

25. How long after the fever started did you/ your family **first** receive treatment? **Please tick**

**only one.**

- (1) Same day
- (2) Next day
- (3) 2 days after the illness started
- (4) 3 or more days after the illness started
- (5) Don't know / don't remember

26. Did the person who had fever most recently have a blood test for malaria? **Please tick only**

**one.**

- (1) Yes, dipstick. → please go to **Question 27**
- (2) Yes, slide. → please go to **Question 27**
- (3) Yes, but I don't know/ remember which one. → please go to **Question 27**
- (4) No → please skip to **Question 29**
- (5) Don't know/ don't remember → please skip to **Question 29**

27. Where did you/ your family get the blood test?

- (1) Private clinic/practitioner
- (2) Village Malaria Worker/ Community Health Worker
- (3) Regional hospital
- (4) Government health center
- (5) NGO clinic or hospital
- (6) Other (specify) .....

28. What was the result of blood test? **Please tick only one.**

- (1) Negative → please skip to **Question 31**
- (2) Positive → please skip to **Question 31**
- (3) Don't know/ don't remember → please skip to **Question 31**

29. Were you/ your family diagnosed as malaria? **Please tick only one.**

- (1) Yes → please go to **Question 31**
- (2) No → please go to **Question 30**
- (3) Impossible to diagnose → please go to **Question 31**
- (4) Don't know/ don't remember → please go to **Question 31**

30. How was the fever diagnosed?

.....

31. Did you/ your family take any antimalarial drugs? **Please tick only one.**

- (1) Yes → please go to **Question 32**
- (2) No → please skip to **Question 43**
- (3) Don't know/ don't remember → please skip to **Question 44**

32. Did you/your family already have the antimalarial drugs at home? **Please tick only one.**

- (1) Yes → please go to **Question 33**
- (2) No → please skip to **Question 34**
- (3) Don't know/ don't remember → please skip to **Question 37**

33. Did you/ your family take antimalarial drugs at home **before seeking first treatment?**

**Please tick only one.**

- (1) Yes → please go to **Question 34**
- (2) No → please go to **Question 34**
- (3) Don't know → please go to **Question 34**

34. Who advised you/ your family to take antimalarial drugs? **Please tick only one.**

- (1) Traditional healer
- (2) Regional hospital staff
- (3) Government health center staff
- (4) Village Malaria Worker/ Community Health Worker
- (5) Self
- (6) Family member
- (7) Neighbor/ friend
- (8) NGO clinic or hospital
- (9) Private pharmacy
- (10) Drug seller
- (11) Other (specify) .....

(12) Don't know/ don't remember

35. Do you happen to remember which antimalarial drugs you/your family took? **Please tick all that apply.**

(1) Artemisinin

(2) Artemether

(3) Artesunate

(4) Chloroquine

(5) A+M

(6) Fansidar

(7) Mefloquine

(8) Malarine

(9) Paracetamol

(10) Primaquine

(11) Tetracycline

(12) Vitamins

(13) Other (specify) .....

(14) Don't know/ don't remember

36. Do you happen to remember how many days you continued taking the antimalarial drugs?

(1) .....days

(2) Don't know/ don't remember

37. Did health provider at first health facility you/ your family visited tell you/ your family

about following topics? **Please answer 4 items one by one.**

(1) Treatment schedule of antimalarials (1. Yes 2. No)

(2) Possible adverse events of antimalarials (1. Yes 2. No)

(3) Importance of completing full regimen of antimalarials (1. Yes 2. No)

(4) What to do if you/ your family did not get better (1. Yes 2. No)

38. Did you/ your family get better after consulting first treatment provider? **Please tick only**

**one.**

(1) Yes → please skip to **Question 44**

(2) No → please go to **Question 39**

(3) Don't know/ don't remember → please go to **Question 44**

39. Did you seek further treatment outside home? Please tick only one.

- (1) Yes → please go to Question 40
- (2) No → please skip to Question 44
- (3) Don't know/ don't remember → please skip to Question 44

40. Which health provider, outside home, did you/ your family visit as second treatment source? Please tick only one.

- (1) Traditional healer
- (2) Regional hospital staff
- (3) Government health center staff
- (4) Village Malaria Worker/ Community Health Worker
- (5) Friend/ neighbor
- (6) NGO clinic or hospital staff
- (7) Private pharmacy
- (8) Drug seller
- (9) Other (specify) .....
- (10) Don't know

**Respondents who sought treatment outside home 3 or more times → please go to Question**

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**Respondents who sought treatment outside home 1 or 2 times → please skip to Question 44**

41. Which health facility, if any, did you visit as **third** treatment source? **Please tick only one.**

- (1) Traditional healer
- (2) Regional hospital staff
- (3) Government health center staff
- (4) Village Malaria Worker/ Community Health Worker
- (5) Friend/ neighbor
- (6) NGO clinic or hospital staff
- (7) Private pharmacy
- (8) Drug seller
- (9) Other (specify) .....
- (10) Don't know

→ please skip to **Question 44**



42. Why you didn't seek treatment outside home? Please tick only one.

- (1) Did not have enough money/ too expensive
- (2) Too far
- (3) Got better soon
- (4) Other (specify) .....

