**General**

**Age (years)**

County of residence

Choose one option that best describes your ethnic group or background

*White*

1. English/Welsh/Scottish/Northern Irish/British

2. Irish

3. Gypsy or Irish Traveller

4. Any other White background, please describe

5. White and Black Caribbean

6. White and Black African

7. White and Asian

8. Any other Mixed/Multiple ethnic background, please describe

9. Indian

10. Pakistani

11. Bangladeshi

12. Chinese

13. Any other Asian background, please describe

14. African

15. Caribbean

16. Any other Black/African/Caribbean background, please describe

17. Arab

18. Any other ethnic group, please describe

Religion (no religion; Muslim, Sikh, Hindu, Jewish, Christian; Buddhist; Atheist; Other)

Education level

Gender identity (male, female, non-binary, other)

Is your current gender identity the same as the sex you were assigned at birth?

Which of these best describes your sexual orientation? (heterosexual/straight; bisexual; gay/lesbian; asexual; other (please specify)

Relationship status (select)

(If chooses something indicating a relationship) Please describe your relationship (examples LAT)

Which of these best describes your current living situation (tick all that apply)

Living alone

Living with partner(s)

Living with children

Living with other family (e.g. parents, grandparents, siblings, cousins, etc)

Living with friends

Living with others in a house share

Are you having to self-isolate?

Are you considered yourself a key worker? (Key workers include: Health and social care workers; educational and childcare staff; key public services; local and national government; food and necessary goods workers; public safety and national security workers; transport workers; utilities, communication and financial service workers) Yes/No

**COVID-19**

To what extent is the current pandemic impacting on your sense of wellbeing? 1-7 likert scale, not at all serious to very serious)

How concerned are you about catching COVID-19?

(1-7 likert scale, not at all concerned to very concerned)

How has the current situation due to COVID-19 impacted you financially?

How has the current situation due to COVID-19 impacted you emotionally?

How has the current situation due to COVID-19 impacted you physically?

Have you been following the social distancing rules? (i.e. staying indoors; leaving the house only when necessary; keeping roughly 2 meters away from others; engaging in one hours exercise a day)

How often have you left the house in the last 7 days?

* I haven’t left the house in the last 7 days
* 2-3 times in the last 7 days
* 4-6 times in the last 7 days
* 7 times in the last 7 days (once a day)
* 8+ times in the last 7 days (more than once a day)

**Relationship**

If they indicated they’re in a relationship:

How long have you been in your current relationship?

Are you currently living with your partner(s)?

If yes:

How has social isolation impacted on the amount of time you spent with your partner? (likert 1-7 much less, to much more)

Were you living with your partner previously?

If no:

How have you maintained contact with your partner? (free text)

Have you used technology more to keep in contact with your partner?

How has technology impacted on your relationship?

In your own words, please explain how the current COVID-19 pandemic and social isolation has affected your intimate relationship(s), both positively and negatively: (free text box)

**If they’re single: Online dating**

Do you currently have a profile on a website used for online dating or finding sexual partners?

Did you have a profile before social isolation?

Has your use of these online sites increased, decreased or remained the same during social isolation?

If increase/decrease, why? (free text box)

**Social networks**

Thinking about your friends/family who you normally have regularly face to face contact with:

How connected do you feel to your social circle? (likert 1-5, much less connected, to much more connected)

Why is that?

How much have you used technology more (e.g. Whatsapp, HouseParty, Zoom) to keep connected to your social circles? (likert 1-5, not at all, to a lot more)

If more, how has the transition been moving from communication in-person to online? (likert scale , 1-5, easy to difficult)

Do you currently have a profile on a social networking platform? (e.g. Facebook’ Twitter; Instagram)

Have you signed up to any new platforms since the social isolation?

If so, which ones?

How has your use of social networking platforms changed during social isolation? (increase, decrease, unchanged)

Have social networking platforms been useful during the social isolation?

If so, how?

Have you used social networking platforms to keep up to date with the latest news?

If so, how?

Have social networking sites negatively impacted you during social isolation?

If so, how?

**Section on porn**

Before social isolation, how often did you watch pornography online? (never, less than once a month, less than once a week, once a week, every couple of days, daily, several times a day)

Has the amount or pornography viewed during social lockdown changed? Increased, decreased, unchanged.

If changed, why?

Has your pornography viewing habits changed during social isolation? Tick all that apply

I watch different types of porn

I watch for longer

I watch fewer types of porn

I now watch porn when having sex

I only watch porn when masturbating

I watch porn when bored

I watch porn alone

I watch porn with my partner

Other (please specify)

(if they live with partner and watch porn) – Does your partner know about your porn use?

