

National Knowledge, Attitudes and Practices (KAP) Survey on Ebola Virus Disease in Liberia

Final Report May 2017





Suggested citation: Health Communication Capacity Collaborative, & Government of Liberia Ministry of Health. (2017). <i>National Knowledge, Attitudes and Practices (KAP) Survey on Eb Virus Disease in Liberia</i> . Baltimore: Johns Hopkins Center for Communication Programs.	
This report was made possible by the support of the American People through the United S Agency for International Development (USAID). HC3 is supported by USAID's Office of Populand Reproductive Health, Bureau for Global Health, under Cooperative Agreement #AID-O, 00058.	ulation
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ACKNOWLEDGMENTS

This report represents the collaborative efforts of the USAID-funded Health Communication Capacity Collaborative (HC3)—based at Johns Hopkins Center for Communication Programs—and the Government of Liberia's Ministry of Health (MOH). The MOH defined the goals of the KAP II survey, provided the KAP I questionnaire to inform the design of the KAP II questionnaire, provided technical assistance to the sample size calculation, gave feedback on the questionnaire, processed the national Institutional Review Board application and approval, conducted training of the data collectors, and supervised the field team during data collection. HC3 provided technical support to the design of the KAP II survey questionnaire and data collection process, uploaded the questionnaire into mobile devices, analyzed the data, and drafted the report.

From the MOH, Mr. Luke Bawo, Director of Research, and Mr. Nelson Dunbar, Coordinator of Health Information Systems, Research, and Monitoring and Evaluation, coordinated the survey design and field implementation and contributed to the report writing. The MOH Research Division headed by Mr. Luke Bawo conducted the data collection. Messrs. Mohammed Dunbar, George Jacobs, Josephus Kilikpo, Sando Fahnbulleh, and Ms. Colleen Parker provided technical input to the results and discussion section of the report. The MOH Research Technical Working Group headed by Mr. Joe S. Kerkula reviewed the survey questionnaire.

From HC3, Maria Elena Figueroa, Katrina Berg, Leah Wohlgemuth, Najmeh Modarres, and Kuor Kumoji were involved in the development of the KAP II survey. Katrina Berg, Leah Wohlgemuth, and Monica Quaqua conducted the data collectors' training and provided field team supervision during the fieldwork. Amanda Berman prepared and uploaded the electronic version of the questionnaires to be used by mobile devices; she also performed quality checks during data collection. Anna Helland provided overall in-country management and administrative support to the HC3 Liberia team. Katrina Berg cleaned the data and conducted preliminary data analysis. Bolanle Olapeju completed the data analysis and developed the first draft of the report under the technical guidance of Maria Elena Figueroa. Both of them wrote the final report. Najmeh Modarres provided comments and Kathleen Fox provided editing.

MOH and HC3 would especially like to thank all the survey participants in Liberia who shared their time, perspectives, and experiences with us. We also acknowledge the community chiefs/leaders for their reception of the study team into their communities. Finally, HC3 extends its gratitude to Hope Hempstone, Zarnaz Fouladi, Rachel Marcus, and Andrea Ferrand at USAID/Washington and to the USAID Mission in Liberia for their invaluable guidance and support. This report was made possible by the support of the American People through the United States Agency for International Development (USAID). HC3 is supported by USAID's Office of Population and Reproductive Health, Bureau for Global Health, under Cooperative Agreement #AID-OAA-A-12-00058.

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ACRONYMS AND ABBREVIATIONS

CCC Community Care Center

EA Enumeration Area
Ebola Ebola Virus Disease
ETU Ebola Treatment Unit

HC3 Health Communication Capacity Collaborative

JHU Johns Hopkins University

KAP Knowledge, Attitudes, and Practices

MOH Ministry of Health

MSF Médecins Sans Frontières

NGO Non-governmental Organization

PSU Primary Sampling Units

RMNCH Reproductive, Maternal, Newborn, and Child Health

SBCC Social and Behavior Change Communication

SSU Secondary Sampling Units
UNICEF United Nations Children's Fund

USAID United States Agency for International Development

WHO World Health Organization

EXECUTIVE SUMMARY

Background

The Health Communication Capacity Collaborative (HC3) is a five-year global project funded by USAID and implemented by the Johns Hopkins Center for Communications Programs. The HC3 Liberia project was designed to strengthen country capacity to implement state-of-the-art social and behavior change communication (SBCC) programs, including providing technical support to the Ministry of Health (MOH) for the national knowledge, attitudes, and practices (KAP II) survey conducted in 2015. The overall purpose of the KAP II survey was to assess changes related to Ebola virus disease (Ebola) since the conclusion of the KAP I survey in March 2015, including the ways in which the Ebola response influenced engagement in preventive behaviors and perceptions of health-care provision, and how they may have contributed to changes in health-seeking behaviors related to non-Ebola disease.

Methods

KAP II was a cross-sectional survey conducted in 10 counties in Liberia: Bong, Gbarpolu, Grand Bassa, Grand Cape Mount, Grand Gedeh, Lofa, Margibi, Montserrado, Nimba, and River Cess. A multi-stage cluster design was used to select the final sample and the primary sampling units (PSUs), which corresponded to the enumeration areas (EAs) as defined by the Liberia 2008 National Census. Each county was stratified into urban and rural areas and probability proportional to size was used to select Eas. In each selected EA, simple random sampling of household rosters from the national census was used to select 30 households. Survey respondents were women and men (ages 18–49 or 18–64 years, respectively) who were the head of the household and who had lived in the selected area for the past year. The total combined sample size to be reached was 1927—1289 women and 638 men.

The primary survey questionnaire, which was administered to both men and women, included the following modules: respondent's background, treatment-seeking behaviors for Ebola, preventive practices during Ebola, awareness and knowledge of Ebola, attitudes towards Ebola survivors, Ebola risk perceptions and beliefs, Ebola program exposure, and social capital. The women's questionnaire included an additional module on current treatment-seeking patterns, because women are the primary caregivers in Liberia.

Key Findings

Key findings for each of the survey's specific objectives include the following:

- 1. Measure changes in knowledge, attitudes, and behaviors over time
 - Knowledge of Ebola transmission and symptoms remained high across KAP surveys:
 - A majority of KAP I (79%) and KAP II (81%) respondents knew at least one key mode of Ebola transmission.
 - Almost all of KAP I (96%) and KAP II (90%) respondents knew at least one key symptom of Ebola.
 - Attitudes towards Ebola survivors remained positive across KAP surveys:
 - Over half of KAP I (59%) and KAP II (61%) respondents stated they would buy fresh vegetables from an Ebola survivor.
 - Over half of KAP I (53%) and KAP II (60%) respondents did not believe that school children who were Ebola survivors would put other students at risk of infection.

- Most of KAP I (90%) and KAP II (80%) respondents stated they would welcome back neighbors who were Ebola survivors.
- Engagement in Ebola prevention practices remained high in KAP I and KAP II:
 - Almost all of KAP I (97%) and KAP II (89%) respondents stated that they were taking action to avoid being infected by Ebola.
 - The most common prevention practices cited by KAP II respondents at the time of the survey included: always washing hands (73%), avoiding shaking hands (39%), and avoiding eating bushmeat (24%).
- 2. Measure exposure to the Ebola response, and its effect on preventive behaviors, confidence in being able to prevent another outbreak, trust toward the formal health-care system, and perceived risk
 - Respondents were exposed to or recalled an average of seven Ebola response activities/messages (median was also seven), from a total of 14.
 - Overall, 45% of respondents had high exposure (recall of more than seven activities/messages).
 - Exposure/recall was significantly higher in men compared to women: 60% and 37% of men and women, respectively, had high exposure (p<0.001).
 - Exposure/recall was significantly higher in urban areas compared to rural areas: 52% and 38%, respectively (p<0.001).
 - Exposure/recall to Ebola response activities was positively correlated with number of prevention practices reported by KAP II respondents (correlation coefficient: 0.18; p<0.001).
 - Exposure/recall was positively correlated with confidence in being able to prevent another outbreak within the household (correlation coefficient: 0.19; p<0.001).
 - Exposure to Ebola response activities was negatively related to perceived risk of Ebola:
 71% of respondents with high exposure/recall reported no/low risk of Ebola compared to (66%) of those with low exposure (p<0.001).
- 3. Measure collective efficacy in the household and the community and perceived efficacy of the government to prevent another Ebola outbreak
 - KAP II respondents had a higher perceived efficacy to prevent another Ebola outbreak within
 the household compared to their perceived efficacy of their communities or government to
 prevent another Ebola outbreak:
 - Over half of KAP II respondents (57%) were extremely confident that they could protect themselves and their families from Ebola in the future.
 - About two-fifths (39%) of KAP II respondents were extremely confident that their village/community could control the spread of Ebola in the event of another outbreak in the future.
 - Two-fifths (40%) of KAP II respondents were extremely confident that the Government of Liberia could prevent a future outbreak of Ebola.
- 4. Describe current health service utilization practices, perceptions of the health system, and concerns about accessing health care due to the Ebola outbreak
 - Health service utilization was higher for birth deliveries than for treatment of childhood fevers.
 - o In 20% of the sample households, either the female respondent or other woman living in the household had given birth within the 12-month period preceding the survey. Of

- these births, 71% were delivered in a clinic or health facility and 73% were assisted by a nurse or trained midwife.
- About half (53%) of women with a child less than five years of age in their household reported that the child had had a fever within the last six months prior to the survey. Among children with severe fever, only 41% were taken to a clinic or health facility, while 46% were given palliative care at home.
- Women rated the attributes of doctors and health facilities highly (perceptions about the
 health system) and said they preferred to seek care from a doctor or health facility first for
 common reproductive, maternal, newborn, and child health needs. The attributes explored
 in the KAP II survey included: providing prompt service, being respectful, resolving illnesses,
 showing care/concern, ensuring privacy, and providing care as needed. The results varied
 across the different providers:
 - Women, in general, ranked all health providers highly across all attributes, with average scores ranging from 3.4 (traditional healer ensuring privacy) to 4.4 (community health workers providing prompt service).
 - Women ranked health facilities higher than community health workers, drug stores, and traditional healers in *resolving illnesses* and *showing care/concern*; they also ranked health facilities higher in *providing care as needed* and *ensuring privacy* except when compared with drug stores, which women ranked similarly.
 - Traditional healers were ranked the lowest on providing care as needed and ensuring privacy.
 - About 80% of women stated that they would first seek care from a doctor or health facility if their child under five had a fever (75%), measles (85%), diarrhea (77%), or cold/fast breathing/cough (81%).
 - Almost all women stated they would see a doctor or health facility first for services related to pregnancy care (91%), childbirth (89%), and sexually transmitted infections (92%).
- 5. Measure sustained engagement in preventive behaviors, such as handwashing, that may continue to limit the spread of other infectious diseases
 - The majority of respondents who reported practicing at least one prevention behavior at the time of the Ebola crisis also reported sustained practice of this behavior during the time of the KAP II survey.
 - Almost all (93%) of KAP II respondents reported taking at least one action to prevent Ebola during the Ebola crisis and 89% of all respondents reported taking any prevention action during the time of the KAP II survey.
 - The majority (90%) of the 93% who reported taking at least one action to prevent Ebola during the Ebola crisis also reported taking action during the time of the KAP II survey.
 This represents 83% of the total sample.
 - Specific prevention practices reported by KAP II respondents included handwashing, not shaking hands, and avoiding bushmeat and burials.
 - Almost three-quarters of all respondents indicated they had practiced handwashing during Ebola crisis (74%) or said they were doing this practice currently (73%). The majority (79%) of respondents who reported handwashing during the Ebola crisis (the 74% above) also reported handwashing at the time of the KAP II survey. This suggests the practice has continued and is high.
 - o About half of all respondents reported not shaking hands during the Ebola crisis (54%) or

- said they were avoiding this practice currently (39%). Only 53% of respondents who reported not shaking hands during the Ebola crisis (the 54% above) also reported not shaking hands at the time of the KAP II survey. This represents 28% of the sample and suggests the practice has declined.
- O About a quarter of all respondents reported avoiding bushmeat during the Ebola crisis (29%) or said they were avoiding bushmeat currently (24%). Only 57% of respondents who reported avoiding bushmeat during the Ebola crisis (the 29% above) also reported avoiding bushmeat at the time of the KAP II survey. This represents 17% of the total sample and suggests the practice has declined.
- A minority of all respondents reported they did not attend burials during the Ebola crisis (12%) or said they did not attend burials at the time of the survey (20%). Only 57% of respondents who reported they did not attend burials during the Ebola crisis (the 12% above) also reported they did not attend burials at the time of the KAP II survey. This suggests that the practice has decreased among the few who did this behavior during the crisis, but others now follow the practice.
- 6. Explore knowledge and attitudes towards vaccines, in general; potential Ebola vaccine trials; and potential vaccination uptake
 - Women had mostly positive attitudes towards vaccines, in general, and knew of the major childhood immunization campaigns in Liberia.
 - o About three-quarters (76%) of all women stated that vaccines are good for children.
 - About half (53%) of all women stated that vaccines prevent illness, and a third (33%) said vaccines keep children healthy.
 - A negligible number (1% or less) of women said that vaccines either do not work, are hard to get, are expensive, spread Ebola, spread illnesses or are not safe.
 - Overall exposure to national immunization campaigns was high. Most of the women surveyed reported that they heard of the National Polio Campaign (88%) or the measles campaign (81%).
 - Almost all mothers of children under five who had heard of the immunization campaigns indicated that their children were vaccinated during the polio campaign (95%) or the measles campaign (96%).
- 7. Assess attitudes toward survivors in order to improve survivor reintegration into local communities
 - Respondents were aware of survivors being free of Ebola:
 - More than half (55%) of all respondents were aware of the certificates given to Ebola survivors to indicate that they were Ebola-free.
 - Most (81%) respondents believed that people could be treated for Ebola.
 - A composite score to assess favorable attitudes toward survivors was created based on
 opinions about 11 statements regarding Ebola survivors. The overall Ebola survivor attitude
 score ranged from 11 (less favorable) to 55 (most favorable) with a mean and median of 36.
 - Overall, 47% of respondents had a positive survivor attitude score (score higher than 36).
 - Positive attitudes toward Ebola survivors were significantly higher in men (59%) compared to women (41%) (p<0.001).
- 8. Assess community social capital regarding infectious disease outbreaks
 - Social capital among communities was assessed based on respondents' level of agreement

with 11 statements on community togetherness, leadership and ability to solve problems. The social capital score ranged from 11 (low social capital) to 55 (highest social capital) with a mean of 44 and median of 45.

- Overall, 50% of respondents indicated high social capital in their community (score greater than 45).
- The social capital score was higher among men (54%) compared to women (47%) (p<0.001).
- The social capital score was higher among rural (62%) compared to urban respondents (35%) (p<0.001).

INTRODUCTION

The 2014–2015 Ebola Virus Disease (Ebola) outbreak in West Africa was the largest in history, affecting primarily Liberia, Sierra Leone, and Guinea. As of May 2016, 28,616 confirmed, probable, or suspected cases and 11,310 deaths had been reported in the three countries. Almost 40% of all cases and 43% of all deaths occurred in Liberia alone (World Health Organization [WHO], 2016). Throughout the epidemic, Liberia also reported 374 cases of Ebola and 188 deaths among health workers (WHO, 2015).

Person-to-person transmission of the Ebola virus occurs through direct contact with the body fluids of an infected person or the body of a patient who has died of the disease. This placed health-care workers, community members, and others working on the Ebola response at high risk. Burial ceremonies in which family and friends had direct contact with the deceased played a significant role in the transmission of the virus. Prevention of person-to-person transmission relies on strict compliance with biosafety guidelines (WHO, 2014b) to ensure no contact with an infected person's body fluids and tissues—appropriate laboratory practices, infection control precautions, barrier nursing procedures, use of personal protection equipment by health workers handling patients, disinfection of contaminated objects, and safe burials.

The Ebola outbreak was the first in West Africa, and caused substantial fear, anxiety, and panic (Umeora, Emma-Echiegu, Umeora, & Ajayi, 2014). The Government of Liberia formally declared the Ebola outbreak an epidemic in March 2014, and the Ministry of Health (MOH) formed and directed a collaborative effort with numerous international organizations, national non-governmental organizations (NGOs), and civil society organizations to provide emergency health services as well as to develop a national response strategy to disseminate appropriate Ebola-related messages.

Emergency health facilities—or Ebola treatment units (ETUs) and Community Care Centers (CCCs)—were constructed to assist in the triage of suspected patients. International organizations, such as Médecins Sans Frontières (MSF), supported and took over the management of numerous clinics already in place. Mobile laboratories increased both timeliness and use of diagnostics to start care faster. Community-based teams of contact tracers were deployed to locate people who may have interacted with Ebola patients, in order to initiate testing and treatment of those contacts. Call centers were set up for people to ask Ebola-related questions and to arrange for the deployment of the burial teams.

Structural interventions were complemented by a national response effort that centered on social mobilization to educate the public about protecting their families and preventing the spread of Ebola. Public health messages—on the cause of Ebola, how to recognize signs and symptoms, how to prevent transmission, where to go if you suspect someone has Ebola, who to call if you need a safe burial team to come to bury a family member, and how to care for the sick—were promoted through mass media channels, such as radio spots, and community-based interactions, including church groups and community meetings with local leaders. After three additional flare-ups following the first declaration in May 2015, WHO finally declared Liberia Ebola free on June 9, 2016.

As Liberia rebuilds its health system and prepares for potential future emergencies, it is crucial to understand the factors that led to a decrease in Ebola cases and the low prevalence of Ebola in some areas. It is also imperative to assess the effectiveness of the national Ebola response in order to glean relevant insights in relation to emergency preparedness and response. This includes exploring the role of social and behavior change communication (SBCC), social mobilization, and community engagement in improving knowledge, attitudes, and prevention behavior relevant to Ebola (HC3, 2017). Such information is crucial for preparing Liberia for future Ebola outbreaks and other non-Ebola emergencies.

Overall Objective

The MOH, in collaboration with the Health Communication Capacity Collaborative (HC3) Project based at the Johns Hopkins Center for Communication Programs, conducted the KAP II survey to measure changes in Ebola-related knowledge, attitudes, and behaviors; to measure stigma towards survivors; to assess current health-seeking behaviors; and to evaluate the role of the national response in the control and eradication of Ebola in Liberia. The results of this survey will be used to assist the Government of Liberia transition their health-care delivery system in the post-epidemic restoration period and to inform national emergency strategies to address future infectious disease outbreaks.

Specific Objectives

In particular, the specific objectives of the survey were to:

- 1. Measure changes in knowledge, attitudes, and behaviors over time
- Measure exposure to the Ebola response and its effect on preventive behaviors, confidence in being able to prevent another outbreak, trust toward the formal health-care system, and perceived risk
- 3. Measure collective efficacy in the household and the community and perceived efficacy of the government to prevent another outbreak
- 4. Describe current health service utilization practices, perceptions of the health system, and concerns about accessing health care due to the Ebola outbreak
- 5. Measure sustained engagement in preventive behaviors, such as handwashing, that may continue to limit the spread of other infectious diseases
- 6. Explore knowledge and attitudes toward vaccines, in general; potential Ebola vaccine trials; and potential vaccination uptake
- 7. Assess attitudes toward survivors in order to improve survivor reintegration into local communities
- 8. Assess community social capital regarding infectious disease outbreaks

METHODS

KAP II was a cross-sectional survey conducted in 10 counties in Liberia—Bong, Gbarpolu, Grand Bassa, Grand Cape Mount, Grand Gedeh, Lofa, Margibi, Montserrado, Nimba, and River Cess—between August and September 2015. The counties were selected based on their inclusion in the KAP I study, which was completed in March 2015. MOH designed and implemented the KAP II survey with HC3's technical assistance.

Survey Instrument

In order to inform the development of the KAP II survey questionnaire, the MOH provided HC3 with the questionnaire used for the KAP I. The KAP II survey was prepared by HC3 and shared with MOH for additional feedback. The KAP II survey questionnaire included eight modules for both men and women: respondent's background, treatment seeking behaviors for Ebola, preventive practices during Ebola, awareness and knowledge of Ebola, attitudes towards Ebola survivors, Ebola risk perceptions, Ebola program exposure, and social cohesion. In addition, the women's questionnaire included a module on treatment-seeking patterns, because women are usually the primary caregivers in Liberia.

Sample Population

In order to explore health-seeking behaviors at the household level, the survey included women ages 18–49 years who had children less than five years of age. To explore Ebola-related preventive behaviors, men ages 18–64 years were also included in the survey sample. Both men and women were asked questions regarding their Ebola-related knowledge, attitudes, and behaviors in order to assess changes since the first KAP survey.

Sample Size Calculation

To assess use of health-care services, the women's sample size was estimated using the proportion of women who sought care for children under five with fever (Liberia Demographic and Health Survey, 2013). The sample was also powered to identify differences in Ebola prevention behavior between high and low exposure to the Ebola response communication activities. The alpha level was set at 0.05 and the power was set at 80%. Due to the cluster sampling design, a design effect of 1.5 was included to correct for correlations that may exist at the community level. Using these parameters and a 10% non-response rate, the required sample size to be reached was estimated to be 1289 women and 638 men.

Inclusion Criteria

Inclusion criteria for female participants included the following characteristics:

- Female heads of household or their female designee
- Between the age of 18 and 49 years
- Lived in the selected area for the past year
- Provided informed consent

Inclusion criteria for male participants included the following characteristics:

- Male heads of household or their designee
- Between the age of 18 and 64 years (same age range as the KAP I study)
- Lived in the selected area for the past year
- Provided informed consent

Sampling Design

A multi-stage cluster design was used to select the survey sample. The primary sampling units (PSUs) corresponded to the enumeration areas (EAs), as defined by the 2008 National Census. Each county was stratified into urban and rural areas and probability proportional to size was used to select EAs. A total of 65 EAs were selected across all 10 counties. In each selected EA, simple random sampling was used to select 30 households using the household rosters from the national census. Household listings for the randomly selected EAs were provided by the 2008 National Census database. In the event that an EA could not be located or accessed due to poor road conditions, it was replaced by another randomly selected EA.

Data Collection

The data collection team consisted of 15 survey interviewers, five team leaders, two study coordinators, and a national coordinator. Five teams were created, each with one team leader and three enumerators. The two study coordinators supervised all survey activities and visited all five teams periodically throughout the study. The MOH and HC3 were jointly involved in the training of data collectors and supervision of field activities.

In each EA, team leaders supervised the selection of households and assigned households to each interviewer. As the sample size consisted of almost twice as many women as men, women were approached for interview at the first two selected households, and men were approached at every third selected household. At each selected household, the interviewer introduced him/herself to the head of household, or another adult if the head was not present. Interviewers used a scripted introduction to explain the survey's purpose. Upon agreement to hear more about the study, interviewers completed a household listing form to select the man or woman for the interview. Interviewers then completed the informed consent form with all eligible participants. If a household did not have an eligible or willing resident, another randomly selected household was chosen to replace it. The interviews typically lasted about 75 minutes; no interview took longer than 90 minutes. All interviews took place in the participant's home or at nearby location of their choosing.

All data was collected on Samsung T211 Galaxy Tab 3 (7.0) handheld electronic tablets that had been pre-programmed with the questionnaire. HC3 was responsible for procuring the tablets as well as uploading the electronic questionnaires onto the tablets. All interviewers completed training on the proper use of electronic tablets. Due to the remote locations of many of the EAs, team leaders also carried copies of paper questionnaires in the event tablets could not be used.

Data Management and Security

At the end of each day, team leaders recorded all completed questionnaires in tracking documents, which were then uploaded to and saved on a protected cloud-based server. Completed questionnaires were not stored on the tablets permanently. Survey data were transmitted over a secure SSL connection to the ISO 27001 certified server Ona.io, which is the industry's standard for data security (Fomin, 2008). The HC3 research team in Baltimore periodically downloaded data to monitor data quality and progress and to check for possible entry errors or other issues. The HC3 research team was also available to answer any questions or concerns that came up at the start of the data collection and worked with the field-based team to resolve them immediately.

Data Cleaning and Preparation

The men and women's questionnaires were first exported from the Ona.io server into Microsoft Excel, and then transferred into Stata. The men's dataset had a final sample size of 655 and the

women's had a final sample size of 1298. The two datasets were appended for a total of 1953 observations. While not frequent, some questionnaires were uploaded from the field multiple times. These were manually dropped from the appended dataset (n=35). Incomplete questionnaires were also excluded (n=20). Finally, questionnaires that were completed in less than 20 minutes were excluded (n=20) for a final sample size of 1878. Data cleaning and preparation for analysis was conducted by HC3.

Data Analysis

Data were exported into Excel and transferred to Stata/SE 14.0 statistical package (StataCorp, 2014) for analysis by the HC3 team. Analytical methods used include frequencies, tests of association, ttests, correlation analysis, factor analysis, and multivariate regressions.

RESULTS

In this section, results of the KAP II survey are presented under the following major headings: description of the study population, changes related to Ebola, effect of Ebola response activities, women's perceptions of health-care provision, and other health issues.

I. Description of Study Population

KAP II Demographics

In the KAP II survey, by design, about a third (34%) of respondents were male. About half of respondents were over 35 years of age (49%) and living in an urban area (53%). The majority of respondents most commonly reported being married or cohabiting (81%), employed (85%), or Christian (87%). A third (30%) of respondents indicated to have senior high level of education or more, while a similar percentage reported no formal education (34%).

Major differences between the two KAP surveys were related to sex, marital status, and education level of respondents. By design, KAP II respondents had a higher proportion of women. This larger sample of women was needed in order to understand perceptions of health-care provision that could influence health-seeking behaviors related to non-Ebola disease. Compared to KAP I respondents, KAP II respondents were more likely to be married and had lower levels of education.

Table 1: Sociodemographic characteristics of respondents across KAP surveys

	KAP I (n=1396)	KAP II (n=1878)
Characteristics	%	%
Age (years)		
18-24	14	15
25-34	32	36
35 +	54	49
Sex		
Male	59	34
Female	41	66
Marital Status		
Single/Never married	30	13
Married/Cohabiting	64	81
Separated/Divorced/Widowed	6	5
Religion		
Christian	86	87
Non-Christian	14	13
Place of Residence		
Urban	46	47
Rural	54	53
Educational Attainment		
No formal education	20	34
Elementary/Junior High (7-9)	31	36
≥Senior High (10-12)	49	30
Main Occupation		
Unemployed	13	15
Employed	87	85

Socioeconomic Status of KAP II Respondents

Asset ownership: All KAP II respondents were asked if they owned the following items in their household: electricity, generator, mobile phone, mattress, table, chair, cupboard, radio and television. The average number of assets owned by survey respondents was 3.9 with a standard deviation of 2.3.

Wealth score: All respondents were asked how often in the past 12 months they had gone without: main source of cooking fuel; clean water to drink; medicines or medical treatment, as needed; or enough food to eat. A composite score was created based on their responses, which ranged from 4 to 16. The average wealth score among respondents was 10.3, with a standard deviation of 2.9.

Table 2: Socioeconomic status of KAP II respondents

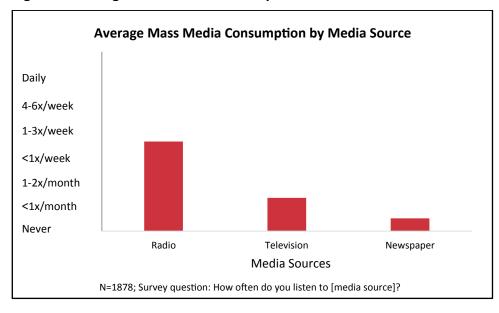
Socioeconomic Status Characteristic	KAP II (n=1878)
Asset ownership ¹ (total of nine items)	
Mean (SD) number of assets owned	3.9 (2.3)
Wealth score ² (range of 4-16)	
Mean (SD) wealth score	10.3 (2.9)

Abbreviations: SD: Standard Deviation

Mass Media Consumption

All respondents were asked how often in a week they used media sources—specifically radio, television and newspapers. As seen in Figure 1, the most commonly consumed mass media was the radio, which was listened to an average of less than once a week. Less commonly consumed mass media sources include television and newspapers, which were viewed an average of less than once a month or almost never.

Figure 1: Average mass media consumption



¹ Asset ownership included ownership of the following items: electricity, generator, mobile phone, mattress, table, chair, cupboard, radio, and television.

² Poverty score was calculated from responses to the following question: In the past 12 months, how often have you gone without: main source of cooking fuel; clean water to drink; medicines or medical treatment, as needed; or enough food to eat? A composite wealth score was created based on responses (often-1, sometimes-2, rarely-3, never-4, and do not know-0) and ranged from 4 (low wealth) to 16 (high wealth).

Sources of Drinking Water and Sanitation Resources

The most common source of drinking water used in households was reported to be the hand pump (64%) followed by surface water (12%), piped water (10%), dug wells (9%), and other drinking water sources (4%), which included mineral water. While 39% of respondents stated they had a handwashing stand in their compound, a handwashing stand was observed in the home of only 13% of respondents. Furthermore, only 9% of all households surveyed had water present at the handwashing stands; soap was seen in only 6% of all households.

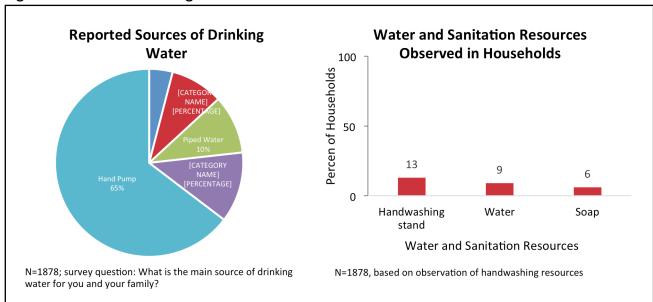


Figure 2: Sources of drinking water and sanitation resources

Sources of Health Information

The most important sources of general health information cited by respondents include radio (72%); friends, community members, or neighbors (32%); doctors, nurses, or midwives (29%); and government or county health team (24%). These sources were also most commonly mentioned by similar proportions of respondents as where they would obtain Ebola-specific information as well as information about safe funeral or burial practices.

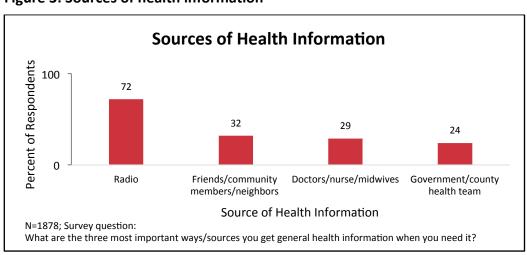


Figure 3: Sources of health information

Community Social Capital

The KAP II survey explored social capital among communities using respondent's level of agreement with statements on community togetherness (three statements), leadership (four statements), and ability to solve problems (four statements). Response options for each statement used a Likert-type scale of agreement/disagreement. For analysis purposes, a five-point scale was used with one representing strong disagreement and five strong agreement. Table 8 shows the 11 statements included in the survey and their respective mean score. The table shows that the statement, "If people in this community work together, we can find solutions to many of our problems," received the highest mean score (4.4 out of 5). Slightly lower mean scores corresponded to the following statements: "There are strong leaders in our community" (3.5) and "People in this community keep their promises to one another" (3.6).

Table 8: Community social capital statements average ratings

Community Social Capital	Mean Score Value
There are strong relationships between people in this community.	4.0
People in this community are always able to discuss problems that affect everyone.	4.0
People in this community keep their promises to one another.	3.6
Whenever our community undertakes a project, we know that we will all work hard until it is accomplished.	4.1
Whenever a community problem arises, I have a lot of confidence that we will be able to solve it.	4.1
Members of this community are able to tackle the most difficult situations because we are all committed to the same collective goals.	4.0
If people in this community work together, we can find solutions to many of our problems.	4.4
There are strong leaders in our community.	4.1
Our leaders treat all people in the community equally.	3.5
Our leaders listen to input from everyone in the community when making a decision.	3.8
Our leaders are good at resolving disagreements between people in the community.	4.0
N=1878; survey question: Please tell me if you strongly agree, somewhat agree, somewhat disagree, or strongly disagree wi [statements]. Scores ranged from of one (strongly disagree) to five (strongly agree).	th

Community social capital score

A construct of social capital was developed using the sum of responses to the 11 statements described above. This construct was used as a contextual variable for exploring the effect of the Ebola response activities, as communities with higher social capital might be better equipped to tackle Ebola. The Cronbach's alpha of reliability for this construct was 0.91. The social capital score ranged from 11 to 55, with an average of 43.6 (standard deviation of 9.9 and median of 45). For analysis purposes the social capital score was divided at the median (45). Respondents with a score above 45 were classified as having high social capital in the community; those with a score of 45 or less, as having low social capital in the community. Figure 4 shows the results in high social capital by sex and residence.

High Community Social Capital by Sex and Residence High Community Social Capital 100 62 54 *** 47 50 *** 35

N=1878, High social capital defined as a social capital score greater than 45. + p<0.1 * p<0.05 ** p<0.01

Men

Figure 4: High community social capital

Experience of Ebola in Communities

Overall

Communities were affected by varying degrees during the Ebola epidemic. In the KAP II survey, respondents were asked about their perceptions of Ebola in their communities or households, the burden of Ebola in their communities, isolation of and care seeking for people with Ebola in their communities, and the survival of Ebola patients.

Ebola burden

About 16% of respondents stated that someone in their community had Ebola during the epidemic, while 6% stated that someone in their household had Ebola in the past year (Figure 5).

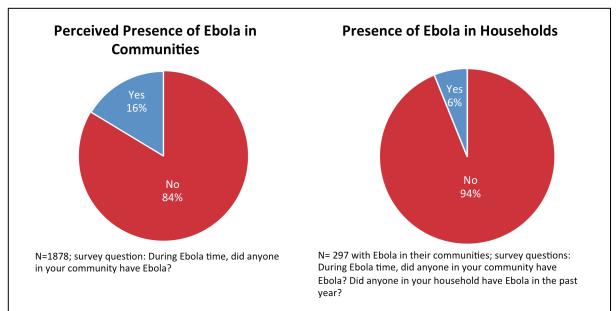


Figure 5: Presence of Ebola in communities and households

Respondents who stated Ebola affected their community were further asked to estimate how many people in their community were affected. The most common responses given included "very few" (64%), "less than half" (18%), and "more than half" (15%). Also, most (73%) respondents who stated Ebola affected their communities noted that their community members were able to isolate those infected with Ebola from other household members (Figure 6).

