

Cost of Dengue Illness in Indonesia across Hospital, Ambulatory, and not Medically Attended Settings

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Abstract. Informed decisions concerning emerging technologies against dengue require knowledge about the disease's economic cost and each stakeholder's potential benefits from better control. To generate such data for Indonesia, we reviewed recent literature, analyzed expenditure and utilization data from two hospitals and two primary care facilities in Yogyakarta city, and interviewed 67 dengue patients from hospital, ambulatory, and not medically attended settings. We derived the cost of a dengue episode by outcome, setting, and the breakdown by payer. We then calculated aggregate Yogyakarta and national costs and 95% uncertainty intervals (95% UIs). Dengue costs per nonfatal case in hospital, ambulatory, not medically attended, and overall average settings were US\$316.24 (95% UI: \$242.30–\$390.18), US\$22.45 (95% UI: \$14.12–\$30.77), US\$7.48 (95% UI: \$2.36–\$12.60), and US\$50.41 (95% UI: \$35.75–\$65.07), respectively. Costs of nonfatal episodes were borne by the patient's household (37%), social contributors (relatives and friends, 20%), national health insurance (25%), and other sources (government, charity, and private insurance, 18%). After including fatal cases, the average cost per episode became \$90.41 (95% UI: \$72.79–\$112.35). Indonesia had an estimated 7,535 (95% UI: 1,319–16,513) million dengue episodes in 2017, giving national aggregate costs of \$681.26 (95% UI: \$232.28–\$2,371.56) million. Unlike most previous research that examined only the formal medical sector, this study included the estimated 63% of national dengue episodes that were not medically attended. Also, this study used actual costs, rather than charges, which generally underestimate dengue's economic burden in public facilities. Overall, this study found that Indonesia's aggregate cost of dengue was 73% higher than previously estimated, strengthening the need for effective control.

INTRODUCTION

Dengue is a common cause of hospitalization in endemic areas of tropical countries. Moreover, dengue cases have grown dramatically, with recent annual aggregate estimates of 58 million,¹ 100 million,² and 105 million cases globally.³ Similarly, the worldwide disability-adjusted life years (DALYs) due to dengue grew from 822,800 in 1990 to 2,920,000 in 2017.⁴ As this rise runs counter to the global shift in disease burden from communicable to noncommunicable diseases,⁵ it highlights the need for better understanding and improved tools.

Many dengue infections are asymptomatic. Dengue episodes (symptomatic infections) range in severity from undifferentiated fever to severe and occasionally fatal cases. During the acute phase, sick individuals often experience high fever lasting for more than 24 hours, and other symptoms may also be present, for example, retro-orbital pain, nausea, vomit, rash, aches, and pain. In severe dengue, the warning signs might appear as persistent vomiting, clinical fluid accumulation, mucosal bleeding, lethargy, and concurrent increasing of hematocrit with rapid decreasing of platelet count. This severe form leads to severe plasma leakage or shock, severe bleeding, and severe organ impairment.⁶ These symptoms impose a range of direct costs (i.e., costs for medical care) and indirect costs (i.e., the economic value of lost productivity) on affected families, with cost increasing with disease severity. Some episodes persist for months.⁷ Since the first case found in

Surabaya city in 1968,⁸ Indonesia has become one of the countries with the highest burden of dengue.⁹

Several promising tools have recently been announced or are in the pipeline to control dengue, for example, vaccines, insecticide-treated materials, lethal ovitraps, spatial repellents, genetically modified mosquitoes, and *Wolbachia*-infected *Aedes aegypti*.¹⁰ In 2016, the government of Indonesia scaled up community-based vector control to sensitize households to monitor and eliminate mosquitoes.¹¹ Furthermore, Indonesia was one of the 10 countries in the phase three trials leading to the first licensed dengue vaccine.¹² With its combination of high dengue burden, scientific capacity, support from a national foundation, and leadership from the region's governor, Yogyakarta was the site of the first cluster-randomized trial for testing wMel *Wolbachia*-infected *Ae. aegypti* as a replacement for wild mosquitoes to inhibit dengue transmission.¹³

However, the continued development and, if warranted, deployment of each of these strategies would need funding. Here, we measure the economic aspect of dengue from the health system and societal perspectives in Indonesia. Estimating dengue economic burden is important to inform policy-makers in setting policy priorities, implementing novel technologies, and estimating the trade-offs. In this study, we recruited and interviewed representative, and in some cases randomly chosen, patients from both the formal healthcare system and outside the medical sector. Thus, our approach sought to overcome the challenges that few dengue episodes are hospitalized (the setting with the best data) and many are managed outside of the medical sector (the setting with the least data), and that accuracy required empirical data rather than assumptions and expert opinion.

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To interpret our findings and guide policy-makers, we synthesized previous work as a basis for comparison. Hence, this study refines cost estimates for dengue illness, incorporating the direct and indirect costs of treatment across three treatment settings (hospitalized, ambulatory, and not medically attended) and breaking down funding among payers (household, government, social insurance, household contributions, and health facility cross-subsidies). The results indicate how much each payer would save if it were possible to eliminate dengue.

MATERIALS AND METHODS

Data collection. We focused on Yogyakarta, Indonesia, a global center on dengue research, and selected the recruitment period of January through June 2018 for a prospective study. The city's medium size (400,000 residents) and strong surveillance system suggested that it could provide representative and reasonably accurate data. Working from the existing surveillance system, the Yogyakarta City Health Office provided study investigators with numbers of reported dengue cases in Yogyakarta city before and during

the study period. The records indicated the first half of 2018 had fewer cases than the corresponding period in 2017.

Figure 1 describes the process of selecting and interviewing study participants during the prospective period. Among 14 subdistricts, we selected the three subdistricts with the highest number of dengue cases, that is, Kotagede, Umbulharjo, and Mantrijeron. We compiled a list of both suspected and hospitalized dengue cases during the prospective period from the catchment area of seven puskesmas (public health centers) within the three subdistricts in Yogyakarta city. Then, we invited the clinical coordinator and surveillance chief from each of the seven puskesmas to a meeting for a study briefing and data needs.

We identified hospitalized cases through reports that the puskesmas received from hospitals concerning patients from their catchment areas who were discharged with a final dengue diagnosis (based on clinical patterns, hematology tests, and, if available, confirmatory tests such as a positive NS1 test or positive serological test). We identified ambulatory cases at these same puskesmas of suspected dengue cases on their dengue registries. The puskesmas conducted NS1 confirmation when supplies allowed (provided through the World

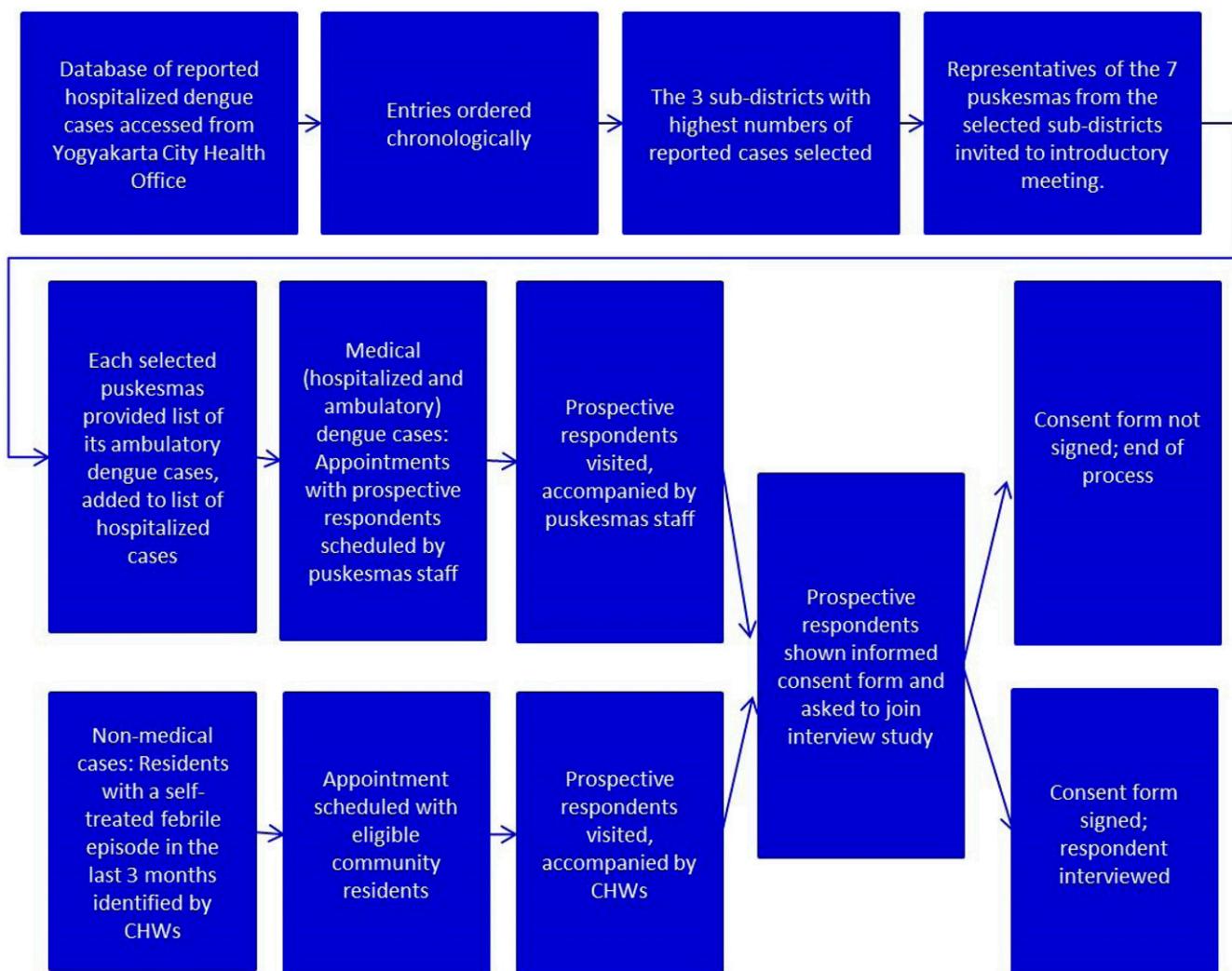


FIGURE 1. Flowchart of process for identifying and interviewing respondents. CHW = community health worker. This figure appears in color at www.ajtmh.org.

Mosquito Program¹⁴ in Indonesia or the Yogyakarta municipal health department). We collated all hospitalization and ambulatory cases from January to June 2018. We used the random function in Excel to randomly select patients for an interview. Then, puskesmas staff invited the affected families to participate.

Our sample-size calculations were based on results from the national social-economic survey which found that among individuals aged 15 years or older, 6.8% experienced fever in the previous month.¹⁵ Because fever is the most common symptom of a mild dengue infection,¹⁶ we assumed that fever cases in the community could sometimes be dengue episodes, often not reported. We identified suspected not medically attended dengue cases through community meetings by finding participants with a recent history of fever who self-treated or were treated at a nonformal setting (such as a nurse's home). We collated names of attendees at all community meetings undertaken from April to June 2018, and from those lists used Excel to randomly select individuals to be invited for interview who had fever during the past 1–2 months but did not access formal medical care. Community health workers (CHWs) then set up appointments with the selected individuals, and we performed the interviews.

For participants at all levels of disease severity, we arranged appointments for systematic interviews; obtained informed consent (received for 99% of cases); administered standardized questionnaires to capture the out-of-pocket expenditures, direct nonmedical costs (i.e., costs incurred during medical care, such as additional meals and transport costs), and indirect costs (i.e., the economic value of lost productivity); and provided refreshments as a benefit of participating to the study. Our survey instrument measured the patients' quality of life, duration of illness, use of health services, the impact on schooling or work productivity and leisure time, out-of-pocket payments, and income lost, as well as the time and income loss of caregivers due to the patients' illness. The Supplemental Information contains the questionnaires (S1: Adult questionnaire in English; S2: Adult questionnaire in Bahasa Indonesia; S3: Pediatric questionnaire [patients under age 18] in English; S4: Pediatric questionnaire [patients under age 18] in Bahasa Indonesia). The final sample consisted of 67 cases, among which 20 were confirmed hospitalized dengue cases, 24 were clinically diagnosed as dengue by the physician at the health center, and 23 were fever cases treated outside the professional healthcare system.

Calculating dengue cost. The total cost per case was calculated by adding three components: direct medical (i.e., costs for medical procedures), direct nonmedical, and indirect costs. Direct medical costs for an episode include the treatment facility's unit cost, plus household's purchase of over-the-counter medicines. To calculate the unit cost of each hospital service, we applied the macro-costing approach, also known as the relative cost approach, to estimate the cost of a bed day and a typical outpatient service.¹⁷ Indonesia has four types of hospitals based on the Ministry of Health's categorization.¹⁸ Hospitals of types A and B are advanced hospitals. Type A hospitals (national referral hospitals), which are few in number, have the most specialists and subspecialists and an intensive care unit. Most of Indonesia's advanced hospitals are type B, which have four types of basic specialists, 12 other specialists, two subspecialists, and an intensive care unit. Type C hospitals have at least six additional types of

specialists and an intensive care unit. Type D, the most basic type of hospital, has at least two types of basic specialists. Hospitals of each type can be either public or private (generally not for profit). We collected the hospital's operating cost data, occupancy rates, and number of registered beds through interviews with one type B and one type D hospitals, both of which happened to be private.

We divided the annual operating cost by the annual number of total bed days to obtain per night hospitalization unit cost. We then calculated hospital outpatient cost as 32% of per night inpatient care cost.¹⁷ We calculated a clinic's cost per visit (which typically includes consultation, prescribed medicines, and laboratory test cost) using an ingredients approach. We interviewed puskesmas staff and family physicians to obtain salaries and asked administrators for non-personnel costs (e.g., medicines, supplies, electricity, rent, and utilities).

The direct nonmedical cost consists of transport and additional meals for the patient and care-givers. The indirect cost accounts for the income lost by the sick individual or other household members because of the treatment or care requirements. This study relies on respondents' reports of actual income lost. We surveyed families after the illness episode so that data record the full episode, including the period after discharge for hospitalized patients. To aid recall, the interviewer showed the respondent a calendar to identify the dates of onset of fever, and hospital admission and discharge where applicable. Because most of our cases were children, this component also includes the adults' income lost when uncompensated time off from work was required.

However, many adults lost time but little or no income. For instance, some adults were civil servants with paid leave. They lost an attendance-based allowance, but not their basic salary. Unemployed pensioners experienced no actual income loss. For example, retired civil servants and private-sector retirees with pensions continued to receive their monthly allowances. Family members providing assistance outside working hours also experienced no actual income loss. Self-employed family members (e.g., owners of food stalls) provided care when their business was not open or adjusted their purchasing of ingredients and employee activities, so they also generally avoided income loss.

Similarly, daily workers, who would have lost income had they missed a day of work, endeavored to minimize their income loss by asking other family members to attend to the patient. Our questionnaire also elicited descriptive reports about loss of productive time or school days that did not result in income loss. We used the most recent economic data from each source, which was either calendar year 2017 or early 2018. Indonesia's 2018 inflation was 3.2%,¹⁹ so in the first quarter year, it averaged 0.8%. As we had the most data for 2017, we considered all costs as occurring in that year. We converted Indonesian rupiah (Rp) to U.S. dollars at the weighted average exchange rate over the study period of December 2017 through July 2018.²⁰ The weighting combined the exchange rates at the end of each of 8 months according to the number of days in each month. We then adjusted the amount rate to 2017 US\$ using the change in U.S. per capita GDP.²¹

To calculate the 95% uncertainty interval (UI) of sample data on utilization and costs per episode, we fit a normal distribution to each item based on the observed mean and SDs (the simplest distribution for our descriptive objective). If the lower

bound gave a negative number, then we truncated it at 0.00 to avoid artifacts from the normal distribution.

For fatal cases, this study applied the cost estimation conducted in a global study by Shepard et al.,¹ which used a human capital approach to estimate the indirect cost of fatal cases in Indonesia as \$100,000 and \$65,000 per case for children and adults, respectively, in 2013. That study used the discounted remaining life expectancy at the average age of death for child and adult deaths and valued each year at Indonesia's per capita gross national income (GNI). This calculation is consistent with Indonesian culture and observations in our study, where many adults are outside the formal sector. Those older than 65 years often continue in economically productive activities in agriculture, business, or caring for grandchildren. To account for the economic changes since 2013, we adjusted the costs using Indonesia's 2017 (GNI) per capita¹⁹ growth during those 4 years in current U.S. dollars at market exchange rates. This adjustment incorporates both inflation and growth in real income, which made the economic loss of each fatality greater. This study then proportionally applied the 95% UI of global fatal cost reported in the Shepard study to estimate the lower and upper bounds per case for dengue death cost in Indonesia. We calculated estimates of \$106,247 (95% UI: \$98,374–\$125,622) and \$69,061 (95% UI: \$63,943–\$81,654) for children and adults, respectively, per case fatal cost in 2017.

Estimating coverage of alternative payment sources. We collected additional information to understand how and by whom the cost of a dengue episode is covered. A question was included on the survey regarding friends' and family's contribution to see whether households received cash or in-kind support during the illness episode. This study also asked respondents about their household's out-of-pocket payments and whether their medical costs were fully or partially covered by Indonesia's national health insurance program, Jaminan Kesehatan Nasional (JKN). Jaminan Kesehatan Nasional is arguably the world's largest single-payer comprehensive insurance program, with coverage as of May 31, 2019 of 222,002,996 people, 84% of Indonesia's population.²²

We used the latest JKN reimbursement tariff, issued and regulated by the Indonesian Ministry of Health in 2016, to estimate the amount of each dengue episode that would be reimbursed by the program.²³ For inpatient care, the tariff varies by hospital status, type, regional location, and disease severity level. Recent JKN's regulations limited dengue cases with mild severity normally to be referred only to type C or D hospitals.²⁴ Based on our discussions with hospital officials, we estimated that 20% of hospitalized dengue patients were treated in type A or B hospitals because they had medium- or severe-level dengue or lower hospital types were filled, whereas the remaining 80% had mild-level dengue and were admitted to type C and D hospitals. To estimate the amount reimbursed to the hospital by JKN for each episode, we used the rate applied in Yogyakarta city area and the preceding severity levels.

The residual gap between the total cost and all accounted payments for dengue cases (out-of-pocket expenditure, friends' and family's contribution, and JKN coverage) was considered coverage by other programs. This other coverage included other government subsidies, nongovernment organization/foundation subsidies, or payment from private insurance.

Estimating numbers of dengue cases. We used the results from O'Reilly et al.²⁵ to determine the number of dengue cases in Indonesia and Yogyakarta city on four severity levels: ambulatory, hospitalized, self-treated, and fatal cases. That study applied a model ensemble approach to estimate the number of dengue cases in Indonesia. It applied multiple previously published modeling approaches to Indonesian data to give long-term average case estimates for the target year of 2015. As this is a long-term (5+ years) average estimate, we assumed these predictions were representative of dengue burden in our target year of 2017. That study then used health-seeking behavior patterns of the population aged 5+ years with an experience of fever in the last month, from the Indonesia Socioeconomic Survey (SUSENAS) data of 2014, to estimate the proportion of dengue cases that were not treated at formal healthcare settings.¹⁵ Furthermore, the control arm of the Sanofi-Pasteur vaccine trial was used to estimate the hospitalization rate among dengue patients who used formal medical care.²⁶ O'Reilly et al.²⁵ estimated that 35.9% (95% UI: 35.4–36.3) of dengue cases in Indonesia were treated in formal health facilities, and of those seeking formal treatment, 35.2% (95% UI: 33.3–37.2) were hospitalized.

Using O'Reilly et al.²⁵ findings, we then conducted a further exercise to estimate the nonfatal cases breakdown specific for Yogyakarta city and the distribution of fatal cases between adults and children. Yogyakarta city has a considerably higher healthcare utilization rate than the national average. Also, using SUSENAS 2014, we estimated that 52% of dengue cases in Yogyakarta were treated in a formal medical care setting.¹⁵ We applied Shepard's distribution of adults and children dengue fatal cases to estimate the 2017 adults–children fatal cases distribution nationally and in Yogyakarta city.¹ The Shepard study created a dengue death model based on data of fatal dengue cases, healthcare access, and GDP per capita of 52 countries, and estimated that of all fatal dengue cases in Indonesia, about 36% were children. The 95% UI for Yogyakarta city estimation and distribution of fatal cases were then estimated proportionally using the 95% UI of the national and total death case estimates.

Calculating aggregate burden. We calculated the aggregate national and Yogyakarta city burden of dengue by multiplying the number of cases by the per-case cost by treatment setting. As estimates of numbers of dengue cases were skewed right, we fitted a logarithmic distribution to the numbers of cases. For consistency in calculating aggregate costs, we also fitted a logarithmic distribution to the total cost per case by setting. We then exponentiated the result to determine the actual means and UIs by setting. We estimated total costs across settings by summing the corresponding means. We assumed that the distributions were highly correlated across settings (as overall incidence was a major common factor) and estimated the upper and lower 95% UIs by summing the corresponding UI bounds for each setting. We then applied the per-case distribution of sources of payment in every setting on the aggregated data and obtained the aggregated burden and share of each financing source nationally and in Yogyakarta city.

Literature review. To provide context for our empirical analysis, we conducted a preliminary literature review using two databases: the U.S. National Library of Medicine (PubMed) and Google Scholar. The search terms used were "dengue" AND "cost" OR "dengue" AND "economic"

combined with English language. We reviewed the titles of the resulting 1,100 citations, retaining those which had full text available and possibly discussed dengue costs in a specific country or countries, region, or worldwide. We reviewed the abstract and full text of the resulting 26 citations to examine whether article 1) reported cost per episode in a country, selected countries, region, or worldwide; and 2) provided detail cost by treatment setting that is hospitalized and/or ambulatory case, finding 15 articles for complete analysis. To standardize costs across the various countries and years, we used GNI per capita.¹⁹

Then, we calculated the ratio of Indonesia's 2017 GNI per capita with the GNI per capita of each country, region, and worldwide within the eligible studies. For those 15 eligible articles, we adjusted costs to 2017 U.S. dollars as this study's benchmark. Thus, we were able to generate information on cost per dengue episode in each country measured and compare these with values for Indonesia in 2017 (see Supplemental Tables S5 and S6).

Ethical approval. This study was approved by both the Gadjah Mada University and Brandeis University ethics boards.

RESULTS

Sample of dengue cases. Most hospitalized and ambulatory cases were in children. About 90% of hospitalized cases and 92% of ambulatory cases were aged 18 years or younger when they experienced dengue. For those seeking formal health care, the average number of outpatient care visits per episode was 1.71 (95% UI: 1.29–2.13) for ambulatory and 2.35 (95% UI: 1.74–2.96) for hospitalized settings. The length of stay averaged 4.05 (95% UI: 3.47–4.63) days for hospitalized cases. For about 80% of ambulatory care respondents and 88% of hospitalized respondents, JKN funded all or most of their care. This pattern is consistent with the higher utilization of puskesmas and type C/D hospitals. The not medically

attended cases were mostly managed with over-the-counter or herbal medicines (see Table 1).

Cost per dengue episode. This study found that the total costs of dengue per case in ambulatory care and hospitalized care settings were \$22.45 (95% UI: \$14.12–\$30.77) and \$316.24 (95% UI: \$242.30–\$390.18), respectively. About 66% (ambulatory setting) and 82% (hospitalized setting) of these costs were direct medical expenses, covering medicines and medical services in the facilities. For the ambulatory care setting, the direct medical cost of hospital outpatient cases was \$34.19 (95% UI: \$15.68–\$52.71), or about five times the cost of puskesmas cases. The average cost of hospitalized cases in type A/B hospitals, \$372.99 (95% UI: \$236.69–\$509.30), was about twice the average cost of hospitalized cases in type C/D hospitals. The average cost of not medically attended cases was \$7.48 (95% UI: \$2.36–\$12.60). This cost consisted mostly of direct nonmedical expenses, such as additional meals and income lost. Only about 12% of these costs were spent on over-the-counter medicines or not medically attended (e.g., visits to traditional healers, see Table 2). Although the actual distribution of costs per episode tended to be skewed to the right, the normal distribution was simpler and provided a reasonable approximation of costs of hospitalized cases. The detailed distribution of each component of the cost of hospitalized cases is shown in Supplemental Figures S8–S11.

Aggregate dengue costs. Based on O'Reilly et al.,²⁵ we estimate that there were about 7.5 million dengue cases nationally in 2017, with 3,658 fatalities. In Yogyakarta city alone, the estimated cases were about 21,000 with about 12 fatal cases. Based on SUSENAS 2014,¹⁵ we estimate that 63% (nationally) and 48% (Yogyakarta city) of all dengue cases were not medically attended cases. The aggregate economic burden of dengue in 2017 was \$681.26 (95% UI: \$232.28–\$2,371.56) million nationally and \$2.46 (95% UI: \$0.58–\$36.35) million in Yogyakarta city alone. About 44% of the national economic burden came from the fatal cases (see Table 3).

TABLE 1
Description and healthcare utilization of sampled nonfatal dengue cases

Item	Total	Hospitalized	Ambulatory	Not medically attended
Sample size	67	20	24	23
Demographics				
Average age (years)	19.54	12.67	7.31	38.57
95% UI	14.95–24.12	8.97–16.36	4.69–9.94	29.84–47.29
Age, < 18 years (%)	67	90	92	22
Gender, male (%)	44	43	67	22
Number of respondents using formal health care				
Treated in primary care	32	15	23	0
Puskesmas	30	7	23	0
Private clinic	11	8	3	0
Treated in hospital, including outpatient department, including emergency department	27	20	7	0
Type A/B hospital	11	8	3	0
Type C/D hospital	14	12	2	0
Hospital type not classified	2	0	2	0
Average number of ambulatory care visits per episode, 95% UI	1.33	2.35	1.71	0.04
Average number of hospitalization days per episode, 95% UI	1.00–1.66	1.74–2.96	1.29–2.13	–0.05–0.13
Used JKN to cover any services (%)	55	80	88	0

JKN = Jaminan Kesehatan Nasional; UI = uncertainty interval. Jaminan Kesehatan Nasional is Indonesia's national health insurance system. Some respondents used more than one type of facility, so components may not sum to the totals.

