XPHACTOR-MAIN	STUDY ID	ENTIFIER	Date of Enrolment	
AUR2-6-112-	-	-	/ /	
Protocol-	Site code- 533=Mamelodi;	Participant ID	dd/MMM/yyyy	
	541=Nthabiseng, Baragwanath XXX=Third Site			

Visit 1: Enrolment Visit for Economics Cohort

Complete this CRF for all patients enrolled in the economics cohort. Read questions carefully and ask all questions as specified in the CRF. Read out: I will now ask you some questions about where you have been receiving health care in the last 3 months and money that you paid to receive the health care. I will ask you some questions about the type of work that you do and who helps you when you are ill.

Health service utilization and costs Ask each of the highlighted questions, if the answer is No, write 00 and score out until the next highlighted question. If the answer is yes, continue to ask each question. This public clinic Instructions: here we are referring to the clinic from which this interview is being conducted. Is *this* clinic your usual public clinic? 0=No 1=Yes Your usual public clinic would be the one that you go to most often, and which you go to first when you are feeling 1.1 ill. How much time did you spend in this clinic on your last visit? 1.2 Enter answer in hh:mm. What was the reason(s) for your last visit to this public clinic? "Symptoms refers to TB related symptoms such as cough,fever, weight loss, or night sweats" 01=Symptoms and collecting ARV medicine 06=HIV care only 02=Symptoms and HIV care 07=TB tests only 1.3 08=HIV care and TB tests 03=Symptoms and TB tests 09=non-TB|HIV services 04=Symptoms only 05=Collecting ARV medicine only 10=HIV care and Collecting ARV medicine 99=Other combination If other combination, please specify Aside from today, how many times, in total, have you visited this clinic in the last 3 months? 1.4 This includes visits to the clinic pharmacy. Enter 00 if this is first visit. If answer is 00, score out table below. What were the reasons for these visits? Ask participant what the reason for each visit mentioned above is and then match this to the categories below. Please specify number of visits for each reason in the last three months, next to each category, and enter 00 if none. If we add up the visits below it should be the same as the number of visits provided in 1.4. 1.5a. Symptoms (cough, fever, weight loss, or night sweats) AND Collecting ARV medicine |___| 1.5b. Symptoms AND HIV care (incl. visits for seeing the doctor, blood tests and counselling) |____| 1.5c. Symptoms AND TB tests (incl. chest x-rays, collecting TB screening results) 1.5d. Symptoms only 1.5 1.5e. HIV care AND Collecting ARV medicine 1.5f. HIV care AND TB tests 1.5g. Collecting ARV medicine only 1.5h. HIV care only 1.5i. TB tests only ____ 1.5j. Non-TB/HIV services

1.5k. Other combination

If other combination, please specify

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Public	clinic oth	er than this one				
		u had to visit a public clinic ot	her than this one in the	last 3 months? 0=No 1=Yes		
		is No, please score out the rest o				I
,,		her public clinic your usual cli				
				and which you go to first when you a	re feeling ill.	l
		st 3 months, how many times des visits to the clinic pharmacy.	, în total, nave you visite	ed the other public clinic?		
	What we Ask partic of visits fo	ere the reasons for these visit	visit mentioned above is an nonths, next to each categ		below. Please s	pecify number
	2.4a.	Symptoms (cough, fever, wei	ght loss, or night sweats	a) AND Collecting ARV medicine		_
	2.4b.	Symptoms AND HIV care (inc	. visits for blood tests a	nd counselling)		
	2.4c.	Symptoms AND TB tests (incl	chest x-rays, collecting	TB screening results)		
	2.4d.	Symptoms only				
2.4	2 4e	HIV care AND Collecting ARV	medicine			89
		HIV care AND TB tests				
					II	-
	2.4g.	Collecting ARV medicine only				-
	2.4h.	HIV care only				_
	2.4i. 1	۲B tests only				
	2.4j. I	Non-TB/HIV services				
	2.4k.	Other combination				
	If other	combination, please specify				
	What wa	as the main mode of transpor	t taken on your last visit	to the other public clinic?		
2.5	01=Wal	ked 04=Metered Taxi	07=Train	·		
	02=Bicy		99=Other			
	03=Bus					
		please specify		ou last visited the other public		
26		000.00=No cost)	tion (round trip) when y	fou last visited the other public	R	
			travelling (round trip)	when you last visited the other p	ublic	
	clinic?					•
	Enter hh:		-			•
	Enter hh:	ch time did you spend in the	other clinic on your last	VISIT?		_
		<u>n:</u> include the time from when yo	ou first arrived to when you	ı left.		•
		as the reason(s) for your last	-			
		ms refers to TB related symptom. ptoms and collecting ARV medic		ght loss, or night sweats"		
		ptoms and HIV care	07=TB tests only			
2.9	03=Sym	ptoms and TB tests	08=HIV care and T			
		ptoms only	09=non-TB HIV se			
		ecting ARV medicine only er combination	TO=HIV care and C	Collecting ARV medicine		
		combination, please specify	I			_
2.10		ny adults accompanied you to	the other public clinic	on your last visit?		

