TB MATE Patient Costing Tool

SECTION 1: SOCIOECONOMIC AND DEMOGRAPHIC BACKGROUND QUESTIONS ABOUT THE PARTICIPANT , HIS/HER HOUSEHOLD AND HOUSEHOLD HEAD

READ OUT:
I am going to start by asking you a few questions about you and your household. A household is a social group of one or more individual members. The members are usually, but not always, related. They share in the joint household resources and know each other well enough to provide information about each other.

In each household, one of the members is considered to be the head of the household. This person is usually, but not always, a senior male member of the household.

Start of Interview ..... *HH:MM* ☐☐:☐☐

1. Sex: .....*1= Male, 2=Female* ☐

2. Note the race of the participant, if you are not certain ask: How would you describe yourself racially? ..... ☐
   1 = Black/African
   2 = Coloured
   3 = Indian/Asian
   4 = White
   9 = Other, Specify: _____

3. Date of Birth: .....*dd/MMM/yyyy* ☐☐/☐☐☐/☐☐☐☐

4. Who is the head of the household? ***(This person is considered by the other household members to be their head. Indicate relationship e.g. father, mother not name.)***
   _____
   _____

5. What is the sex of the HHH? .....*1= Male, 2=Female* ☐

6. What is the participants position in the household, in relation to the household head such as ..... ☐☐
   1 = Head/acting head
   2 = Husband/wife/partner
   3 = Son/daughter/stepchild/adopted child
   4 = Brother/sister/step brother/step sister
   5 = Father/mother/step father/step mother
   6 = Grandparent/great grandparent
   7 = Grandchild/great grandchild
   8 = Other relative (e.g. in laws or aunt/uncle)
   10 = Non Related persons (tenant, border, lodger)
   99 = Don't know
   9 = Other, specify: _____

7. What was the age of the HHH i.e. husband / father / mother etc. at his/her last birthday?

…… *year born* ☐☐☐☐

……age ☐☐

8. Does the HHH i.e. husband / father / mother etc. stay with you for at least 2 weeks each month?..... *1=Yes, 0=No* ☐

9. What is the participant's current marital status? ..... ☐

1 = Married
2 = Living with Partner
3 = Widow/widower
4 = Divorced or Separated
5 = Never married (single)
9 = Other, specify: _____

10. What is the participant's highest level of education? ..... ☐

1 = No schooling
2 = Highest grade passed in school (1-12)
3 = Completed diploma/certificate
4 = Completed degree
9 = Other, specify: _____

11. What is the highest level of education of your HHH i.e. husband / father / mother? ..... ☐

1 = No schooling
2 = Highest grade passed in school (1-12)
3 = Completed diploma/certificate
4 = Completed degree
9 = Other, specify: _____

12. Is the participant self-employed or does he/she work for someone else?..... ☐☐

1 = Self-employed
2 = Employee
3 = Not Working
99 = Don't Know

13. Is the HHH i.e. husband / father / mother etc. self-employed or does he/she work for someone else? …… ☐☐

1 = Self-employed
2 = Employee
3 = Not working
99 = Don't Know

14. What are the reasons that the participant is not working? .....

	Yes	No
1. Studying	☐	☐
2. Looking for Work	☐	☐
3. Retired or pensioner	☐	☐
4. Sick or Injured	☐	☐
5. Pregnant or caring for own children	☐	☐
6. Caring for other children	☐	☐
7. Caring for sick/injured	☐	☐
8. Retrenched	☐	☐
9. Nothing	☐	☐
10. Don't Know	☐	☐
11. Other: Specify		

15. How many adults (18 years or older) live in the household?. ..... ☐☐

When I talk about your household, I am talking about people that share in the joint household resources and know each other well enough to provide information about each other

16. How many children younger than 18 years live in the household?..... ☐☐

17. Does anyone in the household receive a government grant OR income from the government such as..... ***read out each option and tick yes or no on every row.***

IF YES ask: How many of each type of grant is received (i.e. how many people receive each?)

