID-19 since the start of the pandemic (December 2019)?**

(Had COVID-19 means tested positive by PCR or rapid antigen test (RAT) or both, with at least one month since last testing positive)

- a. I have never had COVID-19
- b. Once
- c. Twice
- d. Three times
- e. Four times
- f. Five or more times
- g. Prefer not to say

**2. When was your most recent COVID-19 infection?**

- a. I have never been infected with COVID-19
- b. Less than 1 month ago
- c. One to three months ago
- d. Four to twelve months ago
- e. More than 12 months ago
- f. Prefer not to say

**3. How many of your family or friends have experienced long COVID?**

- a. None
- b. Fewer than five
- c. Five to ten
- d. More than ten
- e. Prefer not to say

**4. How many of your family or friends have required your support to help them manage their long COVID?**

- a. None
- b. Fewer than five
- c. Five to ten
- d. More than ten
- e. Prefer not to say

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5. To what extent do you agree or disagree with the following statements about long-COVID?

	Totally Agree	Somewhat Agree	Neutral	Somewhat Disagree	Totally Disagree	Don't know/Not sure
The risk of <b>long COVID</b> motivates me to wear a face mask outside my home						
The risk of <b>long COVID</b> motivates me to maintain physical distancing						
The risk of <b>long COVID</b> motivates me to get vaccinated/stay up-to-date with vaccines						
The risk of <b>long COVID</b> motivates me to work and/or study from home as much as possible						
The risk of <b>long COVID</b> motivates me to avoid attending small social gatherings (i.e., family dinners, holiday parties)						
The risk of <b>long COVID</b> motivates me to avoid large social gatherings (i.e., concerts, large weddings)						
To prevent <b>long COVID</b> it would be acceptable for the Victorian Government to <b>require</b> social distancing in indoor public settings						
To prevent <b>long COVID</b> it would be acceptable for the Victorian Government to <b>require</b> wearing a face mask outside of your own home						
I know where to find information about <b>long COVID</b>						
I know where I could seek health care if I experienced <b>long COVID</b>						
The government is providing enough information about <b>long COVID</b> and the risks associated with having <b>long COVID</b>						

**6. What are your three biggest concerns about long COVID?  
(Select up to three)**

I do not have any concerns about long COVID

I will develop long COVID

I will get repeat COVID-19 infections and develop long COVID because of reinfections

Someone in my family will get long COVID

A vulnerable person I know will get long COVID

Long COVID could affect my physical health

Long COVID could affect my mental health

Long COVID could affect my ability to work and my finances

Long COVID could affect my ability to take care of my family

Healthcare professionals don't know enough about long COVID

Long COVID will result in significant social, economic, and health system burden into the future.

The following section asks some additional questions about personal experiences of long COVID. The additional questions will be asked only if you have/have had long COVID, and will take approximately 10 minutes to complete.

### 7. Have you ever experienced long COVID?

(Long COVID is experiencing new health problems that have persisted for more than one month after being infected with COVID-19)

- a. No >>END
- b. Yes, but I would like to end the survey now >>END
- c. Yes, and I have been diagnosed with long COVID by a health professional
- d. Yes, I think I have/have had long COVID but I have not been diagnosed by a health professional
- e. Prefer not to say >>END

### 8. *If Yes (7c) or Yes (7d):* How many COVID-19 infections did you have prior to developing long COVID (including the infection that you suspect led to long COVID)?

- a. One
- b. Two
- c. Three
- d. Four
- e. Five or more
- f. Prefer not to say

### 9. *If Yes (7c) or Yes (7d):* How many COVID-19 vaccinations had you had prior to developing long COVID?

- a. None
- b. One
- c. Two
- d. Three
- e. Four
- f. Five
- g. Prefer not to say

### 10. *If Yes (7c) or Yes (7d):* How many times have you been reinfected with COVID-19 since you developed long COVID?

- a. None
- b. One
- c. Two
- d. Three
- e. Four
- f. Five or more times
- g. I've stopped testing
- h. Prefer not to say

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3 **11. If Yes (7c) or Yes (7d): How many COVID-19 vaccinations have you had since you developed long**  
4 **COVID?**  
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- 6 a. None
- 7 b. One
- 8 c. Two
- 9 d. Three
- 10 e. Four
- 11 f. Five or more
- 12 g. Prefer not to say
- 13
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16 **12. If Yes (7c) or Yes (7d): At their worst, how would you describe the severity of your long COVID**  
17 **symptoms?**  
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- 19 f. Mild
- 20 g. Moderate
- 21 h. Severe
- 22 i. Prefer not to say
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**13. If Yes (7c) or Yes (7d): Which symptoms did you experience or are you continuing to experience? (Select all that apply)**

Please refer to symptoms which were new or have worsened since the COVID-19 infection

Fatigue/extreme tiredness

Cough

Shortness of breath or difficulty breathing

Chest pains

Heart palpitations

Problems with memory or concentration/brain fog

Feelings of pins-and-needles

Sleep difficulties

Muscle and joint pain

Changes to smell or taste

Dizziness when you stand up (light-headedness)