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ublic clinic ot	her than th	is one						
or each adult	who accom	panied you, compl	lete main occupatio	on category (and specify if n	ecessary u	ising the cod	de list below
2.10a. Adult 1	main	2.10b. Adult 2 ma			2.10d. Adult	4 main		lult 5 main
occupation:		occupation:	occupation	:	occupation:		occupatio	on:
If other, speci	fy:	If other, specify:	If other, spe	ecify:	If other, spe	cify:	If other, s	specify:
•	oyed by gove				te for profit sect			
•	oyed by NGO mployed (no			employed (me employed (fro	erchant), busines m home)	s with empl	oyees	
07 = Unem	ployed/looki		08 = Retir		,			
09 = Pupil/		: f -)	10 = Disa	•				
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In the l 3.1 Enter 00 What v Ask part of visits be the s of visits be the s 3.2a. 3.2b. 3.2b. 3.2c. 3.2d. 3.2d. 3.2d. 3.2e. 3.2f. 3.2g. 3.2h. 3.2i. 3.2i. 3.2i. 3.2i. 3.2k. If oth What v 02=Bir 03=Bu	last 3 month O if not visite were the rea- ticipant what s for each rea- same as the r Symptom Symptom Symptom Symptom HIV care A HIV care A Collecting HIV care of TB tests o Non-TB/H Other corr er combina was the mai falked cycle	hs, how many times d a private pharmacy, asons for these visit t the reason for each ison in the last three r number of visits provid s (cough, fever, weil s AND HIV care (incl s AND TB tests (incl s only AND Collecting ARV AND TB tests g ARV medicine only only IV services nbination tion, please specify in mode of transpor 04=Metered Taxi 05=Own car 06=Lift in a car	, then score out the re ts? visit mentioned above months, next to each ded in 3.1 ight loss, or night sv cl. visits for blood te l. chest x-rays, colle ' medicine ' medicine	est of the table e is and then n category, and weats) AND (ests and cour ecting TB scre	vate pharmacy e. natch this to the enter 00 if none Collecting ARV iselling) rening results)	categories b . If we add u medicine	up the visits b	
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D						
	e Pharma	-	a about the pharmacy in	the clinic these visits should	be recorded under "this clinic" or	"other public clinic" visits
			rivate pharmacies.	the child, those visits should	be recorded under this chinc of	other public clinic visits,
			•	private pharmacy on your l	ast visit?	
3.7	Enter hh					
•			e the time from when vo	u first arrived to when you lef	ft.	•
				it to the private pharmacy		
				uch as cough,fever, weight lo		
			d collecting ARV medicin			
		-	d HIV care	07=TB tests only		
3.8		-	d TB tests	08=HIV care and TB tes	sts	
		ptoms on		09=non-TB HIV service	25	
			, / medicine only	10=HIV care and Collec		
		er combin			8	
	If other	combinat	ion, please specify			1 11
3.9			s accompanied you to , please score out table b	your usual private pharma pelow)	acy on your last visit?	_
For ea	ich adult d	accompa	nied, complete main c	occupation category and s	pecify if necessary using the c	ode list below.
3.9a	. Adult 1 n	nain	3.9b. Adult 2 main	3.9c. Adult 3 main	3.9d. Adult 4 main	3.9e. Adult 5 main
occu	pation:		occupation:	occupation:	occupation:	occupation:
lf otł	ner, specif	y:	If other, specify:	If other, specify:	If other, specify:	If other, specify:
(((yed by NG nployed (n ployed/loo tudent maker/ hc	O no employees) oking for work	04 = Self-e	led/sick	h employees
			you spent on medicat	ions or other consumable	s in total (for all visits) at the	
			,			
	How m private 0000=N	pharmac o cost; if n	y in the last 3 months o cost, please score out t ou can include costs incu	he rest of the table	ent to the pharmacy for you, but	D
ç	How m private 0000=N	pharmac c cost; if n <u>on:</u> here y	o cost, please score out t	he rest of the table	ent to the pharmacy for you, but	<i>R</i> .
ç	How m private 0000=Na Instructi you paic	pharmac o cost; if n <u>on:</u> here y I.	o cost, please score out t ou can include costs incu	he rest of the table rred even if someone else we	ent to the pharmacy for you, but ables bought for one/more of	R .

By: Date

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	541=Nthabiseng, Baragwanath XXX=Third Site			

	e doctor (GP or private clinic) ctions: If patient paid a single amount, repor	t the amount naid under consultation fees		
motra	In the last 3 months, how many times, in to	· · ·		
4.1	Enter 00 if not visited private doctor. If answer is			
		entioned above is and then match this to the categories s, next to each category, and enter 00 if none. If we add		
	4.2a. Symptoms (cough, fever, weight lo	ss, or night sweats) AND Collecting ARV medicine		
	4.2b. Symptoms AND HIV care (incl. visit			
	4.2c. Symptoms AND TB tests (incl. ches	t x-rays, collecting TB screening results)	<u> </u>	
4.2	4.2d. Symptoms only		<u> </u>	
4.2	4.2e. HIV care AND Collecting ARV medi 4.2f. HIV care AND TB tests	cine		
	4.2g. Collecting ARV medicine only			
	4.2h. HIV care only			
	4.2i. TB tests only			
	4.2j. Non-TB/HIV services			
	4.2k. Other combination			
	If other combination, please specify			
		on your last visit to your usual private doctor?		
4.3		Train		
	02=Bicycle 05=Own car 99= 03=Bus / Taxi 06=Lift in a car	Other		
4.20	· · · · · · · · · · · · · · · · · · ·			
4.3a	If other, please specify	round trip) when you last visited your usual private		
4.4	doctor? (0000.00=No cost)		^c R	•
4.5	How much time in total did you spend trav private doctor? <i>Enter hh:mm</i>	elling (round trip) when you last visited your usual		:
4.6	How much time did you spend at the priva Enter hh:mm Instruction: include the time from when you first			:
	What was the reason(s) for your last visit to			
	"Symptoms refers to TB related symptoms such			
	01=Symptoms and collecting ARV medicine 02=Symptoms and HIV care	06=HIV care only 07=TB tests only		
4.7	03=Symptoms and TB tests	08=HIV care and TB tests		
	04=Symptoms only	09=non-TB HIV services		
	05=Collecting ARV medicine only	10=HIV care and Collecting ARV medicine		
	99=Other combination			
	If other combination, please specify			
4.8	How many adults accompanied you to the (00 =none; if none, please score out the table be			

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Private doo	ctor (GP or p	private clinic)				
	_ , ,	J / 1	port the amount paid unde	•		
	•			pecify if necessary using the		
4.8a. Adul occupatio		4.8b. Adult 2 main occupation:	4.8c. Adult 3 main occupation:	4.8d. Adult 4 main occupation:	4.8e. Adult occupatior	
If other, s	pecify:	If other, specify:	If other, specify:	If other, specify:	lf other, sp	ecify:
03 = Ei 05 = Se 07 = U 09 = Pi	Inemployed/lo upil/student	GO (no employees) ooking for work	04 = Self-en	-	ith employees	
	lome maker/ I Other, specify	house wife	12 = Daily la	abourer		
Ho 4.9 th	ow much hav ne private do	ctor in the last 3 months	t ions or other consumable 5? ut question directly below)	s in total (for all visits) at	R	•
Of 4.9a of	f these costs	, how much was for meens of the symptoms (cough, fev		ables bought for one/more ats at the private doctor?	R	•
4 10			ation fees in total (for all v no cost please score out quest	isits) at the private doctor in tion directly below)	R	•
4.10a sy		ugh, fever, weight loss, r	sultation fees related to ar night sweats) at the private	, .	R	•
4.11 pr		, , , ,		in total (for all visits) at the case score out question directly	R	•
Of 4.11a (co	f these costs	weight loss, night sweat	mostic tests related to any s) at the private doctor?	of the following symptoms	R	•

