# Kanchanaburi Project

**Round 3 (Year 2002)** 

# Institute for Population and Social Research, Mahidol University In collaboration with Ratchapat Institute Kanchanaburi

Individual Questionnaire
For Respondents aged 15 and over

Individual ID .....

District
Sub District
Village
Household No
Individual No
Name of respondent
Name of head of household
House No Village's No Village name Sub-district
District Kanchanaburi Province
Location 1. Municipality 2. Rural area
Location 1. Municipanty 2. Rural area
Attempt interviewing no. 1 2 3 4 5 6 7 8 9 10
Attempt interviewing no. 1 2 3 4 5 6 7 8 9 10
Date of final interviewmonthStart atEnd at Total time minutes
Result of interview 1. Complete 2. Incomplete 3. Can not interview
Specify the reason for the incompletion
Name of Interviewer
Name of Field Supervisor D/M/Y
Name of Editor D/M/Y
Name of Coder D/M/Y

Part	1 : Personal Data
1.1	What is your birthday?
	Day Month Year
1.2	How old are you?  Age in years Years
1.3	Sex of respondent  1. Male  2. Female
1.4	What is your nationality? (Specify)
1.5	What is your marital status?
	1. Married   1.5.1.1 First marriage (specify) M/Yor ageYears  1.5.1.2 Last marriage (specify) M/Yor ageYears  1.4.1.2 In last marriage, did you register?  1. Yes  2. No because
	2. Divorced 3. Separated 4. Widowed 5. Single  1.5.1.4 Do you plan to get married? 1. Yes, at age
1.6	What is your (completed) education level? How long did it take to finish?  Educational level

# 1.7 What language do you know?

Language	Do you	ı know?	La	nguage abi	lity	D	o you use these
	1. Ye	es	Spoken	Reading	Written	la	nguage in your
	2. No	)	1.Yes	1.Yes	1.Yes		daily life?
			2.No	2.No	2.No	1.	Yes
						2.	No
a. Thai							
b. English							
c. France							
d. German							
e. Japanese							
f. Chinese							
g. Karen							
h. Mon							
i. Burmese							
j. Other (Specify)							
k.Other (Specify)							

1.8	Are	you	worl	king?

1. Working	2. Looking for a job	3. Student	4. Housewife	5. Do not work
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1.8.1	What type of work do you do?
	Main job Minor job
1.8.2	How much do you earn (income)? (include all income from all jobs)
	Annual income
	Do not have income because.
	(record in 1.8.3 when cannot separate your income from the household income)
1.8.3	Your income included in household income

Tion Itemson for not working (Fleuse Specify)	1.8.4	Reason for	not working	(Please Specify)	
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## Part 2: Migration

## Interviewer: The following are questions to ask everyone

## **Migration History**

- 2.3 <u>From 1<sup>st</sup> July 2001 till now,</u> did you ever <u>move to stay somewhere else for one month of more?</u>
  - 1. Yes (Continue 2.3.1)
  - 2. No (Go to part 3)

## Have you ever stayed elsewhere during July 2001 till now? ( Ask for person who answer "yes")

2.3.1	2.3.2	2.3.3	2.3.4	2.3.5	2.3.6
Month	1. Village	Sub-district	District	Province	Country
	2. Municipality				
	(Specify)				
	3. Bangkok				
	4. Other village				
	(Specify)				
	8. Abroad				
July 2001					
August 2001					
September 2001					
October 2001					
November 2001					
December 2001					
January 2002					
February 2002					
March 2002					
April 2002					
May 2002					
June 2002					
July 2002					
August 2002					

## Please describe the order of move

(Record every place and time that the respondents moved)

# Code for 2.3.7 Person stayed with:

1. Alone	5. Father/mother in law	9. Sister/brother	13. Great-grandchildren	17. Lodger
2. Spouse	6. Son/daughter	10. Son-in-law	14. Grandmother/grandfather	18. Employee

