

Supplementary Table 1. Results of pre-testing/face validity

Construction	Correlation coefficient	Improvement
	Knowledge	
TB definition	0.59	Unmodified
Infection site	0.19	Modified, re-arranged the sentences
Spreading mechanism (2 items)	0.00–0.19	Modified, re-arranged the sentences
Signs and symptoms	0.06–0.94	Modified, questions about signs and symptoms were broken down into three questions
Risk factors	0.00–0.60	Modified, questions about risk factor were broken down into four questions
Diagnostic test of pulmonary TB	0.00–0.57	Modified, questions about diagnostic test pulmonary TB were broken down into four questions
TB drug regimen: first line	–0.14–0.30	Modified, question about TB drug regimen was broken down into two questions
TB drug regimen: second line	0.14	Deleted because not relevant
How to take TB drugs	0.45	Unmodified
TB drug side effects	0.6–0.70	Modified, the questions about TB drug side effects were broken down into two questions
	Attitude	
Attitude toward the importance of case detection activities in reducing TB incidence	0.55	Unmodified
Attitude toward self-ability to perform case detection activities	0.62	Unmodified
Attitude toward problems that will arise when conducting case detection	0.61	Unmodified
Attitude regarding the effect on oneself when not performing case detection activities	0.59	Unmodified
Attitude toward the benefits obtained when performing case detection activities	0.57–0.60	Unmodified

Construction	Correlation coefficient	Improvement
Attitude toward the importance of monitoring TB treatment activities to increase TB cure rates	0.50	Unmodified
Attitude toward self-ability to perform TB treatment monitoring activities	0.57	Unmodified
Attitude toward problems that will arise when monitoring TB treatment	0.58	Unmodified
Attitude regarding the effect on oneself when not performing TB treatment monitoring activities	0.62	Unmodified
Attitude toward the benefits of monitoring TB treatment activities	0.55–0.61	Unmodified
Attitude toward the importance of TB education activities to increase the success of the TB program and reduce the rate of TB transmission	0.55	Unmodified
Attitude toward self-ability to conduct TB education	0.58	Unmodified
Attitude toward problems that will arise when conducting TB education	0.58	Unmodified
Attitude about the effect on oneself when not performing TB education activities	0.60	Unmodified
Attitude toward the benefits obtained when conducting TB education activities	0.50–0.60	Unmodified
	Practice	
Identifying TB symptoms in pharmacy visitors	0.76	Unmodified
Advise TB suspects to go to healthcare services	0.73	Unmodified
Communicating with TB officers at the puskesmas/clinic/hospital to refer presumptive TB for further examination	0.78	Unmodified
Become a supervisor or companion for TB drug use	0.76	Unmodified

Construction	Correlation coefficient	Improvement
Make a schedule for taking medication for patients with TB	0.84	Unmodified
Conducting interviews related to the adherence to TB drugs	0.84	Unmodified
Identifying the incidence of side effects of TB drugs	0.83	Unmodified
Reporting Monitoring of Drug Side Effects (MESO)	0.75	Unmodified
Provide information to increase understanding and awareness of the public or pharmacy visitors regarding the disease and treatment of TB	0.80	Unmodified

Supplementary Table 2. Final KAP questionnaire for the community pharmacy personnel

Constructions	Items	Code
	Knowledge	
Definition of TB	Tuberculosis (TB) is a disease caused by a virus (true, false, or do not know)	K1
Infection site	Tuberculosis not only attacks the lungs but can also attack the eyes, ears, bones, joints, and other organs (true, false, or do not know)	K2
Spreading mechanism	Tuberculosis can be transmitted from people infected with pulmonary TB to other people through the air in droplets when the person coughs, sneezes, or talks. (true, false, or do not know)	K3
	Droplets can stay in the air for a longer time in a dark room with minimal ventilation, increasing the risk of TB transmission. (true, false, or do not know)	K4
Signs and symptoms	Cough for more than two weeks is one of the common signs and symptoms of active pulmonary TB. (true, false, or do not know)	K5
	People with active pulmonary TB can cough up phlegm mixed with blood. (true, false, or do not know)	K6
	Other symptoms that can be detected in patients with pulmonary TB are as follows: - weight loss - chest pain - sweating at night - fever/fever more than 1 month (you can choose more than one answer)	K7
Risk factors	People with diabetes mellitus have a greater risk of developing pulmonary TB. (true, false, or do not know)	K8
	People who are HIV positive are more susceptible to TB disease. (true, false, do not know)	K9
	Children < 5 years old and the elderly have a greater risk of developing TB disease. (true, false, or do not know)	K10
	People with asthma are more susceptible to TB disease. (true, false, do not know)	K11
Diagnostic test of pulmonary TB	A sputum acid-resistant bacilli test is used to diagnose pulmonary TB. (true, false, or do not know)	K12