TABLE 2
Estimated cost per nonfatal dengue episode by component and setting (2017 US\$)

Treatment setting	Component				
	Direct medical	Direct not medical	Indirect	% Positive*	Total cost
Ambulatory (all)	14.89 (7.96–21.81)	5.31 (2.82–7.81)	2.24 (0–4.54)	29 (10–49)	22.45 (14.12–30.77)
Puskesmas	6.94 (5.67–8.20)	3.46 (1.67–5.24)	2.66 (0–5.85)	29 (5–54)	13.05 (8.83–17.27)
Hospital outpatient	34.19 (15.68–52.71)	9.83 (2.20–17.46)	1.24 (0–3.98)	29 (0–74)	45.26 (25.57–64.95)
Hospitalized (all)	260.62 (195.27–325.97)	33.95 (23.61–44.30)	21.67 (8.81–34.54)	65 (42–88)	316.24 (242.30–390.18)
Type A/B hospital	372.99 (236.69–509.30)	39.05 (19.17–58.94)	35.18 (2.78–67.57)	75 (36–100)	447.22 (298.81–595.63)
Type C/D hospital	185.70 (145.21–226.20)	30.55 (19.04–42.06)	12.67 (5.01–20.33)	58 (26–90)	228.92 (190.01–267.83)
Not medically attended	0.93 (0.40–1.45)	3.36 (1.83–4.88)	3.19 (0.00–7.05)	13 (0–28)	7.48 (2.36–12.60)
All (weighted average)†	37.35 (27.07–47.63)	7.72 (4.84–10.59)	5.34 (1.13–9.99)	23 (8–40)	50.41 (35.75–65.07)

* % Positive indicates the proportion of respondents in each setting who lost income, that is, with positive (nonzero) indirect costs.

† The central estimates of the number of nonfatal cases by setting from Table 3 are used as the weights for combining settings here and in Table 3. The lower and upper bound estimates are the weighted averages of the lower and upper bounds of cost per episode in each setting, a procedure which provides the widest possible range. The range in parentheses below each entry is its 95% uncertainty interval.

Among the nonfatal cases, slightly more than half of the overall cost was covered by households. However, about one-third of household expenses for the dengue episode were offset by contributions or gifts from family and friends. These contributions represented 47% of household expenses for hospitalized cases, 6% for ambulatory, and 9% for self-treated cases. The other half of the dengue cost was covered by JKN, subsidies from governments and nonprofit organizations, other resources in healthcare facilities, and private insurance (see Figure 2). These government subsidies include national operational subsidies (the Bok program),¹¹ disease-specific medicines and health equipment, and salaries for the civil servants (doctors, nurses, and other medical and administrative workers; see Supplemental Table S7).

More specifically, this study found that JKN covered about one-fourth of the economic burden of nonfatal dengue (25% nationally and 26% for Yogyakarta city). About 18% (nationally) and 19% (Yogyakarta city) of the cost were covered through other subsidies, including other government programs and private donations. This means that the percentage of dengue cost that funded outside of the household reached 43% nationally and 45% in Yogyakarta city. Jaminan Kesehatan Nasional funded a greater share for hospitalized cases (30% of total economic burden and 60% of non-household payments) than for ambulatory episodes (11% of total economic burden and 37% of non-household payments). In total, JKN paid about \$95.03 (95% UI: \$26.84–\$365.98) million nationally and \$0.386 (95% UI: \$0.083–\$4.738) million in Yogyakarta city to cover dengue costs in 2017.

Figure 3A shows that our estimate of the cost per hospitalized case (US\$316.24) was lower than the other two published estimates for Indonesia, those by Shepard¹ and Nadjib et al.,²⁷ shown in the next two bars. Similarly, Figure 3B shows that our estimate of the cost per ambulatory case (\$22.45) was also lower than the other two estimates for Indonesia. In fact, our estimate was only about a quarter of that from Shepard¹ (see Supplemental Table S6). Their value of \$17.54 for hospital ambulatory direct cost is the arithmetic average of their values for ambulatory cases in Yogyakarta's public and private hospitals of \$7.57 and \$27.51, respectively.

Figure 3A also shows that compared with various regional averages, the cost of a hospitalized episode in this study falls toward the middle of the range from other regions adjusted for economic conditions (the next seven bars). Three regions are lower, whereas four regions are higher. The value for Indonesia in this study is quite close to the average for the region of

Southeast Asia, East Asia, and Oceania (US\$294.52). However, when this study's estimate of the cost of an ambulatory episode is compared with that from other regions, Indonesia is nearly the lowest. Even after our adjustment for economic conditions, the variability among regions is substantial. Compared with the global average, Indonesia is higher for hospitalized but lower for ambulatory episodes.

DISCUSSION

This study found that the per-case cost for a nonfatal dengue case averaged \$22.45 (95% UI: \$14.12–\$30.77), \$316.24 (95% UI: \$242.30–\$390.18), \$7.48 (95% UI: \$2.36–\$12.60), and \$50.41 (95% UI: \$35.75–\$65.07), respectively, for ambulatory, hospitalized, not medically attended, and overall settings. Including fatal cases, the overall cost per case average became \$90.41 (95% UI: \$79.27–\$112.35). Using 2017 regional and national estimated cases, this study then found that the aggregate economic burden of dengue was \$681.26 million (95% UI: \$232.28–\$2,371.56 million) nationally and \$2.46 million (95% UI: \$0.58–\$36.35 million) in Yogyakarta city. About half of this burden was paid by households (including friends and relatives of the patient), about one-fourth by the JKN program, and the remainder from other public and philanthropic subsidies.

We believe this study has extended the procedures for calculating the economic cost of dengue generally, and in Indonesia specifically, in several ways. First, it is the first in Asia and only the second globally (after research in Morelos, Mexico²⁸) to include not medically attended cases based on empirical estimates. In our study, the share of such cases was based on a large, national household survey conducted by SUSENAS.¹⁵ The unit cost was based on interviews with a validated questionnaire of patients across several communities in Yogyakarta city.

Second, the study obtained empirical cost data from representative institutions at diverse levels of the healthcare system. Indonesia categorizes hospitals by type, from type A (with the widest range of services) to type D (with the narrowest range). The major distinction is between the advanced hospitals (types A and B), for which referral is generally required for admission under JKN, and the regular hospitals (types C and D), which transfer out their most severe dengue cases. Empirical studies on the burden of dengue, which generally involve interviewing patients, are commonly conducted by researchers at type A or B hospitals and enroll patients from

TABLE 3
Estimated number of dengue cases, aggregate economic burden, and cost per episode in Indonesia by outcome and setting in 2017

Location	Nonfatal cases		Fatal cases		Total
	Hospitalized	Ambulatory	Children	Adults	
Estimated number of cases					
National	963,894 (182,172–2,034,019)	1,720,254 (26,229–3,949,950)	4,847,450 (1,108,670–10,520,849)	1,317 (572–2,966)	2,340 (1,016–5,270)
Yogyakarta city	3,908 (686–12,886)	7,195 (0–27,319)	10,332 (2,186–36,220)	4 (–14)	8 (2–25)
Estimated aggregate economic burden of dengue (US\$ millions)					
National	304.82 (89,12–1,042.56)	38,61 (3,05–488.32)	36.25 (8.91–147.44)	139.95 (60.88–321.71)	161.63 (70.31–371.53)
Yogyakarta city	1,24 (0.28–5.46)	0.16 (0.00–27.09)	0.08 (0.02–0.40)	0.46 (0.13–1.58)	0.53 (0.15–1.82)
Estimated cost per episode (US\$)					
National	316.24 (242.30–390.18)	22.45 (14.12–30.77)	7.48 (2.36–12.60)	106,247.41 (98,374.05–125,622.30)	69,060.81 (63,943.13–81,654.49)
<small>Costs of nonfatal cases were derived as explained in notes to Table 2. Costs per episode of fatal cases were adjusted from those reported by Shepard et al.¹ using the change in Indonesia's per capita gross national income. Numbers in parentheses are 95% uncertainty intervals.</small>					

these types. The resulting data tend to reflect illness at the upper end of severity and sophistication. As our study identified hospitalized patients through the surveillance system, it identified and studied patients in both the higher and lower categories of hospitals and should not be subject to the selection effects of much of the existing research.

Third, our estimates of direct medical costs were based on actual operational costs of the health facilities, rather than bills to patients or insurers or charges. Because many public and voluntary health facilities receive subsidies and charitable donations, they do not need to try to recover all of their costs from fees, so patients' bills tend to underestimate the economic costs. We checked that the consistency of our estimated costs per episode was reasonable by comparing their relationship with the relative reimbursements from JKN (which was based on national costs). The ratio of this cost in our type D hospital to that in our type B facility was 0.47. For the relevant diagnosis category "other viral and nonbacterial infection" for medium severity in a class II bed in a government hospital, the relative reimbursement from JKN was 0.54.²³ The similarity of these ratios supports the generalizability of our findings to dengue hospitalizations overall.

Fourth, unrecognized and unreported apparent dengue virus infections make it difficult to estimate the true extent of dengue illness.¹ Responding to this challenge, our estimates of numbers of symptomatic dengue cases were based on a comprehensive, recently published, mathematical model calibrated with surveillance data from Indonesia.²⁵

Fifth, our estimates of indirect costs were based on interviews with patients and their families estimating their actual losses. We valued part of the economic costs of informal caregivers, including family members and relatives, by asking their income loss during the patient's episode of the illness. The estimates incorporated the household's report of sick leave and other adjustments, rather than an assumed value. The percentage of respondents reporting income loss increased steadily with the intensity of the setting, rising from 13% in not medically attended episodes to 75% in type A/B hospitals. These results suggest that the responses were plausible.

Sixth, this research offers a detailed breakdown by source of financing. To our knowledge, this is the first study of financing of dengue illness in a low- or middle-income country with a national health insurance system, and only the second study of dengue financing, after one in Puerto Rico, anywhere.²⁹ This breakdown was informed both by interviews with patients and their household members (to obtain household expenditures), as well as systematic analysis of the finances of selected health facilities. By triangulating between facility and household data, this study improved the accuracy of financing breakdowns. By including semi-structured interviews with household members, this study also identified subtleties in household contributions, such as gifts to a household from family and/or friends, particularly in connection with a hospitalization.

This study's financing breakdown helps inform multiple policy-makers on the potential economic benefits of implementing more effective programs of dengue prevention. Overall, this study discovered that about 25% of dengue nonfatal burden has been covered by JKN and nearly 20% by other subsidies that mostly came from the government (which supports the many public healthcare facilities). These national

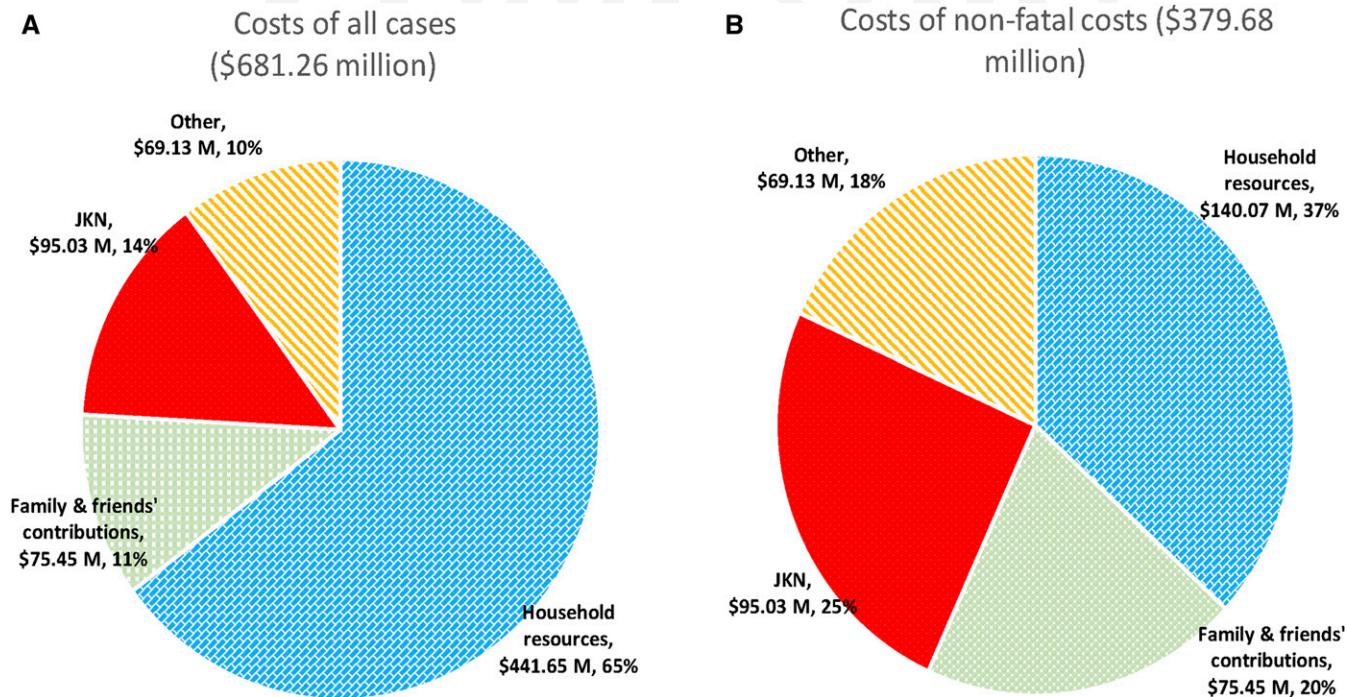


FIGURE 2. Distribution of financing of costs of all and nonfatal dengue cases in 2017 U.S. dollars. JKN = Jaminan Kesehatan Nasional. This figure appears in color at www.ajtmh.org.

aggregates were about \$95.03 million for JKN and \$69.13 million for other subsidies in 2017. The cost to JKN alone was about 13% of 2017 JKN's deficit of \$728.65 million. Thus, a successful dengue prevention strategy, averting many hospitalizations, would help to address the national insurer's deficit.

In view of these refinements, it is instructive to compare this study with previous research. The most thorough previous study was by Nadjib et al.,²⁷ for which adjusted values were included in Figure 3. Because of differences in methods and data sources, Nadjib et al.²⁷ estimated higher costs per case for both ambulatory and hospitalized patients. However, we estimated a substantially higher number of cases, included fatal cases, and found higher annual aggregate costs.

The first major methodological difference between this study and that of Nadjib et al.²⁷ concerned the method for estimating indirect cost. Whereas Nadjib et al.²⁷ used imputed values, our study relied on respondents' answers about their potential income loss related to the dengue episode. In our study, some formal-sector respondents received paid sick leave, experiencing at most a loss of attendance or lunch allowances equal to about a quarter of the take-home pay. Many informal-sector workers experienced no financial loss, as coworkers or extended family members filled in for their absence. Other respondents noted that they did not experience any income loss because they were pensioners or no longer in the labor force. By contrast, Nadjib et al.²⁷ imputed a loss of income to all adult respondents, either as a patient or caregiver. For most adults, they valued this approach at the regional minimum wage. In Yogyakarta city, for example, this was Rp 1,572,200 (US\$117.50) per month in 2017.³⁰ At about 22 working days per month, this was Rp 71,463 (US\$5.34) per day. As informal-sector workers were not subject to the minimum wage, their losses, even where they occurred, would likely have been less than the minimum wage. All of these

factors led to Nadjib et al.'s²⁷ higher indirect cost per case compared with our study's estimates.

The second major methodological difference was their assumption that all ambulatory cases received care in the formal medical system, thus incurring that system's direct costs. The third methodological difference was that Nadjib et al.²⁷ addressed only nonfatal cases, whereas this study also included fatal cases.

Nadjib et al.'s²⁷ estimates of numbers of cases were based on the surveillance system, whereas ours were based on the model by O'Reilly et al.²⁵ and empirical allocations among sectors. For hospitalized cases, our study estimated 963,894 compared with 898,475 for Nadjib et al.²⁷ For formal ambulatory cases, the corresponding estimates were 1,720,254 and 596,391, respectively. Finally, our study estimated 4,847,450 not medically attended and 3,657 fatal cases, whereas Nadjib et al.²⁷ excluded both of these groups. Overall, this study found aggregate costs (\$681.26 million) were 73.2% higher than that in the most recent previous study (\$393.38 million).²⁷

The next relevant comparison concerns the Indonesia-specific findings in a global study.^{1,27} Incorporating our adjustment to 2017, the present study found lower costs per episode in all three settings than the 2016 study.¹ Specifically, the ambulatory direct costs (medical and nonmedical) per case for this study and Shepard¹ are \$20.20 and \$50.30, and \$294.57 and \$311.29 for hospitalized, and \$4.29 and \$9.49 for not medically attended cases, respectively. These differences reflect the refinement of having actual, country-specific data in the present data. Finally, aggregate costs in the present study (\$681.26 million) were less than a third of the estimate from Shepard¹ (\$2,195 million in 2013 prices).

The similarity in cost per hospitalized episode between this study and those concerning the broader region of Southeast

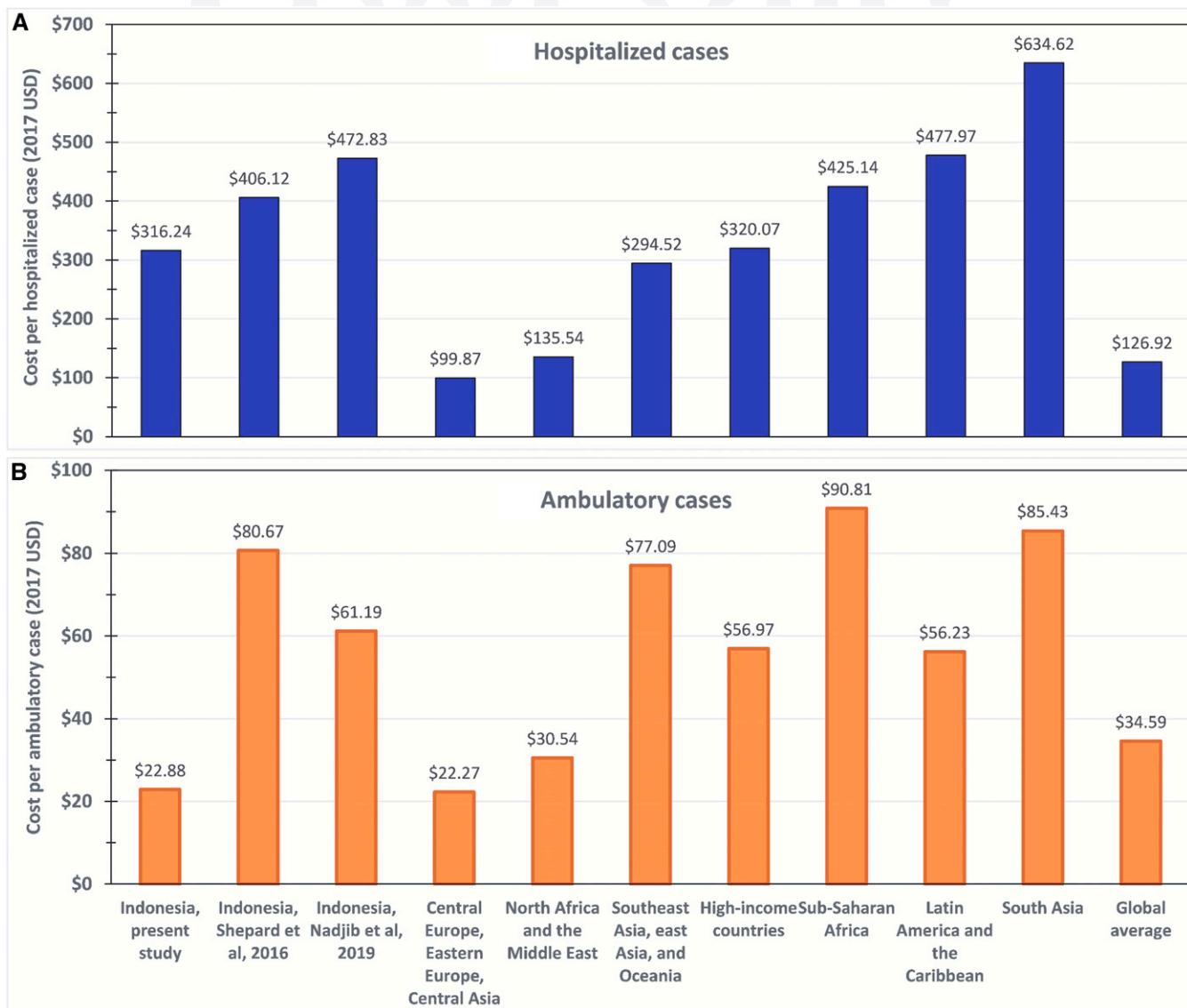


FIGURE 3. Comparative adjusted dengue cost per episode (in 2017 US\$) by region, and data source in hospitalized (A) and ambulatory (B) settings. Note: Originally published costs were adjusted based on the gross national income (GNI) per capita for the original study setting and year, compared with the GNI per capita for Indonesia for 2017, in U.S. dollars at market prices. For details, see Supplemental Appendix 1. Sources: Breakdown by region¹ and Indonesia (this study and Nadjib et al.²⁷). Averages for Nadjib et al.²⁷ were derived as arithmetic averages of the site-specific values reported by the original authors. This figure appears in color at www.ajtmh.org.

Asia, East Asia, and Oceania suggests that Indonesia's management and duration of hospitalized episodes are likely comparable to those of its regional neighbors. Regular international professional exchanges, such as the annual Dengue Summit (with the 2019 summit in Jakarta), help exchange best practices across the region. A number of factors might explain Indonesia's lower cost per ambulatory episode: its well-developed network of puskesmas and evening access to ambulatory care (most individual practitioners and private clinics operate to around 10 PM) reduce indirect costs, whereas providers' tendency to hospitalize many cases leads to a low severity for those cases remaining in the ambulatory sector.

Several limitations should be acknowledged, although our analysis suggests that none created a major bias. First, our original data came from only one city, Yogyakarta. However,

unit costs of medical services are guided substantially by national government policies on operational subsidies to health facilities (the BOK program) and JKN reimbursement rates. Our study further minimized this potential problem by studying several institutions spanning multiple levels (A through D) and sectors (public and private), as also performed by Nadjib et al.²⁷ Differences between Yogyakarta and national average likely had offsetting effects. On the one hand, Yogyakarta's share of febrile illness that was medically attended (52%) exceeded the national average (37%),¹⁵ thereby raising Yogyakarta's direct cost per case greater than the national average. On the other hand, whereas Yogyakarta's 2017 GDP per capita was only 0.45 times the national average, dengue cases tend to be concentrated in major Indonesian cities. Their GDPs per capita all exceed the national averages, with Jakarta, Surabaya, and Medan having

multiples of 3.14, 2.33, and 1.23 times, respectively. Indirect cost per case is roughly proportional to per capita GDP. Thus, Yogyakarta's indirect cost per case was less than the national average. Therefore, overall dengue cost information from Yogyakarta should be nationally representative.

Second, our sample of hospitals was only two hospitals. Although they came from different types of hospitals (B and D), they still covered only two of the four types. Although this small sample opens the possibility for random variation, it does not create bias. The generalizability of our results is further strengthened by our inclusion of private not-for-profit hospitals.

Third, our estimates of the cost of a not medically attended case were based on interviews with patients experiencing febrile illness consistent with dengue, but without a means for laboratory confirmation. Prospective studies, however, have confirmed that dengue is responsible for a notable share of febrile illness in Indonesia,²⁶ and households treat any febrile illness, especially in children, with the possibility that it could be dengue. In addition, our recruitment of not medically attended cases through community meetings could not ascertain whether there were other persons who may have had such cases but declined to discuss them, and, if so, whether they differed systematically from the respondents. However, our higher average age of not medically attended cases is consistent with the pattern from SUSENAS (2014), where the proportion of febrile cases that self-treat increases with age.¹⁵

Fourth, recall bias is always a concern in health expenditure studies and can lead to underestimates of numbers of visits, hospitalizations, other services, and their associated costs. However, this study minimized this concern for hospitalized and ambulatory cases because we had administrative records showing the actual dates of service and used a calendar during interviews.

Fifth, although we examined the relationship between lost time and lost income, we were not able to quantify all economic losses. Nevertheless, our descriptive results provided illustrations of time loss that did not result in measured income loss. For example, one mother described a cascade of actions to cope with her child's illness. She devoted her full attention to caring for the sick child while her husband continued his paid employment. During the illness, an auntie came to the house and filled in for other household needs, such as cooking and caring for other children. During that period, the auntie had to forgo her usual activity as a home-based craftswoman making buttons from coconut shells. Based on follow-up communication, we inferred that she grossed about \$1 per day from selling the buttons, but could not determine what she paid for inputs. The example demonstrates that this study's reliance on lost income did not capture the full economic loss of a dengue episode, and, if the auntie were not living nearby, the income loss could have been much greater.

Sixth, our study design treated dengue as an acute episode and did not probe for possible long-term effects of persistent dengue. Recent research in other countries has shown that fatigue and other symptoms may persist for months beyond the acute phase.^{31–33} A literature-based assessment of the health burden from a dengue episode found median DALY burdens of 0.012 for the acute phase, 0.019 for the persistent phase, and 0.031 overall.⁷ Thus, because the persistent phase could last for months compared with days for the acute phase, the overall burden was 2.6 times that of the acute phase alone.

