



Rapid Assessment of Hearing Loss study: Questionnaire set

Please note: This questionnaire set is the paper-based version of what we will collect on mobile data collection platform (Open Data Kit), the skip patterns will be automated. Some questions will need to be adapted to the local setting.

Household roster

This is completed for each household to keep track of the examination and referral status between team members

ID number	Name	Age	Sex	Is the participant available, not available, or did they refuse?	Questions complete	Self-report	Hearing test	Hearing test results (average threshold and degree L and R)	Otoscopy complete	Ear disease present (specify ear)?	Management provided in field (wax, medication, dry mop)	Referral made*

*Referral criteria

Disabling hearing loss

Any ear disease in either ear that cannot be managed in the field

Mild hearing loss in both ears + self reported difficulties (a lot or greater)

Mild hearing loss in one ear, moderate or worse in the other ear

SECTION A: GENERAL QUESTIONNAIRE			
Number	Question	Response	Skip pattern
A1	Date (DD/MM/YY) Tsiku (DD/MM/YY)		
A2	Interviewer name Dzina la yemwe akufunsa mafunso mukafukufukuyu	✍	
A3	Cluster name Dzina la gulu	✍	
A4	Participant name Dzina la yemwe akutenga nawo mbali mukafukufukuyu.	✍	
A5	Participant initials Dzina la yemwe akutenga nawo mbali mukafukufukuyu.	✍	
A6	Sex Ndiwa mkazi kapena wamwamuna	1=Male 2=Female 1=Mamuna 2=Mkazi	
A7	Age in completed years <i>Enter this response carefully!</i> Zaka zomwe wakwanitsa yemwe akutenga nawo mbali mukafukufukuyu.	✍	
A8	Cluster number Nambala ya gulu lawo	✍	
A9	House No. Nambala ya nyumba	✍	
A10	Individual number Nambala ya yemwe akutenga nawo mbali mukafukufukuyu.	✍	
A11	Participant ID <i>6 digit number (Cluster, House, Roster number)</i> Nambala ya yemwe akutenga nawo mbali mukafukufukuyu		
A12	Exam status (up to this question to be completed for all participants regardless of whether they are home or not) Kodi wayezedwa	1=Examined 2=Refused → 3=Absent 4=Unable to communicate 1= Wayezedwa 2= Wakana kuyezedwa 3= Sanabwere 4= Sangathe kulumikizani nanu	Go to A12.1
A12.1	Reason for refusal Chifukwa chomwe wakanira	1=Too busy 2=Not interested 3=Too sick 4=Other (specify) 1= Watanganidwa 2= Sakusangalatsidwa 3= Wadwalika 4= Chifukwa china (monga)	
A13	Who is completing the questionnaire? Yemwe akuyankha mafunsowa ndi ndani?	1=Participant 2=Proxy 1= Yemwe akutenga nawo mbali	

		<i>mukafukufukum</i> 2= Womuimirira	
A15	Number of household members 50 years and older <i>Anthu omwe ali ndi zaka 50 kapena kuosera apo mnyumba muno ndi angati?</i>		
A14	Number of household members 18-49 years <i>Anthu omwe ali ndi zaka 18 kulekeza 49 mnyumba muno ndi angati?</i>		
A16	Number of household members 0-17 years- <i>Anthu omwe sanakwane chaka chimodzi komanso osaposeera zaka 17 omwe amakhala myumba muno.</i>		
LITERACY AND EDUCATION			
A17	Can you/[name] read well, a little or not at all? <i>Kodi mumatha kuwerenga bwino bwino, pang'ono kapena simumatha kuwerenga.</i>	1=Not at all 2=A little 3=Well <i>1=Sindimatha kuwerenga ngakhale pang'ono</i> <i>2=Ndimatha pang'ono</i> <i>3=Ndimatha kuwerenga bwino bwino</i>	
A18	What is the highest level of education you attended? <i>Sukulu munalekeza kalasi chani?</i>	1=Never attended 2=Attended primary school 3=Attended secondary school 4=Attended tertiary education <i>1= Sindinapiteko ku sukulu</i> <i>2= Ndinapitapo ku pulaimale sukulu</i> <i>3= Ndinapitako ku sukulu ya sekondale</i> <i>4= Ndinapitako sukulu ya ukachenjede</i>	
EMPLOYMENT			
A19	Other than domestic work in the household have you done any work in the last 4 weeks? <i>Kupatula ntchito ya mnyumba palinso ntchito ina yomwe mwakhala mukugwira kwa masabata 4 apitawo?</i>	1=Yes 2=No <i>1=Eya</i> <i>2=Ayi</i>	Go to A20
A20	Did you/did [name] do any of the following activities during the last 4 weeks? <i>Mwagwirako ntchito monga izi kwa masabata anayi omwe apitawo?</i>	1=Farming/rearing animals/fishing 2=Services/selling 3=Factory work 4=Houseworker at someone's house <i>1= Ulimi, kuweta ziweto, usodzi</i> <i>2= Kukonza zinthu/kugulitsa malonda</i> <i>3= Ntchito yaku fakitale</i> <i>4= Kugwira ntchito ya mnyumba</i>	
HOUSEHOLD CHARACTERISTICS			
A21	Does your household have: <i>Kodi nyumba mwanu muli zinthu monga izi:</i> Radio <i>Waillesi</i> Television	Yes=1 (Eya=1) 1 1	No=2 (Ayi=2) 2 2