3. Father 7. Sibling 11. Daughter-in-law 15. Relative 19. Other (Please specify).....

4. Mother 8. Children of the child 12. Niece/nephew 16. Friend

2.3.7	2.3.8	2.3.9	2.3.10	2.3.11
Person(s) you stayed with	Reason for moving out there	What <b>major activities</b> ? (Record job characteristics)	Money/items brought back or sent back	Reason for moving in here
(can be more than	(Only main	· · · · · ·	( <u>record if the value is</u>	(Only main
one person)	reason)	0 Unemployed	more than 100 Baht)	reason)
(see codes)	(see codes)	(Go to 2.3.11)		(see codes)

# Code for 2.3.8 Reason for moving there and 2.3.11 Reason for moving in here

1. Looking for a job	8.	Ordered move	15.	Vacation/make merit	22.	Individual/family problem
2. Seasonal work	9.	Extend branch	16.	In prison	23.	Set up new family
3. Work	10.	Ordained	17.	Join spouse	24.	Stay with parents home
4. Finished work/work over	11.	Study	18.	Join parents	25.	Return home
5. Want to change a job	12.	Receive medical treatment	19.	Delivery	26.	Economic problem
6. Military service	13.	Visit friend	20.	Child care/elderly care	27.	More civilization
7. End of Military service	14.	Visit relative	21.	Do housework	28.	Home town
					29.	Leave the monkhood /
						nunhood
					30.	Other (Please specify)

## Part 3: Fertility

Interviewer:	The following are	questions to ask	only married	women aged 15-50

3.1	Have	vou ever	pregnant?

1. Yes	2. No (Skip to Q 3.4)
<b>→</b>	
No. of pregnancy No. of children ever born No. of abortion / other	n

3.2 At this moment, how many of your living children do you have ? (include children stay with you and stay elsewhere)

Total nur	nber	(person)
Male		(person)
Female		(person)

3.3 How many of your children ever born have died? (specify No. of male, No. of female)

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Total number ..... (person)

Male ..... (person)

Female ..... (person)
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### Interviewer: Please record the total number of children in 3.2 and 3.3 in the box

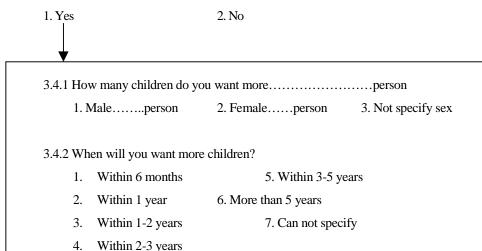
Total number ... (person)

Male (person)

Female (person)

(Please check the number of pregnancy and the total number of children. If not consistant, please ask questions again.)

3.4 Do you want to have more children?



3.5 History of pregnancy and contraceptive use in each month (<u>The following are questions to ask woman aged 15-49</u>)

Interviewer: Note <u>single women who do not use contraceptive method or have not been</u>

<u>pregnant.</u> Please ask for the month of amenorrhoea (during 1<sup>st</sup> January 2001 till

now). If have amenorrhoea, please fill **Am** in these months and fill **NS** (No

sexual contact) in others)

If married, please ask for pregnancy and contraceptive use history during January 2001 till now and fill in abbreviation in the table for each month

#### Guidelines and abbreviations

## 1. Terminated pregnancy

(Ask for the result of pregnancy during January 2001 till now)

Record the result in the table as follows:

LB = Live Birth

SB = Still Birth (the gestation age was 7 months and over)

FL = Fetal Loss (Including spontaneous abortion and induced abortion)

#### 2. Time of pregnancy

(Ask for gestation age when delivered and focus on the 1<sup>st</sup> month of pregnancy and replete with this question "Did you get pregnancy in (month)...?)

Fill G (Gestation) in the month during the gestation time (If had pregnancy before January 2001 please record the  $1^{st}$  month of pregnancy in question 3.6) Except the  $1^{st}$  month or fertilizable month fill G and follow by ( )

#### 3. Contraceptive method in fertile month

(Check for the first month of pregnancy G() and ask with this question "did you use the contraceptive method in the first month of pregnancy?"

If "yes", please fill an abbreviation in the parentheses.

If "no", please ask for the reason for non-use contraceptive method and fill an abbreviation in the parentheses.