Headaches

Stomach pain

Diarrhea

Hair loss

Rash

Not enough energy to exercise

Changes in menstrual cycles

Depression

Anxiety

Prefer not to say



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4 **14. If Yes (7c) or Yes (7d): Where have you accessed information and/or support for your**  
5 **long COVID?**  
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8 **(Select all that apply)**  
9

10 Have not sought any information or help

11 General Practitioner (GP)

12 Specialist doctor

13 Post COVID clinic

14 Alternative health care provider (e.g., naturopath, chiropractor etc)

15 Mental health professional/practitioner

16 Department of Health: Coronavirus website or hotline

17 Internet search

18 Family

19 Friends

20 Religious community/groups

21 Co-workers

22 Social media (e.g., long COVID Facebook groups)

23 Website or direct contact with a research organisation

24 Prefer not to say  
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4	<b>15. If Yes (7c) or Yes (7d): What experiences have you had since developing long COVID</b>
5	<b>(Select all that apply)</b>
6	I have not been able to work/study as much as I want to
7	I have had to change jobs
8	I have lost income
9	I have been unable to care for people that depend on me
10	I have socialised less
11	I have exercised less
12	I take extra precautions to avoid reinfection
13	My quality of life has declined
14	Changes to my mood
15	Changes to my physical appearance
16	Changes in my personal relationships
17	I have had difficulty accessing specialist healthcare for long COVID
18	I have had difficulty finding information about long COVID that I understand
19	I have had difficulty accessing income support due to long COVID
20	I have not had any of the above experiences since developing long COVID
21	Prefer not to say
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37 **For up to date information on COVID-19 please see the Australian Government [Department of Health and Aged Care website](#) and/or download the official government “[Coronavirus Australia](#)” app. Information is also available in [languages other than English](#).**

38 **For further information about long COVID please see the [World Health Organization’s website](#). If you are worried that you or someone in your family may have COVID-19, call the 24/7 hotline on 1800 675 398. You can find out about [symptoms](#) and [where to get tested](#) through [Coronavirus \(COVID-19\) Victoria](#).**

39 **For emotional support, [Beyond Blue](#) (1800 512 348) and [Lifeline](#) (13 11 14) offer tips, brief counselling and referrals. If you are struggling to cope, you can reach out to a counsellor at the [Suicide Call Back Service](#) on 1300 659 467.**

40 **For help and support for domestic or family violence and abuse, contact [1800RESPECT](#) on 1800 373 732, [Safe Steps](#) on 1800 015 188 or [inTouch Multicultural Centre against Family Violence](#) on 1800 755 988.**

41 **If you are experiencing financial hardship during the COVID-19 pandemic, you can apply for [financial assistance](#). You can also visit the [WIRES](#) website or the [Salvation Army](#) to find out about financial resources which may be useful to you**

#### Supplementary file 4F. Snapshot Surveys – Long COVID cohort follow-up snapshot survey

Thank you for your participation in the Optimise Study. You recently informed us that you had been diagnosed with, or suspected you had long COVID (Long COVID is experiencing new health problems that have persisted for more than one month after being infected with COVID-19). We would like to ask you some further questions about your experience of long COVID. To thank you for completing this survey you will be reimbursed \$35.

##### Life before long COVID

1. **We would like to know when you developed long COVID. Thinking about the COVID-19 infection that you suspect led to long COVID, what was the first date you tested positive for COVID-19 for that infection?**

(If your infection was not confirmed by a test, please give the date of onset of COVID-19 symptoms.)

[day/month/year chooser from 01 December 2019 to 31 August 2022]

2. **How many times had you been infected with COVID-19 prior to developing long COVID (including the infection that you suspect led to long COVID)?**
  - a. Once – I developed long COVID from my first COVID-19 infection
  - b. Twice
  - c. Three times
  - d. Four times
  - e. Five or more times
3. **How many COVID-19 vaccinations had you had prior to developing long COVID?**
  - a. None
  - b. One
  - c. Two
  - d. Three
  - e. Four
  - f. Five or more

##### Experiences of long COVID

4. **Do you still have long COVID?**
  - a. Yes, I am still experiencing symptoms >> go to 6
  - b. No, all my symptoms have completely resolved >> go to 5
  - c. Prefer not to say >> go to 6
5. **[If 4b] How long do you think you had long COVID for? Please give the number of months from the date given in question 1.**

[Numeric answer] months  
[minimum 1, maximum 36]

##### Effects of long COVID on life

6. **How many days per week did you spend exercising for 30 minutes or more during the past week?**

[numeric answer between 0 and 7, or 9999 for prefer not to say]
7. **Thinking about how you have been feeling in the past week, in general, would you say your health is:**
  - a. Excellent
  - b. Very good
  - c. Good

- d. Fair
- e. Poor

8. Compared to before you developed long COVID, how would you rate your health in general now?

- a) Much better now than before long COVID
- b) Somewhat better now than before long COVID
- c) About the same
- d) Somewhat worse now than before long COVID
- e) Much worse now than before long COVID

During the past four weeks, as a result of your long COVID, have you had any of the following problems with your work or other regular daily activities?

