Health Outcomes Tool



A. Introduction and Consent
"My name is [name] I'm a Research Assistant working with [organization] to undertake a survey for a project seeking to improve the health of older people.
As part of this exercise, you have been selected randomly to participate in the survey. The survey will enable our organization to improve or services for older people, in specifically to effectively to monitor and evaluate its activities. The interview will not take long, about 30 minutes.
Your participation is this study is voluntary and confidential, your answers will not be disclosed to anyone outside the research team. If you do not feel comfortable answering any of the questions it can be skipped.
Risk and benefits . We do not expect that there are any risks for you to participate in this study but you should also know that you will not receive and payment or direct benefit from answering these questions. However, by answering these questions you can help us improve services to older people in the areas where [organization] is working. You should also know that answering this questionnaire will not in any way affect any support that you are currently receiving
Feel free to ask me any questions you like about this survey before we start, under or after the interview.
Do you confirm that you have had the opportunity to consider the information, ask questions and received satisfactory answers? (circle) YES NO
If NO, give the respondent a chance to ask more questions.
Do you understand that your participation is voluntary and that you are free to withdraw at any time without giving any reason, without your medical care or rights being affected? YES NO
Do you agree to take part in the above study?
Yes 1 (Proceed to interview the respondent) No 0 (Please thank the person and stop the interview)

	re we start I'd like to explain to you how the survey works. First this initial part I will ask some question where I'd like you to s		ere you live and your level of education.
	nost of the question in the survey I will be asking you to score as excellent. When I ask you a question hope you can tell me h	•	9
o 🕾		© 100	
So fo	r example. If I ask you ' Do you like [staple food]?' How would	you answer?	
	B. General information		Notes
Cı	Respondent code (see master list)		
C2	Date of survey [dd/mm/yyyy]		
C3	Name of Interviewer		
C4	Name of Village/district		
C ₅	Type of settlement	[1] Rural [2] Urban (3)Peri-urban	
C6	OBSERVE. Gender	[1] Male [2] Female [3] Other	
C ₇	How old are you? (In full years)	[] Years	
C8	Can you afford to pay for:		
C8a	Shelter/ housing?	[o] No [1] Yes [2] Sometimes	
C8b	Food?	[o] No [1] Yes [2] Sometimes	
C8c	Access to safe drinking water?	[o] No [1] Yes [2] Sometimes	
C8d	Keeping a good hygiene? Take a bath and use a toilet.	[o] No [1] Yes [2] Sometimes	
C9	Compared to other households in this community, do you t	hink your household is poor, or not poor?"	Answer (cm)
	o⊗	© 100	

Not poor

Poor

C10	Level of Highest Education	[1] Pre-Primary [2] Primary [3] High School [4] College/University [5] No formal school attended [6] Vocational training [7] Other:
C11a	Do you have difficulty seeing, even if wearing glasses?	[o] No [1] Yes
C11b	Do you have difficulty hearing, even if using a hearing aid?	[o] No [1] Yes
C11C	Using your usual (customary) language, do you have difficulty communicating, (for example understanding or being understood by others)?	[o] No [1] Yes
C12	DO NOT READ LOUD; In your opinion, does the respondent have a disability that could affect the survey? If yes, give a comment.	[o] No [1] Yes
C 13	How many people live in your household?	[1] 0 [2] 1 [3] 2 or more
C14	Can you explain your living arrangements to me?	[1] I live alone, because I have nobody else to live with [2] I live alone because I want to live alone [3] I live alone but I can talk to neighbours or friends [4] I live with family because I need care [5] I live with family because I want to [6] I live with family because I have no other place to stay [7] I live with family because I provide for them [96] Other [333] Don't know
C15	How many relatives or friends do you see or talk to a month?	Answer #

READ; The first part of the survey is now over. We have about 20 more questions and then will be done. The rest of the survey will include questions where you are supposed to answer the question by using a scale. I will now explain the method to you using an example. Can I go ahead?