If no, why?

**Sexual activities**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Engaged in activity before the pandemic** | **Engaged in activity during social isolation** | **Engaged in activity more during social isolation** | **Engaged in activity less during social isolation** |
| **Solo masturbation (wanking)** |  |  |  |  |
| **Mutual masturbation** |  |  |  |  |
| **Sexual intercourse with a partner** |  |  |  |  |
| **Sexual intercourse with somebody not your partner** |  |  |  |  |
| **Used sex toys solo (e.g. vibrators)** |  |  |  |  |
| **Used sex toys with a partner** |  |  |  |  |
| **Watching pornography solo** |  |  |  |  |
| **Watching pornography with a partner** |  |  |  |  |
| **Sexted with a partner (sent messages of a sexual nature)** |  |  |  |  |
| **Sexted with somebody not your partner** |  |  |  |  |
| **Sent nude selfies to your partner** |  |  |  |  |
| **Sent nude selfies not to your partner** |  |  |  |  |
| **Role played with a partner** |  |  |  |  |
| **Role played with somebody not your partner** |  |  |  |  |

What impact has social isolation had on your sex life? (negative impact to positive impact, 1-5)

Please expand on this:

What impact has social isolation had on your romantic life? (negative impact to positive impact, 1-5)

Please expand on this:

Over the last two weeks, how would you rate your sexual desire?

Please expand on this:

**Sexual health**

Have you ever visited a sexual health clinic or contraception/family planning clinic? (yes, no)

How many times in the past year have you attended a sexual health clinic or contraception/family planning clinic? (write number)

How often are you screen for STIs (including HIV)? Every 3 months; Every 6 months; Yearly; Every few years; Never

In the last 12 months, have you been diagnosed with any STIs?

Are you concerned that you may have an STI while in social isolation? Yes, no

Are you concerned about your sexual health while in social isolation? Yes, no

If so, why?

**(UCLA Loneliness (Version 3)**

*This survey accompanies a measure in the SPARQTools.org* [*Measuring Mobility toolkit*](http://sparqtools.org/mobility-measure/ucla-loneliness-scale-version-3/)*, which provides practitioners curated instruments for assessing mobility from poverty and tools for selecting the most appropriate measures for their programs.To get a copy of this document in your preferred format, go to "File" and then "Download as" in the toolbar menu.*

**Age:** Teen, Adult

**Duration:** 3-5 minutes

**Reading Level:** 6th to 8th grade

**Number of items:** 20

**Answer Format:** 1 = never; 2 = rarely; 3 = sometimes; 4 = always.

**Scoring:**

Q1, Q5, Q6, Q9, Q10, Q15, Q16, Q19, and Q20 should be reverse-scored. Reverse-scored items are worded in the opposite direction of what the scale is measuring. The formula for reverse-scoring an item is:

((Number of scale points) + 1) - (Respondent’s answer)

For example, Q10 is a 4-item scale. If a respondent answered *3* on Q10, you would re-code their answer as: (4 + 1) - 3 = 2.

In other words, you would enter a *2* for this respondents’ answer to Q10.

To calculate the total score for each participant, sum all responses for a score ranging from 20 to 80.

**Sources:**

Russell, D. W. (1996). UCLA Loneliness Scale (Version 3): Reliability, validity, and factor structure. *Journal of personality assessment, 66*(1), 20-40.

**Instructions**: The following statements describe how people sometimes feel. For each statement, please indicate how often you feel the way described by circling one of the responses below. Here is an example:

How often do you feel happy?

If you never felt happy, you would respond “never”; if you always feel happy, you would respond “always.”

1. How often do you feel that you are “in tune” with the people around you?

|  |  |  |  |
| --- | --- | --- | --- |
| Never | Rarely | Sometimes | Always |
|  |  |  |  |

2. How often do you feel that you lack companionship?

|  |  |  |  |
| --- | --- | --- | --- |
| Never | Rarely | Sometimes | Always |
|  |  |  |  |

3. How often do you feel that there is no one you can turn to?

|  |  |  |  |
| --- | --- | --- | --- |
| Never | Rarely | Sometimes | Always |
|  |  |  |  |

4. How often do you feel alone?

|  |  |  |  |
| --- | --- | --- | --- |
| Never | Rarely | Sometimes | Always |
|  |  |  |  |

5. How often do you feel part of a group of friends?

|  |  |  |  |
| --- | --- | --- | --- |
| Never | Rarely | Sometimes | Always |
|  |  |  |  |

