UGANDA HEART INSTITUTE - RESEARCH STUDIES	
Study Title:	Accelerating Delivery of rheUmatic heart disease preventive iNterventions in Uganda (ADUNU)
Funding:	National Institutes of Health
Principal Investigator:	**Dr. Emmy Okello** Uganda Heart Institute, P.O.Box 37392, Mulago Hospital Complex,, Kampala, Uganda; emmyoks@gmail.com

RHD Cost Survey: "Accelerating Delivery of rheUmatic heart disease preventive iNterventions in Uganda (ADUNU)"

SECTION A: PARTICIPANT INFORMATION			
A01	District name	Kitgum = 1 Amuru = 2	☐
A02	Age of index participant (patient with RHD enrolled in registry)		☐
A03	Gender of the patient	Male = 1 Female = 2	☐
A04	When were the patient diagnosed rheumatic heart disease?	Month/year	☐☐ / ☐☐☐☐ (MM/YY)
A05	In the past year, how many times has the patient completed benzathine penicillin G (BPG) injections? (Note: BPG injections are expected every 21-28 days)	1. Total antibiotic injections (ranged between 0-17) 2. Among the total, BPG injections at referral hospitals 3. Among the total, BPG injections at health centers	☐ ☐ ☐

A06. Facility name for the visit of the day: _____	A08. Participant ID ☐☐☐☐☐☐☐☐
A07. Facility Code: ☐☐	A09. Date of interview (DD/MM/YY): ☐☐ / ☐☐ / ☐☐☐☐

A10	Survey Type	Pre-intervention survey =1 Post-intervention survey =2 (i.e., before or after decentralization of RHD secondary prevention care)	☐

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SECTION B: HOUSEHOLD COST OF RHD CARE (Values in UGX)

B01	Do you think your household will have to pay any costs out of pocket for this visit?	Yes = 1 No = 2 Don't know = 9	☐
B02	Does the patient have private health insurance to reimburse the out-of-pocket payment? Yes = 1 No = 2 Don't know = 9		☐
B03	How much do you estimate the patient will spend on: (note: ask the patient to estimate total out-of-pocket expenses for the day – e.g., if they have not yet been to the pharmacy/dispensary, they may still have to pay for medications later)	1. Laboratory test (throat culture, blood draw, etc.)	☐☐☐ thousand ☐☐☐
		2. Consultation (nurse or doctor visit)	☐☐☐ thousand ☐☐☐
		3. Medications	☐☐☐ thousand ☐☐☐
B04	How much do you estimate the patient will spend on: (note: ask the patient to estimate total out-of-pocket expenses for the day, including costs yet to be paid such as transportation from clinic to home)	1. Transport	☐☐☐ thousand ☐☐☐
		2. Accommodation	☐☐☐ thousand ☐☐☐
		3. Food	☐☐☐ thousand ☐☐☐
		4. Other	☐☐☐ thousand ☐☐☐
B05	How much <u>in total</u> do you think your household will pay for this visit?		☐☐☐ million ☐☐☐ thousand ☐☐☐
B06	How do you pay for RHD visit today? (Values in UGX)	1. Using household income	☐☐☐ thousand ☐☐☐
		2. Taking loans	☐☐☐ thousand ☐☐☐
		3. Receiving financial assistance outside of household	☐☐☐ thousand ☐☐☐
		4. Selling assets	☐☐☐ thousand ☐☐☐
		5. Other means	☐☐☐ thousand ☐☐☐

	Add free text to sepcify financing sources		
B07	Add free text about answers to B03-B06 regarding out-of-pocket payment and sources of payment		
B08	In total, how many hours will the patient have to set aside today in order to come to clinic?	1. For child patient (0-18 years old): missed school hours	☐☐ hours
		2. For adult patient (over the age of 18): missed work hours	☐☐ hours
		3. For adult patient: hourly rate for missed work hours	☐☐☐ thousand ☐☐☐
B09	Is there anyone accompany the patient in the visit today?	Yes = 1 No = 2 (If 'no,' **skip B10, go to section c**)	☐
B10	How many hours does the household member to set aside today to accompany the patient in the visit?	1. For child (0-18 years old): missed school hours	☐☐ hours
		2. For adult (over the age of 18): missed work hours	☐☐ hours
		3. For adult: hourly rate for missed work hours	☐☐☐ thousand ☐☐☐

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SECTIONC: HOUSEHOLD INCOME AND EXPENDITURES
(This set of questions are about your household.)

C01	How many household members in your house?		☐
C02	Do you know your household income and spending? (Note: Please encourage the participate to have best estimates/guess, if they do not have full picture about household finance.)	Yes, fully = 1 Yes, partially = 2 I don't know = 3	☐

C03 How much income does your household receive per month? (Note: Probe to think about any sources of income including your everyday work earnings, grants, pension, inheritance, remittances, etc. Pleae fill in the number for the applied categories. Please fill in values in UGX.

		☐☐☐ million ☐☐☐ thousand ☐☐☐
A	*Crop farming*	/month
B	*Livestock farming*	/month
C	*Self-employment income (e.g., commercial farming, non-agricultural enterprises)*	/month
D	*Formal employment income (full or part-time)*	/month
E	*State old age grant*	/month
F	*Child support grant*	/month
G	*Foster care grant*	/month
H	*Disability grant*	/month
I	*Care dependency grant*	/month
J	*War veteran pension*	/month
K	*Inheritance*	/month
L	*remittances*	/month
M	*Other (Specify – free text)*	/month

C04	How much in total income does your household receive in the past year?	A. financial knowledge I know = 1 I guess/estimate = 2 I don't know = 3	☐
		B. Values in UGX	☐☐☐ ☐☐☐ ☐☐☐ /year
C05	In a typical week, how much has your household spent on food?	A. financial knowledge I know = 1 I guess/estimate = 2 I don't know = 3	☐

		B. Values in UGX .	☐☐☐ ☐☐☐ ☐☐☐ /week
C06	In a typical week, how much has your household spent on items other than food, including rent, utilities, transportation, and other household necessities?	A. financial knowledge I know = 1 I guess/estimate = 2 I don't know = 3	☐
		B. Values in UGX	☐☐☐ ☐☐☐ ☐☐☐ /week
C07	How much has your household spent in total in the past year?	A. financial knowledge I know = 1 I guess/estimate = 2 I don't know = 3	☐
		B. Values in UGX	☐☐☐ ☐☐☐ ☐☐☐ /year

This is the end of the survey. Thank you very much for your time!

END OF SURVEY

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