



REPUBLIC OF ZAMBIA

THE ZAMBIA ACCESS TO ACT INITIATIVE (ZAAI) SURVEY 2009

BOOK 2B: WILLINGNESS TO PAY FOR ACT AND RDT

ENUMERATOR'S INSTRUCTIONS MANUAL

IMPLEMENTING FIRM: PALM ASSOCIATES LTD & GEO HYDRO

SECTION 11.5: WILLINGNESS-TO-PAY (WTP) BASE QUESTIONS

MALARIA TREATMENT AND DIAGNOSIS; KNOWLEDGE ATTITUDES AND PRACTICE (KAP)

INTRODUCTION

Willingness to Pay is a technique used to determine the price people would be willing and afford to pay for something or for a service if the actual price is too high or too low. Willingness to Pay promotes equal access to necessities, in this case to ACTs/Coartem (most effective treatment for malaria) and Rapid Diagnostic Tests (RDTs)-the most effective devices used to test whether or not a person has malaria.

ACTs/Coartem are available for free at government health facilities but are highly expensive at private facilities and drug shops. This survey, particularly Willingness to Pay section is trying to determine the amount people would be willing or can afford to pay for RDTs as well as for ACTs/Coartem if diagnosed with malaria. The Government through the Ministry of Health is willing to continue providing these life saving drugs to those that are tested positive for malaria at a reduced price, but on condition that people agree to pay the amount that this survey is trying to establish.

Rapid Diagnostic Tests (RDTs) as mentioned earlier are the most effective devices used to test whether or not a person has malaria. They are completely safe to use and cause no pain or discomfort, as they require only a drop of blood obtained through a finger prick. Results are ready in about 15 minutes and can be used to ensure that the sick person gets the most appropriate treatment for his/her illness and therefore has an increased chance of recovering quickly and is less likely to suffer negative long-term consequences/effects. RDTs are completely safe to use for children and adults of all ages, including children under five years old and recently born infants. The new clinical guidelines, approved by the Ministry of Health (MOH) and the National Malaria Control Center (NMCC), encourage the use of RDTs.

Testing for malaria is important not only so that those people that have malaria may be treated in the best way possible, but also so that further examinations may be carried out when a person does not test positive for malaria. In this way, RDTs can help to ensure appropriate treatment no matter what a sick person is suffering from. RDTs play an important role in diagnosing illnesses and can therefore be an important step in saving a person's life.

Artemisinin-Based Combination Therapies (ACTs) are basically Coartem. There are many ACTs but for the sake of this survey we will only concentrate on Coartem-the recommended and most effective medicine for the treatment of malaria. It is recommended by the Ministry of Health and the National Malaria Control Centre.

How to select the respondent

You are required to use the sticker of random numbers which have been provided to select the respondent. This sticker of random numbers has numbers 1 to 15 which represent the ID codes of the household members. When selecting move along the row (from left to right, then top to bottom). The first one to be selected among the eligible persons is the one to interview because he/she matches the criteria.

Selection Criteria: 1) If both the household head and the spouse are around, select either of the two. If the spouse comes first on the random number sticker, he/she qualifies for the interview. For example, there are six members in the household of which the head is given ID code 01 followed by spouse ID code 02, then ID code 03 for the oldest child to.....ID code 06 for the youngest child. The random sticker before selection will look as below

RANDOM STICKER AT THE BEGINNING:

15	06	04	07	10
14	11	03	12	13
08	02	01	05	09

Select from left to right, top to bottom. In this example, remember we are selecting between the household head (ID Code 01) and the spouse (ID Code 02). Looking at the sticker after selection below, 02 (spouse) has been selected because it comes before 01 (head).

RANDOM STICKER AFTER SELECTION:

15	06	04	07	10
14	11	03	12	13
08	02	01	05	09

What it means is this;

15 Doesn't exist
06 No

- 04 No
- 07 Doesn't exist
- 10 Doesn't exist
- 14 Doesn't exist
- 11 Doesn't exist
- 03 No
- 12 Doesn't exist
- 13 Doesn't exist
- 08 Doesn't exist
- 02 Yes, Select because he/she is eligible or matches the criteria

2) In the case where only the head or the spouse is around and available for the interview, go ahead and interview that person because he/she is alone and matches the criteria.

3) If neither the household head nor the spouse is around, randomly select among other household members a knowledgeable adult greater than 18 years old. Use the same criteria to select this eligible adult. For example, if there are 3 of such adult household members (19 years, 21 years and 25 years), the first one to be found among the 3 qualifies for the interview.

Q11.30: This question requires the interviewer to record the Identity (ID)/CODE of the randomly selected respondent in the box provided. Copy the code of the respondent from the flap, by now it is assumed everyone knows what a flap is. If selected respondent is not on the flap, then he/she is not a household member, therefore not eligible, hence the need to revisit the work.

Q11.31: Did you understand what an RDT is?

Before the questions on RDTs are administered ensure that the respondent understands what RDTs are, explain to the respondent as stated above. Then find out whether he/she understands. Record answer in the box provided.

Q11.32: True or false: RDTs are devices which can be used to test if a person has malaria?

Based on the respondent's knowledge on RDTs after that explanation, this question is trying to find out whether it is true or not that RDTs are devices which can be used to test if a person has malaria. The true or false questions are trying to test the respondent's understanding of RDTs, if he/she understands the remaining questions will be easy to administer because both the interviewer and the respondent would know what they are talking about.

Q11.33: True or false: RDTs are not useful because it takes too long to get the results?

Based on the respondent's knowledge on RDTs from the interviewer's explanation, this question is trying to find out whether it is true that RDTs are not useful because it takes long to get the results.

Q11.34: True or false: RDTs may cause harm to the person being tested?

Based on the respondent's knowledge on RDTs from the interviewer's explanation, find out whether it is true or false that RDTs may cause harm/injury to the person being tested.

