

## Appendix

**Table A1.**  
**Pandemic grief risk factors (PGRF)**

<b>PGRF</b>				
Over the last 2 weeks, how often have you experienced the following thoughts, feelings, or behaviors related to your loss?	Not at all	Several days	More than half the days	Nearly everyday
1. I felt guilty about not being able to be there for the deceased before he/she died.	0	1	2	3
2. I felt upset about how the deceased died (e.g. alone or suffering).	0	1	2	3
3. I felt upset that the deceased was not given a proper funeral or memorial service.	0	1	2	3
4. I kept thinking about what I could have done to prevent the deceased's illness.	0	1	2	3
5. I felt that the circumstances of the death created emotional distance between us.	0	1	2	3
6. I worried that I will lose other people I care for to the same disease.	0	1	2	3
7. I kept having images of the deceased struggling for life on some machine.	0	1	2	3
8. I resented that the doctors didn't keep me informed about the deceased's condition.	0	1	2	3
9. I felt too alone in my grief because of social isolation policies to control the pandemic.	0	1	2	3
10. I questioned why God or the universe is punishing us in this way when I thought about the deceased.	0	1	2	3
Column totals	_____+	_____+	_____+	_____+
				Total score

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Table 2. Coronavirus Anxiety Scale 2.0 (CAS 2.0)

How often have you experienced the following activities over the last week?	Never	Rarely, 1-2 days	Sometimes, 3-4 days	Often, 5-6 days	Every day
1. I felt dizzy, lightheaded, or faint, when I read or listened to news about the coronavirus.	0	1	2	3	4
2. I had trouble falling or staying asleep because I was thinking about the coronavirus.	0	1	2	3	4
3. I felt paralyzed or frozen when I thought about or was exposed to information about the coronavirus.	0	1	2	3	4
4. I lost interest in eating when I thought about or was	0	1	2	3	4
5. I felt nauseous or had stomach problems when I thought about or was exposed to information about the coronavirus.	0	1	2	3	4
Column Totals	_____ +	_____ +	_____ +	_____ +	_____ +
				Total Score _____	

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Table 1. Pandemic Grief Scale (PGS).

PGS				
Over the last 2 weeks, how often have you experienced the following thoughts, feelings, or behaviors related to your loss?	Not at all	Several days	More than half the days	Nearly everyday
1. I wished to die in order to be with the deceased.	0	1	2	3
2. I experienced confusion over my role in life or felt like my identity was diminished because of the loss.	0	1	2	3
3. Nothing seemed to matter much to me because of this loss.	0	1	2	3
4. I found it difficult to have positive memories about the the deceased.	0	1	2	3
5. I believed that without the deceased, life was either meaningless, empty, or could not go on.	0	1	2	3
Column Totals	_____ +	_____ +	_____ +	_____ +
				Total Score _____

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## NEIMEYER AND LEE REFERENCES

[www.portlandinstitute.org](http://www.portlandinstitute.org)

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