21 ACTIVITIES OF DAILY LIVING

	(21.01)	(21.02)	(21.03)	(21.04)	(21.05)	(21.06)
	If you had to carry a heavy load,	How long have you had	Why are you unable to	If you had to walk 5 km,	How long have you had	Why are you unable to
	such as a bucket of water, for 20		carry a heavy load?	could you do it easily, with	difficulty to walk 5 km?	walk 5 km?
	meters, could you do it easily, with	carry a heavy load?		some difficulty, with much		
	some difficulty, with much difficulty or			difficulty or not at all?		
	not at all?					
111						
\overline{o}				EASILY 1	-	
ID CODE		LESS THAN ONE 1	DISABLED 01	► NEXT SECTION	LESS THAN ONE 1	DISABLED 01
	EASILY 1 ► (21.04)		PREGNANT 02	NEXT GEOTION	WEEK	PREGNANT 02
	WITH SOME			WITH SOME 2		TOO WEAK 03
	DIFFICULTY 2		TOO SICK 04	DIFFICULTY	1 TO 6 MONTHS 3	
	WITH MUCH	6 TO 12 MONTHS 4	TOO INJURED 05	WITH MUCH 3	6 TO 12 MONTHS 4	TOO INJURED 05
	DIFFICULTY 3	MORE THAN 12 5		DIFFICULTY	MORE THAN 12 5	
		MONTHS	OTHER(SPECIFY) 96	UNABLE TO DO 4	MONTHS	OTHER(SPECIFY) 96
	UNABLE TO DO 4					
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22 MENTAL HEALTH

	(22.01)					(22.02)	(22.03)	(22.04)
	Now I will read five	statements about ho	w a person might be	e feeling. For each of	the five	In the last 12 months,	Where did you seek help?	Are you currently
		indicate whether <u>in t</u>				did you ever seek any		taking any medication
		ne, more than half of	the time, less than I	nalf of the time, some	e of the time, or at	help from health		to treat depression or
	no time.					workers because you		anxiety?
						felt sad, hopeless or		
					_	anxious?		
		ALL OF THE TIME		1	_		CENTRAL DISTRICT HOSPITAL	01
		MOST OF THE TIM		2	_		DISTRICT HEALTH CENTRE (DHC)	02
<u> </u>		MORE THAN HALF		3	=		RURAL HEALTH CENTRE (RHC)	03
CODE		LESS THAN HALF		4	_		HEALTH HOUSE (HH)	04
ပ		SOME OF THE TIME	lL .	5	_		PRIVATE CLINIC TRADITIONAL HEALER	05
		AT NO TIME		6	=		OTHER, SPECIFY	96 96
	A.	В.	C.	D.	E.		OTHER, SPECIFY	96
	I have felt cheerful		I have felt active	I woke up feeling	My daily life has	-		
			and vigorous	fresh and rested	been filled with			
	una in good spinis	and relaxed	una vigoroas	iresir and resied	things that interest			
					me	YES 1		YES 1
						NO 2 ► (22.04)	-)	NO 2
						(==:::)	1	
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02								
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23 GENERAL HEALTH

	(23.01)	(23.02)	(23.03)	(23.04)	(23.05)	(23.06)	(23.07)	(23.08)	(23.09)
	How would you rate	Do you have any	Over at least the past 6	How tall are you	How much do you	Would you say that	What kind of fat do you	Do you add salt to your	During the last 12 months, have you been
	your health in general?		months, to what extent,	(in cm) without	weigh (in kg)?	your current weight	mostly use for food	meals?	advised to reduce weight by any of the
		illness or health problem? (at least	if at all, have you been limited in activities	shoes (in cm)?		is	preparation at home? SINGLE ANSWER		following? INTERVIEWER: READ EACH OPTION ALOUD
		6 months or more)	people normally do,				SINGLE ANSWER		OPTION ALOUD
		o months of more)	because of a health						
			problem? Would you						
			say you have been?						
ID CODE									
$\ddot{\circ}$									
D									
_									
	Very good 1	Yes 1	Severely 1	Don't know -99	Don't know -99	Too high 1	Vegetable oil 1	Never 1	Yes 1
	Good 2	No 2 Refusal 97	Somewhat 2	-		Too low 2	Margarine 2	When the food is 2	No 2
	Neither good 3 Bad 4	Refusal 97	Not limited 3 Refusal 97	-		About right 3 Refusal 97	Butter or similar 3 Lard or other 4	not salty enough Almost always	-
	Very bad 5		Kelusai 77			Kelusai 71	No fat at all 5	before tasting the 3	£ _
	Refusal 97							food	doctor care care remaily rember else
									A doctor Other health care personnel A family member Someone else
01				CM	KG				
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23 GENERAL HEALTH