However, research on agricultural workers showed that a partially debilitating illness did not necessarily lead to income loss as those affected worked harder to maintain their income.³⁴

In conclusion, we believe that this study advances the literature on cost and burden of dengue generally, and in Indonesia specifically, in several ways. It found that dengue costs were 73% higher than previously estimated. The study offers several methodological advances. The most important is the empirically based inclusion of not medically attended (self-treated) dengue. In addition, it breaks down the costs of nonfatal dengue cases, showing that households bear about half the cost, whereas government and healthcare institutions bear the remainder. These results provide a robust empirical base for economic assessment of dengue technologies for the most populous country in Southeast Asia.

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Note: Supplemental information, tables, and figures appear at www.ajtmh.org.

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Supplementary Information

Cost of dengue illness in Indonesia across hospital, ambulatory and non-medical settings

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Supplementary Information

Cost of dengue illness in Indonesia across hospital, ambulatory and non-medical settings

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Supplementary Information

Cost of dengue illness in Indonesia across hospital, ambulatory and non-medical settings

S1: Questionnaire S1. Adult questionnaire in English

Adult Confirmed Dengue Patient Questionnaire (Age 18+)

Patient name _____
 Patient study ID _____
 Date of interview _____

Interviewer

Q0. *The name of the site the patient was recruited from. (Choose one)*

- 1 Hospital _____
 2 Health center _____
 3 Outside professional health system through
 (name of community health worker)

Q00. *Interviewee*

- 1 Patient him/herself
 2 Patient proxy (go to Child questionnaire)

READ: Now we are going to talk about your illness period. I will give you a calendar that will help you answer the following questions.

Show calendar flashcard (form 1) to the patient and continue to use through Q15. Write "today" in the box for today's date.

Q1. When did you start feeling ill?

Write "Illness started" on that date in the calendar.

____/____/____ dd/mm/yyyy
 01/01/2097 Don't Know
 01/01/2098 Refuse to Answer

Q2. Have you had fever during this illness episode that started in [date in Q1]?

1	Yes	
0	No	Skip to Q6
8	Refuse to Answer	Skip to Q6

Q3. When did your fever start?

Write "fever started" on that date in the calendar,

____/____/____ dd/mm/yyyy
 01/01/2097 Don't Know
 01/01/2098 Refuse to Answer

Q4. Did your fever end?

1	Yes	
0	No	Skip to Q6
8	Refuse to Answer	Skip to Q6

Q5. When did your fever end?

Write "fever ended" on that date in the calendar,

____/____/____ dd/mm/yyyy
 01/01/2097 Don't Know
 01/01/2098 Refuse to Answer

Q6. What other symptoms did you have?

- 1 Myalgia
 2 Nausea
 3 Headache
 4 Others

Q6a	Other Symptoms	<hr/> <hr/>		
Q7. Over your entire illness, on which day did you feel worst? Write "worst day" on that date in the calendar,				
		<u> / / </u>	dd/mm/yyyy	
		01/01/2097	Don't Know	
		01/01/2098	Refuse to Answer	
Q8. At the time of this interview, are you still feeling ill?				
		1	Yes	Skip to Q11
		0	No	
Q9. Have you recovered completely from this illness period?				
		1	Yes	
		0	No	Skip to Q11
		8	Refused to Answer	Skip to Q11
Q10. When did you recover completely from the illness episode? Write "recovered completely" on that date in the calendar,				
		<u> / / </u>	dd/mm/yyyy	
		01/01/2097	Don't Know	
		01/01/2098	Refuse to Answer	
Q11. How soon after you started feeling ill did you first receive care by a medical care provider? (Choose one)				
		1	Within 24 hours	
		2	Between 24 and 48 hours	
		3	After 48 hours	
		7	Don't Know	
		8	Refused to Answer	

Care received by patient from the day he/she started feeling ill until today

NOTE to interviewer: if you have forms from hospital please fill Q12 and 13 from the hospital form

Q12. Is the hospital where the patient was admitted a public, social-private, or private?

- | | |
|---|------------------|
| 1 | Public |
| 2 | Social-private |
| 3 | Private |
| 7 | Don't Know |
| 8 | Refuse to Answer |

Q13. Indicate the type of hospital in which you spent the most number of nights?

- | | |
|---|---|
| 1 | University, tertiary or referral hospital |
| 2 | Other hospital |
| 7 | Don't Know |
| 8 | Refuse to Answer |

Hospitalization

READ: In the next set of questions I would like to know whether you have spent one or more nights in a hospital.

Q14. Were you hospitalized during this illness episode?

- | | | |
|---|-------------------|---------------------------------------|
| 1 | Yes | |
| 0 | No | Skip to instruction before Q26 |
| 8 | Refused to answer | Skip to instruction before Q26 |

Q14a. When were your admitted to the hospital

Write "admission" on that date in the calendar,

__ / __ / __

dd/mm/yyyy

01/01/2097

Don't Know

01/01/2098

Refuse to Answer

Q14b. During this hospitalization, for how many nights did you stay in the hospital? __ __ . __ __

98

Refuse to Answer

Q14c. When were your discharged from the hospital

Write "discharged" on that date in the calendar,

__ / __ / __

dd/mm/yyyy

01/01/2097

Don't Know

01/01/2098

Refuse to Answer

READ: Now I would like to ask you some questions on the duration of your hospitalization, the out-of-pocket payments you made for treatment and other spending related to this hospitalization.

Q15. Can you please tell me which type of hospital ward-class did you stay at for the majority of your hospital stay?

- | | |
|---|---------|
| 1 | VIP |
| 2 | Class 1 |
| 3 | Class 2 |
| 4 | Class 3 |

Q16. During your hospitalization, did you stay any night in an intensive care unit?

1 Yes

0 No

Skip to instruction before Q18

8 Refuse to Answer

Skip to instruction before Q18

Q17. For how many nights did you stay in the intensive care unit? (if patient stayed in the intensive care unit for one night or less then mark "1".

— — . — — 98 Refuse to A

READ: Now I will ask about the out-of-pocket payments you made in this facility.

Your out-of-pocket payments are the total amounts paid by you or your family for your treatment, whether or not you received reimbursement for all or part of this paid amount during this illness episode.

Q18. Please report your best estimate of the total out-of-pocket payment that you have paid up to today for services delivered in during your hospitalization? (Round all items to the nearest IDR). If there were no payments, please enter "0".

Please include both payments already made and those that are expected to be made for the services received.

— — — — — 7 Don't Know **Skip to instruction before Q23**

8 Refuse to Answer **Skip to instruction before Q23**

Q19. Can you break down these payments by type of service received during your stay in the hospital?

1 Yes

0 No **Skip to instruction before Q23**

7 Don't Know **Skip to instruction before Q23**

8 Refuse to Answer **Skip to instruction before Q23**

Q20. How much did your household pay out-of-pocket for consultation, admission and discharge fees?

If no spending put "0".

— — — — — 7 Don't Know
8 Refuse to Answer
9 Not Applicable

Q21. How much did your household pay out-of-pocket for diagnostic tests such as blood tests, dengue test, x-rays or sonogram?

If no spending put "0".

— — — — — 7 Don't Know
8 Refuse to Answer
9 Not Applicable

Q22. How much did your household pay out-of-pocket on all treatment such as medications, intravenous fluid (IVF), medical equipment (I/V sets) or blood bank.

If no spending put "0"

— — — — — 7 Don't Know
8 Refuse to Answer
9 Not Applicable

READ: Now I would like to ask you questions about other spending related to your illness during this illness episode from the day you started feeling ill [Response to Q1] until today, such as spending on transportation, meals or lodging. Include also any expenses by any other household member (person you live with), other family members or friend who accompanied you to the hospital for care.

Q23a. Can you please tell me the type of transportation you used to go to the hospital?

Note to interviewer: if patient used household own car or motorcycle then, ask about the distance from the patient's house to the hospital. If the patient doesn't know the answer then use google map to determine the distance.

Q23b. Please report your best estimate of your household out of pocket spending on transportation to the hospital, including ambulance.

If no spending put "0".

If family or owned vehicle, estimate mileage traveled (two ways travel) and use IDR 16,000 per Km as a proxy for the cost of driving. If family or patient owned Auto-rickshaw/own scooter use IDR 14,000 per Km. If no spending record "0.00".

-----	7	Don't Know
-----	8	Refuse to Answer
-----	9	Not applicable

Q23c. Can you please tell me the type of transportation you used to get back from the hospital?

Note to interviewer: if transportation used was a car, ask about the distance from hospital to patient's house.

- Q23d. Please report your best estimate of your household out of pocket spending on transportation from the hospital, including ambulance.
If no spending put "0".
If family or owned vehicle, estimate mileage traveled (two ways travel) and use IDR 16,000 per Km as a proxy for the cost of driving. If family or patient owned Auto-rickshaw/own scooter use IDR 14,000 per Km. If no spending record "0.00".

-----	7	Don't Know
-----	8	Refuse to Answer
-----	9	Not Applicable

- Q24. Please report best estimate of your household out-of-pocket spending on food or meals.
If no spending put "0"

-----	7	Don't Know
-----	8	Refuse to Answer
-----	9	Not Applicable

- Q25. Please report best estimate of your household out-of-pocket spending on lodging in a non-health facility such as a hotel.
If no spending put "0"

-----	7	Don't Know
-----	8	Refuse to Answer
-----	9	Not Applicable

Ambulatory care

READ: These next questions are about any ambulatory health care sought or received since you started feeling ill on [Response to Q1] until today. Please, **include** care from all types of health facilities such as pharmacy, traditional healer, private clinic, Puskesma primary health center, midwife, hospital outpatient department and/or emergency room, and private lab.

Q26. Did you visit any ambulatory health facility during your latest dengue episode? (Show flash card Form 1).

- | | | |
|---|------------------|------------------|
| 1 | Yes | |
| 0 | No | Go to Q40 |
| 8 | Refuse to Answer | Go to Q40 |

READ: Think about each time you had contacted with one of those health facilities during the dengue episode that started in [date in Q1]. Then specify the type of care you received at each of the health facilities you visited (consultations, diagnostic tests and/or treatment) and try to remember the amounts your household, other family members or friend paid out of pocket in total or for each type of service received.

Q27. How many visits have you had to any of the following health facilities during this interview period? **Show flashcard forms 1 (calendar) and 2 (List of healthcare providers)**

Visit	Number of visits
Pharmacy (01)	
Traditional healer (02)	
Private clinic (03)	
Puskesmas Primary health center (04)	
Midwife (05)	
Outpatient department in a hospital (06)	
Emergency room (07)	
Private lab (08)	
Satellite health center (09)	
Other (10)	
Specify others _____	

Q28. Choose from the following the first (*second, third,...*) type of health facility you contracted during this interview period. Can you give the date of each visit? **(Show flashcard form 2 and form 1 (the calendar) (Choose one for each visit)**

Visit	First	Second	Third	Fourth	Fifth	Sixth
Date						
Type of facility						
Pharmacy (01)						
Traditional healer (02)						
Private clinic (03)						
Puskesmas Primary health center (04)						
Midwife (05)						
Outpatient department in a hospital (06)						
Emergency room (07)						
Private lab (08)						
Satellite health center (09)						
Other (10), Specify _____						
Don't know (97)						

Refuse to answer (98)						
-----------------------	--	--	--	--	--	--

Read: What is the name of the facility you went to? (Fill in the space next to type of facility the patient chose)

Note for interviewer: A “Public” Facility is a health facility operated by any level of government, and a “social-private” facility is organization run by private non-profit organization, Private is an individual doctor or group of private doctors.

Q29. What type of facility did you visit, during your X visit? Was it public or non-public facility? (Choose one per visit)

Visit	Public (1)	Social-private (2)	Private (3)	Don't know (7)	Refuse to answer (8)
First					
Second					
Third					
Fourth					
Fifth					
Sixth					

Q30. What kind of service did you receive in this facility during your X visit? (Check all that apply)

Visit	Consultations	Diagnostic test such as x-ray, blood test	Treatment such as medications, intravenous fluid	Referral	Don't know (7)	Refuse to answer (8)
First						
Second						
Third						
Fourth						
Fifth						
Sixth						

READ: Now I would like to ask you about the out-of-pocket payments your household, other family members or friend, made in this facility.

Note for interviewer: Whenever possible, cross check the amount with bills available from the health facility.

Q31. Please report your best estimate of the total out-of-pocket payment for services received in this facility? Please include both payments already made and those that are expected to be made for the services received.

If there were no payments, please enter “0.00”.

Visit	Amount, IDR	<i>If zero skip to instruction before Q36a</i>	Don't know (7)	<i>Skip to instruction before Q36a</i>	Refuse of answer (8)	<i>Skip to instruction before Q36a</i>
First						
Second						
Third						
Fourth						
Fifth						
Sixth						

Q32. Can you break down the total payments by type of service received?

Visit	Yes (1)	No (0)	<i>Skip to instruction before Q36a</i>	Refuse to answer (8)	<i>Skip to instruction before Q36a</i>	Not applicable (9)	<i>Skip to instruction before Q36a</i>
First							
Second							
Third							

Fourth							
Fifth							
Sixth							

Q33. Out-of-pocket payment on: Consultation. *(If no payment record "0.00")*

Visit	Amount, IDR	Don't know (7)	Refuse to answer (8)	Not applicable (9)
First				
Second				
Third				
Fourth				
Fifth				
Sixth				

Q34. Out-of-pocket payment on: diagnostic tests or blood bank such as blood test, dengue test, x-rays, sonogram...
If no payment record "0.00".

Visit	Amount, IDR	Don't know (7)	Refuse to answer (8)	Not applicable (9)
First				
Second				
Third				
Fourth				
Fifth				
Sixth				

Q35. Out-of-pocket payment on: treatment such as medications, medical equipment (intravenous sets).
If no payment record "0.00".

Visit	Amount, IDR	Don't know (7)	Refuse to answer (8)	Not applicable (9)
First				
Second				
Third				
Fourth				
Fifth				
Sixth				

READ: Now I would like to ask you questions about other spending your household, other family members or friend, made specific for this facility during this illness episode such as spending on transportation, meals and lodging. Include also any expenses by any other household member who accompanied you to this first (*second, third,..*) facility for care.

Q36a. Can you please tell me the type of transportation you used to go to the [TYPE of health facility]?

Note to interviewer: if transportation used was household own car or motorcycle , ask about the distance from the patient's house to the [health facility].

Visit	Transportation type	Distance, KM
First		
Second		
Third		
Fourth		
Fifth		
Sixth		

Q36b. Please report the best estimate of out-of-pocket spending on transportation to the [TYPE of health facility]

If family or owned vehicle, estimate mileage traveled (two ways travel) and use **IDR 16,000 per Km** as a proxy for the cost of driving. If family or patient owned Auto-rickshaw/own scooter use **IDR 14,000 per Km**. If no spending record "0.00".

Visit	Amount, IDR	Don't know (7)	Refuse to answer (8)	Not applicable (9)
First				
Second				
Third				
Fourth				
Fifth				
Sixth				

Q36c. Can you please tell me the type of transportation you used to get back home from the [TYPE of health facility]?

Note to interviewer: if transportation used was a car, ask about the distance from [health facility] to patient's house.

Visit	Transportation type	Distance, KM
First		
Second		
Third		
Fourth		
Fifth		
Sixth		

Q36d. Please report the best estimate of out-of-pocket spending on transportation from the [Type health facility] to your home

If family or owned vehicle, estimate mileage traveled (two ways travel) and use **IDR 16,000 per Km** as a proxy for the cost of driving. If family or patient owned Auto-rickshaw/own scooter use **IDR 14,000 per Km**. If no spending record "0.00".

Visit	Amount, IDR	Don't know (7)	Refuse to answer (8)	Not applicable (9)
First				
Second				
Third				
Fourth				
Fifth				
Sixth				

Q37. Please report the best estimate of out-of-pocket spending on food or meals.

If not spending report "0.00"

Visit	Amount, IDR	Don't know (7)	Refuse to answer (8)	Not applicable (9)
First				
Second				
Third				
Fourth				
Fifth				
Sixth				

Q38. Please report the best estimate of out-of-pocket spending on lodging in a non-health facility such as a hotel.

If not spending report "0.00"

Visit	Amount, IDR	Don't know (7)	Refuse to answer (8)	Not applicable (9)
First				
Second				
Third				
Fourth				
Fifth				

Q39. Any other health facilities visited during this illness period from the day you stated feeling ill [Response to Q1] until today?

1	Yes	<i>Repeat the process starting with Q28 through Q39</i>
0	No	

Illness impact on household members, other family members who reside outside your household or friends during this illness episode

READ: I would like to learn about how your recent dengue illness that occurred in [Date] have affected you and each of the members of your household, other family members who reside outside your household or friends.

READ: Let us talk about you first.

The patient

Q40. Please record the sex of the patient without having to ask him/her.

1	Male
2	Female

Q41. What is your current age? _____

999	Don't Know
998	Refuse to answer

Q41a. What is your date of birth (day/month and year)? _____

____/____/____	dd/mm/yyyy
01/01/2097	Don't Know
01/01/2098	Refuse to Answer

Q42. What is the highest level of education you have completed? (Choose one)

Show Flashcard-Form 3

01	Illiterate
02	Just literate but no schooling
03	Attended school for at least one year
04	Pre-school
05	Primary school
06	Middle school
07	High school
08	Diploma
09	Graduate
10	Post graduate (Masters, PhD)
11	Professional degree
97	Don't know
98	Refuse to answer
99	Not applicable

Q43. Are you currently studying?

1	Yes	<i>Skip to Q46</i>
0	No	<i>Skip to Q46</i>
8	Refused to answer	<i>Skip to Q46</i>

Q44. Have you lost any days of school due to your illness?

1	Yes
0	No
8	Refused to answer

Skip to Q46

Q45. How many days of school did you miss due to your illness?

Put "0" if none

97	Don't know
98	Refuse to answer
99	Not applicable

Q46. Are you working for pay?

1	Yes
0	No
8	Refused to answer

Skip to Q51a

Q47. Have you lost any days of work due to your illness?

1	Yes
0	No
7	Don't know
8	Refused to answer

Skip to Q51a

Skip to Q51a

Q48. How many days of work did you lose due to your illness?

Put "0" if none

97	Don't know
98	Refuse to answer
99	Not applicable

Q49. Did you receive any paid sick leave for work days off, in which your employer or some agency paid your salary while you were ill?

1	Yes
0	No
7	Don't know
8	Refused to answer
9	Not applicable

Skip to Q51a

Skip to Q51a

Skip to Q51a

Q50. How many paid sick days did you receive for this illness?

Put "0" if none

97	Don't know
98	Refuse to answer
99	Not applicable

Q51a. Have you lost any income due to your illness?

1	Yes
0	No
7	Don't know
8	Refused to answer

Skip to Q52

Skip to Q52

Q51b. What was the amount of income you lost? (Please give your best estimate)

7	Don't know
8	Refused to answer
9	Not applicable

Q52. Did you receive any monetary or non- monetary assistance from family members or the community for this illness episode?

1	Yes	
0	No	Skip to Q55
8	Refused to answer	Skip to Q55

Q53. What is your best estimate of the value of the non- monetary assistance?

True 0 if no non-financial assistance.

Put "0" if none

97	Don't know
98	Refuse to answer
99	Not applicable

Note to interviewer: If don't know, write the type of non-monetary assistance received by patient and patient's family

Q54. What is the total amount in IDR of the monetary assistance?

Put "0" if none

97	Don't know
98	Refuse to answer
99	Not applicable

Number of household members

Q55. How many members live in your household? (Other then yourself?)

00	Zero	End interview
98	Refuse to answer	

Q56. How many of these household members have been affected by your illness directly during this illness episode?

READ: Household members are people who live with you and share meals. A household member is affected if he or she spent more time or money than usual caring for you or lost work, income, or school due to your illness.

00	Zero	End interview
98	Refuse to answer	End Interview

READ: Now I would like to ask you some questions about this/these [Response to Q56] member/s of your household who has/have been affected by your illness.

Care-givers

Q57. What is the relationship of this (first, second,...) affected household member to you? (Choose one)

Show flashcard form 4

Relationship	Household member							
	First member	Second member	Third member	Fourth member	Fifth member	Sixth member	Seventh member	Eighth member
Mother (01)								
Father (02)								
Husband (03)								
Wife (04)								
Housemate (05)								
Sister (06)								
Brother (07)								
Son (08)								
Daughter (09)								
Grandmother (10)								
Grandfather (11)								
Uncle (12)								
Aunt (13)								
House help (14)								
Baby sitter (15)								
Other (16) Specify _____								
Refuse to answer (98)								

Q58. What is [Household member]'s age?

Household member	Age in years	Don't know (997)	Refuse to answer (998)
First member			
Second member			
Third member			

Fourth member			
Fifth member			
Sixth member			
Seventh member			
Eighth member			

Q58. What was the highest level of education that [household member] completed? (Choose one)

Show flashcard-form 3

Relationship	Household member							
	First member	Second member	Third member	Fourth member	Fifth member	Sixth member	Seventh member	Eighth member
Illiterate (01)								
Just literal but no schooling (02)								
Attended school for at least one year (03)								
Pre-school (04)								
Primary school (05)								
Middle school (06)								
High school (07)								
Diploma (08)								
Graduate (09)								
Post graduate (Masters, PhD) (10)								
Professional degree (11)								
Don't know (97)								
Refuse to answer (98)								
Not applicable (99)								

Q59. Is [Household member] currently studying?

Household member	Yes (Code:1)	No (Code:2)	<i>Skip to Q62</i>	Don't know (Code:7)	<i>Skip to Q62</i>	Refuse to answer (Code:8)	<i>Skip to Q62</i>
First member							
Second member							
Third member							
Fourth member							
Fifth member							
Sixth member							
Seventh member							
Eighth member							

Q60. Has [Household member] lost any days of school due to your illness?

Household member	Yes (Code:1)	No (Code:2)	<i>Skip to Q62</i>	Don't know (Code:7)	<i>Skip to Q62</i>	Refuse to answer (Code:8)	<i>Skip to Q62</i>
First member							
Second member							
Third member							
Fourth member							
Fifth member							
Sixth member							

Seventh member							
Eighth member							

Q61. How many days of school did [household member] missed due to your illness?

Record "0" if none

Household member	Days of schooling lost	Don't know (97)	Refuse to answer (98)
First member			
Second member			
Third member			
Fourth member			
Fifth member			
Sixth member			
Seventh member			
Eighth member			

Q62. Is [Household member] working for pay?

Household member	Yes (Code:1)	No (Code: 0)	If no skip to Q67a	Don't know (Code:7)	Skip to Q67a	Refuse to answer (Code:8)	Skip to Q67a
First member							
Second member							
Third member							
Fourth member							
Fifth member							
Sixth member							
Seventh member							
Eighth member							

Q63. Has [Household member] lost any days of work due to your illness?

Household member	Yes (Code:1)	No (Code: 0)	Skip to Q67a	Don't know (Code:7)	Skip to Q67a	Refuse to answer (Code:8)	Skip to Q67a
First member							
Second member							
Third member							
Fourth member							
Fifth member							
Sixth member							
Seventh member							
Eighth member							

Q64. How many days of work did [Household member] lose due to your illness?

Record "0" if none

Household member	Number of days	Don't know (Code:97)		Refuse to answer (Code:98)		Not applicable (Code:99)	
First member							
Second member							
Third member							
Fourth member							
Fifth member							
Sixth member							

Seventh member							
Eighth member							

Q65. Did [household member] receive any paid sick leave for work days off, in which the employer or some agency paid his/her salary for caring for you while you were ill?

Household member	Yes (Code: 1)	No (Code: 0)	Skip to Q67a	Don't know (Code:7)	Skip to Q67a	Refused to answer (Code:8)	Skip to Q67a	Not Applicable (Code:9)	Skip to Q67a
First member									
Second member									
Third member									
Fourth member									
Fifth member									
Sixth member									
Seventh member									
Eighth member									

Q66. How many paid sick days did [household member] receive?

Household member	Number of paid sick days	Don't know (97)	Refuse to answer (98)
First member			
Second member			
Third member			
Fourth member			
Fifth member			
Sixth member			
Seventh member			
Eighth member			

Q67a. Has [Household member] lost any income due to your illness?

Household member	Yes (Code:1)	No (Code: 0)	Skip to Q68	Don't know (Code:7)	Skip to Q68	Refuse to answer (Code:8)	Skip to Q68
First member							
Second member							
Third member							
Fourth member							
Fifth member							
Sixth member							
Seventh member							
Eighth member							

Q67b. What was the amount of income [household member] lost due to your illness? (Please give your best estimate).

If no payment record "0.00".

Household member	Amount, IDR	Don't know (7)	Refuse to answer (8)	Not applicable (9)
First member				
Second member				
Third member				
Fourth member				
Fifth member				
Sixth member				

Seventh member				
Eighth member				

Q68. Of the number of sick days during this illness episode that started on [date of illness till patient date of recovery or date of interview], what was the total number of days of additional care that [household member] provided to you?

If none, enter 0

Household member	Number of days	If "Zero" skip to Q70	Don't know (Code:97)	Skip to Q70	Refused to answer (Code:98)	Skip to Q70	Not Applicable (Code:99)	Skip to Q70
First member								
Second member								
Third member								
Fourth member								
Fifth member								
Sixth member								
Seventh member								
Eighth member								

READ: In the questions below, think about the daily number of additional hours of care that you have received from [household member x] during your illness. Additional hours refer to any number of hours above those that [household member x] usually spends with you. In estimating the time, please include time spent at home, at the health facility and during transportation to and from the health facility

Q69. During these [Response to Q68] days, on average what was the average number of additional daily hours [household member x] spent caring for you?