XPHACTOR-MAIN	STUDY ID	ENTIFIER	Date	e of Enrolment	
AUR2-6-112-	-	-	/	/	THE AURUN
Protocol-	Site code- 533=Mamelodi; 541=Nthabiseng, Baragwanath XXX=Third Site	Participant ID	dd,	/МММ/уууу	

	al outpatient	single amount, report the	amount naid under con	sultation fees		
mstruct				d a hospital outpatient clinic?		
5.1				se score out the rest of the table.		
	Ask participant who specify number of v	-	e last three months, next	then match this to the categories be to each category, and enter 00 if no rovided in 5.1.		
	5.2a. Symptom	ns (cough, fever, weight	loss, or night sweats)	AND Collecting ARV medicine		
		ns AND HIV care (incl. vi				
		ns AND TB tests (incl. ch	est x-rays, collecting 1	B screening results)	<u> </u>	
	5.2d. Symptom				<u> </u>	
5.2		AND Collecting ARV me	dicine			
		AND TB tests				
		g ARV medicine only				
	5.2h. HIV care	-				
	5.2i. TB tests o	·				
		HIV services				
		mbination			I	
	If other combina	ation, please specify				
			•	your usual hospital outpatient cli	inic?	
5.3	01=Walked 02=Bicycle		07=Train 99=Other	_		
	03=Bus / Taxi	06=Lift in a car		_		1 11 1
5.3a	If other, please sp					11
5.4		al cost of transportation	n (round trip) when yc	ou last visited your usual hospital	R	•
5.5			avelling (round trip) w	hen you last visited your usual		•
		nt clinic? <i>Enter hh:mm</i> did you spend in the hos	nital outpatient clinic	on your last visit?		•
5.6	Enter hh:mm					•
		the time from when you f son(s) for your last visit				•
		TB related symptoms such				
		collecting ARV medicine	06=HIV care only			
	02=Symptoms and	-	07=TB tests only			
5.7	03=Symptoms and		08=HIV care and TB t	ests		
	04=Symptoms only		09=non-TB HIV servi			
	05=Collecting ARV	•	10=HIV care and Coll	ecting ARV medicine		
	99=Other combinat					
	If other combinatio			ationt alinia an vous last visit?		<u> </u>
5.8	How many adults (00 =none)	accompanied you to yo	our usual nospital outp	patient clinic on your last visit?		

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Hospital out	-					
			he amount paid under consu	Itation fees. pecify if necessary using the	codo list hole	
5.8a. Adult	-	5.8b. Adult 2 main	5.8c. Adult 3 main	5.8d. Adult 4 main	5.8e. Adult	
occupation:		occupation:	occupation:	occupation:	occupatior	
lf other, spe	ecify:	If other, specify:	If other, specify:	If other, specify:	If other, sp	ecify:
03 = Emp	ployed by go ployed by NG -employed (04 = Self-ei	yed by private for profit sector mployed (merchant), business w mployed (from home)	vith employees	
		oking for work	08 = Retire			
	oil/student		10 = Disabl	•		
	ne maker/ h er, specify	ouse wife	12 = Daily la	abourer		
Ho 5.9 ho	w much ha spital outpa	ve you spent on medic atient in the last 3 mon ost, if no cost score out que	ths?	les in total (for all visits) at t	^{he} R	•
Of	these costs	s, how much was for me	edications or other consur	nables bought for one/more	of	
(00	000.00=No co	ost)		ts at the hospital outpatient?	° R	•
5.10 ou			<pre>tation fees in total (for all ? (0000.00=No cost, if no co.</pre>	visits) at the hospital st score out question directly	R	•
5.10a (co		weight loss, night swea	nsultation fees related to ats) related vists to the ho	any of the following sympton spital oupatient clinic?	^{ns} R	•
Но	w much ha	ve you spent on diagno	stic tests (including X-ray	rs) in total (for all visits) at th	e	
(00	000.00=No co	atient clinic in the last 3 ost, if no cost score out qu	estion directly below)		R	•
			agnostic tests related to an ats) at the hospital oupation	ny of the following symptom: ent clinic?		
	00.00=No co		, , , , , , , , , , , , , , , , , , , ,		R	•

