

WORLD HEALTH SURVEY



GUIDE TO ADMINISTRATION AND QUESTION BY QUESTION SPECIFICATIONS

Short Questionnaire

World Health Organization 2002

SECTION I

HOW TO ADMINISTER THE QUESTIONNAIRE

1. OBJECTIVES

The questionnaire for the World Health Survey has been developed by WHO to compile comprehensive baseline information on the health of populations. The instrument is intended to be used in different cultures and settings, and has already been translated into several local languages.

The instrument consists of 2 parts:

- SHORT QUESTIONNAIRE:
 - Household Questions
 - Individual Questions
- SHORT QUESTIONNAIRE: APPENDICES (KISH Tables, Vignettes, Cards)

The modules are the following:

SHORT QUESTIONNAIRE:

0000-0800: Household Questions

- 0000 – Coversheet
- 0100 - Sampling
- 0200 - Geocoding
- 0300 - Recontact Information
- 0350 - Contact Record
- 0400 - Household Roster
- 0450 - KISH Tables
- 0490 - Informed Consent Form
- 0500 Household Questionnaire
- 0570 Household Care
- 0700 Permanent Income Indicators
- 0800 Household Expenditure

1000-8000: Individual Questions

- 1000 - Socio Demographic Characteristics
- 2000 - Health State Descriptions
- 6000 - Coverage
- 7000 - Health System Responsiveness
- 8000 - Health Goals

9000: Interviewer Observations

SHORT QUESTIONNAIRE : APPENDICES

KISH Tables (S0450), Response Scales (2000, 7000)

2000- Health State Descriptions: Vignettes

4000- Risk Factors: Cards

7000- Health System Responsiveness: Vignettes

This manual is to be used as a training tool for interviewers when administering the questionnaire.

2. RESPONDENTS

The questionnaire is to be administered to adults aged 18 or older from different educational and cultural backgrounds. The respondent does not need to be literate. However, depending on the respondent's age, maturity and cognition, as well as the place where he comes from, some questions or concepts may be more difficult to understand than others. Cards (i.e. written prompts) will be provided to respondents as a memory aid.

3. DURATION OF INTERVIEWS

The interview is expected to last on average 30 minutes but may take longer depending on the comprehension and literacy level of the respondent. Respondents who have problems with language, are less educated, are very talkative or have many difficulties because of their health condition may take longer to answer questions.

4. CONDUCTING THE INTERVIEW IN PRIVATE

The respondent should be interviewed in private and ideally no other member of the household should be present. If total privacy is not possible, the respondent may have to be interviewed outside the house. However, in cases where the respondent wants someone to be there during this interview, exceptions to the rule could be considered.

5. SURVEY QUESTIONS

Different types of questions and response categories are used throughout the questionnaire.

a. Types of questions

- *Close-ended questions:* respondents must choose among the options already provided to them.

S2002. Overall in the last 30 days, how much difficulty did you have with moving around?

None	Mild	Moderate	Severe	Extreme/ Cannot do
1	2	3	4	5

- *Open-ended questions*: respondents must give the answer in their own words.

S7300. What was the name of the last health care provider you [your child] used in the last 12 months ? [Interviewer: try get the name of the clinic or health centre, rather than the doctor, if the respondent used a clinic or health centre. If the respondent was visited at home, write “home visit”].

b. Types of response choices

- *Categorical choices*: respondents must choose the category that best applies to them.

S1008. What is your current marital status?

Never Married	Currently Married	Separated	Divorced	Widowed	Cohabiting
1	2	3	4	5	6

- *Ordinal choices*: respondents must rate or order choices.

S1003. If you don't know/don't want to tell me your age could you tell me the age range if I read the different options to you? (**choose what is most appropriate**)

18-19	20-29	30-39	40-49	50-59	60-69	70+
1	2	3	4	5	6	7

- *Numerical choices*: respondents must provide numbers, such as age, height or weight

S1010. How many years of school, including higher education, have you completed?

Number of years _____

6. RECORDING TIME

Time is recorded several times during the interview. The time variable is stated as “Time Begin” to mark the beginning of the interview and “Time End” to mark the end. Time should be recorded following international conventions.

00 = MIDNIGHT	12.00 = 12PM
01.00 = 1AM	13.00 = 1PM
02.00 = 2AM	14.00 = 2PM
03.00 = 3AM	15.00 = 3PM
04.00 = 4AM	16.00 = 4PM
05.00 = 5AM	17.00 = 5PM
06.00 = 6AM	18.00 = 6PM
07.00 = 7AM	19.00 = 7PM
08.00 = 8AM	20.00 = 8PM
09.00 = 9AM	21.00 = 9PM
10.00 = 10AM	22.00 = 10PM
11.00 = 11AM	23.00 = 11PM

Time should be recorded using 4 digits: **09:00**

Time should be recorded during 20% interviews.

SECTION III

GENERAL INTERVIEWING GUIDELINES

A. GENERAL OVERVIEW

1. STANDARDIZATION

Standardization means that every interviewer must conduct the interview the same way with each respondent. This is done to minimize differences in responses that might occur if formatting conventions or interviewing techniques changed with every respondent. A respondent might answer very differently if he was to be interviewed with other people in the room or if the interviewer was unpleasant or patronizing. Likewise, a rushed interview or the interviewer's lack of interest may greatly affect responses. Research has shown that the interviewer can have an effect on the data collection because of four factors: socioeconomic background, unconventional administration of the questionnaire, wording and intonation, and reaction to respondent's difficulties in understanding the questionnaire. Except for the interviewer's background, the other three factors can be addressed in training.

2. ROLE OF INTERVIEWER

The interviewer is responsible for asking questions, answering the respondent's queries, recording answers and editing the completed questionnaire. S/he must check that the respondent has understood the questions by using interviewing techniques, such as neutral probes, clarification and appropriate feedback, and determine whether the answer given is appropriate. Listening to what the respondent is communicating, both verbally and non-verbally, will ensure that the information is correct. The interviewer must set the pace of the interview and keep the respondent focused and interested. The atmosphere should be comfortable and pleasant at all times.

Before going to the field, the interviewer must know the questionnaire and how it is to be administered. A thorough preparation as well as extensive practice will guarantee that this is achieved.

3. ROLE OF RESPONDENT

The role of the respondent is to cooperate with the interviewer and follow his instructions. S/he must listen to questions attentively without interrupting, take his/her time before answering, and try to give an accurate and complete response as much as possible. The respondent should ask for clarifications whenever a question seems unclear to him/her and ask the interviewer to repeat or rephrase it. Trying to answer an unclear question is likely to lead to an incorrect response.

4. ROLE OF SUPERVISOR

The role of the supervisor is to monitor the progress and quality of the data collection, and ensure that interviewers are performing work. This includes handling the logistics of the survey, coordinating with other staff, recruiting and training additional interviewers, and supervision. Supervision must be given to interviewers before, during, and after the interview. Supervisors must not only check that contact procedures are followed correctly but that interviews are conducted appropriately. They should be present for 10 interviews and ensure that standardized interviewing techniques are observed when asking questions, clarifying, probing and giving feedback in a non-directive manner. After the interview has been conducted, they must also check that data is coded and entered correctly. Supervisors must give feedback and debrief on a regular basis, in order to update the organization responsible for the study on the progress of the survey and any problems that have arisen.

B. QUESTIONNAIRE CONVENTIONS

Objectives

- Identify and use interviewer instructions correctly throughout the questionnaire
- Recognize typographical conventions and what they mean
- Learn how to use visual aids

1. INTERVIEWER INSTRUCTIONS

- Anything written in standard print is to be read to the respondent.

Example:

S2000. Overall in the last 30 days, how much difficulty did you have with moving around?

- Anything written in *italics* and in **bold** (uppercase or lowercase) is an interviewer instruction and should not be read aloud

Example:

Section 6100. *Questions to be asked to FEMALE respondents aged 18-69 only.*

Example:

Module 8000. **READ TO RESPONDENT:**

2. SKIPS WITHIN QUESTIONS

- Skip instructions are shown in bold and usually in the far right column. Skipped questions must be left blank.

Example:

S1002	<u>How old are</u> you? (Years)		888. DK	If age known: Go to S1004
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3. UNDERLINED TYPE

- Words, which are underlined within questions, are key words or phrases that need to be emphasized when read to the respondent.

Example:

S1008. What is your current marital status?

4. VERBATIM ENTRIES

- *A line following the question indicates where the response must be recorded. Responses should never be changed but recorded exactly as stated.*

Example:

S1004: Your weight in Kilos? _____

- In some question an option with “other” must be specified:

Example:

S6206. Other oral treatment

1. Yes: Specify _____

5. No

5. PARENTHESIS

- Items in parentheses () contain examples to illustrate a point and are to be read to the respondent. Alternative examples that are culturally appropriate may be substituted.

Example:

S2007. In the last 30 days, how much difficulty did you have in seeing and recognizing a person you know across the road (i.e. from a distance of about 20 meters)?

6. BRACKETS

- Items in brackets [] contain:
 - a. instructions to translators. English-speaking interviewers may also use these guidelines, whenever needed, to clarify a question and/or make it relevant to the respondent’s culture.

Example:

S0801. Food, including such things as [rice], meat, fruits, vegetables, and cooking oils.

- b. instructions to interviewers. Depending on the information that the respondent has provided in previous questions, the interviewer will choose the most appropriate option.

Example:

S6032. Was this period [of sadness/loss of interest/low energy] most of the day, nearly every day?

7. VISUAL AIDS

- The function of visual aids is to help respondents remember important information while answering questions and rate different items.

Visual aids include cue cards, sets of vignettes and cards, and response options.

Enough time must be allowed for respondents to examine the cards and think about their responses.

Interviewer instructions are given throughout the questionnaire so the interviewer knows when to produce the visual aids and how to use them. Practice is recommended beforehand in order to facilitate the flow of the interview.

C. INTERVIEWER INSTRUCTIONS

Objectives

- **Learn how to introduce yourself well**
- **Learn how to use interviewing techniques in a standardized way**

1. INTRODUCTION TO THE INTERVIEW

The interviewer must clearly communicate the objectives of the survey to the respondent. Knowing what is expected of him/her will contribute to the accuracy in responses. S/he should establish a good rapport by introducing himself/herself and the survey well.

Two things can be done:

- **Make a good impression**
 1. You are a professional interviewer from a legitimate and reputable organization.
 2. The questionnaire is for gathering data for important, worthwhile research.
 3. The respondent's participation is vital to the success of the research.
 4. The responses given will be confidential and will only be used for research purposes. Respondents will have to sign an informed consent form, which explains about the survey and what will be expected of them.

The interviewer can use the following introduction or decide which one works best.

Example of introduction:

"Hello my name is...and I work for.... The reason I am contacting you is because we are conducting a survey on health in your country and I would like to ask you a few questions. Let me assure you that whatever information you tell us will not be disclosed to anyone and will only be used for research purposes".

