|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 206 | If yes, to the Q205 which ones have you accessed? | **Palliative Care Service** | **Yes** | | **No** | | Don’t read out responses | | |
| Pain or distressing symptoms mgnt | 01 | | 02 | |
| Psychological /Emotional needs (counselling) | 01 | | 02 | |
| Socio-economic support (nutrition, livelihoods) | 01 | | 02 | |
| Spiritual care and counselling | 01 | | 02 | |
| Care plan & End of life care | 01 | | 02 | |
| Bereavement support | 01 | | 02 | |
| Legal and inheritance support | 01 | | 02 | |
| 206A | Please specify the service and the actual intervention and service providers.  Key for service providers (Community volunteers-1,VHW/CHW-2,Gvt health facility worker-3,Churches-4, Fmaily member-5, Other specify\_6) | | | | | | | | |
| 207 | ***Service*** | ***Specify actual intervention accessed*** | ***Service provider-refer to the code*** | | | | | | |
| a | Pain or distressing symptoms mgnt |  | 1 | 2 | | 3 | | 4 | 5 |
| b | Psychological /Emotional needs (counselling) |  | 1 | 2 | | 3 | | 4 | 5 |
| c | Social/ economic support (nutrition, livelihoods) |  | 1 | 2 | | 3 | | 4 | 5 |
| d | Spiritual care and counselling |  | 1 | 2 | | 3 | | 4 | 5 |
| e | Care plan & End of life care |  | 1 | 2 | | 3 | | 4 | 5 |
| f | Bereavement support |  | 1 | 2 | | 3 | | 4 | 5 |
| g | Legal and inheritance support |  | 1 | 2 | | 3 | | 4 | 5 |