

## SEHAT Measures

Measure	Domain	Question	Feb. 2022	Jun. 2022	Oct. 2022	Feb. 2023	Jun. 2023
<b>Mental Health – Children (Self-Reported)</b>							
<b>Revised Children's Anxiety and Depression Scale (RCADS) – Ages 8-19</b>	Depression	You feel sad or empty	✓	✓	✓	✓	✓
		Nothing is much fun anymore	✓	✓	✓	✓	✓
		You have trouble sleeping	✓	✓	✓	✓	✓
		You have problems with my appetite	✓	✓	✓	✓	✓
		You have no energy for things	✓	✓	✓	✓	✓
		You are tired a lot	✓	✓	✓	✓	✓
		You cannot think clearly	✓	✓	✓	✓	✓
		You feel worthless	✓	✓	✓	✓	✓
		You feel like I don't want to move	✓	✓	✓	✓	✓
		You feel restless	✓	✓	✓	✓	✓
<b>Spence Children's Anxiety Scale (SCAS) – Ages 8-19</b>	Anxiety	You worry about things	✓	✓	✓	✓	✓
		You feel afraid	✓	✓	✓	✓	✓
		When you have a problem, you get a funny feeling in your stomach	✓	✓	✓	✓	✓
		When you have a problem, your heart beats really fast	✓	✓	✓	✓	✓
		You worry that something bad will happen to you	✓	✓	✓	✓	✓
		When you have a problem, you feel shaky	✓	✓	✓	✓	✓
<b>Mental Health – Children (Adult-Reported)</b>							
<b>Pediatric Symptom Checklist (PSC) – Ages 5-19</b>	Depression	Feels afraid	✓	✓	✓	✓	✓
		Feels hopeless	✓	✓	✓	✓	✓
		Is down on self	✓	✓	✓	✓	✓
		Worries a lot	✓	✓	✓	✓	✓
		Seems to have less fun	✓	✓	✓	✓	✓
<b>Spence Children's Anxiety Scale (SCAS) – Ages 7-19</b>	Anxiety	My child worries about things	✓	✓	✓	✓	✓
		When my child has a problem, s/he complains of having a funny feeling in his/her stomach	✓	✓	✓	✓	✓
		My child complains of feeling afraid	✓	✓	✓	✓	✓
		When my child has a problem, s/he complains of his/her heart beating really fast	✓	✓	✓	✓	✓
		My child worries that something bad will happen to him/her	✓	✓	✓	✓	✓
		When my child has a problem, s/he feels shaky	✓	✓	✓	✓	✓
<b>Spence Preschool Anxiety Scale (PAS) – Ages 5-6</b>	Anxiety	Has difficulty stopping him/herself from worrying	✓	✓	✓	✓	✓
		Is tense, restless or irritable due to worrying	✓	✓	✓	✓	✓
		Has trouble sleeping due to worrying	✓	✓	✓	✓	✓
		Spends a large part of each day worrying about various things	✓	✓	✓	✓	✓
		Asks for reassurance when does not seem necessary	✓	✓	✓	✓	✓

Mental Health – Adults							
<b>Patient Health Questionnaire-9 (PHQ-9)</b>	Depression	Little interest or pleasure in doing things in the past 2 weeks	✓	✓	✓	✓	✓
		Feeling down, depressed or hopeless in the past 2 weeks	✓	✓	✓	✓	✓
		Trouble falling or staying asleep, sleeping too much in the past 2 weeks	✓	✓	✓	✓	✓
		Feeling tired or having little energy in the past 2 weeks	✓	✓	✓	✓	✓
		Poor appetite or overeating in the past 2 weeks	✓	✓	✓	✓	✓
		Feeling bad about yourself – that you are a failure or have let yourself or your family down in the past 2 weeks	✓	✓	✓	✓	✓
		Trouble concentrating on things, such as reading newspaper or watching TV in the past 2 weeks	✓	✓	✓	✓	✓
		Moving or speaking so slowly that other people could have noticed? Or so fidgety or restless that you have been moving a lot more than usual in the past 2 weeks	✓	✓	✓	✓	✓
		Thoughts that you'd be better off dead or thoughts of hurting yourself in the past 2 weeks	✓	✓	✓	✓	✓
<b>Generalized Anxiety Disorder-7 (GAD-7)</b>	Anxiety	Feeling nervous, anxious or on edge in the past 2 weeks	✓	✓	✓	✓	✓
		Not being able to stop or control worrying in the past 2 weeks	✓	✓	✓	✓	✓
		Worrying too much about different things in the past 2 weeks	✓	✓	✓	✓	✓
		Trouble relaxing in the past 2 weeks	✓	✓	✓	✓	✓
		Being so restless that it's hard to sit still in the past 2 weeks	✓	✓	✓	✓	✓
		Becoming easily annoyed or irritable in the past 2 weeks	✓	✓	✓	✓	✓
		Feeling afraid as if something awful might happen in the past 2 weeks	✓	✓	✓	✓	✓
COVID-19 and Physical Health							
<b>COVID-19 Illness and Severity, Self and Network</b>	COVID-19	Member: Had COVID at least once	✓	✓	*	*	✗
		Member: Were severely ill due to COVID	✓	✓	*	*	✗
		Member: Died of COVID	✓	✓	*	*	✗
		Neighbors: Had COVID	✓	✓	*	*	✗
		Neighbors: Were severely ill due to COVID	✓	✓	*	*	✗
		Neighbors: Died of COVID	✓	✓	*	*	✗
		Friends/Relatives: Had COVID	✓	✓	*	*	✗
		Friends/Relatives: Were severely ill due to COVID	✓	✓	*	*	✗
		Friends/Relatives: Died of COVID	✓	✓	*	*	✗
		Others you know: Had COVID	✓	✓	*	*	✗
		Others you know: Were severely ill due to COVID	✓	✓	*	*	✗
Others you know: Died of COVID	✓	✓	*	*	✗		
<b>Medical History and Healthcare Utilization</b>	Health Status	In the last 4 months, was sick and needed medical care?	✓	✓	✓	✓	✓
		Received medical care for this illness	✓	✓	✓	✓	✓
		Has a history of diabetes, hypertension, heart problems, or paralysis?	✓	✓	✓	✓	✓

