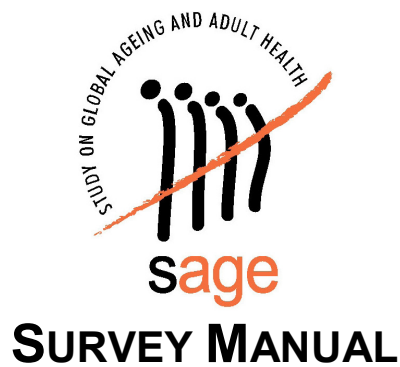




Study of Global Ageing and Adult Health (SAGE)



World Health Organization 2006

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Part 1: Introduction

Overview

Introduction The World Health Organization's Study on global AGEing and adult health (SAGE) Survey Manual is a tool to help implement SAGE in countries and to improve the quality of the interview process. This manual is intended to provide practical information about the survey instruments and their use during interviews.

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

Intended audience The manual is intended for all parties responsible for implementing SAGE and using the resulting data. The various parties include a wide range of people from interviewers, field staff, supervisors and principal investigator(s), laboratory and data entry technicians and statisticians, to public health officials in the Ministry of Health and/or any health institutions.

Guide to using the manual This manual has been written in nine parts. The first four parts cover background information about SAGE, questionnaire conventions, specific roles and responsibilities including an editing guide and advice for interviewers.

Parts five, six and seven are the specific question by question (QxQ) guides, for numbers 1-3 below, of the following five SAGE questionnaires:

1. Household (HHQ);
2. Individual (IQ-A, IQ-B, IQ-C, IQ-D);
3. Proxy Respondent (ProxyQ);
4. Retest (RetestQ); and,
5. Verbal Autopsy (VA-Q).

Each part is introduced with an overview and a short table of contents to help readers find specific topics. This also enables individual parts (such as Part 4: Guide to Taking Health Measurements) to be easily removed from the manual and used as in-the-field reference. The RetestQ repeats sections and questions from 1-3 and the VA-Q has a separate QxQ guide as part of the questionnaire itself.

In this section This section contains the following topics:

Topic	See Page
About SAGE	6
SAGE Questionnaire	7
Process Overview	9

About SAGE

Introduction	<p>The WHO Multi-Country Surveys team developed the Study on Global AGEing and Adult Health (SAGE) as a data collection platform to compile comprehensive information on the health and well-being of adult populations.</p>
Basis of SAGE	<p>SAGE has adapted and added to the methods and instruments developed by the World Health Organization for the World Health Survey (WHS) that was conducted in 2002 and 2003 in 70 countries. Five of the 70 WHS countries also added an over-sample of persons aged 50+ years to help establish a baseline cohort for SAGE. SAGE collects household data primarily on persons aged 50 years and older in China, Ghana, India, Mexico, Russian Federation and South Africa, plus data collection in the adult population aged 18 to 49 years and in an additional 23 countries.</p>
Purpose	<p>The purpose of the SAGE survey programme is to collect data on a broad range of self-reported assessments of health and well-being. An individual's self-rated health will be linked to anchoring vignettes and selected objective measures of health to:</p> <ul style="list-style-type: none">• improve comparability across individuals, communities and populations;• assess performance on measured tests in a range of different domains of health;• measure well-being, happiness and quality of life;• collect biomarker information;• introduce a longitudinal study design; and,• investigate compression of morbidity in adult and aging populations.
SAGE and other studies	<p>WHO works collaboratively with other multi-country studies on ageing that use the tools and methods developed by SAGE, such as:</p> <ul style="list-style-type: none">• the Study on Health and Retirement in Europe (SHARE);• World Health Survey Plus conducted in countries of the Arabian Gulf Coast Cooperation Council (GCC WHS+); and,• demographic surveillance field sites including those in the INDEPTH network (International Network of field sites with continuous Demographic Evaluation of Populations and Their Health in developing countries).
Pre-testing	<p>A pre-test of the SAGE questionnaire was completed in 2005 with over 1500 respondents in three countries, Ghana, India and Tanzania. Summary results and data are available for registered users at: http://www.who.int/healthinfo/systems/sage/en/index.html</p>
2006 data collection	<p>The 2006 round of data collection will include follow-up respondents taken from the WHO's World Health Survey and add new respondents to increase the cohort size for future data collection.</p>

SAGE Questionnaire

Introduction

The SAGE questionnaire consists of the following five main instruments. Each instrument contains multiple sections addressing different aspects of health and well-being in adult populations:

- Household Questionnaire;
- Individual Questionnaire (Sets A through D);
- Proxy Respondent Questionnaire;
- Retest Questionnaire; and,
- Verbal Autopsy Questionnaire.

In addition, there are four consent forms for informants and/or respondents.

Household Questionnaire

The table below lists each of the sections included in the Household Questionnaire.

Section	Title
0000	Coversheet
0100	Sampling Information
0200	Geo-coding/GPS Information
0300	Re-contact Information
0350	Contact Record
0400	Household Roster (follow-up)
0450	Household Consent (and Kish Tables for China)
0500	Housing
0600	Household and Family Support Networks and Transfers
0700	Assets and Household Income
0800	Household Expenditure
0900	Interviewer Observations - HHQ
0910	Verbal Autopsy (Go to VA-Q)

Individual Questionnaire

The table below lists each of the sections included in the Individual Questionnaire.

Section	Title
1000	Socio-Demographic Characteristics
1500	Work History and Benefits
2000	Health State Descriptions
2500	Anthropometrics, Performance Tests and Biomarkers
3000	Risk Factors and Preventive Health Behaviours
4000	Chronic Conditions and Health Services Coverage
5000	Health Care Utilization
6000	Social Cohesion
7000	Subjective Well-Being and Quality of Life
8000	Impact of HIV/AIDS
9000	Interviewer Assessment

Continued on next page

SAGE Questionnaire, Continued

Proxy Questionnaire

The table below lists each of the sections included in the Proxy Questionnaire.

Section	Title
0	Proxy Consent Form
1	Respondent Characteristics and IQ Code
2	Health State Descriptions
4	Chronic Conditions and Health Services Coverage
5	Health Care Utilization

Target groups

The Household and Individual Questionnaires are to be administered to adults aged 18 years and older from different educational and cultural backgrounds. The Individual Questionnaire will be administered mostly to adults over the age of 50 years. Supervisors will instruct interviewers about the type of interview to be conducted in selected households and the targeted respondent.

To decrease the burden of interviews on an older adult, in a given household, interviewers may find they interview a household informant aged 18 to 49 years for the Household Questionnaire, and an individual respondent aged 50 years or older for the Individual Questionnaire.

Literacy

Respondents do not need to be able to read and write. However, depending on their age, maturity, and cognition, as well as the place where they come from, some questions or concepts may be more difficult to understand than others. SHOWCARD (written prompts) will be provided to respondents as a memory aid.

Duration of interviews

An interview is expected to last on average 90-120 minutes but may take longer depending on respondents' comprehension and literacy levels. Respondents with language difficulties, limited education, those who are very talkative or who suffer from poor health, may take longer to complete the interview.

Privacy

The preferred condition for interviewing respondents is in private, with no other member of the household present. In some situations this may be difficult. If total privacy is not possible, the respondent may have to be interviewed outside the house or where the respondent feels comfortable discussing matters which may be sensitive.

If the respondent wishes to have someone with them during the interview, these requests should be considered and noted in Sections 0900 and 9000 respectively.

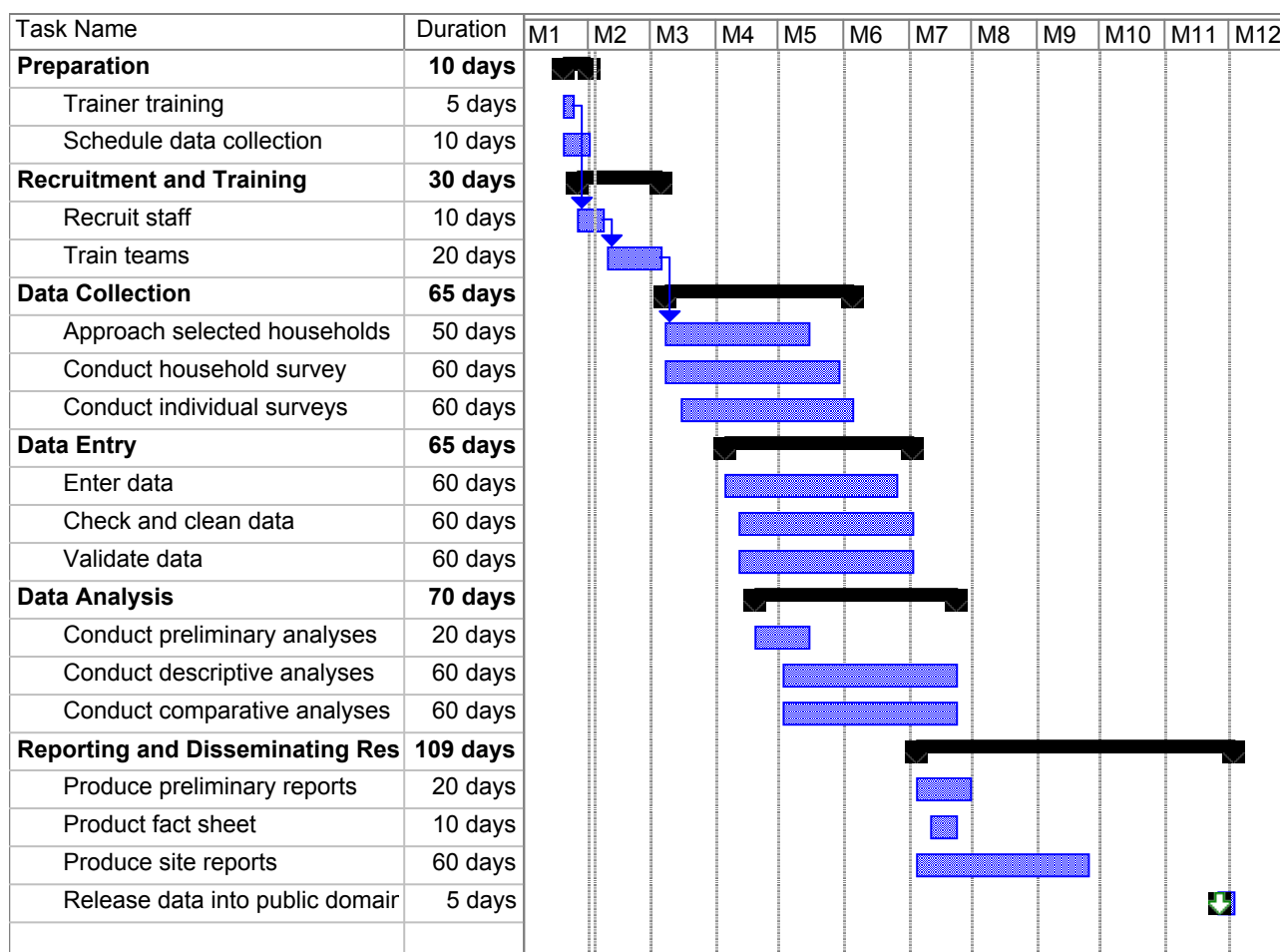
Process Overview

Introduction

For a SAGE study to be effective, the whole process needs to be properly planned and organized.

Key stages, tasks and timeframes

The total timeframe to conduct a SAGE study, from training the trainers to releasing the study data into the public domain is approximately nine to ten months. Each of the key stages, tasks and timeframes are provided in the chart below.



Note: This timeframe may vary slightly from country to country.

Part 2: Roles and Responsibilities

Overview

Introduction There are a number of key roles involved in a SAGE study; however, this manual focuses only on the roles required for administering the survey.

In this part This part covers the following roles.

Topic	See Page
Interviewers	12
Household Informant, Individual Respondent	13
Supervisor	14
Field Editor	15
Principal Investigator	16
World Health Organization (WHO)	17

Interviewers

Introduction The interviewers are all those who have been trained to administer the SAGE survey in the field.

Core roles The core roles and responsibilities of an interviewer include:

Role	Description
1	Physically locating and approaching sampled households in specified areas.
2	Introducing SAGE to the sampled households and getting household member participation and informed consent.
3	Recording household member details, non responses and number of deaths in the household.
4	Asking the questions in the survey, clarifying any confusion and answering queries respondents may have.
5	Setting the pace of the interview, keeping the respondent focused and interested and making the interview atmosphere comfortable and pleasant at all times.
6	Recording respondents' answers and editing completed questionnaires.
7	Taking physical measurements (for example, height, weight and waist circumference).
8	Conducting performance tests (for example, vision, lung function, timed walk).
9	Taking finger prick blood tests and blood pressure measurements.
10	Checking all forms before handing to supervisor.
11	Reporting any difficulties to supervisor.

Skills and attributes Interviewers should have the following general skills and attributes:

- good oral and written communication skills
 - friendly manner and patience
 - good attention to detail
 - clean and tidy appearance.
-

Household Informant, Individual Respondent and Proxy Respondent

Introduction Households are randomly selected to participate in the SAGE survey. Household informants are selected by the interviewer and individual respondents are the eligible persons selected through one of the survey methods. Proxy respondents are people identified to respond on behalf of selected individual respondents whom are unable to respond for themselves.

Roles The table below lists each of the roles and their desired characteristics.

Role	Attributes
Household informant	<ul style="list-style-type: none">• Most knowledgeable person in the household about the household members and characteristics, household's health status, transfers and financial status, including income and expenditures.• If needed, this person may have to answer questions about deaths in the household over the last 2 years.• The household informant may be different from the person selected to complete the Individual Questionnaire.
Individual respondent (from pre-selected households - meaning the supervisor tells the interviewer that it is either a younger or older household)	<ul style="list-style-type: none">• Household member who is over the age of 50 years and will be asked to complete the Individual Questionnaire. All household members aged 50 and older will be asked to complete the Individual Questionnaire.• Household member in pre-selected households who is between the ages of 18 and 49 years and who was randomly selected during the Household Questionnaire (using the Kish Table method) to complete the Individual Questionnaire.
Proxy respondent	A person who knows the respondent very well and is able to accurately answer questions about the respondent's health and well-being on their behalf.

Requirements The principle requirement of informants and respondents is to cooperate with the interviewer and follow instructions. They should also:

- Listen to questions attentively without interrupting;
- Think through the answers before answering, and try to give an accurate and complete response as much as possible; and,
- Ask for clarifications whenever a question seems unclear to him and ask the interviewer to repeat or rephrase it.

Voluntary role Respondents can refuse to answer any question and can stop the interview at any time. Interviewers should attempt to continue but not force a person to continue.

Supervisor

Introduction

The Supervisor is responsible for monitoring the progress and quality of the data collection, and ensuring that interviews are performed to a high and consistent standard.

Supervisors are the interface between data collection and the Principal Investigators. Supervisors may also be involved in monitoring the data entry process, laboratory analyses and quality control processes in every stage of the survey work.

Core roles

The core roles of a Supervisor include:

Role	Description
1	Recruiting and training interviewers.
2	Handling the logistics of the survey, including: <ul style="list-style-type: none">• obtaining and managing household lists and maps of survey areas• informing local authorities about the survey• coordinating household information for follow-up interviews• collecting GPS information• obtaining necessary venues, supplies and equipment.
3	Supervising interview teams and the interview process including checking that: <ul style="list-style-type: none">• geocoding is conducted correctly• contact procedures are correctly followed• interviews are conducted appropriately• standardized interviewing techniques are practiced.
4	Checking completed questionnaires and ensuring data quality.
5	Conducting retest interviews and checking proxy interviews.
6	Managing human resource performance and issues.
7	Providing feedback and progress updates to key SAGE survey stakeholders.
8	Checking and supervising data entry.
9	Transferring cleaned data on a regular basis to the agreed location for data entry and blood samples to the agreed laboratory for storage and analyses.

Skills and attributes

Supervisor's should have the following skills and attributes:

- Ability to work with teams and motivate people.
 - Be well organized and efficient in planning SAGE survey schedules.
 - Able to mobilize multiple teams over a short period to complete data collection.
 - Experienced in health population based surveys.
 - Good understanding of the philosophy and objectives of SAGE.
-

Field Editor

Introduction

The Field Editor is responsible for checking all completed questionnaires at the end of each day before submitting them for data entry.

Core roles

The Field Editor may be the same person as the Supervisor. The core roles of a Field Editor are listed in the table below.

Role	Description
1	Checking interview forms for completeness and ensuring that interviewers have filled in key details such as: <ul style="list-style-type: none">• contact information;• relevant dates;• age and sex of respondent; and,• have followed skip patterns correctly.
2	Verifying that all open ended questions have been filled in legibly, that interviewer observations are completed and any other comments in the margins can be read.
3	Checking for any missing information and determining why the information is missing.
4	Re-contacting respondents and filling in missing information as appropriate.
5	Reporting issues and concerns to the Supervisor or other SAGE stakeholders.
6	Conducting retest interviews.
7	Preparing completed questionnaires for review by Supervisor and data entry clerks.
8	Preparing blood samples for storage.

Skills and attributes

Field Editors should have the following general skills and attributes:

- good attention to detail
 - be well organized and efficient in checking questionnaires.
-

Principal Investigator

Introduction

The Principal Investigator (PI) is the key person responsible for planning and implementing the SAGE programme. The PI should be familiar with the entire manual and understand the whole SAGE process.

Level of authority

The PI should have sufficient authority to:

- lead the whole process of SAGE implementation;
 - negotiate and obtain resources for the study; and,
 - contribute to the disease prevention and health promotion activities that will arise from the data gathered by SAGE.
-

Core roles

PI's may or may not be the same person as the supervisor and fulfil some or all of the following roles:

Role	Description
1	Recruiting and training interviewers.
2	Handling the logistics of the survey, including: <ul style="list-style-type: none">- obtaining and managing household lists and maps of survey areas;- organizing information needed for conducting follow-up interviews;- informing local authorities about the survey; and,- obtaining necessary venues, supplies and equipment.
3	Supervising interview teams and the interview process including checking that: <ul style="list-style-type: none">geocoding is conducted correctly;contact procedures are correctly followed;interviews are conducted appropriately; and,standardized interviewing techniques are practiced.
4	Checking completed questionnaires and ensuring data quality.
5	Managing human resource performance and issues.
6	Monitoring progress and providing feedback and progress updates to SAGE stakeholders.
7	Checking and supervising data entry.
8	Transmitting cleaned data to WHO on a regular basis.
9	Submitting technical and financial reports to WHO.

Skills and attributes

PI's should have the following skills and attributes:

- Ability to work with teams and motivate people
 - Be well organized and efficient in planning SAGE survey schedules
 - Able to mobilize teams over a short period to complete data collection.
 - Experienced in health population based surveys.
 - Good understanding of the philosophy and objectives of SAGE.
-

World Health Organization (WHO)

Introduction

The World Health Organization (WHO) Geneva Office works closely with Principal Investigators, WHO Regional and Country Offices and is responsible for coordinating SAGE studies and providing technical and financial support.

Core roles

The core roles of the WHO Geneva include:

Role	Description
1	Facilitating the SAGE survey process through coordinating the efforts of Regional Offices and other programmes.
2	Developing partnerships, disseminating data, and ensuring capacity building and political commitment.
3	Mobilizing resources, funding and training.
4	Identifying countries that are ready to implement SAGE.
5	Liaising with countries to identify Interviewers
6	Providing overall guidance on planning and coordinating SAGE in their region.
7	Coordinating training workshops for Principal Investigators support for local training workshops..
8	Coordinating technical support to sites.
9	Coordinating government and agency activities at the regional and international levels.
10	Developing a regional strategy in global ageing and adult health and promoting use of SAGE data.
11	Coordinating data management, release and publication of data and results.

Part 3: Interviewer's Guide

Overview

Introduction This part provides generic guidelines for interviewers, from how to approach selected households to conducting the interviews and recording the responses.

Intended audience This part is designed for use by those fulfilling the following roles:

- Interviewers
- Supervisors
- Field Editors

In this part This part covers the following topics.

Topic	See Page
Training Overview	20
Preparation	21
Approaching Selected Households and Respondents	23
General Interview Skills	29
Probing	32
Providing Feedback	34
Questionnaire Conventions	36
Recording Information	42

Training Overview

Introduction The quality of SAGE results and their usefulness for within and across country comparisons largely depends on the quality of the interviews.

What you will learn In this training, you will learn how to:

- be part of an interview team
- interview respondents
- use and complete the SAGE questionnaires.

Learning outcomes The main learning outcome is to conduct consistent and effective interviews and record accurate data.

Specific learning outcomes for each module are provided in the table below.

Module	Learning outcome
Preparation	Knowing what materials are required to conduct SAGE interviews.
Approaching selected households	Able to introduce yourself well.
Obtaining consent	Understand the consent process and need for high levels of participation.
General interview skills, probing and feedback	Able to conduct interviews consistently, accurately and efficiently using standardized survey instruments and devices.
Questionnaire conventions	<ul style="list-style-type: none">• Identify and use interviewer instructions correctly throughout the questionnaire.• Recognize typographical conventions and what they mean.• Know how to use visual aids.• Know how to use devices to measure health.
Recording information	Accurate, clear and complete questionnaires.

Preparation

Introduction Before conducting your interviews, you will need to prepare all the necessary paper work and supplies, know what tasks you need to perform to complete the study and know the questionnaire contents thoroughly.

What you will need The forms and resources you may need for data collection are listed in the following checklist:

Form	✓
Name tags for interviewers.	
Map or list of households in sample and/or GPS device.	
Pencil, eraser and clip board.	
Notification of WHO SAGE study visit (Information letter (see Part 9)).	
Informed consent for the household informant.	
Informed consent for individual respondents.	
Informed consent for proxy respondent.	
Additional informed consent for storage and future use of blood samples.	
SAGE Questionnaires (HHQ, IQ-A through IQ-D, ProxyQ, VA-Q).	
Interview Manual (including Appendices and Kish Tables).	

Team work You will be assigned to work with a team of other interviewers in a specified area for the duration of data collection.

Each team will work with a Supervisor and/or Field Editor. The Supervisor is responsible for:

- providing answers and feedback to the interviewers;
- tracking your progress;
- identifying households for interview - and completing needed information for the follow-up interviews;
- ensuring questionnaires are accurately completed;
- monitoring time;
- managing blood samples;
- re-interviewing all proxy respondent interviews ; and,
- handling any difficult issues you encounter and ensuring your safety.

The Field Editor (if relevant) will:

- conduct quality checks;
 - review questionnaires from each completed interview; and,
 - work with you to finalize the questionnaire and get them ready for data entry.
-

Continued on next page

Preparation, Continued

Interviewer summary task list

An overview of the tasks of an interviewer are included in the following checklist:

Task	Description	✓
1	Locate and approach selected households.	
2	Brief household members on the purpose of the survey and gain their support.	
3	Document reason(s) for non-response, if household members refuse interview. Attempt to do Task 4 (below) before final refusal.	
4	Record names of all eligible respondents on the household roster.	
5	Identify a suitable informant to complete the Household Questionnaire.	
6	Conduct the Household interview and record results.	
7	Select an eligible household member aged 18 – 49 if no respondent aged 50+ has been pre-selected.	
8	Conduct the Individual interview and record results, or Proxy respondent questionnaire if the respondent is unable to answer the questionnaire directly.	
9	Make a final check of the completed questionnaires before turning over to the Supervisor or Field Editor.	
10	Report any difficulties to Supervisor.	

Note: Each of these tasks is described in more detail on the following pages.

Approaching Selected Households and Respondents

Introduction For the SAGE study, you will need to physically visit individual households to conduct the survey.

Contact process The table below briefly describes each stage in the contact process.

Stage	Description
1	Obtaining appointment lists from Supervisors. This should include households with associated addresses, or cluster areas (and map and /GPS device if necessary) to locate the selected households.
2	Physically approaching the dwelling and making contact (knock on door, ring bell, yell out,...).
3	Recording on the contact record form if no one is home. Revisit is required at another time.
4	Introducing yourself and exchanging greetings.
5	Explaining the reason for your visit and purpose of the SAGE study.
6	Explaining the interview process and what participation involves and the timeframe.
7	Recording each person living in the dwelling in the household roster.
8	Selecting a suitable household informant to answer the Household Questionnaire.
9	Obtaining informed consent from the household informant.

Note: Each of these stages is described in more detail below.

Contact attempts Actual contact attempts must be made, either by knocking on the door of the household, calling out, or talking to people you encounter near the household. Simply walking by and thinking that no one is at home cannot be counted as an attempted contact.

Use the following table to help with different situations when you attempt to make contact.

If...	Then...
Someone is at home	Speak to the first adult you encounter in the household.
No one answers	Try again or ask neighbour if they know where the person might be.
No one is at home	Leave the WHO SAGE information letter with date of anticipated return and record details in the contact record form.
Household members are not available at the time of the first visit.	Make at least 2 additional visits to obtain an interview. Choose times that are different – early morning or late afternoon.

Approaching Selected Households and Respondents, Continued

Recording household details

Record the date and time of the visit on the contact record form.

Introducing yourself

Make sure your name tag is attached and is clearly visible.

Introduce yourself and explain the reason for your visit as follows:

My name is _____ and I work for _____. The reason I am contacting you is because we are conducting a survey on health in [country] and I would like to ask you a number of questions. Let me assure you that whatever information you tell us is completely confidential and will only be used for research purposes.

Explaining purpose of the survey

Explain the reasons for this study along the following lines. The survey data will be used to:

- Provide important information on how often many different types of health problems occur.
- Help develop effective health prevention and treatment programmes.
- Identify barriers that people may face when they try to get help for their health problems.
- Provide information on the role of health and how people adjust to stressful life experiences.
- Compile global information on the health of populations.

Note: If the contact person is unwilling to cooperate at this stage - see page 26 for guidelines on how to persuade reluctant people to participate.

Explaining collection method

Explain that you will be collecting information from a number of households and individual respondents aged 18 years and older - with an emphasis on those aged 50 years and older - throughout the country. Explain how the data will be collected, as appropriate, that is through:

- questions about health and well-being;
 - measurements of height, weight, waist, hips, blood pressure, lungs, eyes and strength; and,
 - blood tests for sugar and fats and to detect certain conditions.
-

Continued on next page

Approaching Selected Households and Respondents, Continued

Explaining survey process

Use the table below to help run through the whole survey process to the respondents:

Stage	Description
1	Explaining the purpose of the study and its importance.
2	Responding to any questions.
3	Completing the informed consent form for the Household informant.
4	Asking some questions about the household and each of the household members.
5	Selecting an appropriate respondent from the household.
6	Determining if the selected respondent is able and capable of responding.
7	Obtaining individual consent or proxy respondent consent.
8	Asking the respondent some questions about their health, work history, behaviours, wellbeing etc and taking some simple measurements.
9	Completing the Individual Questionnaire (or proxy respondent) and thanking the household for their cooperation.

Duration of interview

Explain that the survey will take approximately 1 ½ to 2 hours to complete.

Other items to explain to respondents

Use the table below to help explain to each respondent other items of interest, such as the benefits, their rights and how confidentiality will be handled.

In terms of...	Explain to each respondent that...
Community benefits	The results of this study will be used to develop public health programmes to improve the health and well-being of everyone.
Individual rights	The informant or respondent may: <ul style="list-style-type: none">• decline to take part in the study;• stop the interview at any time; or• decline to answer some questions.
Confidentiality	<ul style="list-style-type: none">• They must provide their name and contact information in case follow-up is necessary.• Participation and the data collected will be completely confidential.• The information provided in this interview will be put together with all the other interviews to improve our understanding of health in this country. No personally identifiable information will be revealed to anyone outside the survey team.• Their name and their household or village will not be used in any report of the study results.

Persuading Reluctant Respondents to Participate

Introduction

You may encounter some people that express hesitancy or reservation, or refuse to participate. Some of these people may have been contacted before.

With the right approach you should be able to persuade all potential respondents to participate.

Approach

In general, be pleasant good-natured and professional and most respondents will co-operate.

Respondents must not be forced to respond to the whole interview or to any part of the survey process. However, the more refusals that are made, the less representative the survey is of the whole population.

No prior contact

If a person who is being contacted for the first time is reluctant to participate in the study, and you are not sure why (for instance, the person says, "I'm not interested"), then pick an issue (only takes a short time, importance of the study, use of results to improve health care in your country) and begin to discuss it.

Once you understand the person's real objections, you can address them.

Prior contact

For people that have been contacted before, and still refuse to participate, follow the steps below to prepare for your visit.

Step	Action
1	Review any notes from prior contacts and obtain as much background information as possible.
2	Prepare notes about what you plan to say.
3	Address the respondent's concerns, but be careful not to get into an extremely long discussion about these concerns.
4	Ask if you could at least ask questions about who lives in the household - and attempt to complete the Household Roster (Section 0400).

Guidelines for persuading respondents

Follow the steps below for some tips on how to address respondents concerns, then quickly focus on the positive aspects of participating in the survey and eventually persuading them to participate.

Step	Action
1	Identify yourself and your organization and explain that: <ul style="list-style-type: none">• you are not trying to sell anything• you are not doing market research• all information will be held in the strictest of confidence.

Continued on next page

Persuading Reluctant Respondents to Participate, Continued

Guidelines for persuading respondents (continued)

Step	Action						
2	<p>Focus on the positive aspects of the survey such as:</p> <ul style="list-style-type: none"> • the study is important • most people enjoy the experience • time spent in an interview passes quickly. <table border="1"> <thead> <tr> <th>If...</th><th>Then...</th></tr> </thead> <tbody> <tr> <td>the contact person becomes defensive</td><td> <ul style="list-style-type: none"> • Show patience and understanding. • Provide empathy and understanding of his/her viewpoint, by, saying something like, 'I can understand that' or 'You certainly have the right to feel that way'. </td></tr> <tr> <td>you may have visited at a bad time</td><td>Tell the person that you will come back another time - try again later.</td></tr> </tbody> </table>	If...	Then...	the contact person becomes defensive	<ul style="list-style-type: none"> • Show patience and understanding. • Provide empathy and understanding of his/her viewpoint, by, saying something like, 'I can understand that' or 'You certainly have the right to feel that way'. 	you may have visited at a bad time	Tell the person that you will come back another time - try again later.
If...	Then...						
the contact person becomes defensive	<ul style="list-style-type: none"> • Show patience and understanding. • Provide empathy and understanding of his/her viewpoint, by, saying something like, 'I can understand that' or 'You certainly have the right to feel that way'. 						
you may have visited at a bad time	Tell the person that you will come back another time - try again later.						
3	<p>Explain why we can't just contact someone else by stressing:</p> <ul style="list-style-type: none"> • the uniqueness of this opportunity • how the respondent has been selected to participate in something that is important • a chance that is being offered to only a small number of people in the area. <p>Note: An explanation about sampling is not always a useful strategy.</p>						
4	If you think you may get a 'No' - attempt to leave and suggest coming back later - before you get a possible or absolute 'No'.						

Obtaining Consent

Introduction

Both the household informant and the selected individual respondent (or proxy respondent) must provide both verbal and written consent before taking part in the survey.

Obtain consent

For those who will take part in the study, follow the steps below to obtain informed consent.

Step	Action												
1	<p>Select the appropriate consent form for each person taking part as follows:</p> <ul style="list-style-type: none"> • Household informant • Individual respondent • Proxy respondent <p>Note: See Part 9 for copies of consent forms.</p>												
2	<p>For each person taking part, use two copies of the consent forms as follows:</p> <ul style="list-style-type: none"> • One for the informant/respondent/proxy respondent to keep • One for the SAGE study central office. 												
3	<p>Allow the informant/respondent/proxy respondent to read the consent form or, in case of poor eyesight or illiteracy, read it out to them.</p>												
4	<p>Ensure that the respondent understands what his/her participation involves before asking them to sign the consent form.</p>												
5	<p>Use the table below to help with the following situations:</p> <table> <tr> <th>If informant/respondent/proxy respondent..</th><th>Then...</th></tr> <tr> <td>Answers 'No' to any question in the consent form</td><td>Ask whether they understand the questions.</td></tr> <tr> <td>Does not understand the question</td><td>Rephrase the question.</td></tr> <tr> <td>Agrees to the interview but does not wish to sign</td><td>Ask witness to sign or you as interviewer sign the form - and indicate reason.</td></tr> <tr> <td>Unable to sign for example if respondent is illiterate or has severe vision impairment.</td><td>Get the respondent to mark the box, and you as interviewer sign the form.</td></tr> <tr> <td>Understands the question and the answer is still 'No'</td><td>Circle 'No' in the consent form*.</td></tr> </table> <p>*This means the respondent will not participate in the survey but still include him/her in the household roster.</p>	If informant/respondent/proxy respondent..	Then...	Answers 'No' to any question in the consent form	Ask whether they understand the questions.	Does not understand the question	Rephrase the question.	Agrees to the interview but does not wish to sign	Ask witness to sign or you as interviewer sign the form - and indicate reason.	Unable to sign for example if respondent is illiterate or has severe vision impairment.	Get the respondent to mark the box, and you as interviewer sign the form.	Understands the question and the answer is still 'No'	Circle 'No' in the consent form*.
If informant/respondent/proxy respondent..	Then...												
Answers 'No' to any question in the consent form	Ask whether they understand the questions.												
Does not understand the question	Rephrase the question.												
Agrees to the interview but does not wish to sign	Ask witness to sign or you as interviewer sign the form - and indicate reason.												
Unable to sign for example if respondent is illiterate or has severe vision impairment.	Get the respondent to mark the box, and you as interviewer sign the form.												
Understands the question and the answer is still 'No'	Circle 'No' in the consent form*.												
6	<p>Get the respondent to sign both copies.</p>												
7	<p>As interviewer, you must sign as a witness.</p>												
8	<p>Thank him/her for agreeing to take part in the survey.</p>												

General Interview Skills

Introduction

The SAGE interview is about finding out and recording a list of facts and behaviours relating to selected eligible respondents.

The respondent needs to feel comfortable about the survey and can refuse to be interviewed as participation is voluntary. Your interview should therefore be as natural as possible and conducted politely, like a normal conversation.

Behaviour and tact

The table below provides guidelines on appropriate behaviour during an interview:

Behaviour	Guidelines
Respect confidentiality	Maintain the confidentiality of all information you collect.
Interviewing older people	With increasing age, sensory deficits may occur, including decreased vision and hearing. <ul style="list-style-type: none">• Speak clearly and with sufficiently loud volume.• Make sure there is sufficient light when you use the SHOWCARDS for respondents to see the images clearly.• Give respondent's sufficient time to respond and prompt if needed.• Account for age differences between interviewer and respondent and any issues around this.
Respect respondents time	You are asking respondents for their time so be polite and prepared to explain.
Tact	If you feel that a person is not ready to assist you, do not force them but offer to come back later.
Friendly disposition	Act as though you expect to receive friendly co-operation and behave accordingly.
Body language	This is very culture specific - for some, good body language is to maintain good eye contact and adopt appropriate body language (for instance, sit straight, show interest, no yawning).
Pace of interview	<ul style="list-style-type: none">• Don't rush the interview. Allow the respondent enough time to understand and answer a question.• If pressured, a respondent may answer with anything that crosses their mind.
Patience	Be patient and polite at all times during the interview.
Acceptance	<ul style="list-style-type: none">• No matter what the responses to questions, do not be judgemental of a respondent's lifestyle.• Expression of any criticism may lead to refusing or concealing important information.
Appreciation	Thank them for their help and cooperation.

Continued on next page

General Interview Skills, Continued

Asking questions

The table below provides guidelines on asking questions in an interview:

Topic	Guidelines
Issues relating to chronic, noncommunicable diseases and their risk factors	Do not discuss or comment on issues relating to chronic, noncommunicable diseases and their risk factors. Respondents may not give correct answers to the questions but give the answers they think the interviewer is looking for.
Right or wrong answers	Point out that there are no right or wrong answers and that the interview is not a test.
Biased answers	Ask your questions according to guidelines given in the Q by Q guide to avoid biased answers and ensure comparability of data.
Reading response options	<ul style="list-style-type: none"> • Response categories in normal font (including bold) should all be read. • READING RESPONSE CATEGORIES IN SMALL CAPS IS OPTIONAL. If a response category repeats often, it may be sufficient to read it to the informant/respondent the first few times, but after not needed. Reading is encouraged if it improves the accuracy of responses. • <i>Do not read response categories in italics to the respondent</i>, for example, 'Don't know', 'Not Applicable', or 'Refused'.
Reading questions	<p>Questions should be read:</p> <ul style="list-style-type: none"> • as they are written in the text • slowly and clearly emphasizing key words in bold • in a pleasant voice that conveys interest and professionalism, and • entirely to make sure the respondent has heard it completely. <p>Do not change the wording or order of the questions.</p>
Making assumptions	<p>Don't make assumptions about the respondents' answers with comments such as "I know this probably doesn't apply to you, but..."</p> <p>This practice may prevent accurate and unbiased information.</p>

Continued on next page

General Interview Skills, Continued

Providing clarification

You may need to provide clarification 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 a long time to answer the question and hesitates.
- Asks about a specific part of the question to be repeated (it is acceptable to repeat only that part).
- Asks for one option to be repeated (read all options again).
- Asks for one term to be clarified (refer to the explanations provided in the question by question guide).

Interruptions

Interruptions may occur during an interview. If they become too long or too many, suggest returning at another time to complete the interview.

Take care that even if interrupted or delayed, you should remain patient and polite at all times.

Language issues

Be aware that if you use ‘interpreters of convenience’ (such as members of the respondent’s family or household, the village headman, or domestic staff), you run the risk of collecting inaccurate information.

If you don’t get sufficient co-operation due to a language barrier, report this to your supervisor.

Probing

Introduction

You will need to probe further to get an appropriate response when the respondent:

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

Common responses that need probing

The table below lists some common responses that may need further probing:

If the respondent replies...	Then...
"I don't know" (DK)	Repeat the question.
"I still don't know"	Probe once before recording (DK or '-8 Don't know'), for example, ask "Could you give me your best guess/estimate?"
"I still don't know"	This may mean the respondent: <ul style="list-style-type: none">• Is taking time to think and wants to gain time• Does not want to answer because of personal reasons• In fact does not know or has no opinion
"Not applicable" (N/A)	<ul style="list-style-type: none">• Ask him/her why the question does not apply to him/her.• Write down N/A if it is clear that the question is irrelevant. Code is '98'.

Notes:

- 'Don't know', 'Don't remember', 'N/A' and 'refused' should be used only as an absolute last resort. See page 36 for more information.
- If 'Don't know', 'N/A' options are not available, write them in the right margin next to the question row.

Continued on next page

Probing, Continued

Probing techniques

The table below provides a few techniques to use when probing further:

Technique	Guidelines
Repeat the question	The respondent may come up with the right answer if he/she hears the question a second time.
Pause	This gives the respondent time to collect his/her thoughts and expand on his/her answer.
Repeat the respondent's reply	This is often a very effective way of having the respondent reflect on the answer he/she has just given.
Use neutral probes	Avoid biased responses and probes. Never give the impression that you approve or disapprove what the respondent says, or that their answer is right or wrong. Instead, if you want more information, ask “anything else?”, or “could you tell me more about...?”

Providing Feedback

Introduction

It is important that the interviewer tell the respondent when s/he is doing well, throughout the interview process. You may need or choose to do this quite often. It is also a way of maintaining control over the interview. This will help maintain motivation and encourage good performance.

When feedback is needed

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

Some useful feedback techniques include:

- Vary the type of feedback by using different phrases.
- Pause briefly after feedback.
- Give verbal as well as non-verbal feedback, 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 because he/she will feel that what he/she is saying is important.

Suggested phrases

Some suggested phrases for a variety of respondent responses are provided in the table below.

If the respondent..	Suggested phrases or response
<ul style="list-style-type: none">• Makes inappropriate enquiries• Asks for advice or information• Wants to know about the interviewer's personal experiences.	<p>In this interview, we are really interested in learning about <u>your</u> experiences.</p> <p>When we finish, let us talk about that.</p> <p>We can discuss that later.</p>
Digresses from the questions by giving lengthy responses or unnecessary information.	<p>I have many more questions to ask so we should really move on.</p> <p>If you would like to talk more about that, perhaps we can do it at the end of the interview.</p>
Gives inappropriate responses or feels like conversing.	Silence can be quite effective in this case.

Continued on next page

Providing Feedback, Continued

Acknowledging respondent's performance

Feedback must always be neutral and you should acknowledge the respondent's performance by using appropriate feedback sentences such as those suggested in the table below..

To..	Respond with..
Acknowledge responses to close-ended questions	<ul style="list-style-type: none">• Thank you / Thanks• I see• All right• Okay
Reinforce respondent motivation and attention on a long series of questions, open-ended questions, or questions that are difficult for the respondent	<ul style="list-style-type: none">• 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
Acknowledge that what the respondent has said is important and worth recording.	<ul style="list-style-type: none">• 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

Gestures and tone of voice

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 their verbal answer is confusing or not clear.

The respondent's anger or frustration may not come through verbally but may be communicated non-verbally.

Questionnaire Conventions

Introduction Standard conventions have been used throughout the questionnaire. Each of these is explained on the pages below.

Recording time Record the time at the beginning and time at the end of each and every section marked, including those identified in the household roster. Record the time using 4 digits, for example **09:22**, using the following international conventions.

00 : 00	Midnight	08 : 00	8 AM	16 : 00	4 PM
01 : 00	1 AM	09 : 00	9 AM	17 : 00	5 PM
02 : 00	2 AM	10 : 00	10 AM	18 : 00	6 PM
03 : 00	3 AM	11 : 00	11 AM	19 : 00	7 PM
04 : 00	4 AM	12 : 00	12PM, noon, mid-day	20 : 00	8 PM
05 : 00	5 AM	13 : 00	1 PM	21 : 00	9 PM
06 : 00	6 AM	14 : 00	2 PM	22 : 00	10 PM
07 : 00	7 AM	15 : 00	3 PM	23 : 00	11 PM

Recording date Dates are asked throughout the survey (for example, date of birth). You should use the format of day, month, year. For the first nine days or months - use 01, 02, 03,...09. Format for months is: January = 01; February=02; March=03; April=04; May=05; June=06; July=07; August =08; September=09; October=10; November=11; December=12. For countries/cultures that use a Julian, Metonic or Persian calendar, please convert to the Gregorian calendar.

Introductory statements and questions Introductory statements, questions and anything written in standard print (either in bold or not bold) must be read to the respondent. In the example below, the entire question should be read to the respondent.
Example: Q2002. Overall in the last 30 days, how much difficulty did you have with moving around?

Response categories You should read out the response categories for questions with the same response categories (as shown in the example below) the first time (Note: SMALL CAPS TEXT). Then, depending on the respondent's reply, decide if it is necessary to continue to read out the response categories each time. If the respondent is having difficulties, you may need to use SHOWCARDS that list the response categories.

Please tell us how satisfied you are with the following issues.						
	How satisfied are you with...	VERY SATISFIED	SATISFIED	NEITHER SATISFIED NOR DISSATISFIED	DISSATISFIED	VERY DISSATISFIED
Q7003	...your health?	1	2	3	4	5
Q7004	...yourself?	1	2	3	4	5

Continued on next page

Questionnaire Conventions, Continued

Interviewer instructions

Anything written in *italics* (*UPPERCASE or lowercase, **bold** or not bold*) is an interviewer instruction and should NOT be read aloud.

In the example below, the question should NOT be read to the respondent, it is an instruction to the interviewer only. Response categories in SMALL CAPITALS, also indicate that they do not need to be read to the respondent.

Q1009	<i>INTERVIEWER:</i>	1	MALE
	<i>Record sex of the respondent.</i>	2	FEMALE

Skips (.....➔) 'go to' with questions

Skip instructions are shown usually in the far right column. Skipped questions must be left blank. An arrow (.....➔) should be understood as "go to".

In the example below, if the respondent answers 'Yes', then go directly to Q1508, skipping questions between Q1504 through Q1507. If the respondent answers 'No', then proceed to the next question Q1504.

Q1503	Have you worked for at least 2 days during the last 7 days?	1	YES	➔	Q1508
		2	No		

Underlined type

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

In the example below, the "last 12 months" is underlined and should be emphasized to the respondent. The question is only interested in whether household members provided assistance to someone outside the household (instead of receiving assistance) in the last 12 months.

Q0610	In the <u>last 12 months</u> , has anyone in your household <u>provided</u> any financial aid or in-kind support to any of your children, grandchildren and/or other family (and those of your spouse) who do not live in this household?	1	YES				
		2	NO.....	➔	Q0612		
		-8	DON'T KNOW.....	➔	Q0612		

Question leader...

Questions with a leader ("Compared with ...") are to decrease repetition. You do not need to read the leader for every question.