Constructions	Items	Code
	<p>The diagnostic method for identifying <i>Mycobacterium tuberculosis</i> that is recommended by the WHO is</p> <p>Chose only one answer:</p> <ul style="list-style-type: none"> - MRI - CT - sputum for rapid molecular assay - urine test - Do not know 	K13
TB drug regimen	<p>The following is an intensive-phase first-line anti-tuberculosis drug regimen for adults:</p> <p>Multiple choice:</p> <ul style="list-style-type: none"> - 2 months of isoniazid, rifampicin, pyrazinamide, and ethambutol - 3 months of isoniazid, rifampicin, and pyrazinamide - 3 months of isoniazid and rifampicin - Do not know <p>(please chose one answer)</p>	K14
	<p>The following is an advanced-phase first-line OAT regimen for adults</p> <p>Multiple choice:</p> <ul style="list-style-type: none"> - 4 months of isoniazid and rifampicin - 3 months of isoniazid and rifampicin - 9 months of isoniazid and rifampicin - Do not know <p>(please chose one answer)</p>	K15
How to take TB drugs	<p>A combination of OAT should be taken immediately after meals. (true, false, or do not know)</p>	K16
Side effects of TB drugs	<p>The following are side effects of isoniazid:</p> <ul style="list-style-type: none"> - reddish urine - peripheral neuritis/numbness - joint pain <p>(you can choose more than one answer)</p>	K17
	<p>The following are the side effects of rifampicin:</p> <ul style="list-style-type: none"> - reddish urine - peripheral neuritis/numbness - joint pain <p>(you can choose more than one answer)</p>	K18
Attitude toward the importance of case detection activities in reducing TB incidence	<p>Attitude</p> <p>I have a role to play in finding new TB cases in my pharmacy. (strongly disagree, disagree, uncertain, agree, or strongly agree)</p>	A1

Constructions	Items	Code
Attitude toward self-ability to perform case detection activities	I can screen TB signs and symptoms for patients with presumptive TB who visit my pharmacy. (strongly disagree, disagree, uncertain, agree, or strongly agree)	A2
Attitude toward problems that will arise when conducting case detection	I feel that I have no significant obstacles in conducting case detection. (strongly disagree, disagree, uncertain, agree, or strongly agree)	A3
Attitude regarding the effect on oneself when not performing case detection activities	I feel guilty if I don't try to find TB cases at my pharmacy. (strongly disagree, disagree, uncertain, agree, or strongly agree)	A4
Attitude toward the benefits obtained when performing case detection activities	I feel that I get a financial benefit (money/services fee) if I find TB cases at my pharmacy. (strongly disagree, disagree, uncertain, agree, or strongly agree)	A5
	I feel that I get a non-financial benefit (appreciation, acknowledgment, or praise) if I find TB cases at my pharmacy. (strongly disagree, disagree, uncertain, agree, or strongly agree)	A6
Attitude toward the importance of monitoring TB treatment activities to increase TB cure rates	I feel I have an important role in monitoring the rational use of drugs in patients who are using anti-tuberculosis drugs. (strongly disagree, disagree, uncertain, agree, or strongly agree)	A7
Attitude toward self-ability to perform TB treatment monitoring activities	I can monitor the rationality of drug use in patients who are taking anti-tuberculosis drugs. (strongly disagree, disagree, uncertain, agree, or strongly agree)	A8
Attitude toward problems that will arise when monitoring TB treatment	I feel that I have no significant obstacles in monitoring the rational use of drugs in patients with TB. (strongly disagree, disagree, uncertain, agree, or strongly agree)	A9
Attitude regarding the effect on oneself when not performing TB treatment monitoring activities	I feel guilty if I do not monitor the rational use of drugs in patients with TB. (strongly disagree, disagree, uncertain, agree, or strongly agree)	A10
Attitude toward the benefits of monitoring TB treatment activities	I feel that I get a financial benefit (money or services) if I monitor the rationality of drug use in patients with TB. (strongly disagree, disagree, uncertain, agree, or strongly agree)	A11
	I feel that I get a non-financial benefit (appreciation, acknowledgment, or praise) if	A12