C. Genera	Health Perception		Notes
Q1	Overall, how would you rate your health during the past <u>3 months</u> ?		
	o⊗ ©100	Answer (cm)	
Guide	Very Poor Poor Fair Good Excellent	[]	
Q2	Overall, have you felt satisfied with your life during the last <u>a months?</u>		
	o⊗ ©100	Answer (cm)	
Guide	Not at all not that much more or less quite I do	[]	
D. Function	,		Notes
Q ₃	During the past <u>a months</u> , how would you rate your ability to conduct, by yourself, your usual <i>social and/or daily activities</i> ?		
	(e.g. feeding, bathing, clothing, walking in and around the house, toileting, maintaining continence etc)	Answer (cm)	
	o⊗ 	[]	
	Bad Excellent		
Q3b	During the past <u>a months</u> , how would you rate your ability to conduct, by yourself, <i>your work activities</i> ?	Answer (cm)	
	(E.g. farming, preparing meals, fetching water/firewood, washing clothes, /going to the market, managing own finances, home maintenance etc)	<u></u>	
	0 [©] 100		

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	Bad				Excellent		
Q ₄	Mobility : how far o	can you move inde	ependently?			Answer (cm)	
	o⊗				©100	[]	
Guide	Bed, not at all	in the room	in home	in community	Anywhere		
Q ₅	Is memory problem				g. feeding,	Answer (cm)	
	bathing, clothing, wo	alking in and aroui	nd the house, toileti	ng etc.	©100		
	Completely	Quite a lot	Somewhat	Very little	Not at all		
- D							
E. Depe	To what <u>extent</u> did y	ou require /help f	rom other people (e a family or friend	ds or		
	community workers					Answer (cm)	
Q6	o⊗ 				© 100		
	Require support	Quite a lot	Somewhat	Very little	Not at all		
	When you need it,	are you able to ac	cess regular help e	asily?		Answer (cm)	
Q ₇	o⊗ 				©100	[]	
Guida	Not at all Very	/ little/difficult	Somewhat	Quite easy Eas	sy/all the time		

Q8	Who provides you care when you need it?	(multiple choice, not more than 3)	[1] Family at home	
			[2] Family	
			[3] Community member	
			[4] Friend	
			[5] Carer	
			[6] Community	
			organization	
			[7] None of the above	
			[96] Other:	

F. Percep	tions of services		
Q9a	Over the past <u>6 months</u> did you access any health services?	[o] No [1] Yes [333] Don't know	
Q9b	Do you have any diagnosed chronic illness?	[o] No Q10 [1] Yes [333] Don't know	
Q9 c	If yes, have you been to the local health centre for a follow-up or has any health care provider/health professional visited you?	[o] No Q1o [1] Yes [333] Don't know	
Q9 d	If yes, are you receiving regular /care for your condition? EG. This could be care or medication	[o] No [1] Yes [333] Don't know	
Q10	In your opinion or how easy or difficult is it to access health care? (Prompt; Transport, financial resources, physical accessibility?) o © 100	Answer (cm)	
	Very difficult Quite difficult Somewhat difficult Easy Very easy		
Q11	Over the past 3 months, how would you rate the quality of the health care services existing in your community? Discuss Access, Cost, Quality	Answer (cm)	
	o⊗ ————————————————————————————————————		

	Very Poor	Poor	Fair	Good	Excellent			
Q12	During the past	months , how af	fordable was/is hea	alth care?		Answer (cm)		
	o⊗	, ,			© 10 0			
	0 60				—————————————————————————————————————	LJ		
	Not Affordable	Barely	Somewhat	Affordable	Not a burden			
	Self-care						Notes	
Q13	Who do you think	k is responsible fo	r your health? (m	ultiple choice po	ossible)	RANK		
						Myself		
						My family		
						Health services Others		
Q14						Answer (cm)		
~-4	Do you take action	on to take care of	your health?			7 (,		
	o⊗				© 100	[]		
	Not at all	Not enough	Sometime	Regular a	action A lot			
	What kind of acti	on(s) do vou do to	o take care of your	health? (Multiple	e choice)	[1] I look for health servic	es	
		(0, 20) 20 20 20		regularly				
Q15						[2] I do physical exercise [3] I eat healthily		
Q15						[4] I have my BP taken		
						[5] None		
						[96] Others		
F. Fu	nction Testing							
		ANDING: INSTRU	JCTIONS: Please s	tand up. Try not	to use your hand	[1] Needs moderate or m		
	for support	baamia and airea		tha fallanda a		[2] Needs minimal aid to		
Q16	(Interviewer to observe and give response based on the following)					[3] Able to stand using ha [4] Able to stand indepen		
Q10							using hands and stabilize	
						independently	osing harras and stabilize	
	I					' '		1

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Q16	Comments;					
Other tests can be added	IMC, Gait Speed, BP or BMI??					