Perceived Isolation of Ebola Perceived Burden of Ebola in **Patients Communities** 100 100 64 Percent (%) Percent (%) 31 29 18 16 14 12 10 2 3 1 0 0 Less than More than Almost Don't know None Very few Almost More than Less than Very Few Don't Know half Everyone Half Half N=297 with Ebola in their communities; survey question: About how N=259 valid responses (excluded 38 people who did not know if people many people in your community had Ebola when it was really bad? with Ebola were isolated in their community); survey question: How

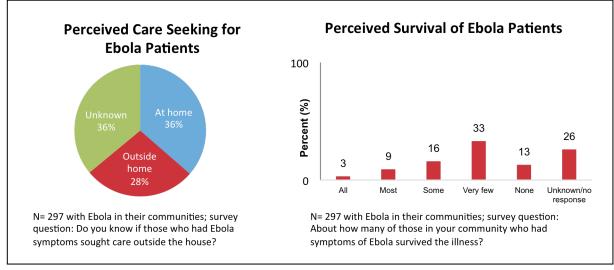
Figure 6: Perceived burden of Ebola and isolation of Ebola patients in the community

Perceptions of Ebola care and survival

Of the 297 respondents who indicated that Ebola had been in their communities, less than a third (28%) believed those with Ebola symptoms sought care outside the house. Of that third, the most common sites of care mentioned included ETUs (67%) and CCCs (26%) (Figure 7). Of those respondents who experienced Ebola in their communities, 12% believed that all or most people who had Ebola symptoms survived the infection, while 33% believed that very few of people with Ebola symptoms survived.

many [of those with Ebola] were isolated/separated?

Figure 7: Perceived care seeking and survival of Ebola patients **Perceived Care Seeking for**



Community mobilization during Ebola

About half (49%) of all respondents stated that their community mobilized groups to control and protect against Ebola. The groups most mentioned were youth groups (61%) and community task forces (56%). Specific community issues addressed by the community groups included: Ebola prevention (91%), distribution of items to prevent the spread of Ebola (63%), talking about new burial practices to prevent Ebola (57%), addressing stigma of Ebola survivors (44%), and care of Ebola orphans (34%).

II. Changes Related to Ebola

This section presents the results about changes in Ebola-related knowledge, attitudes, and practices between the KAP I and KAP II surveys.

Ebola-related Knowledge

Respondents were asked three questions related to their awareness and knowledge of Ebola transmission, signs and symptoms of Ebola, and safe care of someone with Ebola.

Knowledge of Ebola transmission

While the two surveys both asked respondents how Ebola was transmitted, the format of the question differed between the two surveys. In KAP I, respondents were asked how a person could get Ebola and the interviewer provided possible responses. In KAP II, interviewers asked a similar question, "How does a person get Ebola?", but responses were spontaneous (not read to the respondent).

More than half (56%) of KAP I respondents indicated someone could get Ebola from "the blood of an infected person"; other responses included shaking hands with an infected person (43%), touching things an infected person had touched (27%), and touching, washing, or wrapping people who had died from Ebola (16%). Compared to KAP I, significantly higher percentages of KAP II respondents (p<0.001) cited shaking the hands of an infected person (60%), touching things an infected person had touched (41%), and touching, washing, or wrapping people who had died from Ebola (37%) as ways in which Ebola could be transmitted. After disaggregating by gender, these increases persisted. However, in KAP II, a significantly lower proportion (44%) of respondents cited bodily fluids from an infected person as a method of transmission, compared to KAP I (56%). The reduction in knowledge could potentially be attributed to differences in the wording of the questions, as mentioned before, or the response options (Table 3).

Table 3: Knowledge about Ebola transmission across KAP surveys: overall and by gender

Variable	Overall		Men		Women	
How does a person get Ebola? ¹	KAP I (n=1396) %	KAP II (n=1878) %	KAP I (n=826) %	KAP II (n=631) %	KAP I (n=570) %	KAP II (n=1247) %
Blood/bodily fluids from an infected person ²	56	44***	59	50***	52	41***
Shaking the hands of an infected person	43	60***	41	66***	46	58***
Touching/washing/wrapping people who have died from Ebola	16	37***	14	38***	18	37***
Touching things an infected person has touched	27	41***	27	43***	27	39***
Having sex with someone who is infected	12	23***	11	21***	14	25***

¹ Responses were collected differently between surveys. The response options were prompted in KAP I but unprompted in KAP II.

Knowledge of at least one key mode of Ebola transmission

About 80% of respondents in both KAP surveys were able to cite at least one of the key modes of Ebola transmission. Specifically, 79% and 81% of respondents in KAP I and KAP II, respectively, cited one of the five key modes of Ebola transmission. Disaggregation by sex showed a significantly higher proportion of men in KAP II (86%), compared to KAP I (80%), who knew at least one key mode of Ebola transmission (p<0.01) (Figure 8).

² Response options in KAP I included blood, while in KAP II the option states bodily fluids. †p≤0.1; *p≤0.05; **p≤0.01; ***p≤0.001

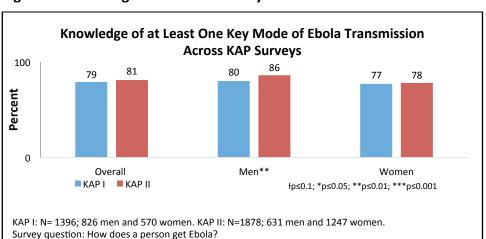


Figure 8: Knowledge of at least one key mode of Ebola transmission

Knowledge of Ebola signs and symptoms

Because knowledge of Ebola signs and symptoms was assessed differently in each KAP survey (see footnote in Table 4), the differences between the surveys were not assessed for statistical significance. In KAP I, the majority of respondents cited vomiting (83%), diarrhea with or without blood (78%), any fever/sudden onset of high fever (54%), fatigue/weakness (54%), and headache (51%) as major signs and symptoms of someone infected with Ebola. In KAP II, the majority of respondents cited vomiting (72%), bleeding (63%), diarrhea (54%), and fever (56%) as the signs and symptoms of Ebola. There were no significant sex differences across all responses in KAP I or for the top responses in KAP II (Table 4).

Table 4: Knowledge of signs and symptoms of Ebola in KAP I and II surveys

Question		ne main signs and of someone infected with		KAP II What are the Ebola?	e signs and syr	nptoms of
	Overall %	Men %	Women %	Overall %	Men %	Women %
	n=1396	n=826	n=570	n=1878	n=631	n=1247
Vomiting ¹	83	83	85	72	71	73
Diarrhea ²	78	78	79	54	56	53
Fever ³	54	55	53	56	58	54
Headache⁴	51	50	52	39	43	37**
Bleeding ⁵	24	22	27	70	68	71
(Internal or external)						
Muscle pain	31	32	30	6	8	5**
Weakness	54	56	51	15	15	15
Abdominal pain	18	19	16	6	6	5
Lack of appetite	9	10	8	3	4	3
Sore throat	32	34	28	14	17	12**
Rash	25	27	22	18	18	18
Mean knowledge score ¹	4.7	4.8	4.7	3.8	3.8	3.7

¹KAP I states "vomiting (with or without blood)," while KAP II states "vomiting." ²KAP I states "diarrhea (with or without blood)," while KAP II states "diarrhea." ³KAP I has two separate options—"any fever" and "sudden onset of fever," while KAP II states "fever." ⁴KAP I states "severe headache," while KAP II states "headache." ⁵KAP I states "bleeding (internal or external)," while KAP II has three options: "bleeding of the gums," "blood in stool," and "red eyes." †p≤0.1; *p≤0.05; **p≤0.001; ***p≤0.001

Knowledge of at least one key sign or symptom of Ebola

Almost all respondents of the KAP I (96%) and KAP II (90%) surveys were able to name at least one of the key signs or symptoms—fever, diarrhea, vomiting, bleeding—of Ebola. Disaggregation by sex showed a significantly higher proportion of men in KAP II (86%), compared to KAP I (80%), who knew at least one key mode of Ebola transmission (p<0.01) (Figure 9).

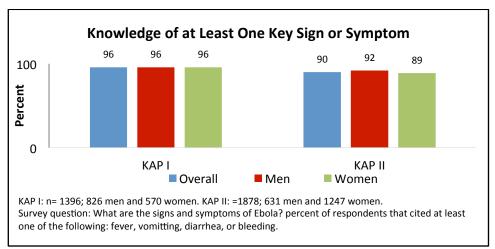


Figure 9: Knowledge of at least one key mode of Ebola transmission

Knowledge of safe care for someone with Ebola

Each KAP survey used different questions to assess knowledge of how to safely care for someone with Ebola. The KAP I survey asked, "How can you safely help care for a family member suspected of having Ebola while waiting for help to arrive? What can you do?" In contrast, the KAP II survey asked "What can a person do to safely care for a family member suspected of having Ebola?" Differences between surveys were not assessed for statistical significance, and only sex differences were assessed within each survey (Table 5).

Table 5: Knowledge of safe care for someone with Ebola

Response options	family member suspected of having care for a fan		person do to safely amily member of having Ebola?			
	Overall % n=1396	Overall % Male % Female % Overall % Male % F				
Use gloves or plastic	37	37	37	24	22	25
Keep the person away from others	72	73	70	9	11	8
Do not touch the person or their body fluids	41	42	40	10	11	9
Do not touch things the person has touched (e.g., soiled clothes)	26	26	26	9	9	9
Having only one caregiver	13	14	13	8	3	10***
Frequently wash hands with soap and/or chlorine	16	15	18	7	7	7
Provide sick person with food, water, and other fluids	22	21	24	6	5	7
łp≤0.1; *p≤0.05; **p≤0.001; ***p≤0.001	-	•	•	-	•	•

Ebola-related Attitudes

Attitudes towards Ebola were assessed using four questions in KAP I and 13 questions in KAP II—four questions were comparable between the two surveys. While the methods used to measure each question were different—in KAP I, the response options for each question were limited to "yes" or "no," while in KAP II, the response options used a Likert-type scale of agreement/disagreement—the results indicated that attitudes toward Ebola survivors remained positive between the KAP surveys.

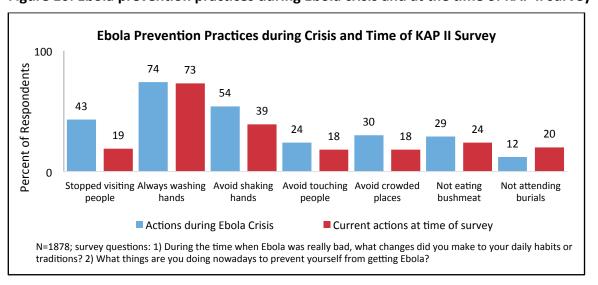
Table 6: Ebola-related attitudes toward survivors

KAP I (n=1396)		KAP II (n=1878)	
Question	%	Question	%
If you knew a shopkeeper who survived Ebola	59%	I would buy fresh vegetables	61% somewhat
and has a certificate from the government	stated	from a shopkeeper who is an	agreed or strongly
health facility stating he/she is Ebola safe,	yes	Ebola survivor.	agreed
would you buy fresh vegetables from			
him/her?			
Do you think that a school going child that	53%	A child who has survived	60% somewhat
has survived Ebola and has a certificate from	stated	Ebola will put other students	disagreed or
a government health facility stating that	yes	at risk if he/she goes back to	strongly disagreed
he/she is Ebola free puts other students in		school.	
their class at risk of infection?			
Would you welcome someone back into your	90%	I would welcome back	80% somewhat
community/ neighborhood after that	stated	neighbors that survived	agreed or strongly
neighbor has recovered from Ebola?	yes	Ebola.	agreed
If a child that you know has lost both parents	85%	I would be willing to bring a	67% somewhat
to Ebola but is not infected or has recovered,	stated	child into my family if he/she	agreed or strongly
would you be willing to bring him/her to live	yes	lost both parents to Ebola.	agreed
with your family?			

Ebola Prevention Practices

In KAP II, respondents were asked about their prevention practices at two points: during the peak of Ebola and at the time of the KAP II survey. Almost all KAP II respondents (93%) stated that they made changes to their daily habits or traditions to prevent infection during the peak of Ebola and 89% stated they were currently taking action to avoid being infected by Ebola (Figure 10).

Figure 10: Ebola prevention practices during Ebola crisis and at the time of KAP II survey



Specific prevention practices reported by KAP II respondents included handwashing, not shaking hands, and avoidance of bushmeat and burials.

Almost three-quarters of all respondents indicated they had practiced handwashing during the Ebola crisis (74%) or said they were doing this practice currently (73%). The majority (79%) of respondents who reported handwashing during the Ebola crisis (the 74% above) also reported handwashing at the time of the KAP II survey. This suggests the practice has continued and is high.

About half of all respondents reported not shaking hands during the Ebola crisis (54%) or said they were avoiding this practice currently (39%). Only 53% of respondents who reported not shaking hands during the Ebola crisis (the 54% above) also reported not shaking hands at the time of the KAP II survey. This represents 28% of the sample and suggests the practice has declined.

About a quarter of all respondents reported avoiding bushmeat during the Ebola crisis (29%) or said they were avoiding bushmeat currently (24%). Only 57% of respondents who reported avoiding bushmeat during the Ebola crisis (the 29% above) also reported avoiding bushmeat at the time of the KAP II survey. This represents 17% of the total sample and suggests the practice has declined.

A minority of all respondents reported they did not attend burials during the Ebola crisis (12%) or said they did not attend burials at the time of the survey (20%). Only 57% of respondents who reported they did not attend burials during the Ebola crisis (the 12% above) also reported they did not attend burials at the time of the KAP II survey. This suggests that the practice has decreased among the few who did this behavior during the crisis, but others now follow the practice.

Ebola Risk Perception

In both surveys, respondents were asked whether they believed that they could get Ebola from a person who was infected but did not have any signs and symptoms. In KAP I, more than half (58%) of respondents incorrectly believed they could get Ebola from a non-symptomatic person; in KAP II, this percentage reduced to less than half (47%). Significant sex differences were identified in both surveys (Figure 11).

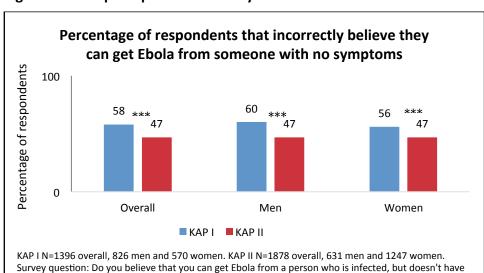


Figure 11: Risk perception of Ebola by sex

any signs and symptoms?. \dagger p <0.1 * p<0.05 **p<0.01 ***p<0.001

Knowledge and Perceptions of Ebola Survival and the Ebola Outbreak

In the KAP II survey, more than half (55%) of all respondents were aware certificates had been given to Ebola survivors to show they were Ebola free, most (76%) of whom believed that survivors with certificates were in fact free of Ebola.

The majority of respondents believed that people could be treated for Ebola (81%) or believed that the chances of surviving Ebola increased if treatment was received within 24 hours (80%). Over a fifth (22%) of all respondents believed that spiritual healers could cure someone with Ebola, while only 5% of respondents believed traditional healers could cure someone of Ebola.

At the time of the KAP II survey, about half (52%) of all respondents stated they knew that the Ebola outbreak was over, while about a fifth (19%) said that Ebola was not over and less than a third (29%) did not know. Men (56%) were more likely to state that Ebola was over, compared to women (50%, p<0.05).

Half of all respondents were concerned that another Ebola outbreak could occur in the next 12 months (36% very concerned and 17% somewhat concerned), while two-fifths of all respondents were not concerned (15% not very concerned and 23% not at all concerned) and the remaining 10% did not know.

Perceived efficacy to prevent future Ebola outbreaks

More than half (57%) of respondents stated that they were extremely confident that they could prevent themselves and their family from becoming infected with Ebola in the future. Lower proportions of respondents were confident that their village (39%) or the Government of Liberia (39%) could control the spread of Ebola if there was another outbreak. Men were more likely than women to be extremely confident in themselves, their communities or village, and in the Government of Liberia.

About two-thirds (68%) of all respondents stated that they had no or low risk of getting Ebola. Higher proportions (74%) of men perceived no/low risk compared to women (66%, p<0.001).

III. Effect of Ebola Response Activities

The Ebola response included community mobilization and mass media efforts to improve knowledge, attitudes, and prevention practices related to Ebola. Specific activities included mass media campaigns, establishment of the 4455 Ebola hotline, community-level activities implemented by organized groups, and contact tracing. This section explores the effect of the Ebola response on key behavioral outcomes among KAP II respondents.

Exposure to Ebola Response Activities

A total of 20 questions were included in the KAP II questionnaire to assess respondents' exposure and recall to the Ebola response activities. Exposure/recall varied depending on the type of messages and activities assessed. Some questions asked respondents to complete the sentence or expression, to indicate the meaning of an expression/slogan, and to recall if they had heard or hearf of specific Ebola-related information (e.g., hotline 4455). All respondents correctly completed the expression "Protect Yourself, Protect Your Family, Protect Your Community." The majority of respondents knew the meaning of "Ebola Can Kill" (85%), "Ebola Must Go" (86%), and "Let's Kick Ebola out of Liberia" (73%). Almost three-fourths (72%) of respondents had heard of the 4455 Hotline number.

About two-thirds (62%) of all respondents had heard President Ellen Johnson Sirleaf speak about Ebola. More than half (54%) of all respondents noted that other community leaders spoke publicly about Ebola during the epidemic, and less than half (46%) of all respondents stated that religious leaders spoke publicly about Ebola during the epidemic.

About two-thirds (64%) of respondents stated that organized groups visited their communities to talk about Ebola, while about half (49%) said they received an Ebola information package. Over a third (39%) said they had heard about contact tracers, and about a fifth (19%) said contact tracers visited them in the past year.

Messages less commonly heard by respondents included: "Spread the Message, Not the Virus" (29%), "Stop the Stigma" (14%), and "Early in, Early out" (10%).

Sex differences in exposure to Ebola response activities

With the exception of the messages "Protect Yourself, Protect Your Family, Protect Your Community" and "Spread the Message, Not the Virus," men were more likely to be exposed to all other Ebola response activities than women (Table 7).

Table 7: Exposure to Ebola response activities

Ebola Response Information, Messages, and Activities	Overall % n=1878	Men % n=631	Women % n=1247
Correct completion of expression "Protect Yourself, Protect Your Family, Protect Your Community"	100	100	100
Heard expression "Ebola can kill"	85	89	83**
Heard message "Ebola must go"	86	90	84***
Correct meaning of expression "Let's kick Ebola out of Liberia"	73	81	68***
Heard of the 4455 Hotline number	72	80	68***
Heard President Sirleaf speaking on Ebola	62	75	56***
Heard organized groups talk of Ebola in community	64	68	61**
Heard other community leader speaking on Ebola	53	61	49***
Received Ebola information package	49	58	47***
Heard religious leader speaking on Ebola	45	50	42***
Correct completion of expression "Spread the Message, not the virus"	29	30	28
Heard about contact tracer	38	50	32***
Ebola contact tracer visited household	19	25	16***
Correct meaning of expression "Stop the stigma"	14	22	11***
Correct meaning of expression 'Early in, Early out"	10	17	6***
†p≤0.1; *p≤0.05; **p≤0.01; ***p≤0.001	-		

Overall exposure to Ebola response activities

Respondents were exposed to an average of seven out of 14 activities—excluding the expression "Protect Yourself, Protect Your Family, Protect Your Community," which everyone recognized (Figure 11). Men had a significantly higher mean exposure than women (8 versus 6.5, p<0.001). Similarly, residents of urban areas were more likely to have a higher mean exposure than those in rural areas (7.6 versus 6.4, p<0.001).

Exposure to Ebola Response Activities by Sex and Residence Mean Exposure Score 13.0 7.6 *** 6.5 6.4 *** 7 0.0

Figure 11: Mean exposure to Ebola response activities

N=1878. Mean Exposure determined from exposure to 14 Ebola response activities survey questions. Reliability co-efficient (Cronbach's alpha) 0.7. † p <0.1 * p<0.05 **p<0.01 ***p<0.001

Women

Men

Effect of Ebola Response Activities on Knowledge, Attitudes, and Prevention **Practices in KAP II**

Urban

Rural

This section explores the effect of the Ebola response activities on key outcomes—Ebola-related knowledge, attitudes, and prevention practices—using multivariate regression analyses. For knowledge, and attitudes, the outcome for this analysis is the corresponding measure at the time of the KAP II. For prevention practices, the analysis included five outcomes and their measurement (self-reported behavior) at two points in time: at the time of the Ebola crisis and at the time of KAP II survey. To assess sustained behavior between the two time points, the analysis included the practice of each key behavior at both points. Confounding variables adjusted for in each regression analysis included: sex, age, marital status, religion, education, employment, wealth, county, urban/rural residence, community social capital, and perceived Ebola burden in communities.

Ebola-related knowledge

Overall

A composite score of Ebola knowledge was developed for the analysis. The score included knowledge of the key modes of Ebola transmission, the key signs and symptoms of Ebola, and the Ebola hotline number.

Five key modes of Ebola transmission were included: contact with bodily fluids from an infected person; shaking the hands of an infected person; touching, washing, or wrapping people who had died from Ebola; touching things an infected person had touched; and having sex with someone who was infected. Four key Ebola signs and symptoms were included: fever, vomiting, diarrhea, and bleeding. Table 9 presents the distribution of each component included in the Ebola knowledge score.

Table 9: Components of overall Ebola-related knowledge in KAP II

Components of Overall Ebola Knowledge Score	% (n=1878)
How does a person get Ebola?	
Bodily fluids from an infected person	44
Shaking the hands of an infected person	60
Touching/washing/wrapping people who have died from Ebola	37
Touching things an infected person has touched	41
Having sex with someone who is infected	23
What are the signs and symptoms of Ebola?	
Fever	56

Components of Overall Ebola Knowledge Score	% (n=1878)
Diarrhea	54
Vomiting	72
Bleeding	70
What can a person do to safely care for a family member suspected of having Ebola?	
Call 4455	51

The mean Ebola knowledge score (Cronbach's alpha of 0.62) was 5.3, with a median of 6 and a range from 0 to 10. Men had a significantly higher overall knowledge score (5.3) compared with women (5.0, p<0.01) and urban residents had a higher score (5.3) compared to rural residents (4.9, p<0.01).

Relationship between Ebola response activities and overall Ebola knowledge

Exposure to Ebola response activities was positively correlated with overall Ebola-related knowledge (pairwise correlation coefficient: 0.35). After controlling for the 11 aforementioned confounding variables, exposure/recall to Ebola response activities had a positive and significant increase in Ebola-related knowledge. Respondents with high exposure/recall to the Ebola response activities were two times as likely as those with lower exposure/recall to have high level of Ebola-related knowledge (OR=2.11, p<0.001).

Ebola-related attitude score

In KAP II, a composite score of attitudes toward survivors was developed using respondents' level of agreement with 11 statements related to survivors. Response options for each statement used a Likert-type scale of agreement/disagreement. For analysis purposes a five-point scale was used with one representing strong disagreement and five strong agreement. Table 10 shows the mean agreement value for each of the eleven statements included in the attitude score.

Table 10: Components of Ebola attitudes composite score

Survey question: Please tell me how much you agree or disagree with the following statemen	ts Mean
that people say.	score
would welcome back neighbors that survived Ebola.	4.0
Ebola survivors should be allowed to work at any type of job.	4.0
would be willing to bring a child into my family if he/she lost both parents to Ebola.	3.5
would buy fresh vegetables from a shopkeeper who is an Ebola survivor.	3.3
would seek care from a nurse who treated Ebola patients.	3.2
A child who has survived Ebola will put other students at risk if he/she goes back to school.	3.3
would eat from the same food plate as an Ebola survivor.	3.0
Family members of people who died from Ebola are a threat to their community.	2.9
would avoid hugging someone who survived Ebola	2.9
would visit the household of someone who died from Ebola.	2.8
would avoid people from communities that had a lot of Ebola.	2.7

The mean value for the Ebola attitude score was 35.5, with a median of 36 and a range from 11 to 55 (Cronbach's alpha= 0.84). Respondents with an attitude score greater than 36 were categorized as having a high positive attitude score toward survivors (48% of all respondents).

Relationship between Ebola response activities and attitudes

After controlling for the 11 aforementioned confounding variables, exposure/recall to Ebola

response activities had a positive and significant increase in positive attitudes toward Ebola survivors. Respondents with high exposure/recall to the Ebola response activities were 1.7 times as likely as those with lower exposure/recall to have high positive attitudes towards survivors (OR=1.7, p<0.001)

Effect of Ebola response activities on prevention practices

As mentioned before, the relationship between exposure/recall to Ebola response activities and prevention practices was explored using different outcomes (Table 11). The results indicated that after controlling for the 11 aforementioned confounding variables, exposure/recall was positively correlated with most behavioral outcomes explored, but was not always significant. The relationship was statistically significant for three of the five outcomes explored for the peak period of the Ebola outbreak.

Table 11: Effect of Ebola response activities on prevention behavior

Effect of high level of exposure/recall of Ebola response activities. (aOR1)						
Outcome	At peak of Ebola crisis	At time of KAP II survey	Both			
High prevention behavior ²	1.73 ***	1.09	0.85			
Specific prevention behavior						
Handwashing	1.52***	1.14	1.01			
Not shaking hands	1.52***	1.20	1.05			
Not eating bushmeat	1.00	0.91	0.69*			
Not attending burials	1.36	1.04	0.82			

N=1878; Survey questions: 1) During the time when Ebola was really bad, what changes did you make to your daily habits or traditions? 2) What things are you doing nowadays to prevent yourself from getting Ebola? * p<0.05 **p<0.01 ***p<0.001.

A total of 12 specific prevention behaviors were explored at each time point: not eating bushmeat, not eating fruit eaten by bats, not preparing bushmeat, not visiting people, not allowing strangers to visit, not shaking hands, not touching people, avoiding crowded places, staying at home, not sharing items with other people, always washing hands, and not attending burials. The median number of prevention behaviors practiced by respondents during the Ebola crisis was five, the median at KAP II survey was two, while the median number of prevention behaviors practiced during both the Ebola crisis and the KAP II survey was also 2. Respondents who practiced more than the median number of behaviors were categorized as having a high prevention behavior at each time point. Additionally, out of the 12 behaviors, four key prevention behaviors were also assessed: handwashing, not shaking hands, not eating bushmeat, and not attending burials.

The results showed that respondents with high exposure/recall to the Ebola response activities were 1.7 times as likely as those with lower exposure/recall to have a high prevention behavior during the peak of Ebola (p<0.001). Likewise, those with high exposure/recall were more likely than those with lower exposure/recall to report handwashing (OR=1.52, p<0.001) and not shaking hands (OR=1.52, p<0.001) during the peak of Ebola. However, neither of the other two outcomes during the peak of Ebola or the KAP II survey or at both time points had a significant association with exposure/recall to the Ebola response activities.

IV. Health Seeking

This section presents results related to women's awareness and perceptions of health-service providers, awareness of health issues treated by health-services providers, provider preference for

¹ Confounding variables adjusted for in each of the regression analyses included: sex, age, marital status, religion, education, employment, wealth, county, urban/rural residence in, community social capital, and perceived Ebola burden in communities.

²High prevention behavior is defined as greater than the median number of prevention behaviors practiced by respondents at each time point (median at Ebola crisis=5; at KAP II survey=2; at both Ebola crisis and KAP II=2).

common health issues, treatment-seeking intentions, access to health facilities, and health-services utilization.

Women's Awareness of Health Service Providers/Health Issues Treated

Awareness of health service providers

Women were asked if they were aware of health services available to them (Figure 12). For those who were aware of more than one source of health services, they were subsequently asked for the top health issues treated by each of those services (Table 11).

Almost all (95%) of women were aware of a clinic or health facility in their community, while less than half (45%) were aware of a drug store in their community. Additionally, almost a quarter of women knew of a community health worker (22%) or traditional healer (19%) in their community.

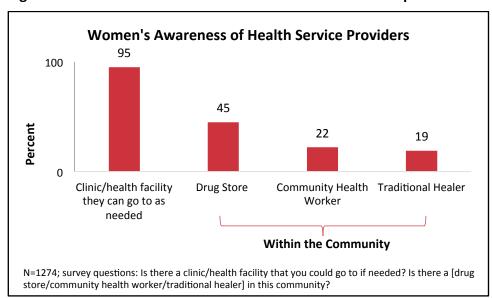


Figure 12: Women's awareness of sources of health service providers

Awareness of top issues treated by different service providers

Responses to the five top health issues treated in a clinic/health facility or by community health workers and traditional healers are presented in Table 11. Clinics, drug stores, and community health workers were perceived as dealing with conventional and more commonly encountered health issues, while traditional healers were perceived as dealing with less commonly encountered health issues or issues presumed to be due to traditional causes.

Tabl	e 11:	Five To	p issues	treated b	y different	t service	providers
------	-------	---------	----------	-----------	-------------	-----------	-----------

Health Issues	Percentage of Women aware of health issues treated by service providers				
	Clinic/Health Facility (%)	Drug Store (%)	Community Health Worker (%)	Traditional Healer (%)	
Trauma/fracture				65	
Fever	80	67	47		
Snake bite				39	
Diarrhea	63	46	34		
Headaches	59	61	42		
Body aches		37			
Food poisoning				37	
Epilepsy				28	

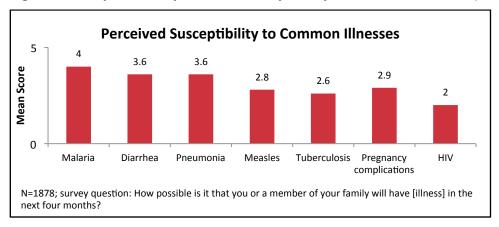
Maternal health	38		17	
Cough		17	16	
Jaundice				20
Typhoid	30			

N: women aware of [service provider] traditional-243; drug store-562; community health worker-270; clinic/health facility-1179; Survey question: Please tell me the five main health issues that [health-service provider] treats.

Perceived Susceptibility to Common Maternal and Child Illnesses

Perceived susceptibility was assessed by asking male and female survey respondents about the possibility of someone in their family (themselves included) getting an illness within the next four months. Seven specific illnesses were assessed—malaria, diarrhea, pneumonia, measles, tuberculosis, pregnancy complications, and HIV. Responses include "very possible," "somewhat possible," "don't know," "not very possible," and "not possible at all." Average perceived risk scores ranged from one (not possible at all) to five (very possible) (Figure 13).

Figure 13: Respondents' perceived susceptibility to common illnesses (mean scores)



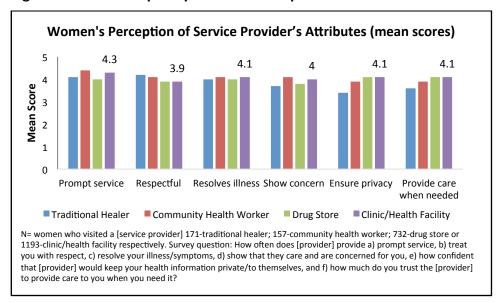
Perceived susceptibility to malaria was highest, with an average risk score of 4.0. Communicable diseases such as diarrhea, pneumonia, also ranked high (3.6 each). However, perceived susceptibility for measles and tuberculosis were not as high (2.8 and 2.6, respectively) followed by respondents' susceptibility to HIV (2.0) and susceptibility to pregnancy complications (2.9).

Women's Perceptions of Service Providers

Women who had ever visited service providers were subsequently asked about their impressions of some attributes of their service providers. Specific questions included how often they felt that the provider gave prompt service, treated them with respect, resolved their illness/symptoms, or showed care or concern for them. They were also asked how confident they were that the provider would keep their health information private/to themselves and how much they trusted the provider to provide care when they need it. Response options for each of the attributes used a Likert-type five-point scale to measure how often respondents received a quality attribute and their level of confidence or trust (Figure 14).

In general, women ranked all health providers highly across all attributes with average scores ranging from 3.4 (traditional healer ensuring privacy) to 4.4 (community health workers providing prompt service). Women ranked health facilities higher than community health workers, drug stores and traditional healers in *resolving illnesses* and *showing care/concern*, and also ranked health facilities higher in *providing care as needed* and *ensuring privacy*, except when compared with drug stores, which women ranked similarly in these attributes. Traditional healers were ranked the lowest on *providing care as needed* and *ensuring privacy*.

Figure 14: Women's perception of service providers



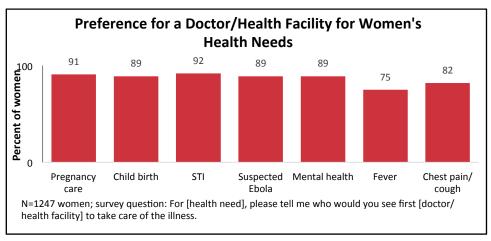
Provider Preference for Maternal and Child Health Services

KAP II explored provider preferences by asking women which provider they would first see to take care of common women and child health needs, such as fever, cough, measles, pregnancy care, childbirth, STIs, suspected Ebola, and mental health issues. Response options include none/home remedies, traditional healer, black bagger/tablet man, drug store vendor, community health worker, traditional midwife, and doctor/health facility.

Provider preference for women's health needs

The majority of women would opt to first see a doctor or go to the health facility for all health needs assessed in the survey, including reproductive, maternal, newborn, and child health (RMNCH) (Figure 15). Only minimal proportions of women (less than 10%) said they preferred any of the other service providers.

Figure 15: Women's preference for doctor/health facility



Provider preference for health needs of children under five

About 80% of women stated they would go to a doctor or health facility first if their child or children under five had measles (85%) or a cold, fast breathing, or cough (81%). About three-quarters stated

they would go to the doctor or health facility first if their child or children under five had a fever (75%) or diarrhea for two days (77%) (Figure 16).

Women's Provider Preference for Health Needs of **Children under Five** 100 Percent of women 11 9 9 Diarrhea for 2 days Cold/ fast breathing/ Measles cough Doctor/health facility ■ Drug store vendor Home remedies/none N=1247 women; survey question: For [health need], please tell me who would you see first [doctor/ health facility] to take care of the illness.

Figure 16: Provider preference for health needs of children under five

Access to Clinic/Health Facility

Almost three-quarters (73%) of the women surveyed were aware of a clinic health facility they could go to, as needed, and were able to reach the nearest facility within 60 minutes. More specifically, about a third of women (34%) could reach their nearest clinic or health facility in less than 15 minutes, about a quarter (24%) in 15 to 30 minutes, more than a tenth in 30 to 60 minutes (16%) or in over an hour (14%), while less than a tenth could reach it in two hours (9%) (Figure 17). Women within reach of a nearest clinic/health facility stated that they could get to the facility by walking (67%) or using public transportation (27%).

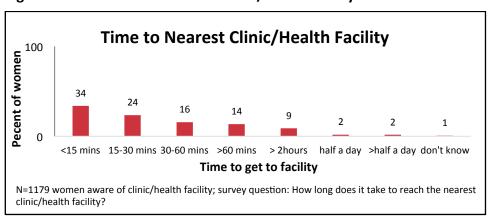


Figure 17: Time to reach nearest clinic/health facility

Utilization of Health Services

Women were asked if they had ever visited any of the following service providers: traditional healer, community health worker, drug store, and clinic or health facility. Almost all (96%) of the women surveyed had ever visited a clinic or health facility, while more than half (59%) had ever visited a drug store (Figure 18). Fewer proportions of women reported ever visiting a community health worker or traditional healer (13% and 14%, respectively).