Q11.35: True or false: RDTs should be used only on persons with malaria?

Based on the respondent's knowledge, this question is trying to find out whether it is true or false that RDTs should be used only on persons with malaria.

Q11.36: What is the best treatment for malaria?

Do not read out the answer categories to the respondent. Let him/her say what he/she knows is the best treatment for malaria, based on the experience and information from various sources. If the best cure given is not among the possible answer categories, record 96 and specify the name of the preferred treatment.

Q11.37: Why do you think this the best medicine for the treatment of malaria?

This question is trying to establish the reason for the answer category given in Q11.36. Why is it the best treatment for malaria. Possible answers have been provided.

Used it before: Meaning the person has tried the medicine before and it was very effective.

Heard from friend: The medicine was recommended by a friend who might have heard that it is the best treatment for malaria or have used it before.

Heard in the community: The person heard from within the neighbourhood that the medicine (e.g. that Fansidar) is the best treatment for malaria, hence considers it so.

Read about it in the news paper/magazine: If respondent read in the news paper or magazine that the said medicine was the best treatment for malaria

Affordable: It is recommended as the best medicine for the treatment of malaria because he/she can afford to purchase it. It is not expensive at the private facility and/or drug store etc.

Accessible: It is easy to get, hence recommended by respondent

Other, specify: If answer is not among the possible categories record 96 and the name in the space provided.

Q11.38: Have you heard of Coartem?

Find out if/whether the respondent has ever heard of Coartem, the recommended medicine for the treatment of malaria, also referred to as ACT. If NO go to next section.

Q11.39: Where did you first hear of Coartem?

Find out where the respondent could have possibly heard of Coartem. Several answer categories have been provided. Record the primary/main source of information only.

A Public health facility: Hospital or clinic or health post managed by Government (Ministry of Health).

A Private health facility: Hospital or clinic or health centre owned and run by individuals or private companies.

Community Health Worker: A local person trained and empowered with basic health skills by Ministry of Health to work within the community, in most cases it is on voluntary basis.

Neighborhood Health Committee: A committee formed by community health workers and other prominent persons to coordinate the health affairs of the community.

Radio/Television Program

Magazine: Read about Coartem in a books such as magazine or journal

SECTION 11.6: WILLINGNESS-TO-PAY (BID GAME)

The Bid Game is trying to establish how much the respondent would be willing to pay in order for the sick to be treated with Coartem/ACT if diagnosed with malaria.

Tell the respondent that you are going to put him/her in a scenario where 1 of the household members is sick with fever, which is suspected could be malaria. Whatever the cause of the illness, the household would want the person to be treated quickly, preferably within 24 hours. There are no government health facilities in the area but only a private clinic or a drug shop nearby. He/she will have no choice but to take the sick household member to the nearest private health facility or drug shop so that the sick person could be treated. When you arrive at the private clinic or drug store with the sick person you are told to pay for an RDT test (e.g. K5,000) and that you pay the full price (e.g. K50,000) for ACT if he/she (sick person) does not take the test. However, if the test is undertaken and the results are positive, he/she will be treated with Coartem at a reduced price. The

government through the Ministry of Health (MOH) as mentioned earlier is willing to provide life saving drugs (Coartem) at a reduced price **but only** when you pay a price for the RDT. The bidding game is therefore trying to establish the price people would be willing to pay for Coartem as well as for RDT test.

Q11.40: There is a price on the sticker at the top right corner of the page (questionnaire), it is referred to as the [ACT START PRICE].

This is the price you are required to begin the bidding game for ACT with. There are 4 randomly selected [ACT START PRICES] such as 3,000, 5,000, 7,000 and 9,000 Kwacha which are going to be used. Only one is applicable in each game.

Q11.41: Imagine that one of your adult household members has fallen ill with a fever. Would you be willing to pay [ACT START PRICE] so that this person could be treated with Coartem?

Find out if the respondent would be willing to pay the [ACT START PRICE] on the sticker in order to have the sick person treated with Coartem. For example, if the [ACT START PRICE] is 7,000 Kwacha, find out whether the respondent would be willing to pay that 7,000 Kwacha. If the respondent doesn't seem to understand the importance of using Coartem to treating malaria, remind him/her that Coartem is the most effective medicine for the treatment of malaria and is recommended by the National Malaria Control Centre in Lusaka. If answer is NO skip to Q11.48.

Q11.42: How sure are you to pay [ACT START PRICE] so that the sick person could receive Coartem?

Find out how sure the respondent is to pay K7,000 for ACT. Possible answer Categories have been provided. Like in Q11.41 K7,000 is referred to as the [ACT START PRICE]. Answer categories include;

Without any doubt (100%): If the respondent can pay K7,000 for ACT straight away without any problems or complaints

Highly likely (75%): would certainly pay but with a bit of difficult.

Would cause some problem (50%): if respondent is half way certain, would pay but with some problem like going into debt.

Would be very difficult (25%): would pay but with so much difficulties e.g. going into debt, that it would even be a problem to pay back.

Certain Rejection (0%): Cannot pay regardless of the circumstance.

There is a scale to help out in differentiating between these answer categories. Each interviewer will be provided with a copy. Show the scale to the respondent and ask him/her to show you the one which corresponds to the size of his/her certainty. The scale has got steps which correspond to the percentages (100%, 75%, 50%, 25% and 0%). For example,

if the respondent shows you step 2 (Highly likely) then you must proceed with the positive bidding for Coartem. If its step 4 (Would be very difficult), you are still required to continue with the bidding, 25% is equally a yes. Only step 5 (Certain Rejection) tells you to skip to Q11.48 if picked by respondent.

