

Questionnaire for parents on the impact of social isolation on children

Our aim is to study the impact of the current state of alarm on the physical, mental and emotional well-being of children. There is a tendency to think that children adapt better than adults to stressful situations since their way of manifesting stress is often different. However, we believe that children are very susceptible to these circumstances, and for this reason we are interested in learning more about how they are affected.

This questionnaire is completely anonymous and the data collected will be used for statistical purposes. Completing this questionnaire will take just a few minutes and the information you provide will be of great use to us.

Thank you in advance for your participation.

* Required

Participation in this study is voluntary. If you do not wish to participate in the study, this will have no negative consequences for you. You may withdraw from the study at any time. Responses are completely anonymous, so there will be no data that can identify you. The information will in all cases be treated in accordance with the General Data Protection Regulation, as well as the Organic Law 3/2018, of December 5, on the Protection of Personal Data and Guarantee of Digital Rights. By responding to the questions provided, it is tacitly implied that you have understood the purpose of this study, that you have been able to ask questions and clarify any doubts that you might have had and that you agree to participate in the study. Please check one of the two options below: *

Mark only one oval.

I consent.

I do not consent.

* If you have more than one child, you may complete a survey for each child.

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1. Child's age (years) * *Mark*

only one oval.

- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10
- 11
- 12
- 13
- 14
- 15
- 16
- 17

2. Sex of the child * *Mark*

only one oval.

- Boy
- Girl

3. Province **Mark only one oval.*

- La Coruña
- Álava
- Albacete
- Alicante
- Almería
- Asturias
- Ávila
- Badajoz
- Balearic Islands
- Barcelona
- Burgos
- Cáceres
- Cádiz
- Cantabria
- Castellón
- Ceuta
- Ciudad Real
- Córdoba
- Cuenca
- Girona
- Granada
- Guadalajara
- Guipúzcoa
- Huelva
- Huesca
- Jaén
- La Rioja
- Las Palmas
- León
- Lérida
- Lugo
- Madrid

- Málaga
- Melilla
- Murcia
- Navarra
- Ourense
- Palencia
- Pontevedra
- Salamanca
- Segovia
- Sevilla
- Soria
- Tarragona
- Santa Cruz de Tenerife
- Teruel
- Toledo
- Valencia
- Valladolid
- Vizcaya
- Zamora
- Zaragoza

4. Do you have other children at home? *

Mark only one oval.

- Yes
- No

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5. If other children live in the household, please indicate how many (total number, including the child in question)?

Mark only one oval.

2
 3
 4
 5
 6
 7
 8
 9
 10

6. How many adults live in your household? *

Mark only one oval.

1
 2
 3
 4
 5
 6
 7
 8
 9
 10

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7. Regarding your home, is it in a rural or urban environment? *

Mark only one oval.

- Rural
- Urban

8. Regarding your home, please indicate the square meters: * *Mark only one oval.*

- Less than 60
- From 60 to 120
- More than 120

9. Regarding your home, do you have a garden or outdoor space? *

Mark only one oval.

- Yes
- No

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10. Average academic qualification (if available):

Mark only one oval.

- Excellent
- Very good
- Satisfactory
- Unsatisfactory

11. Does your child receive regular early stimulation or special education support?

** Mark only one oval.*

- Yes, early stimulation
- Yes, special education
- No

12. Do any active health sector workers live at your home? (doctors, nurses, medical assistants, pharmacists, cleaners, orderlies, etc.) ***

Mark only one oval.

- Yes
- No

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13. Do any active law enforcement workers live at your home (policemen, firemen, civil guard, military, etc.)? *

Mark only one oval.

Yes

No

14. Do any active workers live at your home from a sector other than those mentioned above who has continued to work outside the home? *

Mark only one oval.

Yes

No

15. Has anyone close to you been in isolation for suspected or confirmed COVID-19 infection? *

Mark only one oval.

Yes, someone in our household

Yes, but no one in our household

No

16. Are there any pets in the home? *

Mark only one oval.

Yes

No

17. Does your child have a medical condition that requires regular medical follow-up? *

Mark only one oval.

Yes

No

Communication

1. Do you feel that you have given your child age-appropriate information (in words he/she can understand) about what is happening? *

Mark only one oval.

Yes

No

I'm not sure

2. To what extent have you given information to your child? *

Mark only one oval.

I have tried to be honest, including the most negative aspects.

I have tried to be honest but avoiding the most negative aspects.

I have preferred not to give him/her information.

3. How have you approached the information given to your child? *

Mark only one oval.

I have given him/her realistic information

I have given him/her information by embellishing or misrepresenting the negative aspects.

I have given him/her information based on creative explanations.

I have preferred not to give him/her information.

Normality after the pandemic

1. Do you feel that your child has accepted and adapted to the current situation? *

Mark only one oval.

- Yes
- No
- I'm not sure

2. Do you think your child might have trouble returning to “normal” daily activities? *

Mark only one oval.

- Yes
- No
- I'm not sure

Disease Control

1. Only answer this question if your child has a medical condition. How do you think the confinement has affected this condition?

Mark only one oval.

- I believe it is affecting him/her in a negative way.
- I believe it is affecting him/her in a positive way.
- I don't think there have been any changes.

2. During this period, did you need to consult a medical professional because you were concerned about any aspect of your child's health? *

Mark only one oval.

Yes

No

Non-emotional involvement

1. Do you feel that your child is having trouble falling asleep or is sleeping worse than usual? *

Mark only one oval.

Yes

No

I'm not sure

2. Do you think there have been changes in your child's appetite? *

Mark only one oval.

Has more

Has less

No change

I'm not sure

3. Regarding nutrition, do you feel that there have been changes in the quality of the diet during this period? For example, intake of fruits, vegetables, saturated fats?

* *Mark only one oval.*

Yes, it has improved

Yes, it has gotten worse

I do not think there have been any changes

I'm not sure

4. With regard to the time spent in front of screens (video consoles, television, electronic tablets, cell phones, etc.), indicate the average time spent daily by your child (in relation to the current situation): *

Mark only one oval.

- Less than 1 hour per day
- Between 1 and 2 hours per day
- Between 2 and 3 hours per day
- Between 3 and 4 hours per day
- More than 4 hours per day
- Does not use

Emotional involvement

1. Do you think your child has ever felt sad (in relation to the current situation)?

*

Mark only one oval.

- Yes
- No
- I'm not sure

2. Do you think your child has ever felt afraid (in relation to the current situation)?

** Mark only one oval.*

- Yes
- No
- I'm not sure

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3. Do you think your child is more irritable? Example: more temper tantrums, less obedient, more sensitive *

Mark only one oval.

Yes

No

I'm not sure

4. During the confinement period, has your child had symptoms such as headache, abdominal pain, musculoskeletal pain, tiredness, etc. for no apparent reason and without this type of pain being usual previously? *

Mark only one oval.

Yes

No

I'm not sure

What did you think of the survey? Do you have anything to add? Please leave your comments below:

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