## Verbal autopsy data

Sites are asked to make the most detailed and complete version available from their verbal autopsy data.

NOTE: <u>Data should only come from the verbal autopsy questionnaire</u>, do not populate or clean it using data from other sources.

## Verbal Autopsy file – one record for each adult death with VA (adults = age at death 12+ years)

Variable name	Description	Coding	Notes	
idno	Person ID number	site specific	Numeric IDs long integer format, unique individual	
idno_resp	ID number for the proxy respondent (who provided the information for the VA)	site specific	This ID number should enable us to link I the DSS data to get basic information ab respondent	
idno_interviewer	ID number for the interviewer	site specific	This ID number should enable us to iden which VAs were done by the same interv	
study_name	Name of your study field site	site specific	Character – please be consistent across sets	
va_interview_date	Date of VA interview	in Stata format		
va_date_of_death	Reported date of death	in Stata format		
va_age_at_death	Age at death in years	12-89 as reported 90 = 90+ 99 not stated	Code as stated in VA interview – consiste checks with DSS date of birth will be perful in do-file	
va_sex	Male or female	1 Male 2 Female	Code as stated in VA interview – consiste checks with DSS sex will be performed in	n do-file
va_final_ill	Did final illness last at least 3 weeks?	0 no, 1 yes	Stata code "." if question not asked or an not known	swer
va_sudden	Was death very sudden or unexpected	0 no, 1 yes	- " -	
va_vis_bl	Any blurred vision	0 no, 1 yes	- " -	
va_drowsy	Any drowsiness	0 no, 1 yes	_ " _	
va_bed_day	Was bed-bound for more than 1wk before death	0 no, 1 yes	-"-	
va_coma	Was there a coma > 24hrs	0 no, 1 yes	_ " _	
va_collapse	Did death follow sudden collapse	0 no, 1 yes	_ " _	
va season	Season of death	0 dry, 1 wet	- " -	
va_injury	Any obvious recent injury	0 no, 1 yes	_ " _	
va_transport	Was s/he in a transport accident	0 no, 1 yes	_ " _	
va_drowning	Did s/he drown	0 no, 1 yes	-"-	
va_fall	Had s/he fallen recently	0 no, 1 yes	_ " _	
va_poison	Any poisoning, bite, sting	0 no, 1 yes	_ " _	
va_homicide	Any suggestion of homicide	0 no, 1 yes	_ " _	
va_suicide	Any suggestion of suicide	0 no, 1 yes	_ " _	
va_smoking	Was s/he a known smoker	0 no, 1 yes	_ " _	
va_alcohol	Was s/he known to drink alcohol	0 no, 1 yes	_ " _	
va_convul	Any convulsions or fits	0 no, 1 yes	- " -	
va_headache	Any headache	0 no, 1 yes	_ " _	
va_paralysis	Was there paralysis	0 no paralysis 1 one side 2 both sides	- " -	
va_stiff_neck	Any stiff neck	0 no, 1 yes	- " -	
va_or_cand	Any oral candidiasis	0 no, 1 yes	- " -	
va_rigidity	Any rigidity/lockjaw	0 no, 1 yes	- " -	
va_hair	Any abnormal hair colouring	0 no, 1 yes	- " -	
va_ch_pain	Any chest pain	0 no, 1 yes	-"-	
va_cough_long	How long did cough last	0 no cough 1 ≤ 3 weeks 2 > 3 weeks 3 had cough, durati	- " - on not known	
va_cough_pr	Any productive cough	0 no, 1 yes	_ " _	
va_bl_cough	Any coughing with blood	0 no, 1 yes	- " -	
va_rapid_br	Any rapid breathing	0 no, 1 yes	_ " -	
va_exert_br	Any breathlessness on exertion	0 no, 1 yes	_"_	