	(23.10)					(23.11)	(23.12)	(23.13)	(23.14)
	During	the last 12 mo	nths, have	you been	advised	Over the past 12 months what	In the last 7 days, on	On days when	With regard to smoking cigarettes, cigars, or
		ase your phys				changes have you made to your diet		you walk for at	a pipe, which of the following applies to you?
		ng? INTERVIE\	NER: REA	D EACH (OPTION		you walk for at least	least 10 minutes	
	ALOUE)					10 minutes at a time?	at a time, how	EXCLUDE CHEWING TOBACCO
								much time do	
								you usually	
								spend walking?	
\sim									
ID CODE									
=									
	V	1				Mana fasika and sanakahlan 1	Darthern 00	D==# 00	Ven suggestive gradue 1
	Yes No	2				More fruits and vegetables 1 Less meat 2	Don't know -99	Don't -99	Vou used to smoke
	INO					Less fleat 2			but have stopped 2 (23.23)
						Fewer calories 4			You have never 3 ► (23.23)
		£ -				Less salt 5			Refusal 97 ► (23.23)
	ctor	re re nne	nily ber	se	Other	Less sugar 6			
	A doctor	Other health care personnel	A family member	Someone else	₽	Other 96		Hours Minut	tes
		g g		0)			DAYS	(HH) (MN	1)
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(23.15)	(23.16)	(23.17)		(23.18)			(23.19)	
How old were you when you first started smoking?	On average, how many cigarettes do you smoke each day?	Would you like to give up smoking/tobacco use?		Have you ever received a health care worker to quit			Where did you receive advice?	
							CENTRAL DISTRICT HOSF	01
							DISTRICT HEALTH CENTR	02
							RURAL HEALTH CENTRE (RHC)	03
							HEALTH HOUSE (HH)	04
							PRIVATE CLINIC	05
							HOME VISIT	06
							TRADITIONAL HEALER	07
							OTHER, SPECIFY	96
Don't know 0			1	Yes, in the last 1 week	1		_	
			2	Yes, in the last 1 month	2		-	
		Don't know	3	Yes, in the last 1 year	3		=	
				Yes, more than 1 year	4	(00.00)	1	
				No Refusal	5 ► 97 ►	(23.20)		
				Reiusai	97 ▶	(23.20)		
AGE	Number of cigarettes							
		1						