Women's Ever Use of Service Provider

100

100

Traditional Healer Community Health Worker

Type of Service Provider

N= 1247; survey question: Have you ever visited [provider]?

Figure 18: Women's ever use of service providers

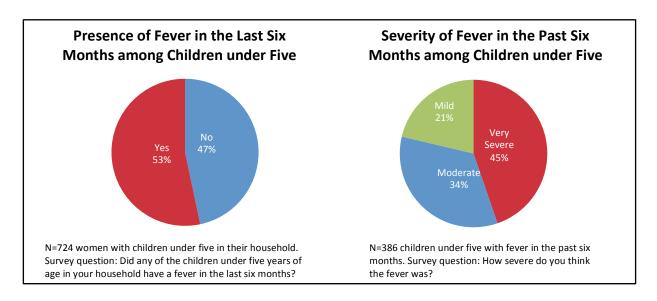
Treatment-seeking Patterns for Maternal and Child Needs

The survey explored women's treatment seeking behavior for two major health needs, fever in children under five and maternal health care.

Fever in children under five

About half (53%) of women stated that a child under five years had a fever within the six months preceding the survey. Of these children, 45% had a very severe fever, 34% had a moderate fever, and 21% had a mild fever.

Figure 19: Presence and severity of fever in children under five



Treatment seeking for children with fever

Among children with severe fever, the initial care given to them included palliative care—giving water, fluids, a bath, or prayers—and going to the clinic or health facility. Specifically, 46% of those with severe fever were given palliative care, while 41% were taken to the clinic or health facility. Among those with moderate fever, 42% were taken to the clinic/health facility, 22% were given

palliative care, and in 13% of cases the caregiver went to the drug store. For those with mild fever, 35% went to the clinic or health facility, 20% went to the drug store, and 15% gave palliative care, while 12% did nothing (Figure 20).

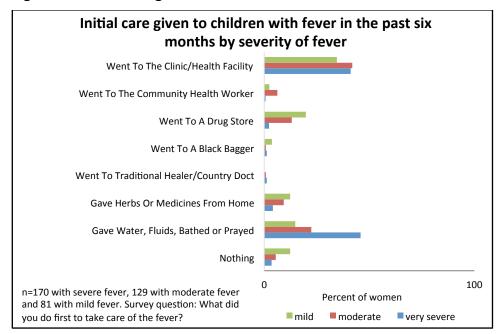


Figure 20: Initial care given to children under five with fever

Treatment seeking for maternal health

In this section, maternal health issues, such as location of delivery, presence of a skilled birth attendant at delivery, and care-seeking intentions are presented.

Deliveries

About a fifth of women (21%) in the sample said that either herself or other woman living in the household had had a birth within the 12-month period preceding the survey.

Location of Delivery

Over half (54%) of the deliveries occurred in a government clinic or health facility and less than a fifth (17%) took place in private clinics or health facilities. However, over a quarter (28%) of deliveries occurred in the mother's homes (12%), in other homes in the community (14%), or on the way to seeking care (2%). Of the women with home births, the major reasons for not going to the facility included: "the clinic is too far" (37%), "not enough time" (20%), and "scared of Ebola" (19%).

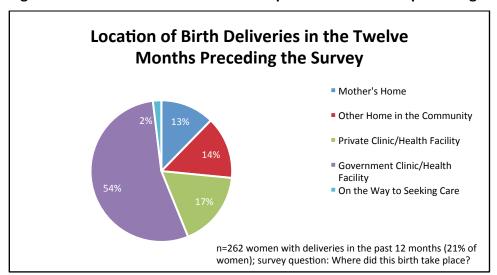


Figure 22: Location of birth deliveries in past twelve months preceding the survey

Person Who Assisted with Delivery

Skilled birth attendants assisted the majority of deliveries (73%). This category included trained midwives (52%) or nurses (21%). Births not assisted by skilled attendants accounted for about a quarter (27%) of all deliveries.

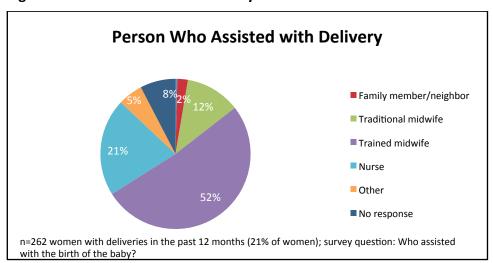
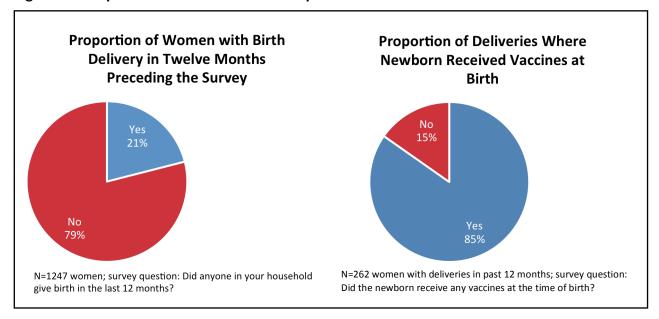


Figure 23: Birth assistance at delivery

Routine Newborn Immunizations at Birth

Of all 1247 women respondents, 262 women (21%) reported a delivery in their household within the past 12 months preceding the survey (Figure 24). Among these 262 women, most (85%) stated that their newborn baby received vaccines (baby shots) at birth. Stratification by location of delivery showed that babies born to women respondents in government (94%) and private (89%) facilities received routine immunizations; however, only about two-thirds (62%) of babies born to women who delivered at home received routine immunizations.

Figure 24: Proportion of deliveries and receipt of vaccines at birth



Future Treatment-seeking Intentions for Maternal and Child Health Needs

In the behavior change literature, intention is regarded as an antecedent of behavior. Thus, the survey asked about treatment-seeking intentions for fever and delivery—common health needs for women and children, respectively, that require care at a clinic/health facility.

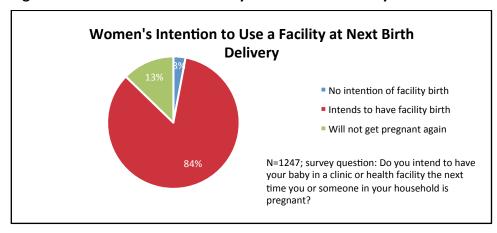
Treatment-seeking intentions for children under five with fever

Women were asked where they would seek initial treatment the next time a child under five in their household has a fever. The majority (90%) responded that they would take their child to the clinic or health facility, while the minority stated that they would take their child to the drugstore (5%) or they would either seek initial treatment from a community health worker or traditional healer or they would stay at home (5%).

Intention to use a facility at next delivery

Of all women surveyed, 84% intended to seek care during pregnancy at a clinic or health facility the next time they or someone in the household became pregnant. Similar proportions also intended to have a clinic or health-facility birth the next time a pregnancy occurred in their household (Figure 25).

Figure 25: Intention to use a facility at next birth delivery



Childhood Immunization during Campaigns

All women were asked if they heard about the polio and measles immunization campaigns that occurred prior to the survey.

National campaigns

Overall exposure to the national polio campaign was high—88% of all women respondents reported that they had heard of the campaign in either February or June. Similarly, overall exposure to the measles campaign was also high—81% of all women respondents reported that they had heard of the campaign in May.

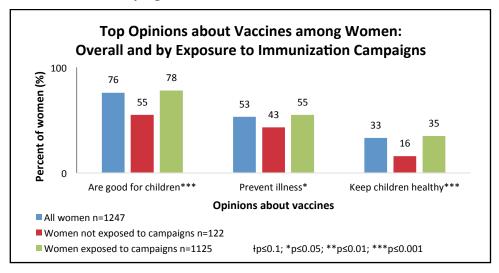
Among all women in the sample, 58% had children under five years of age. The majority of these mothers had heard of the polio (93%) or measles (88%) campaign. These mothers were also asked if their children were vaccinated during the campaigns. Almost all of the mothers who had heard about the polio or measles campaign indicated that their children were vaccinated during the polio (95%) or measles (96%) campaign.

General Perceptions about Vaccines

Women were asked to provide their opinions about vaccines. About three-quarters (76%) of all women stated that vaccines are good for children. However, only about half (53%) stated that vaccines prevent illness and only a third (33%) said vaccines keep children healthy. Very small proportions of women (1% or less) felt that vaccines do not work, were hard to get, were expensive, spread Ebola, spread illnesses, or were not safe.

Compared to women who were not exposed to either immunization campaigns, exposed women were more likely to have favorable opinions regarding vaccines being good for children, preventing illness, and keeping children healthy (Figure 27).

Figure 26: Perceptions about vaccines among women with children by exposure to immunization campaigns



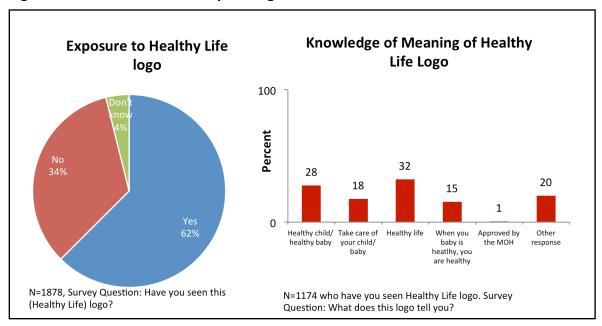
V. Healthy Life Logo

In 2010, the MOH developed a national logo with the purpose of enhancing health promotion efforts in Liberia. The "Healthy Life" logo depicts a father and mother holding a child. The image of a healthy and happy family was chosen to emphasize the role of the household as the primary producers of

health, while at the same time promoting health behaviors and services utilization. KAP II included two question to explore awareness of the logo and its meaning.

Of all respondents, 62% said they had seen the Healthy Life logo. Among those who had seen the logo, common interpretations of what it meant, besides simply "healthy life" (32%), included: healthy child/healthy baby (28%); take care of your child/baby (18%); and when your baby is healthy, you are healthy (15%). About 20% of respondents provided an incorrect response.

Figure 27: Awareness of Healthy Life logo



CONCLUSION AND RECOMMENDATIONS

The KAP II survey explored national level changes in knowledge, attitudes, and practices related to Ebola and its influence on health care-seeking perceptions and behavior. The implications of key survey findings are presented in this section.

Ebola Knowledge

Knowledge of at least one mode of Ebola transmission remained high across the two KAP surveys. In KAP II, contact with bodily fluids of someone with EVD was well known as a means of Ebola transmission. However, other means of Ebola transmission, such as contact with people who have died from Ebola, contact with items used by a person sick with Ebola, or sex with Ebola survivors were not as well known.

 Additional efforts are needed to improve awareness of lesser-known means of Ebola transmission.

Although knowledge of Ebola signs and symptoms remained high across the two KAP surveys, knowledge of how to safely care for someone with Ebola appeared to have declined at KAP II. However, this decline could be credited to the difference in the wording of the questions used in each survey, rather than a decline in actual knowledge. Still, many KAP II respondents knew to call the 4455 hotline as the first pointd of care for someone with Ebola.

The 4455 hotline should be maintained as part of the country's emergency preparedness
efforts and used as a constant means of communication for Ebola and other reportable
disease outbreaks, such as Lassa fever, meningitis or cholera.

Ebola Attitudes

Attitudes toward Ebola survivors remained fairly positive across the two KAP surveys. KAP II respondents demonstrated a welcoming attitude toward Ebola survivors and their reintegration to communities.

 Additional studies conducted with Ebola survivors may be needed to corroborate these findings and highlight ways in which positive attitudes toward Ebola survivors can be maintained.

Ebola Prevention

Handwashing was the most widely practiced Ebola prevention behavior during the Ebola crisis as well as at the time of the KAP II survey.

- The correct and proper use of handwashing can help with the prevention of other infectious diseases and should be promoted on a national level.
- Interventions to ensure the correct practice of handwashing, which includes use of proper technique and knowledge of critical times to wash hands, should also be promoted.
- Structural interventions that provide resources, such as handwashing stations and improved access to soap and water, would help sustain handwashing as an Ebola prevention and health promotion behavior.

Other Ebola prevention behaviors waned from the time of the Ebola crisis to the time of the KAP II survey. Such behaviors include avoiding bushmeat, not shaking hands, not touching things someone

infected with EVD had touched, or not touching/wrapping people who had died from Ebola.

- This suggests respondents may have reverted to preferred cultural practices, such as eating bushmeat, shaking hands, and conducting traditional burials.
- It is important to promote safe burial practices and safe handling of bushmeat as part of Ebola prevention efforts should there be another outbreak. This includes the use of disposable gloves for burials and avoiding bushmeat. In addition, systems should be put in place to make sure safe burial practices can be reverted to quickly should they become necessary for other disease outbreaks.
- Proper handwashing techniques should be promoted at all times to prevent other infectious diseases.

Ebola Response Activities

During the Ebola crisis, community mobilization efforts among various groups and task forces within and outside communities helped to promote Ebola knowledge and prevention behavior.

- Traditional leaders and community groups can be highly effective resources to promote
 health information and mobilize communities to adopt relevant health behaviors and should
 be provided with the skills and information so they can quickly respond during an epidemic
 as well as conduct on-going promotion of positive health practices
- Youth groups and task forces could be scaled up to reinforce Ebola prevention knowledge
 and positive attitudes toward Ebola survivors. In addition, youth groups and task forces
 could be utilized in the Integrated Disease Surveillance and Response system being
 implemented in Liberia for over a dozen diseases and events. These groups can be trained
 within their communities to identify signs and symptoms of reportable diseases and events
 and respond with necessary next steps or activities

Exposure to Ebola response activities was associated with increased knowledge and more favorable attitudes toward survivors.

• Strategic SBCC interventions involving both mass media and community mobilization should be used to improve health related knowledge and attitudes, especially in crisis/ outbreaks.

Utilization of Health Services

The majority of women respondents said they preferred to have facility-based providers treat fever in children under five. However, fewer women reported going to the facility as part of the initial care given when their child under five had a fever, and many women chose to provide palliative care first.

- Additional research is needed to explore the gap between high preference for facility-based health providers and poor utilization of facilities. Findings from a separate qualitative assessment on health-system trust and health-service utilization in Liberia demonstrated poor trust in health facilities and quality of care as major barriers to health-facility utilization (Modarres & Berg, 2016).
- Strategic SBCC messages can be used to improve parents' knowledge regarding initial care
 and treatment for childhood fevers to ensure their children receive timely and appropriate
 treatment.
- Community-based health workers can be useful for not only referring cases to facilities but also ensuring patients arrive at facilities.
- Interventions for improving interpersonal skills of facility-based health providers, availability of drugs, and access to facilities may help increase facility utilization.

Many women reported their children received immunizations at birth or during campaigns. They also had favorable attitudes towards vaccines, describing them as good for children.

- Additional research is needed to explore attitudes toward Ebola vaccines.
- Routine immunization should be promoted to ensure adequate protection against other preventable diseases.

Women noted a high preference for facility-based providers for birth deliveries, and the majority of women said they went to a health facility to delivery their baby. However, women's intention to go to a health facility for birth-delivery care was higher than actual use of a health facility for delivery.

 Additional research is needed to explore lessons learned and how this high preference for and utilization of health facilities for birth deliveries can be broadened to other RMNCH needs such as care for fever in children under five.

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APPENDIX A – KAP I SURVEY

A. SO	CIO-DEMOGRAPHIC SECTION			
A.1	Age (In completed years)		<u>/_/</u> /	
A.2	Sex	Male	1	
A.2		Female	2	
A.3	Place of residence	Urban	1	
		Rural	2	
A.4	How long have you and	Less than one month	1	
	your family been living	One month – 6 months	2	
	at this residence	7 – 12 months	3	
A.5	Marital status	Over a year	4	
A.5	(circle one answer)	Single/ never married	1	
	(en ore one unerren)	Legally married and living with spouse/husband	2	
		Married but separated by work	3	
		Cohabiting	4	
		Separated	5	
		Divorced	6	
		Widowed	7	
		No response	8	
A.6	Religion	Christianity	1	
	(circle one answer). If respondent answers more than one religion, please specify under 'Other'.	Islam	2	
		Traditional	3	
		No religion	4	
		Other (specify):	5	
		No response	6	
A.7	What is the highest	No formal education	1	
	educational level	Elementary (1 - 6)	2	
	completed? (circle one answer)	Junior High (7 - 9)	3	
	unswery	Senior High (10 - 12)	4	
		University (Bachelor, Masters, Doctorate)	5	
		Others, specify:	6	
		No response	7	
A.8	What kind of work (main	Unemployed	1	
	occupation) do you	Private business (excluding petty trader	2	
	currently do?			
		Plumber / Carpenter / Electrician/ builder	3	
		Petty Trader	4	
		Farmer	5	
		Teacher / lecturer / instructor	6	
		Public transportation driver (taxi, buses, bajaj	7	
		Commercial motorcyclist	8	
		Medical or health professional	9	
		Other Government employees(not stated above)	10	
		Student	11	

		Other (please specify)	12	
		No response	13	
B. AV	VARENESS AND KNOWLEDGE	OF CAUSES, SIGNS, SYMPTOMS & TRANSMISSION		
B.1	Have you ever heard or	Yes	1	
	learnt of Ebola before (prior to this interview)?	No (if selected, end survey here). PLEASE INFORM YOUR		
		SUPERVISOR of THIS LOCATION.	2	
		No response	3	
B.2	Do you believe that	Yes	1	
	Ebola exists in Liberia?	No	2	
		I don't know/ not sure	3	
		No response	4	
B.3	Does Ebola have another	Yes (Specify)	1	
	name in your local	No	2	
	language?	I don't know/ not sure	3	
		No response	4	
B.4	What causes Ebola?	Virus	1	
	(select all applicable	Bats / Monkeys / Chimpanzees / Other wild animals	2	
	choices)	God or higher power	3	
		Witchcraft	4	
		Evildoing / Sin	5	
		Curse	6	
		Other(specify)	7	
		I don't know/ not sure	8	
		No response	9	
B.5	How does a person get	By air	1	
	Ebola? (select all applicable choices)	Bad odor or smell	2	
	applicable choices;	Preparing bush meat as a meal (such as chimpanzees,		
		monkeys, and other wild animals)	3	
		Eating bush meat	4	
		Eating fruits likely to have been bitten by bats	5	
		Saliva of an infected person	6	
		Blood of an infected person	7	
		Sweat of an infected person	8	
		Urine of an infected person	9	
		Feces of an infected person	10	
		Breast milk of an infected person	11	
		Sperm or vaginal fluid of an infected person	12	
		Shaking the hands of an infected person	13	
		Other physical contact with an infected person	14	
		God's will	15	
		Witchcraft Participating in hurial coromonies that involve the	16	
		Participating in burial ceremonies that involve the handling (touching/washing/ wrapping) of dead body	17	
		Coming in contact with anything someone sick with Ebola	1/	
		has touched	18	
		Having sex with infected person	19	
		Having sex with someone who has recovered	20	

		Going to the hospital / health facility	21	
		Others	22	
		I don't know / not sure	23	
		No response	24	
B.6	What are the main signs	·		
2.0	and symptoms of	Any Fever	1	
	someone infected with	Sudden onset of high fever	2	
	Ebola? (select all	Severe headache	3	
	mentioned/ that apply)	Muscle pain	4	
		Weakness	5	
		Diarrhea (with or without blood) Vomiting (with or without blood)	7	
		Abdominal (stomach) pain Lack of appetite	8 9	
		Sore throat	10	
		Rash	11	
		Difficulty breathing	12	
		Bleeding (internal or external)	13	
		Hiccups Delivium / confusion	14	
		Delirium/ confusion Others	15 16	
		I don't know / not sure	17	
		No response	18	
B.7	One can prevent oneself	Yes	1	
	from getting Ebola by	No	2	
	avoiding contact with	I don't know/ not sure	3	
	blood and body fluids			
	(stool, urine, blood,			
	saliva, sweat, tears,			
	semen, vaginal fluids,	No versione	4	
B.8	runny nose)?	No response	4	
В.8	One can prevent	Yes	1	
	themselves from getting	No	2	
	Ebola by bathing with salt and hot water?	I don't know/ not sure	3	
B O		No response	4	
B.9	One can prevent	Yes	-	
	themselves from getting Ebola by avoiding	No	2	
	mosquito bites?	I don't know/ not sure	3	
D 10	•	No response	4	
B.10	One can prevent themselves from getting	Yes	1	
	Ebola by not touching	No Den't know/ Not sure	3	
	anyone who is sick?	Don't know/ Not sure		
D 11		No response	4	
B.11	One can prevent themselves from getting	Yes	1	
	Ebola by avoiding funeral	No Don't know/ Not Sure	3	
	or burial rituals that	DOIL KHOW/ NOU Suite	3	
	require handling the			
	body of someone who			
	has died from Ebola?	No response	4	
C. RISK	PERCEPTIONS AND BELIEFS			
C.1	When did you begin to	Landley or worth 2		
C.1	believe that Ebola is real	Less than one month?	1	
	in Liberia? *	1-3 months ago	2	
	Elveriu	3-6 months ago	3	
•	•			

		Over 6 months ago	4	
		I don't believe it is real	5	
		I don't know	6	
		No response	7	
C.2	What level of risk do you	No risk	1	Go to C4
	think you have in getting	Low risk	2	001001
	Ebola in the next 4	Medium risk	3	
	months?	High risk	4	
			-	
		I don't know/ not sure	5	Go to C5
C.3	Why do you believe that	No response I have been experiencing signs and symptoms of Ebola	6	
C.3	you are at risk? (select all applicable choice	since day (s) ago.		
		(Convert an answer given in weeks or months to number		
		of days. If number of days is less than 30, stop the	1	
		interview, recommend that the person call 4455		
		immediately AND INFORM YOUR COMMUNITY LEADER		C - + - C -
		IMMEDIATELY and record the address to follow-up. ALSO INFORM YOUR SUPERVISOR IMMEDIATELY)		Go to C5
		Someone in my family/household/dwelling has/had Ebola		
		in the past day (s).		
		(Convert an answer given in weeks or months to number		
		of days. If number of days is less than 30, stop the	2	
		interview, finding out if the person is still in the	_	
		dwelling, recommend that the person call 4455 AND INFORM THE COMMUNITY LEADER immediately and		
		record the address to follow-up. INFORM YOUR		
		SUPERVISOR IMMEDIATELY)		Go to C5
		I am a health care professional	3	Go to C5
		I live in the same household with a health care professional	4	Go to C5
		I have taken care of a family member /relative/ friend		
		who experienced signs and symbols of Ebola in the past		
		days		
		(Convert an answer given in weeks or months to number		
		of days. If number of days is less than 30, stop the		
		interview, finding out if the person is still in the		
		dwelling, recommend that the person call 4455 AND		
		INFORM THEIR COMMUNITY LEADER immediately,		
		record the address to follow up. INFORM YOUR	_	Go to C5
		SUPERVISOR IMMEDIATELY)	5	
		I hunt bush meat as my means of livelihood	6	
		I use public transport regularly	7	
		Ebola is everywhere	8	
		I washed/touched the body of someone who died in my		
		family or community in the past days		
		(Convert an answer given in weeks or months to number		
		of days. Recommend that the person call 4455 AND	9	

		INFORM THEIR COMMUNITY LEADER immediately,		
		record the address to follow up)		
		I have attended a burial/ funeral ceremony in the past days		
		(Convert an answer given in weeks to number of days. Recommend that the person call 4455 AND INFORM THEIR COMMUNITY LEADER immediately, record the		
		address to follow up). ALSO INFORM YOUR SUPERVISOR IMMEDIATELY.	10	
		I work as a contact tracer or part of a burial team	11	
		Others	12	
		I don't know / not sure	13	C - 1 -
		No response	14	Go to C5
C.4	Why do you believe that	I do not eat bush meat or bats	1	
	you are NOT at risk? (select all applicable	I am not a health care or medical professional	2	
	choices)	I am a clean person - I wash my hands often with soap and water	3	
		I don't live in an area where there is Ebola	4	
		I don't come in contact with someone with Ebola	5	
		God is protecting me	6	
		I have spiritual protection or powers	7	
		I have traditional protection or powers	8	
		· · · · · · · · · · · · · · · · · · ·	9	
		Others	10	
		I don't know / not sure	10	
		No response	11	
C.5	Do you think it is	Yes	1	
	possible for someone to	No	2	
	have Ebola and not show	I don't know/ not sure	3	
	its signs or symptoms?	No response	4	
C.6	Should a person	Yes	1	
	suspected of Ebola or	No	2	
	having Ebola like	I don't know/ not sure	3	If Yes, Go
	symptoms be isolated			to C7.
	(kept in house or			Else skip
	confined place) from			to C8
	others?	No response	4	
C.7		1-7 days	1	
	If yes, how long should	8-14 days	2	
	they be isolated?	15-21 days	3	
C 0	Cay a norson comes into	22 days and over	4	If Voc. ~~
C.8	Say a person comes into direct contact with	Yes No	2	If Yes, go to C9.
	someone who has Ebola.	I don't know/ not sure	3	Else skip
	Should that person be	radii ekilowy noesuic	3	to C10
	isolated?	No response	4	-
C.9	If yes, how long should	1-7 days	1	

	that person be isolated	8-14 days	2	
	for?	15-21 days	3	
		22 days and over	4	
C.10	Do you believe that you	Yes	1	
	can get Ebola from a	No	2	
	person who is infected	I don't know/ not sure	3	
	but doesn't have any			
	signs or symptoms?	No response	4	
C.11	Should a person	Yes	1	
	diagnosed with Ebola be	No	2	
	taken to health	I don't know/ not sure	3	
	facility/Ebola Treatment			
	Unit?	No reconso	4	
C.12		No response	4	Go to
C.12	What chances of survival	Better/ higher	1	C12a
	does a person who has	The same chances	2	CIZU
	Ebola like symptoms	The same chances	_	Go to
	have if he/she goes	Worse	3	C12b
	immediately (within one	I don't know	4	
	day) to a Health Facility?	No response	5	
C.12a		They will receive better care than at home	1	
	What do you believe will	They will receive nutritious food and water	2	
	happen to someone with	It is a safe place to be for sickness	3	Go to
	Ebola like symptoms	They will get medicines including for other diseases	4	C13
	who goes to a Ebola	Others, specify:	5	CIS
	Treatment Unit? *	I don't know	6	
		No response	7	
C.12b		They will not receive good care	1	
		They will not be fed	2	
	What do you believe will	They will not get medication	3	
	happen to someone with Ebola like symptoms	They will be discriminated Their family will not be able to visit them	5	
	who goes to a Ebola	They will be cremated if they die	6	
	Treatment Unit? *	Other	7	
	Treatment ont.	I don't know/ not sure	8	
		No response	9	
C.13	If a person with Ebola	Yes	1	
	like symptoms goes	No	2	
	immediately (within one	I don't know/ not sure	3	
	• •			
	day) to a Health Facility			
	do you think he/she will			
	reduce the chance of			
	spreading it to			
	family/people they are			
	living with?	No response	4	
C.14	Do you believe	Yes	1	
	communities with high	No	2	
	risk of Ebola should be isolated?	I don't know/ not sure	3	
C 15	isoldleu?	No response	4	
C.15	Do you believe that	Yes	1	
	health workers who	No	2	
	I	I don't know/ not sure	3	

1	come to your community			
	to ask about Ebola			
	affected people and			
	people they have been in			
	touch with, are trying to			
	protect you from Ebola?	No response	4	
C.16	Who do you believe is	The community	1	
	the most influential in	The government/ Health Ministry/ County health team	2	
	stopping the spread of	local organizations	3	
	Ebola? (allow for more	Religious leaders	4	
	than one option)	foreign aid workers	5	
		Spiritual healers	6	
		Traditional healers	7	
		Survivors of Ebola	8	
		Chiefs & Elders/Traditional Leaders	9	
		Only God	10	
		Others	11	
		No response	12	
C.17	Do you believe that	Yes	1	
	traditional healers can	No	2	
	cure or treat you from Ebola?	I don't know/ not sure	3	
C.18	EDOId:	No response Yes	1	
C.16	Do you believe that	No	2	
	spiritual healers can cure	I don't know/ not sure	3	
	or treat you from Ebola?	No response	4	
D. BEH	IAVIOURS AND PRACTICES			
D.1	Have you taken any	Yes	1	Go to D2
	action to avoid being	No		
	infacted by Ebala?	110	2	Go to D3
1	infected by Ebola?	I don't know/ not sure	3	Go to D3
	infected by Ebola?			
D.2	In what ways have you	I don't know/ not sure	3	Go to D3
D.2	In what ways have you changed your behavior	I don't know/ not sure No response	3 4	Go to D3
D.2	In what ways have you changed your behavior or taken actions to avoid	I don't know/ not sure No response I wash my hands with soap and water more often	3 4 1	Go to D3
D.2	In what ways have you changed your behavior	I don't know/ not sure No response I wash my hands with soap and water more often I wash my hands with just water more often	3 4 1 2	Go to D3
D.2	In what ways have you changed your behavior or taken actions to avoid being infected? (select all applicable choices) – do	I don't know/ not sure No response I wash my hands with soap and water more often I wash my hands with just water more often I wash my hands with chlorine water often I clean my hands with other disinfectants more often, if	3 4 1 2 3	Go to D3
D.2	In what ways have you changed your behavior or taken actions to avoid being infected? (select all applicable choices) – do	I don't know/ not sure No response I wash my hands with soap and water more often I wash my hands with just water more often I wash my hands with chlorine water often I clean my hands with other disinfectants more often, if so, which disinfectants	3 4 1 2 3	Go to D3
D.2	In what ways have you changed your behavior or taken actions to avoid being infected? (select all applicable choices) – do	I don't know/ not sure No response I wash my hands with soap and water more often I wash my hands with just water more often I wash my hands with chlorine water often I clean my hands with other disinfectants more often, if so, which disinfectants I try to avoid crowded places	3 4 1 2 3 4 5	Go to D3
D.2	In what ways have you changed your behavior or taken actions to avoid being infected? (select all applicable choices) – do	I don't know/ not sure No response I wash my hands with soap and water more often I wash my hands with just water more often I wash my hands with chlorine water often I clean my hands with other disinfectants more often, if so, which disinfectants I try to avoid crowded places I drink Bittercola	3 4 1 2 3 4 5 6	Go to D3
D.2	In what ways have you changed your behavior or taken actions to avoid being infected? (select all applicable choices) – do	I don't know/ not sure No response I wash my hands with soap and water more often I wash my hands with just water more often I wash my hands with chlorine water often I clean my hands with other disinfectants more often, if so, which disinfectants I try to avoid crowded places I drink Bittercola I drink a lot of water / juice I drink traditional herbs	3 4 1 2 3 4 5 6	Go to D3
D.2	In what ways have you changed your behavior or taken actions to avoid being infected? (select all applicable choices) – do	I don't know/ not sure No response I wash my hands with soap and water more often I wash my hands with just water more often I wash my hands with chlorine water often I clean my hands with other disinfectants more often, if so, which disinfectants I try to avoid crowded places I drink Bittercola I drink a lot of water / juice	3 4 1 2 3 4 5 6 7	Go to D3
D.2	In what ways have you changed your behavior or taken actions to avoid being infected? (select all applicable choices) – do	I don't know/ not sure No response I wash my hands with soap and water more often I wash my hands with just water more often I wash my hands with chlorine water often I clean my hands with other disinfectants more often, if so, which disinfectants I try to avoid crowded places I drink Bittercola I drink a lot of water / juice I drink traditional herbs I take antibiotics (e.g. penicillin, amoxicillin) I wear gloves (if so ask, how many times you change the	3 4 1 2 3 4 5 6 7 8	Go to D3
D.2	In what ways have you changed your behavior or taken actions to avoid being infected? (select all applicable choices) – do	I don't know/ not sure No response I wash my hands with soap and water more often I wash my hands with just water more often I wash my hands with chlorine water often I clean my hands with other disinfectants more often, if so, which disinfectants I try to avoid crowded places I drink Bittercola I drink traditional herbs I take antibiotics (e.g. penicillin, amoxicillin) I wear gloves (if so ask, how many times you change the gloves daily:) I try to avoid physical contact with people I suspect may have Ebola	3 4 1 2 3 4 5 6 7 8 9	Go to D3
D.2	In what ways have you changed your behavior or taken actions to avoid being infected? (select all applicable choices) – do	I don't know/ not sure No response I wash my hands with soap and water more often I wash my hands with just water more often I wash my hands with chlorine water often I clean my hands with other disinfectants more often, if so, which disinfectants I try to avoid crowded places I drink Bittercola I drink traditional herbs I take antibiotics (e.g. penicillin, amoxicillin) I wear gloves (if so ask, how many times you change the gloves daily:) I try to avoid physical contact with people I suspect may have Ebola I avoid physical contact with everyone	3 4 1 2 3 4 5 6 7 8 9	Go to D3
D.2	In what ways have you changed your behavior or taken actions to avoid being infected? (select all applicable choices) – do	I don't know/ not sure No response I wash my hands with soap and water more often I wash my hands with just water more often I wash my hands with chlorine water often I clean my hands with other disinfectants more often, if so, which disinfectants I try to avoid crowded places I drink Bittercola I drink traditional herbs I take antibiotics (e.g. penicillin, amoxicillin) I wear gloves (if so ask, how many times you change the gloves daily:) I try to avoid physical contact with people I suspect may have Ebola	3 4 1 2 3 4 5 6 7 8 9	Go to D3

		Others	15	
		I don't know/ not sure	16	
		No response	17	
D.3	If you had a fever would	Yes	1	Go to D4
	you go to a health	No	2	Go to D5
	facility/ Ebola Treatment Unit?	I don't know/ not sure	3	Go to D7
		No response	4	Go to D7
D.4	How would you get	Walking	1	
	there? (tick all that	Bicycle	2	
	apply)	Motorbike	3	
		A friend or family member will take me	4	
		Private car	5	
		Public taxi	6	Go to D6
		Public bus	7	
		I would call for an ambulance	8	
		Others:	9	
		I don't know	10	
		No response	11	
D.5	If NO – Why Not? (select all applicable choices)	I have no money / can't afford to pay	1	
		I believe the hospital is contaminated with Ebola	2	
		People will think I have Ebola	3	
		I prefer to go to a nearby pharmacy instead	4	
		I prefer to go to a black bagger	5	
		I prefer to go to a traditional healer	6	Go to D7
		I prefer to go to a spiritual healer	7	
		Others	8	
		I don't know/ not sure	9	
		No response	10	
D.6	If you had a fever, how	Less than one day	1	
	long would you wait	One – two days	2	
	before going to a health facility?	Three – four days	3	
		Five – six days	4	
		One week or more	5	
		I don't know/ not sure	6	
		No response	7	
D.7	What would be the first	Don't tell anyone	1	
	thing you do if you touch	Wash your hands	2	
	a person suspected of	Tell family or friends	3	
	Ebola?	Call the hotline number/4455	4	
		Tell your community leader/ chief	5	
		Take own medicines	6	
		Go to the health centre or Ebola care centre or ETU	7	
		I don't know/ not sure	8	
		No response	9]