	Compared with [<i>10 years</i>] ago how is this person at...	MUCH IMPROVED	A BIT IMPROVED	NOT MUCH CHANGE	A BIT WORSE	MUCH WORSE	DON'T KNOW
P1022	...remembering things that have happened recently?	1	2	3	4	5	8
P1023	...recalling conversations a few days later?	1	2	3	4	5	8

Continued on next page

Questionnaire Conventions, Continued

'Other' entries If the respondent indicates a response that is not listed, then the interviewer should record verbatim what the respondent says next to "Other, specify " response option. Other is listed as '87'.

Q1501a	What is the main reason that you have never worked?	1	Homemaker / caring for family	}	Q2000
		2	Could not find a job		
		3	Do voluntary (unpaid) work		
		4	In studies / training		
		5	Health problems/disabled		
		6	Have to take care of family member		
		7	Did not have the economic need		
		8	Parents / spouse did not let me		
		87	Other, specify <u>No jobs in this area</u>		

Use of '-8', '97', '98' and '99' response codes Responses of 'Don't know', 'Not applicable', refusal and missing, the interviewer should use special codes for the Supervisor and Data Entry clerks. See guidelines below

'Don't know' response With some questions the respondent may not know the answer. In general 'Don't know' answers are NOT encouraged and should not be offered to the informant or respondent. If the respondent is having difficulty answering, you should probe or clarify the question. However, if the respondent is still not able to answer then mark the 'Don't know' option. Where a 'Don't know' option is not provided - manually write 'DK'. 'Don't know' should be coded as '-8', '88', '888' depending on the width of the field.

"Missing" response See Editing Guide, page 207. To be coded as '-9', '9', '99', '999'...depending on the question and width of the field.

'Not applicable' response Some questions may not be applicable or relevant for the informant/respondent. For example, the respondent may never climb stairs, so for Q2029 the interviewers would circle '98 N/A'. This response option is rarely included in the questionnaire, but if the interviewer needs to use it for a question, clearly write 'N/A'. Data entry clerk would enter this as '98', '998'...

'Refused' response An informant or respondent may refuse to answer certain questions. The interviewer should attempt to determine the reason for the refusal, and attempt to probe and get an answer. Where this is not possible, the interviewer should circle '-97', '97', '997'... or write 'REFUSED' in the margin to the right of the question row.

Continued on next page

Questionnaire Conventions, Continued

Parentheses () 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.

In the example below, the words in the parentheses should be read to the respondent as an example of what the question is asking. You may need to use a SHOWCARD to assist the respondent with the response categories.

Overall in the last 30 days, how much difficulty...		NONE	MILD	MODERATE	SEVERE	EXTREME / CANNOT DO
Q2011	... did you have in <u>learning a new task</u> (for example, learning how to get to a new place, learning a new game, learning a new recipe)?	1	2	3	4	5

Brackets [] Items in brackets [] contain instructions to translators and interviewers:

As shown in the example below, read the word/phrase that is most appropriate to the situation. If the respondent previously indicated being sad, then you should read, "of sadness", if the respondent previously indicated he or she had low energy, then read, "low energy".

Q4045	Was this period [of sadness/loss of interest/low energy] for more than 2 weeks?	1	YES	→	Q4060
		2	No		

Visual aids Visual aids help respondents remember important information while answering questions and rating different items. They include:

- SHOWCARDS;
- diagrams; and,
- lists of response options.

Allow enough time for respondents to examine the visual aids and think about their responses. Instructions are given throughout the questionnaire so you will know when to produce visual aids and how to use them.

Types of Questions

Introduction Different types of questions, response categories and choice options are used throughout the questionnaire, including:

- close-ended questions (spontaneous and non-spontaneous)
- open-ended questions
- categorical response choices
- numerical response choices.

Close-ended questions There are two ways of getting responses for close-ended questions. These are:

- non-spontaneous
- spontaneous.

Non-spontaneous With non-spontaneous close-ended questions, such as in the example below, you should read the question and each of the response categories the respondent should choose from.

Q2000	In general, how would you <u>rate your health today</u> ?	1	Very good
		2	Good
		3	Moderate
		4	Bad
		5	Very bad

Spontaneous Spontaneous closed-ended questions are provided by answer choices in SMALL CAPITALS. You do not read out these answer options.

Read the question and when the respondent gives their answer, circle the most appropriate option from the list of response categories. Choose '87 Other, specify: ' if the response does not match any of the pre-defined choices. If the respondent has difficulty choosing an option, probe for the best answer. See page 32 for details on probing techniques.

Q1019	Do you belong to a <u>religious denomination</u> ?	1	NO, NONE
		2	BUDDHISM
		3	CHINESE TRADITIONAL RELIGION
		4	CHRISTIANITY (INCLUDING ROMAN CATHOLIC, PROTESTANT, ORTHODOX, OTHER)
		5	HINDUISM
		6	ISLAM
		7	JAINISM
		8	JUDAISM
		9	PRIMAL INDIGENOUS (INCLUDING AFRICAN TRADITIONAL AND DIASPORIC)
		10	SIKHISM
		87	OTHER , SPECIFY <u>Shintoism</u>
		99	REFUSED

INTERVIEWER: allow the respondent to reply without reading categories. Clarify as needed.

Continued on next page

Types of Questions, Continued

Open-ended

For open-ended questions, as shown in the example below, ask the question, and then record the answer given in the respondent's own words.

Q1027	What is/was her main occupation? <i>INTERVIEWER: write exactly what the respondent says - clarify if you do not understand - write clearly in capital letters</i>	<hr/>	
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Categorical choices

Where there is a list of categories to choose from, as in the example below, you should select the response category that best fits respondents answer.

Note: Clarification and probing might be needed.

Q1012	What is your <u>current</u> marital status?	1 NEVER MARRIED →	Q1015
		2 CURRENTLY MARRIED →	Q1014
		3 COHABITING →	Q1014
		4 SEPARATED/DIVORCED →	Q1013
		5 WIDOWED →	Q1013

Numerical choices

Where there is a need for numerical response, as in the example below, you will write numbers (one digit per box), such as age or years, height or weight.

If after probing the respondent can not answer because they do not know, circle '-8 Don't know'.

Q1502	At what age did you start working for pay?	<input type="text"/> <input type="text"/> YEARS OF AGE →	Q1503
		-8 DON'T KNOW	

Recording Information

Introduction All results that are recorded on the SAGE questionnaire must be written as clearly as possible to avoid ambiguity and confusion when checking and entering the results.

Taking notes Find a comfortable place for writing. Sit in front of the respondent or in a place where what you write cannot easily be seen by the respondent. It is better not to show the informant or respondent what you are writing or recording - and best to be as discrete as possible while documenting responses or taking notes. Attempt to record notes while the informant/respondent is talking, as appropriate. This will help reduce the interview time.

General requirements Some general requirements for recording response information are as follows:

- Write clearly and legibly (Interviewers preferably in blue pen, editors/supervisors in different colour ink).
- Write the response during the interview, while the respondent is talking.
- Record what is said, the way it is said - word for word.
- Do not erase any notes you make.
- If a question has been skipped by mistake, correct it.
- If an informant/respondent changes her/his response on one of the questions, use single line-out for old response and record the new response.
- Record comments or explanations in brackets next to the corresponding question.
- Don't get too absorbed recording. Keep the respondent's interest by saying the respondent's response aloud as you write it down.
- Reach a standard agreement on how to write numbers (mainly 1s and 7s).

Recording interviewer assessments When possible, record your assessments about the respondent and questions directly into Interviewer Assessment sections as follows:

- Section 0900 of the Household Questionnaire
- Section 9000 of the Individual Questionnaire

Different question types Follow the guidelines in the table below to record responses to different question types.

Question type	Guidelines for recording responses
Closed ended questions	Neatly circle the option. Include both the answer and the number in one circle.
Open ended questions	Record the response using CAPITAL LETTERS
Fill-in questions	Record the response in the box provided using CAPITAL LETTERS.
Marginal notes	Record additional descriptions such as "if", "except" or "but", in the right margin.

Continued on next page

Recording Information, Continued

What not to record

Do not record the following responses:

- Justifications such as explanations to a closed-ended question.
- Digressions that are irrelevant to the question being asked.
- Hesitations, mumbling or feedback.

Handling issues

Use the table below to help with some common issues you may encounter.

If...	Then...
You are uncertain about a response	Repeat the question and record the answer exactly. Do not paraphrase a response.
You have missed a question	Go back and ask the question, make a note in the left margin that the question was asked out of sequence.
The respondent does not know and a 'Don't Know' is not available in the response options.	Write '-8' or 'DK'
The respondent refuses to answer a question	Mark as '97' or 'REF' Note: Before accepting a refusal, explain the objective of the question to the respondent.
The question does not apply	Mark as '98' or 'N/A'
Missing data is not discovered until after the interview	If possible, re-contact the respondent and ask the question. Note in the margin that the question was asked out of sequence. If not possible, for example the survey team has moved on from the village, then write "Missing" in the left margin of the form. Code as '-9', '99', '999'...

Checking and editing

Before leaving the household check 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 clearly indicated in the right margin.
- Open-ended questions are written in full sentences and not in abbreviations.
- All cover sheet information is correctly completed (Section 0000).
- The address is correct in Section 0300.
- Every attempted call to the household is recorded (Section 0350).
- The household roster is complete (Section 0400).
- The Interviewer Observations are completed.

Part 4: Guide to Taking Health Measurements and Tests

Overview

Introduction This part provides practical step by step instruction on how to prepare respondents and take the physical and cognitive health measurements and tests required in the Individual Questionnaire.

Intended audience This part is intended for:

- Interviewers
 - Supervisors
-

In this part This part covers instructions on taking the following health measurements and tests.

Topic	See Page
Blood Pressure and Pulse Rate	46
Height, Weight, Waist and Hip Circumference Measurements	48
Timed Walks	51
Vision Tests	53
Grip Strength	55
Cognitive Ability	56
Lung Function Test	59
Blood Tests	63

Blood Pressure and Pulse Rate

Introduction Blood pressure is taken to assess whether the respondent has raised blood pressure. Raised blood pressure is a risk factor for a number of chronic, noncommunicable diseases.

Equipment To take blood pressure and pulse rates you will need a Boso Medistar Wrist Blood Pressure Monitor Model S as shown below.



Preparation Follow the steps below to prepare the respondent.

Step	Action
1	Tell respondent that you would like to measure their blood pressure and pulse rate using a small device that straps onto their wrist. You will be taking three separate readings. The device will squeeze their wrist a little, but it won't hurt.
2	Ask respondent to sit quietly with their legs uncrossed and relax.
3	You will be using the left wrist unless the person has problems. Roll or push up the respondent's sleeve if necessary and make sure the rolled sleeve is not too tight around the arm and does not constrict the flow of blood.
4	Tell respondent that once the device is placed on the wrist, she/he will need to keep her/his wrist steady and at the level of the heart.

Procedure Q2501-Q2503a Follow the steps below to take and record three blood pressure and pulse readings.

Step	Action
1	Wrap the wrist cuff of the device around the respondent's wrist. Secure with the Velcro strap for a snug fit. Note: Do not apply the device over clothing.
2	Have respondent place the wrist against their chest approximately at the level of their heart. The hand should rest approximately at the level of the shoulder, elbow at the waist, with the arm against the body. The free hand should be placed under the elbow to support the arm with the device on the wrist. Note: Ask respondent to remain quiet, sit still and not to talk during the measurement. Ask respondent to take 3 deep, slow breaths before you start measuring.

Blood Pressure and Pulse Rate, Continued

Q2501-Q2503a (continued)

Step	Action
3	Press the START button (arrow A).
4	Wait for the device to finish its measurement before reading and recording the outcome. You do not need to remove the device between readings.
5	Record the: <ul style="list-style-type: none">• systolic blood pressure (arrow B)• diastolic blood pressure (arrow C)• pulse rate (arrow D).
6	Wait at least 1 minute until next reading. If third reading, go to Q2504.
7	Repeat steps 3 through 6 to record the second and third readings. Note: Measure each blood pressure and pulse rate reading on the same wrist.

Height, Weight, Waist and Hip Circumference Measurements

Introduction Height, weight waist and hip circumference measurements are recorded to calculate body mass index (BMI) and to determine a respondent's risk for different health conditions.

Self reported height and weight Before measuring a respondent's height and weight - we ask the respondent if she/he knows her/his height and weight.

Q2504 & Q2505 Follow the guidelines below to obtain the respondent's self-reported height and weight.

Question No.	Question	Guide for completion
Q2504	What is your height in centimetres?	<ul style="list-style-type: none">• If respondent doesn't know, ask them to give you his/her best guess.• If doesn't know height in centimetres, but does know in metres or feet/inches - clearly indicate that and ask Supervisor to convert to centimetres.• 1 inch = 2.54 centimetres.
Q2505	What is your weight in kilograms?	<ul style="list-style-type: none">• If respondent doesn't know, ask them to give you his/her best guess.• If doesn't know weight in kilograms, but does know in pounds - clearly indicate that and ask Supervisor to convert to kilograms.• 1 pound = 2.2 kilograms.

Equipment To physically measure height, weight, waist and hip circumference measurements you will need the following equipment:

- stadiometer (height);
- weighing scale; and,
- Gulick measuring hoop/tape or flexible measuring tape (circumference).

General guidelines Follow the general guidelines below to prepare respondents and take the measurements.

- Ask respondents to wear a single layer of clothing.
- Ask respondents to remove outer clothing (for example, jackets, jerseys, coats).
- Do not attempt any measurements for respondents that:
 - are totally immobile;
 - cannot stand up on their own (for example person in a wheelchair, person without a leg).
- If a respondent is missing a leg but uses a prosthesis, perform all measures. Indicate whether the weight measurement includes the prosthesis or orthopaedic device. If possible, weigh the prosthesis and indicate that on the questionnaire.
- If a respondent is pregnant perform height measurement only.

Continued next page

Height, Weight, Waist and Hip Circumference Measurements, Continued

Height Q2506 Follow the steps below to measure height.

Step	Action
1	Select an area where the floor is firm, flat and close to a wall.
2	Have respondent remove any footwear. Barefoot is preferred, but thin stockings/socks are allowed.
3	Ask respondent to stand with their back to a wall or something straight and sturdy, and keep: <ul style="list-style-type: none">• step onto the base of the stadiometer• feet together• heels, buttocks, back and head against the wall*• knees straight• look straight ahead, chin tucked to chest slightly, do not look up. Note: make sure eyes are the same level as ears. *Anyone who cannot stand straight in this position, should be positioned vertically so heels and buttocks or head touch the wall.
4	Ask respondent to inhale deeply and maintain full erect position.
5	Stretch top of stadiometer (with level) to topmost point on the head with sufficient pressure to compress the hair.
6	Record height to nearest 0.1 cm.

Weight Q2507 Follow the steps below to measure weight.

Step	Action
1	Place the weighing scale on the floor on a flat, firm surface. Try to avoid uneven surfaces and soft earth floors.
2	Set the scale within reach of a wall, so that respondents can lean over if they lose their balance.
3	Ask respondents to take off their shoes (socks may remain on) and any heavy accessories. Remove excess or heavy clothing.
4	Check the scale is display is set to zero. Reset if necessary.
5	Ask respondent to step on the scale and: <ul style="list-style-type: none">• stand still• face forward• place their arms at their side with palms facing inwards• not hold onto anything.
6	Read and record weight in kilograms to the nearest 0.1kg.

Continued on next page

Height, Weight, Waist and Hip Circumference Measurements, Continued

Waist circumference Q2508

Follow the steps below to measure waist circumference. Use the space on the questionnaire, labelled as "Notes:" to describe the layers of clothing under the tape during the measurement.

Step	Action
1	Ask person to have only light clothing between the Gulick measuring tape and their skin.
2	Stand on the right side of the respondent. Have the respondent step into the circle of the Gulick measuring device and slide it up the legs to the waist OR slide it over the head and shoulders of the respondent down to the waist. As much as possible, minimize physical contact.
3	Ask respondent to stand with their feet together, arms at their side with palms facing inwards.
4	Ask respondent to feel for the top of the hip bone on both sides, at the level of the waist, and to indicate this to you on their right side.
5	Ask respondent if you can check this. Check the top of the right hip bone, and move the tape to this spot in preparation for recording the measurement. Make sure the tape is parallel to the floor all the way round the body when preparing to make the measurement. That means that it will also touch the top of the hip bone on the respondent's left and right side.
6	Ask the respondent to breath normally and pause at the end of a expiration of a breath when you will take the reading. You will take the reading at the level of the top of the hip bone.
7	Fit the tape snugly, but not so tightly as to compress the belly.
8	Record the reading to the nearest 0.1cm.

Hip circumference Q2509

Follow the steps below to measure hip circumference. If you have measured the waist, continue. If you have not measured the waist, follow Q2508 to position the Gulick tape. Use the space on the questionnaire, labelled as "Notes:" to describe the layers of clothing under the tape during the measurement.

Step	Action
1	Make sure the person has minimal clothing on the hips between the tape and skin.
2	Ask respondent to remain standing with their feet together, arms at their side with palms facing inwards.
3	Move the Gulick tape from the waist, to the maximum circumference of the hips.
4	Take the flexible tape measure around the maximum circumference of the respondent's buttocks, being careful to make sure the tape is parallel to the floor all the way round.
5	Fit the tape snugly, but not so tightly as to compress the soft tissue.
6	Record the measurement in centimetres to the nearest 0.1cm.

Timed Walks

Introduction	Walking speed is predictive of overall health, level of disability, future use of health care and mortality among older people. Walking speed and steadiness declines with age. This decline increases the chances of injury.
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Equipment	To measure timed walks, you will need the following:
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- 4-metre length space
 - stopwatch
 - measuring tape
 - masking tape.
-

Preparation	Find a suitable area that is safe, flat and free of any obstructions to conduct the timed walks. Measure out a distance of four meters and mark the start and finish points with a strip of masking tape.
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Preparing the respondent	Follow the general guidelines below to prepare respondents and take the measurements.
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- Inform respondent that she/he will need to walk a four meter distance twice, the first time at a normal walking pace, the second time at a rapid walking pace. You will time how long each walk takes with a stop watch.
 - Make sure respondent is comfortable walking this distance without risking a fall. Do not perform the task if the respondent:
 - cannot walk, even with an aid such as a cane, walker or leaning on a wheelchair;
 - suffers from dizziness; and/or
 - has swelling or pain in their knee or hip.
 - Ensure that respondent wears appropriate footwear, low heeled shoes or trainers are preferred.
 - Explain that you will walk alongside to provide support in case she/he loses balance.
 - If respondent uses a cane or another walking aid and would be more comfortable with it, then she/he may use it.
-

Continued on next page

Timed Walks, Continued

Procedure Q2510 - Q2513

Follow the steps below to time and record normal and rapid walks along a measured course.

Step	Action						
Normal walk							
1	<p>Demonstrate a normal walk first.</p> <table border="1"> <tr> <th>If respondent</th><th>Then</th></tr> <tr> <td>Does not understand the instructions</td><td>Demonstrate once more and explain the instructions verbally.</td></tr> <tr> <td>Still does not understand</td><td>Skip the task.</td></tr> </table>	If respondent	Then	Does not understand the instructions	Demonstrate once more and explain the instructions verbally.	Still does not understand	Skip the task.
If respondent	Then						
Does not understand the instructions	Demonstrate once more and explain the instructions verbally.						
Still does not understand	Skip the task.						
2	Ask respondents to stand with both feet together touching the starting line.						
3	<p>Explain that when you say "begin" you want them to walk:</p> <ul style="list-style-type: none"> • To the other end of the course <i>at their usual speed</i>, just as if they were walking down the street to go to the store. • All the way past the other end of the tape before they stop. 						
4	Say "Ready, begin".						
5	Press the START/STOP button on the stopwatch ONLY when either foot is placed down on the floor across the start line. Note: Walk beside respondents for the length of the walk to provide support in case they lose their balance						
6	Press the START/STOP button to stop timing when the respondent's whole foot is across the finish line.						
7	Press the LAP/RESET button to reset the stopwatch.						
8	Record the time on the stopwatch.						
Rapid walk							
9	Demonstrate a rapid walk and repeat steps 1 and 2 above.						
10	<p>Explain that when you say "begin" you want them to walk:</p> <ul style="list-style-type: none"> • To the other end of the course <i>as fast as they can</i>. • All the way past the other end of the tape before they stop. 						
11	Repeat steps 4 to 8 above to time and record the rapid walk.						

Vision Tests

Introduction	Visual acuity is measured in both eyes using distance and near vision charts.
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Equipment	<p>To conduct vision tests, you will need the following equipment:</p> <ul style="list-style-type: none">• four meter distance vision Tumbling E Logmar Chart• 40 cm near vision Tumbling E Logmar Chart• flexible steel measuring tape• sticky tape. <p>Make sure that the surfaces of the eye charts are not scratched or marked - it may damage the lettering on the charts, and the results of the vision test. You may choose to keep the charts in their plastic sheaths for transporting, but remove when doing the testing.</p>
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Preparation	<p>Follow the general guidelines below to set up the vision tests and prepare respondents.</p> <ul style="list-style-type: none">• Start with distance vision using the 4 metre marked course used for the timed walk.• Make sure the vision charts are well lit - with natural lighting or indoor lighting as needed.• Make sure the surface does not reflect glare, making it more difficult for the respondent to see.• If a respondent uses glasses or contact lenses, conduct the test using them.
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Continued on next page

Vision, Continued

Procedure Follow the steps below to set up and conduct distance and near vision tests.
Q2514 - Q2517

Step	Action
Distance vision	
1	Set up the four meter distance vision Tumbling E Logmar Chart at the starting point of the marked four metre timed walk course.
2	Ask respondent to stand or sit at the end point of the course.
3	Adjust the chart if necessary to ensure the fourth line on the chart is level with the respondent's eyes.
4	Ask respondent to place her/his left hand in front of her/his left eye.
5	Ask respondent to read out loud every letter she/he can see starting with the large letters and moving progressively to smaller ones. Note: Line by line isolation may be used but not letter by letter.
6	Once the respondent has started a line, she/he should complete the line. If at least three letters are missed on a line and all letters on that line have been attempted, then end the visual acuity measure at that point.
7	Record the smallest line that the respondent can read.
8	Ask respondent to place her/his right hand in front of her/his right eye. Repeat steps 5 to 7.
Step	Action
Near vision	
9	Set up the Tumbling E Logmar Chart at eye level and at the 40 cm distance of the attached string on a table or chair. Alternatively, ask respondent to hold the chart at the required distance.
10	Repeat steps 5 to 8.

Grip Strength

Introduction	Hand-grip strength affects every day functions such as raising the body weight or holding heavy objects, and usually declines with age.
Equipment	To conduct grip strength tests, you will need a Smedley's hand dynamometer. You will need to adjust the bar for each respondent's hand. The bar should rest on the middle piece (phalanx) of the index and ring finger.
Preparation	<p>Follow the general guidelines below to set up the hand grip tests and prepare respondents.</p> <ul style="list-style-type: none">• Do not perform this task if the respondent's hands or wrists:<ul style="list-style-type: none">– are swollen or inflamed (possibly due to arthritis);– are in severe pain; and,– have recently been injured or operated on (in the last 6 months).• Inform respondent that they will need to squeeze the dynamometer twice with each hand.• Encourage respondent to remove rings as it may hurt to squeeze the device with jewellery on.• Explain the test and demonstrate it.• Explain that it may not feel like the bar is moving at all.
Procedure Q2518 - Q2524	Follow the steps below to take grip strength measurements.

Step	Action
1	Set the dynamometer to zero (0).
2	Check the fit of the dynamometer to the respondent's hand - adjust by turning the handle to move it up or down - so that the bar should rest on the middle piece (phalanx) of the index and ring finger.
3	Ask respondent to use her/his left hand to grab the two pieces of metal, keep the upper arm close to her/his body and hold her/his forearm at right angles to the upper arm. Note: Some older respondents may not be able to hold the device at 90 degrees due to a lack of strength. In this case, allow them to rest their arm on a table or the armrest of a chair.
4	When ready, ask respondent to squeeze the dynamometer as hard as they can for a few seconds. Note: Some respondents raise the forearm when squeezing the dynamometer. Do not allow this to happen. Pay close attention to this and repeat the test if this occurs.
5	Read the dial at eye level and record strength in kilograms, rounding down to the nearest kilogram. Record '00' wherever an attempt was not made.
6	Set the dynamometer to zero (0) and repeat the test with the left hand.
7	Repeat steps 2 to 6 for the opposite hand.

Cognitive Ability

Introduction

The following tests are taken to measure cognitive ability:

- immediate and delayed recall (memory)
- digit span (concentration and memory)
- verbal fluency.

Preparation

Follow the general guidelines below to set up the cognitive tests and prepare respondents.

- Conduct these tests in private, free from interruption and noise (if possible).
- If a respondent normally uses reading glasses or hearing aids these must be used during the tests.
- Encourage respondents, by making general comments like, "these tests are designed to be difficult" and "everybody finds it difficult, you have done well".
- Do not give specific feedback; provide assistance beyond what is prescribed in the procedure, or comment specifically on the respondent's performance.
- Never provide the correct answers.
- Administer every test as prescribed. This ensures that these tests are performed in a standardized manner for each interview and by all interviewers.
- For timed tasks, precise timing is crucial.

Verbal recall Q2525 - Q2533

Follow the steps below to conduct the verbal recall tests.

Step	Action
1	Explain the procedure to respondents as follows: You (the interviewer) will read a list of words and the respondent must listen carefully. When you are finished reading all the words, the respondent will be given 1 minute to repeat as many words as possible. The repeated words can be given in no particular order. There will be 3 trials. Some time later in the interview, the respondent will be required to repeat the list of words again.
2	Read the list of words. Pronounce the words at a rate of one per second in a loud, clear voice.
3	When you are finished, ask the respondent to repeat back as many of the words as s/he can remember. Start timing by pressing the START/STOP button on the stopwatch.
4	Record each word the respondent recalls correctly as well as any substituted words. Prompt if silent for 10 seconds (" <i>Can you remember any more?</i> "). Stop at 1 minute or when person says s/he cannot remember any more.
5	Repeat steps 2 to 4 two more times.

Continued on next page

Cognitive Ability, Continued

Digit span Q2534- Q2535

Digit span tests require respondents to repeat a series of numbers. There are two trials for each set, and a total of seven sets of numbers. Do a trial run, before following the steps below to conduct the tests.

Step	Action										
1	Read the first set of numbers to respondents. Pronounce the digits at a rate of one per second in a loud, clear, monotone voice.										
Digits forward											
2	Ask respondents to repeat the numbers back to you exactly as you say them.										
3	<table border="1"> <thead> <tr> <th>If the respondent</th><th>Then</th></tr> </thead> <tbody> <tr> <td>Is successful.</td><td>Proceed to the next series.</td></tr> <tr> <td>Fails the first trial.</td><td>Ask the respondent to repeat the series.</td></tr> <tr> <td>Fails the second trial.</td><td>Discontinue.</td></tr> <tr> <td>Fails both trials of the test run.</td><td>Record 0 in Q2534.</td></tr> </tbody> </table>	If the respondent	Then	Is successful.	Proceed to the next series.	Fails the first trial.	Ask the respondent to repeat the series.	Fails the second trial.	Discontinue.	Fails both trials of the test run.	Record 0 in Q2534.
If the respondent	Then										
Is successful.	Proceed to the next series.										
Fails the first trial.	Ask the respondent to repeat the series.										
Fails the second trial.	Discontinue.										
Fails both trials of the test run.	Record 0 in Q2534.										
4	Record the number of the longest series repeated without error as the total score (either from trial 1 or 2).										
Digits backward											
5	Read the first set of numbers for the digits backward series. Pronounce the digits at a rate of one per second in a loud, clear, monotone voice.										
6	Ask the respondent to repeat the numbers back to in the reverse order. For example, If you say "1 - 7", the respondent should say "7 - 1".										
7	Repeat steps 3 and 4 above. If failed both trials, enter '0' in Q2535.										

Verbal fluency Q2536 - Q2537

Follow the steps below to conduct verbal fluency tests.

Step	Action
1	Explain to respondents that you will give them one minute to tell you the names of as many animals (including birds, insects and fish) that they can think of. Note: They must not use numbers, proper names or places.
2	When ready, start timing by pressing the START/STOP button on the stopwatch.

Continued on next page

Cognitive Ability, Continued

Q2536 - Q2537 (continued)

Step	Action																
3	Do not interrupt the respondent's flow.																
4	<div>Record all the names mentioned.</div> <table> <tr> <th>If the respondent...</th><th>Then..</th></tr> <tr> <td>Says words faster than you can record in full.</td><td>Record abbreviations.</td></tr> <tr> <td>Repeats animal names (for example, white cow, brown cow etc.)</td><td>Keep track of these but do not include them in the total count.</td></tr> <tr> <td>Says animal 'proper' names (for example, Simba, Nemo, Bambi, Lassie, etc.)</td><td>Keep track of these but do not include them in the total count.</td></tr> <tr> <td>Includes different breeds (for example dog, terrier, poodle, etc.)</td><td>Include each of these in the total count.</td></tr> <tr> <td>Includes gender and generation specific names (bull, cow, steer, heifer, calf, etc.)</td><td>Include each of these in the total count.</td></tr> <tr> <td>Discontinues before the end of the minute.</td><td>Encourage them to try to think of more words.</td></tr> <tr> <td>Goes silent for 15 seconds</td><td>Repeat the basic instruction.</td></tr> </table>	If the respondent...	Then..	Says words faster than you can record in full.	Record abbreviations.	Repeats animal names (for example, white cow, brown cow etc.)	Keep track of these but do not include them in the total count.	Says animal 'proper' names (for example, Simba, Nemo, Bambi, Lassie, etc.)	Keep track of these but do not include them in the total count.	Includes different breeds (for example dog, terrier, poodle, etc.)	Include each of these in the total count.	Includes gender and generation specific names (bull, cow, steer, heifer, calf, etc.)	Include each of these in the total count.	Discontinues before the end of the minute.	Encourage them to try to think of more words.	Goes silent for 15 seconds	Repeat the basic instruction.
If the respondent...	Then..																
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Discontinues before the end of the minute.	Encourage them to try to think of more words.																
Goes silent for 15 seconds	Repeat the basic instruction.																
5	After 1 minute ask the respondent to stop.																
6	Record the number of correct names provided plus those that were incorrect (including those mentioned in step 4 above and anything that is not an animal).																

Lung Function Test

Introduction

Lung function tests are taken to diagnose obstructive and restrictive lung diseases. Spirometry is a common and effective diagnostic test. You will ask the respondent take a deep breath then to blow as long and hard as he/she can into a small tube attached to a machine. The machine measures how long it takes to blow out all the air from the respondent's lungs. The more blocked his/her airways, the longer it takes to blow the air out. Spirometry is the most reliable method of testing lungs. See <http://www.spirxpert.com/welcome.htm> for more information about spirometry as well as lungs and aging.

Equipment

The following equipment is required for lung function tests:

- spirometer;
 - disposable mouthpiece;
 - disposable filter; and,
 - nose clip.
-

PFT values

The table below lists each of the Pulmonary Function Test (PFT) values recorded by the spirometer.

Question No.	PFT value	Explanation
Q2538	FVC - Forced Vital Capacity	Maximum volume of air (in litres) forcibly exhaled out of the lungs until no more can be expired.
Q2539	FEV1 - Forced Expiratory Volume in one second	Volume of air (in litres) forcibly exhaled in the first second.
Q2540	PEF - Peak Expiratory Flow	Maximum flow generated during expiration performed with maximal force after a full inspiration.
Q2541	FEV1% - FEV1/FVC	Useful indicator of airflow obstruction.
Q2542	FEF25-75	The mid-expiratory flow (FEF25-75) is the average expiratory flow over the middle half of the FVC.
Q2543	FET	Forced Expiratory Time - duration of expiration - target is 6 seconds or longer.

Preparing the participant

Follow the guidelines below to prepare the respondent for the lung function tests.

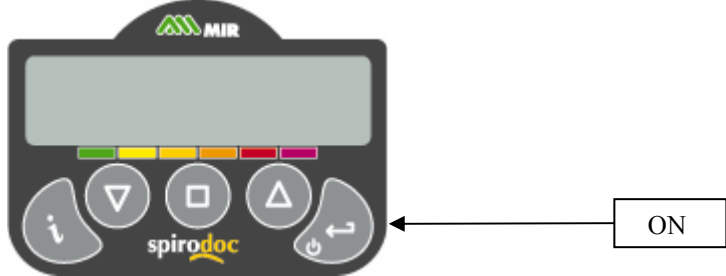
- Let a respondent perform at least two test manoeuvres and explain to them how these can be improved. You will need to actively coach the respondent during the test to get the best performance.
 - Make sure that the respondent's body and neck remain erect during the manoeuvres, the patient looking straight forward during the entire test without bending over (the latter not only affects the way the trachea is stretched, but may also lead to saliva dripping into the equipment).
-

Continued on next page

Lung Function Test, Continued

Preparation Q2538-Q2543

Follow the steps below to use the spirometer and prepare the participant for the actual test.

Step	Preparation Actions
1	<p>Hold the spirometer in an upright position and press the ON button once to switch on the device.</p>  <p>Calibrate the spirometer device to the respondent. Enter the age, sex, weight and height of the respondent using the buttons and instructions included in the spirometer case.</p>
2	Describe that you are going to measure the health of her/his lungs. Tell the respondent to watch closely as you demonstrate - and that you will then have the respondent practice a number of times.
3	Explain the procedure carefully to the respondent.
4	<p>Demonstrate for the respondent twice using a towel over the hole where the mouthpiece/filter would go. Emphasize that you will use a clean mouthpiece for each person and a good effort is required during the test. Explain that you will use your own mouthpiece to demonstrate but without the nose clip or machine. Using your own mouthpiece:</p> <ul style="list-style-type: none"> • Take a seated position with chin slightly elevated, neck stretched tall. • Take 3 deep breaths to prepare. Before the 4th deep inhalation, place the mouthpiece to your mouth, inhale deeply and at the end of the inhalation, blow as hard as you can into the mouthpiece until all air is out of your lungs and stomach. • Remain sitting straight during exhalation. This exhalation should take about 6 to 10 seconds. • Take a 20 second break during which you should ask if the respondent has questions. • Demonstrate once more.

Test procedure Q2538-Q2543

Follow the steps below to measure the actual lung function.

Step	Actions
1	Insert a clean disposable filter and mouthpiece into the spirometer.
2	Ask the respondent to sit as erect (straight) as possible. Make sure the respondent is comfortable, and not wearing tight clothing or belts - loosen or remove restrictive clothing.

Continued on next page

Lung Function Test, Continued

Test procedure Q2538-Q2543, contd.

Step	Actions
3	Hold the spirometer in an upright position and press the ON button once to switch on the device.
4	Gently place the nose clip on the respondent's nose to restrict the flow of air through the nose. Ask respondent to gently press against the nose clip to check for leaks. Tell the respondent you will do 2 test trials first to make sure it is done correctly.
5	Remind respondent to elevate the chin and extend the neck high (as if a string is attached to the top of the head and pulled up).
6	Ask the respondent to take 3 long deep breaths.
7	At the fourth breath, ask respondent hold the mouthpiece close to the mouth and encourage a slow, deep breath, as deeply as possible. "Breathe deep, deep, deep, fill your lungs and stomach fully!" At the maximum inhalation, do not make the respondent pause, tell the respondent to seal their lips tightly around the mouthpiece and blow as hard and fast as possible in one continuous blow until there is nothing left to blow out.
8	Encourage the respondent by saying, "blow, blow, blow - keep going - get it all out."
9	Tell the respondent to relax and breathe normally. Review the results and provide tips on how the respondent can improve (for example, make sure the lips are sealed tightly before you start blowing - you may need to bite with your teeth on the mouthpiece to help, or don't pause between your maximum inhalation and when you start to blow into the machine, or you must keep blowing until all air is out of your lungs and stomach...)
10	Clear the results on the machine. Repeat steps 5, 6, 7 and 8 above for another practice trial (practice trial 2). After step 8, again tell respondent to relax and breathe normally. Give enough time to recover so the respondent performs and does not hyperventilate. Discuss how to improve the results.
11	Now tell the respondent that this time, it is a real test. Encourage the respondent to give a full effort.
12	Repeat steps 5, 6, 7 and 8 above. Afterwards, tell respondent to relax and breathe normally.
13	Unacceptable readings will result from a slow start, cough during the blowing, poor effort, early stop (FET less than 6 seconds) or air leak (from nose or mouth around the mouthpiece).
14	If the test was acceptable, <ul style="list-style-type: none">• remove the noseclip, and• record the results from the spirometer display in the questionnaire.

Cognitive Test - Delayed Verbal Recall

Delayed verbal recall Q2544 - Q2546

Follow the steps below to conduct the delayed verbal recall test. These questions are to check the longer-term memory. Without reading the list of 10 words again, we ask the respondent to recall the words and repeat as many as they can remember.

Step	Action
1	Explain that you would like respondents to recall as many as possible of the list of words you asked them to remember during the verbal recall test (10 minutes ago). Note: Do NOT repeat the list of words.
2	When ready, start timing by pressing the START/STOP button on the stopwatch.
3	Record each word the respondent recalls correctly as well as any substituted words.
4	Give the respondent 1 minute to complete the task. Stop at 1 minute or when the respondent says s/he cannot remember any more of the words.

Blood Tests

Introduction A finger prick technique is used to draw a blood sample from respondents.

Equipment You will need the following equipment to conduct the blood tests:

- individual blood kit in a re-sealable plastic (zip lock) bag, including a blood spot card, packet containing 2 gauze pads, alcohol swab, lancet (Monoject - blue and white), desiccant package and humidity indicator card;
- latex gloves; and,
- sharps biohazard container.

Respondent consent

- Following the procedures used for obtaining individual consent to obtain the consent from respondents before taking blood tests. Use the " Additional Consent to the STUDY ON GLOBAL AGEING AND ADULT HEALTH for Storage and Future Use of Blood Samples" informed consent form. If the respondent does not provide consent, probe for reasons and answer questions. Explain that obtaining the blood samples will:
 - help to improve planning for providing health care services in the country;
 - help to identify common conditions in the population; and,
 - not jeopardize the respondent in any way.
- If respondent still refuses, explain that this is fine, and continue with the interview by skipping to Section 3000.

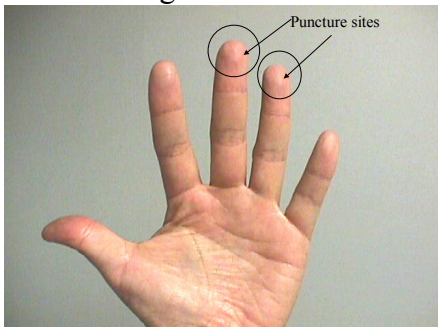

Preparation Follow the steps below to set up the blood tests and prepare respondents.

Step	Action
1	Ask respondent to wash hands with soap and hot or warm water. Dry hands.
2	Open the plastic bag and remove the blood spot card, packet containing 2 gauze pads, alcohol swab and lancet. Leave the humidity card and desiccant pack inside the plastic bag.
3	Label the blood spot card - leave all blank except: Patient Id. No. - use Household ID number (see Q1006) and the respondent's ID number (see Q1007). Mother's Name - clearly print last name of respondent (see HH roster.)
4	Put on the latex gloves.
5	If not already sitting, ask respondents to take a seat. Ask respondent which side (right or left) s/he would prefer for the blood sample. Allow arm on selected side to hang down and shake, squeezing hand into a fist, alternating with relaxing, for some time to improve blood flow to the fingers. If the hand is cold, warm the skin by vigorously rubbing the finger, hand and lower arm. This will increase blood flow by and will improve the ease with which a sample can be obtained.

Continued on next page

Blood Tests, Continued

Preparation (continued)

Step	Action
6	<p>Choose a finger on either hand, preferably the third or fourth finger for collecting the blood.</p>  <p>NOTE: Avoid using a thumb, little/last finger or heavily calloused fingers. Do not use a finger with a scar, a wound or cut, an infection, swelling, a deformity, or a rash. Also, do not use a finger on which the respondent is wearing a ring, because the ring may disrupt the free flow of blood to the tip of the finger</p>
7	<p>Place the respondent's lower arm and hand on a flat surface. Cleanse the finger tip completely with the disinfecting alcohol swab. Allow the alcohol to air dry.</p>  <p>DO NOT:</p> <ul style="list-style-type: none"> • prick the finger until the alcohol is completely dry; • blow on the finger to dry the alcohol; or, • wipe off the alcohol.

Procedure Q2547 - Q2548

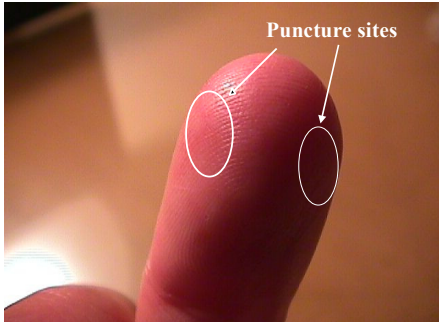

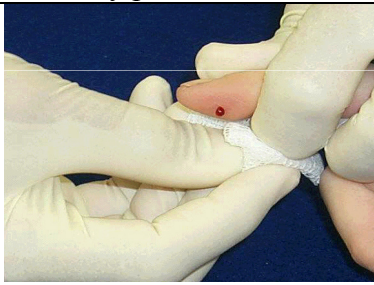
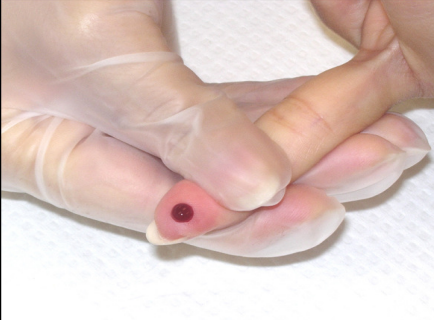
Follow the steps below to take the blood tests and collect the sample.

Step	Action
1	Remove the lancet needle cover by twisting it in a full circle and then pulling it out. Do not pull out the lancet needle cover without twisting it first as this may cause the needle not to pierce the skin.
2	Make sure that the finger is below the level of the respondent's heart to increase the flow of blood to the finger. Hold the respondent's finger firmly just below the centre of the finger-tip.

Continued on next page

Blood Tests, Continued


Q2547 - Q2548 (continued)

Step	Action
3	<p>Press the lancet opening flat and firmly against the finger. The best location is just to the side of the centre of finger.</p> 
4	<p>Use the lancet to puncture the skin by placing the blade-slot surface against the area and pressing the trigger. The tip of the blade ejects through the opening, producing a small cut in the skin, and immediately retracts into the device. After puncturing the skin, turn the finger slightly to prevent blood from running into the grooves of the skin.</p> 
5	Release the pressure and allow a full drop of blood to collect on the finger.
6	Carefully place the used lancet in the sharps biohazard container.
7	 <p>When the blood appears, use one of the gauze pads to wipe away the first drop of blood. Dispose of the gauze pad by placing it into the sharps container.</p>
8	<p>Allow a second full drop of blood to pool on the finger tip. Do not let finger touch the ground.</p> 

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Blood Tests, Continued

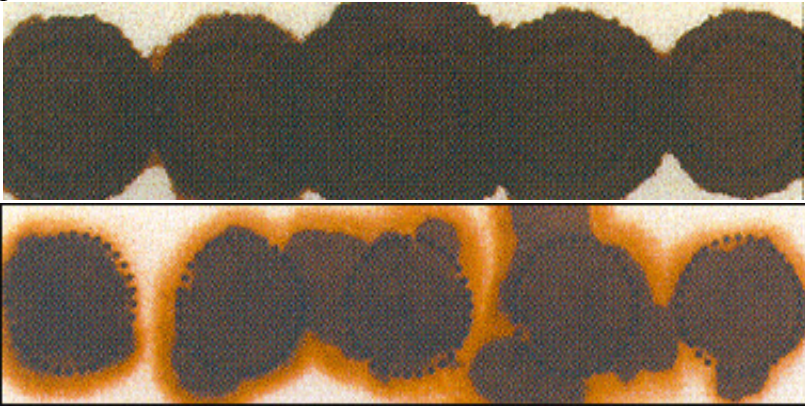
Q2547 - Q2548 (continued)

Step	Action
9	<p>While maintaining a firm grip on the finger, press gently on the side of the finger from which you are taking the blood sample to get a large second drop. Be careful to avoid ‘milking’ or ‘squeezing’ the finger as this could affect the test results. Wait until the drop is large enough to fill one of the circles on the blood spot card. Hold the finger over a circle on the blood spot card and let the blood drop freely fall into the center of the circle. In case the blood drop does not fall - lightly touch the filter paper onto the LARGE drop of blood.</p> <p>The card must not be pressed against the puncture site on the finger. Make sure that the respondent’s finger does not touch the card at any point when you are collecting the blood spots. DO NOT ‘layer’ the sample in an attempt to fill in the circle.</p> <ul style="list-style-type: none"> • Apply only a SINGLE drop of blood to each circle on the filter paper. • Apply blood only to one side of the paper. • Do not touch the areas within the circles on the filter paper with gloved or un-gloved hands, before or after specimen collection since skin oils, latex and powder may affect test results.
10	<p>Fill the remaining circles in the same manner with successive blood drops. If necessary, to enhance blood flow, gently apply intermittent pressure to the area surrounding the puncture site to get a third drop. Allow sufficient time for a large blood drop to form before filling a second circle on the filter paper card. Again, avoid milking or squeezing the finger.</p> 

Continued on next page

Blood Tests, Continued

Q2547 - Q2548 (continued)

Step	Action
11	<p>There may be times when a drop of blood will not completely fill the circle. If a circle is not completely saturated, the next drop or just a portion of the next drop of blood may be used to saturate the circle if the drop is obtained <u>immediately</u>. If the first drop starts to dry due to any interruption in getting the subsequent drop, you must begin filling another circle. Layering or application of successive drops of blood to a dried or partially dried blood spot causes problems.</p> <p>In an attempt to fill the circle completely do not overfill or over saturate the circles. The illustrations below show unacceptable samples.</p>  <p>If a drop falls outside of the circle or is not large enough then let the next drop of blood fall again exactly in the center of the original drop and not in the pre-printed circle. Note: all circles should have uniform blood volume.</p>
12	<p>If the blood stops flowing before you have filled the 5 circles on the blood spot card, or if the amount of blood is insufficient, the skin puncture procedure may be repeated with the respondent's consent on a different finger. Use the Tenderlett lancet (white and red) and extra alcohol wipe provide in your back-up supplies. The Tenderlett has no cover to remove - open the plastic package and follow steps 2-9 above.</p>
13	<p>When all five circles are filled, place the blood spot card on a flat, clean, dry, non-absorbent surface away from direct sunlight to dry until the end of the interview. You can place the card so that the edge of the protective flap rests on the selected surface (that is, facing down) so that the blood spots are not touching the surface.</p>
14	<p>Apply pressure to the fingertip using a gauze pad until bleeding stops.</p>
15	<p>Make sure any bloodied materials (gauze, lancets, gloves) are carefully placed in the sharps biohazard container.</p>

Continued on next page

Blood Tests, Continued

Handling samples Follow the steps below to handle the blood samples.

