

Utilization of Complementary and Alternative Medicine: Implications for the Treatment of Coughing Children in Abudwak, Somalia

Dear Sir/Madam

I invite you to participate in a research study entitled Prevalence and Determinants of Complementary and Alternative Medicine Usage for Coughing Children, in Abudwak City, Galmudug State of Somalia. I am currently a student of graduate study in the Department of Nursing at Near East University. I am doing research for my master's Thesis. Thank you for participating in this study. This questionnaire aims to assess the prevalence and determinants of Complementary and Alternative Medicine usage for children with cough in Abudwak, Somalia. Your responses will contribute valuable information to the understanding of Complementary and Alternative Medicine practices in this specific context. Please answer the following questions to the best of your knowledge and experience. Your answers will be kept confidential and will only be used for the study. The academic researchers are the only ones who will know what you put in this form if you give your permission to take part, and if you can quit this study at any time. It should take approximately 10 minutes to complete. If you agree to participate in this Research, please give your consent and cooperate with the interviewer.

Thank you for your assistance in this important endeavor.

Yours Sincerely,

Hassan Ahmed Dirie

Questionnaire Code:			
Section A: Demographic Variables of Parents			
1	Type of the Hospital	A) Public Hospital	B) Private Hospital
1	What is your age?		
2	Gender	A) Male	B) Female
3	What is your Area of living?	A) Urban B) Rural C) Internally Displaced Persons (IDPs)	
4	What is your marital status?	A) Single B) Married C) Divorced D) Widowed	
5	What is your occupation?	A) Student B) Business-person C) Employed D) Unemployed E) Housewife f) laborer j) <i>Others (please specify)</i> _____	
6	Respondent's Educational Level	A) Illiterate B) Non-formal education C) Primary level D) Secondary level E) University-level f) <i>Others (please specify)</i> _____	
7	Your family's Monthly Income?	A) Income is equal to expenditures B) Income is much more than expenditures C) Income is less than expenditures	

Section B: Demographic Variable of the Child

8	What Is the age of your child?	A) 0-6 Months B) 7-12 Months C) 1-3 Years D) 4-6 Years E) 7-12 Years	
9	what is the sex of your child?	A) Male	B) Female
10	Breastfeeding of the child	A) Exclusive B) Non-Exclusive	
11	Educational Enrollment	A) Enrolled B) Unenrolled	

Section 2: Coughing and Health History

12	What is the frequency of cough recurrence in your child?	A) Rarely (once a month or less) B) Occasionally (2-3 times a month) C) Frequently (once a week) D) Very frequently (several times a week)	
13	What is the duration of your child's coughing?	A) One week B) Several weeks C) One month E) More than one month	
14	Has the child had a similar cough condition?	A) Yes B) No	
15	Has the child received any complementary and alternative medicine therapies?	A) Yes B) No	

16	Have you given the child any complementary and alternative medicine for coughing in the past two weeks?	A) Yes B) No
17	What are the main Complementary and Alternative Medicine therapies you have utilized for the coughing child?	A) Herbal remedies B) Honey C) Black seed oil D) Camel milk boiled with black pepper E) A and B F) B and C G) C and D H) All of them I) I have never used J) Others (please specify) _____
18	Have you utilized complementary and alternative medicine (CAM) for any of the following purposes:	A) preventing illness B) treating illness C) promoting health D) A and B E) All of them F) I have never used CAM G) Other _____
19	What are the reasons for using complementary and alternative medicine therapies in coughing children?	A) Cultural/traditional beliefs. B) Lack of access to conventional medical facilities. C) Dissatisfaction with conventional treatment outcomes. D) Complementary and Alternative Medicine is perceived to be safer. E) Less expensive F) A and B G) C and D H) A and E I) All of them J) I have never used CAM K) Others (please specify). _____

20	How did you acquire that complementary and alternative medicine therapies are useful for coughing children?	A) Family or friends. B) Local healer C) Medical person. D) Internet source E) A and B F) C and D A) all of them G) I don't know G) <i>Others (please specify).</i> _____	
21	How satisfied are you with the results of the Complementary and Alternative Medicine therapies used for the coughing child?	A) very satisfied. B) Satisfied C) Dissatisfied D) Very dissatisfied	
22	Have you had any problems with using complementary and alternative medicine on the coughing child?	A) Yes	B) No