## **SECTION 3. HEALTH CARE AND DISABILITY**

# 3a. Health and health care

Please provide us with information about the healthcare of your household's member

#### ASK ALL HOUSEHOLD MEMBERS

	THE THOUGHTOED INCINIO	-140				
М	1	2	3		4	5
Е	For the past 4 weeks	For the past 12	For the last 12	months, due to	Does[name]have	Did [NAME] buy healthcare insurance
М	has [NAME] suffered	months has			health insurance or free	him/herself or have it bought by
В	from any illness or	[NAME] suffered	days did [NAMI	E] have to	healthcare certificate?	someone else?
	injuries? For example,	from any illness				
E	flu, diarreah, accident-	or injuries?	a. Stay in bed	b. Be absent	1	CHILDREN UNDER 6
R	related injuries, burn or		and need	from		HEALTHCARE INSURANCE FOR THE POOR 2
	any other diseases?		someone to	work/school or	YES, HEALTHCARE INSURANCE 1	HEALTHCARE INS. FOR POLICY BENEFICIARIES 3
С			take care of?	not to be able		REQUIRED STATE HEALTHCARE INSURANCE
0				to carry out	l	REQUIRED NON-STATE HEALTHCARE INSURANCE 5
D				regular		PUPIL/STUDENT HEALTHCARE INSURANCE
Е	YES 1 (>>3)	YES1		activities?		
	' '	NO2 (>>4)	DAYS	DAYS		OTHER VOLUNTARY HEALTHCARE INSURANCE7
		2 (4)	DATO	DATO	(>>NEXT PERSON)	OTHERS 8
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#### 3a. Health and health care (conti)

6. For the last 12 months, has any member of your household gone to healthcare centers or invited medical practicioners home for diagnosis and treatmen YES \_\_\_\_\_\_1 (including check-up, pregnancy test, abortion, delivery, having coil put in even without being ill or injured...)

ASK THOSE WHO SUFFER FROM ILLNESSINJURIES WITH QUESTION 3. FOLLOWED BY OTHER MEMBERS.

	7	9		Lo				1				
	1.	Which horse	, annier he-	9	10		11	12		13	14	15
	NAME OF	Which health		Why did [NAME]			ASK THOSE WHO HAVE			ASK THOSE WHO HAVE	Did the household	What did the household
M	HOUSEHOLD	[NAME] visite	_	visit the health	of [NAI		FREE HEALTH		treatment of	FREE HEALTH	afford to cover all	do or from what source
E I	MEMBER THAT		ors to treat at	center?		ent treatment	INSURANCE		in the last 12	INSURANCE	those expenses for	did it enjoy if it did not
l M	USED	home)				ast 12 months			including user)		[NAME]?	have enough or did not
	HEALTHCARE	VILLAGE HEALTH				ses include	CARD/CERTIFICATE		other related	CARD/CERTIFICATE		have money to cover
8	SERVICES IN	COMMUNE HEALT				medical	(QUEST 4 CODE 1 OR 2)			(QUEST 4 DODE 1 OR 2)		healthcare expenses?
1 - 1	THE LAST 12	REGIONAL GENER				, treatment,			service charge		1	
R	MONTHES	DISTRICT HOSPIT					How many times			How many times		1
1 1		PROVINCIAL HOSE					did [NAME] use	requirem	ent, equipment,	did [NAME] use		SOLD PRODUCTS MADE BY THE
C			AL 5	VACCINATION 1	doctors	. transport)	free healthcare	transport	t, etc)	free healthcare		HOUSEHOLD 1
0		1	WNED HOSPITALS, 7	PREGNANCY TEST.	l		insurance			insurance		SOLD ASSETS 2
D		l	L8	COIL PUT IN,			card/certificate			card/certificate		NON-INTEREST LOAN
_ E			S 9	ABORTION			for these			for these		LOAN WITH INTEREST
			10	DELIVERY 2			outpatient			inpatient		QUIT THE TREATMENT
1 1		TRATIONAL HERB		CHECK-UP			treatment?			treatment?	YES, ENOUGH 1	EXEMPTED/REDUCED BY HOSPIT, 6
1 1		OTHER HEALTH C		AND CONSULTING	IF N	ONE, WRITE 0	IF NONE, WRITE 0	IF N	IONE, WRITE 0)	IF NONE, WRITE 0	(>>NEXT TIME/PERSON)	HEALTHCARE INSURANCE7
1 1	i	ORDINAL	CODE OF	3		COSTS			COSTS			FREE HEALTHCARE CERTIFICATE 8
-		NUMBER	HEALTH CENTER	TREATMENT4	TIMES	1000VND	TIMES	TIMES	1000VND	TIMES		OTHERS9
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3CT1, CỘNG CÂU 10	3CT2. CÔNG CÂU 12	

### 3a. Health and health care (end)

16. How much has your household spent on non-prescribed medicin for self-treatment or for reserve for the last 12 months?	18. How much have your household members spent on voluntary and students' healthcare insurance or pooled money with other organisations people to buy healthcare insurance for the last 12 months?
(Including medicine costs and other expenses such as travel, parking,)  IF NONE RECORD 0  THOUSAND VND	IF NONE, WRITE 0 THOUSAND VND
17. How much has your household spent on medical tools for the last 12 months? For example: stethoscope, hearing aid apparatus, sputum taking machine, sphygmomanometer, medicine cabinet (Excluding healthcare tools recorded in Questions 10 and 11)	<ol> <li>How much has your household received as aid for members being sick, suffering from diseases or injuries for the last 12 months? (in-kind included)</li> </ol>
IF NONE, WRITE 0 THOUSAND VND	F NONE, WRITE 0 THOUSAND VND
3CT. HEALTHCARE E (3CT1 + 3CT2 + QUEST 16 + QUEST 1	