- **Make a good interview start**
 1. You should be pleasant and assertive, and make the respondent feel at ease.
 2. You should know the questionnaire thoroughly and be well prepared to answer any questions.
 3. You should speak slowly and clearly to set the tone for the interview.
 4. You should adapt your introduction to the respondent, as different respondents require different amounts of information.
 5. You should be motivated and interested in the interview.

2. ASKING QUESTIONS

When asking the questions, the interviewer should point out that there are no right or wrong answers and that the interview is not a test. It is important to ask questions according to certain rules to avoid biased answers and ensure comparability of data.

All options must be read aloud to the respondent except for DK, Refuse, NA and other.

- Read the questions as they are written in the text. Do not change the wording.
- Do not change the order of the questions.
- Read the questions slowly and clearly, emphasizing key words underlined.
- Read the questions in a pleasant voice that conveys interest and professionalism.
- Maintain good eye contact and adopt body language that is culturally appropriate.
- Read the entire question to the respondent and make sure s/he has heard it completely.
- Do not skip questions even if the respondent has given the answer earlier.
- Verify information given by respondent earlier, acknowledging the information s/he has already provided.

Assumptions should never be made about the respondents' answers because of their health condition or lifestyle. The interviewer may be tempted to skip certain questions because of assumptions or make comments such as "I know this probably doesn't apply to you, but..." This practice may prevent getting accurate and unbiased information or learn to what extent answers to earlier questions actually do predict answers to later ones.

The interview should not be rushed and respondent must be allowed enough time to understand and answer a question. If s/he feels pressured to give a quick reply, s/he may answer anything that crosses his/her mind or say that s/he "doesn't know". In addition, trying to have a rushed interview will slow things down, as questions will need to be repeated a second time.

3. CLARIFICATION

Clarification is needed when the respondent:

- Is unable to answer the question asked.
- Does not seem to understand the question and gives an inappropriate reply.
- Does not seem to have heard the question.
- Is taking time to answer the question and hesitates.
- Asks about a specific part of the question to be repeated. It is acceptable for the interviewer to repeat only that part.
- Asks for one option to be repeated. The interviewer should read all options again but may omit one option if it has clearly been eliminated by the respondent.
- Asks for one term to be clarified. The interviewer should refer to the definitions provided in the manual when they exist. Otherwise the respondent should answer the question according to whatever the questions means to him/her.

4. PROBING

Probing is needed when the respondent:

- Seems to understand the question but gives a response that is not appropriate.
- Does not seem to understand what is asked.
- Misinterprets the question.
- Cannot make up his/her mind.
- Digresses from the topic or gives irrelevant information.
- Needs to expand on what s/he has said or clarify his/her response.
- Gives incomplete information or his/her answer is unclear.
- Says that s/he doesn't know the answer.

Probing techniques:

- Simply repeat the question. The respondent may come up with the right answer if s/he hears the question a second time.
- Pause. This gives the respondent time to collect his/her thoughts and expand on his/her answer if s/he has more to say. The interviewer must be sensitive enough to know when to use a pause and for how long. Usually a pause together with an expectant look or a nod will encourage communication.
- Repeat the respondent's reply. This is often a very effective way of having the respondent reflect of the answer s/he has just given. The interviewer can repeat the question as s/he is recording it.
- Use neutral introductions to avoid biasing responses. Do not ask leading questions or suggest answers such as "I guess you mean...", as they may influence the respondent. Instead say: "overall, generally speaking..." The interviewer should never give the impression that s/he approves or disapproves what the respondent says, or that his/her answer is right or wrong. If the respondent asks for his/her opinion, the interviewer should say that s/he is interested in what the respondent has to say and that s/he needs to keep the interview going. (See Table 1)

Common probing situations

- Don't know (DK)

When the respondent says "I don't know" to a question, the general rule is to repeat the question. If the respondent still does not know, the interviewer should probe once before recording (DK). An effort at recall should be encouraged with a probe such as:

*Could you give me your best estimate?
Which would be closer?*

If there is no DK option, DK should be recorded in the left margin.
If after probing the answer is still “don’t know”, it may mean that the respondent:

- Does not understand the question but is afraid of saying it
 - Is taking time to think and wants to gain time
 - Does not want to answer because of personal reasons
 - Does not know or has no opinion
- Not applicable (NA)

Occasionally, the interviewer may ask a question that the respondent feels does not apply to him/her. The interviewer should ask him/her why the question does not apply to him/her and write down NA if it is clear that the question is irrelevant. If this option is not available, it should be recorded in the left margin.

In order for probing to be successful, the interviewer must be able to see why the respondent’s response is inadequate and does not answer what is asked. To avoid hurting the respondent’s feelings when s/he has been unclear, the interviewer should mention that perhaps s/he has misunderstood him/her.

5. FEEDBACK

It is important that the interviewer tells the respondent when s/he is doing well, that is between 30 and 50% of the time. It is also a way of maintaining control over the interview. This will keep the motivation going and encourage good performance. Acceptable performance includes the following:

- Listening to the whole question without interrupting
- Giving appropriate and complete answers to the questions
- Answering in a way that meets the objectives of the questions
- Avoiding digression

Feedback is needed when the respondent:

- Needs to focus and get his/her attention back on the question.
- Is digressing from the topic.
- Is making inappropriate or personal enquiries.
- Is performing well: listens attentively and answers appropriately.

Feedback techniques:

- Vary the type of feedback by using different phrases.
- Pause briefly after feedback.
- Give verbal as well as non-verbal, such as a smile or a nod.
- Use short feedback sentences for short responses and longer feedback sentences for longer responses.
- Note down some of the things the respondent says. This will motivate the respondent if s/he feels that was s/he is saying is important.

Feedback must always be neutral and the interviewer should acknowledge the respondent's performance by using the following feedback sentences:

Short feedback: to acknowledge responses to close-ended questions

Thank you/Thanks
I see
All right

Long feedback: to reinforce respondent motivation and attention on long series of questions, open-ended questions, or questions that are difficult for the respondent.

That is certainly useful/helpful information
It is useful to get your ideas on this
I see, that's helpful to know
That can be difficult to remember/answer

Task-related phrases: to acknowledge that what the respondent has said is important and worth recording.

Let me get that down
Let me make sure I have got that right (repeat answer)
Let me go over what you have just told me

In addition to listening to what the respondent is saying it is useful to pay attention to the gestures and tone of voice, as they can often give a better indication of what the respondent is trying to say if his verbal answer is confusing or inarticulate. Anger or frustration may not come through verbally but may be communicated non-verbally.

Situations requiring feedback

- Respondent makes inappropriate enquiries and asks for advice or information, or wants to know about the interviewer's personal experiences.

Suggested phrases:

In this interview, we are really interested in learning about your experiences.
When we finish, let us talk about that.
We will come to that later.

- Respondent digresses from the questions by giving lengthy responses or unnecessary information.

I have many more questions to ask so we should really move on.
If you would like to talk more about that, perhaps we can do it at the end of the interview.

- Respondent gives inappropriate responses or feels like conversing. Silence can be quite effective in this case.

Table 1 - STANDARD INTERVIEWING TECHNIQUES

Clarification	Probes	Neutral prefaces	Feedback
Overall ...	Can you be more specific?	Overall ...	I see ...
Generally speaking ...	What is your best estimate?	Well, in general ...	I get your point
Whatever ... means to you	What do you mean by that?	Generally speaking ...	That is useful information
Whatever you think is ...	In what sense are you saying that?	In the country as a whole	It is important to know what your opinion on this is
Let me repeat the question again	What do you think?	Let me repeat the question ...	Thank you for your clarification on this
Let me repeat the different options again	Which would be closer to your condition?	Yes, but ...	I understand what you are saying
The definition for ... is	Would you say that you strongly agree or disagree?	Of course, it is difficult to know	Your comments are very helpful
	Can you tell me more about that?	There are no right or wrong answers ...	Let me make a note of what you have just said
	Can you think of any other examples?	We are just interested in your opinion ...	Let me make sure I understand correctly
	How is that? In what way?	We all hope that ...	
	Anything else?		
	Can you explain?		

6. RECORDING INFORMATION

Rules for recording information

The questions must not only be asked correctly but also recorded correctly, in order to have unbiased and reliable data. The respondent's answers must all be noted down. It is important to record not only what the respondent said, but also how s/he said it, to be able to recreate the atmosphere of the interview and get an idea of the respondent's personality. A number of things can be done to achieve this:

a. Write down the responses during the interview

Responses must be transcribed while the respondent is talking, as the interviewer might not remember exactly what was originally said at a later stage.

b. Report what is said, the way it is said (verbatim reporting)

- Responses must be recorded word-for-word without trying to correct the grammar, phrases or expressions to preserve the flavour of individuality of each interview.
- Responses must not be summarized or paraphrased as data may be misreported or missed out. The length of the response, the words, examples and expressions used by the respondent, all provide valuable information.
- Anything that is related to the question should be noted even if the answer is long. Qualifications such as “if” and “but” should be especially recorded, as well as expressions showing intensity of feelings e.g. “very”, “a little”.
- Justifications such as explanations to a closed-ended question should not be recorded.
- Digressions should not be recorded, but only answers that are relevant to the survey.
- Hesitations, mumbling or feedback should not be recorded.
- Comments or explanations must be recorded in brackets in the questionnaire next to the corresponding question.
- Keep the respondent’s interest. If the interviewer is too absorbed recording the answers the respondent may get bored. It is useful to say the respondent’s response aloud as the interviewer writes it down. This will allow the respondent to modify his reply or expand on it once s/he hears it.

Tips for taking notes

- It is important to find a comfortable place for writing. The interviewer should sit in front of the respondent or in a place where what he writes cannot be seen.
- As soon as the respondent starts talking, the interviewer should start writing in order to reduce the waiting time for the next question.

Techniques for recording information

- Use a pencil for writing. It will be easier to erase any information from the questionnaire or rewrite words or sentences. The interviewer should not erase any notes made, as they can be useful. Red ink is not to be used as it is for editor’s corrections.
- The information must be legible. An illegible handwriting may not be of much use if only the interviewer can read it.
- Check that all the questions have been asked. If a question has been skipped by mistake, it can be corrected. If the respondent decides to change his/her mind on one of the options, the new answer must then be recorded.

- Each interview must be identified and the following information must be noted on each questionnaire: interviewer's name, research centre number, household ID, rotation code, interview number, and date of interview.

