

## CAREGIVER SURVEY

**a) GREET THE PEOPLE YOU WILL FIND AT EACH HOUSEHOLD:**

Good morning/afternoon

**b) ASK FOR THE CAREGIVER OR RESPONSIBLE ADULT HOUSEHOLD MEMBER**

**c) INTRODUCE YOURSELF THUS:**

I am (name of interviewer), a research assistant with the Butaleja Malaria Project, a partnership between the University of Makerere and Canada.

**d) EXPLAIN THE PURPOSE OF YOUR VISIT:**

The purpose of my visit is to ...

**e) ASK THE CAREGIVER OR ADULT HOUSEHOLD MEMBER WHETHER THERE ARE ANY CHILDREN 5 YEARS OF AGE AND UNDER IN THE HOUSEHOLD:**

- YES            CONTINUE DOWN THIS PAGE  
 NO              STOP THE INTERVIEW AND GO TO THE NEXT HOUSEHOLD

**f) IF NOT SPEAKING TO THE CAREGIVER, ASK TO SPEAK WITH THE CAREGIVER OF CHILDREN 5 YEARS OF AGE AND UNDER IN THE HOUSEHOLD**

**g) ASK:** Did any of your children 5 years of age and under experience fever in the last 2 weeks?

- YES            OBTAIN INFORMED CONSENT AND START INTERVIEW  
 NO              STOP THE INTERVIEW, GO TO THE NEXT HOUSEHOLD

**INTERVIEWER'S VISIT INFORMATION: DATE:** DAY: \_\_\_\_ MONTH: \_\_\_\_ YEAR: \_\_\_\_

**INTERVIEWER'S NAME:** \_\_\_\_\_

**RECORD BEGINNING TIME:** \_\_\_\_\_

**RESULT OF VISIT:** (If caregiver refuses to participate, provide reason)

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### IDENTIFICATION

**HOUSEHOLD NUMBER:** \_\_\_\_/\_\_\_\_/\_\_\_\_

**HEALTH SUB DISTRICT:** 1. \_\_\_\_\_ 2. \_\_\_\_\_

**BUTALEJA SUB-COUNTY:** \_\_\_\_\_ **PARISH:** \_\_\_\_\_

**VILLAGE:** \_\_\_\_\_

**CAREGIVER STUDY ID#:** \_\_\_\_\_

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**IS CAREGIVER PART OF THIS HOUSEHOLD?** 1. YES  0. NO

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**WHAT IS CAREGIVER'S RELATIONSHIP TO HEAD OF HOUSEHOLD**

1. Wife	2. Husband	3. Daughter	4. Son	5. Sister	6. Brother	7. Grandchild	8. Mother
9. Father	10. Son-in-law	11. Daughter-in-law	12. Aunt	13. Uncle	14. Grandparent	15. Household head	
16. Other (Specify): _____							

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**CAREGIVER PART OF THIS HOUSEHOLD?** 1. YES  0. NO

**INFORMATION OF ALL CHILDREN 5 YEARS AND UNDER WITH FEVER IN THE LAST 2 WEEKS (STARTING WITH THE YOUNGEST)**

	Name	Sex	Birth date Month/Year	Age (years)
Youngest		1. Male; 2. Female		
2 <sup>nd</sup> Youngest		1. Male; 2. Female		
		1. Male; 2. Female		
		1. Male; 2. Female		
		1. Male; 2. Female		
		1. Male; 2. Female		
		1. Male; 2. Female		

**SELECT THE YOUNGEST TO BECOME THE INDEX CHILD FOR THIS INTERVIEW**

**WHAT IS CAREGIVER'S RELATIONSHIP TO INDEX CHILD:**

1. Wife	2. Husband	3. Daughter	4. Son	5. Sister	6. Brother	7. Grandchild	8. Mother
9. Father	10. Son-in-law	11. Daughter-in-law	12. Aunt	13. Uncle	14. Grandparent	15. Household head	
16. Other (Specify): _____							

**PART 1. QUESTIONS FOR ALL CAREGIVERS**

**(DIRECTIONS TO INTERVIEWER) ASK:** "I now want to ask you about this child's illness related to this fever episode."

1.	What <u>first</u> sign(s) and symptom(s) did you see your child have when s/he had the illness we are now talking about? <b>(CIRCLE ALL THAT APPLY)</b>			
	1. Feeling cold (Chills/Shivering) 2. Body ache 3. Chest pains 4. Cough 5. Diarrhea	6. Fever/high temperature/hot body 7. Headache 8. Joint /muscle pain 9. Malaise 10. Abdominal Pain	11. Decreased Urination 12. Black Stools 13. Unable to sit 14. Pale eyes 15. Pale palms	16. poor appetite 17. Vomiting 18. Weakness 19. Abnormal/Rapid breathing 20. Convulsions
2.	What time of the day were the first sign(s) and symptom(s) first noticed?			
	1. Morning 2. Afternoon	3. Dusk/early evening 4. Night time	5. Midnight to dawn	
3.	Which individual assisted you in recognizing this child was ill?			
	<b>HEALTH PROFESSIONAL:</b> 1. Doctor 2. Pharmacist 3. Nurse 96. Other (specify) _____	<b>OTHER (RELATION TO CAREGIVER):</b> 4. Spouse 5. Father 6. Mother	7. Grandmother 8. In-Law 9. Sibling 10. Neighbour	11. Drug shop personnel 12. Traditional healer 13. No one else (Myself) 97. Other (specify) _____
4.	Is this child still ill from this fever episode?			
	1. Yes	0. No		
5.	What illness was (is) this child suffering from?			
	1. Malaria 2. Diarrhea 3. Tuberculosis	4. Enlarged spleen 5. Fever 6. Measles	7. Pneumonia 8. Stomach wounds 90. Don't know	96. Other (specify) _____
6.	Which individual assisted you in recognizing that this child was suffering from this illness?			
	<b>HEALTH PROFESSIONAL:</b> 1. Doctor 2. Pharmacist 3. Nurse 96. Other (specify) _____	<b>OTHER (RELATION TO CAREGIVER):</b> 4. Spouse 5. Father 6. Mother	7. Grandmother 8. In-Law 9. Sibling 10. Neighbour	11. Drug shop personnel 12. Traditional healer 13. No one else (Myself) 97. Other (specify) _____
<b>(DIRECTIONS TO INTERVIEWER):</b>				
<p><b>IF MALARIA WAS <u>NOT SUSPECTED</u> and THIS WAS DIAGNOSED BY HEALTH PROFESSIONAL, THEN STOP THE INTERVIEW FOR <i>THIS</i> CHILD.</b></p> <p><b>ASK QUESTIONS 1 TO 6 FOR THE <u>NEXT YOUNGEST</u> CHILD 5 YEARS OF AGE AND UNDER WITH FEVER IN THE PAST 2 WEEKS.</b></p> <p><b>IF <i>NO CHILDREN</i> HAVE FEVER OR WERE DIAGNOSED AS NOT HAVING MALARIA BY HEALTH PROFESSIONAL, THEN STOP INTERVIEW AT THIS HOUSEHOLD.</b></p> <p>Thank caregiver for their time and answers; let them know this information will still be useful in this study.</p>				

7.	Can you tell me the <u>one main</u> sign or symptom of malaria in a child 5 years and under?				
	1. Feeling cold (Chills/Shivering) 2. Body ache 3. Chest pains 4. Cough 5. Diarrhea	6. Fever/high temperature/hot body 7. Headache 8. Joint /muscle pain 9. Malaise 10. Abdominal Pain	11. Decreased Urination 12. Black Stools 13. Unable to sit 14. Pale eyes 15. Pale palms	16. poor appetite 17. Vomiting 18. Weakness 19. Abnormal/Rapid breathing 20. Convulsions	21. Nausea 22. Jaundice (Yellow colour) 23. Unable to eat/drink/breastfeed 24. Unconsciousness (coma) 90. Don't know 96. Other (specify) _____
8.	Can you tell me <u>other</u> signs and symptoms of malaria in a child 5 years and under? <b>(CIRCLE ALL THAT APPLY)</b>				
	1. Feeling cold (Chills/Shivering) 2. Body ache 3. Chest pains 4. Cough 5. Diarrhea	6. Fever/high temperature/hot body 7. Headache 8. Joint /muscle pain 9. Malaise 10. Abdominal Pain	11. Decreased Urination 12. Black Stools 13. Unable to sit 14. Pale eyes 15. Pale palms	16. poor appetite 17. Vomiting 18. Weakness 19. Abnormal/Rapid breathing 20. Convulsions	21. Nausea 22. Jaundice (Yellow colour) 23. Unable to eat/drink/breastfeed 24. Unconsciousness (coma) 90. Don't Know 96. Other (specify) _____
9.	What is the <u>one main</u> cause for malaria?				
	1. Cold or changing weather 2. Drinking dirty water 3. Eating cold cornmeal	4. Eating dirty food 5. Eating immature sugar cane 6. Eating bad food	7. Getting soaked with rain 8. Mosquito bites 9. Witchcraft	10. Birds 11. Dirty household surrounding 90. Don't know	96. Other (specify)_____
10.	Where have you heard or seen information about malaria?				
	1. Wall painting 2. Calendar 3. Drug shop provider 4. Health care staff	5. Medicine package 6. Leaflet (flyer) 7. Newspaper 8. Posters	9. Radio 10. Family members. Specify _____ 11. Neighbour	12. Other community members. Specify _____ 13. Fellow workers 14. Through training course	15. Through barazas 16. TV 17. No one else (Myself) 96. Other (specify) _____
11.	Was this child seen by a health professional (doctor, nurse or medical attendant)? Other _____				
	1. Yes, where _____			0. No	
12.	Was a blood test done to confirm whether or not the child had malaria?				
	1. Yes, <b>IF YES</b> , where was the test done _____			0. No	

