



Table S1. Measures included in the COVID-19 Residential Homes Survey (Madrid Region, Spain).

	Personal circumstances regarding the pandemic			
Areas studied and measures used	Items	Response categories	Scale variables and minimum and maximum values Cronbach Alpha	
Coronavirus status		1 = I have not had the disease		
		2 = I have had the disease, but I		
		am still suffering after-effects		
		3 = I have had the disease, but I		
		do not have any after-effects		
If they have had coronavirus	Pain; Neurological; Respiratory;	1 = Yes	Number of effects of having	
and reported after-effects:	Cardiac; Digestive; Tiredness/ma-	0 = No	had COVID-19: 1-4	
type and number	laise; Sadness/anxiety			
Worried about the COVID-19		1 = Not at all		
pandemic		2 = Somewhat		
1		3 = Quite a lot		
		4 = A lot		
		999 = Do not know/No answer		
		(DK/NA)		
Satisfaction with life in com-		1 = Less		
pared perspective (before and		2 = The same		
during the pandemic)		3 = More		
		999 = DK/NA		
Fear of developing COVID-	1. I am very afraid of COVID-19	1 = Strongly disagree	<u>Fear scale</u> : 7-35	
19, according to the FCV-19S	2. Thinking about COVID-19	2 = Disagree	Interpretation: higher val-	
scale	makes me uncomfortable	3 = Neither agree nor disagree	ues=more fear	
	3. My palms sweat when I think	4 = Agree	Cronbach Alpha: 0.941	
	about COVID-19	5 = Strongly agree		
	4. I feel afraid of losing my life because of COVID-19	999 = DK/NA		
	5. I get nervous or anxious when			
	I see news and stories about			
	COVID-19			
	6.I can't sleep from worrying			
	about getting COVID-19			
	7. My heart starts beating fast or I			
	feel palpitations when I think			
	about getting COVID-19			

Protective measures to keep	1. Use a mask	1 = Never	Number of measures followed:
yourself safe from corona-	2. Wash my hands	2 = Sometimes	1-4
virus: type and number	3. Keep a physical distance	3 = Often	
	4. Stay in my room as much as	4 = Always	
	possible	999 = DK/NA	
	5. Stay away from organized ac-		
	tivities in the residential home		
	6. Avoid physical contact with		
	other residents		
	7. Ventilate my room, stay in ven-		
	tilated places		
	8. Others		
	9. None of these measures		

	Health				
Areas studied and measures used	Items	Response categories	Scale variables and minimum and maximum values Cronbach Alpha		
Resident's previous pathologies from medical reports	Presence of 21 health conditions and an open option of "other"	1 = Yes 0 = No	Number of pathologies diagnosed: 1-12		
Intake of medications from medi- cal reports	8 groups of medications	1 = Yes 0 = No	Number of medications taken: 1-8		
Self-assessment of health status		1 = Very poor 2 = Poor 3 =Fair 4 = Good 5 = Very good			
Diagnosis of COVID-19 by a health professional		1 = Yes 0 = No 999 = DK/NA			
If diagnosed by COVID-19: if hospitalized and number of days in hospital		1 = Yes 0 = No	If hospitalized: No of days: 3-45		
Abbreviated Geriatric Depression Scale	 <u>Positive item</u> 1. Are you basically satisfied with your life? <u>Negative items</u> 4. Are you often bored? 9. Do you prefer to stay in residence or in your room instead of going out and doing new things? 	Yes No	Depression scale: 0-5 Interpretation: Higher values = more depression 0-1: no depression; ≥ 2: suspicion of depression (mild, moderate, severe) Cronbach Alpha: 0.207		

	12. Do you feel useless the way you are now?14. Do you think your situation is hopeless?		
How often he/she feels lonely		1 = Never or hardly ever 2 = Seldom 3 = Quite often 4 = Always or almost al- ways 9 = DK/NA	
If feels lonely other than Never or		1 = Less lonely	
Hardly Ever: Change in percep-		2 = The same	
tion of loneliness in comparative		3 = More lonely	
perspective (before and during		999 = DK/NA	
the pandemic)		999 = Does not apply	
Situation regarding use of health	1. Cancellation of a visit to a doc-	1 = Yes	
care services during pandemic	tor or other health professional	0 = No	
and lockdown	2. Face-to-face visit to a physician		
	or other health care professional		
	3. Video call consultation with a		
	physician or other health care		
	professional		
Satisfaction with the care and	1. Medical staff	1 = Not at all satisfied	
health care received in the resi-	2. Nursing staff	2 = Not very satisfied	
dential home during the pan-	3. Physical therapy/rehabilitation	3 = Average	
demic, or with the resources used	4. Aides/geroculturists/caregivers	4 = Fairly satisfied	
	5. Resources (oxygen tanks, nebu-	5 = Very satisfied	
	lizers, drugs, other resources)	999 = DK/NA	