How to record information

a. Closed-ended questions

When a question requires that one option be circled, the interviewer must neatly circle the option, not the number. The number is for coding purposes. If an incorrect answer is circled because the respondent has changed his mind or because the interviewer has made a mistake, the answer should be crossed out with a (/) over it, and the correct option circled.

b. Open-ended questions

These questions should be filled in capital letters.

c. Fill-in questions

If entering number, answer should be in the appropriate box on the right-hand side or under the option.

d. Marginal notes

When the respondent gives an option, as well as additional descriptions such as "if", "except" or "but", such qualifications should be recorded the left margin since they may give important information to the researchers.

e. Uncertainty about the respondent's answer

If the interviewer is uncertain about a respondent's answer, the question should be repeated and the answer recorded exactly (i.e. paraphrasing a response when in doubt is not permitted). If the interviewer understands the response but is not sure about the coding, s/he should record enough information in the left margin for the coder to decide what it should be. S/he should also use a question mark (?) in the left margin to indicate the uncertainty to the editor.

If a question does not apply to a respondent and "NA" is not an option in the questionnaire, "NA" will then be recorded on the left margin and entered in the data entry program. Most questions will have "NA" in the program. The same thing will be done for the response "DK". If after probing, the respondent is unable to give an answer, "DK" should be recorded and later entered in the program.

f. Missing data

If any question is accidentally missed by the interviewer, the interviewer enters MISSED in the left margin of the form. This indicates to the coder that the question was not asked. During an interview, if an interviewer notices that s/he missed a question, s/he should go back and ask the question, making a note in the margin that the question was asked out of sequence. If the missing data is not discovered until after the interview, the researcher must recontact the respondent.

Refusals to answer questions should always be recorded. The interviewer should circle the “Refuse” option. Before accepting a refusal, the interviewer should explain the objective of the question to the respondent.

7. EDITING

Before leaving the household, the interviewer should review the questionnaire to check that it is complete and that no questions have been omitted. Right after the interview, the interviewer should spend time checking the questionnaire and make sure that:

- All the questions have been answered.
- The information recorded is clear and legible for others to read.
- Comments are being indicated between slashes.
- Open-ended questions are written in full sentences and not in abbreviations.
- The Interviewer Observations and Report is completed.

The interviewer should also edit the coversheet and check that:

- There is no missing information such as rotation code, interviewer’s name, interview number, date, length of interview and length of editing.
- The address is correct on the sample label.
- Every attempt call to the household is recorded, as well as the recontact information.

The interviewer should submit the completed to the study supervisor promptly, so that any errors in administration can be noted and procedures corrected before other interviews are completed incorrectly.

QUESTION BY QUESTION SPECIFICATIONS

This purpose of these question by question specifications is to provide background information as to what is intended by each question. Interviewers should use this information when respondents request clarification about specific questions and they do not know the answer. Interviewers and supervisors should refrain from offering their own interpretations.

In this section please note that the question is in bold as well as the interviewer's instructions. Skips to other questions are usually in *Italics*. This editing style is different to the one used in the questionnaire but has been adopted for practical reasons.

HOUSEHOLD QUESTIONS

0000 - COVERSHEET

Identification Information

S0001. Research Centre Number

Number of Research Centre undertaking the survey.

S0002. Respondent ID

Number that identifies the respondent.

S0003. Is this the initial or retest interview?

Initial interview: first time respondent is interviewed

Retest interview: second time respondent is interviewed

The retest should be done by a different interviewer.

S0003a. If retest interview, indicate number of days between initial and retest

The retest must be done within 1-7 days after the initial interviews have been conducted.

S0004. Rotation Code

Record here the form that was used for the individual questionnaire: A, B, C or D.

S0005. Interviewer ID

ID of person conducting the interview.

S0006. Name of interviewer

Name of person conducting the interview.

S0007. Total Number of calls

This is the number of contact calls that were attempted to contact the respondent. A maximum of 10 attempts should ideally be made. However, 3 or 4 calls may be more realistic in some countries. Each country will decide on the optimum number of calls and communicate this to WHO. Phone calls, which are not answered or messages left on answering machines, will not be counted as contact calls.

S0008. Date of final results

Date when interview took place.

S0009. Final result code

The result code corresponds to the result of the contact calls, whether or not the respondent accepted to do the interview and the reasons for non-interviews. No substitutions will be done if the respondent cannot do the interview. Another respondent will be drawn from the sample. Interviewers should fill in the Call Records Forms provided in the questionnaire specifying the reasons for non-interviews, as well as other contact information.

Date when the final result code was given after having made all the contact calls.

One of the following codes should be used to document the final result:

RESULT CODES FOR CONTACT CALLS

a. Initial Contact

- 01. Answering machine or answering service
- 02. Unable to contact (busy signal, dead tone, number has changed)
- 03. Respondent contacted – initial refusal
- 04. Respondent contacted – uncertain about interview
- 05. Resistance/refusal by household member

b. Final contact

• Completed interview

- 06. Completed Interview (interview is accepted and conducted)
- 07. Partial Interview (interview is partially completed and person will not be contacted anymore) because of illness or other reasons.

• Non-interview

- 08. Final Refusal by respondent
- 09. Final Refusal by household member
- 10. Unable to locate respondent
- 11. No interview because respondent is not eligible: less than 18, mentally unfit or too ill.
- 12. Language barrier
- 13. House is vacant or household occupants are elsewhere (e.g. seasonal vacancy, other residence)
- 14. Unsafe or dangerous area or no access to respondent
- 15. Deceased respondent
- 16. Respondent in institution: jail, hospital and not accessible

S0010. Date of editing

Date when supervisor edited the data.

S0011. Data entry

Dates when data was entered the first and second time.

0100. Sampling Information

S0100. Primary Sampling Unit (PSU) Number

List PSUs and codes.

For example if the PSU is ‘county’ and the respondent’s household is in ‘Riordan’ county, you write ‘Riordan’ for question 0100.

S0101. Secondary Sampling Unit (SSU) Name

Name of the secondary sampling unit level that the respondent belongs to.

S0102. Tertiary Sampling Unit (TSU) Name

Name of the tertiary sampling unit level that the respondent belongs to.

S0103. Quaternary Sampling Unit (QSU) Name

Name of the quaternary sampling unit level that the respondent belongs to.

S0104. Setting

The setting may be:

1. Urban
2. Peri-urban / Semi-urban
3. Rural
4. Other

Specify:

The countries must define these categories and provide the definitions to WHO to allow for comparison of data between countries. The category ‘Other’ is for countries who wish to use more specific divisions of setting than the four provided. Those countries using additional categories than the four provided must provide WHO with a list and definitions of categories used.

0200 - Geocoding Information

The Geocoding information is recorded for the cluster that the respondent belongs to, in the smallest sampling unit above the household level.

S0200. Latitude

Specify North or South of the equator

Specify position in degrees complete to five decimal points

S0201. Longitude

Specify East or West of the Greenwich meridian (Greenwich, England)

Specify position in degrees complete to five decimal points

S0202. Waypoint

The waypoint is the point on the ground where a Latitude/Longitude/Altitude measurement (specified in questions S0200 and S0201) was taken.

The waypoint may be:

1. The center of gravity of the cluster
- or
2. In front of the household
- or
3. Nearby location (park, parking lot, etc.)

0300. Recontact Information

0350. Contact Record

0400. Household roster

S0400 – S0406. Males

S0407 – S0413. Females

In the household rosters (columns A to I in coversheet and appendix), for items C (Age), D (Education) and E (Marital Status), the options provided in the questionnaire should be used.

All the males in the household should be entered first, starting with the oldest male, to the second oldest, to the third, until all males are listed. All the females should then be entered, from the oldest to the youngest female.

Column C (Age): Code here age in years completed; If the child is less than 1 year old, code "0".

A member of the household can either be someone who usually stays in the household, sleeps and shares meals, who has that address as primary place of residence, or who spends more than 6 months a year living there. The definition of household member would also apply to someone currently in an institution due to a health condition, prior to being institutionalized.

Depending on the household structure of each country, as defined in the sampling frame used in each country, each site will have to decide on the most appropriate definition. This information should also be provided to WHO.

0490. Informed Consent Form

S0490. Who was the Informed Consent Form read by?

S0491. Was the Informed Consent Form Agreed to and Signed / but Not Signed or Refused?

The interviewer must ask the respondent to read the Informed Consent Form before the interview or read it for him/her. S/he must make sure that the respondent understands what his/her participation involves before signing. The interviewer alone may sign the form if the respondent agrees to the interview but does not wish to sign or in cases where the respondent may be unable to sign e.g. if respondent is illiterate or has a severe vision impairment.

0500. Household Questionnaire

TO BE ASKED OF ALL HOUSEHOLDS

S0500. Who is the person who provides the main economic support for the household?

Record Line Number from Household Roster

The term "person who provides the main economic support" usually will mean the highest labour earnings, but also could be an individual who earns profits from a business, interest on assets, or receives a pension or other kind of public or private benefit.

If the person provides the main economic support for the household, but doesn't spend more than 6 months a year living there, s/he should not be listed in the household roster and should not be, therefore, listed under this question.

S0501. Note for Interviewer: Determine who is the 'Household Informant'

Record their Line Number from the Household Roster

The interviewer will have to determine the person in the household most knowledgeable about the household's health status, employment, financial condition, expenditures and health insurance. Several persons in the household may have to be spoken to in order to determine this. The person identified here may be different from the person coded on S0500.

If multiple people provide information on the household questionnaire, the person providing most of the information will be coded here.

The Household Questionnaire is to be administered to the "Household Informant", identified in S0501

S0570. Household Care

Is there anyone in your house who is in an institution (hospital, after care home, home for the aged, hospice etc.) due to their health condition?

Note to interviewer: If that person is picked randomly as the respondent they will be interviewed in the institution (if the condition is chronic and return to home in the near future is unlikely) or upon return to home (if the condition is acute and return to home is likely in the next 2 weeks).

If Yes:

RECORD LINE NUMBERS from Household Roster of all household members currently in an institution due to their health condition

0700. Permanent Income Indicators

We are interested in whether or not the household (or a member of the household) possesses the item in question. In questions requiring a yes/no answer, such as whether or not the household possesses a television, it does not matter how many televisions the household may have. Likewise, the condition of the television (whether it is working or not, no differentiation between colour and black/white, record any TV) as well as its value are not of interest. For bicycle record any bicycle, for adult or child. For clock record any clock in the household, except for a watch.

As the number of rooms record all rooms in the house, including all bathrooms, garage, anything that is a separate room.

Difficulties may arise if a household possesses a certain item that they say is borrowed, does not belong to them, or is shared with other people outside the household. In such cases, explain to the respondent that the key is whether or not the household has access to the asset in question on a regular basis. For example, one member of a household may drive a taxi for work, which he or she does not own. Since the household can use this taxi for transportation and other personal needs, the correct response as to whether or not the household possesses a car would be "Yes". You should provide such explanation to the respondent only if he or she asks you. Otherwise, simply mark their response and move on to the next question. It is NOT necessary for the respondent to show you a particular object in order to confirm that they possess it.

0800. Expenditures

The main purpose of this section is to find out how much people spend on health care services, and how large a share of total household spending goes to the purchase of health care services.