#### **4. Postpartum amenorrhoea** (Amenorrhoea : Am)

(After termination of pregnancy ( LB or SB or A), please ask with this question "how many months did have amenorrhoea?)

Fill Am() in the month of amennorrhoea and then erase 1 month If has postpartum amenorrhoea only one month, do not fill Am()

#### 5. Contraceptive use

Please start from the last month which is blank or has Am () and ask that "did you use the contraceptive method in this month?" If "yes", please ask the time of using this method. Please make sure that this method was used continuously more than 2 months. If did not use continuously for 2 months, ask for the intention to continue use for 2 months.

Please ask for the blank month or Am ()

If changed method or discontinued between months, please fill the abbreviation of method used at the end of the month.

#### Abbreviation for contraceptive method

(1) L = Ligation

(2) V = Vasectomy

(3) Imp = Subdermal Implant

(4) I = Injection

(5) IUD = Intra Uterine Device

(6)	P	=	Pill				
(7)	C	=	Condom				
(8)	W	=	Withdrawal				
(9)	R	=	Rhythm				
(10)	VM	=	Vaginal Methods				
(11)	IA	=	Induced Abortion				
(12)	Ab	=	Abstinence				
(13)	R + W	=	Rhythm & Withdrawal				
(14)	R + C	=	Rhythm & Condom Make sure that both are used at the same time				
(15)	C + W	=	Condom & Withdrawal				
	O	=	Other (Please note below the table)				
Record details for checking							
		• • • •					

Record details for checking	Record details for checking					

## 6. Reason for not using contraceptive method

Please asking for the reason in each blank month, if it has more than one, please ask for the main reason

For the month with Am ( ), Please fill – in the parentheses Am ( - )

## Abbreviation for do not use the contraceptive method

- (70) Am (-) = Amenorrhoea and do not use contraceptive method
- (81) U = Unable (Including natural sterile and unexpected to have children
- (82) NS = No sexual contact
- (83) D = Desire pregnancy
- (84) B = Breastfeeding
- (85) SE = Side effect (afraid)
- (86) DM = Dislike method
  - X = Others reasons (Please note below the table)

Year	Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sep.	Oct.	Nov.	Dec.
2001												
2002												

Interviewer:	Please o	check the table	and ma	ke su	re the	re i	is no blani	k box.	Aft	er that pleas	e ask
	for the	contraceptive	which	was	used	in	January	2001.	If	respondent	used

X: Other reason (specify) .....

3.6 If yes, Please ask "When did you start to use the method which you used in January 2001?" (Make sure that

contraceptive method, please continue to Q 3.6

did not terminate or was pregnant. If yes, ask for the last month started to use and did not terminate or became pregnant.

Contraceptive method							
Start in Month		Year					

 Interviewer: Ask only married women age 15-49 and currently living with her husband

3.8 Did you talk with your husband about the following issues?

Issue	Talk to husband	(If yes) How often?			
	1. Yes	1. Everyday 3. Seldom			
	2. No	2. Often 4. When have a problem			
a. No. of children					
b. Contraceptive method					

#### Part 4: Health Behavior

**Interviewer**: Ask everyone and explain the respondent that the following questions are for behaviors from 1<sup>st</sup> July 2001 till now or last 1 year

4.1 Normally, how do you have meals? (it means daily activities)

Meal	4.1.1	4.1.2	4.1.3	4.1.4	4.1.5	4.1.6
	Eating	Start at	Are you in a	Type of food	Kind of food	Reason for
	(See	(time)	hurry	1. Beverage	1. Made by	not eating
	code)		having each	(Specify)	yourself	(Specify)
			meal?	2. Beverage and snack	2. Buy cooked	
			1. Yes	(Specify)	food	
			2. No	3. Rice soup/salad	3. Both	
				4. Main course		
Breakfast						
Lunch						
Dinner						
Night time meal						

