

FACTOR AFFECTING CASE DETECTION IN THE TANZANIA

LEPROSY CONTROL PROGRAMME

INSTRUMENT A: AN INTERVIEW SCHEDULE FOR USE WITH  
GENERAL ADULT POPULATION.

I. THE INTERVIEW SITUATION

1. Interviewer's name .....

1.

2. Time interview started .....

3. Time interview completed .....

4. Any interruption?

1. Yes .....

2. No .....

2.

5. Was anyone else present during the interview?

1. Respondent was alone .....

2. Someone present part of the time .....

3. Someone present all the time .....

3.

II. IDENTIFICATION

1. Region: 1. Mwanza .....

2. Morogoro .....

4.

2. District 1. Geita .....

2. Sengerema .....

3. Kilombero .....

4. Morogoro A.....

5.

III. DEMOGRAPHIC CHARACTERISTICS

1. Sex: 1. Male .....  
2. Female ..... 6.
2. Age: How old are you? .....years 7.
3. Marital Status: Are you:  
1. Married .....  
2. Divorced .....  
3. Widow .....  
4. Single(Never married) 8.
4. Are you the Head of your Household?  
1. Yes .....  
2. No ..... 9.

IV. SOCIOECONOMIC CHARACTERISTICS

1. How many people belong to your Household?  
(count only those who live here and share  
living expenses).

Name	Age	Relation with Head of Household
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		

- A. Number of children who are less than 7 years ..... 10.
- B. Number of children who are above 7 years ..... 11.
- C. Number of economically active adults ..... 12.
- D. Number of dependants(young children, the elderly, and  
handicapped) ..... 13.
- E. Total number of household members ..... 14.

2. What is your main occupation? Are you:

- 1. Traditional peasant cultivator(hoe + cut lass).....  
.....
- 2. Modernising peasant cultivator  
(plough + farmer labour) .....
- 3. Commercial farmer (tractor + hired  
labour).....

- 4. Traditional fisherman(traditional fishing gear) .....
- 5. Modernising fisherman(motor boat).....
- 6. Craftsman .....
- 7. Petty trader .....
- 8. Businessman .....
- 9. Labourer .....
- 10. Worker? Clerical/Technical/Machanical .....
- 11. Worker: managerial .....
- 12. Student .....

15.

3. IF RESPONDENT IS NOT HEAD OF HOUSEHOLD:

What is the main occupation of your Head of Household? Is he/she

- 1. Traditional peasant cultivator .....
- 2. Modernising peasant cultivator .....
- 3. Commercial farmer .....
- 4. Traditional fisherman .....
- 5. Modernising fisherman .....
- 6. Craftsman .....

- 7. Petty trader .....
- 8. Businessman .....
- 9. Labour .....
- 10. Worker: Clerical/Technical/Mechanical.....
- 11. Worker: Managerial .....
- 12. Student .....

16.

4. What is the occupation of any resident or absent relative from whom the household receives substantial material/financial support?

- 1. Traditional peasant cultivator
- 2. Modernising peasant cultivator
- 3. Commercial farmer
- 4. Traditional fisherman
- 5. Modernising fisherman
- 6. Craftsman
- 7. Petty trader
- 8. Businessman
- 9. Labour
- 10. Worker: Clerical/Technical/Mechanical
- 11. Worker: Managerial
- 12. No such relative

17.

5. What level of formal school education did you attain?

- 1. Adult literacy class .....
- 2. Primary I - IV .....
- 3. Primary V - VIII .....

- 4. Secondary .....
- 5. University .....
- 6. Illiterate .....

18.

6. IF RESPONDENT IS NOT HEAD OF HOUSEHOLD:

What level of formal school education did your  
Head of Household attain?

- 1. Adult leteracy class .....
- 2. Primary I - IV .....
- 3. Primary V - VIII .....
- 4. Secondary .....
- 5. University .....
- 6. Illiterate .....
- 7. Do not know .....

19.

7. Do you or does any member of your household keep

A. Cattle 1. Yes .....

2. No .....

20.

B. Sheep 1. Yes .....

2. No .....

21.

C. Goats 1. Yes .....

2. No .....

22.

8. Do you as a household, own the house in which  
you live or is it rented?

1. Own .....

2. Rented .....

23.