<b>(DIRECTIONS TO INTERVIEWER): SELECT ONE OPTION ONLY (13.1 or 13.2) TO ANSWER BUT NOT BOTH:</b>				
<b>OPTION 13.1. IF THE CHILD WAS SUSPECTED TO HAVE MALARIA</b>				
13.1.1 Can you tell me what signs and symptoms alerted you that this child might have malaria? <b>(CIRCLE ALL THAT APPLY)</b>				
1. Feeling cold (Chills/Shivering) 2. Body ache 3. Chest pains 4. Cough 5. Diarrhea	6. Fever/high temperature/hot body 7. Headache 8. Joint /muscle pain 9. Malaise 10. Abdominal Pain	11. Decreased Urination 12. Black Stools 13. Unable to sit 14. Pale eyes 15. Pale palms	16. poor appetite 17. Vomiting 18. Weakness 19. Abnormal/Rapid breathing 20. Convulsions	21. Nausea 22. Jaundice (Yellow colour) 23. Unable to eat/drink/ breastfeed 24. Unconsciousness (coma) 90. Don't Know 96. Other specify) _____
13.1.2. In your opinion, was this child's malaria mild or severe?				
1. Mild		2. Severe		
<b>OPTION 13.2. IF THE CHILD WAS NOT SUSPECTED TO HAVE MALARIA:</b>				
13.2.1. What signs and symptoms alerted you that this child might not have had malaria? <b>(CIRCLE ALL THAT APPLY)</b>				
1. Feeling cold (Chills/Shivering) 2. Body ache 3. Chest pains 4. Cough 5. Diarrhea	6. Fever/high temperature/hot body 7. Headache 8. Joint /muscle pain 9. Malaise 10. Abdominal Pain	11. Decreased Urination 12. Black Stools 13. Unable to sit 14. Pale eyes 15. Pale palms	16. poor appetite 17. Vomiting 18. Weakness 19. Abnormal/Rapid breathing 20. Convulsions	21. Nausea 22. Jaundice (Yellow colour) 23. Unable to eat/drink/ breastfeed 24. Unconsciousness (coma) 90. Don't Know 96. Other specify) _____
<b>(DIRECTIONS TO INTERVIEWER) SAY:</b> "I want to now ask you about the <u>very first action</u> that was taken when this child had this episode of fever we are now talking about:"				
14. What form of action did your child receive? <b>(CIRCLE ALL THAT APPLY)</b>				
1. No action 2. Home remedy		3. Traditional remedy 4. Prayer		5. Western medicine
<b>IF ACTION INCLUDED TRADITIONAL OR HOME REMEDY, LIST WHAT THEY WERE BELOW:</b>				
<b>TRADITIONAL REMEDY</b>			<b>HOME REMEDY</b>	
<ul style="list-style-type: none"> <li><b>IF ACTION INCLUDED WESTERN MEDICINES, LIST THE NAMES OF ALL MEDICINES UNDER Q.26a - IN SPACE PROVIDED FOR FIRST ACTION</b></li> </ul>				
15. When was the very first action started after fever was noticed?				
1. No action was started 2. Immediately (within 6 hour) 3. Same day (within 1 day or 24 hours)			4. Next day (on the 2 <sup>nd</sup> day or beyond 24 hours) 5. More than 2 days later (more than 48 hours) 96. Other (specify)_____	

**(DIRECTIONS TO INTERVIEWER): REFER TO Q.14 and SELECT ALL OPTIONS (FROM Q.16.1, 16.2, 16.3 and 16.4) THAT APPLY. CHOOSE ANSWERS FROM THE TWO TABLES PROVIDED BELOW**

**OPTION 16.1. SELECT IF NO FORM OF ACTION or ONLY PRAYER WAS PROVIDED:**

16.1.1. Why was no form of action provided? REASON FOR A PARTICULAR ACTION (Specify number): \_\_\_\_\_

16.1.2. Who advised you on not starting any form of action?

HEALTH PROFESSIONAL (Specify number): \_\_\_\_\_  OTHER RELATION TO CAREGIVER (Specify number): \_\_\_\_\_

**OPTION 16.2. SELECT IF TRADITIONAL REMEDY WAS PROVIDED:**

16.2.1. Why was traditional remedy provided? REASON FOR A PARTICULAR ACTION (Specify number): \_\_\_\_\_

16.2.2. Who advised you on starting the traditional remedy?

HEALTH PROFESSIONAL (Specify number): \_\_\_\_\_  OTHER RELATION TO CAREGIVER (Specify number): \_\_\_\_\_

**OPTION 16.3. SELECT IF HOME REMEDY WAS PROVIDED:**

16.3.1. Why was home remedy provided? REASON FOR A PARTICULAR ACTION (Specify number): \_\_\_\_\_

16.3.2. Who advised you on starting the home remedy?

HEALTH PROFESSIONAL (Specify number): \_\_\_\_\_  OTHER RELATION TO CAREGIVER (Specify number): \_\_\_\_\_

**OPTION 16.4. SELECT IF WESTERN MEDICINE WAS PROVIDED:**

16.4.1. Who advised you on starting the western medicine?

HEALTH PROFESSIONAL (Specify number): \_\_\_\_\_  OTHER RELATION TO CAREGIVER (Specify number): \_\_\_\_\_

**TABLE: REASONS FOR A PARTICULAR ACTION**

1. Fever was not serious, waiting for fever to get worse before seeking treatment	2. Usually first wait and see if fever will go away No money to buy drugs 3. No transportation to buy medicine	4. The place to obtain medicine was too far away 5. No one in the household had time to obtain treatment	6. Did not know where to go to get treatment 7. Medicines not available at drug shop 8. Medicines not available at health facility	9. Fever went away 10. No medicines at home 11. No drug shop open 12. No health facility open 13. Not recommended by _____	96. Other (specify): _____
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**TABLE: LIST OF HEALTH PROFESSIONALS and OTHER RELATION TO CAREGIVER**

<b>HEALTH PROFESSIONAL:</b>  1. Doctor 2. Pharmacist 3. Nurse 96. Other (specify) _____	<b>OTHER (RELATION TO CAREGIVER):</b>  4. Spouse 5. Father 6. Mother	  7. Grandmother 8. In-Law 9. Sibling 10. Neighbour	  11. Drug shop personnel 12. Traditional healer 13. No one else (Myself) 97. Other (specify) _____
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<b>(DIRECTIONS TO INTERVIEWER): ASK THE FOLLOWING QUESTIONS <i>WHETHER OR NOT</i> ANY FORM OF FIRST ACTION WAS TAKEN</b>					
17.	If you had a choice, what different form of action would you have selected for this child to treat the current fever episode we are now talking about? <b>(CHOOSE ALL THAT APPLY)</b>				
	1. No change, same action 2. Traditional remedy	3. Home remedy 4. Prayer	5. Western Medicine 96. Other (specify) _____		
18.	Could you have independently decided to start this child on a different form of action or would you have required permission?				
	1. Yes	0. No			
19.	Who makes the final decision on what form of action to start?				
	<b>HEALTH PROFESSIONAL:</b> 1. Doctor 2. Pharmacist 3. Nurse 96. Other (specify) _____	<b>OTHER (RELATION TO CAREGIVER):</b> 4. Spouse 5. Father 6. Mother	7. Grandmother 8. In-Law 9. Sibling 10. Neighbour	11. Drug shop personnel 12. Traditional healer 13. No one else (Myself) 97. Other (specify) _____	
20.	Do you believe that the first action for this child would have been different if the child was of the <u>opposite sex</u> ? <b>(READ ANSWER FROM Q.14 TO THE CAREGIVER OF THEIR FIRST ACTION)</b>				
	1. Yes , <b>IF YES, How?</b> _____  Why? _____			0. No	
21.	Do you believe that the first action for this child would have been different if the child was one of your other children 5 years of age and under? <b>(READ ANSWER FROM Q.14 TO THE CAREGIVER OF THEIR FIRST ACTION)</b>				
	1. Yes , <b>IF YES, How?</b> _____  Why? _____			0. No	
22.	After this first action, was there a need for <u>further action</u> in this child?				
	1. Yes. <b>IF YES, SAY:</b> I want to ask you what forms of actions were used <u>subsequent to the first action</u> ?				0. No,
23.	Were home remedies used?				
	1. Yes <b>IF YES ASK:</b> what? _____		0. No		
24.	Were traditional remedies used?				
	1. Yes <b>IF YES ASK:</b> what? _____		0. No		
25.	Were western medicines used?				
	1. Yes <b>IF YES, LIST ALL WESTERN MEDICINES UNDER Q.26b</b>		0. No, <b>IF NO, ASK:</b> "What was the main reason for you to not use any western medicines"? (Specify number From table below) _____		
<b>TABLE: REASONS FOR NOT USING WESTERN MEDICINE</b>					
1. Fever was not serious, waiting for fever to get worse before seeking treatment	2. Usually first wait and see if fever will go away 3. No money to buy drugs 4. No transportation to buy medicine	5. The place to obtain medicine was too far away 6. No one in the household had time to obtain treatment	7. Did not know where to go to get treatment 8. Medicines not available at drug shop 9. Medicines not available at health facility	10. Fever went away 11. No medicines at home 12. No drug shop open 13. No health facility open 14. Not recommended by	96. Other (specify): _____

**(DIRECTION TO INTERVIEWER) IF NO WESTERN MEDICINES ARE USED IN FIRST AND SUBSEQUENT ACTIONS, THEN GO TO PART 3 (blue pages)**

26.	<b>(DIRECTIONS TO INTERVIEWER):</b>  <b>LIST OF ALL WESTERN MEDICINES USED (FROM Q.14 and Q.25)</b>	<b>26a.</b>	<b>26b.</b>
		<b>WESTERN MEDICINES USED IN FIRST ACTION (FROM Q.14)</b>	<b>WESTERN MEDICINES USED ON SUBSEQUENT ACTION (FROM Q. 25)</b>
		1.	1.
		2.	2.
		3.	3.
		4.	4.
5.	5.		
6.	6.		