6. How often do you feel that you have a lot in common with the people around you?

|  |  |  |  |
| --- | --- | --- | --- |
| Never | Rarely | Sometimes | Always |
|  |  |  |  |

7. How often do you feel that you are no longer close to anyone?

|  |  |  |  |
| --- | --- | --- | --- |
| Never | Rarely | Sometimes | Always |
|  |  |  |  |

8. How often do you feel that your interests and ideas are not shared by those around you?

|  |  |  |  |
| --- | --- | --- | --- |
| Never | Rarely | Sometimes | Always |
|  |  |  |  |

9. How often do you feel outgoing and friendly?

|  |  |  |  |
| --- | --- | --- | --- |
| Never | Rarely | Sometimes | Always |
|  |  |  |  |

10. How often do you feel close to people?

|  |  |  |  |
| --- | --- | --- | --- |
| Never | Rarely | Sometimes | Always |
|  |  |  |  |

11. How often do you feel left out?

|  |  |  |  |
| --- | --- | --- | --- |
| Never | Rarely | Sometimes | Always |
|  |  |  |  |

12. How often do you feel that your relationships with others are not meaningful?

|  |  |  |  |
| --- | --- | --- | --- |
| Never | Rarely | Sometimes | Always |
|  |  |  |  |

13. How often do you feel that no one really knows you well?

|  |  |  |  |
| --- | --- | --- | --- |
| Never | Rarely | Sometimes | Always |
|  |  |  |  |

14. How often do you feel isolated from others?

|  |  |  |  |
| --- | --- | --- | --- |
| Never | Rarely | Sometimes | Always |
|  |  |  |  |

15. How often do you feel that you can find companionship when you want it?

|  |  |  |  |
| --- | --- | --- | --- |
| Never | Rarely | Sometimes | Always |
|  |  |  |  |

16. How often do you feel that there are people who really understand you?

|  |  |  |  |
| --- | --- | --- | --- |
| Never | Rarely | Sometimes | Always |
|  |  |  |  |

17.  How often do you feel shy?

|  |  |  |  |
| --- | --- | --- | --- |
| Never | Rarely | Sometimes | Always |
|  |  |  |  |

18. How often do you feel that people are around you but not with you?

|  |  |  |  |
| --- | --- | --- | --- |
| Never | Rarely | Sometimes | Always |
|  |  |  |  |

19. How often do you feel that there are people you can talk to?

|  |  |  |  |
| --- | --- | --- | --- |
| Never | Rarely | Sometimes | Always |
|  |  |  |  |

20. How often do you feel that there are people you can turn to?

|  |  |  |  |
| --- | --- | --- | --- |
| Never | Rarely | Sometimes | Always |
|  |  |  |  |

**Multidimensional scale of perceived social support (Zimet et al., 1988)**

Measures on a 7-point likert scale, very strongly disagree to very strongly agree

1. There is a special person who is around when I am in need.
2. There is a special person with whom I can share my joys and sorrows.
3. My family really tries to help me.
4. I get the emotional help and support I need from my family.
5. I have a special person who is a real source of comfort to me.
6. My friends really try to help me.
7. I can count on my friends when things go wrong.
8. I can talk about my problems with my family.
9. I have friends with whom I can share my joys and sorrows.
10. There is a special person in my life who cares about my feelings.
11. My family is willing to help me make decisions.
12. I can talk about my problems with my friends.

|  |
| --- |
| ***20-item scale (Alpha = .91)*** |
| + keyed | Feel comfortable around people. |
|  | Make friends easily. |
|  | Am skilled in handling social situations. |
|  | Am the life of the party. |
|  | Know how to captivate people. |
|  | Start conversations. |
|  | Warm up quickly to others. |
|  | Talk to a lot of different people at parties. |
|  | Don't mind being the center of attention. |
|  | Cheer people up. |
|  |  |
| – keyed | Have little to say. |
|  | Keep in the background. |
|  | Would describe my experiences as somewhat dull. |
|  | Don't like to draw attention to myself. |
|  | Don't talk a lot. |
|  | Avoid contacts with others. |
|  | Am hard to get to know. |
|  | Retreat from others. |
|  | Find it difficult to approach others. |
|  | Keep others at a distance. |

|  |
| --- |
| ***20-item scale (Alpha = .91)*** |
| + keyed | Often feel blue. |
|  | Dislike myself. |
|  | Am often down in the dumps. |
|  | Have frequent mood swings. |
|  | Panic easily. |
|  | Am filled with doubts about things. |
|  | Feel threatened easily. |
|  | Get stressed out easily. |
|  | Fear for the worst. |
|  | Worry about things. |
|  |  |
| – keyed | Seldom feel blue. |
|  | Feel comfortable with myself. |
|  | Rarely get irritated. |
|  | Am not easily bothered by things. |
|  | Am very pleased with myself. |
|  | Am relaxed most of the time. |
|  | Seldom get mad. |
|  | Am not easily frustrated. |
|  | Remain calm under pressure. |
|  | Rarely lose my composure. |

