

For parents of the child aged 25-60 months

B3 Child's health

1) How is the child's health now?

use CARD with interview

CH1

- 1-Very good 3-Good 5-Somewhat good 7-Somewhat bad 9-Bad

2) In the past 12 months, did the child visit the dentist for check up?

1-Yes 3-No (skip to 4)

CH2

Including dental check-up at sub-district Health Promoting Hospital or dentist check-up at home (excluding public health volunteer check-up at home and dentist check-up at school)

A : Number of times

CH2A

4) Since the child was born, how many times has the child got health check-up which is not due to illness?

CH4

(In case of never, record "00" and skip to 5) including getting the vaccine and then check-up

A. Where has the child got the health check-ups most?

CH4B

Place namech4_des

code (place) CH4BA

- | | | | |
|---|--------------------------|------------------------------|------------------------------|
| 1- Sub-district health promoting hospital | 7- University hospital | 13- Hospital under an agency | 99- Others, specify in CH4BA |
| 3- District hospital | 9- Specialized hospital | 15- Private hospital | |
| 5- Center hospital / provincial hospital | 11-Crown Prince hospital | 17- Medical clinic | |

Sub-district.....ch4aa_des

CH4AA

District.....ch4ab_des

CH4AB

Province.....ch4ac_des

CH4AC

5) Since the child was born, has the child visited the doctor because of an injury/ accident?

1-yes 3-no (skip to 9)

CH5

(If the respondent cannot recall, try to read the answer in "B" item by item)

A : How many times?

CH5A

B : What was the most severe injury?

CH5B CH5BA

- | | | |
|--|---|------------------------------|
| 1- Cut or pierced by sharp object (open wounds, bleeding) | 9- Bitten or stung by poisonous animals | 21- Electric shock |
| 3- Crash/fall (with open wounds, broken bones, unconscious) | 13- Hurt by non-poisonous animals, e.g. dog or cat (open wound, bleeding) | 23- Bicycle injury |
| 5- Burn (until skin blister) | 15- Car accident (the child in the car) | 25- Others, specify in CH5BA |
| 7- Swallow, take or put things in the ear or nose | 17- Car accident (the child is not in the car) | |
| 9- Take chemical substance e.g. insecticide, washing detergent | 19- Drown | |

C : Where did this accident happen?

1- Home	5- School/child center	9- Alley/road
3- House of others	7- Playing field/playground	11- Others, specify in CH5CA

CH5C

CH5CA

E : How many days did the child miss school as a result of this injury? (in case of none, record "0")

CH5E

F : How many days was the child hospitalized because of this injury? (in case of none, record "0")

CH5F

9) Since the child was born, has the child ever been hospitalized because of acute disease (excluding accident/chronic disease)?

1-Yes 3-No (skip to 6)

CH9

(If the respondent cannot recall, try to read the answer in "B" item by item)

A : How many times?

CH9A

B : What was the most severe disease?

CH9B

CH9BA

1- Respiratory (cough /cold/ runny nose/gasp)	9-Stress / insomnia / headaches.	17- Fever
3- Diarrhea /dysentery	11- Dermatitis / eczema / rash.	19- Others , specify in CH9BA
5- Stomachache/flatulence / indigestion / gastritis	13- Eye / ear / throat / nose	
7- Backache /muscle pain	15- Oral diseases/caries/ gum disease / Mouth ulcers	

C : How many days did the child miss school as a result of this acute disease? (in case of none, record "0")

CH9C

D : How many days was the child hospitalized because of this acute disease? (in case of none, record "0")

CH9D

6) Does the child have health insurance with insurance company?

1- yes 3- no

CH6

(e.g. AIA,Krungthai AXA, BUPA, CIGNA, Allianz Ayudhya.)

7) Since the child was born, have there been any cases in which the child needed medical service but was unable to go to the doctor because it was unaffordable?

1- yes 3- no

CH7

8) Interviewer note:

CH8