27. **(DIRECTIONS TO INTERVIEWER): DETERMINE IF WESTERN antiMALARIA MEDICINES WERE USED BY COMPARING THE LIST GENERATED ABOVE IN Q.26 & b WITH THE WESTERN antiMALARIA MEDICINE LIST PROVIDED IN THE TABLE BELOW (USE PICTURES AS SUBSTITUTE FOR LIST)**

<p>1. Yes, IF YES, LIST THE antiMALARIA WESTERN MEDICINES USED, STARTING WITH FIRST</p> <p>1. _____</p> <p>2. _____</p> <p>3. _____</p> <p>4. _____</p> <p>5. _____</p> <p>6. _____</p> <p><b>GO TO PART 2 (Q. 28).</b></p>	<p>0. No, IF NO, GO TO PART 3 (BLUE PAGES)</p>
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TABLE: WESTERN antiMALARIA MEDICINE LIST					
Amodiaquine	Artesunate	Clindamycin	Isoniazid	Pyrimethamine	Sulfalene
Arteether	Atovaquone	Dapsone	Lumefantrine	Pyronaridine	Sulfamethoxazole
Arteflene	Cloroquine	Dihydroartemisinin	Mefloquine	Quinidine	Sulfamethoxyprazine
Artemether	Chlorproguanil	Doxycycline	Naphthoquine	Quinine	Sulfametopyrazine
Artemisinin	Cinchonidine	Halofantrine	Piperaquine	Rifampicin	Tafenoquine
Artemotil	Cinchonine	Hydroxychloroquine	Proguanil	Sulfadoxine	Tetracycline
Other: _____					



**PART 2. (DIRECTION TO INTERVIEWERS): THIS SECTION IS FOR CAREGIVERS WHOSE CHILDREN RECEIVED antiMALARIA WESTERN MEDICINES (REFER TO Q. 27)**  
**Skip to Part 3 Question #92 if did not received a western antimalarial medicine (blue sheets)**

**INTERVIEWER, SAY:** "I now want to ask you about each of the antimalaria western medicine that was given to this child".

<b>(DIRECTIONS TO INTERVIEWER): LIST HERE ALL WESTERN antiMALARIA MEDICINES FROM Q.27</b>	<b>28. Who decided this child should be given this antimalaria medicine? (SELECT FROM LIST BELOW)</b>		<b>29. What was the <u>one main</u> reason for choosing this antimalaria medicine? (CHOOSE FROM LIST BELOW)</b>
	<b>HEALTH PROFESSIONAL:</b>	<b>OTHER (RELATION TO CAREGIVER):</b>	
	1. Doctor 2. Pharmacist 3. Nurse 96. Other (specify) _____	4. Spouse 5. Father 6. Mother 7. Grandmother In-Law 8. Sibling	9. Neighbour 10. Drug shop personnel 11. Traditional Healer 12. No one else (Myself) 97. Other (specify) _____
	<input type="checkbox"/> HEALTH PROFESSIONAL Specify number: _____ <input type="checkbox"/> OTHER (RELATION TO CAREGIVER) Specify number: _____		Specify number: _____
	<input type="checkbox"/> HEALTH PROFESSIONAL Specify number: _____ <input type="checkbox"/> OTHER (RELATION TO CAREGIVER) Specify number: _____		Specify number: _____
	<input type="checkbox"/> HEALTH PROFESSIONAL Specify number: _____ <input type="checkbox"/> OTHER (RELATION TO CAREGIVER) Specify number: _____		Specify number: _____
	<input type="checkbox"/> HEALTH PROFESSIONAL Specify number: _____ <input type="checkbox"/> OTHER (RELATION TO CAREGIVER) Specify number: _____		Specify number: _____
	<input type="checkbox"/> HEALTH PROFESSIONAL Specify number: _____ <input type="checkbox"/> OTHER (RELATION TO CAREGIVER) Specify number: _____		Specify number: _____
	<input type="checkbox"/> HEALTH PROFESSIONAL Specify number: _____ <input type="checkbox"/> OTHER (RELATION TO CAREGIVER) Specify number: _____		Specify number: _____

**30. Can you tell me the names of other western antimalaria medicines available in your community? LIST BELOW ALL OTHER WESTERN antiMALARIA MEDICINES AVAILABLE IN THE COMMUNITY**


31.	Of the western <b>antimalaria</b> medicines you have mentioned, which do you think cures malaria the <u>best</u> in children child 5 years and under? _____					
32.	Where did you learn this <b>antimalaria</b> medicine was the best?					
	1. Wall painting 2. Calendar 3. Drug shop provider 4. Health care staff	5. Medicine package 6. Leaflet (flyer) 7. Newspaper 8. Posters	9. Radio 10. Family members. Specify _____ 11. Neighbour	12. Other community members. Specify _____ 13. Fellow workers 14. Through training course	15. Through barazas 16. TV 17. No one else (Myself) 96. Other (specify) _____	
33.	Of the western <b>antimalaria</b> medicines you have mentioned, which one cures malaria the <u>worst</u> in children child 5 years and under? _____					
34.	Where did you learn this <b>antimalaria</b> medicine was the worst?					
	1. Wall painting 2. Calendar 3. Drug shop provider 4. Health care staff	5. Medicine package 6. Leaflet (flyer) 7. Newspaper 8. Posters	9. Radio 10. Family members. Specify _____ 11. Neighbour	12. Other community members. Specify _____ 13. Fellow workers 14. Through training course	15. Through barazas 16. TV 17. No one else (Myself) 96. Other (specify) _____	
35.	If you had a choice, which western <b>antimalaria</b> medicine would you select <u>first</u> for this child's malaria? _____ Why? _____					
36.	If you had a choice, which western <b>antimalaria</b> medicines would you select <u>last</u> for this child's malaria? _____ Why? _____					
37.	Could you have independently decided to start this child on a different western <b>antimalaria</b> medicine or would you have required permission?					
	1. Yes, can start independently		0. No, would require permission			
38.	Who makes the final decision about which western <b>antimalaria</b> medicine your child can be started on?					
	<b>HEALTH PROFESSIONAL:</b> 1. Doctor 2. Pharmacist 3. Nurse 96. Other (specify) _____		<b>OTHER (RELATION TO CAREGIVER):</b> 4. Spouse 5. Father 6. Mother 7. Grandmother 8. In-Law 9. Sibling 10. Neighbour		11. Drug shop personnel 12. Traditional healer 13. No one else (Myself) 97. Other (specify) _____	
39.	Which western <b>antimalaria</b> medicine does the government recommend for children child 5 years and under? ( <b>CIRCLE FROM LIST BELOW or PICTURES</b> )					
	Amodiaquine	Artesunate	Clindamycin	Isoniazid	Pyrimethamine	Sulfalene
	Arteether	Atovaquone	Dapsone	Lumefantrine	Pyronaridine	Sulfamethoxazole
	Arteflene	Cloroquine	Dihydroartemisinin	Mefloquine	Quinidine	Sulfamethoxyprazine
	Artemether	Chlorproguanil	Doxycycline	Naphthoquine	Quinine	Sulfametopyrazine
	Artemisinin	Cinchonidine	Halofantrine	Piperaquine	Rifampicin	Tafenoquine
	Artemotil	Cinchonine	Hydroxychloroquine	Proguanil	Sulfadoxine	Tetracycline
	Other: _____					
40.	<b>IF CAREGIVER IS AWARE THE GOVERNMENT RECOMMENDS "ACT", ASK:</b>		Where did you learn about what the government recommends?			
	1. Wall painting 2. Calendar 3. Drug shop provider 4. Health care staff	5. Medicine package 6. Leaflet (flyer) 7. Newspaper 8. Posters	9. Radio 10. Family members. Specify _____ 11. Neighbour	12. Other community members. Specify _____ 13. Fellow workers 14. Through training course	15. Through barazas 16. TV 17. No one else (Myself) 96. Other (specify) _____	
41.	In your opinion, how effective are the government recommended <b>antimalaria</b> medicines "ACT" compare to your "best" choice ( <b>REFER TO Q.31</b> )?					
	1. Less effective 2. Same effectiveness		3. More effective 90. Don't know		95. Caregiver selected "ACT" as best <b>antimalaria</b> medicine	

42.	<b>IF CAREGIVER KNOWS THAT THE GOVERNMENT RECOMMENDS "ACT" (FROM Q.40), BUT THIS WAS NOT THE <u>VERY FIRST</u> antiMALARIA MEDICINE USED (REFER TO Q.27) IN THIS CHILD, ASK:</b> Why did you not use "ACT" as the very <u>first</u> antimalaria medicine in this child?				
	1. Fever was not serious, waiting for fever to get worse before seeking treatment 2. Usually first wait and see if fever will go away	3. No money to buy "ACT" 4. No transportation to buy "ACT" 5. The place to obtain "ACT" was too far away	6. No one in the household had time to obtain "ACT" 7. Did not know where to go to get "ACT"	8. "ACT" not available at drug shop 9. "ACT" not available at health facility 10. Fever went away 11. No "ACT" at home	12. No drug shop open 13. No health facility open 14. Not recommended by _____ 96. Other (specify): _____
43.	<b>IF CAREGIVER IS NOT AWARE THAT THE GOVERNMENT RECOMMENDS "ACT" AS FIRST LINE, THEN TELL CAREGIVER:</b> The government now recommends "ACT" as first line.				
44.	<b>REFER TO Q.35, DETERMINE IF "ACT" WAS SELECTED AS CAREGIVER'S FIRST CHOICE?</b>				
	1. Yes	0. No. <b>IF NO, ASK:</b> Knowing this, would your first antimalaria medicine choice be different?			
		1. Yes	0. No		
45.	Many different factors can prevent caregivers from getting the <u>best western antimalaria medicines</u> for a child. When you think your child is ill with malaria and want to get medicine for them, is each of the following a problem or no problem for you?				
	1. Knowing where to go	Problem		No problem	
	2. Getting permission to go	Problem		No problem	
	3. Having to find/take transportation	Problem		No problem	
	4. Access to health professional (ie: doctor, nurse)	Problem		No problem	
	5. Access to female health professional	Problem		No problem	
	6. Finding time	Problem		No problem	
	7. Availability of medicine	Problem		No problem	
	8. Health facility is too far	Problem		No problem	
	9. Getting money for medicine	Problem		No problem	
	10. Can you tell me <u>two</u> other factors that might be <u>big</u> problems for you _____ _____				
46.	<b>INTERVIEWER SAY:</b> "I now want to ask you about each of the western antimalaria medicines that were given to this child".				
	<b>(DIRECTIONS TO INTERVIEWER): LIST OF ALL antiMALARIA MEDICATIONS FROM Q.27</b>	47. How long after the first symptom was this western antimalaria medicine started?			
		1. Immediately (within 6 hours) 2. Same day (within 1 day or 24 hours) 3. Next day (on the 2 <sup>nd</sup> day or beyond 24 hours)	4. More than 2 days later (after 48 hours) 96. Other (specify) _____		
		1. Immediately (within 6 hours) 2. Same day (within 1 day or 24 hours) 3. Next day (on the 2 <sup>nd</sup> day or beyond 24 hours)	4. More than 2 days later (after 48 hours) 96. Other (specify) _____		
		1. Immediately (within 6 hours) 2. Same day (within 1 day or 24 hours) 3. Next day (on the 2 <sup>nd</sup> day or beyond 24 hours)	4. More than 2 days later (after 48 hours) 96. Other (specify) _____		
		1. Immediately (within 6 hours) 2. Same day (within 1 day or 24 hours) 3. Next day (on the 2 <sup>nd</sup> day or beyond 24 hours)	4. More than 2 days later (after 48 hours) 96. Other (specify) _____		
		1. Immediately (within 6 hours) 2. Same day (within 1 day or 24 hours) 3. Next day (on the 2 <sup>nd</sup> day or beyond 24 hours)	4. More than 2 days later (after 48 hours) 96. Other (specify) _____		
		1. Immediately (within 6 hours) 2. Same day (within 1 day or 24 hours) 3. Next day (on the 2 <sup>nd</sup> day or beyond 24 hours)	4. More than 2 days later (after 48 hours) 96. Other (specify) _____		