Step	Action
1	<p>At the end of the interview, place the blood spot card in the re-sealable plastic (zip lock) bag with desiccant package and humidity indicator card. Be careful to not touch the blood spots. Place the bag into the storage box. Store these vertically, do not stack the bags one on top of another.</p> <p>Note: While completing the interview and also while transferring the blood spot card to the zip lock bag, ensure nothing touches the blood spots (hands, ground, etc.) until they are placed in the plastic bag.</p>
2	<p>At the end of the interviewing day, clean your hands with soap and water - and dry them. Use gloves to handle the blood spot cards. Making sure not to touch the blood spots, take the cards out of their bags. Lay them flat on a dry, clean, non-absorbent surface away from direct heat or sunlight and allow them to dry for at least 4 hours (for example overnight). Again, lay them with edge of the protective flap down. The cards must be kept clean and dry at all times. Water, dust, sweat from your hands, or other environmental contaminants can affect the test results.</p>
3	<p>Once the blood spot cards are completely dry, place them back into the plastic bags with the desiccant pack and humidity indicator card. Again, clean your hands with soap and water - and dry them completely, and use gloves before touching the cards. Handle the cards touching only the area furthest from the blood spots. Seal the bags.</p>
4	<p>Submit the zip lock bags with the blood spot card, desiccant package and humidity indicator card to your supervisor within one week of collection. Make sure the samples are not stored in direct sunlight.</p>
5	<p>Monitor the humidity cards daily for signs of the indicator circles turning pink. If the humidity indicator circles begin to turn pink, the desiccant packet and humidity indicator card will need to be replaced immediately. The humidity indicator card allows you to monitor the level of moisture - you can add additional desiccant packets in conditions of high humidity. There are three circles on the humidity indicator card. If the circle in the middle of the card (labelled 30%) turns pink, it indicates a relatively high level of humidity and is a warning to begin to carefully monitor the humidity level. If the middle or top circles (labelled 40%, 50%, and 60% respectively) turns pink, you should replace the desiccant packets in the bag with fresh packets. Replace the humidity indicator card with a fresh card if the circles merge.</p>

Part 5: Guide to Completing the Household Questionnaire

Overview

Introduction	This guide provides background information and guidance for completing each question in the Household Questionnaire.
Intended audience	<p>This part is intended for those fulfilling the following roles:</p> <ul style="list-style-type: none">• Interviewer• Supervisor• Field Editor
Intended use	<p>Use this guide in training, to prepare for the interviews, and as reference material during interviews if household informants request clarification about specific questions.</p> <p>Interviewers and supervisors should refrain from offering their own interpretations.</p>
In this part	<p>This part covers the following sections from the Household Questionnaire.</p>

Topic	See Page
0000 Coversheet	70
0100 Sampling Information	74
0200 Geocoding/ GPS Information	76
0300 Re-contact Information	79
0350 Contact Record	81
0400 Household Roster	82
0450 Household Consent (plus Kish Tables for China)	86
0500 Housing	88
0600 Household and Family Support Networks	92
0700 Assets and Household Income	95
0800 Household Expenditure	98
0900 Interviewer Observations	100
0910 Verbal Autopsy	101

0000 Coversheet

Introduction This section includes general information about the survey and completing this interview.

General guidelines Revisit this page and update as you go through the interview and complete different sections, and finally getting a signature from the Supervisor, indicating that the data is cleaned, completed and ready for data entry.
Note: Q0001, Q0002 and Q0008 are to be completed by the Supervisor.

Q0001-Q0006 The table below provides a guide to completing questions Q0001 to Q0006.

Question No.	Question	Guide for completion												
Q0001	Research Centre Number	<ul style="list-style-type: none">• A 3-digit code for the Research Centre undertaking the survey. To be completed/provided by Supervisor.• China = 101; Ghana = 241; India = 106; Mexico = 140, Russian Federation = 152; South Africa = 155.												
Q0002	Household ID	Number that identifies the household. Supervisor and Primary Investigator will use a list of IDs generated by WHO and will provide these to the interviewers.												
Q0003	Is this a new, second (follow-up from WHS), retest or proxy interview?	<table><tr><th>Type</th><th>Explanation</th></tr><tr><td>1.New interview</td><td>First time respondent is interviewed (that is, a new respondent).</td></tr><tr><td>2. Second (follow-up) interview</td><td>Follow-up interview with a respondent from the World Health Survey.</td></tr><tr><td>3. Retest interview</td><td><ul style="list-style-type: none">• Second time informant/respondent is interviewed (quality control measures) during this round of data collection.• Should be done by a different interviewer.• Can be with a new, second (follow-up) or proxy respondent.</td></tr><tr><td>4. Proxy respondent interview</td><td><ul style="list-style-type: none">• Used when the respondent cannot be interviewed due to health reasons or memory problems.• Someone who knows the respondent is asked to respond on their behalf.</td></tr><tr><td>5. Proxy supervisor interview</td><td>Supervisors will also be conducting proxy interviews. The process will be described in the Editing Manual.</td></tr></table>	Type	Explanation	1.New interview	First time respondent is interviewed (that is, a new respondent).	2. Second (follow-up) interview	Follow-up interview with a respondent from the World Health Survey.	3. Retest interview	<ul style="list-style-type: none">• Second time informant/respondent is interviewed (quality control measures) during this round of data collection.• Should be done by a different interviewer.• Can be with a new, second (follow-up) or proxy respondent.	4. Proxy respondent interview	<ul style="list-style-type: none">• Used when the respondent cannot be interviewed due to health reasons or memory problems.• Someone who knows the respondent is asked to respond on their behalf.	5. Proxy supervisor interview	Supervisors will also be conducting proxy interviews. The process will be described in the Editing Manual.
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4. Proxy respondent interview	<ul style="list-style-type: none">• Used when the respondent cannot be interviewed due to health reasons or memory problems.• Someone who knows the respondent is asked to respond on their behalf.													
5. Proxy supervisor interview	Supervisors will also be conducting proxy interviews. The process will be described in the Editing Manual.													

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0000 Coversheet, Continued

Q0001-Q0006 (continued)

Question No.	Question	Guide for completion
Q0003a	If retest interview, indicate number of days between first/second and retest	The retest must be done within 1 to 7 days after the initial interviews have been conducted.
Q0004	Interviewer ID	All interviewers will be given a unique identification number. Use this ID for all interviews.
Q0005	Total number of calls/visits	<ul style="list-style-type: none"> • Document all attempted calls to contact a respondent. • Make a minimum of 3 attempts to get an interview. • Circle one answer only. • Document reasons why attempt(s) to interview failed.
Q0006	Date of final results	Date when interview, or final result if an interview was not conducted, actually took place.

Q0007a Final result codes

This refers to the final result code for the Household Questionnaire. This corresponds to Q0350F (Section 0350: Contact Record - Household) - whether or not the household informant accepted to do the interview and the reasons for non-interviews. Use the table below to select the appropriate code to document the final result.

Codes	Description
01	Completed Interview (interview is accepted and conducted – this includes interview and body measurement, performance tests and blood sample)
02	Partial Interview (interview is partially completed and person will not be contacted anymore).
03	Household contacted - initial refusal.
04	Household contacted-uncertain about interview
05	Resistance/refusal by household informant
06	Final refusal by household informant
07	Final refusal by other household member
08	Unable to locate household or household informant
09	No interview because informant is not eligible: less than 18, mentally unfit or too ill.
10	Language barrier
11	House is vacant or household occupants are elsewhere (seasonal vacancy, other residence)
12	Unsafe or dangerous area or no access to informant
13	Deceased informant
14	Informant in institution: jail, hospital and not accessible

Continued on next page

0000 Coversheet, Continued

Q0007b

The result code corresponds to the result of the individual or proxy respondent interview. Record if the respondent accepted to do the interview and the reasons for non-interviews. Use the table below to select the appropriate code to document the final result.

Fill in the Contact Record (Section 0350) provided in the questionnaire specifying the reasons for non-interviews, as well as other contact information.

Codes	Description
01	Completed Interview (interview is accepted and conducted – this includes interview and body measurement, performance tests and blood sample)
02	Partial Interview (interview is partially completed and person will not be contacted anymore).
03	Household contacted - initial refusal.
04	Household contacted-uncertain about interview
05	Resistance/refusal by respondent
06	Final refusal by respondent
07	Final refusal by other household member
08	Unable to locate respondent
09	No interview because respondent is not eligible: less than 18, mentally unfit or too ill.
10	Language barrier
11	House is vacant or household occupants are elsewhere (seasonal vacancy, other residence)
12	Unsafe or dangerous area or no access to respondent
13	Deceased respondent
14	Respondent in institution: jail, hospital and not accessible

Note: If the informant cannot do the interview, look for a suitable proxy respondent to complete a Proxy Questionnaire on behalf of the selected respondent. Then use the result codes above when the interview is completed.

0000 Coversheet, Continued

Q0008-Q0010 The table below provides a question by question guide to questions Q0008 to Q0010.

Question No.	Question	Guide for completion
Q0008	Rotation code	<ul style="list-style-type: none"> Indicates the rotation code (A through D) for the Individual Questionnaire. Circle one answer only. Provided by the Supervisor.
Q0009	Date of editing	<ul style="list-style-type: none"> Insert the day, month and year (2006) that editing was completed. Check all skip patterns and missing data are accounted for.
Q0010	Signature of Supervisor	<ul style="list-style-type: none"> Field Editor and/or Supervisor Sign and date on completion of editing the interview data. Indicates that the Field Editor and/or Supervisor have reviewed the interview (with Interviewer), cleaning is complete, and interview is ready for data entry.
Q0011	Data entry date	<ul style="list-style-type: none"> Date when data entry was completed. Insert day, month and year (2006).

Office use only box Depending on your country arrangements, further quality control information and checks (such as ID numbers for various members of the team) can be provided in an, "office use only" double-line box for the:

- Supervisor
- Field Editor
- Office Editor
- Data Entry Operator (Keyed By).

SUPERVISOR		FIELD EDITOR		OFFICE EDITOR	KEYED BY
NAME __	<input type="text"/>	NAME _____	<input type="text"/>	<input type="text"/>	<input type="text"/>
DATE _____	<input type="text"/>	DATE _____	<input type="text"/>	<input type="text"/>	<input type="text"/>

0100 Sampling Information

Introduction This section covers all the sampling unit information and is to be completed by the Supervisor.

Q0101a - Q0104 The table below provides a guide to completing questions Q0101a to Q0104.

Question No.	Question	Guide for completion
Q0101a	Primary sampling unit (PSU) name	Write the name of the primary sampling unit taken from the Sampling Key Correspondence Table that was generated prior to the survey. <i>For example</i> if the PSU corresponds to 'county' and the respondent's household is in 'Riordan' county, write 'Riordan' for question Q0101a.
Q0101b	PSU Code	Write code for the primary sampling unit, corresponding to the PSU name reported in field Q0101a. Obtain code from the Sampling Key Correspondence Table.
Q0102a	Secondary sampling unit (SSU) name	<ul style="list-style-type: none"> Write the name of the secondary sampling unit for the household/dwelling, taken from the Sampling Key Correspondence Table that was generated prior to the survey. This is likely to be the geographical area name that is the next smallest after the PSU.
Q0102b	SSU code	Write the code for the secondary sampling unit, corresponding to the SSU name reported in Q0102a. Obtain code from the Sampling Key Correspondence Table.
Q0103a	Tertiary sampling unit (TSU) name	<ul style="list-style-type: none"> Write the name of the tertiary sampling unit for the household/dwelling. This will be the geographical area name that is the next smallest after the SSU.
Q0103b	TSU code	Write the code for the tertiary sampling unit, corresponding to the TSU name reported in Q0103a. Obtain code from the Sampling Key Correspondence Table.
Q0104	Setting	Write the name of the setting taken from the Sampling Key Correspondence Table that was generated prior to the survey. The setting may be: 1. Urban or 2. Rural. Note: If definitions for urban or rural are different from the definitions provided, you must define these categories and provide the definitions to WHO to allow for comparison of data between countries.

Continued on next page

0100 Sampling Information, Continued

**Q0105a-
Q0106b**

Use the list of administrative units' names and their corresponding codes (see Appendix A0100 and Part 9) to complete first and second administrative level names and codes in questions Q0105a to Q0106b.

If the name of a unit is not on the administrative list, write the name in but do not enter any code.

Example

The example below illustrates how to enter the administrative names and codes.

- The household surveyed is part of the region “Greater Accra” which corresponds to the First Administrative Level Unit Name in Ghana.
- The code for this region is GHA005.
- In this Region, the household is situated in the Accra District (Second Administrative Level Unit Name).
- The code for this district is GHA005001.

ADMINISTRATIVE DIVISION INFORMATION

Refer to Appendix A0100 for administrative names and codes

Q0105a. First Administrative Level Unit Name:	Q0105b. First Administrative Level Unit Code:
Greater Accra	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> G H A 0 0 5 </div> 99 Not applicable if the unit is not in the annex list
Other name for the first administrative level unit if not in the Appendix list:	

Q0106a. Second Administrative Level Unit Name:	Q0106b. Second Administrative Level Unit Code:
Accra	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> G H A 0 0 5 0 0 1 </div> 99 Not applicable if the unit is not in the annex list
Other name for the second administrative level unit if not in the Appendix list:	

0200 Geocoding/ GPS Information

Introduction

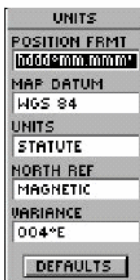
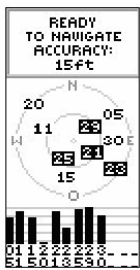
The Global Positioning System (GPS) allows you to precisely identify locations on the earth's surface. Instructions on how to use a GPS device and enter the geocoding information are provided below.

Responsibility

Geocoding information is to be completed by the Supervisor.

To use a GPS device


Follow the steps below to use a GPS device in the field. Please refer to the GPS Field Guide and Garmin eTrex User Manual for more information about the GPS system and how the device works.

Step	Action						
1	Once you have arrived at the cluster area to be surveyed, find an open space and turn on the GPS device.						
2	Wait for the GPS to indicate it is ready to navigate.						
3	<div>Go to the 'Units' setup page and set the device to default as follows:<ul style="list-style-type: none">• Use the 'Up' or 'Down' button to highlight the 'Defaults' field.• Press the 'Enter' button.• Once complete, all the settings apart from 'Variance' should appear as indicated in the Figure.</div> <div></div>						
4	Move to the first household.						
5	<div>Go back to the 'Satellite' (advanced Skyview) page (see Figure) and wait for the accuracy to become less than 65ft with at least 3 satellite signals received.</div> <div>In the example, the accuracy is 15ft and with 4 satellite signals (out of 9) received. This is would be considered acceptable, proceed.</div> <div></div>						
6	Once the accuracy value is below 65 ft with at least 3 satellite signals write, this information in the field Q0201 and Q0202 as shown in the example below. <div><table><tr><td>Q0201</td><td>Number of satellite signals received</td><td><input type="text" value="4"/></td></tr><tr><td>Q0202</td><td>Accuracy</td><td><input type="text" value="15"/> feet</td></tr></table></div>	Q0201	Number of satellite signals received	<input type="text" value="4"/>	Q0202	Accuracy	<input type="text" value="15"/> feet
Q0201	Number of satellite signals received	<input type="text" value="4"/>					
Q0202	Accuracy	<input type="text" value="15"/> feet					

Continued on next page

0200 Geocoding/ GPS Information, Continued

To use a GPS device (continued)

Step	Action																														
7	Press and hold the 'Enter' button to access the 'Mark' page and read the coordinates.																														
8	<div>Verify that the coordinates are within the range of the administrative division in which you are located - refer to Appendix A0200.</div> <div>Note: Refer to the 'Administrative Divisions Information Form'. The Figure here are coordinates in Ghana.</div> <div></div>																														
9	<div>Using the example in Step 8 above, enter the coordinates including an indication of the location where you were when you took the reading (waypoint). Write any comments (e.g. "could not take any reading") in the box provided below Q0205.</div> <div><table><tr><td></td><td>Latitude:</td><td>N/S</td><td>Degrees</td><td>Minutes</td></tr><tr><td>Q0203</td><td><input type="text" value="N"/></td><td><input type="text" value="0"/><input type="text" value="6"/></td><td><input type="text" value="0"/><input type="text" value="3"/></td><td><input type="text" value="0"/><input type="text" value="9"/><input type="text" value="0"/></td></tr><tr><td></td><td>Longitude:</td><td>E/W</td><td>Degrees</td><td>Minutes</td></tr><tr><td>Q0204</td><td><input type="text" value="W"/></td><td><input type="text" value="0"/><input type="text" value="0"/><input type="text" value="0"/></td><td><input type="text" value="3"/><input type="text" value="0"/></td><td><input type="text" value="3"/><input type="text" value="9"/><input type="text" value="0"/></td></tr><tr><td></td><td>Waypoint:</td><td colspan="3"><input checked="" type="radio"/> 1 In front of the household <input type="radio"/> 2 Nearby location (for example, a park or communal space)</td></tr><tr><td>Q0205</td><td colspan="4"><div>Circle one</div><div>Comment regarding the GPS reading:</div></td></tr></table></div>		Latitude:	N/S	Degrees	Minutes	Q0203	<input type="text" value="N"/>	<input type="text" value="0"/> <input type="text" value="6"/>	<input type="text" value="0"/> <input type="text" value="3"/>	<input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="0"/>		Longitude:	E/W	Degrees	Minutes	Q0204	<input type="text" value="W"/>	<input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="0"/>	<input type="text" value="3"/> <input type="text" value="0"/>	<input type="text" value="3"/> <input type="text" value="9"/> <input type="text" value="0"/>		Waypoint:	<input checked="" type="radio"/> 1 In front of the household <input type="radio"/> 2 Nearby location (for example, a park or communal space)			Q0205	<div>Circle one</div> <div>Comment regarding the GPS reading:</div>			
	Latitude:	N/S	Degrees	Minutes																											
Q0203	<input type="text" value="N"/>	<input type="text" value="0"/> <input type="text" value="6"/>	<input type="text" value="0"/> <input type="text" value="3"/>	<input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="0"/>																											
	Longitude:	E/W	Degrees	Minutes																											
Q0204	<input type="text" value="W"/>	<input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="0"/>	<input type="text" value="3"/> <input type="text" value="0"/>	<input type="text" value="3"/> <input type="text" value="9"/> <input type="text" value="0"/>																											
	Waypoint:	<input checked="" type="radio"/> 1 In front of the household <input type="radio"/> 2 Nearby location (for example, a park or communal space)																													
Q0205	<div>Circle one</div> <div>Comment regarding the GPS reading:</div>																														
10	Move to the next household and repeat steps 5 to 9 until you have measured the GPS coordinates of each household within the cluster.																														
11	When all coordinates are recorded for selected households in the cluster, turn the GPS device off, move to the next cluster and start from step 1.																														

Continued on next page

0200 Geocoding/ GPS Information, Continued

Q0201 - Q0206 The table below provides a guide to completing questions Q0201 to Q0206.

Question No.	Question	Guide for completion
Q0201	Number of satellite signals received	Specify the number of satellite signals received. The 'Satellite' page on the GPS device uses black boxes behind the satellite number to indicate signals received (see Figure in Step 5 above).
Q0202	Accuracy	Make sure that the accuracy reading in the 'Satellite' page on the GPS device is less than 65 feet (ft) and enter that number.
Q0203 - Q0204	Latitude Longitude	Verify that the coordinates are within the range of the administrative division in which you are located and write these numbers in the boxes provided.
Q0205	Waypoint	The waypoint is the point on the ground where a Latitude/Longitude measurement was taken. The waypoint may be: <ul style="list-style-type: none">• In front of the household• A nearby location (for example, a park or communal space)

Note: Add any additional comments about the GPS reading or problems encountered in the "*Notes about GPS reading, if any:*".

0300 Re-contact Information

Introduction Re-contact information is important for re-test cases and also for follow-up as part of the SAGE study.

Requirement Collect as much information as possible, with as many specifics as you feel are needed to be able to go back to the household if needed. Write clearly and be consistent in how you record the information across the different households you interview.

Q0301 - Q0306a The table below provides a guide to completing questions Q0301 to Q0306a.

Question No.	Question	Guide for completion
Q0301	What is the informant's <u>full name</u> ? A. Last Name: B. First Name:	<ul style="list-style-type: none">• Print in CAPITALS• Verify spelling of the name and write clearly• Enter last (surname) name then first (given) name.
Q0302	What is the informant's address? Street Number and Name: City: Postal Code: Other:	<ul style="list-style-type: none">• This would be a mailing address - or detailed directions for how to return to this dwelling.• Print in CAPITALS.• Ensure that the information is entered in the correct field. The field should remain empty if not relevant (for example, no postal code).• Verify spelling and write clearly.• Provide street number and name, city and/or township, postal code and any other information that would be necessary to identify the location.• Include any useful additional information not corresponding to the street or city in the field 'Other'. This can include useful landmarks.
Q0303	Does this informant/household have a telephone?	<ul style="list-style-type: none">• Can be a fixed (land) line or mobile (cellular) phone.• Circle 'Yes' or 'No'.• If 'No', skip to Q0306.
Q0304	What is the telephone number?	<ul style="list-style-type: none">• Print clearly in the boxes provided.• Include the number with area code.
Q0305	Is this telephone number listed in the telephone directory?	<ul style="list-style-type: none">• Indicate if the telephone number is listed in a public directory.• Circle 'Yes' or 'No'.

Continued on next page

0300 Re-contact Information, Continued

Q0301 -
Q0306a
(continued)

Question No.	Question	Guide for completion
Q0306	If we cannot contact you for whatever reason, is there someone else we could contact who would know how to reach you..?	<ul style="list-style-type: none">• Indicate a person or persons - who would know how to contact you in the event that the person or persons in this dwelling move to another location at any time in the future.• Circle 'Yes' or 'No'.
Q0306a	What is this person's name, relationship to you and her or his address and other contact details?	<ul style="list-style-type: none">• Print in CAPITALS• Verify spelling and write clearly.• Provide first (given) name and last (surname) name, street number and name, city, postal code and any other information needed to locate this person or persons, in the case that we need to locate the informant. This could include important landmarks, telephone numbers or work/home addresses.

0350 Contact Record

Introduction This section is very important for the survey - for both successful and unsuccessful interviews - to calculate an accurate response rate and to identify reasons for non-response.. This information is essential for detecting potential biases in our sampling that could arise from selected households that refuse to be interviewed. It is to be filled out for each contact with a selected household.

Contact attempts WHO recommends a minimum of three contact attempts. You must keep track of **all** contacts with households, even if the final result is no interview.

Q0351-Q0353 Q0351, Q0352 and Q0353 are the columns that can be completed for each contact within a household. Complete the items in a column for each contact as you proceed with the contact. If you complete the full interview - the last item would be to circle 01 under Q0351, 52 or 53F. Until you decide on a final result code, enter the following information or circle the correct option for each contact attempt:

- A) Date;
 - B) Time contact initiated;
 - C) Interviewer identification (ID) number;
 - D) Contact with (see explanation below); and,
 - E) Household roster obtained.
-

"D. Contact with" Once sections 0400 and 0450 are complete, you will know how to enter the final response category for "D". Each option under item "D. Contact with..." is explained in the table below.

Option	Refers to the person(s)
1= Household informant	Q0451 indicates who is the household informant. It is decided after going through the household roster and identifying all household members. This person is considered most knowledgeable about the household and household members.
2= Other household member	This code would be used for a contact where the household informant is not available and the interviewer intends to return to the household. Or it could be used for a "refusal" that completes the household roster.
3= No one	Use this code if the contact with the household resulted in no human contact.

Final result code And at the end of the contact or interview process (either full or partial completion) you will be able to enter the "F. Result code".

0400 Household Roster

Introduction

The Household Roster must be completed for all households selected randomly into the survey sample. If the household refuses to participate, the interviewer should attempt to at least complete the household roster. If they refuse all participation, including completion of the roster, then document in Section 0350 and go to next household.

The proper and complete listing and description of each person in the household is a critical component of the survey process.

Purpose

The purpose of the Household Roster is to:

- Create a list of household occupants from which a respondent will be randomly selected;
 - Better understand the impact of the household members on household dynamics and individual health;
 - Collect basic information required for estimating the non-response bias in the survey; and,
 - Provide key information for statistical analysis in order to determine the health-related outcome rates in your country.
-

Non-response

All effort must be made to minimize non-response, and to interview as many people in the survey sample as possible. The two possible non-response scenarios are:

- The interviewer completes the household roster and the randomly chosen respondent refuses to participate.
- The interviewer is refused access to the household and is unable to fill in the household roster.

Notes:

- For guidance on how to persuade informants and/or respondents to participate, see page 26.
 - In the second scenario ensure that at least all relevant questions in Section 0000 Coversheet are completed for the household.
 - If available from census information, supervisors should record the number of adults (18 years of age or older) males and females in the household, and their respective ages.
-

Process

Responses for an individual household member go into one column from Q0402 to Q0419. When that individual is completed, move to the next column for the next household member and repeat until information about all household members is collected.

Continued on next page

0350 Contact Record, Continued

Identifying the household informant

Questions Q0401 to Q0422 are to be answered by a member of the household who qualifies as the household informant. The household informant:

- Is usually the person who is most knowledgeable about the household's health status, employment, financial condition, expenditures and health insurance.
- Will need to provide consent as the household informant.
- May be different from the person selected for completing the Individual Questionnaire.

Note: If more than one person provides information on the Household Questionnaire, the person providing most of the information should be coded as the household informant.

Q0401 - Q0422 The table below provides a guide to completing questions Q0401 to Q0422.

Question No.	Question	Guide for completion
Q0401	What is the total number of people who live in this household?	<ul style="list-style-type: none">• Record the number given by the informant.• A member of the household is someone who usually stays in the household and who:<ul style="list-style-type: none">– sleeps there, shares meals, and has that address as primary place of residence– spends more than 6 months a year living there– usually stays there but is away for a short time (for instance, in an institution for a short time due to a health condition).
Q0402	What is the name of the head of the household?	<ul style="list-style-type: none">• Write clearly in CAPITALS the Surname (last name) and the First name (given name) of the head of the household. <p>Note: The head of the household is usually the person who is the main decision maker. If there are equal decision makers, indicate the eldest of these persons.</p>
Q0403	First name and surname	<ul style="list-style-type: none">• Write the First name (given name) and Surname (last name) for each member of the household in columns numbered 01 to 15.• Write clearly in CAPITALS.• Check spelling and use margins for additional space.• Carry over the initials for each household member to the columns on the following two pages.

Continued on next page

0350 Contact Record, Continued

Q0401 - Q0422 (continued)

Question No.	Question	Guide for completion
Q0404	Person number (from WHS 2003)	<ul style="list-style-type: none"> • If applicable, record the World Health Survey 2003 person ID number for each HH member. • For follow-up households, enter the last 2 digits of the line number from the WHS HH roster. • For new HH members, enter '98'.
Q0405	What is [NAME]'s relationship to the household head?	Circle the code corresponding to the relationship (from the list of categories provided) of each household member to the household head.
Q0406	Is [NAME] a male or a female?	Circle the appropriate number for each member of the household 1= Male; 2= Female
Q0407	How old is he/she?	<ul style="list-style-type: none"> • Record age in years at last birthday for each person in the household. • If less than 1 year of age, enter "00" • If unknown, estimate age based on SHOWCARD time line of major historical events in the country.
Q0408	What is [NAME]'s marital status?	Circle the code corresponding to the marital status (from the list of categories provided) for each person in the household.
Q0409	What is the highest level of education [NAME] completed?	Circle education levels from the list of categories provided, for each person in the household.
Q0410	Eligible for (KISH table) selection?	<ul style="list-style-type: none"> • For the KISH tables, eligible persons would be ONLY household members aged 18 to 49. • ALL household members aged 50+ years will be interviewed and will not be recorded here. • For each person in the household, determine if they are eligible for selection and circle either: 1 = Yes, 2 = No
KISH	Ordering of KISH eligible	If more than one eligible household member was identified in Q0410 above, then sequentially order eligible members by oldest to youngest male, then continue the numbering from oldest to youngest female.
Q0411	Does [NAME] have health insurance coverage?	Circle health insurance types from the list of categories provided for each person in the household.
Q0412	Does [NAME] need care due to his/her health condition such asor because he/she is getting old and weak?	Record the appropriate response for each member of the household 1=Yes 2=No. If 'No', skip to Q0415 or next person.
Q0413	How much care does he/she need?	Read the response options and circle the appropriate response option codes.

Continued on next page

0350 Contact Record, Continued

Q0401 - Q0422 (continued)

Question No.	Question	Guide for completion
Q0414	Is [NAME] presently in an institution (hospital, after care home, home for the aged, hospice) due to his/her health condition?	Circle the appropriate response. Note: You may need to interview the person in the institution (if condition is chronic and return home in the near future is unlikely) or at home (if return to home is likely in the next 2 weeks).
Questions Q0415 and Q0416 are for follow-up households only. Initial (new) interviews should skip to next household member or to Q0417. The two questions refer to household members that were part of the household during the World Health Survey interview, but are not currently a household member.		
Q0415	What is the reason for [NAME]'s absence?	Read the response options and for each person in the household circle the code corresponding to the list of options provided. If "Died" go to next household member. If "Other", write clearly.
Q0416	Where did [NAME] go to?	Read the response options and for each person in the household circle the code corresponding to the list of options provided.
Q0417	Are there any other persons such as small children or infants that we have not listed?	If there are additional members of the household, go back and add them to the household roster.
Q0418	Are there any other persons not here at the moment who are usually part of your household?	If there are any people the informant now remembers, go back and add them to the household roster.
Q0419	Who is the main income earner for the household (person who brings in most money)?	<ul style="list-style-type: none"> Record the person's HH Roster number. "Main income earner" means the highest labour earnings, but could be an individual who earns profits from a business, interest on assets, receives a pension or other kind of public or private benefit.
Q0420	Who is the household member who completed the household roster?	Record the person's HH Roster (column) number.
Q0421	Has any member(s) of this household died in the last 24 months?	<ul style="list-style-type: none"> Identify the correct time period, for example, "since [June] 2005?" and record the response. If 'No' skip to Section 0450.
Q0422	How many deaths were there in the household in the last 24 months?	Record the number of deaths in the boxes provided.
Q0423	Sex of deceased?	Circle the sex for each of the deceased identified in Q0422.
Q0424	What was his/her age at death (in years)?	<ul style="list-style-type: none"> Record age in years for each of the deceased identified in Q0421. For children less than 1 year, record "00".

0450 Household Consent

Introduction

The sampling was arranged so that some households will interview all residents aged 50 years and older, while other households would select a person aged 18 to 49 years old.

In addition, some of the households that you expect to interview respondent(s) aged 50+ years, will be new and some will be follow-up (second) interviews from the World Health Survey interview.

All households that you expect to interview a respondent aged 18 to 49 years, will be follow-up (second) interviews from the World Health Survey interview (NOTE: EXCEPT for China and the new sample in the Russian Federation where a Kish table will be used to select the younger respondents, see pp. 87).

Q0451

For question Q0451, you will need to record the code from the Household Roster for the person who qualified as the 'household informant'.

Q0452 - Q0456

For question Q0452-Q0456, you will indicate the Person (HH member) number from Section 0400: Household Roster for all persons aged 50+ years. You will complete only ONE Household Questionnaire for each household, but you may complete one or more Individual Questionnaires. Make sure you link these through the Household and Individual ID numbers. If, for example, you find two respondents aged 50+ in the household, leave Q0454-Q0456 blank.

For households where you will interview a respondent aged 18 to 49 years, you need only interview ONE individual in this age range. You will need to identify the person who was interviewed in 2002 or 2003 as part of the World Health Survey, and interview that person. You would include this respondent's Person (HH member) number from Section 0400: Household Roster in Q0452 and leave Q0453-Q0456 blank.

Then make sure to include the HH ID number and Respondent ID (Person (HH member) number on the Individual Questionnaire for the respondent(s). HH ID is Q1006 and Respondent ID is Q1007.

0450 Kish Tables

Introduction FOR CHINA AND THE NEW SAMPLE IN THE RUSSIAN FEDERATION ONLY. For the approximately 20 % comparator sample of respondents aged 18-49 years, the Kish technique will be used to select a respondent from the household roster to complete the Individual Questionnaire. The Kish technique is a formalized, verifiable random selection method.

Q0451 For question Q0451, you will need to record the code from the Household Roster for the person who qualified as the 'household informant'.

Q0452 For question Q0452, record the Kish table code provided by your Supervisor. This code corresponds to one of the following eight Kish selection tables: A, B1, B2, C, D, E1, E2, or F.

Selecting a respondent Follow the steps below to use the Kish technique to select eligible household member (18-49) as the respondent for the Individual Questionnaire.

Stage	Description																																																																											
1	Refer to Q0410 in the roster. Circle 1=Yes if the member is eligible (aged 18-49 years), 2=No if not eligible (below 18 or 50 years and older). Tally up the total number of eligibles.																																																																											
2	Refer to row labelled "KISH". Assign a sequential number to each eligible person. Start numbering from oldest male to youngest male then continue the numbering from oldest female to youngest female.																																																																											
3	<p>Refer to the sheet assigned to the questionnaire indicating which Kish table to use. Enter this information in Q0452.</p> <p>Using the Kish summary table below, take the Kish table code in Q0452 (for example, 'B2'), and the total number of eligible household members identified in step 1 (for example, '3') to select the eligible respondent. For this example it will be Person (Household member) number 01. This number (in this example 01) will be entered in Q1007.</p> <table><tr><th rowspan="3">Kish table code</th><th colspan="6">If the number of adults in household is:</th></tr><tr><th>1</th><th>2</th><th>3</th><th>4</th><th>5</th><th>6 or more</th></tr><tr><th colspan="6">Select person (Household member) number:</th></tr><tr><td>A</td><td>01</td><td>01</td><td>01</td><td>01</td><td>01</td><td>01</td></tr><tr><td>B1</td><td>01</td><td>01</td><td>01</td><td>01</td><td>02</td><td>02</td></tr><tr><td>B2</td><td>01</td><td>01</td><td>01</td><td>02</td><td>02</td><td>02</td></tr><tr><td>C</td><td>01</td><td>01</td><td>02</td><td>02</td><td>03</td><td>03</td></tr><tr><td>D</td><td>01</td><td>02</td><td>02</td><td>03</td><td>04</td><td>04</td></tr><tr><td>E1</td><td>01</td><td>02</td><td>03</td><td>03</td><td>03</td><td>05</td></tr><tr><td>E2</td><td>01</td><td>02</td><td>03</td><td>04</td><td>05</td><td>05</td></tr><tr><td>F</td><td>01</td><td>02</td><td>03</td><td>04</td><td>05</td><td>06</td></tr></table>	Kish table code	If the number of adults in household is:						1	2	3	4	5	6 or more	Select person (Household member) number:						A	01	01	01	01	01	01	B1	01	01	01	01	02	02	B2	01	01	01	02	02	02	C	01	01	02	02	03	03	D	01	02	02	03	04	04	E1	01	02	03	03	03	05	E2	01	02	03	04	05	05	F	01	02	03	04	05	06
Kish table code	If the number of adults in household is:																																																																											
	1		2	3	4	5	6 or more																																																																					
	Select person (Household member) number:																																																																											
A	01	01	01	01	01	01																																																																						
B1	01	01	01	01	02	02																																																																						
B2	01	01	01	02	02	02																																																																						
C	01	01	02	02	03	03																																																																						
D	01	02	02	03	04	04																																																																						
E1	01	02	03	03	03	05																																																																						
E2	01	02	03	04	05	05																																																																						
F	01	02	03	04	05	06																																																																						

Household Consent Obtain consent from the household informant, using the Household Informant Consent form (see page 28) before proceeding to the next section.

0500 Housing

Introduction This section covers housing conditions and whether they pose any risk to health and whether water and sanitation are adequate.

Rationale The rationale for including these questions includes:

- Access to water supply and sanitation is a fundamental need and a human right. It is vital for the dignity and health of all people.
 - Adequate quantities of safe water for consumption and its use to promote hygiene are complementary measures for protecting health.
 - Sanitation facilities interrupt the transmission of much faecal-oral disease at its most important source by preventing human faecal contamination of water and soil. Epidemiological evidence suggests that sanitation is at least as effective in preventing disease as improved water supply.
 - The use of fuels such as wood, coal, agricultural and crop residues can cause serious effects on respiratory health. Traditional low-efficiency stoves produce heavy smoke with fine particles, carbon monoxide and carcinogenic compounds. Women are at high risk of chronic respiratory disease and eye conditions as they spend a lot of time in the home, particularly during cooking.
-

Supporting materials You should use the supporting material (SHOWCARDS) to help explain some of the response options to questions on the following topics:

- water sources
 - sanitation
 - cooking.
-

Q0501 - Q0513 The table below provides a guide to completing questions Q0501 to Q0513.

Question No.	Question	Guide for completion
Q0501	Is this dwelling where you live....?	Read the response options to the informant to determine the ownership status of the dwelling and circle the appropriate response. Note: If “Rented” or “Provided free of charge”, skip to Q0503.

Continued on next page

0450 Kish Tables, Continued

Q0501 - Q0513 (continued)

Question No.	Question	Guide for completion
Q0502	If the owner [you] were to sell this dwelling today, what is the approximate value (about how much is it worth)?	<ul style="list-style-type: none">Record the answer in local currency.If the informant is not sure, permit the informant to ask another household member.If necessary, probe by asking what the value of similar dwellings in the area are worth.
Q0503	How many rooms does this dwelling have in total, without counting the bathrooms or hallways?	Clearly state that bathrooms, closets, or hallways (even large hallways, unless used as a functional room) are not to be counted.
Q0504	What type of floor does your dwelling have?	Clarify the difference between hard floor and earth floor. Note: Hard floor is any type of floor that is not the natural earth, that is flooring that had to be placed or is manmade. This includes carpeted floors.
Q0505	What type of wall does your dwelling have?	<ul style="list-style-type: none">Let the informant answer spontaneously, however, if the informant is having difficulty, read out the answer options.If response is material not listed, mark 'Other'.
Q0506	What is the main source of drinking water of this household?	Circle the main type of drinking source and follow the appropriate skip. Use SHOWCARDS to help explain response options.

Continued on next page

0450 Kish Tables, Continued

Q0501 - Q0513 (continued)

Question No.	Question	Guide for completion
Q0506a	What is the main source of water used by your household for other purposes such as hand washing?	<ul style="list-style-type: none"> • This question is directed at those responding to "bottled water" to Q0506. • Bottled water drinkers may use other water sources for hand washing and these alternate sources may be either improved or unimproved. • The purpose is to know the main water source used by the household for purposes such as cooking and personal hygiene. • If the informant indicates "Piped water through house connection or yard" skip to Q0508.
Q0507	How long does it take to go there, get water and come back?	<ul style="list-style-type: none"> • Enter the amount of time in minutes, based on a typical round trip time (to get to the water source, obtain water, and return to the household) not the total time spent per day hauling water. • If the informant has difficulty responding, ask the approximate distance to the source and probe how long it takes to travel that distance and back.
Q0507a	Who usually goes to this source to fetch the water for your household?	Determine which family member usually performs the task of hauling water.
Q0508	What type of toilet facility do members of your household usually use?	<ul style="list-style-type: none"> • Circle the appropriate option from the list of categories. • Use the SHOWCARD to show the different types of toilet facilities. • If the informant indicates "flush" or "pour", probe to find out where it flushes to.
Q0509	Do you share this facility with other households?	<ul style="list-style-type: none"> • Circle yes or no. • "No" means that the toilet facility is exclusively used by the household and no other neighbouring households.
Q0510	What type of fuel does your household mainly use for cooking?	<p>Purpose of this question is to know the type of fuel that supplies the majority of the household's energy needs for cooking. The use of solid fuels, depending on how and where they are burned (see Q0511, 12, 13), can lead to very high levels of indoor air pollution.</p> <ul style="list-style-type: none"> • Circle the appropriate option from the list of categories. • If '1', '2', or '3' skip to the next section.

Continued on next page

0450 Kish Tables, Continued

Q0501 - Q0513 (continued)

Question No.	Question	Guide for completion
Q0511	In this household, is food cooked on an open fire, an open stove or closed stove?	Indoor air pollution levels are influenced by whether a stove is open or closed. Circle the appropriate option from the list of categories. <ul style="list-style-type: none">• Use the SHOWCARD to show the different types of cooking stoves.
Q0512	Does the fire/stove have a chimney or hood?	<ul style="list-style-type: none">• Identify whether the fire/stove is ventilated outdoors through a chimney or (extraction) hood directly over the fire/stove.
Q0513	Where is cooking usually done?	<ul style="list-style-type: none">• Read the response options (except "Other, specify") and circle the appropriate response.• If the informant indicates the cooking is done in a place not listed, record "87 Other, specify;" and clearly print the location described by the informant.

0600 Household and Family Support Networks

Introduction Household and family support networks refer to family and friends that are not living in the household.

Purpose The purpose of this section is to understand the type of help received by households and given by households via other family members, friends, and members of the community, and the government.

Parts in this section This section has the following three parts.

- "Transfers in": support received by the household from outside.
- "Transfers out": support given by the household to non household members.
- Personal or health care assistance provided outside the household.

Q0601 - Q0609 Transfers in Questions Q0601 to Q0609 determine what support is received by the household ("transferred in") over the past 12 months. This could be financial or non-financial.

There are three parts, each with identical questions, the only difference being who they are referring to as follows:

Questions	Refers to
Q0601-Q0603 Family and Kin	Family members that are not part of the household, that is do NOT live in the household.
Q0604-Q0606 Community Transfers and Assistance	Groups or clubs that are part of the community. This could include the local place of worship, or the local Red Cross, etc.
Q0607-Q0609 Government Assistance	Any local, regional or national government agency or office.

Continued on next page

0600 Household and Family Support Networks, Continued

"Transfers in" The table below provides a guide to completing each type of "transfer in" question. This is support received by the household.

Question No.	Question	Guide for completion
Q0601 Q0604 Q0607	In the <u>last 12 months</u> has anyone in the household received any financial or in-kind support from your ...	<ul style="list-style-type: none"> • These questions refer to any cash or non-cash support received by the household from the respective parties. It includes non-cash support which has monetary value, such as food, clothing, medicine, etc. • If the answer is no or don't know, record the respective responses and skip to the next subsection.
Q0602 Q0605 Q0608	What type of support did your household receive?	<ul style="list-style-type: none"> • Read the options - (a) cash, (b) non-cash or (c) time. • In column A, circle "Yes" or "No" for each of the types of support received. • If 'no' or 'don't know', skip to the next question. • If 'yes', move to column B and enter the approximate value in local currency.
Q0603 Q0606 Q0609	Keeping the support you just identified in mind, do you consider this as income or support that the household can count on in the future?	Ask if the informant feels the household can rely on receiving this type of support on a regular basis, or when in need, in the future.