POSITIVE (+) BIDDING SECTION FOR COARTEM (ACT)

If the respondent said yes, is willing to pay K7,000 for Coartem, you **bid up** in order to find out the highest price he/she would pay for the drug. For positive bidding you add 1000 Kwacha to each bid. For example, if the [ACT START PRICE] is 7,000 Kwacha, **Bid 01 would be [ACT START PRICE (7000)] plus 1000; bid 02 would be Bid 01 plus 1000 and Bid 03 would be Bid 02 plus 1000.** To start the bidding, copy the [ACT START PRICE] from the sticker in Q11.40 and record in the box provided. Also record the amount under bid in the **"copy the actual amounts column"** so that you don't mix up the amounts.

Q11.43: Would you be willing to pay [BID XX] so that the sick person could be treated with Coartem?

BID XX is either BID 01 or BID 02 or BID 03. For instance, in the example given below. BID 01 is (K7,000 + K1,000) which is equal to K8,000 and is recorded in the "copy the actual amounts column". Therefore, the interviewer is trying to find out if the respondent would be willing to pay that K8,000 for Coartem. If "YES" he/she is willing to pay 8,000 Kwacha record "1" and continue bidding up until you get a maximum price the person could pay for ACT. If answer is "NO" skip to Q11.45.

EXAMPLE 1: Positive Bidding for ACT.

<p style="text-align: center;">↑ BID UP</p>		(11.43)	(11.44)
		Would you be <u>willing</u> to pay [BID XX] so that the sick person could be treated with Coartem?	How <u>sure</u> are you to pay [BID XX] so that the sick person could receive Coartem?
		WITHOUT ANY DOUBT (100%) 1 ▶ (11.43) NEXT BID	
		HIGHLY LIKELY (75%) 2 ▶ (11.43) NEXT BID	
BID	COPY THE ACTUAL AMOUNTS	YES 1	WOULD BE VERY DIFFICULT (25%) 4 ▶ (11.43) NEXT BID
		NO 2 ▶ (11.45)	CERTAIN REJECTION (0%) 5 ▶ (11.45)
BID 01 = [ACT START PRICE] + 1,000	8,000	Would you be willing to pay 8,000 so that the sick person could be treated with Coartem?	How sure are you to pay 8,000 so that the sick person could receive Coartem? SHOW SCALE
		1 (yes)	2 (Yes, I believe I could)
BID 02 = (BID 01 + 1,000)	9,000	Would you be willing to pay 9,000 so that the sick person could be treated with Coartem?	How sure are you to pay 9,000 so that the sick person could receive Coartem? SHOW SCALE
		1 (yes)	4 (yes, but it'll be very difficult)
BID 03 = (BID 02 + 1,000)	10,000	Would you be willing to pay 10,000 so that the sick person could be treated with	
		2 (No)	

Q11.44: How sure are you to pay [BID XX] so that the sick person could receive Coartem?

Use the scale referred to in Q11.42 to get the precise answer category. If options 1, 2, 3 or 4 is picked continue with the bidding but if answer is 5 (certain rejection) go to Q11.45.

Q11.45: Copy the highest price that the respondent would be willing to pay so that the sick person could be treated with Coartem?

This highest price becomes the [MAXIMUM ACT PRICE], for instance K9,000 in example 1. Upon finishing the positive bidding, record the [MAXIMUM ACT PRICE] in BOX # 1 as shown below. If it so happens that the [MAXIMUM ACT PRICE] is larger than 3,000 Kwacha, Mark "X" in the second box (the control box).

BOX # 1
MAXIMUM ACT PRICE (+)
ARM
9,000

> 3,000?	
CONTROL BOX	X

Q11.46: Why are you not sure to pay [MAXIMUM ACT PRICE] so that the sick person could receive Coartem?

Ask this question only if Q11.44 is (3) "*would cause some problem*" or (4) "*would be very difficult*". If the answer is (2) "*Coartem does not work*" or (3) "*prefer other means of treatment*" or (4) "*fever will go away on its own*", skip the next questions and go to Q11.50. Possible answer categories include;

Unable to pay: Household does not have any means of obtaining this money to pay for [MAXIMUM ACT PRICE] e.g. K9,000 in example 1.

Coartem does not work: Means the household has used Coartem before and it was not successful. It did not treat the malaria.

Prefer other means of treatment: Means household would want to use other medicines rather than Coartem to treat the illness, may be because it did not work to their expectation the last time it was used.

Fever will go on its own: Meaning the illness can still clear without taking any medication. Coartem is not relevant to the healing process.

Q11.47: How could you get enough money to pay [MAXIMUM ACT PRICE] so that the sick person could receive Coartem?

Here you are to find out the means by which the household could earn an income in order to pay for [MAXIMUM ACT PRICE]. Several answer categories have been provided, record only the primary/main reason. Answer categories include;

Borrow from family: Get money from any relative e.g. brother, sister, uncle or mother-in-law with the intention to pay back at a later stage.

Borrow from friends: Get money from a friend with the intention to pay back at a later stage.

Borrow from money lender: Get money from an institution/anyone who lends out money. It can be in form of a loan with or without interest.

Work extra hours: This is working for more hours than usual for instance, if a person works for 5 hours in a day, he/she decides to work for 2 more hours in order to earn an extra income. Probe to be precise.

Work extra job/piecework: If the respondent's usual job/piecework is herding cattle, but because of the pressure to have the sick member treated with Coartem, he/she decides to get an extra piecework e.g. fetching firewood for a neighbor to earn an additional income.

Sell asset(s): selling of household goods e.g. TV, Radio, Ox drawn plough, etc.

Reduce consumption: If all along the household has been having 2 meals in a day, and because of the need to have the sick person treated of malaria, they decide to reduce the number of meals to 1, to be taken around 16:00 hours.

Would try but run into big debt: meaning the household would do anything possible to find the money, which would run him/her into a big debt that it would even be very difficult to pay back.

Other, specify: Any other thing that the household may decide to do to help earn some income.