48.	Can you tell me how soon after noticing fever in a child 5 years and under is it best to start a western <b>antimalaria</b> medicine?				
	1. Immediately (within 6 hours) 2. Same day (within 1 day or 24 hours) 3. Next day (on the 2 <sup>nd</sup> day or beyond 24 hours)		4. More than 2 days later (after 48 hours) 96. Other (specify) _____		
49.	Where did you learn when it is best to start a western <b>antimalaria</b> medicine?				
	1. Wall painting 2. Calendar 3. Drug shop provider 4. Health care staff	5. Medicine package 6. Leaflet (flyer) 7. Newspaper 8. Posters	9. Radio 10. Family members. Specify _____ 11. Neighbour	12. Other community members. Specify _____ 13. Fellow workers 14. Through training course	15. Through barazas 16. TV 17. No one else (Myself) 96. Other (specify) _____
50.	In your opinion, how long is too long to start a western <b>antimalaria</b> medicine in a child 5 years and under?				
	1. Immediately (within 6 hours) 2. Same day (within 1 day or 24 hours) 3. Next day (2 days or beyond 24 hours)		4. More than 2 days later (after 48 hours) 96. Other (specify) _____		
51.	According to the government recommendations, when should a western <b>antimalaria</b> medicine be started after noticing the fever in children 5 years and under?				
	1. Immediately (within 6 hours) 2. Within 24 hours (1 day) 3. Within 48 hours (2 days)		4. After 2 days 5. Anytime 90. Don't Know	96. Other (specify) _____	
52.	<b>IF THE CAREGIVER PROVIDES AN ANSWER FOR Q.51, ASK:</b> "Where have you seen or heard what the government recommends?"				
	1. Wall painting 2. Calendar 3. Drug shop provider 4. Health care staff	5. Medicine package 6. Leaflet (flyer) 7. Newspaper 8. Posters	9. Radio 10. Family members. Specify _____ 11. Neighbour	12. Other community members. Specify _____ 13. Fellow workers 14. Through training course	15. Through barazas 16. TV 17. No one else (Myself) 96. Other (specify) _____
53.	<b>IF FOR Q.51 THE CAREGIVER DOES NOT KNOW or GETS THE ANSWER WRONG, GIVE THE FOLLOWING INFORMATION:</b>  "The government recommends starting a western <b>antimalaria</b> medicine within 24 hours (or 1 day) of first noticing fever in children 5 years and under".				
54.	In your opinion, is the government recommended start time of 24 hours for western <b>antimalaria</b> medicines realistic in children 5 years and under?				
	1. Yes		1. No. Why? _____		
55.	Can you independently decide <u>when</u> to start a western <b>antimalaria</b> medicine for your child or would you have required permission?				
	1. Yes		0. No		
56.	Who makes the final decision <u>when</u> western <b>antimalaria</b> medicine can be started in your child?				
	<b>HEALTH PROFESSIONAL:</b> 1. Doctor 2. Pharmacist 3. Nurse 96. Other (specify) _____		<b>OTHER (RELATION TO CAREGIVER):</b> 4. Spouse 5. Father 6. Mother		7. Grandmother 8. In-Law 9. Sibling 10. Neighbour 11. Drug shop personnel 12. Traditional healer 13. No one else (Myself) 97. Other (specify) _____
57.	When do you think it is best to stop a western <b>antimalaria</b> medicine in children 5 years and under?				
	1. Within 1 day (24 hours) 1. Within 2 days (48 hours) 2. After 2 days later (after 48 hours)	2. If child has bad reaction 3. Took all the medicines that was recommended	4. Gave what I had 5. Symptoms got better 6. When there is no improvement	96. Other (specify) _____	
58.	Can you independently decide when to stop a western <b>antimalaria</b> medicine for your child?				
	1. Yes		0. No		

LIST OF ALL antiMALARIA MEDICINES GIVEN TO THIS CHILD FROM Q.27	59. INTERVIEWER SAY: "I now want to ask you <u>when you stopped</u> each of the western <b>antimalaria</b> medicine that was given to this child, starting with the first <b>antimalaria</b> medicine"					
	60. Can you tell me when this <b>antimalaria</b> medicine was stopped? (SELECT ANSWER FROM LIST BELOW)	61. Why was this <b>antimalaria</b> medicine stopped? (SELECT ANSWER FROM LIST BELOW)	62. Who decided when to stop this <b>antimalaria</b> medicine? (SELECT ANSWER FROM LIST BELOW)			63. Did this child use all of this <b>antimalaria</b> medicine that was obtained? (SELECT ANSWER FROM LIST BELOW)
			HEALTH PROFESSIONAL:	OTHER (RELATION TO CAREGIVE)		
	2. Immediately (within 6 hours) 3. Within 1 day (24 hours) 4. Next day (within 2 days/48 hours) 5. More than 2 days (after 48 hours) 96. Other (Specify) _____	1. Finished medication 2. Saved some for later 3. Was instructed 96. Other (Specify) _____	1. Doctor 2. Pharmacist 3. Nurse 96. Other, (specify) _____	4. Spouse 5. Father 6. Mother 7. Grandmother 8. In-Law 9. Sibling	10. Neighbour 11. Drug shop personnel 12. Traditional Healer 13. No one else (Myself) 97. Other (specify) _____	1. Yes 0. No.  <b>IF NO, ASK:</b> Why did the child not finish all the medicines? 1. Child had bad reaction 2. Took the amount that was recommended 3. Symptoms got better 4. When there is no improvement 96. Other (Specify) _____
1.					Yes; No	
2.					Yes; No	
3.					Yes; No	
4.					Yes; No	
5.					Yes; No	
6.					Yes; No	

LIST OF ALL MALARIA MEDICINES DETERMINED FROM Q27	Interviewer say: "I now want to ask you about <u>how you obtained</u> each of the western <b>antimalaria</b> medicine that was given to this child"						
	64. Where was each of the medicines obtained from?  (SELECT ANSWER FROM LIST BELOW)		65. Who obtained the medicines? (SELECT ANSWER FROM LIST BELOW)	66. What was the <u>one main</u> reason for obtaining this medicine from this source?  (SELECT ANSWER FROM LIST BELOW)		67. FOR EACH, IF A PUBLIC HEALTH FACILITY WAS NOT USED AS A SOURCE, ASK: Why?  (SELECT ANSWER FROM LIST BELOW)	
	1. Community Health Worker 2. Drug shop 3. Public Health Facility 4. Neighbour 5. Pharmacy 6. Homestock, <b>IF HOMESTOCK, ASK</b> original source	7. Grocery store 8. Kiosk 9. Mobile providers 10. Private clinics/hospitals 11. Petrol stations 12. Traditional healer 96. Other (specify)	1. Myself 2. Spouse 3. Father 4. Mother 5. Grandmother 6. In-Law 7. Sibling 8. Neighbour 96. Other (specify) _____	1. Close by/easy to reach 2. Reputation for quality treatment 3. No service cost 4. Availability for inexpensive medicine 5. Provides credit for purchases 6. Fast Service	7. Friendly Service 8. Felt illness was uncomplicated 9. Source equipped to handle severe illnesses 10. Qualified Health Professional 96. Other (specify): _____	1. Far/not easy to reach 2. Reputation for poor quality treatment 3. Expensive service 4. Expensive medicine 5. No credit 6. Slow Service 7. Unfriendly Service 8. Felt illness was uncomplicated	9. No time to go 10. No transportation 11. Closed 12. Had medicines at home 13. No one available to take child 14. Advised to not go by _____ 96. Other (specify): _____
68.	If you had a choice where would you go to obtain a western <b>antimalaria</b> medicine for this child? (CIRCLE ALL THAT APPLY)						
	1. Community Health Worker 2. Drug shop 3. Public Health Facility 4. Neighbour	5. Pharmacy 6. Homestock 7. Grocery store	8. Kiosk 9. Mobile providers 10. Private clinics/hospitals	11. Petrol stations 12. Traditional healer 96. Other (specify) _____			