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	In the last 3 m	onths, how m	any times	in total, have vo	u been admitted	to		
			-	-	patient, then score a			
n I	rest of the table.	•		unniticu us un mp				1 11
			or each of tl	he hospital adm	issions: (The total ı	number of		
n /		-	-	, the number repor		2		
Visit number	Were you	Date of admission [mm/yyyy]	How many nights were you in the hospital?	How many days did your friends and relatives accompany you while you were an inpatient at the hospital (multiply number of visitors and	How much have you spent on medications or other consumables at the inpatient department (including its pharmacy) during this admission? [0000.00=n0	How much have you spent on admission and consultation fees at the inpatient department during this admission? [0000.00=no cost]	How much have you spent on diagnostic costs (including x- rays) at the inpatient department during this admission? [0000.00=no	How much have you spent on food and other costs in total (for all visits) at the inpatient department in the last 3 months? [0000.00=no
1	[0=140 1=Yes]			number of days visited)? [00=none]	[0000.00=110 cost]		[0000.00-110 cost]	[0000.00=110 cost]
1								
2								
3								
V	Vhat is the mai	n mode of tra	ansport take	en on your last v	visit to your usual	hospital inpatier	nt department?	
		04=Metered 1			,		·	
5.3 -	02=Bicycle	05=Own car	99=Ot	her				
	03=Bus / Taxi	06=Lift in a ca	r					I
.3a lf	other, please	specify						
W			ansportatio	n (round trip) w	hen you last visit	ed vour usual ho	spital	
	npatient depart						R	•
ir				ravelling (round	trin) to hosnital v	vhen vou were la	act	
ır		in total did v		avening (round			ist.	
ir H	low much time			+?				
ir H 5.5 a	low much time ddmitted to th			t?				•
ir H 5 .5 a	low much time			t?				:
ir H 5.5 a <i>Ei</i>	low much time ddmitted to th <i>nter hh:mm</i>	e hospital as	an inpatien					:
ir H 5.5 a <i>E</i> reatme	low much time ddmitted to th <i>nter hh:mm</i> nt Costs: Tradi	e hospital as tional health	an inpatien practitione	er	u vicitad a traditi	onal health pract	-itioner?	:
ir H 5.5 a E reatme	low much time ddmitted to th <i>nter hh:mm</i> nt Costs: Tradi In the last 3 mo	e hospital as tional health onths, how m	an inpatien practitione any times,	er in total, have yo	u visited a traditio			:
reatme	low much time ddmitted to th <i>nter hh:mm</i> nt Costs: Tradi In the last 3 mc <i>Enter 00 if not vi</i> .	e hospital as tional health onths, how m sited a traditio	an inpatien practitione any times, nal health pr	er in total, have yo ractitioner. If ansv	ver is 00, please sco	ore out the rest of t		:
ir H 5.5 a E reatme	low much time ddmitted to th <i>nter hh:mm</i> nt Costs: Tradi In the last 3 mc <i>Enter 00 if not vi</i> .	e hospital as tional health onths, how m sited a traditio	an inpatien practitione any times, nal health pr	er in total, have yo ractitioner. If ansv		ore out the rest of t		:
reatme	low much time ddmitted to th <i>nter hh:mm</i> nt Costs: Tradi In the last 3 mc <i>Enter 00 if not vi</i> .	e hospital as tional health onths, how m sited a traditio	an inpatien practitione any times, nal health pr	er in total, have yo ractitioner. If ansv	ver is 00, please sco	ore out the rest of t		:
7.2	low much time ddmitted to th <i>nter hh:mm</i> nt Costs: Tradi In the last 3 mo <i>Enter 00 if not vi.</i> What was the r	e hospital as tional health onths, how m sited a traditic reason(s) for	an inpatien practitione any times, mal health pr your visits t	er in total, have yo ractitioner. If answ to the traditiona	ver is 00, please sca I health practitior	re out the rest of t ner?	he table.	:
reatme 7.1	low much time ddmitted to th <i>nter hh:mm</i> nt Costs: Tradi In the last 3 mc <i>Enter 00 if not vi</i> . What was the r What is the ma	e hospital as tional health onths, how m sited a traditic reason(s) for	an inpatien practitione any times, mal health pr your visits t ransport tal	er in total, have yo ractitioner. If answ to the traditiona	ver is 00, please sco	re out the rest of t ner?	he table.	:
reatme 7.1	low much time ddmitted to th <i>nter hh:mm</i> nt Costs: Tradi In the last 3 mc <i>Enter 00 if not vi</i> . What was the r What is the ma 01=Walked	e hospital as tional health onths, how m sited a traditio reason(s) for in mode of t	an inpatien practitione any times, <i>mal health pr</i> your visits t ransport tal red Taxi	er in total, have yo ractitioner. If answ to the traditiona to the traditiona	ver is 00, please sca I health practitior	re out the rest of t ner?	he table.	:
rin H S.5 a Er Peatme 7.1 / 7.2 -	low much time ddmitted to th nter hh:mm nt Costs: Tradi In the last 3 mo Enter 00 if not vi What was the r What is the ma 01=Walked 02=Bicycle	e hospital as tional health onths, how m sited a traditic reason(s) for in mode of to 04=Meter	an inpatien practitione any times, <i>inal health pr</i> your visits t ransport tal red Taxi ar	er in total, have yo ractitioner. If answ to the traditiona to the traditiona cen on your last 07=Train	ver is 00, please sca I health practitior	re out the rest of t ner?	he table.	:
7.2	low much time ddmitted to th <i>nter hh:mm</i> nt Costs: Tradi In the last 3 mc <i>Enter 00 if not vi</i> . What was the r What is the ma 01=Walked	e hospital as tional health onths, how m sited a tradition reason(s) for in mode of the 04=Meter 05=Own of 06=Lift in	an inpatien practitione any times, <i>inal health pr</i> your visits t ransport tal red Taxi ar	er in total, have yo ractitioner. If answ to the traditiona to the traditiona cen on your last 07=Train	ver is 00, please sca I health practitior	re out the rest of t ner?	he table.	:

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	ment Costs: Tradi	tional nealth practitioner			
		e in total did you spend tr		vou last visited vour	
7.5		al health practitioner? Ent		,,,,.	•
		e did you spend at the tra		or on your last visit?	
7.6	Enter hh:mm	e ulu you spellu at the tra	unional health practitione		
7.0		de the time from when you f	irst arrived to when you left		•
		ason(s) for your last visit		ractitioner?	
		to TB related symptoms such			
		nd collecting ARV medicine	06=HIV care only	, or mynt sweats	
	02=Symptoms ar		07=TB tests only		
7.7	03=Symptoms ar		08=HIV care and TB tests		
/./	04=Symptoms or		09=non-TB HIV services		
	05=Collecting AR	•	10=HIV care and Collectin	ag APV modicing	
	99=Other combi				
		tion, please specify			1 11
				traditional boalth	I
7.8	-	Its accompanied you on y		traditional nealth	
_		0=none. If none, please score			I
				ecify if necessary using the	
	. Adult 1 main	7.8b. Adult 2 main	7.8c. Adult 3 main	7.8d. Adult 4 main	7.8e. Adult 5 main
occu	pation:	occupation:	occupation:	occupation:	occupation:
C)1 = Employed by go)3 = Employed by No)5 = Self-employed (GO	04 = Self-em	ed by private for profit sector ployed (merchant), business v ployed (from home)	
C)3 = Employed by No 05 = Self-employed (GO (no employees)	04 = Self-em		
C C C	03 = Employed by No	GO (no employees)	04 = Self-em 06 = Self-em	ployed (merchant), business v ployed (from home)	
	03 = Employed by N0 05 = Self-employed (07 = Unemployed/lo	GO 'no employees) oking for work	04 = Self-em 06 = Self-em 08 = Retired 10 = Disabled	ployed (merchant), business v ployed (from home)	
0 0 0 1)3 = Employed by N(05 = Self-employed (07 = Unemployed/lo 09 = Pupil/student	GO 'no employees) oking for work	04 = Self-em 06 = Self-em 08 = Retired 10 = Disabled	ployed (merchant), business v ployed (from home) d/sick	
0 0 0 1	03 = Employed by No 05 = Self-employed (07 = Unemployed/lo 09 = Pupil/student 11 = Home maker/ h 09 = Other, specify	GO 'no employees) oking for work	04 = Self-em 06 = Self-em 08 = Retired 10 = Disabled 12 = Piece w	ployed (merchant), business v ployed (from home) d/sick orker (odd jobs)	
0 0 0 1	03 = Employed by No 05 = Self-employed (07 = Unemployed/lo 09 = Pupil/student 11 = Home maker/ h 09 = Other, specify How much mor	GO no employees) oking for work ouse wife	04 = Self-em 06 = Self-em 08 = Retired 10 = Disabled 12 = Piece w	ployed (merchant), business v ployed (from home) d/sick orker (odd jobs)	with employees
0 0 0 1 9	03 = Employed by No 05 = Self-employed (07 = Unemployed/lo 09 = Pupil/student 11 = Home maker/ h 09 = Other, specify How much mor	GO ino employees) oking for work ouse wife ney have you spent in tota che last 3 months?	04 = Self-em 06 = Self-em 08 = Retired 10 = Disabled 12 = Piece w	ployed (merchant), business v ployed (from home) d/sick orker (odd jobs)	
0 0 1 9 7.9	03 = Employed by No 05 = Self-employed (07 = Unemployed/lo 09 = Pupil/student 11 = Home maker/ h 09 = Other, specify How much mor practitioner in t (0000.00=No cost	GO no employees) ooking for work ouse wife ney have you spent in tota the last 3 months? t)	04 = Self-em 06 = Self-em 08 = Retired 10 = Disabled 12 = Piece w	ployed (merchant), business v ployed (from home) d/sick orker (odd jobs)	with employees
0 0 1 9 7.9	03 = Employed by No 05 = Self-employed (07 = Unemployed/lo 09 = Pupil/student 11 = Home maker/ h 09 = Other, specify How much mor practitioner in t (0000.00=No cost	GO ino employees) ioking for work iouse wife hey have you spent in tota the last 3 months? t) te for all participants	04 = Self-em 06 = Self-em 08 = Retired 10 = Disabled 12 = Piece w I (for all visits) at the trad	ployed (merchant), business o ployed (from home) d/sick orker (odd jobs) itional health	with employees
0 0 1 9 7.9	03 = Employed by No 05 = Self-employed (07 = Unemployed/lo 09 = Pupil/student 11 = Home maker/ h 09 = Other, specify How much mor practitioner in t (0000.00=No cost ements – complet In the last 3 mo	GO ino employees) ioking for work iouse wife hey have you spent in tota the last 3 months? t) te for all participants onths, how much money h	04 = Self-em 06 = Self-em 08 = Retired 10 = Disabled 12 = Piece w I (for all visits) at the trad	ployed (merchant), business ployed (from home) d/sick orker (odd jobs) itional health ments to your diet to keep	with employees
7.9	 Bar Self-employed by No. Self-employed (j) Unemployed/lo Pupil/student Home maker/h Other, specify How much morpractitioner in the (0000.00=No cost) Comments - complete In the last 3 mory your body strong 	GO ino employees) oking for work nouse wife ney have you spent in tota the last 3 months? t) te for all participants onths, how much money h ng (eg. vitamins, extra me	04 = Self-em 06 = Self-em 08 = Retired 10 = Disabled 12 = Piece w I (for all visits) at the trad	ployed (merchant), business ployed (from home) d/sick orker (odd jobs) itional health ments to your diet to keep	with employees R .
0 0 1 9 7.9	03 = Employed by No 05 = Self-employed (07 = Unemployed/lo 09 = Pupil/student 11 = Home maker/ h 09 = Other, specify How much mor practitioner in t (0000.00=No cost ements – complet In the last 3 mo	GO ino employees) oking for work nouse wife ney have you spent in tota the last 3 months? t) te for all participants onths, how much money h ng (eg. vitamins, extra me	04 = Self-em 06 = Self-em 08 = Retired 10 = Disabled 12 = Piece w I (for all visits) at the trad	ployed (merchant), business ployed (from home) d/sick orker (odd jobs) itional health ments to your diet to keep	with employees
7.9 8.1	 Bar Self-employed by No. Self-employed (j.) Self-employed (j.) Unemployed/lo Pupil/student Home maker/ h Other, specify How much mor practitioner in t (0000.00=No cost) ements – complet In the last 3 mor your body strong (0000.00=No cost)	GO ino employees) ioking for work iouse wife hey have you spent in tota the last 3 months? t) te for all participants onths, how much money h ng (eg. vitamins, extra me it)	04 = Self-em 06 = Self-em 08 = Retired 10 = Disabled 12 = Piece w I (for all visits) at the trad	ployed (merchant), business ployed (from home) d/sick orker (odd jobs) itional health ments to your diet to keep	with employees R .
7.9 5upplo 8.1	 33 = Employed by No. 55 = Self-employed (j.) 7 = Unemployed/lo. 99 = Pupil/student 11 = Home maker/ h 99 = Other, specify How much more practitioner in the (0000.00=No cost) ements - complete In the last 3 more your body strong (0000.00=No cost) h Insurance - complete 	GO ino employees) ioking for work iouse wife hey have you spent in tota the last 3 months? t) te for all participants onths, how much money h ng (eg. vitamins, extra me it)	04 = Self-em 06 = Self-em 08 = Retired 10 = Disabled 12 = Piece w I (for all visits) at the trad	ployed (merchant), business ployed (from home) d/sick orker (odd jobs) itional health ments to your diet to keep	with employees R .
7.9 Supple	 33 = Employed by No. 55 = Self-employed (j) 57 = Unemployed/lo 59 = Pupil/student 11 = Home maker/h 59 = Other, specify How much morpractitioner in the (0000.00=No cost) 60000.00=No cost 60000.00=N	GO (no employees) (oking for work house wife hey have you spent in tota the last 3 months? t) te for all participants onths, how much money h ng (eg. vitamins, extra me st) pplete for all participants medical aid? 0=No 1=Ye	04 = Self-em 06 = Self-em 08 = Retired 10 = Disabled 12 = Piece w I (for all visits) at the trad	ployed (merchant), business ployed (from home) d/sick orker (odd jobs) itional health ments to your diet to keep medicines)?	R.
7.9 Supple 8.1 Health	 33 = Employed by No. 53 = Self-employed (j. 53 = Self-employed (j. 54 = Unemployed/lo 59 = Pupil/student 11 = Home maker/ h 59 = Other, specify How much more practitioner in the (0000.00=No cost) 60 = Complete the second s	GO (no employees) (oking for work (ouse wife (hey have you spent in total (he last 3 months? (t) (te for all participants (onths, how much money h (eg. vitamins, extra me (t) (plete for all participants (medical aid? 0=No 1=Ye (please score out question di	04 = Self-em 06 = Self-em 08 = Retired 10 = Disabled 12 = Piece with 14 (for all visits) at the trad nave you spent on supple wat, energy drinks, fruit or s rectly below. It counts as me	ployed (merchant), business of ployed (from home) d/sick orker (odd jobs) itional health ments to your diet to keep medicines)? dical aid even if someone else	R.
7.9 Supple	 33 = Employed by No. 53 = Self-employed (j. 53 = Self-employed (j. 54 = Unemployed/lo 59 = Pupil/student 11 = Home maker/h 59 = Other, specify How much more practitioner in the (0000.00=No cost) 60 = Complete the second se	GO ino employees) ooking for work house wife hey have you spent in tota the last 3 months? t) te for all participants onths, how much money h ng (eg. vitamins, extra me it) pplete for all participants medical aid? 0=No 1=Ye please score out question di medical aid but this participa	04 = Self-em 06 = Self-em 08 = Retired 10 = Disabled 12 = Piece we I (for all visits) at the trad have you spent on supple at, energy drinks, fruit or s rectly below. It counts as me in uses it to pay for medical s	ployed (merchant), business of ployed (from home) d/sick orker (odd jobs) itional health ments to your diet to keep medicines)? dical aid even if someone else	R.
7.9 8.1 Health	 33 = Employed by No. 53 = Self-employed (j. 53 = Self-employed (j. 54 = Unemployed/lo 59 = Pupil/student 11 = Home maker/h 59 = Other, specify How much more practitioner in the (0000.00=No cost) 60 = Complete the second se	GO (no employees) (oking for work (ouse wife (hey have you spent in total (he last 3 months? (t) (te for all participants (onths, how much money h (eg. vitamins, extra me (t) (plete for all participants (medical aid? 0=No 1=Ye (please score out question di	04 = Self-em 06 = Self-em 08 = Retired 10 = Disabled 12 = Piece we I (for all visits) at the trad have you spent on supple at, energy drinks, fruit or s rectly below. It counts as me in uses it to pay for medical s	ployed (merchant), business of ployed (from home) d/sick orker (odd jobs) itional health ments to your diet to keep medicines)? dical aid even if someone else	R.
7.9 Supple 8.1 Health	 B3 = Employed by NG B5 = Self-employed (j) B7 = Unemployed/lo B9 = Pupil/student B1 = Home maker/ h B9 = Other, specify How much mor practitioner in t (0000.00=No cost ements - complet In the last 3 mor your body stroid (0000.00=No cost h Insurance - com Do you have a If answer is No, paying for the n If yes, what ty 1 = Hospital cov 	GO ino employees) oking for work nouse wife hey have you spent in tota the last 3 months? t) te for all participants onths, how much money h ng (eg. vitamins, extra me it) plete for all participants medical aid? 0=No 1=Ye please score out question di medical aid but this participa pe of medical cover do yo	04 = Self-em, 06 = Self-em, 08 = Retired 10 = Disabled 12 = Piece wa If (for all visits) at the trad nave you spent on supple that, energy drinks, fruit or s rectly below. It counts as me int uses it to pay for medical s ou have?	ployed (merchant), business of ployed (from home) d/sick orker (odd jobs) itional health ments to your diet to keep medicines)? dical aid even if someone else	R.

