

Characteristics of participants (Carers/Child)**Background information of carer**

Age : _____
Gender : _____
Ethnicity : _____
Marital statue : Single/ Married/ Divorced/ Separated
Highest educational level: Primary/Secondary/ Tertiary
Occupation : _____
Estimated family income : RM _____ /month

Background information of child

Age of child: _____ (year)
Gender: _____
Who takes of your child most of the time (more than 12 hours a day) :
 You/ your partner/ child's grandmother or grandfather/ helper/
 baby sitter
 Others: _____
How long has your child had asthma: _____ (month/year)
Family members with asthma: Self/partner/children/siblings
Others: _____