Type of Grant	Yes	No	If yes Number Received	Total Amount Received
Unemployment Insurance	☐	☐		
Worker's compensation	☐	☐		
State old age pension	☐	☐		
Disability grant (If yes go to Q18)	☐	☐		
Child support grant	☐	☐		
Care dependency grant	☐	☐		
Foster care grant	☐	☐		
Grant in aid	☐	☐		
Social relief	☐	☐		
Don't know	☐	☐		
Other: Specify				

18. Is it the participant that receives the Disability Grant? .....*1=Yes, 0=No* ☐

If yes Go to Q19, If No GO to Q20

19. What is the reason that the participant receives this disability grant?

_____

_____

20. Has the participant applied for a disability grant? .....*1=Yes, 0=No* ☐

21. Was the participant born IN South Africa? .....*1=Yes, 0=No* ☐

READ OUT I know this is a sensitive question to ask at this stage, but we are asking because we want to see if health services treat South Africans differently to those who are not from South Africa.
If Yes, GO to Q23, If No Go to Q22

22. IF No specify the country the participant was born in:

_____

_____

23. Which province was the participant born in? ..... ☐☐

1 = Western Cape
2 = Eastern Cape
3 = Northern Cape
4 = Free State
5 = Kwa-Zulu Natal
6 = North West
7 = Gauteng
8 = Mpumalanga
9 = Limpopo
99 = Don't know

24. Is the participant covered by a Medical Aid or any scheme that helps pay for health-care services or medicines?

.....*1=Yes, 0=No* ☐

SECTION 2: UTILISATION OF TB AND OTHER HEALTH SERVICES AND INDIRECT COSTS OF THE DISEASE

READ OUT: In this section we are asking you some questions about what health care you have used for your TB during the **current treatment phase (and during pre-treatment for those in the intensive phase)**.

Pre-treatment phase is defined as the period starting from the onset of TB symptoms until TB diagnosis.

25. Is this the first time the participant has had TB? .....*1=Yes, 0=No* ☐

26. When did the participant start taking TB treatment? .....*dd/MMM/yyyy* ☐☐/☐☐☐/☐☐☐☐

27. Where was the participant diagnosed for TB? .....

    27a. Facility name/Mobile Clinic: _____

    27b. Province/City/Village/Township: _____

28. Is the participant currently in the intensive or continuation treatment phase?..... ☐

    1 = Intensive phase
    2 = Continuation phase

29. How many days of this treatment phase has the patient completed?..... in days ☐☐☐

30. Has the participant been offered a HIV test during the **current TB treatment phase**?

    .....*1=Yes, 0=No,99= Don't Know* ☐☐

31. How often does the participant collect TB treatment here at the clinic? ..... ☐

    1 = Daily during the week
    2 = Weekly
    3 = Monthly
    9 = Other, specify: _____

32. Who checks that the participant has taken their TB treatment each day? ..... ☐

    1 = The TB DOTS sister or counsellor in the clinic (clinic DOTS), **if yes go to Q33**
    2 = A community worker (community DOTS)
    3 = Someone at my place of work (workplace DOTS)
    4 = No-One
    9 = Other, specify: _____

33. How much time did you spend at the clinic last time you came for DOTS? .....*HH:MM* ☐☐:☐☐

34. During this current treatment phase, have you received TB treatment from a clinic other than this one?.....

    .....*1=Yes, 0=No* ☐

35. Besides TB, do you get the other health services you need in this facility? .....*1=Yes, 0=No* ☐

If No, Go to Q37

36. What services do you have to get elsewhere:

_____

_____

READ OUT: Some people find it quite hard to stick to their TB treatment and might not always be able to make their appointments at the clinic. We are now going to ask you about whether you have had any of these sorts of problems and what the reasons might be.

