Supplementary Table S1: Questions and answers used in the present analysis derived from the questionnaire of the international student wellbeing survey. For further information please read [16].

Question	Answer categories
Your gender is	Male; Female; Other
Your age is	[given in years]
Are you currently in a steady relationship?	no, I am single; Yes; It is complicated
Are you born in Denmark	Yes; No
What is the highest level of education your mother has completed?	Less than secondary education; Secondary
	education (high school); Higher education;
	Do not know
Indicate which of the following best describes your field of study?	Country specific categorization was used
In which study program are you currently enrolled?	Bachelor program; Master program;
	Doctoral program; Other, please specify
At which higher-education institution are you currently enrolled?	Country specific list was used
To what extent do you agree with the following statement?	Strongly agree; Agree; Neither agree nor
'I had sufficient financial resources to cover my monthly costs'	disagree; Disagree; Strongly disagree
Before the COVID outbreak:	
Where did you mainly live (excluding weekends and holidays)?	I stayed with my parent(s); I stayed in a
Before the COVID outbreak:	student hall of the university/college; a
	boarding home or a dormitory; I rented an
	accommodation with others; I rented an
	accommodation by myself; Other
On average, how often did you smoke tobacco (cigarettes or cigars)?	(Almost) never; Less than once a week;
Before the COVID outbreak:	Once a week; More than once a week;
	(Almost) daily; Prefer not to say
On average, how many glasses of alcohol did you drink in one week? Before the COVID outbreak:	[number of glasses]
On average, how often did you perform vigorous physical activities	(Almost) never; Less than once a week;
like lifting heavy things, running, aerobics, or fast cycling for at least	Once a week; More than once a week;
30 minutes?	(Almost) daily
Before the COVID outbreak:	
Do you have any of the following underlying conditions?	Heart disease; Lung disease (including
(multiple options are possible)	moderate or severe asthma); Kidney
	disease; Diabetes; High blood pressure;
	Immunocompromised conditions (e.g.,
	bone marrow or organ transplantation, HIV,
	prolonged use of corticosteroids); A recent
	cancer diagnosis; Obesity; None of these
	conditions; Prefer not to say
Did you have COVID-19, or do you currently have it?	Yes, confirmed by a lab test; Yes, a health
	care provider told me that I probably
	had/have it, but a lab test did not confirm
	it; I think I had or currently have COVID-19,
	it; I think I had or currently have COVID-19, but a health care provider did not confirm
	it; I think I had or currently have COVID-19, but a health care provider did not confirm it; No, I do not think I had or currently have
How worried are you	it; I think I had or currently have COVID-19, but a health care provider did not confirm it; No, I do not think I had or currently have it
How worried are you to get infected with COVID-19?	it; I think I had or currently have COVID-19, but a health care provider did not confirm it; No, I do not think I had or currently have
How worried are you to get infected with COVID-19? Do you know anyone on your personal network that was or	it; I think I had or currently have COVID-19, but a health care provider did not confirm it; No, I do not think I had or currently have it "Not worried at all" until "Very worried" in

Question	Answer categories
To what degree do you adhere to the COVID-19 measures that are	"Totally not" to "Very strictly" in a score
currently implemented by the government?	from 0 to 10
Please indicate how much of the time during the past week	None or almost none of the time; Some of
you felt depressed (a)	the time; Most of the time; All or almost all
you felt that everything you did was an effort (b)	of the time
your sleep was restless (c)	
you were happy (d)	Depression scale – CES-D (Radloff et al.
you felt lonely (e)	1991)
you enjoyed life (f)	,
you felt sad (g)	
you could not get going (h)	
you were bored (i)	
you were frustrated with things in general (j)	
you felt anxious (k)	
you felt calm and peaceful (I)	
you lacked companionship (m)	
felt isolated from others (n)	
Please indicate which of the following statements are true or false:	True; False; Don't know
(a) The virus survives for days outside the body in the open air	
(b) The virus survives for a week outside the body on a plastic	
surface.	
(c) Most people who get COVID-19 get very ill.	
(d) A possible vaccine will take around 12 to 18 months to produce.	
(e) Smokers who get COVID-19 are more likely to get ill than non-	
smokers.	
(f) You can have the virus without any symptoms.	
(g) On average, children get less ill from the virus than adults.	
(h) Only elderly people die from COVID-19.	
The questions in this scale ask you about your feelings and thoughts	Never; Almost never; sometimes; Fairly
during the last month. In each case, please indicate with a check	often; Very often
how often you felt or thought a certain way.	•
1. How often have you felt that you were unable to control the	Short form of Cohen's perceived stress scale
important things in your life?	(Cohen et al. 1983)
2. How often have you felt confident about your ability to handle	,
your personal problems?	
3. How often have you felt that things were going your way?	
4. How often have you felt difficulties were piling up so high that	
you could not overcome them?	