Q0610 - Q0615 Transfers out Questions Q0610 to Q0615 refer to providing support ("transfer out") to persons outside the household. These questions refer to any cash or non-cash support given by members of the household to any of the respective parties. This includes non-cash support which has monetary value, such as food, clothing, medicine, and time.

The table below provides a guide to completing each type of "transfer out" question. There are two parts, each with identical questions, the only difference being who they are referring to as follows:

Questions	Refers to assistance provided to
Q0610-Q0611 Family and Kin	Children, grandchildren, aunts, cousins, other extended blood relatives of both the informant and/or the informant's spouse who do not live in the household.
Q0612-Q0613 Community, Neighbours and other kin	Neighbours, friends, local charities, distant relatives, etc.

Continued on next page

0600 Household and Family Support Networks, Continued

Q0610 - Q0613 If the answer is 'No' or 'Don't know', record the respective responses and skip Transfers out to the next subsection or section.

Q0614 - Q0615 The table below provides a guide to completing questions Q0614 to Q0615. These refer more to personal assistance or health care provided to someone. For these questions only, it could be a household member of someone outside the household.

Question No.	Question	Guide for completion
Q0614	During the <u>last 12 months</u> , did you or someone in your household provide help or support 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?	<ul style="list-style-type: none">• This question refers only to the last 12 months. The assistance could be provided to an elderly parent who has a chronic illness or to a child with a mental or physical disability.• If the informant says "yes", ask for example, if it was for a household member or someone not part of the household.• If someone is currently living in a health institution temporarily, but normally is part of the household, then this person should be considered as a household member.• If the informant answers no, skip to section 0700.
Q0615	Please tell me the kind of care that was provided:	Read out each of the three types of care that the informant may have provided (Q0615a, 15b or 15c). If Column A is 'Yes', provide amount of time in Column B. If Column A is 'No' or 'Don't know', go to next question.

0700 Assets and Household Income

Introduction These questions are meant to assess whether or not the household (or a member of the household) possesses the item in question.

Q0701- Q0720 For questions **Q0701 to Q0703**:

- Record the number of items, regardless of their condition, the household possesses.
- If the amount is zero, record '00' in the boxes.
- Car can be substituted for automobile, vehicle, truck, lorry, tractor or other four-wheeled vehicles are acceptable.

Questions **Q0704 to Q0719** require a yes/no answer.

- It does not matter how many of each asset (for example, computer(s)) the household may have, what condition the asset is in or what its value is.
 - A number of the assets are country-specific and need to be defined - with definitions sent to WHO. Two examples are below:
 - For bicycle, circle 'Yes' if the household possesses any bicycle (pedal bike/push bike), both adult or child.
 - For clock, record any type of clock in the household. This does not include a wristwatch or pocket watch.
-

Q0720- Q0728 The table below provides a guide to completing questions Q0720 to Q0728.

Question No.	Question	Guide for completion
Q0720	Please tell us if you own any land or property?	<ul style="list-style-type: none"> • This includes private, commercial or farm land. Property can be developed or undeveloped. • If 'Yes' in column A, move to column B and enter the approximate value in local currency. • If 'No' or 'Don't know', skip to the next question.
Q0721	Please tell us if you own any other valuable items, such as jewellery, books, art?	<ul style="list-style-type: none"> • Try to identify if there are other items of value in the household and an approximate amount. Remind the person that we don't want to know details, but an approximate amount - and that this information will NOT be used for tax or benefit purposes. • If 'Yes' in column A, move to column B and enter the approximate value in local currency. • If 'No' or 'Don't know', skip to the next question.

Continued on next page

0700 Assets and Household Income, Continued

Q0720- Q0728
(continued)

Question No.	Question	Guide for completion
Q0722	Does your household have a regular source of income?	Regular source of income refers to income that is received by the household often enough and that is constant. It does not have to be daily, weekly or even monthly, but it needs to be received on a regular and predictable basis so that the household can rely on its continuity.
Q0723	I am now going to read you a list of possible sources of income. Please tell me from which of these sources members of your household receive income.	Read the list of sources of income ('a' through 'f'), including asking if there are any "other" sources. <ul style="list-style-type: none"> • If 'Yes' in column A, move to column B and enter the approximate value in local currency. • If 'No' or 'Don't know', skip to the next question. Note: Because this section may be a sensitive topic to some informants, assure the informant that all information will be kept confidential and used for research purposes only.
Q0724	So to verify this information, your approximate total household income from ALL sources over the last 12 months is about how much?	Do NOT add up Q0723a-f. There is no need for there to be consistency between the sum of Q0723a-f and this response. You do not need to force consistency here - this answer should be a spontaneous number - an approximate and accurate amount of income from all household members over the last 12 months.
Q0725	How many people depend on this income?	<ul style="list-style-type: none"> • Ask the informant how many people are dependent on the total income indicated in Q0723 or Q0725. • This number can be more than the number of people in the household, that is a mother living somewhere else, or a child living at the university campus. • If only the informant is dependent on this income then record "01". • If more than the informant is dependent, then include the informant in the total number.
Q0726	Does your household or any members of the household have current debt or outstanding loans?	Debt or outstanding loans refer to money, goods or services owed to someone else or an institution. It is an obligation or liability to pay.
Q0726a	What is the approximate total amount of this debt or loan(s)?	If Q0726 'Yes', provide an approximate amount for all current debt.

Continued on next page

0700 Assets and Household Income, Continued

Q0720- Q0728
(continued)

Question No.	Question	Guide for completion
Q0727	Thinking about the income for this household, do you believe that it is enough money to cover your daily living needs and obligations?	<ul style="list-style-type: none">• “Daily living needs and obligations” refers to whether the basic needs of the household are covered by the total household income.• If, for example, there is not enough money to buy the needed food or clothes for the household in general, then the answer is no.• Probe if necessary, by asking what the informant considers daily living needs (excluding what is culturally thought of as luxury items, that is products or services that are not “needed”).
Q0728	Would you say your household's financial situation is...?	<ul style="list-style-type: none">• Determine how the informant feels about the current financial situation of his/her household. Read the answer responses to the informant.• If the informant is not clear what is meant by the response categories, repeat the question asking if they <i>feel</i> the household' financial situation is very good, good, etc.

0800 Household Expenditure

Introduction

This section is about how much people spend on health care services, and how large a share of total household spending goes on health care services.

Factors to consider

Some general factors to consider when asking these questions include:

- Do not focus on the consistency between the totals reported in one question and the sum of answers in the following ones.
- Record all amounts in the local currency.
- If the value was paid in-kind (not in cash/credit/debit but through goods or services), then record the local currency value of the in-kind payment.
- Watch the timeframes for expenditures, which vary from the last 7 days, last 30 days, to last 12 months.
- Be very clear with the informant about the time frame for each part of this section.
- Food items include such things as staple foods (rice, cassava, quinoa, cornmeal, potato, bread, pasta) meat (beef, pork, lamb, mutton, poultry, fish, seafood), fruits, vegetables, milk (and other dairy products) and eggs, non-alcoholic beverages (juice, water, soft drinks, coffee, tea), tobacco and alcohol, spices and cooking oils. These be purchased or produced and consumed by the household. There is also a category for prepared food items purchased at restaurants, stalls, take-out or otherwise prepared outside the household.
- Non-food expenditures, regular household expenditures in the last 30 days.
- Expenditures that are large and infrequent (vehicles, durable goods, household equipment or devices, housing upkeep, hospital costs) or occur on an annual, bi-annual or bi-monthly basis (school fees, mortgage payments, insurance premiums, taxes) but have not actually occurred in the last 30 days go into the 12 month expenditure (Q0811-21).

Q0801- Q0829 The table below provides a guide to completing questions Q0801 to Q0829.

Question No.	Question	Guide for completion
Q0801a – Q0801i	I would like to start by asking you about <u>food items purchased</u> by the household. In the <u>last 7 days</u> , how much did your household spend on:	<ul style="list-style-type: none"> • Get the best estimate for costs of the items listed in Q0801a through 01i. • Alcohol, tobacco and restaurant or take-out meals should be included in Q0801g and 0801f. • Food expenditures include all food prepared and consumed by the household, along with food purchased and consumed outside the household (for example snacks, bag lunches).
Q0802	In the <u>last 7 days</u> , how much did your household spend on food items overall.	Do NOT add up Q0801a-i. This answer should be a spontaneous number - an approximate and accurate amount of all food expenditures in the last 7 days.
Q0803a - Q0803e	<u>In the last 30 days</u> , how much did your household spend on:	This refers to regular household expenditures - excluding food. It does not include things purchased for use in a home business which receives payment for goods and services.

Continued on next page

0800 Household Expenditure, Continued

Q0801- Q0829 (continued)

Question No.	Question	Guide for completion
Q0804 - Q0810	In the <u>last 30 days</u> , how much did your household spend on health care services and items?	These are health expenditures that do NOT include an overnight stay in a health care facility. This refers to outpatient type care and items.
Q0811 - Q0821	In the last <u>12 months</u> , how much did your household spend on: ...	<ul style="list-style-type: none"> • It is important that expenditures listed in Q0803a-e are NOT included here. • Education expenditures include school fees, uniforms, writing materials, books, etc. • Rituals, ceremonies (funerals, weddings, Eid) or gifts includes costs for their own family, or flowers and gifts for such events outside their own family. • Health care costs here refer to overnight stays at hospitals, health centres, institutions or long-term care facilities. • Health care costs include any costs on health care that was not reimbursed (or paid) by public or private insurance.
Q0822 - Q0828	In the <u>last 12 months</u> , which of the following financial sources did your household use to pay for <u>any and all health expenditures</u> ?	<p>These questions refer only to payment for health costs in the last 12 months. This includes inpatient and outpatient services and all health care items. If no expenditures (Q0804 through 0810 and Q0818 to 0820 are zero) skip to Q0829.</p> <p>If the informant answers 'don't know', probe further or circle "88 Don't know".</p> <ul style="list-style-type: none"> • Current income from any member of the household could be cash salary or items used for barter. • Savings could be stored at the household, in a bank account, credit scheme, or other. • Payment or reimbursement includes costs that were: <ul style="list-style-type: none"> – billed to the individual or family, and – subsequently paid or reimbursed by a health insurance organization. <p>Do not include the value of services that the insurance organization provides in-kind or pays directly to providers without billing the individual or family.</p> • Use "Other" to record any other sources of cash or kind to pay for health expenditures.
Q0829	In general, what is your household's average overall monthly spending?	Here again, as in Q0724, we do not want the informant to simply add up expenditures from earlier questions. We want the informant to provide an estimate of average expenditures for a typical month. This should be an average total cost for running the household in a typical month.

0900 Interviewer Observations

Introduction

This section provides the interviewer with space to identify any issues or problems related to the interview or other associated factors for the selected household.

This information is important for the editing, cleaning and interpreting processes and will be used by the Field Editors, Supervisors and Principal Investigators.

Q0901 - Q0902

The table below provides guidelines for completing questions Q0901 to Q0902.

Question No.	Question	Guide for completion
Q0901	Was someone else present during the interview?	If at any point during the interview, another person was present during the interview, circle "Yes". This could be a household member or other person. This person may or may not have contributed to the interview - either way, indicate if a person was physically present.
Q0902	What is your evaluation of the accuracy of the informant's answers?	This is the interviewer's perception about the accuracy of the household informant's responses.

Q0903 - Q0907	Only answer these questions if they are relevant to this interview. They will be used for quality control purposes only - and for assisting with future rounds of data collection.
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Interviewer notes

Space is provided for any additional information related to the interview or the interviewing process.

0910 Verbal Autopsy

Introduction	To maintain or improve a health system and health status of populations, it is very important to know information about vital events, including deaths with age, sex and cause data. In this survey, we will collect information about all deaths of household members over the last 24 months (2 years). This takes the form of a 'verbal autopsy'. A verbal autopsy is an interview administered to care-givers or family members after a death occurs.
Process	Identify someone in the household who knew very well the household member who died. We ask this person a number of simple questions about the death and events leading to death. While the process may be easy, the subject is difficult. Asking the informant to speak about a dead relative or friend is very emotional and often difficult - please take this into account when asking the informant the following questions - and allow time for informant to respond.
Q by Q guide	The Q by Q guide for the Verbal Autopsy Questionnaire is included with the Questionnaire itself. The tool allows for multiple deaths in one household over the last 24 months.

Part 6: Guide to Completing the Individual Questionnaire

Overview

Introduction This guide provides background information and guidance for completing each question in the Individual Questionnaire.

Intended audience This part is intended for those fulfilling the following roles:

- Interviewer
- Supervisor
- Field Editor

Intended use Use this guide in training, to prepare for the interviews, and as reference material during interviews if respondents request clarification about specific questions.

Interviewers and supervisors should refrain from offering their own interpretations.

In this part This part covers the following sections from the Individual Questionnaire.

Topic	See Page
Consent for Individual Respondent	104
Contact Record - Individual or Proxy Respondent	105
1000 Socio-Demographic Characteristics	107
1500 Work History and Benefits	112
2000 Health State Descriptions	120
2500 Anthropometrics, Performance Tests and Biomarkers	129
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Consent for Individual Respondent

Introduction	Before proceeding with the Individual Questionnaire, the selected respondent must first provide signed informed consent to participate.
<hr/>	
Requirements	<p>Informed consent means that the respondent must fully understand what their participation involves before signing the consent. The respondent can be given the consent form to read or you can read the consent form to the respondent. Time must be allowed for questions before requesting signature from the respondent.</p> <p>A separate consent form is required for the blood spot in Section 2500 of the individual questionnaire.</p>
<hr/>	
Procedure	Follow the steps provided on page 28 above for full details on how to obtain consent and what forms to use.
<hr/>	

Contact Record - Individual or Proxy Respondent

Introduction This section includes general information about the survey and helps to determine whether a respondent is able to participate directly or whether a proxy respondent should be sought.

Q1000a-Q1000c The table below provides a guide to completing questions Q1000a to Q1000c.

Question No.	Question	Guide for completion
Q1000a	Interviewer ID	Number that identifies the interviewer.
Q1000b	Contact with:	Complete once interviewer determines whether the respondent or proxy respondent will be interviewed.
Q1000c	Result code	This refers to the final result code for the Individual Questionnaire. Use the table below to select the appropriate code to document the final result. The final result refers to Q1000b - individual or proxy respondent.

Codes	Description
01	Completed Interview (interview is accepted and conducted – this includes interview and body measurement, performance tests and blood sample)
02	Partial Interview (interview is partially completed and person will not be contacted anymore).
03	Respondent contacted-initial refusal
04	Respondent contacted-uncertain about interview
05	Resistance/refusal by respondent
06	Final refusal by respondent
07	Final refusal by other household member
08	Unable to locate respondent
09	No interview because respondent is not eligible: less than 18, mentally unfit or too ill.
10	Language barrier
11	House is vacant or household occupants are elsewhere (seasonal vacancy, other residence)
12	Unsafe or dangerous area or no access to respondent
13	Deceased respondent
14	Respondent in institution: jail, hospital and not accessible

Continued on next page

Contact Record - Individual or Proxy Respondent, Continued

Q1001-Q1005 Questions Q1001 to Q1005 provide information on the cognitive ability of the respondent in order to determine whether they are able to participate directly in the SAGE questionnaire or whether a proxy respondent should be sought.

The table below provides a guide to completing questions Q1001 to Q1005.

Question No.	Question	Guide for completion
Q1001	Does the respondent have obvious cognitive limitations that prevent him/her from being interviewed?	This is a subjective judgement by the interviewer. If the selected respondent aged 50 years or older is mentally incapacitated or has obvious memory problems, the interviewer can decide to select a proxy respondent for this interview. If unsure, can use Q1002 and Q1003 to help with the decision. ALL proxy interviews will be checked by Supervisors.
Q1002	How would you best describe your memory at present? Is it very good, good, moderate, bad or very bad?	To be asked of all respondents.
Q1003	Compared to 12 months ago, would you say your memory is now better, the same or worse than it was then?	Assess whether the respondent's memory has changed over the recent past.
Q1004	Interviewer	Interviewer decision point. Based on interviewer's impressions and responses to Q1002 and Q1003, decide whether to: 1) continue with the selected respondent and arrange for the respondent to complete an individual consent form, or 2) seek a proxy respondent and go to Q1005. There should be a significant memory problem or health condition that would, in the interviewer's opinion, be overly stressful for the respondent or provide responses of questionable accuracy.
Q1005	We would like to ask someone who knows the respondent a few questions about the respondent's memory.	<ul style="list-style-type: none">• Circle the appropriate option for the proxy and go to the Proxy Questionnaire.• Do not continue to complete the Individual Questionnaire.

1000 Socio-Demographic Characteristics

Introduction This section provides information on different background characteristics and gives an indication of income and socioeconomic status.

Q1006-Q1024 The table below provides a guide to completing questions Q1006 to Q1024.

Question No.	Question	Guide for completion
Q1006	Household ID	Record household ID assigned on the coversheet in the Household Questionnaire in Q0002.
Q1007	Number of respondent from household HH roster	Record the respondent's column number from Q0403 in Section 0400: Household Roster.
Q1008	What is your mother tongue?	<ul style="list-style-type: none"> Record the respondent's mother tongue. Mother tongue is the language the respondent: <ul style="list-style-type: none"> – voluntarily identifies with – can fully express themselves in – learnt first If the respondent knows more than one 'mother tongue' language, record them all.
Q1009	Record sex of the respondent	<ul style="list-style-type: none"> Do NOT read this question to the respondent but record the respondent's sex (male or female) based on observation. Clarify if needed.
Q1010	In what day, month and year were you born?	<p>Record the date of birth. Accurate age reporting is very important for this survey.</p> <ul style="list-style-type: none"> Ask the day the respondent was born. <ul style="list-style-type: none"> – Record the numeric equivalent of this day (01-31). Ask in which month the respondent was born. <ul style="list-style-type: none"> – Record the numeric equivalent of this month (01-12). Ask in which year the respondent was born. <ul style="list-style-type: none"> – Record the year according to the Gregorian calendar (that is 18xx or 19xx). Probe if necessary by asking if it was close to a national or religious holiday, or around a major event, or if they know around when a sibling or other family member of theirs was born and work from that. Use a historical time line if needed. If after probing the respondent does not seem to know, indicate 88 for month or 8888 for year in the box.

Continued on next page

1000 Socio-Demographic Characteristics, Continued

Q1006-Q1024 (continued)

Question No.	Question	Guide for completion
Q1011	How old are you now?	<ul style="list-style-type: none"> Record respondent's age in years. Verify by a birth certificate if available. Probe if necessary and try to calculate out loud the number of years between the present and when they indicated they were born, or ask if they know the age of family members or spouse and if he/she is younger or older and by how many years. If after probing the respondent still is unable to answer, write 888 in the box.
Q1012	What is your <u>current</u> marital status?	<ul style="list-style-type: none"> Ask this question without reading the options to the respondent. Emphasize that current or present marital status is needed. If the response does not match an option, for example, "single", then read the options and ask the respondent to choose the best one. For example, if the respondent is currently married (but was divorced in the past), the option "currently married" should be recorded. "Cohabiting" means the respondent is living with their partner but is not married. If the respondent indicates "never married", then skip to Q1015. If the respondent indicates "currently married" or "cohabitating" then skip to Q1014.
Q1013	For how many <u>years</u> have you been separated, divorced or widowed?	<ul style="list-style-type: none"> Record the number of years since the respondent has been separated, divorced or widowed. Probe if necessary by asking if it happened around the same time as a major event. If less than 1 year, round up to 1 year (enter "01"). If after probing the respondent is still unable to answer, write 88 in the box.
Q1014	For how many <u>years</u> have you been married or living together?	<ul style="list-style-type: none"> Record the number of years the respondent was or has been married. <ul style="list-style-type: none"> Probe if necessary by asking the age of the oldest child and how long before the birth of this child did he/she get married. If less than 1 year, round up to 1 year (enter "01"). If after probing the respondent is still unable to answer, write 88 in the box. Where multiple marriages/partners are common, refer to the year of the first marriage.

Continued on next page

1000 Socio-Demographic Characteristics, Continued

Q1006-Q1024 (continued)

Question No.	Question	Guide for completion
Q1015	Have you <u>ever</u> been to school?	<ul style="list-style-type: none"> • “School” refers to any kind of formal schooling where basic subjects such as reading and math are taught (including home schooling) and exams are taken. • It excludes short courses (typing, sewing) or religious education such as Bible school or Koranic school. • School includes technical or vocational training beyond primary school. • If the respondent indicates “no” skip to Q1018.
Q1016	What is the <u>highest level</u> of education that you have <u>completed</u> ?	<ul style="list-style-type: none"> • Emphasize highest level of education <u>completed</u> (either at a formal school or at home). • If the respondent attended 3 months of the first year of secondary school but did not complete the year, record “primary school completed”. • If the respondent only attended a few years of primary school, but did not complete, record “less than primary school”. • The categories of educational levels vary across countries. The supervisors should provide interviewers with guidance for how to complete this question.
Q1017	How many <u>years of school</u> , including higher education have you <u>completed</u> ?	<ul style="list-style-type: none"> • Do not count partial years completed. • If the respondent has been in school both full and part-time, record the number of years at full-time education. Count repeated grades as two years. • Probe if necessary by asking at what age he/she started school and at what age he/she finished school. • If less than 1 year, round up to 1 year. • If after probing the respondent is still unable to answer, write 88 in the box.
Q1018	What is your background or ethnic group?	<ul style="list-style-type: none"> • Ask what ethnic or cultural group the respondent identifies with (was born into). • Do not read the response options. • If the respondent does not understand how to answer, then read the response options. • If none of the answers are appropriate indicate “other”.

Continued on next page

1000 Socio-Demographic Characteristics, Continued

Q1006-Q1024 (continued)

Question No.	Question	Guide for completion
Q1019	Do you belong to a religious denomination?	<ul style="list-style-type: none"> • Ask what religion the respondent practices or belongs to or identifies with. • If the respondent's religion does not fit one of the categories or the respondent is not clear on what type of response is wanted, probe by reading out the categories. • If the respondent indicates a religion that is not listed as a category then clearly print the religion name next to "87 Other, specify:". • If the respondent indicates he or she is not practicing any religion, then record "None/no religion"
Q1020	Have you always lived in this village/town/city?	<ul style="list-style-type: none"> • If the respondent has always lived in the area, circle 'Yes' and skip Q1025. • If the respondent has not always lived in the current area then proceed with Q1021-24.
Q1021	How long have you been living in this area?	<ul style="list-style-type: none"> • Record the amount of time the respondent has been living in the current area. <ul style="list-style-type: none"> – Less than one year, record "00". – One year or more, record as years only and round down. For example if the response is "4 and a half years", record "4" in the years boxes. – Probe if necessary by asking what year or at what age the respondent moved into the area, etc. • If after probing the respondent still is unable to answer, circle '-8 Don't know'.
Q1022	Where were you living before?	<ul style="list-style-type: none"> • Record where the respondent was living before moving to the current area. • If you do not recognize the place name, probe by asking if it is a big city, a smaller town, or in the country side and whether it is in the same country as the respondent is living currently, or if it is in another country.
Q1023	Where have you lived for most of your adult life?	"Most of your adult life" means the largest number of years after the age of 18. It should not include the time as a child, or less than 18 years of age.
Q1024	Where did you live for most of your childhood (before age 10 years)?	"Childhood" refers to before the age of 10. International conventions define children as aged 18 and under. Governments and cultures may define "child" by different ages or criteria. For the sake of this question, we want to know living conditions before age 10.

Continued on next page

1000 Socio-Demographic Characteristics, Continued

Q1025 - Q1030 The table below provides a guide to completing questions Q1025 to Q1030. There are two parts, each with identical questions, the only difference being who they are referring to as follows:

- Q1025 - Q1028 mother
- Q1029 - Q1032 father

Question No.	Question	Guide for completion
Q1025 Q1029	Was your mother/father ever employed?	Employment here means 'paid work' or 'working for a wage'. For mother, if the answer is "No", go to Q1029 For father, if the answer is "No", go to Q1032.
Q1026 Q1030	Who is/was your [mother's/father's] main employer over [her/his] working life?	Read categories and circle appropriate answer. Informal employment could mean employment in the informal sector or informal employment. See Q1509 for further explanations and definitions of each category.
Q1027 Q1031	In her/his current/last <u>main</u> job, what has been [her/his] main occupation?	Print clearly exactly what the respondent replies. Clarify where and as needed if you do not understand what this occupation is or entails. Write any additional details to assist the data coder and data entry clerk.
Q1028 Q1032	What is the <u>highest level</u> of education that [she/he] <u>completed</u> ?	See Q1017 above.

1500 Work History and Benefits

Introduction This section is to assess whether the respondent has ever worked for pay, the type of work, place of work and for how long the respondent worked. It also asks about age at which the respondent started working, and if no longer working, the age at which the respondent stopped working and why.

Purpose The purpose of this section is to help answer other questions such as whether or not health status contributes to unemployment, or whether people in different kinds of occupations enjoy different levels of health.

Q1501 - Q1507 The table below provides a guide to completing questions Q1501 to Q1507.

Question No.	Question	Guide for completion
Q1501	As you know, some people take jobs for which they are paid in cash or in-kind. Other people sell things,... Have you ever in your life done any ... type of work (not including housework)?	<ul style="list-style-type: none">• Assess if the respondent has ever worked for money or for goods.• Work refers to formal and informal activities or employment in the formal and informal sectors.• “Goods” refer to any item except currency (money) that is used as a payment for work or service (for example, food, clothing, housing, silver or gold, etc).• If the respondent answers “No” go to Q1501a.• If “Yes”, skip to Q1502.
Q1501a.	What is the main reason that you have never worked?	<ul style="list-style-type: none">• Only ask this question if the respondent has NEVER worked for pay or goods.• Do not read the answer choices.• Circle the best category, and confirm it with the respondent (for example, if the answer is “because I have very bad back pain”, respond with “so you never worked because of ‘health problems’” and see if the respondent confirms.• If the respondent provides more than one answer, ask them to specify which one is the most important or most relevant reason for not working.• If the answer does not fit into any of the written answer categories, please ask the respondent to specify the reason not worked and record next to “Other”.• Then Skip to Q2000.

Continued on next page

1500 Work History and Benefits, Continued

Q1501 - Q1507 (continued)

Question No.	Question	Guide for completion
Q1501a. (contd.)	Response option	Defined as, or refers to individuals who...
	Homemaker/caring for family	Take care of the children and home and are not working for pay (mainly women).
	Could not find a job	Wanted to work for pay, actively looked or are looking but have not been successful in finding work.
	Do voluntary work	Are working but do not receive money or goods in return. Could be altruistic work (for example, feeding homeless, providing care for orphaned children), or to help out a friend or family member.
	In studies/training	Have been studying in school and are not ready to work or have not had time to work for pay or goods. Can also apply to individuals in training for a vocation, but are not receiving pay or goods for their work.
	Health problems/disabled	Had/have any kind of health condition or problem preventing them from working.
	Do not have the economic need	Do not need to work because they do not need to earn money (for example, because of inheritance, land/property ownership, or living with family members who support them).
	Parents/spouse did not let me	Are married and whose spouse does not want them or allow them to work (mostly women). It can also apply to individuals living with their parents, and they did not want or allow them to work.
Q1502	At what age did you start working?	<ul style="list-style-type: none"> Record the age the respondent started working for pay or goods. If the respondent is unable to answer, circle '-8 Don't know' and continue to Q1502a.
Q1502a	How many years ago did you start working?	<ul style="list-style-type: none"> Ask this question only if the respondent cannot answer Q1502. Probe and calculate if necessary by asking how many years the respondent has been working, or around what major events the respondent started.
Q1503	Have you worked for at least 2 days during the last 7 days?	<ul style="list-style-type: none"> This question is asked to determine if the person is currently working. If the respondent is working at the present time for pay or goods circle "Yes" and skip to Q1508. If the respondent is not currently working circle "No" and continue to Q1504.

Continued on next page

1500 Work History and Benefits, Continued

Q1501 - Q1507 (continued)

Question No.	Question	Guide for completion
Q1504	What is the main reason you are not working?	<ul style="list-style-type: none"> • Ask this question without reading the answer choices. • Circle the best category, and confirm it with the respondent (for example, if the answer is "because I am going to university", respond with "so you are not working now because of 'studies/training'" and see if the respondent confirms. • If the respondent provides more than one answer, ask them to specify which one is the most important or most relevant reason for not working. • If the answer does not fit into any of the written answer categories, please ask the respondent to specify the reason not worked and record next to "Other". <p>Note: See similar category definitions in Q1501a above.</p>
Q1505	At what age did you stop working?	<ul style="list-style-type: none"> • Record the age the respondent stopped working for pay or goods. • If the respondent is unable to answer, circle '-8 Don't know' and continue to Q1505a.
Q1505a.	How many years ago did you stop working?	<ul style="list-style-type: none"> • Record the number of years since the respondent stopped working for pay or goods. <ul style="list-style-type: none"> – Probe and calculate if necessary by asking how many years ago the respondent stopped working, or around what major events the respondent stopped. • If the respondent is unable to answer, write 88 in the box.
Q1506	Are you actively looking for work at this time?	<p>Persons are classified as unemployed if they do not have a job, have actively looked for work in the prior 4 weeks, and are currently available for work (except for temporary illness. Ask the respondent if he or she is currently looking for a job and are available for work. Actively looking for work may consist of any of the following activities:</p> <ul style="list-style-type: none"> • Contacting: An employer directly or having a job interview; A public or private employment agency; Friends or relatives; A school or university employment center; • Sending out resumes or filling out applications; • Placing or answering advertisements; • Checking union or professional registers; • or some other means of active job search.

Continued on next page

1500 Work History and Benefits, Continued

Q1501 - Q1507 (continued)

Question No.	Question	Guide for completion
Q1507	What is the <u>main reason</u> that you would like to work at present?	<ul style="list-style-type: none"> • Do not read the answer options. • Allow to respondent to answer spontaneously. • Probe if necessary by reading some of the answer options described below.
	Answer option	Refers to individuals who..
	Need the income	Need to work for money in order to support themselves or their family
	Want to/need to be active	Want to work because they prefer not to be idle and without something to do. They may not necessarily need the money, but prefer to be active by working.
	Want to feel useful	Need to work in order to feel useful, that is they need to work to satisfy their own identity or self-esteem.
	Help my family	Are working in order to bring income to their family. It may refer to young adults living with their parents, or to women trying to supplement their husbands income.
	Other, specify	Do not fit into any of the categories

Q1508 - Q1515 The tables below provide guidelines for completing questions Q1508 to Q1515 that try to capture the current type of work - or for those who have stopped working, what their main/last occupation was.

Question No.	Question	Guide for completion
Q1508	Are/were you paid in cash or kind for your work or are/were you not paid at all?	Record the current work payment arrangement. If the respondent has stopped working, record what the arrangement used to be in her or his most recent job.
Q1509	Who is/was your employer in your current/most recent <u>MAIN</u> job?	<ul style="list-style-type: none"> • “Current” means any activity of <u>more than one hour</u> that the person engaged in for pay during the <u>last two weeks</u>. If the person is engaged in more than one kind of "job" during the last two weeks (for example, sold home-made food on the street part of the time and worked in a factory sewing shirts at other times), then "main" means the activity from which they derived the most income. • For those who have stopped working - ask about their employer for the most recent main job.

Continued on next page

1500 Work History and Benefits, Continued

Q1508 - Q1515 (continued)

Response option	Defined as, or referred to as an individual who...
Public sector (government employee)	<ul style="list-style-type: none"> • Receive pay from the government. • Is hired by a government office or agency and paid a salary or wage. <p>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.</p>
Private sector (for profit and non profit)	<p>Is hired to work and is paid a salary or wages for a corporation, company, agency, organization. etc. This could be a for profit business or not-for-profit.</p> <p>Includes any employees not working for the government and not self-employed.</p>
Self-employed	<p>An individual who operates a business or profession as a sole proprietor, partner in a partnership, independent contractor, or consultant. Earning one's livelihood directly from one's own trade or business rather than as an employee of another.</p> <ul style="list-style-type: none"> • Produces goods for sale or earns an income through provision of services to different people or firms. • Works alone or with intermittent assistance from others, but does not employ anyone for a paid wage or salary on a regular basis.
Informal employment	<p>Informal employment could mean employment in the informal economy or informal employment. Informal economy refers to the general market income category (or sector) wherein certain types of income and the means of their generation are “unregulated by the institutions of society, in a legal and social environment in which similar activities are regulated.”</p> <p>Jobs in the informal economy are characteristically without benefits such as health insurance, sick leave, paid vacations or pensions.</p>

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1500 Work History and Benefits, Continued

Q1508 - Q1515 (continued)

Question No.	Question	Guide for completion
Q1510	In the last 12 months, for your <u>main</u> job what has been your main occupation?	<ul style="list-style-type: none">• Write down the answer exactly as stated. A colleague in the Primary Investigators office will code what you have written - so you need to print clearly.• Ask for clarification if needed. Provide any additional information that will help the coder.• A general list of job categories follows, but the idea is to clearly write (in all capitals) the name of the job the respondent provides. Use this list for your own reference, or if you are having trouble understanding what the respondent's main occupation is.• “<u>Main</u> occupation” means the occupation that the person spent the most <u>time</u> doing over the last 12 months.• For those who have stopped working, it should be the occupation for the <u>most recent main</u> job. <p>Do not read out the following examples of different occupation types.</p>

Continued on next page

1500 Work History and Benefits, Continued

Q1508 - Q1515 (continued) (continued)

Question No.	Question	Guide for completion
Q1510	See SAGE Occupation coding book.	
	Occupation	Examples of occupations in this category include...
	Legislator, Senior Official, or Manager:	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.
	Professionals, Technicians or Associate Professionals	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	Secretaries, keyboard operators, stock clerks scribes, office assistants, cashiers, and receptionists.
	Personal Services, Marketing, or Sales	Travel attendants, restaurant workers, personal care workers, barbers, undertakers, astrologers, fire-fighters, police officers, models, salespersons.
	Agricultural or Fisheries Worker	Gardeners and crop growers, livestock, dairy, and poultry producers, forestry workers and loggers, hunters, and fishery workers
	Craft, Construction, or Trades	Miners, shop 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	Processing-plant operators, power production operators, assembly-line operators, machine operators, assemblers, and motor-vehicle drivers.
	Elementary occupations	Street vendors, domestic help, building caretakers, garbage collectors, messengers, porters, labourers (agricultural, construction, fishery, mining, transport).
	Armed Forces	Anyone who is employed as a member of military service of the country.
Q1511	Do/did you usually work throughout the year, or do/did you work seasonally, or only once in a while for your <u>main</u> job?	Indicate if this is consistent work throughout the entire year, or if it is seasonal/part of the year or occasional (only when work is available).

Continued on next page

1500 Work History and Benefits, Continued

Q1508 - Q1515 (continued) (continued)

Question No.	Question	Guide for completion
Q1512	On average, how many days a week do/did you work in your <u>main</u> job?	The number of days should not exceed 7.
Q1513	On average, how many hours a day do/did you work in your <u>main</u> job?	<ul style="list-style-type: none"> Record the average number of hours per day the respondent works. The number of hours should not exceed 24 and should be realistic (for example, if the respondent indicates 22 hours, probe to find out if he/she was truly working for pay for 22 hours in 1 day).
Q1514	In this main job, do/did you receive any of the following benefits in addition to your payment in cash or in kind?	<ul style="list-style-type: none"> Read the answer options to the respondent. Circle all that apply. Probe if the respondent indicates not receiving any benefits, by reading the options, giving examples and explanations for clarification. Try to avoid "don't know". Clearly print any type of benefit that is not covered by the response categories in "f. Other, specify:".
Q1515	Have you worked at more than one job over the last 12 months?	This refers to any job or jobs that the respondent has in addition to their MAIN job described above. It could be regular or occasional/seasonal, full or part time.

2000 Health State Descriptions

Introduction This section asks questions about respondents' overall health. It covers all aspects of physical and mental health, including:

- mobility
 - self-care
 - pain and discomfort
 - cognition
 - interpersonal activities
 - sleep and energy
 - affect
 - vision
 - functioning assessment
 - vignettes for health state descriptions
-

General guidelines For each of these questions, the respondent will be asked to think of the last 30 days as opposed to any longer or shorter time frames.

The notion of difficulty is emphasized. "Difficulty" means increased effort, discomfort or pain, slowness or changes in the way a person carries out an activity. Respondents are asked to describe their condition rather than say how they feel about it. Respondents are asked to answer this question taking both good and bad days into account and give an average over the last 30 days.

These questions are to be answered by the respondent thinking of his / her capacity to carry out the task or action, irrespective of whether the respondent actually engaged in that task in the last 30 days or not.

Q2000- Q2001 The table below provides guidelines for completing questions Q2000 to Q2001 which relate to overall health.

Question No.	Question	Guide for completion
Q2000	In general, how would you <u>rate your health today</u> ?	<ul style="list-style-type: none">• Respondents should answer according to how she/he considers her/his health to be and give a best estimate.• Both physical, mental and emotional health must be taken into consideration.

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2000 Health State Descriptions, Continued

Question No.	Question	Guide for completion
Q2001	Overall in the last 30 days, how much difficulty did you have with <u>work or household activities</u> ?	<ul style="list-style-type: none"> • "Activities" include household, work and school activities. • "Difficulty" means having trouble with how these are usually performed. • This includes maintaining the household as well caring for family members or other people with whom one is close. • Activities include: physical, emotional, financial and/or psychological needs of the household/family. • The term "household" is very broad. In the case of respondents who do not have a stable dwelling place, there are still activities related to the upkeep and maintenance of their belongings. This question also refers to those activities.

Q2002- Q2003 Mobility The table below provides guidelines for completing questions Q2002 to Q2003 which relate to mobility.

Question No.	Question	Guide for completion
Q2002	Overall in the last 30 days how much difficulty did you have with <u>moving around</u> ?	<ul style="list-style-type: none"> • "Moving around" includes both inside (room to room, within rooms, between levels), and outside the dwelling. • Difficulties with day to day moving around could be because of physical or mental health reasons.
Q2003	Overall in the last 30 days, how much difficulty did you have in <u>vigorous activities</u> ?	<ul style="list-style-type: none"> • Activities are regarded as vigorous intensity if they cause a large increase in breathing and/or heart rate. • Vigorous activities may include heavy lifting, carrying, fast cycling, aerobic activity or working in the fields. • Physical activity may be recreational or occupational. • Use SHOWCARD if necessary.

Q2004- Q2006 Self-care The table below provides guidelines for completing questions Q2004 to Q2006 that relate to self care.

Question No.	Question	Guide for completion
Q2004	Overall in the last 30 days, how much difficulty did you have with <u>self-care</u> , such as bathing/washing or dressing yourself?	<ul style="list-style-type: none"> • This question refers to: <ul style="list-style-type: none"> – bathing/washing one's entire body as it is customary for the culture – all aspects of dressing the upper and lower body – activities such as getting clothing from storage areas (that is closet, dressers) and securing buttons, tying knots. • If the respondent has not washed in the past 30 days, ask whether this is due to a health condition. If yes, record '5' for extreme/cannot do. • If it is not due to a health condition, such as lack of water, ask whether s/he is capable/has difficulties if water is available.

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2000 Health State Descriptions, Continued

Q2004- Q2006 Self-care (continued)

Question No.	Question	Guide for completion
Q2005	In the last 30 days, how much difficulty did you have in <u>taking care of and maintaining your general appearance</u> (for example, grooming, looking neat and tidy)?	This question refers to people who may have no difficulty with the basics of washing and dressing, but who may have difficulty taking care of some other aspects of their appearance, such as combing hair, shaving facial hair or putting on makeup.
Q2006	In the last 30 days, how much difficulty did you have in <u>staying by yourself</u> for a few days (3 to 7 days)?	The intent of this question is to determine the level of independence and the need for supervision or assistance on a day to day basis. The person should recognize that there would be problems if he or she stayed by him/herself.

Q2007- Q2009 Pain and discomfort The table below provides guidelines for completing questions Q2007 to Q2009 that relate to pain and discomfort.

Question No.	Question	Guide for completion
Q2007	Overall in the last 30 days, how much of <u>bodily aches or pains</u> did you have?	"Bodily aches or pains" refer to any form of physical pain or discomfort in the body that interferes with a person's usual activities, either for a short or long period of time.
Q2008	In the last 30 days, how much <u>bodily discomfort</u> did you have?	"Bodily discomfort" refers to general uneasiness in the body, at a level less than actual pain or soreness.
If Q2007 AND Q2008 are 'None', skip to Q2010. If the respondent is having bodily aches, pains or discomfort, answer Q2009.		
Q2009	In the last 30 days, how much <u>difficulty</u> did you have in your daily life because of your <u>aches, pain or discomfort</u> ?	Determine if the pain has an impact on the person's day to day life - meaning that the pain interferes with conducting daily activities.

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2000 Health State Descriptions, Continued

Q2010- Q2011 The table below provides guidelines for completing questions Q2010 to
Cognition Q2011 that relate to cognition, such as memory, concentration and learning.

Question No.	Question	Guide for completion
Q2010	Overall in the last 30 days, how much difficulty did you have with <u>concentrating</u> or <u>remembering things</u> ?	<ul style="list-style-type: none"> • "Concentrating" refers to concentrating in usual circumstances (such as 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), 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, completing household chores, working, doing the shopping, paying the bills or having appointments.
Q2011	In the last 30 days, how much difficulty did you have in <u>learning a new task</u> (for example, learning how to get to a new place, ... etc.)?	<ul style="list-style-type: none"> • The intention of this question is to understand the difficulties the respondent has in learning new things. • Though one is not consciously aware perhaps, one learns new things almost everyday such as new names, routes and skills. Use examples that fit the situation and country/culture. • Respondent can also think about a situation in the past month where learning something new was required, such as: a task at work (such as a new procedure or assignment), or a new activity (cooking, learning a language, a new song or game). • When making the rating, respondent should consider how easily new information was acquired, how much assistance or repetition they needed in order to learn and how well what was learned, was retained.

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2000 Health State Descriptions, Continued

Q2012- Q2015 Interpersonal activities

The table below provides guidelines for completing questions Q2012 to Q2015 that relate to interpersonal activities. These questions assess "getting along with people" and difficulties that might be encountered with these activities due to a health condition. If the respondent has problems getting along with people, chances are that he/she will have difficulties maintaining friends and having more intimate relationships.

Question No.	Question	Guide for completion
Q2012	Overall in the last 30 days, how much difficulty did you have with <u>personal relationships or participation in the community</u> ?	<ul style="list-style-type: none"> • "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 cultural, administrative, leisure or sporting activities (for example) in the town, neighbourhood or community. • Determine if the respondent can participate in these activities or whether there are limitations due to the respondent's health condition.
Q2013	In the last 30 days, how much difficulty did you have in <u>dealing with conflicts and tensions</u> with others?	"Dealing with conflicts and tensions with others" refers to how well the respondent relates to others and is able to deal with conflict situations, such as strong disagreements or arguments.
Q2014	In the last 30 days, how much difficulty did you have with <u>making new friendships or maintaining current friendships</u> ?	<p>This includes:</p> <ul style="list-style-type: none"> • staying in touch • interacting with friends in customary ways • initiating activities with friends • participating in activities when invited <p>If respondents report that they have not engaged in maintaining a friendship 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.</p>
Q2015	In the last 30 days, how much difficulty did you have with <u>dealing with strangers</u> ?	This question asks about the respondent's ability to get along with people whom the respondent does not know at all (strangers).

Q2016- Q2017 Sleep and energy

The table below provides guidelines for completing questions Q2016 to Q2017 that relate to sleep and energy.

Question No.	Question	Guide for completion
Q2016	Overall in the last 30 days, how much of a problem did you have with <u>sleeping</u> ?	"Problem sleeping" here refers to inability to sleep or problems with sleeping too little or too much.
Q2017	In the last 30 days, how much of a problem did you have due to not <u>feeling rested and refreshed</u> during the day?	"Problem" here refers to a reduced level of energy and vitality and how it affects daily life.

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2000 Health State Descriptions, Continued

Q2018- Q2019 Affect The table below provides guidelines for completing questions Q2018 to Q2019 that relate to feeling low, sad or worried.

Question No.	Question	Guide for completion
Q2018	Overall in the last 30 days, how much of a problem did you have with <u>feeling sad, low or depressed</u> ?	<ul style="list-style-type: none"> • Each country and culture will have culturally equivalent terms for "feeling sad, low or depressed" that make sense to the respondent. • "Problem" refers to how severe these feelings of sadness have been. • "Sad, low, depressed" could be characterized by a feeling or spell of dismally low spirits: blues, dejection, depression, despondence, doldrums, downheartedness, dumps, dysphoria, funk, gloom, glumness, heavy-heartedness, melancholy, miserable, mournfulness, unhappiness.
Q2019	In the last 30 days, how much of a problem did you have with <u>worry or anxiety</u> ?	<ul style="list-style-type: none"> • "Worry or anxiety" means a respondent feels uneasy or concerned about something - is troubled. It could be feelings of uneasiness and apprehension, as about future uncertainties. • Determine any other negative emotional states such as feeling 'keyed up', 'stressed', 'on edge', and tense. May cause respondent to be unable to relax.