9. What type of house is the main house on your household compound?

- 1. Paa 4 .....
- 2. Paa 2 .....
- 3. Tembe .....
- 4. Msonge .....
- 5. Other .....(specify .....

24.

10. What materials are walls of the main house built of?

- 1. Concrete/cement blocks/stone .....
- 2. Burnt bricks .....
- 3. Mud bricks .....
- 4. Poles and mud .....
- 5. Poles/branches/twigs/grass .....

25.

11. What material in the roof of the main house built of?

- 1. Tiles .....
- 2. Asbestos sheets .....
- 3. Metal sheets .....
- 4. Concrete/cement .....
- 5. Grass .....

26.

12. Is the floor of the main house cemented?

1. Yes .....

2. No .....

27.

13. Is there a functional latrine on the household compound?

1. Yes .....

2. NO .....

28.

SES

1. High .....

2. Medium .....

3. Low .....

29.



V IMAGE OF LEPROSY

Which of the following characteristics do you associate with leprosy?

CHARACTERISTICS	YES/NO/DONT KNOW
1. Hypopigmented lessions	
2. Ulcerating extremities	
3. Saddleback nose	
4. Hanging ear nose	
5. Madarosis	
6. Claw hand	
7. Numbeness of hand/feet	
8. Nodules on the face	
9. Red eyes	
10. Stuffy/running nose	

30.

31.

32.

33.

34.

35.

36.

37.

38.

39.

40.

IMAGE SCORE

VI. ATTITUDES AND BELIEFS CONCERNING  
LEPROSY AND CEPROSY PATIENTS.

I shall read to you a series of statements that people make about leprosy and seprosy patients. Could you please tell me whether you agree or disagree with each statement?

STATEMENT	AGREE	DISAGREE	UNDECIDED
1. People with leprosy should not be treated at ordinary health units alongside other patients.			
2. People known to have leprosy should not be allowed to mix with other people.			
3. People with leprosy are malicious; they try to pass it to other			
4. Leprosy known to have leprosy cannot be respected.			
5. Leprosy cannot be cured			
6. Leprosy always leads to gross phisical deformity			
7. Leprosy runs in families			

41.

42.

43.

44.

45.

46.

47.

8. It is alright for people with leprosy to go begging instead of working.				48. <input type="checkbox"/>
9. The most terrible thing about leprosy is that it makes one an outcaste.				49. <input type="checkbox"/>
10. Leprosy is the worst disease a person can have.				50. <input type="checkbox"/>
BELIEFS SCORE				51. <input type="checkbox"/>

VII. GENERAL

1. What kind of people do you think are most likely to get leprosy? .....

52.

2. What is it that people in this community fear most about leprosy? .....

53. 54. 55.

3. People say that leprosy takes many different forms. Can you describe the types of leprosy that you know or? .....

56. 57. 58.

4. How can you tell whether the patches and nodules a person has are due to leprosy and not other skin diseases? .....

59. 60. 61.

5. Many people consider leprosy to be worse than any other disease. Why do you think this is so?.....

62.

6. Do you know of any person who has leprosy in this village? .....

63.

7. Do you think there people in this village who  
dress in manner that might be meant to hide the early  
signs of leprosy? .....

64.

8. What kind of relationships/dealings are people  
in this village prevented from having with  
people known to have leprosy? ,.....

65. 66. 67.

9. To what Health Unit do people in this village go when  
they are ill? (Probe for name, and type of the Unit)..  
.....

68.

10. Who runs/owns that Health Unit?  
.....

69.

11. Has any member of your household been to that  
Health Unit this year?

- 1. Yes .....
- 2. No .....
- 3. Cannot remember .....

70.

12. Have you been to that Health Unit this year?

- 1. Yes .....
- 2. No .....
- 3. Cannot remember .....

71.

13. If you thought that someone had leprosy, to which Health Unit would you advise him to go for treatment? (Probe for name and type of the Unit) .....

72.

14. How is someone who is suspected to have leprosy made aware of the suspicion? .....

73.

15. Does any member of your famili household have leprosy?

- 1. Yes .....
- 2. No .....
- 3. Do not know .....

74.

16. What do you think causes leprosy?

75. 76. 77.