	Wailesi yakanema Bed with mattress Bedi ndi matiresi Sofaset Mpando wa sofa	1 1	2 2	
A22	Does any member of this household own a mobile phone? Kodi alipo yemwe ali ndi fonu mnyumba mwanu muno?	1	2	
A23	Does any member of this household have a bank account? Kodi alipo yemwe ali ndi buku la ku banki nyumba mwanu muno?	1	2	
A25 a)	Observe the main material of the floor Yanganani pansu nyumba kuti muone zipangizo zomwe anamangira pansu pa nyumba yawoyo.		1=earth/sand 2=cement 3=other floor material 1=Dothi/mchenga 2=Simenti 3=Zipangizo zina zozirira nyumba	
A25 b)	Observe the main material of the roof Yang'anani zipangizo zomwe anamangira denga la nyumba		1=Grass 2=Iron sheet 3=Other roof material 1= Masamba amitengo 2= Achitsulo 3=Zipangizo zina zofolelera denga	
A26	What type of fuel does your household mainly use for cooking? Kodi mumagwiritsira kwambiri nkhuni pophika?		1=Gas 2=Coal 3=Electric 4=Other type of fuel 1=Nkhuni 2=Mtundu wina wa mafuta	
HEALTH				
A27	In general, would you say your/[name's] health is Ponena mwachidule tinganene kuti umoyo wanu ndi wabwino?		1=Excellent 2=Very good 3=Good 4=Moderate 5=Poor 1= Ndi wopambana zedi 2= Ndiwabwino kwambiri 3= Ndiwabwino 4= Ndiwapakati ndipakati 5= Siwabwino	
RISK FACTOR SCREEN				
A28	Have you ever been involved in work or non-work related activities where you were exposed to sounds or noise for 4 or more hours a day, several days per week? <i>Loud noise means so loud that you must speak in a raised voice to be heard</i> Munayamba mwagwira ntchito kapena munayamba mwapezeka pa malo poti panali phokoso kwanthawi yokwana maola anayi kapena kuposera apo patsiku kapena kwa masiku angapo musabata limodzi?# Phokoso lake lokupangitsani kuti mudzilankhula mokweza kuti mumvane ndi anthu?		1=Yes → 2=No → 1=Eya 2=Ayi	Go to A29 Go to A30
A29	For how long have you been exposed at work to loud sounds for more than 4 hours a day, several days a week? Kodi munagwira ntchito kwanthawi yayitali bwanji pamalo a phokoso la makina lomwe linali lopitilira maola anayi pa tsiku?		1=Less than 1 year 2=1 year or more 1= Nthawi yosachepera chaka chimodzi 2= Chaka chimodzi kapena kupitilira apo	