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Work and Income – complete for all participants

Instructions: only complete the job categories applicable to this respondent. Please score out job categories not applicable. Each income source should only be reported once.

Government employment

Goven			
10.1	Three months ago, were you employed by government? 0=No 1=Yes If answer is No, please score out until end of this job category.		
10.2	How many days per month were you working for government? Use 22 days if working every day Monday to Friday; use 27 days if working every day Monday to Saturday; to calculate different combinations multiply number of days worked per week by 4.5.		
10.3	What was your income per month from government? (0000.00=No cost)	R	•
10.4	In the last three months, have your number of working days at government changed? 0=No 1=Increase 2=Decrease If no, score out the rest of the table.		
10.5	How many days per month are you working for government now?		
10.6	What was the reason for your change in working days? 1=One/more of the following symptoms (cough, fever, weight loss, or night sweats); 2 = Other symptoms; 3=Non-health related reasons		
10.7	What is your income per month from government now? (0000.00=No cost)	R	•

Private for profit (private company) employment

	ier prone (privace company) employment		
11.1	Three months ago, were you employed by a private company? 0=No 1=Yes If answer is No, please score out until end of this job category.		
11.2	How many days per month were you working for the private company? Use 22 days if working every day Monday to Friday; use 27 days if working every day Monday to Saturday; to calculate different combinations multiply number of days worked per week by 4.5.		
11.3	What was your income per month from the private company? (0000.00=No cost)	R	•
11.4	In the last three months, have your number of working days at the private company changed? 0=No 1=Increase 2=Decrease. <i>If no, score out the rest of the table.</i>		
11.5	How many days per month are you working for the private company now?		
11.6	What was the reason for your change in working days? 1=One/more of the following symptoms (cough, fever, weight loss, or night sweats); 2 = Other symptoms; 3=Non-health related reasons		
11.7	What is your income per month from the private company now?	R	•

NGO employment

	• •		
	Three months ago, were you employed by a NGO? 0=No 1=Yes		
12.1	If answer is No, please score out until end of this job category.		
	How many days per month were you working for a NGO?		
12.2	Use 22 days if working every day Monday to Friday; use 27 days if working every day Monday to		
	Saturday; to calculate different combinations multiply number of days worked per week by 4.5.		
12.3	What was your income per month from a NGO?	R	•
40.4	In the last three months, have your number of working days at a NGO changed?		
12.4	0=No 1=Increase 2=Decrease. If no, score out the rest of the table.		