37. Has the participant completed treatment for this current TB episode?.....Yes*, 0=No* ☐

If yes, go to Q 38

38. When did the participant complete TB treatment?...../MMM/yyyy ☐☐/☐☐☐/☐☐☐☐

If more than three days ago then skip to Q43

39. Did the participant miss taking any TB tablets YESTERDAY? .....*1=Yes, 0=No* ☐

40. Did the participant miss taking any TB tablets the day before YESTERDAY? .....*1=Yes, 0=No* ☐

41. Did the participant miss taking any TB tablets 3 DAYS AGO? .....*1=Yes, 0=No* ☐

42. Apart from the last three days, has the participant ever missed taking any tablets? .....*1=Yes, 0=No* ☐

43. Has the participant ever visited the clinic for treatment collection and found that there were no TB drugs in stock? .....1=Yes, 0=No ☐

44. Has the participant missed any of the following for this **current treatment phase**?

Type of Visit	Yes	No	NA	If Yes, how many?
Daily DOTS visit	☐	☐	☐	
Nurse/doctor clinic visit	☐	☐	☐	
TB treatment collection	☐	☐	☐	

If answered No to all, GO to Q46

45. For the last appointment missed, what was the reason(s)?

Reason for last Appointment Missed	Yes	No
Lack of money	☐	☐
Lack of time	☐	☐
I felt better	☐	☐
I could not take time off from work	☐	☐
No transport	☐	☐
Too ill to travel	☐	☐
Other responsibilities	☐	☐
The treatment is not effective / does not make me feel better	☐	☐
The queues in the facility are too long	☐	☐
The staff are rude or uncaring	☐	☐
I have had bad experiences with staff in the past	☐	☐
Don't know	☐	☐
Other 1: Specify		
Other 2: Specify		

46. Apart from visits to this clinic for TB, has the participant used this clinic or any other health services for symptoms of the current illness during the **current treatment phase (and during pre-treatment for those in the intensive phase)**?

Type of facility or service	Yes	No	If Yes, times used	If Yes, Amount Spent
Chemist/pharmacy	☐	☐		
This clinic (not for TB)	☐	☐		
A different public clinic	☐	☐		
A private doctor	☐	☐		
A traditional healer	☐	☐		
A public hospital emergency/ outpatient department	☐	☐		
Inpatient stay in a public hospital	☐	☐		
A private hospital emergency/ outpatient department	☐	☐		
Inpatient stay in a private hospital	☐	☐		
ARV (HIV) clinic	☐	☐	**Leave Blank**	
Antenatal clinic [women only]	☐	☐		
Other: Specify				

47. During the **current treatment phase**, has the participant spent any other money on health care because of TB illness (e.g. spaza shops, special food,

etc)……*1=Yes, 0=No* ☐

48. If Yes, how much was spent? ……. *Rands* ☐☐☐☐,☐☐

SECTION 3: AFFORDABILITY

READ OUT: I am now going to ask you some questions about the financial difficulties you might face in seeking health care for TB during the **current treatment phase (and during pre-treatment for those in the intensive phase).**

Pre-treatment phase is defined as the period starting from the onset of TB symptoms until TB diagnosis.

49. Due to the participants TB illness did you have to borrow money to pay for healthcare during the **current treatment phase (and during pre-treatment for those in the intensive phase)**? .....*1=Yes, 0=No* ☐

If No, Go to Q53

50. How much money did you borrow? .....*Rands* ☐☐☐☐,☐☐

51. How much did you pay back? .....*Rands* ☐☐☐☐,☐☐

52. Are you keeping with the agreed payment schedule?.....*1=Yes, 0=No* ☐

53. Due to the participants TB illness, did you have to sell personal or household items in order to pay for healthcare?.....*1=Yes, 0=No* ☐

54. What is the total value of the sold items? .....*Rands* ☐☐☐☐,☐☐

55. How much time did the participant spend at the clinic at his/her most recent visit when they came to see the doctor/nurse for TB?.....*HH:MM* ☐☐:☐☐