69.	Where can "ACT" be obtained in your community? <b>(CIRCLE ALL THAT APPLY)</b>					
	1. Community Health Worker 2. Drug shop 3. Public Health Facility 4. Neighbour	5. Pharmacy 6. Homestock 7. Grocery store 8. Kiosk	9. Mobile providers 10. Private clinics/hospitals 11. Petrol stations 12. Traditional healer	90. Don't know 96. Other (specify) _____		
70.	Where have you seen or heard information where "ACT" can be obtained?					
	1. Wall painting 2. Calendar 3. Drug shop provider 4. Health care staff	5. Medicine package 6. Leaflet (flyer) 7. Newspaper 8. Posters	9. Radio 10. Family members. Specify _____ 11. Neighbour	12. Other community members. Specify _____ 13. Fellow workers 14. Through training course	15. Through barazas 16. TV 17. No one else (Myself) 96. Other (specify) _____	
71.	Would you say "ACT" are easy to find in your community at any time when the need arises?					
	1. Yes		0. No			
<b>INTERVIEWER SAY:</b> "I now want to ask you about <u>how</u> each of the western <b>antimalaria</b> medicine given to this child was <u>obtained</u> ".						
<b>LIST OF ALL MALARIA MEDICINES DETERMINED FROM Q27</b>		72. REFER TO Q.65, IF CAREGIVER OBTAINED THE <b>antiMALARIA</b> , ASK: Did you have money to pay for this medicine?				
		1. Yes		0. No		
		IF YES, ASK: Where would that money would have come from?				
			1. Spouse 2. Father 3. Mother	4. Grandmother 5. In-Law 6. Sister	7. Brother 8. Neighbour	9. Drug shop personnel 10. Traditional Healer
	Yes;	No				
	Yes;	No				
	Yes;	No				
	Yes;	No				
	Yes;	No				
73.	Are "ACT" available in your community affordable for you? <b>(CIRCLE ALL THAT APPLY)</b>					
	1. Yes		0. No			
74.	If you could obtain "ACT" from a shop for your child, how much could you afford to pay? _____					
75.	Where are "ACT" available <u>for free</u> in your community? <b>(CIRCLE ALL THAT APPLY)</b>					
	1. Community Health Worker 2. Drug shop 3. Public Health Facility	4. Neighbour 5. Pharmacy 6. Homestock	7. Grocery store 8. Kiosk 9. Mobile providers 10. Private clinics/hospitals	11. Petrol stations 12. Traditional healer 90. Don't know 96. Other (specify) _____		
76.	Where can "ACT" be obtained <u>on credit</u> in your community? <b>(CIRCLE ALL THAT APPLY)</b>					
	1. Community Health Worker 2. Drug shop 3. Public Health Facility	4. Neighbour 5. Pharmacy 6. Homestock	7. Grocery store 8. Kiosk 9. Mobile providers 10. Private clinics/hospitals	11. Petrol stations 12. Traditional healer 90. Don't know 96. Other (specify) _____		
77.	In the last 6 months, have you ever kept western <b>antimalaria</b> medicines to use later just in case one of your children got malaria?					
	1. Yes		0. No			

78. What type of western <b>antimalaria</b> medicines do you keep in your house? Can I see these? <b>(RECORD DRUG NAME – BRAND AND GENERIC, EXPIRY DATES)</b>			79. Did you purchase or borrow the western <b>antimalaria</b> medicines you keep in your house?		80. <b>ASK: WHERE antiMALARIA MEDICINES WERE PURCHASED or BORROWED FROM (SELECT FROM TABLE: LIST OF PROVIDERS BELOW).</b>
Brand Name	Generic Name	Expiry date (Month/Year)	Purchase	Borrow	
			Purchase	Borrow	
			Purchase	Borrow	
			Purchase	Borrow	
			Purchase	Borrow	
			Purchase	Borrow	
			Purchase	Borrow	
			Purchase	Borrow	
			Purchase	Borrow	
			Purchase	Borrow	
			Purchase	Borrow	
			Purchase	Borrow	
<b>TABLE: LIST OF PROVIDERS</b>					
1. Community Health Worker 2. Drug shop 3. Public Health Facility		4. Neighbour 5. Pharmacy 6. Homestock		7. Grocery store 8. Kiosk 9. Mobile providers	
				10. Private clinics/hospitals 11. Petrol stations 12. Traditional healer	
81.	What is the difference between good and poor quality western <b>antimalaria</b> medicines? _____				
82.	Where did you learn about <u>poor</u> quality western <b>antimalaria</b> medicines?				
	1. Wall painting 2. Calendar 3. Drug shop provider 4. Health care staff	5. Medicine package 6. Leaflet (flyer) 7. Newspaper 8. Posters	9. Radio 10. Family members. Specify _____ 11. Neighbour	12. Other community members. Specify _____ 13. Fellow workers 14. Through training course	15. Through barazas 16. TV 17. No one else (Myself) 96. Other (specify) _____
83.	<b>IF FAKE AND EXPIRED ARE NOT MENTIONED, STATE THE FOLLOWING:</b> "The government considers fake and expired western <b>antimalaria</b> medicines to be of poor quality".				
84.	Have you ever been sold a <u>poor quality</u> western <b>antimalaria</b> medicine?				
	1. Yes		1. No		
85.	Do you know which outlets in your community have the <u>best</u> quality "ACT"? <b>(CIRCLE ALL THAT APPLY)</b>				
	1. Community Health Worker 2. Drug shop 3. Public Health Facility	4. Neighbour 5. Pharmacy 6. Homestock	7. Grocery store 8. Kiosk 9. Mobile providers 10. Private clinics/hospitals	11. Petrol stations 12. Traditional healer 90. Don't know 96. Other (specify) _____	
86.	Do you know which outlets in your community have the <u>worst</u> "ACT"? <b>(CIRCLE ALL THAT APPLY)</b>				
	1. Community Health Worker 2. Drug shop 3. Public Health Facility	4. Neighbour 5. Pharmacy 6. Homestock	7. Grocery store 8. Kiosk 9. Mobile providers 10. Private clinics/hospitals	11. Petrol stations 12. Traditional healer 90. Don't know 96. Other (specify) _____	



87. For each of the provider(s) you mentioned, I now want to ask you what information you received from each of these individuals. I will list different information, please state "yes or no" if you received this information  
**(DIRECTION TO INTERVIEWER): GO THROUGH EACH PROVIDER LISTED IN Q.80**

	Community Health Worker	Drug shop	Public Health Facility	Neighbour	Pharmacy	Homestock	Grocery Store	Kiosk	Mobile Provider	Private clinics / Hospitals	Petrol Stations	Traditional Healer	Other (specify)
a. How malaria is caused	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N
b. How malaria can be prevented	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N
c. What is the best western antimalaria medicine for children	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N
d. How to administer the medicine	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N
e. The importance of completing the full course of medicine	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N
f. What to do if the child vomits the medicine	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N
g. What to do if the child does not get better	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N
h. What foods to give the child with the medicine	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N
i. Storing the medicine at home	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N
j. Did they offer you any other advice?	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N
k. What additional information would you have liked to have received?													
l. Compared to doctor/nurse, how knowledgeable was this provider?	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N
m. Where do you think this provider learned how to treat malaria?	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N

88. When you obtain a western antimalaria medicine for your child, what kind of additional information would you like to receive from the person who is giving you the medicine?  
 \_\_\_\_\_  
 \_\_\_\_\_

89.	If you had a choice to go anywhere to obtain advice on how to treat malaria in your children 5 years of age and under, who would you go to <u>first</u> ?			
	<b>HEALTH PROFESSIONAL:</b> 1. Doctor 2. Pharmacist 3. Nurse 96. Other (specify) _____	<b>OTHER (RELATION TO CAREGIVER):</b> 4. Spouse 5. Father 6. Mother	7. Grandmother 8. In-Law 9. Sibling	10. Neighbour 11. Drug shop personnel 12. Traditional healer
	13. No one else (Myself) 97. Other (specify) _____			
90.	<b>IF SPOUSE NOT MENTIONED ASK:</b> You have not mentioned your spouse, why? _____			
91.	Many different factors can prevent caregivers from getting <u>advice</u> for treating malaria in children 5 years and under. When you think your child is ill with malaria and want to get the best advice, is each of the following a problem or no problem for you?			
	a. Knowing where to go	Problem		No problem
	b. Getting permission to go	Problem		No problem
	c. Having to take transportation	Problem		No problem
	d. Access to health professional (ie: doctor, nurse)	Problem		No problem
	e. Access to female health professional	Problem		No problem
	f. Finding time	Problem		No problem
	g. Resources within the community	Problem		No problem
	h. Can you tell me <u>two</u> other factors that might be a <u>big</u> problem for you: _____ _____			

**PART 3. FOR CHILDREN WHO DID NOT RECEIVE ANY ANTIMALARIA MEDICINES (May Have Received Other Western Medicines)**

**From Q. 27**

92. Even though your child did not receive any antimalarial medicines, can you tell me the names of all western **antimalaria** medicines available in your community? **(DIRECTION TO INTERVIEWER: USE LIST OF antiMALARIA MEDICINES FROM TABEL BELOW or PICTURES**


**TABLE: WESTERN antiMALARIA MEDICINE LIST**

Amodiaquine	Artesunate	Clindamycin	Isoniazid	Pyrimethamine	Sulfalene
Arteether	Atovaquone	Dapsone	Lumefantrine	Pyronaridine	Sulfamethoxazole
Arteflene	Cloroquine	Dihydroartemisinin	Mefloquine	Quinidine	Sulfamethoxyprazine
Artemether	Chlorproguanil	Doxycycline	Naphthoquine	Quinine	Sulfametopyrazine
Artemisinin	Cinchonidine	Halofantrine	Piperazine	Rifampicin	Tafenoquine
Artemotil	Cinchonine	Hydroxychloroquine	Proguanil	Sulfadoxine	Tetracycline

Other: \_\_\_\_\_

93. Of the western **antimalaria** medicines you have mentioned, which do you think cures malaria the best in children 5 years of age and under?  
\_\_\_\_\_

94. Where did you learn this **antimalaria** medicine was the best?

1. Wall painting 2. Calendar 3. Drug shop provider 4. Health care staff	5. Medicine package 6. Leaflet (flyer) 7. Newspaper 8. Posters	9. Radio 10. Family members. Specify _____ 11. Neighbour	12. Other community members. Specify _____ 13. Fellow workers 14. Through training course	15. Through barazas 16. TV 17. No one else (Myself) 18. Other (specify) _____
--	---	--	---	--

95. Of the western **antimalaria** medicines you have mentioned, which one cures malaria the worst in children 5 years and under?  
\_\_\_\_\_

96. Where did you learn this **antimalaria** medicine was the worst?

1. Wall painting 2. Calendar 3. Drug shop provider 4. Health care staff	5. Medicine package 6. Leaflet (flyer) 7. Newspaper 8. Posters	9. Radio 10. Family members. Specify _____ 11. Neighbour	12. Other community members. Specify _____ 13. Fellow workers 14. Through training course	15. Through barazas 16. TV 17. No one else (Myself) 18. Other (specify) _____
--	---	--	---	--

97. If you had a choice, which of these western **antimalaria** medicines would you select first for this child's malaria?  
\_\_\_\_\_ Why? \_\_\_\_\_

98. If you had a choice, which of these western **antimalaria** medicines would you select last for this child's malaria?  
\_\_\_\_\_ Why? \_\_\_\_\_

99. Can you independently decide to start this child on a western **antimalaria** medicine or would you require permission?