→ please skip to Question 44

43. What kind of treatment did you/ your family received? Please tick all that apply.

- (1) IM injection
- (2) IV infusion
- (3) Coining
- (4) Cupping
- (5) Herbs (t'nam boran)
- (6) Liquid (t'nam boran dteuk)
- (7) Burning herbs on abdomen
- (8) Acupuncture
- (9) Other (specify) .....
- (10) Don't know/ don't remember

**Next I would like to ask you various questions about your knowledge on antimalarial drugs.**

**44. Do you happen to know about government recommended antimalarial drugs? Please tick only one.**

**(1) Yes, I can remember the name of the drugs. → please go to Question 45**

**(2) Yes, but I don't remember the name of the drugs. → please skip to Question 46**

**(3) No → please go to Question 46**

45. What is the name of the government recommended antimalarial drugs?

- (1) Artemisinin
- (2) Artemether
- (3) Artesunate
- (4) Chloroquine
- (5) A+M
- (6) Fansidar
- (7) Mefloquine
- (8) Malarine
- (9) Paracetamol
- (10) Primaquine
- (11) Tetracycline
- (12) Vitamins
- (13) Other (specify).....
- (14) Don't know/ don't remember

46. If you/ your family get malaria in the future, are you willing to use government recommended antimalarial drugs for treatment? **Please tick only one.**

- (1) Yes
- (2) No
- (3) Don't know

47. Do you think it is important to complete full regimen of antimalarial drugs? **Please tick only one.**

- (1) Yes, I cannot miss even single dose. → please skip to **Question 49**
- (2) No → please go to **Question 48**
- (3) Don't know → please skip to **Question 49**

48. Why do you think so? **Please tick all that apply.**

- (1) It doesn't matter if I don't take antimalarial drugs once or twice.
- (2) If I feel better, I can stop taking antimalarial drugs.
- (3) Health facility staff told me to stop taking antimalarial drugs, if I feel better.
- (4) Village Malaria Worker told me to stop taking antimalarial drugs, if I feel better.
- (5) I'm afraid of side effects if I take antimalarial drugs for a long time.
- (6) Other (specify) .....
- (7) Don't know

49. Have you ever heard of fake antimalarial drugs? **Please tick only one.**

- (1) Yes → please go to **Question 50**
- (2) No → please skip to **Question 53**
- (3) Don't know → please skip to **Question 53**

50. Where did you hear of **fake** antimalarial drugs? **Please tick all that apply.**

- (1) Traditional healer
- (2) Regional hospital staff
- (3) Government health center staff
- (4) Village Malaria Worker/ Community Health Worker
- (5) Friend/ neighbor
- (6) Family member
- (7) NGO clinic or hospital staff
- (8) Private pharmacy
- (9) Drug seller
- (10) Other (specify) .....
- (11) Don't know

51. Have you ever seen **fake** antimalarial drugs in your village? **Please tick only one.**

- (1) Yes → Where? .....
- (2) No
- (3) Don't know

52. If you have malaria in the future, would you take **fake** antimalarial drugs? **Please tick only**

**one.**

- (1) Yes, because it is cheaper.
- (2) Yes, because it has same quality as standard antimalarial drugs
- (3) No, because it is low quality
- (4) Don't know

53. Do you happen to know about **drug resistance**? **Drug resistance is the reduction in**

**effectiveness of antimalarial drugs in curing malaria. Please tick only one.**

- (1) Yes → please go to **Question 54**
- (2) No → please go to **Question 55**

54. Do you think **poor adherence** to antimalarial drugs can cause drug resistance? **Poor adherence means you do not take antimalarial drugs following health provider's advice or instruction written on the blister package or box of antimalarial drugs. Please tick only one.**

- (1) Yes
- (2) No
- (3) Don't know

**Next I would like to ask you various questions about treatment seeking behavior for diarrhea. Diarrhea is defined as having watery stools 3 or more times a day.**

55. If you/ your family have diarrhea, do you/ your family **usually** seek treatment outside home? **Please tick only one.**

- (1) Yes → please go to **Question 56**
- (2) No, treat at home → please skip to **Question 57**



56. Where, outside home, do you usually go to seek treatment for diarrhea? Please tick only

**one.**

- (1) Traditional healer
- (2) Regional hospital
- (3) Government health center
- (4) Village Malaria Worker/ Community Health Worker
- (5) Friend/ neighbor
- (6) NGO clinic or hospital
- (7) Private pharmacy
- (8) Drug seller
- (9) Other (specify) .....
- (10) Don't know

**Next I would like to ask you various questions about treatment-seeking behavior of your/  
your family's most recent diarrhea episode.**

**57. Who in your household most recently had diarrhea? Please tick only one.**

- (1) Yourself
- (2) Your spouse
- (3) Your child (..... years old)
- (4) Other family member (specify) .....

**58. When was the most recent diarrhea episode?**

.....**days ago**

59. During most recent diarrhea episode, did you/ your family seek treatment outside home?

**Please tick only one.**

- (1) Yes → please go to **Question 60**
- (2) No → please skip to **Question 63**
- (3) Don't know → please skip to **Question 65**

60. Where, outside home, did you **first** seek treatment? **Please tick only one.**

- (1) Traditional healer
- (2) Regional hospital
- (3) Government health center
- (4) Village Malaria Worker/Community Health Worker
- (5) Friend/ neighbor
- (6) NGO clinic or hospital
- (7) Private pharmacy
- (8) Drug seller
- (9) Other (specify) .....
- (10) Don't know

61. What are the reasons for the first provider preference? Please tick all that apply.

- (1) Quality of treatment provided
- (2) Experience of health provider
- (3) Provider is polite
- (4) Good equipment
- (5) Treatment being cheap
- (6) Provider is nearby
- (7) Other (specify) .....

62. What kind of treatment you/ your family received? Please tick all that apply.

- (1) Oral Rehydration Salt (ORS)
- (2) Antibiotics
- (3) Zinc supplementation
- (4) IV fluid
- (5) Other (specify) .....

→ please skip to Question 64.