If none, enter 0

Household member	Average additional hours of daily care	Don't know (Code:97)	Refused to answer (Code:98)	Not Applicable (Code:99)
First member				
Second member				
Third member				
Fourth member				
Fifth member				
Sixth member				
Seventh member				
Eighth member				

Q70. Did [household member x] have additional spending because of your illness such as transportation, meals or lodging expenditures other than the expenses previously mentioned for visiting health providers?

Household member	Yes (Code:1)	No (Code: 0)	Skip to next household member	Don't know (Code:7)	Skip to next household member	Refused to answer (Code:8)	Skip to next household member	Not Applicable (Code:9)	Skip to next household member
First member									
Second member									
Third member									
Fourth member									
Fifth member									
Sixth member									

Seventh member								
Eighth member								

Q71. For this question please report the best estimate of the total amount of additional spending over these [Number of days reported in Q68] days not already included in one of the previous questions
If no payment record "0.00".

Household member	Amount, IDR	Don't know (7)	Refuse to answer (8)	Not applicable (9)
First member				
Second member				
Third member				
Fourth member				
Fifth member				
Sixth member				
Seventh member				
Eighth member				

Check Q56, if the answer is more than 1 then do repeat questions 57 through 71 for all the household members listed. If Q56 is equal to 1, then read the sentence below and end interview.

READ: Thank you so much for your participation! If you have any questions regarding this interview or the results of this study please contact xxx at [Name of institute] from xx at xxx

Supplementary Information

Cost of dengue illness in Indonesia across hospital, ambulatory and non-medical settings

S2: Questionnaire S2. Adult questionnaire in Bahasa Indonesia

Kuesioner untuk Pasien Dengue Dewasa Terkonfirmasi (Usia 18+)

Nama Pasien _____
Nomor Sampel _____
Tanggal Wawancara _____

Wawancara

Q0. Nama fasilitas kesehatan tempat pasien dirawat (pilih satu)

- 1 Rumah Sakit _____
- 2 Puskesmas _____
- 3 Dari luar fasilitas kesehatan, melalui kader a.n. _____

Q00. Yang diwawancara

- 1 Pasien sendiri
2 Wali pasien (ganti ke kuesioner wali)

Bacakan: Sekarang kita akan berbicara mengenai periode penyakit Anda. Dan saya akan menunjukkan kalender yang akan membantu Anda menjawab pertanyaan berikut.

Tunjukkan kalender (form 1) ke pasien dan lanjutkan hingga Q15. Tuliskan "hari ini" pada kotak untuk tanggal hari ini.

- Q1. Kapan Anda mulai measa sakit? _____ dd/mm/yyyy
Tuliskan "mulai sakit" pada tanggal di kalender
01/01/2097 Tidak tahu
01/01/2098 Menolak menjawab
- Q2. Apakah Anda mengalami demam [merespons Q. 1]?
1 Ya
0 Tidak **Lanjut ke Q6**
8 Menolak menjawab **Lanjut ke Q6**
- Q3. Kapan Anda mulai demam? _____ dd/mm/yyyy
Tuliskan "mulai demam" pada tanggal di kalender
01/01/2097 Tidak tahu
01/01/2098 Menolak menjawab
- Q4. Apakah demam Anda saat ini telah berakhir?
1 Ya
0 Tidak **Lanjut ke Q6**
8 Menolak menjawab **Lanjut ke Q6**
- Q5. Kapan demam Anda berakhir?
Tuliskan "demam berakhir" pada tanggal di kalender _____ dd/mm/yyyy
01/01/2097 Tidak tahu
01/01/2098 Menolak menjawab
- Q6. Gejala apa yang Anda rasakan?
1 Nyeri otot
2 Mual
3 Sakit kepala
4 Lainnya
- Q6a. Gejala lainnya _____

-
- Q7. Pada keseluruhan periode sakit, kapan Anda merasa itu terburuk?
Tuliskan "hari terburuk" pada tanggal _____ dd/mm/yyyy
_____/_____
01/01/2097 Tidak tahu
01/01/2098 Menolak menjawab
- Q8. Pada saat interview ini, apakah Anda masih merasa sakit? 1 Ya Lanjut ke Q11
0 Tidak
- Q9. Apakah Anda sudah pulih sepenuhnya dari episode sakit ini? 1 Ya Lanjut ke Q11
0 Tidak
8 Menolak menjawab Lanjut ke Q11
- Q10. Kapan Anda merasa pulih sepenuhnya pada episode sakit ini?
Tuliskan "pulih sepenuhnya" pada tanggal di kalender, _____ dd/mm/yyyy
_____/_____
01/01/2097 Tidak tahu
01/01/2098 Menolak menjawab
- Q11. Berapa lama sejak Anda merasa sakit hingga memutuskan pergi untuk mendapat layanan kesehatan? (Pilih salah satu)
1 Dalam 24 jam
2 Antara 24 and 48 jam
3 Setelah 48 jam
7 Tidak tahu
8 Menolak menjawab

Perawatan yang diterima pasien dari hari merasa sakit hingga saat ini

Catatan pewawancara: Jika ada KDRS, Mohon mengisi Q12 dan 13 dari form Rumah Sakit

Q12. Apakah rumah sakit tempat Anda dirawat adalah milik pemerintah, swasta-sosial atau swasta?

- | | |
|---|------------------|
| 1 | Milik pemerintah |
| 2 | Swasta - sosial |
| 3 | Swasta |
| 7 | Tidak tahu |
| 8 | Menolak menjawab |

Q13. Indikasikan tipe rumah sakit tempat Anda yang paling lama menjalani perawatan rawat inap?

- | | |
|---|---|
| 1 | Universitas, rumah sakit rujukan atau tersier |
| 2 | Rumah sakit lain |
| 7 | Tidak tahu |
| 8 | Menolak menjawab |

Rawat Inap

BACAKAN: Pada pertanyaan selanjutnya saya hendak mencari tahu apakah Anda menghabiskan waktu 1 atau lebih hari di rumah sakit.

Q14. Apakah Anda dirawat inap selama episode sakit tersebut?

- | | | |
|---|------------------|---|
| 1 | Ya | |
| 0 | Tidak | Lanjut bacakan instruksi sebelum Q26 |
| 8 | Menolak menjawab | Lanjut bacakan instruksi sebelum Q26 |

Q14a. Kapan Anda dirawat di rumah sakit?

Tuliskan "masuk" pada tanggal kalender.

__ / __ / __
01/01/2097
01/01/2098

dd/mm/yy
Tidak tahu
Menolak menjawab

Q14b. Selama masa rawat inap, berapa malam yang Anda habiskan di rumah sakit?

____ . ____
98 Menolak menjawab

Q14c. Kapan Anda keluar dari rumah sakit?

Tuliskan "keluar" pada tanggal kalender.

__ / __ / __
01/01/2097
01/01/2098

dd/mm/yy
Tidak tahu
Menolak menjawab

BACAKAN: Sekarang saya akan menanyakan beberapa pertanyaan terkait durasi rawat inap Anda, pengeluaran Anda selama perawatan dan pengeluaran lain terkait rawat inap tersebut.

Q15. Dapatkah Anda memberi tahu saya kelas bangsal rawatan Anda selama di rumah sakit?

1. VIP
2. Kelas 1
3. Kelas 2
4. Kelas 3

Q16. Selama masa rawat inap, apakah Anda sempat dirawat di intensive care unit (ICU)?

1 Ya

0 Tidak

Lanjut bacakan instruksi sebelum Q18

8 Menolak menjawab

Lanjut bacakan instruksi sebelum Q18

Q17. Berapa hari Anda dirawat di ICU? (jika pasien dirawat di ICU selama 1 hari atau kurang, tuliskan 1)

— — · — —
98 Menolak menjawab

BACAKAN: Sekarang saya akan menanyakan mengenai pengeluaran mandiri yang Anda bayar ke fasilitas kesihatan.

Pengeluaran mandiri adalah jumlah uang yang Anda atau keluarga Anda bayarkan untuk biaya perawatan Anda, baik itu Anda menerima penggantian atau tidak dari jumlah tersebut selama episode sakit Anda.

- Q18. Berapa estimasi pengeluaran mandiri Anda untuk perawatan yang Anda terima selama rawat inap? (Dapat dibulatkan).
Jika tidak ada pengeluaran, masukkan "0".
Mohon dimasukkan baik pengeluaran yang telah dibayarkan dan pengeluaran yang akan terjadi

— — — — —
7 Tidak tahu **Lanjut bacakan instruksi sebelum Q23**
8 Menolak menjawab **Lanjut bacakan instruksi sebelum Q23**

- Q19. Dapatkan Anda memilah milah pengeluaran Anda berdasar jenis layanan yang Anda dapatkan selama rawat inap?

1 Ya
0 Tidak **Lanjut bacakan instruksi sebelum Q23**
7 Tidak tahu **Lanjut bacakan instruksi sebelum Q23**
8 Menolak menjawab **Lanjut bacakan instruksi sebelum Q23**

- Q20. Berapa pengeluaran mandiri rumah tangga Anda yang dibayarkan untuk konsultasi, saat mulai hingga selesai rawat inap?

Jika tidak ada pengeluaran, masukkan "0".

— — — — —
7 Tidak tahu
8 Menolak menjawab
9 Tidak dapat diaplikasikan

- Q21. Berapa pengeluaran mandiri rumah tangga Anda yang dibayarkan untuk uji diagnostic seperti cek darah, tes dengue, rontgent atau sonogram?

Jika tidak ada pengeluaran, masukkan "0".

— — — — —
7 Tidak tahu
8 Menolak menjawab
9 Tidak dapat diaplikasikan

- Q22. Berapa pengeluaran mandiri rumah tangga Anda yang dibayarkan untuk pengobatan, cairan infus dan peralatan medis atau bank darah?

Jika tidak ada pengeluaran, masukkan "0".

— — — — —
7 Tidak tahu
8 Menolak menjawab
9 Tidak dapat diaplikasikan

BACAKAN: Sekarang saya akan menanyakan mengenai pengeluaran Anda terkait episode penyakit dari awal hingga selesai merasa sakit [Merespons Q1], seperti untuk transportasi, makan, atau penginapan. Termasuk pengeluaran lain oleh anggota keluarga yang menemani masa rawat inap Anda, anggota keluarga lain dan kerabat.

Q23a. Apa moda transportasi yang Anda gunakan untuk menuju ke rumah sakit? Berapa jaraknya_____

Catatan pewawancara: jika menggunakan mobil atau motor pribadi tanyakan jaraknya, dan jika pasien tidak tahu maka gunakan google map

Q23b. Berapa estimasi pengeluaran mandiri keluarga Anda untuk transportasi menuju rumah sakit, termasuk ambulans? Jika tidak ada pengeluaran, masukkan "0".

Jika keluarga memiliki mobil, estimasikan jarak tempuh perjalanan (datang dan pergi) dan gunakan proxy Rp. 16.000 per km. Dan jika pasien menggunakan motor gunakan proxy Rp 14.000 per km. Jika tidak ada pengeluaran, catat "0.00".

7	Tidak tahu
8	Menolak menjawab
9	Tidak dapat diaplikasikan

Q23c. Apa moda transportasi yang Anda gunakan untuk pulang dari rumah sakit? Berapa jaraknya_____

Catatan pewawancara: jika menggunakan mobil atau motor pribadi tanyakan jaraknya, dan jika pasien tidak tahu maka gunakan google map

Q23d. Berapa estimasi pengeluaran mandiri keluarga Anda untuk transportasi dari rumah sakit, termasuk ambulans? Jika tidak ada pengeluaran, masukkan "0".

Jika keluarga memiliki mobil, estimasikan jarak tempuh perjalanan (datang dan pergi) dan gunakan proxy Rp. 16.000 per km. Dan jika pasien menggunakan motor gunakan proxy Rp 14.000 per km. Jika tidak ada pengeluaran, catat "0.00".

7	Tidak tahu
8	Menolak menjawab
9	Tidak dapat diaplikasikan

Q24. Berapa estimasi pengeluaran mandiri keluarga Anda untuk makan?

Jika tidak ada pengeluaran, masukkan "0".

7	Tidak tahu
8	Menolak menjawab
9	Tidak dapat diaplikasikan

Q25. Berapa estimasi pengeluaran mandiri keluarga Anda untuk penginapan di fasilitas non-kesehatan seperti hotel?

Jika tidak ada pengeluaran, masukkan "0".

7	Tidak tahu
8	Menolak menjawab
9	Tidak dapat diaplikasikan

Rawat Jalan

BACAKAN: Pertanyaan berikut ini akan terkait layanan rawat jalan sejak Anda mulai merasa hingga berakhirnya sakit [Merespons Q1]. Mohon **termasuk** perawatan dari berbagai jenis fasilitas kesehatan seperti apotek, pengobatan tradisional, klinik swasta, puskesmas, bidan, poli rawat jalan dan/atau unit gawat darurat, dan lab swasta

Q26. Apakah Anda mengunjungi fasilitas rawat jalan pada episode dengue Anda yang terakhir? (Tunjukkan form peraga 1).

- | | | |
|---|------------------|-------------------------|
| 1 | Ya | |
| 0 | Tidak | Lanjutkan ke Q40 |
| 8 | Menolak menjawab | Lanjutkan ke Q40 |

BACAKAN: Pikirkan tentang waktu yang Anda habiskan untuk akses fasilitas kesehatan berikut selama episode sakit dimulai [tanggal pada Q1]. Kemudian spesifikkan jenis perawatan yang Anda terima pada tiap fasilitas kesehatan yang Anda kunjungi (konsultasi, uji diagnostic, dan/atau pengobatan) dan cobalah mengingat kembali jumlah pengeluaran mandiri keluarga Anda, *anggota keluarga lain dan kerabat* pada tiap jenis layanan tersebut.

Q27. Berapa kali kunjungan pada fasilitas kesehatan berikut ini selama periode sakit Anda? **Tunjukkan form 1 (kalender) dan 2 (daftar fasilitas kesehatan)**

Visit	Number of visits
Apotek (01)	
Pengobatan tradisional (02)	
Dokter praktek pribadi (03)	
Puskesmas (04)	
Bidan (05)	
Poli rawat jalan rumah sakit (06)	
Unit Gawat Darurat (UGD) (07)	
Lab swasta (08)	
Puskesmas pembantu (09)	
Lainnya (10)	
Sebutkan lainnya _____	

Q28. Pilihlah dari berikut ini tipe fasilitas kesehatan yang Anda kunjungi selama periode sakit. Apakah Anda dapat memberi tanggal pada tiap kunjungan? (Tunjukkan form 2 dan form 1, pilih salah satu pada tiap kunjungan)

Kunjungan	Pertama	Kedua	Ketiga	Keempat	Kelima	Keenam
Tanggal						
Type of facility						
Apotek (01)						
Pengobatan tradisional (02)						
Dokter praktek pribadi (03)						
Puskesmas (04)						
Bidan (05)						
Poli rawat jalan rumah sakit (06)						
UGD (07)						
Lab swasta (08)						
Puskesmas pembantu (09)						
Lainnya (10), sebutkan _____						
Tidak tahu (97)						
Menolak menjawab (98)						

BACAKAN: Sebutkan nama fasilitas kesehatan manakah yang Anda kunjungi? (Isikan kolom di samping tipe fasilitas kesehatan yang dipilih pasien)

Catatan untuk pewawancara: Fasilitas kesehatan “public” adalah fasilitas kesehatan yang dioperasikan oleh pemerintah dalam berbagai tingkatan, dan “swasta-sosial” adalah fasilitas kesehatan yang dioperasikan oleh organisasi sosial non-profit, “swasta” adalah dokter praktik pribadi atau klinik bersama.

Q29. Apa tipe fasilitas kesehatan yang Anda kunjungi, selama kunjungan kali ke-X Anda? Apakah fasilitas kesehatan public atau non-publik? (Pilih salah satu per kunjungan)

Kunjungan	Publik (1)	Swasta-sosial (2)	Swasta (3)	Tidak tahu (7)	Menolak menjawab (8)
Pertama					
Kedua					
Ketiga					
Keempat					
Kelima					
Keenam					

Q30. Jenis layanan apa yang Anda terima selama kunjungan kali ke-X Anda? (Cek yang diaplikasikan)

Kunjungan	Konsultasi	Uji diagnostic seperti rontgen, sampel darah	Pengobatan medis, infus	Rujukan	Tidak tahu (7)	Menolak menjawab (8)
Pertama						
Kedua						
Ketiga						
Keempat						
Kelima						
Keenam						

BACAKAN: Sekarang saya akan menanyakan mengenai pengeluaran mandiri keluarga Anda, anggota keluarga lain dan kerabat terhadap fasilitas berikut ini.

Catatan pewawancara: Bila memungkinkan, kroscek dengan jumlah tagihan yang tersedia dari fasilitas kesehatan.

Q31. Mohon sebutkan perkiraan terbaik Anda dari total pengeluaran mandiri terhadap layanan yang Anda terima dari fasilitas kesehatan? Mohon termasuk pengeluaran yang telah dilakukan dan tagihan yang akan datang.

Jika tidak ada pengluaran, mohon masukkan “0,00”

Kunjungan	Jumlah, IDR	<i>Jika 0 lompat ke instruksi sebelum Q36a</i>	Tidak tahu (7)	<i>Lompat ke instruksi sebelum Q36a</i>	Menolak menjawab (8)	<i>Lompat ke instruksi sebelum Q36a</i>
Pertama						
Kedua						
Ketiga						
Keempat						
Kelima						
Keenam						

Q32. Apakah Anda dapat mengurai jumlah pembayaran berdasar tipe layanan yang diterima?

Kunjungan	Ya (1)	Tidak (0)	<i>Lompat ke instruksi sebelum Q36a</i>	Menolak menjawab (8)	<i>Lompat ke instruksi sebelum Q36a</i>	Tidak dapat diterapkan (9)	<i>Lompat ke instruksi sebelum Q36a</i>
Pertama							
Kedua							
Ketiga							
Keempat							
Kelima							
Keenam							

Q33. Pengeluaran mandiri pada: konsultasi. (*Jika tidak ada pembayaran tuliskan "0,00"*)

Visit	Jumlah, IDR	Tidak tahu (7)	Menolak menjawab (8)	Tidak dapat diterapkan (9)
Pertama				
Kedua				
Ketiga				
Keempat				
Kelima				
Keenam				

Q34. Pengeluaran mandiri pada: transfuse darah atau uji diagnostic seperti rontgent, sampel darah, sonogram...

(*Jika tidak ada pembayaran tuliskan "0,00"*)

Kunjungan	Jumlah, IDR	Tidak tahu (7)	Menolak menjawab (8)	Tidak dapat diterapkan (9)
Pertama				
Kedua				
Ketiga				
Keempat				
Kelima				
Keenam				

Q35. Pengeluaran mandiri pada: pengobatan, set peralatan medis.

(*Jika tidak ada pembayaran tuliskan "0,00"*)

Kunjungan	Jumlah, IDR	Tidak tahu (7)	Menolak menjawab (8)	Tidak dapat diterapkan (9)
Pertama				
Kedua				
Ketiga				
Keempat				
Kelima				
Keenam				

BACAKAN: Sekarang saya akan menanyakan terkait pengeluaran keluarga Anda spesifik untuk fasilitas kesehatan selama periode sakit seperti untuk transportasi, makan/minum, dan penginapan. Termasuk pengeluaran anggota keluarga Anda, anggota keluarga lain dan kerabat yang menemani selama kunjungan pertama (kedua, ketiga,...).

Q36a. Apakah moda transportasi yang Anda gunakan untuk menuju fasilitas kesehatan?

Catatan pewawancara: jika menggunakan mobil atau motor pribadi, tanyakan jaraknya ke fasilitas kesehatan tersebut

Kunjungan	Moda Transportasi	Jarak (km)
Pertama		
Kedua		
Ketiga		
Keempat		
Kelima		
Keenam		

Q36b. Mohon sebutkan perkiraan terbaik Anda terkait pengeluaran mandiri untuk transportasi menuju fasilitas kesehatan)

Jika keluarga memiliki kendaraan, perkirakan jarak tempuh perjalanan (pulang-pergi) dan gunakan IDR 16,000 per Km sebagai acuan dengan mobil dan IDR 14,000 per Km bila dengan motor. Jika tidak ada pengeluaran tuliskan "0,00".

Kunjungan	Jumlah, IDR	Tidak tahu (7)	Menolak menjawab (8)	Tidak dapat diterapkan (9)
Pertama				
Kedua				
Ketiga				
Keempat				
Kelima				
Keenam				

Q36c. Apakah moda transportasi yang Anda gunakan dari fasilitas kesehatan?

Catatan pewawancara: jika menggunakan mobil atau motor pribadi, tanyakan jaraknya ke fasilitas kesehatan tersebut

Kunjungan	Moda Transportasi	Jarak (km)
Pertama		
Kedua		
Ketiga		
Keempat		
Kelima		
Keenam		

Q36d. Mohon sebutkan perkiraan terbaik Anda terkait pengeluaran mandiri untuk transportasi dari fasilitas kesehatan)

Jika keluarga memiliki kendaraan, perkirakan jarak tempuh perjalanan (pulang-pergi) dan gunakan IDR 16,000 per Km sebagai acuan dengan mobil dan IDR 14,000 per Km bila dengan motor. Jika tidak ada pengeluaran tuliskan "0,00".

Kunjungan	Jumlah, IDR	Tidak tahu (7)	Menolak menjawab (8)	Tidak dapat diterapkan (9)
Pertama				
Kedua				
Ketiga				
Keempat				
Kelima				
Keenam				

Q37. Mohon sebutkan perkiraan terbaik Anda terkait pengeluaran mandiri untuk makan/minum.

Jika tidak ada pengeluaran tuliskan "0,00".

Kunjungan	Jumlah, IDR	Tidak tahu (7)	Menolak menjawab (8)	Tidak dapat diterapkan (9)
Pertama				
Kedua				
Ketiga				
Keempat				
Kelima				
Keenam				

Q38. Mohon sebutkan perkiraan terbaik Anda terkait pengeluaran mandiri untuk penginapan seperti hotel.

Jika tidak ada pengeluaran tuliskan "0,00".

Kunjungan	Jumlah, IDR	Tidak tahu (7)	Menolak menjawab (8)	Tidak dapat diterapkan (9)
Pertama				
Kedua				
Ketiga				
Keempat				
Kelima				
Keenam				

Q39. Apakah ada fasilitas kesehatan lain yang Anda kunjungi selama periode sakit dimulai dari saat Anda mulai merasa sakit?

[Respons terhadap Q1]?

- 1 Ya *Ulangi proses dari Q28 hingga Q39*
0 Tidak

Dampak penyakit pada anggota keluarga, anggota keluarga lain dan kerabat selama periode sakit sejak awal hingga selesai [Respons terhadap Q1]

BACAKAN: Saya akan mempelajari bagaimana sakit DBD Anda terakhir yang dimulai sejak [tanggal] yang mempengaruhi Anda dan keluarga Anda, anggota keluarga lain dan kerabat.

BACAKAN: Mari kita bicara tentang Anda terlebih dahulu.

Pasien

Q40. Mohon tuliskan jenis kelamin pasien tanpa menanyakan kepadanya.

- 1 Laki-laki
2 Perempuan

Q41. Berapa usia Anda saat ini?

- 999 Tidak tahu
998 Menolak menjawab

Q41a. Kapan tanggal lahir Anda (hari/bulan/tahun)?

____/____/____
01/01/2097 dd/mm/yyyy
01/01/2098 Tidak tahu
 Menolak menjawab

Q42. Apa tingkat pendidikan terakhir yang Anda selesaikan? (Pilih salah satu)

Tunjukkan Form 3

- | | |
|----|---|
| 01 | Tidak dapat baca-tulis |
| 02 | Mampu baca-tulis namun tidak sekolah |
| 03 | Sekolah tapi hanya satu tahun |
| 04 | Taman kanak - kanak |
| 05 | Sekolah Dasar |
| 06 | Sekolah Menengah Pertama |
| 07 | Sekolah Menengah Atas |
| 08 | Diploma |
| 09 | Universitas, Sarjana |
| 10 | Universitas, Pasca Sarjana (Magister, Doktoral) |
| 11 | Ijazah profesi |
| 97 | Tidak tahu |
| 98 | Menolak menjawab |
| 99 | Tidak dapat diaplikasikan |

Q43. Apakah Anda saat ini sedang menempuh pendidikan?

- | | |
|---|------------------|
| 1 | Ya |
| 0 | Tidak |
| 8 | Menolak menjawab |
- Lanjut ke Q46**

Q44. Apakah Anda kehilangan waktu sekolah Anda selama sakit?

- | | |
|---|------------------|
| 1 | Ya |
| 0 | Tidak |
| 8 | Menolak menjawab |
- Lanjut ke Q46**

Q45. Berapa hari sekolah Anda yang hilang karena sakit?

Tuliskan "0" jika tidak ada

- | | |
|----|------------------------|
| 97 | Tidak tahu |
| 98 | Menolak menjawab |
| 99 | Tidak dapat diterapkan |

Q46. Apakah Anda bekerja dan dibayar?

- | | |
|---|------------------|
| 1 | Ya |
| 0 | Tidak |
| 8 | Menolak menjawab |
- Lanjut ke Q51a**

Q47. Apakah Anda kehilangan hari kerja selama sakit?

Jika pasien tidak kehilangan hari kerja, mohon konfirmasi apakah kehilangan pendapatan.

- | | |
|---|------------------|
| 1 | Ya |
| 0 | Tidak |
| 7 | Tidak tahu |
| 8 | Menolak menjawab |
- Lanjut ke Q51a**
Lanjut ke Q51a
Lanjut ke Q51a

Q48. Berapa hari kerja Anda yang hilang selama sakit?

Tuliskan "0" jika tidak ada

- | | |
|----|------------------------|
| 97 | Tidak tahu |
| 98 | Menolak menjawab |
| 99 | Tidak dapat diterapkan |

Q49. Apakah Anda menerima kompensasi (tidak potong gaji) selama Anda sakit, apakah itu tempat kerja Anda atau pihak lain yang menanggung selama Anda sakit?