A30	Do/did you use noise protection when you are exposed to very loud noise? <i>Munkhavalala zipangizo zodzitetezera pa nthawi yomwe mumapezeka pa malo aphokoso lambiri?</i>	1=Yes 2=No 1=Eya 2=Ayi	
A31	Have you ever been involved in work or non-work related activities where you were exposed to chemicals (examples of where chemical exposure include in: paint manufacture, adhesive manufacture, paint stripping, plastics manufacture, electroplating, and laboratory chemicals)? <i>Munayamba mwagwira ntchito pa malo pomwe pamapezeka mankhwala monga omwe amagwiritsidwa ntchito ku kampani yopanga simenti, zipangizo zomatila, yokonza zinthu za pulasitiki, zipangizo zomwe amagwiritsira ntchito ku labotale kapena zipangizo za magetsi?</i>	1=Yes 2=No 1=Eya 2=Ayi	
A32	Do you have a history of medication use for cancer (chemotherapy)? <i>Munayamba mwalandira mankhwala a kansa?</i>	1=Yes → 2=No → 1=Eya → 2=Ayi →	Go to A32.1 Go to A33
A32.1	Did you notice a change in your hearing when you started to use this medication? <i>Mwaonako kusintha kwina kulikonse kwa mamvedwe chiyambireni kumwa mankhwala amenewa?</i>	1=Yes 2=No 1=Eya 2=Ayi	
A33	Have you ever been told by a doctor/nurse that you have diabetes, sugar in your urine or high blood sugar? <i>Munayamba mwadwala matenda a shuga?</i>	1=Yes 2=No 1=Eya 2=Ayi	
A34	Have you been told by your doctor/nurse that you have high blood pressure? <i>Munayamba mwauzidwa ndi dokotala wanu zoti muli ndi nthenda ya BIPI?</i>	1=Yes 2=No 1=Eya 2=Ayi	
A35	Do you have a history of head injury? <i>Munayamba mwavulala m'mutu?</i>	1=Yes → 2=No → 1=Eya 2=Ayi	Go to A35.1 Go to A36
A35.1	Did you notice a change in your hearing after your injury? <i>Munaona kusintha kwamamvedwe potsatira kuvulala kwam'mutuko?</i>	1=Yes 2=No 1=Eya 2=Ayi	
A36	Does anyone in your immediate family have a hearing loss since childhood? <i>M'banja mwanu alipo yemwe anapezeka ndi vuto lakusamvetsetsa kuyambira ali mwana?</i>	1=Yes → 2=No → 1=Eya 2=Ayi	Go to A36.1 Go to A37
A36.1	Relative with hearing loss <i>Muli ndi m'bale yemwe samamvetsetsa?</i>	1=Parent 2=Sibling 3=Child 1=Kholo 2=Mchemwali kapena mchimwene wake 3=Mwana	
A37	In the past 12 months, have you been bothered by ringing or buzzing noises in your ears that lasts for 5 minutes or more? <i>Kwa miyezi khumi ndi iwiri yapitazo mmakutu mwanu mwakhala mukumveka kulira kwa mphindi zokwana zisanu kapena kuposera apo?</i>	1=Yes → 2=No → 1=Eya 2=Ayi	Go to A37.1 Go to A38
A37.1	In the 12 months, how often have you experienced this ringing? <i>Kwa mwezi khumi ndiiwiri yapitayo mwakhala mukumva kulira mkhutu mwanu mowirikiza bwani?</i>	1= Almost always 2= Once a day 3= Once a week 4= Once a month 5= Less often than once/month 1=Pafupi fupi nthawi zonse.	

Section B: HEARING SCREENING (note that this data is input directly in to the form from the hearTest app)

Audiometry			
B1	Date (DD/MM/YY) <i>Tsiku (DD/MM/YY)</i>		
B2	Interviewer name <i>Dzina la yemwe akufunsa mafunso mukafukufukuyu</i>		
B3	Cluster name <i>Dzina la gulu; Dzina la mudzi</i>		
B4	Participant name <i>Dzina la yemwe akutenga nawo mbali mukafukufukuyu.</i>		
B5	Participant initials <i>Dzina lake mwachidule</i>		
B6	Sex <i>Ndiwa mkazi kapena wamwamuna</i>	1=Male 2=Female <i>1=Mamuna 2=Mkazi</i>	
B7	Age in completed years <i>Enter this response carefully! Zaka zomwe wakwanitsa yemwe akutenga nawo mbali mukafukufukuyu.</i>		
B8	Cluster number <i>Nambala ya gulu lawo</i>		
B9	House No. <i>Nambala ya nyumba</i>		
B10	Individual number <i>Nambala ya wotenga mbali mukafukufukuyu.</i>		
B11	Participant ID <i>6 digit number (Cluster, House, Roster number) Nambala ya yemwe akutenga nawo mbali mukafukufukuyu</i>		
B12	Exam status	1=Complete 2=Unable to test	
B13	Start hearing test button	(link to hearTest app)	
<i>The below details will be automatically input from hearTest to ODK</i>			
		Left ear	Right ear
	Frequency (Hertz)	Threshold (decibels, dB)	
	500		
	1000		
	2000		
	4000		
	Pure tone average	EAVGL	EAVGR
		<input type="text"/>	<input type="text"/>
	<i>Average of thresholds at 500, 1000, 2000, 4000 Hz</i>		
	Noise concerns (provided by app)		
	Test re-test concerns (provided by app)		