D.8	Would you go to the	Yes	1	Go to D9
	health facility/ Ebola Treatment Unit if you			Go to
	suspect that you may	No	2	D8a
	have contracted Ebola?	I don't know/ not sure	3	Go to D10
		No response	4	
D.8a	If no, why not?	I have no money / can't afford to pay	1	
		I believe the hospital is contaminated with Ebola	2	
		People will think I have confirmed Ebola	3	
		I prefer to go to a nearby pharmacy instead	4	
		I prefer to go to a black bagger	5	Go to
		I prefer to go to a traditional healer	6	D10
		I prefer to go to a spiritual healer	7	
		Others	8	
		I don't know/ not sure	9	
		No response	10	
D.9	If yes, how long would	Less than one day	1	
	you wait before going to	One – two days	2	
	a health facility/ Ebola Treatment Unit?	Three – four days	3	
	Treatment Ont?	Five – six days	4	
		One week or more	5	
		I don't know/ not sure	6	
		No response	7	
D.10	What actions have you	Telling them about hand washing and hygiene	1	
	taken to protect your	Telling them what to do when someone in the community		
	family members from	is sick	2	
	Ebola? (Please mark all	Telling them not to touch sick person or dead body	3	
	that apply)	Preparing chlorine water every day for hand washing and		
		Buying items for protection like medicines, plastic bags,	4	
		gloves	5	
		Informing local leader or hotline(4455) if someone is sick		
		in the community or has died	6	
		Others	7	
		I don't know/ not sure	8	
		No response	9	
D.11	For how long have you	Less than 1 month	1	
	been practicing these behaviors?	1-2 Months	2	
	beliaviors:	3-4 months	3	
		5-6 months	4	
		7-8 months	5	
		9 month and more	6	
D.12	What would you do if	Nothing	1	
	you suspect someone in	Help care for the person at home (e.g., clean up their		
	your family has Ebola?	excretions / vomit; help bathe them)	2	
	(select all mentioned/	Check their temperature by touching their body	3	
	applicable choices)	Avoid all physical contact and bodily fluids of that person	4	

j İ	Ì			
		Call the hospital / Ebola phone line (4455)	5	
		Take the person to the health facility/ETU	6	
		Tell the community leader	7	
		Tell friends and family	8	
		Give home treatment	9	
		Stay away from them for1-7 days	10	
		Stay away from them for 8-14 days	11	
		Stay away from them for 15-21 days	12	
		, ,	1	
		Keep them at home	3	
		Others	14	
			1	
		I don't know/ not sure	5 16	
D 12	How can you cofely hale	No response		
D.13	How can you safely help care for a family member	Keep the person away from others	1	
	suspected of having	Use a single caregiver	2	
	Ebola while waiting for	Do not touch the person or their body fluids	3	
	help to arrive? What can	Do not touch things the person has touched (e.g soiled		
	you do? (select all mentioned; DO NOT read	clothes)	4	
	choices)	Use protective barriers such as gloves	5	
	Sile is a second	Frequently wash hands	6	
		Provide sick person with food, water, and other fluids	7	
		Others	8	
		I don't know/ not sure	9	
		No response	10	
D.14	What happens if	They won't be able to do anything for him/her and may		
	someone suspected of	die there	1	
	having Ebola goes to the hospital / health facility?	They will take care of him/her (rehydrate, give medicines/food, monitor status)	2	
	(select all applicable	They will definitely cure the person from Ebola	3	
	choices)	They will find a way to kill the patient so that he/she	3	
		doesn't spread Ebola to others	4	
		They will be turn away	5	
		Others	6	
		I don't know/ not sure	7	
		No response	8	
D.15	If there was a case of a	Yes	1	
	family member with	No	2	
	possible symptoms of Ebola would you allow	I don't know/ not sure	3	
	the health workers to	,		
ļ l	talk to your family and			
	talk to your family and find out more?	No response	4	
D.16		No response Not touch the body	4	
D.16	find out more? If a family member became sick and died,	·		
D.16	find out more? If a family member became sick and died, (and you didn't know the	Not touch the body	1	
D.16	find out more? If a family member became sick and died,	Not touch the body Wash the body	1 2	

	all that apply)			D18
	,	Other:	6	
		I don't know/ not sure	7	
		No response	8	
D.17	If a family member	Wash the body	1	
	suspected of Ebola dies,	Immediately bury the body yourselves	2	Got to
	what would you do with the body? (Tick all that	Take the body to a funeral home	3	D20
	apply)	Contact and wait for the burial team to bury the body	4	Go to D18
		Other:	5	
		I don't know/ not sure	6	Go to
		No response	7	D20
D.18	How would you contact		1	Go to
	the burial team to bury	Call 4455		D19
	the body?	Call local number	2	
		Tell community leader	3	
		Call the radio station	4	
		Call family member	5	
		Other	6	
		I den't be and a see	7	Go to
		I don't know/ not sure	8	D20 Go to
		No response		D20
D.19	How long would you	Less than one day	1	
	wait for the burial team	One – two days	2	
	to arrive before you or your community took	Three – four days	3	
		Five – six days	4	
	action yourself?	More than one week	5	
D.20	Who decides on what	The traditional chief or leader	1	
	burial rites and rituals	Community elders	2	
	should be followed in	The whole community	3	
	your community? (select	Only the family	4	
	all mentioned/ that	The women in the community/family	5	
	apply)	The men in the community/family	6	
		It's a tradition	7	
		Others	8	
		I don't know/ not sure	9	
		No response	10	
D.21		Yes	10	
	In the past month, have	No	2	
	you been around a dead			
D.22	body?	No response	3	
U.ZZ	Did YOU participate in a	Yes	1	Go to
	funeral/burial ceremony in the past month (30	No	2	D24
	days)?		1	Go to
	~~1~1.	No response	3	D24
D.23	During the funeral /	Touched the dead body	1	

	burial ceremony which	Washed the dead body	2	
	of the following did YOU	Touched other people at the burial ceremony (hug,		
	do? (select all applicable	handshake, etc.)	3	
	choices – read ALL	Cried over the body but did not touch it	4	
	Choices)	I did not touch the body	5	
	(If the respondent	I did not wash the body	6	
	touched or washed the body recommend that	I did not touch other people at the burial ceremony	7	
	the person call 4455 AND	Others	8	
	INFORM THEIR			
	COMMUNITY LEADER			
	immediately, record the			
	address to follow up).			
	ALSO STOP THE INTERVIEW and INFORM			
	YOUR SUPERVISOR			
	IMMEDIATELY)	No response	9	
D.24	If a family member died,	Yes	1	
	would you accept other	No	2	
	ways of funeral/burial that would NOT involve	I don't know/ not sure	3	
	the touching or washing	Taon Cknow, nocoure	3	
	of the dead body?	No response	4	
D.25	Do you know the	Yes (If so, what is the Number?) Enumerator:		
	number to call to report	Correct Incorrect	1	
	a suspected Ebola case	No	2	
	or ask questions about	I don't know/ not sure	3	
	Ebola?	No response	4	
D.26	Have you ever called the	Yes		Go to
	4455 Hotline Number?		1	D27
				Go to
		No	2	D29
		I don't remember/ not sure	3	Go to D29
		Table Fellichischy Hot said		Go to
		No response	4	D29
D.27	What was the reason for	Get health information on Ebola	1	
	calling the hotline	Report a death	2	
	number?	Report a suspected case	3	
		Want to know if the number is working	4	
		Others	5	
		- Stricts	6	Go to
		I don't remember/ not sure		D29
				Go to
2.55		No response	7	D29
D.28	Did you get the	Yes	1	
	information you wanted	No	2	
	or immediate action	I don't remember/ not sure	3	
	when you called the			
D 30	4455 hotline number?	No response	4	
D.29	In the past 3 months	Yes	1	

	have you participated in	No	2	
	any community activity			Go to
	to stop Ebola from	I don't remember/ not sure	3	D31
	coming into your			
D 20	community?	No response	4	
D.30	What did you do? (mark all that apply) *	Spreading awareness	1	
	an that apply)	Demonstrating prevention actions	2	
		Attending meetings about Ebola	3	
		Giving instructions to/supervising others	4	
		Distributing materials (Kits/ posters/ etc) for protection	5	
		Contact tracing and case finding	6	
		Conducting safe burials as part of burial teams	7	
		Others (specify):	8	
D.31	If there was an approved	Yes	1	
	vaccine that could	No	2	
	prevent Ebola, would	Not sure/ don't know	3	
	you accept it for yourself			
E 10150	and your family?	No response	4	
	RMATION CHANNELS, NETW		1	
E.1	How did you hear or	Radio	1	
	learn about Ebola?	Television	2	
	(select all	Megaphone public announcements/Town criers	3	
	mentioned/that apply)	House-to-house visits by health workers	4	
		Church / Mosque / other religious venues	5	
		Other community meetings	6	
		Relatives / Friends / Neighbors/ Community members	7	
		Newspaper / Flyers / Brochures / Posters/ Other print		
		materials	8	
		Internet / Blog / Website / Social Media / Facebook	9	
		Traditional/Community leaders	10	
		Government/ County Health Team	11	
		Billboards/ wall paintings		
		Mobile phone / text messages	12	
		Call center/hotline/4455	13	
		Burial team that was in your community	14	
		Others	15	
		I don't remember/ not sure	16	
		No response	17	
E.2	How did you hear or	Radio	1	
	learn about health	Television	2	
	workers who go from house to house to	Megaphone public announcements/Town criers	3	
	questions about whether	Health workers came to my house	4	
	you have been around	Health workers came to other houses in my community	5	
	Ebola patients (reference	Church / Mosque / other religious venues	6	
	to contact tracers)?	Other community meetings	7	
ı	1	, 0-	-	

	*(Select all that apply)	Relatives / Friends / Neighbors/ Community members	8	
		Newspaper / Flyers / Brochures / Posters/ Other print		
		materials	9	
		Internet / Blog / Website / Social Media / Facebook	10	
		Traditional/Community leaders	11	
		Government/ County Health Team	12	
		Mobile phone / text messages	13	
		Call center/hotline/4455	14	
		Burial team that was in your community	15	
		Others	16	
		I don't remember/ not sure	17	
		No response	18	
E.3	Through what ways	Radio	1	
	would you prefer to get information on Ebola?	Television	2	
	(select all mentioned/	Megaphone public announcements/Town criers	3	
	applicable choices)	House-to-house visits by health workers	4	
		Church / Mosque / other religious venues	5	
		Other community meetings	6	
		Relatives / Friends / Neighbors/ Community members	7	
		Newspaper / Flyers / Brochures / Posters/ Other print		
		materials	8	
		Internet / Blog / Website / Social Media / Facebook	9	
		Traditional/Community leaders	10	
		Government/ County Health Team	11	
		Mobile phone / text messages	12	
		Call center/hotline/4455	13	
		Burial team that was in your community	14	
		Others	15	
		I don't remember/ not sure	16	
		No response	17	
E.4	Who do you trust to give	No one	1	
	you reliable health	Government / Ministry of Health and Social Welfare	2	
	information? (select all	The Media	3	
	applicable choices)	Health and medical professionals	4	
		Relatives and friends	5	
		Religious leaders (e.g. pastor, Imam)	6	
		Spiritual healers	7	
		Traditional healers	8	
		Call center/hotline/4455	9	
		Health workers that go from house to house	10	
		Burial team that was in your community	11	
		Others	12	
		I don't remember/ not sure	13	
		No response	14	

E.5	Who would you want to	No one	1	
	provide you with	Government / Ministry of Health and Social Welfare	2	
	information about other funeral/burial practices	The Media	3	
	that do not involve	Health and medical professional	4	
	touching or washing the	Relatives and friends	5	
	body? (select all	Religious leaders (e.g. pastor, Imam)	6	
	applicable choices)	Traditional healers	7	
		Call center/hotline/4455	8	
		Health workers that came to your community	9	
		Burial team that was in your community	10	
		Others	11	
		I don't know/ not sure	12	
		No response	13	
E.6	During the last 3 months	Every day	1	
	how often have you listened to the radio?	At least once a week	2	
	listened to the radio?	Less than once a week	3	
		Did not listen to radio in last 3 months	4	Go to E8
		I don't know/ not sure	5	
		No response	6	
E.7	In the past 3 months,	Almost everyday	1	
	have you heard any	Sometimes	2	
	messages on Ebola on	No	3	
	the radio?	I don't know/ not sure	4	
		No response	5	
E.8	In the past 3 months	Yes	1	_
	have you been visited by someone who gave you	No	2	If Yes, Go to E9.
	information and	I don't remember/ not sure	3	Else skip
	discussed Ebola?	No response	4	to E10
E.9	Who was this person?	Community health volunteer	1	
	(Select all that apply)	Teacher	2	
		Traditional leader	3	
		Religious Leader	4	
		Government/Ministry Officials/Ebola Task Force	5	
		Other (please specify):	6	
		I don't know	7	
		No response	8	
E.10	Do you need more	Yes	1	If V C-
	information on Ebola?	No	2	If Yes, Go to E11.
		I don't remember/ not sure	3	Else skip
		No response	4	to F1
E.11	What area(s) do you need additional	Cause / origin of the disease	1	
	information on? Select	Signs and symptoms of the disease	2	
	all that apply	Ways to prevent the disease	3	
		Medical care and treatment options for those with the	4	

		disease		
		Home-based care for someone who is sick and suspected		
		to have Ebola	5	
		How to protect others in the house if a household	J	
		-	6	
		member is suspected of Ebola	0	
		Safe burials of those suspected/confirmed to have died from Ebola	7	
			7	
		Survivors of Ebola	8	
		Support and care for those quarantined because they		
		have been exposed to Ebola	9	
		New Ebola vaccine	10	
		New Ebola treatments	11	
		Information about new national cemetery	12	
		Plans for national monument	13	
		Others	14	
		I don't know/ not sure	15	
		No response	16	
. ATTI	ITUDES TOWARD SURVIVORS			
F.1	When a person	Yes	1	
	confirmed with Ebola,			
	survives and has a	No	2	
	certificate from the	Not sure	3	
	government, do you	THOU SAIL C		
	believe that you can still			
	get Ebola from them			
	through touching or			
	hugging?	No response	4	
			4	
	When a person	Yes	1	
	When a person confirmed with Ebola	Yes No		
	When a person confirmed with Ebola survives and has a		1	
	When a person confirmed with Ebola survives and has a certificate from the	No	1 2	
F.2	When a person confirmed with Ebola survives and has a	No	1 2	
F.2	When a person confirmed with Ebola survives and has a certificate from the government, do you believe that you can still get Ebola from them	No	1 2	
F.2	When a person confirmed with Ebola survives and has a certificate from the government, do you believe that you can still get Ebola from them through sex with them	No	1 2	
∹.2	When a person confirmed with Ebola survives and has a certificate from the government, do you believe that you can still get Ebola from them through sex with them within the first 3	No Not sure	1 2 3	
	When a person confirmed with Ebola survives and has a certificate from the government, do you believe that you can still get Ebola from them through sex with them within the first 3 months?	No Not sure No response	1 2 3	
	When a person confirmed with Ebola survives and has a certificate from the government, do you believe that you can still get Ebola from them through sex with them within the first 3 months? Once people are cured of	No Not sure No response Yes	1 2 3 4 1	
F.2 F.3	When a person confirmed with Ebola survives and has a certificate from the government, do you believe that you can still get Ebola from them through sex with them within the first 3 months? Once people are cured of Ebola, are they likely to	No Not sure No response	1 2 3	
	When a person confirmed with Ebola survives and has a certificate from the government, do you believe that you can still get Ebola from them through sex with them within the first 3 months? Once people are cured of	No Not sure No response Yes	1 2 3 4 1	
∹.3	When a person confirmed with Ebola survives and has a certificate from the government, do you believe that you can still get Ebola from them through sex with them within the first 3 months? Once people are cured of Ebola, are they likely to get Ebola again?	No Not sure No response Yes No	1 2 3 4 1 2	
	When a person confirmed with Ebola survives and has a certificate from the government, do you believe that you can still get Ebola from them through sex with them within the first 3 months? Once people are cured of Ebola, are they likely to get Ebola again? Do you know anyone	No Not sure No response Yes No I don't know/ not sure No response Yes	1 2 3 4 1 2 3 4 1	
₹.3	When a person confirmed with Ebola survives and has a certificate from the government, do you believe that you can still get Ebola from them through sex with them within the first 3 months? Once people are cured of Ebola, are they likely to get Ebola again? Do you know anyone who has recovered from	No Not sure No response Yes No I don't know/ not sure No response Yes No	1 2 3 4 1 2 3 4 1 2	
₹.3	When a person confirmed with Ebola survives and has a certificate from the government, do you believe that you can still get Ebola from them through sex with them within the first 3 months? Once people are cured of Ebola, are they likely to get Ebola again? Do you know anyone	No Not sure No response Yes No I don't know/ not sure No response Yes No I don't remember/ not sure	1 2 3 4 1 2 3 4 1 2 3	
F.4	When a person confirmed with Ebola survives and has a certificate from the government, do you believe that you can still get Ebola from them through sex with them within the first 3 months? Once people are cured of Ebola, are they likely to get Ebola again? Do you know anyone who has recovered from Ebola?	No Not sure No response Yes No I don't know/ not sure No response Yes No I don't remember/ not sure No response	1 2 3 4 1 2 3 4 1 2 3 4	
₹.3	When a person confirmed with Ebola survives and has a certificate from the government, do you believe that you can still get Ebola from them through sex with them within the first 3 months? Once people are cured of Ebola, are they likely to get Ebola again? Do you know anyone who has recovered from	No Not sure No response Yes No I don't know/ not sure No response Yes No I don't remember/ not sure	1 2 3 4 1 2 3 4 1 2 3	

	certificate from a			
	Government Health			
	Facility stating he/she is			
	Ebola free, would you			
	buy fresh bread from			
	him or her?	No response	4	
F.6	Do you think that a	Yes	1	
	school going child that	No	2	
	has survived Ebola and	I don't know/ not sure	3	
	has a certificate from a		4	
	Government Health			
	Facility stating he/she is			
	Ebola-free puts other			
	students in their class at			
	risk of infection?	No response		
F.7	Would you welcome	Yes	1	
	someone back into your	No	2	
	community/	I don't know/ not sure	3	
	neighborhood after that	·		
	neighbor has recovered		_	
	from Ebola?	No response	4	
F.8	If a child that you know	Yes	1	
	has lost both parents to	No	2	
	Ebola but is not infected	I don't know / not sure	2	
	or has recovered, would	I don't know/ not sure	3	
	you be willing to bring			
	him/her to live with your			
	family?	No response	4	

APPENDIX B - KAP II WOMEN'S SURVEY

SECTION 1: RESPONDENT'S BACKGROUND READ OUT LOUD: In this first section, I would like to ask you some questions about your background **CODING CATEGORIES** NO. **QUESTION GOTO** 1.2. Place of residence URBAN 1 (Observed) 1.3. How old are you? è 1.5 (In completed years) DON'T KNOW 98 è 1.5 1.5. What is your marital status? SINGLE/NEVER MARRIED 1 COHABITATING 3 SEPARATED/DIVORCED/WIDOWED 4 1.6. What is your religion? CHRISTIAN...... 1 ISLAM/MUSLIM......2 OTHER (SPECIFY):96 1.7. Did you ever attend school? NO 2 è 1.9 1.8. What is the highest level of education ELEMENTARY (1 – 6) 1 you have completed? JUNIOR HIGH (7 – 9)......2 UNIVERSITY (BACHELOR, MASTERS, DOCTORATE) 4 OTHER (SPECIFY):96 DON'T KNOW98 1.9. UNEMPLOYED 1 What kind of work (main occupation) do you currently do? PRIVATE BUSINESS (EXCLUDING PETTY TRADER...... 2 PLUMBER / CARPENTER / ELECTRICIAN/ BUILDER) .. 3 PETTY TRADER...... 4 SELECT ONE RESPONSE ONLY FARMER 5 TEACHER / LECTURER / INSTRUCTOR 6 OTHER GOVERNMENT EMPLOYEES 7 STUDENT...... 8 OTHER (SPECIFY): 96 1.10. Does your household have at least one ITEM YES NO of the following items? **ELECTRICITY THAT IS CONNECTED** 1 2 CONNECTED TO A GENERATOR 1 2 **MOBILE PHONE** 1 2 MATTRESS (NOT MADE OF STRAW OR GRASS) 2 1 2 ADULT BICYCLE **TABLE** 1 2 **CHAIR** 1 2 CUPBOARD 1 2 **RADIO TELEVISION** PIPED WATER...... 1 1.11. What is the main source of drinking water for you and your family? DUG WELL...... 3 RAINWATER 4 SURFACE WATER (RIVER/DAM/ LAKE/POND/ STREAM/CANAL/ IRRIGATION CHANNEL) 5 HAND PUMP 6

OTHER (SPECIFY) READ OUT LOUD: I would like to make a list of everyone in your family that sleeps under the same roof, and eats from the same pot. Then I will ask some questions about each member of your household. Start from the head of the household Age: Enter "0" if Did he/she see a CHW Name of household member Has he/she been sick (FIRST NAME ONLY) Gender less than 1 year in the past 2 months? or go to clinic/ health facility? old: enter "98" if unknown; enter "96" if Don't Don't F Ν М ٧ N age is 96 or Know Know older 1.12. 98 98 1 2 1 2 1.13. 1 2 2 98 2 98 [|] 1 1 1 1.14. 1 2 2 98 1 2 98 98 1.15. 1 2 1 2 1 2 98 1.16. 1 2 1 2 98 1 2 98 2 98 1.17. 1 1 2 1 2 98 1.18. 1 2 1 2 98 1 2 98 2 98 1.19. 1 2 1 1 2 98 1.20. 1 2 1 2 98 1 2 98 2 2 98 2 1.21. 1 1 1 98 1.22. 1 2 1 2 98 1 2 98 1.23. 2 2 98 1 2 98 1 1 1.24. 2 2 98 2 98 1 1 1 1.25. 1 1 98 98 1.26. 2 2 98 2 1 1 1 98 2 1 2 98 1.27. 1 1 2 98 DO NOT READ QUESTION OUTLOUD. INDICATE YES 1 IF THERE IS A CHILD UNDER 5. NO 2 Has anyone in your household lost their 1.28. YES 1 job (or main source of income?) in the NO 2 è 1.30 DON'T KNOW 98 last year? è 1.30 è 1.30 1.29. Who lost their job in the last year? WIFE......2 Probe: Anyone else? HUSBAND......3 SON......4 **MULTIPLE ANSWERS** DAUGHTER......5 BROTHER/SISTER6 NIECE/NEPHEW7 AUNT/UNCLE8 MOTHER-IN-LAW/FATHER-IN-LAW9 GRANDMOTHER/GRANDFATHER10 GRANDCHILD11 OTHER (SPECIFY): DON'T KNOW......98 NO RESPONSE99 1.30. What is your main source of fuel to cook WOOD......1 your food for the day? CHARCOAL2

 KEROSENE
 3

 OTHER (SPECIFY)
 96

 NO RESPONSE
 98

In the PAST 12 MONTHS, how often have

you gone without that main source to

1.31.

è 1.32

	propage or cook your food for the day?	RARELY3	
	prepare or cook your food for the day? READ OPTIONS 1 – 4 OUT LOUD		
	READ OPTIONS 1 - 4 OUT LOOD	NEVER	
4.00	L II DACT 12 MONTHS I G	DON'T KNOW98	
1.32.	,	OFTEN	
	you gone without enough clean water to	SOMETIMES	
	drink?	RARELY3	
		NEVER	
	READ OPTIONS 1 – 4 OUT LOUD	DON'T KNOW98	
1.33.	In the PAST 12 MONTHS, how often have	OFTEN1	
	you gone without medicines or medical	SOMETIMES2	
	treatment that you needed?	RARELY3	
		NEVER4	
	READ OPTIONS 1 – 4 OUT LOUD	DON'T KNOW98	
1.34.	In the PAST 12 MONTHS, how often have	OFTEN1	
	you gone without enough food to eat?	SOMETIMES2	
		RARELY3	
	READ OPTIONS 1 – 4 OUT LOUD	NEVER4	
		DON'T KNOW98	
1.35.	How often do you listen to the radio?	DAILY1	
		4-6 DAYS A WEEK2	
		1-3 DAYS A WEEK3	
		LESS THAN ONCE A WEEK4	
		1-2 TIMES PER MONTH5	
		LESS THAN ONCE A MONTH6	
		NEVER7	è 1.37
1.36.	Which radio stations do you listen to?	1 MEDIA HOUSE1	
	·	CATHOLIC MEDIA CENTER2	
		DESTINY RADIO3	
	Probe: Anything else?	ETERNAL LOVE WINNING AFRICA4	
	, 0	FANIMA BROADCASTING5	
	MULTIPLE ANSWERS	LIB 246	
		LIBERIA BROADCASTING SYSTEM7	
		LIBERIA WOMEN DEMOCRACY RADIO8	
		LIBERTY CHRISTIAN BROADCASTING NETWORK9	
		LUX FM 106.610	
		MAGIC INC11	
		PARROT12	
		POWER FM	
		RADIO ADVENT	
		RADIO MONROVIA15	
		ROYAL COMM, INC16	
		SKY COMM, INC	
		SUPER FM	
		TRUTH FM 96.1	
		UNMIL RADIO20	
		OTHER (SPECIFY)96	
		DON'T KNOW98	
1.37.	How often do you watch TV?	DAILY	
		4-6 DAYS A WEEK	
		1-3 DAYS A WEEK	
		LESS THAN ONCE A WEEK4	
		1-2 TIMES PER MONTH5	
		LESS THAN ONCE A MONTH	
		NEVER	
1.38.	How often do you read the newspaper?	DAILY	
1.36.	now often do you read the newspaper?	4-6 DAYS A WEEK	
		1-3 DAYS A WEEK	
		T-2 DAIS A MEEK3	

ļ		LESS THAN ONCE A WEEK4	
		1-2 TIMES PER MONTH5	
		LESS THAN ONCE A MONTH6	
		NEVER7	
1.39.	How often do you use a mobile (cell	DAILY1	
	phone)?	4-6 DAYS A WEEK2	
		1-3 DAYS A WEEK3	
		LESS THAN ONCE A WEEK4	
		1-2 TIMES PER MONTH5	
		LESS THAN ONCE A MONTH6	
		NEVER7	è 1.40
1.40.	How often do you send or receive a text	DAILY1	
	on mobile (cell phone)?	4-6 DAYS A WEEK2	
		1-3 DAYS A WEEK3	
		LESS THAN ONCE A WEEK4	
		1-2 TIMES PER MONTH5	
		LESS THAN ONCE A MONTH6	
		NEVER7	
1.41.	Do you have a hand-washing stand in	YES1	
	your compound?	NO2	è 2.1
1.42.	Please show me where members of	OBSERVED1	
ļ	your household most often wash their	NOT OBSERVED IN HOUSE/YARD2	
	hands.	NO PERMISSION TO SEE3	è 2.1
1.43.	OBSERVATION ONLY – DO NOT READ	WATER IS AVAILABLE1	
ļ	Observe presence of water at the	WATER IS AVAILABLE	
	handwashing station	WATER IS NOT AVAILABLE2	
1.44.	OBSERVATION ONLY – DO NOT READ	SOAP OR DETERGENT1	
l l	Observe presence of soap, detergent, or	ASH, MUD, SAND2	
	other cleansing agent	NONE3	

SECTION 2: CURRENT TREATMENT-SEEKING PATTERNS

READ OUT LOUD: Thank-you. In this next section, I would like to ask about recent illness in your family

READ OUT LOUD: Thank-you. In this next section, I would like to ask about recent illness in your family				
NO.	QUESTION	CODING CATEGORIES	GO ТО	
2.1	Is there a TRADITIONAL HEALER OR	YES 1		
	COUNTRY DOCTOR in this community?	NO	è 2.3	
		DON'T KNOW 98	è 2.3	
2.2	Please tell me the 5 main health issues	TRAUMA (BROKEN LEG OR HAND) 1		
	that the traditional healer or country	SPELL (EPILEPSY)		
	doctor treats?	PILES (HEMORRHOIDS)		
		JAUNDICE 4		
	Probe: Anything else?	FEVER		
		DIARRHEA		
	MULTIPLE ANSWERS	TIREDNESS/WEAKNESS 7		
		FERTILITY		
		SKIN ISSUES9		
		HEADACHES		
		BODY ACHES 11 COUGH/CHEST ILLNESS 12		
		·		
		HIV/STD		
		LEG ULCER		
		FOOD POISONING		
		SNAKE BITE		
		MATERNAL HEALTH ISSUES		
		TYPHOID (COLD BODY)		
		HIGH BLOOD PRESSURE		
		MALNUTRITION		
		OTHER (SPECIFY)		
		DON'T KNOW 98		
2.3	Is there a DRUG STORE in this	YES 1		
	community?	NO2	è 2.5	
		DON'T KNOW98	è 2.5	
2.4	Please tell me the 5 main health issues	TRAUMA (BROKEN LEG OR HAND) 1		
	that DRUG STORES treats?	SPELL (EPILEPSY)		
		PILES (HEMORRHOIDS)		
	Probe: Anything else?	JAUNDICE 4		
		FEVER 5		
	MULTIPLE ANSWERS	DIARRHEA 6		
		TIREDNESS/WEAKNESS		
		FERTILITY		
		SKIN ISSUES 9		
		HEADACHES		
		COUGH/CHEST ILLNESS		
		HIV/STD		
		STOMACH ULCER		
		LEG ULCER		
		FOOD POISONING		
		SNAKE BITE		
		MATERNAL HEALTH ISSUES		
		TYPHOID (COLD BODY)		
		HIGH BLOOD PRESSURE20		
		MALNUTRITION21		
		OTHER (SPECIFY)		
		DON'T KNOW 98		
2.5	Is there a COMMUNITY HEALTH	YES		
	WORKER in this community?	NO2	è 2.7	
		DON'T KNOW98	è 2.7	

2.6	Please tell me the 5 main health issues	TRAUMA (BROKEN LEG OR HAND)	1	
2.0	that COMMUNITY HEALTH WORKERS	SPELL (EPILEPSY)		
	treat?	PILES (HEMORRHOIDS)		
	ticut:	JAUNDICE		
	Probe: Anything else?	FEVER		
	riobe. Allything else:	DIARRHEA	_	
	MULTIPLE ANSWERS	TIREDNESS/WEAKNESS		
	WIGHTIFLE ANSWERS	FERTILITY		
		SKIN ISSUES		
		HEADACHES		
		BODY ACHES		
		COUGH/CHEST ILLNESS		
		HIV/STD		
		STOMACH ULCER		
		LEG ULCER		
		FOOD POISONING	_	
		SNAKE BITE		
		MATERNAL HEALTH ISSUES		
		TYPHOID (COLD BODY)		
		HIGH BLOOD PRESSURE	20	
		MALNUTRITION	21	
		OTHER (SPECIFY)	96	
		DON'T KNOW	98	
2.7	Does anyone else provide health	YES	1	
	services in this community?	NO	2	è 2.9
		DON'T KNOW	98	è 2.9
2.8	If yes, specify			
2.9	Is there a CLINIC/HEALTH FACILITY	YES	1	
	that you could go to if needed?	NO		è 2.13
	(If the respondent said CLINIC/HEALTH	DON'T KNOW	98	è 2.13
	FACILITY, select yes, and do not ask			
	this question out loud)			
2.10	How long does it take to reach the	LESS THAN 15 MINUTES	1	
	nearest CLINIC/HEALTH FACILITY?	15-30 MINUTES	2	
		30-60 MINUTES		
		MORE THAN 60 MINUTES	4	
		MORE THAN 2 HOURS	5	
		HALF A DAY	6	
		MORE THAN HALF A DAY	7	
		DON'T KNOW	98	
2.11	How do you get there?	WALK		
	, , ,	BICYCLE		
		PUBLIC TRANSPORT (BUS, MOTORCYCLE)		
		PRIVATE VEHICLE (HIRED CAR)		
		OTHER (SPECIFY)		
l		5 · · · 2 · · (5 · E c · · / · · · · · · · · · · · · · · · ·]

2.12	Please tell me up to 5 main health	TRAUMA (BROKEN LEG OR HAND) 1
	issues that are treated at the	SPELL (EPILEPSY)2
	CLINIC/HEALTH FACILITY?	PILES (HEMORRHOIDS) 3
		JAUNDICE 4
	Probe: Anything else?	FEVER 5
		DIARRHEA 6
	MULTIPLE ANSWERS	TIREDNESS/WEAKNESS7
		FERTILITY 8
		SKIN ISSUES9
		HEADACHES 10
		BODY ACHES 11
		COUGH/CHEST ILLNESS 12
		HIV/STD13
		STOMACH ULCER 14
		LEG ULCER
		FOOD POISONING 16
		SNAKE BITE 17
		MATERNAL HEALTH ISSUES 18
		TYPHOID (COLD BODY) 19
		HIGH BLOOD PRESSURE20
		MALNUTRITION21
		OTHER (SPECIFY)96
		DON'T KNOW98

READ OUT LOUD: I am going to read a list of common health needs. For each of them, please tell me who would you see first to take care of the illness REMEDIES/NONE BLACK BAGGER/ TABLET MAN HEALTH WORKER DOCTOR/HEALTH FACILITY DRUG STORE VENDOR DON'T KNOW TRADITIONAL HEALER TRADITIONAL MIDWIFE COMMUNITY HOME Who would you see first if a 2.13 child under five years of age 1 2 3 4 5 6 7 96 98 has had diarrhea for 2 days? Who would you see first if a 2.14 child under five years has 1 2 3 4 5 6 7 96 98 Who would you see first if a child under five years has a 2.15 2 6 7 96 98 1 3 4 5 cold, fast breathing, cough, stuffy nose? (pneumonia)? Who would you see first if a 2.16 child under five years has 1 2 3 4 5 6 7 96 98 measles (skin rashes)? Who would you see first if an 1 2 3 5 7 96 98 2.17 4 6 adult has fever? Who would you see first if an adult has chest pain, cough, 2 6 7 98 2.18 1 3 4 5 96 and sore throat? For women: Who would you 2.19 1 2 3 5 6 7 96 98 4 see for care during pregnancy? For women: Who would you 2.20 see to help you give birth to 1 2 3 4 5 6 7 96 98 your child? Who would you see for testing or treatment for discharge, 2.21 1 2 3 4 5 6 7 96 98 pain, puss, foul smell or sores in your genitals/private parts? Who would you see first if you 2.22 suspect someone in your 1 2 3 4 5 6 7 96 98 household has Ebola? Who would you see if someone 2.23 in your household has mental 2 6 7 96 98 1 3 4 5 health issues? 2.24 Did any of the children under five è 2.26 YES 1 years of age in your household have a NO...... 2 fever in the last 2 weeks? 2.25 Did any of the children under five YES 1 years of age in your household have a NO...... 2 è 2.38 fever in the last 6 months? è 2.38 DON'T KNOW