Constructions	Items	Code
	I monitor the rational use of drugs in patients with TB. (strongly disagree, disagree, uncertain, agree, or strongly agree)	
Attitude toward the importance of TB education activities to increase the success of the TB program and reduce the rate of TB transmission	I feel that I have an important role in providing education regarding TB to pharmacy visitors. (strongly disagree, disagree, uncertain, agree, or strongly agree)	A13
Attitude toward self-ability to conduct TB education	I can provide education about TB to prevent TB transmission and eradicate TB in the pharmacy environment where I work. (strongly disagree, disagree, uncertain, agree, or strongly agree)	A14
Attitude toward problems that will arise when conducting TB education	I don't think I have any significant barriers to educating pharmacy visitors about TB. (strongly disagree, disagree, uncertain, agree, or strongly agree)	A15
Attitude about the effect on oneself when not performing TB education activities	I feel guilty if I don't provide education regarding TB to pharmacy visitors. (strongly disagree, disagree, uncertain, agree, or strongly agree)	A16
Attitude toward the benefits obtained when conducting TB education activities	I feel that I get financial benefits (money or services fee) if I provide education related to TB to pharmacy visitors. (strongly disagree, disagree, uncertain, agree, or strongly agree)	A17
	I feel that I get a non-financial benefit (appreciation, acknowledgment, or praise) if I provide education related to TB to pharmacy visitors. (strongly disagree, disagree, uncertain, agree, or strongly agree)	A18
	Practice	
Identifying TB symptoms in pharmacy visitors	How often do you screen TB symptoms for pharmacy visitors? (never, rarely, sometimes, often, or very often)	P1
Advise TB suspects to go to health care services	How often do you advise TB suspects to go to health care services for examinations? (never, rarely, sometimes, often, or very often)	P2
Communicating with TB officers at the public health center/clinic/hospital to	How often do you communicate with TB officers at the puskesmas/clinic/hospital to refer TB presumptive for further examination?	P2

