

Table S1. Selected provinces and number of selected pharmacies in each province.

Regions	Population Sizes	Provinces	Number of Non-Accredited Pharmacies	Number of Selected Non-Accredited Pharmacies	Number of Accredited Pharmacies	Number of Selected Accredited Pharmacies	Number of Respondents (response rate)	Response Rate by Region
Central Thailand	> 1,000,000	Bangkok	4870	205	363	128	70 (16.8%)	17.9%
		Samut Prakan	524	22	40	15		
		NonThaburi	631	27	51	19		
	500,000–1,000,000	Nakhon Pathom	311	13	19	10	15 (25.0%)	
		Chachoengsao	164	10	8	8		
		Samut Sakhon	273	11	8	8		
	< 500,000	Phetchaburi	13	10	6	6	7 (18.4%)	
		Nakhon Nayok	50	10	2	2		
		Trat	84	10	0	0		
Northern Thailand	> 1,000,000	Chiang Mai	600	25	49	13	19 (25.0%)	25.2%
		Chiang Rai	201	10	8	8		
		Nakhon Sawan	138	10	10	10		
	500,000–1,000,000	Kamphaeng Phet	79	10	4	4	10 (23.8%)	
		Sukhothai	76	10	1	1		
		Phichit	61	10	7	7		
	< 500,000	Nan	62	10	2	2	10 (27.0%)	
		Uttaradit	50	10	3	3		
		Uthai Thani	32	10	2	2		
Northeastern Thailand	> 1,000,000	Nakhon Ratchasima	323	14	20	10	15 (25.4%)	22.4%
		Udon Thani	290	12	8	8		
		Surin	133	10	5	5		
		Kalasin	134	10	2	2		
	500,000–1,000,000	Maha Sarakham	157	10	8	8	10 (23.8%)	
		Yasothon	72	10	2	2		
		Bungkan	48	10	0	0		
	< 500,000	Amnat Charoen	36	10	1	1	5 (15.2%)	
		Mukdahan	49	10	2	2		
Southern Thailand	> 1,000,000	Nakhon Sithammarat	262	10	7	7	20 (23.8%)	20.5%
		Songkhla	376	15	43	16		
		Surat Thani	651	26	27	10		
	500,000–1,000,000	Narathiwat	72	10	6	6	8 (18.2%)	
		Yala	59	10	6	6		
		Chumphon	86	10	2	2		
	< 500,000	Phuket	705	30	35	12	12 (17.9%)	
		Satun	59	10	4	4		
		Ranong	38	10	1	1		
Missing							7	
Total			11,769	652	761	348	208 (20.8%)	

To classify strata, firstly, community pharmacies were grouped based on their location into the four regions, which are central Thailand, Northern Thailand, North-eastern Thailand, and Southern Thailand. Secondly, community pharmacies in each regional area were divided into three groups based on the population size of the province in which the pharmacy was located. Three provinces in each of the three group size categories were randomly selected using a random number generator website,

<https://stattrek.com/statistics/random-number-generator.aspx>. This gave thirty-six provinces across four regional areas, covering three population levels.

As of May 2019, there were a small number of accredited pharmacies (The Office of Pharmacy Accreditation (Thailand) 2019), that is, 1054 out of 18,900 Type I community pharmacies (5.6%). Therefore, accredited community pharmacies in each province were selected by quota sampling in order to recruit a reasonable number of accredited pharmacies to the study (as one research question relates to comparing views of pharmacists working in accredited pharmacies versus those who did not). A ratio of approximately 1 to 2 accredited pharmacies to non-accredited pharmacies was used, resulting in approximately 350 accredited pharmacies and 650 non-accredited pharmacies in the final sample.

As there is a wide range in the number of community pharmacies in the different provinces, 35% of accredited pharmacies in each of the selected provinces were invited to participate in the study. Many provinces had few accredited pharmacies, so in cases where there were less than 10 accredited pharmacies in a selected province, all accredited pharmacies were invited. To recruit from the 650 non-accredited pharmacies, approximately 4% of non-accredited pharmacies were randomly selected, with at least 10 non-accredited pharmacies invited from each province. The list of provinces and the number of pharmacies eligible to participate in the study is shown in Table S1. From the resulting list of community pharmacies by province in each of the four regional areas, community pharmacies were randomly selected using a random number generator website, <https://stattrek.com/statistics/random-number-generator.aspx>.