Q2020- Q2024 Vision The table below provides guidelines for completing questions Q2020 to Q2024 that relate to vision.

Question No.	Question	Guide for completion
Q2020	When was the last time you had your <u>eyes</u> examined by a medical professional?	<ul style="list-style-type: none"> • Ask how long ago the respondent had an eye exam by a medical professional. • Record the duration using the response categories provided.
Q2021	Do you wear eyeglasses or contact lenses to see <u>far away</u> (for example, across the street)?	Determine if the respondent uses any assistive devices such as spectacles/glasses or contact lenses. This would be a distance of about 20 meters or more.

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2000 Health State Descriptions, Continued

Vision (continued)

Question No.	Question	Guide for completion
Q2022	Do you wear eyeglasses or contact lenses to see <u>up close</u> (for example, at arms length, when you are reading)?	Determine if the respondent uses any assistive devices such as spectacles/glasses or contact lenses. This would be at a distance of a maximum of arm's length away from the eyes.
Q2023	In the last 30 days, how much difficulty did you have in seeing and recognizing an object or person you know <u>across the road</u> (...about 20 meters)?	“Seeing and recognizing a person” means under normal circumstances. One would not be expected to recognize a person on a foggy or stormy day for example. If the respondent usually uses glasses or contact lenses, the question should include these.
Q2024	In the last 30 days, how much difficulty did you have in seeing and recognizing <u>an object at arm's length</u> (for example, reading)?	<ul style="list-style-type: none"> • Consider vision under normal circumstances for example in normal light. • If the respondent usually uses glasses or contact lenses, the question should include these.

Q2025- Q2049 Functioning assessment

Questions Q2025 to Q2049 relate to difficulties due to health conditions. These questions ask about difficulty in day-to-day activities because of the person's physical, mental and emotional health. These activities are those that people do on most days and include tasks that range from relatively simple ones, such as bending and eating, to complex ones such as taking care of household responsibilities and participating in community activities. The questions may sound similar to the ones asked earlier but encourage the respondent to answer again nonetheless.

These questions are to be answered using a 5-point scale. Read choices to respondent - and use the SHOWCARD with response categories if necessary. If the person did not experience this situation in the past 30 days, 'NA' will be recorded.

Interviewers may remind respondents that they are to report difficulties due to the health condition, not difficulties that may be experienced for other reasons such as not having enough time (unless this reason is somehow linked back to a health condition) or being disorganized.

Continued on next page

2000 Health State Descriptions, Continued

Q2025- Q2049 Examples

Functioning assessment. Detailed below are some specific examples or clarifications to the following questions:

Question No.	Examples or clarifications
Q2025	Long periods of sitting could be 2 hours or longer.
Q2028	Long periods of standing could be 30 minutes or longer.
Q2032	In some cultures, males may indicate that they do not have household responsibilities. In this situation, it should be clarified that household responsibilities include (add country-specific as needed): <ul style="list-style-type: none"> managing finances; repairing vehicles or home; caring for the outside area of the home; doing household chores (for example, cooking or cleaning); picking up children from school; helping with homework; and, disciplining children.
Q2033	Examples of community activities include attending town meetings, fairs, leisure or sporting activities in the town, neighbourhood or community. The intent of this question is to find out whether society facilitates or inhibits participation in these activities. If confused by the phrase “in the same way as anyone else can”, they should be asked to use their best judgement to assess the extent to which average people in their community are able to join community activities, and then to compare their degree of difficulty in joining community activities in relation to this assessment. If a person does not usually join in community activities “N/A” will be recorded.
Q2039	Examples of day to day work may be getting the work done, planning, organizing, doing tasks efficiently, performing in a way that is expected.
Q2040	This might include carrying food, water or children, or lifting and carrying things as part of work-related activities. This would be difficulty with carrying items beyond what the respondent "usually" is able to carry.

Q2101 - Q2120 Vignettes

Questions Q2101 - Q2120 include brief stories (vignettes) that describe a certain state of health. Explain to the respondent that this section includes stories about other people who are the respondent's age and have a similar background. The respondent will need to listen carefully and concentrate. These stories can be very mentally challenging for some respondents - so shifting the respondent's mindset is very important to ensure accurate responses.

One respondent will respond to only one set of vignettes. The 4 separate sets of vignettes are as follows:

- Set A is mobility and affect;
- Set B is pain and personal relationships;
- Set C is vision, sleep and energy; and,
- Set D is cognition and self-care.

Each individual questionnaire includes only one set of vignettes. Each set includes 10 vignettes. Ask the respondent 2 questions about each story (vignette).

Continued on next page

2000 Health State Descriptions, Continued

Vignettes: Guidelines for completion

Some guidelines for completing the vignette questions are listed below.

- In all vignettes use the country-specific female/male first names to match the sex of the respondent. Wherever a name is in brackets, [*Vladimir*] in the example below, the interviewer would select a name appropriate to the country. "Vladimir" might be appropriate for Russia, but perhaps changed to "Sanjay" in India, or "Jose" in Mexico. Do not use the person's own name.
- Make sure the sex of the person in the story remains the same even if names change.
- Introduce the vignettes to the respondent and read them slowly and clearly. Allow the respondent enough time to ask questions or get clarifications.
- Ask the respondent to describe how much of a problem or difficulty the person in the vignette has - the same way that they described their own health to you in the previous set of questions.
- If the respondent does not understand, rephrase - saying, "the following includes a number of stories about other people, about the same age and with the same background as you. I'll read you the story, then ask you questions about the health of that person. Let's try again."
- If the respondent does not understand, rephrase - saying, "You could also try thinking of that person as yourself. Answer these questions by imagining yourself to be that person. Let's try again."

Example Vignette 1

- The health domain in this example is hearing. The vignette story is read, followed by the two questions below, before moving onto the next vignette.

"[*Vladimir*] has no problems hearing someone on a one-to-one conversation if the room is quiet. If he is in a room with several people who are talking at the same time he cannot make out what they are saying and has to repeatedly ask for clarifications."

Question No.	Example question	Guide for completion
Q2xxx	How much difficulty did [<i>Vladimir</i>] have hearing someone talking in a normal voice from across the room?	<ul style="list-style-type: none">• Read the question, then provide the response categories, "Was it none, mild, moderate, severe or extreme or cannot do this?"• Use the SHOWCARD in the Appendix.
Q2xxx	How much difficulty did [<i>Vladimir</i>] have hearing what is said <u>in a conversation with some background noise</u> ?	After reading a few of the stories, and it is clear the respondent understands, it may not be necessary to read the response categories every time.

2500 Anthropometrics, Performance Tests and Biomarkers

Introduction The questions in this section cover the following physical measurements and tests:

- blood pressure and pulse
 - height and weight
 - waist and hip circumference
 - timed walk
 - vision
 - grip strength
 - immediate and delayed verbal recall
 - digit span forward and backward
 - verbal fluency
 - lung function
 - blood tests.
-

Privacy Where possible, all physical measurements should be conducted in a private area. Where this may be difficult in some settings, at a minimum, privacy should be provided with screens for waist and hip circumference measurements.

In some settings, a separate room in the household may be set up with the necessary equipment to take each measurement. Where this is not possible, a separate area should be screened off.

Allow the respondent to select the degree of privacy – some may be concerned about going behind a screen or out of sight of others with people they do not know.

How to take measurements and tests For detailed instructions on how take these tests and use the specific measuring devices, please refer to Part 4: Guide to Taking Health Measurements and Tests.

Q2501 - Q2505 Blood pressure and pulse Questions Q2501 to Q2505 relate to measuring blood pressure and pulse rates. Blood pressure and pulse are to be measured with an automatic measuring device that fits onto the respondent's wrist. Follow the steps on page 46 to take blood pressure and pulse rate measurements.

Note: After Q2505, there is a 'Filter' question. If the answer is 'No', then skip the height, weight and walking tests and go to the vision tests in Q2514.

Continued on next page

2500 Anthropometrics, Performance Tests and Biomarkers, Continued

Q2506 - Q2507 **Height and** **weight**

Questions Q2506 to Q2507 relate to height and weight measurements.

Height and weight are used to calculate Body Mass Index (BMI). Body mass index, or BMI, uses a mathematical formula that takes into account both a person's height and weight. Follow the steps on page 48 to take height and weight measurements.

Q2508 - Q2509 **Waist and hip** **circumference**

Questions Q2508 to Q2509 relate to waist and hip circumference measurements.

These measurements should be taken without clothing, that is, directly over the skin. If this is not possible, the measurements may be taken over light clothing. They must not be taken over thick or bulky clothing. This type of clothing must be removed. Follow the steps on page 50 to take waist and hip circumference measurements. These measurement should be taken:

- with the arms relaxed at the sides; and,
 - in centimetres.
-

Q2510 - Q2513 **Timed walk**

Questions Q2510 to Q2513 relate to timed walk.

Measure out a 4 metre surface that is safe, flat and free of any obstructions. Make sure the person is comfortable walking this distance without risking a fall. Follow the steps on page 51 to time normal and rapid walks.

Question No.	Question	Guide for completion
Q2510	Did the respondent complete the walk at usual pace?	<ul style="list-style-type: none">• This walk is meant to be at <u>normal</u> pace• Ask the respondent to walk up and down the marked distance once - to give you a sense of the normal pace.
Q2511	(Normal walk) time at 4 metres	<ul style="list-style-type: none">• Start timing when you say "Begin" and end timing when the person first crosses the end point.• Make sure the person walks through the endpoint - and stops after the line.
Q2512	Did the respondent complete the walk at rapid pace?	<ul style="list-style-type: none">• This walk is meant to be at <u>rapid</u> pace.• Ask the respondent to complete the course as fast as they can comfortably and safely.
Q2513	(Rapid walk) time at 4 metres	<ul style="list-style-type: none">• Start timing when you say "Begin" and end time when the person first crosses the end point.• Make sure the person walks through the endpoint - and stops after the line.

Continued on next page

2500 Anthropometrics, Performance Tests and Biomarkers, Continued

Q2514 - Q2517 Vision	<p>Questions Q2514 to Q2517 relate to a vision test. Both distance and near vision are tested using standard vision charts.</p> <p>Follow the steps on page 54 to set up and conduct the vision tests.</p>
Q2518 - Q2524 Grip strength	<p>Use the dynamometer to assess strength in the hands for questions Q2518 to Q2524.</p> <p>Have the respondent sit, with elbow against body and lower part of the arm directly out (perpendicular to the body), hand facing up. It is very important that the person have the upper arm and elbow against the body. Follow the steps on page 55 to take grip strength measurements.</p>
Q2525 - Q2533 Verbal recall	<p>Explain that you will read a list of 10 words and ask the respondent to repeat as many as they can. Follow the steps on page 56 to conduct verbal recall tests.</p>
Q2534 - Q2535 Digit span (forward and backwards)	<p>You have been provided with a series of numbers, starting with three digits, up to nine digits for forward span and starting with two digits up to eight for backwards span. Follow the steps on page 57 to conduct digit span tests.</p>
Q2536 - Q2537 Verbal fluency	<p>Ask the respondent to name as many animals (not insects) as possible in one minute. Follow the steps on page 57 to conduct verbal fluency tests.</p> <ul style="list-style-type: none">• Use your stop watch for timing.• If no response after 15 seconds, encourage the respondent to continue up through the full one minute.
Q2538 - Q2543 Lung function	<p>This part of the assessment will provide an indication of the lung function for the person. Follow the steps on page 60 to take the lung function reading.</p>
Q2544 - Q2546 Delayed verbal recall	<p>These questions test the person's longer-term memory. Follow the steps on page 62 to record delayed verbal recall results.</p>
Q2547 - Q2548 Blood tests	<p>These questions ask the respondent to give a small blood sample. Follow the steps on page 63 to get the respondent's consent and take the blood sample.</p>

3000 Risk Factors and Preventive Health Behaviours

Introduction

This section on risk factors and preventive health behaviours relate to some aspects of how we live on a daily basis. In particular, they are designed to record details about:

- tobacco use
- alcohol consumption
- nutrition, and
- physical activity

Q3001- Q3006a Tobacco use

These questions ask about current use of any tobacco products, including inhaling, sniffing, chewing, etc., as well as duration and quantity of daily smoking or use. The questions are based on the WHO definition (*“Guidelines for controlling and monitoring the tobacco epidemic”*). There is provision for collection of information on other forms of smoking, apart from cigarettes, such as cigars, pipes, snuff or chewed tobacco.

For a complete list of tobacco products see “Tobacco list” SHOWCARD provided in Part 9.

The table below provides guidelines for completing questions Q3001 - Q3006a.

Question No.	Question	Guide for completion
Q3001	Have you ever smoked tobacco or used smokeless tobacco?	<ul style="list-style-type: none">• Determine if the respondent has ever used tobacco – smoked or smokeless.• If 'No', skip to Q3007.
Q3002	Do you <u>currently use</u> (smoke, sniff or chew) any tobacco products such as cigarettes, cigars, pipes, chewing tobacco or snuff?	<ul style="list-style-type: none">• Determine if the respondent is currently smoking daily. Think of any tobacco products the respondent is smoking and/or using currently - use the SHOWCARD to help.• If '2 Yes, but not daily' or '3 No, not at all', go to question Q3005 - and ask if they had smoked/used tobacco in the past or when they stopped using daily.
Q3003	For <u>how long</u> have you been smoking or using tobacco daily?	<ul style="list-style-type: none">• Record the number of years and/or months they have been smoking or using any tobacco products daily up to now.• If less than one month, enter “00”.
Q3004	On average, <u>how many</u> of the following products do you smoke or use <u>each day</u> ?	Ask the respondent to specify the average number of each tobacco product she/he uses each day (use the SHOWCARD).

Continued on next page

3000 Risk Factors and Preventive Health Behaviours, Continued

Tobacco use (continued)

Question No.	Question	Guide for completion
Q3005	In the past, did you ever smoke tobacco or use smokeless tobacco daily?	<ul style="list-style-type: none"> For respondents who respond '1 Yes' to Q3001 <u>and</u> '1 Yes, daily' to Q3002, ask if they have ever used tobacco daily. If 'Yes', continue. If 'No', skip to Q3007.
Q3006	If 3005 'Yes', How old were you when you stopped smoking or using tobacco daily?	<ul style="list-style-type: none"> Record age and skip to Q3007. If the respondent cannot remember, go to Q3006a.
Q3006a	How long ago did you stop smoking or using tobacco daily?	<ul style="list-style-type: none"> If the respondent cannot remember the age they were when they stopped using tobacco daily, ask how many years and/or months it has been since they stopped smoking or using any tobacco products daily. If less than one month, enter "00".

Q3007- Q3011 Alcohol These questions relate to the consumption of alcohol. See the "Alcohol Card" provided in the SAGE Appendices for examples of a standard drink. The table below provides guidelines for completing questions Q3007 to Q3011.

Question No.	Question	Guide for completion
Q3007	Have you ever consumed a drink that contains alcohol (such as beer, wine, etc.)?	<ul style="list-style-type: none"> Use the Alcohol card to show examples of different sorts of available alcohol. If the answer is '2 No, Never', skip to Q3012.
Q3008	Have you consumed alcohol in the last 30 days?	If 'No', skip to Q3010.
Q3009a-g	During the <u>past 7 days</u> , <u>how many</u> standard drinks of any alcoholic beverage did you have <u>each day</u> ?	<ul style="list-style-type: none"> Think of the past week, only. Use the Alcohol card to show examples of different "standard drinks".
Q3010	In the <u>last 12 months</u> , how frequently [on how many days] on average have you had at least one alcoholic drink?	<ul style="list-style-type: none"> Allow the respondent to provide an answer without reading the categories. If they cannot answer, help by reading the categories.
Q3011	In the <u>last 12 months</u> , on the days you drank alcoholic beverages, how many drinks did you have on average?	Record the number of drinks.

Continued on next page

3000 Risk Factors and Preventive Health Behaviours, Continued

Q3012- Q3015 Nutrition These questions relate to how much fruit and vegetables are consumed in a typical 24-hour period.

The focus is on food availability and access. "Availability" means sufficient quantities of necessary types of food, and "access" means that incomes are adequate to purchase or barter for appropriate foods in sufficient quantity.

See the "Nutrition SHOWCARD" provided in SAGE Appendices for examples of typical fruit and vegetables. The table below provides guidelines for completing questions Q3012 - Q3015.

Question No.	Question	Guide for completion
Q3012	How many servings of <u>fruit</u> do you eat on a typical day?	<ul style="list-style-type: none">• Use the Nutrition SHOWCARD as a guide.• "Typical day" means on a typical day when the respondent is eating fruit and not the average over the period of enquiry.
Q3013	How many servings of <u>vegetables</u> do you eat on a typical day?	<ul style="list-style-type: none">• Use the Nutrition SHOWCARD as a guide.• "Typical day" means on a typical day when the respondent is eating vegetables and not the average over the period of enquiry.
Q3014	In the <u>last 12 months</u> , how often did you eat less than you felt you should because there wasn't enough food?	Circle the appropriate response from the list of options provided.
Q3015	In the <u>last 12 months</u> , were you ever hungry, but didn't eat because you couldn't afford enough food?	<ul style="list-style-type: none">• Determine how often the respondent is left feeling hungry because the respondent or the household cannot afford to buy food.• Circle the appropriate response from the list of options provided.

Physical activity

The physical activity questions assesses the frequency of activity (days) and duration (minutes and/or hours) over the preceding seven days spent in vigorous-intensity and moderate-intensity activities, and walking.

- All the questions specify that individual periods of physical activity must last for at least ten minutes.
- Walking is asked separate from other moderate-intensity activities because it is an important and common activity in many cultures.
- Vigorous-intensity and moderate-intensity activities are defined by reference to their effect on breathing and heart rate. Current scientific evidence shows that physiological changes associated with health benefits from physical activity require a minimum duration.

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3000 Risk Factors and Preventive Health Behaviours, Continued

Q3016- Q3031 See the “Physical activity SHOWCARD” provided in the SAGE Appendices for examples of different intensity physical activities. Examples of the intensity of over 600 categories of activities can be found in the ‘Compendium of physical activities: an update of activity codes and MET intensities.’¹

Q3016 - Q3021 The table below provides guidelines for completing questions Q3016 to Q3021 that relate to physical activities at work.

Question No.	Question	Guide for completion
Q3016	Does your work involve <u>vigorous- intensity</u> activity, that causes large increases in breathing or heart rate, [like heavy lifting, digging or chopping wood] for at least 10 minutes continuously?	<ul style="list-style-type: none"> • Determine activities undertaken in a "typical week" for example, the 7 days preceding the interview. • If respondents are unclear as to what is meant by “vigorous” read the following definition, “<i>vigorous</i> activities take <i>hard physical effort</i>, make you breathe much harder than normal or cause your heart to beat much faster”. • If the answer is 'No', skip to Q3019. • Use SHOWCARD to illustrate examples.
Q3017	In a typical week, on how many days do you do <u>vigorous- intensity</u> activities as part of your work?	<ul style="list-style-type: none"> • Response range is 1-7 days per week.
Q3018	How much time do you spend doing <u>vigorous- intensity activities</u> at work on a typical day?	<ul style="list-style-type: none"> • Ask the respondent to think of one of those days in which they did vigorous activity (for at least 10 minutes) during the last 7 days and give an estimate of the total time they spent doing these activities on that day. • The maximum hours in a day are 24 and the maximum minutes in a day are 1440. • Check for any implausible responses. • If the respondent says each day was very different, ask them to estimate the usual or average time spent doing vigorous activities on a typical day. • Record the actual response provided by the respondent. For example, “120 minutes” or “2 hours” is recorded as '02:00'. A response of “15 minutes” is recorded as '00.15' and “one and a half hours” should be recorded as '01.30'.

Continued on next page

¹ Ainsworth AE. et al., *Medicine & Science in Sports & Exercise* 2000; 32(9 Suppl):S498-S504. METs is a term that represents the metabolic intensity of an activity. Moderate activities are 3-6 METs, vigorous activities are greater than 6 METs.

3000 Risk Factors and Preventive Health Behaviours, Continued

Q3016 - Q3021 (continued)

Question No.	Question	Guide for completion
Q3019	Does your work involve <u>moderate-intensity</u> activity, that causes small increases in breathing or heart rate, for at least 10 minutes continuously?	<ul style="list-style-type: none"> • Determine moderate activities [such as brisk walking or carrying light loads, cleaning, cooking, washing clothes] undertaken in a typical week. • If 'No', skip to Q3022.
Q3020	In a typical week, on how many days do you do <u>moderate-intensity activities</u> as part of your work?	<ul style="list-style-type: none"> • Response range is 1-7 days per week.
Q3021	How much time do you spend doing <u>moderate-intensity activities</u> at work on a typical day?	<ul style="list-style-type: none"> • Ask the respondent to think of one of those days in a typical week in which they did moderate activity (for at least 10 minutes) and give an estimate of the total time they spent doing these activities on that day. • The maximum hours in a day are 24 and the maximum minutes in a day are 1440. • Check for any implausible responses. • If the respondent says each day was very different, ask them to estimate the usual or average time spent doing vigorous activities on a day. • Record the actual response provided by the respondent. For example, "120 minutes" or "2 hours" is recorded as '02:00'. A response of "15 minutes" is recorded as '00.15' and "one and a half hours" should be recorded as '01.30'.

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3000 Risk Factors and Preventive Health Behaviours, Continued

Q3022 - Q3024 Questions Q3022 to Q3024 exclude the physical activities at work that the respondent has already mentioned and focus on the usual way they travel to and from places. For example, travel to work, to shop, to market, to place of worship.

Question No.	Question	Guide for completion
Q3022	Do you walk or use a bicycle (pedal cycle) for at least 10 minutes continuously to get to and from places?	<ul style="list-style-type: none"> • The respondent should think of how much walking or bicycling he/she did in a typical week. • Consider walking/bicycling: <ul style="list-style-type: none"> – undertaken at work and at home; – to travel from place to place; or, – done for recreation. • If the answer is 'No', skip to Q3025.
Q3023	In a typical week, on how many days do you walk or bicycle for at least 10 minutes continuously to get to and from places?	<ul style="list-style-type: none"> • Response range is 1-7 days per week.
Q3024	How much time would you spend walking or bicycling for travel on a typical day?	<ul style="list-style-type: none"> • Ask the respondent to think of one of those days in which they spent in transport activities (for at least 10 minutes) during the last 7 days and give an estimate of the total time they spent doing these activities on that day. • The maximum hours in a day are 24 and the maximum minutes in a day are 1440. • Check for any implausible responses. • If the respondent says each day was very different, ask them to estimate the usual or average time spent doing vigorous activities on a day. • Record the actual response provided by the respondent. For example, "120 minutes" or "2 hours" is recorded as '02:00'. A response of "15 minutes" is recorded as '00.15' and "one and a half hours" should be recorded as '01.30'.

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3000 Risk Factors and Preventive Health Behaviours, Continued

Q3025 - Q3030 Questions Q3025 to Q3030 exclude the work and transport activities that the respondent has already mentioned and focus on sports, fitness and recreational activities.

Question No.	Question	Guide for completion
Q3025	Do you do any vigorous intensity sports, fitness or recreational (leisure) activities that cause large increases in breathing or heart rate?	<ul style="list-style-type: none"> • Use SHOWCARD. • If 'No', skip to Q3028.
Q3026	In a typical week, on how many days do you do vigorous intensity sports, fitness or recreational (leisure) activities?	<ul style="list-style-type: none"> • Response range is 1-7 days per week.
Q3027	How much time do you spend doing vigorous intensity sports, fitness or recreational activities on a typical day?	Ask the respondent to think of one of those days in which they spent in vigorous intensity sport, fitness or recreational activities (for at least 10 minutes) during a typical week and give an estimate of the total time they spent doing these activities on that day.
Q3028	Do you do any <u>moderate-intensity sports, fitness or recreational (leisure) activities</u> that causes a small increase in breathing or heart rate?	<ul style="list-style-type: none"> • Use SHOWCARD. • If 'No', skip to Q3031.
Q3029	In a typical week, on how many days do you do moderate-intensity sports, fitness or recreational (leisure) activities?	<ul style="list-style-type: none"> • Response range is 1-7 days per week. • If the answer is "zero" or "none", enter '0' and go to Q3031.
Q3030	How much time do you spend doing moderate intensity sports, fitness or recreational (leisure) activities on a typical day?	Ask the respondent to think of one of those days in which they spent in moderate intensity sport, fitness or recreational activities (for at least 10 minutes) during a typical week and give an estimate of the total time they spent doing these activities on that day.

Q3031	<p>Question Q3031 is about sitting or reclining:</p> <ul style="list-style-type: none"> • at work or home (sitting at a desk, reading, playing cards, watching television, etc.); • while travelling in car, bus, train... (getting to and from places); and, • with friends. <p>Note: Do not include time spent sleeping. Ask the respondent to think of one of those days in which they spent in sitting or reclining (for at least 10 minutes) during the past 7 days and give an estimate of the total time they spent doing these activities on that day.</p>
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4000 Chronic Conditions and Health Services Coverage

Introduction This section asks questions about the presence of health conditions or diseases as reported by the respondent. The questions are about diagnosed and treated conditions, plus common symptoms for these conditions. The list includes a number of chronic health and mental health conditions:

- arthritis (a joint disease)
- stroke (brain injury)
- angina (chest pain)
- diabetes (elevated blood sugar)
- chronic lung disease (like COPD, emphysema, bronchitis)
- asthma (reactive lung disease)
- depression (mood disorder)
- hypertension (elevated blood pressure)
- cataracts (eye condition)
- oral health (teeth, mouth and swallowing)
- injuries
- cancer screening (women only)

Purpose The purpose of this section is to determine the number of individuals with chronic conditions who are in need of certain health interventions and how many of these people actually receive the appropriate intervention. The criteria for being considered in need of given health care interventions fall into two categories:

- The whole population is in need, so questions would be asked to all respondents.
- Only respondents of one sex are in need, so questions would be asked only of respondents who are either male or female.

Skip patterns 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.

Q4001- Q4009 Arthritis The table below provides guidelines for completing questions Q4001 to Q4009 that relate to arthritis (a disease of the joints). "Arthritis" is a disease of joints (for example, fingers/wrists, knees, hips, lower back). Common symptoms are swelling, stiffness, redness, heat and/or pain.

Question No.	Question	Guide for completion
Q4001	Have you ever been diagnosed with/told you have <u>arthritis</u> (or by other names rheumatism or osteoarthritis)?	<ul style="list-style-type: none">• The respondent does not need to remember the exact type of arthritis that was diagnosed.• Probe if the respondent is unsure; indicate that it is a disease of the joints) and mention the common symptoms.• If the respondent answers 'No', skip to questions Q4003.

Continued on next page

4000 Chronic Conditions and Health Services Coverage, Continued

Arthritis (continued)

Question No.	Question	Guide for completion
Q4002a	Have you been taking any <u>medications or other treatment</u> for it during the last 2 weeks?	<ul style="list-style-type: none"> • Only ask this question if the respondent answered 'Yes' to question Q4001. • This question aims to separate individuals who are under current treatment for a condition from those who are either not on current treatment or not being treated. • A 'Yes' here is appropriate only if the respondent was taking medications for arthritis at any time during the last 2 weeks and not if the person says he or she usually takes medications but for some reason did not during the given period. • "Treatment" could include prescribed rest or exercise regimens, diet changes, heat or cold packs, topical creams for example.
Q4002a	Have you been taking any <u>medications or other treatment</u> for it during the last 12 months?	<ul style="list-style-type: none"> • The time frame for this question is specified as treatment in the last 12 months. • A 'Yes' is appropriate only if the respondent was taking medications for arthritis at any time during the last 12 months. It may be that the person did not take medications for some reason in the last 2 weeks, but usually does take medication/treatment for arthritis and took that medication or treatment in the last 12 months.
Q4003	During the last 12 months, have you experienced pain, aching, stiffness, swelling in or around the joints...?	<ul style="list-style-type: none"> • Read the list of symptoms and determine if the respondent had any of those symptoms in the last 12 months. • Emphasize the 12 month period. • It is possible that the same symptoms, but of a transitory character, may be caused by an injury. • 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.
Q4004	During the last 12 months have you experienced stiffness in the joint in the morning after getting up from bed or after a long rest of the joint without movement?	<ul style="list-style-type: none"> • 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 'Yes', continue to Q4005 and Q4006 to ask about the stiffness. • If 'No', that is the respondent does not have stiffness, skip to Q4007.
SKIP		If Q4003 and Q4004 are both 'No', skip to Q4008.

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4000 Chronic Conditions and Health Services Coverage, Continued

Arthritis (continued)

Question No.	Question	Guide for completion
Q4005	How long did this stiffness last?	<ul style="list-style-type: none"> • This question is only asked to respondents who answered 'Yes' to Q4004. • 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.
Q4006	Did this stiffness go away after exercise or movement in the joint?	<ul style="list-style-type: none"> • This question is only asked to respondents who answered 'Yes' to Q4004. • The purpose is to differentiate stiffness from osteoarthritis from other types of stiffness. • 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 respondent seems unsure, or replies that they do not exercise, clarify that this refers to any kind of everyday physical activity.
Q4007	These symptoms that you have said you experienced in the last 12 months, have you experienced them in the last 2 weeks?	<ul style="list-style-type: none"> • If Q4003 or Q4004 is 'Yes', answer this question. • This question is to determine if these symptoms have appeared recently and/or are currently experienced by the respondent.
Q4008	Have you experienced <u>back pain</u> during <u>the last 30 days</u> ?	<ul style="list-style-type: none"> • Determine if the respondent has 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. • If 'No', skip to Q4010.
Q4009	On how many days did you have this back pain <u>during the last 30 days</u> ?	<ul style="list-style-type: none"> • Only ask this question to respondents who reported having back pain in the last 30 days ('Yes' to Q4008). • Distinguish back pain caused by a mild temporary problem, such as muscle strain, from a more serious problem related to a disease of the spine. • 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).

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Q4010- Q4013 Stroke The table below provides guidelines for completing questions Q4010 to Q4013 that relate to stroke. Strokes are caused by disruption of the blood supply to the brain. This may result from either blockage (ischaemic stroke) or rupture of a blood vessel (haemorrhagic stroke).

Question No.	Question	Guide for completion
Q4010	Have you ever been told by a health professional that you have had a stroke?	<ul style="list-style-type: none"> • If the respondent does not understand "stroke" explain that it is an injury to the brain – usually a sudden and severe attack. It can cause permanent or temporary paralysis (inability to move, usually down one side of the body) and loss of speech. • Probe if the respondent is unsure whether they have ever been afflicted with the condition. • If the respondent answers 'No', skip to Q4012.
Q4011a	Have you been taking any <u>medications or other treatment</u> for it during the last 2 weeks?	<ul style="list-style-type: none"> • Determine if the respondent is currently under treatment for stroke. • This question aims to separate individuals who are under current treatment for a condition from those who are either not on current treatment or not being treated. • A 'Yes' here is appropriate only if the respondent was taking medications for stroke at any time during the last 2 weeks and not if the person says he or she usually takes medications but for some reason did not during the given period..
Q4011b	Have you been taking any <u>medications or other treatment</u> for it during the last 12 months?	<ul style="list-style-type: none"> • A 'Yes' is appropriate only if the respondent was taking medications for stroke at any time during the last 12 months. • It may be that the person did not take medications for some reason in the last 2 weeks, but usually does, and took that medication or treatment in the last 12 months.
Q4012	Have you ever suffered from <u>sudden onset</u> of paralysis or weakness in your arms or legs on <u>one side</u> of your body for more than 24 hours?	<ul style="list-style-type: none"> • This question asks about possible symptoms of stroke. • Focus on the fact that it happened suddenly and lasted for more than 24 hours. • These symptoms may or may not have improved – and the person may have returned to normal.
Q4013	Have you ever had, for more than 24 hours, sudden onset of loss of feeling on one side of your body, without anything having happened?	<ul style="list-style-type: none"> • This question also asks about possible symptoms of stroke. • Focus on how sudden the loss of feeling occurred and if it was only on one side of the body.

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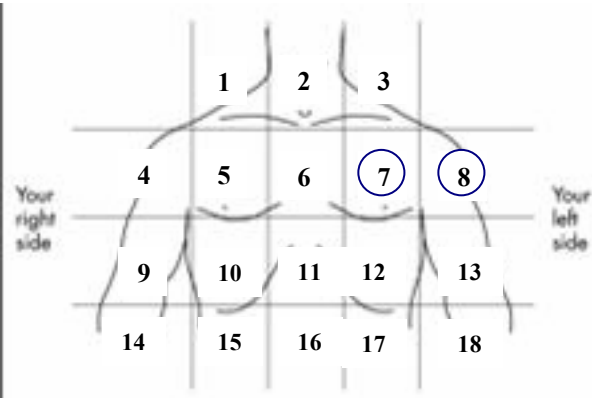
Q4014- Q4021 Angina The table below provides guidelines for completing questions Q4014 to Q4021 that relate to angina. Angina (angina pectoris or ischaemic heart disease) is a symptom indicating chronic heart disease. If the respondent does not understand the term “angina”, describe the condition as 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.

Question No.	Question	Guide for completion
Q4014	Have you ever been diagnosed with <u>angina</u> or <u>angina pectoris</u> (a heart disease)?	<ul style="list-style-type: none"> Identify individuals with a diagnosed case of <u>angina</u> (referring to chest pain). If 'No', skip to Q4016.
Q4015a	Have you been taking any <u>medications</u> or <u>other treatment</u> for it during the last 2 weeks?	<ul style="list-style-type: none"> Determine if the respondent is currently under treatment for angina. Medications often include a tablet that the respondent places under the tongue. A 'Yes' here is appropriate only if the respondent was taking medications for angina at any time during the last 2 weeks and not if the person says he or she usually takes medications but for some reason did not during the given period.
Q4015b	Have you been taking any <u>medications</u> or <u>other treatment</u> for it during the last 12 months?	<ul style="list-style-type: none"> The time frame for this question is specified as treatment in the last 12 months. A 'Yes' is appropriate only if the respondent was taking medications for angina at any time during the last 12 months.
Q4016	During the <u>last 12 months</u> , have you experienced <u>pain</u> or <u>discomfort</u> in your <u>chest</u> when you walk uphill or hurry?	<ul style="list-style-type: none"> Chest pain is the most frequent symptom of angina. It usually occurs during increased physical activity. Probe to capture all unpleasant sensations that the respondent may have (such as a sense of squeezing, squeezing pressure, tightness, ache or heaviness in the chest). Ensure the time period (in the last 12 months) is clearly understood.
Q4017	During the <u>last 12 months</u> , have you ever experienced <u>pain</u> or <u>discomfort</u> in your chest when you walk at an ordinary pace on level ground?	<ul style="list-style-type: none"> Some individuals who are suffering from angina may get chest pain not only during increased physical activity but also at rest or with mild physical activity (such as walking at an ordinary pace on level ground). If the respondent experiences no pain skip to Q4022.
Q4018	What do you do if you get the pain or discomfort when you are walking?	<ul style="list-style-type: none"> Only ask this question to respondents who answered 'Yes' to either Q4016 or Q4017 - reported experiencing chest pain in the last 12 months. Read the response options to the respondent and record the action taken most often.

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Angina (continued)

Question No.	Question	Guide for completion
Q4019	If you stand still, what happens to the pain or discomfort?	<ul style="list-style-type: none"> Determine what happens to the pain when the respondent reduces or stops physical activity. Read out the two response options. If the respondent says that the pain usually increases, record '2 Not relieved'.
Q4020	Will you show me where you usually experience the pain or discomfort?	<ul style="list-style-type: none"> To determine the location of the pain and whether it is specific to angina, ask the respondent to show where the pain occurs on the body.  <ul style="list-style-type: none"> Circle the number in all areas that the respondent mentions or shows. Pain in the upper left chest '7' and upper left arm '8' are circled here as an example.
Q4021	These symptoms .. have you experienced them in the last 2 weeks?	This question is to determine if these symptoms have appeared recently and/or are currently experienced by the respondent.

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4000 Chronic Conditions and Health Services Coverage, Continued

Q4022- Q4024 Diabetes The table below provides guidelines for completing questions Q4022 to Q4024 that relate to diabetes mellitus (high blood sugar levels).

Question No.	Question	Guide for completion
Q4022	Have you ever been diagnosed with <u>diabetes</u> (high blood sugar)?	<ul style="list-style-type: none"> • Identify individuals with a diagnosed case of <u>diabetes</u> (also called <u>diabetes mellitus</u> or “high blood sugar”). • If the respondent does not understand the term “diabetes”, describe the condition as a chronic (or long-term) condition whereby a person has problems producing insulin. Insulin helps to turn what we eat into the energy we need to survive and to maintain the correct levels of sugar in our blood. People with diabetes eventually develop a high blood sugar level, which can lead to problems with blood vessels, eyes, kidneys, nerves and heart.
Q4023a	Have you been taking insulin or other blood sugar lowering medications in the last 2 weeks?	<ul style="list-style-type: none"> • Determine if the respondent is currently under treatment for diabetes. This could include medications by mouth or injections (insulin) in the last 2 weeks. • A 'Yes' is appropriate only if the respondent was taking medications for diabetes at any time during the last 2 weeks and not if the person says he or she usually takes medications but for some reason did not during the given period.
Q4023b	Have you been taking any <u>medications</u> for it during the last 12 months?	<ul style="list-style-type: none"> • A 'Yes' is appropriate only if the respondent was taking medications for diabetes at any time during the last 12 months.
Q4024	Have you been following a special diet, exercise regime or weight control program for diabetes during the <u>last 2 weeks</u> ?	<ul style="list-style-type: none"> • Determine if the respondent is currently under treatment for diabetes other than taking medications, including weight loss, regular exercise, and special diet to reduce sugar and calorie intake. • Probe whether these measures are a form of treatment as specified by a health care provider.

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4000 Chronic Conditions and Health Services Coverage, Continued

Q4025- Q4032 Chronic lung disease

The table below provides guidelines for completing questions Q4025 to Q4032 that relate to chronic lung disease (long-term breathing problem).

- Chronic bronchitis is part of a breathing disease called COPD (Chronic Obstructive Pulmonary Disease). Bronchitis means swelling in your air passages that connect your windpipe (trachea) and lungs. This inflammation means the walls of your bronchi are swollen and filled with extra sticky mucus. Airflow into and out of your lungs is partly blocked because of the swelling and extra mucus.
- Emphysema is also part the lung disease called COPD. The place in your lungs where oxygen is exchanged is damaged - and usually means the person has shortness of breath and a barrel-shaped chest.

Question No.	Question	Guide for completion
Q4025	Have you ever been diagnosed with chronic lung disease (emphysema, bronchitis, COPD)?	<ul style="list-style-type: none"> • If the respondent does not understand the term “chronic lung disease”, describe it as problems with breathing - usually including cough and sputum production. • This does not include asthma - (see Q4033). • If 'No', skip to Q4027.
Q4026a	Have you been taking any medications or other treatment (like oxygen) for it during the <u>last 2 weeks</u> ?	<ul style="list-style-type: none"> • Determine if the respondent is currently under treatment for this kind of breathing problem. • A 'Yes' is appropriate only if the respondent was taking medications for chronic lung disease at any time during the last 2 weeks and not if the person says he or she usually takes medications but for some reason did not during the given period.
Q4026b	Have you been taking any medications or other treatment for it during the <u>last 12 months</u> ?	A 'Yes' is appropriate only if the respondent was taking medications for chronic lung disease at any time during the last 12 months.
Q4027	During the <u>last 12 months</u> , have you experienced any <u>shortness of breath</u> at rest? (while awake)	Determine if the respondent suffers from shortness of breath while NOT exerting himself/herself – this means the person has trouble breathing even when awake and not physically active.
Q4028	During the last 12 months, have you experienced any <u>coughing</u> or <u>wheezing</u> for <u>ten minutes or more at a time</u> ?	"Coughing " here means forceful or frequent coughing, usually accompanied by phlegm production. "Wheezing" - means a 'whistling' noise when breathing in or breathing out.

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4000 Chronic Conditions and Health Services Coverage, Continued

Chronic lung disease (continued)

Question No.	Question	Guide for completion
Q4029	During the last 12 months, have you experienced any <u>coughing up sputum or phlegm</u> for most days of the month for at least 3 months?	<ul style="list-style-type: none"> • Coughing up sputum or phlegm are symptoms usually seen in a person with chronic lung disease. • "Phlegm" means the substance spit out from a deep cough (or use another term in local colloquial language).
Q4030	These symptoms that you said you have experienced in the last 12 months, have you experienced them in the <u>last 2 weeks</u> ?	This question is to determine if these symptoms have appeared recently and/or are currently experienced by the respondent.
Q4031	In the <u>last 12 months</u> , have you had a tuberculosis (TB) <u>test</u> ?	<ul style="list-style-type: none"> • Tuberculosis is an infectious disease caused by a bacterium and it usually affects the lungs, but all other body organs can also be involved (such as the central nervous system, bones and joints). • Identify respondents that may have tuberculosis (TB) and whether respondents have had a TB test in the last 12 months. • Methods of detecting TB include examination of the sputum (that is, when a health care provider takes a sample of the substance spit out from a deep cough and sends it to a laboratory for analysis) or an X-ray picture of the chest.
Q4032a	Have you been taking any medications for it during the <u>last 2 weeks</u> ?	This is most often medications taken by mouth - usually with a system of someone watching (DOTS) to make sure you take the medications every day. This question is to determine if the respondent has taken medication at any time in the last 2 weeks.
Q4032b	Have you been taking any medications for it during the last 12 months?	This is most often medications taken by mouth - usually with a system of someone watching to make sure you take the medications every day over the last 12 months.
SKIP		If Q4029 is 'No', skip to Q4033. There is no need to answer Q4032c if the person does not have a cough that produces phlegm.
Q4032c	Have you had <u>blood</u> in your phlegm or have you <u>coughed blood</u> ?	Coughing blood, or having blood in the sputum or phlegm, is a symptom that is very common in tuberculosis.

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Q4033 - Q4039a Asthma

The table below provides guidelines for completing questions Q4033 to Q4039 that relate to asthma. Asthma is a disease characterized by recurrent attacks of breathlessness and wheezing, which vary in severity and frequency from person to person. In an individual, they may occur from hour to hour and day to day. This condition is due to inflammation of the air passages in the lungs and affects the sensitivity of the nerve endings in the airways so they become easily irritated. In an attack, the lining of the passages swell causing the airways to narrow and reducing the flow of air in and out of the lungs.

Question No.	Question	Guide for completion
Q4033	Have you ever been diagnosed with asthma?	<ul style="list-style-type: none"> Identify individuals with a diagnosed case of <u>asthma</u> (an allergic respiratory disease).
Q4034	Have you been taking any <u>medications</u> or <u>other treatment</u> for it in the <u>last 2 weeks</u> ?	<ul style="list-style-type: none"> Determine if the respondent has ever been treated for asthma. Treatment can include prescription medication (for example, an inhaler or tablets/pills by mouth), or in an emergency, the respondent might use an injection in the leg. 'Yes' is appropriate only if the respondent was taking any medications for asthma 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.
Q4034b	Have you been taking any medications or other treatment for it in the last 12 months?	<ul style="list-style-type: none"> 'Yes' is appropriate only if the respondent was taking medications for asthma at any time during the last 12 months.
Q4035	During the last 12 months, have you experience <u>wheezing</u> or <u>whistling</u> breathing?	"Wheezing" is a common symptom of asthma - difficulty breathing with a whistling or rattling or hissing sound as the person breathes out. This can last a few minutes or several hours.
Q4036	During the last 12 months, did you have an attack of wheezing that came on <u>after</u> you stopped exercising or some other physical activity?	<ul style="list-style-type: none"> This question helps 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.
Q4037	During the last 12 months, did you have a 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 or squeezed, as if they could not fit in the chest. Feeling of tightness in the chest could precede an asthmatic attack. The episode can last a few minutes or several hours.

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4000 Chronic Conditions and Health Services Coverage, Continued

Asthma (continued...)