56. What would the participant have been doing if he/she weren't at the clinic at the most recent visit?

Activity	Yes	No
Working for pay	☐	☐
Doing unpaid community work or volunteer work	☐	☐
Doing household chores such as cleaning, cooking, shopping for food, maintenance and repairs, working in the garden, gathering wood, gathering water, housework etc.	☐	☐
Taking care of children	☐	☐
Leisure activities (sport, watching TV, listening to music, reading, visiting friends and family, going to movies etc)	☐	☐
Attending school or other educational institution	☐	☐
Nothing	☐	☐
I don't know	☐	☐
Other: Specify		

57. In coming to the clinic for the most recent visit, how much did you pay for?

Category	Rand
Transport (one way)	
Clinic fees	
Medicines	
Someone to take over your tasks while you are here including childcare	
Accommodation if you need to stay the night nearby	
Food during visit	
Phoning or sms'ing	
Accompanying adult: specify	
Other, specify:	

If No expense go Q59

58. Did you find it easy or difficult to incur these expenses? ..... ☐

1 = Easy
2 = Difficult
3 = Neither easy nor Difficult
99 = Don't Know

59. Did the participant lose money from the time he/she took from their job to come for the most recent visit?

.....*1=Yes, 0=No* ☐

If No go to Q61

60. How much did the participant lose? .....*Rands* ☐☐☐☐,☐☐

61. Who has been helping the participant financially, i.e. with cash, buying food, providing transport etc, with your TB?

Person	Yes	No
Husband/wife	☐	☐
Father/mother	☐	☐
Boyfriend/girlfriend	☐	☐
Other relatives	☐	☐
Friends	☐	☐
Nobody	☐	☐
Employer (over and above normal wages)	☐	☐
Don't know	☐	☐
Other (specify)		

62. How did you get to the clinic for the most recent visit? ..... □□

1 = By Foot
2 = Bicycle
3 = Minibus Taxi
4 = Bus/Train
5 = Own private car (if yes go to Q59)
6 = Other private car (can be meter taxi, hired car, catching a lift)
7 = Ambulance / hospital transport
9 = Other: Specify_____

63. What is the distance from the participants usual residence to this clinic……in kms □□□

……in meters □□□

64. How long did it take you to get here? (one way only) time taken from leaving home to arriving at facility….

..... *HH:MM* □□:□□

SECTION 4: DWELLING CHARACTERISTICS, HOUSEHOLD INCOME, EXPENDITURE AND HOUSEHOLD ASSETS

READ OUT: Finally, we want to ask you some questions about the characteristics of the house where you live and type of facilities available within your household

65. Where does the participant live for most of the year? .....

58a. Village or Community: _____

58b. Area or Township: _____

66. Which best describes the type of house in which the participant lives in? ..... ☐☐

1 = House or brick structure on a separate stand or yard or on farm
2 = Traditional dwelling/hut/structure made of traditional materials
3 = Flat
4 = Town/cluster/semi-detached house (simplex, duplex or triplex)
5 = Unit in retirement village
6 = Dwelling/house/flat/room in backyard
7 = Informal dwelling/shack IN the backyard of a formal house
8 = Informal dwelling/shack NOT in backyard e.g. in an informal/squatter settlement or on farm
10 = Room/flatlet not in backyard but on a shared property e.g granny flat
11 = Caravan/tent
12 = Workers hostel
9 = Other: Specify_____-

67. What is the main material of the walls for the house in which the participant lives in?..... ☐☐

1 = Bricks and plaster
2 = Bare brick/cement block
3 = Corrugated iron/zinc
4 = Wood
5 = Plastic
6 = Cardboard
7 = Mixture of mud and cement
8 = Wattle and daub/wendy house
10 = Mud
9 = Other: Specify_____

68. What is the main material of the roof for the house in which the participant lives in?..... ☐

1 = Tiles
2 = Corrugated iron/zinc
3 = Thatching
4 = Asbestos
5 = Plastic
6 = Cardboard
9 = Other: Specify_____

69. How many rooms, including kitchens does the participant's house have? ..... ☐☐

Interviewer, probe and exclude bathrooms, sheds, garages, stables, etc. from the total unless people are living in them.