1	Ya	
0	Tidak	<i>Lanjut ke Q51a</i>
7	Tidak tahu	<i>Lanjut ke Q51a</i>
8	Menolak menjawab	<i>Lanjut ke Q51a</i>
9	Tidak dapat diterapkan	<i>Lanjut ke Q51a</i>

Q50. Berapa hari gaji yang Anda terima selama sakit?

Tuliskan "0" jika tidak ada

97	Tidak tahu
98	Menolak menjawab
99	Tidak dapat diterapkan

Q51a. Apakah Anda kehilangan pendapatan selama sakit?

1	Ya	
0	Tidak	<i>Lanjut ke Q52</i>
7	Tidak tahu	<i>Lanjut ke Q52</i>
8	Menolak menjawab	<i>Lanjut ke Q52</i>

Q51b. Berapa pengeluaran Anda yang hilang? (Berikan perkiraan terbaik Anda)

7	Tidak tahu
8	Menolak menjawab
9	Tidak dapat diterapkan

Q52. Apakah Anda menerima bantuan keuangan atau non-keuangan dari keluarga atau komunitas selama Anda sakit?

1	Ya	
0	Tidak	<i>Lanjut ke Q55</i>
8	Menolak menjawab	<i>Lanjut ke Q55</i>

Q53. Berapa perkiraan terbaik Anda nilai bantuan non-keuangan yang Anda dapatkan?

Benar 0 jika tidak ada bantuan non-keuangan.

Tuliskan "0" jika tidak ada

97	Tidak tahu
98	Menolak menjawab
99	Tidak dapat diterapkan

Catatan pewawancara: Jika tidak tahu, tuliskan jenis bantuan non-keuangan yang diterima pasien dan keluarga

Q54. Berapakah total bantuan keuangan yang Anda dapatkan dalam IDR?

Tuliskan "0" jika tidak ada

97	Tidak tahu
98	Menolak menjawab
99	Tidak dapat diterapkan

Jumlah Anggota Keluarga

Q55. Berapa jumlah anggota keluarga selain Anda?

00	Nol	Akhiri wawancara
98	Menolak menjawab	

Q56. Berapa anggota keluarga yang terdampak sakit Anda secara langsung selama periode sakit Anda?

BACAKAN: Anggota keluarga adalah mereka yang tinggal bersama Anda dan berbagi makanan. Anggota keluarga terdampak jika dia menghabiskan uang dan waktu lebih dari jumlah biasanya karena merawat Anda atau kehilangan waktu kerja, pendapatan, sekolah karena sakit Anda.

00	Nol	Akhiri wawancara
98	Menolak menjawab	Akhiri wawancara

BACAKAN: Sekarang saya akan menanyakan Anda terkait anggota keluarga Anda yang terdampak penyakit Anda. [Respons terhadap Q56].

Mereka yang merawat

Q57. Apa hubungan Anda dengan anggota keluarga (pertama, kedua,...) Anda? (pilih salah satu)

Tunjukkan form 4

Hubungan	Anggota Keluarga							
	Anggota pertama	Anggota kedua	Anggota ketiga	Anggota keempat	Anggota kelima	Anggota keenam	Anggota ketujuh	Anggota kedelapan
Ibu (01)								
Ayah (02)								
Suami (03)								
Istri (04)								
Teman serumah (05)								
Saudara perempuan (06)								
Saudara laki-laki (07)								
Anak laki-laki (08)								
Anak perempuan (09)								
Nenek (10)								
Kakek (11)								
Paman (12)								
Bibi (13)								
Pembantu (14)								
Pengasuh (15)								
Lainnya (16) sebutkan _____								
Menolak menjawab (98)								

Q58. Berapa usia anggota keluarga Anda?

Anggota keluarga	Usia dalam tahun	Tidak tahu (997)	Menolak menjawab (998)
Anggota pertama			
Anggota kedua			
Anggota ketiga			
Anggota keempat			
Anggota kelima			
Anggota keenam			
Anggota ketujuh			
Anggota kedelapan			

Q59. Apa tingkat pendidikan terakhir anggota keluarga Anda? (pilih salah satu)

Tunjukkan form 3

Hubungan	Anggota Keluarga							
	Anggota pertama	Anggota kedua	Anggota ketiga	Anggota keempat	Anggota kelima	Anggota keenam	Anggota ketujuh	Anggota kedelapan
Tidak dapat baca-tulis (01)								
Mampu baca-tulis namun tidak sekolah (02)								
Sekolah tapi hanya satu tahun (03)								
Taman kanak - kanak (04)								
Sekolah Dasar (05)								
Sekolah Menengah Pertama (06)								
Sekolah Menengah Atas (07)								
Diploma (08)								
Universitas, Sarjana (09)								
Universitas, Pasca Sarjana (Magister, Doktoral) (10)								
Ijazah profesi (11)								
Tidak tahu (97)								
Menolak menjawab (98)								
Tidak dapat diaplikasikan (99)								

Q60. Apakah anggota keluarga Anda saat ini sedang menempuh pendidikan?

Anggota keluarga	Ya (kode:1)	Tidak (Kode:2)	<i>Lanjut ke Q62</i>	Tidak tahu (Kode:7)	<i>Lanjut ke Q62</i>	Menolak menjawab (Kode:8)	<i>Lanjut ke Q62</i>
Anggota pertama							
Anggota kedua							
Anggota ketiga							
Anggota keempat							
Anggota kelima							
Anggota keenam							
Anggota ketujuh							
Anggota kedelapan							

Q61. Apakah anggota keluarga Anda kehilangan hari sekolah karena penyakit Anda?

Anggota keluarga	Ya (kode:1)	Tidak (Kode:2)	<i>Lanjut ke Q62</i>	Tidak tahu (Kode:7)	<i>Lanjut ke Q62</i>	Menolak menjawab (Kode:8)	<i>Lanjut ke Q62</i>
Anggota pertama							
Anggota kedua							
Anggota ketiga							
Anggota keempat							
Anggota kelima							
Anggota keenam							
Anggota ketujuh							
Anggota kedelapan							

Q62. Berapa hari sekolah anggota keluarga yang hilang karena penyakit Anda?

Tuliskan "0" jika tidak ada

Anggota keluarga	Jumlah hari yang hilang	Tidak tahu (97)	Menolak menjawab (98)
Anggota pertama			
Anggota kedua			
Anggota ketiga			
Anggota keempat			
Anggota kelima			
Anggota keenam			
Anggota ketujuh			
Anggota kedelapan			

Q63. Apakah anggota keluarga Anda bekerja dan dibayar?

Anggota keluarga	Ya (kode:1)	Tidak (Kode:2)	Lanjut ke Q67a	Tidak tahu (Kode:7)	Lanjut ke Q67a	Menolak menjawab (Kode:8)	Lanjut ke Q67a
Anggota pertama							
Anggota kedua							
Anggota ketiga							
Anggota keempat							
Anggota kelima							
Anggota keenam							
Anggota ketujuh							
Anggota kedelapan							

Q64. Apakah anggota keluarga Anda kehilangan hari kerja karena penyakit Anda?

Anggota keluarga	Ya (kode:1)	Tidak (Kode:2)	Lanjut ke Q67a	Tidak tahu (Kode:7)	Lanjut ke Q67a	Menolak menjawab (Kode:8)	Lanjut ke Q67
Anggota pertama							
Anggota kedua							
Anggota ketiga							
Anggota keempat							
Anggota kelima							
Anggota keenam							
Anggota ketujuh							
Anggota kedelapan							

Q65. Berapa hari kerja anggota keluarga yang hilang karena penyakit Anda?

Tuliskan "0" jika tidak ada

Anggota keluarga	Jumlah hari	Tidak tahu (Kode:97)	Lanjut ke Q68	Menolak menjawab (Kode:98)	Lanjut ke Q68	Tidak dapat diterapkan (Kode:99)	Lanjut ke Q68
Anggota pertama							
Anggota kedua							
Anggota ketiga							
Anggota keempat							
Anggota kelima							
Anggota keenam							
Anggota ketujuh							

Anggota kedelapan							
----------------------	--	--	--	--	--	--	--

Q66. Apakah anggota keluarga menerima kompensasi atas absennya mereka dari pekerjaan ketika merawat Anda sakit? (dari tempat kerja atau pihak yang menanggung)

Anggota keluarga	Ya (Kode: 1)	Tidak (Kode: 0)	Lanjut ke Q67a	Tidak tahu (Kode:7)	Lanjut ke Q67a	Menolak menjawab (Kode:8)	Lanjut ke Q67a	Tidak dapat diterapkan (Kode:9)	Lanjut ke Q67a
Anggota pertama									
Anggota kedua									
Anggota ketiga									
Anggota keempat									
Anggota kelima									
Anggota keenam									
Anggota ketujuh									
Anggota kedelapan									

Q67. Berapa hari kerja yang didapat ke anggota keluarga Anda?

Anggota keluarga	Jumlah hari yang dibayarkan	Tidak tahu (97)	Menolak menjawab (98)
Anggota pertama			
Anggota kedua			
Anggota ketiga			
Anggota keempat			
Anggota kelima			
Anggota keenam			
Anggota ketujuh			
Anggota kedelapan			

Q67a. Apakah anggota keluarga Anda kehilangan pendapatan karena penyakit Anda?

Anggota keluarga	Ya (kode:1)	Tidak (Kode:2)	Lanjut ke Q68	Tidak tahu (Kode:7)	Lanjut ke Q68	Menolak menjawab (Kode:8)	Lanjut ke Q68
Anggota pertama							
Anggota kedua							
Anggota ketiga							
Anggota keempat							
Anggota kelima							
Anggota keenam							
Anggota ketujuh							
Anggota kedelapan							

Q67b. Berapa pendapatan anggota keluarga Anda yang hilang? (Mohon berikan perkiraan terbaik).

Jika tidak ada tuliskan "0,00".

Anggota keluarga	Jumlah, IDR	Tidak tahu (7)	Menolak menjawab (8)	Tidak dapat diterapkan (9)
Anggota pertama				
Anggota kedua				
Anggota ketiga				

Anggota keempat				
Anggota kelima				
Anggota keenam				
Anggota ketujuh				
Anggota kedelapan				

Q68. Dari jumlah hari sakit selama episode sakit Anda yang dimulai sejak sakit hingga saat pemulihan (tanggal wawancara), berapa jumlah hari tambahan yang dihabiskan anggota keluarga untuk perawatan lanjutan Anda?

Jika tidak ada, masukkan 0

Anggota keluarga	Jumlah hari	Jika "Nol" Lanjut ke Q70	Tidak tahu (Kode:97)	Lanjut ke Q70	Menolak menjawab (Kode:98)	Lanjut ke Q70	Tidak dapat diterapkan (Kode:99)	Lanjut ke Q70
Anggota pertama								
Anggota kedua								
Anggota ketiga								
Anggota keempat								
Anggota kelima								
Anggota keenam								
Anggota ketujuh								
Anggota kedelapan								

BACAKAN: Dari pertanyaan berikut, pikirkan tentang jumlah tambahan jam per hari yang Anda dapatkan dari anggota keluarga. Tambahan jam merujuk pada jumlah jam diluar biasanya anggota keluarga menghabiskan waktu bersama Anda. Dalam memperkirakan waktu, mohon masukkan waktu di rumah, pada fasilitas kesehatan dan selama perjalanan menuju dan dari fasilitas kesehatan.

Q69. Selama periode ini, berapa rata – rata jumlah tambahan jam anggota keluarga untuk merawat Anda? [Respons terhadap Q68]

Jika tidak ada, masukkan 0

Anggota keluarga	Rata-rata tambahan jam untuk perawatan harian	Tidak tahu (Kode:97)	Menolak menjawab (Kode:98)	Tidak dapat diterapkan (Kode:99)
Anggota pertama				
Anggota kedua				
Anggota ketiga				
Anggota keempat				
Anggota kelima				
Anggota keenam				
Anggota ketujuh				
Anggota kedelapan				

Q70. Apakah ada pengeluaran transportasi, makan/minum dan penginapan tambahan dari yang telah disebutkan sebelumnya untuk mengunjungi fasilitas kesehatan?

Anggota keluarga	Ya (Kode:1)	No (Kode:0)	Lanjut ke anggota keluarga lainnya	Tidak tahu (Kode:7)	Lanjut ke anggota keluarga lainnya	Menolak menjawab (Kode:8)	Lanjut ke anggota keluarga lainnya	Tidak dapat diterapkan (Kode:9)	Lanjut ke anggota keluarga lainnya
Anggota pertama									
Anggota kedua									
Anggota ketiga									
Anggota keempat									
Anggota kelima									
Anggota keenam									
Anggota ketujuh									
Anggota kedelapan									

Q71. Untuk pertanyaan berikut ini, berikan perkiraan terbaik terhadap jumlah total tambahan pengeluaran dari tambahan hari untuk merawat Anda yang belum termasuk yang disebutkan pada pertanyaan sebelumnya? [Jumlah hari yang dilaporkan pada Q68]

Jika tidak ada pengeluaran, tuliskan "0,00".

Anggota keluarga	Amount, IDR	Tidak tahu (7)	Menolak menjawab (8)	Tidak dapat diterapkan (9)
Anggota pertama				
Anggota kedua				
Anggota ketiga				
Anggota keempat				
Anggota kelima				
Anggota keenam				
Anggota ketujuh				
Anggota kedelapan				

Cek Q56, jika jawabannya lebih dari 1, maka ulangi Q57-71 untuk semua anggota keluarga terdaftar. Jika Q56 sama dengan 1, maka bacakan kalimat berikut untuk mengakhiri wawancara.

BACAKAN: Terima kasih atas partisipasi Anda! Jika ada pertanyaan lebih lanjut terkait wawancara atau hasil penelitian ini, Anda dapat menghubungi saya, dr. Nandyan N. Wilastonegoro, MScIH di nomor 0813-2884-3888 atau 0274-5306089 di Fakultas Kedokteran, Kesehatan Masyarakat dan Keperawatan, Universitas Gadjah Mada (FKKM UGM).

Supplementary Information

Cost of dengue illness in Indonesia across hospital, ambulatory and non-medical settings

S3: Questionnaire S3. Pediatric questionnaire (patients under age 18) in English

Child confirmed Dengue Patient Questionnaire (Age ≤ 17)

Name of child patient _____
 Patient study ID _____
 Name of the interviewee (proxy) _____
 Date of interview _____

Interviewer

Q0. *The name of the site the patient was recruited from. (Choose one)*

- | | |
|---|--|
| 1 | Hospital _____ |
| 2 | Health Center _____ |
| 3 | Outside professional health system
through (name of community health
worker) _____ |

Q00. *Interviewee*

- | | |
|---|---------------------|
| 1 | Patient him/herself |
| 2 | Patient's proxy |

READ: Now we are going to talk about [Child's name] illness period. I will give you a calendar that will help you answer the following questions.

Show calendar flashcard (form 1) to the proxy for the following questions and continue to use through Q39. Write "today" in the box for today's date.

- Q1. When did [Child's name] start feeling ill? _____ dd/mm/yyyy
Write "Illness started" on that date in the calendar.
 01/01/2097 Don't Know
 01/01/2098 Refuse to Answer
- Q2. Did [Child name] have fever during this illness episode that started in [date in Q1]?
 1 Yes
 0 No **Skip to Q6**
 8 Refuse to Answer **Skip to Q6**
- Q3. When did [Child's name]'s fever start? _____ dd/mm/yyyy
Write "fever started" on that date in the calendar,
 01/01/2097 Don't Know
 01/01/2098 Refuse to Answer
- Q4. Did [Child's name]'s fever end?
 1 Yes
 0 No **Skip to Q6**
 8 Refuse to Answer **Skip to Q6**
- Q5. When did [Child's name]'s fever end?
Write "fever ended" on that date in the calendar, _____ dd/mm/yyyy
 01/01/2097 Don't Know
 01/01/2098 Refuse to Answer
- Q6. What other symptoms did [Child name] have?
 1 Myalgia
 2 Nausea
 3 Headache

Q6a Other Symptoms _____

Q7. Over [Child's name]'s entire illness, on which day did [Child's name] feel worst?

Write "worst day" on that date in the calendar,

____/____/____

dd/mm/yyyy

01/01/2097

Don't Know

01/01/2098

Refuse to Answer

Q8. At the time of this interview, is [Child's name] still feeling ill?

1 Yes

0 No

Skip to Q11

Q9. Have [Child's name] recovered completely from this illness period?

1 Yes

0 No

Skip to Q11

8 Refused to Answer

Skip to Q11

Q10. When did [Child's name] fully recover from the illness episode?

Write "recovered completely" on that date in the calendar,

____/____/____

dd/mm/yyyy

01/01/2097

Don't Know

01/01/2098

Refuse to Answer

Q11. How soon after [Child's name] started to feel ill did he/she first receive care by a medical care provider? (Choose one)

1 Within 24 hours

2 Between 24 and 48 hours

3 After 48 hours

7 Don't Know

8 Refused to Answer

Care received by child from the day he/she started feeling ill until today

NOTE to interviewer: if you have forms from hospital please fill Q12 and 13 from the hospital form

Q12. Is the hospital where the patient was admitted a public, social-private, or private?

- | | |
|---|------------------|
| 1 | Public |
| 2 | Social-private |
| 3 | Private |
| 7 | Don't Know |
| 8 | Refuse to Answer |

Q13. Indicate the type of hospital in which you spent the most number of nights?

- | | |
|---|---|
| 1 | University, tertiary or referral hospital |
| 2 | Other hospital |
| 7 | Don't Know |
| 8 | Refuse to Answer |

Hospitalization

Q14. Were [child name] hospitalized during this interview period?

- | | |
|---|-------------------|
| 1 | Yes |
| 0 | No |
| 8 | Refused to answer |
- Skip to instruction before Q26***
- Skip to instruction before Q26***

Q14a. When were [child's name] admitted to the hospital

Write "admission" on that date in the calendar,

____/____/____
01/01/2097
01/01/2098

dd/mm/yyyy
Don't Know
Refuse to Answer

Q14b. During this hospitalization, for how many nights did [child name] stay in the hospital?

_____. _____.
98

Refuse to Answer

Q14c. When were [child's name] discharged the hospital

Write "discharged" on that date in the calendar,

____/____/____
01/01/2097
01/01/2098

dd/mm/yyyy
Don't Know
Refuse to Answer

READ: Now I would like to ask you some questions on the duration of [child name's] hospitalization, the out-of-pocket payments you made for treatment and other spending related to this hospitalization.

Q15. Can you please tell me which type of hospital ward/class did [child's name] stay at for the majority of his/her hospital stay?

- | | |
|---|---------|
| 1 | VIP |
| 2 | Class 1 |
| 3 | Class 2 |
| 4 | Class 3 |

Q16. During [child name] hospitalization, did [child name] stay any night in an intensive care unit?

1 Yes

0 No **Skip to instruction before Q18**

8 Refuse to Answer **Skip to instruction before Q18**

Q17. For how many nights did [child name] stay in the intensive care unit? (if patient stayed in the intensive care unit for one night or less then mark "1".

— — . — —
98 Refuse to Answer

READ: Now I will ask about the out-of-pocket payments [child name]'s family made in this facility.

The household out-of-pocket payments are the total amounts paid by you or your family for your treatment, whether or not you received reimbursement for all or part of this paid amount during this interview period.

Q18. Please report your best estimate of the total out-of-pocket payment that your household have paid up to today for services delivered in during [child name] hospitalization? (Round all items to the nearest IDR). If there were no payments, please enter "0".

Please include both payments already made and those that are expected to be made for the services received.

— — — — —
7 Don't Know **Skip to instruction before Q23**

8 Refuse to Answer **Skip to instruction before Q23**

Q19. Can you break down these payments by type of service received during [child name] stay in the hospital?

1 Yes

0 No **Skip to instruction before Q23**

7 Don't Know **Skip to instruction before Q23**

8 Refuse to Answer **Skip to instruction before Q23**

Q20. How much did your household pay out-of-pocket for consultation, admission and discharge fees?

If no spending put "0".

— — — — —
7 Don't Know
8 Refuse to Answer
9 Not Applicable

Q21. How much did your household pay out-of-pocket for diagnostic tests such as blood tests, dengue test, x-rays or sonogram?

If no spending put "0".

— — — — —
7 Don't Know
8 Refuse to Answer
9 Not Applicable

Q22. How much did your household pay out-of-pocket on all treatment such as medications, intravenous fluid (IVF), medical equipment (I/V sets) or blood bank.

If no spending put "0"

— — — — —
7 Don't Know
8 Refuse to Answer
9 Not Applicable

READ: Now I would like to ask you questions about other spending related to your illness during this interview period from the day you started feeling ill [Response to Q1] until today, such as spending on transportation, meals or lodging. Include also any expenses by any other household member (person you live with), other family members or friend who accompanied you to the hospital for care.

Q23a. Can you please tell me the type of transportation [child's name] used to go to the hospital?

Note to interviewer: if transportation used was a car, ask about the distance from the patient's house to the hospital. If the patient doesn't know the answer then use google map to determine the distance.

Q23b. Please report your best estimate of your household out of pocket spending on transportation to the hospital, including ambulance.

If no spending put "0".

If family or owned vehicle, estimate mileage traveled (two ways travel) and use IDR 16,000 per Km as a proxy for the cost of driving. If family or patient owned Auto-rickshaw/own scooter use IDR 14,000 per Km. If no spending record "0.00".

-----	7	Don't Know
-----	8	Refuse to Answer
-----	9	Not Applicable

Q23c. Can you please tell me the type of transportation [child's name] used to get back from the hospital?

Note to interviewer: if transportation used was a car, ask about the distance from hospital to patient's house.

Q23d. Please report your best estimate of your household out of pocket spending on transportation from the hospital, including ambulance.

If no spending put "0".

If family or owned vehicle, estimate mileage traveled (two ways travel) and use IDR 16,000 per Km as a proxy for the cost of driving. If family or patient owned Auto-rickshaw/own scooter use IDR 14,000 per Km. If no spending record "0.00".

7	Don't Know
8	Refuse to Answer
9	Not Applicable

Q24. Please report best estimate of your household out-of-pocket spending on food or meals.

If no spending put "0"

7	Don't Know
8	Refuse to Answer
9	Not Applicable

Q25. Please report best estimate of your household out-of-pocket spending on lodging in a non-health facility such as a hotel.

If no spending put "0"

7	Don't Know
8	Refuse to Answer
9	Not Applicable

Ambulatory care

READ: These next questions are about any ambulatory health care sought or received since [child name] started feeling ill on [Response to Q1] until today. Please, **include** care from all types of health facilities such as pharmacy, traditional healer, private clinic, Puskesma primary health center, midwife, hospital outpatient department and/or emergency room, and private lab.

Q26. Did [child name] visit any ambulatory health facility during his/her latest dengue episode? (Show flash card Form 1).

1	Yes	
0	No	Go to Q40
8	Refuse to Answer	Go to Q40

READ: Think about each time [child name] had contacted with one of those health facilities during the dengue episode that started in [date in Q1]. Then specify the type of care [child name] received at each of the health facilities he/she visited (consultations, diagnostic tests and/or treatment) and try to remember the amounts your household, other family members or friends paid out of pocket in total or for each type of service received.

Q27. How many visits did [child name] had to any of the following health facilities during this interview period? **Show flashcard forms 1 (calendar) and 2 (List of healthcare providers)**

Visit	Number of visits
Pharmacy (01)	
Traditional healer (02)	
Private clinic (03)	

Puskesmas Primary health center (04)	
Midwife (05)	
Outpatient department in a hospital (06)	
Emergency room (07)	
Private lab (08)	
Satellite health center (09)	
Other (10)	
Specify others _____	

Q28. Choose from the following the first (*second, third,..*) type of health facility [child name] contracted during this interview period. Can you give the date of each visit? (*Show flashcard form 2 and form 1 (the calendar)*) (Choose one for each visit)

Visit	First	Second	Third	Fourth	Fifth	Sixth
Date						
Type of facility						
Pharmacy (01)						
Traditional healer (02)						
Private clinic (03)						
Puskesmas Primary health center (04)						
Midwife (05)						
Outpatient department in a hospital (06)						
Emergency room (07)						
Private lab (08)						
Satellite health center (09)						
Other (10), Specify _____						
Don't know (97)						
Refuse to answer (98)						

Read: What is the name of the facility [child name] went to? (Fill in the space next to type of facility the patient chose)

Note for interviewer: A “Public” Facility is a health facility operated by any level of government, and a “social-private” facility is organization run by private non-profit organization, Private is an individual doctor or group of private doctors.

Q29. What type of facility did [child name] visit, during his/her X visit? Was it public or non-public facility? (Choose one per visit)

Visit	Public (1)	Social-private (2)	Private (3)	Don't know (7)	Refuse to answer (8)
First					
Second					
Third					
Fourth					
Fifth					
Sixth					

Q30. What kind of service did [child name] receive in this facility during his/her X visit? (Check all that apply)

Visit	Consultations	Diagnostic test such as x-ray, blood test	Treatment such as medications, intravenous fluid	Referral	Don't know (7)	Refuse to answer (8)
First						

Second						
Third						
Fourth						
Fifth						
Sixth						

READ: Now I would like to ask you about the out-of-pocket payments your household, other family members or friend made in this facility.

Note for interviewer: Whenever possible, cross check the amount with bills available from the health facility.

Q31. Please report your best estimate of the total out-of-pocket payment for services received in this facility? Please include both payments already made and those that are expected to be made for the services received.
If there were no payments, please enter "0.00".

Visit	Amount, IDR	If zero skip to instruction before Q36a	Don't know (7)	Skip to instruction before Q36a	Refuse of answer (8)	Skip to instruction before Q36a
First						
Second						
Third						
Fourth						
Fifth						
Sixth						

Q32. Can you break down the total payments by type of service received?

