

Note: This is Online Appendix 1 of Oladejo, T.S., Myezwa, H., Ajidahun, A.T. & Ibeneme, S., 2024, 'Prevalence and predictors of HIV-related disability among people living with HIV in Nigeria', *South African Journal of Physiotherapy* 80(1), a2001. <https://doi.org/10.4102/sajp.v80i1.2001>

SOCIO-DEMOGRAPHIC QUESTIONNAIRE

Socio-demographic characteristics

Participants' ID: _____

1. How old are you?
2. What is your gender? _____
3. Marital status (Tick as appropriate)

Married	
Single	
Widowed	
Divorced / separated	

4. Education

No education	
Primary school	
Secondary school certificate	
Ordinary diploma	
Bachelor's degree / HND	
Postgraduate degree	

5. Monthly income category

Less than N 18, 000 per month	
Between N19, 000 - N 30, 000 per month	
Between N31,000 – N70,000 per month	
Between N71,000 – N100,000 per month	
More than N 100, 000 per month	

6. Which year were you diagnosed of HIV?

7. (a) Are you on antiretroviral therapy? Yes No

(b) If 'yes' to Q 8a, how long have you been on antiretroviral therapy? _____

8. Give details of your antiretroviral therapy.

First line	
Second line	
Not on ART (Pre-ART care)	

9. Most recent CD4 count and viral load

CD4 count	
Viral load	

MEDICAL SYMPTOMS QUESTIONNAIRE

Have you experienced any of the following symptoms in the last 3 months?

	Medical symptoms	Yes	No
1	Confusion		
2	Breathlessness		
3	Fatigue		
4	Diarrhea		
5	Nausea and vomiting		
6	Headache		
7	Stomach pain		
8	Change in taste, sore mouth		
9	Skin itching or changes		
10	Muscular pain		
11	Fever		
12	Weight loss		

WHODAS 2.0 12-ITEM QUESTIONNAIRE (Self-administered)

In the past 30 days, how much difficulty did you have in....

	None	Mild	Moderate	Severe	Extreme/ Cannot do
Q1. Standing for long period such as 30 minutes	0	1	2	3	4
Q2. Taking care of your household responsibilities	0	1	2	3	4
Q3. Learning a new task, for example, learning how to get to a new place	0	1	2	3	4
Q4. How much of a problem did you have joining in community activities (for example, festivities, religious or other activities) in the same way as anyone else can	0	1	2	3	4
Q5. How much have you been emotionally affected by your health problems	0	1	2	3	4
Q6. Concentrating on doing something for ten minutes	0	1	2	3	4
Q7. Walking a long distance, such as a kilometer (or equivalent)	0	1	2	3	4
Q8. Washing your whole body	0	1	2	3	4
Q9. Getting dressed	0	1	2	3	4
Q10. Dealing with people you do not know	0	1	2	3	4
Q11. Maintaining a friendship	0	1	2	3	4
Q12. Your day-to-day work	0	1	2	3	4

WHODAS Disability Score = Sum of the above