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17. How would you like leprosy patients treated? Should they

- 1. Continue to live at home and fetch their medicine from health units regularly .....
- 2. Be admitted in hospital .....
- 3. Be sent to leprosarium .....
- 4. Be sent to special camps .....

78.

18. What suggestions do you have about how leprosy can be eradicated? .....

79. 80. 81

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FACTORS AFFECTING CASE DETECTION IN THE TANZANIA LEPROSY PROGRAMME

INSTRUMENT B: INTERVIEW SCHEDULE FOR USE WITH LEPROSY PATIENTS

I THE INTERVIEW SITUATION

1. Interviewer's name.....

1.

2. Time interview started.....

3. Time interview completed.....

2.

4. Any interruptions?

1. Yes.....

2. No .....

3.

5. Was anyone else present during the interview?

1. Respondent was alone .....

2. Someone present part of the time .....

3. Someone present all the time .....

4.

6. Place where the interview was conducted:

1. At health unit .....

2. At home .....

5.

II IDENTIFICATION

1. Region 1. Mwanza .....

2. Morogoro .....

6.

2. District 1. Geita .....

2. Sengerema .....

3. Kilombero .....

4. Morogoro A .....

7.

III DEMOGRAPHIC CHARACTERISTICS

1. Sex 1. Male .....

2. Female .....

8.

2. How old are you?.....years.

9.

3. Are you:

- 1. Married .....
- 2. Divorced .....
- 3. Widow .....
- 4. Single (Never married), .....

10.

IV SOCIOECONOMIC STATUS

1. Who do you live with? Do you

- 1. Live alone .....
- 2. Live with spouse .....
- 3. Live with own family .....
- 4. Live with other relatives .....

11.

2. Are you self reliant or a dependant?

- 1. Self reliant .....
- 2. Dependant .....

12.

3. (IF SELF RELIANT, ASK : - )

What is your main occupation?

- 1. Traditional peasant cultivator, .....
- 2. Modernising peasant cultivator, .....
- 3. Commercial farmer .....
- 4. Traditional fisherman, .....
- 5. Modernising fisherman, .....
- 6. Craftsman .....
- 7. Petty trader .....
- 8. Businessman .....
- 9. Labourer .....
- 10. Worker: Clerical/Technical/Mechanical .....
- 11. Worker: Managerial .....
- 12. Student .....

13.



4. (IF DEPENDANT, ASK : - )

A. Do you get adequate material support?

1. Adequate.....

2. Inadequate .....

14.

B. Have you at any time, had to go out and beg?

1. Yes.....

2. No .....

15.

V DETECTION AND REGISTRATION

1. How long ago is it when you first became aware that you might be suffering from leprosy?.....

16.

2. What was the time inteerval between noticing the signs and symptom and becoming aware that it could be leprosy?.....

17.

3. Is it you yourself who first noticed the signs and symptoms or were they pointed out to you by someone else?.....

18.

4. What was it about the signs and symptoms that made you suspected that it could be leprosy?.....

20.

6. Could you tell me a bit about the circumstances surrounding the detection of your disease by medical people:

Was it during a special campaign to examine people in the village or was it at the health unit?.....

.....

21.

7. (IF DETECTED AT HEALTH UNIT, ASK: \* )

A. Did you go to the health unit specifically to seek treatment for what you suspected to be leprosy, or did you to there for other health problems?.....

22.

B. What kind of health unit was it?.....

23.

C. How long after the initial detection by medical people were you told that you definitely had leprosy and given medicine of it?

(PROBE FOR NUMBER OF REPEAT VISITS FOR EXAMINATION AND INTERVALS BETWEEN VISITS)

- 24.
- 8. What personal loss have you suffered as a result of having leprosy? (PROBE FOR ECONOMIC DECLINE, CURTAILMENT OF SOCIAL RELATIONSHIPS)..... 25.
- 9. What does cure for leprosy mean to you?..... 26.
- 10. Which of these do you consider to be a major source of suffering for leprosy patients: Social boycott or physical ailments? ..... 27.
- 11. How long have you been receiving treatment for leprosy? ..... 28.
- 12. At which health units have you received treatment for leprosy? ..... 29.
- 13. What is it about the leprosy treatment you are receiving that you are most unhappy about?..... 30.
- 14. Do you know of a person who had leprosy but is now cured?..... 31.
- 15. As you know, some leprosy patients do hide the disease . Did you at any time try to hide the disease?..... 32.
- 16. Do you think that many people in your village know that you have leprosy?..... 33.