- 9. Cut down the **amount of time** you spent on work or other activities
  - a. Yes
  - b. No
- 10. **Accomplished less** than you would like
  - a. Yes
  - b. No
- 11. Were limited in the **kind** of work or other activities
  - a. Yes
  - b. No
- 12. Had difficulty performing the work or other activities (for example, it took extra effort)
  - a. Yes
  - b. No

For up to date information on COVID-19 please see the Australian Government [Department of Health and Aged Care website](#) and/or download the official government "[Coronavirus Australia](#)" app. Information is also available in [languages other than English](#).

For further information about long COVID please see the [World Health Organization's website](#).

If you are worried that you are someone in your family may have COVID-19, call the 24/7 hotline on 1800 675 398. You can find out about [symptoms](#) and [where to get tested](#) through Coronavirus (COVID-19) Victoria.

For emotional support, [Beyond Blue](#) (1800 512 348) and [Lifeline](#) (13 11 14) offer tips, brief counselling and referrals. If you are struggling to cope, you can reach out to a counsellor at the [Suicide Call Back Service](#) on 1300 659 467.

For help and support for domestic or family violence and abuse, contact [1800RESPECT](#) on 1800 373 732, [Safe Steps](#) on 1800 015 188 or [inTouch Multicultural Centre against Family Violence](#) on 1800 755 988.

If you are experiencing financial hardship during the COVID-19 pandemic, you can apply for [financial assistance](#). You can also visit the [WIRES](#) website or the [Salvation Army](#) to find out about financial resources which may be useful to you

## Supplementary file 5A. Qualitative interview guide 1

### Qualitative Interview Guide

*This semi-structured interview guide is designed to explore and understand the participant's experiences during the COVID19 pandemic. The guide aims to cover the following major domains:*

- *Impacts and changes to their usual life and networks*
- *Positives and challenges experienced by these changes*
- *Changes to attitudes, beliefs, and opinions throughout the fluctuating pandemic response*
- *Access to necessities such as income, social connection and support*
- *An understanding of how things could be improved for the future*

*As each participant's experience is both unique and complex and situated within an ever-changing socio-political context and response, the semi-structured nature of this guide will allow researchers to adapt and evolve in real-time alongside the current context. We anticipate that the interview guide will need to expand and evolve to cover context that will be relevant at the time of participant's interviews. The above points have been listed as the most applicable domains coverage for the interview with the participant cohort.*

*We do not plan to submit amendments to the format of the interview guide prior to future adaptive changes inclusive of these domains. If there are new identified domains during the study that the investigators do not deem fit within the submitted interview guide an amendment will be submitted at that time.*

#### **Introduction**

- Your name, background, where you're interviewing from (i.e. private location), confirm that the participant is happy to conduct the interview from where they're located.

Are you happy to conduct the interview from where you're sitting right now? Let me know if this changes at any time during the interview.

#### **Prior to commencing recording**

Confirm participant has received and read the Participant Information and Consent Form (PICF), ask if they have any questions about the study or the list of support services and refresh on the purpose of the study.

Explain risk management strategies as outlined in PICF:

I would like to remind you that:

- You are free to not answer any question you don't feel comfortable answering
- You are free to stop participating if you become upset or distressed
- I will be available to talk after the interview if you have any concerns
- I can provide you advice and information about services if you would like any support
- Everything we talk about in this interview is confidential and no identifiable information about you is passed onto the government. We're interested in understanding your experiences and how we can improve the COVID-19 experience for yourself and the community

Thank you for completing our other surveys so far, we've got some of that information so hopefully you won't be repeating yourself.

Any questions so far?

The researchers supervising this work are Professor Margaret Hellard and Professor Lisa Gibbs, the information sheet that we had sent you have their details on page 4 if you have any questions following today's interview that you would like to like to discuss, they would be happy to speak with you.

- Are you Ok for me to start recording? (is yes, start, if no discuss and/or terminate)
- Are you Ok for me to begin the interview? (is yes, start, if no discuss and/or terminate)

### Section 1 - Lived experience of COVID19 pandemic

#### 1. To start, can you tell me a bit about yourself?

Probe for:

- Living situation – who, where, what, when, why, how long
- Community
- Family/ Friends
- Employment/Income
- Information access
- People who depend on you – physically, emotionally, socially, financially
- People you depend on - physically, emotionally, socially, financially
- Health (including chronic illness, mental health, pregnancy)

#### 2. What has been your experience of the COVID19 pandemic so far?

a. Prompt: how has COVID19 affected you?