End Positive Bidding Section for ACT and go to Q11.56.

If positive bidding is conducted then the negative bidding should never be conducted, its either the positive or the negative and not both. Follow skip instructions closely.

NEGATIVE (-) BIDDING SECTION FOR COARTEM (ACT)

Note: ask negative bidding section for Coartem only if Q11.41 is NO or Q11.42 is Certain Rejection.

Q11.48: Why would you be unwilling to pay [ACT START PRICE] so that the sick person could receive Coartem?

Find out the reasons for not wanting to pay the [ACT START PRICE] so that the person could be treated with Coartem. There could be many reasons for not wanting to pay but record only the one the household considers to be the main cause. If the answer is (02) "Coartem does not work" or (03) "prefer other means of treatment" or (04) "fever will go away on its own", skip to Q11.50.

Q11.49: How could you get enough money to pay [ACT START PRICE] so that the sick person could receive Coartem?

Find out the means by which the household could earn enough money to pay for [ACT START PRICE]. Several options have been provided. Record only the most preferred way of earning an income. Refer to Q11.47.

Q11.50: Does the respondent still maintain his/her answer of lack of trust or interest in ACT?

Probe if the respondent still maintains the answer of "lack of interest" in ACT in Q11.48. Find out if he/she understands what Coartem/ACT is, its effectiveness and safety in Q11.36 and Q11.37. Basically re-explain the ACT to the respondent. If the respondent is still uninterested, End the BIDDING GAME and go to section 11.7. If he/she changed his/her mind or is now interested in paying the ACT START PRICE, then continue with the ACT negative bidding.

Q11.51:

Ask only if the respondent has changed his/her mind, he/she is now willing to pay for ACT, if Q11.50 is NO "respondent considers trying Coartem". This question requires the interviewer to record the [ACT START PRICE] in the box provided.

Q11.52: This question is divided into two parts (Q11.52A and Q11.52B). These are the two negative bidding boxes (A and B). Use box A or Q11.52A if the [ACT START PRICE] is either 9,000 or 7,000 Kwacha and box B or Q11.52B if the [ACT START PRICE] is either 5,000 or 3,000 Kwacha. Copy [ACT START PRICE] from Q11.40 and record in the appropriate box.

Q11.53: Would you be willing to pay [BID XX] so that the sick person could be treated with Coartem?

If the [ACT START PRICE] is either 9,000 or 7,000 Kwacha, use Negative Bidding Box A (Q11.52A). Subtracting 1000 Kwacha from [ACT START PRICE] to get the first bid (BID 01). For example, (BID 01 = [ACT START PRICE (7,000 Kwacha)]- 1,000 Kwacha). In other words the money to bid for in BID 01 is 6,000 Kwacha and should be recorded in the "copy the actual amount column". If answer is YES "person can pay 6,000 Kwacha", enter "1" and ask Q11.54. If answer is "No" go to next BID-BID 02 (BID 02 = BID 01 which is 6,000 - 1000). Can he/she pay 5,000 Kwacha? Continue like this until you get the Maximum price the person would be willing to pay. If answers to Q11.53 (BID 01, BID 02 and BID03) are "NO" skip to SECTION 11.7.

The same applies if the ACT START PRICE was either 5,000 or 3,000 and Bidding Box Q11.52B was used. The difference is that 500 Kwacha and not 1,000 Kwacha is subtracted from each bid.

Q11.54: How sure are you to pay [BID XX] so that the sick person could receive Coartem?

Refer to Q11.42 for description of possible responses and the scale. If answer is 01 "Without any doubt", stop the bidding and go to Q11.55 but if answer is 02 "*Highly likely*", 03 "*Would cause some problem*", 04 "*Would be very difficult*" or 05 "*Certain rejection*", then continue with the bidding by subtracting either 1,000 Kwacha (for bid box A) or 500 Kwacha (for bid box B) from the previous BID.

Q11.55: Copy the highest price that the person is willing to pay so that the sick person could be treated with Coartem?

Record the last price the person agreed to pay in the bidding game. This highest price becomes the [MAXIMUM ACT PRICE] and should be recorded in Box Number 2. If [MAXIMUM ACT PRICE] is larger than 3000 Kwacha, Mark "X" in the second box (the control box).

BOX # 2
MAXIMUM ACT PRICE (-) ARM

> 3,000	
CONTROL BOX	

End the Negative (-) Bidding Section for ACT and go to Q11.56.

RAPID DIAGNOSTIC TEST (RDT) SECTION

The difference between the ACT and RDT bidding, is that during RDT bidding ACT is also mentioned.

Q11.56: Would you allow a Rapid Diagnostic Test for malaria to be carried out on a sick person so that this person could receive Coartem at a cheaper (subsidized) price if he/she is infected with malaria?

Ensure that the respondent understands what a Rapid Diagnostic Test for malaria is. Refer to the introduction part of this manual and the paragraph on RDT at the beginning of the WTP section, (**Refer to Q11.30**). Then, find out if the respondent could allow the test to be carried out on a sick person so that he/she is treated with Coartem at a reduced price if found with malaria. If "Yes" the respondent would allow a Rapid Diagnostic Test, skip to Q11.58.

Q11.57: Why would you not allow a Rapid Diagnostic Test for malaria to be carried out on a sick person?

Here you are trying to find out the reason for not allowing a Rapid Diagnostic Test on a sick person. Possible answer categories have been provided and explained below. If answer is not among the categories record 96 and specify it. *Ask this question only if Q11.56 is NO "does not allow an RDT".*

Not safe: the test is dangerous to undertake, cause harm to a sick person.

I don't trust results: meaning results are not accurate e.g. can turn out positive when in its supposed to be negative or vice versa.

Not necessary: meaning the test is not important, does not contribute to the healing process.

Previous negative experience: the last time the test was conducted it did not work as expected or had some negative effects.