FACTORS AFFECTING CASE DETECTION IN THE  
TANZANIA LEPROSY CONTROL PROGRAMME.

INSTRUMENT C : AN INTERVIEW SCHEDULEE FOR USE WITH  
HEALTH PERSONNEL.

I THE INTERVIEW SITUATION

- 1. Interviewer's name.....
- 2. Date of interview.....
- 3. Place of interview.....
- 4. Time interview started.....
- 5. Time interview completed.....
- 6. Any interruptions?
  - 1. Y es.....
  - 2. No.....
- 7. Was anyone else present during the interview?
  - 1. Respondent was alone.....
  - 2. Someone present part of the time.....
  - 3. Someone present all the time.....

II IDENTIFICATION

- 1. Region
  - 1. Mwanza.....
  - 2. Morogoro.....
- 2. District
  - 1. Geita.....
  - 2. Sengerema .....
  - 3. Kilombero.....
  - 4. Morogoro A .....

1.

2.

3.

4.

5.

6.

3. Type of Health Unit.....

- 1. Dispensary .....
- 2. Health Centre .....
- 3. Hospital .....

7.

4. Proprietors of Health Unit

- 1. Central Government .....
- 2. District Council.....
- 3. Voluntary Agency.....
- 4. Parastatal Organization.....

8.

5. Designation of Health Personnel Interviewed

- 1. RDA.....
- 2. RMA.....
- 3. MA.....
- 4. AMO.....
- 5. MD.....

9.

6. Designation and Number of health personnel with diagnostic responsibilities at the health unit.

DESIGNATION	NUMBER
RDA	
RMA	
MA	
AMO	
MD	
OTHER	

10.

11.

12.

13.

14.

15.

III PARTICULARS OF RESPONDENT

- 1. How old are you?..... 16.
- 2. How long have you served in your current designation?..... 17.
- 3. How long have you worked in the health services?..... 18.
- 4. How long have you worked in this health unit in your current designation?..... 19.
- 5. How long have you been doing clinical work in this district?..... 20.
- 6. Is this your home district?
  - 1. Yes ..... 21.
  - 2. No ..... 21.
- 7. Did your training cover leprosy?
  - 1. Yes ..... 22.
  - 2. No ..... 22.
  - 3. Cannot remember..... 22.
- 8. Have you seminars of courses dealing with leprosy since graduating from medical school?
  - 1. Yes ..... 23.
  - 2. No ..... 23.
  - 3. Cannot remember..... 23.

IV LEPROSY WORK IN THE HEALTH UNIT

- 1. Does this health unit stock leprosy drugs, such as dapsone?
  - 1. Yes..... 24.
  - 2. No ..... 24.
  - 3. Dont know ..... 24.
- 2. Does the health unit have a person who is specifically responsible for leprosy?
  - 1. Yes ..... 25.
  - 2. No ..... 25.
  - 3. Dont know..... 25.

3. Do you consider leprosy work as one your duties?

1. Yes .....

26.

2. No .....

4. Have you ever detected a case of leprosy while working in this health unit?

1. Yes .....

2. No .....

3. Cannot remember .....

27.

5. Have you ever detected a case of leprosy while working in other health units?

1. Yes .....

2. No .....

3. Cannot remember .....

28.

6. (IF EVER DETECTED LEPROSY CASES WHILE WORKING IN THIS HEALTH UNIT - AS PER IV 4 - ASK:)

A. How many cases have you detected in this health unit?.....

29.

B. Were the cases you detected confirmed and registered for treatment?

1. Yes .....

2. No .....

3. Cannot remember .....

30.

7. If you suspected that the patient you were seeing might have leprosy what would you do to confirm your suspicion?

.....

.....

31.

8. What would you do to ensure that a patient who might have early signs and symptoms of leprosy returns for the repeat examination?.....  
.....

32.

9. How prevalent to you think leprosy is in this district? Is it  
1. Rampant.....  
2. Fairly prevalent.....  
3. Not prevalent.....  
4. Dont know.....