#### 3. Can you talk me through a typical day for you right now?

a. Prompt: weekday vs weekend

#### 4. In what ways, if any, has COVID19 changed things for you/since we last spoke?

- Routines and habits
- Positives, challenges, goals, aspirations
- Thoughts, feelings, actions, conversations
- Things that have helped to improve circumstances/make things more manageable

#### 5. In practice how have you found following the restrictions so far?

Probe for;

- Why
- Changes over time
- Responsibility for self and others (necessities, healthy behaviours, family/friends, work, general public)

#### 6. Did the restrictions create any specific issues for you or those around you? If so, can you describe?

a. Prompt: household and other relationships

b. Have there been any changes to your personal safety during COVID-19?

- 1  
2  
3 7. Has there been anything surprising or unexpected that has come out of the pandemic for  
4 you?  
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7

## 8 Section 2 - COVID19 Health Literacy & Risk Perception

- 9 8. Do you remember when you first heard about COVID19? What did you think at that time?

11 Probe for:

- 12 • Information access, engagement, quality
- 13 • Impact of change on attitudes and behaviours

- 16 9. How do you think and feel about COVID19 the disease now?

18 Probe for:

- 19 • Perceptions of personal and community risk
- 20 • Knowledge of transmission
- 21 • Knowledge and perceptions of public health response/guidelines
- 22 • Testing
- 23 • Impact on attitudes (fear, safety)
- 24 • Impact on behaviour (relating to themselves and to others)
- 25 • Impact on health and wellbeing

## 28 Section 3 - Support

- 30  
31  
32 10. You have shared a lot about your experience with me today. Looking back on your COVID19  
33 experience so far, if you could change anything, what would you have done differently?  
34

- 35 11. Can you think of three things that would have helped you to manage things better during  
36 the pandemic restrictions? (Why and how do you think these could have been different?)  
37

38 Probe for;

- 39 • Concerns, barriers, enablers
- 40 • Information, Structures, Services, Policy

- 42 12. If you were going to give advice to a friend about how best to manage these experiences  
43 what would you say to them?  
44

- 45 13. Is there anything else you would like to say about your experiences of COVID-19?  
46

- 47 14. What do you think will happen in the next few years with COVID-19?  
48

- 49 a. If a vaccine is made available, would you get it immediately? (why/why not)  
50
  - 51 i. Are there any circumstances that would change your mind? (i.e. legislation,  
52 education, views of family/friends, more time, higher number of cases?)  
53
- 54 b. As above for dependents
- 55 c. How do you view a COVID19 vaccine compared to other vaccines, for example, the  
56 flu shot or measles mumps rubella (MMR) vaccine?  
57

- 58 15. What are your plans for the rest of the day/week/next few months?  
59  
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3 a. (Use judgement as to suitability of this question)  
4  
5

6 **End recording**  
7

8 Thank you for your time and for providing us with this valued information.  
9

10 We would like to give you a \$50 voucher to thank you for your time. We will send it to the email  
11 address that we have on file. We will also send you a list of support services that we are sending  
12 to everyone who participates in the research - just in case they are needed.  
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For peer review only



## Supplementary file 5B. Qualitative focus group discussion guide

### COVID-19 vaccination and testing

#### Focus Group Discussion guide

##### Overview

*This Focus Group Discussion (FGD) guide is designed to explore and understand the group's experiences of COVID-19 vaccination and testing during the COVID-19 pandemic. The guide aims to cover the following major domains:*

- *Understanding of COVID-19 disease, vaccination and public health measures*
- *Attitudes, beliefs and opinions towards COVID-19 testing after vaccination*
- *Barriers and enablers to accessing information, services and support*
- *Impacts and changes to their usual life and networks*
- *An understanding of how things could be improved for the future*

***NB. The specific questions listed in this discussion guide are potential prompts only, to stimulate discussion in each domain if needed.***

<b>Setting</b>		<b>Date</b>	
<b>No. of participants</b>		<b>Start time</b>	
<b>Facilitator</b>		<b>End time</b>	
<b>Assistant</b>			

##### Introduction

- Participant's and facilitator's names
- Purpose of The Optimise Study and the FGD
- Confirmation of receipt and understanding of the Participant Information and Consent Form (PICF) and consent to participate. Opportunity for questions or concerns to be raised.
- Explain risk management strategies as outlined in PICF:

I would like to remind everyone that:

- You are free to not answer any question you don't feel comfortable answering
- You are free to stop participating at any time, especially if you feel upset
- I will be available to talk after the interview if you have any concerns and I can provide you advice and information about services if you would like any support
- Everything we talk about in this interview is confidential and no identifiable information about you is passed onto the government. I encourage you all to respect the privacy and anonymity of the other participants here today including after leaving the discussion here today, this includes not revealing the identities of other participants nor indicating who made specific comments during the discussion.
- Are you OK for me to start the discussion and the recording? (is yes, start, if no discuss and/or terminate)

**START RECORDING**

What has been your experience of the COVID-19 vaccination and rollout so far?

**Understanding of the vaccine and testing requirements**

What has been most helpful to you in understanding what is happening with this pandemic?

What's your understanding of how the vaccine works inside the body?

What's your understanding of how the vaccine works to reduce the spread of COVID-19 in the community?