2.26	How severe do you think the fever	VERY SEVERE1	
	was?	MODERATE2	
		MILD3	
		DON'T KNOW98	
		NO RESPONSE99	
2.27	What did you do first to take care of	NOTHING1	è 2.30
	the fever?	GAVE WATER, FLUIDS, BATHED OR PRAYED2	è 2.30
		GAVE HERBS OR MEDICINES FROM HOME3	
		WENT TO TRADITIONAL HEALER/COUNTRY DOCTOR4	è 2.29
		WENT TO A BLACK BAGGER5	è 2.29
		WENT TO A DRUG STORE6	è 2.29è 2
		WENT TO THE COMMUNITY HEALTH WORKER7	.29
		WENT TO THE CLINIC/HEALTH FACILITY8	è 2.29
		OTHER (SPECIFY)	è 2.29
		DON'T KNOW98	è 2.38
2.28	What herbs or medicine did you give	NONE1	è 2.30
	or prescribe him/her?	LOCAL HERBS2	è 2.30
		ANTIMALARIALS STORED AT HOME	è 2.30
		ANTIPYRETICS4	è 2.30
		OTHER DRUGS STORED AT HOME5	è 2.30
		OTHER (SPECIFY)96	
		DON'T KNOW98	
2.29	What herbs or medicine did they give	NONE1	
	or prescribe him/her?	LOCAL HERBS2	
		ANTIMALARIALS STORED AT HOME3	
		ANTIPYRETICS4	
		OTHER DRUGS STORED AT HOME5	
		OTHER (SPECIFY)96	
		DON'T KNOW98	
2.30	Did this resolve the fever?	YES	è 2.37
		NO	
		DON'T KNOW98	
2.31	What did you do next for the fever?	WENT TO TRADITIONAL HEALER/COUNTRY DOCTOR1	
		WENT TO A BLACK BAGGER	
		WENT TO A DRUG STORE/PHARMACY	
		WENT TO THE COMMUNITY HEALTH WORKER4	
		WENT TO THE CLINIC/HEALTH FACILITY5	
		OTHER (SPECIFY)96	
		DON'T KNOW98) a ao
2 22	Harris and development to the form	L L I Davis	è 2.38
2.32	How many days did you wait before	/ / Days	
2 22	going there?	DON'T KNOW98	
2.33	What was the main reason for going	CHEAP	
	there?	ONLY OPTION OPEN	
		BEST CARE AVAILABLE	
		NO WAITING TIME	
		EFFECTIVE TREATMENT (ALWAYS HAS MEDICINE)	
		TRUST THEM6	
		EASY TO FIND	
		CLOSE TO HOME	
		DON'T KNOW98	
		NO RESPONSE99	
2.4	What did the control of the	NOTHING	2220
2.34	What did they give or prescribe	NOTHING	è 2.36
	him/her?	ANTIMALARIALS2	è 2.36
		ANTIBIOTICS3	è 2.36

		TO STAY/TAKE TO HOSPITAL5	
	MULTIPLE ANSWERS	OTHER (SPECIFY)96	è 2.36
	WOLTIPLE ANSWERS	i i	è 2.36
2.25	N/ 1 1711 1 20 1 1	DON'T KNOW98	e 2.36
2.35	Was the child admitted to the	YES	
	hospital?	NO	
		DON'T KNOW98	
		NO RESPONSE99	
2.36	Did the child get better?	YES1	
		NO2	è 2.38
		DON'T KNOW3	è 2.38
		NO RESPONSE99	è 2.38
2.37	How long did it take for the child to	1 DAY/SAME DAY1	
	recover?	2 DAYS2	
		3 DAYS3	
		4 DAYS4	
		5+ DAYS5	
		DON'T KNOW98	
		NO RESPONSE99	
2.38	The next time one of the children	HOME1	
	under five in your household has a	TRADITIONAL HEALER/COUNTRY DOCTOR2	
	fever, where will you seek treatment	DRUG STORE3	
	first?	COMMUNITY HEALTH WORKER4	
		CLINIC/HEALTH FACILITY5	
		OTHER (SPECIFY)96	
		DON'T KNOW98	
READ	OUTLOUD: Now, I will ask you some othe	r questions about health in your family.	
2.39	Did you hear about the POLIO	YES1	
	campaign in February of this year?	NO2	è 2.42
		DON'T KNOW98	è 2.42
		NO RESPONSE99	è 2.42
2.40	Did all the children under five years of	YES1	è 2.45
	age in your household receive an	NO2	
	injection during the POLIO campaign	DON'T KNOW98	è 2.42
	in February this year?	NO RESPONSE99	è 2.42
2.41	What is the reason they did not	ALREADY HAD THE VACCINATION1	
	receive an injection in February?	IT DID NOT COME TO OUR COMMUNITY2	
		SCARED VACCINES CARRY EBOLA3	
	Probe: Anything else?	VACCINES ARE NOT SAFE4	
		NO PERMISSION FROM CHILD'S FATHER5	
	MULTIPLE ANSWERS	I DID NOT KNOW ABOUT IT6	
		OTHER (SPECIFY)96	
		DON'T KNOW98	
		NO RESPONSE99	
2 42	<u> </u>		
2.42	Did you hear about the POLIO	YES1	
2.42	Did you hear about the POLIO campaign in JUNE of this year?	YES	è 2.45
2.42			è 2.45 è 2.45
2.42		NO2	
2.42		NO	è 2.45
	campaign in JUNE of this year?	NO	è 2.45 è 2.45
	campaign in JUNE of this year? Did all the children under five years of	NO 2 DON'T KNOW 98 NO RESPONSE 99 YES 1	è 2.45 è 2.45
	campaign in JUNE of this year? Did all the children under five years of age in your household receive an	NO 2 DON'T KNOW 98 NO RESPONSE 99 YES 1 NO 2	è 2.45 è 2.45

TOID NOT COME TO OUR COMMUNITY 2 2 2 2 2 2 2 2 2	2.44	What is the reason they did not	ALREADY HAD THE VACCINATION1	
SCARED VACCINES CARRY EBOLA 3 A NO PERMISSION FROM CHILD'S FATHER 5 DID NOT KNOW ABOUT IT 5 SED DON'T KNOW 98 DON'T KNOW 99 DON'T KNOW 99 DON'T KNOW POSSIBLE DON'T KNOW POSSIBLE	2.44	=		
Probe: Anything else? VACCINES ARE NOT SAFE		receive an injection in June:		
MULTIPLE ANSWERS		Bush at American stars		
MULTIPLE ANSWERS		Probe: Anything else?		
OTHER (SPECIFY)		**********		
DON'T KNOW		MULTIPLE ANSWERS		
NO RESPONSE 99				
2.45 Did you hear about the MEASLES campaign in May of last year?				
Campaign in May of last year?				
DON'T KNOW	2.45	I		
NO RESPONSE 99 è 2.48		campaign in May of last year?		
2.48				
of age in your household receive an injection during the MEASLES campaign in May? 2.47 What is the reason they did not receive an injection in May? Probe: Anything else? What is your opinion about vaccines in general? What is your opinion about vaccines in general? Probe: Anything else? AREADY HAD THE VACCINATION 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
injection during the MEASLES Campaign in May? NO RESPONSE 99 \$ è 2.48 è 2.48 2.48	2.46	-		è 2.48
Campaign in May? NO RESPONSE 99 è 2.48		of age in your household receive an		
2.47 What is the reason they did not receive an injection in May?		injection during the MEASLES	DON'T KNOW 98	è 2.48
Proceive an injection in May?		campaign in May?	NO RESPONSE99	è 2.48
Probe: Anything else? SCARED VACCINES CARRY EBOLA 3 VACINES CARRY EBOLA 4 NO PERMISSION FROM CHILD'S FATHER 5 1 1 1 1 1 1 1 1 1	2.47	What is the reason they did not	ALREADY HAD THE VACCINATION 1	
Probe: Anything else?		receive an injection in May?	IT DID NOT COME TO OUR COMMUNITY2	
NO PERMISSION FROM CHILD'S FATHER. 5 1 1 1 1 1 1 1 1 1		_	SCARED VACCINES CARRY EBOLA 3	
MULTIPLE ANSWERS		Probe: Anything else?	VACCINES ARE NOT SAFE 4	
OTHER (SPECIFY)			NO PERMISSION FROM CHILD'S FATHER5	
OTHER (SPECIFY)		MULTIPLE ANSWERS	I DID NOT KNOW ABOUT IT6	
DON'T KNOW				
NO RESPONSE 99 99			, , ,	
2.48 What is your opinion about vaccines in general?				
In general?	2 //8	What is your oninion about vaccines		
No.	2.40	= = = = = = = = = = = = = = = = = = = =		
Probe: Anything else?		in general.		
MULTIPLE ANSWERS		Prohe: Anything else?		
MULTIPLE ANSWERS		riobe. Anything eise:		
SPREAD EBOLA		MILLTIDLE ANGWEDS		
CAN SPREAD ILLNESS		WIGHTIFLE ANSWERS		
NOT SAFE				
OTHER (SPECIFY) 96 DON'T KNOW 98				
DON'T KNOW				
2.49 Did anyone in your household give birth in the last 12 months? NO			, ,	
birth in the last 12 months? NO	2.40			
2.50 Please think about the LAST time Someone (including yourself) gave birth in your household. In which month did this last birth take place? OCTOBER 2014	2.49			
Someone (including yourself) gave birth in your household. In which month did this last birth take place? SEPTEMBER 2014		birth in the last 12 months?	NO2	è 2.55
Someone (including yourself) gave birth in your household. In which month did this last birth take place? SEPTEMBER 2014	2 50	Please think about the LAST time	IUI Y 2014 1	
birth in your household. In which month did this last birth take place? CTOBER 2014	2.50			
Month did this last birth take place?				
NOVEMBER 2014		1		
DECEMBER 2014		month did this last birth take place:		
JANUARY 2015				
FEBRUARY 2015				
MARCH 2015				
APRIL 2015				
MAY 2015				
JUNE 2015				
JULY 2015 13				
AUGUST 2015				
SEPTEMBER 2015 15 DON'T KNOW 98				
DON'T KNOW 98 2.51 Where did this last birth take place? MOTHER'S HOME 1 OTHER HOME IN THE COMMUNITY 2 PRIVATE CLINIC/HEALTH FACILITY 3 è 2.53				
2.51 Where did this last birth take place? MOTHER'S HOME				
OTHER HOME IN THE COMMUNITY				
PRIVATE CLINIC/HEALTH FACILITY 3 è 2.53	2.51	Where did this last birth take place?		
GOVERNMENT CLINIC/HEALTH FACILITY 4 è 2.53			PRIVATE CLINIC/HEALTH FACILITY 3	è 2.53
			GOVERNMENT CLINIC/HEALTH FACILITY 4	è 2.53

		ON THE WAY TO SEEKING CARE 5	è 2.53
		OTHER (SPECIFY):96	6 2.55
		DON'T KNOW	
2.52	Miles and the ball of the second beautiful and		
2.52	Why was the baby not born at the	CLINIC IS TOO FAR	
	clinic or health facility?	NOT ENOUGH MONEY 2	
		HUSBAND DID NOT ALLOW 3	
		NO ONE AVAILABLE TO TAKE THE MOTHER 4	
		SCARED OF EBOLA5	
		THERE IS NO TRAINED PERSONNEL THERE 6	
		NOT ENOUGH TIME 7	
		NO TRANSPORTATION AVAILABLE 8	
		CLINIC CLOSED9	
		OTHER (SPECIFY)	
		DON'T KNOW98	
		NO RESPONSE	
2.52	144 1 1 1 6.1		
2.53	Who assisted with the birth of the	NO ONE	
	baby?	FAMILY MEMBER/NEIGHBOR 2	
		TRADITIONAL MIDWIFE 3	
		TRAINED MIDWIFE4	
		NURSE 5	
		DOCTOR'S ASSISTANT 6	
		DOCTOR 7	
		OTHER (SPECIFY)96	
		DON'T KNOW	
2.54	Did the newborn receive any vaccines	YES	
2.34	_	NO	
	(baby shots) at the time of his/her		
	birth?	DON'T KNOW	
		NO RESPONSE99	
2.55	Do you intend to seek care during	YES 1	
	pregnancy at a clinic or health facility	NO2	
	the next time you or someone in your	WILL NOT GET PREGNANT AGAIN 3	è 2.57
		DON'T KNOW 98	
2.56	household is pregnant?		
2.56	household is pregnant? Do you intend to have your baby in a	YES	
2.56	household is pregnant? Do you intend to have your baby in a clinic or health facility the next time	YES	
2.56	household is pregnant? Do you intend to have your baby in a clinic or health facility the next time you or someone in your household is	YES	
	household is pregnant? Do you intend to have your baby in a clinic or health facility the next time you or someone in your household is pregnant?	YES	
READ (household is pregnant? Do you intend to have your baby in a clinic or health facility the next time you or someone in your household is pregnant? OUTLOUD: Now I am going to ask you about the pregnant of t	YES	
	household is pregnant? Do you intend to have your baby in a clinic or health facility the next time you or someone in your household is pregnant?	YES	
READ (household is pregnant? Do you intend to have your baby in a clinic or health facility the next time you or someone in your household is pregnant? OUTLOUD: Now I am going to ask you about the pregnant of t	YES	è 2.64
READ (household is pregnant? Do you intend to have your baby in a clinic or health facility the next time you or someone in your household is pregnant? OUTLOUD: Now I am going to ask you about the you ever visited a TRADITIONAL HEALER/COUNTRY DOCTOR?	YES 1 NO 2 DON'T KNOW 98 Out your experiences with various health service providers. YES 1 NO 2	
READ (household is pregnant? Do you intend to have your baby in a clinic or health facility the next time you or someone in your household is pregnant? OUTLOUD: Now I am going to ask you about the you ever visited a TRADITIONAL HEALER/COUNTRY DOCTOR? How often does the TRADITIONAL	YES 1 NO 2 DON'T KNOW 98 Dout your experiences with various health service providers. YES 1 NO 2 ALL THE TIME 1	
READ (household is pregnant? Do you intend to have your baby in a clinic or health facility the next time you or someone in your household is pregnant? OUTLOUD: Now I am going to ask you about the you ever visited a TRADITIONAL HEALER/COUNTRY DOCTOR? How often does the TRADITIONAL HEALER/COUNTRY DOCTOR provide	YES 1 NO 2 DON'T KNOW 98 Out your experiences with various health service providers. YES 1 NO 2 ALL THE TIME 1 MOST OF THE TIME 2	
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READ (household is pregnant? Do you intend to have your baby in a clinic or health facility the next time you or someone in your household is pregnant? OUTLOUD: Now I am going to ask you about the property of t	YES 1 NO 2 DON'T KNOW 98 Out your experiences with various health service providers. YES 1 NO 2 ALL THE TIME 1 MOST OF THE TIME 2 SOMETIMES 3 RARELY 4	
READ (household is pregnant? Do you intend to have your baby in a clinic or health facility the next time you or someone in your household is pregnant? OUTLOUD: Now I am going to ask you about the you ever visited a TRADITIONAL HEALER/COUNTRY DOCTOR? How often does the TRADITIONAL HEALER/COUNTRY DOCTOR provide	YES 1 NO 2 DON'T KNOW 98 Out your experiences with various health service providers. YES 1 NO 2 ALL THE TIME 1 MOST OF THE TIME 2 SOMETIMES 3 RARELY 4 NEVER 5	
READ (household is pregnant? Do you intend to have your baby in a clinic or health facility the next time you or someone in your household is pregnant? OUTLOUD: Now I am going to ask you about the property of t	YES 1 NO 2 DON'T KNOW 98 Out your experiences with various health service providers. YES 1 NO 2 ALL THE TIME 1 MOST OF THE TIME 2 SOMETIMES 3 RARELY 4 NEVER 5 DON'T KNOW 98	
READ (2.57)	household is pregnant? Do you intend to have your baby in a clinic or health facility the next time you or someone in your household is pregnant? OUTLOUD: Now I am going to ask you about the property of t	YES 1 NO 2 DON'T KNOW 98 Out your experiences with various health service providers. YES 1 NO 2 ALL THE TIME 1 MOST OF THE TIME 2 SOMETIMES 3 RARELY 4 NEVER 5	
READ (2.57)	household is pregnant? Do you intend to have your baby in a clinic or health facility the next time you or someone in your household is pregnant? OUTLOUD: Now I am going to ask you about the property of t	YES 1 NO 2 DON'T KNOW 98 Out your experiences with various health service providers. YES 1 NO 2 ALL THE TIME 1 MOST OF THE TIME 2 SOMETIMES 3 RARELY 4 NEVER 5 DON'T KNOW 98	
READ (2.57)	household is pregnant? Do you intend to have your baby in a clinic or health facility the next time you or someone in your household is pregnant? OUTLOUD: Now I am going to ask you about the property of the provided and the property of the provided and the property of the provided prompt service? READ OPTIONS 1-5 OUT LOUD How often does the TRADITIONAL	YES 1 NO 2 DON'T KNOW 98 DOUT YOUR experiences with various health service providers. YES 1 NO 2 ALL THE TIME 1 MOST OF THE TIME 2 SOMETIMES 3 RARELY 4 NEVER 5 DON'T KNOW 98 ALL THE TIME 1	
READ (household is pregnant? Do you intend to have your baby in a clinic or health facility the next time you or someone in your household is pregnant? OUTLOUD: Now I am going to ask you about the property of t	YES 1 NO 2 DON'T KNOW 98 Out your experiences with various health service providers. YES 1 NO 2 ALL THE TIME 1 MOST OF THE TIME 2 SOMETIMES 3 RARELY 4 NEVER 5 DON'T KNOW 98 ALL THE TIME 1 MOST OF THE TIME 2	
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2.57 2.58 2.59	household is pregnant? Do you intend to have your baby in a clinic or health facility the next time you or someone in your household is pregnant? OUTLOUD: Now I am going to ask you about the property of the provide and the property of the provide prompt service? READ OPTIONS 1-5 OUT LOUD How often does the TRADITIONAL HEALER/COUNTRY DOCTOR provide prompt service? READ OPTIONS 1-5 OUT LOUD How often does the TRADITIONAL HEALER/COUNTRY DOCTOR treat you with respect? READ OPTIONS 1-5 OUT LOUD	YES 1 NO 2 DON'T KNOW 98 DOUT YOUR experiences with various health service providers. YES 1 NO 2 ALL THE TIME 1 MOST OF THE TIME 2 SOMETIMES 3 RARELY 4 NEVER 5 DON'T KNOW 98 ALL THE TIME 1 MOST OF THE TIME 2 SOMETIMES 3 RARELY 4 NEVER 5 DON'T KNOW 98	
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READ (2.57)	household is pregnant? Do you intend to have your baby in a clinic or health facility the next time you or someone in your household is pregnant? OUTLOUD: Now I am going to ask you about the you ever visited a TRADITIONAL HEALER/COUNTRY DOCTOR? How often does the TRADITIONAL HEALER/COUNTRY DOCTOR provide prompt service? READ OPTIONS 1-5 OUT LOUD How often does the TRADITIONAL HEALER/COUNTRY DOCTOR treat you with respect? READ OPTIONS 1-5 OUT LOUD How often does the TRADITIONAL HEALER/COUNTRY DOCTOR treat you with respect?	YES 1 NO 2 DON'T KNOW 98 Out your experiences with various health service providers. YES 1 NO 2 ALL THE TIME 1 MOST OF THE TIME 2 SOMETIMES 3 RARELY 4 NEVER 5 DON'T KNOW 98 ALL THE TIME 1 MOST OF THE TIME 2 SOMETIMES 3 RARELY 4 NEVER 5 DON'T KNOW 98 ALL THE TIME 1 MOST OF THE TIME 2 MOST OF THE TIME 1 MOST OF THE TIME 2	
2.57 2.58 2.59	household is pregnant? Do you intend to have your baby in a clinic or health facility the next time you or someone in your household is pregnant? OUTLOUD: Now I am going to ask you about the you ever visited a TRADITIONAL HEALER/COUNTRY DOCTOR? How often does the TRADITIONAL HEALER/COUNTRY DOCTOR provide prompt service? READ OPTIONS 1-5 OUT LOUD How often does the TRADITIONAL HEALER/COUNTRY DOCTOR treat you with respect? READ OPTIONS 1-5 OUT LOUD How often does the TRADITIONAL HEALER/COUNTRY DOCTOR treat you with respect?	YES 1 NO 2 DON'T KNOW 98 Out your experiences with various health service providers. YES 1 NO 2 ALL THE TIME 1 MOST OF THE TIME 2 SOMETIMES 3 RARELY 4 NEVER 5 DON'T KNOW 98 ALL THE TIME 1 MOST OF THE TIME 2 SOMETIMES 3 RARELY 4 NEVER 5 DON'T KNOW 98 ALL THE TIME 1 MOST OF THE TIME 2 SOMETIMES 3 ALL THE TIME 1 MOST OF THE TIME 2 SOMETIMES 3	
2.57 2.58 2.59	household is pregnant? Do you intend to have your baby in a clinic or health facility the next time you or someone in your household is pregnant? OUTLOUD: Now I am going to ask you about the you ever visited a TRADITIONAL HEALER/COUNTRY DOCTOR? How often does the TRADITIONAL HEALER/COUNTRY DOCTOR provide prompt service? READ OPTIONS 1-5 OUT LOUD How often does the TRADITIONAL HEALER/COUNTRY DOCTOR treat you with respect? READ OPTIONS 1-5 OUT LOUD How often does the TRADITIONAL HEALER/COUNTRY DOCTOR resolve your illness/symptoms?	YES 1 NO 2 DON'T KNOW 98 Out your experiences with various health service providers. YES 1 NO 2 ALL THE TIME 1 MOST OF THE TIME 2 SOMETIMES 3 RARELY 4 NEVER 5 DON'T KNOW 98 ALL THE TIME 1 MOST OF THE TIME 2 SOMETIMES 3 RARELY 4 NEVER 5 DON'T KNOW 98 ALL THE TIME 1 MOST OF THE TIME 2 SOMETIMES 3 RARELY 4	
2.57 2.58 2.59	household is pregnant? Do you intend to have your baby in a clinic or health facility the next time you or someone in your household is pregnant? OUTLOUD: Now I am going to ask you about the you ever visited a TRADITIONAL HEALER/COUNTRY DOCTOR? How often does the TRADITIONAL HEALER/COUNTRY DOCTOR provide prompt service? READ OPTIONS 1-5 OUT LOUD How often does the TRADITIONAL HEALER/COUNTRY DOCTOR treat you with respect? READ OPTIONS 1-5 OUT LOUD How often does the TRADITIONAL HEALER/COUNTRY DOCTOR resolve your illness/symptoms?	YES 1 NO 2 DON'T KNOW 98 Out your experiences with various health service providers. YES 1 NO 2 ALL THE TIME 1 MOST OF THE TIME 2 SOMETIMES 3 RARELY 4 NEVER 5 DON'T KNOW 98 ALL THE TIME 1 MOST OF THE TIME 2 SOMETIMES 3 RARELY 4 NEVER 5 DON'T KNOW 98 ALL THE TIME 1 MOST OF THE TIME 2 SOMETIMES 3 RARELY 4 NEVER 5	

	about and the control of the control	CONACTINACC	
	they care and are concerned for you?	SOMETIMES 3	
		RARELY4	
	READ OPTIONS 1-5 OUT LOUD	NEVER 5	
		DON'T KNOW98	
2.62	How confident are you that the	100% (COMPLETELY CONFIDENT)1	
	TRADITIONAL HEALER/COUNTRY	75% (MOSTLY CONFIDENT)	
	DOCTOR will keep your health	50% (SOMEWHAT CONFIDENT) 3	
	information private/to themselves?	25% (NOT VERY CONFIDENT) 4	
		0% (NOT CONFIDENT AT ALL) 5	
	READ OPTIONS 1-5 OUT LOUD	DON'T KNOW98	
2.63	How much do you trust the	COMPLETELY TRUST 1	
	TRADITIONAL HEALER/COUNTRY	MOSTLY TRUST 2	
	DOCTOR to provide care to you when	SOMEWHAT TRUST 3	
	you need it?	TRUST A LITTLE 4	
		DO NOT TRUST AT ALL5	
	READ OPTIONS 1-5 OUT LOUD	DON'T KNOW98	
2.64	Have you ever visited a DRUG STORE?	YES	
		NO	è 2.69
2.65	How often do the people at the DRUG	ALL THE TIME	5 2.55
	STORE provide prompt service?	MOST OF THE TIME	
	2.3.12 p. 31.00 prompt service:	SOMETIMES	
	READ OPTIONS 1-5 OUT LOUD	RARELY4	
		NEVER	
		DON'T KNOW	
2.66	How often do the people at the DRUG	ALL THE TIME	
2.00	STORE treat you with respect?	MOST OF THE TIME	
	STORE treat you with respect:	SOMETIMES	
	READ OPTIONS 1-5 OUT LOUD	RARELY4	
	READ OF HONS 1-3 OUT LOOD	NEVER 5	
		DON'T KNOW	
2.67	Harriston in constituence weekland		
2.67	How often is your illness resolved	ALL THE TIME	
	when you go to a DRUG STORE?	MOST OF THE TIME	
	DEAD ORTIONS 4 5 OUT LOUD	SOMETIMES 3	
	READ OPTIONS 1-5 OUT LOUD	RARELY4	
		NEVER 5	
2.60		DON'T KNOW	
2.68	How often do the people at the DRUG	ALL THE TIME	
	STORE show that they care and are	MOST OF THE TIME	
	concerned for you?	SOMETIMES	
		RARELY4	
	READ OPTIONS 1-5 OUT LOUD	NEVER	
		DON'T KNOW	
2.69	How confident are you that the	100% (COMPLETELY CONFIDENT)	
	people at the DRUG STORE will keep	75% (MOSTLY CONFIDENT)	
	your health information private/to	50% (SOMEWHAT CONFIDENT) 3	
	themselves?	25% (NOT VERY CONFIDENT)	
		0% (NOT CONFIDENT AT ALL) 5	
	READ OPTIONS 1-5 OUT LOUD	DON'T KNOW 98	
2.70	How much do you trust the people at	COMPLETELY TRUST	
	the DRUG STORE to provide care to	MOSTLY TRUST 2	
	you when you need it?	SOMEWHAT TRUST 3	
		TRUST A LITTLE 4	
	READ OPTIONS 1-5 OUT LOUD	DO NOT TRUST AT ALL5	
		DON'T KNOW98	
2.71	Have you ever visited a COMMUNITY	YES 1	
	HEALTH WORKER?	NO2	è 2.76
2.72	How often does the COMMUNITY	ALL THE TIME	
	HEALTH WORKER provide prompt	MOST OF THE TIME	
	service?	SOMETIMES	
		RARELY4	
	<u>I</u>	_ ··· ··- - · ····· · · · · · · · · · · · · · · ·	I

	READ OPTIONS 1-5 OUT LOUD	NEVER 5	
	KEAD OF HONS I S COT LOOD	DON'T KNOW 98	
2.73	How often does the COMMUNITY	ALL THE TIME	
2.73	HEALTH WORKER treat you with	MOST OF THE TIME	
	respect?	SOMETIMES 3	
	respect:	RARELY4	
	READ OPTIONS 1-5 OUT LOUD	NEVER 5	
	KLAD OF HONS 1-3 OUT LOOD	DON'T KNOW	
2.74	How often does COMMUNITY HEALTH	ALL THE TIME	
2.74	WORKER resolve your	MOST OF THE TIME	
	illness/symptoms?	SOMETIMES	
	illiess/symptoms:	RARELY4	
	READ OPTIONS 1-5 OUT LOUD	NEVER 5	
	READ OPTIONS 1-3 OUT LOOD	DON'T KNOW	
2.75	How often does the COMMUNITY	ALL THE TIME	
2.75	HEALTH WORKER show that they care	MOST OF THE TIME	
	and are concerned for you?	SOMETIMES 3	
	and are concerned for your	RARELY4	
	READ OPTIONS 1-5 OUT LOUD	NEVER 5	
	READ OPTIONS 1-3 OUT LOOD	DON'T KNOW	
2.76	11	100% (COMPLETELY CONFIDENT)	
2.76	How confident are you that the COMMUNITY HEALTH WORKER will	75% (MOSTLY CONFIDENT)	
	keep your health information	50% (SOMEWHAT CONFIDENT)	
		· · · · · · · · · · · · · · · · · · ·	
	private/to themselves?	25% (NOT VERY CONFIDENT)	
	READ OPTIONS 1-5 OUT LOUD	0% (NOT CONFIDENT AT ALL)	
2 77		COMPLETELY TRUST	
2.77	How much do you trust the		
	COMMUNITY HEALTH WORKER to	MOSTLY TRUST	
	provide care to you when you need it?	SOMEWHAT TRUST	
	DEAD ORTIONS 1 F OUT LOUD	TRUST A LITTLE	
	READ OPTIONS 1-5 OUT LOUD	DO NOT TRUST AT ALL	
2.70		DON'T KNOW98	
2.78	Have you ever visited a	YES	
2.70	CLINIC/HEALTH FACILITY?	NO	è 3.1
2.79	How often does the CLINIC/HEALTH	ALL THE TIME	
	FACILITY personnel provide prompt	MOST OF THE TIME	
	service?	SOMETIMES	
	25.42 225.424.5 24.5 4.45	RARELY4	
	READ OPTIONS 1-5 OUT LOUD	NEVER 5	
		DON'T KNOW 98	

2.80	How often does the CLINIC/HEALTH	ALL THE TIME 1
	FACILITY personnel treat you with	MOST OF THE TIME 2
	respect?	SOMETIMES 3
	-	RARELY 4
	READ OPTIONS 1-5 OUT LOUD	NEVER 5
		DON'T KNOW 98
2.81	How often does CLINIC/HEALTH	ALL THE TIME 1
	FACILITY personnel resolve your	MOST OF THE TIME 2
	illness/symptoms?	SOMETIMES 3
		RARELY 4
	READ OPTIONS 1-5 OUT LOUD	NEVER 5
		DON'T KNOW 98
2.82	How often does the CLINIC/HEALTH	ALL THE TIME 1
	FACILITY personnel show that they	MOST OF THE TIME 2
	care and are concerned for you?	SOMETIMES 3
		RARELY 4
	READ OPTIONS 1-5 OUT LOUD	NEVER 5
		DON'T KNOW 98
2.83	How confident are you that the	100% (COMPLETELY CONFIDENT)1
	CLINIC/HEALTH FACILITY personnel	75% (MOSTLY CONFIDENT)
	will keep your health information	50% (SOMEWHAT CONFIDENT) 3
	private/to themselves?	25% (NOT VERY CONFIDENT) 4
		0% (NOT CONFIDENT AT ALL) 5
	READ OPTIONS 1-5 OUT LOUD	DON'T KNOW 98
2.84	How much do you trust the	COMPLETELY TRUST 1
	CLINIC/HEALTH FACILITY personnel to	MOSTLY TRUST 2
	provide care to you when you need it?	SOMEWHAT TRUST 3
		TRUST A LITTLE 4
	READ OPTIONS 1-5 OUT LOUD	DO NOT TRUST AT ALL 5
		DON'T KNOW 98

SECTION 3: TREATMENT-SEEKING BEHAVIOURS FOR EBOLA

READ OUT LOUD: Thank-you. In this next section, I would like to ask you some questions about Ebola

NO.	QUESTION	CODING CATEGORIES	SKIP
3.1.	During Ebola Time (the time that Ebola	YES1	
	was really bad), did anyone in your	NO2	è 4.1
	community have Ebola?	DON'T KNOW98	è 4.1
		NO RESPONSE99	è 4.1
3.2.	About how many people in your	ALMOST EVERYONE1	
	community had Ebola when it was really	MORE THAN HALF2	
	bad?	LESS THAN HALF3	
	Would you say that it was	VERY FEW4	
	(READ OPTIONS 1-4 OUT LOUD)	DON'T KNOW98	
3.3.	Were people in the community able to	YES	1
J.J.	keep those with Ebola separated/isolated	NO	è 3.6
	from the rest of the household members?	DON'T KNOW98	è 3.6
2.4			e 3.6
3.4.	How many of them were	ALMOST EVERYONE	
	separated/isolated?	MORE THAN HALF	
		LESS THAN HALF3	
	READ OPTIONS 1-4 OUT LOUD	VERY FEW4	
		DON'T KNOW98	
3.5.	How were they separated/isolated?	AT HOME IN A SEPARATE ROOM1	
	(Where were they kept?)	IN THE HOUSE AND THE FAMILY LEFT2	
		SEMI-COMMUNITY CARE CENTER3	
	PROBE: Anything else?	COMMUNITY CARE CENTERS/CCC4	
		OTHER (SPECIFY):96	
	MULTIPLE ANSWERS	DON'T KNOW98	
3.6.	Do you know if those who had Ebola	YES	
3.0.	symptoms sought care outside the house?	NO	è 3.8
	symptoms sought care outside the nouse:	DON'T KNOW98	è 3.8
3.7.	Where did they go for help?	TRADTIONAL HEALER	e 3.0
3.7.	where did they go for help:	SPIRITUAL HEALER	
	DDODE: Whome class		
	PROBE: Where else?	COMMUNITY HEALTH WORKER (GCHV)	
		COMMUNITY TASK FORCE	
	MULTIPLE ANSWERS	COMMUNITY CARE CENTER (CCC)5	
		EBOLA TREATMENT UNIT (ETU)("TREATMENT	
		CENTER")6	
		OTHER HEALTH FACILITY7	
		OTHER (SPECIFY):96	
		DON'T KNOW98	
3.8.	About how many of those in your	ALL OF THEM1	
	community who had symptoms of Ebola	MOST OF THEM2	
	survived the illness?	SOME OF THEM3	
	Would you say it was	VERY FEW OF THEM4	
		NONE5	
	(READ OPTIONS 1-4 OUT LOUD)	DON'T KNOW98	
		NO RESPONSE99	
3.9.	Did anyone in your household have Ebola	YES	1
	in the past year?	NO	è 4.1
	in the past year:	DON'T KNOW98	è 4.1
2.40		NO RESPONSE	è 4.1
3.10.	How many people in your household had	// People	
	Ebola?	DON'T KNOW98	
		NO RESPONSE 99	

SECTION 4: PREVENTIVE PRACTICES DURING EBOLA

READ OUT LOUD: Thank-you. For the next questions, I would like you to think back to the time that Ebola was really bad (Ebola Time)