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12.5	How many days per month are you working for a NGO now?		
12.6	What was the reason for your change in working days? 1=One/more of the following symptoms (cough, fever, weight loss, or night sweats); 2 = Other symptoms; 3=Non-health related reasons		
12.7	What is your income per month from the NGO now?	R	•

Self-employed business with employees

13.1	Three months ago, were you self-employed (with employees)? 0=No 1=Yes If answer is No, please score out until end of this job category.		
13.2	How many days per month were you self-employed (with employees)? Use 22 days if working every day Monday to Friday; use 27 days if working every day Monday to Saturday; to calculate different combinations multiply number of days worked per week by 4.5.		
13.3	What was your income per month from being self-employed (with employees)?	R	•
13.4	In the last three months, have your number of working days at government changed? 0=No 1=Increase 2=Decrease. <i>If no, score out the rest of the table.</i>		
13.5	How many days per month are you working as self-employed (with employees) now?		
13.6	What was the reason for your change in working days? 1=One/more of the following symptoms (cough, fever, weight loss, or night sweats); 2 = Other symptoms; 3=Non-health related reasons		
13.7	What is your income per month from self-employment (with employees) now?	R	•

Self-employed with no employees

	Three months ago, were you self-employed (no employees)? 0=No 1=Yes			
14.1	If answer is No, please score out until end of this job category.		1 1	
	How many days per month were you self-employed (no employees)?		· ·	
14.2	Use 22 days if working every day Monday to Friday; use 27 days if working every day Monday to			
	Saturday; to calculate different combinations multiply number of days worked per week by 4.5.			
			11	_
14.3	What was your income per month from being self-employed (no employees)?	R		
		/ \	•	
	In the last three months, have your number of working days as self-employed (no			
14.4	employees)? 0=No 1=Increase 2=Decrease			
	If no, score out to the end of this table.			
14.5	How many days per month are you working as self-employed (no employees) now?			
14.5	now many days per month are you working as sen-employee (no employees) now:		<u> </u>	
	What was the reason for your change in working days?			
14.6	1=One/more of the following symptoms (cough, fever, weight loss, or night sweats); 2 = Other			
	symptoms; 3=Non-health related reasons			
		~		
14.7	What is your income per month from self-employment (no employees) now?	R	•	

Self-em	ployed from home		
	Three months ago, were you self-employed (from home)? 0=No 1=Yes		
15.1	If answer is No, please score out until end of this job category.	I	
	If you are self-employed from home, what type of work do you do?		
15.2	1=computer based		
13.2	2=growing vegetables for own use		
	3=looking after the home (and looking after children)		

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15.3	How many days per month were you self-employed (from home)? Use 22 days if working every day Monday to Friday; use 27 days if working every day Monday to Saturday; to calculate different combinations multiply number of days worked per week by 4.5.	
15.4	What was your income per month from being self-employed (from home)? $m{R}$	•
15.5	In the last three months, have your number of working days as self-employed (from home) changed? 0=No 1=Increase 2=Decrease If no, score out to the end of this table.	
15.6	How many days per month are you working as self-employed (from home) now?	
15.7	What was the reason for your change in working days? 1=One/more of the following symptoms (cough, fever, weight loss, or night sweats); 2 = Other symptoms; 3=Non-health related reasons	
15.8	What is your income per month from self-employment (from home) now? ${\it R}$	•

Piece w	vork (Odd jobs)		
	Three months ago, were you doing piece work? 0=No 1=Yes		
16.1	If the answer is No, please score out until the end of this job category.		
	How many days per month were you doing piece work?		
16.2	Use 22 days if working every day Monday to Friday; use 27 days if working every day Monday to Saturday; to calculate different combinations multiply number of days worked per week by 4.5.		
16.3	What was your income per month from doing piece work?	R	•
	In the last three months, have your number of working days doing piece work changed?		
16.4	0=No, 1=Increase, 2=Decrease		
	If no, score out to the end of this table.		I
16.5	How many days per month are you doing piece work now?		
	What was the reason for your change in working days? 1=One/more of the following		
16.6	symptoms (cough, fever, weight loss, or night sweats); 2 = Other symptoms; 3=Non-health related reasons		
16.7	What is your income per month from doing piece work now?	R	•

Other employment

Use this section if participant is employed in a type of job not already covered, including domestic workers and/or child minders employed on a regular basis.

17.1	Three months ago, were you employed (other)? 0=No 1=Yes If the answer is No, please score out until the end of this job category.		
17.2	If yes, what type of work did/ are you doing?		
	How many days per month were you employed (other)?		
17.3	Use 22 days if working every day Monday to Friday; use 27 days if working every day Monday to		
	Saturday; to calculate different combinations multiply number of days worked per week by 4.5.		
17.4	What was your income per month from employed (other)?	R	•
	In the last three months, have your number of working days at employed (other) changed?		
17.5	0=No, 1=Increase, 2=Decrease		
	If no, score out to the end of this table.		
17.6	How many days per month are you working for employed (other) now?		