23 GENERAL HEALTH

	(23.20)	(23.21)	(23.22)	(23.23)	(23.24)	(23.25)		
ID CODE	Have you tried to quit smoking in the last 12 months?	In your opinion, do you think smoking car cause the following diseases? INTERVIEWER: READ EACH OPTION A	PLEASE INDICATE whether you tend to agree or disagree	Do you use chewing tobacco?	(23.24) In your opinion, do you think chewing tobacco can cause the following diseases or problems? INTERVIEWER: READ EACH OPTION ALOUD	PLEASE INDICATE whether		
,								
	Yes, once 1	Yes 1	Totally agree 1	Yes, every day 1	Yes 1	Totally agree 1		
	Yes, between 2 and 5 times 2 Yes, more than 5 times 3	No 2 Don't know 3	Tend to agree 2 Tend to isagree 3	Yes, occasionally 2 No, not at all 3 ► (23.26)	No 2 Don't know 3	Tend to agree 2 Tend to isagree 3		
	No 4	DOTT KNOW 3	Totally disagree 4	100, flot at all 3 (23.20)	DOIT KNOW 5	Totally disagree 4		
	Refusal 97	3 × a × b v .	E Don't know 5	1	7 × 8 × 1 × 1	1 · · · · · · · · · · · · · · · · · · ·		
		Cardiovascul ar diseases, including a heart attack Stroke Lung cancer Bronchitis Diabetes	Don't know 5		Cardiovascul ar diseases, including a heart attack Stroke Cancer Problems with leeth or gums (cavities or gum afforces)			
01			_					
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During the past 12 months, did you drink any alcoholic benerages (per, wine, spiths, cider or other alcoholic beverages)? **RAD OUT LOUD*** **READ OUT LOUD*** **Several times a week** 1	(23.26)				(23.27)		(23.28)			(23.29)		(23.30)				
Yes 1 Several times a week 1 Yes 1 Daily 1 Tend to 2 No 2 ► (23.30) Once a week 2 No 2 ► (23.30) 4-5 times a week 2 Tend to 3 Refusal 97 ► (23.30) Once a month 3 Refusal 97 ► (23.30) 2-3 times a week 3 Totally 4 Less than once a month Never 5 Once a week 4 Don't 5	During the parany alcoholic	beverage (be	er, wine,	drink spirits,	How often in the past 12 mon you had 5 or more drinks on o occasion?		Did you drin beverage (b or other alco	eer, wine, sp oholic bevera	irits, cider	In the last 30 days, he many times did you any alcoholic bevera	drink	Would you consumpti increase the	Would you agree or disagree that the consumption of alcoholic beverages can ncrease the risk of the following health			can
Yes 1 Several times a week 1 Yes 1 Daily 1 Tend to 2 No 2 ► (23.30) Once a week 2 No 2 ► (23.30) 4-5 times a week 2 Tend to 3 Refusal 97 ► (23.30) Once a month 3 Refusal 97 ► (23.30) 2-3 times a week 3 Totally 4 Less than once a month Never 5 Once a week 4 Don't 5												Totally				1
No 2 C3.30 Once a week 2 No 2 23.30 4-5 times a week 2 Tend to 3 Refusal 97 (3.30) Once a month 3 Refusal 97 (3.30) 2-3 times a week 3 Totally 4 Less than once a month Never 4 Never 5 2-3 times a month 5 5	Yes	1			Several times a week	1	Yes	1		Daily	1					2
Less than once a month 4 Once a week 4 Don't 5 Never 5 2-3 times a month 5 5	No	2	•	(23.30)	Once a week	2	No	2	(23.30)	4-5 times a week	2					3
Never 5 2-3 times a month 5	Refusal	97	•	(23.30)	Once a month	3	Refusal	97 ▶	(23.30)	2-3 times a week	3	Totally				4
					Less than once a month	4				Once a week	4	Don't				5
Once 6 Refusal 97 Pay Pay					Never	5				2-3 times a month	5					
Refusal 97												Ses	t ses	er	ssi	ts
Company										Refusal	97	Live	Hear	Canc	Depre	Birth