Instructions to Survey Institution:

S0801 should substitute the country's most common staple for "[rice]"

The interviewer should not force consistency between the totals reported in one question and the sum of answers in the following ones.

All amounts should be recorded in local currency. If the value was paid in-kind, then the local currency value of the in-kind payment should be included.

S0800. In the last 4 weeks, how much did your household spend in total?

Total spending should include the value of all goods and services consumed or used by the household. This would include things produced by the household for its own consumption (e.g. eggs from backyard chickens). It would exclude things purchased for use in a home business.

In the last 4 weeks, how much did your household spend on:

S0801. Food, including such things as [rice], meat, fruits, vegetables, and cooking oils. Include the value of any food that was produced and consumed by the household, and exclude alcohol, tobacco and restaurant meals.

Food expenditures include all food prepared and consumed by the household, along with food purchased and consumed outside the household (e.g. snacks, bag lunches). However, should exclude meals at sit-down restaurants, and expenditures on alcohol and tobacco.

S0804. In the last 12 months, how many times did members of your household go to a hospital and stay overnight?

The answer should represent the total number of events for which any member of the household went to a hospital and stayed overnight. If household members had stayed overnight in hospitals for a natural birth, treatment of trauma from a traffic accident, and an appendectomy, the answer would be "3" regardless of whether these three events happened to the same person or different persons in the household.

S0805. In the last 12 months, how much did the household pay for all costs associated with overnight stays in a hospital? Please exclude any expenses in the last 4 weeks that you have already told me about, and exclude any reimbursement from insurance.

This question should include the total expenses associated with all of the hospital stays referred to in **S0800**.

INDIVIDUAL QUESTIONS

1000 - Respondent's Socio Demographic Characteristics

This section compares information on different items and gives an indication of income and socioeconomic status.

S1000. What is your mother tongue?

Record respondent's mother tongue. The mother tongue is the language one has learned first, provided it is a language that one can express oneself fully in, and/or voluntarily identifies with. If the respondent knows more than one such language record all named languages.

S1001. Record sex as observed

Circle option Female or Male.

S1002. How old are you? (Years)

Record respondent's age in years and *Go to S1004.*

If respondent doesn't know or doesn't want to tell his/her age, Go to the question S1003.

S1003. If you don't know/don't want to tell me your age could you tell me the age range if I read the different options to you (choose what is most appropriate)?

(READ THE OPTIONS TO THE RESPONDENT)

S1004. What is your weight in Kilos?

S1005. What is your weight in Pounds?

S1006. What is your height in Centimeters?

S1007. What is your height in Feet/Inches?

For S1004 – S1007 use either the metric or the alternative system.

S1008. What is your current marital status?

Ask this question without reading the options to the respondent. If the response does not match any of the options e.g. “single”, read the options to the respondent and ask him/her to choose the option that best reflects his/her current marital status. For example, if the respondent is currently married (but was divorced in the past), the option “currently married” should be recorded.

S1009. What is the highest level of education that you have completed?

This refers to the highest level of education successfully completed. If a person attended 3 months of the first year of secondary school but did not complete the year, the option “primary school” will be recorded. If a person only attended a few years of primary school or never went to school, the option “less than primary school” will be recorded. The level of education can either be completed at school or at home. This may be the case of someone who, due to illness or other circumstances, does not attend school but has private tutoring or some other form of schooling that requires taking exams in order to complete primary or secondary education.

If countries use educational categories other than those specified here, they must provide WHO with a mapping of those to the categories as stated in the questionnaire. The same categories must be used for Column D of the household roster.

S1010. How many years of school, including higher education, have you completed?

The term “school” refers to any kind of formal school and excludes short courses (typing, sewing) or religious education such as Bible school or Koranic school. It includes technical or vocational training beyond primary school. If a person dropped out of school or university, partial years should not be counted. If someone has been in school both full and part-time, record the number of years at full-time education. Repeated grades should be counted as two years.

S1011. What is your [ethnic group/ racial group/ cultural subgroup/ others] background?

Each country will have to find terms/phrases that are culturally appropriate. Each country will provide to WHO the list of categories they intend to use for this question. The choice will be based on what best defines differences in health and health related outcomes in the country, e.g. race, religious, ethnicity, etc.

S1012.-S1014: Work Status

The main purpose of this section is to register the person's relationship to the labour market. In so doing, it will help answer questions such as whether or not health status

contributes to unemployment, or whether people in different kinds of occupations enjoy different levels of health.

S1012. What is your current job?

“Current Job” means any activity of more than one hour that the person engaged in for pay during the last two weeks. If the person is engaged in more than one kind of "job" during the last two weeks (e.g. sold home-made food on the street part of the time and worked in a factory sewing shirts at other times), then the individual should be asked to indicate the activity from which they derived the most income.

All people who receive pay from the government should be listed as government employees. All others who receive pay from an employer should be listed as non-government employees. List as “Self-Employed” anyone who earns an income from activities that do not involve hiring people from outside the household. “Employer” refers to anyone who earns their income in activities that include hiring and paying anyone from outside the household. More specifically:

- *Govt Employee:*
An individual who is hired by a government office or agency and paid a salary or wage. This includes employees of federal, state, or municipal governments and their agencies, parastatal enterprises, and semi-autonomous institutions such as social security institutions that are owned by the government or institutions like religious schools if the staff are paid by the government.
- *Non-Govt Employee:*
An individual who is hired to work and is paid a salary or wages. This includes any employees not working for the government.
- *Self-Employed:*
An individual who produces goods for sale or earns an income through provision of services to different people or firms. The individual works alone or with intermittent assistance from others, but does not employ anyone for a paid wage or salary on a regular basis.
- *Employer:*
An individual who earns an income through business activities, whether production of goods or provision of services, and employs anyone on a regular basis who is paid a salary or wages.

If Not working for pay: Go to S1014

S1013. During the last 12 months, what has been your main occupation?

The Interviewer should ask this question open-endedly: “What is your main occupation?”. The interviewer then selects the category that they think best applies, and confirms it with the respondent.

By “main occupation”, we mean the occupation that the person spent the most time doing over the last 12 months. The following definitions should be used.

- *Legislator, Senior Official, or Manager:*
Examples of occupations in this category include legislators; senior government officials; chiefs or heads of villages; senior officials of political parties or workers unions; and directors, chief executives or department managers who manage enterprises, organizations or departments that are large enough to require three or more managers.
- *Professional, Technician, or Associate Professional:*
Examples of occupations in this category include occupations in the physical mathematical and engineering sciences, architects, engineers, health professionals, teachers, lawyers, social scientists, writers or performing artists, ship and aircraft controllers and technicians, financial agents, trade brokers, accountants and bookkeepers.
- *Clerical:*
Examples of occupations in this category include secretaries, keyboard operators, stock clerks scribes, office assistants, cashiers, and receptionists.
- *Personal Services, Marketing, or Sales:*
Examples of occupations in this category include travel attendants, restaurant workers, personal care workers, barbers, undertakers, astrologers, fire-fighters, police officers, models, salespersons.
- *Agricultural or Fisheries Worker:*
Examples of occupations in this category include gardeners and crop growers, livestock, dairy, and poultry producers, forestry workers and loggers, hunters, and fishery workers.
- *Craft, Construction, or Trades:*
Examples of occupations in this category include miners, shot firers, stone cutters, and carvers; construction workers, metal moulders, welders, sheet-metal workers, blacksmiths, tool-makers, electrical and electronic equipment mechanics and fitters, potters, glass-makers, handicraft workers in wood, textile, leather and related materials, printing, food processing, textile and garment workers.
- *Plant and Machine Operators or Assemblers:*
Examples of occupations in this category include processing-plant operators, power production operators, assembly-line operators, machine operators, assemblers, and motor-vehicle drivers.
- *Armed Forces:*
Examples of occupations in this category include anyone who is employed as a member of military service of the country.

If respondent has answered this question, *Go to next section 2000.*

S1014. What is the main reason why you are not working for pay?

This question should only be asked for people who are not working for pay.

The interviewer should ask the question open-endedly, then select the category that they think best applies, and confirm it with the respondent. If the respondent provides

more than one answer, ask them to specify which is the most important reason. The following definitions are provided to guide the selection of answers:

- *Homemaker/Caring for Family:*
This applies to individuals whose primary activities are household tasks -- such as cleaning, preparing food, and caring for children or other relatives -- and who do not receive pay for these activities.
- *Looked but can't find a job/unemployed:*
This applies to individuals who want to work for pay, are actively looking for work, and are not currently employed.
- *Unpaid Work/voluntary activities:*
This applies to individuals whose primary activity is working for a volunteer organization, a family business, a family farm or other similar activity without pay.
- *Studies / training:*
This applies to individuals whose primary activity is to pursue educational programs, whether in a secondary school, college, university, or other institutions that teaches continuing adult education classes, or vocational training courses.
- *Retired / too old to work:*
An individual who is no longer working due to age.
- *Ill health*
- *Other*

2000 - HEALTH State Descriptions

When answering these questions, the respondent will be asked to think of the last 30 days as opposed to a longer or shorter time frame. A period of 4 weeks is easier to recall and is an optimum period for comparison. Studies have shown that beyond 4 weeks there is a very steep fall in recall.

The notion of difficulty is emphasized and the respondent is asked to describe his condition rather than say how he feels about it. By “difficulty” we mean increased effort, discomfort or pain, slowness or changes in the way a person carries out an activity.

The question on overall health includes both physical and mental health.

OVERALL HEALTH

S2000. In general, how would you rate your health today?

The respondent should answer according to how he/she considers his/her health to be and give his/her best estimate. Both physical and mental health must be taken into consideration.

MOBILITY

S2001. Overall in the last 30 days how much difficulty did you have with moving around?

This question refers to moving around using assistive devices or personal help that is usually in place. It includes moving around both inside the house, from room to room and within rooms, and outside the house. If the respondent lives in a house with multiple floors, this question also includes getting from one floor to another as needed.

The intent of this question is to give an idea of a person’s mobility. Someone who has problems moving inside the house is likely to have problems outside the house.

SELF-CARE

S2002. Overall in the last 30 days, how much difficulty did you have with self-care, such as washing or dressing yourself?

If a person uses assistive devices when washing for example, these should be taken into account when answering the question.

This question refers to washing one’s entire body as it is customary for the culture. If a respondent reports that he/she has not washed his/her body in the past 30 days, interviewers should ask whether this is due to a health condition. If it is, this question should be coded “5” for extreme/cannot do. If it is not due to a health condition but to an

environmental condition, such as lack of water, the option NA (not applicable) should be recorded in the questionnaire and entered in the data entry program.

This question includes all aspects of dressing the upper and lower body. Activities such as getting clothing from storage areas (i.e. closet, dressers) and securing buttons, tying knots, etc., should also be considered when making the rating.