Take note of the results on the roster

Next step: ear examination

Section C: EAR EXAMINATION			
C1	Date (DD/MM/YY) Tsiku (DD/MM/YY)		
C2	Interviewer name Dzina la yemwe akufunsa mafunso mukafukufukuyu	✍	
C3	Cluster name Dzina la gulu; Dzina la mudzi	✍	
C4	Participant name dzina yemwe akutenga nawo mbali mukafukufukuyu.	✍	
C5	Participant initials dzina la yemwe akutenga mbali mwachidule.	✍	
C6	Sex Ndiwa mkazi kapena wamwamuna	1=Male 2=Female 1=Mamuna 2=Mkazi	
C7	Age in completed years <i>Enter this response carefully!</i> Zaka zomwe wakwanitsa yemwe akutenga nawo mbali mukafukufukuyu.	✍	
C8	Cluster number Nambala ya gulu lawo	✍	
C9	House No. Nambala ya nyumba	✍	
C10	Individual number Namabala ya yemwe akutenga nawo mbali.	✍	
C11	Participant ID <i>6 digit number (Cluster, House, Roster number)</i> Nambala ya yemwe akutenga nawo mbali mukafukufukuyu		
Hearing health history			
C12 a)	Ask person who completed hearing test or check the roster: does this participant have a hearing loss in the right? Pure tone average of >25dB HL Mufunzeni yemwe amayeza zamamvedwe ngati munthuyu mamvedwe ake ali otsika kukhutu lake lakumanja. Zotsatira zopitilira 25 dBHL	1=Yes 2=No 1=Eya 2=Ayi	
C12 b)	Ask person who completed hearing test or check the roster: does this participant have a hearing loss in the left? Pure tone average of >25dB HL Mufunzeni yemwe amayeza zamamvedwe ngati munthuyu mamvedwe ake ali otsika kukhutu lake lakumanzere. Zotsatira zopitilira 25 dBHL	1=Yes 2=No 1=Eya 2=Ayi	
C13	Do you own a hearing aid? Kodi muli ndi makina omvera?	1=Yes → 2=No → 1=Eya → 2=Ayi →	Go to C14 Go to C18
C14	Type of hearing aid Mtundu wa makina omvera	1=Hearing aid worn in pocket 2=Hearing aid worn behind the ear 3=Hearing aid worn in the ear 4=Unsure 1= Makina omvera oika mthumba 2= Makina omvera ovala kumbuyo kwa khutu 3= Makina omvera ovala mkati mwa khutu	

