

PROFILE OF EPIDEMIOLOGICAL Schistosomiasis in an endemic area in municipality of Nossa Senhora do Socorro
Questionnaire 1 - ENVIRONMENTAL, economic, and cultural population's health of schistosomiasis

GENERAL DATA

Date: ___/___/___ Address: _____

• **IDENTIFICATION INFO:**

- 1) Name (Initial): _____ 2) Gender: F F
- 3) Address: _____ Complement: _____
- 4) Date of Birth: ___ / ___ / ___ (dd / mm / yyyy) Age: _____
- 5) Race:
 White Black Brow Indigenous East
- 6) Birth: _____ State: _____
- 7) Status:
Single Married Divorced Widowed Stable Union
- 8) Residence time in the headlights Park Set:
Years: _____ Meses _____
Obs .: If <1 year specify place of origin: _____

• **SOCIOECONOMIC DATA:**

- 9) This working:
 Yes No
- 10) What is your main activity: _____
- 11) What is your status in employment
 Retired Entrepreneur From Home Salaried Student
 Self-Employed Public Employee Pensioner Other _____
- 12) Household Income:
 No yield; Up to 1 MW; More1 to2 SM; More2 to 3 MW;
 More 3 to5 MW; More than 5 MW.
- If no reply or to yield 1Sa:
Receive any supplementary official income such as Bolsa Familia Yes No
- 13) Education:
Illiterate ; Key Complete Incomplete
Medium Complete Incomplete
Graduated Incomplete

• **SOCIAL AND ENVIRONMENTAL DATA:**

- 14) Form water supply at home:
 Public; Artesian well; Direct collection in the river; Other
- 15) Water treatment at home for consumption:
 No treatment; Filtration; Boiling; Chlorination; other _____
- 16) Waste Destination of the household:

- Public collection; Burnt; Buried; Played in a vacant lot; Played in the river;
 - Another destination.
- 17) Disposition of fecal / urine household:
- Sewerage; Septic; Played in a vacant lot; Played in the river;
 - Another destination.
- 18) Type of house:
- Brick / adobe; Coated Taipa; Taipa uncoated;
 - Wood; Board; Material not used.
- 19) The floor of the house:
- Cement; Ceramics; Clay apilado.
- 20) You have access to electricity:
- Yes No

- **CONTACT INFORMATION WITH RIVER WATER / STREAM / OTHER (specify)**:
- 21) Have you ever had contact with river water:
- Yes No
 - If yes, how long: _____
- 22) Since the contact happens:
- Car Wash / animal; Washing; Wash dishes / pot; Recreation; Personal Hygiene;
 - Fishing.
- 23) Have you had direct contact with the water streams:
- Yes No.
 - If so, why not: _____
- 24) Other (report)
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- **DISEASES ASSOCIATED DATA AND LIFE HABITS:**
- 24) You are stricken by some (s) disease (s):
- Yes No If yes, which one (s): _____
- 25) Have you had any signs and / or symptoms:
- Diarrhea Yes No; Mucus in the stool Yes No; Blood in the stool Yes No
- 26) makes use of alcoholic beverages:
- Yes No
- 27) Do you smoke:
- Yes No
- 28) habit of eating vegetables or fruits without washing:
- Yes No.
- 29) smoker walking barefoot through the streets of your neighborhood:
- Yes; No.