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17.7	 What was the reason for your change in working days? 1=One/more of the following symptoms (cough, fever, weight loss, or night sweats); 2 = Other symptoms; 3=Non-health related reasons 		
17.8	What is your income per month from employed (other) now?	R	•

Other income – complete for all participants

	Are you a pensioner? 0=No 1=Yes		
18.1	If no, score out to the next highlighted question.		
18.1a	If yes, what is your monthly pension?	R	
18.2	Do you receive any grants? 0=No 1=Yes If no, score out to the next highlighted question.		
18.3	Do you receive any of the following grants? 00=No, If yes, please specify number received. Unemployment insurance (UIF) Worker's compensation Grant for older persons Disability grant War veteran's grant Child grant/ foster child grant Child support grant Grant in aid Other		
18.3a	If other, please specify		
18.4	Do you receive a disability grant as a result of one/more of the following symptoms (cough, fever, weight loss, or night sweats)? 0=No 1=Yes		
18.5	What is the total income from these grants?	R	•
18.6	Do you receive income from an investment? 0=No 1=Yes If no, score out to the next highlighted question.		
18.6a	How much do you receive per month?	R	•
18.7	In the last 3 months, did you receive any non-monetary payments for your work (incl. food, clothes, and accommodation)? 0=No 1=Yes If no, score out to the next highlighted question.		
18.7a	How much would it have cost you if you had to buy these yourself?	R	•
18.7b	In the last 3 months, did you receive less such non-monetary payments due to a reduction in working hours because you were ill or as a result of seeking treatment? 0=No 1=Yes If no, score out to the next highlighted question.		
18.7c	What is the estimated monetary value of the loss of non-monetary payments you would have received?	R	•

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10.0		last 3 months, have you re	eceived any additional	income, su	ch as benefits, charity		
18.8		ions? 0=No 1=Yes core out to the next highlight	ed question.				
18.8a		is the estimated monetary ions, etc. you have receive		ty grants, b	enefits, charity	R	•
are							
	When	you are unable to work be	cause of feeling unwel	l, is anyone	else in your household at	ole to	
19.1		ver your household tasks ?		<i>, ,</i>	,		
	If no, so	core out to the next highlight	ed question.				
19.2	In the	last 3 months, how many	days have you taken of	ff your hous	ehold duties because you	were	
19.2	feeling	g ill or seeking treatment?					_
	What	is the main occupation of t	the person taking over	your house	hold tasks?	_	
		nployed by government		08=Retired			
		nployed by private for profit	sector	09=Pupil/s			
		mployed by NGO		10=Disable		_	
19.3		elf-employed (merchant), bus			maker/ house wife	_	
		elf-employed (merchant), bus			vorker (odd jobs)	_	
		elf-employed/ from home, fai	rmer/ fishing/	99=Other			
	agricu					-	
19.3a		nemployed/looking for work r, please specify					
19.4		e person taking over your	tasks have to take time	off their o	wn work to help you? 0=N	lo 1=Ves	I
13.4						10 1-103	I
40 5		you are unable to work at		-	I, is there anyone in your		
19.5		hold able to take over you	-	No 1=Yes			I
		core out to the next highlight					
		are these job-related tasks			07 Diana una diana (addiana	-)	
19.6		elf-employed usiness with employees	04=Self-employed/ from 05=Farmer/ fishing/ agr		07=Piece worker (odd jobs 99=Other	<u>)</u>	_
		usiness no employees	06=Home maker/ house		55-0thei		
19.6a		r, please specify		wite			
						<u></u>	
19.7		last 3 months, how many is the main occupation of t					_
		nployed by government		08=Retired			
		nployed by private for profit	sector	09=Pupil/s		-	
		nployed by NGO		10=Disable		-	
19.8		elf-employed (merchant), bus	iness with employees		maker/ house wife	_	
			yed (merchant), business no employees 12=Piece worker (odd jobs)		_	··	
		elf-employed/ from home, fai		99=Other		-	
	agricu						
	07=Unemployed/looking for work						
19.8a	lf othe	r, please specify					
19.9	Did th	e person taking over your	tasks have to take time	e off their o	wn work to help you? 0=N	lo 1=Yes	
19.10		yone in your household h er is No, please score out up	-		been ill? 0=No 1=Yes		
19.11	-	last 3 months, how many			are of you?		
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Care			
	What is the main occupation of the person who takes	care of you?	
	01=Employed by government	08=Retired]
	02=Employed by private for profit sector	09=Pupil/student	
	03=Employed by NGO	10=Disabled/sick	
19.12	04=Self-employed (merchant), business with employees	11=Home maker/ house wife	
	05=Self-employed (merchant), business no employees	12=Piece worker (odd jobs)	
	06=Self-employed/ from home, farmer/ fishing/	99=Other	
	agriculture		_
	07=Unemployed/looking for work		
19.12a	If other, please specify		
19.13	Did the person caring for you have to take time off the	eir own work to help you? 0=No 1=Yes	

Impact

In the last 3 months, did you have to borrow any money? 0=No 1=Yes		
If answer is No, please score out up to the next highlighted section.		<u> </u>
How much did you have to borrow?	R	
How much do you have to pay back on this loan in total ?		
The amount to be paid back cannot be less than the amount borrowed, otherwise it should be considered a gift/donation.	R	•
In the last 3 months, did you have to sell property (such as TV, fridge, car etc.) as a result		
of income losses associated with your symptoms or seeking treatment for them?		
0=No 1=Yes		
If the answer is no, score out the rest of this table.		
What is the estimated value of the assets sold?	R	•
	If answer is No, please score out up to the next highlighted section. How much did you have to borrow? How much do you have to pay back on this loan in total ? The amount to be paid back cannot be less than the amount borrowed, otherwise it should be considered a gift/donation. In the last 3 months, did you have to sell property (such as TV, fridge, car etc.) as a result of income losses associated with your symptoms or seeking treatment for them? 0=No 1=Yes If the answer is no, score out the rest of this table.	If answer is No, please score out up to the next highlighted section. How much did you have to borrow? R How much do you have to pay back on this loan in total? The amount to be paid back cannot be less than the amount borrowed, otherwise it should be considered a gift/donation. R In the last 3 months, did you have to sell property (such as TV, fridge, car etc.) as a result of income losses associated with your symptoms or seeking treatment for them? 0=No 1=Yes If the answer is no, score out the rest of this table. In the last 3 months did you have to sell property (such as TV, fridge, car etc.) as a result of income losses associated with your symptoms or seeking treatment for them?

Read out: Thank you for your time and for participating in this study, we will ask you more questions about your health service use at your next visit.

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