- a) E.g. reducing severity of disease, hospitalisations and deaths; herd immunity
- b) Effectiveness of vaccines on new strains of the virus

Why is it important that people get tested for COVID-19? When should they be getting tested?

What contribution does waste water testing make to public health measures?

What are your thoughts about workplaces that require staff to get vaccinated?

**Barriers and enablers to testing after receiving the vaccine**

After a person has been vaccinated, what are your thoughts about whether they need to keep getting tested for COVID-19? When should they be getting tested? Are there circumstances where this wouldn't apply or may be less important?

What are some motivations behind getting tested after someone's been vaccinated?

What are some of the barriers to getting tested after someone's been vaccinated?

Can you think of any circumstances that would change whether someone gets tested? (i.e. location of testing centres, long lines at testing centres, higher number of cases, workplace rules, views of family/friends)

Do you feel differently about certain groups like children or the elderly getting tested after being vaccinated?

**Information and access**

Where do you like to receive information about the vaccine and testing requirements?

E.g. ABC News, Vic DoH website, Facebook, friends, colleagues

What do you look for when seeking information about testing requirements?

E.g. signs of credible and reliable information

Do you know how and where you can access vaccinations and testing?

Is there anything more you'd like to know about testing or vaccination? How would you like to receive this information?

### Concerns and support

Is there anything that concerns you about what happens after receiving the vaccine?

What could be done to alleviate some of these concerns?

For those who might be less likely to be tested after receiving the vaccine, what do you think could be done to support them and increase the likelihood of getting tested?

Is there anything that could improve the current systems for testing and vaccinations?

E.g. Information, support, services, improved accessibility, shorter wait times

### The future

What do you think will happen in the next few years in relation to COVID-19 and public health measures?

We're about at the end of the discussion, thank you for sharing so much about your experience with the group today. Was there anything else anyone would like to share before we finish?

### END RECORDING

Thank you for your time and for providing us with this valued information.

We would like to give each of you a \$50 voucher to thank you for your time. We will send it to the email address that we have on file, you should receive this within the next month.

## Supplementary file 5C. Qualitative focus group discussion guide

### Long COVID

#### Focus Group Discussion guide

##### Overview

*This Focus Group Discussion (FGD) guide is designed to explore and understand the group's experiences of long COVID-19. The guide aims to cover the following major domains:*

- *Understanding of long COVID information and support services*
- *Attitudes, beliefs and experiences of long COVID.*
- *Barriers and enablers to accessing information, services and support for people experiencing long COVID.*
- *Impacts and changes to usual life and networks caused by long COVID.*
- *An understanding of how things could be improved for the future for people who experience long COVID.*

***NB. The specific questions listed in this discussion guide are potential prompts only, to stimulate discussion in each domain if needed.***

<b>Setting</b>		<b>Date</b>	
<b>No. of participants</b>		<b>Start time</b>	
<b>Facilitator</b>		<b>End time</b>	
<b>Assistant</b>			

##### Introduction

- Participant's and facilitator's names
- Purpose of The Optimise Study and the FGD
- Confirmation of receipt and understanding of the Participant Information and Consent Form (PICF) and consent to participate. Opportunity for questions or concerns to be raised.
- Explain risk management strategies as outlined in PICF:

**I would like to remind everyone that:**

- You are free to not answer any question you don't feel comfortable answering
- You are free to stop participating at any time, especially if you feel upset
- I will be available to talk after the interview if you have any concerns and I can provide you advice and information about services if you would like any support
- Everything we talk about in this interview is confidential and no identifiable information about you is passed onto the government. I encourage you all to respect the privacy and anonymity of the other participants here today including after leaving the discussion here today, this includes not revealing the identities of other participants nor indicating who made specific comments during the discussion.

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- Are you OK for me to start the discussion and the recording? (is yes, start, if no discuss and/or terminate)
  - Talking about your experiences of long COVID can trigger intense emotions. If you experience distress or discomfort from participating in this focus group, you can take a break any time that you want. If you need more support, I will stay online after the session to see if anyone would like to have a chat, we also provided information at the end of your participant information letter about relevant support services.

For peer review only

**START RECORDING****Understanding of long COVID**

What has been most helpful to you in understanding what is long COVID?

What's your understanding of how long COVID affects your body?

Do you think people with long COVID should still get tested if they are a close contact or have COVID-related symptoms? When should they be getting tested? Are there circumstances where this wouldn't apply or may be less important?

Should people with long COVID still get the flu vaccine?

What are your thoughts about how workplaces should support employees who are experiencing long COVID?

**Experiences with long COVID**

What has been your experience of long COVID so far?

How did you know you had long COVID?

**Barriers and enablers to getting support for long COVID**

What has worked for you in terms of getting support for long COVID?

What barriers have you encountered in terms of getting support for long COVID?

**Information and access**

Do you know how and where you can access information about long COVID?

Is there anything more you'd like to know about long COVID? How would you like to receive this information?

Where do you like to receive information about long COVID?