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Variable name	Description	Coding	Notes
va_lying_br	Any breathlessness lying flat	0 no, 1 yes	_ " _
va_chest_in	Any chest indrawing	0 no, 1 yes	_ " -
va_diff_br	Any difficulty breathing	0 no, 1 yes	_ " -
va_wheeze	Any wheezing	0 no, 1 yes	_ " -
va_cyanosis	Any cyanosis	0 no, 1 yes	_ " -
va_abd_mass	Any abdominal mass	0 no, 1 yes	_ " -
va_abd_pain	Any abdominal pain	0 no, 1 yes	_ " _
va_swe_abd	Any abdominal swelling	0 no, 1 yes	_ " -
va_diarr_weeks	Diarrhoea duration	0 no diarrhoea	
		1 < 2 weeks	
		2 2-4 weeks	- " -
		3 4+ weeks	
		4 had diarrhoea, d	
va_bl_diarr	Any diarrhoea with blood	0 no, 1 yes	_ " _
va_vomiting	Any vomiting	0 no, 1 yes	_ " -
va_bl_vomit	Any vomiting with blood	0 no, 1 yes	_ " _
va_yellow	Any yellowness/jaundice	0 no, 1 yes	_ " -
va_urine	Any abnormality of urine	0 no, 1 yes	_ " -
va_uri_ret	Any urinary retention	0 no, 1 yes	_ " -
va_uri_haem	Any haematuria	0 no, 1 yes	_ " _
va_swe_legs	Any swelling of ankles/legs	0 no, 1 yes	- " -
va_eye_sunk	Were eyes sunken	0 no, 1 yes	_ " _
va_eye_sunk va_rash	Any rash	0 no, 1 yes	_"_
va_rasn va_measrash	Any measles rash	0 no, 1 yes	_ "_
			_ " _
va_herpes	Any herpes zoster	0 no, 1 yes	
va_skin	Any skin lesions/ulcers	0 no, 1 yes	
va_swe_breast	Any breast lump or lesion	0 no, 1 yes	_ " -
va_swe_gen	Any lump or lesion in groin or genitals	0 no, 1 yes	
va_swe_lump	Any other localised lump or lesion	0 no, 1 yes	- " -
va_exc_drink	Any excessive water intake	0 no, 1 yes	_ " -
va_exc_urine	Any excessive urination	0 no, 1 yes	_ " -
va_exc_food	Any excessive food intake	0 no, 1 yes	_ " -
va_fever_weeks	Fever duration	0 no fever	
		1 < 2 weeks	_ " _
		2 2+ weeks	
		3 had fever, duration	on not known
va_night_sw	Any excessive night sweats	0 no, 1 yes	_ " -
va_swe_gland	Any enlarged/swollen glands	0 no, 1 yes	_ " -
va_swe_oth	Any facial swelling	0 no, 1 yes	_ " _
va_wt_loss	Any weight loss	0 no, 1 yes	_ " _
va_wasting	Any severe wasting	0 no, 1 yes	Severe wasting is weight loss with other factors
·= · · · •	,	, , , , , , ,	like anaemia, hair colour changes, swollen legs,
			burning feet; Stata code "." if question not asked
			or answer not known
va_anaemia	Any anaemia/paleness	0 no, 1 yes	Stata code "." if question not asked or answer
_	, ,	' '	not known
va_asthma	Any medical diagnosis of asthma	0 no, 1 yes	Stata code "." if no medical diagnosis
va_epilepsy	Any medical diagnosis of epilepsy	0 no, 1 yes	_ " _
va_diabetes	Any medical diagnosis of diabetes	0 no, 1 yes	- " -
va_heart_dis	Any medical diagnosis of heart disease	0 no, 1 yes	_ " _
va_kidney_dis	Any medical diagnosis of kidney disease	0 no, 1 yes	_ " _
va_kidney_dis va_sickle	Any medical diagnosis of haemoglobinopathy	0 no, 1 yes	_"-
va_malaria	Any medical diagnosis of malaria	0 no, 1 yes	_"-
va_hiv_aids	Any medical diagnosis of HIV/AIDS	0 no, 1 yes	_ " _
va_hypert	Any medical diagnosis of hypertension	0 no, 1 yes	_ " _
va_nypert va_tuber	Any medical diagnosis of TB	0 no, 1 yes	
va_tuber va_liver_dis	Any medical diagnosis of the Any medical diagnosis of liver disease	0 no, 1 yes	_ " _
va_cancer	Any medical diagnosis of cancer	0 no, 1 yes	_"_
va_stroke	Any medical diagnosis of stroke	0 no, 1 yes	_"-
va_measles	Any medical diagnosis of measles	0 no, 1 yes	
va_antib_i	Was antibiotic injection required during final illness	0 no, 1 yes	Stata code "." if question not asked or answer
11	W 11 14 2 1 1 1 2 1 1 1 1 1 1 1 1 1 1 1 1	1	not known
va_blood_tr	Was blood transfusion required during final illness	0 no, 1 yes	-"-
va_surgery	Any surgery just before death	0 no, 1 yes	_"-
va_disch	Was discharged from hospital very ill	0 no, 1 yes	- " -

