SUPPLEMENTARY MATERIAL

Appendix A

Section A: Baseline Characteristics

1. Are you a healthcare worker currently involved in the management of COVID-19

treatment?

- Yes
- No
- 2. What is your position?
 - Doctor of Medicine or Doctor of Osteopathic Medicine
 - Physician Associate
 - Respiratory Therapist
 - Pharmacist
 - Resident
 - Bachelor of Science in Nursing
 - Nursing Assistant
 - Other:
- 3. What is your gender?
 - Male
 - Female
 - I do not want to say
 - Other:
- 4. Race
- 5. _____

- 6. Age
- 7. _____
- 8. What type of institution do you work for?
 - Private hospital
 - Public hospital
- 9. How many years of experience do you have in your field?
 - <5 years
 - 5-10 years
 - 10-20 years
 - >20 years
- 10. How many hours do you work per week?
 - Less than 40 hours
 - 40-80 hours
 - >80 hours

Section B: Personal Protective Equipment Use

11. What type of Personal Protective Equipment have you used? (Please check all that apply)

- Surgical Mask or equivalent respirator
- N95, type 2 (FFP2) self-filtering respirator or equivalent respirator
- Type 3 (FFP3) self-filtering respirator.
- Powered air-purifying respirator (PAPR)
- Eye protection: Protective eyewear
- Eye protection: Face shield

- Apron
- Long-sleeved waterproof gown
- Gloves
- Hat
- Other

12. Do you continue to take the necessary precautions during the COVID-19 pandemic?

- Never
- Almost never
- Occasionally / Sometimes
- Almost all the time
- All the time

Section C: Burden of social pressure/bullying

13. Answer each of the questions according to the following scale:

- Never
- Almost never
- Occasionally
- Almost all the time
- All the time
- a. Have you been witnessed bullying at your workplace for wearing the at protective

equipment necessary during the pandemic?

b. Have you felt pressure social pressure in your workplace for wearing the equipment at

protective equipment necessary during the pandemic?

- c. Have you been bullied in the workplace for wearing the required personal protective equipment during the pandemic?
- 14. From whom have you received social pressure or been bullied inside or outside your

workplace: Supervisors?

- Never
- Almost never
- Occasionally
- Almost all the time
- All the time
- 15. From whom have you received social pressure or been bullied inside or outside your

workplace: Co-workers/colleagues coworkers/colleagues?

- Never
- Almost never
- Occasionally
- Almost all the time
- All the time

16. From whom have you received social pressure or been bullied inside or outside your

workplace: Patients?

- Never
- Almost never
- Occasionally
- Almost all the time
- All the time

17. From whom have you received social pressure or been bullied inside or outside your

workplace: Employees/visitors?

- Never
- Almost never
- Occasionally
- Almost all the time
- All the time
- 18. From whom have you received social pressure or been bullied inside or outside your

workplace: Family members?

- Never
- Almost never
- Occasionally
- Almost all the time
- All the time
- 19. From whom have you received social pressure or been bullied inside or outside your

workplace: Friends?

- Never
- Almost never
- Occasionally
- Almost all the time
- All the time

20. From whom have you received social pressure or been bullied inside or outside your

workplace: Strangers?

- Never
- Almost never
- Occasionally
- Almost all the time
- All the time

Section D: Contributors to social pressure/bullying

21. To what extent does what gender of individuals being female make you feel social

pressure/bullying?

- Never
- Almost never
- Occasionally
- Almost all the time
- All the time
- 22. To what extent does what gender of individuals being male make you feel social

pressure/bullying?

- Never
- Almost never
- Occasionally
- Almost all the time
- All the time
- 23. Do you think social pressure/bullying is due to perceived power imbalance/abuse of

power?

- Yes
- No
- I do not know

Section E: Frequency and Perceptions towards social pressure/bullying

24. Which of the following types of bullying have you witnessed while using personal

protective personal protective equipment at your workplace?

- Verbal bullying
- Physical bullying
- Social bullying
- Cyberbullying
- Others
- 25. To what extent do you feel concerned about social pressure/bullying for using personal

protective equipment in your workplace?

- Not worried at all
- Somewhat concerned
- Somewhat concerned
- Moderately concerned
- Extremely concerned

26. Do you agree that the social pressure/bullying was intentional?

- Strongly disagree
- Disagree
- Neither agree nor disagree

- Agree
- Strongly agree

27. How concerned are you about social pressure/bullying due to the use of personal

protective equipment?

- Not worried at all
- Somewhat concerned
- Somewhat concerned
- Moderately concerned
- Extremely concerned
- 28. How often do you feel you are a victim of such social pressure/bullying due to the use of

personal protective equipment?

- Daily
- Weekly
- Monthly
- Never

29. How long have these episodes lasted?

- Less than one minute
- Few minutes
- Days
- Weeks

Section F: Attitudes and Job Satisfaction

30. How do you cope with social pressure/bullying?

- Avoiding social gatherings
- Avoiding social networks
- Avoiding other colleagues
- Seeking professional help
- I don't know
- Not paying attention to comments
- Other
- 31. Have you been infected with COVID-19?
 - Yes
 - No
- 32. Do you think that social pressure/bullying was a contributing factor to your reduced use of personal protective reduced use of personal protective equipment on your part?
 - Yes
 - No
 - I do not know
- 33. Who provided you with the personal protective equipment during the pandemic of the

COVID-19 PANDEMIC?

- Institution
- Donation
- For own account
- Other
- 34. Do you think your institution prioritized your mental and physical well-being during the

COVID-19 pandemic?

- Strongly disagree
- Disagree
- Neither agree nor disagree
- Agree
- Strongly agree
- 35. How does your institution support you? You can choose from multiple options
 - Provided the supply of personal protective equipment.
 - Provided IPC training
 - Provided COVID-19 specific training.
 - Psychosocial support
 - Incentives
 - None of the above
 - Other
- 36. Do you feel that your institution assumes responsibility for providing you with adequate

personal protective equipment when you care for patients with COVID-19?

- Strongly disagree
- Disagree
- Neither agree nor disagree
- Agree
- Strongly agree
- 37. Have you considered quitting your current job due to social pressure/bullying during the

COVID-19 pandemic?

• Yes

• No

38. Have you sought other employment due to social pressure/bullying during the COVID-19

pandemic?

- Yes
- No

39. Have you noticed members of the community outside your place of work bullying you

because you wear personal protective equipment?

- Yes
- No

40. How would you currently rate your overall job satisfaction as a health care worker?

- Very dissatisfied
- Dissatisfied
- Not sure
- Satisfied
- Very satisfied