NO NO	QUESTION	CODING CATEGORIES	бото
4.1.	During the time when Ebola was really bad,	YES	
4.1.	did you make any changes to your daily	NO	è 4.3
		NO 2	e 4.5
4.2	habits or traditions to avoid getting Ebola?	CTORRED FATING RUGUNAFAT	
4.2.	What changes did you make?	STOPPED EATING BUSHMEAT 1 STOPPED EATING FRUIT EATEN BY BATS 2	
	DDODE: A mathing along		
	PROBE: Anything else?	STOPPED PREPARING BUSHMEAT	
	AAUUTIDUS AAUGUVSDG	STOPPED VISITING PEOPLE	
	MULTIPLE ANSWERS	DIDN'T ALLOW STRANGERS TO VISIT US	
		STOPPED SHAKING HANDS	
		STOPPED TOUCHING PEOPLE (AVOID PHYSICAL	
		CONTACT)	
		AVOIDED CROWDED PLACES	
		STAYED MOST OF THE TIME AT HOME9	
		DIDN'T SHARE ITEMS WITH OTHER PEOPLE (CUPS,	
		SPOONS, ETC.)	
		ALWAYS WASHED HANDS	
		STOPPED ATTENDING BURIALS	è 4.6
		OTHER (SPECIFY)96	
4.3.	Did you attend any burials during Ebola	YES 1	
	time?	NO 2	è 4.6
		DON'T KNOW 98	è 4.6
		NO RESPONSE99	è 4.6
4.4.	Did you assist in the burial practices?	YES 1	
		NO 2	è 4.6
		DON'T KNOW 3	è 4.6
		NO RESPONSE99	è 4.6
4.5.	What did you do in the burial practice?	TOUCHED THE BODY1	
		BATHED THE BODY2	
	PROBE: Anything else?	DRESSED THE BODY 3	
		SAT DOWN NEAR THE BODY (KEPT WAKE)4	
	MULTIPLE ANSWERS	PRAYED OVER THE BODY5	
		GROOMED THE BODY6	
		BURIED THE BODY7	
		OTHER (SPECIFY):96	
		NO RESPONSE99	
4.6.	Have you heard of the 4455 Hotline	YES 1	
	Number?	NO	è 4.10
4.7.	Did anyone in your household call the 4455	YES 1	
1.7.	Hotline Number during Ebola Time?	NO	è 4.10
10		GET HEALTH INFORMATION ON EBOLA	
4.8.	What was the reason for calling the Hotline		
	Number during Ebola Time?	REPORT A DEATH	
	DROPE: Anything class		
	PROBE: Anything else?	TO LOCATE A FAMILY MEMBER OR FRIEND 4	
	MALLITIDLE ANGWEDS		
4.0	MULTIPLE ANSWERS	VEC	
4.9.	Did people that answer the hotline resolve	YES	
	your need?	NO	
4.10.	In your opinion, do people need to	YES, NEED TO CONTNUE	
	continue to protect themselves from Ebola	NO, NOT NEEDED	
	or is it not needed anymore?	DON'T KNOW98	
4.11.	Are you taking any action nowadays to	YES, TAKING ACTIONS	
		,o, / / ±	1

	not taking anymore preventive actions?		
4.12.	What things are you doing nowadays to	AVOIDING EATING BUSHMEAT 1	
	protect yourself from getting Ebola?	AVOIDING EATING FRUIT EATEN BY BATS	
	protest yoursen from getting about	AVOIDING PREPARING BUSHMEAT	
	PROBE: Anything else?	AVOIDING VISITING PEOPLE	
	FRODE. Anything eise:	NOT ALLOWING STRANGERS TO VISIT US	
	NALIL TIDLE ANGVA/EDC	AVOIDING SHAKING HANDS	
	MULTIPLE ANSWERS		
		AVOIDING TOUCHING PEOPLE (AVOIDING PHYSICAL	
		CONTACT) 7	
		AVOIDING CROWDED PLACES 8	
		STAYING MOST OF THE TIME AT HOME9	
		NOT SHARING ITEMS WITH OTHER PEOPLE (CUPS,	
		SPOONS, ETC.)	
		ALWAYS WASHING HANDS 11	
		NOT ATTENDING BURIALS 12	
		TAKING MEDICINES13	
		AVOIDING MAN/WOMAN BUSINESS 14	
		OTHER (SPECIFY)96	
		NO RESPONSE	
4.13.	What are some things that you are doing	EATING BUSH MEAT	
1,23.	now that you stopped doing when Ebola	EATING FRUIT EATEN BY BATS	
	was really bad?	PREPARING BUSH MEAT	
	was really sau.	VISITING PEOPLE	
	PROBE: Anything else?	ALLOWING PEOPLE TO VISIT US	
	FRODE. Anything eise:	SHAKING HANDS	
	MULTIPLE ANSWERS	GOING TO CROWDED/PUBLIC PLACES	
	WOLTIPLE ANSWERS	WASING HANDS WITH CHLORINE 8	
		ATTENDING BURIALS9	
		GOING TO WORK	
		TAKING CHILDREN TO SCHOOL	
		GOING TO THE HEALTH CENTER	
		OTHER (SPECIFY)96	
		NO RESPONSE99	
4.14.	Have you attended any funerals/burials	YES 1	
	since May of this year?	NO 2	è 4.17
		DON'T KNOW 98	è 4.17
		NO RESPONSE	è 4.17
4.15.	Did you help with body preparations for the	YES 1	
	burial(s)?	NO 2	è 4.17
		DON'T KNOW 98	è 4.17
		NO RESPONSE99	è 4.17
4.16.	What did you do to help prepare the bodies	TOUCHED THE BODY1	
	for burial?	BATHED THE BODY2	
		DRESSED THE BODY 3	
	PROBE: Anything else?	SAT DOWN NEAR THE BODY (KEPT WAKE)4	
		PRAYED OVER THE BODY5	
	MULTIPLE ANSWERS	GROOMED THE BODY	
		BURIED THE BODY	
		OTHER (SPECIFY):96	
		NO RESPONSE	
4.17.	Are there school-aged children in your	YES	
,.	household?	NO	è 4.20
4.18.	Did they attend school during the last	YES	è 4.20
4.10.	semester?	NO	C 4.20
4.10		SCHOOL STILL CLOSED	-
4.19.	What are the reasons the child(ren) in your		
	household did not go back to school?	AFRAID SCHOOL IS INFECTED	
		AFRAID OF OTHER CHILDREN WHO HAD EBOLA 3	
	PROBE: Anything else?	CHILD IS EBOLA SURVIVOR/NOT ACCEPTED BACK 4	
		PARENT IS EBOLA SURVIVOR/STIGMA5	
	MULTIPLE ANSWERS	OTHER (SPECIFY)96	

		NO RESPONSE	
4.20.	Are there Ebola orphans living in your	YES 1	
	community?	NO2	
		DON'T KNOW 98	

NO. QUESTION CODING CATEGORIES CODING CATEGORIES		SECTION 5: AWARENESS AND KNOWLEDGE OF CAUSES, SIGNS, SYMPTOMS & TRANSMISSION				
1	NO.	QUESTION	CODING CATEGORIES	GOTO		
Liberia? BATS / MONKEYS / CHIMPANZEES	READ	READ OUT LOUD: Now I would like to ask you a few things about your knowledge of Ebola				
PROBE: Anything else? UBERIAN SOVERNMENT	5.1	What started the Ebola outbreak in	VIRUS			
PROBE: Anything else? UBERIAN SOVERNMENT		Liberia?	BATS / MONKEYS / CHIMPANZEES2			
MULTIPLE ANSWERS						
MULTIPLE ANSWERS		PROBE: Anything else?				
MULTIPLE ANSWERS OTHER (SPECIFY):		, ,				
DON'T KNOW		MULTIPLE ANSWERS				
PROBE: Anything else?						
PROBE: Anything else?	5.2	How does a person get Ebola?	PREPARING BUSH MEAT			
MULTIPLE ANSWERS			EATING BUSH MEAT 2			
MULTIPLE ANSWERS		PROBE: Anything else?	EATING FRUITS THAT HAVE BEEN BITTEN BY BATS 3			
MOSQUITO BITE		, ,	FROM DOGS 4			
SHAKING THE HANDS OF AN INFECTED PERSON		MULTIPLE ANSWERS	BODILY FLUID OF AN INFECTED PERSON			
ATTENDING BURIALS OF PEOPLE WHO DIED FROM EBOLA 8 TOUCHING/WASHING/ WRAPPING PEOPLE WHO HAVE DIED FROM EBOLA			MOSQUITO BITE			
ATTENDING BURIALS OF PEOPLE WHO DIED FROM EBOLA 8 TOUCHING/WASHING/ WRAPPING PEOPLE WHO HAVE DIED FROM EBOLA			SHAKING THE HANDS OF AN INFECTED PERSON 7			
DIED FROM EBOLA						
TOUCHING THINGS AN INFECTED PERSON HAS TOUCHED10 HAVING SEX WITH SOMONE WHO IS INFECTED.			TOUCHING/WASHING/ WRAPPING PEOPLE WHO HAVE			
HAVING SEX WITH SOMONE WHO IS INFECTED			DIED FROM EBOLA9			
HAVING SEX WITH SOMEONE WHO HAS RECOVERED 12 OTHER (SPECIFY):			TOUCHING THINGS AN INFECTED PERSON HAS TOUCHED 10			
S.3 What are the signs and symptoms of Ebola?			HAVING SEX WITH SOMONE WHO IS INFECTED11			
S.3 What are the signs and symptoms of Ebola?						
DON'T KNOW						
S.3 What are the signs and symptoms of Ebola?						
Bola?	5.3	What are the signs and symptoms of				
PROBE: Anything else?			HEADACHE			
PROBE: Anything else?			MUSCLE PAIN			
MULTIPLE ANSWERS		PROBE: Anything else?				
MULTIPLE ANSWERS		,, ,				
ABDOMINAL (STOMACH) PAIN		MULTIPLE ANSWERS				
LACK OF APPETITE			,			
RASH						
BLEEDING OF THE GUMS			SORE THROAT9			
BLOOD IN STOOL			RASH 10			
RED EYES			BLEEDING OF THE GUMS 11			
OTHER (SPECIFY):			BLOOD IN STOOL			
DON'T KNOW			RED EYES			
DON'T KNOW			OTHER (SPECIFY):96			
for a family member suspected of having Ebola? HAVING ONLY ONE CAREGIVER						
for a family member suspected of having Ebola? HAVING ONLY ONE CAREGIVER	5.4	What can a person do to safely care	NOTHING, IT'S HARD TO RECOVER			
having Ebola? HAVING ONLY ONE CAREGIVER						
PROBE: Anything else? DO NOT TOUCH THINGS THE PERSON HAS TOUCHED (SOILED CLOTHES)			HAVING ONLY ONE CAREGIVER 3			
MULTIPLE ANSWERS (SOILED CLOTHES)			DO NOT TOUCH THE PERSON OR THEIR BODY FLUIDS 4			
MULTIPLE ANSWERS (SOILED CLOTHES)		PROBE: Anything else?	DO NOT TOUCH THINGS THE PERSON HAS TOUCHED			
MULTIPLE ANSWERS USE/PROTECT WITH GLOVES/PLASTIC		_	(SOILED CLOTHES)5			
FREQUENTLY WASH HANDS WITH SOAP/CHLORINE 7 PROVIDE SICK PERSON WITH FOOD, WATER, AND OTHER FLUIDS		MULTIPLE ANSWERS				
PROVIDE SICK PERSON WITH FOOD, WATER, AND OTHER FLUIDS						
ISOLATE /SEPERATE THEM IN A DIFFERENT ROOM 9 GO TO THE CLINIC/HEALTH FACILITY			PROVIDE SICK PERSON WITH FOOD, WATER, AND OTHER			
GO TO THE CLINIC/HEALTH FACILITY			FLUIDS 8			
CALL 4455			ISOLATE /SEPERATE THEM IN A DIFFERENT ROOM 9			
CALL 4455						
OTHER (SPECIFY):						
5.5 Do you think it's possible for someone YES 1						
			DON'T KNOW98			
	5.5	Do you think it's possible for someone	YES 1			
		I = = = = = = = = = = = = = = = = = = =	NO2			

	or symptoms?	DON'T KNOW	
5.6	Do you believe that you can get Ebola	YES 1	
	from a person who is infected, but	NO 2	
	doesn't have any signs and	DON'T KNOW98	
	symptoms?		
5.7	Do you believe that traditional healers	YES 1	
	can cure someone with Ebola?	NO2	
		DON'T KNOW98	
5.8	Do you believe that spiritual healers	YES	
	can cure someone with Ebola?	NO	
		DON'T KNOW 98	
5.9	Have you heard of certificates that	YES 1	
	health workers give to survivors to	NO	è 5.11
	indicate that they are Ebola-free?	DON'T KNOW98	è 5.11
5.10	How sure are you that people with	VERY SURE 1	
	certificates are really free of Ebola?	SOMEWHAT SURE2	
		SOMEWHAT UNSURE 3	
	(READ OPTIONS 1-4 OUT LOUD)	NOT AT ALL SURE 4	
		DON'T KNOW 98	
5.11	Can people be treated for Ebola?	YES	
		NO 2	è 5.13
		DON'T KNOW 98	è 5.13
5.12	How fast does someone need to be	RIGHT AWAY 1	
	treated to increase his or her chances	WITHIN 24 HOURS 2	
	of survival?	WITHIN 1 WEEK 3	
		OTHER (SPECIFY)96	
		DON'T KNOW98	
5.13	What are the THREE most important	RADIO1	
	ways/sources you get general health	TELEVISION2	
	information when you need it?	NEWSPAPER / FLYERS POSTERS/ PRINT MATERIALS 3	
		TOWN CRIERS/PUBLIC ANNOUNCEMENTS 4	
	PROBE: Anything else?	COMMUNITY HEATLH WORKERS 5	
		DOCTOR/NURSE/MIDWIFE 6	
	ALLOW UP TO THREE ANSWERS	GOVERNMENT/ COUNTY HEALTH TEAM 7	
		CHURCH / MOSQUE / RELIGIOUS MEETINGS 8	
		COMMUNITY MEETINGS9	
		RELATIVES 10	
		FRIENDS / COMMUNITY MEMBERS/NEIGHBORS 11	
		TRADITIONAL/COMMUNITY LEADERS 12	
		OTHER (SPECIFY):96	
		DON'T KNOW 98	

5.14	What are the THREE most important	RADIO 1	
	ways/sources you could use if you	TELEVISION2	
	want to get information about Ebola?	NEWSPAPER / FLYERS POSTERS/ PRINT MATERIALS 3	
		TOWN CRIERS/PUBLIC ANNOUNCEMENTS 4	
	PROBE: Anything else?	COMMUNITY HEATLH WORKERS5	
		DOCTOR/NURSE/MIDWIFE 6	
	ALLOW UP TO THREE ANSWERS	GOVERNMENT/ COUNTY HEALTH TEAM 7	
		CHURCH / MOSQUE / RELIGIOUS MEETINGS 8	
		COMMUNITY MEETINGS9	
		RELATIVES 10	
		FRIENDS / COMMUNITY MEMBERS/NEIGHBORS 11	
		TRADITIONAL/COMMUNITY LEADERS 12	
		OTHER (SPECIFY):96	
		DON'T KNOW98	
5.15	Who would you trust for information	RADIO1	
	about funeral/burial practices that do	TELEVISION2	
	not involve touching or washing the	NEWSPAPER / FLYERS POSTERS/ PRINT MATERIALS 3	
	body?	TOWN CRIERS/PUBLIC ANNOUNCEMENTS 4	
		COMMUNITY HEATLH WORKERS 5	
	Probe: Anyone else?	DOCTOR/NURSE/MIDWIFE 6	
		GOVERNMENT/ COUNTY HEALTH TEAM 7	
	ALLOW UP TO THREE ANSWERS	CHURCH / MOSQUE / RELIGIOUS MEETINGS 8	
		COMMUNITY MEETINGS 9	
		RELATIVES 10	
		FRIENDS / COMMUNITY MEMBERS/NEIGHBORS 11	
		TRADITIONAL/COMMUNITY LEADERS 12	
		OTHER (SPECIFY):96	
		DON'T KNOW 98	

SECTION 6: ATTITUDES TOWARDS SURVIVORS

SURVIVOR STIGMA: Now, I am going to read things that people say about Ebola. I would like you to tell me how much you agree or disagree with them. For each of the phrases that I will read, please tell me if you strongly agree, somewhat agree, somewhat disagree, or strongly disagree with what they say. There are no right or wrong answers only your opinion. INTERVIEWER: READ OUT LOUD ANSWERS 1 TO 4. MARK THE "DON'T KNOW" RESPONSE ONLY IF RESPONDENT IS NOT ABLE TO PROVIDE ANOTHER ANSWER.

	This is what people say:	STRONGLY AGREE	SOMEWHAT AGREE	SOMEWHAT DISAGREE	STRONGLY DISAGREE	DON'T KNOW
6.1	I would buy fresh vegetables from a shopkeeper who is an Ebola survivor.	1	2	3	4	98
6.2	A child who has survived Ebola will put other students at risk if he/she goes back to school.	1	2	3	4	98
6.3	I would welcome back neighbors that survived Ebola.	1	2	3	4	98
6.4	Family members of people who died from Ebola are a threat to their community	1	2	3	4	98
6.5	I would be willing to bring a child into my family if he/she lost both parents to Ebola.	1	2	3	4	98
6.6	I would avoid hugging someone who survived Ebola	1	2	3	4	98
6.7	I would avoid people from communities that had a lot of Ebola	1	2	3	4	98
6.8	People who contracted Ebola did something wrong to get it/deserve it.	1	2	3	4	98
6.9	Ebola survivors should be allowed to work at any type of job.	1	2	3	4	98
6.10	I would visit the household of someone who died from Ebola	1	2	3	4	98
6.11	I would eat from the same food plate as an Ebola survivor.	1	2	3	4	98
6.12	I would seek care from a nurse who treated Ebola patients	1	2	3	4	98
6.13	I am worried about going to a clinic/health facility that treated Ebola patients	1	2	3	4	98

SECTION 7: RISK PERCEPTIONS AND ATTITUDES

Now, I would like to ask your opinions about various illnesses and health needs.

9.	How possible is it that you or a member of your family might get (READ ILLNESS) in the next 4 months? <i>READ OPTIONS 1-4</i>	VERY POSSIBLE	SOME WHAT POSSIBLE	NOT VERY POSSIBLE	NOT POSSIBLE AT ALL	DON'T KNOW
7.1	MALARIA	1	2	3	4	98
7.2	DIARRHEA	1	2	3	4	98
7.3	PNEUMONIA/COUGH WITH DIFFICULTY BREATHING	1	2	3	4	98
7.4	MEASLES (SKIN RASHES)	1	2	3	4	98
7.5	TUBERCULOSIS/CHRONIC COUGH/COUGHING BLOOD	1	2	3	4	98
7.6	COMPLICATIONS DURING PREGNANCY	1	2	3	4	98
7.7	HIV	1	2	3	4	98
	In your opinion, what are the THREE biggest health issues in your community? DO NOT READ ANSWERS OUTLOUD	EBOLA MEASLES TUBERCULC COMPLICAT TYPHOID FEVER COUGH COMMON C HEADACHE	OSIS/CHRONC COOLD	COUGH./COUG AND AFTER BIF	HING BLOOD	4 5 6 7 8 9 10 11 12 13
'.8.	What level of risk do you think you have in	DON'T KNO	W			
	getting Ebola? (READ OPTIONS 1-4)	MEDIUM RISK	SK		3	
7.9	How confident are you that you can protect					
	yourself and your family from becoming infected with Ebola in the future? Are you? (READ OPTIONS 1-4)	NOT VERY C	ONFIDENT DENT AT ALL		3 4	
7.10	How confident are you that your village can control the spread of Ebola if there was another outbreak in the future?	SOMEWHAT NOT VERY C NOT CONFIL	CONFIDENT CONFIDENT DENT AT ALL		2 3	
	(READ OPTIONS 1-4)					
7.11	How confident are you that the Government of Liberia can prevent an Ebola outbreak in the future? Are you? (READ OPTIONS 1-4)	SOMEWHAT NOT VERY C NOT CONFIL	CONFIDENT CONFIDENT DENT AT ALL		2 3 4	
7.12	If someone in your village has signs and symptoms of Ebola, how much of a threat would that person be to the community?	SERIOUS TH SOMEWHAT NOT MUCH	REAT Γ OF A THREAT		1 2 3	

	(READ OPTIONS 1-4)	DON'T KNOW	
7.13	How concerned are you that there will be	VERY CONCERNED	
	another Ebola outbreak in Liberia in the	SOMEWHAT CONCERNED2	
	next 12 months?	NOT VERY CONCERNED	è 7.15
		NOT AT ALL CONCERNED	è 7.15
	(READ OPTIONS 1-4)	DON'T KNOW	è 7.16
7.14	Why are you concerned?	IT CAN COME BACK ANY TIME	è 7.16
	, ,	IT IS NOT GONE	è 7.16
	PROBE: Anything else?	THERE IS NO TREATMENT	è 7.16
		MONKEYS STILL HAVE IT	è 7.16
	MULTIPLE ANSWERS	PEOPLE CAN BRING IT FROM SIERRA LEONE/	07.20
		GUINEA/OTHER COUNTRY5	è 7.16
		PEOPLE STILL GET EBOLA	è 7.16
		OTHER (SPECIFY):	è 7.16
		DON'T KNOW	è 7.16
		NO RESPONSE	è 7.16
7.15	Why are you not concerned?	IT CANNOT COME BACK	0.1120
7.120	,,	EBOLA IS GONE FOR GOOD	
	PROBE: Anything else?	WE NOW KNOW HOW TO PREVENT IT	
	, , , , , , , , , , ,	THE GOVERNEMENT WILL PROTECT US	
	MULTIPLE ANSWERS	GOD/ALLAH WILL PROTECT US	
		THERE IS TREATMENT	
		THERE WILL BE A VACCINE 7	
		OTHER (SPECIFY):	
		DON'T KNOW	
		NO RESPONSE	
7.16	From your experience with the recent Ebola	CONTACT TRACING TEAMS (HOUSE-TO-HOUSE) 1	
	outbreak, what were the main things that	TAKING PEOPLE TO THE ETU2	
	people did that were the best at stopping	AVOIDING VISITING PEOPLE 3	
	Ebola?	WASHING HANDS4	
		AVOIDING BURIALS5	
	PROBE: Anything else?	NOT EATING BUSHMEAT 6	
		NOT PREPARING BUSHMEAT 7	
	MULTIPLE ANSWERS	NOT TOUCHING FLUIDS OF PEOPLE INFECTED WITH	
		EBOLA 8	
		NOT TOUCHING PEOPLE WHO DIED FROM EBOLA 9	
		NOT SHAKING HANDS10	
		NOT TOUCHING PEOPLE 11	
		AVOIDING CROWDED PLACES 12	
		ISOLATING INFECTED PEOPLE	
		REPORTING SICK PEOPLE PROMPTLY 14	
		PRAYING15	
		STOPPED GOING TO CLINICS/HEALTH FACILITIES 16	
		OTHER (SPECIFY):	
		DON'T KNOW	

7.17	In your community, what worked the best	LEADERS INVOLVED
	in stopping the spread of Ebola?	RELIGIOUS LEADERS SPEAKING OUT 2
		MEETINGS TO INFORM PEOPLE 3
	(SELECT ONLY ONE ANSWER)	YOUTH GROUPS TO INFORM PEOPLE 4
		DISTRIBUTION OF ITEMS TO PREVENT SPREAD OF
		EBOLA 5
		CLOSING THE BORDERS6
		TASK FORCES ASSISTING THE SICK
		CONTACT TRACERS 8
		QUARANTINING PEOPLE THAT CAME BACK 9
		OTHER (SPECIFY)96
		DON'T KNOW98

SECTION 8: EBOLA PROGRAM EXPOSURE READ OUT LOUD: Now I am going to ask you some questions about Ebola messages. **QUESTION CODING CATEGORIES** NO. **GOTO** 8.1 Have you seen this logo? YES1 (SHOW SCREEN TO PARTICIPANT) NO2 è 8.3 DON'T KNOW99 è 8.3 8.2 What does this logo tell you? HEALTHY CHILD/HEALTHY BABY......1 TAKE CARE OF YOUR CHILD/BABY......2 WHEN YOUR BABY IS HEALTHY, YOU ARE HEALTHY . 4 APPROVED BY THE MOH5 OTHER (SPECIFY)96 8.3 SINCE EBOLA TIME STARTED, have you NO 2 seen or heard any messages in the è 8.5 media about Ebola? DON'T KNOW98 è 8.5 EBOLA CAN BE PREVENTED......1 8.4 What messages have you seen or heard in the media? PROTECT YOURSELF, PROTECT YOUR FAMILY, PROTECT PROBE: Anything else? YOUR COMMUNITY......4 **MULTIPLE ANSWERS** EBOLA HAS NO CURE......5 EBOLA IS EVERYBODY'S BUSINESS 6 LET'S KICK EBOLA OUT OF LIBERIA7 STOP THE STIGMA8 EARLY IN, EARLY OUT9 CALL 4455 HOTLINE.......10 NO MAN/WOMAN BUSINESS......11 WHEN SICK, GO TO ETU12 STAY AWAY FROM/DO NOT TOUCH DEAD BODIES. 13 DO NOT ATTEND BURIAL SERVICES......14 DO NOT EAT BUSHMEAT......15 ALWAYS WASH YOUR HANDS16 NO SHAKING HANDS17 STAY AWAY FROM CROWDED PLACES...... 18 DON'T ACCEPT VISITORS19 OTHER (SPECIFY):96 DON'T KNOW98 STAY AWAY FROM/DO NOT TOUCH DEAD BODIES DON'T KNOW 8.5 Have you heard the message "Ebola Must Go?" NO2 è 8.8

DON'T KNOW98

è 8.8

0.0	When did hearthis masses	BADIO		
8.6	Where did you hear this message?	RADIO		
		TELEVISION		
	PROBE: Anything else?	NEWSPAPER / FLYERS POSTERS/ PRINT MATERIAL		
	AALU TIDI E ANGWEDO	TOWN CRIERS/PUBLIC ANNOUNCEMENTS		
	MULTIPLE ANSWERS	COMMUNITY HEATLH WORKERS		
		DOCTOR/NURSE/MIDWIFE		
		GOVERNMENT/ COUNTY HEALTH TEAM		
		CHURCH / MOSQUE / RELIGIOUS MEETINGS		
		COMMUNITY MEETINGS		
		RELATIVES	_	
		FRIENDS / COMMUNITY MEMBERS/NEIGHBORS		
		TRADITIONAL/COMMUNITY LEADERS		
		OTHER (SPECIFY):		
		DON'T KNOW		
8.8	Please complete the following	THE VIRUS/DISEASE		
	expression: "Spread the message,	OTHER (WRONG ANSWER)		
	not″	DON'T KNOW		
8.9	Please complete the following	PROTECT YOUR COMMUNITY		
	expression: "Protect Yourself, Protect	OTHER (INCORRECT ANSWER)		
	Your Family,?"	DON'T KNOW		
8.10	Have you heard the following	YES		
	expression: "Let's Kick Ebola out of	NO		è 8.12
	Liberia."	DON'T KNOW	98	è 8.12
8.11	What does "Let's Kick Ebola out of			
	Liberia" mean to you?			
8.12	Have you heard the following	YES		
	expression "Early In, Early Out?"	NO		è 8.14
		DON'T KNOW	98	è 8.14
8.13	What does "Early In, Early Out" mean to you?			
8.14	Have you heard the following	YES	1	
	expression: "Stop the Stigma?"	NO	2	è 8.16
		DON'T KNOW	98	è 8.16
8.15	What does the expression "Stop the Stigma" mean to you?			
8.16	Have you heard the expression "Ebola	YES	1	
	Can Kill?"	NO	2	è 8.18
		DON'T KNOW	98	è 8.18
8.17	What does the expression "Ebola Can Kill" mean to you?			
8.18	Did you receive an Ebola	YES	1	
0.10	Package/Ebola Materials?	NO		
	rackage/EDUId Widteridis!	DON'T KNOW		
0.10	During Eholo Time did yeur			
8.19	During Ebola Time, did your	NO		è 8.21
	community request assistance from			
	the burial team?	DON'T KNOW	98	è 8.21

8.20	How often did the burial team respond	ALWAYS	1	
0.20	to the request for assistance?	SOMETIMES	_	
	to the request for assistance:	NEVER		
	(READ OPTIONS 1-3 OUT LOUD)	DON'T KNOW		
8.21	DURING EBOLA TIME, did anyone or	YES		
0.21	any group come to your community to	NO	_	8.24
	talk about EBOLA?	DON'T KNOW	_	8.24
8.22	Which groups came to talk about	CONTACT TRACERS		0.24
0.22	Ebola?	TASK FORCES		
	Lbola:	DRAMA CLUBS	_	
	PROBE: Who else?	NGOs	_	
	TROBE. WHO CISC:	GROUPS DISTRIBUTING ITEMS TO PREVENT EBOLA.	-	
	MULTIPLE ANSWERS	YOUTH GROUPS		
		COUNTY HEALTH TEAMS/MOH		
		NATIONAL MUSLIM COUNCIL		
		CIVIL SOCIETY GROUP	_	
		OTHER (SPECIFY)		
		DON'T KNOW		
8.23	What did these groups talk about?	EBOLA IS REAL	-	
	0. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2.	EBOLA PREVENTION		
	PROBE: Anything else?	TRACING PEOPLE		
	, ,	SEEK CARE IMMEDIATELY	4	
	MULTIPLE ANSWERS	GO TO ETU IMMEDIATELY	.5	
		SURVIVORS ARE SAFE		
		CALL 4455 HOTLINE	7	
		NO MAN/WOMAN BUSINESS	8	
		STAY AWAY FROM/DO NOT TOUCH DEAD BODIES	9	
		DO NOT ATTEND BURIAL SERVICES	10	
		DO NOT EAT BUSHMEAT1	11	
		ALWAYS WASH YOUR HANDS1	12	
		NO SHAKING HANDS1	13	
		STAY AWAY FROM CROWDED PLACES 1	L4	
		DON'T ACCEPT VISITORS 1	15	
		OTHER (SPECIFY):	96	
		DON'T KNOW	98	
8.24	Have you heard about people who go	YES	1	
	house-to-house (contact tracers)?	NO		8.27
		DON'T KNOW	98 è	8.27
8.25	Did a contact tracer come to your	YES		
	house during the past year?	NO	_ -	8.27
		DON'T KNOW9	98 è	8.27
8.26	What did they talk to you about?	CONTACT WITH PEOPLE WHO HAVE EBOLA		
		FINDING A SICK MEMBER OF THE HOUSEHOLD		
	PROBE: Anything else?	CAUSE OF EBOLA		
		WAYS EBOLA CAN BE TRANSMITTED		
	MULTIPLE ANSWERS	WAYS TO PREVENT EBOLA		
		ETU		
		SAFE BURIALS		
		BURIAL TEAMS		
		SURVIVORS	_	
		BUILDING A HAND WASHING STATION		
		OTHER (SPECIFY):		
0.27	During Chala Times did	DON'T KNOW		
8.27	During Ebola Time, did your	YES		0 26
	community organize groups to control	NO	_	8.36 9.26
	and protect against Ebola?	DON'T KNOW	10 E	8.36
0.30	Which many and the state of the	VOLITU CROUP	1	
8.28	Which groups were organized in your	YOUTH GROUP		
	community to control and protect	RELIGIOUS GROUP	4	

against Ebola? WOMEN'S GROUP	.3
SOCIAL CLUB	. 4
PROBE: Anything else? COMMUNITY TASK FORCE	.5
OTHER (SPECIFY)	96
MULTIPLE ANSWERS DON'T KNOW	98
8.29 Did any of these community-based YES	. 1
groups talk about accepting Ebola NO	. 2
survivors back into your community? DON'T KNOW	98
8.30 Did any of these community-based YES	.1
groups talk about how to prevent NO	. 2
Ebola in your community? DON'T KNOW	98
8.31 Did any of these community-based YES	.1
groups talk about new burial practices NO	. 2
to prevent Ebola in your community? DON'T KNOW	98
8.32 Did any of these community-based YES	.1
groups talk about how to care for NO	
orphans? DON'T KNOW	
8.33 Did any of these groups distribute YES	. 1
items to help prevent the spread of NO	. 2
Ebola in your community? DON'T KNOW	, ,
8.34 Are any of these groups still active in YES	
your community?	
DON'T KNOW	
8.35 Which ones are still active? YOUTH GROUP	.1
RELIGIOUS GROUP	
WOMEN'S GROUP	
SOCIAL CLUB	
COMMUNITY TASK FORCE	
OTHER (SPECIFY)	3 6
DON'T KNOW	98
8.36 During Ebola time, did any religious YES	.1
leader speak publicly about Ebola?	
DON'T KNOW	
8.37 What do you remember the religious CAUSE OF EBOLA	
leaders talking about? WAYS EBOLA CAN BE TRANSMITTED	
WAYS TO PREVENT EBOLA	.3
PROBE: Anything else?	• •
CONTACT TRACERS	-
MULTIPLE ANSWERS SAFE BURIALS	
BURIAL TEAMS	
SURVIVORS	
OTHER (SPECIFY):	
DON'T KNOW	
8.38 During Ebola time, did any other YES	· =
community leader speak publicly NO	
about Ebola? DON'T KNOW	98 è 8.40
8.39 What do you remember the CAUSE OF EBOLA	
community leaders talking about? WAYS EBOLA CAN BE TRANSMITTED	
WAYS TO PREVENT EBOLA	_
PROBE: Anything else? ETU	
CONTACT TRACERS	-
MULTIPLE ANSWERS SAFE BURIALS	. b
BURIAL TEAMS	_
SURVIVORS	
OTHER (SPECIFY):	. 8
· · · · · · · · · · · · · · · · · · ·	. 8 96
DON'T KNOW	. 8 96 98
8.40 Did President Sirleaf speak about YES	. 8 96 98 . 1
DON'T KNOW	. 8 96 98 . 1 . 2 è 8.42

	_			1
8.41	What did she say/talk about?	EBOLA IS A KILLER		
		EBOLA CAN BE PREVENTED		
	PROBE: Anything else?	EBOLA MUST GO	3	
		EBOLA IS REAL	4	
	MULTIPLE ANSWERS	CALL 4455	_	
		PROTECT YOURSELF, PROTECT YOUR FAMILY, PRO	DTECT	
		YOUR COMMUNITY	6	
		CURFEW	7	
		QUARANTINE	8	
		EBOLA WILL BE OVER SOON	9	
		DON'T KNOW	98	
8.42	Do you know if Ebola is over?	YES, IT IS OVER	1	
		NO, IT IS NOT OVER		è 8.44
		DON'T KNOW		è 8.45
8.43	Where did you first hear Ebola was	RADIO	1	è 8.45
01.0	over?	TELEVISION		è 8.45
	0.00	NEWSPAPER / FLYERS POSTERS/ PRINT MATERIAL		è 8.45
		TOWN CRIERS/PUBLIC ANNOUNCEMENTS		è 8.45
		COMMUNITY HEATLH WORKERS		è 8.45
		DOCTOR/NURSE/MIDWIFE		è 8.45
		GOVERNMENT/ COUNTY HEALTH TEAM		C 0.43
		CHURCH / MOSQUE / RELIGIOUS MEETINGS		è 8.45
		COMMUNITY MEETINGS		è 8.45
		RELATIVES		
				è 8.45
		FRIENDS / COMMUNITY MEMBERS/NEIGHBORS		è 8.45
		TRADITIONAL/COMMUNITY LEADERS		è 8.45
		OTHER (SPECIFY):		è 8.45
		DON'T KNOW	98	è 8.45
				è 8.45
8.44	How do you know Ebola is not over?	THERE ARE STILL CASES		
		HAVEN'T HEARD IT IS OVER		
	PROBE: Anything else?	OUR TEMPERATURE IS STILL BEING TAKEN		
	MULTIPLE ANSWERS	WE ARE STILL WASHING HANDS		
		ETUS ARE STILL OPEN	_	
		PEOPLE STILL DO NOT SHAKE HANDS		
		BORDERS ARE STILL CLOSED	7	
		POROUS BORDERS	_	
		NGOs ARE STILL ACTIVE		
		OTHER (SPECIFY):		
		DON'T KNOW	98	
8.45	Is there any information on Ebola that	YES	1	
	you still have questions about?	NO	2	è 9.1
		DON'T KNOW	98	è 9.1
8.46	What questions do you still have about	CAUSE / ORIGIN	1	
	Ebola?	SIGNS AND SYMPTOMS	2	
		WAYS TO PREVENT IT	3	
	Probe: Anything else?	MEDICAL CARE/TREATMENT OPTIONS	4	
		HOME-BASED CARE	5	
	MULTIPLE ANSWERS	HOW TO PROTECT OTHERS	6	
		SAFE BURIALS OF THOSE WHO DIED FROM EBOLA	7	
		BODY SWAB POLICY		
		SURVIVORS OF EBOLA		
		SUPPORT/CARE FOR THOSE QUARANTINED		
		NEW EBOLA VACCINE		
		NEW EBOLA TREATMENTS		
		INFORMATION ABOUT NEW NATIONAL CEMETER		
		PLANS FOR NATIONAL MONUMENT		
		OTHER (SPECIFY):		
		DON'T KNOW		
		ווטם ו אוטטע	30	

SECTION 9: SOCIAL COHESION

READ OUT LOUD: Now, I am going to read some statements about your community. For each statement, please tell me if you strongly agree, somewhat agree, somewhat disagree, strongly disagree. There are no right or wrong answers, just your opinion.