PAIN AND DISCOMFORT

S2003. Overall in the last 30 days, how much of bodily aches or pains did you have?

This refers to any form of pain or discomfort in the body that interferes with a person's usual activities, either for a short or long period of time. By pain we mean "physical" pain.

COGNITION

S2004. Overall in the last 30 days, how much difficulty did you have with concentrating or remembering things?

This question refers to concentrating while doing work tasks, reading, writing, drawing, listening to others, playing a musical instrument, assembling a piece of equipment or engaging in any other activity. The respondent should think of concentrating in usual circumstances not when preoccupied by a problem situation or in an unusually distracting environment.

Remembering things refers to what a person would usually remember on a daily basis, such as running errands, doing the shopping, paying the bills or having appointments.

INTERPERSONAL ACTIVITIES

S2005. Overall in the last 30 days, how much difficulty did you have with personal relationship or participation in the community?

Personal relationships include partners, relatives or friends. Participation in the community includes any form of social involvement such as going to town meetings, taking part in leisure or sporting activities in the town, neighbourhood or community. The relevant issue being asked in this question is whether the individual is facilitated to participate in these activities or whether there are barriers to doing so.

VISION

The idea behind these questions is not to establish a diagnosis, but to understand overall difficulties with seeing.

S2006. Do you wear glasses or contact lenses?

The purpose of this question is to know the use of an assistive device such as spectacles or contact lenses since for the following question the respondent would be asked to take this into account when reporting on the level of difficulty with vision.

S2007. In the last 30 days, how much difficulty did you have in seeing and recognizing a person you know across the road (i.e. from a distance of about 20 meters)?

The person should answer this question taking into account any assistive device (glasses or contact lenses) he/she may be using. “Seeing and recognizing a person” under normal circumstances. One would not be expected to recognize a person on a foggy or stormy day for example.

SLEEP AND ENERGY

S2008. Overall in the last 30 days, how much of a problem did you have with sleeping, such as falling asleep, waking up frequently during the night or waking up too early in the morning?

Problem with sleeping includes inability to fall asleep, interrupted sleep or waking up earlier than a person would usually wake up.

AFFECT

S2009. Overall in the last 30 days, how much of a problem did you have with feeling sad, low or depressed?

For this question, each site will have to find a culturally equivalent term for sadness or depression that makes sense and is understood by the respondent. By problem, we mean how these states have interfered with a person’s life, such as not been able to do certain activities because of feeling distressed.

Distress, sadness or worry must be understood as occurring more often than normal. Everybody worries but it becomes a problem when a person worries more than usual with things that she would normally not worry about. Sadness is often characterised by feeling tearful, tired and hopeless and loss of interest.

**S2100: VIGNETTES FOR HEALTH STATE DESCRIPTIONS-
RECORD SET (A, B, C, D):**

Each respondent will answer 10 vignettes from one set. The set used should be clearly recorded in the questionnaire.

In all vignettes use the country specific female/male first names to match the sex of the respondent.

6000 - Coverage

The purpose of the section on health system coverage is to determine the number of individuals who are in need of certain health interventions and how many of these persons actually receive the appropriate intervention. The criteria for being considered in need of given health care interventions fall into four categories:

1. The whole population is in need, so questions would be asked to all respondents.
2. Only respondents of a certain age and sex are in need. Questions would be asked only of respondents who fall into the specific age/sex category.
3. Only respondents with a certain health condition or disease are in need. A series of questions would be asked of everyone to determine if they may have the condition or disease.
4. A combination of types 2 and 3, where only respondents of a certain age and sex and who have a certain condition or disease are in need.

It is important to closely follow the skip patterns in this section, as they have been designed to make sure the different categories of respondents in need are identified.

SECTION 6000: CHRONIC CONDITIONS - DIAGNOSIS AND TREATMENT

These questions are to be asked to all respondents. The purpose is to obtain information on the prevalence, diagnosis and treatment of a certain number of chronic health and mental health conditions.

S6000. Have you ever been diagnosed with arthritis (a disease of the joints)?

The point of this question is to identify individuals with a diagnosed case of arthritis. Arthritis is a chronic inflammatory disease which affects joints and impairs their functioning. Swelling, redness, heat and pain are the signs of inflammation. There are different forms of arthritis and when diagnosis is made by a doctor or other medical professional the type of arthritis may be specified. However, it is unnecessary here to ask the respondent to remember the exact type of arthritis that was diagnosed. Because of the chronic nature of the condition (that is, because it lasts a long time), the respondent is given an open time frame for recalling the diagnosis. Probe if the respondent is unsure whether they have ever been afflicted with the condition. If the respondent seems not to understand the term "arthritis" explain that this is a disease of joints (such as in the arms, hands, legs or feet).

S6001. Have you ever been treated for it (*referring to the disease asked about question S6000*)?

The purpose of this question is to find out if the respondent has been treated for disease referred to in the preceding question (arthritis). The information will help to identify which groups of persons are being underserved by the health care system. This question

should be asked to all respondents, even if the response to the preceding question is negative. There could be situations when someone is treated without a definitive diagnosis. As in the case of the question about the diagnosis (S6000), the respondent is given an open time frame for recall. The respondent may have had a diagnosis in the past and may have been treated for it. If so, the respondent may not have symptoms of the disease anymore. This is important to know in order to better understand the responses to the symptomatic questions in this section related to each particular condition.

S6002. Have you been taking any medication or other treatment for it (*referring to the disease asked about in question S6000*) during the last 2 weeks?

The purpose of this question is to find out if the respondent is currently under treatment for arthritis. The question should be asked to all respondents, regardless of the answer to the preceding two questions about the diagnosis and past treatment. The question aims to separate those individuals who are under current treatment for a condition from those who are not being treated. Note that the time frame for this question is specified as treatment in the last 2 weeks. This time frame is considered best for getting information about the ongoing or regular character of treatment. An answer of “yes” is appropriate only if the respondent was taking medications for arthritis at any time during the last two weeks, and not if the person says he or she usually takes medications but for some reason did not during the given period.

S6003.-S6006. During the last 12 months, have you experienced any of the following....

This introductory sentence sets time frame for the symptomatic questions related to arthritis. After setting the time frame, the interviewer must read out a series of symptoms and determine if the respondent had any of those symptoms in the last 12 months. The point of asking symptom-related questions is to screen those individuals who might have a specific health condition or disease. Because there could be a number of symptoms that characterise a given health condition, and because some symptoms may be common to different conditions, it is important that the interviewer probe for each symptom to see whether the respondent may have an active disease. It is also important that the time period for the symptoms (“in the last 12 months”) be clearly understood by the respondent and not confused with other time frames used in this section (such as “ever” and “the last 2 weeks”), otherwise the results may not be comparable and it will be difficult to properly assess how well the health system is responding to people’s needs. The following symptom questions focus on the most frequent form of arthritis, which is osteoarthritis. This condition is often referred to as “wear and tear” on the bones (most often felt in the knees, hands, hips and spine).

S6003. Pain, aching, stiffness or swelling in or around the joint, which were not related to an injury and lasted more than a month?

Pain, aching (continuous dull pain), stiffness (rigidity, firmness, and inflexibility) and swelling in the joint are most common and frequent symptoms of arthritis. It is possible

that the same symptoms, but of a transitory character, may be caused by an injury. Therefore it is important to specify for the respondent that the question asks about the symptoms of a regular character (lasting for at least a month) and not related to an injury.

S6004. Stiffness in the joint in the morning after getting up from bed or after a long rest of the joint without movement?

The point of this question is to determine if the respondent feels rigidity, firmness, and inflexibility in the joint after a long period of resting, which is very characteristic of osteoarthritis. If the respondent does not have stiffness skip the following two questions about the length of the stiffness and whether it is relieved with exercise and go to question S6007.

S6005. How long does this stiffness last?

This question is only asked to respondents who answered yes to question S6004. The purpose is to differentiate stiffness caused by osteoarthritis from stiffness associated with other conditions. Stiffness associated with osteoarthritis usually disappears in about 30 minutes or less.

S6006. Does the stiffness go away after exercise or movement in the joint?

This question is only asked to respondents who answered yes to question S6004. The purpose is to differentiate stiffness from osteoarthritis from other types of stiffness. The interviewer should make sure that the respondent does not interpret the word "exercise" strictly as an intense work-out or training. The meaning of exercise here is broader and includes any movement, such as usual tasks and daily activities that involve movement. If the respondents seems unsure, or replies that he/she does not exercise, the interviewer should clarify that this refers to any kind of everyday physical activity.

S6007. Have you experienced back pain (including disc problems) during the last 30 days?

The intention of this question is to identify people who have back pain that could be related either to osteoarthritis or other problems such as trauma and disc displacement in the spine. This question should be asked to everyone.

S6008. How many days did you have this back pain during the last 30 days?

This question is only asked to respondents who reported experiencing back pain during the last 30 days. The intention is to distinguish a back pain caused by a mild temporary problem, such as muscle strain, from a more serious problem related to the disease of spine and the spine joints. Record the number of days (to a maximum of 30 days) as

mentioned. The answer does not need to ascertain the exact amount of time (for example, if the respondent says they had back pain for about two weeks, record "14" days).

S6009. Have you ever been diagnosed with angina or angina pectoris (a heart disease)?

This question serves to identify individuals with a diagnosed case of angina (also called angina pectoris or ischaemic heart disease). Angina is a temporary pain in the chest that can radiate to other parts of the upper body, mainly to the left arm. Some persons with angina may experience increasingly severe episodes that can lead to a heart attack. Angina can be controlled by lifestyle changes, prescription drugs, or surgery. If the respondent does not understand the term “angina”, the interviewer may describe the condition as “heart-related chest pain”.

As with any chronic condition - one that lasts a long time - the respondent is given an open time frame for recalling the diagnosis.

See explanation for question S6000.

S6010. Have you ever been treated for it (*referring to the disease asked about in question S6009*)?

The purpose of this question is to find out if the respondent has been treated for disease referred to in the preceding question (angina). This question should be asked of all respondents. In the case of the question about the diagnosis of the disease, the respondent is given an open time frame for recall. The respondent may have had a diagnosis in the past and may have been treated for it. If so, the respondent may not have symptoms of the disease anymore. This is important to know in order to better understand the responses to the symptomatic questions in this section about angina.

See the explanation for question S6001.

S6011. Have you been taking any medications or other treatment for it (*referring to the disease asked about in question S6009*) during the last 2 weeks?

The purpose of this question is to find out if the respondent is currently under treatment for angina. The question should be asked to all respondents, regardless of the answer to the preceding two questions about diagnosis and past treatment. The question aims to separate those individuals who are under current treatment for a condition from those who are not being treated. Note the time frame for this question (the last 2 weeks). An answer of “yes” is appropriate only if the respondent was taking medications for angina at any time during the last two weeks, and not if the person says he or she usually takes medications but for some reason did not during the given period.

