## RTI COVID-India

## Section B. Health Check Up [Ask only female member of LASI-DAD households]

CVBintro. Now I would like to ask some questions about your family's wellbeing and ability to access medical care.

CVB001. First I want to ask about routine health checkups, like antenatal care for pregnant women or visits to monitor chronic diseases. Has anyone in your household, including you, experienced the following in the past month?

ving in the past month?	
a.	Had a visit cancelled or been turned away due to closures, or unavailability of staff?  1. Yes 5. No
b.	[Ask only if CVB001a=1] Could you tell me the age and gender of that person? If more than one household member had such experience, please list all their ages and genders.
	agesex
c.	Cancelled a visit or avoided care because you could not travel to the facility or feared visiting a facility?  1. Yes 5. No
d.	[Ask only if CVB001c=1] Could you tell me the age and gender of that person? If more than one household member had such experience, please list all their ages and genders.  agesex
e.	Now I would like to ask about health care visits for sickness or injury. In the past month, has anyone in your household, including you: tried to get care for sickness or injury and been turned away due to closures or unavailability of staff?  1. Yes 5. No
f.	[Ask only if CVB001e=1] Could you tell me age and gender of that person? If more than one household member had such experience, please list all their ages and genders.  agesex
g.	Avoided care for sickness or injury because you could not travel to the facility or feared visiting a facility?  1. Yes 5. No
h.	[Ask only if CVB001g=1] Could you tell me age and gender of that person? If more than one household member had such experience, please list all their ages and genders. agesex

CVB002. Have you or any other family member experienced any of the following symptoms in the past 2 weeks? [Interviewer: Prompt each symptom and check all that apply]

- 1. Fever or chills
- 2. Cough
- 3. Difficulty breathing/shortness of breath
- 4. Runny or stuffy nose
- 5. Muscle or body ache
- 6. Fatigue or tiredness
- 7. Ear pain
- 8. Sinus pain
- 9. Lost sense of smell
- 10. Lost sense of taste
- 11. None of the above

CVB003. Can you tell me if you experienced any of the following in the past seven days due to lack of money or resources? [1. Yes. 5. No. 7. Unsure]

- a. You were worried you would run out of food?
- b. You ate less than you wanted to?
- c. You ate different food because of cost considerations?
- d. You went without eating for a whole day?
- e. You could not eat what you usually have, because of unavailability?

CVB004. Have the elderly (aged 60+) in your household been affected in any of the following ways?

- 1. Not able to perform needed or usual household work
- 2. Not able to volunteer in the community
- 3. Not able to provide care to others
- 4. Not able to provide care to grandchildren
- 5. Not able to receive care from others
- 6. None of the above

CVB005. [Ask only at the baseline interview] Before the lockdown [March 24, 2020] what was your

family's main source of food?

- a. Local market/vendors
- b. Supermarket/large store
- c. Government source/PDS/ Ration shop
- d. Mobile peddlers
- e. Other (specify)

CVB006. What is your family's main source of food right now?

- a. Local market/vendors
- b. Supermarket/large store
- c. Government source/PDS/ Ration shop
- d. Mobile peddlers
- e. Other (specify)
- f. We cannot find food