HEPATITIS (HEQ)
Target Group: SPs 6+

HEQ.010 Has a doctor or other health professional ever told {you/SP} that {you have/s/he/SP has} hepatitis B? (Hepatitis is a form of liver disease. Hepatitis B is an infection of the liver from the hepatitis B virus (HBV).)

CAPI INSTRUCTION:
IF SP AGE >= 16, DISPLAY “YOU” AND “YOU HAVE”.
IF SP AGE = 12-15 OR >=16 AND PROXY INTERVIEW, DISPLAY “SP” AND “S/HE HAS”.
IF SP AGE = 6-11, DISPLAY “YOU” AND “SP HAS”.

INTERVIEWER: DO NOT ACCEPT SELF-DIAGNOSED OR DIAGNOSED BY A PERSON WHO IS NOT A DOCTOR OR OTHER HEALTH PROFESSIONAL.

YES ............................................................... 1
NO ................................................................. 2 (HEQ.030)
REFUSED ..................................................... 7 (HEQ.030)
DON’T KNOW ............................................... 9 (HEQ.030)

HEQ.020 Please look at the drugs on this card that are prescribed for hepatitis B. {Were you/ Was/s/he/SP} ever prescribed any medicine to treat hepatitis B?

HAND CARD HEQ1

CAPI INSTRUCTION:
IF SP AGE >= 16, DISPLAY “WERE YOU”.
IF SP AGE = 12-15 OR >=16 AND PROXY INTERVIEW, DISPLAY “WAS S/HE”.
IF SP AGE = 6-11, DISPLAY “WAS SP”.

YES ............................................................... 1
NO ................................................................. 2
REFUSED ..................................................... 7
DON’T KNOW ............................................... 9

HEQ.030 Has a doctor or other health professional ever told {you/SP} that {you have/s/he/SP has} hepatitis C? (Hepatitis is a form of liver disease. Hepatitis C is an infection of the liver from the hepatitis C virus (HCV).)

CAPI INSTRUCTION:
IF SP AGE >= 16, DISPLAY “YOU” AND “YOU HAVE”.
IF SP AGE = 12-15 OR >=16 AND PROXY INTERVIEW, DISPLAY “SP” AND “S/HE HAS”.
IF SP AGE = 6-11, DISPLAY “YOU” AND “SP HAS”.

INTERVIEWER: DO NOT ACCEPT SELF-DIAGNOSED OR DIAGNOSED BY A PERSON WHO IS NOT A DOCTOR OR OTHER HEALTH PROFESSIONAL.

YES ............................................................... 1
NO ................................................................. 2 (END OF SECTION)
REFUSED ..................................................... 7 (END OF SECTION)
DON’T KNOW ............................................... 9 (END OF SECTION)
**HEQ.040** Please look at the drugs on this card that are prescribed for hepatitis C. *(Were you/ Was/s/he/ SP)* ever prescribed any medicine to treat hepatitis C?

**HAND CARD HEQ2**

**CAPI INSTRUCTION:**
- IF SP AGE >= 16, DISPLAY "WERE YOU".
- IF SP AGE = 12-15 OR >=16 AND PROXY INTERVIEW, DISPLAY "WAS S/HE".
- IF SP AGE = 6-11, DISPLAY "WAS SP".

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<th>Response</th>
<th>Code</th>
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</thead>
<tbody>
<tr>
<td>YES</td>
<td>1</td>
</tr>
<tr>
<td>NO</td>
<td>2</td>
</tr>
<tr>
<td>REFUSED</td>
<td>7</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>9</td>
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