See the explanation for question S6002.

S6012.-S6016. During the last 12 months, have you experienced...

For this set of questions, the interviewer must read out a series of symptoms and determine if the respondent had any of those symptoms in the last 12 months. The point

of asking symptom-related questions is to screen those individuals who might have a specific health condition or disease. Because there could be a number of symptoms that characterise a given health condition, and because some symptoms may be common to different conditions, it is important that the interviewer probe for each symptom to see whether the respondent may have an active disease. It is also important that the time period for the symptoms (in the last 12 months) be clearly understood by the respondent and not confused with other time frames used in this section (such as "ever" and "the last 2 weeks").

S6012. Pain or discomfort in your chest when you walk uphill or hurry?

Chest pain is the most frequent symptom of angina. It usually occurs during an increased physical activity (such as walking uphill, stairs, carrying heavy things, etc) when body needs more active blood circulation. This pain is referred to as “exertional” pain. Many patients do not have pain if they are resting or performing very mild physical activity. Such pain may be described in a number of different ways, such as a squeezing pain, squeezing pressure, tightness, ache or heaviness in the chest. The interviewer should probe with local terms to make sure to capture all unpleasant sensations that the respondent may have. If the respondent responds he/she never hurries or walks uphill (because of poor mobility or any other reason), then record “Never walks uphill or hurries”.

S6013. Pain or discomfort in your chest when you walk at an ordinary pace on level ground?

Some individuals who are suffering from angina pectoris may get chest pain not only during an increased physical activity but also at rest or a mild physical activity (such as walking at an ordinary pace on level ground, etc).

If the respondent has neither exertional pain nor pain at rest or mild physical activity (questions S6012 and S6013), then questions S6014, S6015, and S6016 should not be asked.

S6014. What do you do if you get the pain or discomfort when you are walking?

This question is only asked to respondents who answered yes to either question S6012 or S6013, that is reported experiencing chest pain in the last 12 months. The purpose is to distinguish the different types of chest pain. One of the characteristics of angina-related pain is that it decreases or disappears with lower levels of physical activity. Persons with angina tend to slow down or stop what they are doing to get rid of the pain. Another option is to take a small white tablet that dissolves in the mouth and does not need to be swallowed (called nitro-glycerine). It is also possible that persons with chest pain will simply carry on with what they were doing, taking no specific action. The interviewer should read the three response options to the respondent and record the action taken most often.

S6015. If you stand still, what happens to the pain or discomfort?

This question is only asked to respondents who answered yes to either question S6012 or S6013, that is reported experiencing chest pain in the last 12 months. The point is to find out what happens to the pain when the respondent reduces or stops physical activity. There are two response options for this question: "relieved" or "not relieved". The interviewer should read out the two response options to the respondent. If the respondent says that the pain usually increases, the interviewer should record "not relieved".

S6016. Will you show me where the pain or discomfort was?

This question is only asked to respondents who answered yes to either question S6012 or S6013, that is reported experiencing chest pain in the last 12 months. The purpose is to determine the location of the pain and whether it is specific to angina. The interviewer should ask the respondent to show where the pain occurs on the body. Record "upper or middle chest" if the pain is shown in the area above or between the breasts for women, or equivalent area for men (sternum). Record "lower chest" if the pain is shown in the left area of the front chest below the breast/sternum. Other locations of pain may include the left arm, or any other area close to the chest indicated by the respondent. Record all areas that the respondent mentions or shows.

S6017. Have you ever been diagnosed with asthma (an allergic respiratory disease)?

This question serves to identify individuals with a diagnosed case of asthma (sometimes called an allergic respiratory disease). Asthma is a condition that affects the airways (bronchi/bronchioles) – the small tubes that carry air in and out of the lungs. In asthma, the airways of the lungs become either narrowed or completely blocked, impeding normal breathing. This obstruction of the lungs is reversible, either spontaneously or with medication. Asthma can be very different from one person to another and from one episode (attack) to another. For some, asthma causes only mild symptoms once in a while. For others, every day can be a struggle to breathe. Some asthma attacks last only a few minutes while others go on for days. Severity also varies, with some asthma attacks being only mild while others can quickly become life threatening.

Because of the chronic (or long-term) nature of the condition, the respondent is given an open time frame for having received the diagnosis. Probe if the respondent is unsure whether they have ever been afflicted with the condition. Record as response "yes" if they recall ever having been told by a health care provider of having asthma, or of ever having had respiratory problems which they were later told by a qualified health care provider as being asthmatic attacks.

See explanation for question S6000.

S6018. Have you ever been treated for it (referring to the disease asked about in S6017)?

The purpose of this question is to find out if the respondent has ever been treated for asthma.

See the explanation for question S6001.

S6019. Have you been taking any medications or other treatment for it (referring to the disease asked about in S6017), during the last 2 weeks?

The purpose of this question is to find out if the respondent is currently under treatment for asthma. An answer of “yes” is appropriate only if the respondent was taking any prescription medications for asthma (including using an inhaler to promote opening of airways) during the last two weeks, and not if the person says he or she usually takes medications but for some reason did not during the given period.

See the explanation for question S6002.

S6020.-S6024. During the last 12 months, have you experienced the following....

For this set of questions, the interviewer must read out a series of symptoms and determine if the respondent had any of those symptoms in the last 12 months. The point of asking symptom-related questions is to screen those individuals who might have a specific health condition or disease. Because there could be a number of symptoms that characterise a given health condition, and because some symptoms may be common to different conditions, it is important that the interviewer probe for each symptom to see whether the respondent may have an active disease. It is also important that the time period for the symptoms (in the last 12 months) be clearly understood by the respondent and not confused with other time frames used in this section (such as "ever" and "the last 2 weeks").

S6020. Attacks of wheezing or whistling breathing?

Wheezing is the most common symptom of asthma. Wheezing can be described as winded breathing, especially with a whistling or rattling or hissing sound as the person breathes out. The episode can last a few minutes or several hours.

S6021. An attack of wheezing that came on after you stopped exercising or some other physical activity?

The purpose of this question is to distinguish wheezing attacks due to asthma from other breathing problems. Very often wheezing occurs after physical activity among persons with asthma. The wheezing may go away when the person rests.

S6022. Feeling of tightness in your chest?

Tightness in the chest can be described as a sensation as if a person’s lungs and other organs located in the chest were compressed, as if they could not fit in the chest. Feeling of tightness in the chest could precede an asthmatic attack.

S6023. Have you woken up with a feeling of tightness in your chest in the morning or at any other time?

The purpose of this question is to distinguish feeling of tightness in the chest caused by asthma from other types of health problems. The episode can last a few minutes or several hours. This question asks for specific reference to the time and the situation when the symptom occurs. It is characteristic for asthma to cause the feeling of tightness in the chest upon waking up.

S6024. Have you had an attack of shortness of breath that came on without obvious cause when you were not exercising or doing some physical activity?

The purpose of this question is to distinguish problems with shortness of breath caused by asthma from other health conditions. It is important that the interviewer focuses on whether the onset of shortness of breath occurred while the person was at rest, without any obvious trigger.

S6025. Have you ever been diagnosed with depression?

This question serves to identify individuals with a diagnosed case of depression (mood disorder or anxiety). Although depression is common, it often goes undetected because it may be attributed to a person's physical, social or economic difficulties. If left untreated, it can lead to a poor quality of life and even suicide. Treatments for depression can include medication and counselling.

See explanation for question S6000.

S6026. Have you ever been treated for it? (*referring to condition asked in S6025*)

The purpose of this question is to find out if the respondent has ever been treated for depression.

See the explanation for question S6001.

S6027. Have you been taking any medications or other treatment for it in the last two weeks? (*referring to condition asked in S6025*)

The purpose of this question is to find out if the respondent is currently under treatment for depression. An answer of "yes" is appropriate only if the respondent was taking any medications for depression during the last two weeks, or received some other kind of treatment such as attending a psychological therapy or counselling session (often referred to as "therapy" or "psychotherapy") with a trained health professional during the last two weeks.

See the explanation for question S6002.

S6028-S6034. During last 12 months, have you experienced any of the following...

For this set of questions, the interviewer must read out a series of symptoms and determine if the respondent had any of those symptoms in the last 12 months. The point of asking symptom-related questions is to screen those individuals who might have a specific health condition or disease. Because there could be a number of symptoms that characterise a given health condition, and because some symptoms may be common to different conditions, it is important that the interviewer probe for each symptom to see whether the respondent may have an active disease. It is also important that the time period for the symptoms (in the last 12 months) be clearly understood by the respondent and not confused with other time frames used in this section (such as "ever" and "the last 2 weeks").

S6028. Have you had a period lasting several days when you felt sad, empty or depressed?

The emphasis is on a period that lasted several days (not just one or two days). The interviewer might need to prompt for a number of words that may be equivalent to the symptoms "sad, empty or depressed" – such as "blue", "tearful", "with no feelings inside", "down in the dumps", "low", "rock bottom" or "gloomy".

S6029. Have you had a period lasting several days when you lost interest in most things you usually enjoy such as hobbies, personal relationships or work?

The emphasis is on a period that lasted several days (not just one or two days), where the person lost interest and had no pleasurable feelings in things usually enjoyed.

S6030. Have you had a period lasting several days when you have been feeling your energy decreased or that you are tired all the time?

The emphasis is on a period that lasted several days (not just one or two days), where the person felt having had less energy than usual and experienced marked tiredness even after minimum effort.

If the answer to S6028, S6029, S6030 is "no", the interviewer may skip the following four questions and go to question 6035, with the understanding that S6031-S6034 will be not applicable or answer is the negative.

S6031. Was this period [of sadness/loss of interest/low energy] more than 2 weeks?

The emphasis is on the period of having had the symptoms for 2 weeks or longer. The intent is to find out whether the period of low mood/energy was related to depression (still present after 2 weeks).

S6032. Was this period [of sadness/loss of interest/low energy] most of the day, nearly every day?

The emphasis is on the symptoms of low mood/energy being present for most of the day (not just one or two hours), and occurring nearly every day (not just one or two days) over an extended period.

S6033. During this period, did you lose your appetite?

This question is only asked to those respondents who responded “yes” to having either of the symptoms described in S6029 or S6030 (loss of interest/low energy). This question seeks to determine whether the respondent had the symptom of much smaller appetite than usual, accompanied by low mood/energy. In many cases loss of appetite is usually accompanied by weight loss.

S6034. During this period, did you notice any slowing down in your thinking?

This question is only asked to those respondents who responded “yes” to having either of the symptoms described in S6029 or S6030 (loss of interest/low energy). By slowing down we mean thoughts that are coming much more slowly than usual. The person needs more time to think, make decisions, making up his/her mind and react to events..