	(24.01)																(24.02)
														ether or not as	part of any co	onsultation.	In general, how satisfied
	(IF YES) V	Vas it on yo	our own init	iative, at a	doctor's ini	tiative or a	s part of a s	creening p	rogram? II	NTERVIEW	ER: READ	EACH OF	TION ALO	UD			are you with the quality of
	Yes, own i	nitiative				1											Tajikistan health care system?
		r's initiative)			2											System:
	Yes, scree					3											
	No					4											
l	Don't know	V				5											
ID CODE																	
Ō			_	tor			he					uc -	on ?	hy	st	n	Very satisfied 1
S		_	scan	99			ng t	_		iji.	osis	natic nal)	natic phy	grap	ar te	sar i	Satisfied 2 Dissatisfied 3
		k-up	ner :	eye			pnlo	sţiu		Spec	odo	ami	ami	ars	ir)	sme S	Very dissatisfied 4
	k-up	hec	or ot	n or	test	dn->	in (Fi	ig E	92	ate 9	ıstec	st ex orofe	st ex mm	narr ye,	cals	pap year	Don't know 5
	chec	III)	o pu	ticia	erol	heck	t (nc give	ance	accii	rost;	An c natio	calp	reas ma	la r hree	ervi ap s	id a	OTHER, SPECIFY 96
	A dental check-up	A general health check-up	An x-ray, ultrasound or other scan	An eye test by an optician or eye doctor	A cholesterol test	A heart check-up	A blood pressure test (not including the one just given)	A colorectal cancer testing	A flu vaccine	MEN ONLY: A Prostate Specific Antigen (PSA) test	WOMEN ONLY: An osteoporosis examination	WOMEN ONLY: A breast examination by hand (by medical professional)	WOMEN ONLY: A breast examination by x-ray, that is, by mammography?	WOMEN ONLY: And a mammography in the last three years	WOMEN ONLY: A cervical smear test (that is, a pap smear)	WOMEN ONLY: And a pap smear in the last three years	
	den	eral	ultra	oy a	chc	he.	sure	orect	Ą	ILY:	NO X	Z L	VLY nat i	ILY:	VLY at is,	NLY las	
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۱Г		(24.03)	(24.04)	(24.0						(24.06)	(24.07)
	J	In general, if you have been feeling unwell for a	And how likely do you think it		neral, for					During the past 12 months, was there any time	What was the main reason for not
		few days, who do you contact first when you	is that patients could be		cal servic				t to	when, in your opinion, you personally needed a	receiving it? SINGLE ANSWER
		become ill?	harmed by non-hospital care in		n cash or					medical examination or treatment for a health	
			this country? By non-hospital	INTE	RVIEWE	R: RE	AD EA	CH OP	TION	problem but did not receive it?	
			care we mean receiving	ALOU	JD						TOO EXPENSIVE 01
			diagnosis, treatment or								TOO FAR 02
			medicine in a clinic or surgery								TOO BUSY (WORK, CHILDRE) 03
			of your general practitioner or								WASN'T SICK ENOUGH 04
	ш	Family doctor 1	from a pharmacy.		a signific	ant		1		Yes, there was at least	FACILITY HAS POOR STRUCT 05
				amou						one occasion	
	CODE	FAMILY NURSE 2	Very likely 1		but just a	l		2		No, there was no such 2 ► (24.08)	
		Feldsher 3	Fairly likely 2		ot at all			3		Refusal 97 ► (24.08)	
		Hospital doctor 4	Not very likely 3	Don't	know			4			POOR STAFF KNOWLEDGE 08
	_	Specialist at PHC 5	Not at all likely 4							4	DON'T TRUST THE STAFF 09
		Obstetrician/Gynecol 6	Don't know 5	4	jo.			_			STAFF USUALLY ABSENT 10
		MIDWIFE 7			용			varc	S		HEALTH FACILITY CLOSED 11
		TRADITIONAL BIRTH ATTENDANT 8		به	₽ ₩			cy.	ļr ng		NO TRANSPORTATION 12
		Private doctor 9		Ambulance	Health check-up with a doctor	Х-гау	Lab test	Visit to emergency ward	Prescription drugs		POOR QUALITY OF CARE 13 INCONVENIENT HOURS 14
		PHARMACIST 10 TRADITIONAL HEALER 11		qu	7	×	ap	me	ribti		LONG WAITING TIMES 15
		Treat myself at home 12		¥) je		-	to e	ose.		PREFER HOME CARE 16
		OTHER (SPECIFY) 96			Ě			/isit	а		SHORTAGE OF HEALTH WOR 17
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	(24.08)	(24.09)	(24.10)	(24.11)	(24.12)
	During the past 12 months, was there any time when you	What was the main reason for not being	During the past 12 months, was there any time	What was the main reason for not having it	Which one of the following statements do you
	needed to be hospitalized following a recommendation from	hospitalized? SINGLE ANSWER	when you were given a prescription for	filled? SINGLE ANSWER	agree with in terms of unofficial, private out-of-
	a doctor, either as an inpatient or a day patient, but were	'	medication by a doctor, but you did not have it		pocket fees paid at health facilities in
	not?		filled?		Tajikistan?
		TOO EXPENSIVE 01		TOO EXPENSIVE 01	ī]
		TOO FAR 02		TOO FAR 02	? Totally agree 1
		TOO BUSY (WORK, CHILDRE 03			Tend to agree 2
		WASN'T SICK ENOUGH 04		WASN'T SICK ENOUGH 04	Tend to Disagree 3
CODE	Yes, there was at least one occasion 1	FACILITY HAS POOR STRUC 05	Yes, there was at least one occasion 1		Totally disagree 4
0					Don't know 5
Ö	Refusal 97 ► (24.10)			POOR STAFF ATTITUDE 07	
Ω		POOR STAFF KNOWLEDGE 08		POOR STAFF KNOWLEDGE 08	B se s se d
_		DON'T TRUST THE STAFF 09		DON'T TRUST THE STAFF 09	d d ar lifee
		STAFF USUALLY ABSENT 10		STAFF USUALLY ABSENT 10	such lincre laff; and coulc
		HEALTH FACILITY CLOSED 11		HEALTH FACILITY CLOSED 11	4 EEP 4 0 6 1 2 2 1
		NO TRANSPORTATION 12 POOR QUALITY OF CARE 13		NO TRANSPORTATION 12 POOR QUALITY OF CARE 13	uust be el n care stiz requestir nent shou nealth car reduced vate fees nat publice
		INCONVENIENT HOURS 14	4	POOR QUALITY OF CARE 13 INCONVENIENT HOURS 14	will salth will a dry brown and property and
		LONG WAITING TIMES 15		LONG WAITING TIMES 15	s mi saith for in a saith se s v h
		PREFER HOME CARE 16		PREFER HOME CARE 16	Sylve les efe
		SHORTAGE OF HEALTH WO 17		SHORTAGE OF HEALTH WORKERS 17	ctor de contra d
		OTHER (SPECIFY) 96		OTHER (SPECIFY) 96	
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25 HIGH CHOLESTEROL AND OTHER HEALTH CONDITIONS