Sexual Desire Inventory – Pre and Post Covid19

Pre

The questionnaire asks about your level of sexual desire. By desire, we mean interest in or wish for sexual activity. For each item, please select the number that best shows your thoughts and feelings.

Please think back to before the pandemic related to COVID19 started and answer the questions retrospectively.

1. During an average month, how often would you have liked to engage in sexual activity with a partner?
2. Not at all
3. Once a month
4. Once every two weeks
5. Once a week
6. Twice a week
7. 3-4 times a week
8. Once a day
9. More than once a day
10. During an average month, how often have you had sexual thoughts involving a partner?
    1. Not at all
    2. Once a month
    3. Once every two weeks
    4. Once a week
    5. Twice a week
    6. 3-4 times a week
    7. Once a day
    8. More than once a day

3. When you had sexual thoughts, how strong was your desire to engage in sexual behaviour with a partner?

0 1 2 3 4 5 6 7 8

No desire Strong desire

4. When you first saw an attractive person, how strong was your sexual desire?

0 1 2 3 4 5 6 7 8

No desire Strong desire

5. When you spent time with an attractive person (for example, at work or school), how strong was your sexual desire?

0 1 2 3 4 5 6 7 8

No desire Strong desire

6. When you were in romantic situations (such as a candle-lit dinner, a walk on the beach, etc), how strong was your sexual desire?

0 1 2 3 4 5 6 7 8

No desire Strong desire

7. How strong was your desire to engage in sexual activity with a partner?

0 1 2 3 4 5 6 7 8

No desire Strong desire

8. How important was it for you to fulfil your sexual desire through activity with a partner?

0 1 2 3 4 5 6 7 8

Not at all important Extremely important

9. Compared to other people of your age and sex, how would you have rated your desire to behave sexually with a partner?

0 1 2 3 4 5 6 7 8

Much less desire Much more desire

10. During an average month, how often would you have liked to behave sexually by yourself (for example, masturbation)?

1. Not at all
2. Once a month
3. Once every two weeks
4. Once a week
5. Twice a week
6. 3-4 times a week
7. Once a day
8. More than once a day

11. How strong was your desire to engage in sexual behaviour by yourself?

0 1 2 3 4 5 6 7 8

No desire Strong desire

12. How important was it for you to fulfil your desires to behave sexually by yourself?

0 1 2 3 4 5 6 7 8

Not at all important Extremely important

13. Compared to other people of your age and sex, how would you have rated your desire to behave sexually by yourself?

0 1 2 3 4 5 6 7 8

Much less desire Much more desire

14. How long could you have gone comfortably without having sexual activity of some kind?

1. Not at all
2. Once a month
3. Once every two weeks
4. Once a week
5. Twice a week
6. 3-4 times a week
7. Once a day
8. More than once a day

Sexual Desire Inventory (Spector, Carey & Steinberg, 1996) – Participants were asked to think pre and during social lockdown.

1. During the last month, how often would you have liked to engage in sexual activity with a partner?

1. Not at all
2. Once a month
3. Once every two weeks
4. Once a week
5. Twice a week
6. 3-4 times a week
7. Once a day
8. More than once a day
9. During the last month, how often have you had sexual thoughts involving a partner?
   1. Not at all
   2. Once a month
   3. Once every two weeks
   4. Once a week
   5. Twice a week
   6. 3-4 times a week
   7. Once a day
   8. More than once a day

3. When you have sexual thoughts, how strong is your desire to engage in sexual behaviour with a partner?

0 1 2 3 4 5 6 7 8

No desire Strong desire

4. when you first see an attractive person, how strong is your sexual desire?