		Did this condition start in the last four months?	✓	✓	✓	✓	✓
		Was able to get their routine care for any chronic/long term condition(s) during the lockdowns of 2020?	✓	✓	✓	✓	✓
		In the last 4 months did you access/get care for problems such as feeling low, depressed, anxious, stressed, or having trouble sleeping?	✗	✗	✗	✓	✗
		What type of care did you receive?	✗	✗	✗	✓	✗
		At any time since the beginning of the pandemic (March 2020) did anyone in your household seek care for mental health?	✓	✗	✗	✗	✗
		In the last 4 months did anyone in your household seek care for mental health?	✗	✓	✓	✓	✓
		In the last 4 months did anyone else other than you in your household access/get care for problems such as feeling low, depressed, anxious, stressed or having trouble sleeping?	✗	✗	✗	✓	✓
		How confident are you in your family's ability to handle some of the bad things (like a serious illness or income-loss) that may happen over the next year?	✗	✗	✗	✓	✗
<b>Vaccination History (Children)</b>	Health Status	Any vaccination done till now?	✓	✓	✓	✓	✓
		BCG vaccination against tuberculosis (TB) taken till now?	✓	✓	✓	✓	✓
		Polio vaccine, that is, drops in the mouth (No of times) taken till now?	✓	✓	✓	✓	✓
		A DPT vaccination (No of times) taken till now?	✓	✓	✓	✓	✓
		MMR/Measles vaccination done till now?	✓	✓	✓	✓	✓
<b>ANC visits</b>	Health Status	No. ANC visits that mother had during pregnancy till now	✓	✓	✓	✓	✓
<b>Activities of Daily Living (Adults)</b>	Health Status	Has difficulty remembering or concentrating?	✓	✓	✓	✗	✗
		Has difficulty walking or climbing steps?	✓	✗	✗	✗	✗
		Washing all over or dressing?	✓	✗	✗	✗	✗
		Till now, had some difficulty walking 100 meters?	✓	✓	✓	✗	✗
		Till now, had some difficulty lifting or carrying weights over 5 kilos, like a heavy bag of groceries (or a large bag of rice)?	✓	✓	✓	✗	✗
		Till now, had some difficulty dressing, including putting on chappals and shoes?	✓	✓	✓	✗	✗
		Till now, had some difficulty climbing one set of stairs?	✓	✓	✓	✗	✗

Social Environment – Children							
Time Use	Leisure, Learning, and Working Time	Playing outdoors in the last one week	✓	✓	✓	✓	✓
		Playing indoors with friends/family in the last one week	✓	✓	✓	✓	✓
		Spending time alone in the last one week	✓	✓	✓	✓	✓
		Time in physical classes / school in the last one week	✗	✓	✓	✓	✓
		Studying, including online classes and tuitions (not in person at school) in the last one week	✓	✓	✓	✓	✓
		Household work in the last one week	✓	✓	✓	✓	✓
		Have arguments/shouting increased in your house since March 2020 compared to earlier?	✓	✗	✗	✗	✗
<p>✓ Question was assessed at the timepoint.</p> <p>* Question was assessed only for participants who had not been assessed during Feb 2022 or June 2022.</p> <p>✗ Question was not assessed at the time point.</p> <p>NB: For analyses, SEHAT module items are merged with modules already being collected as part of CPHS regular data collection schedule, which include information on a broad range of social and economic variables.</p>							