SECTION 6100: CERVICAL CANCER AND BREAST CANCER SCREENING

This section is asked to female respondents of a given age group to identify those who have had a screening for cervical cancer (PAP smear test) or for breast cancer (mammography). Cancer occurs when cells in a part of the body begin to grow out of control. Most cancers are named after the part of the body where the cancer first starts. Breast cancer begins in the breast tissue. Cervical cancer begins in the lining of the cervix, the lower part of the womb (uterus).

The cervical cancer screening questions are to be asked only of *women between the ages of 18 and 69*. The breast cancer screening questions are to be asked only of *women between the ages of 40 and 69*.

S6100. When was the last time you had a pelvic examination? (By pelvic examination, I mean when a doctor or nurse examined your vagina and uterus)

This question is only to be asked to women aged 18 to 69 years. The question has two purposes. First, it introduces the topic of cervical cancer screening with a more general aspect of reproductive health: when the respondent last had a pelvic examination. A woman can only have a PAP smear test within the context of a pelvic examination. Second, it filters out those respondents who either never had a pelvic examination, or only had it over 3 years ago. Only exams that took place within the past 3 years are of interest.

The interviewer should ask how long ago the respondent last had a pelvic examination. If the respondent had a pelvic examination but does not remember when exactly the examination took place, the interviewer should probe for the approximate elapsed time since the last examination. Determine if the last exam was **WITHIN THE LAST 3 YEARS**.

If the respondent had an exam in the last 3 years, proceed to question S6101.

If the respondent did not have an exam in the last 3 years, *go to question S6102*.

If the respondent is unsure what is meant by a pelvic exam, it is important to read a description to help her understand. Read the following (or similar) description: “A pelvic examination is when a doctor, nurse, or midwife examines the outside and inside of the vagina. It usually involves passing a speculum into the vagina. The speculum looks a little like a duck's bill and allows the doctor, nurse, or midwife to see inside. Usually the doctor, nurse, or midwife will feel inside the vagina.”

S6101. The last time you had the pelvic examination, did you have a PAP smear test? (By PAP smear test, I mean did a doctor or nurse use a swab or stick to wipe from inside your vagina, take a sample and send it to a laboratory?)

This question is only asked to women aged 18-69 who reported having had a pelvic examination in the last 3 years. The purpose is to identify those respondents who had a PAP smear test. If the respondent is unsure what is meant by PAP smear test, read the following description: “A PAP smear test is when a medical professional uses a swab or stick to wipe cells off from the cervix, the opening lining of the womb (uterus). These cells are then sent to a lab and evaluated to determine if the cells are abnormal. The test is used to screen for cervical cancer at an early stage, but can detect other gynaecologic problems as well.”

S6102. When was the last time you had a mammography, if ever? (This is an x-ray of your breasts to detect breast cancer at an early stage).

This question is only to be asked to women aged 40 to 69 years. The purpose is to identify when was the last time the respondent had a mammography.

Read the following description(s) if the respondent does not understand what is meant by mammography:

- ❖ “A mammography is a special x-ray of the breasts. It involves standing in front of a machine where each breast is placed between two plastic plates. The plates come together, pressing on the breast to make it as flat as possible. This procedure allows for lumps to be detected by the x-ray, to help detect breast cancer at an early stage.”

SECTION 6200: ORAL HEALTH CARE

The purpose of this series of questions is to identify respondents who have had problems with their mouth and/or teeth during the last 12 months and determine whether they received appropriate treatment for the problem.

S6200. During the last 12 months, did you have any problems with your mouth and/or teeth?

This question aims to identify those respondents who had any problems with their teeth and/or mouth in the last 12 months. Oral health problems can have negatively affects on people's nutrition and general health.

If the respondent indicates not having had any problems in the last 12 months, record “no” and *Go to question S6207*.

S6201. During the last 12 months, did you receive medical care or treatment from a dentist or other oral health specialist for this problem with your mouth and/or teeth?

This question is only asked to respondents who reporting having had an oral health problem in the last 12 months.

The purpose is to determine if respondents who had such problems received medical care or treatment for their problem. Only treatment or care from a dentist or other health professional is of interest.

If the respondent did not receive any treatment, or only had self-treatment or care from a traditional or faith healer, record “no” and *Go to question S6207*.

S6202.-S6206. What type of care or treatment did you receive for this problem with your mouth and/or teeth?

This set of questions is only asked to respondents who reported having had oral health problems and having received professional care in the last 12 months. The purpose is to determine what type(s) of treatment or care were received. Read the response options and record all the types of care mentioned. A response of “yes” to “medications” is appropriate if the respondent took any type of pill, syrup or other medicine prescribed by an oral health professional in the last 12 months to treat a problem of the mouth, teeth, tongue or gums.

If the respondent is not sure what is meant by “dentures or bridges”, describe them as “full or partial implants for replacing missing teeth”. Descriptions of “dental work or oral surgery” could include “special cleaning of your teeth by a dentist or dental hygienist, filling of dental caries, tooth extraction, or any other surgery of the mouth”.

If a type of treatment received falls under a different category not listed here, record “other” and write down what the respondent mentioned.

S6207. Have you lost all of your natural teeth?

The question serves to identify people who are suffering from edentulism (who are missing all of their teeth), a particularly debilitating oral disease. If left untreated, edentulism can lead to the shrinking and loss of jawbone. Record a response of “yes” only if the respondent has lost all of their natural teeth, and not just some or most of them.

7000 - Health System Responsiveness

DESCRIPTION OF DIFFERENT SECTIONS

1. Needing health care and general evaluation of health systems: what was your last need, did you get health care, involvement, satisfaction, caring for family members, etc.
2. Seeing health care providers: finding out whether the respondent [or their child] stayed in hospital in the last 5 years? If not, did they [or their child] use a health care provider, excluding overnight stay in hospital in the last 12 months.
3. Outpatient care– reference to last visit: specific questions on the type of health care provider used followed by questions on different aspects of responsiveness
4. Inpatient hospital section - reference to last hospital stay: specific questions on the type of health care provider used followed by questions on different aspects of responsiveness
5. Vignettes

RESPONSIVENESS QUESTIONS

7000. Needing health care and general evaluation of health systems (Section 1)

[Interviewer: stop reading further as soon as the respondent has selected one. If an adult went for health care at the same time as for his/her children, focus on the adult's experience. If the adult accompanied more than one child, focus on the YOUNGEST child.]

S7000. When was the last time that either you as an adult, or a child of yours aged 12 years or less, needed health care?

**in the last 30 days
between 1 month and less than 1 year ago
between 1 year and less than 2 years ago
between 2 years and less than 3 years ago
between 3 years and less than 5 years ago
more than 5 years ago
Never needed – Skip to S7020**

For this question, it is important to get the last eligible person who needed health care. An eligible person is the respondent itself or one of his/her children aged 12 years or less.

S7001. Was the last need for health care for you or for your child?

**Yourself
Your child**

S7002. Thinking of the last time you [your child] needed to see a health care provider who could treat your condition, how many were there around who you could choose from?

Interviewer: RECORD NUMBER

The purpose of this question is to find out, from the respondent's point of view, the number of health care providers who could have treated the respondent's last condition ignoring any financial, legal/administrative or other barriers. The respondent subjectively defines who s/he would include as being 'around'.

S7003. Which reason best describes why you [your child] last needed health care?

Dental care
Arthritis
Asthma
Heart disease
Minor surgery
Other

The respondent must choose only one category.

S7004. The last time you [your child] needed health care, did you get health care?

Yes - SKIP to S7016
No

S7005. - S7015. Which reasons best explain why you [your child] did not get health care?

S7005. Could not afford the cost of the visit
S7006. No transport
S7007. Could not afford the cost of transport
S7008. The health care provider's drugs or equipment are inadequate
S7009. The health care provider's skills are inadequate
S7010. You were previously badly treated
S7011. Could not take time off work or had other commitments
S7012. You did not know where to go
S7013. You thought you were not sick enough
S7014. You tried but were denied health care
S7015. Other

The purpose of this question is to find out whether the respondent ever wanted to get health care but did not do so and why this was the case. The interviewer should read each of the items on the list and get the respondent to answer yes or no to each item. Then skip to question S7017.

S7016. When you last needed health care, where did you get care?

At a health care provider, excluding an overnight stay in hospital
At a hospital where you stayed overnight
At home

By health care provider, we mean any of the following types of professionals at a facility operated by the government, private sector, or religious or non-governmental groups:

- Medical doctor (including gynaecologist, psychiatrist and other specialists)
- Nurse
- Midwife
- Dentist
- Physiotherapist or chiropractor
- Traditional medicine practitioner
- Other

S7017. In general, would you say you are very satisfied, fairly satisfied, neither satisfied nor dissatisfied, fairly dissatisfied or very dissatisfied with the way health care runs in your country.

We are asking the respondent to give a report of their overall level of satisfaction with the state of health care in their country.

S7018. During the past year, did you provide help to a relative or friend (adult or child), because this person has a long-term physical or mental illness or disability or is getting old and weak?

Yes, for a person living in the same household
Yes, for a person living in a separate household
No

The purpose of this question is to find out whether the respondent is involved in caring for family members, relatives or friends in an informal capacity (without pay) over some extended period of time. The person in question might be in the respondent's household or they might be in another household. The nature of the help that is provided to the person encompasses a broad range of activities (described more fully below). These activities may include bathing, feeding, household chores, assistance with transport, etc., to mention but a few activities

S7019.-S7022. In your dealings with private health care organizations or the government, have you ever had any difficulties:

S7019. Obtaining payment exemptions or the right to special rates for health care

S7020. Completing or filling out applications for health insurance

S7021. Finding out what benefits you are entitled to from your health insurance

S7022. Getting reimbursements from health insurance organizations

These questions are aimed at finding out how many administrative problems people face when using or trying to use the health system. Some of these problems might arise when coming into contact directly with health care providers (e.g. some hospitals assess your income before deciding to charge you a certain rate), or the problems might arise when a person has or tries to get insurance. The option of “not applicable” is included as the respondents might not have had some of the described experiences.

Seeing Health Care Providers (Section 2)

[Interviewer: If an adult went for health care at the same time as for his/her children, focus on the adult's experience.]

The purpose of this section is to separate respondents into three main groups: (1) respondents who have personally been hospitalised or whose child of 12 years or under has been hospitalised in the previous 5 years; (2) respondents who have visited or been visited or whose child of 12 years or under has visited or has been visited by a health care provider in the previous 12 months; and (3) respondents who have had neither types of experiences.

S7100. Over the last 5 years, was there ever a time you stayed overnight in a hospital or other type of long term care facility for your own health care?

This question asks people about staying overnight for their own medical needs. If they stayed overnight when visiting someone in hospital or because a child of theirs was in hospital they should answer NO to this question.

S7101. Over the last 5 years, was there ever a time that one of your children aged 12 years or less stayed overnight in a hospital (for his/her own health care)?

