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 >= 12 AND NOT A PROXY INTERVIEW, DISPLAY “YOU” AND “YOU HAVE”.
IF SP AGE >= 12 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 >= 12 AND NOT A PROXY INTERVIEW, DISPLAY “WERE YOU”.
IF SP AGE >= 12 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 >= 12 AND NOT A PROXY INTERVIEW, DISPLAY “YOU” AND “YOU HAVE”.
IF SP AGE >= 12 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 >= 12 AND NOT A PROXY INTERVIEW, DISPLAY "WERE YOU".
IF SP AGE >= 12 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