Variable name	Description		Coding 0 no, 1 yes	Notes	
va_vaccin	Was s/he adequately vaccinated				- " -
va_preg_status	Was she pregnant or did she deliver less than 6 weeks before she died	1 pregnant at time of 2 died < 6 weeks at 3 died < 6 weeks at	nant within last 6 weel of death ter normal length preg ter early pregnancy el	nancy nding	Stata code "." if questions not asked or answers not known
va_married	Was she married/partnered at dea	th	0 no, 1 yes	Stata code not known	"." if question not asked or answer
va_ever_preg	Had she ever been pregnant		0 no, 1 yes		_ " _
va_breast_fd	Was she breast feeding at death		0 no, 1 yes	_ " _	
va_first_p	Did she die during/just after first pr	-	0 no, 1 yes		-"-
va_more4	Did she have more than 4 previous	. •	0 no, 1 yes		-"-
va_trim1	Did she die after less than 3 month	ns of pregnancy	0 no, 1 yes		- " -
va_multip	Was this a multiple pregnancy		0 no, 1 yes		- " -
va_preg_uw	Was this pregnancy unwanted		0 no, 1 yes	_"_	
va_term_att	Any attempt to terminate this pregi		0 no, 1 yes		
va_hyster	Hysterectomy shortly before death  Death within 24 hrs of pregnancy e		0 no, 1 yes	_" -	
va_death_24 va_bleed_1	Major bleeding during early pregna	-	0 no, 1 yes	-	_ " _
	, 0 0 71 0		0 no, 1 yes		_"_
va_bleed_d	Major bleeding in late pregnancy/o	lelivery	0 no, 1 yes		
va_placent_r va_bpr_preg	Did placenta remain inside  Was blood pressure raised during	prognanov	0 no, 1 yes 0 no, 1 yes		_ " _
		pregnancy	*		_ " _
va_fit_preg va_baby_al	Were fits only pregnancy-related  Did she deliver a live baby within 6 wks of death		0 no, 1 yes 0 no, 1 yes		
va_lab_24	Was labour prolonged > 24 hrs		0 no, 1 yes		_ " _
va_died_lab	Did she die in labour undelivered		0 no, 1 yes	_ " _	
va_delivery	Where did delivery take place		0 at home		
va_uelively	Where did delivery take place		1 in transit		_ " _
			2 at health facility		
va_prof_ass	Had professional assistance at delivery		0 no, 1 yes		_ " _
va_del_method	How was the baby delivered?		0 normal vaginal de 1 vaginal delivery w 2 delivery by Caesa	ith forceps / \	
va_baby_pos	Was baby's delivery position abno	rmal	0 no, 1 yes		_ " _
va_baby_big	Was baby too big for delivery		0 no, 1 yes 0 no, 1 yes		_ " _
va_baby_part		Was part of the baby prolapsed			_"-
va_disch_sm	Any foul smelling vaginal discharge  Any previous Caesarean section		0 no, 1 yes 0 no, 1 yes		_ " _
va_cs_prev va_coma_sudden	Did the coma come on suddenly		0 no, 1 yes	Stata code not known	"." if question not asked or answer
va_transport _road	Was s/he in a road transport accid	ent	0 no, 1 yes		- " -
va_transport_oth	Was s/he in a non road transport a		0 no, 1 yes		- " -
va_burn	Was s/he burnt by heat, steam or	tire	0 no, 1 yes	- " -	
va_bite	Any bite or sting by an animal		0 no, 1 yes	-"-	
va_poison_2	Any poisoning (not by an animal)		0 no, 1 yes	- " -	
va_inj_intent	Was h/she intentionally injured by people	·	0 no, 1 yes	-"-	
va_nature	Was s/he injured by a force of nature		0 no, 1 yes	- " -	
va_assult	Injured in some kind of violence or another person	assault by	0 no, 1 yes	-"-	
va_convul_time	Any convulsions or fits		0 no convulsions 1 < 5 minutes 2 ≥ 5 minutes 3 had convulsions, duration unknown		<b>- " -</b>
va_convul_coma	Became unconscious immediately	after convulsions	0 no, 1 yes		- " -