**Code for 4.1.1**: 1. Yes

2. No (Skip to 4.1.6)

3. Uncertainly

# 4.2 Do you have these regular behaviors? (Please read all items to respondent)

Behavior	Do you behave?
	1. Yes
	2. No
a. Eating spicy food	
b. Eating raw /or half-cooking food (not including fresh vegetable)	
c. Eating fast food (i.e. sandwich, pizza, hamburger, fired chicken (KFC)	
d. Eating snack	
e. Eating supplementary food (i.e. chicken soup, bird nest, ginseng, herb juice)	
f. Taking some vitamins	
g. Reading books at night time	
h. Wearing shoes when walking outside a house	
i. Sleeping in mosquito nets or mosquito screens	

4.3 What type of water do you always drink?

Type or Water	Do you drink regularly?	Do you treat your drinking water?
	1. Yes	1. Boil
	2. No	2. Filter
		3. Do nothing
a. Rain water		
b. Tap water		
c. Well water		
d. Under ground water		
e. Soft drink		
f. Bottle water /Purify water		
g. Other (Specify)		

4.4 At this moment, do you take the following items? If respondent reply "Yes", please ask: How often do you use?

Item	Do you use it?	How often?
	1. Yes	(see codes)
	2. No	
a. Cigarettes		
b. Beer		
c. Liquor		
d. Traditional Liquor		
e. Stimulant drinks		
f. Drug for relief pain (Narcotic drug)		

Codes	for	66TT	oft are 222.	
Codes	IOF	HOW	often?":	

- 1. Once a week
- 4. Four times a week 7. Everyday

- 2. Twice a week
- 5. Five times a week 8. Seldom
- 3. Three times a week 6. Six times a week
- 4.5 Excepted the daily activities including work, have you exercise regularly?

1.	Yes
	$\blacksquare$

2. No (Skip to Q 4.6)

· · · · · · · · · · · · · · · · · · ·				
	4.5.1	4.5.2	4.5.3	4.5.4
Type of exercise	Do you have an exercise?	How often?	How long?	Where?
	1. Yes 2. No	(See code)	(See code)	(See code)
a. Jogging				
b. Fast walking				
c. Arobic				
d. Traditional Chinese exercise				
e. Play sports				
f. Exercise				
g. Other (Specify)				

## **Code for 4.5.2 :** How often per week?

- 1. Once a week
- 4. Four times a week
- 7. Everyday
- 2. Twice a week
- 5. Five times a week
- 3. Three times a week
- 6. Six times a week

#### Code for 4.5.2: Where?

- 1. Inside / or around a house 4. Public area in the village 6. Private sport club
- 2. Park

- (i.e. school, temple)
- 7. Government sport center

- 3. The village's meeting hall 5. Sport play ground of the village

4.6

g. Listening to music

i. Other (Specify).....

h. Talking

(Specify 3 orders)						
1						
2						
3						
4.7 From 1 <sup>st</sup> July 200	1 till nov	<b>v,</b> what time	do you usually	go to bed ar	nd wake up	?
(Specify tir	ne: go t	o bed)				
(Specify tir	ne : wake	e up)				
4.8 From 1 <sup>st</sup> July 200	1 till nov	<b>v.</b> how did y	ou feel when yo	ou wake up i	n the morn	ing?
(Can answer more	than one	item)				
a. Fresh		f. Throat	irritation /dry n	nouth		
b. Headache		g. Indiffe	rent			
c. Exhausted		h. Other (Specify)				
d. Muscular fatigu	e (Specif	y: part of bo	dy )			
e. Drowsy						
4.9 <b>From 1<sup>st</sup> July 200</b>	1 till nov	v, have you	ever slept in the	day time?		
1. Yes			2. No			
4.9.1 What event did	l lead you	to sleep? Ho	w often? (Please	read all items	to the respo	ondent)
Event	1.	(I	f ever) How ofte	n?	2.	8. Not
	Ever				Never	applicable
		1.Always	2. Sometime	3.Seldom	2	8
a. Working	1	1	2	3	2	8
b. Studying	1	1	2	3	2	8
c. Reading	1	1	2	3	2	8
d. Sitting in a car	1	1	2	3	2	8
e. Driving	1	1	2	3	2	8
f. Watching television	1	1	2	3	2	8

If you have a free time (free from job or housework), what would you like to do most?