Question No.	Question	Guide for completion
Q4038	During the last 12 months, have you woken up with a feeling of tightness in your chest in the morning or any other time?	See Q4037. The purpose of this question is to distinguish feeling of tightness in the chest caused by asthma from other types of health problems. 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.
Q4039	Have you had an attack of shortness of breath.....when you were not exercising or doing some physical activity?	<ul style="list-style-type: none"> • Distinguish shortness of breath caused by asthma from other health conditions. • Focus on whether shortness of breath occurred at rest, without any obvious cause or trigger.
SKIP		If no asthma symptoms ('No' to all Q4035 through Q4039), skip to Q4040.
Q4039a	These symptoms that you said you experienced in the last 12 months, have you experienced them in the last 2 weeks?	<ul style="list-style-type: none"> • Ask this question only if respondent answers 'Yes' to one of the symptom questions: Q4035, Q4036, Q4037, Q4038 or Q4039. • This question is to determine if these symptoms have appeared recently and/or are currently experienced by the respondent.

Q4040 - Q4059 Depression

The table below provides guidelines for completing questions Q4040 to Q4059 that relate to depression. "Depression" could be characterized by a feeling or spell of dimly low spirits: blues, dejection, despondence, doldrums, downheartedness, dumps, funk, gloom, glumness, heavy-heartedness, melancholy, miserable, mournfulness, unhappiness over a period of time (weeks, months or years).

Question No.	Question	Guide for completion
Q4040	Have you ever been diagnosed with depression?	<ul style="list-style-type: none"> • Identify individuals with a diagnosed case of <u>depression</u> (mood disorder). • Although depression is common, it often goes undetected because it may be attributed to a person's physical, social or economic difficulties. • Treatments for depression can include medication and talking to a therapist or other health care professional (counselling).

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Depression (continued)

Question No.	Question	Guide for completion
Q4041a	Have you been taking any medications or other treatment for it during the <u>last 2 weeks</u> ?	<ul style="list-style-type: none"> • Determine if the respondent is currently under treatment for depression. • A 'Yes' is appropriate only if the respondent was taking medications or received therapy for depression at any time during the last two weeks and not if the person says he or she usually takes medications or gets therapy but for some reason did not during the last 2 weeks.
Q4041b	Have you been taking any medications or other treatment for it during the <u>last 12 months</u> ?	<ul style="list-style-type: none"> • A 'Yes' is appropriate only if the respondent was taking medications or therapy for depression at any time during the last 12 months.
Q4042	During the last 12 months, have you had a period <u>lasting several days</u> when you felt <u>sad</u> , <u>empty</u> or <u>depressed</u> ?	<ul style="list-style-type: none"> • Emphasize a period that lasted several days (not just one or two days). • If necessary, use words that may be equivalent to the symptoms “sad, empty or depressed” – such as “blue”, “tearful”, “with no feelings inside”, “low”, “rock bottom” or “gloomy”.
Q4043	During the last 12 months, have you had a period lasting several days when you <u>lost interest</u> in most things you usually enjoy such as personal relationships, work or hobbies/recreation?	Emphasize 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.
Q4044	During the last 12 months, have you had a period lasting several days when you have been feeling your <u>energy decreased</u> or that you are <u>tired all the time</u> ?	Emphasize 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 'No' to Q4042, Q4043 AND Q4044 above, skip to the next section on Hypertension Q4060. If even one of the preceeding 3 questions is 'Yes', proceed to Q4045.		
Q4045	Was this period [of sadness/loss of interest/low energy] for <u>more than 2 weeks</u> ?	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).

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Depression (continued)

Question No.	Question	Guide for completion
Q4046	Was this period [of sadness/loss of interest/low energy] <u>most of the day, nearly every day?</u>	Emphasize the symptoms of low mood/interest/ 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.
Q4047	During this period, did you <u>lose your appetite?</u>	Determine whether the respondent had the symptom of much smaller appetite than usual, often accompanied by weight loss.
Q4048	Did you notice any slowing down in your thinking?	"Slowing down" means thoughts that are coming much slower than usual. The person needs more time to think, make decisions, making up his/her mind and reacting to events.
Q4049	Did you notice any problems <u>falling asleep?</u>	Problems "falling asleep" refer to inability to sleep or to get to sleep.
Q4050	Did you notice any problems <u>waking up too early?</u>	"Waking up too early" means a change from the normal sleep patterns – waking up earlier than wanted by the respondent or typical for the person.
Q4051	During this period, did you have any <u>difficulties concentrating</u> ; for example, listening to others, working, watching TV, listening to the radio?	"Difficulties in concentrating" means not following the content of a conversation or work, or having to ask people to repeat themselves because the mind wanders.
Q4052	Did you notice any slowing down in your moving around?	"Slowing down in moving around" means movements or walking that is much slower than usual. The person needs more time to move or walk and react to events.
Q4053	During this period, did you feel <u>anxious and worried</u> most days?	"Anxious and worried" means feelings of anxiety or worrying about things on most days (not just one or two days).
Q4054	During this period, were you so <u>restless or jittery</u> nearly every day that you paced up and down and couldn't sit still?	"Restless or jittery" usually means physical things such as pacing or repetitive walking patterns or movements, but could be a feeling inside.
Q4055	During this period, did you feel <u>negative</u> about yourself or like you had <u>lost confidence</u> ?	This is a change from normal levels of outlook and confidence.
Q4056	Did you frequently feel <u>hopeless</u> - that there was no way to improve things?	"Hopeless" means the feeling or belief that there seems to be no possibility of comfort or success – that things are certain to fail.

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4000 Chronic Conditions and Health Services Coverage, Continued

Depression (continued)

Question No.	Question	Guide for completion
Q4057	During this period, did your <u>interest in sex</u> decrease?	This refers to a change from the respondent's normal level of interest in sex or intimate relations.
Q4058	Did you think of death or wish you were dead?	This is a difficult question but is meant to determine if the person thinks about death in general, his or her own death or have feelings that they wish they were dead.
Q4059	During this period, did you ever <u>try to end your life</u> ?	This question is likely to be a sensitive question, but it is a very important question to have answered. You may need to give the person extra time to answer or note any difficulties in responding.

Q4060- Q4061b Hypertension The table below provides guidelines for completing questions Q4060 to Q4061b that relate to hypertension (raised blood pressure).

Question No.	Question	Guide for completion
Q4060	Have you ever been diagnosed with high blood pressure (hypertension)?	<ul style="list-style-type: none"> Identify individuals with a diagnosed case of hypertension or high blood pressure. This is persistent elevation of the pressure in your arteries that may impair heart, brain or kidney function over time. It can be treated with behavioural/lifestyle changes (prescribed diet or exercise) or medications.
Q4061a	Have you been taking any medications or other treatment for it during the <u>last 2 weeks</u> ?	<ul style="list-style-type: none"> Determine if the respondent is currently on medications or under treatment to lower blood pressure. A 'Yes' is appropriate only if the respondent was taking blood pressure medications 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.
Q4061b	Have you been taking any medications or other treatment for it during the <u>last 12 months</u> ?	<ul style="list-style-type: none"> A 'Yes' is appropriate only if the respondent was taking blood pressure medications or on prescribed dietary, exercise or other treatments at any time during the last 12 months.

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4000 Chronic Conditions and Health Services Coverage, Continued

Q4062- Q4065 Cataracts

The table below provides guidelines for completing questions Q4062 to Q4065. This section aims to identify persons with cataracts in their eyes and whether they have had access to appropriate medical intervention. Cataracts are a disease in which the lenses of the eyes become cloudy and opaque, causing partial or total blindness. If the cataracts become too thick, surgery can be done to repair the lens of the eye.

Question No.	Question	Guide for completion
Q4062	In the last 5 years, were you diagnosed with a <u>cataract</u> in one or both of your eyes (a cloudiness in the lens of the eye)?	<ul style="list-style-type: none"> • Only ask this question to respondents who had a professional eye exam in the last 5 years. • Identify those respondents who were diagnosed in the last 5 years as having cataracts. • Record 'Yes' if the respondent was diagnosed for cataracts in one eye or both eyes within the last 5 years. • If the respondent was not diagnosed for cataracts, skip to Q4064.
Q4063	In the last 5 years, have you had <u>eye surgery</u> to remove this cataract(s)?	<ul style="list-style-type: none"> • Emphasize that the time period for the medical intervention is only the last 5 years. • Other time periods will prevent the results from being comparable and make it difficult to properly assess how well the health system is responding to people's needs.
Q4064	In the last 12 months, have you experienced cloudy or blurry vision?	<ul style="list-style-type: none"> • Emphasize the last 12 months. • If the respondent does not understand what is meant by cloudy or blurry vision, read the following: "Cloudy or blurry vision refers to when you cannot see clearly, as if there is a fog in front of your eyes, or as if you are trying to see through water, or the image has been smeared so you cannot see optimally."
Q4065	In the last 12 months, have you experienced vision problems with light, such as glare from bright lights, or halos around lights?	<ul style="list-style-type: none"> • Emphasize the last 12 months. • If the respondent does not understand the meaning of this question, read the following: "Problems with light could be when you find bright lights uncomfortably harsh to look at, or you see circles or halos of light around light bulbs especially at night."

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4000 Chronic Conditions and Health Services Coverage,

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Q4066- Q4068b Questions Q4066 to Q4068b identify respondents who have had problems with their mouth, teeth or swallowing.

Question No.	Question	Guide for completion
Q4066	Have you <u>lost all</u> your natural teeth?	The question serves to identify people who are suffering from edentulism (missing all of their teeth). If left untreated, edentulism can lead to the shrinking and loss of jawbone. Record a response of 'Yes' only if the respondent has lost <u>all</u> of her/his natural teeth, and not just some or most of them. The respondent may have dentures or tooth implants – but determine if ALL the natural teeth are gone.
Q4067	During the <u>last 12 months</u> , have you had any problems with your mouth and/or teeth (this includes problems with swallowing)?	<ul style="list-style-type: none"> • Oral health problems can have negative effects on people's nutrition and general health. Mouth, teeth or swallowing could include difficulties with chewing or swallowing, bad or missing teeth, pain, problems with tongue or gums. • If the respondent indicates not having had any problems in the last 12 months, record 'No' and skip to Q4070.
Q4068a	Have you received any <u>medications</u> or <u>treatment</u> from the dentist or other oral health specialist during the <u>last 2 weeks</u> ?	<ul style="list-style-type: none"> • This set of questions is only asked to respondents who reported having had oral health problems and having received professional care. • The purpose is to determine if the respondent is currently under treatment for mouth, teeth or swallowing problems. • A response of 'Yes' is appropriate only if the respondent was taking medication or treatment any time during the last two weeks. • 'Yes' to “medications” is appropriate if the respondent took any type of pill, syrup or other medicine prescribed by an oral health professional to treat a problem of the mouth, teeth, tongue or gums or to help swallowing. • 'Yes' to "treatment" can include “dentures or bridges” (which are full or partial implants for replacing missing teeth), “dental work or oral surgery” (such as special cleaning of your teeth by a dentist or dental hygienist, filling of dental caries, tooth extraction, or any other mouth surgery) or therapy to improve swallowing.
Q4068b	Have you received any medications or <u>treatment</u> ...during the <u>last 12 months</u> ?	<ul style="list-style-type: none"> • A 'Yes' is appropriate only if the respondent was taking medication or under treatment prescribed by a dentist or oral health professional at any time during the last 12 months.

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4000 Chronic Conditions and Health Services Coverage,

Continued

Q4069- Q4077 Injuries The table below provides guidelines for completing questions Q4069 to Q4077 that relate to road traffic accidents or events/accidents in the home, school or workplace in the last 12 months that resulted in bodily injury that limited their activities.

Question No.	Question	Guide for completion
Q4069	In the <u>last 12 months</u> , have you been involved in a <u>road traffic accident</u> where you suffered from bodily injury?	<ul style="list-style-type: none"> Identify respondents who were involved in a road traffic accident resulting in bodily injury. Emphasize that the respondent could have been involved in the accident in any capacity. If the respondent first answers 'No', probe by saying: "This could have been an accident in which you were involved either as the occupant of a motor vehicle, or when you were riding a motorcycle/scooter, rickshaw or bicycle, or walking." If multiple accidents occurred, ask the respondent to think about the most recent accident and describe the results of that accident. "Bodily injury" could be any type of injury (even if it was not necessarily visible to the person at the time of the accident). Only record accidents that occurred in the last 12 months. If the respondent has not been involved in any road traffic accident in the past 12 months, record 'No' and skip to Q4073.
Q4070	How did the injury happen? Was it an accident, did someone else do this to the injured person, or did the injured person do this to him/herself?	<ul style="list-style-type: none"> Determine the motive behind the injury. It is important to know whether the injury was inflicted on purpose, whether it was unintentional (accidental) or if the respondent did this to her or himself.
Q4071	Did you receive any <u>medical care or treatment</u> for your injuries?	Determine if the respondent received appropriate medical care or treatment for the injuries.
Q4072	Did you suffer a physical disability as a result of being injured?	If 'No', skip to Q4073.
Q4072a	In what ways were you physically disabled?	Circle all options the respondent mentions.

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Continued

Injuries (continued...)

Question No.	Question	Guide for completion
Q4073	In the <u>last 12 months</u> , have you had any other event where you suffered from bodily injury?	<ul style="list-style-type: none"> • Identify if respondent was involved in an event or accident (other than a traffic accident) resulting in bodily injury. • Emphasize that the respondent could have been involved in the event in any capacity. • If the respondent first answers 'No', probe by saying: "Any accidents due to a fall, burn, poisoning, submersion in water, or by a firearm or sharp weapon, or an act of violence from another person?" • If multiple events occurred, ask the respondent to think about the most recent event and describe the outcome of that event. • "Bodily injury" could be any type of injury (even if it was not necessarily visible to the person at the time of the event or accident). • Only record accidents that occurred in the last 12 months. • If the respondent has not been involved in any accident in the last 12 months, record 'No' and skip to Q4078.
Q4073a	Where were you when you were injured?	Indicate the location where the person was injured. If not at home, school or work, print clearly the location after '87 Other, specify:'.
Q4074	What was the cause of this injury?	<ul style="list-style-type: none"> • Ask the respondent to describe the cause of the injury. • If this does not fit into one of the main categories provided, circle '87 Other, specify', and clearly write out the reason in CAPITAL letters.
Q4075	How did the injury happen? Was it an accident, did someone else do this to you, or did you do this to yourself?	<ul style="list-style-type: none"> • Determine the motive behind the injury. • It is important to know whether the injury was inflicted on purpose or whether it was unintentional (accidental).
Q4076	Did you receive any <u>medical care or treatment</u> for your injuries?	Determine if the respondent received some kind of medical care or treatment for these injuries. If the respondent did not receive any care or treatment, record 'No' and skip to the next section Q4078.

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4000 Chronic Conditions and Health Services Coverage,

Continued

Injuries (continued...)

Question No.	Question	Guide for completion
Q4077	Did you suffer a physical disability as a result of being injured?	If 'No', skip to Q4078.
Q4077a	In what ways were you physically disabled?	<ul style="list-style-type: none"> • Ask the respondent to describe the result of the injury. • Circle all that apply. • If this does not fit into one of the main categories provided, circle '87 Other, specify:', and clearly write the result in CAPITAL letters.

Q4078- Q4080 Cervical cancer and breast cancer

Ask the questions in this section of female respondents only as follows:

The table below provides guidelines for completing questions Q4078 to Q4080.

Question No.	Question	Guide for completion
Q4078	When was <u>the last time</u> you had a <u>pelvic examination</u> , if ever?	<ul style="list-style-type: none"> • Ask how long ago the respondent last had a pelvic examination. • If the respondent is unsure what is meant by a pelvic exam, 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 device called 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." • If the respondent had a pelvic examination but does not remember when exactly the examination took place, probe for the approximate elapsed time since the last examination. • If the respondent has never had a pelvic exam, skip to Q4080.

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4000 Chronic Conditions and Health Services Coverage,

Continued

Cervical cancer and breast cancer (continued...)

Question No.	Question	Guide for completion
Q4079	The last time you had the pelvic examination, did you have a PAP smear test?	<ul style="list-style-type: none"> • Identify if the respondent has 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.”
Q4080	When was the last time you had a <u>mammography</u> , if ever?	<p>If the respondent does not understand what is meant by mammography, read the following description(s):</p> <p>“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.”</p>

5000 Health Care Utilization

Introduction

This section assesses respondents and the household's experiences with the health system. In particular, questions are asked about:

- needing health care;
- inpatient hospital care;
- outpatient care and care at home; and,
- responsiveness of health care professionals and systems to the respondent's health care needs.

Q5001- Q5004 Needing health care

The table below provides guidelines for completing questions Q5001 to Q5004 that relate to needing health care. Use SHOWCARD (Appendix Response Scales) as needed.

Question No.	Question	Guide for completion
Q5001	When was the last time that you needed health care?	<ul style="list-style-type: none"> • “Needed” means the last time the respondent felt s/he had a health problem and required a health professional. • Record years and/or months. • If less than 1 year ago, enter ‘00’ for years ago and enter months ago. • If less than 1 month ago, enter ‘00’ for years and months ago, but continue to Q5002. • If never needed health care, skip to Q5046.
Q5001a	If ‘Don’t know’ to Q5001, was it more than 3 years ago?	<p>Ask only if response to Q5001 is ‘Don't know’.</p> <p>If ‘Yes’, probe, asking about any type of health care from a doctor, nurse, pharmacist, traditional healer, midwife, or other.</p> <p>If ‘Yes’ (that is, no health care in last 3 years), skip to Q5046.</p>
Q5002	The last time you needed health care, did you get health care?	<p>If ‘Yes’, skip to Q5004.</p> <p>If ‘No’, complete Q5002a and Q5003, then skip to Q5046.</p>
Q5002a	What was the main reason you needed care, even if you did not get care?	<ul style="list-style-type: none"> • The respondent must choose only one reason. The respondent may have multiple conditions - but this question is about the main reason for needing health care. • If respondent is having difficulties answering, you can read the categories. • If none of the categories fit, or you cannot choose a category from what the respondent says, select ‘87 Other, specify:’, and clearly print the reason given by the respondent.
Q5003	Which reason(s) best explains why you did not get the needed health care?	<ul style="list-style-type: none"> • Circle each reason the respondent mentions spontaneously. If needed, you can read the categories to the respondent. Use SHOWCARD in SAGE Appendices, Response Cards, for Section 5000.

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5000 Health Care Utilization, Continued

Question No.	Question	Guide for completion
Q5004	Thinking about health care you needed in the last 3 years, where did you go <u>most often</u> when you felt sick or needed to consult someone about your health?	<ul style="list-style-type: none"> Record only one location in which the respondent most frequently received health care over the last 3 years. Read the response categories to the respondent only if she/he is having troubles responding. A "medical doctor" can include general practitioner or specialist including, for example, gynaecologist, psychiatrist or other. Use the local term for traditional healer.

Q5005- Q5024 Inpatient hospital care The table below provides guidelines for completing questions Q5005 to Q5024 that relate to health care that required an overnight stay in a health care facility over the last 3 years and health care received over the last 12 months.

Question No.	Question	Guide for completion
Q5005	Have you ever stayed <u>overnight</u> in a hospital or long-term care facility?	<ul style="list-style-type: none"> "Overnight" stays could be one night or longer in a hospital, health centre, health clinic, hospice or long-term care facility (old persons home, nursing home or other name – use local terms). If 'No', skip to Q5026.
Q5006	When was the <u>last</u> overnight stay in a hospital or long-term care facility?	<ul style="list-style-type: none"> Ask respondent to try to remember when s/he had her/his last overnight stay (anytime in the last 3 years). If she/he only knows a date, calculate how long ago and repeat back for verification. For example, if you are interviewing in June 2006 and the respondent says, "<i>I think it was around January 2004</i>", you could calculate that date to say, "<i>So that was about 2 and a half years ago</i>"? If the respondent stayed overnight when visiting someone in hospital or because a child of hers/his was in hospital she/he should answer 'No' to this question. If 'No', skip to Q5026.
Q5007	Over the last 12 months, how many different times were you a patient in a hospital/long-term care facility for at least one night?	<ul style="list-style-type: none"> Enter the total number of times the respondent has stayed overnight in a health care facility because of her/his own health care needs or situation. Emphasize the time frame - the number of overnight stays in the last 12 months from the day of the interview. The overnight stay could be one night or multiple nights. If '00', skip to Q5026.

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5000 Health Care Utilization, Continued

Inpatient hospital care (continued...)

Q5008- Q5015 The table below provides guidelines for completing questions Q5008 to Q5015. These questions ask details about the overnight stays in a hospital, health centre, clinic, long-term care facility or other health care facility in the last 12 months. Determine the reason for each overnight stay and other details about their most recent stay(s). Ask the respondent's reason(s) for staying overnight, for up to 3 times over the last 12 months (working from most recent stay backwards in time).

Question No.	Question	Guide for completion
Q5008	What type of hospital or facility was it?	Start by asking the respondent to remember her/his last (most recent) overnight stay. Circle the type of hospital or health care facility, read the categories. <ul style="list-style-type: none"> • "Public" hospital is government funded. • "Private" hospital is non-government funded. • "Charity or church-run hospital" includes those funded by various non-governmental organizations or religious affiliation. • "Old person's home or long-term care facility" could be government run or private. • If these categories do not fit, clearly print the type of facility in '87 Other, specify:'.
Q5008a	What was the name of this hospital or facility?	Clearly print the name of the hospital or health care facility. Probe if you do not understand. It is important that you get this as accurate as possible. Ask the Supervisor for assistance with spelling as needed.
Q5008b	Which reason best describes why you were last hospitalised?	<ul style="list-style-type: none"> • One answer only. This is the reason for the most recent overnight stay. Use the SHOWCARD in the Appendix. • If the reason is not in the categories listed, clearly print the reason in, '87 Other, specify:'.
Q5009	How did you get there?	How did the respondent get to the facility named in Q5008a. Circle all responses that apply.
Q5009a	About how long did it take you to get there?	Enter the hours and/or minutes. A response of, "About a half-hour" would be coded as '00:30'. A response of, "About an hour and a quarter", would be coded as '01.15'.
Q5010	Who paid for this hospitalisation? Anyone else?	Circle all that paid or helped to pay for this overnight stay. Probe if needed. If was free, circle, '8' and skip to Q5013.

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5000 Health Care Utilization, Continued

Inpatient hospital care (continued...)

Question No.	Question	Guide for completion
Q5011	Thinking about your last overnight stay, how much did you or your family/household members pay out-of-pocket for:	<ul style="list-style-type: none"> • These are costs that the respondent or respondent's family/household paid that won't be reimbursed by an insurance scheme. • Ask the respondent to give as accurate an amount as possible for each category listed. • If the respondent does not know some or any of the specific amounts in the categories, enter '00000' in each of the categories and include a total amount in Q5012.
Q5012	About how much <u>in total</u> did you or a family/household member pay out-of-pocket for this hospitalisation?	<ul style="list-style-type: none"> • Ask for an approximate total cost independent of the responses in Q5011. The respondent may not have been able to provide answers to Q5011 - but they may be able to answer this question about total cost. • If the respondent did provide specific expenditures in Q5011, do NOT sum these to come up with the amount for this question.
Q5013	Overall, how satisfied were you with the care you received during your last [hospital] stay?	<ul style="list-style-type: none"> • This question refers to their satisfaction with care received during their most recent overnight stay. Read the response categories. Care includes admission process, health and personal care during the stay.
Q5014	What was the outcome or result of your visit to the [hospital]? Did your condition...	Read response categories. In the respondent's opinion, and considering the main reason for admission, what was the result of accessing health care? Did the respondent's condition(s) improve, not change or get worse?
Q5015	Was this the outcome or result you had expected?	This question is asked in relation to Q5014. It is generally understood that when a person accesses health care, s/he expects to get better, yet this is not always the case. It will help us to gauge a person's expectations about interacting with the health care system.
Q5016 - Q5017	(Up to an additional 2 overnight stays - see Q5008 for more information)	<ul style="list-style-type: none"> • These questions ask about additional overnight stays in the last 12 months. • If only one overnight stay in the last 12 months, go to Q5018. • Determine further details about up to TWO additional overnight stays (for a total of 3 overnight stays) in the last 12 months. • Work backwards in time, starting from the most recent overnight stay.

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5000 Health Care Utilization, Continued

Inpatient hospital care (continued...)

Question No.	Question	Guide for completion
Responsiveness of the health care system to the respondent's health needs.		
Q5018 - Q5024	For your last (overnight) visit to a hospital or long-term care facility, how would you rate the following:	<ul style="list-style-type: none"> • These questions are meant to find out the respondent's opinions about the health care received and about aspects of the health care system – specifically about the last visit (that is, the most recent visit). • Have the respondent think again about the most recent visit before asking the questions.

Q5026 Q5054 The table below provides guidelines for completing questions Q5026 to
Outpatient care Q5054 that relate to health care received at a hospital (not including an overnight stay), health centre, clinic, private office or at home from a health care worker.

Question No.	Question	Guide for completion
Q5026	<u>Over the last 12 months</u> , did you receive any health care NOT including an overnight stay in hospital or long-term care facility?	<ul style="list-style-type: none"> • Determine if the respondent received any outpatient or home health care. This could be health care received in a clinic, hospital, dispensary, private office or at home, for example, but care which does not necessitate an overnight stay by the respondent outside of their home. • The types of health care professionals they might have seen include a Medical Doctor (including gynaecologist, psychiatrist and other specialists), Nurse, Midwife, Dentist, Physiotherapist or chiropractor, Traditional medicine practitioner (use local names), Pharmacist, or Home health visitor, to mention some common types of health care providers. • If 'No', skip to Q5046.
Q5027	In total, how many times did you receive health care or consultation in the <u>last 12 months</u> ?	Record the number of times the respondent received medical care or consultation - again in the outpatient or home setting - over the last 12 months.
Q5028 - Q5035	Questions about the most recent visit	These questions follow the pattern for an inpatient (overnight) stay - see Q5006 to 5016.
Q5028	What was the last (most recent) health care facility you visited in the last 12 months?	Start by asking the respondent to remember her/his last (most recent) health visit. The types of facilities include private or public (government sponsored and run) doctor's office, clinic, health centre or hospital - or could be a charity-run clinic, health centre or hospital (church, non-governmental organization). Also includes visits by a health care professional to the respondent's dwelling.

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5000 Health Care Utilization, Continued

Outpatient care (continued...)

Question No.	Question	Guide for completion
Q5028a	What was the name of this health care facility or provider?	Clearly print the name of the hospital, clinic, health care facility or health care provider seen. Probe if you do not understand. It is important that you get this as accurate as possible. Ask the Supervisor for assistance with spelling as needed.
Q5029	Which was the last (most recent) health care provider you visited?	Read the list as needed. The respondent may have seen multiple health care providers (for example, in the outpatient part of a hospital), but try to get the main health care provider seen (person who made health care decisions, provided advice or gave treatment).
Q5029a	What was the sex of the provider mentioned in Q5029?	Indicate male or female health care provider - according to response to 5029.
Q5029b	Was this visit for a chronic condition, new condition or for both reasons?	Attempt to determine if the reason for the visit - was it for an ongoing or long-time (chronic) condition the person has had (for example diabetes), a new condition (fever) or both (new infection in the leg caused by complications from diabetes).
Q5029c	Which reason best describes why you needed this visit?	<ul style="list-style-type: none"> • One answer only. This is the reason for the most recent outpatient health care visit (not including overnight stay). Use the SHOWCARD in the Appendix. • If the reason is not in the categories listed, clearly print the reason in, '87 Other, specify:'.
Q5030-5036	Additional Qs about last visit	See Q5009-Q5015 for explanations.
Q5037-Q5037c	Second to last visit	See Q5029-Q5029c for explanations.
Q5038-5038c	Third to last visit	See Q5029-Q5029c for explanations.
Responsiveness of the health care system to the respondent's health needs.		
Q5039 - Q5045	For your last outpatient health visit/visit to health care provider, how would you rate the following:	<ul style="list-style-type: none"> • These questions are meant to find out the respondent's opinions about the health care received and about aspects of the health care system – specifically about the last visit (that is, the most recent visit). • Have the respondent think again about the most recent visit before asking the questions.

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5000 Health Care Utilization, Continued

Q5046- Q5054 Vignettes

Questions Q5046 to Q5054 include brief stories (vignettes) that describe a situation where a person needs health care. These work in the same way as the vignettes in Section 2000 (see Q2101-2120). Some guidelines for completing these questions areas follows:

- Explain to the respondent that this section includes stories about other people who are the respondent's age and have a similar background. The respondent will need to listen carefully and concentrate.
- In all vignettes use the country specific female/male first names to match the sex of the respondent.
- Introduce the vignettes to the respondent and read them slowly and clearly. Allow the respondent enough time to ask questions or get clarifications.
- Ask the respondent to rate the experiences of the person described in the vignette story, in the same way that they described their own experiences from the care they received and described earlier (Q5018-Q5024 and Q5039-Q5045).
- If the respondent does not understand, rephrase - saying, "The following includes a number of stories about other people, about the same age and with the same background as you. I'll read you the story, then ask you questions about the health of that person. If it helps, think of yourself as the person described. Let's try again."

Question No.	Question	Guide for completion
Q5046 - Q5052	Vignette stories.	<ul style="list-style-type: none"> • Read the vignette stories slowly and clearly after introducing them to the respondent. • Allow enough time for the respondent to ask questions or get clarifications.
The final 2 questions in this section ask about the respondent's opinion about health care in their country.		
Q5053	In general, how satisfied are you with how the health care services are run in your country ...?	Asking the respondent to give a report of their overall level of satisfaction with the state of health care in their country.
Q5054	How would you rate the way health care in your country involves you in deciding what services it provides and where it provides them?	Finding out how easy it is for a citizen to get involved in making decisions that would affect the structure of the health system.

6000 Social Cohesion

Introduction	This section asks questions about other areas of the respondents' lives that may impact on their well-being and overall situation.
Purpose	The purpose of these questions is to help us better understand the context in which health “occurs” in a person or community.
Q6001 -Q6023	The table below provides guidelines for completing questions Q6001 to Q6023 that relate to social or communal aspects of living and the respondent’s interaction and involvement with the community and country.

Question No.	Question	Guide for completion
Q6001 - Q6009	<p>These questions ask about the respondent's interactions with her or his community. It includes active or passive (for example, donating money) participation in community events.</p> <p>How often in the last 12 months have you ...?</p> <p>Q6001...attended any public meeting in which there was discussion of local or school affairs?</p> <p>Q6003...attended any group, club, society, union or organizational meeting?</p>	<p>Public meeting examples include:</p> <ul style="list-style-type: none"> • Cultural group or association (for example arts, music, theatre) • Education group (for example parent-teacher association, school committee) • Ethnic-based community group • Farmer/fisherman group or cooperative • Finance, credit or savings group • Health group • Neighbourhood/ village committee • NGO / civic group (for example Rotary Club, Red Cross) • Political group or movement • Professional Association (doctors, teachers, veterans) • Religious or spiritual group (for example church, mosque, temple, informal religious group) • Sports group • Study group • Trade Union or Labour Union • Traders or Business Association • Water and waste management group • Youth group
Q6010 - Q6023	<p>These questions ask about trust, safety and interest in politics, which can all influence well-being and health.</p>	<ul style="list-style-type: none"> • Someone you can trust (Q6013) may include: a friend, family member or anyone, including animals, in whom the respondent can speak with freely and feel confident that they can be trusted. • Questions about interest in politics (Q6020-6023) might be confronting. Please remind respondent that all responses are confidential.

7000 Subjective Well-Being and Quality of Life

Introduction This section covers the respondent's thoughts about their life and well-being. It includes the following three main parts:

- Feeling about health and quality of life;
 - Day reconstruction in which respondents are asked a series of questions about their previous day; and,
 - Supplementary questions, in which respondents are asked a variety of other questions.
-

Durations The first 10 questions are taken from the WHO Quality of Life (WHOQOL) instrument - and take a few minutes to complete. The day reconstruction part follows and will take a maximum of 15 minutes of interview time.

WHOQOL instrument The WHOQOL instrument includes questions that are designed to estimate well-being by measuring the quality of life.

WHOQOL has been designed for multiple cultural settings whilst allowing the results from different populations and countries to be compared. The questions have many uses, including use in medical practice, research, audit, and in policy making.

Definition of "Quality of Life" WHO defines Quality of Life as an individual's perception of her/his position in life in the context of the culture and value systems in which she/he lives and in relation to her/his goals, expectations, standards and concerns.

It is a broad ranging concept affected in a complex way by the person's physical health, psychological state, personal beliefs, social relationships and her/his relationship to salient features of their environment.

Q7001 - Q7010 Feeling about life The table below provides guidelines for completing questions Q7001 to Q7010.

Question No.	Question	Guide for completion
Q7001	Do you have enough energy for everyday life?	<ul style="list-style-type: none">• Determine the energy, enthusiasm and endurance the respondent has to perform daily living and other activities such as recreation.• Reports may range from disabling tiredness to adequate levels of energy, to feeling really alive.• Tiredness may result from a number of causes, for example illness, problems with nerves, depression or over-exertion.

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7000 Subjective Well-Being and Quality of Life, Continued

Q7001 - Q7010 (continued...)

Question No.	Question	Guide for completion
Q7002	Do you have enough money to meet your needs?	<ul style="list-style-type: none"> • Ask this question regardless of the respondent's state of health or whether the person is employed or not. • Determine the respondent's view of how his/her financial resources (and other exchangeable resources) and the extent to which these resources meet the needs for a healthy and comfortable life style. • Focus on what the respondent can afford or cannot afford which might affect quality of life. • Individual interpretation of "enough" and "meeting my needs" may vary greatly. Ensure that questions are framed to allow this variation to be accommodated.
Q7003	How satisfied are you with...your health?	Examine the way a respondent assesses his/her overall health.
Q7004	How satisfied are you with ...yourself?	<ul style="list-style-type: none"> • Determine how the respondent feels about her/himself. Responses may range from feeling very positive (very satisfied) to feeling extremely negative (very dissatisfied) about herself/himself. • Respondents may interpret this question in a way that is meaningful and relevant to her/his position in life. For example, self-esteem may depend on how a respondent functions at work; at home or how she/he is perceived and treated by others. In some cultures self-esteem is the esteem felt within the family rather than individual self-esteem.
Q7005	How satisfied are you with...your ability to perform your daily living activities?	<ul style="list-style-type: none"> • Explore the respondent's ability to perform usual daily living activities. Daily living activities include: self-care and caring appropriately for property. • Focus on the respondent's ability to carry out activities which he/she is likely to need to perform on a day-to-day basis. • The degree to which people are dependent on others to help them in their daily activities is also likely to affect their quality of life.

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7000 Subjective Well-Being and Quality of Life, Continued

Q7001 - Q7010 (continued...)

Question No.	Question	Guide for completion
Q7006	How satisfied are you with ... your personal relationships?	<ul style="list-style-type: none"> • Determine the extent to which the respondent feels the companionship, love and support they desire from the intimate relationship(s) in their life. • Include all types of loving relationships, such as close friendships, marriages and both heterosexual and homosexual partnerships. • Determine the respondent's ability and opportunity to love, to be loved and to be intimate with others both emotionally and physically. Include: <ul style="list-style-type: none"> – The extent to which the respondent feels they can share moments of both happiness and distress with loved ones, and a sense of loving and being loved. – Physical aspects of intimacy such as hugging and touch.
Q7007	How satisfied are you with ... the conditions of your living place?	<ul style="list-style-type: none"> • Examine the principal place where a respondent lives (and at a minimum sleeps and keeps most of his/her possessions), and the way that this impacts on the person's life. • Assess the quality of the dwelling on the basis of being comfortable, as well as affording the person a safe place to reside. Factor in: <ul style="list-style-type: none"> – Crowdedness; the amount of space available; cleanliness; opportunities for privacy; facilities available (such as electricity, toilet, running water); and the quality of the construction of the building (such as roof leaking and dampness). – Quality of the immediate neighbourhood around the home. • Phrase questions to include the usual word for 'home', where the person usually lives with his/her family. However, questions are phrased to include people who do not live in one place with their family, such as refugees, or people living in institutions. It would not usually be possible to phrase questions to allow homeless people to answer meaningfully.

Continued on next page

7000 Subjective Well-Being and Quality of Life, Continued

Q7001-Q7010 (continued...)

Question No.	Question	Guide for completion
Q7008	Taking all things together, how <u>satisfied</u> are you with your life as a whole these days?	Examine the way a respondent assesses his/her overall life and level of satisfaction.
Q7008a	How often have you felt that you were unable to <u>control the important things in your life</u> ?	<ul style="list-style-type: none"> • This question is phrased in the negative - be aware that it is "...unable to control...". • Examine the respondent's sense of control and decision-making within her/his life. • Self-determination is a strong determinant of health and well-being.
Q7008b	How often have you found that you could <u>not cope</u> with all the things that you had to do?	<ul style="list-style-type: none"> • This question is phrased in the negative - be aware that it is "...not cope...". • Assesses the respondent's perceptions about ability to cope with difficulties in her/his life, including the pace, responsibilities and demands on the respondent. • Ability to cope generally provides a person with a sense of well-being.
Q7009	How would you rate your overall quality of life?	Examine the way a respondent assesses his/her overall quality of life and well being.
Q7010	Taking all things together, how would you say you are these days?	<ul style="list-style-type: none"> • Asks about general levels of happiness at this point in life. • Read response categories.

Day reconstruction

The day reconstruction is to find out how respondents spent their time yesterday (that is, the day before the interview) and to find out how they felt during the different activities that they engaged in.

There are four versions of the day reconstruction interview. The version you use will be determined by which Set is assigned to this interview - but you will only do one version and focus on that period only for the interview. Use the corresponding Set to complete the responses as indicated in the table below.

Set	Version	Period from	Level of detail
A	Morning	The moment they wake up onwards	All detail
B	Afternoon	Noon/mid-day onwards	All detail
C	Evening	6pm to sleep time.	All detail
D	Full day	The time they wake up to the time they go to sleep.	Minimal detail

Continued on next page

7000 Subjective Well-Being and Quality of Life, Continued

Duration The day reconstruction should take no more than 15 minutes. You will need to keep the interview going quickly and keep track of time throughout the interview.

Morning, afternoon and evening versions Follow the guidelines below to briefly reconstruct a **morning, afternoon, or evening (Set A, B and C)**:

- Ask respondents what was the first thing they did during that period the previous day.
 - Then ask what they did next, and what they did after that, etc.
 - Ask the respondent to list subsequent activities until 15 minutes of interview time has elapsed.
 - As many as 10 activities may be recorded.
-

Full day version Follow the guidelines below to briefly reconstruct a full day (Set D):

- Ask for brief descriptions of what they did yesterday morning, afternoon, and evening, and then ask how she/he was feeling during those three parts of the day.
 - First ask the respondent to give a short narrative of what she/he did and who she/he was with for the whole morning, the afternoon and then the evening.
 - Circle all activities mentioned, and record any people the respondent was with. These do not need to be in the right sequence.
 - Circle any activities that the person spontaneously mentions.
 - Do not record repeated items.
 - If the respondent takes more than two minutes to tell you about her/his morning, afternoon or evening, ask her/him to give you less detail.
-

Q7011 -Q7012 Set A, B and C The table below provides guidelines for completing questions Q7011- Q7012 for Set A, B and C.

Question No.	Question	Guide for completion
Q7011	Record current time	Use all 4 boxes and use military time. For example, 2.30 pm should be written as 14:30.
Q7012	Add 15 minutes to compute the end time of this part of the interview	<ul style="list-style-type: none"> • Add 15 minutes to the time that you just recorded. This will tell you when you should end the Day Reconstruction part of the interview and proceed to the Supplementary Questions. • Read the instructions in the “Introduction” box aloud to the respondent. The instruction is slightly different for the Morning, Afternoon, and Evening versions.

Continued on next page

7000 Subjective Well-Being and Quality of Life, Continued

Q7013 -Q7014 The table below provides guidelines for completing questions Q7013- Q7014.
Set A, B and C

Question No.	Question	Guide for completion
Q7013	When did you wake up yesterday?	<ul style="list-style-type: none"> The respondent may not know exactly when she/he woke up, so ask her/him to give her/his best guess if reluctant to answer. If she/he will not answer, record “8888 Don’t know time”.
Q7014	No question.	

Q7015 -Q7141 The table below provides guidelines for completing questions Q7015- Q7141.
Set A, B and C

Question No.	Question	Guide for completion										
Q7015		<ul style="list-style-type: none">Ask the respondent to give you one or two word answers to describe what they are doing, but they will tend to give longer answers. You cannot write down their detailed answer. You must categorize their answer by choosing the most appropriate of the 23 options available.If the person mentions something like washing hands or using the toilet, that is, something that you know only takes 5 minutes or less, do not focus on this, but rather ask them what they did next.										
Morning	What was the first thing you did <u>after waking up</u> yesterday?											
Afternoon	What were you doing at around <u>noon or mid-day</u> yesterday?											
Evening	What were you doing yesterday <u>evening at around 6pm (18.00)</u> ?	<table><tr><th>If the respondent</th><th>Then</th></tr><tr><td>Gives long answers</td><td>Do not write down her/his detailed answer - remind her/him to keep answers to one or two words.</td></tr><tr><td>Mentions washing hands or using the toilet</td><td>Ask her/him what they did next</td></tr><tr><td>Describes more than one activity</td><td>Ask which activity she/he was paying most attention to, or required the most effort.</td></tr><tr><td>Lists several activities that were done in sequence</td><td>Tell her/him that you want to just start with the first one</td></tr></table>	If the respondent	Then	Gives long answers	Do not write down her/his detailed answer - remind her/him to keep answers to one or two words.	Mentions washing hands or using the toilet	Ask her/him what they did next	Describes more than one activity	Ask which activity she/he was paying most attention to, or required the most effort.	Lists several activities that were done in sequence	Tell her/him that you want to just start with the first one
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Lists several activities that were done in sequence	Tell her/him that you want to just start with the first one											
Q7050, Q7150, Q7200, Q7250, Q7300, Q7350, Q7400, Q7450	What was the next thing you did yesterday?	<ul style="list-style-type: none">Circle only one answer If the person describes more than one activity, you should ask them, “Which of the activities were you paying the most attention to, or which activity required the most effort?”For example, if a person was preparing food and listening to music on the radio, the food preparation was probably the activity s/he was paying the most attention to (and the activity which was requiring the most effort). If the respondent lists several activities that were done in sequence, for example, “I ate breakfast, cleaned the house, and then worked in the fields”, you should tell her/him that you want to just start with the first one, eating breakfast. Subsequent questions will just be about eating breakfast. Later, you can return to the next										

Question No.	Question	Guide for completion														
		<p>activity s/he listed, “cleaned the house”.</p> <ul style="list-style-type: none">Some activities will be hard to categorize. If you are not clear on the category, you may suggest two categories and ask the respondent which of these two categories is the best fit. You may ask the person for more detail if it will help you categorize the activity.The list of categories covers activities from all countries. In your country, some of the categories may never be used. You should know the codes very well in advance to minimize time looking through the list during the interview. (See table below).														
Q7015 Morning	What was the first thing you did <u>after waking up</u> yesterday?	<table><thead><tr><th>Activity</th><th>Examples</th></tr></thead><tbody><tr><td>1. Working</td><td>In order for an activity to be coded as “working”, it must meet one of two criteria. The criteria below are meant to distinguish “working” from other activities such as “doing housework.”: 1) The respondent must be getting paid to do this work OR 2) The respondent is producing something that will be sold or traded (for example, a farmer working in her/his fields to produce food to sell at the market is “Working.” But if most of the food will be used only by her/him or her/his family, then it is considered “Subsistence farming”)</td></tr><tr><td>2. Subsistence farming</td><td>Any work with crops or animals that is done with the primary purpose of providing food for the respondent or her/his family. If most of the food will be sold in the market, then the farming activities are considered “Working”.</td></tr><tr><td>3. Preparing food</td><td>Cooking/baking. If it is done for pay then it is considered "Working". "Preparing food” means preparing food for the respondent or her/his family</td></tr><tr><td>4. Doing housework</td><td>This can include cleaning, washing clothes, washing up after eating, sewing, yardwork, etc. If the activity generates income/salary, or provides a product that others will buy, then it should be categorized as “Working”.</td></tr><tr><td></td><td>5. Watching children</td><td>This can include supervising children (under 18 years) when they play, walking them to school, feeding them, or anything where the focus of the person’s attention is making sure children do something or remain safe. These can be the respondent's own children or other</td></tr></tbody></table>		Activity	Examples	1. Working	In order for an activity to be coded as “working”, it must meet one of two criteria. The criteria below are meant to distinguish “working” from other activities such as “doing housework.”: 1) The respondent must be getting paid to do this work OR 2) The respondent is producing something that will be sold or traded (for example, a farmer working in her/his fields to produce food to sell at the market is “Working.” But if most of the food will be used only by her/him or her/his family, then it is considered “Subsistence farming”)	2. Subsistence farming	Any work with crops or animals that is done with the primary purpose of providing food for the respondent or her/his family. If most of the food will be sold in the market, then the farming activities are considered “Working”.	3. Preparing food	Cooking/baking. If it is done for pay then it is considered "Working". "Preparing food” means preparing food for the respondent or her/his family	4. Doing housework	This can include cleaning, washing clothes, washing up after eating, sewing, yardwork, etc. If the activity generates income/salary, or provides a product that others will buy, then it should be categorized as “Working”.		5. Watching children	This can include supervising children (under 18 years) when they play, walking them to school, feeding them, or anything where the focus of the person’s attention is making sure children do something or remain safe. These can be the respondent's own children or other
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Afternoon	What were you doing at around <u>noon or mid-day</u> yesterday?															
Evening	What were you doing yesterday <u>evening</u> at <u>around 6pm (18.00)?</u>															
Q7050, Q7150, Q7200, Q7250, Q7300, Q7350, Q7400, Q7450	What was the next thing you did yesterday?															