INTERVIEWER: DO NOT READ DON'T KNOW OUT LOUD; ONLY USE IF RESPONDENT IS NOT ABLE TO PROVIDE ANOTHER ANSWER.

ANSW	ER.	
9.1	People in this community do not help each other in	STRONGLY AGREE1
	times of need.	SOMEWHAT AGREE2
		SOMEWHAT DISAGREE3
	READ OPTIONS 1-4 OUT LOUD.	STRONGLY DISAGREE4
		DON'T KNOW98
9.2	People in this community tend not to trust one	STRONGLY AGREE1
	another.	SOMEWHAT AGREE2
		SOMEWHAT DISAGREE3
	READ OPTIONS 1-4 OUT LOUD.	STRONGLY DISAGREE4
		DON'T KNOW98
9.3	There are strong relationships between people in this	STRONGLY AGREE1
	community.	SOMEWHAT AGREE2
	,	SOMEWHAT DISAGREE3
	READ OPTIONS 1-4 OUT LOUD.	STRONGLY DISAGREE4
		DON'T KNOW98
9.4	People in this community are always able to discuss	STRONGLY AGREE
	problems that affect everyone.	SOMEWHAT AGREE
		SOMEWHAT DISAGREE3
	READ OPTIONS 1-4 OUT LOUD.	STRONGLY DISAGREE4
		DON'T KNOW98
9.5	People in this community keep their promises to one	STRONGLY AGREE
	another.	SOMEWHAT AGREE2
		SOMEWHAT DISAGREE3
	READ OPTIONS 1-4 OUT LOUD.	STRONGLY DISAGREE4
		DON'T KNOW98
9.6	People in this community have difficulty agreeing on	STRONGLY AGREE1
	issues.	SOMEWHAT AGREE2
		SOMEWHAT DISAGREE3
		STRONGLY DISAGREE4
	READ OPTIONS 1-4 OUT LOUD.	DON'T KNOW98
9.7	Whenever our community undertakes a project, we	STRONGLY AGREE1
	know that we will all work hard until it is	SOMEWHAT AGREE2
	accomplished.	SOMEWHAT DISAGREE3
		STRONGLY DISAGREE4
	READ OPTIONS 1-4 OUT LOUD.	DON'T KNOW98
9.8	Whenever a community problem arises, I have a lot	STRONGLY AGREE1
	of confidence that we will be able to solve it.	SOMEWHAT AGREE2
		SOMEWHAT DISAGREE3
	READ OPTIONS 1-4 OUT LOUD.	STRONGLY DISAGREE4
		DON'T KNOW98
9.9	Members of this community are able to tackle the	STRONGLY AGREE1
9.9	most difficult situations because we are all	STRONGLY AGREE
9.9	=	SOMEWHAT AGREE
9.9	most difficult situations because we are all	SOMEWHAT AGREE2

9.10	If people in this community work together, we can	STRONGLY AGREE 1
	find solutions to many of our problems.	SOMEWHAT AGREE 2
		SOMEWHAT DISAGREE 3
	READ OPTIONS 1-4 OUT LOUD.	STRONGLY DISAGREE 4
		DON'T KNOW98
9.11	There are strong leaders in our community	STRONGLY AGREE 1
		SOMEWHAT AGREE2
	READ OPTIONS 1-4 OUT LOUD.	SOMEWHAT DISAGREE 3
		STRONGLY DISAGREE4
		DON'T KNOW 98
9.12	Our leaders treat all people in the community	STRONGLY AGREE 1
	equally.	SOMEWHAT AGREE 2
		SOMEWHAT DISAGREE 3
	READ OPTIONS 1-4 OUT LOUD.	STRONGLY DISAGREE4
		DON'T KNOW 98
9.13	Our leaders listen to input from everyone in the	STRONGLY AGREE 1
	community when making a decision.	SOMEWHAT AGREE 2
		SOMEWHAT DISAGREE 3
		STRONGLY DISAGREE4
	READ OPTIONS 1-4 OUT LOUD.	DON'T KNOW 98
9.14	When it comes to activities related to Ebola and	STRONGLY AGREE 1
	health our leaders always lead by example.	SOMEWHAT AGREE
		SOMEWHAT DISAGREE
	READ OPTIONS 1-4 OUT LOUD.	STRONGLY DISAGREE
		DON'T KNOW98
9.15	Our leaders are good at resolving disagreements	STRONGLY AGREE 1

between people in the community.	SOMEWHAT AGREE2
	SOMEWHAT DISAGREE 3
READ OPTIONS 1-4 OUT LOUD.	STRONGLY DISAGREE 4
	DON'T KNOW98

APPENDIX C – KAP II MEN'S SURVEY

		N 1: RESPONDENT'S BACKGROUND				
READ	OUT LOUD: In this first section, I would like	to ask you some questions about your background	d			
NO.	QUESTION	CODING CATEGORIES		GOTO		
1.1.	Place of residence	URBAN	1			
	(Observed)	RURAL	2			
1.2.	How old are you?	<u>/ / / </u>		è 1.5		
	(In completed years)	DON'T KNOW		_		
1.5.	What is your marital status?	SINGLE/NEVER MARRIED				
	(Circle one)	MARRIED COHABITATING				
		SEPARATED/DIVORCED/WIDOWED				
		NO RESPONSE				
1.6.	What is your religion?	CHRISTIAN				
	,	ISLAM/MUSLIM	2			
		OTHER (SPECIFY):	96			
		NO RESPONSE	99			
1.7.	Did you ever attend school?	YES	1			
		NO	2	è 1.9		
1.8.	What is the highest level of education	ELEMENTARY (1 – 6)				
	you have completed?	JUNIOR HIGH (7 – 9)				
		SENIOR HIGH (10 – 12)				
		UNIVERSITY (BACHELOR, MASTERS, DOCTORATE	OTHER (SPECIFY): 96			
		· · · · · · · · · · · · · · · · · · ·				
1.9.	NA/hat kind of work (main assumation)	DON'T KNOW				
1.9.	What kind of work (main occupation) do you currently do?	PRIVATE BUSINESS (EXCLUDING PETTY TRADER .				
	do you currently do:	PLUMBER / CARPENTER / ELECTRICIAN / BUILDER				
		PETTY TRADER				
	SELECT ONE RESPONSE ONLY	FARMER				
		TEACHER / LECTURER / INSTRUCTOR	6			
		OTHER GOVERNMENT EMPLOYEES	7			
		STUDENT	8			
		OTHER (SPECIFY):	96			
1.10.	Does your household have at least one	ITEM	YES	NO		
	of the following items?	ELECTRICITY THAT IS CONNECTED	1	2		
		CONNECTED TO A GENERATOR	1	2		
		MOBILE PHONE	1	2		
		MATTRESS (NOT MADE OF STRAW OR GRASS)	1	2		
		ADULT BICYCLE	1	2		
		TABLE	1	2		
		CHAIRS	1	2		
		CUPBOARD	1	2		
		RADIO	1	2		
		TELEVISION	1	2		
1.11.		PIPED WATER				
	water for you and your family?	BOREHOLE	2			

		DUG WELL					3				
			RAINW	/ATER					4		
			SURFA	CE WAT	ΓER (RIVE	R/DAM	/ LAKE/F	POND/			
					-			EL)			
									6		
				R (SPECI					96		
	OUT LOUD: I would like to make		•	•	•	•					
same	pot. Then I will ask some questio	ns about ea	ch mem	ber of y	our hou	sehold.	Start fro	m the hea	d of th	e house	nold
	Name of household member	Age: Ente	r "0" if			Has he	e/she be	en sick	Did h	e/she se	e a CHW
	(FIRST NAME ONLY)	less than	1 year	Ge	nder	in the	past 2 r	nonths?	or go	to clinic/ health	
		old; ente	r "98"						facili	ty?	y?
		if unkno	wn;								
		enter "9	6" if	F	М	Υ	N	Don't	Υ	N	Don't
		age is 9	6 or	Г	IVI	T	IN	Know	, T	IN	Know
		olde	r								
1.28.		[_	_]	1	2	1	2	98	1	2	98
1.29.		[_	_]	1	2	1	2	98	1	2	98
1.30.		[_	_]	1	2	1	2	98	1	2	98
1.31.		[_	_]	1	2	1	2	98	1	2	98
1.32.		[]_	_]	1	2	1	2	98	1	2	98
1.33.		[]_	_]	1	2	1	2	98	1	2	98
1.34.		[]_	_]	1	2	1	2	98	1	2	98
1.35.		[]_	_]	1	2	1	2	98	1	2	98
1.36.		[]_	_]	1	2	1	2	98	1	2	98
1.37.		[_	_]	1	2	1	2	98	1	2	98
1.38.		[_	_]	1	2	1	2	98	1	2	98
1.39.		[]_	_]	1	2	1	2	98	1	2	98
1.40.		[]_	_]	1	2	1	2	98	1	2	98
1.41.		[]_	_]	1	2	1	2	98	1	2	98
1.42.		[]_	_]	1	2	1	2	98	1	2	98
1.43.		[]_	_]	1	2	1	2	98	1	2	98
DO NO	OT READ QUESTION OUTLOUD. I	NDICATE	YES						1		
ID THE	ERE IS A CHILD UNDER 5.		NO						2		
1.45.	Has anyone in your household	lost their	YES						1		
	job (or main source of income?									è 1.30	
	last year?	,								è 1.30	
	last year? DON'T KNOW98 NO RESPONSE99						è 1.30				

1.46.	Who lost their job in the last year?	SELF1	
		WIFE2	
	Probe: Anyone else?	HUSBAND3	
		SON4	
	MULTIPLE ANSWERS	DAUGHTER5	
		BROTHER/SISTER6	
		NIECE/NEPHEW7	
		AUNT/UNCLE8	
		MOTHER-IN-LAW/FATHER-IN-LAW9	
		GRANDMOTHER/GRANDFATHER10	
		GRANDCHILD11	
		OTHER (SPECIFY):96	
		DON'T KNOW98	
		NO RESPONSE99	
1.47.	•	WOOD1	
	your food for the day?	CHARCOAL2	
		KEROSENE3	
		NO RESPONSE98	
		OTHER (SPECIFY)96	è 1.32
1.48.	In the PAST 12 MONTHS, how often	OFTEN1	
	have you gone without that main	SOMETIMES2	
	source to prepare or cook your food for	RARELY3	
	the day?	NEVER4	
	READ OPTIONS 1 – 4 OUT LOUD	DON'T KNOW98	
1.49.		OFTEN1	
	have you gone without enough clean	SOMETIMES2	
	water to drink?	RARELY3	
	DEAD OPTIONS 4 4 OUT 1 OUD	NEVER4	
1.50	READ OPTIONS 1 – 4 OUT LOUD	DON'T KNOW98	
1.50.	•	OFTEN1	
	have you gone without medicines or medical treatment that you needed?	SOMETIMES2	
	medical treatment that you needed?	RARELY3 NEVER	
	READ OPTIONS 1 – 4 OUT LOUD	DON'T KNOW98	
1.51.		OFTEN	
1.51.	have you gone without enough food to	SOMETIMES	
	eat?	RARELY	
		NEVER4	
	READ OPTIONS 1 – 4 OUT LOUD	DON'T KNOW98	
1.52.		DAILY1	
		4-6 DAYS A WEEK2	
		1-3 DAYS A WEEK3	
		LESS THAN ONCE A WEEK4	
		1-2 TIMES PER MONTH5	
		LESS THAN ONCE A MONTH6	
		NEVER7	è 1.37
1.53.	Which radio stations do you listen to?	1 MEDIA HOUSE1	
		CATHOLIC MEDIA CENTER2	
		DESTINY RADIO3	
	Probe: Anything else?	ETERNAL LOVE WINNING AFRICA4	
		FANIMA BROADCASTING5	
	MULTIPLE ANSWERS	LIB 246	
		LIBERIA BROADCASTING SYSTEM7	
		LIBERIA WOMEN DEMOCRACY RADIO8	
		LIBERTY CHRISTIAN BROADCASTING NETWORK9	
		LUX FM 106.610	
		MAGIC INC11	
		PARROT12	
		POWER FM13	

		RADIO ADVENT		
		RADIO MONROVIA		
		ROYAL COMM, INC		
		SKY COMM, INC		
		SUPER FM	18	
		TRUTH FM 96.1	19	
		UNMIL RADIO	20	
		OTHER (SPECIFY)	96	
		DON'T KNOW	98	
1.54.	How often do you watch TV?	DAILY	1	
		4-6 DAYS A WEEK	2	
		1-3 DAYS A WEEK	3	
		LESS THAN ONCE A WEEK	4	
		1-2 TIMES PER MONTH	5	
		LESS THAN ONCE A MONTH	6	
		NEVER	7	
1.55.	How often do you read the newspaper?	DAILY		
	,	4-6 DAYS A WEEK		
		1-3 DAYS A WEEK		
		LESS THAN ONCE A WEEK	_	
		1-2 TIMES PER MONTH		
		LESS THAN ONCE A MONTH		
		NEVER		
1.56.	How often do you use a mobile (cell	DAILY		
2.50.	phone)?	4-6 DAYS A WEEK		
	prioricy.	1-3 DAYS A WEEK		
		LESS THAN ONCE A WEEK	_	
		1-2 TIMES PER MONTH		
		LESS THAN ONCE A MONTH		
		NEVER		è 1.40
1.57.	How often do you send or receive a text	DAILY		0 21.10
2.07.	on mobile (cell phone)?	4-6 DAYS A WEEK		
	on mount (con phone).	1-3 DAYS A WEEK		
		LESS THAN ONCE A WEEK		
		1-2 TIMES PER MONTH		
		LESS THAN ONCE A MONTH		
		NEVER		
1.58.	Do you have a hand-washing stand in	YES		
	your compound?	NO		è 2.1
1.59.	Please show me where members of	OBSERVED		
1.55.	your household most often wash their	NOT OBSERVED IN HOUSE/YARD		
	hands.	NO PERMISSION TO SEE		è 2.1
1.60.	OBSERVATION ONLY – DO NOT READ			C 2.1
1.00.	OUT LOUD	WATER IS AVAILABLE	1	
	Observe presence of water at the	WATER IS NOT AVAILABLE		
	handwashing station	WATER IS NOT AVAILABLE	∠	
1.61.	OBSERVATION ONLY – DO NOT READ			
1.01.	OUT LOUD	SOAP OR DETERGENT	1	
	Observe presence of soap, detergent, or	ASH, MUD, SAND	2	
	other cleansing agent	NONE	3	
	other cleansing agent			

SECTION 3: TREATMENT-SEEKING BEHAVIOURS FOR EBOLA

READ OUT LOUD: Thank-you. In this next section, I would like to ask you some questions about Ebola

NO.	QUESTION	CODING CATEGORIES	SKIP
3.11.	During Ebola Time (the time that Ebola	YES1	
	was really bad), did anyone in your	NO2	è 4.1
	community have Ebola?	DON'T KNOW98	è 4.1
		NO RESPONSE99	è 4.1
3.12.	About how many people in your	ALMOST EVERYONE1	
	community had Ebola when it was really	MORE THAN HALF2	
	bad?	LESS THAN HALF3	
	Would you say that it was	VERY FEW4	
	(READ OPTIONS 1-4 OUT LOUD)	DON'T KNOW98	
3.13.	Were people in the community able to	YES1	
	keep those with Ebola separated/isolated	NO2	è 3.6
	from the rest of the household members?	DON'T KNOW98	è 3.6
3.14.	How many of them were	ALMOST EVERYONE	
	separated/isolated?	MORE THAN HALF	
		LESS THAN HALF	
	READ OPTIONS 1-4 OUT LOUD	VERY FEW4	
		DON'T KNOW 98	
3.15.	How were they separated/isolated?	AT HOME IN A SEPARATE ROOM	
,.±J.	(Where were they kept?)	IN THE HOUSE AND THE FAMILY LEFT2	
	(Where were they kept:)	SEMI-COMMUNITY CARE CENTER3	
	PROBE: Anything else?	COMMUNITY CARE CENTERS/CCC4	
	FRODE. Anything eise:	OTHER (SPECIFY): 96	
	MULTIPLE ANSWERS	DON'T KNOW98	
1.4.6			
3.16.	Do you know if those who had Ebola	YES) a o
	symptoms sought care outside the house?	NO	è 3.8
	Mile and district and from high 2	DON'T KNOW98	è 3.8
3.17.	Where did they go for help?	TRADTIONAL HEALER	
	2225	SPIRITUAL HEALER	
	PROBE: Anywhere else?	COMMUNITY HEALTH WORKER (GCHV)3	
		COMMUNITY TASK FORCE	
	MULTIPLE ANSWERS	COMMUNITY CARE CENTER (CCC)5	
		EBOLA TREATMENT UNIT (ETU)("TREATMENT	
		CENTER")6	
		OTHER HEALTH FACILITY7	
		OTHER (SPECIFY):96	
		DON'T KNOW98	
3.18.	About how many of those in your	ALL OF THEM1	
	community who had symptoms of Ebola	MOST OF THEM2	
	survived the illness?	SOME OF THEM3	
	Would you say it was	VERY FEW OF THEM4	
		NONE5	
	(READ OPTIONS 1-4 OUT LOUD)	DON'T KNOW98	
		NO RESPONSE99	
3.19.	Did anyone in your household have Ebola	YES1	
	in the past year?	NO2	è 4.1
		DON'T KNOW98	è 4.1
		NO RESPONSE99	è 4.1
3.20.	How many people in your household had	/ / / People	
	Ebola?	DON'T KNOW98	
		NO RESPONSE	

SECTION 4: PREVENTIVE PRACTICES DURING EBOLA

READ OUT LOUD: Thank-you. For the next questions, I would like you to think back to the time that Ebola was really bad (Ebola Time)

NO	QUESTION	CODING CATEGORIES	GOTO
.3.	During the time when Ebola was really bad,	YES 1	
	did you make any changes to your daily	NO 2	è 4.3
	habits or traditions to avoid getting Ebola?		
.4.	What changes did you make?	STOPPED EATING BUSHMEAT1	
		STOPPED EATING FRUIT EATEN BY BATS 2	
	PROBE: Anything else?	STOPPED PREPARING BUSHMEAT 3	
ļ		STOPPED VISITING PEOPLE 4	
ļ	MULTIPLE ANSWERS	DIDN'T ALLOW STRANGERS TO VISIT US 5	
ļ		STOPPED SHAKING HANDS 6	
		STOPPED TOUCHING PEOPLE (AVOID PHYSICAL	
		CONTACT) 7	
		AVOIDED CROWDED PLACES 8	
		STAYED MOST OF THE TIME AT HOME	
		DIDN'T SHARE ITEMS WITH OTHER PEOPLE (CUPS,	
		SPOONS, ETC.)	
		ALWAYS WASHED HANDS11	
		STOPPED ATTENDING BURIALS 12	è 4.6
ļ		OTHER (SPECIFY)96	
21.	Did you attend any burials during Ebola	YES 1	
	time?	NO2	è 4.6
ļ		DON'T KNOW98	è 4.6
ļ		NO RESPONSE	è 4.6
22.	Did you assist in the burial practices?	YES	
	The four access in the contain processes.	NO	è 4.6
		DON'T KNOW98	è 4.6
ļ		NO RESPONSE	è 4.6
.23.	What did you do in the burial practice?	TOUCHED THE BODY	0
	The same year are in the same practice.	BATHED THE BODY	
	PROBE: Anything else?	DRESSED THE BODY	
ļ	The serving close.	SAT DOWN NEAR THE BODY (KEPT WAKE)	
ļ	MULTIPLE ANSWERS	PRAYED OVER THE BODY5	
		GROOMED THE BODY	
		BURIED THE BODY7	
		OTHER (SPECIFY):96	
ļ		NO RESPONSE	
24.	Have you heard of the 4455 Hotline	YES	
<u>-</u>	Number?	NO	è 4.10
			C 7.10
.25.	Did anyone in your household call the 4455	YES	\
	Hotline Number during Ebola Time?	NO	è 4.10
.26.	What was the reason for calling the Hotline	GET HEALTH INFORMATION ON EBOLA 1	
	Number during Ebola Time?	REPORT A DEATH 2	
		REPORT A SUSPECTED CASE	
	PROBE: Anything else?	TO LOCATE A FAMILY MEMBER OR FRIEND 4	
ļ			
	MULTIPLE ANSWERS		
.27.	Did people that answer the hotline resolve	YES 1	
	your need?	NO 2	
.28.	In your opinion, do people need to	YES, NEED TO CONTNUE1	
.20.	continue to protect themselves from Ebola	NO, NOT NEEDED	
ı	or is it not needed anymore?	DON'T KNOW	
l	is it not needed anymore?	1 DUN 1 KNUW98	1
.29.	Are you taking any action nowadays to	YES, TAKING ACTIONS 1	1

	not taking anymore preventive actions?		
4.30.	What things are you doing nowadays to	AVOIDING EATING BUSHMEAT 1	
	protect yourself from getting Ebola?	AVOIDING EATING FRUIT EATEN BY BATS	
	protest yoursen from getting about	AVOIDING PREPARING BUSHMEAT	
	PROBE: Anything else?	AVOIDING VISITING PEOPLE	
	r NODE. Anything else:	NOT ALLOWING STRANGERS TO VISIT US	
	MULTIPLE ANSWERS	AVOIDING SHAKING HANDS	
	WOLTIPLE ANSWERS		
		AVOIDING TOUCHING PEOPLE (AVOIDING PHYSICAL	
		CONTACT) 7	
		AVOIDING CROWDED PLACES	
		STAYING MOST OF THE TIME AT HOME9	
		NOT SHARING ITEMS WITH OTHER PEOPLE (CUPS,	
		SPOONS, ETC.)	
		ALWAYS WASHING HANDS 11	
		NOT ATTENDING BURIALS12	
		TAKING MEDICINES13	
		AVOIDING MAN/WOMAN BUSINESS 14	
		OTHER (SPECIFY)96	
		NO RESPONSE	
4.31.	What are some things that you are doing	EATING BUSH MEAT1	
	now that you stopped doing when Ebola	EATING FRUIT EATEN BY BATS2	
	was really bad?	PREPARING BUSH MEAT 3	
		VISITING PEOPLE 4	
	PROBE: Anything else?	ALLOWING PEOPLE TO VISIT US5	
		SHAKING HANDS6	
	MULTIPLE ANSWERS	GOING TO CROWDED/PUBLIC PLACES 7	
		WASHING HANDS WITH CHLORINE 8	
		ATTENDING BURIALS9	
		GOING TO WORK 10	
		TAKING CHILDREN TO SCHOOL	
		GOING TO THE HEALTH CENTER 12	
		OTHER (SPECIFY)96	
		NO RESPONSE	
4.32.	Have you attended any funerals/burials	YES	
1.52.	since May of this year?	NO	è 4.17
	Since may or any year.	DON'T KNOW98	è 4.17
		NO RESPONSE	è 4.17
4.33.	Did you help with body preparations for the	YES	C 1.17
4.55.	burial(s)?	NO	è 4.17
	burial(s):	DON'T KNOW	è 4.17
		NO RESPONSE	è 4.17
4.24	What did you do to help prepare the bodies	TOUCHED THE BODY	E 4.17
4.34.	for burial?		
	ioi pullal:	BATHED THE BODY	
	DPORE: Anything class		
	PROBE: Anything else?	SAT DOWN NEAR THE BODY (KEPT WAKE)	
	MULTIPLE ANSWERS		
	INIOLITIE ANSWERS	GROOMED THE BODY	
		BURIED THE BODY	
		OTHER (SPECIFY): 96	
4.05		NO RESPONSE	
4.35.	Are there school-aged children in your	YES 1	
	household?	NO	è 4.20
4.36.	Did they attend school during the last	YES 1	è 4.20
	semester?	NO 2	
4.37.	What are the reasons the child(ren) in your	SCHOOL STILL CLOSED 1	
	household did not go back to school?	AFRAID SCHOOL IS INFECTED2	
		AFRAID OF OTHER CHILDREN WHO HAD EBOLA 3	
	PROBE: Anything else?	CHILD IS EBOLA SURVIVOR/NOT ACCEPTED BACK 4	
		PARENT IS EBOLA SURVIVOR/STIGMA5	
	MULTIPLE ANSWERS	OTHER (SPECIFY)96	
		30	I

		NO RESPONSE	
4.38.	Are there Ebola orphans living in your	YES	è 4.20
	community?	NO 2	
		DON'T KNOW98	

	SECTION 5: AWARENESS AND KNOWLEDGE OF CAUSES, SIGNS, SYMPTOMS & TRANSMISSION					
NO.	QUESTION	CODING CATEGORIES	GOTO			
READ	OUTLOUD: Now I would like to ask you a	few things about your knowledge of Ebola				
5.16	What started the Ebola outbreak in	VIRUS1				
	Liberia?	BATS / MONKEYS / CHIMPANZEES2				
		GOD OR HIGHER POWER3				
	PROBE: Anything else?	LIBERIAN GOVERNMENT4				
		WEST/US/EUROPE5				
	MULTIPLE ANSWERS	OTHER (SPECIFY):96				
		DON'T KNOW98				
5.17	How does a person get Ebola?	PREPARING BUSH MEAT 1				
		EATING BUSH MEAT				
	PROBE: Anything else?	EATING FRUITS THAT HAVE BEEN BITTEN BY BATS 3				
		FROM DOGS4				
	MULTIPLE ANSWERS	BODILY FLUID OF AN INFECTED PERSON 5				
		MOSQUITO BITE 6				
		SHAKING THE HANDS OF AN INFECTED PERSON				
		ATTENDING BURIALS OF PEOPLE WHO DIED FROM EBOLA 8				
		TOUCHING/WASHING/ WRAPPING PEOPLE WHO HAVE				
		DIED FROM EBOLA				
		TOUCHING THINGS AN INFECTED PERSON HAS TOUCHED 10 HAVING SEX WITH SOMONE WHO IS INFECTED 11				
		HAVING SEX WITH SOMEONE WHO IS INFECTED 11 HAVING SEX WITH SOMEONE WHO HAS RECOVERED 12				
		OTHER (SPECIFY):96				
		DON'T KNOW				
5.18	What are the signs and symptoms of	FEVER				
3.10	Ebola?	HEADACHE				
	Lbola:	MUSCLE PAIN				
	PROBE: Anything else?	FATIGUE/WEAKNESS				
	TROBE. Anything cise:	DIARRHEA				
	MULTIPLE ANSWERS	VOMITING (WITH OR WITHOUT BLOOD)				
		ABDOMINAL (STOMACH) PAIN				
		LACK OF APPETITE8				
		SORE THROAT9				
		RASH10				
		BLEEDING OF THE GUMS11				
		BLOOD IN STOOL 12				
		RED EYES				
		OTHER (SPECIFY):96				
		DON'T KNOW98				
5.19	What can a person do to safely care	NOTHING (IT'S HARD TO RECOVER)1				
	for a family member suspected of	KEEP THE PERSON ONE METER AWAY FROM OTHERS 2				
	having Ebola?	HAVING ONLY ONE CAREGIVER 3				
		DO NOT TOUCH THE PERSON OR THEIR BODY FLUIDS 4				
	PROBE: Anything else?	DO NOT TOUCH THINGS THE PERSON HAS TOUCHED				
		(SOILED CLOTHES)				
	MULTIPLE ANSWERS	USE/PROTECT WITH GLOVES/PLASTIC				
		FREQUENTLY WASH HANDS WITH SOAP/CHLORINE 7				
		PROVIDE SICK PERSON WITH FOOD, WATER, AND OTHER				
		FLUIDS				
		ISOLATE /SEPARATE THEM IN A DIFFERENT ROOM 9 GO TO THE CLINIC/HEALTH FACILITY				
		CALL 4455				
		OTHER (SPECIFY):				
		DON'T KNOW				
5.20	Do you think it's possible for someone	YES	1			
J.2U	to have Ebola but not show any signs	NO				
	to have Ebola but flot show any signs	INO				

	or symptoms?	DON'T KNOW	
5.21	Do you believe that you can get Ebola	YES	
3.21	from a person who is infected, but	NO	
	doesn't have any signs and	DON'T KNOW	
	symptoms?	DON'T KNOW	
5.22	Do you believe that traditional healers	YES 1	
5.22	can cure someone with Ebola?	NO	
	cui cui e someone with Esolu.	DON'T KNOW	
5.23	Do you believe that spiritual healers	YES	
3. 2 3	can cure someone with Ebola?	NO	
	cui cui e someone with Esolu.	DON'T KNOW	
5.24	Have you heard of certificates that	YES	
3.24	health workers gave to survivors to	NO	è 5.11
	indicate that they are Ebola-free?	DON'T KNOW	è 5.11
5.25	How sure are you that people with	VERY SURE	0 0.11
3.23	certificates are really free of Ebola?	SOMEWHAT SURE	
		SOMEWHAT UNSURE	
	(READ OPTIONS 1-4 OUT LOUD)	NOT AT ALL SURE	
	(DON'T KNOW98	
5.26	Can people be treated for Ebola?	YES	
0.20	Campoopio no menera ion ancien	NO	è 5.13
		DON'T KNOW98	è 5.13
5.27	How fast does someone need to be	RIGHT AWAY	
	treated to increase his or her chances	WITHIN 24 HOURS 2	
	of survival?	WITHIN 1 WEEK 3	
		OTHER (SPECIFY)	
		DON'T KNOW98	
5.28	What are the THREE most important	RADIO1	
	ways/sources you get health	TELEVISION 2	
	information when you need it?	NEWSPAPER / FLYERS POSTERS/ PRINT MATERIALS 3	
		TOWN CRIERS/PUBLIC ANNOUNCEMENTS 4	
	PROBE: Anything else?	COMMUNITY HEATLH WORKERS5	
		DOCTOR/NURSE/MIDWIFE 6	
	ALLOW UP TO THREE ANSWERS	GOVERNMENT/ COUNTY HEALTH TEAM 7	
		CHURCH / MOSQUE / RELIGIOUS MEETINGS 8	
		COMMUNITY MEETINGS9	
		RELATIVES10	
		FRIENDS / COMMUNITY MEMBERS/NEIGHBORS 11	
		TRADITIONAL/COMMUNITY LEADERS 12	
		OTHER (SPECIFY):96	
		DON'T KNOW 98	

5.29	What are the THREE most important	RADIO 1	
	ways/sources you get information	TELEVISION 2	
	about Ebola?	NEWSPAPER / FLYERS POSTERS/ PRINT MATERIALS 3	
		TOWN CRIERS/PUBLIC ANNOUNCEMENTS 4	
	PROBE: Anything else?	COMMUNITY HEATLH WORKERS 5	
		DOCTOR/NURSE/MIDWIFE 6	
	ALLOW UP TO THREE ANSWERS	GOVERNMENT/ COUNTY HEALTH TEAM 7	
		CHURCH / MOSQUE / RELIGIOUS MEETINGS 8	
		COMMUNITY MEETINGS9	
		RELATIVES10	
		FRIENDS / COMMUNITY MEMBERS/NEIGHBORS 11	
		TRADITIONAL/COMMUNITY LEADERS 12	
		OTHER (SPECIFY):96	
		DON'T KNOW 98	
5.30	Who would you trust to provide you	RADIO 1	
	with information about funeral/burial	TELEVISION 2	
	practices that that do not involve	NEWSPAPER / FLYERS POSTERS/ PRINT MATERIALS 3	
	touching or washing the body?	TOWN CRIERS/PUBLIC ANNOUNCEMENTS 4	
		COMMUNITY HEATLH WORKERS 5	
	Probe: Anyone else?	DOCTOR/NURSE/MIDWIFE 6	
		GOVERNMENT/ COUNTY HEALTH TEAM 7	
	ALLOW UP TO THREE ANSWERS	CHURCH / MOSQUE / RELIGIOUS MEETINGS 8	
		COMMUNITY MEETINGS 9	
		RELATIVES10	
		FRIENDS / COMMUNITY MEMBERS/NEIGHBORS 11	
		TRADITIONAL/COMMUNITY LEADERS 12	
		OTHER (SPECIFY):96	
		DON'T KNOW98	

SECTION 6: ATTITUDES TOWARDS SURVIVORS

SURVIVOR STIGMA: Now, I am going to read things that people say about Ebola. I would like you to tell me how much you agree or disagree with them. For each of the phrases that I will read, please tell me if you strongly agree, somewhat agree, somewhat disagree, or strongly disagree with what they say. There are no right or wrong answers only your opinion. INTERVIEWER: READ ONLY ANSWERS 1 TO 4. MARK THE DON'T KNOW RESPONSE ONLY IF RESPONDENT IS NOT ABLE TO PROVIDE ANOTHER ANSWER.