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Variable name	Description	Coding	Notes
va_stiff_neck_time	Any stiff or painful neck	0 no stiff neck	-"-
		1 < 1 week	
		2 ≥ 1 week	
		3 stiff neck,	
		duration unknown	
va_cough_long_2_wk	How long did cough last	0 no cough	- " -
- <del>-</del>		1 < 2 weeks	
		2 ≥ 2 weeks	
		3 had cough,	
		duration not	
		known	
va_whoop	Any distinctive whoop (associated with characteristic	0 no, 1 yes	- " -
	whooping sound of pertussis)		
va_rapid_br_time	Any rapid breathing	0 no rapid	- " -
		breathing	
		1 < 2 weeks	
		2 ≥ 2 weeks	
		3 rapid breathing,	
		duration unknown	
va_breathless	Any breathlessness	0 no	- " -
		breathlessness	
		1 < 2 weeks	
		2 ≥ 2 weeks	
		3 rapid breathing,	
		duration unknown	
va_abd_prob	Any abdominal problem	0 no, 1 yes	- " -
va_abd_mas_time	Any abdominal mass	0 no abdominal	- " -
		mass	
		1 < 2 weeks	
		2 ≥ 2 weeks	
		3 abdominal	
		mass, duration	
		unknown	
va_abd_pain_time	Any abdominal pain	0 no abdominal	- " -
		pain	
		1 < 2 weeks	
		2 ≥ 2 weeks	
		3 abdominal pain,	
		duration unknown	
va_swe_abd_time	Any abdominal swelling	0 no abdominal	- " -
		swelling	
		1 < 2 weeks	
		2 ≥ 2 weeks	
		3 abdominal	
		swelling, duration	
	Annual line of health and the state of the s	unknown	"
va_swe_ankles	Any swelling of both feet/ankles	0 no, 1 yes	- " -
va_ulc_feet	Any ulcers/ abscesses or sores on the feet	0 no, 1 yes	-"-
va_ulc_oth	Any ulcers/ abscesses or sores on body, apart from	0 no, 1 yes	- " -
e	feet	0	_ " _
va_rash_time	Any non measles rash	0 no non measles	- " -
		rash	
		1 < 1 week	
		2 ≥ 1 week	
		3 non measles	
		rash, duration	
	Anulandiand luman and arise	unknown	_ " _
Va_swe	Any localised lump or lesion	0 no, 1 yes	- " - - " -
va_swe_mouth	Any lump or lesion in mouth	0 no, 1 yes	
va_swe_armpit	Any lump or lesion in armpit	0 no, 1 yes	- " -
va_swe_neck	Any lumps/swelling in neck	0 no, 1 yes	- " -
va_drink_diff	Any difficulty or pain in swallowing liquids	0 no, 1 yes	- " -
va_malaria_pos	Positive malaria test within one week of death	0 no, 1 yes	- " -
va_malaria_neg	Negative malaria test within one week of death	0 no, 1 yes	- " -
va_copd	Any medical diagnosis of chronic obstructive	0 no, 1 yes	- " -
	pulmonary disease		
va_depress	Any medical diagnosis of depression	0 no, 1 yes	- " -