70. What is the main source of drinking water for members of the participant's household? ..... ☐☐

1 = Piped (tap) water in dwelling
2 = Piped (tap) water on site or in yard
3 = Borehole on site
4 = Rain water tank on site
5 = Neighbor's tap
6 = Public/communal tap (either free or paid)
7 = Water carrier/tanker
8 = Borehole off site/communal
10 = Flowing water/stream/river
11 = Stagnant water/dam/pool
12 = Well
13 = Spring
9 = Other: Specify_____

71. What type of toilet does the participant's household use? ..... ☐

1 = Flush toilet (connected to sewer)
2 = Flush toilet (with septic tank)
3 = Chemical toilet
4 = Pit latrine with ventilation pipe
5 = Pit latrine without ventilation pipe
6 = Bucket toilet
7 = No facility/bush/field
9 = Other: Specify_____

72. What is the main source of energy for cooking in the participant's household? ..... ☐

1 = Electricity from mains
2 = Electricity from generator
3 = Gas
4 = Paraffin
5 = Wood
6 = Coal
7 = Animal dung
8 = Solar Energy
9 = Other: Specify_____

73. Does the participant's household have any of the following items in **good working order**?

	Yes	***No***
Telkom / landline phone	☐	☐
Cell phone/tablet	☐	☐
Radio	☐	☐
Television	☐	☐
Video recorder/DVD player	☐	☐
Electric stove with oven	☐	☐
Bicycle	☐	☐
Personal computer at home	☐	☐
Internet facilities at home	☐	☐
Fridge	☐	☐
Car/truck/bakkie	☐	☐
Paraffin stove	☐	☐
Electric hot plate	☐	☐
Gas cooker	☐	☐
Electric kettle	☐	☐
Sewing machine	☐	☐
Block maker	☐	☐
Motorcycle or scooter	☐	☐
Kombi, lorry or tractor	☐	☐
Bed	☐	☐
Table and chairs	☐	☐
Sofa or sofa set	☐	☐
Kitchen sink	☐	☐
Generator for electricity	☐	☐
Wheelbarrow	☐	☐
Hoe, spade or garden fork	☐	☐
Bed nets	☐	☐
Cattle	☐	☐
Other livestock (chickens etc)	☐	☐

74. Does the participant's household own cattle, livestock or chickens? .....*1=Yes, 0=No* ☐

If No Go to Q79

75. How many cattle does the household own?..... ☐☐

76. How many goats does the household own? ..... ☐☐

77. How many chickens does the household own? ..... ☐☐

78. How many pigs does the household own?..... ☐☐

79. Does the household own any other farm animals? .....*1=Yes, 0=No* □

80. If Yes to Q79 specify animal:

_____

_____

81. How many other animals does the household own?..... □□

82. What is the total monthly household INCOME? .....*Rands* □□□□,□□

Instruction: This should include the participant's income and exclude grants and remittances.
If the respondent does not give you a precise estimate of question above then ask him/her…

83. On average, what is the combined monthly income of the household? ..... □

1 = < R 600
2 = R 601-1000
3 = R 1001-2000
4 = R 2001-4000
5 = > R 4000
99 = Don't know
97 = Refused to Answer

84. How much monetary **INCOME** did the people in the household (including the participants) gain in remittances?

.....*Rands* □□□□,□□

85. On average how much does the household usually **spend** in a month? .....*Rands* □□□□,□□

Instruction: If the respondent does not give you a precise estimate of question above then ask him/her…

86. Of the ranges, would you say the household **EXPENDITURE** generally falls?..... □□

1 = R0 – R399
2 = R400 – R799
3 = R800 – R1 199
4 = R1 200 - R1 799
5 = R1 800 - R2 499
6 = R2 500 - R4 999
7 = R5 000 - R9 999
8 = R10 000 or more
99 = Don't Know
97 = Refused to Answer

87. End of Interview .....*HH:MM* □□:□□

Completed By: □□ Date Entered *(dd/MMM/yyyy)*: □□/□□□/□□□□