Visit	Yes (1)	No (0)	Skip to instruction before Q36a	Refuse to answer (8)	Skip to instruction before Q36a	Not applicable (9)	Skip to instruction before Q36a
First							
Second							
Third							
Fourth							
Fifth							
Sixth							

Q33. Out-of-pocket payment on: Consultation. (If no payment record "0.00")

Visit	Amount, IDR	Don't know (7)	Refuse to answer (8)	Not applicable (9)
First				
Second				
Third				
Fourth				
Fifth				
Sixth				

Q34. Out-of-pocket payment on: diagnostic tests or blood bank such as blood test, dengue test, x-rays, sonogram...

If no payment record "0.00".

Visit	Amount, IDR	Don't know (7)	Refuse to answer (8)	Not applicable (9)
First				
Second				
Third				
Fourth				
Fifth				

Sixth				
-------	--	--	--	--

Q35. Out-of-pocket payment on: treatment such as medications, medical equipment (intravenous sets).

If no payment record "0.00".

Visit	Amount, IDR	Don't know (7)	Refuse to answer (8)	Not applicable (9)
First				
Second				
Third				
Fourth				
Fifth				
Sixth				

READ: Now I would like to ask you questions about other spending your household, other family members or friend, made specific for this facility during this illness episode such as spending on transportation, meals and lodging. Include also any expenses by any other household member who accompanied you to this first (*second, third, ...*) facility for care.

Q36a. Can you please tell me the type of transportation [child's name] used to go to the [TYPE of health facility]?

Note to interviewer: if transportation used was a car, ask about the distance from the patient's house to the [health facility].

Visit	Transportation type	Distance, KM
First		
Second		
Third		
Fourth		
Fifth		
Sixth		

Q36b. Please report the best estimate of out-of-pocket spending on transportation to the [Type of health facility]

If family or owned vehicle, estimate mileage traveled (two ways travel) and use IDR 16,000 per Km as a proxy for the cost of driving. If family or patient owned Auto-rickshaw/own scooter use IDR 14,000 per Km. If no spending record "0.00".

Visit	Amount, IDR	Don't know (7)	Refuse to answer (8)	Not applicable (9)
First				
Second				
Third				
Fourth				
Fifth				
Sixth				

Q36c. Can you please tell me the type of transportation [child's name] used to get back home from the [TYPE of health facility]?

Note to interviewer: if transportation used was a car, ask about the distance from [health facility] to patient's house.

Visit	Transportation type	Distance, KM
First		
Second		
Third		
Fourth		
Fifth		

Sixth		
-------	--	--

Q36d. Please report the best estimate of out-of-pocket spending on transportation from the [Type health facility].

If family or owned vehicle, estimate mileage traveled (two ways travel) and use IDR 16,000 per Km as a proxy for the cost of driving. If family or patient owned Auto-rickshaw/own scooter use IDR 14,000 per Km. If no spending record "0.00".

Visit	Amount, IDR	Don't know (7)	Refuse to answer (8)	Not applicable (9)
First				
Second				
Third				
Fourth				
Fifth				
Sixth				

Q37. Please report the best estimate of out-of-pocket spending on food or meals.

If not spending report "0.00"

Visit	Amount, IDR	Don't know (7)	Refuse to answer (8)	Not applicable (9)
First				
Second				
Third				
Fourth				
Fifth				
Sixth				

Q38. Please report the best estimate of out-of-pocket spending on lodging in a non-health facility such as a hotel.

If not spending report "0.00"

Visit	Amount, IDR	Don't know (7)	Refuse to answer (8)	Not applicable (9)
First				
Second				
Third				
Fourth				
Fifth				
Sixth				

Q39. Any other health facilities visited during this illness period from the day you stated feeling ill [Response to Q1] until today?

1 Yes ***Repeat the process starting with Q28 through Q39***
 0 No

Illness impact on household members, other family members who reside outside your household or friends during this illness episode

READ: I would like to learn about how [Child's name]'s illness affected you and each of the members of your household, other family members who reside outside your household or friends. Household members are people who live with [Child's name]. A household member was affected if he or she spent more time or money than usual caring for the child or lost work, income, or school due to his/her illness.

READ: Let us talk about [Child's name] first.

The Child

- | | | | |
|-------|---|----------------|---------------------------------------|
| Q40. | What is the sex of [Child's name]? | 1 | Male |
| | | 2 | Female |
| Q41. | How old (in years) was your child at his/her last birthday? | 999 | Don't Know |
| | | 998 | Refuse to answer |
| Q41a. | What is [Child's name] date of birth (day/month and year)? | ____/____/____ | dd/mm/yyyy |
| | | 01/01/2097 | Don't Know |
| | | 01/01/2098 | Refuse to Answer |
| Q42. | What is the highest level of education you have completed? (Choose one)
<i>Show Flashcard-Form 3</i> | 01 | Illiterate |
| | | 02 | Just literate but no schooling |
| | | 03 | Attended school for at least one year |
| | | 04 | Pre-school |
| | | 05 | Primary school |
| | | 06 | Middle school |
| | | 07 | High school |
| | | 08 | Diploma |
| | | 09 | Graduate |
| | | 10 | Post graduate (Masters, PhD) |
| | | 11 | Professional degree |
| | | 97 | Don't know |
| | | 98 | Refuse to answer |
| | | 99 | Not applicable |
| Q43. | Is [Child's name] currently studying? | 1 | Yes |
| | | 0 | No |
| | | 8 | Refused to answer |
| | | | Skip to Q46 |
| | | | Skip to Q46 |
| Q44. | Has [Child's name] lost any days of school due to his/her illness? | 1 | Yes |
| | | 0 | No |
| | | 8 | Refused to answer |
| | | | Skip to Q46 |
| | | | Skip to Q46 |
| Q45. | How many days of school did [Child's name] miss due to his/her illness?
Put "0" if none | ____ | |
| | | 97 | Don't know |
| | | 98 | Refuse to answer |
| | | 99 | Not applicable |
| Q46. | Is [Child's name] working for pay? | 1 | Yes |
| | | 0 | No |
| | | 8 | Refused to answer |
| | | | Skip to Q52 |
| | | | Skip to Q52 |

Q47. Have [Child's name] lost any days of work or income due to his/her illness?
If the patient did not lose any days of work please confirm that he/she did not lose any income.

1	Yes	
0	No	Skip to Q52
7	Don't know	Skip to Q52
8	Refused to answer	Skip to Q52

Q48. How many days of work did [Child's name] lose due to his/her illness?
Put "0" if none

97	Don't know
98	Refuse to answer
99	Not applicable

Q49. What was the amount of income lost? (Please give your best estimate)

7	Don't know
8	Refused to answer
9	Not applicable

Q50. Did [Child's name] receive any paid sick leave for work days off, in which his/her employer or some agency paid his/her salary while he/she was ill?

1	Yes	
0	No	Skip to Q52
7	Don't know	Skip to Q52
8	Refused to answer	Skip to Q52
9	Not applicable	Skip to Q52

Q51. How many paid sick days did [Child's name] receive for this illness?
Put "0" if none

97	Don't know
98	Refuse to answer
99	Not applicable

Q52. Did you receive any monetary or non- monetary assistance from family members or the community for this illness episode?

1	Yes	
0	No	Skip to Q55
8	Refused to answer	Skip to Q55

Q53. What is your best estimate of the value of the non- monetary assistance?

True 0 if no non-financial assistance.

Put "0" if none

97	Don't know
98	Refuse to answer
99	Not applicable

Note to interviewer: If don't know, write the type of non-monetary assistance received by patient and patient's family

Q54. What is the total amount in IDR of the monetary assistance?

Put "0" if none

97	Don't know
98	Refuse to answer
99	Not applicable

Number of household members

Q55. How many members live in [Child's name]'s household? (other then you and [Child's name])?

98	Refuse to answer
----	------------------

Q56. How many of these household members have been affected by [Child's name]'s illness directly during this illness episode?

READ: A household member is affected if he or she spent more time or money than usual caring for the child or lost work, income, or school due to his/her illness.

00	Zero
98	Refuse to answer

READ: Now I would like to ask you some questions about you and this/these [Response to Q63] member/s of [Child's name]'s HOUSEHOLD who have been affected by his/her illness.

Care-givers

READ: first I would like to get some information about you.

Q57. What was your age at your last birthday?

998	Refuse to answer
-----	------------------

Q58. What is the sex of the proxy? (It is not necessary to ask this question aloud)

0	Male
1	Female

Q59. What is the highest level of education you have completed? (Choose one)

Show Flashcard-Form 3

01	Illiterate
02	Just literate but no schooling
03	Attended school for at least one year
04	Pre-school
05	Primary school
06	Middle school
07	High school
08	Diploma
09	Graduate
10	Post graduate (Masters, PhD)
11	Professional degree
97	Don't know
98	Refuse to answer
99	Not applicable

Q60. Are you attending school and studying now?

1	Yes	
0	No	<i>Skip to Q63</i>
8	Refuse to answer	<i>Skip to Q63</i>

Q61. Have you lost any days of school due to [Child's name]'s illness?

1	Yes	
0	No	<i>Skip to Q63</i>
8	Refuse to answer	<i>Skip to Q63</i>

Q62. How many days of school did you miss due to [Child's name]'s illness?

Put "0" if none

97	Don't know
98	Refuse to answer

Q63. Are you working for pay?

1	Yes	
0	No	<i>Skip to Q69</i>
8	Refuse to answer	<i>Skip to Q69</i>

Q64. Did you lose any days of work due to [Child's name]'s illness?

1	Yes	
0	No	<i>Skip to Q68a</i>
8	Refuse to answer	<i>Skip to Q68a</i>

Q65. How many days of work did you lose due to [Child's name]'s illness?

97	Don't know
98	Refuse to answer
99	Not Applicable

Q66. Did you receive any paid sick leave for work days off, in which your employer or some agency paid your salary while taking care of [Child's name] during his/her illness?

1	Yes	
0	No	<i>Skip to Q68a</i>
7	Don't know	<i>Skip to Q68a</i>
8	Refused to answer	<i>Skip to Q68a</i>
9	Not applicable	<i>Skip to Q68a</i>

Q67. How many paid sick days did you receive for this illness?

Put "0" if none

97	Don't know
98	Refuse to answer
99	Not applicable

Q68a. Did you lose any income due to [Child's name]'s illness?

1	Yes	
0	No	<i>Skip to Q69</i>
8	Refuse to answer	<i>Skip to Q69</i>

Q68b. What was the amount of income you lost? (Please give your best estimate)

7	Don't know
8	Refused to answer
9	Not applicable

Q69. Of the number of sick days during this interview period, what was the total number of days of additional care that you provided to [Child's name]?

00	Zero	Skip to Q71
97	Don't know	Skip to Q71
98	Refuse to answer	Skip to Q71
99	Not applicable	Skip to Q71

READ: In the questions below, think about the daily number of additional hours of care that [Child's name] have received from you during his/her illness. Additional hours refer to any number of hours above those that you usually spend with [Child's name]. In estimating the time, please include time spent at home, at the health facility and during transportation to and from the health facility

Q70. During these [Response to Q69] days, on average what was the total daily number of additional hours you spent caring for [Child's name]?

If none, enter "0"

97	Don't know
98	Refuse to answer
99	Not applicable

Q71. Did you have additional spending because of [Child's name]'s illness such as transportation, meals and lodging other than the expenses previously mentioned for visiting health providers

1	Yes
0	No
7	Don't know
8	Refuse to answer

Skip to instruction before Q73
Skip to instruction before Q73
Skip to instruction before Q73

Q72. For this question please report the best estimate of the total amount of additional spending over these [Response to Q69] days not already included in one of the previous questions

If no payment record "0.00"

IDR	_____
7	Don't know
8	Refuse to answer

If Q56 is equal to 1 then end interview

Read: Think about the second (third, fourth...) household member who has been affected by [Child's name]'s illness during this interview period

Q73. What is the relationship of this (second, third,...) affected household member to [Child's name]? (Choose one)

Show flashcard form 4

Relationship	Household member						
	Second member	Third member	Fourth member	Fifth member	Sixth member	Seventh member	Eighth member
Mother (01)							
Father (02)							
Husband (03)							

Wife (04)							
Housemate (05)							
Sister (06)							
Brother (07)							
Son (08)							
Daughter (09)							
Grandmother (10)							
Grandfather (11)							
Uncle (12)							
Aunt (13)							
House help (14)							
Baby sitter (15)							
Other (16) Specify _____							
Refuse to answer (98)							

Q74. What is [Household member]'s age?

Household member	Age in years	Don't know (997)	Refuse to answer (998)
Second member			
Third member			
Fourth member			
Fifth member			
Sixth member			
Seventh member			
Eighth member			

Q75. What was the highest level of education that [household member] completed? (Choose one)

Show flashcard-form 3

Relationship	Household member					
	Second member	Third member	Fourth member	Fifth member	Seventh member	Eighth member
Illiterate (01)						
Just literal but no schooling (02)						
Attended school for at least one year (03)						
Pre-school (04)						
Primary school (05)						
Middle school (06)						
High school (07)						
Diploma (08)						
Graduate (09)						
Post graduate (Masters, PhD) (10)						
Professional degree (11)						
Don't know (97)						
Refuse to answer (98)						
Not applicable (99)						

Q76. Is [Household member] currently studying?

Household member	Yes (Code:1)	No (Code:2)	Skip to Q79	Don't know (Code:7)	Skip to Q79	Refuse to answer (Code:8)	Skip to Q79
Second member							

Third member								
Fourth member								
Fifth member								
Sixth member								
Seventh member								
Eighth member								

Q77. Has [Household member] lost any days of school due to [Child's name]'s illness?

Household member	Yes (Code:1)	No (Code:2)	<i>Skip to Q79</i>	Don't know (Code:7)	<i>Skip to Q79</i>	Refuse to answer (Code:8)	<i>Skip to Q79</i>
Second member							
Third member							
Fourth member							
Fifth member							
Sixth member							
Seventh member							
Eighth member							

Q78. How many days of school did [household member] missed due to [Child's name]'s illness?

Record "0" if none

Household member	Days of schooling lost	Don't know (97)	Refuse to answer (98)
Second member			
Third member			
Fourth member			
Fifth member			
Sixth member			
Seventh member			
Eighth member			

Q79. Is [Household member] working for pay?

Household member	Yes (Code:1)	No (Code:0)	<i>Skip to Q84a</i>	Don't know (Code:7)	<i>Skip to Q84a</i>	Refuse to answer (Code:8)	<i>Skip to Q84a</i>
Second member							
Third member							
Fourth member							
Fifth member							
Sixth member							
Seventh member							
Eighth member							

Q80. Has [Household member] lost any days of work due to [Child's name] illness?

Household member	Yes (Code:1)	No (Code:0)	<i>Skip to Q84a</i>	Don't know (Code:7)	<i>Skip to Q84a</i>	Refuse to answer (Code:8)	<i>Skip to Q84a</i>
Second member							
Third member							
Fourth member							
Fifth member							
Sixth member							
Seventh member							

Eighth member							
---------------	--	--	--	--	--	--	--

Q81. How many days of work did [Household member] lose due to [Child's name] illness?

Record "0" if none

Household member	Number of days	Don't know (Code:97)	Refuse to answer (Code:98)	Not applicable (Code:99)	
Second member					
Third member					
Fourth member					
Fifth member					
Sixth member					
Seventh member					
Eighth member					

Q82. Did [household member] receive any paid sick leave for work days off, in which the employer or some agency paid his/her salary for caring for [Child's name] while you were ill?

Household member	Yes (Code: 1)	If Zero skip to Q84a	Don't know (Code:7)	Skip to Q84a	Refused to answer (Code:8)	Skip to Q84a	Not Applicable (Code:9)	Skip to Q84a
Second member								
Third member								
Fourth member								
Fifth member								
Sixth member								
Seventh member								
Eighth member								
Ninth member								

Q83. How many paid sick days did [household member] receive?

Household member	Number of paid sick days	Don't know (97)	Refuse to answer (98)
Second member			
Third member			
Fourth member			
Fifth member			
Sixth member			
Seventh member			
Eighth member			

Q84a. Has [Household member] lost any income due to [Child's name] illness?

Household member	Yes (Code:1)	No (Code: 0)	Skip to Q85	Don't know (Code:7)	Skip to Q85	Refuse to answer (Code:8)	Skip to Q85
Second member							
Third member							
Fourth member							
Fifth member							
Sixth member							
Seventh member							
Eighth member							

Q84b. What was the amount of income [household member] lost? (Please give your best estimate).

If no payment record "0.00".

Household member	Amount, IDR	Don't know (7)	Refuse to answer (8)	Not applicable (9)
Second member				
Third member				
Fourth member				
Fifth member				
Sixth member				
Seventh member				
Eighth member				
Ninth member				

Q85. Of the number of sick days during this illness episode that started on [date of illness till patient date of recovery or date of interview], what was the total number of days of additional care that [household member] provided [Child's name]?

Household member	Number of days	If Zero skip to Q87	Don't know (Code:97)	Skip to Q87	Refused to answer (Code:98)	Skip to Q87	Not Applicable (Code:99)	Skip to Q87
Second member								
Third member								
Fourth member								
Fifth member								
Sixth member								
Seventh member								
Eighth member								

READ: In the questions below, think about the daily number of additional hours of care that [Child's name] has received from [household member x] during his/her illness. Additional hours refer to any number of hours above those that [household member x] usually spends with [Child's name]. In estimating the time, please include time spent at home, at the health facility and during transportation to and from the health facility

Q86. During these [Response to Q90] days, on average what was the total daily number of additional hours [household member x] spent caring for [Child's name]?

If none, enter "0"

Household member	Average additional hours of daily care	Don't know (Code: 97)	Refuse to answer (Code: 98)	Not applicable (Code: 99)
Second member				
Third member				
Fourth member				
Fifth member				
Sixth member				
Seventh member				
Eighth member				

Q87. Did [household member x] have additional spending because of [Child's name]'s illness such as transportation, meals and lodging other than the expenses previously mentioned for visiting health providers?

Household member	Yes (Code:1)	No (Code: 0)	Skip to next household member	Don't know (Code:7)	Skip to next household member	Refused to answer (Code:8)	Skip to next household member	Not Applicable (Code:9)	Skip to next household member

Second member									
Third member									
Fourth member									
Fifth member									
Sixth member									
Seventh member									
Eighth member									

Q88. For this question please report the best estimate of the total amount of additional spending over these [Response to Q85] days not already included in one of the previous questions
If no payment record "0.00"

Household member	Amount, IDR	Don't know (7)	Refuse to answer (8)	Not applicable (9)
Second member				
Third member				
Fourth member				
Fifth member				
Sixth member				
Seventh member				
Eighth member				

Check 56, if the answer is more than 1 then do repeat Qs 73 through 88 for all the household members listed. If Q56 is equal to 2, then read the sentence below and end interview

READ: Thank you so much for your participation! If you have any questions regarding this interview or the results of this study please contact xxx at [Name of institute] from xx at xxx

Supplementary Information

Cost of dengue illness in Indonesia across hospital, ambulatory and non-medical settings

S4: Questionnaire S4. Pediatric questionnaire (patients under age 18) in Bahasa Indonesia

Kuesioner untuk Pasien Dengue Anak Terkonfirmasi (Usia ≤ 17)

Nama Pasien _____
Nomor Sampel _____
Nama orang tua/yang diwawancara _____
Tanggal Wawancara _____

Wawancara

Q0. *Nama fasilitas kesehatan tempat pasien dirawat. (Pilih salah satu)*

- 1 Rumah sakit _____
2 Puskesmas _____

Q00. *Yang diwawancara*

- 1 Pasien
2 Wali pasien

BACAKAN: Sekarang kita akan berbicara mengenai periode penyakit [Nama anak]. Dan saya akan menunjukkan kalender yang akan membantu Anda menjawab pertanyaan berikut.

Tunjukkan kalender (form 1) ke wali dan lanjutkan hingga Q39. Tuliskan "hari ini" pada kotak untuk tanggal hari ini.

Q1. Kapan [Nama anak] mulai sakit?

Tuliskan "mulai demam" pada tanggal di kalender.

____/____ dd/mm/yyyy
01/01/2097 Tidak tahu
01/01/2098 Menolak menjawab

Q2. Apakah [Nama anak] saat mengalami demam? [Respons terhadap Q1]

- 1 Ya
0 Tidak **Lanjut ke Q6**
8 Menolak menjawab **Lanjut ke Q6**

Q3 Kapan [nama anak] mulai demam?

Tuliskan "mulai demam" pada tanggal di kalender

____/____ dd/mm/yyyy
01/01/2097 Tidak tahu
01/01/2098 Menolak menjawab

Q4 Apakah demam [Nama anak] saat ini telah berakhir?

- 1 Ya
0 No **Lanjut ke Q6**
8 Menolak menjawab **Lanjut ke Q6**

Q5 Kapan demam [nama anak] berakhir?

Tuliskan "demam berakhir" pada tanggal di kalender

____/____ dd/mm/yyyy
01/01/2097 Tidak tahu
01/01/2098 Menolak menjawab

Q6. Gejala apa yang [nama anak] rasakan?

- 1 Nyeri otot
2 Mual
3 Sakit kepala
4 Lainnya

Q6a Gejala lainnya _____

- Q7. Pada keseluruhan periode sakit, kapan [nama anak] merasa itu terburuk?
Tuliskan "hari terburuk" pada tanggal, _____ dd/mm/yyyy
 _____/_____
 01/01/2097 Tidak tahu
 01/01/2098 Menolak menjawab
- Q8. Pada saat interview ini, apakah [nama anak] masih merasa sakit? 1 Ya **Lanjut ke Q11**
 0 Tidak
- Q9. Apakah [nama anak] sudah pulih sepenuhnya dari episode sakit ini? 1 Ya
 0 No **Lanjut ke Q11**
 8 Menolak menjawab **Lanjut ke Q11**
- Q10. Kapan [nama anak] merasa pulih sepenuhnya pada episode sakit ini?
Tuliskan "pulih sepenuhnya" pada tanggal di kalender, _____ dd/mm/yyyy
 _____/_____
 01/01/2097 Tidak tahu
 01/01/2098 Menolak menjawab
- Q11. Berapa lama sejak [nama anak] merasa sakit hingga memutuskan pergi untuk mendapat layanan kesehatan? (Pilih salah satu)
 1 Dalam 24 jam
 2 Antara 24 and 48 jam
 3 Setelah 48 jam
 7 Tidak tahu
 8 Menolak menjawab

Perawatan yang diterima pasien dari hari merasa sakit hingga saat ini

Jika punya form KDRS, Mohon mengisi Q12 dan 13 dari form Rumah Sakit

Q12. Apakah rumah sakit tempat [nama anak] dirawat adalah milik pemerintah, swasta-sosial atau swasta?

- | | |
|---|------------------|
| 1 | Milik pemerintah |
| 2 | Swasta - sosial |
| 3 | Swasta |
| 7 | Tidak tahu |
| 8 | Menolak menjawab |

Q13. Indikasikan tipe rumah sakit tempat [nama anak] yang paling lama menjalani perawatan rawat inap?

- | | |
|---|---|
| 1 | Universitas, rumah sakit rujukan atau tersier |
| 2 | Rumah sakit lain |
| 7 | Tidak tahu |
| 8 | Menolak menjawab |

Rawat Inap

BACAKAN: Pada pertanyaan selanjutnya saya hendak mencari tahu apakah [nama anak] menghabiskan waktu 1 atau lebih hari di rumah sakit.

Q14. Apakah [nama anak] dirawat inap selama episode sakit tersebut?

- | | | |
|---|------------------|---|
| 1 | Ya | |
| 0 | Tidak | <i>Lanjut bacakan instruksi sebelum Q26</i> |
| 8 | Menolak menjawab | <i>Lanjut bacakan instruksi sebelum Q26</i> |

Q14a. Kapan [nama anak] mulai dirawat rumah sakit?

Tuliskan "masuk" pada tanggal di kalender ____/____/____ dd/mm/yy
 01/01/2097 Tidak tahu
 01/01/2098 Menolak menjawab

Q14b. Selama masa rawat inap, berapa malam [nama anak] menghabiskan waktu di rumah sakit?

 _____. _____. _____ 98 Menolak menjawab

Q14c. Kapan [nama anak] keluar dari rumah sakit?

Tuliskan "keluar" pada tanggal di kalender ____/____/____ dd/mm/yy
 01/01/2097 Tidak tahu
 01/01/2098 Menolak menjawab

BACAKAN: Sekarang saya akan menanyakan beberapa pertanyaan terkait durasi rawat inap [nama anak], pengeluaran [nama anak] selama perawatan dan pengeluaran lain terkait rawat inap tersebut.

Q15. Dapatkankah Anda memberi tahu saya kelas bangsal rawatan Anda selama di rumah sakit?

1. VIP
2. Kelas 1
3. Kelas 2
4. Kelas 3

Q16. Selama masa rawat inap, apakah [nama anak] sempat dirawat di intensive care unit (ICU)?

1 Ya

0 Tidak

Lanjut bacakan instruksi sebelum Q18

8 Menolak menjawab

Lanjut bacakan instruksi sebelum Q18

Q17. Berapa hari [nama anak] dirawat di ICU? (jika pasien dirawat di ICU selama 1 hari atau kurang, tuliskan 1)

— — · — —
98 Menolak menjawab

BACAKAN: Sekarang saya akan menanyakan mengenai pengeluaran mandiri yang [nama anak] bayar ke fasilitas kesehatan. Pengeluaran mandiri adalah jumlah uang yang [nama anak] atau keluarga [nama anak] bayarkan untuk biaya perawatan [nama anak], baik itu [nama anak] menerima penggantian atau tidak dari jumlah tersebut selama episode sakit [nama anak].

