42112180

COUNTRY INSTITUTION FACILITY ‑ ENROLMENT #

SOCIO-ECONOMIC QUESTIONNAIRE
To be administered to all patients

Interviewer to read: we are going to ask you some questions about you. This will take about 20 minutes. The answers you give us will be kept confidential and will not affect the services that you receive today.

SECTION 1. SOCIO-DEMOGRAPHIC DATA

1.1	Date of interview	☐☐ / ☐☐ / ☐☐☐☐ (DD / MM / YYYY)
1.2	Who is the head of your household?	☐ Yourself ☐ Your spouse/partner ☐ Your father or mother ☐ Other
1.3	If Other, specify	…………………………………………………….……
1.4	How old is your head of household?	☐☐ (Age in Years)
1.5	How many people are in your household?	☐☐

SECTION 2. ECONOMICS

2.1	How do you rate your wealth in comparison to others?	☐ Among most wealthy ☐ Above average ☐ Average wealth ☐ Below average ☐ Among least wealthy
2.2	What is the main occupation of the person who contributes most for your regular expenditure?	☐ Employed ☐ Self employed ☐ Unemployed ☐ Farmer ☐ Fisher ☐ Student ☐ Housewife ☐ Other
2.3	If Other, specify	…………………………………………………………
2.4	What type of work do you do for your main occupation?	☐ Employed ☐ Self employed ☐ Unemployed ☐ Farmer ☐ Fisher ☐ Student ☐ Housewife ☐ Other

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2.5	If Other, specify	……………………………………………………………..
2.6	What is your main income based on?	☐ Monthly salary ☐ Daily wage ☐ Business/firm earnings ☐ Sale of farm produce ☐ Have no income ☐ Other
2.7	If Other, specify	……………………………………………………………..
2.8	Altogether, how much did you earn from all your different sources of income in the last month?	*Amount in shillings* *(write 0 if none)* ☐☐☐☐☐☐☐ ☐ Don't know
2.9	Altogether how much did others in your household (including the household head) earn in the last month?	*Amount in shillings* *(write 0 if none)* ☐☐☐☐☐☐☐ ☐ Don't know
2.10	What is the main form of transport that you regularly use?	☐ Walk ☐ Taxi ☐ Bodaboda Motorcycle ☐ Bodaboda Bicycle ☐ My own car ☐ My own bicycle ☐ Commuter bus/Daladala ☐ Other
2.11	If Other, specify	……………………………………………………………….
2.12	About how long did it take you to arrive here from home?	*Amount in hours* *(e.g 0.5, 2.25 etc)* ☐.☐☐
2.13	How much will you spend today on transport to get here and to get back home?	*Amount in shillings* *(write 0 if none)* ☐☐☐☐☐☐☐ ☐ Don't know
2.14	How much other cost do you think you will have today besides transport? (e.g. for lunch)	*Amount in shillings* *(write 0 if none)* ☐☐☐☐☐☐☐ ☐ Don't know
2.15	Did you leave young children (aged less than about 6 years) at home to come here today?	☐ Yes IF No » 2.18 ☐ No
2.16	If yes, who is looking after them?	☐ Adult relatives/Household members ☐ Other older children ☐ Neighbour ☐ Maid ☐ Other

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2.17	If other, specify	………………………………………………………………………......
2.18	What type of work does the person looking after the children do for their main occupation?	☐ Employed ☐ Self employed ☐ Unemployed ☐ Farmer ☐ Fisher ☐ Student ☐ Housewife ☐ Other ☐ Don't know
2.19	If other, specify	…………………………………………………………………………..
2.20	Did anyone accompany you today?	☐ Yes ☐ No
2.21	What is the main occupation of the person you came with today?	☐ Employed ☐ Self employed ☐ Unemployed ☐ Farmer ☐ Fisher ☐ Student ☐ Housewife ☐ Other ☐ Don't know
2.22	If other, specify	………………………………………………………………………
2.23	How much was spent on transport for the person to accompany you today?	*Amount in shillings (write 0 if none)* ☐☐☐☐☐☐ ☐ Don't know
2.24	What other expenses have they made to accompany you today? (for example food, child care)	*Amount in shillings (write 0 if none)* ☐☐☐☐☐☐ ☐ Don't know
2.25	In the last month, on how many days were your normal activities disrupted through illness?	*Number of days (write 0 if none)* ☐☐

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INTERVIEWER'S SIGNATURE	
	………………………………………………………

INTERVIEWER ID CODE ☐☐

DATE FORM COMPLETED ☐☐ / ☐☐ / ☐☐☐☐
DD   MM   YYYY

ON-SITE MONITORING

SIGNATURE OF PERSON CHECKING FORM
……………………………………………………….

NAME
………………………………………………………

ID OF PERSON CHECKING FORM ☐☐

DATE FORM CHECKED ☐☐ / ☐☐ / ☐☐☐☐
DD   MM   YYYY