E.g. ABC News, Vic DoH website, GP, social media, friends, colleagues.

What do you look for when seeking information about long COVID?

E.g. signs of credible and reliable information

**Concerns and support**

Is there anything that concerns you about what happens when you have long COVID?

What could be done to alleviate some of these concerns?

For those who have long COVID and might be less likely to get support, what do you think could be done to support them and increase the likelihood of getting the help they need?

Is there anything that could improve the current systems for supporting people with long COVID?

1  
2  
3 E.g. Information, support, services, improved accessibility, shorter wait times  
4

#### 5 **The future**

6 What do you think will happen in the next few years in relation to long COVID and public health  
7 measures?  
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14 We're about at the end of the discussion, thank you for sharing so much about your experience with  
15 the group today. Was there anything else anyone would like to share before we finish?  
16

17  
18 **END RECORDING**  
19

20 Thank you for your time and for providing us with this valued information.  
21

22  
23 I will remain in the Zoom meeting in case someone would like to have a chat. We can also provide  
24 you information about where to get additional support if you feel that you need it.  
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26 We would like to give each of you a \$50 voucher to thank you for your time. We will send it to the  
27 email address that we have on file, you should receive this within the next month.  
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## Supplementary file 6. CEG Questions guide

Draft of the results for this month's Optimise Study report

Each month, the Optimise Study selects a specific topic emerging from the study data and prepares a report for

the government (and other stakeholders). You can view previous reports here:

<https://optimisecovid.com.au/study-findings/>

The topic of this month's report is income and finances. We have attached a draft of this report with this pre-reading pack. Please use the report to prompt your views about the topic in the community you are representing.

During the meeting, we will be asking you the following questions:

1. What are your reflections about any aspect of the Optimise Study's findings on income and finances?

You may like to mention:

- if any of the findings were particularly applicable to the community you represent
- if any of the findings surprised you
- any other reflections

2. How have members of your community been impacted by changes to income and/or finances?

You may like to mention:

- Employment: changes in employment status, changes in job stability, changes in work environment (e.g. working from home, home schooling), other employment issues
- Income: accessing JobSeeker/JobKeeper/other income support, relying on family and friends for income support, other income issues
- Groups in your community who are particularly at-risk of negative impacts to employment and income

3. How secure do members of your community feel their income and finances are? What would help to increase feelings of security?

After the CEG meeting, we will prepare a report for the Executive Group of the Optimise Study which will consider how best to incorporate your views into the final month's report. The report will then be sent to government and other stakeholders.



# Reporting checklist for protocol of a clinical trial.

Based on the SPIRIT guidelines.

## Instructions to authors

Complete this checklist by entering the page numbers from your manuscript where readers will find each of the items listed below.

Your article may not currently address all the items on the checklist. Please modify your text to include the missing information. If you are certain that an item does not apply, please write "n/a" and provide a short explanation.

Upload your completed checklist as an extra file when you submit to a journal.

In your methods section, say that you used the SPIRIT reporting guidelines, and cite them as:

Chan A-W, Tetzlaff JM, Gøtzsche PC, Altman DG, Mann H, Berlin J, Dickersin K, Hróbjartsson A, Schulz KF, Parulekar WR, Krleža-Jerić K, Laupacis A, Moher D. SPIRIT 2013 Explanation and Elaboration: Guidance for protocols of clinical trials. *BMJ*. 2013;346:e7586

	Reporting Item	Page Number
<b>Administrative information</b>		
Title	<a href="#">#1</a> Descriptive title identifying the study design, population, interventions, and, if applicable, trial acronym	1
Trial registration	<a href="#">#2a</a> Trial identifier and registry name. If not yet registered, name of intended registry	3
Trial registration: data set	<a href="#">#2b</a> All items from the World Health Organization Trial Registration Data Set	4-5
Protocol version	<a href="#">#3</a> Date and version identifier	3
Funding	<a href="#">#4</a> Sources and types of financial, material, and other support	38
Roles and responsibilities: contributorship	<a href="#">#5a</a> Names, affiliations, and roles of protocol contributors	1-3, 39

1	Roles and	<a href="#">#5b</a>	Name and contact information for the trial	4
2	responsibilities:		sponsor	
3	sponsor contact			
4	information			
5				
6				
7				
8	Roles and	<a href="#">#5c</a>	Role of study sponsor and funders, if any,	38
9	responsibilities:		in study design; collection, management,	
10	sponsor and funder		analysis, and interpretation of data; writing	
11			of the report; and the decision to submit	
12			the report for publication, including	
13			whether they will have ultimate authority	
14			over any of these activities	
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19	Roles and	<a href="#">#5d</a>	Composition, roles, and responsibilities of	38-40
20	responsibilities:		the coordinating centre, steering	
21	committees		committee, endpoint adjudication	
22			committee, data management team, and	
23			other individuals or groups overseeing the	
24			trial, if applicable (see Item 21a for data	
25			monitoring committee)	
26				
27				
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29				
30	<b>Introduction</b>			
31				
32				
33	Background and	<a href="#">#6a</a>	Description of research question and	8-10
34	rationale		justification for undertaking the trial,	
35			including summary of relevant studies	
36			(published and unpublished) examining	
37			benefits and harms for each intervention	
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39				
40				
41	Background and	<a href="#">#6b</a>	Explanation for choice of comparators	N/A - Longitudinal cohort –
42	rationale: choice of			no comparators required.
43	comparators			
44				
45				
46				
47	Objectives	<a href="#">#7</a>	Specific objectives or hypotheses	10-11
48				
49	Trial design	<a href="#">#8</a>	Description of trial design including type	12-13
50			of trial (eg, parallel group, crossover,	
51			factorial, single group), allocation ratio,	
52			and framework (eg, superiority,	
53			equivalence, non-inferiority, exploratory)	
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**Methods:****Participants,  
interventions, and  
outcomes**