Q11.57B: Probe whether the respondent understood what an RDT is, its purpose and safety.

May be the respondent did not understand the whole purpose of performing an RDT, ensure that he/she understands it, then find out if he/she still maintains the same answer "Not allowing" an RDT test to be performed on a sick person. If answer is Yes "Still maintains his/her answer of Not Allowing an RDT test to be performed", **End Game and go to Next Section**. If person has changed his/her mind would allow an RDT test on the sick person continue with the rest of the questions. *Refer to Q11.30, Q11.31, Q11.33 and Q11.34 (the kind of responses given).*

Q1.58: Would you be willing to pay so that the sick person could be tested with a Rapid Diagnostic Test and receive Coartem at a reduced price if sick with fever?

If the person would allow a Rapid Diagnostic Test on a sick person in Q11.56 or if the person changed his/her mind to allow an RDT in Q11.57B, you are therefore required to find out if he/she would be willing to pay so that the test is carried out on a sick person. If "Yes, would pay" or "Depends on the price", skip to Q11.61.

Q11.59: Why would you not be willing to pay so that the sick person could be tested with a Rapid Diagnostic Test?

Ask only if the person would not pay in Q11.58. You are trying to determine the reason for not wanting to pay for the RDT. Answer categories have been provided and explained below, ensure that you understand them well and be able to differentiate between them.

Unable to pay: has limited sources of income or does not have anywhere to get the money to pay for the test.

Not worth it: RDT does not work, so undertaking the test is not going to make any difference.

Not reliable: not dependable because gives false results.

Not necessary: meaning the test is not important, does not contribute to the healing process.

Q11.59B: Probe whether the respondent understood what an RDT is, its purpose and safety.

Once more, find out if the respondent still maintains his/her answer "Not willing to pay" for an RDT test to be performed. Refer to Q11.57B. If answer is Yes "Still maintains his/her answer of Not Willing to pay for an RDT test to be performed", **End Game and go to Next Section**.

Q11.60: How could you get enough money to pay for the Rapid Diagnostic Test so that the sick person could receive Coartem at a lower price?

Ask only if the person has changed his/her mind, "now willing to pay for an RDT test in Q11.59B. Determine the means by which the household could obtain enough money to pay for a Rapid Diagnostic Test so that the sick person could receive Coartem at a reduced price. Several options have been provided. Record only the most preferred way. Refer to Q11.47.

POSITIVE (+) BIDDING SECTION FOR RAPID DIAGNOSTIC TEST (RDT)

Q11.61: There is a sticker on the top right corner of this question in the questionnaire; it tells you the price that you will begin with, in the bidding game for Rapid Diagnostic Test in order to find out how much the respondent would be willing to pay for an RDT to be performed on the sick person. This price will be referred to as **[RDT START PRICE]**. The four randomly selected **[RDT START PRICES]** are 1,000, 1,500, 2,000 and 2,500 Kwacha. Only one of these prices would be of use per household.

Q11.62: Copy the **[MAXIMUM ACT PRICE]** from Q11.45 (Box # 1, a Positive (+) bidding) or from Q11. 55 (Box # 2, Negative (-) bidding) and record it in Box # 3. This **[MAXIMUM ACT PRICE]** is the highest price the respondent was willing to pay for ACT during either the positive or negative bidding game.

Q11.63: You can access an adult course (24 pills) of Coartem at the price of **[MAXIMUM ACT PRICE]** if you are willing to pay **[RDT START PRICE]** for a Rapid Diagnostic Test, and that test shows that the household member is infected with malaria. Would you be willing to pay **[RDT START PRICE]** for the test?

For example, a situation where **[MAXIMUM ACT PRICE]** is K9,000 and that the **[RDT START PRICE]** is K2,000, you are required to find out if the respondent would be willing to pay K2,000 so that the sick person could be tested using an RDT test and if found with malaria can access Coartem at K9,000 only. If NO "not willing to pay K2,000", record 2 and go to Q11.73.

Q11.64: How sure are you to pay **[RDT START PRICE]** so that the sick person could receive Coartem at a price of **[MAX ACT PRICE]**?

Then find out the level of certainty of the respondent to pay K2,000 for an RDT to be conducted so that the sick person could be treated with Coartem at a price of K9,000 **[MAXIMUM ACT PRICE]**. Refer to Q11.42 for description of answer categories provided. If answer is 3 or 4 go to Q11.74 and if answer is 5 "certain Rejection go to Q11.73. Pay particular attention to skip instructions and do not forget to show scale to the respondent.

Q11.65: Would you be willing to pay [BID XX] so that the sick person could use a Rapid Diagnostic Test and, if found to be infected with malaria, could be treated with Coartem for a price of [MAX ACT PRICE]?

First copy and record the [RDT START PRICE] from Q11.61 and [MAXIMUM ACT PRICE] from Q11.62 (Box # 3) in the respective boxes. Each BID is going to add 500 Kwacha e.g. **BID 01 = [RDT START PRICE] + 500; BID 02 = BID 01 + 500 and BID 03 = BID 02 + 500.** Now, following an example where the RDT START PRICE is K2,000, you enter K2,500 in the "copy the actual amounts column" in BID 01, and if respondent would be willing to pay this K2,500, the answer to this question would be Yes meaning you record 1 and go to Q11.66. If answer is "No" stop bidding and Skip to Q11.67.

Q11.66: How sure are you to pay [BID XX] so that the sick person could receive Coartem?

Ask only if Q11.65 is Yes. Refer to Q11.42 for description of possible answers given. If answer is 05 "certain Rejection", stop bidding and skip to Q11.67. If answer is either 1 or 2 or 3 or 4 continue with the game by going back to Q11.65.

Q11.67: Record the highest price the person would be willing to pay for RDT so that the sick person could be treated with Coartem if infected with malaria.

