AURORA-COVID Impact Survey (AURORA-CIS)

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The AURORA-CIS is a newly designed short survey to learn and understand the impact of the coronavirus (COVID-19/SARS-CoV-2) pandemic on the trauma survivors currently enrolled in the AURORA Study. This supplementary survey was created to assess the additional impact of the pandemic on the mental health outcomes of the study participants beyond that which could be associated with the traumatic event that led to their emergency room visit. There are four questions asked weekly and an additional fifth question included every month. All questions appear at the end of the participants’ regularly deployed weekly flash survey.

For more details, please send queries to auroracoordinator@med.unc.edu

Questions

Asked weekly:

In the past week, how much has the COVID-19/coronavirus pandemic caused you financial problems?
1. Not at all
2. A little
3. Some
4. A lot
5. Extremely

In the past week, was the health of your close loved ones affected by COVID-19 in any of these ways? (Check all that apply)
1. Someone close to you had to be quarantined due to infection or suspected infection
2. Someone close to you was infected
3. Someone close to you was hospitalized
4. Someone close to you died
5. None of the above

In the past week, was your own health affected by COVID-19 in any of these ways? (Check all that apply)
1. You had to be quarantined due to infection or suspected infection
2. You were infected
3. You were hospitalized
4. None of the above
This past week, how worried were you about COVID-19?
1. Extremely worried - the most worried I’ve ever been
2. Very worried
3. Somewhat worried
4. Not very worried
5. Not worried at all

Additional question asked Monthly:
What is your current employment status? (Check all that apply)
1. Currently working
   [If selected] Have you had to reduce your hours or make less money because of COVID-19?
     1. Yes
     2. No
2. Temporarily laid off
   [If selected] Is this due to COVID-19?
     1. Yes
     2. No
3. On leave
   [If selected] Is this due to COVID-19?
     1. Yes
     2. No
4. Unemployed or looking for work
   [If selected] Is this due to COVID-19?
     1. Yes
     2. No
5. Retired
6. Disabled, permanently or temporarily
7. Student
8. Something else, please briefly describe