		4= Sindikudziwa	
C15	In the past year, how often have you worn your hearing aid? Chaka chapitachi mwakhala mukuvala makina omvera kwa nthawi yayitali bwanji?	1=Never/sindinamvalepo 2=Once a week/kamodzi pa sabata. 3=2-6 times a week/kawiri kapena ka 6 pa sabata. 4=Every day/tsiku ndi tsiku	
C16	What is the main reason that you do not always wear your hearing aids? Chifukwa chani simumavala makina omvera nthawi zonse?	1) They are uncomfortable 2) They don't help my hearing 3) They are broken 4) They were lost or stolen 5) I wear them when I go out 6) I don't need to communicate all of the time 7) I feel embarrassed when wearing them 1= amandisowetsa mtendere. 2= samathandiza kuti ndidzimva bwino 3= anaonongeka 4= anataika kapena kubedwa 5= ndimavala ndikakhala pa ulendo. 6= sindimafuna kulumikizana nthawi zonse. 7= ndimachita manyazi ndikavala	
C17	Think about the situation where you most wanted to hear better before you got your hearing aids. Musanapeze makina omvera kumbukirani nthawi yomwe mumalalaka kuti mumve bwino. Over the past two weeks, how much has your hearing aids helped in that specific situation? Kwa masabata awiri apitawo, makina anu akuthandizani motani munyengo yoteroyo.	1) Helped not at all 2) Helped slightly 3) Helped moderately 4) Helped quite a lot 5) Helped very much 1= Sanandithandize. 2= Anathandiza pang'ono. 3= Anathandiza pakati ndi pakati. 4= Amathandiza kwambiri 5= Amathandiza kwambiri zedi.	
C18 a)	Do you have difficulty hearing? Kodi mumavutika kuti mumve?	1=No difficulty 2=Yes, some difficulty 3=Yes, a lot of difficulty 4=Cannot do at all 1=Ayi sindimavutika 2=Eya ndimavutika pang'ono 3=Eya ndimavutika kwambiri 4=Sindimamveratu	
C18 b)	Do you have difficulty hearing, even if wearing your hearing aids? Kodi mumavutika kumva ngakhale mutavala makina omvera?	1=No difficulty 2=Yes, some difficulty 3=Yes, a lot of difficulty 4=Cannot do at all 1=Ayi sindimavutika 2=Eya ndimavutika pang'ono 3=Eya ndimavutika kwambiri 4=Sindimamveratu	
C19	How long have you experienced difficulties with your hearing? Papita nthawi yayitali bwanji chiyambireni mukuvutika ndi vuto la kusamvetsetsa?	1=Since birth 2=Since childhood 3=Since adulthood 4=Not known 5=Other (specify) 1= Chibadwireni 2= Kuyambira ndili wang'ono	

		3= Ndili wamkulu kale 4=Sindikudziwa. 5= Other (specify)	
C20	<p>For those who have hearing loss since adulthood Can you estimate how many years ago you started having difficulties?</p> <p>Mongo yerekeza mungakumbukire kuti patha zaka zingati chiyambireni vuto lanu lakusamvetsetsa?</p>	↯	
C21	<p>Was your hearing loss gradual or sudden? Kodi vuto lakusamvetsetsali linangoyamba mwadzidzidzi kapena linayamba pang'ono pang'ono?</p>	<p>1=Gradual 2=Sudden</p> <p>1= Pang'ono pang'ono 2= Mwadzidzidzi</p>	
C22	<p>Did anything happen around the time your hearing loss started?</p> <p>Pali china chake chomwe chinachitika panthawi yomwe mamvedwe anu munazindikira kuti akutsika?</p>	<p>1=Yes 2=No</p> <p>1=Eya 2=Ayi</p>	
C22.1	<p>Please specify what happened</p> <p>Chonde fotokozani momwe zinakhala.</p>	↯	
C23	<p>Have you had surgery on your ears in the past? Munayamba mwapangidwa opreshoni yamakutu</p>	<p>1=Yes → 2=No →</p> <p>1=Eya → 2=Ayi →</p>	<p>Go to C24 Go to C25</p>
C24	<p>When was the surgery? Opreshoni munapangidwa liti?</p>	<p>1=3 months ago or less 2=More than 3 months ago</p> <p>1= Mwezi itatu yapitayo kapena kuchepera 2=Mwezi yoposa itatu</p>	
C25	<p>Do you have a history of discharging ears? Munayamba mwatuluka mafinya mkhutu?</p>	<p>1=Yes 2=No</p> <p>1=Eya 2=Ayi</p>	
EXAMINATION For the LEFT and RIGHT ears			
C26	Does the participant have any ear pain?	<p>1=Yes in pinna 2=Yes in ear canal 3=Yes behind my ear 4=No</p>	
C27	Pinna	<p>1=Normal 2=Abnormal</p>	
	Canal		
C28	Inflammation	<p>1=Yes 2=No</p>	
C29	Impacted wax	<p>1=Yes 2=No</p>	
C30	Foreign body	<p>1=Yes 2=No</p>	
C31	Discharge	<p>1=Yes → 2=No →</p>	<p>Go to C31.1 Go to C32</p>
C31.1	Ask participant: how long have you had discharge?	<p>1=Less than 2 weeks 2=2 weeks or more</p>	
Tympanic membrane			
C32	Can the TM be seen?	<p>1=Yes → 2=No →</p>	<p>Go to C33 Go to C39</p>