Feelings and coping			
Areas studied and	Items	Response categories	Scale variables and minimum and maxi-
measures used			mum values
			Cronbach Alpha

Positive and Negative Af-	5 negative affect items	1 = Not at all	Subscales and Interpretation:
fect Schedule (PANAS)	(2- Upset/angry; 3- Afraid; 4- Irri-	2 = Somewhat	Positive feelings: 5-20
	tated; 6- Nervous; 9- Uneasy)	3 = Quite a lot	higher values=higher positive feeling
	<u>5 items of positive affect</u>	4 = Very	Cronbach Alpha: 0.798
	(1- Cheerful; 5- Inspired; 7- Deter-		Negative feelings: 5-20 higher val-
	mined; 8- Attentive; 10- Active)		ues=higher negative feeling.
			Cronbach Alpha: 0.809
			Balance
			Difference: -12 to 15
			positive values=more positive feeling;
			negative values=more negative feeling.
			<u>Quotient</u> : 0.33 to 4:
			<1: negative balance;= 1: neutral balance;
			>1: positive balance
Brief Resilient Coping	1. I look for positive ways to	1 = This sentence never	Resilience scale: 4-20
Scale (BRCS)	change difficult situations	happens to me	Interpretation: higher values=better ability
	2. Regardless of what happens to	2 = It happens to me	to cope with adverse situations.
	me, I believe I can control my re-	sometimes	Cronbach Alpha: 0.912
	actions	3 = It happens to me fre-	
	3. I believe I can grow positively	quently	
	by coping with difficult situa-	4 = It happens to me all	
	tions	the time	
	4. I actively look for ways to	5 = This statement hap-	
	overcome setbacks that arise in	pens to me very often	
	life	999 = DK/NA.	

Assessment of the residential environment and activities performed			
Areas studied and measures	Items	Response categories	Scale variables and mini-
used			mum and maximum values
			Cronbach Alpha
Room availability	1. Single		
	2. Shared with spouse/partner/family mem-		
	ber		
	3. Shared with another resident		
	999 = DK/NA		
Where did they spend most	1. Always in my room		
of their time during the lock-	2. I made limited use of different areas		
down	3. Unrestricted use of all spaces in the care		
	home		

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If they did not make unlim-	1. Eating		
ited use of areas: what activi-	2. Going for walks		
ties they did outside their	3. Group activities		
room?	4. I have not left my room		
	997. Other, please specify		
Valuation of various aspects	1. Friendships with other residents	1 = Very badly;	Subscales:
of life in the residential home	2. Relationships with nursing home workers	2 = Badly;	Relationships: 4-20
	3. Relationships with family members	3 =Average;	Cronbach Alpha: 0.771
	4. Relationships with friends	4 = Well;	Residential home aspects: 6-
	5. Getting around easily within the residen-	5 = Very well	15
	tial home	999 = Does not have one	Cronbach Alpha: 0.722
	6. The chance to go outside the residential	/DK/NA	Mobility: 2-10
	home for different activities		Cronbach Alpha: 0.737
	7. Their perception of safety in the residen-		Space for privacy: 1-5
	tial home		Interpretation: Higher val-
	8. Characteristics and quality of the residen-		ues=better residential rating
	tial home's amenities; (E.g.: room size and		
	design, natural lighting, noise level, temper-		
	ature, green areas)		
	9. Having a space for privacy (having a sin-		
	gle room or other personal space so as not		
	to be disturbed)		
	10. How well their residential home has		
	managed during the COVID-19 pandemic		
	period		
Residential home stay in com-		1 = Worse	
parative perspective (before		2 = The same	
and during the pandemic)		3 = Better	
		999 = DK/NA	
Activities performed	1. Reading books, newspapers, magazines	1 = Never (0 days/year)	
	2. Doing crossword puzzles, sudoku, play-	2 = Yearly (3 days/year)	
	ing chess, etc.	3 = Monthly (12)	
	3. Using devices (computer, tablets, cell	days/year)	
	phones, etc.), to look for information, chat,	4 = Weekly (52	
	etc. on the Internet	days/year)	
	4. Watching TV, listening to the radio	5 = Daily (365 days/year)	
	5. Walking or exercising	, (j-, j-, j-, j-, j-, j-, j-, j-, j-,	
	6. Going to the chapel		
	7. Doing crafts (sewing, DIY, knitting, etc.)		
	8. Doing things for others		
If you perform the activity:	Ditto (above)	1 = I have done it less	
changes in performing		2 =I have kept it up	
			L

