Questionnaire

|  |  |  |  |
| --- | --- | --- | --- |
| S,N | List of questions | List of answers | Go to  |
| 01 | Age  | \_\_\_\_\_\_\_\_\_\_ years |  |
|  | Sex | 1. Male 2. female
 |  |
| 02 | Residence | 1.rural2.urban |  |
| 03 | Marital status | 1. married2. not married 3. Divorced4. Widowed |  |
| 04 | Religion | 1. Orthodox Christian2. Muslim3. Protestant4. Others |  |
| 05 | Educational status | 1. can’t read and write2. primary school (1-8)3. Secondary school(9-12)4. 12+ |  |
| 06 |  Monthly income  |  ------- Ethiopian birr in year |  |
|  | Number of family in the household |  |  |
| 07 | jobs | 1. government employee2. self-employee3. housewife 4. farmer5+. others |  |
| 8  | Distance from health facility  | --------------------- km |  |
|  |  |
| 9 | Type of TB | 1. Pulmonary TB2 Extra pulmonary TB |  |
| 10 | Category of TB  | 1. New
2. Previously treated
 |  |
| 11 | What do you think is the cause of TB | 1. Due to draft
2. Due to bacterial
3. Due to dust
4. Others
 |  |
| 12 | Do you know how TB is transmitted? |  |  |
| 13 | What is sign and symptoms of TB(more than one answer is possible) | 1.cough of two weeks and above 2.,Night sweating3. loss of appetite4.weight loss5. enlargement of lymph nods6. others |  |
| 14 | Which sign and symptoms do you face before starting treatment |  |  |
|  |  |  |  |
| 15 | Where do you go first when you see the sign and symptoms diseases | 1. To HP
2. To HC /Hospitals
3. To private health institution
4. To holly water
5. Tenkuay/awaka
6. other
 |  |
| 16 | After what days of the sign and symptom of TB you go to HF  | --------- day after  |  |
| 17 | If you delayed more than 21 day, what was the reason? | 1. Assuming I will vet relief by itself
2. HF is distant from me
3. I have used alternative medication
4. I have no money
 |  |
| 18 | How many times go to HF before it diagnosed as TB |  |  |
| 19 | How many days you lasted between your first visit and initiation of treatment |  |  |
| 19 | Have you asked about the sign and symptoms of TB at your first visit of HF | 1. Yes
2. No
 |  |
| 20 | If yes, have you ordered to give sputum for AFB? | 1. Yes
2. No
 |  |
| 21 | If AFB was not done, what kind of medication you got | 1. I have given medication
2. Other lab test is done
 |  |
| 22 | Who initiate you to go to health facility? | 1. Me myself
2. My husband/wife
3. My mother/father
4. Other relatives
5. HEW
6. HAD leaders
7. others
 |  |
| 23 | Before you start your treatment, have any close contact with TB patients | 1. yes
2. No I do not have any contact
 |  |
| 24 | Before you start your treatment, have you heard about the TB | 1. Yes
2. No I do not heard
 |  |
| 25 | If yes for the above question, from whom do you get the information | 1. From health center/hospital staff
2. From HEW
3. Health development army
 |  |

 Name of the data collectors\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ signature

 Name of HF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Name of the supervisor ------------------ ------- signature