

Table: Calculation of sample size of clusters using probability proportional to size sampling

District	District Population (UBOS,2020)	Sampling fraction	Sample	Clusters
Moroto	54330	0.00746	405	14
Kotido	92500	0.00746	690	23
Amudat	54570	0.00746	407	14
Abim	64030	0.00746	478	15
	265,430		1980	66

PACT-KARAMOJA KAP SURVEY

Questionnaire for TB KAP Study



(To be filled in by Interviewer)

- Individual Survey No.
- District: _____ Sub-county: _____ Parish: _____ Village: _____
- Age: |_____|_____| years Sex: ☐ Male ☐ Female
- Interviewer code |_____|_____| (initials)
- Date: |_____|_____|/|_____|_____|/|_____|_____|_____|_____|
dd mm yyyy

DO NOT READ RESPONSES UNLESS INDICATED IN THE DIRECTIONS

SOCIO DEMOGRAPHIC CHARACTERISTICS

- Highest level of education attained

☐ No formal education	☐ Secondary
☐ Primary	☐ Post-secondary
- Participant household position

☐ Head	☐ Son/daughter
☐ Wife	☐ Others (specify)
- How long have you stayed in the house hold?

☐ Less than 6 months	☐ 6 months - 2 years	☐ >2 years
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If less than 6 months, stop the interview.
- Size of respondent's household

☐ ≤ 5 people	☐ 6-10 people	☐ >10 people
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- Current work/employment

☐ Unemployed	☐ Cattle/goat/sheep keeping
☐ Peasant Farmer	☐ Trader
	Others (specify)
- Distance from household to nearest health facility.

☐ <5km	☐ 16-25km
☐ 6-15km	☐ >25km
- Have you heard about TB?

☐ Yes	☐ No (end session and thank the participant)
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TB KNOWLEDGE

1. What causes TB?

☐ Germs (bacteria)	☐ HIV	☐ Others (specify)
☐ Bad water	☐ Witchcraft	

2. Which of the following do you think as symptoms and/or signs of TB? (NB: DK=Don't know). Check all that apply

a. Cough that lasts for 2-3 weeks or more	☐ Yes	☐ No	☐ DK
b. Loss of appetite	☐ Yes	☐ No	☐ DK
c. Coughing up blood	☐ Yes	☐ No	☐ DK
d. Weight loss	☐ Yes	☐ No	☐ DK
e. Night sweats	☐ Yes	☐ No	☐ DK
f. Fever	☐ Yes	☐ No	☐ DK
g. Chest pain	☐ Yes	☐ No	☐ DK
h. Shortness of breath	☐ Yes	☐ No	☐ DK
i. Tiredness or easy fatigability	☐ Yes	☐ No	☐ DK
j. Other (please explain):			

3. In what ways can a person get TB? (Please prompt for answers) (NB: DK=Don't know)

a. Through handshakes	☐ Yes	☐ No	☐ DK
b. Through the air when a person with TB coughs or sneezes	☐ Yes	☐ No	☐ DK
c. By living in the same community or neighbourhood with a person with TB	☐ Yes	☐ No	☐ DK
d. Through sharing dishes, plates cups and spoons	☐ Yes	☐ No	☐ DK
e. Through smoking cigarettes or drinking alcohol	☐ Yes	☐ No	☐ DK
f. Others (please explain):			

4. Where should someone go to get diagnosed with TB?

a. Health facility	☐
b. Herbalist	☐
c. Community elders	☐
d. Community shrine	☐



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5. How can someone with TB be cured? (Please prompt for answers and tick Yes or NO for each option)

- | | | |
|--|------------------------------|-----------------------------|
| a. Herbal remedies | ☐ Yes | ☐ No |
| b. Home rest without medicine | ☐ Yes | ☐ No |
| c. Eating good food | ☐ Yes | ☐ No |
| d. Praying and/or fasting/performing rituals | ☐ Yes | ☐ No |
| e. Drugs specifically for TB | ☐ Yes | ☐ No |
| f. Do not know | ☐ Yes | ☐ No |
| g. Others (specify): | | |

6. For how long should a person with TB get treatment?

- ☐ less than 6 months
 ☐ 6 months or more
 (if they have complicated forms of TB)
 ☐ I don't know

7. What do you think may happen if one does not complete their TB treatment?

- | | |
|--|---------------------------------------|
| ☐ Nothing | ☐ Death |
| ☐ Becomes more sick | ☐ I don't know |

8. In what ways can a person avoid getting TB? (Please prompt for answers and tick Yes or NO for each option) (NB: DK=Don't know)