8	Study setting	<a href="#">#9</a>	Description of study settings (eg, community clinic, academic hospital) and list of countries where data will be collected. Reference to where list of study sites can be obtained	11
16	Eligibility criteria	<a href="#">#10</a>	Inclusion and exclusion criteria for participants. If applicable, eligibility criteria for study centres and individuals who will perform the interventions (eg, surgeons, psychotherapists)	14-15
25	Interventions: description	<a href="#">#11a</a>	Interventions for each group with sufficient detail to allow replication, including how and when they will be administered	N/A - Longitudinal cohort – no intervention
32	Interventions: modifications	<a href="#">#11b</a>	Criteria for discontinuing or modifying allocated interventions for a given trial participant (eg, drug dose change in response to harms, participant request, or improving / worsening disease)	N/A - Longitudinal cohort – no intervention
40	Interventions: adherence	<a href="#">#11c</a>	Strategies to improve adherence to intervention protocols, and any procedures for monitoring adherence (eg, drug tablet return; laboratory tests)	N/A - Longitudinal cohort – no intervention
47	Interventions: concomitant care	<a href="#">#11d</a>	Relevant concomitant care and interventions that are permitted or prohibited during the trial	N/A - Longitudinal cohort – no intervention
52	Outcomes	<a href="#">#12</a>	Primary, secondary, and other outcomes, including the specific measurement variable (eg, systolic blood pressure), analysis metric (eg, change from baseline, final value, time to event), method of	27-28

aggregation (eg, median, proportion), and time point for each outcome. Explanation of the clinical relevance of chosen efficacy and harm outcomes is strongly recommended

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8	Participant timeline	<a href="#">#13</a>	Time schedule of enrolment, interventions 19
9			(including any run-ins and washouts),
10			assessments, and visits for participants. A
11			schematic diagram is highly recommended
12			(see Figure)
13			
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16	Sample size	<a href="#">#14</a>	Estimated number of participants needed 15-16
17			to achieve study objectives and how it was
18			determined, including clinical and
19			statistical assumptions supporting any
20			sample size calculations
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25	Recruitment	<a href="#">#15</a>	Strategies for achieving adequate 16-17
26			participant enrolment to reach target
27			sample size
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30	<b>Methods:</b>		
31	<b>Assignment of</b>		
32	<b>interventions (for</b>		
33	<b>controlled trials)</b>		
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37	Allocation:	<a href="#">#16a</a>	Method of generating the allocation N/A - Longitudinal cohort
38	sequence		sequence (eg, computer-generated random
39	generation		numbers), and list of any factors for
40			stratification. To reduce predictability of a
41			random sequence, details of any planned
42			restriction (eg, blocking) should be
43			provided in a separate document that is
44			unavailable to those who enrol participants
45			or assign interventions
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51	Allocation	<a href="#">#16b</a>	Mechanism of implementing the allocation N/A - Longitudinal cohort
52	concealment		sequence (eg, central telephone;
53	mechanism		sequentially numbered, opaque, sealed
54			envelopes), describing any steps to
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conceal the sequence until interventions  
are assigned

Allocation: [#16c](#) Who will generate the allocation sequence, N/A - Longitudinal cohort  
implementation who will enrol participants, and who will  
assign participants to interventions

Blinding (masking) [#17a](#) Who will be blinded after assignment to N/A - Longitudinal cohort  
interventions (eg, trial participants, care  
providers, outcome assessors, data  
analysts), and how

Blinding [#17b](#) If blinded, circumstances under which N/A - Longitudinal cohort  
(masking): unblinding is permissible, and procedure  
emergency for revealing a participant's allocated  
unblinding intervention during the trial

**Methods: Data  
collection,  
management, and  
analysis**

Data collection [#18a](#) Plans for assessment and collection of 17- 22  
plan outcome, baseline, and other trial data,  
including any related processes to promote  
data quality (eg, duplicate measurements,  
training of assessors) and a description of  
study instruments (eg, questionnaires,  
laboratory tests) along with their reliability  
and validity, if known. Reference to where  
data collection forms can be found, if not  
in the protocol

Data collection [#18b](#) Plans to promote participant retention and 25 -26  
plan: retention complete follow-up, including list of any  
outcome data to be collected for  
participants who discontinue or deviate  
from intervention protocols

Data management [#19](#) Plans for data entry, coding, security, and 26  
storage, including any related processes to  
promote data quality (eg, double data  
entry; range checks for data values).