[Interviewer: if the person has more than one child, ask for sex and age of the child that had the last visit. If several children were seen at the same time, focus on the YOUNGEST child.]

If the respondent has not him/herself had a direct experience related to his/her health care, he/she can be asked questions about any children he/she accompanied to hospitals. The maximum age of these children at the time of accompanying him/her should be 12 years old or younger.

S7102. What is the sex of the child?

S7103. What is the date of birth of the child?

The month and the year of birth are sufficient for this question.
SKIP to S7300

S7104. Over the last 12 months, did you receive any health care excluding any overnight stay in a hospital?

This question refers to any other type of medical or health care the respondent might have had in the last 12 months. The types of people they might have seen include Medical doctor (including gynaecologist, psychiatrist and other specialists), Nurse, Midwife, Dentist, Physiotherapist or chiropractor, Traditional medicine practitioner, to mention the most common types of health care providers.

Yes – SKIP to S7200

S7105. Over the last 12 months was there ever a time you accompanied one of your children aged 12 years or less for health care (other than an overnight stay in a hospital)?

[Interviewer: if the person has more than one child, ask for sex and age of the child that had the last visit. If several children were seen at the same time, focus on the YOUNGEST child.]

If the respondent has not him/herself had a direct experience related to his/her health care at an outpatient facility or at his/her home (e.g. a doctor visiting them at his/her home), he/she can be asked questions about any children he/she accompanied to health care providers. The maximum age of this child at the time of accompanying him/her should be not more than 12 years old.

No – SKIP to S8000

S7106. See S7102.

S7107. See S7103.

Outpatient Care and Care at Home (Section 3)

[Interviewer; Use " you" or "your child" according to responses in previous section “Seeing Health Care Providers”.]

[Interviewer: if person has more than one child you will use the experience of the child that had the most recent visit]

Note that the interviewer should substitute the appropriate reference in the questions that follow. Either, the respondent used health care for their own health or the respondent accompanied a child. If the respondent had more than 1 child, they should focus on the last child's experience.

S7200. What was the name of the last health care provider you used in the last 12 months?

For this question, the interviewer has to try to get the name of the clinic, or the office. If this is not possible, the interviewer should get the name of the health care provider. If the respondent was visited at home, then they should write "home visit".

S7201. Was the last place you visited in the last 12 months:

operated by the government
privately operated
NGO
other

Places operated by the government include all establishments operated by all levels of government (federal/ national, provincial/state, and local/district). The word “operated” refers to the fact that the place is run by an organization that the respondent identifies as government, private, church etc. Note that only one category may be selected. If the respondent is undecided, ask them to select the group the provider fits in best. Similarly, if the health care provider visited the respondent at home, the respondent should think about who operates the home visit service.

S7202. Which was the last health care provider you visited?

Medical doctor (including gynaecologist, psychiatrist, ophthalmologist, etc.)
Nurse
Midwife
Dentist
Physiotherapist or chiropractor
Traditional medicine practitioner
Other

Note that the interviewers should read all the categories of types of providers to the respondent. The category “traditional medicine practitioner” refers to the types of health professionals that are traditionally recognised in that particular society as providing health care or providing information about health care . For example, in South Africa, Sangoma’s are a branch of “traditional” healers that are used by some of the population. In the cases where a home visit is involved, identify the health care provider who visited the person at home.

Interviewer; after S7202, substitute the type of health care provider selected by the patient wherever you see [health care provider] in parentheses.

S7203. Thinking about your last visit, how long did it take you to get there?

S7204. - S7205. Thinking about your last visit, how much did you or your household pay for:

S7204. [Health care provider's] fees	Don't Know	
S7205. Medicines	Don't Know	Not applicable
S7206. Tests	Don't Know	Not applicable
S7207. Transport	Don't Know	Not applicable
S7208. Other	Don't Know	Not applicable

The amount paid should be entered for **each** category. If the payment was in kind, then the respondent should be asked to give their best estimate of the cash value of the in-kind payment. If there are other expenses than fees, drugs, tests or transport, then they should be entered as "Other". If the person only answers with a total amount, record under "other".

S7209. For your [child's] last visit, how would you rate the amount of time you waited before being attended to?

The respondent should only be thinking of the time they waited once they had arrived at the health care facility.

S7210. For your [child's] last visit, how would you rate your experience of being greeted and talked to respectfully?

S7211. For you [child's] last visit, how would you rate the experience of how clearly health care providers explained things to you?

The explanation of "things" refers to the diagnosis, the treatment, possible means of prevention and any other exchanges between the health care provider and the respondent.

S7212. For your [child's] last visit, how would you rate your experience of being involved in making decisions about your health care or treatment?

This question refers to the extent to which the respondent had an opportunity for discussing his or her health care condition with the health care provider.

S7213. For your [child's] last visit, how would you rate the way the health services ensured you could talk privately to health care providers?

The point of this question is to find out whether the respondent was able to speak to the health care provider privately, out of the hearing of people who the respondent did not want to involve in the discussion.

S7214. For your [child's] last visit, how would you rate the freedom you had to choose your health care provider?

This question is asking the respondent to describe the extent to which they were able to choose to choose their health care provider.

S7215. For your [child's] last visit, how would you rate the cleanliness of the rooms inside the facility, including toilets?

GO to S7400 (Vignettes)

Inpatient Hospital (Section 4)

It is important to stress that the experience of interest could have taken place anytime in the last 5 years but if more than one overnight stay was experienced, the respondent should focus on the most recent overnight stay.

S7300. What was the name of the last hospital or long term care facility you [child] stayed in, in the last 5 years ?

S7301. Was the hospital or long term care facility:

**operated by the government
privately operated
NGO
other**

S7302. When was your [child's] last overnight stay?

**In the last 4 weeks
In the last year
In the last 2 years
In the last 3 years
In the last 5 years**

S7303. Which of the following best describes the reason for your [child's] last overnight stay?

High fever, severe diarrhoea, or cough
Childbirth
Arthritis
Asthma
Heart disease
Bodily injury
Minor surgery
Other

S7304. How long was your [child's] stay on this occasion?

1-2 days
3-5 days
6-14 days
15 days and more

S7305. Thinking about your last hospital stay, how long did it take you [child's] to get there?

S7306. For your [child's] last hospital stay, how long from the time you needed hospital care did you wait to be admitted to hospital?
[Interviewer: stop reading further as soon as the respondent has selected one]

same day
less than 1 week
less than 1 month
less than 3 months
3 months and more

For this question, we want to know how long the respondent had to wait to be admitted to the hospital, once knowing that hospitalisation was needed.

S7307. - S7311. Thinking about your [child's] last hospital stay, how much did you or your household pay for:

S7307. Doctor's fees	Don't Know	
S7308. Medicines	Don't Know	Not applicable
S7309. Tests	Don't Know	Not applicable
S7310. Transport	Don't Know	Not applicable
S7311. Other	Don't Know	Not applicable

S7312. Thinking about your [child's] last hospital stay, how many people slept in the same room as you?

Only other patients, not relatives or friends staying with them for support.

S7313. For your [child's] last hospital stay, how would you rate the amount of time you waited before being attended to?

see S7209

S7314. For your [child's] last hospital stay, how would you rate your experience of being greeted and talked to respectfully?

see S7210

S7315. For you [child's] last hospital stay, how would you rate the experience of how clearly health care providers explained things to you?

see S7211

S7316. For your [child's] last hospital stay, how would you rate your experience of being involved in making decisions about your health care or treatment?

see S7212

S7317. For your [child's] last hospital stay, how would you rate the way the health services ensured you could talk privately to health care providers?

see S7213

S7318. For your [child's] last hospital stay, how would you rate the freedom you had to choose your [child's] health care providers?

see S7214

S7319. For your [child's] last hospital stay, how would you rate the cleanliness of the rooms inside the facility, including toilets?

see S7215

S7320. For your [child's] last hospital stay, how would you rate the ease of having family and friends visit you?

The question asks the respondent to answer based on his knowledge of whether the hospital made it uncomfortable or difficult in any other way for him/her (or his/her child) to have visitors.

S7401.-S7420.: VIGNETTES (4 versions: Set A, Set B, Set C, Set D)

I am now going to read you stories about people's experiences with health care services. I want you to think about these people's experiences as if they were your own. Once I have finished reading each story, I will ask you to rate what happened in the story as very good, good, moderate, bad or very bad.

The vignettes or stories should be read slowly, one at a time, to the respondent. If the respondent asks the interviewer to reread any part of the vignette, the interviewer should reread the entire vignette to the respondent.

Use in vignettes country specific female/male first names to match the sex of the respondent with following exceptions:

Set A: Vignette 2: S7402.

Set A: Vignette 6: S7406.

Set C: Vignette 6: S7406.

Set D: Vignette 9: S7409.

Set D: Vignette 10: S7510.

For these 5 vignettes retain the female / male name also if the respondent has different sex.

8000 - HEALTH GOALS

In the last month:

S8000. How often have you felt that you were unable to control the important things in your life?

Important things in life may be related to job, family, health.

S8001. How often have you found that you could not cope with all the things that you had to do?

Think of things you had to do in the work, school or house setting. Examples of not coping may be work piling up, leaving tasks unfinished, not being able to meet deadlines, being late for appointments or having to cancel them because of too many things to do.

Health Systems Goals

READ TO RESPONDENT: To answer the following question you need to understand what is meant by "Health System Goals".

Five main goals have been identified:

1. Improving the health of the population (population lives longer and with less illness)
2. Minimizing inequalities in health between people (all people should have equal chances of being healthy)
3. Improving responsiveness of the health system (this involves things like how quickly people are attended to; how respectfully people are spoken to by medical staff; how clearly things are explained; how convenient it is to reach different health services; how clean they are; and how much freedom there is to choose to see the doctor one wants).
4. Minimizing inequalities/disparities in responsiveness (the health system is equally responsive to all people, no matter their wealth, social status, sex, age or religious or other beliefs)
5. Fairness in financial contribution (every household should pay a fair share towards the health system)

Now, I would like you to score these 5 goals in order of importance from the most important (1) to the least important (5) – Please, put the cards I will give to you in order of importance.

INTERVIEWER: GIVE RESPONDENTS CUE CARDS, WRITE THE CODE FROM EACH CARD NEXT TO THE RANK, STARTING WITH RANK 1 AS THE MOST IMPORTANT, TO RANK 5 AS THE LEAST IMPORTANT.

WHO has identified 5 main goals for health system: health (level and inequalities), responsiveness (level and inequalities) and fairness in financial contribution.

The World Health Survey programme will collect data on all of these goals. We are interested in how important the respondents think these goals are in their countries. In settings of limited resources, governments have to make choices about allocating resources to priorities. The importance placed on each goal can be thought of as an indication of how much priority should the government place on it.

9000 - INTERVIEWER OBSERVATIONS

The purpose of this section is to get an idea of how the interview went and if there were any particular problems or instances that occurred during the interview.