33.

10. Do you expect to see a hither-to undiagnosed leprosy case among patients you see in your OPD clinics?  
1. Yes.....  
2. No.....

34.

11. (IF DOES NOT EXPECT TO SEE NEW LEPROSY CASES, VIDE IV 10, ASK: )  
Could you please explain why you do not expect to see such cases?.....

35.

V LEVEL OF KNOWLEDGE ABOUT LEPROSY

1. I shall read out a series of statements about leprosy of you and I would be grateful if you could tell me if you consider each one to be TRUE or FALSE.

A. A leprosy patient may present with both painful nerves and loss of sensation:

- 1. TRUE.....
- 2. FALSE.....

36.

B. The "pin-prick" is the best method for testing for lack of sensation on lesions.

- 1. TRUE.....
- 2. FALSE.....

37.

- C. The "Cotton Wool" test is less discriminating than the "pin-prick" test.
- 1. TRUE.....
  - 2. FALSE.....
38.
- D. Prolonged and intimate contact is not necessary for contracting leprosy.
- 1. TRUE.....
  - 2. FALSE.....
39.
- E. The microbacteria of leprosy are transmitted through the ulcers of leprosy patients.
- 1. TRUE.....
  - 2. FALSE.....
40.
- F. The mode of transmission of leprosy is not known exactly
- 1. TRUE.....
  - 2. FALSE.....
41.
- G. Adequate drug treatment drastically reduces the infectiveness of highly bacilliferous patients within a few weeks.
- 1. TRUE.....
  - 2. FALSE.....
42.
- H. The only method available for leprosy control is treatment of all known leprosy cases.
- 1. TRUE.....
  - 2. FALSE.....
43.
- I. The only method available for preventing leprosy is BCG vaccination.
- 1. TRUE.....
  - 2. FALSE.....
44.
- J. Isolation of leprosy patients in hospital or leprosarium protects their household members from getting infected.
- 1. TRUE.....
  - 2. FALSE.....
45.



2. (IF THE HEALTH UNIT STOCKS DRUGS FOR LEPROSY - VIDE IV 1,

ASK: )

Do you really believe that the medicine for leprosy which is available at this health unit can cure leprosy?

- 1. Cures the disease.....
- 2. Only cools down the i disease.....
- 3. Do not know .....

46

3. Do you think that the practice of treating leprosy patients in the general health services poses some danger to the general population?

- 1. Yes .....
- 2. No.....
- 3. Dont know.....

47

4. Would you accept the proposition that leprosy is only slightly contagious and therefore the chances of health workers contracting leprosy from patients are remote?

- 1. Agree.....
- 2. Disagree .....
- 3. Not sure.....

48

J. The only one tool for the contral of leprosy is through the treatment of known leprosy cases.

- 1. TRUE.....
- 2. FALSE.....

49

K. The only preventable method available for leprosy is through vaccination with BCG.

- 1. TRUE.....
- 2. FALSE.....

50

L. Isolation of leprosy patients in the hospital or leprosarium protects other members of their household from getting infected.

- 1. TRUE .....
- 2. FALSE .....

51

IV ATTITUDES AND BELIEFS

1. What kind of people do you think are most likely to get leprosy?.....

52

5. A friend of yours comes to seek your advice. He/She is in love with a girl/boy whose grandmother had leprosy. The girl/boy has no leprosy. Your friend is worried about marrying into a family with a history of leprosy and fears that he/she might get infected. Would you advise your friend:

- 1. To marry the girl/boy.....
- 2. Not to marry the girl/boy.....

53

6. Some health workers feel that leprosy patients are ungrateful and that they are never satisfied with any kindness shown to them. Do you agree with them?

- 1. Yes.....
- 2. No .....
- 3. No experience with leprosy patients.....

54

7. Some health workers say that leprosy patients are quick to associate any pain and any discomfort with leprosy, and any to demand injections to relieve them.

Do you

- 1. Agree.....
- 2. Disagree.....
- 3. Have no experience with leprosy patients .....

55

8. Some people say that leprosy can never really be cured, but that is only cooled down and may surface if the patient does not observe all the necessary regulations.