- |        |       |
|--------|-------|
| 1. Yes | 0. No |
|--------|-------|

100.	Who makes the decision about <u>which</u> western <b>antimalaria</b> medicine your child can be <u>started</u> on?					
	<b>HEALTH PROFESSIONAL:</b> 1. Doctor 2. Pharmacist 3. Nurse 96. Other (specify) _____		<b>OTHER (RELATION TO CAREGIVER):</b> 4. Spouse 5. Father 6. Mother		7. Grandmother 8. In-Law 9. Sibling 10. Neighbour	11. Drug shop personnel 12. Traditional healer 13. No one else (Myself) 97. Other (specify) _____
101.	What western <b>antimalaria</b> medicines does the government recommend for children 5 years and under? ( <b>CIRCLE ALL THAT APPLY</b> )					
	Amodiaquine	Artesunate	Clindamycin	Isoniazid	Pyrimethamine	Sulfalene
	Arteether	Atovaquone	Dapsone	Lumefantrine	Pyronaridine	Sulfamethoxazole
	Arteflene	Cloroquine	Dihydroartemisinin	Mefloquine	Quinidine	Sulfamethoxyprazine
	Artemether	Chlorproguanil	Doxycycline	Naphthoquine	Quinine	Sulfametopyrazine
	Artemisinin	Cinchonidine	Halofantrine	Piperaquine	Rifampicin	Tafenoquine
	Artemotil	Cinchonine	Hydroxychloroquine	Proguanil	Sulfadoxine	Tetracycline
	Other: _____					
102.	<b>IF CAREGIVER IS AWARE THAT THE GOVERNMENT RECOMMENDS "ACT", Ask:</b>			Where did you learn about what the government recommends?		
	1. Wall painting 2. Calendar 3. Drug shop provider 4. Health care staff	5. Medicine package 6. Leaflet (flyer) 7. Newspaper 8. Posters	9. Radio 10. Family members. Specify _____ 11. Neighbour	12. Other community members. Specify _____ 13. Fellow workers 14. Through training course	15. Through barazas 16. TV 17. No one else (Myself) 96. Other (specify) _____	
103.	<b>IF CAREGIVER IS NOT AWARE THAT THE GOVERNMENT RECOMMENDS "ACT" AS FIRST LINE, THEN TELL CAREGIVER:</b> "The government now recommends "ACT" as first line"					
104.	In your opinion, how effective are "ACT", compare to your <u>best</u> choice ( <b>REFER TO Q.93</b> )?					
	1. Less effective 2. Same effectiveness		3. More effective 90. Don't know		95. Caregiver selected "ACT" as best antimalaria	
105.	<b>REFER TO Q.97, WAS "ACT" SELECTED AS CAREGIVER'S <u>FIRST</u> CHOICE WESTERN antiMALARIA MEDICINE?</b>					
	1. Yes,		0. No, <b>IF NO, ASK:</b> Knowing this, would your <u>first</u> antimalaria choice be different?			
			1. Yes		0. No	
106.	Can you tell me how soon after noticing fever in a child 5 years and under is it best to <u>start</u> a western <b>antimalaria</b> medicine?					
	1. Immediately (within 6 hours) 2. Same day (within 1 day or 24 hours) 3. Next day (on the 2 <sup>nd</sup> day or beyond 24 hours)			4. More than 2 days later (after 48 hours) 96. Other (specify) _____		
107.	Where did you learn when it is best to start a western <b>antimalaria</b> medicine?					
	1. Wall painting 2. Calendar 3. Drug shop provider 4. Health care staff	5. Medicine package 6. Leaflet (flyer) 7. Newspaper 8. Posters	9. Radio 10. Family members. Specify _____ 11. Neighbour	12. Other community members. Specify _____ 13. Fellow workers 14. Through training course	15. Through barazas 16. TV 17. No one else (Myself) 96. Other (specify) _____	
108.	In your opinion, how long is too long to start a western <b>antimalaria</b> medicine in a child 5 years and under?					
	1. Immediately (within 6 hours) 2. Same day (within 1 day or 24 hours) 3. Next day (2 days or beyond 24 hours)			4. More than 2 days later (after 48 hours) 96. Other (specify) _____		
109.	According to the government recommendations, when should a western <b>antimalaria</b> medicine be started after noticing a fever in children 5 years and under?					
	1. Immediately (within 6 hours) 2. Same day (within 1 day or 24 hours) 3. Next day (on the 2 <sup>nd</sup> day or beyond 24 hours)			4. More than 2 days later (after 48 hours) 96. Other (specify) _____		

110.	<b>IF THE CAREGIVER VOLUNTEERS AN ANSWER FOR Q.109, ASK:</b> "Where have you seen or heard what the government recommends"?				
	1. Wall painting 2. Calendar 3. Drug shop provider 4. Health care staff	5. Medicine package 6. Leaflet (flyer) 7. Newspaper 8. Posters	9. Radio 10. Family members. Specify _____ 11. Neighbour	12. Community members. Specify _____ 13. Fellow workers 14. Through training course	15. Through barazas 16. TV 17. No one else (Myself) 96. Other (specify) _____
111.	<b>IF THE CAREGIVER DOES NOT KNOW WHAT THE GOVERNMENT RECOMMENDS or GETS THE ANSWER IN Q.109 WRONG, GIVE THE FOLLOWING INFORMATION:</b> "The government recommends starting an <b>antimalaria</b> medicine within 24 hours (or 1 day) of first noticing fever in children 5 years and under."				
112.	In your opinion, is the government recommended start time of 24 hours for western <b>antimalaria</b> medicines realistic in children 5 years and under?				
	1. Yes		0. No, Why? _____		
113.	Can you independently decide <u>when to start</u> a western <b>antimalaria</b> medicine for this child or would you require permission?				
	1. Yes		0. No		
114.	Who makes the final decision <u>when</u> western <b>antimalaria</b> medicine can be <u>started</u> in your child?				
	<b>HEALTH PROFESSIONAL:</b> 1. Doctor 2. Pharmacist 3. Nurse 96. Other (specify) _____	<b>OTHER (RELATION TO CAREGIVER):</b> 4. Spouse 5. Father 6. Mother	7. Grandmother 8. In-Law 9. Sibling 10. Neighbour	11. Drug shop personnel 12. Traditional healer 13. No one else (Myself) 97. Other (specify) _____	
115.	When do you think it is best to stop a western <b>antimalaria</b> medicine in children 5 years and under?				
	1. Within 1 day (24 hours) 2. Within 2 days (48 hours) 3. After 2 days later (after 48 hours)	4. If child has bad reaction 5. Took the amount that was recommended	6. Gave what I had 7. Symptoms got better	8. When there is no improvement 96. Other (specify) _____	
116.	If a western <b>antimalaria</b> medicine is started in this child, who makes the final decision about when to stop the medicine?				
	<b>HEALTH PROFESSIONAL:</b> 1. Doctor 2. Pharmacist 3. Nurse 96. Other (specify) _____	<b>OTHER (RELATION TO CAREGIVER):</b> 4. Spouse 5. Father 6. Mother	7. Grandmother 8. In-Law 9. Sibling 10. Neighbour	11. Drug shop personnel 12. Traditional healer 13. No one else (Myself) 97. Other (specify) _____	
117.	Can you independently decide when to stop a western <b>antimalaria</b> medicine for this child if one was started?				
	1. Yes		0. No		
118.	Where do you normally obtain western <b>antimalaria</b> medicines for this child?				
	1. Community Health Worker 2. Drug shop 3. Public Health Facility	4. Neighbour 5. Pharmacy 6. Homestock	7. Grocery store 8. Kiosk 9. Mobile providers 10. Private clinics/hospitals	11. Petrol stations 12. Traditional healer 90. Don't know 96. Other (specify) _____	
119.	What is the <u>one main</u> reason for obtaining western <b>antimalaria</b> medicines from this source?				
	1. Close by/easy to reach 2. Reputation for quality treatment 3. No service cost	4. Availability for inexpensive medicine 5. Provides credit for purchases 6. Fast Service	7. Friendly Service 8. Felt illness was uncomplicated	9. Source equipped to handle severe illness 10. Qualified Health Professional 96. Other (specify): _____	
120.	<b>IF A PUBLIC HEALTH FACILITY IS NOT STATED IN Q.118 FOR OBTAINING A WESTERN ANTIMALARIA MEDICINE, THEN ASK why? (CIRCLE ALL THAT APPLY)</b>				
	1. Far/not easy to reach 2. Reputation for poor quality treatment 3. Expensive service	4. Expensive medicine 5. No credit 6. Slow service 7. Unfriendly Service	8. Felt illness was uncomplicated 9. No time to go 10. No transportation Closed 11. Had medicines at home	12. No one available to take child 13. Advised to not go by _____ 96. Other (specify): _____	