This is the highest amount the respondent would be willing to pay in Q11.65, it will be referred to as the [MAXIMUM RDT PRICE] for RDT Positive Bidding. Record this amount in Box # 4. In the example the highest is K2,500.

PROBE FOR ACCEPTABILITY OF [ACT + RDT] BUNDLE

Record the [MAXIMUM RDT PRICE] from Q11. 67 (Box # 4) and the [MAXIMUM ACT PRICE] from Q11. 62 (Box # 3) in the appropriate boxes. You are now going to refer to the combined highest prices for ACT and RDT.

Q11.68: So you would be willing to pay [MAX ACT PRICE] for Coartem and [MAX RDT PRICE] for RDT, a total of [MAX ACT PRICE + MAX RDT PRICE] for diagnosis and treatment with Coartem?

Probe and confirm with the respondent if he/she would be willing to pay both the [MAX ACT PRICE] and the [MAX RDT PRICE] for diagnosis and treatment of malaria with Coartem. For example, [MAXIMUM ACT PRICE (K9,000)] + K2,500 for RDT, a total of K11,500. If answer is Yes " would be willing to pay K11,500", record "1" and skip to Q11.85.

Q11.69: Why would you not be able to pay the bundled [MAX ACT PRICE + MAX RDT PRICE]?

Ask only if Q11.68 is NO "not willing to pay". Find out the reason for not wanting to pay a combined price. Options of possible responses have been provided; if answer is 02 "*he/she thought you only need to pay for treatment*", skip to Q11.71. If the reason is not among the answer categories, record 96 and specify the reason.

Q11.70: What would you do to get the most effective treatment as fast as possible?

If answer is not among the options, enter 96 and specify it in the space provided. Answer categories have been described below.

Try to get Coartem at lower price at the same facility: Buy Coartem at a much cheaper price at the same health facility

Try to get Coartem at lower price at the another private facility: Buy Coartem at a much cheaper price at another private health facility

Try to get Coartem at public facility: Buy Coartem at a public health hospital/clinic

Try to get Coartem without RDT test: Buy Coartem only without conducting any RDT tests.

Try to get other antimalarial: Instead of buying Coartem at the same facility he/she chooses to buy another type of drug for the treatment of malaria.

Other, specify:

Q11.71: Would you consider paying [MAX ACT PRICE] for the whole package, which include testing and treatment with Coartem, the price you offered to pay for Coartem alone?

In the case where the respondent would not pay for both ACT and RDT, find out if he/she would be willing to pay [MAX ACT PRICE e.g. K9,000] alone but still have the sick person tested with RDT test and be treated with Coartem. If respondent would consider paying go to Q11.85.

Q11.72: Why would you not consider paying [MAX ACT PRICE], the price you offered to pay for Coartem alone, for a bundled package?

Ask only if Q11.71 is NO "would not consider paying". Then you are required to find out the reason for not considering to pay K9,000 in order to be testing and treated with the most effective and recommended medicine for malaria. Several answer categories have been provided. Record only the most effective reason. **Immediately End Positive bidding for a Bundled Package and go to Q11.85**

Administer a negative bidding for a bundled package only if the positive bidding was not administered.

Q11.73: Why would you be unwilling to pay [RDT START PRICE] so that the sick person could receive Coartem at a price of [MAX ACT PRICE]?

Ask only if Q11.63 is NO, the respondent would not be willing to pay [RDT START PRICE] or if Q11.64 is 5 "certain rejection". You are required to determine the reason for not wanting to pay [RDT SATRT PRICE (2,000)] so that the sick person could receive at 9,000 [MAX ACT PRICE] which he/she already agreed to pay. Refer to Q11.59 for the description of possible answer categories. If answer is 1 "unable to pay" skip to Q11.75.

Q11.73B: Refer to Q11.57B.

Q11.74: Why are you not sure to pay [RDT START PRICE] so that the sick person could receive Coartem at a price of [MAX ACT PRICE]?

Ask only if Q11.64 is 03 "Would cause some problem" or 04 "Would be very difficult". The respondent is not too sure whether to pay [RDT START PRICE] or not, find out the reason for not being sure. For example, reason for not being sure to pay K2,000 [RDT START PRICE] so that the sick person could be treated with Coartem at a price of K9,000. Refer to Q11.59 for the description of possible answer categories.

Q11.74B: Probe only if Q11.74 is 02, "*Not worth*", 03 "*Not reliable*" or 04 "*Not necessary*".

Find out if respondent maintains the response for Q11.74. Meanwhile ensure that the respondent understood what RDT is, its purpose and safety. Try to give further explanation on RDTs if didn't understand, then probe if he/she still maintains the previous response. Avoid cases where responses are influenced by mere misunderstanding of the explanation on RDTs. Pay particular attention to skip instructions as well.

Q11.75: How could you get enough money to pay [RDT START PRICE] so that the sick person could receive Coartem?

Determine one way by which the household would earn an income to pay RDT START PRICE e.g. K2,000 so that the sick person could receive Coartem at K9,000. Refer to Q11.47 for description of the answer categories.

Q11.76: Would you consider trying RDT if the price was less than [RDT START PRICE]?

Find out if the respondent would consider paying less than [RDT START PRICE] for the RDT test. If answer is "YES", continue with RDT negative bidding, if "NO" go to NEXT SECTION.

Q11.77: Would you be willing to pay [BID XX] so that the sick person could use a Rapid Diagnostic Test and, if found to be infected with malaria, could be treated with Coartem for a price of [MAX ACT PRICE]?

First copy and record the RDT START PRICE from Q11.61 and MAXIMUM ACT PRICE from Q11.62 (Box # 3) into respective boxes. Each BID is going to subtract 250 Kwacha

e.g. BID 01 = [RDT START PRICE] - 250, BID 02 = BID 01 - 250 and BID 03 = BID 02 - 250. If answer is NO continue bidding, and if Yes "would be willing to pay" go to next question (Q11.78). An example has been given below in an instance where RDT START PRICE is K2,000 and MAX ACT PRICE is K9,000.