Do you

- 1. Agree.....
- 2. Disagree.....
- 3. Have not experience leprosy patients

56

9. Some people think that even with the introduction of the Multi Drug Therapy Regimen treatment for leprosy will continue to be a life long undertaking for the patient. Do you

- 1. Agree.....
- 2. Disagree.....
- 3. Do not know much about the MDT regimen.....

57

10. What is it that people in this area fear most about leprosy?

.....  
.....

58

11. What do you yourself fear most about leprosy?.....

.....

59

I am going to show you some photographs depicting different types of skin diseases. Please tell me which of these depict leprosy.

PHOTO	TYPE OF CONDITION	WHETHER CORRECTLY IDENTIFIED
17	TUBERCULOID LEPROSY	60 <input type="checkbox"/>
72	VITILIGO	61 <input type="checkbox"/>
30	B T	62 <input type="checkbox"/>
23	TUBERCULOID LEPROSY	63 <input type="checkbox"/>
71	MYCOSIS	64 <input type="checkbox"/>
22	TUBERCULOID LEPROSY	65 <input type="checkbox"/>
69	TINEA CORPORIS	66 <input type="checkbox"/>
38	B L	67 <input type="checkbox"/>
77	RETICULOSIS OR LEUKAEMIA	68 <input type="checkbox"/>
40	B L	69 <input type="checkbox"/>

FACTORS AFFECTING CASE DETECTION IN THE TANZANIA LEPROSY CONTROL PROGRAMME

INSTRUMENT D: LEPROSY PATIENTS PROFILE CHECK LIST

1. REGION	1. Mwanza..... 2. Morogoro.....	1. <input type="checkbox"/>
2. DISTRICT	1. Geita..... 2. Sengerema..... 3. Kilombero..... 4. Morogoro.....	2. <input type="checkbox"/>
3. SEX	1. Male ..... 2. Female .....	3. <input type="checkbox"/>
4. AGE	(number years) .....	4. <input type="checkbox"/>
5. PLACE OF BIRTH	1. Within the District,..... 2. Elsewhere in the Region..... 3. Elsewhere in the Country..... 4. Other Countries.....	5. <input type="checkbox"/>
6. DISTANCE BETWEEN PATIENT'S RESIDENCE AND HEALTH UNIT	.....	6. <input type="checkbox"/>
7. DATE OF REGISTRATION	.....	7. <input type="checkbox"/>
8. DATE MEDICATION COMMENCED	.....	8. <input type="checkbox"/>

9. WHETHER TRANSFERED

IN FROM ELSEWHERE

- 1. Yes .....
- 2. No .....

9.

10. MODE OF DETECTION

- 1. Self report.....
- 2. Contact examination.....
- 3. Survey.....
- 4. Other.....

10.

11. TYPE OF LEPROSY

- 1. T. ....
- 2. BT. ....
- 3. BL. ....
- 4. L. ....

11.

12. DISABILITIES

I HANDS

- R. Grade 1 .....
- Grade 2 .....
- Grade 3 .....
- NONE .....

12.

- L. Grade 1 .....
- Grade 2 .....
- Grade 3 .....
- NONE .....

13.

II FEET R. Grade 1 .....  
Grade 2 .....  
Grade 3 .....  
NONE .....

14.

L. Grade 1 .....  
Grade 2 .....  
Grade 3 .....  
NONE .....

15.

III EYES R. Grade 1 .....  
Grade 2 .....  
Grade 3 .....  
NONE .....

16.

L. Grade 1 .....  
Grade 2 .....  
Grade 3 .....  
NONE .....

17.

FACTORS AFFECTING CASE DETECTION IN THE TANZANIA LEPROSY PROGRAMME

INSTRUMENT E: OBSERVATION SCHEDULE FOR ORGANIZATIONAL FACTORS.

Observer's name .....

Date: .....

1.

1. Region 1. Mwanza .....

2. Morogoro.....

2.

2. District 1. Geita.....

2. Sengerema .....

3. Kilombero.....

4. Morogoro A .....

3.

3. Type of Health Unit

1. Dispensary .....

2. Health Centre .....

4.

A. GENERAL OFFICE

1. Proprietorship 1. Central Govt.....

2. District Council.....

3. Parastatal Organization .....

4. Voluntary Agency.....

5.

2. Number of villages served by the Health Unit .....

6.