Reference to where details of data management procedures can be found, if not in the protocol

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5	Statistics: outcomes	<a href="#">#20a</a>	Statistical methods for analysing primary and secondary outcomes. Reference to where other details of the statistical analysis plan can be found, if not in the protocol
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13	Statistics:	<a href="#">#20b</a>	Methods for any additional analyses (eg, subgroup and adjusted analyses)
14	additional analyses		28 – 31 – Qualitative Analysis
15			
16			
17	Statistics: analysis	<a href="#">#20c</a>	Definition of analysis population relating to protocol non-adherence (eg, as randomised analysis), and any statistical methods to handle missing data (eg, multiple imputation)
18	population and		28
19	missing data		
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26	<b>Methods:</b>		
27	<b>Monitoring</b>		
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29	Data monitoring:	<a href="#">#21a</a>	Composition of data monitoring committee (DMC); summary of its role and reporting structure; statement of whether it is independent from the sponsor and competing interests; and reference to where further details about its charter can be found, if not in the protocol. Alternatively, an explanation of why a DMC is not needed
30	formal committee		N/A - Longitudinal cohort so DMC not necessary
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44	Data monitoring:	<a href="#">#21b</a>	Description of any interim analyses and stopping guidelines, including who will have access to these interim results and make the final decision to terminate the trial
45	interim analysis		N/A - Longitudinal cohort so DMC not necessary
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52	Harms	<a href="#">#22</a>	Plans for collecting, assessing, reporting, and managing solicited and spontaneously reported adverse events and other unintended effects of trial interventions or trial conduct
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1	Auditing	<a href="#">#23</a>	Frequency and procedures for auditing trial conduct, if any, and whether the process will be independent from investigators and the sponsor	N/A - Longitudinal cohort with self-reported measures
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8	<b>Ethics and</b>			
9	<b>dissemination</b>			
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11	Research ethics approval	<a href="#">#24</a>	Plans for seeking research ethics committee / institutional review board (REC / IRB) approval	32
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17	Protocol amendments	<a href="#">#25</a>	Plans for communicating important protocol modifications (eg, changes to eligibility criteria, outcomes, analyses) to relevant parties (eg, investigators, REC / IRBs, trial participants, trial registries, journals, regulators)	N/A – Given the changing dynamic of the COVID pandemic & policy environment, we had 42 ethics Amendments which included changes to staff personnel, survey tools, recruitment methods and have all been included in this Version 3.0 dated 24-Aug-2021
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31	Consent or assent	<a href="#">#26a</a>	Who will obtain informed consent or assent from potential trial participants or authorised surrogates, and how (see Item 32)	17
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38	Consent or assent: ancillary studies	<a href="#">#26b</a>	Additional consent provisions for collection and use of participant data and biological specimens in ancillary studies, if applicable	N/A – no assent procedures
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45	Confidentiality	<a href="#">#27</a>	How personal information about potential and enrolled participants will be collected, shared, and maintained in order to protect confidentiality before, during, and after the trial	32- 33
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53	Declaration of interests	<a href="#">#28</a>	Financial and other competing interests for principal investigators for the overall trial and each study site	38
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1	Data access	<a href="#">#29</a>	Statement of who will have access to the	32
2			final trial dataset, and disclosure of	
3			contractual agreements that limit such	
4			access for investigators	
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8	Ancillary and post	<a href="#">#30</a>	Provisions, if any, for ancillary and post-	N/A - Longitudinal cohort
9	trial care		trial care, and for compensation to those	
10			who suffer harm from trial participation	
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13	Dissemination	<a href="#">#31a</a>	Plans for investigators and sponsor to	33
14	policy: trial results		communicate trial results to participants,	
15			healthcare professionals, the public, and	
16			other relevant groups (eg, via publication,	
17			reporting in results databases, or other data	
18			sharing arrangements), including any	
19			publication restrictions	
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24	Dissemination	<a href="#">#31b</a>	Authorship eligibility guidelines and any	33
25	policy: authorship		intended use of professional writers	
26				
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28	Dissemination	<a href="#">#31c</a>	Plans, if any, for granting public access to	33
29	policy:		the full protocol, participant-level dataset,	
30	reproducible		and statistical code	
31	research			
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35	<b>Appendices</b>			
36				
37	Informed consent	<a href="#">#32</a>	Model consent form and other related	Supplementary Material File 2
38	materials		documentation given to participants and	
39			authorised surrogates	
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42				
43	Biological	<a href="#">#33</a>	Plans for collection, laboratory evaluation,	N/A – no biological specimens
44	specimens		and storage of biological specimens for	collected
45			genetic or molecular analysis in the	
46			current trial and for future use in ancillary	
47			studies, if applicable	
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