

# Covid 19 Protection Measures Survey



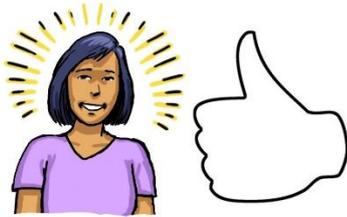
## Easy Read Version

January 2022

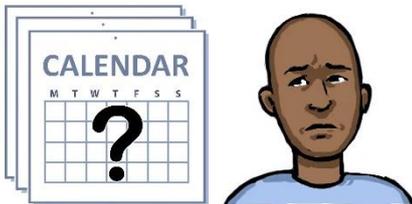
## Information



There have been lots of rules during the Coronavirus Pandemic. These were to stop the spread of the virus.



These rules have changed the way we behave. People have been doing their best to follow these rules. They keep people safe.



The pandemic has been going on for a long time. Some people are finding this hard.



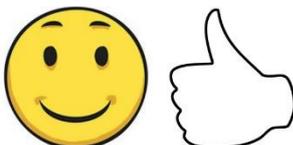
This survey asks questions about your experiences of these rules. It asks what you have found easy and what you have found difficult. It asks for your thoughts for the future.



Your answers will only be seen by some experts. They will make sure that nobody will know who said what.

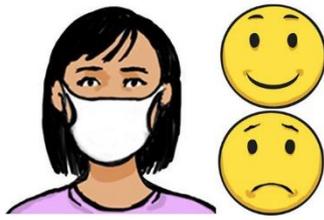


Your answers will help the Scottish Government support people to stay safe and keep their families and communities safe too.

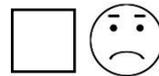
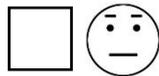
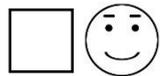


Thank You

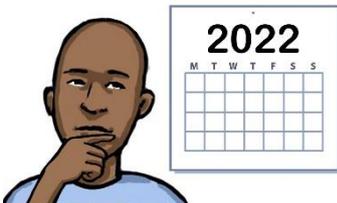
## Questions



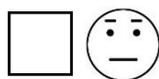
1. How do you feel in the COVID-19 pandemic?



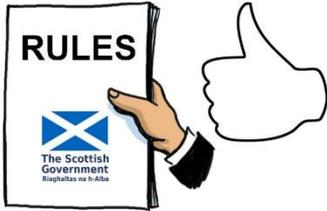
Please tell us more about how you feel in the box below:



2. How do you feel about the year ahead?

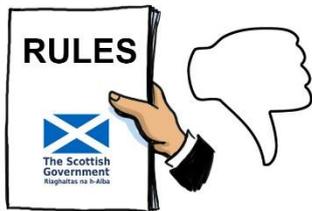


Please tell us more about how you feel in the box below:



**3. Which rules do you find the easiest to follow and why?**

Please tell us your answer in the box below:



**4. Which rules do you find the hardest to follow and why?**

Please tell us your answer in the box below:



**5. Have you or anyone you live with had to self-isolate in the last three months? Self-isolating means not leaving your home for any reason.**

**Yes**

**No**

**If you answered no, please continue to Question 7.**



**6. If you answered yes to Question 5, what made it easier or more difficult to isolate?**

Please tell us your answer in the box below:



**7. Tell us what you think about these things:**

- your neighbourhood and services (for example, shops)
- unpaid caring roles
- working from home
- less social contact
- regular testing

Please tell us your answer in the box below:



**8. What kind of help would make you feel safer and more supported?**

Please tell us your answer in the box below:

## About you



Please tell us if you are happy for us to publish your answers.

If you say no we will still listen to your views. But we will keep your answers private and will not share them.

The Scottish Government would like to publish your response to this survey. Please tell us what you would like us to do:

- Publish response with name
- Publish response only (without name)
- Do not publish response



**Please tell us your name if you would like to**



**What is your email address?**



**What is your phone number (if you do not have an email address)**



**What best describes your gender identity?**

- Female
- Male
- Non-binary (not fitting into male or female gender fully)
- Not listed
- Prefer not to say

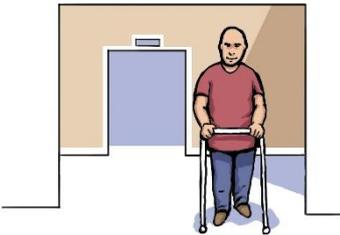


**How old are you?**



**Do you have a physical or mental impairment, illness or disability, expected to last 12 months or more?**

- Yes
- No
- Prefer not to say



**If you answered yes to the above question, does your condition limit your day-to-day activities in any way?**

- Yes
- No
- Prefer not to say



**What is your ethnic group?**



**Are you an unpaid carer?**

- Yes
- No
- Prefer not to say



**Which best describes your situation?**

- Employed full time, 30 hours or more a week
- Employed part time, 8 to 29 hours a week
- Self-employed
- Unemployed and seeking work
- Unemployed and not seeking work
- Studying at school, college or university
- Looking after the home
- Retired
- Not working due to long-term illness or disability
- Other
- Prefer not to say



**How well are you managing with your money at the moment?**

- |   |  |
|---|--|
| <input type="checkbox"/> Very well                          | <input type="checkbox"/> Quite well                |
| <input type="checkbox"/> Getting by alright                 | <input type="checkbox"/> Not managing very well    |
| <input type="checkbox"/> Having some financial difficulties | <input type="checkbox"/> In deep financial trouble |
| <input type="checkbox"/> Don't know                         | <input type="checkbox"/> Prefer not to say         |



**We will share your response with other parts of the Scottish Government. They may wish to contact you again, but we need your permission.**

**Are you happy for Scottish Government to contact you about this consultation?**

- Yes                       No

**I consent to the data I provide being used.**

**To give your consent, please sign your name in the box below:**



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