

Date: _____ Person Completing Form: _____ Clinic Location: _____ Patient Number: _____

Have you heard the term "genetic counseling" previously?

Yes ___ No ___

If you answered yes, how familiar are you with genetic counseling?

(1 = little/no familiarity, 2 = somewhat familiar, 3 = familiar, 4 = very familiar)

If you answered yes, how have you heard of "genetic counseling"?

Media ___

In school ___

Family ___

Friend ___

Have received services ___

Other _____

Genetic counseling is the process of providing information and support to families who may be at risk for a variety of genetic or inherited conditions. Genetic counselors identify families at risk, investigate the problem present in the family, interpret information about the condition, analyze inheritance patterns and risks of recurrence, and review available options with the family.

Please indicate your agreement with the following statements:

(1 = disagree, 2 = somewhat disagree, 3 = somewhat agree, 4 = agree)

1. The goal of genetic counseling is to keep genetic problems out of society:
2. Genetic counseling is a service mainly for pregnant women:
3. Genetic counseling is confidential:
4. Genetic counselors advise women to get abortions when there is a problem:
5. Genetic counselors give people emotional support:
6. Genetic counseling is only useful to a small group of people with rare diseases:
7. Genetic counseling can help cure a genetic problem:
8. Genetic counseling helps expecting parents choose the gender of their child:
9. Genetic counselors must receive a lot of special training to do their job:
10. Genetic counselors require people to have genetic tests:
11. Genetic counseling helps expecting parents choose the eye color of their child:
12. Genetic counseling may be helpful for someone with cancer in their family:
13. Seeing a genetic counselor could cause someone to lose their job:
14. I would trust the information provided by a genetic counselor:
15. Genetic counseling is in line with my values:

Demographic information

Gender:

Male ___ Female ___ Prefer not to answer ___

Race:

Ethiopian _____ Other: _____

Ethnicity:

Oromo ___

Amhara ___

Somali ___

Tigray ___

Sidama ___

Gurage ___

Welayta ___

Hadiya ___

Afar ___

Qemant ___

Other _____

Religion:

Ethiopian Orthodox ___

Muslim ___

Protestant ___

Traditional ___

Catholic ___

Other _____

What type of relationship are you in?

Single ___

Married ___

Live with partner _____

Do you have children: Yes ___ No ___

How far did you go in school:

Primary school (grades 1-4) ___

Primary school (grades 5-8) ___

Secondary school (grades 9-10) _____

Secondary school (grades 11-12) ___

Technical and vocational education ___

University, did not receive degree ___

University, received degree ___