- | | | | |
|--|------------------------------|-----------------------------|-----------------------------|
| a. Taking medicines that can prevent TB | ☐ Yes | ☐ No | ☐ DK |
| b. Covering mouth and nose when coughing or sneezing | ☐ Yes | ☐ No | ☐ DK |
| c. Avoid sharing dishes, spoons and cups | ☐ Yes | ☐ No | ☐ DK |
| d. Through good nutrition/eating well | ☐ Yes | ☐ No | ☐ DK |
| e. By praying and/or fasting/performing rituals | ☐ Yes | ☐ No | ☐ DK |
| f. By avoiding people who appear like they have TB | ☐ Yes | ☐ No | ☐ DK |
| g. Other (please explain): | | | |



ATTITUDES TOWARDS TB

1. How would you feel if you were found to have TB? (Please prompt for answers and tick Yes or NO for each option).

- | | | | | |
|--|--------------------------|-----|--------------------------|----|
| a. Fear | ☐ | Yes | ☐ | No |
| b. Surprise | ☐ | Yes | ☐ | No |
| c. Shame | ☐ | Yes | ☐ | No |
| d. Embarrassment | ☐ | Yes | ☐ | No |
| e. Sadness | ☐ | Yes | ☐ | No |
| f. Hopelessness | ☐ | Yes | ☐ | No |
| g. Happiness (because my problem has been identified and can be treated) | ☐ | Yes | ☐ | No |

h. Others (specify):

i. I don't know ☐ Yes ☐ No

2. Who would you talk to about your illness if you had TB? (Please prompt for answers and tick Yes or NO for each option).

- | | | | | |
|--|--------------------------|-----|--------------------------|----|
| a. Health care worker (doctor, nurse, VHT) | ☐ | Yes | ☐ | No |
| b. Relative (spouse, brother, sister) | ☐ | Yes | ☐ | No |
| c. Neighbour | ☐ | Yes | ☐ | No |
| d. Parents | ☐ | Yes | ☐ | No |
| e. Close friend | ☐ | Yes | ☐ | No |
| f. No one | ☐ | Yes | ☐ | No |

g. Others (specify):

3. Which statement is closest to your feeling about people with TB disease?
(Read the following choices and check one answer).

- ☐ I think they deserve their illness because they have immoral /careless behaviour.
- ☐ I stay away from these people because they may infect me.
- ☐ I act to them as towards all other people including trying to help them.
- ☐ I want to help them but stay away from them.





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4. In your community, how is a person who has TB usually regarded/treated? (Ask the question without providing any answer options but tick the category the subject's answer belongs to)

- ☐ Most people reject him or her
- ☐ Their families and friends isolate them and keep them in a separate room with separate cups, plates and spoons
- ☐ Most people are friendly, but they generally try to avoid him or her
- ☐ The community mostly supports and helps him or her
- ☐ Other (please explain):
- ☐ Don't know (nobody in my community has had TB)

PRACTICES ASSOCIATED WITH TB

1. If you had the following symptoms, cough for 2 weeks or more, night sweats, fever and some weight loss, at what point would you go to the health facility? (Please go through answers and tick one)

- ☐ I would not go to the doctor as long as symptoms don't get worse. (IF YES, GO TO Q2)
- ☐ When treatment on my own e.g. herbs, rituals, does not work. (IF YES, GO TO Q3)
- ☐ When symptoms that suggest TB last for 3–4 weeks. (IF YES, GO TO Q3)
- ☐ I will not go to a health care facility at all. (IF YES, GO TO Q2)
- ☐ I will go immediately. (IF YES, GO TO Q3)
- ☐ I will go If a cultural leader tells me to go to a health facility. (IF YES, GO TO Q3)

2. Why would you not want to go to any health care facility, if you had the symptoms in Q1 above? (Please check all that apply).

- ☐ Not clear that the symptoms are serious
- ☐ Not sure where to go
- ☐ It will be too expensive/I cannot afford the cost
- ☐ Difficulties with transportation/distance to clinic
- ☐ Do not trust medical workers
- ☐ Do not like attitude of medical workers
- ☐ Cannot leave work (overlapping work hours with medical facility working hours)
- ☐ Other (please explain):





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3. If you are found to have TB would you be ready to start treatment immediately?

☐

Yes

☐

No

4. If yes, what would you opt for?

☐

Modern medicine

☐

Witchdoctor

☐

Traditional herbs

☐

Others specify

.....

TB EDUCATION

1. How would you like health information about TB delivered to you and members of your household?
(Check subjects preference, one answer required)

☐

Community outreach

☐

Newspaper

☐

Through music (including traditional dancers/dance groups)

☐

Via the radio

☐

Via the TV

☐

By relatives

☐

At the mosque

☐

Don't know

☐

Health facility

☐

Other:

END OF INTERVIEW



Version

2 - 0

MARCH, 2022

Participant Initials

☐

Last

☐

First

☐

Middle

Staff Signature & Name Initials / Date (dd/mm/yyyy)

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