3. Total population in catchment area .....

7.



4. Availability of other Health Units within radius of 5 Km of the Health Unit

- 1. Available .....
- 2. Not Available .....

8.

9.

10.

5. If other health units are available indicate:

TYPE	NUMBER	PROPRIETORSHIP
1. Dispensary		
2. Health Centre		
3. Hospital		

11.

12.

13.

14.

15.

16.

17.

6. Indicate type and number of health workers with clinical duties stationed at the health unit:

TYPE	NUMBER
1. RDA	
2. RMA	
3. MA	
4. AMO	
5. MD	

18.

19.

20.

21.

22.

23.

7. Does the health unit have

A. Microscope 1. Yes .....

24.

2. No.....

B. Running Water 1. Yes.....

25.

2. No .....

8. Is there a particular health worker who is specifically charged with Leprosy work in the health unit?

1. Yes.....

26.

2. No.....

9. Is there a VISITORS BOOK?

1. Yes .....

27.

2. No.....

10. How many times has the DTLC visited the Health Unit since January 1986/1987

Number .....

28.

Source of Information .....

29.

11. How many times has the DMO visited the Health Unit since January 1986/1987

Number .....

30.

Source of Information .....

31.

12. How many times has the RTLC visited  
the Health Unit since January 1986/1987

Number .....

32.

Source of Information .....

33.

13. Does the Health Unit have a Leprosy  
patients register?

1. Yes .....

2. No .....

34.

How many patients are currently  
registered with the unit .....

35.

14. Are there particular days of the week for  
leprosy clinics or can leprosy patients get  
medication on every working day?

1. Particular days .....

2. Everyday .....

36.

B. RECEPTION/REGISTRATION

1. Number of patients seen by each clinician during  
the previous working day (Include first and  
repeat visits)

CLINICIAN	DESIGNATION	SEX	NO: OF PATIENTS
1.			
2.			
3.			

37.

38.

39.

40.

41.

42.

2. Any group health education session  
before patients go for consultation/medication

1. Yes.....

2. No .....

43.

Number of sessions conducted  
on observation day .....

44.

Subjects/topics covered during  
health education included leprosy

1. Yes .....

2. No .....

45.

Designation of health personnel  
who conducted the sessions .....

46.

3. Any posters in the hall/room  
about leprosy?

1. Yes .....

2. No .....

47.

4. Any frank case of leprosy  
in the group?

1. Yes .....

2. No .....

Number of leprosy cases seen .....
---------------------------------------

48.

C. DOOR TO CONSULTATION ROOM

1. Time that clinician starts seeing patients:

.....

49.

2. Length of queue at consultation room

(a) When clinician starts seeing patients .....

50.

(b) At first 1/2 hour .....

51.

(c) At 1 hour .....

52.

- (d) At 2 hours .....
- (e) At 3 hours .....
- (f) At 4 hours .....
- (g) At 5 hours .....

- 53.
- 54.
- 55.
- 56.

3. Waiting and consultation times for 10 index cases i.e. 2 patients during 1st, 2nd, 3rd, 4th and 5th hour.

Patients	Time pt. arrives at Consultation room	Time pt. enter Consultation room	Time pt. leaves Consultation room	Waiting time	Consultation time
Pt. 1					
Pt. 2					
Pt. 3					
Pt. 4					
Pt. 5					
Pt. 6					
Pt. 7					
Pt. 8					
Pt. 9					
Pt. 10					

- 57.  67.
- 58.  68.
- 59.  69.
- 60.  70.
- 61.  71.
- 62.  72.
- 63.  73.
- 64.  74.
- 65.  75.
- 66.  76.

4. Did the clinician ever usher in more than one patient at the same time?

- 1. Yes
- 2. No

77.

D. CONSULTATION ROOM

1. Do clinicians share consultation rooms?

1. Yes.....

2. No.....

78.

2. Do the consultation rooms have the following items:

A. Curtain on windows

1. Yes.....

2. No.....

79.

B. Curtain trolley

1. Yes.....

2. No .....,

80.

C. Examination bed

1. Yes.....

2. No.....

81.

D. Sink/basin for hand washing

1. Yes .....

2. No .....

82.

E. Water

1. Yes .....

2. No .....

83.