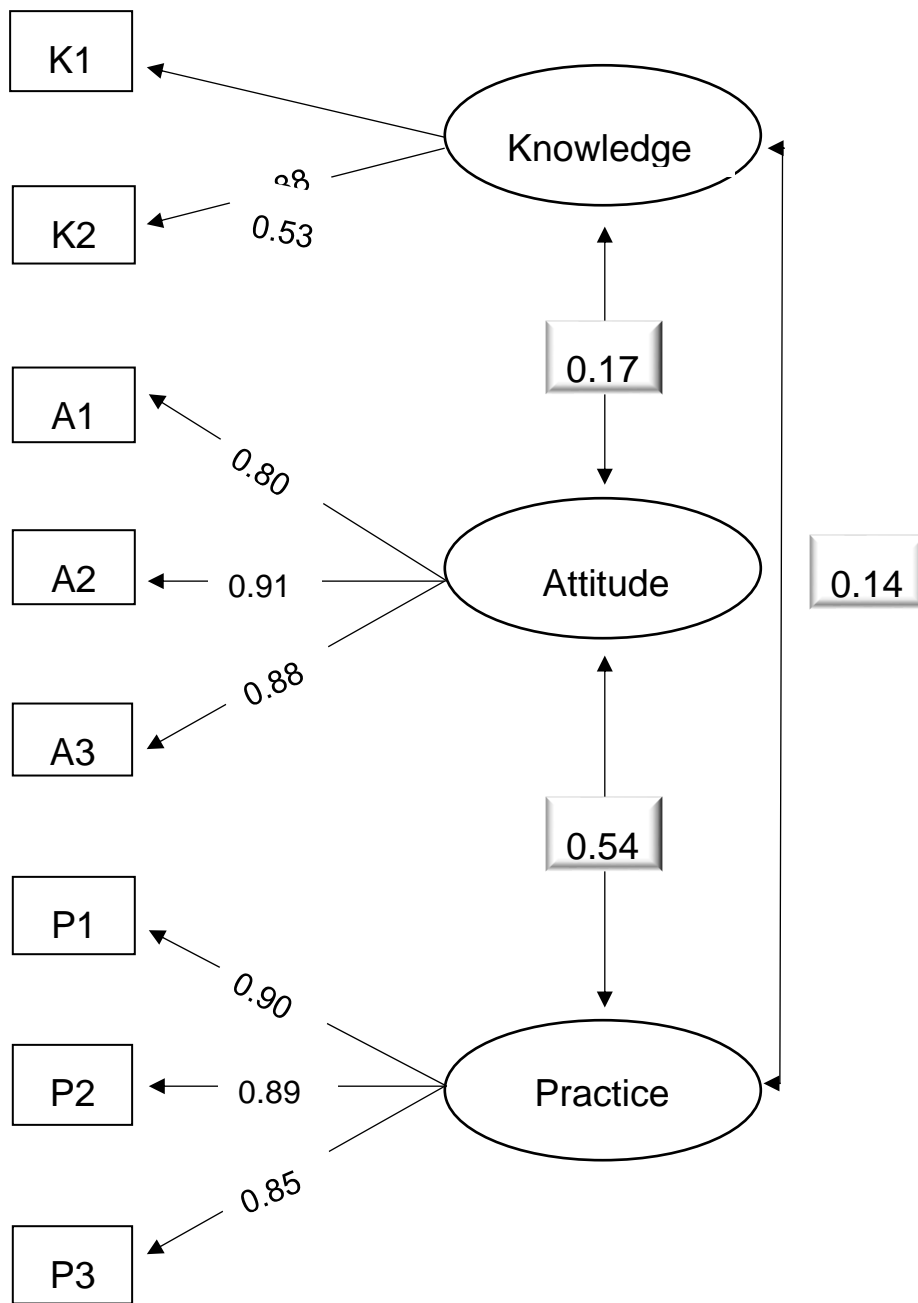
Constructions	Items	Code
refer presumptive TB for further examination	(never, rarely, sometimes, often, or very often)	
Become a supervisor or companion for TB drug use	How often do you become a supervisor or a companion for taking TB patients' medication? (never, rarely, sometimes, often, or very often)	P4
Make a schedule for taking medication for patients with TB	How often do you schedule medication for patients with TB? (never, rarely, sometimes, often, or very often)	P5
Conducting interviews related to the adherence to TB drugs	How often do you conduct interviews regarding medication adherence for patients with TB? (never, rarely, sometimes, often, or very often)	P6
Identifying the incidence of side effects of TB drugs	How often do you identify the incidence of side effects of TB drugs? (never, rarely, sometimes, often, or very often)	P7
Reporting monitoring of drug side effects (MESO)	How often do you report the incidence of TB drug side effects through the MESO form? (never, rarely, sometimes, often, or very often)	P8
Provide information to increase understanding and awareness of the public or pharmacy visitors regarding the disease and treatment of TB	How often do you provide education to increase the understanding and awareness of the public or pharmacy visitors regarding the prevention of transmission and treatment of TB? (never, rarely, sometimes, often, or very often)	P9

Abbreviations: K, knowledge; A, attitude; P, practice

Supplementary Table 3. Summary of the process of developing the questionnaire items

Process	Item generation & screening	Pre-testing					Validation	
		First test	Item deleted	Added item	Modified	Un-modified	Total items	Result
Domain	Number of items							
Sociodemographic	18	18	-	-	-	-	18	18
Knowledge	11	11	1	8	8	2	18	18
Attitude	18	18	-	-	-	-	18	18
Practice	9	9	-	-	-	-	9	9
Total	56	56	1	8	8	2	63	63

Supplementary Figure 1. The results of the CFA model



Abbreviations: CFA, confirmatory factor analysis; K, knowledge; A, attitude; P, practice