**Biodata and personal information**

1. Age:
2. Sex:
3. How long have you been a [Village Health Teams] volunteer?
4. How many households are in the areas served?
5. What is your highest level of education? (none/primary/secondary/tertiary/other specify)
6. How many hours in a week do you spend on [Malaria related] volunteering activities? Specify the activity
7. Have you ever suffered from Malaria yourself? (yes/no)
	1. If yes, when was the last time you suffered from malaria? (this year/last year/more than two years ago)
	2. What did you do the last time you had Malaria? (nothing/sought treatment at health facility/sought treatment from community health worker/used traditional medicines/ other specify)
	3. If you sought advice or treatment, where did you seek advice or treatment? (hospital/rural health centre/rural health post/mobile clinic/field worker/pharmacy/traditional practitioner/other-specify)
	4. What drugs did you take? (SP Fansidar/ Quinine/Coatem-ACT/Pain killers-paracetamol or aspirin or ibuprofen/traditional medicine/ other )
8. Have you ever managed a case of a child with malaria? (yes/no)
9. If yes, when was the last time you managed the malaria case in a child? (this year/last year/more than two years ago)
10. What did you do about the case?? (nothing/sought treatment at health facility/sought treatment from community health worker/used traditional medicines)
11. If you sought advice or treatment, where did you seek advice or treatment? (hospital/rural health centre/rural health post/mobile clinic/field worker/pharmacy/traditional practitioner/other-specify)
12. What drugs were used? (SP Fansidar/ Quinine/Coatem-ACT/Pain killers-paracetamol or aspirin or ibuprofen/traditional medicine/ other )

**Knowledge on Malaria**

1. Do you know the drugs that are used for Malaria Treatment? (SP Fansidar/ Quinine/Coatem-ACT/Pain killers-paracetamol or aspirin or ibuprofen/traditional medicine/ other )
2. In your opinion, what causes Malaria?
	1. mosquito bites/ eating immature sugarcane/eating cold nshima/eating other dirty food/drinking dirty water/getting soaked with rain/cold or changing weather/witchcraft/other (specify)/don’t know
3. In your opinion, who is most affected by malaria in your community? (don’t know, children/adults/pregnant women/elderly/ everyone/other specify)
4. What are the main signs and symptoms of malaria?
	1. Fever/Feeling cold/Headaches/Nausea and vomiting/diarrhoea/Dizziness /Loss of appetite /Body aches and pain in the joints/Pale eyes/Salty tasting palms/Body weakness/Refusing to eat/Other (specify)
5. Do you know the signs and symptoms of **Malaria** in children? (Yes//No)
6. If yes, list all the signs that you know (fever and chills/headaches/nausea and vomiting/general weakness and body aches/fever/fitting/difficult to wake/ vomiting everything /refusing to eat or drink /other specify )

**Severe Malaria**

1. Do you know about the danger signs of **severe malaria** in children? (yes/no) If yes, list all the signs that you know (Correct: A febrile child or a child with recent history of fever with one or more danger signs: Unconscious or Lethargic/Not able to drink or eat/Vomits everything/fitting/other- specify)
2. Are you currently involved in identifying children with **severe malaria**? (yes/no)
3. If yes, In the last 4 months (120 days), how many children in your Village have presented with signs of malaria?
4. If yes, In the last 4 months , how many children in your Village have presented with signs of **severe malaria**?
5. If yes, In the last 4 months , how many children in your Village with signs of **malaria** or **severe malaria** died?
6. If not involved, who currently identifies children with severe malaria? (parents or guardians/ other Community Health Workers / I don’t know / Other)
7. What is usually done for children who show signs of **malaria**? (immediately taken to health facility/taken to health facility if serious/treated with local or traditional medicines/taken to the Drug Shop /taken to outreach/community Health Worker/other)
8. What is usually done for children who show signs of **severe malaria**? (immediately taken to health facility/taken to health facility if deemed serious/treated with local or traditional medicines/taken to the Community Health Worker/ taken to outreach/ I don’t know /other)

**End**