121.	Who normally obtains western <b>antimalaria</b> medicines for this child? <b>(CIRCLE ALL THAT APPLY)</b>				
	1. Myself 2. Spouse 3. Father	4. Mother 5. Grandmother	6. In-Law 7. Sibling	8. Neighbour 96. Other (specify) _____	
122.	If you had a choice where would you go to obtain a western <b>antimalaria</b> medicine for this child? <b>(CIRCLE ALL THAT APPLY)</b>				
	1. Community Health Worker 2. Drug shop 3. Public Health Facility	4. Neighbour 5. Pharmacy 6. Homestock	7. Grocery store 8. Kiosk 9. Mobile providers 10. Private clinics/hospitals	11. Petrol stations 12. Traditional healer 96. Other (specify) _____	
123.	Where can "ACT" be obtained in your community? <b>(CIRCLE ALL THAT APPLY)</b>				
	1. Community Health Worker 2. Drug shop 3. Public Health Facility	4. Neighbour 5. Pharmacy 6. Homestock	7. Grocery store 8. Kiosk 9. Mobile providers 10. Private clinics/hospitals	11. Petrol stations 12. Traditional healer 96. Other (specify) _____	
124.	Where have you seen or heard information where "ACT" can be obtained?				
	1. Wall painting 2. Calendar 3. Drug shop provider 4. Health care staff	5. Medicine package 6. Leaflet (flyer) 7. Newspaper 8. Posters	9. Radio 10. Family members. Specify _____ 11. Neighbour	12. Other community members. Specify _____ 13. Fellow workers 14. Through training course	15. Through barazas 16. TV 17. No one else (Myself) 96. Other (specify) _____
125.	Would you say "ACT" are easy to find in your community at any time when the need arises?				
	1. Yes		0. No		
126.	In the last 6 months, have you ever kept western <b>antimalaria</b> medicines to use later just in case one of your children got malaria?				
	1. Yes		0. No		
127.	What type of western <b>antimalaria</b> medicines do you keep in your house? Can I see these? <b>(RECORD DRUG NAME – BRAND AND GENERIC, EXPIRY DATES)</b>			128. Did you purchase or borrow the western <b>antimalaria</b> medicines you keep in your house?	129. <b>ASK WHERE FROM, SELECT FROM TABLE: LIST OF PROVIDERS</b>
	Brand Name	Generic Name	Expiry date (Month/Year)	Purchase	Borrow
				Purchase	Borrow
				Purchase	Borrow
				Purchase	Borrow
				Purchase	Borrow
				Purchase	Borrow
				Purchase	Borrow
				Purchase	Borrow
				Purchase	Borrow
				Purchase	Borrow
				Purchase	Borrow
<b>TABLE: LIST OF PROVIDERS</b>					
	1. Community Health Worker 2. Drug shop 3. Public Health Facility	4. Neighbour 5. Pharmacy 6. Homestock	7. Grocery store 8. Kiosk 9. Mobile providers	10. Private clinics/hospitals 11. Petrol stations 12. Traditional healer	
130.	If you were to obtain a western <b>antimalaria</b> medicine where would the money have to come from? <b>(CIRCLE ALL THAT APPLY)</b>				
	1. Myself 2. Spouse 3. Father	4. Mother 5. Grandmother 6. In-Law	7. Sibling 8. Neighbour 9. Drug shop personnel	10. Traditional healer 96. Other (specify) _____	
131.	Are "ACT" available in your community affordable for you?				
	1. Yes		0. No		
132.	If you could obtain "ACT" from a shop for this child, how much could you afford to pay? _____				

133.	Where are "ACT" available <u>for free</u> in your community? <b>(CIRCLE ALL THAT APPLY)</b>				
	1. Community Health Worker 2. Drug shop 3. Public Health Facility	4. Neighbour 5. Pharmacy 6. Homestock	7. Grocery store 8. Kiosk 9. Mobile providers 10. Private clinics/hospitals	11. Petrol stations 12. Traditional healer 90. Don't Know 96. Other (specify) _____	
134.	Where can "ACT" be obtained <u>on credit</u> in your community? <b>(CIRCLE ALL THAT APPLY)</b>				
	1. Community Health Worker 2. Drug shop 3. Public Health Facility	4. Neighbour 5. Pharmacy 6. Homestock	7. Grocery store 8. Kiosk 9. Mobile providers 10. Private clinics/hospitals	11. Petrol stations 12. Traditional healer 90. Don't know 96. Other (specify) _____	
135.	What is the difference between good and poor quality western <b>antimalaria</b> medicines? _____				
136.	Where did you learn about <u>poor quality</u> western <b>antimalaria</b> medicines?				
	1. Wall painting 2. Calendar 3. Drug shop provider 4. Health care staff	5. Medicine package 6. Leaflet (flyer) 7. Newspaper 8. Posters	9. Radio 10. Family members. Specify _____ 11. Neighbour	12. Other community members. Specify _____ 13. Fellow workers 14. Through training course	15. Through barazas 16. TV 17. No one else (Myself) 96. Other (specify) _____
137.	<b>IF FAKE AND EXPIRED ARE NOT MENTIONED, STATE THE FOLLOWING:</b> "The government considers fake and expired western <b>antimalaria</b> medicines to be of <u>poor</u> quality."				
138.	Have you ever been sold a poor quality western <b>antimalaria</b> medicine?				
	1. Yes		0. No		
139.	Do you know which outlets in your community have the <u>best</u> quality "ACT"? <b>(CIRCLE ALL THAT APPLY)</b>				
	1. Community Health Worker 2. Drug shop 3. Public Health Facility	4. Neighbour 5. Pharmacy 6. Homestock	7. Grocery store 8. Kiosk 9. Mobile providers 10. Private clinics/hospitals	11. Petrol stations 12. Traditional healer 90. Don't Know 96. Other (specify) _____	
140.	Do you know which outlets in your community have the <u>worst</u> "ACT"? <b>(CIRCLE ALL THAT APPLY)</b>				
	1. Community Health Worker 2. Drug shop 3. Public Health Facility	4. Neighbour 5. Pharmacy 6. Homestock	7. Grocery store 8. Kiosk 9. Mobile providers 10. Private clinics/hospitals	11. Petrol stations 12. Traditional healer 90. Don't Know 96. Other (specify) _____	
141.	Many different factors can prevent caregivers from getting the best western <b>antimalaria</b> medicines for a child. When you think your child is ill with malaria and want to get medicine for them, is each of the following a problem or no problem for you?				
	a. Knowing where to go	Problem		No problem	
	b. Getting permission to go	Problem		No problem	
	c. Having to take transportation	Problem		No problem	
	d. Access to health professional (ie: doctor, nurse)	Problem		No problem	
	e. Access to female health professional	Problem		No problem	
	f. Finding time	Problem		No problem	
	g. Availability of medicine	Problem		No problem	
	h. Health facility is too far	Problem		No problem	
	i. Getting money for medicine	Problem		No problem	
	j. Can you tell <u>two</u> other factors that might be a <u>big</u> problem _____ _____				

142.	When you obtain a western <b>antimalaria</b> medicine for your child, what kind of information would you like to receive from the person who is giving you the medicine?										
How malaria is caused	How malaria can be prevented	What is the best western malaria medicine for children under 5 years of age?	How to administer the western malaria medicine to your child at home	The importance of completing the full course of western malaria medicine	What to do if the child vomits the western malaria medicine after the medicine has been swallowed?	What to do if the child does not get better following the treatment	What foods to give the child with the western malaria medicine	How to store the western malaria medicine at home	Other, Specify _____		
143.	Compared to a doctor or nurse, how knowledgeable about treating malaria is the person where you normally go to obtain your western <b>antimalaria</b> medicines?										
	1. Less knowledge			2. Same knowledge			3. More knowledge				
144.	Where do you think this person who gives you the western <b>antimalaria</b> medicines has learned about how to treat malaria? _____										
145.	If you had a choice to go anywhere to obtain advice on how to treat malaria in this child, who would you go to <u>first</u> ?										
	<b>NON-HEALTH PROFESSIONAL:</b> 1. Nobody (Myself) 2. Spouse 3. Father			4. Mother 5. Grandmother 6. In-Law 7. Sibling			8. Neighbour 9. Drug shop personnel 10. Traditional Healer 96. Other (specify) _____			<b>HEALTH PROFESSIONAL:</b> 11. Doctor 12. Pharmacist 13. Nurse 96. Other (specify) _____	
146.	<b>IF SPOUSE NOT MENTIONED ASK:</b> You have not mentioned your spouse, why?										
147.	Many different factors can prevent caregivers from getting <u>advice</u> for treating malaria in children 5 years and under. When you think your child is ill with malaria and want to get the best advice, is each of the following a problem or no problem for you?										
	a. Knowing where to go				Problem				No problem		
	b. Getting permission to go				Problem				No problem		
	c. Having to take transportation				Problem				No problem		
	d. Access to health professional (ie: doctor, nurse)				Problem				No problem		
	e. Access to female health professional				Problem				No problem		
	f. Finding time				Problem				No problem		
	g. Resources within the community				Problem				No problem		
	h. Can you tell <u>two</u> other factors that might be a <u>big</u> problem for you: _____ _____										















**PART 4. PREVENTION QUESTIONS FOR ALL CAREGIVERS**

148.	How many mosquito nets does your household have? _____			
149.	Who slept under the mosquito nets last night? _____			
150.	Which time of the year do you use the mosquito nets?			
	1. During the dry season	2. During the rainy season	3. Throughout the year	4. Not used
151.	<b>IF THERE ARE MOSQUITO NETS, ASK TO SEE THE NETS and LIST BELOW: OBSERVE OR ASK THE BRAND(S)</b> <b>LIST: 1. Permanent™ net, 2. Brand A, 3. Brand B, 4. Brand C, 5. Brand D, 6. DK brand, 7. Pretreated net; 8. Other (specify) _____</b> 		<b>152. FOR EACH NET, OBSERVE IF ALL NETS ARE HANGING</b> 	<b>153. FOR EACH NET ASK:</b> How many months ago was the net last soaked or dipped?  ____ Months; ____ Years; Not sure
			Yes No	____ Months; ____ Years; Not sure
			Yes No	____ Months; ____ Years; Not sure
			Yes No	____ Months; ____ Years; Not sure
			Yes No	____ Months; ____ Years; Not sure
			Yes No	____ Months; ____ Years; Not sure
			Yes No	____ Months; ____ Years; Not sure
			Yes No	____ Months; ____ Years; Not sure
154.	Do any of your nets have holes in them? 			
	1. Yes	0. No		
155.	How many months ago were the interior walls of your house sprayed? ____ Months; ____ Years; Not sure			
156.	Who sprayed the walls in your house?			
	1. Government worker/program 2. Household member 3. Private Company	90. Don't know 96. Other (specify) _____		