activity in compared perspec-		3 =I do it more often	
tive between previous situa-		999 = DK/NA	
tion and pandemic situation			
Devices or mobile systems	1. Yes, through my own devices		
used to maintain relation-	2. Yes, through other people's or residential		
ships with your family or	home's devices		
friends	3. No, I do not have access to those devices		
	998. Don't know, don't know that technol-		
	ogy		
	999. Not answered		

Quality of life				
Areas studied and	Items	Response categories	Scale variables and minimum and maximum	
measures used			values	
			Cronbach Alpha	
FUMAT-24 scale adapted	24 items in 8 subscales:	1 = Never or hardly ever	(<u>Max-Min.) (</u> Cronbach Alpha)	
for elderly people without	Emotional well-being	2 = Sometimes	Global FUMAT Scale: (45-95) (0.788)	
severe cognitive impair-	Interpersonal relationships	3 = Often	Subscales (3-12): emotional well-being (0.859); in-	
ment in nursing homes	Material well-being	4 = Always or almost al-	terpersonal relationships (0.755); personal devel-	
	Personal development	ways.	opment (0.833); physical well-being (0.544); self-	
	Physical well-being		determination (0.320); social inclusion (0.408);	
	Self-determination		rights (0.802)	
	Social inclusion		Material well-being subscale: 6-12 (0.081)	
	Rights			
			Interpretation: higher values=higher level of	
			quality of life.	

Ageism and perception of aging			
Areas studied	Items	Response categories	Scale variables and mini-
and measures			mum and maximum values
used			Cronbach Alpha

Ageism	1. Older people are more responsible and competent	1 = Do not agree at all	Ageism Scale: 0-24
	than other population groups in following the measures	2 = Agree slightly	
	established to cope with the virus	3 = Agree quite a lot	
	2. Older people are a problem, a burden, for health and	4 = Strongly agree	
	social services	999 = DK/NA	
	3. Older people make their own decisions freely, as do		
	other population groups		
	4. News about the virus' consequences triggers more		
	emotional impact on older people than on other age		
	groups		
	5. In the event of a shortage of health care resources, the		
	elderly should have the same access as other population		
	groups		
	6. Considering the risk of infection, meeting with older		
	people is more dangerous than with other younger		
	groups		
Self-Perception of	1. As I get older things seem worse to me	1 = Yes	Self-Perception Scale: 0-5
Aging Scale	2. I have as much energy as I did last year	0 = No	Interpretation: higher val-
	3. I feel that as I get older I am less useful		ues=better perception
	4. I'm as happy now as I was when I was young		Kuder-Richardson coefficient
	5 Things are getting better as I get older		KR20: 0.639

Socio-demographic features		
Areas studied and measures	Items	Response categories
used		
Age in years		61-99
Gender	1. Male	
	2. Female	
	9. Prefer not to say	
Marital status	1. Married, living as a couple	
	2. Separated	
	3. Divorced	
	4. Single	
	5. Widow/er	
Level of education	1. Cannot read or write	
	2. Can read and write, but no primary education	
	3. Primary education	
	4. Secondary education	
	5. Vocational education	
	6. University education	
	7. Other non-regulated studies	

	9. I don't know, or I prefer not to answer	
Number of living children		0-5
Number of living daughters		0-6
Total number of children		0-9

NOTE: For further information about the questionnaire: vicente.rodriguez@cchs.csic.es