Variable name	Description	Coding	Notes
va_dementia	Any medical diagnosis of dementia	0 no, 1 yes	_ " -
va_confusion	Any medical diagnosis of memory loss or mental confusions	0 no, 1 yes	_ " _
va_confuse_3	Did the symptoms of mental confusion last 3 months or more?	0 no, 1 yes	_"-
va_bleed	Was the any bleeding from mouth, nose and anus	0 no, 1 yes	-"-
va_menstrual	Was there any bleeding between menstrual periods (women aged 12-50 only)	0 no, 1 yes	_"_
va_ menstr_stop	Had the woman's normal vaginal bleeding stopped naturally (women 40+)	0 no, 1 yes	_ " _
va_menstr_post	Had the woman's normal vaginal bleeding stopped naturally but they later experienced vaginal bleeding	0 no, 1 yes	- " -
va_treatment	Treatment for final illness from a health facility	0 no, 1 yes	- " -
va_rehydrat	Was oral rehydration required during final illness	0 no, 1 yes	- " -
va_nose	Was treatment/food required through nose during final illness	0 no, 1 yes	_"-
va_iv	Was an IV drip required during final illness	0 no, 1 yes	- " -
va_operation	Was there an operation within one month of death	0 no, 1 yes	_ " -
va_early_preg	Was the woman at an early stage of pregnancy within 6 weeks of her death, but the pregnancy had ended in a spontaneous or induced abortion at a stage before the foetus was viable?	0 no, 1 yes	_"-
va rec abort	Any recent abortion	0 no, 1 yes	_ " _
va_bleed_m	Mother had excessive vaginal bleeding in pregnancy/postpartum period	0 no, 1 yes	- " -
va_bleed_preg	Major bleeding in first 6 months of pregnancy	0 no, 1 yes	_ " _
va_bleed_pre_lab	Major bleeding shortly before labour	0 no, 1 yes	-"-
va_bleed_lab	Major bleeding during labour, before delivering the baby	0 no, 1 yes	_ " _
va_bleed_post_lab	Major bleeding after delivering the baby	0 no, 1 yes	-"-
va_vis_bl_preg	Any blurred vision during the last 3 months of preg	0 no, 1 yes	-"-
Informant's understanding	of deceased HIV service use		
va_went_to_htc	Did the deceased ever receive testing and counselling for HIV?	0 no, 1 yes, 8 don't know	_ " _
va_last_test_result	What was the last HIV test result of the deceased	0 negative 1 positive 8 don't know	_"-
va_last_hiv_test_when	When did deceased have last HIV test?	1 in last year 2 more than a year ago 3 Never 4 Don't know	
va_last_hiv_test_year	When did deceased have last HIV test?	Year 4 digits 9999 Unknown	
va_last_hiv_test_month	When did deceased have last HIV test?	Month as integer 1 to 12 99 Unknown	
va_referred_art_ever		0 no, 1 yes, 8 don't know	
va_referred_art_when		1 in last year 2 more than a year ago 3 Never 4 Don't know	
va_referred_art_year		Year 4 digits 9999 Unknown	
va_referred_art_month		Month as integer 1 to 12	
		99 Unknown	
va_hivclinic_ever	Whether deceased ever went to clinic/other service	99 Unknown 0 no, 1 yes,	

Variable name	Description	Coding	Notes
va_hivclinic_first_when	When deceased first went to HIV clinic/service	1 in last year	
		2 more than a	
		year ago	
		3 Never	
		4 Don't know	
va_ hivclinic_first _year		Year 4 digits	
		9999 Unknown	
va_hivclinic_first_month		Month as integer	
		1 to 12	
		99 Unknown	
va_hivclinic_current	Was deceased attending HIV clinic/service around		
	the time of death, were they still a patient.		
va_assessed_for_art	Was deceased ever assessed for ART treatment	0 no, 1 yes,	_ " _
Cont	need?	8 don't know	
va_first_assessed_when		1 in last year	
		2 more than a	
		year ago	
		3 Never	
		4 Don't know	
va_first_assessed_year		Year 4 digits	
		9999 Unknown	
va_first_assessed_month		Month as integer	
		1 to 12	
		99 Unknown	
va_ever_prescribed_art	Was the deceased ever prescribed ART treatment?	0 no, 1 yes,	_ " _
		8 don't know	
va_started_art	Did deceased start ART treatment?	0 no, 1 yes,	-"-
ve data ataut aut	When did the deceased start on ART treatment?	8 don't know Date in Stata	_ " _
va_date_start_art	when did the deceased start on ART treatment?	format	
va_art_current	Was the deceased still on ART treatment when they	0 no, 1 yes,	- " -
	died?	8 don't know	
va_date_stop_art	When did the deceased stop ART treatment?	Date in Stata	_ " _
•	·	format	
va_where_art	Where did the deceased receive ART treatment?	0 not treated	Stata code "." if this question not asked in your
		1 local clinic	VA protocol
		2 clinic outside	
		study area	
		3 not known	