Question No.	Question	Guide for completion	
			people's children. If the respondent mentions that the child is sick, then the activity would be "providing care to someone".
		6.Shopping	Going to the market to purchase or trade for clothing, food or other items
		7. Walking somewhere	This is distinct from a leisure walk, which is coded as Exercising. Use this code for situations where the respondent walks somewhere and it takes her/him at least 15 minutes to get there.
		8. Travelling by bicycle	Bicycling somewhere like work or to visit someone or to market. It is distinct from leisurely bicycling which would be coded as Exercise
		9. Travelling by Car/Bus/Train	This includes any type of motorized travel (including truck, plane).
		10. Rest	This can include, resting, sitting, smoking, taking a break, having tea or coffee, taking a nap
		11. Chatting with someone	This is informal conversation with friends, family, or co-workers
		12. Playing	This includes playing cards, sports or other games.
		13. Reading	Reading newspapers, books, etc. (If respondent specifies that s/he was reading a religious text, this should be coded as a religious activity.)
		14.Listening to radio	Use this code when listening to the radio was the primary activity.
		15. Watching television	Use this code when watching television was the primary activity.
		16. Exercising/leisurely walk	Use this code for exercise of any type.
		17. Other leisurely activity	Anything that is not captured by one of the other activities in the list but that is clearly something that is done for enjoyment, relaxation or entertainment.
		18. Grooming or bathing (self)	This includes getting dressed, washing oneself, etc. Helping children bath or get dressed is considered "Watching children".
		19. Eating	Eating or having a meal.
		20. Religious activity	This includes praying, attending a religious service, etc, or reading a religious text.

Question No.	Question	Guide for completion	
		21. Providing care to someone	Caring for a sick or older family member (including children) or friend. It can include personal care for an older or disabled person. If it is done for pay then it is considered "Working".
		22. Intimate relations/sex	This may be a difficult subject to ask about, but it is very important. Move along at the same interviewing pace.
		23. Went to sleep for the night	This is not used for a mid-day nap (which would be coded as "Rest"). This is only used for going to sleep for the end of the day, or occasionally for a shift worker who works at night and then goes to sleep in the morning. It is not necessary to ask who they were with or how they felt. Skip to the supplementary questions (Q7501).
Q7016	How long did this activity last?	<ul style="list-style-type: none"> The respondent must estimate the amount of time that this first activity lasted. It might be 15 minutes, it might be 3 hours. Use all 4 boxes to record the time that the activity took. Two boxes are for the number of hours, and two boxes are for the number of minutes. For example, if the person said it lasted 15 minutes you would enter '00:15' in the boxes. If the person said 2 and a half hours, you would enter '02:30' in the boxes 	
Q7017	<p>At what time did this activity begin?</p> <p>If respondent has trouble with exact time, get estimate or approximate.</p>	<ul style="list-style-type: none"> This question may be difficult for some people. For example, some people may not follow clocks or watches. If that is the case, ask the respondent to give their best estimate, if possible. Encourage them to think about events that they know would have happened at certain times. For example, church bells may ring every hour or workers may return from the fields every day at the same time. If this was an "afternoon" version of the interview, and you asked the respondent what they were doing at around noon, it is okay if the activity began before noon. For example, they may say they were having lunch at around noon and it lasted from 11:30 until 12:30. Similarly, for an evening interview, it is okay if the first activity began before 6pm. If their responses are inconsistent with the duration reported in Q7017, that is okay. Just record their answers anyway. Inconsistent answers will provide researchers with information about how well people keep track of time. If the person simply has no idea what time events occurred, record '8888' in the boxes. 	

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7000 Subjective Well-Being and Quality of Life, Continued

Set A, B and C (continued)

Question No.	Question	Guide for completion																		
Q7018	Were you talking or interacting with anyone when you did this?	<ul style="list-style-type: none">• “Interacting” with someone includes talking with them, working with them, watching over them, or any other situation where people are paying attention to each other. Waiting at a bus stop with a stranger is not considered “interacting”.• If the person says they were with their children, you must ask if the children were young or if they were adults (i.e., at least 18 years old).• You may circle more than one category. If the person was with their spouse and young children, you would circle '2' and '4'.																		
		<table><tr><th>Interacting with:</th><th>Examples</th></tr><tr><td>1. Alone</td><td>Use this code if the respondent was not interacting with anyone. Even if other people were in the area, code '1 Alone' unless she/he was interacting with someone else.</td></tr><tr><td>2. Spouse</td><td>This can include boyfriend or girlfriend if the person is not married.</td></tr><tr><td>3. Adult Children</td><td>The respondent’s own children if the children are aged 18 years or older.</td></tr><tr><td>4. Young children or grandchildren</td><td>This can include the respondent’s own young children or grandchildren or young children who are not related.</td></tr><tr><td>5. Family (Other than spouse or children)</td><td>This includes parents, siblings, son-in-law, daughter-in-law, cousins, aunts, uncles, or anyone else the person considers family.</td></tr><tr><td>6. Friends</td><td>If she/he was talking with a neighbour, you should ask if she/he considers the neighbour a friend. If she/he does not, use “Other”.</td></tr><tr><td>7. Co-workers</td><td>Use this code for any work colleague.</td></tr><tr><td>8. Other</td><td>If this is checked, please describe in the space provided.</td></tr></table>	Interacting with:	Examples	1. Alone	Use this code if the respondent was not interacting with anyone. Even if other people were in the area, code '1 Alone' unless she/he was interacting with someone else.	2. Spouse	This can include boyfriend or girlfriend if the person is not married.	3. Adult Children	The respondent’s own children if the children are aged 18 years or older.	4. Young children or grandchildren	This can include the respondent’s own young children or grandchildren or young children who are not related.	5. Family (Other than spouse or children)	This includes parents, siblings, son-in-law, daughter-in-law, cousins, aunts, uncles, or anyone else the person considers family.	6. Friends	If she/he was talking with a neighbour, you should ask if she/he considers the neighbour a friend. If she/he does not, use “Other”.	7. Co-workers	Use this code for any work colleague.	8. Other	If this is checked, please describe in the space provided.
		Interacting with:	Examples																	
		1. Alone	Use this code if the respondent was not interacting with anyone. Even if other people were in the area, code '1 Alone' unless she/he was interacting with someone else.																	
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7. Co-workers	Use this code for any work colleague.																			
8. Other	If this is checked, please describe in the space provided.																			
Q7018a	At the time, how friendly were you feeling towards this person (these people)?	If the respondent was interacting with multiple people, and was feeling friendly towards some and irritated with others - ask for the overall feeling for the time the respondent was engaged in this activity.																		
Q7019 - Q7025	How you felt yesterday?	For each of these questions, read the response options aloud to the respondent: “Not at all, a little, or very much”.																		

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7000 Subjective Well-Being and Quality of Life, Continued

Set A, B and C (continued)

Question No.	Question	Guide for completion
Q7026-Q7049, Q7060-Q7099, Q7110-Q7149, Q7160-Q7199...	No questions.	The numbering scheme used for this section purposely skips some numbers between activities.

Q7050 -Q7459	<ul style="list-style-type: none"> • These questions repeat Q7013 – Q7025 up to 9 more times, asking respondents to describe the next activities in their day. • Keep careful track of the 15 minute designated time for interviews. • If you have completed 10 activities, or if time is running out, skip ahead to the supplementary questions from Q7500 to Q7533.
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Q7210, Q7260, Q7310, Q7360, Q7410	These questions are to help you to keep track of time during the interview. After some episodes, you will be asked to record the current time. When doing so, you should note whether it is past the 15 minute designated end time entered in Q7012. If it is past the designated end time (Q7012) then you should skip ahead to the Supplementary Questions which begin with Q7500.
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Q7013 -Q7110
Set D. Full day reconstruction

Full day reconstruction

The table below provides guidelines for completing questions Q7013- Q7459 for Set D (Full day reconstruction). Set D has a different structure than Sets A-C, so you will need the additional information below.

Question No.	Question	Guide for completion
Q7013	At what time did you wake up yesterday?	<ul style="list-style-type: none"> • The respondent may not know exactly when s/he woke up, so ask her/him to give her/his best guess if s/he is reluctant to answer. • If s/he cannot answer, record '8888 Don't know time'.
Q7014	At what time did you go to sleep yesterday?	<ul style="list-style-type: none"> • The respondent may not know exactly when s/he went to sleep for the night, so ask her/him to give her/his best guess if s/he is reluctant to answer. • If s/he cannot answer, record '8888 Don't know time'.

Continued on next page

7000 Subjective Well-Being and Quality of Life, Continued

Set D. Full day reconstruction (continued)

Question No.	Question	Guide for completion
Q7015 Q7050 Q7100	<p>Please tell me the main things that you did yesterday [morning/afternoon/evening]. Please also mention if you were talking or interacting with anyone for any parts of the morning/afternoon/evening.</p> <p>-morning (time respondent wakes up to around noon/mid-day).</p> <p>-afternoon (from around noon/mid-day to about 6pm/1800).</p> <p>-evening (from about 6pm/1800 until sleep for the night).</p>	<p>We want the person to give a short narrative of what they did and who they were with for the whole morning (Q7015), afternoon (Q7050) and evening (Q7100). The main purpose of this is to help them remember what happened so that they can give more accurate answers to the emotion questions.</p> <ul style="list-style-type: none"> • Circle all activities that the respondent spontaneously mentions. • You do not need to record the order, and you do not need to record an item that is repeated. • This does not have to be comprehensive. It is just meant to be an approximation. • If the respondent takes more than two minutes to tell you about each period ask them to give you less detail. <p>Use the same rules for categorizing activities and people as were described for Set A (Morning), Set B (Afternoon), and Set C (Evening) versions.</p> <p>If the person takes more than two minutes to tell you about their morning, you should ask them to give you less detail. The same is true for the afternoon and evening parts of Set D (summary full day).</p>
Q7016, Q7051, Q7101	Interacting with anyone?	<ul style="list-style-type: none"> • By interacting with, we mean whether the respondent was consistently paying attention to someone. For example, if the respondent was bathing a young child, she/he would be interacting with them even if she/he was not talking. On the other hand, talking to someone for less than 5 minutes does not count as interacting. • Circle any people that the respondent was interacting with. • You will probably circle more than one person.
Q7017, Q7052, Q7102	Did you do anything else yesterday [morning/afternoon/ evening]?	This is asked to give the respondent another opportunity to consider yesterday's activities. Circle any additional items or responses in Q7015, Q7050 or Q7100.
Q7018, Q7053, Q7103	Were you talking or interacting with anyone else yesterday [morning/afternoon/ evening]?	This is asked to give the respondent another opportunity to consider yesterday's activities. Circle any additional items or responses in Q7016, Q7051 or Q7101.
Q7019 - Q7025, Q7054 - Q7060, Q7104 - Q7110	<p>How you were feeling yesterday:</p> <p>-morning, -afternoon, and -evening.</p>	<ul style="list-style-type: none"> • Read the response options and circle responses for each of the three periods of the day. • These are the same emotion questions asked in Set A (Morning), Set B (Afternoon), and Set C (Evening) versions of this module, but these questions pertain to the entire morning as a whole, entire afternoon as a whole and entire evening as a whole, and not just to a single activity during one of these time periods as in Sets A-C.

Continued on next page

7000 Subjective Well-Being and Quality of Life, Continued

Q7500 - Q7533 The table below provides guidelines for completing questions Q7501 -
Supplementary Q7533. These are the same questions for Set A, B, C and D.
questions

Question No.	Question	Guide for completion
Q7500	Record current time	Record the time.
Q7501 - Q7514	Did you feel ...?	These questions relate to the whole day, and not just to part of the day. The respondent should interpret "much" as she/he would in a normal conversation if she/he were asked a similar question.
Q7515	What part of day did you enjoy most yesterday?	<ul style="list-style-type: none"> • Morning is from the time the respondent wakes up until 12 noon/mid-day. • Afternoon is from 12 noon/mid-day until evening (around 6pm/1800). • Evening is from about 6pm/1800 until bedtime.
Q7516	Compared to a typical day, how much free time did you have yesterday?	Free time is time when the respondent does not have to work or do housework or any other chore.
Q7517	Compared to a typical day, how was your mood yesterday?	Mood is a broad term for how the respondent felt. For example, was s/he more happy or relaxed than on a typical day, or was s/he less happy or relaxed - or - was s/he more sad than on a typical day, or was s/he less sad?
Q7518	How many hours did you sleep last night?	Use two boxes for the hours and two boxes for the minutes. For example, 7.5 hours would be written as '07:30'.
Q7519	Please rate the quality of your sleep last night.	Poor quality sleep means it was interrupted or not restful.
Q7520- Q7521	Hours and quality of sleep for night before last.	See Q7518 and Q7519.
Q7522	Who do you think are happier, men or women? Or are they equally happy?	These questions obtain the respondent's perceptions about other people. In this case, it is about happiness.
Q7523	Who do you think has more free time, men or women? Or do they have equal amounts of free time?	These questions obtain the respondent's perceptions about other people. In this case, it is about free-time.
Q7524- Q7527	Compared to other people, ...	These questions are to determine how the respondent compares herself/himself to other people. They ask about mood, free time, anxiety and health status.
Q7528	Do you think that most people who are sad/happy will tell us they are sad/happy?	These questions determine how forthcoming the respondent thinks others are about their emotions. We want to know what people think about how forthcoming others are about their emotions. <ul style="list-style-type: none"> • Sets A and C ask: "Do you think that most people who are <u>sad</u> will try to tell us they are <u>sad</u>?" • Sets B and D ask: "Do you think that most people who are <u>happy</u> will tell us they are <u>happy</u>?"

Continued on next page

7000 Subjective Well-Being and Quality of Life, Continued

Supplementary questions (continued)

Question No.	Question	Guide for completion
Q7529	Overall, are most people in this area who are about your age happy or sad? OR Overall, are most people in this area who are your age satisfied with life or not satisfied with life?	Determine if most people in the respondent's community/neighbourhood are generally happy or generally sad. We want to know what people think about how happy other people in there area are. <ul style="list-style-type: none"> • Sets A and B ask: "Overall, are most people in this area who are about your age happy or sad?" • Sets C and D ask: "Overall, are most people in this area who are your age satisfied with life or not satisfied with life?"
Q7530	Now, imagine that you had a newly born grandson/ granddaughter, what would you hope for that boy/girl?	Choose one option only. Some people will say that they want their grandson or granddaughter to be both more intelligent and happier than other children. But we want to know, if they had to choose, which would be more important. If the respondent says "both" as a response, then ask, "if you had to choose, which would be more important?" <ul style="list-style-type: none"> • Sets A and C ask about grandsons: "Now, imagine that you had a newly born grandson, what would you hope for that boy? Would it be more important that he be more intelligent than other boys, or happier than other boys?" • Sets B and D ask about grand-daughters: "Now, imagine that you had a newly born granddaughter, what would you hope for that girl? Would it be more important that she be more intelligent than other girls, or happier than other girls?"
Q7531 - Q7533	Keeping track of time, time-use.	These questions are important for assessing how time-aware the respondent is and how the respondent keeps track of time. Q7533 may seem redundant if the person answers 'Yes' to Q7532, but it is important to get a response.

8000 Impact of HIV/AIDS (caregiving)

Introduction

These questions are intended to assess the impact of caregiving, mainly but not exclusively from HIV/AIDS-related caregiving issues and burdens. We want to know the adults and children in this household who require care. This could include caregiving as a result of any health-related reason, including AIDS, or from other health conditions, birth defects, accidents, injury, violence, migration or other reasons. Care could include personal, financial, emotional or health care and the time involved in providing this care.

Definitions

HIV is the Human Immunodeficiency Virus - which infects a person and eventually leads to AIDS.

AIDS is the Acquired Immune Deficiency Syndrome and is a severe immunological disorder caused by the retrovirus HIV. It is transmitted primarily by exposure to contaminated body fluids, especially blood and semen.

Care or support is grouped into 5 main categories: financial, physical, emotional, health, personal (see Q8002 below for more details). Personal care is care related to any of the activities of daily living, such as help with bathing, eating, dressing, toileting, moving around or problems with incontinence (see Q8011 below for more details).

Q8001 - Q8017

The table below provides guidelines for completing questions Q8001- Q8017. Use Section 0400: HH roster. For second (follow-up) interviews, you may need the WHS HH roster if person is not listed on SAGE HH roster.

Question No.	Question	Guide for completion
Q8001	Have you ever heard of an illness called AIDS [<i>or use local term</i>] or a virus called HIV?	Determine if the respondent has heard of HIV and/or AIDS - use local term.
Q8002	Over the last 12 months, have any members of your household, adults or children, needed care or support for any reason?	"Care or support" is defined in 5 categories: <ul style="list-style-type: none">• Financial = cash, paying for bills, fees, food, medicines• Physical = household chores, transportation• Emotional = social support, counselling, time with friends, "parenting time"• Health = providing health care - administering medicines, changing bandages, arranging health care providers.• Personal = bathing, eating, dressing, toileting (getting to and using the toilet), moving around (transfers), incontinence (bowels and bladder)
Q8003	In total, how many adult household (HH) members have needed care or support in the <u>last 12 months</u> ?	Indicate the number of adults (aged 18 years and older), who needed care or support of any kind over the last 12 months. This number may exceed Q0401.

8000 Impact of HIV/AIDS (caregiving), Continued

Q8001-Q8017 Caregiving to adults (continued...)

Question No.	Question	Guide for completion
Q8004	Person (HH member) number - from column in HH roster in Section 0400	<ul style="list-style-type: none"> • Indicate the Person (HH member) number from the HH roster. If not on HH roster, but was HH member from the WHS - use full row number from the WHS HH roster. • For persons who died in last 12 months and not listed in HH roster but were household members at the time of her/his death, use the numbers 65, 66, 67, 68 or 69 for up to 5 adults.
Q8005	Is this adult alive or dead?	This may be a sensitive question - determine if this adult, who is or was a member of the household, is alive or dead. Be aware that the respondent may be grieving.
Q8005a	What is your relationship to this person?	Circle one only. Read the response categories, if needed.
Q8006	Why does/did this person need care or support?* OR Why did this person die?*	<ul style="list-style-type: none"> • If person is still alive, read first question, if person is dead, read second question. Do not read both questions. • If alive, identify whether person still needs care or if has recovered, indicate why they need support. • If person has died, indicate the reason for care or cause of death. • HIV/AIDS related includes care or support because of illness related to HIV infection or AIDS [use local term] (which could include tuberculosis (TB) and malaria [use local term] for example) or other conditions commonly seen with HIV infection. • Other health-related includes reasons other than HIV/AIDS related, for example, heart condition, diabetes, asthma, arthritis, injury... <p>Other reason (not health-related) includes all other reasons.</p>
Q8007	Who is or was the main person providing care for this adult? Is it you yourself, someone else in this household, or someone outside of this household?	<ul style="list-style-type: none"> • Identify the main caregiver - it could be the someone in the household (respondent or other household member) or someone from outside the household (paid or unpaid caregiver). • By "main caregiver", we mean the person primarily responsible for caring for this adult.

Continued on next page

8000 Impact of HIV/AIDS (caregiving), Continued

Q8001-Q8017 Caregiving to adults (continued...)

Question No.	Question	Guide for completion
Q8008	Even if you were not the main caregiver, did/do you provide care or support to this person?	This question is only asked if respondent is, or was, not the main/primary caregiver. We do want to find out if the person did/does provide care or support even if not the main caregiver.
Q8009	For how long have/had you been providing care?	Indicate duration of caregiving at any period over the last 12 months.
Q8010	What type of care or support is/was provided?	<ul style="list-style-type: none"> Probe to find out what type or types of care have been provided, or are currently being provided. See Q8002 for definitions. Circle all that apply. If 'Personal care' is chosen, continue to Q8012. If not chosen, skip to next person needing care - if not chosen and last person, skip to Q8013.
Q8011	What type of <u>personal care</u> is/was provided? Help with...	Ask this question only if Q8010 includes '5 Personal care'. Indicate the type or types of personal care: <ul style="list-style-type: none"> bathing (washing one's body) eating (assistance with any part of eating process - not including cooking) dressing (help with putting on or taking off clothing) toileting (getting to and using the toilet) moving around (within dwelling or outside dwelling, including transfers in and out of bed for example), incontinence (help with problems due to lack of control of bowels and bladder)
Q8012	As the <u>main or other caregiver</u> in the household, <u>how much time per day on average</u> did/do you usually spend providing care?	Indicate average time per day providing care. This is an average over the period when the respondent was providing care. Indicate in hours and minutes - if less than 1 hour, enter '00' in the hour boxes and enter minutes.
Q8013	How many of these household members, who had a prolonged illness or died in the last 12 months, were <u>contributing an income</u> to the household and now have stopped?	Of the adults who received (or are receiving) care, indicate how many were contributing an income to the household but are no longer earning an income.

Continued on next page

8000 Impact of HIV/AIDS (caregiving), Continued

Q8001-Q8017 Caregiving to adults (continued...)

Question No.	Question	Guide for completion
Q8014	Was one of these persons (who have/had a prolonged illness or who died) from your household the <u>main income earner</u> ?	Circle 'Yes' if any of the persons mentioned in Q8003-Q8011 is/was the main income earner for the household. This would be the person who brought the most money into the household.
Q8015	In relation to providing care and support in the last 12 months, has your household <u>received</u> any help or assistance from <u>outside</u> the household?	Indicate if the caregiver(s) has received any assistance or support from outside the household for caregiving.
Q8016	What kind of support have <u>you, as a caregiver</u> , received?	<ul style="list-style-type: none"> • Indicate the type of support the caregiver(s) received. It could be in cash or in-kind - respite from caregiving. • Read response categories. • Circle all that apply.
Q8017	Who provided this help or assistance? Anyone else?	<ul style="list-style-type: none"> • Circle all that apply. • Probe to identify if the respondent received assistance/support from any other sources.

Q8018 - Q8027 The table below provides guidelines for completing questions Q8018- Q8027. These questions ask about the impact of providing care on the respondent over the last 12 months. It is important to make sure the respondent understands that we want to know the impact that her/his caregiving for adults in the household has had on her/his own life and time. The caregiving burden for the respondent could have increased, decreased or not changed.

Remember, "difficulty" means requiring increased effort, discomfort or pain, slowness or changes in the way the respondent does the activity. You may need to remind the respondent of this definition.

Question No.	Question	Guide for completion
As a result of providing care, or the increase in providing care, over the last 12 months, how much difficulty have you had with:		
Q8018	...getting enough sleep?	Indicate how much difficulty the respondent has felt with getting enough sleep or rest as a result of her/his caregiving responsibilities.
Q8019	...eating enough food?	Indicate the amount of difficulty respondent has had with purchasing and eating enough food to maintain weight and health as a result of the extra demands of caregiving.

Continued on next page

8000 Impact of HIV/AIDS (caregiving), Continued

Q8018-Q8027 Caregiving to adults (continued...)

Question No.	Question	Guide for completion
As a result of providing care, or the increase in providing care, over the last 12 months, how much difficulty have you had with:		
Q8020	...having enough energy to do the extra work?	Indicate if caregiving has contributed to changes in levels of energy, fatigue or tiredness.
Q8021	...taking care of your health, ailments or chronic conditions?	Circle the level of difficulty the respondent has had in taking care of her/his own health (including ailments and health conditions) because of the time and effort required for caregiving.
Q8022	...paying for medication/ treatments for your ailments/ chronic condition?	Circle the difficulty the respondent had with paying for drugs or treatments for her/his own health.
Q8023	...visiting friends and relatives as much as before you were providing this level of care?	This is in comparison to the situation before the caregiving was required.
Q8024	...sharing feelings about caregiving responsibility with others?	This question asks if the respondent has a confidant or someone that she/he can speak with about the caregiving or burdens of caregiving.
Q8025	...financial problems due to loss of income, decreased time available for paid employment, or increased costs or expenses?	<ul style="list-style-type: none"> • Indicate the level of difficulty the respondent has had meeting financial needs/obligations as a result of caregiving. • The time spent providing care may take away from formal or informal paid employment. • The prolonged illness or death of the adult in the household could also have caused extra costs.
Q8026	...knowing the correct care to provide for health problems?	The caregiver may not feel she/he knows how to properly treat or provide the best care for the health problems/conditions of the adult needing care.
Q8027	...experiencing stigma or problems associated with the illness/death?	Has the respondent experienced stigma or problems from the community, friends or family members outside the household because of the illness or death of the adult needing care?

Continued on next page

8000 Impact of HIV/AIDS (caregiving), Continued

**Q8028 -
Q8032g**

Now shift to caregiving provided to **children** (aged 15 years or younger) in the household. Again, you can refer to Section 0400: HH roster for all children currently in the dwelling and refer to the WHS roster for children who received care, but are not currently on the Section 0400: HH roster.

Question No.	Question	Guide for completion
Q8028	Has anyone in your household provided care for any child aged 15 or under in the household in the <u>last 12 months</u> ?	<ul style="list-style-type: none"> • Include any child residing in the dwelling in the last 12 months. • For definition of "care", see Q8002 or Q8011 for more details.
Q8028a	In total, how many <u>child</u> household (HH) members have needed care or support in the <u>last 12 months</u> ?	<ul style="list-style-type: none"> • Indicate the total number of children who received care from a household member in the last 12 months. • The child/children may not currently be a household member - for example, may have moved away or died - but who did receive care while living in the dwelling. As a result, this number may exceed the total number of children currently residing in the dwelling (listed in Section 0400).

**Q8029 -
Q8032g**

The following questions ask details about care provided for up to four children aged 15 years or younger in the household. Again, you can refer to Section 0400: HH roster for all children currently in the dwelling and refer to the WHS roster for children who received care, but are not currently on the Section 0400: HH roster. Enter '66', '67', '68', or '69' for children who are not on either roster.

Start with the oldest child, then the next youngest and continue through up to four children in the household. If only one, two or three children received care in last 12 months, skip to Q8033 after question 'g'.

Question No.	Question	Guide for completion
Q8029, Q8030, Q8031, Q8032	<p>Please think of the [...oldest of the children... OR...next youngest child...] aged 15 years or younger.</p> <p>Who is that?</p>	<ul style="list-style-type: none"> • Enter person (HH member) number from Section 0400: HH Roster OR • Enter the row number from WHS roster (for example, Q 0 4 0 4) OR • Enter '66', '67', '68', or '69' in a) for a child who is not listed on either roster.

Continued on next page

8000 Impact of HIV/AIDS (caregiving), Continued

Q8028-Q8032g Caregiving to children (continued...)

Question No.	Question	Guide for completion
Q8029a, Q8030a, Q8031a, Q8032a	What is the child [NAME]'s relationship to you?	Indicate the relationship of this child to the respondent.
Q8029b, 30b, 31b, 32b	Is the child alive or dead?	We are asking about any child in the household who received care in the last 12 months. This child may be alive or may have died recently.
Q8029c, 30c, 31c, 32c	Which of [NAME]'s parents are ill, absent or dead? Only his/her mother, only his/her father or both parents?	This question is to determine the status of the child's parents - related to why caregiving is required from the respondent. If the respondent is the parent - circle appropriate. If neither parent, skip to 'e'.
Q8029d, 30d, 31d, 32d	What was/were the reason(s) for parent(s) being ill or absent (or reasons for death)?	Circle reason for death. If both parents involved, circle all that apply.
Q8029e, 30e, 31e, 32e	Now, please tell me, who is or was the main person providing care for this child? Is it you yourself, someone else in this household, or someone outside of this household?	Identify the main caregiver. By "main caregiver", we mean the person primarily responsible for caring for this child/these children.
Q8029f, 30f, 31f, 32f	Even if you are/were not the main caregiver, did/do you provide care or support to this child?	This question is only asked if respondent is, or was, not the main/primary caregiver. We want to find out if the person did/does provide care or support even if not the main caregiver.
Q8029g, 30g, 31g, 32g	What type of care or support is/was provided?	Circle all that apply. <ul style="list-style-type: none"> • Financial = cash, paying for bills, school fees, food, medicines • Physical = household chores, transportation • Emotional = social support, counselling, time with friends, "parenting time" • Health = providing health care - administering medicines, changing bandages, arranging health care providers. • Personal = bathing, eating, dressing, toileting (getting to and using the toilet), moving around (transfers), incontinence (bowels and bladder)

Continued on next page

8000 Impact of HIV/AIDS (caregiving), Continued

Q8028-Q8032g Caregiving to children (continued...)

Q8033 - Q8036 Questions Q8033 to Q8036 ask about the time spent providing care to children in the household and what support the caregiver/respondent has received.

Question No.	Question	Guide for completion
Q8033	As the <u>main</u> or other caregiver in the household, <u>how much time per day on average</u> did/do you usually spend providing care?	Indicate average time per day providing care. This is an average over the period when the respondent was providing care. Indicate in hours and minutes - if less than 1 hour, enter '00' in the hour boxes and enter minutes.
Q8034	In relation to providing care and support in the last 12 months, has your household <u>received</u> any help or assistance from <u>outside</u> the household?	Indicate if the caregiver(s) has received any assistance or support from outside the household for caregiving.
Q8035	What kind of support have <u>you, as a caregiver</u> , received?	Indicate the type of support the caregiver(s) received. It could be in cash or in-kind - respite from caregiving... Read response categories. Circle all that apply.
Q8036	Who provided this help or assistance? Anyone else?	Circle all that apply. Probe to identify if the respondent received assistance/support from any other sources.

Q8037 - Q8046 See Q8018- Q8027 for details. These questions ask about the impact of providing care on the respondent over the last 12 months. It is important to make sure the respondent understands that we want to know the impact that her/his caregiving for children in the household has had on her/his own life and time. The caregiving burden for the respondent could have increased, decreased or not changed. Remember, "difficulty" means requiring increased effort, discomfort or pain, slowness or changes in the way the respondent does the activity. You may need to remind the respondent of this definition.

Question No.	Question	Guide for completion
Q8047	Think about the care you have given to the ill household member(s) or to the orphaned child(ren) in your home over the last 12 months and think about your own health.	As a result of caregiving, has the respondent maintained or neglected her/his own health? Has the respondent used medical care, consultation or check ups... more or less than used to or has it stayed about the same?

9000 Interviewer Assessment

Introduction The following questions are for you, the interviewer, to help the survey team assess the interview. We want your observations of the respondent and your impressions of how the respondent engaged with you during the interview.

Q9000 - Q9013 The table below provides guidelines for completing questions Q9000 to Q9013.

Question No.	Question	Guide for completion
Q9001	Was someone else present during the interview?	Indicate if there were any other persons present during the interview - and listening to the interview process or contributing to answering the questions. This could be a household member or other person.
	Did respondent have...	The following questions ask about the characteristics of the respondent - and your observations about the respondent's physical state and well-being.
Q9002	Hearing problem?	Indicate if any obvious problems with hearing you during the interview.
Q9003	Vision problem?	Indicate if any obvious problems with seeing during the interview.
Q9004	Use wheelchair?	Indicate if the person uses any wheeled device for mobility - this could be something the person can propel her/himself, or something that another person uses as a means of mobility for the respondent.
Q9005	Use cane/crutches/walker?	Including, walking stick, cane, crutches, walker, etc.
Q9006	Have difficulties walking?	Indicate if observed difficulties with walking around.
Q9007	Paralysis?	Indicate any paralysis or obvious weakness on one side of the body, in a lower or upper limb(s).
Q9008	Cough continually?	Noticeable cough throughout the duration of the interview
Q9009	Shortness of breath?	Noticeable difficulty with breathing during the interview?
Q9010	Mental problems?	Indicate if difficulties with respondent due to mental health issues. We know this may be difficult to detect - so if obvious, note.
Q9011	Other health problems?	Indicate if person had any other health problem or condition. For example, skin problems, stomach or bladder problems. The condition(s) might have influenced the interview process.
Q9012	Amputated limb (arm or leg)?	Note if the respondent had upper or lower limb amputation.
Q9013	What is your assessment of the respondent's cooperation?	This is your subjective opinion about the respondent in the interview.
Q9014	What is your evaluation of the accuracy of the respondent's answers?	Again, this is your subjective opinion.

Continued on next page

9000 Interviewer Observations, Continued

Q0915 - Q0919 The table below provides guidelines for completing questions Q0915 to Q0919. These will help the Supervisors, Principal Investigators and WHO to improve the questionnaire and your interview process for follow-up surveys.

Question No.	Question	Guide for completion
Q0915	Questions with doubtful answers	Clearly write the number of any questions for which you felt the respondent provided a response that was unsure or inaccurate. A space is also provided for any notes about these responses.
Q0916	Questions needing follow-up or clarification from supervisor	Identify questions that you feel need attention, follow-up or clarification.
Q0917	Other problems or issues	Indicate any questions or issues during the interview that created problems - and need follow-up by the field editor/supervisor.
Q0918	What questions did the respondent find difficult or embarrassing or confusing?	Clearly write the number of questions that were uncomfortable or confusing for the respondent. Any additional notes can be added in the column to the right.
Q0919	What questions did you the interviewer find difficult, embarrassing or confusing?	Clearly write the number of questions that were uncomfortable or confusing for you, the interviewer. Clarifying notes would be helpful.

Part 7: Guide to Completing the Proxy Questionnaire

Overview

Introduction	This guide provides background information and guidance for completing each question in the Proxy Questionnaire.										
Intended audience	<p>This part is intended for those fulfilling the following roles:</p> <ul style="list-style-type: none">• Interviewer• Supervisor• Field Editor										
Intended use	<p>Use this guide in training, to prepare for the interviews, and as reference material during interviews if respondents request clarification about specific questions.</p> <p>Interviewers and supervisors should refrain from offering their own interpretations.</p>										
In this part	<p>This part covers the following sections from the Proxy Questionnaire:</p> <table><tr><th>Topic</th><th>See Page</th></tr><tr><td>Section 1. Respondent Characteristics and IQ Code</td><td>192</td></tr><tr><td>Section 2. Health State Descriptions</td><td>195</td></tr><tr><td>Section 4. Chronic Conditions and Health Services Coverage</td><td>200</td></tr><tr><td>Section 5. Health Care Utilization</td><td>205</td></tr></table>	Topic	See Page	Section 1. Respondent Characteristics and IQ Code	192	Section 2. Health State Descriptions	195	Section 4. Chronic Conditions and Health Services Coverage	200	Section 5. Health Care Utilization	205
Topic	See Page										
Section 1. Respondent Characteristics and IQ Code	192										
Section 2. Health State Descriptions	195										
Section 4. Chronic Conditions and Health Services Coverage	200										
Section 5. Health Care Utilization	205										

Section 1. Respondent Characteristics and IQ Code

Introduction

This section provides information on the characteristics of the respondent - not the proxy respondent. It also asks the proxy respondent questions about any changes in the memory and cognitive status of the respondent over the recent past. The numbering is meant to correspond with the Individual Questionnaire and as a result may not be sequential because questions have been removed.

Before asking questions, complete the Proxy Respondent Consent Form.

P1006-P1019

The table below provides a guide to completing questions P1006 to P1019.

Question No.	Question	Guide for completion
P1006	Household ID	Record household ID assigned on the coversheet in the Household Questionnaire in Q0002.
P1007	Number of respondent from household HH roster	Record the respondent's "Persons (HH member) number" from the columns in Section 0400: Household Roster.
P1007a	Number of PROXY respondent from HH roster	Record the proxy respondent's "Persons (HH member) number" from the columns in Section 0400: Household Roster.
P1007b	Interviewer ID or Supervisor ID number	<ul style="list-style-type: none"> Interviewers conducting a Proxy Respondent interview should use her/his Interviewer ID. A supervisor conducting the 5% check should indicate her/his Supervisor ID.
P1008	What is the respondent's mother tongue?	By mother tongue we mean the language the respondent learned first, the language that the respondent expressed her/himself fully in, or voluntarily would identify with.
P1009	Record sex of the respondent	<ul style="list-style-type: none"> Record the respondent's sex (male or female) Do NOT record sex of the PROXY respondent.
P1010	In what day, month and year was the respondent born?	<p>What is the respondent's birth date?</p> <ul style="list-style-type: none"> Record the numeric equivalent of this month (see Part 3). Probe if necessary by asking if it is close to a national or religious holiday. Ask in which year the respondent was born. Record the year according to the Gregorian calendar (that is 18xx or 19xx). Probe if necessary by asking if it was around a major event (such as a revolution or war), or if they know around when a sibling or other family member of theirs was born and work from that. If after probing, the proxy respondent does not seem to know, indicate '88' for day/month, '8888' for year in the boxes.
P1011	How old is the respondent now?	<ul style="list-style-type: none"> Record respondent's age in years. Probe if necessary and try to calculate out loud the number of years between the present and when the proxy respondent indicated the respondent was born. If after probing the proxy respondent is still unable to answer, write '888' in the box.

Continued on next page

Respondent Characteristics, Continued

P1006-P1019 (continued)

Question No.	Question	Guide for completion
P1012	What is respondent's <u>current</u> marital status?	<ul style="list-style-type: none"> • Ask this question without reading the options to the respondent. Emphasize that current or present marital status is needed. • If the response does not match an option, (for example, the proxy respondent says the respondent is "single") probe and select the correct response category or read the options and ask the proxy respondent to choose the best one. For example, if the respondent is currently married (but was divorced in the past), the option 'Currently married' should be recorded. • "Cohabiting" means the respondent is living with their partner but is not married.
P1015	Has the respondent <u>ever</u> been to school?	<ul style="list-style-type: none"> • "School" refers to any kind of formal schooling where basic subjects such as reading and math are taught (including home schooling) and exams are taken. • It excludes short courses (typing, sewing) or religious education such as Bible school or Koranic school. • School includes technical or vocational training beyond primary school. • If the proxy respondent indicates 'No' skip to Q1018.
P1016	What is the <u>highest level</u> of education that s/he <u>completed</u> ?	<ul style="list-style-type: none"> • Emphasize highest level of education <u>completed</u> (either at a formal school or at home). • If the respondent attended 3 months of the first year of secondary school but did not complete the year, record 'Primary school completed'. • If the respondent only attended a few years of primary school, record 'Less than primary school'.
P1018	What is her/his background or ethnic group?	<ul style="list-style-type: none"> • Ask what ethnic or cultural group the respondent identifies with (was born into). • Do not read the response options. • If the proxy respondent does not understand how to answer, then read the response options. • If none of the answers are appropriate indicate 'Other'.
P1019	Did s/he belong to a <u>religious denomination</u> ?	<ul style="list-style-type: none"> • Ask what religion the respondent practices or belongs to or identifies with. • Do not read the response options. • If the respondent's religion does not fit one of the categories or the proxy respondent is not clear on what type of response is wanted, probe by reading out the categories. • If the proxy respondent indicates a religion that is not listed as a category then write the religion name next to 'Other'. • If the proxy respondent indicates he or she is not practicing any religion, then record 'None/no religion'.

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Section 1. Respondent Characteristics and IQ Code, Continued

P1020 - P1036 The table below provides guidelines for completing questions P1020 to P1035. The IQCODE is widely used as a screening test for dementia, particularly where the subject is unable to undergo direct cognitive testing or for screening in populations with low levels of education and literacy.

Question No.	Question	Guide for completion
P1020	How long have you known [NAME]?	Insert years that the Proxy Respondent has known the respondent. If less than one year, enter "00". If the Proxy Respondent does not know, get a best estimate. This response will be used in subsequent questions.
	Compared with [10 years] ago...	Use duration from P1020 for "[10 years]" for the following questions.
P1021-P1036	...various questions about the respondent's memory and cognitive abilities.	The Proxy Respondent is replying to questions about how the respondent's memory and cognition have changed over the number of years that they have known each other (identified in P1020). The respondent's memory/cognition may have improved, not changed or gotten worse over the last number of years.

Section 2. Health State Descriptions

Introduction This section asks questions about respondents' overall health. It covers all aspects of physical and mental health, including:

- mobility
- self-care
- pain and discomfort
- cognition
- interpersonal activities
- sleep and energy
- affect
- vision
- breathing

P2000 - P2001 The table below provides guidelines for completing questions P2000 to P2001.

Question No.	Question	Guide for completion
P2000	In general, how would you rate [NAME's] health today?	<ul style="list-style-type: none">• Proxy respondent should answer according to how they consider the health of the respondent to be and give their best estimate.• Both physical and mental health must be taken into consideration.
P2001	Overall in the last 30 days, how much difficulty did s/he have with work or household activities?	<ul style="list-style-type: none">• "Activities" include household, work and school activities.• "Difficulty" means having trouble with how these are usually performed.

P2002 - P2003 The table below provides guidelines for completing questions P2002 to P2003 that relate to mobility.

Question No.	Question	Guide for completion
P2002	Overall in the last 30 days, how much difficulty did [NAME] have with moving around?	<ul style="list-style-type: none">• "Moving around" includes inside (room to room, within rooms, between levels etc), and outside.• Factor in assistive devices or personal help usually in place.
P2003	In the last 30 days, how much difficulty did [NAME] have in vigorous activities?	<ul style="list-style-type: none">• Vigorous activities may be recreational or occupational and includes heavy lifting, carrying, fast cycling, aerobics, working in the fields etc. Use SHOWCARD if necessary.• Vigorous intensity causes a large increase in breathing and/or heart rate.

Continued on next page

Section 2. Health State Descriptions, Continued

P2004 - P2006 The table below provides guidelines for completing questions P2004 to P2006 that relate to self-care.

Question No.	Question	Guide for completion
P2004	Overall in the last 30 days, how much difficulty did [NAME] have with self-care, such as bathing / washing or dressing her/himself?	<ul style="list-style-type: none"> This question refers to: <ul style="list-style-type: none"> – bathing/washing one's entire body as it is customary for the culture – all aspects of dressing the upper and lower body – activities such as getting clothing from storage areas (that is closet, dressers) and securing buttons, tying knots, etc. If the respondent has not washed in the past 30 days, ask if this is due to a health condition. If yes, record '5' for extreme/cannot do. If it is not due to a health condition but to an environmental condition, such as lack of water, record 'N/A' (not applicable) in the right margin.
P2005	Overall in the last 30 days, how much difficulty did [NAME] have in taking care of and maintaining her/his general appearance (for example, grooming, looking neat and tidy)?	This question refers to people who may have no difficulty with the basics of washing and dressing, but who may have difficulty taking care of some other aspects of their appearance, such as combing hair or putting on makeup.
P2006	Overall in the last 30 days, how much difficulty did [NAME] have in staying by her/himself for a few days (3 to 7 days)?	This question will help to determine the level of assistance the respondent may need with self-care or personal care.

P2007 - P2009 The table below provides guidelines for completing questions P2007 to P2009 that relate to pain and discomfort.

Question No.	Question	Guide for completion
P2007	Overall in the last 30 days how much of bodily aches or pains did s/he have?	"Bodily aches or pains" refer to any form of physical pain or discomfort in the body that interferes with a person's usual activities, either for a short or long period of time.
P2008	Overall in the last 30 days how much bodily discomfort did s/he have?	"Bodily discomfort" refers to general uneasiness in the body, at a level less than actual pain or soreness.
If P2007 and P2008 are both = 1, 'None' skip to P2010.		
P2009	Overall in the last 30 days how much difficulty did s/he have in her/his daily life because of her/his pain?	Determine if the pain is debilitating - meaning that the pain interferes with daily activities.

Continued on next page

Section 2. Health State Descriptions, Continued

P2010 - P2011 The table below provides guidelines for completing questions P2010 to
Cognition P2011 that relate to cognition.

Question No.	Question	Guide for completion
P2010	Overall in the last 30 days, how much difficulty did s/he have with concentrating or remembering things?	<ul style="list-style-type: none"> • "Concentrating" refers to concentrating in usual circumstances (such as 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), 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.
P2011	In the last 30 days, how much difficulty did [NAME] have with learning a new task (for example, learning how to get to a new place, learning a new game, learning a new recipe)?	<ul style="list-style-type: none"> • The intention of this question is to understand the respondent's difficulties in learning new things. • Though we may not be consciously aware, we learn new things almost everyday such as new names, routes, skills, etc.

