DOCUMENTATION GUIDE #9:
VERBAL AUTOPSY

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Verbal Autopsy Documentation Guide

Purpose
A small number of TLT respondents died during the study period. In order to track attrition and to understand the circumstances surrounding these deaths, TLT conducted a *verbal autopsy* for each individual who died during the study period. Relatives of the deceased were our informants, and they answered the verbal-autopsy questions which were asked by a trained interviewer during visits to the household. The verbal autopsy data were collected at two time points: 2012 and 2015.

Instrument
TLT's Verbal Autopsy questionnaire was heavily informed by the World Health Organization's verbal autopsy instrument(s). Our questionnaire asked about the cause of death, health conditions prior to death, symptoms associated with the illness, and recent health-seeking behaviors. Given the sensitive nature of these questions, the 2015 verbal autopsies were done in the spirit of a field interview; the interviewer first conducted a recorded qualitative interview with the informant and then filled in the structured verbal autopsy questionnaire with these qualitative responses. If particular pieces of information were not elicited by the qualitative interview, the interviewer would ask that question as stated in the survey questionnaire itself.

Notes to Analysts
A total of 27 verbal autopsies were administered: 12 in 2012 and 15 in 2015. Of the 27 verbal autopsies, 17 concern the death of women (2 of whom were part of the refresher sample), 7 were from random men, and 3 were from male partners.

Cleaning to the dataset was minimal.

Because of a fieldwork error (tablet failure), the survey data we collected for 3 verbal autopsy questionnaires were compromised. However, the transcribed qualitative interviews with these respondents were still available, and we used these data to impute relevant information for these respondents [Respondents 113153, 5324620, and 329061]. The indicator variable `quasi_survey` flags cases that were partially entered through this method. Erring on the conservative side, we entered as much information as could be reasonably derived from the in-depth interview into the dataset itself. Of course, this required a litany of judgement calls on the part of the data cleaning team. We imputed values of .m (missing) or .d (don't know) if the answers weren't completely clear from the interview. Unfortunately, the exact date of death for these 3 respondents could not be inferred.

Notes about Variables

The variable `iver` identifies the interviewer who conducted the verbal autopsy. In 2012, verbal autopsies were conducted by interviewers who had also been working on the main survey. In 2015, the verbal autopsy interviews were conducted by a research assistant who worked exclusively on this portion of our project.

`q28` and `q28_2` ask informants to list the cause of death. Informants were able to report more than one cause of death. In the 2012 surveys, some informants reported two different causes of death, but in the 2015 surveys, informants tended to report only one cause of death.

`q32` asks informants to list illness symptoms prior to death. Informants were able to report multiple symptoms. In the 2012 surveys, some informants reported up to 5 separate symptoms, but in the 2015 surveys, each informant reported only 1 symptom.