Example 2: RDT Negative Bidding

RDT BID BOX: NEGATIVE (-) ARM			
BID DOWN ↓		(11.77)	(11.78)
		Would you be willing to pay [BID XX] so that the sick person could use a Rapid Diagnostic Test and, if found to be infected with malaria, could be treated with <i>Coartem</i> for a price of [MAX ACT PRICE]?	How sure are you to pay [BID XX] so that the sick person could receive <i>Coartem</i> ?
		WITHOUT ANY DOUBT (100%)	1 ► (11.79)
		HIGHLY LIKELY (75%)	2 ► (11.77) NEXT BID
		WOULD CAUSE SOME PROBLEM (50%)	3 ► (11.77) NEXT BID
		WOULD BE VERY DIFFICULT (25%)	4 ► (11.77) NEXT BID
BID	COPY THE ACTUAL AMOUNTS	YES 1	
		NO 2 ► NEXT BID	CERTAIN REJECTION (0%) 5 ► (11.77) NEXT BID
BID 01 = [RDT START PRICE] - 250	1,750	Would you be willing to pay 1,750 so that the sick person could use a Rapid Diagnostic Test and, if found to be infected with malaria, could be treated with <i>Coartem</i> for a price of 9,000?	
		2	
BID 02 = (BID 01 - 250)	1,500	Would you be willing to pay 1,500 so that the sick person could use a Rapid Diagnostic Test and, if found to be infected with malaria, could be treated with <i>Coartem</i> for a price of 9,000?	How certain are you to pay 1,500 so that the sick person could receive <i>Coartem</i> ?
		1	1
BID 03 = (BID 02 - 250)	1,250		

Note: In a case where all answers to Q11.77 were "NO" skip to SECTION 11.7

Q11.78: How sure are you to pay [BID XX] so that the sick person could receive *Coartem*?

Ask only if Q11.77 is Yes. If answer is 2, 3, 4 or 5, continue bidding by going back to Q11.77 until the respondent is sure to pay the amount in the bid. Refer to Q11.42 for description of possible answer categories.

Q11.79: Record the highest price (from Q11.77) the respondent would be willing to pay for RDT so that the sick person could be treated with *Coartem* if infected with malaria? This highest amount will be referred to as the [MAXIMUM RDT PRICE] for RDT Negative Bidding. Record it in Box # 5.

PROBE FOR ACCEPTABILITY OF [ACT + RDT] BUNDLE

Record [MAXIMUM RDT PRICE] for Q11.79 and the [MAXIMUM ACT PRICE] from Q11.62 in the respective boxes.

Q11.80: So you would be willing to pay [MAXIMUM ACT PRICE] for Coartem and [MAXIMUM RDT PRICE] for RDT, a total of [MAX ACT PRICE + MAX RDT PRICE] for diagnosis and treatment with Coartem?

Probe and confirm with the respondent if he/she would be willing to pay both the [MAX ACT PRICE] and the [MAX RDT PRICE] for diagnosis and treatment of malaria with Coartem. *Note:* this MAX RDT PRICE is from an RDT negative bidding in example 2. In the example 2 MAX RDT PRICE is K1,500 and the MAX ACT PRICE is K9,000 from the positive bidding in Q11.45. Find out if the respondent would pay a bundle of K10,500 for both the diagnosis and the treatment with Coartem.

Q11.81: Why would you not be able to pay the bundled [MAX ACT PRICE + MAX RDT PRICE]?

Determine the reason for not being able to pay for both the MAX ACT PRICE and the MAX RDT PRICE a total of K10,500. Options of possible responses have been provided. Skip to Q11.83 if answer is 2 "Thought only need to pay for treatment".

Q11.82: What would you do to get the most effective treatment as fast as possible?

Many answer categories have been provided, but record only the most preferred way of obtaining effective treatment for malaria. Refer to Q11.70 for description of answer categories.

Q11.83: Would you consider paying [MAX ACT PRICE] for the whole package, which includes testing and treatment with Coartem, the price you offered to pay for Coartem alone?

If the respondent would consider paying MAX ACT PRICE for the whole package, skip to Q11.85.

Q11.84: Why would you not consider paying [MAX ACT PRICE], the price you offered to pay for Coartem alone, for the bundled packages.

Possible answer categories have been provided, probe to be precise. See answer categories in the questionnaire. **End of RDT Negative Bidding Section**

SECOND ROUND BIDDING FOR RDT, IF [MAXIMUM ACT PRICE] IS > 3000 KWACHA

Carry out the second round bidding for RDT only if [MAXIMUM ACT PRICE] for either the Positive Bidding (Q11.45) or Negative Bidding (Q11.55) is greater than 3,000 Kwacha, or if the ACT Control Box is marked X. Remember, if the Positive Bidding Section is administered then there is no Negative Bidding for either the ACT or RDT prices.

Q 11.85: Record the [MAXIMUM ACT PRICE] from either Q11.45 or Q11.55 in the box provided.

Q11.86: Is the amount recorded in the box bigger than 3000 Kwacha?

If [MAXIMUM ACT PRICE] recorded in Q11.85 is less than 3,000 Kwacha, **End the Bidding Game and go to Q11.90, a child scenario.** If bigger than 3,000 Kwacha record the MAX RDT PRICE in Box #6

Q11.87: Now imagine that you receive more support from the government, and could be treated with Coartem for 3,000 Kwacha if found to be infected with malaria. Would you be willing to pay more, BID XX, for the RDT than what you started before, [MAXIMUM RDT PRICE]?