P2012 - P2015 The table below provides guidelines for completing questions P2012 to
Interpersonal P2015 that relate to interpersonal activities.
activities

Question No.	Question	Guide for completion
P2012	Overall in the last 30 days, how much difficulty did [NAME] have with personal relationships or participation in the community?	<ul style="list-style-type: none"> • "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. • Determine if the respondent participates in these activities or whether there are barriers to doing so.
P2013	In the last 30 days, how much difficulty did [NAME] have in dealing with conflicts and tensions with others?	"Dealing with conflicts and tensions with others" refers to how well the respondent relates to others and is able to deal with conflict situations, such as strong disagreements or arguments.

Continued on next page

Section 2. Health State Descriptions, Continued

Interpersonal activities (continued)

Question No.	Question	Guide for completion
P2014	In the last 30 days, how much difficulty did [NAME] have with making new friendships or maintaining current friendships?	This includes: <ul style="list-style-type: none">• staying in touch• interacting with friends in customary/typical ways• initiating activities with friends• participating in activities when invited If Proxy Respondent reports that the respondent has not engaged in maintaining a friendship 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.
P2015	In the last 30 days, how much difficulty did [NAME] have with dealing with strangers?	In this context, getting along with people may be those whom the respondent does not know at all (strangers).

P2016 - P2017 The table below provides guidelines for completing questions P2016 to
Sleep and P2017.
energy

Question No.	Question	Guide for completion
P2016	Overall in the last 30 days, how much of a problem did s/he have with <u>sleeping</u> , such as falling asleep, waking up frequently during the night or waking up too early in the morning?	"Problem sleeping" here means inability to sleep or problems with sleeping too little or too much. Could also be difficulty waking up in the morning.
P2017	In the last 30 days, how much of a problem did you have with not feeling rested and refreshed during the day (for example, feeling tired, not having energy)?	<ul style="list-style-type: none">• More than usual, when someone would not normally feel tired. If someone has been working hard, you would expect them to be tired. "Problem" means a reduced level of energy and vitality and how it affects daily life, for example inability to complete tasks or days missed off work.

Continued on next page

Section 2. Health State Descriptions, Continued

P2018 - P2019 Affect The table below provides guidelines for completing questions P2018 to P2019 that relate to affect.

Question No.	Question	Guide for completion
P2018	Overall in the last 30 days, how much of a problem did [NAME] have with feeling sad, low or depressed?	<ul style="list-style-type: none"> • "Problem" means how these states have interfered with the respondent's ability to do certain activities because of feeling distressed. • "Sadness" is often characterized by feeling tearful, tired and hopeless and loss of interest. • Explain that "distress, sadness or worry" must be understood as occurring normally. These only become a problem when a person worries more than usual with things that she would normally not worry about.
P2019	Overall in the last 30 days, how much of a problem did [NAME] have with worry or anxiety?	<ul style="list-style-type: none"> • Determine any other negative emotional states such as feeling distressed, on edge, and tense. • "Worry or anxiety" means a person is unable to relax and tends to think disproportionately about relatively small matters.

P2020 - P2024 Vision The table below provides guidelines for completing questions P2020 to P2024 that relate to vision. If person normally wears spectacles, glasses, bifocals, contacts or other items to assist seeing either near or far, ask respondent to answer the following questions as when s/he is wearing these.

Question No.	Question	Guide for completion
P2020	When was the last time s/he had her/his eyes examined by a medical professional?	<ul style="list-style-type: none"> • Ask how long ago the respondent had an eye exam by a medical professional. • Record the duration using the response categories provided. If less than 1 year, enter '00'.
P2021	Does s/he use eyeglasses or contact lenses to see far away (for example, across the street)?	Determine if the respondent uses any assistive devices such as spectacles/glasses or contact lenses.
P2022	Does s/he use eyeglasses or contact lenses to see up close (for example at arms length, like when s/he is reading)?	See P2021.
P2023	In the last 30 days, how much difficulty did s/he have in seeing and recognising a person or object s/he knows across the road (from a distance of about 20 meters)?	<ul style="list-style-type: none"> • "Seeing and recognizing a person" means under normal circumstances. One would not be expected to recognize a person on a foggy or stormy day for example. • Factor in glasses or contact lenses.
P2024	In the last 30 days, how much difficulty did s/he have in seeing and recognising an object at arm's length (for example, reading)?	<ul style="list-style-type: none"> • Factor in glasses or contact lenses. • Consider vision under normal circumstances for example, in normal light.

Section 4. Chronic Conditions and Health Services Coverage

Introduction This section asks questions about number of chronic health and mental health conditions - and if the respondent has taken any medications or treatment for these conditions.

P4001 - P4061b Chronic conditions The table below provides guidelines for completing questions P4001 to P4061b. These follow a similar pattern to Section 4000 of the Individual Questionnaire (starting on pp. 135).

Question No.	Question	Guide for completion
P4001, P4010, P4014, P4022, P4025, P4033, P4040, P4060	Has [NAME] ever been told by a health professional that s/he has ...? <ul style="list-style-type: none"> • arthritis • stroke • angina • diabetes • chronic lung disease • asthma • depression • hypertension (raised blood pressure) • cataracts • oral health • injuries • cervical cancer and breast cancer screening 	<ul style="list-style-type: none"> • Identify individuals with a diagnosed case of the listed condition. This means having been told by a health care professional that she/he has the condition. • If the Proxy Respondent does not understand what the condition is, refer to Section 4000 for additional details. • If the Proxy Respondent is unsure whether the respondent has ever been afflicted with the condition, use probing techniques. • After probing - if Proxy Respondent replies, 'Don't know' - write 'DK' or '88' in right margin.
P4002a, 11a, 15a, 23a, 26a, 34a, 41a, 61a	Has s/he been taking medications or other treatments for it in the <u>last 2 weeks</u> ?	<ul style="list-style-type: none"> • Determine if the respondent is currently under treatment for the condition. • The time frame for this question is the last 2 weeks. • A 'Yes' is appropriate only if the respondent was taking medications for the condition at any time during the last two weeks. It is not appropriate if the proxy respondent says the respondent usually takes medications but for some reason did not during the last 2 week period.
P4002b, 11b, 15b, 23b, 26b, 34b, 41b, 61b	Has s/he been taking any <u>medications or other treatment</u> for it during the last 12 months?	<ul style="list-style-type: none"> • Determine if the respondent has taken medications or received other treatments for the condition during the last 12 months. The respondent could have taken medications in the recent past, but does not currently (for example, 'No' to 'a' above, but 'Yes' to this Q.

P4024, P4032 A number of conditions have specific questions and guidelines for completing are included below.

Continued on next page

Section 4. Chronic Conditions and Health Services Coverage, Continued

P4024, P4032 (continued)

Question No.	Question	Guide for completion
P4024 - diabetes	Has s/he been following a special diet, exercise regime or weight control program for <u>diabetes</u> during the last 2 weeks?	Has the respondent followed this type of treatment for diabetes as recommended by health professional?
P4032 - tuberculosis	In the <u>last 12 months</u> , has s/he had a <u>tuberculosis (TB) test</u> ? I mean, has a doctor examined her/his sputum (taken a sample of the substance spit out from a deep cough and sent it to a laboratory for analysis) or made an x-ray of her/his chest?	<ul style="list-style-type: none"> • Identify if respondent has had tuberculosis (TB) and whether she/he has had a TB test in the last 12 months. • Methods of detecting TB include examination of the sputum (that is, when a health care professional takes a sample of the substance spit out from a deep cough and sends it to a laboratory for analysis), and X-ray picture of the chest.
P4032a	...medications or treatment in last 2 weeks?	See 'a' above.
P4032b	...medications or treatment in last 12 months?	See 'b' above.
P4063 - cataracts	In the <u>last 5 years</u> , was [NAME] diagnosed with a <u>cataract</u> in one or both of her/his eyes (a cloudiness in the lens of the eye)?	<ul style="list-style-type: none"> • Identify those respondents who were diagnosed in the <u>last 5 years</u> (only) as having cataracts. • Record 'Yes' if the respondent was diagnosed for cataracts in either one eye or both eyes within the last 5 years. • If the respondent was not diagnosed for cataracts in the last 5 years, skip to P4066.
P4064	In the last 5 years, has s/he had <u>eye surgery</u> to remove this cataract(s)?	<ul style="list-style-type: none"> • Emphasize that the time period for the medical intervention is only the last 5 years. Other time periods prevent the results from being comparable.
P4067 - oral health	Has s/he <u>lost all</u> of her/his natural teeth?	Determine if all the respondent's natural teeth are gone. They may have been replaced with dentures or implants.
P4068	During the last 12 months, did s/he have any problems with her/his mouth and/or teeth?	If the Proxy Respondent indicates that the respondent has not had any problems in the last 12 months, record 'No' and skip to P4069.
P4068a	...medications or treatment in last 2 weeks?	See 'a' above.
P4068b	...medications or treatment in last 12 months?	See 'b' above.

Continued on next page

Section 4. Chronic Conditions and Health Services Coverage, Continued

P4069 - P4077a Injuries The table below provides guidelines for completing questions P4070 to P4078a that relate to injuries.

Question No.	Question	Guide for completion
P4069	In the last 12 months, has s/he been involved in a road traffic accident where s/he suffered from bodily injury?	<ul style="list-style-type: none"> • Identify if respondent was involved in a road traffic accident resulting in bodily injury. • If the Proxy Respondent first answers 'No', probe by saying, "this could have been an accident in which they were involved either as the occupant of a motor vehicle, or when riding a motorcycle or bicycle, or walking." • If multiple accidents occurred, ask the Proxy Respondent to think about the most recent accident the respondent had and describe the results of that accident. • "Bodily injury" could be any type of injury (even if it was not necessarily visible to the person at the time of the accident). • Only record accidents that occurred in the last 12 months. • If the respondent has not been involved in any road traffic accident in the past 12 months, record 'No' and skip to P4073.
P4070	How did the injury happen? Was it an accident, did someone else do this to her/him, or did s/he do this to herself/himself?	<ul style="list-style-type: none"> • Determine the motive behind the injury. • It is important to know whether the injury was inflicted on purpose or whether it was unintentional (accidental).
P4071	Did s/he receive any medical care or treatment for her/his injuries?	Determine if the respondent received appropriate medical care or treatment for the injuries.
P4072	Did s/he suffer a physical disability as a result of being injured?	If 'No', skip to P4073.
P4072a	In what ways was s/he physically disabled?	Circle all relevant options.

Continued on next page

Section 4. Chronic Conditions and Health Services Coverage, Continued

Injuries (continued...)

Question No.	Question	Guide for completion
P4073	In the last 12 months, has s/he had any other event where s/he suffered from bodily injury?	<ul style="list-style-type: none"> • Identify if respondent was involved in an accident (other than a traffic accident) resulting in bodily injury. • If the Proxy Respondent first answers 'No', probe by saying, "any accidents due to a fall, burn, poisoning, submersion in water, or by a firearm or sharp weapon, or an act of violence from another person?" • If multiple accidents occurred, ask the Proxy Respondent to think about the most recent accident of the respondent and describe the results of that accident. • "Bodily injury" could be any type of injury (even if it was not necessarily visible to the person at the time of the accident). • Only record accidents that occurred in the last 12 months. • If the respondent has not been involved in any accident in the past 12 months, record 'No' and skip to P4078.
P4073a	Where was s/he when s/he was injured?	Identify the location where the accident occurred.
P4074	What was the cause of this injury?	<ul style="list-style-type: none"> • Work with the Proxy Respondent to try to categorize the cause of the injury to the respondent. • If not listed, clearly print the cause in '87 Other, specify:'. • See Section 4000 for more details about the specific causes listed as response categories.
P4075	How did the injury happen? Was it an accident, did someone else do this to her/him, or did s/he do this to herself/himself?	<ul style="list-style-type: none"> • If this does not fit into one of the main categories provided, circle 87 'Other, specify:', and clearly write out the reason in CAPITAL letters.
P4076	Did s/he receive any medical care or treatment for her/his injuries?	<ul style="list-style-type: none"> • Determine the motive behind the injury. • It is important to know whether the injury was inflicted on purpose or whether it was unintentional (accidental).
P4077	Did s/he suffer a physical disability as a result of being injured?	If 'No', skip to P4078.
P4077a	In what ways was s/he physically disabled?	<ul style="list-style-type: none"> • Ask the Proxy Respondent to describe the cause of the injury. • If this does not fit into one of the main categories provided, circle 87 'Other', and clearly write the reason in CAPITAL letters.

Continued on next page

Section 4. Chronic Conditions and Health Services Coverage, Continued

P4078 - P4080 The table below provides guidelines for completing questions P4079 to
Cervical and P4081 that relate to cervical cancer and breast cancer in women.
breast cancer

Question No.	Question	Guide for completion
P4078	When was <u>the last time</u> she had a <u>pelvic examination</u> , if ever? (By pelvic examination, I mean when a doctor or nurse examined her vagina and uterus?)	<ul style="list-style-type: none"> • This question is for women only. • Ask how long ago the respondent last had a pelvic examination. • If the Proxy Respondent is unsure what is meant by a pelvic exam, 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 and feel inside the vagina.” • If the respondent had a pelvic examination but the proxy respondent does not remember when exactly the examination took place, probe for the approximate elapsed time since the last examination. • Determine if the last exam was WITHIN THE LAST 3 YEARS. • If the respondent did not have an exam in the last 3 years, skip to P4080.
P4079	The last time she had the pelvic examination, did she 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 her vagina, take a sample and send it to a laboratory?)	<ul style="list-style-type: none"> • This question is for women who reported having had a pelvic examination in the last 3 years. • Identify those respondents who had a PAP smear test. • If the Proxy Respondent is unsure, read the following description, “a PAP smear test is when a medical professional uses a swab or stick to wipe cells from the cervix, the opening lining of the womb (uterus). These cells are then sent to a lab to determine if they are abnormal. The test is used to screen for cervical cancer, but can detect other gynaecologic problems.”
P4080	When was the last time she had a mammography, if ever? (That is, an x-ray of the her breasts taken to detect breast cancer at an early stage.)	<ul style="list-style-type: none"> • This question is only for women. • Identify the last time the respondent had a mammography. • If the Proxy Respondent does not understand mammography read the following description(s), “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 allowing for lumps to be detected by the X-ray”.

Section 5. Health Care Utilization

Introduction This section assesses experiences with the health system. In particular, questions are asked on:

- needing health care
- inpatient hospital care
- outpatient care and care at home
- responsiveness of health services.

P5001 - P5004 The table below provides guidelines for completing questions P5001 to P5004.

Question No.	Question	Guide for completion
P5001	When was the last time that [NAME] needed health care?	<ul style="list-style-type: none">• “Needed” means the last time the respondent had a health problem and required a health professional.• Record years and/or months. If less than 1 year ago, enter ‘00’ for years ago and enter months ago. If less than one month ago, enter ‘00’ for years ago and months ago, but continue to P5002.• If more than 3 years ago, or never needed go to the next section.
P5002	The last time s/he needed health care, did s/he get health care?	If ‘Yes’, skip to P5004. If ‘No’, continue to P5002a and P5003.
P5002a	What was the main reason s/he needed care, even if s/he did not get care?	<ul style="list-style-type: none">• The Proxy Respondent must choose only one category.• If none of the categories fit, or you cannot choose a category from what the Proxy Respondent says, select ‘87 Other, specify:’, and clearly print the reason given by the Proxy Respondent.
P5003	Which reason(s) best explain why s/he did not get health care?	<ul style="list-style-type: none">• Read each item on the list and get the Proxy Respondent to answer yes or no to each item.• Circle each reason the Proxy Respondent mentions spontaneously.
P5004	Where did s/he go most often when s/he felt sick or needed to consult someone about his/her health?	<ul style="list-style-type: none">• Record only one location in which the respondent received health care over the past 3 years.• Read the response categories to the Proxy Respondent if having troubles responding.• Use the local term for traditional healer.

Continued on next page

Section 5. Health Care Utilization, Continued

P5005 - P5008 The table below provides guidelines for completing questions P5005 to P5008 that relate to inpatient hospital care.

Question No.	Question	Guide for completion
P5005	In the last 3 years, has s/he stayed overnight in a hospital or long-term care facility?	<ul style="list-style-type: none"> • "Overnight" stays could be in a hospital, hospice or long-term care facility (old persons home, nursing home or other name – use local terms). • If 'No', skip to P5026.
P5006	When was her/his last overnight stay in a hospital or long-term care facility?	<ul style="list-style-type: none"> • Ask the Proxy Respondent to try to remember the date of the respondent's last overnight stay (anytime in the last 3 years, but focus on the most recent overnight stay). • If the Proxy Respondent only knows a date - calculate how long ago and repeat back for verification. • If the respondent stayed overnight when visiting someone in hospital or because a child of theirs was in hospital then answer 'No' to this question. • If less than 1 year or 1 month - enter "00" in the appropriate boxes. • If more than 3 years ago, skip to P5026.
P5007	Over the last 12 months, how many different times was she/he a patient in a hospital/long-term care facility for at least one night?	The Proxy Respondent will need to count the number of times the respondent was hospitalised. See Section 4000 if more details are needed.
P5008	What type of hospital or facility was it? Remember I am asking now about her/his last (most recent) overnight stay.	<p>Start by asking the Proxy Respondent to remember the respondent's last (most recent) overnight stay. Circle the type of hospital or health care facility, read the categories.</p> <ul style="list-style-type: none"> • "Public" hospital is government funded. • "Private" hospital is non-government funded. • "Charity or church-run hospital" includes those funded by various non-governmental organizations or religious affiliation. • "Old person's home or long-term care facility" could be government run or private. <p>If these categories do not fit, clearly print the type of facility in '87 Other, specify:'.</p>
P5008a	Which reason best describes why s/he was last hospitalized?	<ul style="list-style-type: none"> • These questions ask details about the respondent's most recent overnight stay in a hospital or other health care facility <u>in the last 12 months</u>. • Ask the proxy respondent about the respondent's reason(s) for staying overnight.

Continued on next page

Section 5. Health Care Utilization, Continued

P5026 - P5029c The table below provides guidelines for completing questions P5026 to P5029c that relate to outpatient care and care at home.

Question No.	Question	Guide for completion
P5026	Over the last 12 months, did [NAME] receive any health care NOT including an overnight stay in hospital or long-term care facility?	<ul style="list-style-type: none"> Determine if the respondent received any outpatient or home health care. This could be health care received in a clinic, hospital, dispensary, private office or at home, for example, but care which does not necessitate an overnight stay. The types of people they might have seen include: medical doctor (gynaecologist, psychiatrist and other specialists), nurse, midwife, dentist, physiotherapist or chiropractor, traditional medicine practitioner, home-health care provider, health visitor, etc.
P5027	In total, how many times did [NAME] receive health care or consultation in the last 12 months?	The Proxy Respondent will count the number of times the respondent received health care - not including hospitalisations. See Section 4000 if more details are needed.
P5028	What was the last health care facility s/he visited in the last 12 months?	See P5008 for details.
P5029	Which was the last health care provider s/he visited?	Read the list as needed. The respondent may have seen multiple health care providers (for example, in the outpatient part of a hospital), but try to get the main health care provider seen (person who made health care decisions, provided advice or gave treatment).
P5029a	What was the sex of the [health care provider]?	Indicate male or female health care provider - according to response to P5029.
P5029b	Was this visit to [health care provider] for a chronic (ongoing) condition, new condition or both?	Attempt to determine the reason for the visit - indicate if for an ongoing or long-time (chronic) condition the person has had (for example diabetes), a new condition (fever) or both (new infection in the leg caused by complications from diabetes).
P5029c	Which reason best describes why [NAME] needed this visit?	<ul style="list-style-type: none"> One answer only. This is the reason for the most recent outpatient health care visit (not including overnight stay). Use the SHOWCARD in the Appendix. If the reason is not in the categories listed, clearly print the reason in, '87 Other, specify:'.

Part 8: Editing Questionnaires and Preparing for Data Entry

Overview

Introduction Editing and cleaning the questionnaires should be done while still in the selected sampling area (cluster, EA or other) and once done indicates the questionnaire results are ready for entry into the data entry programme. When an interview is completed and all materials (questionnaires and blood sample (if any)) are transferred from an interviewer to a field editor/supervisor, the editing process begins. The guidelines provided in this part are to assist with quality control measures.

Aim The aim is to have clear, codeable responses to be able to record for in the data entry software for every question.

Intended audience This part is intended for those fulfilling the following roles:

- Interviewer
 - Field Editor
 - Supervisor
 - Principal Investigator
 - Data Editor
 - Data Entry Clerk
 - WHO (Geneva) SAGE Team.
-

In this part This part covers the following topics regarding editing the questionnaires.

Topic	See Page
Core Roles and Responsibilities	210
General Guidelines	211
Editing and Quality Assurance	213
Data Coding for Open Ended Questions	217

Core Roles and Responsibilities

Introduction

In addition to the general roles and responsibilities identified in Part 2, this section identifies the specific roles and responsibilities for editing the completed questionnaire data and preparing it for data entry.

Summary of responsibilities

The table below provides a summary of each of the core roles and their responsibilities.

Role	Responsibility
Interviewer	Check each completed questionnaire after each interview. Keep track of non-response households.
Field Editor	Editing and preparing questionnaires for data entry by reviewing each questionnaire, blood collection card and blood spots for accuracy and completeness. Any notes about data quality or editing can be made on the questionnaire in an agreed ink colour.
Supervisor	<ul style="list-style-type: none">• Completing retest questionnaires for 10% of the sample and general quality control.• Following-up all proxy respondent questionnaires to ensure proxy interviews were warranted.• Revisiting 5% of completed Individual questionnaire respondents, and completing a proxy respondent questionnaire for validation.
Principle Investigator	Monitoring completed questionnaires and general quality control. Monitoring completed questionnaires for quality control. Arranging data transfer to WHO on bi-monthly basis.
Data Editor	<ul style="list-style-type: none">• Verifying codeable data.• Identifying missing data patterns and inconsistencies.
Data Entry Clerk	<ul style="list-style-type: none">• Entering data into the data processing software.• Logging and seeking resolution to data quality issues (from Data Editor, Supervisor, Principal Investigator etc. as appropriate).• Data Entry Clerk should alert data editor, data manager, supervisor or primary investigator of any data quality issues or problems identified during data entry.• Providing assistance and support for errors and complications.
WHO Geneva	For technical support, the Principal Investigators can forward details of all errors and complications requiring resolution to Dr Paul Kowal, kowalp@who.int , or the WHO SAGE Team.

General Guidelines

Introduction

When an interview is completed and all materials (questionnaires and blood sample (if any)) is transferred from an interviewer to a field editor/supervisor, the editing process begins. The guidelines are provide to assist with quality control measures.

The guidelines are divided into two sets of instructions. The first set describes the general rules and steps for editing which should be applied throughout the instruments, and the second set is an edit checklist which instructs the editor to look at specific items in the SAGE instruments for accuracy. Editing and cleaning the questionnaires should be done while still in the selected sampling area (cluster, EA or other) to help obtain the highest quality results possible.

General Editing Steps

Guidelines

Listed below are some general guidelines and mark up conventions that should be observed while editing the questionnaires. Full details on the questionnaire conventions and how to record information are provided in Part 3, Interviewer's Guide.

Topic	Guidelines
Erasing information	Never erase any information written into the questionnaire by interviewers, respondents, editors, or anyone else. The notes in the questionnaire provide documentation of the interaction and they are critical to maintaining the integrity of the data. The only exception to this is removing respondent or respondent family names, addresses, telephone numbers, or other identifying information. Use a heavy marker to black out this information.
Disregarding a response	A single line through a circled response category or written response is the preferred way to indicate an editing decision to disregard a circled response or hand-written response. It should <u>always</u> include a note, "Do not enter," or "Do not code," etc. If an editing decision is reversed, if more than a single line through the text. The correct response should then be indicated (circled or written).
Marking up in colours	The Field Editor should use a different colour pen than the Interviewer or Supervisor. This way it will be apparent by the colour of the pen used whether a comment came from an Interviewer, Supervisor, or Editor.
Underlining	Underlining is the preferred way to indicate important text or editing decisions made in the questionnaire. Further emphasis can be made by writing in "Enter this," or "Code this," etc., and drawing an arrow to the text.

Continued on next page

General Guidelines, Continued

General guidelines, (continued)

Topic	Guidelines
Missing responses	When an individual response that should have been recorded does not appear in the questionnaire, record '9', '99', '999'... as is appropriate to the width of the field. This applies to other items which should have been asked, but that are missing for no apparent reason. Refusal to answer is recorded as '97'. Not applicable is recorded as '98'.
Don't Know	If the final response to an individual question is “Don’t Know”, record -8, 8, 88, etc. to fit the width of the field, rather than leaving the question blank (indicates missing).
Numbers	<p>Check all number boxes are filled from the right side. For example, the number '50' would be entered as the following:</p> <p><input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>For expenditures and income, round to the nearest whole number. For age, dates and time - confirm that each digit is included and makes sense (for example, age not greater than 120 years, dates are within timeframe and are in the format dd/mm/yy, times are sequential and increasing over the course of the questionnaire).</p>
Open ended questions	Ensure written responses to all open-ended questions and "Other, specify categories are legible.
Codes	Response categories for some questions in the SAGE questionnaires appear very close together. Be sure that one code is clearly marked as the response (unless the question is designed to accept multiple responses).
Skip instructions	Verify that all skip patterns were followed accurately - responses to questions asked in error should be crossed out (crossed out), and noted “do not enter.” Missing data should be assigned the appropriate codes.
Corrections	Corrections to interviews need to be done in the field
Problems	Problem questionnaires should be set aside for review with a Supervisor, Data Manager or Primary Investigator.

Edit log

Keep track of completed questionnaires in a separate log. This log will be useful for monitoring the status of interviews, and planning workloads. The log should be kept in a location near the questionnaires so that anyone with a question can check the log. This is especially important if more than one person is examining the questionnaires at the same time.

The log should include:

- household ID
- date edited
- editor's name
- date delivered to data entry
- any special notes about the case.

Editing and Quality Assurance

Introduction Editing and quality assurance is to be carried out for every completed survey questionnaire.

Procedure Follow the steps below to check, edit and quality assure each completed questionnaire.

Step	Action
1	Read the Interviewer Observation sections (0900 and 9000). These observations will hopefully provide context for the interview interaction and will alert you to circumstances helpful in identifying problems.
2	Check non-response for selected households - and check Section 0350 for call record and result code. Check to see if the interviewer was able to complete at least the Household Roster (Section 0400). Whatever the outcome of the non-response, clearly document reasons for non-response and other details about the dwelling and location (Sections 0100, 0200 and 0300).
3	Review for missing data as soon as they are received from the field. Check each question, which includes verifying skip patterns for accuracy (from simple skips like Q0503 to more complex skips after Q4032b or Q4044). Those that have large blank sections that should have been filled in, botched skip patterns or other problems the Field Editor cannot resolve should be noted as early possible in the event that a household needs to be revisited to complete the questionnaire.
4	Check time begin and time end for each section. Should be legible, completed and sequential.
5	Make sure that Q1006 for each individual questionnaire matches the Household ID from Q0002.
6	If Q0005 is '2' or '3' - check Section 0350 to make sure calls records are completed.
7	Compare Section 0100 names and codes to Appendix A0100 lists.
8	Compare Section 0200 numbers to Appendix A0200 lists.
9	Ensure that fields in Section 0300 are complete and printing is legible. The address fields should be completed so that if you need to return to the household with only the address, you would be able to do so.
10	Check that the Q0401 corresponds to the number of column numbers completed in the HH roster (Person (Household Member) number 01-14).

Continued on next page

Editing and Quality Assurance, Continued

Procedure (continued)

Step	Action
11	The number listed in Q0422 should correspond to the number of responses in Q0423 and Q0424. Check that a Verbal Autopsy is completed for each death identified.
12	If this interview was a pre-selected household for an individual respondent aged between 18 and 49 years, the "Person (Household member) number" from the Household Roster (Section 0400) corresponding with this selected person, should be written in Q0451 in Section 0450 and Q1007 in the Individual Questionnaire. For pre-selected Households scheduled for 50+ respondent, all household members aged 50 years and older will be interviewed. the "Person (Household member) number" from the Household Roster (Section 0400) corresponding with this selected person, should be written using Q0451-Q0456 in Section 0450 and Q1007 in the Individual Questionnaire.
13	For Q0602, Q0605, Q0608, Q0611, Q0613, Q0615, Q0720, Q0721, and Q0723 - many of these questions need two responses for a complete response. For each 'yes' response in Column A, make sure that follow-up question in Column B is completed. If 'No', column B should be blank. Check that skips were followed accurately.
14	Section 0800. Verify that a number is entered OR Don't know data code is circled for each item. Check that numbers are clearly written, right-justified (see Step 10 in the General Edit guideline on page 21) & amounts are sensible.
15	If Verbal Autopsy (Section 0910) was needed for a household, check that Verbal Autopsy Questionnaire is completed and the Time Begin and Time End were completed. The Household ID from SAGE (Q0002) and Row Number from the WHS household roster (Q0400 through Q0413) should be included.
16	Check decision making point - Individual or Proxy Respondent. Review Q1001 through Q1005 - if Proxy Respondent - check that the Proxy Respondent Questionnaire is completed - ensure that P1006 (Household ID) is recorded. This questionnaire is then passed to the Supervisor for follow-up and review.
17	Check Q1006 - Household ID is correctly copied from Household Questionnaire. Check Q1007 for the correct Person (HH member) number.
18	Check that responses in the Section 0450 (Household Roster) match responses in Section 1000 (Socio-Demographic Characteristics): Sex (Q0406 and Q1009) Age (Q0407 and Q1011) Marital status (Q0408 and Q1012) Education (Q0409 and Q1016)

Continued on next page

Editing and Quality Assurance, Continued

Procedure (continued)

Step	Action
19	Check Q1010, Q1011, Q1013, Q1014, Q1017, Q1021, Q1027, Q1031 are completed (if no skip) and legible.
20	Check Q1502, Q1502a, Q1505, Q1505a, Q1510, Q1512, Q1513 are completed (if no skip) and legible.
21	Check skip pattern between Q2007, Q2008 and Q2009.
22	Check Functioning Assessment (Q2025-Q2049)- this table may be difficult to complete - check to make sure each question has a response circled.
23	Check that Q2101 to Q2120 are completed.
24	Check all written numbers and text in Section 2500. Review all "Notes", clarify where needed.
25	Check Digit Forward and Digit Backwards - Trial 2 is completed for a Series only if Trial 1 failed (<i>Trial 1 Correct?</i> is 'No'). If Trial 1 and Trial 2 failed - stop and record score. Check Q2534 and Q2535 - should be equal to the number of the last Series completed correctly.
26	Check Q3003, Q3004, Q3006, Q3006a, Q3009 (use Appendix A3000B), Q3011, 12&13, 17&18, 20&21, 23&24, 26&27, 29&30, and Q3031 are completed (if no skip) and legible. Q3009 - make sure that verbatim responses recorded are accurately translated into number of drinks using the conversion table in Appendix A3000B.
27	Check difficult skip pattern between Q4004 and Q4005. Check that Q4009 does not exceed 30 days. Check Q4020 for accurate circling of location of pain. Check difficult skip pattern between Q4032b and Q4032c. Check difficult skip pattern in Q4040 and before Q4045. For female respondents, check Q4078 and Q4080.
28	Check Q5001. Check skip patterns for accuracy. Check Q5006, Q5007, Q5008a, Q5009a, Q5011, Q5012, Q5027, Q5028a, Q5031, and Q5033 are completed (if no skip) and are legible.
29	Check time variables in Section 7000 (for example, Q7011, 12, 13, 17, 18...) Check that at least 3 activities were covered and documented Q7011 through Q7111 . Check skip patterns for accuracy. Check that all respondents complete Q7501 through Q7534. Check Q7518 and Q7520.

Continued on next page

Editing and Quality Assurance, Continued

Procedure (continued)

Step	Action
30	Check Q8003 - should not exceed number in Q0412. Q8004 should be the Person (HH member) number from Section 0400. Check that the table for "Caregiving to Adults in the Household" Q8004 to Q8011 is completed accurately. One person aged 18 years or older per column. This can be caregiving for any reason - not just HIV/AIDS related. Check Q8012 (is not greater than 24:00) and Q8013 are completed and legible.
31	FOR RETEST QUESTIONNAIRES - check to make sure that all questions are completed and accurately recorded. Verify that skip patterns are correctly followed.
32	The Field Editor should put her/his initials, date completed edits and her/his ID in the space provided at the bottom of Section 0000 on each questionnaire s/he completed. Other survey staff will then be able to follow-up should a question arise.

Continued on next page

Editing and Quality Assurance, Continued

Data Coding for Open Ended Questions

Introduction For open ended questions the interviewer records verbatim, the response provided by the respondent. These responses are not pre-coded. In order to make these data usable and accessible to the research team, these text responses need to be coded – whenever possible – to a set of standard numeric code values.

Categories of open ended question There are generally the following three basic categories of open ended question:

- pre-coded lists where international standard classifications apply
 - pre-coded lists with an "other, specify" category
 - truly open ended questions.
-

Required skills It is recommended that each research team train and utilize a core staff of coders, who can become very familiar with the code frames and with the question objectives. Some specific items require review by the Principal Investigator, and others can be handled by the data entry staff.

For the Verbal Autopsy, significant training and coding will be required. The QxQ guide for the VA is included with the Questionnaire.

Standard classifications For some pre-coded lists, there are international standard classifications that can be used. For example, occupation coding for Q1027, Q1031 and Q1510 will use the International Standard Classification of Occupations (ISCO-88) from the International Labour Organization as a coding scheme.

Procedure Follow the steps below to process, code and check the open ended data.

Step	Action
1	Review all open-ended responses and where "other, specify" responses have been recorded verbatim, code back into the pre-coded categories.
2	Review the residual open-ended responses with the coding supervisor and the Principal Investigator to determine whether any additional structured response codes can be created that accurately describe the content of the open-ended responses.
3	Once new structured categories have been created, code the data to these categories and key into the data file.
4	Prepare a memo describing the new codes for all open-ended variables.
5	Data Supervisor/Manager reviews ALL coding work by checking 10% and provides feedback on performance to the data entry team.

Part 9: Forms and Reference Material

Overview

Introduction	The forms provided in this Part are to assist interviewers with their interviews.
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Pictorials and SHOWCARDS	For a full set of all the SAGE Appendices including SHOWCARDS and pictorials to be used during the interviews, please refer to the separate SAGE Appendices document available on CD ROM and in hard copy.
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Note: These files are too large to include in this QxQ.

In this part	This part includes the forms and materials listed in the table below. For the Appendices, refer to SAGE Appendices document for Pictorials and SHOWCARDS.
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Notification of WHO SAGE Study Visit



 Notification of WHO SAGE Study Visit		
<p>Today, interviewers and other survey staff from [enter INSTITUTION NAME HERE] visited your household to conduct a survey of adult members of your dwelling on issues related to health and well-being. We will try and return on the date indicated below. If this is not convenient, please contact us to make a suitable time for the survey.</p>		
Date of Visit		
Household Number		
Next Visit	Day/Date:	Time:
Contact		
<site> Ministry of Health, <address>		



 Notification of WHO SAGE Study Visit		
<p>Today Ministry of Health employees visited your household to conduct a survey of people aged 18 years and older on health issues. We will try and return on the date indicated below. If this is not convenient, please contact us to make a suitable time for the survey.</p>		
Date of Visit		
Household Number		
Next Visit	Day/Date:	Time:
Contact		
<site> Ministry of Health, <address>		

Respondent Information Form

Introduction This form describes what participation in the WHO SAGE survey means.

Title of survey The title of this survey is the Study of Global Ageing and Adult Health (SAGE).

Aim of the survey The aim of the survey is to measure and be able to compare, well-being, happiness and quality of life among older people in populations around the world.

Data collection methods We will visit individual households and use a questionnaire to collect information from [insert sample size] participants throughout the area in which the survey is being conducted.

What's involved The table below shows each of the steps involved. You will be given time to consider your participation.

Step	Action
1	We will describe the SAGE study approach to you.
2	You may ask any questions you may have.
3	We will ask you to sign a consent form.
4	You will be asked to respond to some questions about your health
5	You will then be asked to participate in Step 2. This will involve a Ministry of Health employee taking some simple measurements of your: <ul style="list-style-type: none">• Height• Weight• Waist circumference• Blood pressure
6	You may also be asked to participate in Step 3. This will involve taking a small amount of blood from a vein in your arm to test for sugar and fat levels in your blood. This may cause some mild pain.

Timeframe It is estimated that Step 1 and 2 of the survey will take approximately 1 hour.

Community benefits The results of this study will be used to assist the Ministry of Health in developing public health programmes that target efforts to lower the risk factors that lead to chronic non-communicable diseases.

Continued on next page

Respondent Information Form, Continued

Your rights

It is your right to:

- decline to take part in the study,
 - withdraw your consent at any time, and
 - decline to answer any questions in the interview that you do not wish to answer.
-

Confidentiality

You will provide your name and contact information so that you can be contacted if there is any need to follow up with you after the survey is conducted.

Your participation and data provided will be completely confidential.

Your name will not be used in any report of the study.

Results

The results of this survey will be used to help plan strategies in reducing the risk factors that contribute to chronic non-communicable diseases in your community.

The results will be published in research publications, media briefings, fact sheets, and reports and can be made available to you through the local researchers.

Ethical approval

This study has received ethical approval from the Research Ethics Review Committee of [insert name of institution and of location].

Consent Form

Dear Participant,

Random selection

You have been randomly selected to be part of this survey and this is why we would like to interview you. This survey is conducted by the World Health Organization in collaboration with the Ministry of Health and the WHO Regional Office and will be carried out by professional interviewers from (name of institution). This survey is currently taking place in several countries around the world.

Confidentiality

The information you provide is totally confidential and will not be disclosed to anyone. It will only be used for research purposes. Your name, address, and other personal information will be removed from the instrument, and only a code will be used to connect your name and your answers without identifying you. You may be contacted by the survey team again only if it is necessary to complete the information on the survey.

Voluntary participation

Your participation is voluntary and you can withdraw from the survey after having agreed to participate. You are free to refuse to answer any question that is asked in the questionnaire. If you have any questions about this survey you may ask me or contact (name of institution and contact details) or (Principal Investigator at site).

Consent to participate

Signing this consent indicates that you understand what will be expected of you and are willing to participate in this survey.

Read by Participant		Interviewer	
Agreed		Refused	

Signatures

I hereby provide INFORMED CONSENT to take part in the Study on Global Ageing and Adult Health (SAGE). For participants under 21 years old, a parent or guardian must also sign this form.

Name:

Sign:

Parent/Guardian:

Sign:

Witness:

Sign:

Country-Specific Adaptations - Summary

	Ghana	South Africa	Mexico	Russian Federation	China	India
	LOW	HIGH	HIGH	LOW*	LOW	LOW
SAGE Q#						
Q0503	# of rooms	# of rooms	# of rooms	# of rooms	# of rooms	# of rooms
Q0701	# of chairs	# of televisions	# of televisions	# of chairs	# of televisions	# of chairs
Q0702	# of tables	# of tables	Security system in your home	Security system in your home (alarm, reinforced doors, guards, etc.)	# of tables	# of tables
Q0703	# of cars (vehicles)	# of cars (vehicles)	# of cars (vehicles)	# of cars (vehicles)	# of cars/vehicles (including trucks and minibus)	# of cars (vehicles)
Q0704	Electricity	Electricity	Electricity	Electricity	Electricity	Electricity
Q0705	Bicycle	Bicycle	Bicycle	TBA	Bicycle	Bicycle
Q0706	Clock	Built-in kitchen sink	Built-in kitchen sink	TBA	Microwave oven	Clock
Q0707	Bucket	Hot running water	Hot running water	TBA	Hot running water	Bucket
Q0708	Washing machine	Washing machine	Washing machine	TBA	Washing machine	Cot / bed / mattress
Q0709	Dishwasher	Dishwasher	Dishwasher	Dishwasher	Dishwasher	Dishwasher
Q0710	Refrigerator	Refrigerator / freezer	Refrigerator	Refrigerator	Refrigerator	Refrigerator
Q0711	Fixed line telephone	Fixed line telephone (Telkom)	Employ someone in house who is not a member of your family (gardener, cook, cleaner, driver etc.)?	Fixed line telephone	Fixed line telephone	Fixed line telephone
Q0712	Mobile phone	Mobile phone	Mobile phone	Mobile phone	Mobile phone	Mobile phone
Q0713	Television	Radio	Bullock cart / animal drawn cart or sled	Television	VCR (video) or DVD player	Television
Q0714	Computer	Computer	Computer	Computer	Computer	Computer
Q0715	Radio	HiFi or music centre (stereo system)	HiFi or music centre (stereo system)	Employ someone in house who is not a member of your family (gardener, cook, cleaner, driver etc.)?	Radio	Radio / tape or CD player
Q0716	Livestock (cattle, goats, pigs, poultry)	Livestock (cattle, goats, pigs, poultry)	Livestock (cattle, goats, pigs, poultry)	TBA	Livestock (cattle, goats, pigs, poultry)	Livestock (cattle only)
Q0717	Sewing machine	Sewing machine	Internet access in home	Internet access in home	Internet access in home	Sewing machine
Q0718	Tractor	Motorbike	Motorbike	TBA	Air-conditioning system in home	Moped / scooter / motorcycle
Q0719	Own a second home?	Bullock cart / animal drawn cart or sled	Own a second home?	Own a second home?	Heating system in home	Bullock cart / animal drawn cart

Highlighted = common asset items across all participating countries.

*Russian Fed used HI income assets for Q0715-Q0719 in WHS

Questionnaire Rotations

Random selection

One respondent completes only one rotation (set) of the questionnaire. If multiple individual respondents in a household - they all complete the same rotation set.

Rotations are used to decrease interview time for each respondent and decrease interview burden for interviewers.

Principal Investigator

The PI should attempt to match the vignette set completed by follow-up respondents from the World Health Survey to the rotation set used for the SAGE interview. WHO provided the survey PI with an Excel sheet gives the list of rotation codes completed by the follow-up respondents from the WHS. It also provides ID codes for new respondents and the assigns a rotation set.

The PI will be responsible for providing this information to the Supervisors and Interviewers.

Set	Section 2000 (Vignettes Q2101-Q2120)	Section 7000 (Day Reconstruction Q7011-7553)
Set A	Affect and Mobility	Morning
Set B	Pain and Personal relationships	Afternoon
Set C	Vision, Sleep and Energy	Evening
Set D	Cognition and Self-care	Summary full day

Section 7000: Day Reconstruction Method - questions that vary by rotation set.

	Set A: Morning	Set B: Afternoon	Set C: Evening	Set D: Summary full day
Q7516	...compared to typical morning...	...compared to typical afternoon...	...compared to typical morning...	...compared to typical day...
Q7517	...compared to typical morning...	...compared to typical afternoon...	...compared to typical morning...	...compared to typical day...
Q7528	Do you think that most people who are <u>sad</u> will tell us they are <u>sad</u> ?	Do you think that most people who are <u>happy</u> will tell us they are <u>happy</u> ?	Do you think that most people who are <u>sad</u> will tell us they are <u>sad</u> ?	Do you think that most people who are <u>happy</u> will tell us they are <u>happy</u> ?
Q7529	Overall, are most people in this area who are about your age happy or sad?	Overall, are most people in this area who are about your age happy or sad?	Overall, are most people in this area who are your age satisfied with life or not satisfied with life?	Overall, are most people in this area who are your age satisfied with life or not satisfied with life?
Q7530	Now, imagine that you had a newly born <u>grandson</u> , what would you hope for that boy? Would it be more important that he be more intelligent than other boys, or happier than other boys?	Now, imagine that you had a newly born <u>grand-daughter</u> , what would you hope for that girl? Would it be more important that he be more intelligent than other girls, or happier than other girls?	Now, imagine that you had a newly born <u>grandson</u> , what would you hope for that boy? Would it be more important that he be more intelligent than other boys, or happier than other boys?	Now, imagine that you had a newly born <u>grand-daughter</u> , what would you hope for that girl? Would it be more important that he be more intelligent than other girls, or happier than other girls?

Appendices

Appendices

The appendices below are provided to assist interviewers with their interviews. Pictorials and response categories can be shown to respondents during the interview.

Pictorials and SHOWCARDS

Refer to the SAGE Appendices document for the full set of appendices, with all Tables, Pictorials and SHOWCARDS. The size of the files are too large to include in this QxQ - and the separate document is meant to improve its portability for interviewers.

Refer to the appendices and use during the interview to improve accuracy of responses.

Questionnaire Section Name	Appendix #
HOUSEHOLD Questionnaire: Section 0100: Tables	A0100
HOUSEHOLD Questionnaire: Section 0200: Tables	A0200
HOUSEHOLD Questionnaire: Section 0500: SHOWCARDS	A0500A A0500B A0500C
INDIVIDUAL Questionnaire: Section 3000: SHOWCARDS	A3000A A3000B A3000C A3000D
INDIVIDUAL Questionnaire: RESPONSE SCALES	

See SAGE Appendices document for pictorials, SHOWCARDS and response scales.