4.11 <u>]</u>		ines (Specify the nam	e of medicine)
4.11 <u>]</u>	Take some medici     Other (Specify)  From 1 <sup>st</sup> July 2001 till no	ines (Specify the nam	
4.11 <b>]</b>	2. Other (Specify)  From 1 <sup>st</sup> July 2001 till no		
4.11 <u>]</u>	From 1 <sup>st</sup> July 2001 till no		
4.11 <u>]</u>		w, did you snore whe	en vou sleen?
	1. Yes		in you sleep.
		2. No	3. Do not know
	<b>\</b>		
4	4.11.1 How often?		
	1. Every night	3. Especially, who	en felt exhausted
	2. Sometime	4. Did not know (	(how often)
,	4.11.2 Have anyone told y	ou that you snore?	
	1. Yes	2. No	
4.12	Normally, how many time	do you brush your te	eth? (Can answer more than one item)
	a. After wake up in	the morning	d. After dinner
	b. After breakfast		e. Before go to bed
	c. After lunch		f. Use artificial tooth
4.13 <u>1</u>	From 1 <sup>st</sup> July 2001 till no	w, have you been to a	a dentist?
	1. Yes   ↓	2. No	
	What are the causes (Spe	ecify)	

# 4.14 **From 1<sup>st</sup> July 2001 till now,** did you have any dental problem?

(Please read all items to the respondent)

Dental problems		Yes
	2.	No
a. Toothache		
b. Feel a darting pain of denuded teeth / sensitive		
c. Dental carries		
d. Dental accident i.e. fracture, worn out tooth (Specify)		
e. Inflammatory gum i.e. bleeding, limestone(Specify)		
f. Chewing problem (Specify)		
g. Other (Specify)		

4.15	Do v	vou have	receive tl	he 30	Baht health	scheme card	(gold	card)	?

2. No (Why)	

- 4.15.1 Have you ever use the gold card?
  - 1. Yes

2.	No (Why)		
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Part 5: Aging

	Interviewer: Ask only person who aged over 60
1 V	What activity did you do in most of time? (not included occupation or job that you have salary
	1
	2
	3
2 I	Have any member of household talked to you or asked for your advice?
	1. Yes 2. No
	5.2.1 What were the issues?
	1
	2
	3
3 I	Did you involve in household decision making?
	1. Yes 2. No
	5.3.1 What were the issues?
	1

1.

# The opinion of the interviewer

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## Interviewer: After ending this interview, please answer these questions frankly.

What was the place where the interview was held like?

	1. There was free from disturbances	
	2. There was some disturbance, but it d	id not affect the interview
	3. There was a disturbance and it affect	the interview
	4. There was a lot of disturbance and the	e interview had to be stopped often/it is spoiled the
	atmosphere	
2.	Was there anyone else present during the	e interview?
	1. Yes, all the time	
	2. Yes, sometimes	
	3. No (go to Q 5)	
3.	If there was another person in this interv	riew, who was it? (can answer more than one person)
	1. Other family members	3. Neighbor
	2. Friend	4. Others (specify)
4.	Did such person answer or give opinion	ns for the respondent?
	1. Yes, a lot	3. Yes, little
	2. Yes, sometimes	4. No
5.	How much cooperation did the responde	ent give during the interview?
	1. Very good	3. Average
	2. Good	4. Little
6.	How did the respondent behave during t	he interview?
	1. Enjoyed answering	
	2. Indifferent	
	3. Reluctant to answer some questions.	(Specify part/number)
7.	Showed dissatisfaction with some questi	ions. (Specify part/number)
8.	In general, what was the quality of the d	ata obtained from this interview like?
	1. Very good	3. Satisfactory
	2. Good	4. Not good

# **Contributors**

Amara Soonthorndhada

Anchalee Varangrat

Aree Chumpaklai

Chanya Sethaput

Jirakit Boonchaiwattana

Patama Vapattanavong

Philip Guest

Pramote Prasartkul

Sirinan Kittisuksathit

Sureeporn Punpuing

Varachai Thongthai

# **Editor**

Philip Guest

Sureeporn Punpuing