		(25.01)	(25.02)	(25.03)	(25.04)	(25.05)	(25.06)	(25.07)	
			Have you recently	Have you ever been told by a	Did the doctor prescribe	Do you take any	In the last 24 hours,	Do you take aspirin	
			changed your way	doctor or other health	medication for your high	medicine without	did you take this	on a regular basis -	
			of life in order to	professional that you have high cholesterol?	cholesterol?		medication to lower	that is, every day or every other day?	
			lower your blood cholesterol?	cholesterol?		to lower your cholesterol?	your cholesterol?	every otner day?	
			CHOICSICIOI:			CHOICSICIOI:			
Ш.,									
100	5	Maril II 140 II		V 4	V 4 5 (2F.0/)	V 4	AH 6'2	V 4	
11 6	5	Within the past 12 months 1 1 – 5 years ago 2	Yes 1 No 2	Yes 1 No 2 ► (25.07)	Yes 1 ► (25.06) No 2	Yes 1 No 2 ► (25.07)	All of it 1 Part of it 2	Yes 1 No 2 ► (25.09)	
(ا د			Don't know 3 ► (25.07)	INO Z	100 2 (25.07)	None of it 3	100 2 (25.07)	
⊆	⊇	Don't know/do not remember 4							
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25 HIGH CHOLESTEROL AND OTHER HEALTH CONDITIONS

	(25.08)	(25.09)	(25.10)	(25.11)	(25.12)	(25.13)	(25.14)	(25.15)	(25.16)	(25.17)
			During the past 12	Do you have, or have you	During the past	Do you have, or	Do you have, or	Do you have, or		Have you ever
			months, have you ever	ever had, diabetes?	12 months, have	have you ever	have you ever	have you ever	a heart attack?	had a
			been admitted to a hospital primarily as a		you ever been admitted to a	had, long- standing	had, a peptic ulcer (gastric or	had, cancer?		stroke/cerebral hemorrhage?
			result of your chronic		hospital primarily	problems with	duodenal ulcer)?			nemornage:
			bronchitis or		as a result of	your muscles,	,			
			emphysema?		diabetes?	bones and joints				
111						(rheumatism,				
CODE	Yes 1 No 2	Yes 1	Yes 1	Yes 1	Yes 1	Yes 1	Yes 1	Yes 1	Yes 1	Yes 1
0		No 2 ► (25.11)		No 2 ► (25.13)						No 2
0	[Don't know 3		Don't know 3	Don't know 3	Don't know 3	Don't know 3	Don't know 3	Don't know 3
QI	art							Refusal 97	Refusal 97	Refusal 97
	To relieve pain To reduce the chance of heart To reduce the chance of a stroke Other									
	To relieve pain To rel									
	elieve paratrack attack attack attack attack con stroke control other ot									
	relie of the country									
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