0 1 2 3 4 5 6 7 8

No desire Strong desire

5. When you spend time with an attractive person (for example, at work or school), how strong is your sexual desire?

0 1 2 3 4 5 6 7 8

No desire Strong desire

6. When you are in romantic situations (such as a candle-lit dinner, etc), how strong is your sexual desire?

0 1 2 3 4 5 6 7 8

No desire Strong desire

7. How strong is your desire to engage in sexual activity with a partner?

0 1 2 3 4 5 6 7 8

No desire Strong desire

8. How important is it for you to fulfil your sexual desire through activity with a partner?

0 1 2 3 4 5 6 7 8

Not at all important Extremely important

9. Compared to other people of your age and sex, how would you rate your desire to behave sexually with a partner?

0 1 2 3 4 5 6 7 8

Much less desire Much more desire

10. During the last month, how often would you have liked to behave sexually by yourself (for example, masturbation)?

1. Not at all
2. Once a month
3. Once every two weeks
4. Once a week
5. Twice a week
6. 3-4 times a week
7. Once a day
8. More than once a day

11. How strong is your desire to engage in sexual behaviour by yourself?

0 1 2 3 4 5 6 7 8

No desire Strong desire

12. How important is it for you to fulfil your desires to behave sexually by yourself?

0 1 2 3 4 5 6 7 8

Not at all important Extremely important

13. Compared to other people of your age and sex, how would you rate your desire to behave sexually by yourself?

0 1 2 3 4 5 6 7 8

Much less desire Much more desire

14. How long could you go comfortably without having sexual activity of some kind?

1. Not at all
2. Once a month
3. Once every two weeks
4. Once a week
5. Twice a week
6. 3-4 times a week
7. Once a day
8. More than once a day
9. The revised Sociosexual Orientation Inventory (SOI-R)
10. Short Manual
11. Items 1-3 should be coded as 0 = 1, 1 = 2, 2 = 3, 3 = 4, 4 = 5, 5-6 = 6, 7-9 = 7, 10-19 = 8, 20
12. or more = 9; they can then be aggregated (i.e., summed or averaged) to form the Behavior
13. facet ( = .85). After reverse-coding item 6, items 4-6 can be aggregated to form the Attitude
14. facet ( = .87). Aggregating items 7-9 results in the Desire facet ( = .86). Finally, all nine
15. items can be aggregated to a total score of global sociosexual orientation ( = .83).
16. When items 1-3 are presented with open response format instead of the rating scales, items
17. 2, 4, and 7 of the original SOI can be added to the SOI-R to allow for calculating the SOI total
18. score in addition to the SOI-R scores. In this case, the open responses should be recoded to
19. the rating scale format (i.e., 0 = 1, 1 = 2, ..., 20 to max. = 9) before the SOI-R scores are
20. determined.
21. Alternatively, we also developed a version of the SOI-R with 5-point rating scales, which
22. might be more appropriate for samples with less educated or less test-experienced subjects.
23. In this version, the scale alternatives are “0”, “1”, “2-3”, “4-7”, and “8 or more” (coded as 1 to
24. 5) for the Behavior items, 1 (strongly disagree) to 5 (strongly agree) for the Attitude items,
25. and “never”, “very seldom”, “about once a month”, “about once a week”, and “nearly every
26. day” (coded as 1 to 5) for the Desire item. In a large, heterogeneous online sample (N =
27. 8,549), the SOI-R with five response alternatives per item achieved good internal
28. consistencies ( = .83, .81, .82, and .85 for the total score and the facets Behavior, Attitude,
29. and Desire, respectively).
30. The SOI-R can be cited as:
31. Penke, L., & Asendorpf, J. B. (2008). Beyond global sociosexual orientations: A more
32. differentiated look at sociosexuality and its effects on courtship and romantic relationships.
33. Journal of Personality and Social Psychology, 95, 1113-1135.
34. The revised Sociosexual Orientation Inventory (SOI-R)
35. Please respond honestly to the following questions:
36. 1. With how many different partners have you had sex within the past 12 months?
37. 0 1 2 3 4 5-6 7-9 10-19 20 or more
38. 2. With how many different partners have you had sexual intercourse on one and only
39. one occasion?
40. 0 1 2 3 4 5-6 7-9 10-19 20 or more
41. 3. With how many different partners have you had sexual intercourse without having an
42. interest in a long-term committed relationship with this person?
43. 0 1 2 3 4 5-6 7-9 10-19 20 or more
44. 4. Sex without love is OK.
45. 1 2 3 4 5 6 7 8 9
46. Strongly disagree Strongly agree
47. 5. I can imagine myself being comfortable and enjoying "casual" sex with different
48. partners.
49. 1 2 3 4 5 6 7 8 9
50. Strongly disagree Strongly agree
51. 6. I do not want to have sex with a person until I am sure that we will have a long-term,
52. serious relationship.
53. 1 2 3 4 5 6 7 8 9
54. Strongly disagree Strongly agree