**Appendix 1: Questionnaire and answers**

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| **AREA:** Demographic data | |
| **QUESTIONS** | **ANSWERS** |
| Sex | * Female * Male |
| Age | * 18-28 * 29-39 * 40-50 * 51-61 * +62 |
| Level of education | * Primary school * Secondary school * High school * College * Specialty * Master * Doctorate |
| Residential location | * State |
| Marital status | * Single * Common-law marriage * Married * Divorced * Widowed |
| Parental status | * With children * Not children |
| Household size | * 1 * 2 * 3 * >3 |

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| --- | --- |
| **AREA:** Financial status | |
| **QUESTIONS** | **ANSWERS** |
| Employment status | * Student * Housewife * Employee * Unemployed * Retired |
| Monthly income | * 0 to 4k * 4,001 to 8k * 8,001 to 12k * 12,001 to 16k * >16k * Not work |
| Risk of loss job | * Yes * No * Not work |
| Reduction in working days | * Yes * No * Not work |
| Monthly income reduction | * Yes * No * Not work |

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| **AREA:** Physical health | |
| **QUESTIONS** | **ANSWERS** |
| Presence of symptoms such as: fever, chills, headache, myalgia, cough, difficulty in breathing, dizziness, coryza and sore throat | * Yes * No |
| Self-rating physical health status | * Bad * Regular * Good * Very good * Excellent |
| Consultation with a doctor  *Means* the respondent gone to doctor public or private for any symptoms of Covid-19. | * Yes * No |
| Admission to the hospital  *Means*: means the respondent was hospitalized in public or private medical related to COVID-19. | * Yes * No |
| Being quarantined by a health authority | * Yes * No |
| Being tested for COVID-19 | * Yes * No |
| Presence of symptoms such as: fever, chills, headache, myalgia, cough, difficulty in breathing, dizziness, coryza and sore throat | * Yes * No |

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| **AREA:** Contact history | |
| **QUESTIONS** | **ANSWERS** |
| Direct contact with an individual with confirmed COVID-19 | * Yes * No |
| Indirect contact with an individual with confirmed COVID-19 | * Yes * No |
| Direct contact with an individual with suspected COVID-19 | * Yes * No |

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| --- | --- |
| **AREA:** Knowledge and concerns | |
| **QUESTIONS** | **ANSWERS** |
| Knowledge about the routes of transmission | * Yes * No |
| Confidence in diagnosis | * Yes * No |
| Level of satisfaction of health information about COVID-19 | * No satisficed * Poor satisficed * Regular * Satisficed * Very satisficed |
| Level of satisfaction of information about the trend of new cases and the potential treatment for COVID-19 infection | * No satisficed * Poor satisficed * Regular * Satisficed * Very satisficed |
| Mainly source of information | * Social networks * Parents and friends * Internet * Newspaper and magazines * Scientific journals * Television |
| Knowledge about the routes of transmission | * Yes * No |
| Confidence in diagnosis | * Yes * No |

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| **AREA:** Precautionary measures | |
| **QUESTIONS** | **ANSWERS** |
| Covering mouth when coughing and sneezing | * Yes * No |
| Washing hands with soap | * Yes * No |
| Washing hands immediately after coughing or sneezing | * Yes * No |
| Wearing a mask regardless of the presence or absence of symptoms | * Yes * No |
| Avoid buying food in informal establishments | * Yes * No |
| Avoid handshakes and leaving home only in indispensable situations | * Yes * No |
| Covering mouth when coughing and sneezing | * Yes * No |

**Appendix 2: Frequency distribution of the respondents of Mexican sample**