Q18. Berapa estimasi pengeluaran mandiri [nama anak] untuk perawatan yang [nama anak] terima selama rawat inap? (Dapat dibulatkan). Jika tidak ada pengeluaran, masukkan "0".

Mohon dimasukkan baik pengeluaran yang telah dibayarkan dan pengeluaran yang akan terjadi

— — — — —
7 Tidak tahu **Lanjut bacakan instruksi sebelum Q23**
8 Menolak menjawab **Lanjut bacakan instruksi sebelum Q23**

Q19. Dapatkankah [nama anak] memilah milah pengeluaran [nama anak] berdasar jenis layanan yang [nama anak] dapatkan selama rawat inap?

1 Ya
0 Tidak **Lanjut bacakan instruksi sebelum Q23**
7 Tidak tahu **Lanjut bacakan instruksi sebelum Q23**
8 Menolak menjawab **Lanjut bacakan instruksi sebelum Q23**

Q20. Berapa pengeluaran mandiri rumah tangga [nama anak] yang dibayarkan untuk konsultasi, saat mulai hingga selesai rawat inap?

Jika tidak ada pengeluaran, masukkan "0".

— — — — —
7 Tidak tahu
8 Menolak menjawab
9 Tidak dapat diaplikasikan

- Q21. Berapa pengeluaran mandiri rumah tangga [nama anak] yang dibayarkan untuk uji diagnostik seperti cek darah, tes dengue, rontgen atau sonogram?
Jika tidak ada pengeluaran, masukkan "0".

7	Tidak tahu
8	Menolak menjawab
9	Tidak dapat diaplikasikan

- Q22. Berapa pengeluaran mandiri rumah tangga [nama anak] yang dibayarkan untuk pengobatan, cairan infus dan peralatan medis atau bank darah?
Jika tidak ada pengeluaran, masukkan "0".

7	Tidak tahu
8	Menolak menjawab
9	Tidak dapat diaplikasikan

BACAKAN: Sekarang saya akan menanyakan mengenai pengeluaran [nama anak] terkait episode penyakit dari awal hingga selesai merasa sakit [Merespons Q1], seperti untuk transportasi, makan, atau penginapan. Termasuk pengeluaran lain oleh anggota keluarga yang menemani masa rawat inap [nama anak].

- Q23a. Apa moda transportasi yang [nama anak] gunakan untuk menuju ke rumah sakit? _____

Catatan pewawancara: jika transportasi yang digunakan adalah mobil, tanyakan jarak rumah pasien ke rumah sakit. Jika pasien tidak tahu jawabannya, maka gunakan google map untuk menentukan jaraknya.

- Q23b. Berapa estimasi pengeluaran mandiri keluarga Anda untuk transportasi menuju rumah sakit), termasuk ambulans?
Jika tidak ada pengeluaran, masukkan "0".

Jika keluarga memiliki mobil, estimasikan jarak tempuh perjalanan (datang dan pergi) dan gunakan proxy Rp. 16.000 per km. Dan jika pasien menggunakan motor gunakan proxy Rp 14.000 per km. Jika tidak ada pengeluaran, catat "0.00".

7	Tidak tahu
8	Menolak menjawab
9	Tidak dapat diaplikasikan

- Q23c. Apa moda transportasi yang [nama anak] gunakan untuk menuju ke rumah sakit? _____

- Q23d. Berapa estimasi pengeluaran mandiri keluarga Anda untuk transportasi dari rumah sakit), termasuk ambulans?

Jika tidak ada pengeluaran, masukkan "0".

Jika keluarga memiliki mobil, estimasikan jarak tempuh perjalanan (datang dan pergi) dan gunakan proxy Rp. 16.000 per km. Dan jika pasien menggunakan motor gunakan proxy Rp 14.000 per km. Jika tidak ada pengeluaran, catat "0.00".

7	Tidak tahu
8	Menolak menjawab
9	Tidak dapat diaplikasikan

Q24. Berapa estimasi pengeluaran mandiri keluarga [nama anak] untuk makan?

Jika tidak ada pengeluaran, masukkan "0".

7	Tidak tahu
8	Menolak menjawab
9	Tidak dapat diaplikasikan

Q25. Berapa estimasi pengeluaran mandiri keluarga [nama anak] untuk penginapan di fasilitas non-kesehatan seperti hotel?

Jika tidak ada pengeluaran, masukkan "0".

7	Tidak tahu
8	Menolak menjawab
9	Tidak dapat diaplikasikan

Rawat Jalan

BACAKAN: Pertanyaan berikut ini akan terkait layanan rawat jalan sejak [nama anak] mulai merasa hingga berakhirnya sakit [Merespons Q1]. Mohon **termasuk** perawatan dari berbagai jenis fasilitas kesehatan seperti apotek, pengobatan tradisional, klinik swasta, puskesmas, bidan, poli rawat jalan dan/atau unit gawat darurat, dan lab swasta

Q26. Apakah [nama anak] mengunjungi fasilitas rawat jalan pada episode dengue [nama anak] yang terakhir? (Tunjukkan form peraga 1).

1	Ya	
0	Tidak	Lanjutkan ke Q40
8	Menolak menjawab	Lanjutkan ke Q40

BACAKAN: Pikirkan tentang waktu yang [nama anak] habiskan untuk akses fasilitas kesehatan berikut selama episode sakit dimulai [tanggal pada Q1]. Kemudian spesifikkan jenis perawatan yang [nama anak] terima pada tiap fasilitas kesehatan yang [nama anak] kunjungi (konsultasi, uji diagnostik, dan/atau pengobatan) dan cobalah mengingat kembali jumlah pengeluaran mandiri keluarga [nama anak] pada tiap jenis layanan tersebut.

Q27. Berapa kali kunjungan pada fasilitas kesehatan berikut ini selama periode sakit [nama anak]?

Tunjukkan form 1 (kalender) dan 2 (daftar fasilitas kesehatan)

Visit	Number of visits
Apotek (01)	
Pengobatan tradisional (02)	
Dokter praktek pribadi (03)	
Puskesmas (04)	
Bidan (05)	
Poli rawat jalan rumah sakit (06)	
Unit Gawat Darurat (UGD) (07)	
Lab swasta (08)	
Puskesmas pembantu (09)	
Lainnya (10)	
Sebutkan lainnya	

Q28. Pilihlah dari berikut ini tipe fasilitas kesehatan yang [nama anak] kunjungi selama periode sakit. Apakah [nama anak] dapat memberi tanggal pada tiap kunjungan? (*Tunjukkan form 2 dan form 1, pilih salah satu pada tiap kunjungan*)

Kunjungan	Pertama	Kedua	Ketiga	Keempat	Kelima	Keenam
Tanggal						
Type of facility						
Apotek (01)						
Pengobatan tradisional (02)						
Dokter praktek pribadi (03)						
Puskesmas (04)						
Bidan (05)						
Poli rawat jalan rumah sakit (06)						
UGD (07)						
Lab swasta (08)						
Puskesmas pembantu (09)						
Lainnya (10), sebutkan _____						
Tidak tahu (97)						
Menolak menjawab (98)						

BACAKAN: Sebutkan nama fasilitas kesehatan manakah yang [nama anak] kunjungi? (Isikan kolom di samping tipe fasilitas kesehatan yang dipilih pasien)

Catatan untuk pewawancara: Fasilitas kesehatan “public” adalah fasilitas kesehatan yang dioperasikan oleh pemerintah dalam berbagai tingkatan, dan “swasta-sosial” adalah fasilitas kesehatan yang dioperasikan oleh organisasi sosial non-profit, “swasta” adalah dokter praktek pribadi atau klinik bersama.

Q29. Apa tipe fasilitas kesehatan yang [nama anak] kunjungi, selama kunjungan kali ke-X [nama anak]? Apakah fasilitas kesehatan public atau non-public? (Pilih salah satu per kunjungan)

Kunjungan	Publik (1)	Swasta-sosial (2)	Swasta (3)	Tidak tahu (7)	Menolak menjawab (8)
Pertama					
Kedua					
Ketiga					
Keempat					
Kelima					
Keenam					

Q30. Jenis layanan apa yang [nama anak] terima selama kunjungan kali ke-X [nama anak]? (Cek yang diaplikasikan)

Kunjungan	Konsultasi	Uji diagnostic seperti rontgen, sampel darah	Pengobatan medis, infus	Rujukan	Tidak tahu (7)	Menolak menjawab (8)
Pertama						
Kedua						
Ketiga						
Keempat						
Kelima						
Keenam						

BACAKAN: Sekarang saya akan menanyakan mengenai pengeluaran mandiri keluarga [nama anak] terhadap fasilitas berikut ini.

Catatan pewawancara: Bila memungkinkan, kroscek dengan jumlah tagihan yang tersedia dari fasilitas kesehatan.

Q31. Mohon sebutkan perkiraan terbaik [nama anak] dari total pengeluaran mandiri terhadap layanan yang [nama anak] terima dari fasilitas kesehatan? Mohon termasuk pengeluaran yang telah dilakukan dan tagihan yang akan datang. Jika tidak ada pengeluaran, mohon masukkan "0,00"

Kunjungan	Jumlah, IDR	<i>Jika 0 lompat ke instruksi sebelum Q36a</i>	Tidak tahu (7)	<i>Lompat ke instruksi sebelum Q36a</i>	Menolak menjawab (8)	<i>Lompat ke instruksi sebelum Q36a</i>
Pertama						
Kedua						
Ketiga						
Keempat						
Kelima						
Keenam						

Q32. Apakah [nama anak] dapat mengurai jumlah pembayaran berdasar tipe layanan yang diterima?

Kunjungan	Ya (1)	Tidak (0)	<i>Lompat ke instruksi sebelum Q36a</i>	Menolak menjawab (8)	<i>Lompat ke instruksi sebelum Q36a</i>	Tidak dapat diterapkan (9)	<i>Lompat ke instruksi sebelum Q36a</i>
Pertama							
Kedua							
Ketiga							
Keempat							
Kelima							
Keenam							

Q33. Pengeluaran mandiri pada: konsultasi. (*Jika tidak ada pembayaran tuliskan "0,00"*)

Visit	Jumlah, IDR	Tidak tahu (7)	Menolak menjawab (8)	Tidak dapat diterapkan (9)
Pertama				
Kedua				
Ketiga				
Keempat				
Kelima				
Keenam				

Q34. Pengeluaran mandiri pada: transfusi darah atau uji diagnostic seperti rontgent, sampel darah, sonogram...

(*Jika tidak ada pembayaran tuliskan "0,00"*)

Kunjungan	Jumlah, IDR	Tidak tahu (7)	Menolak menjawab (8)	Tidak dapat diterapkan (9)
Pertama				
Kedua				
Ketiga				
Keempat				
Kelima				
Keenam				

Q35. Pengeluaran mandiri pada: pengobatan, set peralatan medis.

(Jika tidak ada pembayaran tuliskan "0,00")

Kunjungan	Jumlah, IDR	Tidak tahu (7)	Menolak menjawab (8)	Tidak dapat diterapkan (9)
Pertama				
Kedua				
Ketiga				
Keempat				
Kelima				
Keenam				

BACAKAN: Sekarang saya akan menanyakan terkait pengeluaran keluarga [nama anak] spesifik untuk fasilitas kesehatan selama periode sakit seperti untuk transportasi, makan/minum, dan penginapan. Termasuk pengeluaran anggota keluarga [nama anak] yang menemani selama kunjungan pertama (kedua, ketiga,...).

Q36a. Apakah moda transportasi yang [nama anak] gunakan untuk menuju fasilitas kesehatan?

Catatan pewawancara: jika transportasi yang digunakan adalah mobil, tanyakan jarak dari rumah pasien ke fasilitas kesehatan

Kunjungan	Moda Transportasi	Jarak (km)
Pertama		
Kedua		
Ketiga		
Keempat		
Kelima		
Keenam		

Q36b. Mohon sebutkan perkiraan terbaik [nama anak] terkait pengeluaran mandiri untuk transportasi menuju fasilitas kesehatan)

Jika keluarga memiliki kendaraan, perkirakan jarak tempuh perjalanan (pulang-pergi) dan gunakan IDR 16,000 per Km sebagai acuan dengan mobil dan IDR 14,000 per Km bila dengan motor. Jika tidak ada pengeluaran tuliskan "0,00".

Kunjungan	Jumlah, IDR	Tidak tahu (7)	Menolak menjawab (8)	Tidak dapat diterapkan (9)
Pertama				
Kedua				
Ketiga				
Keempat				
Kelima				
Keenam				

Q36c. Apakah moda transportasi yang [nama anak] gunakan dari fasilitas kesehatan?

Catatan pewawancara: jika transportasi yang digunakan adalah mobil, tanyakan jarak dari fasilitas kesehatan pasien ke rumah

Kunjungan	Moda Transportasi	Jarak (km)
Pertama		
Kedua		
Ketiga		
Keempat		
Kelima		
Keenam		

Q36b. Mohon sebutkan perkiraan terbaik [nama anak] terkait pengeluaran mandiri untuk transportasi dari fasilitas kesehatan)
Jika keluarga memiliki kendaraan, perkirakan jarak tempuh perjalanan (pulang-pergi) dan gunakan IDR 16,000 per Km sebagai acuan dengan mobil dan IDR 14,000 per Km bila dengan motor. Jika tidak ada pengeluaran tuliskan "0,00".

Kunjungan	Jumlah, IDR	Tidak tahu (7)	Menolak menjawab (8)	Tidak dapat diterapkan (9)
Pertama				
Kedua				
Ketiga				
Keempat				
Kelima				
Keenam				

Q36c. Apakah moda transportasi yang [nama anak] gunakan dari fasilitas kesehatan?

Catatan pewawancara: jika transportasi yang digunakan adalah mobil, tanyakan jarak dari fasilitas kesehatan ke rumah pasien

Kunjungan	Moda Transportasi	Jarak (km)
Pertama		
Kedua		
Ketiga		
Keempat		
Kelima		
Keenam		

Q37. Mohon sebutkan perkiraan terbaik [nama anak] terkait pengeluaran mandiri untuk makan/minum.

Jika tidak ada pengeluaran tuliskan "0,00".

Kunjungan	Jumlah, IDR	Tidak tahu (7)	Menolak menjawab (8)	Tidak dapat diterapkan (9)
Pertama				
Kedua				
Ketiga				
Keempat				
Kelima				
Keenam				

Q38. Mohon sebutkan perkiraan terbaik [nama anak] terkait pengeluaran mandiri untuk penginapan seperti hotel.

Jika tidak ada pengeluaran tuliskan "0,00".

Kunjungan	Jumlah, IDR	Tidak tahu (7)	Menolak menjawab (8)	Tidak dapat diterapkan (9)
Pertama				
Kedua				
Ketiga				
Keempat				
Kelima				
Keenam				

Q39. Apakah ada fasilitas kesehatan lain yang [nama anak] kunjungi selama periode sakit dimulai dari saat [nama anak] mulai merasa sakit? [Respons terhadap Q1]?

1 Ya *Ulangi proses dari Q28 hingga Q39*
 0 Tidak

Dampak penyakit pada anggota keluarga selama periode sakit

BACAKAN: Saya ingin mempelajari bagaimana dampak penyakit [nama anak] mempenaruhi [nama anak] dan tiap anggota keluarga. Anggota keluarga terdampak jika dia mengeluarkan waktu dan uang melebihi biasanya untuk merawat anak atau hilangnya waktu kerja, pendapatan, dan waktu sekolah karena sakit tersebut.

BACAKAN: Mari kita bicara tentang [Nama anak] terlebih dahulu.

Pasien

Q45. Berapa hari sekolah [nama anak] yang hilang karena sakit?

Tuliskan "0" jika tidak ada

97	Tidak tahu
98	Menolak menjawab
99	Tidak dapat diterapkan

Q46. Apakah [nama anak] bekerja dan dibayar?

1	Ya
0	Tidak
8	Menolak menjawab

Lanjut ke Q52

Q47. Apakah [nama anak] kehilangan hari kerja dan pendapatan selama sakit?

Jika pasien tidak kehilangan hari kerja, mohon konfirmasi apakah kehilangan pendapatan.

1	Ya
0	Tidak
7	Tidak tahu
8	Menolak menjawab

Lanjut ke Q52

Lanjut ke Q52

Lanjut ke Q52

Q48. Berapa hari kerja [nama anak] yang hilang selama sakit?

Tuliskan "0" jika tidak ada

97	Tidak tahu
98	Menolak menjawab
99	Tidak dapat diterapkan

Q49. Berapa pengeluaran [nama anak] yang hilang? (Berikan perkiraan terbaik [nama anak])

7	Tidak tahu
8	Menolak menjawab
9	Tidak dapat diterapkan

Tidak tahu

Menolak menjawab

Tidak dapat diterapkan

Q50. Apakah [nama anak] menerima kompensasi pendapatan selama [nama anak] sakit, apakah itu tempat kerja [nama anak] atau pihak lain yang menanggung selama [nama anak] sakit?

1	Ya
0	Tidak
7	Tidak tahu
8	Menolak menjawab
9	Tidak dapat diterapkan

Lanjut ke Q52

Lanjut ke Q52

Lanjut ke Q52

Q51. Berapa hari gaji yang [nama anak] terima selama sakit?

Tuliskan "0" jika tidak ada

97	Tidak tahu
98	Menolak menjawab
99	Tidak dapat diterapkan

Q52. Apakah Anda menerima bantuan keuangan atau non-keuangan dari keluarga atau komunitas selama [nama anak] sakit?

1	Ya
0	Tidak
8	Menolak menjawab

Lanjut ke Q55

Lanjut ke Q55

Q53. Berapa perkiraan terbaik Anda nilai bantuan non-keuangan yang didapatkan?

Benar 0 jika tidak ada bantuan non-keuangan.

Tuliskan "0" jika tidak ada

97	Tidak tahu
98	Menolak menjawab
99	Tidak dapat diterapkan

Catatan pewawancara: Jika tidak tahu, tuliskan tipe bantuan non-keuangan yang diterima pasien dan keluarga pasien

Q54. Berapakah total bantuan keuangan yang didapatkan dalam IDR?

Tuliskan "0" jika tidak ada

97	Tidak tahu
98	Menolak menjawab
99	Tidak dapat diterapkan

Jumlah Anggota Keluarga

Q55. Berapa jumlah anggota keluarga yang tinggal bersama? (selain Anda dan [nama anak])

00	Nol
98	Menolak menjawab

Q56. Berapa anggota keluarga yang terdampak sakit [nama anak] secara langsung selama periode sakit [nama anak]?

BACAKAN: Anggota keluarga adalah mereka yang tinggal bersama Anda dan berbagi makanan. Anggota keluarga terdampak jika dia menghabiskan uang dan waktu lebih dari jumlah biasanya karena merawat Anda atau kehilangan waktu kerja, pendapatan, sekolah karena sakit [nama anak].

00	Nol
98	Menolak menjawab

BACAKAN: Sekarang saya akan menanyakan Anda mengenai diri Anda dan anggota keluarga yang terdampak dari penyakit {nama anak}.

Yang merawat

BACAKAN: Pertama saya akan menanyakan informasi tentang Anda.

Q57. Berapa umur Anda saat ini?

998	Menolak menjawab
-----	------------------

Q58. Apa jenis kelamin yang diwawancara? (*tidak perlu ditanyakan, cukup diisi*)

0	Laki-laki
1	Perempuan

Q59. Apa tingkat pendidikan terakhir yang Anda selesaikan? (Pilih salah satu)

Tunjukkan Form 3

- | | |
|----|---|
| 01 | Tidak dapat baca-tulis |
| 02 | Mampu baca-tulis namun tidak sekolah |
| 03 | Sekolah tapi hanya satu tahun |
| 04 | Taman kanak - kanak |
| 05 | Sekolah Dasar |
| 06 | Sekolah Menengah Pertama |
| 07 | Sekolah Menengah Atas |
| 08 | Diploma |
| 09 | Universitas, Sarjana |
| 10 | Universitas, Pasca Sarjana (Magister, Doktoral) |
| 11 | Ijazah profesi |
| 97 | Tidak tahu |
| 98 | Menolak menjawab |
| 99 | Tidak dapat diterapkan |

Q60. Apakah saat ini Anda tengah menempuh pendidikan?

- | | |
|---|------------------|
| 1 | Ya |
| 0 | Tidak |
| 8 | Menolak menjawab |

Q61. Apakah Anda kehilangan waktu sekolah Anda selama [nama anak] sakit?

- | | |
|---|------------------|
| 1 | Ya |
| 0 | Tidak |
| 8 | Menolak menjawab |
- Lanjut ke Q63*
Lanjut ke Q63

Q62. Berapa hari sekolah Anda yang hilang karena sakit [nama anak]?

Tuliskan "0" jika tidak ada

- | | |
|----|------------------|
| 97 | Tidak tahu |
| 98 | Menolak menjawab |

Q63. Apakah Anda bekerja dan dibayar?

- | | |
|---|------------------|
| 1 | Ya |
| 0 | Tidak |
| 8 | Menolak menjawab |
- Lanjut ke Q69*
Lanjut ke Q69

Q64. Apakah Anda kehilangan hari kerja selama [nama anak] sakit?

- | | |
|---|------------------|
| 1 | Ya |
| 0 | Tidak |
| 8 | Menolak menjawab |
- Lanjut ke Q69*
Lanjut ke Q69

Q65. Berapa hari kerja Anda yang hilang selama sakitnya [nama anak]?

- | | |
|----|------------------------|
| 97 | Tidak tahu |
| 98 | Menolak menjawab |
| 99 | Tidak dapat diterapkan |

Q66. Apakah Anda menerima kompensasi pendapatan selama Anda sakit, apakah itu tempat kerja Anda atau pihak lain yang menanggung selama [nama anak] sakit?

1	Ya	
0	Tidak	<i>Lanjut ke Q68a</i>
7	Tidak tahu	<i>Lanjut ke Q68a</i>
8	Menolak menjawab	<i>Lanjut ke Q68a</i>
9	Tidak dapat diterapkan	<i>Lanjut ke Q68a</i>

Q67. Berapa hari gaji yang Anda terima selama periode sakit [nama anak]?

Tuliskan "0" jika tidak ada

97	Tidak tahu
98	Menolak menjawab
99	Tidak dapat diterapkan

Q68a. Apakah Anda kehilangan pendapatan selama [nama anak] sakit?

1	Ya	
0	Tidak	<i>Lanjut ke Q69</i>
8	Menolak menjawab	<i>Lanjut ke Q69</i>

Q68b. Berapa pendapatan Anda yang hilang? (Berikan perkiraan terbaik Anda)

7	Tidak tahu
8	Menolak menjawab
9	Tidak dapat diterapkan

Q69. Dari jumlah hari sakit selama periode sakit, berapa jumlah tambahan hari yang Anda berikan ke [Nama anak]?

00	Nol	<i>Lanjut ke Q71</i>
97	Tidak tahu	<i>Lanjut ke Q71</i>
98	Menolak menjawab	<i>Lanjut ke Q71</i>
99	Tidak dapat diterapkan	<i>Lanjut ke Q71</i>

BACAKAN: Dari pertanyaan berikut, pikirkan tentang jumlah tambahan jam per hari yang [nama anak] dapatkan dari anggota keluarga. Tambahan jam merujuk pada jumlah jam diluar biasanya anggota keluarga menghabiskan waktu bersama [nama anak]. Dalam memperkirakan waktu, mohon masukkan waktu di rumah, pada fasilitas kesehatan dan selama perjalanan menuju dan dari fasilitas kesehatan.

Q70. Selama periode ini [Respons terhadap Q69], berapa rata – rata jumlah tambahan jam Anda untuk merawat [nama anak]?

Jika tidak ada, masukkan 0

97	Tidak tahu
98	Menolak menjawab
99	Tidak dapat diterapkan

Q71. Apakah ada pengeluaran transportasi, makan/minum dan penginapan tambahan dari yang telah disebutkan sebelumnya untuk mengunjungi fasilitas kesehatan?

1	Ya	
0	No	<i>Lanjut ke instruksi sebelum Q73</i>
7	Tidak tahu	<i>Lanjut ke instruksi sebelum Q73</i>
8	Menolak menjawab	<i>Lanjut ke instruksi sebelum Q73</i>

Q72. Untuk pertanyaan berikut ini, berikan perkiraan terbaik terhadap jumlah total tambahan pengeluaran dari tambahan hari untuk merawat nama anak] yang belum termasuk yang disebutkan pada pertanyaan sebelumnya? *Jika tidak ada pengeluaran, tuliskan "0,00"*

IDR _____
7 Tidak tahu
8 Menolak menjawab

Jika Q56 sama dengan 1, maka akhiri wawancara

BACAKAN: Pikirkan mengenai anggota keluarga kedua (ketiga, keempat...) yang terdampak penyakit [Nama anak] selama periode sakit

Q73. Apa hubungan anggota keluarga berikut (pertama, kedua,...) dengan [nama anak]? (pilih salah satu)

Tunjukkan form 4

Hubungan	Anggota Keluarga						
	Anggota kedua	Anggota ketiga	Anggota keempat	Anggota kelima	Anggota keenam	Anggota ketujuh	Anggota kedelapan
Ibu (01)							
Ayah (02)							
Suami (03)							
Istri (04)							
Teman serumah (05)							
Saudara perempuan (06)							
Saudara laki-laki (07)							
Anak laki-laki (08)							
Anak perempuan (09)							
Nenek (10)							
Kakek (11)							
Paman (12)							
Bibi (13)							
Pembantu (14)							
Pengasuh (15)							
Lainnya (16) sebutkan _____							
Menolak menjawab (98)							
Tidak dapat diaplikasikan (99)							

Q74. Berapa usia anggota keluarga?