IF YOU SUSPECT FEVER or MALARIA IN YOUR CHILD, HOW CERTAIN ARE YOU THAT:	No Certain at all		So-so Certain		Completely Certain	
157. You can recognize fever in your child when your child has fever?						
158. You can recognize malaria in your child when your child has malaria?						
159. You would know where to obtain the best advice for treating your child?						
160. You would be able to obtain the government recommended "ACT" to treat your child's malaria?						
161. You would know when to start the western <b>antimalaria</b> medicine for your child?						
162. You would know how often each day to give the western <b>antimalaria</b> medicine to your child?						
163. You would know how to give the western <b>antimalaria</b> medicine to your child?						
164. You would know if your child has recovered from malaria?						
165. You would know when to stop giving the western <b>antimalaria</b> medicine to your child?						
<p><b>(DIRECTIONS FOR INTERVIEWER): SAY TO THE CAREGIVER:</b>          "I now will ask you questions about Beliefs related to Malaria from 3 different viewpoints, starting with What do most people in this community believe, then What does your family believe, and ending with What do you personally believe. For each statement, tell me who thinks it is true and who thinks it is false."</p>	<b>What do most people in this community believe?</b>		<b>What does your family believe?</b>		<b>What do you personally believe?</b>	
166. Malaria is totally preventable.	True	False	True	False	True	False
167. It is possible to cure all children from malaria.	True	False	True	False	True	False
168. No matter what you do, some children will die from malaria.	True	False	True	False	True	False
169. Children almost never die from malaria.	True	False	True	False	True	False
170. Left untreated, most children will die from malaria.	True	False	True	False	True	False
171. Some children can be cured from malaria using only home remedies.	True	False	True	False	True	False
172. Some children can be cured from malaria using only traditional medicines.	True	False	True	False	True	False
173. It is okay to first try to treat malaria at home before going to see a doctor or a nurse.	True	False	True	False	True	False
174. It is okay to use western medicine only if traditional medicines do not work.	True	False	True	False	True	False
175. It is okay to use a traditional medicine before trying western medicines.	True	False	True	False	True	False
176. Sometimes it is okay not to use western medicines to treat malaria.	True	False	True	False	True	False
177. Traditional medicines are best for curing malaria.	True	False	True	False	True	False
178. Western medicines are always best for curing malaria.	True	False	True	False	True	False
179. It is best to start a western <b>antimalaria</b> medicine within one day after noticing fever in your child.	True	False	True	False	True	False
180. A blood test is necessary to confirm malaria before starting any treatment.	True	False	True	False	True	False
181. It is okay to stop a western <b>antimalaria</b> medicine as soon as the fever goes away.	True	False	True	False	True	False
182. It is important for your child to take all the western <b>antimalaria</b> medicines s/he has been given.	True	False	True	False	True	False

183. Government clinics are the best place to obtain western <b>antimalaria</b> medicines.	True	False	True	False	True	False
184. Most malaria is caused by mosquito bites.	True	False	True	False	True	False
185. Burning mosquito oils is best for preventing malaria.	True	False	True	False	True	False
186. What is the main reason that children die from malaria?						
What do most people in this community believe? _____ _____ _____	What does your family believe? _____ _____ _____			What do you believe? _____ _____ _____		
<b>SAY TO CAREGIVER:</b> "For the next statements tell me which medicines are the best or worst, and who thinks so"						
187. Which western <b>antimalaria</b> medicines are best and worst for curing malaria?	<b>What do most people in this community believe?</b>		<b>What does your family believe?</b>		<b>What do you personally believe?</b>	
a. Loose Tablets?	Best	Worst	Best	Worst	Best	Worst
b. Syrups?	Best	Worst	Best	Worst	Best	Worst
c. Capsules or Tablets from bottles?	Best	Worst	Best	Worst	Best	Worst
d. Medicines in packages?	Best	Worst	Best	Worst	Best	Worst
e. Powder to mix with water?	Best	Worst	Best	Worst	Best	Worst
188.	What is your top <u>two</u> preferred sources of information? How accessible is each? ( <b>SELECT FROM TABLE: LIST OF INFORMATION SOURCES</b> )					
a. PREFERENCE #1	Very Accessible		So-So Accessible		Not Accessible	
b. PREFERENCE #1	Very Accessible		So-So Accessible		Not Accessible	
<b>LIST OF INFORMATION SOURCES</b>						
1. Wall painting 2. Calendar 3. Drug shop provider 4. Health care staff	5. Medicine package 6. Leaflet (flyer) 7. Newspaper 8. Posters	9. Radio 10. Family members. Specify _____ 11. Neighbour	12. Other community members. Specify _____ 13. Fellow workers 14. Through training course	15. Through barazas 16. TV 17. No one else (Myself) 19. Other (specify) _____		

189.	What is the distance from home to the nearest public health facility?			
	1. <1/2km 2. ½ to < 1km	3. 1km – 5km 4. More than 5km	5. Can you tell me the exact distance? _____ km	
190.	What is the distance from home to the nearest drug shop (regulated)?			
	1. <1/2km 2. ½ to < 1km	3. 1km – 5km 4. More than 5km	5. Can you tell me the exact distance? _____ km	
191.	What is the distance from home to the nearest drug shop (unregulated)?			
	1. <1/2km 2. ½ to < 1km	3. 1km – 5km 4. More than 5km	5. Can you tell me the exact distance? _____ km	
192.	What is the distance from home to the nearest traditional healer?			
	1. <1/2km 2. ½ to < 1km	3. 1km – 5km 4. More than 5km	5. Can you tell me the exact distance? _____ km	
193.	In your opinion, how easy to reach are public health facilities (clinics or hospitals) in your community?			
	1. Very Easy	2. So-so	3. Very Difficult	90. Don't Know
<b>DIRECTIONS FOR INTERVIEWERS: FOR THE NEXT 12 QUESTIONS, OBSERVE AS MUCH AS YOU CAN  DO NOT ASK UNLESS YOU MUST</b>				
194.	What type of dwelling does the household live in? 			
	1. Hut 2. Independent house	3. Muzigo 4. Shared house	5. Uniport 6. Other (specify) _____	
195.	How many people usually sleep in this household? _____			
196.	How many rooms in this household are used for sleeping?  _____			
197.	What type of roof does the house have? 			
	1. Cement 2. Grass or thatch	3. Iron sheets or tin 4. Mud	5. Shingles 6. Tiles	7. No Roof 8. Other (specify)
198.	What is the main material of the floor? 			
	1. Finished floor: cement, tiles, linoleum, carpet, polished wood, or stones	2. Natural floor: earth, sand, dung, or clay	3. Rudimentary floor: wooden planks, palm, or bamboo 4. Floating house	5. Iron sheets 96. Other (specify) _____
199.	What is the main source of water for drinking in this household? 			
	1. Borehole or well 2. Bottled water	3. Brought-in (jerry can, tanker truck) 4. Piped or tap water	5. Rain water 6. Surface water (stream, river, pond, lake, dam, spring)	96. Other (specify) _____
200.	What kind of toilet facilities does this household use? 			
	1. Bucket 2. Bush/ field/ forest	3. Composting toilet 4. Flush toilet	5. Traditional pit toilet/ latrine 6. Ventilated improved pit latrine	96. Other (specify)
201.	Is this toilet shared with other households?			
	1. Yes		0. No	
202.	What types of walls are there in the house? 			
	1. Cardboard 2. Clay or mud	3. Iron sheets 4. Palm/ bamboo/ thatch/ straw	5. Wood 6. No walls	96. Other (specify)

203.	 What is the main type of fuel used by this household for cooking?					
	1. Agricultural crop 2. Charcoal 3. Coal 4. Dung	5. Electricity 6. Firewood 7. Kerosene/ paraffin	8. Natural gas/ liquid petroleum gas (LPG) 9. Solar 10. Straws/ shrubs/ grass	11. No food cooked in household 96. Other (specify) _____		
204.	 How many of the following livestock does this household have?					
	1. Chicken 2. Cow	3. Duck	4. Goat 5. Sheep			
205.	 Does this household have any of the following?					
	1. Electricity	2. Solar Power				
206.	<b>TRANSPORTATION:</b> Does this household own any of the following? (CIRCLE ALL THAT APPLIES)					
	1. Motor vehicle 2. Motorcycle	3. Bicycle 4. Canoe/ boat	5. Donkey			
207.	<b>COMMUNICATION:</b> Does this household own any of the following? (CIRCLE ALL THAT APPLIES)					
	1. Radio 2. Television	3. Mobile phone 4. Fixed phone	5. Postal address 6. Email address			
208.	<b>INFORMATION:</b> What is the household's main source of information? (CIRCLE ALL THAT APPLIES)					
	1. Radio 2. Television 3. Print Media	4. Post Mail 5. Hand Mail	6. Word of Mouth 96. Other (specify) _____			
209.	Does this household own any other land?					
	1. Yes	0. No	90. Don't Know			
210.	Does this household own the land on which the house sits?					
	1. Yes	0. No, why? <ol style="list-style-type: none"> <li>1. No, not paying rent (squatting)</li> <li>2. No, not paying rent at the consent of the owner</li> <li>3. No, pays rent</li> <li>4. Other (specify)</li> </ol>				
211.	How many acres/ hectares of land does this household own in total? _____					
212.	What is the main source of the household's livelihood?					
	1. Subsistence farming 2. Employment income	3. Business enterprise 4. Cottage industry	5. Property income 6. Family support	7. World Food Program support 96. Other (Specify) _____		
<b>(DIRECTIONS FOR INTERVIEWER): THE SUBSEQUENT QUESTIONS ARE DIRECTED TO THE CAREGIVER</b>						
213.	 Sex of caregiver					
	1. Male	2. Female				
214.	What is your age (years)? _____					
215.	What religion are you affiliated with?					
	1. Catholic 2. Protestant	3. Muslim 4. Seventh Day Adventist	96. Other (specify): _____			
216.	What tribe do you belong to?					
	1. Banyole 2. Bagwere	3. Bagisu 4. Japaghola	5. Basoga 6. Itseso	7. Baganda 8. Basamia	9. Banyankole 10. Acholi	96. Other (specify): _____

217.	Have you ever attended school?		
	1. Yes <b>IF YES, ASK:</b> What is the highest level of education you have achieved?	0. No	
	1. No education 2. Primary incomplete 3. Primary complete	4. Secondary incomplete 5. Secondary complete 6. Post Secondary (technical)	7. Post Secondary University 90. Don't know
218.	Have you done any work in the last 12 months for a wage?		
	1. Yes	0. No	
219.	Apart from your <u>own</u> housework, are you currently working for a wage?		
	1. Yes	8. No	
220.	What is your occupation? That is, what kind of work do you mainly do?		
	1. Housewife 2. House keeper 3. Peasant farmer	4. Petty trader 5. Shop keeper 6. Unskilled labourer	7. Professional 8. Unemployed 96. Other (specify)

**INTERVIEWER'S OBSERVATIONS: TO BE FILLED IN AFTER COMPLETING INTERVIEW**

RECORD FINISHING TIME \_\_\_\_\_

COMMENTS ABOUT RESPONDENT:

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COMMENTS ON SPECIFIC QUESTIONS:

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SUPERVISOR'S OBSERVATIONS:

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NAME OF THE SUPERVISOR: \_\_\_\_\_ DATE: \_\_\_\_\_