

Appendix 1

Information sheet of diabetics/sugar patients in the study

ID No: _____ Area: _____

1. Female _____ Male _____ Age _____
2. DM type: Type 1 _____ Type II _____ Do not know _____
3. For how many years are you suffering with DM: _____ yrs
4. What treatment are you taking for DM:
Tablets _____ Insulin _____ Tablets + Insulin _____ Others (specify): _____
5. Are your sugar levels under control:
Well-controlled _____ Not controlled _____ Some control _____ Do not know _____
6. Have you got your HBA1C test done: Yes _____ No _____
7. When was the last time you had a sugar test? _____
8. Do you suffer from any other ailments along with DM:
HTN _____ Heart ailments _____ Stroke _____ Kidney-related _____ Limb _____
9. How often you visit health provider:
For a regular for check-up _____ only when sick _____
10. When was your last visit to the doctor? _____ For what? _____
11. Did your doctor counsel/inform on various complications of diabetes: Yes _____ No _____
12. Do you know complications of diabetes: Yes _____ No _____
13. Do you know that blindness can occur as a result of diabetes: Yes _____ No _____
14. Have you visited an eye doctor for other reasons in the last year:
Yes _____ No _____ If yes, mention the reason: _____
15. If yes, did the doctor advise for DR screening: Yes _____ No _____
16. When you want to go for any health treatment, which care provider you prefer:
Public _____ Private _____ Traditional _____ RMP _____
17. What facility do you visit for DM medicines and check-up:
Public/Govt. sector – Government hospital _____ UHC _____
Private sector _____ Private hospital _____ Private clinic _____ Traditional healer _____
Others (specify) _____
18. If chosen Public sector, what are the reasons for it:
Trust _____ Accessibility _____ Free treatment _____ Free medicines _____
Other reasons (please specify) _____
19. If chosen Private sector, the reasons for it:
Referral from RMP/public sector _____ Trust for quality care _____ accessibility _____
lack of doctors in nearest public sector facility _____ Lack of medicines in the nearest public health facility _____
Other reasons _____
20. How long have you been living here:
Right from childhood _____ Since last few years _____ (specify number)
21. What is the highest standard of education completed:
Did not attended school _____ illiterate _____ Basic schooling (10th and under) _____
College _____ Graduate _____
22. What is your religion:
Hindu _____ Muslim _____ Sikh _____ Christian _____ Others _____
23. What community do you belong to:
SC _____ ST _____ OBC _____ Others (specify) _____
24. Marital status:
Currently married _____ Divorced _____ Separated _____ Never married _____
25. Do you have children living with you: Yes _____ No _____
26. What is your monthly income: _____ Rs
27. What sources of income do you have:
Salary _____ Pension _____ Business _____ Rents _____ Family _____ Others _____