Appendix 1. Multidimensional Scale of Perceived Social Support [MSPSS]

Instructions: We are interested in how you feel about the following statements. Read each statement carefully. Indicate how you feel about each statement.

Circle the "1" if you **Very Strongly Disagree**Circle the "2" if you **Strongly Disagree**Circle the "3" if you **Mildly Disagree**Circle the "4" if you are **Neutral**Circle the "5" if you **Mildly Agree**Circle the "6" if you **Strongly Agree**Circle the "7" if you **Very Strongly Agree**

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

Appendix 2. Sociodemographic and Personal Questionnaire

- 1. How old are you?
- 2. What is your gender? (man/woman/other)
- 3. What is your marital status? (single/in relationship/married/separated/divorced/widowed/other)
- 4. How many children do you have? (0/1/2/3/4 or more)
- 5. What is your level of education? (12 years or less, without diploma/12 years with diploma/B.A./M.A. or higher/other)
- 6. What is your occupation? (office job/physical job/housewife/retired unemployed/other)
- 7. What is your socioeconomic status? (low/low-average/average/average-high/high)
- 8. What is your level of religious observance? (secular/traditional/ultraorthodox)
- 9. Do you have any medical or functional restrictions/disabilities? If yes, please specify (yes/no)
- 10. Are you currently on medication for a chronic condition? (yes/no)
- 11. Do you have a previous history of depression/anxiety? (yes/no)
- 12. Have you taken antidepressants or tranquilizers in the past? (yes/no)
- 13. What is your current state of health? (healthy/healthy but in quarantine/diagnosed with COVID-19 currently in quarantine/have another disease)
- 14. Do you know people diagnosed with COVID-19? (yes/no)
- 15. If you know people diagnosed with COVID-19, what is the severity of the disease from 1 (not severe at all) to 10 (very severe)? If you know more than one person, please refer to the person closest to you.
- 16. If you know people diagnosed with COVID-19, what is the degree of proximity from 1 (not close at all) to 10 (very close)? If you know more than one person, please refer to the one you consider the closest to you.
- 17. Do you know someone who has died of COVID-19? (yes/no)
- 18. What is your occupational status as a result of the COVID-19? (full time job/partially employed/unpaid vacation/lost my job/unemployed/retired)
- 19. In your opinion, what are your chances of returning to your previous field of activity after the current crisis? (very likely/somewhat likely/not very likely)
- 20. Are the financial resources available to you sufficient for the next 3 months? (not enough at all/hardly enough/enough/definitely enough/my resources will suffice for the next 3 months but not for a year)

- 21. On average, how many hours a day do you spend on media news updates (TV/Radio/Internet)? (none at all/1 h or less/1-2 h/2-3 h/more than 3 h)
- 22. Did you exercise regularly prior to the lockdown? (yes/no)
- 23. Have you kept up your exercise regime at home during COVID-19? (yes/no)

Appendix 3. Acronyms

COVID-19: Coronavirus disease 2019

MSPSS: Multidimensional Perceived Social Support Scale

GAD-7: Generalized Anxiety Disorder-7 Score

SARS-COV-2: Severe Acute Respiratory Syndrome Coronavirus 2

IQR: Interquartile Range

OR: Odds Ratios

SARS: Severe Acute Respiratory Syndrome

PTSD: Post-Traumatic Stress Disorder

CI: Confidence Interval