This is the Second Positive Round Bidding for RDT, it is also adding 500 Kwacha to each BID (e.g. BID 01, BID 02 or BID 03). The difference is that [MAXIMUM RDT PRICE] for either the positive or the negative bidding is used in place of an [RDT START PRICE] and that MAXIMUM ACT PRICE is now 3,000 Kwacha. If answer is NO, "not willing to pay more than MAX RDT PRICE", stop the bidding game and go to Q11.89.

Q11.88: How sure are you to pay [BID XX] so that the sick person could receive Coartem?

Ask only if Q11.87 is Yes. If answer category is 5 go to Q11.89 but where answer is either 1, 2, 3 or 4, continue with bidding by returning to Q11.87. Refer to Q11.42 for description of possible answers.

Q11.89: Record the highest price the respondent would be willing to pay for RDT so that the sick person could be treated with Coartem at a price of 3000 Kwacha if infected with malaria?

The amount given will be referred to as the [SECOND MAXIMUM RDT PRICE] for RDT Second Positive Bidding. Record amount in Box # 7.

Q11.90: Now imagine that it was your child who fell ill with fever/malaria. How much would you pay for your child to be treated with Coartem?

Record the amount in the box provided.

Q11.90B: Mark in the box how the amount in Q11.90 compares to the [MAX ACT PRICE] for the adult. Is it Higher, the same, lower or household does not allow ACT? This MAX ACT PRICE is either from the Positive ACT bidding or the Negative ACT bidding e.g. K9,000 in example 1 and not the [MAX ACT PRICE (K3,000)] in the second round bidding.

Q11.91: How much would you pay for your child to be diagnosed with RDT?

Record the amount in the box provided.

Q11.91B: Mark in the box how the amount in Q11.91 compares to the [MAX RDT PRICE] for the adult. Is it Higher, the same, lower or household does not allow RDT? This the MAX RDT PRICE from either the Positive or the Negative bidding for RDT and not the RDT second round bidding.

SECTION 11.7: WILLINGNESS-TO-PAY (HH MALARIA RISK PROFILE)

Previous Experience with Malaria in the Household

Note: Questions in this section refer to the previous experience relating to malaria in the households. Some of these questions may be a bit sensitive, ensure that the respondent is assured of confidentiality.

Q11.92: Has anybody in your household had malaria in the past 12 months?

The past 12 months refer to 12 months prior to the day of interview. For example, if the interview for this particular household takes place on 2nd June, 2009, the reference period will be from 2nd June, 2008 to 2nd June, 2009.

Therefore, the main aim of this question is to find out if any member of the household had malaria during the 12 months prior to the day of the interview. Pay particular attention to the description for household member. Do not include people who visited the household 10 months ago for 3 months and had a malaria episode during the visit to the village. If NO go to Q11.95.

Q11.93: In the past 12 months, how many fever/malaria episodes did your household experience that required at least basic care, such as taking drugs?

There could be other cases of fever/malaria but they cleared without taking any drugs. This question requires only those that did take drugs to cure the illness, whether hospitalized or not. Record the total number the fever/malaria episodes occurred in the household. Only those episodes that occurred on household members and not on non members.

Q11.94: Has anybody in your household had severe malaria that required urgent medical care or hospitalization in the past 12 months?

This question wishes to know if there were any critical cases of malaria which needed urgent medical care or the patient being admitted at a hospital/clinic for treatment.

Q11.95: Has anybody in your household had cerebral malaria which could lead to adverse long term consequences in one's health and life in general?

This question wishes to know if there were any cases of cerebral malaria which could lead to adverse long term consequences in one's health and life. Cerebral malaria is one which affects the intellectual part of the brain. It causes hallucinations in a sick person. Take time to explain the condition of a patient with cerebral malaria so that the respondent may understand what you are talking about. If answer is NO, skip to Q11.98. *Note: reference period is not stated but still on the household members, including those who have left or died.*

Q11.96: If the answer to Q11.95 is YES, ask for the name of the household member (s) and record ID in the boxes provided. If person not household member at the time of the interview, record "98" and if dead, record "99"

Q11.97: How long ago did this episode happen? Record duration and the corresponding unit code.

This question is referring to cerebral malaria episodes. How many days, weeks, months or years ago did it happen for each respective member that suffered the illness. Record the duration and unit codes in the appropriate boxes as shown below. Record up to 3 members.

	CASE 1	CASE 2	CASE 2
DURATION			
UNIT CODE			

Q11.98: Has your household lost any member as a result of fever/malaria?

Find out if there is any member of this household who died as a result of fever/malaria. Record '1' if 'Yes' and '2' if none died of fever/malaria and skip to 'next section'. **NOTE** *time frame not given.*

Q11.99: When did your household suffer this loss of the household member?

Ask only if Q11.98 is 'Yes'. Possible answer categories have been provided, record the answer code for the period (when the losses occurred) in the boxes provided and labeled as Loss 1, Loss 2 and Loss 3 as shown below. Start with the most recent loss.

LOSS 1

LOSS 2

LOSS 3

Q11.991: Was this person.....? Record code (s) in the box(es) starting with the most recent loss.

Find out the position of the deceased at the time he/she died. Read out the possible responses provided to the respondent for each loss recorded in Q11.96 and record CODE simultaneously in the answer boxes as below. For example, if its loss 1 in Q11.96, ensure that the response to this question is recorded in the loss 1 box.

LOSS 1

LOSS 2

LOSS 3

Household head: If the deceased was the head of this household at the time he/she died.

Child under 1 year old: If the deceased was a child below the age of 1 year at the time he/she died.

Child under 5 years old: If the deceased was a child below the age of 5 years at the time he/she died.

Child under 12 years old: If the deceased was a child below the age of 12 years at the time he/she died.

Pregnant woman: If the deceased was a woman and pregnant at the time she died.

Female 12 and ABOVE (Not Pregnant): If the deceased was a female aged 12 years or more and was not pregnant at the time she died

Male 12 and above: If the deceased was male age 12 years or more.