C33	Perforation	1=Yes 2=No	
C34	Shape	1=Normal 2=Bulging 3=Retracted	
C35	Colour	1=Pearly white 2=Red 3=Pearly white	
C36	Light reflex visible	1=Yes 2=No	
C37	Middle ear	1=Normal 2=Fluid 3=Not seen	
C38	Summary of ear examination	1=Normal 2=Abnormal	
C39	Is this abnormality likely to be the cause of hearing loss in this ear?	1=Yes 2=No	
C40	What is the diagnosis in this year? (based on the ear examination)	1=AOM 2=OME 3=CSOM 4=Wax 5=FB 6=OE 7=DP 8=Normal 9=Other (specify)	
C41	What is the likely cause of hearing loss in this ear? (if hearing loss present)	1=Acute otitis media 2=Otitis media with effusion 3=Chronic suppurative otitis media 4=Impacted wax (fully occluding) 5=Foreign body 6=Otitis externa 7=Dry perforation 8=Infectious disease (e.g. meningitis, 9=HIV, malaria) 10=Noise exposure 11>Ototoxic medication 12=Congenital 13=Non-infectious disease (e.g. diabetes, cardiovascular disease) 14=Unknown	
C42	What management did you provide for this participant?	1=Treatment in the field, no referral → 2=Treatment in the field and referral → 3=Referral → 4=No action→	Go to C43 Go to C43 Go to C44 Go to C45
C43	What treatment did you provide in the field	1=Dry mop 2=Oral antibiotics 3=Topical antibiotics 4=Topical antifungal 5=Analgesics (e.g. paracetamol) 6=Wax removal 7=Foreign body removal	
C44	What was the referral for?	1=Diagnostic hearing evaluation and possible hearing aid fitting 2=Surgical assessment 3=Wax removal following wax drops 4=Other (specify)	
C45	Ask participant: did your hearing improve following wax or foreign body removal?	1) Yes 2) No 3) Not applicable	

Additional questions			
C45	Does the participant have any other physical features on head and neck associated with hearing loss (e.g. skin tags, eye colour)?	1=Yes 2=No	
C45.1	Specify		
Previous care seeking (questions for the participant)			
C47	Have you ever sought care for your ear or hearing difficulties? <i>Munayambapo mwafunafuna thandizo chifukwa cha vuto lomwe mulinalo lakusamvetsetsalo?</i>	1=Yes → 2=No → 1= <i>Eya</i> → 2= <i>Ayi</i> →	Go to C48 Go to C50
C48	If so where did you seek care? <i>Munakafuna kuti thandizolo?</i>	1=Health Centre 2=Public Hospital 3=Private clinic 4=Traditional provider 5=Pharmacist 6=Other (specify) 1= <i>Chipatala chaching'ono</i> 2= <i>Chipatala cha aliyense</i> 3= <i>Chipatala cholipira</i> 4= <i>Sing'anga</i> 5= <i>Kwa dokolala yemwe anaphunzira zokhudza mankhwala</i> 5= <i>Thandizo lina</i>	
C49	What treatment did you receive? <i>Munalandira thandizo lanji?</i>	1=Medication 2=Surgery 3=Assistive device 4=No treatment 5=Other (specify) 1= <i>Mankhwala</i> 2= <i>Opareshoni</i> 3= <i>Machini omvera</i> 4= <i>Sindinalandire thandizo</i> 5= <i>Thandizo lina</i>	
C50	What was the reason that you have not sought care? <i>Chifukwa chani simunafunefune thandizo?</i>	1=Need not felt 2=Fear 3=Cannot afford treatment 4=Treatment denied by provider 5=Unaware that treatment is possible 6=No access to treatment 7=Other (specify) 1= <i>Sikunali kofunika</i> 2= <i>Ndimaopa</i> 3= <i>Sindinakwanitse kulipira kuti ndilandire thandizo.</i> 4= <i>Anakana kundithandiza.</i> 5= <i>Sindimadziwa kuti thandizo lilipo.</i> 6= <i>Sindinakwanitse kufikira thandizo loyenera.</i> 7= <i>Chifukwa china</i>	

Interviewer: Take note if this person has a problem in either ear. Referrals for participants – provide counselling on referral and information sheet for those in need

Thank participant for their time. END QUESTIONNAIRE SET