Anggota keluarga	Usia dalam tahun	Tidak tahu (997)	Menolak menjawab (998)
Anggota kedua			
Anggota ketiga			
Anggota keempat			
Anggota kelima			
Anggota keenam			
Anggota ketujuh			
Anggota kedelapan			

Q75. Apa tingkat pendidikan terakhir anggota keluarga? (pilih salah satu)

Tunjukkan form 3

Hubungan	Anggota Keluarga						
	Anggota kedua	Anggota ketiga	Anggota keempat	Anggota kelima	Anggota keenam	Anggota ketujuh	Anggota kedelapan
Tidak dapat baca-tulis (01)							
Mampu baca-tulis namun tidak sekolah (02)							
Sekolah tapi hanya satu tahun (03)							
Taman kanak - kanak (04)							
Sekolah Dasar (05)							
Sekolah Menengah Pertama (06)							
Sekolah Menengah Atas (07)							
Diploma (08)							
Universitas, Sarjana (09)							
Universitas, Pasca Sarjana (Magister, Doktoral) (10)							
Ijazah profesi (11)							
Tidak tahu (97)							
Menolak menjawab (98)							

Q76. Apakah ada anggota keluarga saat ini sedang menempuh pendidikan?

Anggota keluarga	Ya (kode:1)	Tidak (Kode:2)	<i>Lanjut ke Q79</i>	Tidak tahu (Kode:7)	<i>Lanjut ke Q79</i>	Menolak menjawab (Kode:8)	<i>Lanjut ke Q79</i>
Anggota kedua							
Anggota ketiga							
Anggota keempat							
Anggota kelima							
Anggota keenam							
Anggota ketujuh							
Anggota kedelapan							

Q77. Apakah ada anggota keluarga kehilangan hari sekolah karena penyakit [nama anak]?

Anggota keluarga	Ya (kode:1)	Tidak (Kode:2)	<i>Lanjut ke Q79</i>	Tidak tahu (Kode:7)	<i>Lanjut ke Q79</i>	Menolak menjawab (Kode:8)	<i>Lanjut ke Q79</i>
Anggota kedua							
Anggota ketiga							
Anggota keempat							
Anggota kelima							
Anggota keenam							
Anggota ketujuh							
Anggota kedelapan							

Q78. Berapa hari sekolah anggota keluarga yang hilang karena penyakit [nama anak]?

Tuliskan "0" jika tidak ada

Anggota keluarga	Jumlah hari yang hilang	Tidak tahu (97)	Menolak menjawab (98)
Anggota kedua			
Anggota ketiga			
Anggota keempat			
Anggota kelima			
Anggota keenam			
Anggota ketujuh			
Anggota kedelapan			

Q79. Apakah anggota keluarga bekerja dan dibayar?

Anggota keluarga	Ya (kode:1)	Tidak (Kode:2)	Lanjut ke Q84a	Tidak tahu (Kode:7)	Lanjut ke Q84a	Menolak menjawab (Kode:8)	Lanjut ke Q84a
Anggota kedua							
Anggota ketiga							
Anggota keempat							
Anggota kelima							
Anggota keenam							
Anggota ketujuh							
Anggota kedelapan							

Q80. Apakah ada anggota keluarga kehilangan hari kerja karena penyakit [nama anak]?

Anggota keluarga	Ya (kode:1)	Tidak (Kode:2)	Lanjut ke Q84a	Tidak tahu (Kode:7)	Lanjut ke Q84a	Menolak menjawab (Kode:8)	Lanjut ke Q84a
Anggota kedua							
Anggota ketiga							
Anggota keempat							
Anggota kelima							
Anggota keenam							
Anggota ketujuh							
Anggota kedelapan							

Q81. Berapa hari kerja anggota keluarga yang hilang karena penyakit [nama anak]?

Tuliskan "0" jika tidak ada

Anggota keluarga	Jumlah hari	Tidak tahu (Kode:97)	Lanjut ke Q85	Menolak menjawab (Kode:98)	Lanjut ke Q85	Tidak dapat diterapkan (Kode:99)	Lanjut ke Q85
Anggota kedua							
Anggota ketiga							
Anggota keempat							
Anggota kelima							
Anggota keenam							
Anggota ketujuh							
Anggota kedelapan							

Q82. Apakah anggota keluarga menerima kompensasi atas absennya mereka dari pekerjaan ketika merawat [nama anak] sakit? (dari tempat kerja atau pihak lain yang menanggung)

Anggota keluarga	Ya (Kode: 1)	Tidak (Kode: 0)	<i>Lanjut ke Q84a</i>	Tidak tahu (Kode:7)	<i>Lanjut ke Q84a</i>	Menolak menjawab (Kode:8)	<i>Lanjut ke Q84a</i>	Tidak dapat diterapkan (Kode:9)	<i>Lanjut ke Q84a</i>
Anggota kedua									
Anggota ketiga									
Anggota keempat									
Anggota kelima									
Anggota keenam									
Anggota ketujuh									
Anggota kedelapan									

Q83. Berapa hari yang dibayarkan ke anggota keluarga?

Anggota keluarga	Jumlah hari yang dibayarkan	Tidak tahu (97)	Menolak menjawab (98)
Anggota kedua			
Anggota ketiga			
Anggota keempat			
Anggota kelima			
Anggota keenam			
Anggota ketujuh			
Anggota kedelapan			

Q84a. Apakah anggota keluarga Anda kehilangan pendapatan karena penyakit [nama anak]?

Anggota keluarga	Ya (kode:1)	Tidak (Kode:2)	<i>Lanjut ke Q85</i>	Tidak tahu (Kode:7)	<i>Lanjut ke Q85</i>	Menolak menjawab (Kode:8)	<i>Lanjut ke Q85</i>
Anggota kedua							
Anggota ketiga							
Anggota keempat							
Anggota kelima							
Anggota keenam							
Anggota ketujuh							
Anggota kedelapan							

Q84b. Berapa pendapatan anggota keluarga yang hilang? (Mohon berikan perkiraan terbaik).

Jika tidak ada tuliskan "0,00".

Anggota keluarga	Jumlah, IDR	Tidak tahu (7)	Menolak menjawab (8)	Tidak dapat diterapkan (9)
Anggota kedua				
Anggota ketiga				
Anggota keempat				
Anggota kelima				
Anggota keenam				
Anggota ketujuh				
Anggota kedelapan				

Q85. Dari jumlah hari sakit selama episode sakit [nama anak] yang dimulai sejak sakit hingga saat pemulihan (tanggal wawancara), berapa jumlah hari tambahan yang dihabiskan anggota keluarga untuk perawatan lanjutan [nama anak]?
Jika tidak ada, masukkan 0

Anggota keluarga	Jumlah hari	<i>Jika "Nol" Lanjut ke Q87</i>	Tidak tahu (Kode:97)	<i>Lanjut ke Q97</i>	Menolak menjawab (Kode:98)	<i>Lanjut ke Q87</i>	Tidak dapat diterapkan (Kode:99)	<i>Lanjut ke Q87</i>
Anggota kedua								
Anggota ketiga								
Anggota keempat								
Anggota kelima								
Anggota keenam								
Anggota ketujuh								
Anggota kedelapan								

BACAKAN: Dari pertanyaan berikut, pikirkan tentang jumlah tambahan jam per hari yang Anda dapatkan dari anggota keluarga. Tambahan jam merujuk pada jumlah jam diluar biasanya anggota keluarga menghabiskan waktu bersama Anda. Dalam memperkirakan waktu, mohon masukkan waktu di rumah, pada fasilitas kesehatan dan selama perjalanan menuju dan dari fasilitas kesehatan.

Q86. Selama periode ini, berapa rata – rata jumlah tambahan jam anggota keluarga untuk merawat [nama anak]? [Respons terhadap Q68]

Jika tidak ada, masukkan 0

Anggota keluarga	Rata-rata tambahan jam untuk perawatan harian	Tidak tahu (Kode:97)	Menolak menjawab (Kode:98)	Tidak dapat diterapkan (Kode:99)
Anggota kedua				
Anggota ketiga				
Anggota keempat				
Anggota kelima				
Anggota keenam				
Anggota ketujuh				
Anggota kedelapan				

Q87. Apakah ada pengeluaran transportasi, makan/minum dan penginapan tambahan dari yang telah disebutkan sebelumnya untuk mengunjungi fasilitas kesehatan?

Anggota keluarga	Ya (Kode:1)	No (Kode:0)	<i>Lanjut ke anggota keluarga lainnya</i>	Tidak tahu (Kode:7)	<i>Lanjut ke anggota keluarga lainnya</i>	Menolak menjawab (Kode:8)	<i>Lanjut ke anggota keluarga lainnya</i>	Tidak dapat diterapkan (Kode:9)	<i>Lanjut ke anggota keluarga lainnya</i>
Anggota kedua									
Anggota ketiga									
Anggota keempat									
Anggota kelima									
Anggota keenam									
Anggota ketujuh									
Anggota kedelapan									

Q88. Untuk pertanyaan berikut ini, berikan perkiraan terbaik terhadap jumlah total tambahan pengeluaran dari tambahan hari untuk merawat Anda yang belum termasuk yang disebutkan pada pertanyaan sebelumnya? [Jumlah hari yang dilaporkan pada Q68]

Jika tidak ada pengeluaran, tuliskan "0,00".

Anggota keluarga	Amount, IDR	Tidak tahu (7)	Menolak menjawab (8)	Tidak dapat diterapkan (9)
Anggota kedua				
Anggota ketiga				
Anggota keempat				
Anggota kelima				
Anggota keenam				
Anggota ketujuh				
Anggota kedelapan				

Cek Q56, jika jawabannya lebih dari 1, maka ulangi Q57-71 untuk semua anggota keluarga terdaftar. Jika Q56 sama dengan 1, maka bacakan kalimat berikut untuk mengakhiri wawancara.

BACAKAN: Terima kasih atas partisipasi Anda! Jika ada pertanyaan lebih lanjut terkait wawancara atau hasil penelitian ini, Anda dapat menghubungi saya, dr. Nandyan N. Wilastonegoro, MScIH di nomor 0813-2884-3888 atau 0274-5306089 di Fakultas Kedokteran, Kesehatan Masyarakat dan Keperawatan, Universitas Gadjah Mada (FKKM UGM).

Supplementary Information

Cost of dengue illness in Indonesia across hospital, ambulatory and non-medical settings

Table Contents

- S5: Table S5. Studies on cost of a dengue episode in the literature by country
- S6: Table S6. Studies on cost of a dengue episode in the literature by region
- S7: Table S7. Dengue economic burden by type of case and source of financing (in millions of 2017 US\$)

1 Table S5. Studies on cost of a dengue episode in the literature by country

Study and publication		Location and data		Hospital cases		Ambulatory cases	
year		year		Original	Adjusted	Original	Adjusted
<u>Asian studies</u>							
Vo et al. ¹		Vietnam, 2012		48.10	111.29	NA	NA
Edillo et al. ²		Philippines, 2012		1,048.73	1,245.81	259.18	307.88
Shepard et al. ³		Malaysia, 2010		433.23	151.10	210.14	73.29
Tran et al. ⁴		Vietnam, 2017		110.10	254.74	36.10	83.53
Nadjib et al., 2019 ⁵		Indonesia, 2015		458.14	472.83	59.29	61.19
Hariharan et al. ⁶		India, 2013		276.10	643.02	14.25	33.19
Harving & Rönsholt ⁷		Vietnam, 2005		61.36	344.78	NA	NA
Tozan et al. ⁸		Thailand, 2015		157.68	97.76	NA	NA
Average				NA		NA	
<u>Latin American studies</u>							
Armien et al. ⁹		Panama, 2005		1,065	778.95	332	242.83
Undurraga et al.,		Mexico, 2012		240.04	87.15	65.53	23.79
2015 ¹⁰							
Halasa et al., 2012 ¹¹		Puerto Rico, 2010		5,497.00	1,150.08	1,236	258.60
Martelli et al., 2015 ¹²		Brazil, 2013		618.33	171.95	181.83	50.56
<u>Other regions</u>							
Suaya et al., 2009 ¹³		Brazil, 2005		676.00	601.27	291.00	258.83
		El Salvador, 2005		457.00	668.50	88.00	128.73
		Guatemala, 2005		418.00	736.18	88.00	154.99

Study and publication	Location and data	Hospital cases		Ambulatory cases	
		Original	Adjusted	Original	Adjusted
year	year				
	Panama, 2005	1,065.00	778.95	332.00	242.83
	Venezuela, 2005	672.00	452.05	168.00	121.12
	Cambodia, 2005	115.00	885.00	NA	NA
	Malaysia, 2005	947.00	634.92	317.00	212.53
	Thailand, 2005	573.00	727.03	NA	NA
Shepard et al., 2013 ³	Bhutan, 2010	207.30	372.51	62.30	111.95
	Brunei, 2010	2,481.00	263.75	809.70	86.08
	Cambodia, 2010	116.08	724.99	23.46	110.73
	Timor Leste, 2010	66.00	83.15	19.20	24.19
	Indonesia, 2010	289.10	406.12	87.60	123.06
	Laos, 2010	107.20	1,023.41	31.60	310.10
	Malaysia, 2010	863.21	368.61	422.20	180.29
	Myanmar, 2010	81.50	335.48	23.90	98.38
	Philippines, 2010	212.20	304.12	63.70	91.29
	Singapore, 2010	3008.47	1,268.28	1268.28	237.78
	Thailand, 2010	634.87	490.71	158.72	122.68
	Viet Nam, 2010	76.41	216.39	31.46	89.09

Notes: Nadjib et al.⁵ examined cost across three sites from Indonesia: Yogyakarta, Bali and Jakarta. We extracted the costs by site and by setting from their Table 2 to calculate the arithmetic averages of for both hospital and ambulatory services. Tozen et al.⁸ examined cost based on diagnosis of DF and DHF per adult and pediatric case. Similarly, we used data from their Table 5 to calculate the arithmetic average cost of the diagnosis and age group. Martelli et al.¹² examined cost across six sites from Brazil both public and private sectors: Goiania, Belo Horizonte, Rio de Janeiro, Teresina, Recife, and Belem. We used data in their Table 3 to calculate the arithmetic average of the three sites for both hospital and ambulatory services. NA denotes not applicable.

10 Table S6. Studies on cost of a dengue episode in the literature by region

Study and publication year	Location and data year	Hospital cases		Ambulatory cases	
		Original	Adjusted*	Original	Adjusted*
Shepard et al., 2016 ¹⁴	Global average, 2013	389.00	126.92	106	14.36
	Central Europe, eastern Europe, Central Asia, 2013	287.00	99.87	64	22.27
	High-income, 2013	3809.00	320.07	678	56.97
	Latin America and the Caribbean, 2013	1360.00	477.97	160	56.23
	North Africa and the Middle East, 2013	333.00	135.54	75	30.54
	South Asia, 2013	260.00	634.62	35	85.43
	Southeast Asia, east Asia, and Oceania, 2013	447	NA	117	NA
	Sub-Saharan Africa, 2013	206	425.14	44	90.81

Shepard et al., 2011 ¹⁵	North America, 2010	11,340.50	827.25	1,477.50	107.78
	Latin America	2,126.33	946.04	590.43	262.69
	and The				
	Caribbean, 2010				

* Adjusted numbers are scaled to the ratio of the per capita GNI of the region or country compared to that in Indonesia.

13 Table S7. Dengue economic burden by type of case and source of financing (in millions of 2017 US\$)

	Household	Family/friend			
Location	resources	contribution	JKN	Other	Total
<u>Non-fatal cases only</u>					
	140.07	75.45	95.03	69.13	379.69
National	(33.87-740.36)	(21.57-274.91)	(26.84-365.98)	(18.81-297.07)	(101.09-1,678.32)
Percentage	37%	20%	25%	18%	100%
Yogyakarta	0.51	0.30	0.39	0.28	1.47
City	(0.09-20.06)	(0.07--2.42)	(0.08-4.74)	(0.06-5.73)	(0.30-32.95)
	34%	20%	26%	19%	100%
<u>All cases (including fatal)</u>					
	441.65	75.45	95.03	69.13	681.26
	(165.06-	(21.57-274.91	(26.84-365.98)	(18.81-297.07)	(232.28-2,371.56)
National	1433.60)				
Percentage	65%	11%	14%	10%	100%

14

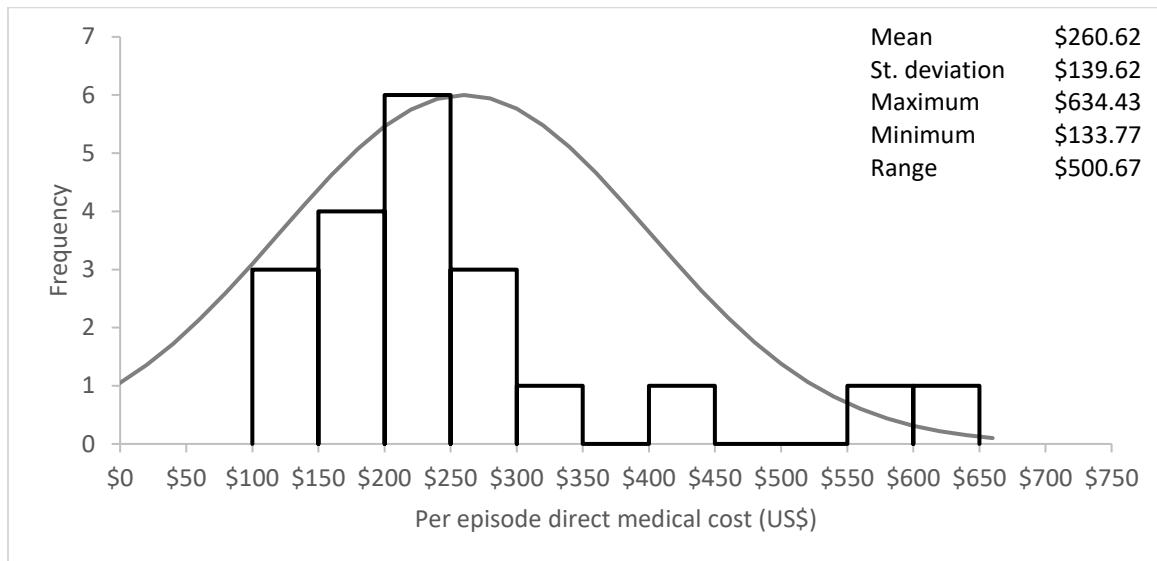
Supplementary Information

Cost of dengue illness in Indonesia across hospital, ambulatory and non-medical settings

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- S9: Figure S9. Histogram of non-medical cost per hospitalized case in Yogyakarta, Indonesia (n=20)
- S10: Figure S10. Histogram of indirect cost per hospitalized case in Yogyakarta, Indonesia (n=20)
- S11: Figure S11. Histogram of total cost per hospitalized case in Yogyakarta, Indonesia (n=20)

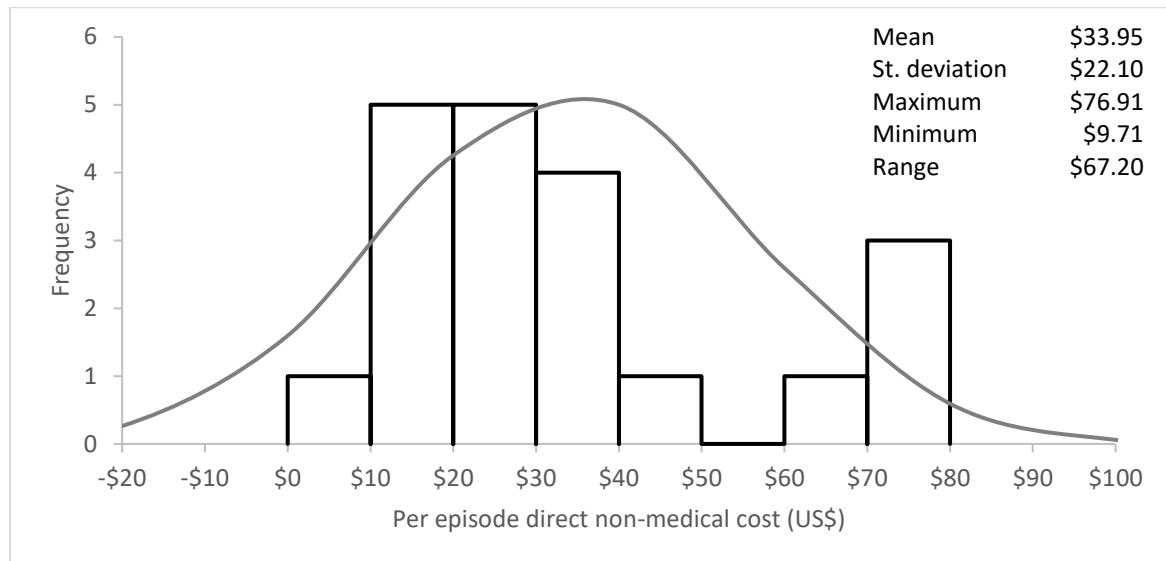
1 Figure S8. Histogram of direct medical cost per hospitalized case in Yogyakarta, Indonesia (n=20)



2

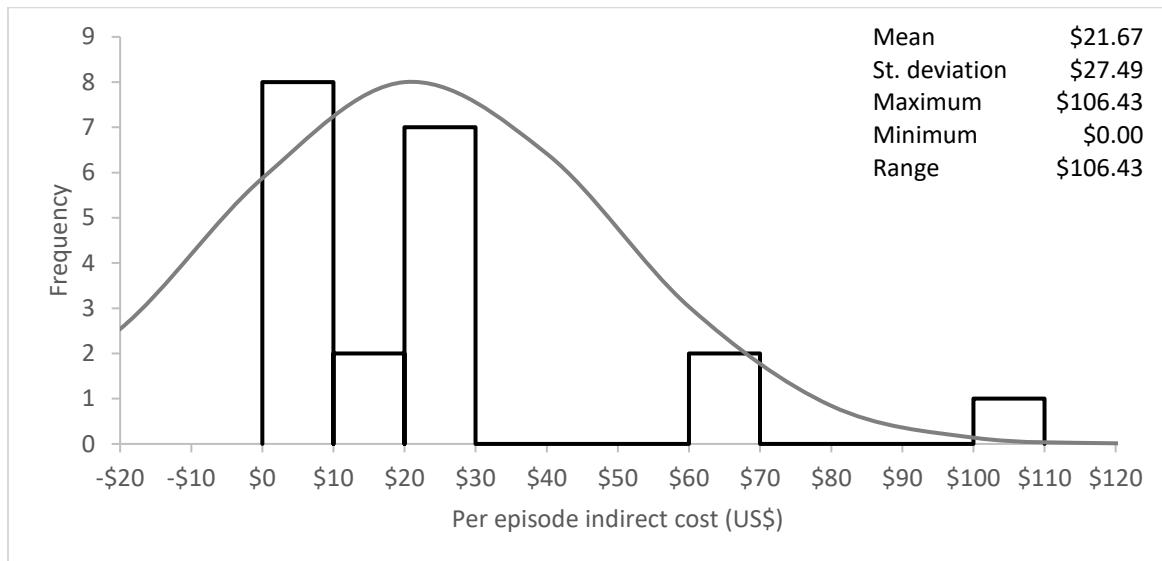
3 Notes: St. deviation denotes standard deviation; US\$ denotes United States dollars

4 Figure S9. Histogram of non-medical cost per hospitalized case in Yogyakarta, Indonesia (n=20)



6 Notes: St. deviation denotes standard deviation; US\$ denotes United States dollars

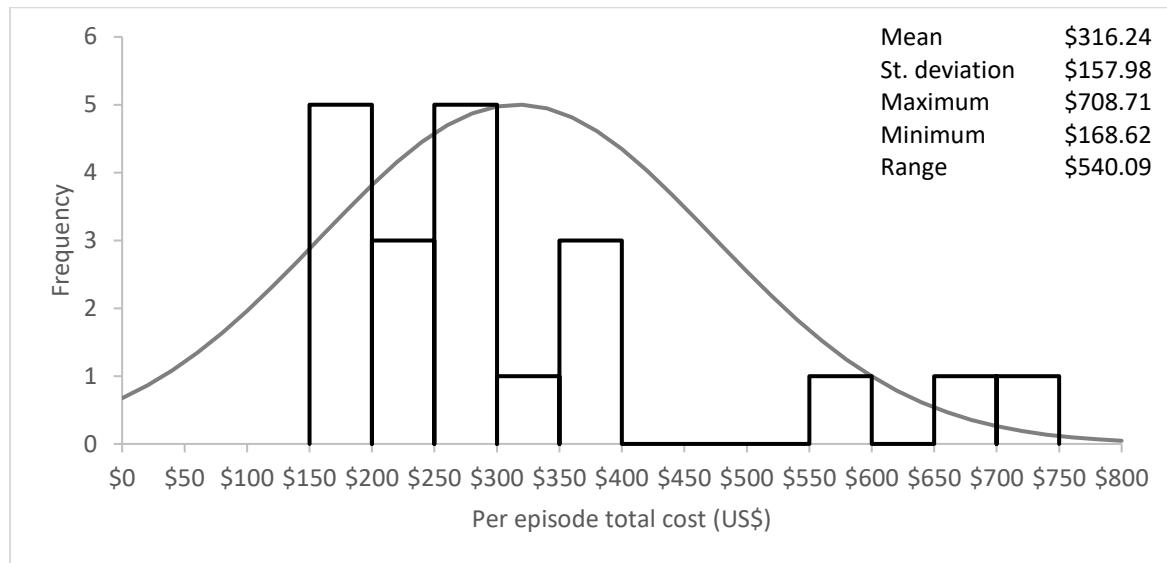
7 Figure S10. Histogram of indirect cost per hospitalized case in Yogyakarta, Indonesia (n=20)



8

9 Notes: St. deviation denotes standard deviation; US\$ denotes United States dollars

10 Figure S11. Histogram of total cost per hospitalized case in Yogyakarta, Indonesia (n=20)



11

12 Notes: St. deviation denotes standard deviation; US\$ denotes United States dollars