	This is what people say:	STRONGLY AGREE	SOMEWHAT AGREE	SOMEWHAT DISAGREE	STRONGLY DISAGREE	DON'T KNOW
6.14	I would buy fresh vegetables from a shopkeeper who is an Ebola survivor.	1	2	3	4	98
6.15	A child who has survived Ebola will put other students at risk if he/she goes back to school.	1	2	3	4	98
6.16	I would welcome back neighbors that survived Ebola.	1	2	3	4	98
6.17	Family members of people who died from Ebola are a threat to their community	1	2	3	4	98
6.18	I would be willing to bring a child into my family if he/she lost both parents to Ebola.	1	2	3	4	98
6.19	I would avoid hugging someone who survived Ebola	1	2	3	4	98
6.20	I would avoid people from communities that had a lot of Ebola	1	2	3	4	98
6.21	People who contracted Ebola did something wrong to get it/deserve it.	1	2	3	4	98
6.22	Ebola survivors should be allowed to work at any type of job.	1	2	3	4	98
6.23	I would visit the household of someone who died from Ebola	1	2	3	4	98
6.24	I would eat from the same food plate as an Ebola survivor.	1	2	3	4	98
6.25	I would seek care from a nurse who treated Ebola patients	1	2	3	4	98
6.26	I am worried about going to a clinic/health facility that treated Ebola patients	1	2	3	4	98

SECTION 7: RISK PERCEPTIONS AND ATTITUDES

Now, I would like to ask your opinions about various illnesses and health needs.

10.	How possible is it that you or a member of your family might get (READ ILLNESS) in the next 4 months? <i>READ OPTIONS 1-4</i>	VERY POSSIBLE	SOME WHAT POSSIBLE	NOT VERY POSSIBLE	NOT POSSIBLE AT ALL	DON'T KNOW
7.8	MALARIA	1	2	3	4	98
7.9	DIARRHEA	1	2	3	4	98
7.10	PNEUMONIA/COUGH WITH DIFFICULTY BREATHING	1	2	3	4	98
7.11	MEASLES (SKIN RASHES)	1	2	3	4	98
7.12	TUBERCULOSIS/CHRONIC	_		_	_	
	COUGH/COUGHING BLOOD	1	2	3	4	98
7.13	COMPLICATIONS DURING PREGNANCY	1	2	3	4	98
7.14	HIV/AIDS	1	2	3	4	98
	In your opinion, what are the THREE biggest health issues in your community? DO NOT READ ANSWERS OUTLOUD	EBOLA MEASLES TUBERCULO COMPLICAT TYPHOID FEVER COUGH COMMON C HEADACHE CHOLERA OTHER (SPE	SIS/CHRONIC IONS DURING OLD	COUGH/COUG AND AFTER BIF	BREATHING	4 5 6 7 8 9 10 11 12 13 96
7.9.	What level of risk do you think you have in getting Ebola? (READ OPTIONS 1-4)	NO RISK LOW RISK MEDIUM RIS	SK		2	99
7.17	How confident are you that you can protect yourself and your family from becoming infected with Ebola in the future? Are you?	EXTREMELY SOMEWHAT NOT VERY C NOT CONFIL	CONFIDENT CONFIDENT ONFIDENT DENT AT ALL			
7.18	(READ OPTIONS 1-4) How confident are you that your village can control the spread of Ebola if there was another outbreak in the future? (READ OPTIONS 1-4)	SOMEWHAT NOT VERY C NOT CONFIL DON'T KNO	CONFIDENT ONFIDENT DENT AT ALL		2 3 4 98	
7.19	How confident are you that the	EXTREMELY	CONFIDENT		1	
	Government of Liberia can prevent an Ebola outbreak in the future?	NOT VERY C	ONFIDENT		3	
	(READ OPTIONS 1-4)					
7.20	If someone in your village has signs and					
, .20	symptoms of Ebola, how much of a threat could that person be to the community?	SOMEWHAT	OF A THREAT		2	
	(READ OPTIONS 1-4)	NOT A THRE	AT AT ALL		4	

		·	
7.21	How concerned are you that there will be	VERY CONCERNED 1	
	another Ebola outbreak in Liberia in the	SOMEWHAT CONCERNED2	
	next 12 months?	NOT VERY CONCERNED 3	è 7.15
		NOT AT ALL CONCERNED 4	è 7.15
	(READ OPTIONS 1-4)	DON'T KNOW 98	è 7.16
7.22	Why are you concerned?	IT CAN COME BACK ANY TIME 1	è 7.16
		IT IS NOT GONE 2	è 7.16
	PROBE: Anything else?	THERE IS NO TREATMENT 3	è 7.16
		MONKEYS STILL HAVE IT 4	
	MULTIPLE ANSWERS	PEOPLE CAN BRING IT FROM SIERRA LEONE/	è 7.16
		GUINEA/OTHER COUNTRY5	è 7.16
		PEOPLE STILL GET EBOLA 6	è 7.16
		OTHER (SPECIFY):96	è 7.16
		DON'T KNOW 98	è 7.16
		NO RESPONSE99	
7.23	Why are you not concerned?	IT CANNOT COME BACK 1	
		EBOLA IS GONE FOR GOOD2	
	PROBE: Anything else?	WE NOW KNOW HOW TO PREVENT IT 3	
		THE GOVERNEMENT WILL PROTECT US 4	
	MULTIPLE ANSWERS	GOD/ALLAH WILL PROTECT US 5	
		THERE IS TREATMENT 6	
		THERE WILL BE A VACCINE 7	
		OTHER (SPECIFY):96	
		DON'T KNOW 98	
		NO RESPONSE	
7.24	From your experience with the recent Ebola	CONTACT TRACING TEAMS (HOUSE-TO-HOUSE) 1	
	outbreak, what were the main things that	TAKING PEOPLE TO THE ETU2	
	people did that were the best at stopping	AVOIDING VISITING PEOPLE 3	
	Ebola?	WASHING HANDS4	
		AVOIDING BURIALS5	
	PROBE: Anything else?	NOT EATING BUSHMEAT 6	
		NOT PREPARING BUSHMEAT 7	
	MULTIPLE ANSWERS	NOT TOUCHING FLUIDS OF PEOPLE INFECTED WITH	
		EBOLA 8	
		NOT TOUCHING PEOPLE WHO DIED FROM EBOLA 9	
		NOT SHAKING HANDS 10	
		NOT TOUCHING PEOPLE	
		AVOIDING CROWDED PLACES 12	
		ISOLATING INFECTED PEOPLE	
		REPORTING SICK PEOPLE PROMPTLY14	
		PRAYING	
		STOPPED GOING TO CLINICS/HEALTH FACILITIES 16	
		OTHER (SPECIFY):	
		DON'T KNOW 98	

7.17	In your community, what worked the best	LEADERS INVOLVED
	in stopping the spread of Ebola?	RELIGIOUS LEADERS SPEAKING OUT 2
		MEETINGS TO INFORM PEOPLE 3
	(SELECT ONLY ONE ANSWER)	YOUTH GROUPS TO INFORM PEOPLE 4
		DISTRIBUTION OF ITEMS TO PREVENT SPREAD OF
		EBOLA 5
		CLOSING THE BORDERS 6
		TASK FORCES ASSISTING THE SICK 7
		CONTACT TRACERS 8
		QUARANTINING PEOPLE THAT CAME BACK 9
		OTHER (SPECIFY)
		DON'T KNOW 98

	SECTION 8: EBOLA PROGRAM EXPOSURE			
NO.	QUESTION	CODING CATEGORIES	GOTO	
8.7	Have you seen this logo?	YES		
	(SHOW SCREEN TO PARTICIPANT)	NO2	è 8.3	
		DON'T KNOW99	è 8.3	
8.8	What does this logo tell you?	HEALTHY CHILD/HEALTHY BABY1		
		TAKE CARE OF YOUR CHILD/BABY2		
		HEALTHY LIFE		
		WHEN YOUR BABY IS HEALTHY, YOU ARE HEALTHY . 4		
		APPROVED BY THE MOH5		
		OTHER (SPECIFY)96		
0.0	CINICE EDOLA TIME CTARTER L	DON'T KNOW		
8.9	SINCE EBOLA TIME STARTED, have you	YES	è 8.5	
	seen or heard any messages in the media about Ebola?	DON'T KNOW	e 8.5 è 8.5	
8.10		BOLA CAN BE PREVENTED	e 6.5	
8.10	What messages have you seen or heard in the media?	EBOLA CAN BE PREVENTED		
	neard in the media:	EBOLA IS REAL		
	PROBE: Anything else?	PROTECT YOURSELF, PROTECT YOUR FAMILY, PROTECT		
	PRODE. Anything else:	YOUR COMMUNITY4		
	MULTIPLE ANSWERS	EBOLA HAS NO CURE5		
	INIOETH LE ANOVERS	EBOLA IS EVERYBODY'S BUSINESS		
		LET'S KICK EBOLA OUT OF LIBERIA		
		STOP THE STIGMA8		
		EARLY IN, EARLY OUT9		
		CALL 4455 HOTLINE10		
		NO MAN/WOMAN BUSINESS11		
		WHEN SICK, GO TO ETU12		
		STAY AWAY FROM/DO NOT TOUCH DEAD BODIES. 13		
		DO NOT ATTEND BURIAL SERVICES14		
		DO NOT EAT BUSHMEAT15		
		ALWAYS WASH YOUR HANDS16		
		NO SHAKING HANDS17		
		STAY AWAY FROM CROWDED PLACES18		
		DON'T ACCEPT VISITORS19		
		OTHER (SPECIFY):96		
		DON'T KNOW98		
		STAY AWAY FROM/DO NOT TOUCH DEAD BODIES		
		DON'T KNOW		
8.11	Have you heard the message "Ebola	YES1		
	Must Go?"	NO2	è 8.8	
		DON'T KNOW98	è 8.8	

8.12	Where did you hear the message	RADIO1	
0.12	"Ebola Must Go?"	TELEVISION	
	Ebola Wust Go:	NEWSPAPER / FLYERS POSTERS/ PRINT MATERIALS. 3	
	DDODE: Amathing along	· · · · · · · · · · · · · · · · · · ·	
	PROBE: Anything else?	TOWN CRIERS/PUBLIC ANNOUNCEMENTS 4	
		COMMUNITY HEATLH WORKERS5	
	MULTIPLE ANSWERS	DOCTOR/NURSE/MIDWIFE6	
		GOVERNMENT/ COUNTY HEALTH TEAM 7	
		CHURCH / MOSQUE / RELIGIOUS MEETINGS8	
		COMMUNITY MEETINGS9	
		RELATIVES10	
		FRIENDS / COMMUNITY MEMBERS/NEIGHBORS 11	
		TRADITIONAL/COMMUNITY LEADERS12	
		OTHER (SPECIFY):96	
		DON'T KNOW98	
8.13	What does the message "Ebola Must		
	Go" mean to you?		
8.14	Please complete the following	THE VIRUS/DISEASE1	
	expression: "Spread the message,	OTHER (WRONG ANSWER)2	
	not "	DON'T KNOW98	
8.15	Please complete the following	PROTECT YOUR COMMUNITY	
	expression: "Protect Yourself, Protect	OTHER (INCORRECT ANSWER)	
	Your Family, ?"	DON'T KNOW98	
8.16	Have you heard the following	YES	
0.10	expression: "Let's Kick Ebola out of	NO	è 8.12
	Liberia."	DON'T KNOW98	è 8.12
8.17	What does "Let's Kick Ebola out of	DOIN I KNOW	6 0.12
0.17	Liberia" mean to you?		
8.18	Have you heard the expression "Early	YES 1	
0.10		NO	è 8.14
	In, Early Out?"	DON'T KNOW	è 8.14
0.10	What does "Forth, In Forth, Out" moon	DON 1 KNOW98	e 8.14
8.19	What does "Early In, Early Out" mean		
0.20	to you?	VEC	
8.20	Have you heard the following	YES1	` 0.46
	expression: "Stop the Stigma?"	NO	è 8.16
		DON'T KNOW98	è 8.16
8.21	What does the expression "Stop the		
	Stigma" mean to you?		
	-		
8.22	Have you heard the expression "Ebola	YES1	
	Can Kill?"	NO2	è 8.18
		DON'T KNOW98	è 8.18
8.23	What does the expression "Ebola Can		
	Kill" mean to you?		
0.24	Did you receive on Fhala	VEC	
8.24	Did you receive an Ebola	YES	
	Package/Ebola Materials?	NO	
		DON'T KNOW98	
8.25	During Ebola Time, did your	YES1	
	community request assistance from	NO2	è 8.21
	the burial team?	DON'T KNOW98	è 8.21

8.26	How often did the burial team respond	ALWAYS	1	
0.20	to the request for assistance?	SOMETIMES		
		NEVER		
	(READ OPTIONS 1-3 OUT LOUD)	DON'T KNOW		
8.27	DURING EBOLA TIME, did anyone or	YES		
0.27	any group come to your community to	NO		è 8.24
	talk about EBOLA?	DON'T KNOW		è 8.24
8.28	Which groups came to talk about	CONTACT TRACERS		0 0.2 .
0.20	Ebola?	TASK FORCES		
		DRAMA CLUBS		
	PROBE: Who else?	NGOs		
	1 110021 11110 01501	GROUPS DISTRIBUTING ITEMS TO PREVENT		
	MULTIPLE ANSWERS	YOUTH GROUPS		
		COUNTY HEALTH TEAMS/MOH		
		NATIONAL MUSLIM COUNCIL		
		CIVIL SOCIETY GROUP		
		OTHER (SPECIFY)		
		DON'T KNOW		
8.29	What did these groups talk about?	EBOLA IS REAL		
-		EBOLA PREVENTION		
	PROBE: Anything else?	TRACING PEOPLE		
		SEEK CARE IMMEDIATELY	4	
	MULTIPLE ANSWERS	GO TO ETU IMMEDIATELY	5	
		SURVIVORS ARE SAFE	6	
		CALL 4455 HOTLINE	7	
		NO MAN/WOMAN BUSINESS	8	
		STAY AWAY FROM/DO NOT TOUCH DEAD B		
		DO NOT ATTEND BURIAL SERVICES		
		DO NOT EAT BUSHMEAT	11	
		ALWAYS WASH YOUR HANDS	12	
		NO SHAKING HANDS	13	
		STAY AWAY FROM CROWDED PLACES	14	
		DON'T ACCEPT VISITORS	15	
		OTHER (SPECIFY):	96	
		DON'T KNOW	98	
8.30	Have you heard about people who go	YES	1	
	house-to-house (contact tracers)?	NO		è 8.27
		DON'T KNOW	98	è 8.27
8.31	Did a contact tracer come to your	YES	1	
	house during the past year?	NO	2	è 8.27
		DON'T KNOW	98	è 8.27
8.32	What did they talk to you about?	CONTACT WITH PEOPLE WHO HAVE EBOLA	1	
		FINDING A SICK MEMBER OF THE HOUSEHO	LD 2	
	PROBE: Anything else?	SICK MEMBER OF THE HOUSEHOLD	_	
		CAUSE OF EBOLA		
	MULTIPLE ANSWERS	WAYS EBOLA CAN BE TRANSMITTED		
		WAYS TO PREVENT EBOLA		
		ETU		
		SAFE BURIALS		
		BURIAL TEAMS		
		SURVIVORS		
		BUILDING A HAND WASHING STATION		
		OTHER (SPECIFY):		
0.0-	,	DON'T KNOW		
8.33	During Ebola Time, did your	YES		\ \ 0.55
	community organize groups to control	NO		è 8.36
	and protect against Ebola?	DON'T KNOW		è 8.36
8.34	Which groups were organized in your	YOUTH GROUP		
	community to control and protect	RELIGIOUS GROUP	2	

	against Ebola?	WOMEN'S GROUP	3	
		SOCIAL CLUB	4	
	PROBE: Anything else?	COMMUNITY TASK FORCE	5	
		OTHER (SPECIFY)	96	
	MULTIPLE ANSWERS	DON'T KNOW	98	
8.35	Did any of these community-based	YES	1	
	groups talk about accepting Ebola	NO	2	
	survivors back into your community?	DON'T KNOW	98	
8.36	Did any of these community-based	YES	1	
	groups talk about how to prevent	NO	2	
	Ebola in your community?	DON'T KNOW	98	
8.37	Did any of these community-based	YES	1	
	groups talk about new burial practices	NO	2	
	to prevent Ebola in your community?	DON'T KNOW	98	
8.38	Did any of these community-based	YES	1	
	groups talk about how to care for	NO	2	
	orphans?	DON'T KNOW	98	
8.39	Did any of these groups distribute	YES	1	
	items to help prevent the spread of	NO	2	
	Ebola in your community?	DON'T KNOW	98	
8.40	Are any of these groups still active in	YES	1	
	your community?	NO		è 8.36
		DON'T KNOW		è 8.36
8.41	Which ones are still active?	YOUTH GROUP	1	
		RELIGIOUS GROUP		
	PROBE: Anything else?	WOMEN'S GROUP		
		SOCIAL CLUB		
	MULTIPLE ANSWERS	COMMUNITY TASK FORCE		
		OTHER (SPECIFY)		
		DON'T KNOW		
8.42	During Ebola time, did any religious	YES		\ 0.00
	leader speak publicly about Ebola?	NO DON'T KNOW		è 8.38
8.43	M/h ch do nome such ou the malicious	CAUSE OF EBOLA		è 8.38
8.43	What do you remember the religious leaders talking about?	WAYS EBOLA CAN BE TRANSMITTED		
	leaders taiking about?	WAYS TO PREVENT EBOLA		
	PROBE: Anything else?	ETU		
	PRODE. Anything eise:	CONTACT TRACERS		
	MULTIPLE ANSWERS	SAFE BURIALS		
	WIGETIF EL ANSWERS	BURIAL TEAMS		
		SURVIVORS		
		OTHER (SPECIFY):		
		DON'T KNOW		
8.44	During Ebola time, did any other	YES		
	community leader speak publicly	NO		è 8.40
	about Ebola?	DON'T KNOW	98	è 8.40
8.45	What do you remember the	CAUSE OF EBOLA	1	
	community leaders talking about?	WAYS EBOLA CAN BE TRANSMITTED	2	
		WAYS TO PREVENT EBOLA	2	
		WATS TO FILL VEINT LOOLA		
	PROBE: Anything else?	ETU	4	
	PROBE: Anything else?		4	
	PROBE: Anything else? MULTIPLE ANSWERS	CONTACT TRACERSSAFE BURIALS	4 5 6	
		ETU CONTACT TRACERS SAFE BURIALS BURIAL TEAMS	5 6 7	
		ETU CONTACT TRACERS SAFE BURIALS BURIAL TEAMS SURVIVORS	4 5 6 7	
		ETU CONTACT TRACERS SAFE BURIALS BURIAL TEAMS SURVIVORS OTHER (SPECIFY):	4678	
	MULTIPLE ANSWERS	ETU CONTACT TRACERS SAFE BURIALS BURIAL TEAMS SURVIVORS OTHER (SPECIFY): DON'T KNOW	4567896	
8.46	MULTIPLE ANSWERS Did President Sirleaf speak about	ETU	45789698	200
8.46	MULTIPLE ANSWERS	ETU CONTACT TRACERS SAFE BURIALS BURIAL TEAMS SURVIVORS OTHER (SPECIFY): DON'T KNOW YES NO	4567896981	è 8.42
8.46	MULTIPLE ANSWERS Did President Sirleaf speak about	ETU	4568969812	è 8.42 è 8.42

		EBOLA CAN BE PREVENTED	1
	PROBE: Anything else?	EBOLA MUST GO	
	, , , , , , , , , , , , , , , , , , , ,	EBOLA IS REAL	
	MULTIPLE ANSWERS	CALL 4455	
		PROTECT YOURSELF, PROTECT YOUR FAMILY, PROTECT	
		YOUR COMMUNITY	5
		CURFEW	
		QUARANTINE	
		EBOLA WILL BE OVER SOON	
		EDOLA WILL BE OVER SOON	
		OTHER (SPECIFY):	5
		DON'T KNOW	
8.48	Do you know if Ebola is over?	YES, IT'S OVER	
0.40	Do you know it Ebola is over:	NO, IT'S NOT OVER	è 8.44
		DON'T KNOW	è 8.45
9.40	Where did you first hear Ehele was	RADIO 1	è 8.45
8.49	Where did you first hear Ebola was over?		
	over?	TELEVISION	è 8.45
		NEWSPAPER / FLYERS POSTERS/ PRINT MATERIALS. 3	è 8.45
		TOWN CRIERS/PUBLIC ANNOUNCEMENTS	è 8.45
		COMMUNITY HEATLH WORKERS	è 8.45
		DOCTOR/NURSE/MIDWIFE	è 8.45
		GOVERNMENT/ COUNTY HEALTH TEAM	\ 0.45
		CHURCH / MOSQUE / RELIGIOUS MEETINGS	è 8.45
		COMMUNITY MEETINGS9	è 8.45
		RELATIVES	è 8.45
		FRIENDS / COMMUNITY MEMBERS/NEIGHBORS 11	è 8.45
		TRADITIONAL/COMMUNITY LEADERS	è 8.45
		OTHER (SPECIFY):	è 8.45
		DON'T KNOW98	è 8.45
			è 8.45
8.50	How do you know Ebola is not over?	THERE ARE STILL CASES	
		HAVEN'T HEARD IT'S OVER2 OUR TEMPERATURE IS STILL BEING TAKEN	
	PROBE: What else have you heard?	I OHR TEMPERATURE IS STILL BEING LAKEN 3	
	_		
	MULTIPLE ANSWERS	WE ARE STILL WASHING HANDS4	
	_	WE ARE STILL WASHING HANDS 4 ETUS ARE STILL OPEN	
	_	WE ARE STILL WASHING HANDS	
	_	WE ARE STILL WASHING HANDS	
	_	WE ARE STILL WASHING HANDS	
	_	WE ARE STILL WASHING HANDS	
	_	WE ARE STILL WASHING HANDS	
	MULTIPLE ANSWERS	WE ARE STILL WASHING HANDS	
8.51	Is there any information on Ebola that	WE ARE STILL WASHING HANDS	
8.51	MULTIPLE ANSWERS	WE ARE STILL WASHING HANDS 4 ETUS ARE STILL OPEN 5 PEOPLE STILL DO NOT SHAKE HANDS 6 THE BORDERS ARE STILL CLOSED 7 POROUS BORDERS 8 NGOS ARE STILL ACTIVE 9 OTHER (SPECIFY): 96 DON'T KNOW 98 YES 1 NO 2	è 9.1
	Is there any information on Ebola that you still have questions about?	WE ARE STILL WASHING HANDS 4 ETUS ARE STILL OPEN 5 PEOPLE STILL DO NOT SHAKE HANDS 6 THE BORDERS ARE STILL CLOSED 7 POROUS BORDERS 8 NGOS ARE STILL ACTIVE 9 OTHER (SPECIFY): 96 DON'T KNOW 98 YES 1 NO 2 DON'T KNOW 98	è 9.1 è 9.1
8.51	Is there any information on Ebola that you still have questions about? What questions do you still have about	WE ARE STILL WASHING HANDS 4 ETUS ARE STILL OPEN 5 PEOPLE STILL DO NOT SHAKE HANDS 6 THE BORDERS ARE STILL CLOSED 7 POROUS BORDERS 8 NGOS ARE STILL ACTIVE 9 OTHER (SPECIFY): 96 DON'T KNOW 98 YES 1 NO 2 DON'T KNOW 98 CAUSE / ORIGIN 1	
	Is there any information on Ebola that you still have questions about?	WE ARE STILL WASHING HANDS 4 ETUS ARE STILL OPEN 5 PEOPLE STILL DO NOT SHAKE HANDS 6 THE BORDERS ARE STILL CLOSED 7 POROUS BORDERS 8 NGOS ARE STILL ACTIVE 9 OTHER (SPECIFY): 96 DON'T KNOW 98 YES 1 NO 2 DON'T KNOW 98 CAUSE / ORIGIN 1 SIGNS AND SYMPTOMS 2	
	Is there any information on Ebola that you still have questions about? What questions do you still have about Ebola?	WE ARE STILL WASHING HANDS 4 ETUS ARE STILL OPEN 5 PEOPLE STILL DO NOT SHAKE HANDS 6 THE BORDERS ARE STILL CLOSED 7 POROUS BORDERS 8 NGOS ARE STILL ACTIVE 9 OTHER (SPECIFY): 96 DON'T KNOW 98 YES 1 NO 2 DON'T KNOW 98 CAUSE / ORIGIN 1 SIGNS AND SYMPTOMS 2 WAYS TO PREVENT IT 3	
	Is there any information on Ebola that you still have questions about? What questions do you still have about	WE ARE STILL WASHING HANDS 4 ETUS ARE STILL OPEN 5 PEOPLE STILL DO NOT SHAKE HANDS 6 THE BORDERS ARE STILL CLOSED 7 POROUS BORDERS 8 NGOS ARE STILL ACTIVE 9 OTHER (SPECIFY): 96 DON'T KNOW 98 YES 1 NO 2 DON'T KNOW 98 CAUSE / ORIGIN 1 SIGNS AND SYMPTOMS 2 WAYS TO PREVENT IT 3 MEDICAL CARE/TREATMENT 4	
	Is there any information on Ebola that you still have questions about? What questions do you still have about Ebola? Probe: Anything else?	WE ARE STILL WASHING HANDS 4 ETUS ARE STILL OPEN 5 PEOPLE STILL DO NOT SHAKE HANDS 6 THE BORDERS ARE STILL CLOSED 7 POROUS BORDERS 8 NGOS ARE STILL ACTIVE 9 OTHER (SPECIFY): 96 DON'T KNOW 98 YES 1 NO 2 DON'T KNOW 98 CAUSE / ORIGIN 1 SIGNS AND SYMPTOMS 2 WAYS TO PREVENT IT 3 MEDICAL CARE/TREATMENT 4 HOME-BASED CARE 5	
	Is there any information on Ebola that you still have questions about? What questions do you still have about Ebola?	WE ARE STILL WASHING HANDS 4 ETUS ARE STILL OPEN 5 PEOPLE STILL DO NOT SHAKE HANDS 6 THE BORDERS ARE STILL CLOSED 7 POROUS BORDERS 8 NGOS ARE STILL ACTIVE 9 OTHER (SPECIFY): 96 DON'T KNOW 98 YES 1 NO 2 DON'T KNOW 98 CAUSE / ORIGIN 1 SIGNS AND SYMPTOMS 2 WAYS TO PREVENT IT 3 MEDICAL CARE/TREATMENT 4 HOME-BASED CARE 5 HOW TO PROTECT OTHERS 6	
	Is there any information on Ebola that you still have questions about? What questions do you still have about Ebola? Probe: Anything else?	WE ARE STILL WASHING HANDS 4 ETUS ARE STILL OPEN 5 PEOPLE STILL DO NOT SHAKE HANDS 6 THE BORDERS ARE STILL CLOSED 7 POROUS BORDERS 8 NGOS ARE STILL ACTIVE 9 OTHER (SPECIFY): 96 DON'T KNOW 98 YES 1 NO 2 DON'T KNOW 98 CAUSE / ORIGIN 1 SIGNS AND SYMPTOMS 2 WAYS TO PREVENT IT 3 MEDICAL CARE/TREATMENT 4 HOME-BASED CARE 5 HOW TO PROTECT OTHERS 6 SAFE BURIALS OF THOSE WHO DIED FROM EBOLA 7	
	Is there any information on Ebola that you still have questions about? What questions do you still have about Ebola? Probe: Anything else?	WE ARE STILL WASHING HANDS 4 ETUS ARE STILL OPEN 5 PEOPLE STILL DO NOT SHAKE HANDS 6 THE BORDERS ARE STILL CLOSED 7 POROUS BORDERS 8 NGOS ARE STILL ACTIVE 9 OTHER (SPECIFY): 96 DON'T KNOW 98 YES 1 NO 2 DON'T KNOW 98 CAUSE / ORIGIN 1 SIGNS AND SYMPTOMS 2 WAYS TO PREVENT IT 3 MEDICAL CARE/TREATMENT 4 HOME-BASED CARE 5 HOW TO PROTECT OTHERS 6 SAFE BURIALS OF THOSE WHO DIED FROM EBOLA 7 BODY SWAB POLICY 8	
	Is there any information on Ebola that you still have questions about? What questions do you still have about Ebola? Probe: Anything else?	WE ARE STILL WASHING HANDS 4 ETUS ARE STILL OPEN 5 PEOPLE STILL DO NOT SHAKE HANDS 6 THE BORDERS ARE STILL CLOSED 7 POROUS BORDERS 8 NGOS ARE STILL ACTIVE 9 OTHER (SPECIFY): 96 DON'T KNOW 98 YES 1 NO 2 DON'T KNOW 98 CAUSE / ORIGIN 1 SIGNS AND SYMPTOMS 2 WAYS TO PREVENT IT 3 MEDICAL CARE/TREATMENT 4 HOME-BASED CARE 5 HOW TO PROTECT OTHERS 6 SAFE BURIALS OF THOSE WHO DIED FROM EBOLA 7 BODY SWAB POLICY 8 SURVIVORS OF EBOLA 9	
	Is there any information on Ebola that you still have questions about? What questions do you still have about Ebola? Probe: Anything else?	WE ARE STILL WASHING HANDS	
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SECTION 9: SOCIAL COHESION

READ OUT LOUD: Now, I am going to read some statements about your community. For each statement, please tell me if you strongly agree, somewhat agree, somewhat disagree, strongly disagree. There are no right or wrong answers, just your opinion.

INTERVIEWER: DO NOT READ DON'T KNOW OUT LOUD; ONLY USE IF RESPONDENT IS NOT ABLE TO PROVIDE ANOTHER ANSWER.

ANSW	ER	
9.16	People in this community do not help each other in	STRONGLY AGREE 1
	times of need.	SOMEWHAT AGREE 2
		SOMEWHAT DISAGREE 3
	READ OPTIONS 1-4 OUT LOUD.	STRONGLY DISAGREE 4
		DON'T KNOW98
9.17	People in this community tend not to trust one	STRONGLY AGREE 1
	another.	SOMEWHAT AGREE2
		SOMEWHAT DISAGREE 3
	READ OPTIONS 1-4 OUT LOUD.	STRONGLY DISAGREE 4
		DON'T KNOW98
9.18	There are strong relationships between people in this	STRONGLY AGREE 1
	community.	SOMEWHAT AGREE 2
		SOMEWHAT DISAGREE 3
	READ OPTIONS 1-4 OUT LOUD.	STRONGLY DISAGREE 4
		DON'T KNOW
9.19	People in this community are always able to discuss	STRONGLY AGREE 1
	problems that affect everyone.	SOMEWHAT AGREE 2
		SOMEWHAT DISAGREE 3
	READ OPTIONS 1-4 OUT LOUD.	STRONGLY DISAGREE 4
		DON'T KNOW 98
9.20	People in this community keep their promises to one	STRONGLY AGREE 1
	another.	SOMEWHAT AGREE 2
		SOMEWHAT DISAGREE 3
	READ OPTIONS 1-4 OUT LOUD.	STRONGLY DISAGREE 4
		DON'T KNOW98
9.21	People in this community have difficulty agreeing on	STRONGLY AGREE 1
	issues.	SOMEWHAT AGREE
	READ ORTIONS 1.4 OUT LOUIS	SOMEWHAT DISAGREE
	READ OPTIONS 1-4 OUT LOUD.	STRONGLY DISAGREE
		DON'T KNOW
9.22	Whenever our community undertakes a project, we	STRONGLY AGREE
	know that we will all work hard until it is	SOMEWHAT AGREE
	accomplished.	SOMEWHAT DISAGREE
	READ OPTIONS 1.4 OUT LOUD	STRONGLY DISAGREE
	READ OPTIONS 1-4 OUT LOUD.	DON'T KNOW 98
9.23	Whenever a community problem arises, I have a lot	STRONGLY AGREE 1
	of confidence that we will be able to solve it.	SOMEWHAT AGREE
		SOMEWHAT DISAGREE
	READ OPTIONS 1-4 OUT LOUD.	STRONGLY DISAGREE 4
		DON'T KNOW
9.24	Members of this community are able to tackle the	STRONGLY AGREE
	most difficult situations because we are all	SOMEWHAT AGREE
	committed to the same collective goals.	SOMEWHAT DISAGREE 3
		STRONGLY DISAGREE 4
	READ OPTIONS 1-4 OUT LOUD.	DON'T KNOW 98

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9.25	If people in this community work together, we can	STRONGLY AGREE 1
	find solutions to many of our problems.	SOMEWHAT AGREE
		SOMEWHAT DISAGREE 3
	READ OPTIONS 1-4 OUT LOUD.	STRONGLY DISAGREE 4
		DON'T KNOW 98
9.26	There are strong leaders in our community	STRONGLY AGREE 1
		SOMEWHAT AGREE 2
	READ OPTIONS 1-4 OUT LOUD.	SOMEWHAT DISAGREE 3
		STRONGLY DISAGREE 4
		DON'T KNOW 98
9.27	Our leaders treat all people in the community	STRONGLY AGREE 1
	equally.	SOMEWHAT AGREE 2
		SOMEWHAT DISAGREE 3
	READ OPTIONS 1-4 OUT LOUD.	STRONGLY DISAGREE 4
		DON'T KNOW 98
9.28	Our leaders listen to input from everyone in the	STRONGLY AGREE 1
	community when making a decision.	SOMEWHAT AGREE 2
		SOMEWHAT DISAGREE 3
	READ OPTIONS 1-4 OUT LOUD.	STRONGLY DISAGREE 4
		DON'T KNOW 98
9.29	When it comes to activities related to Ebola and	STRONGLY AGREE 1
	health our leaders always lead by example.	SOMEWHAT AGREE 2
		SOMEWHAT DISAGREE 3
	READ OPTIONS 1-4 OUT LOUD.	STRONGLY DISAGREE 4
		DON'T KNOW 98
9.30	Our leaders are good at resolving disagreements	STRONGLY AGREE 1
	between people in the community.	SOMEWHAT AGREE 2
		SOMEWHAT DISAGREE 3
	READ OPTIONS 1-4 OUT LOUD.	STRONGLY DISAGREE 4
		DON'T KNOW 98