|  |
| --- |
| ***Read aloud to the participant:*** *Thank you for taking the time to participate in this survey. We are surveying people at this clinic to find out their feelings about incentives as a way to help comply with their health care. When we say incentives, we mean providing something like money, food, or transportation vouchers to people as a way to help them change their behaviors. I will first ask you some questions about yourself, and then I will ask you some questions about incentives. Are you ready to begin?* |
| Survey Date | \_\_\_\_/\_\_\_\_\_/\_\_\_\_ (DD/MM/YY) |
| Name of health care center | Select the corresponding health center from the dropdown menu. |
| Patient’s Surname | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Patient’s First Name | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Sex | 1. Male
2. Female
 |
| Patient age, in years: | \_\_\_\_\_\_\_\_\_\_\_\_\_ years |
| 1. What is your marital status?
 | 1. Never married
2. Monogamous married
3. Polygamous married
4. Separated
5. Divorced
6. Widow/widower
 |
| 1. What is your occupation?
 | 1. Self-employed farmer
2. Self-employed businessperson
3. Domestic work in own household
4. Employed by private sector or NGO
5. Civil servant
6. Casual worker (manual/agricultural)
7. Domestic work in another household (maid, babysitter, cook)
8. Student
9. Unemployed
10. Other (specify): \_\_\_\_\_\_\_\_\_\_\_\_\_
 |
| 1. Do you get paid for this work?
 | 1. Yes, regularly
2. Yes, irregularly
3. No
 |
| 1. What is your highest level of schooling?
 | 1. No schooling
2. Primary grade/class 1-4
3. Primary grade/class 5-7
4. Secondary
5. Tertiary
6. Vocational
7. Post-graduate or advanced degree
 |
| 1. Can you read a newspaper or letter written in your native language (or any other language)?
 | 1. Yes
2. No
 |
| 1. What is your personal monthly income?
 | \_\_\_\_\_\_\_\_\_\_\_\_\_ USh |
| 1. What is your entire household’s monthly income?
 | \_\_\_\_\_\_\_\_\_\_\_\_\_ USh |
| 1. How many adults live in your household? Include anyone who either eats or sleeps in the same dwelling or compound as you for at least 4 days a week.
 | \_\_\_\_\_\_\_\_\_\_\_\_\_adults |
| 1. Do you have children?
 | 1. Yes
2. No
 |
| 9a. If yes, how many children do you have? | \_\_\_\_\_\_\_\_\_\_\_\_\_\_children |
| 1. How many rooms are in your household?
 | \_\_\_\_\_\_\_\_\_\_\_\_\_\_rooms |
| 1. Have you ever received an incentive before?
 | 1. Yes
2. No
 |
| 11a. If yes, please describe. (what kind of incentive, what behavior was it trying to induce) | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 11b. If yes, did the incentive help you? | 1. Yes
2. No
 |
| 11c. If no, do you know anyone in your community who has received an incentive? | 1. Yes
2. No
 |
| 11d. If yes, what type of incentive was it? | 1. Cash
2. Transportation vouchers
3. Food
4. Insurance
5. Other, specify: \_\_\_\_\_\_\_\_\_\_\_\_
 |
| 11e. If yes, what was the incentive for? | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 1. Do you have any negative feelings about incentives?
 | 1. Yes
2. No
 |
| 12a. If yes, please specify why: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 1. How do you think a project that gives cash incentives would be received in your community?
 | 1. Accepted
2. Not accepted
 |
| 13a. If not accepted, why not? | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 1. How do you think a project that gives transportation vouchers as incentives would be received in your community?
 | 1. Accepted
2. Not accepted
 |
| 14a. If not accepted, why not? | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 1. How do you think a project that gives food incentives would be received in your community?
 | 1. Accepted
2. Not accepted
 |
| 15a. If not accepted, why not? | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 1. What type of incentive do you think would help you be more likely to return to clinic to finish your evaluation if necessary?
 | 1. Cash
2. Transportation voucher
3. Food
4. Insurance
5. Other, specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_
 |
| 1. What type of incentive do you think would be most effective for helping most people in your community to return to clinic to finish their evaluation if necessary?
 | 1. Cash
2. Transportation voucher
3. Food
4. Insurance
5. Other, specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_
 |
| 1. Do you think that providing the incentive only after you have completed diagnostic testing would help you finish your evaluation?
 | 1. Yes
2. No
 |
| 18a. If no, why not? | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 1. For testing that requires you to come back to clinic on another day, do you think providing the incentive only after you return would help you finish your evaluation?
 | 1. Yes
2. No
 |
| 19a. If no, why not? | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 1. If the doctor prescribes you medication for free, will you take it?
 | 1. Yes
2. No
3. Maybe
 |
| 1. If the doctor prescribes you free medication but you have to return to the clinic daily to take it, will you take it?
 | 1. Yes
2. No
3. Maybe
 |
| 21a. If no, what will prevent you from taking it? | 1. Cost
2. Inconvenience
3. Possible job loss
4. Childcare
5. Education
6. Lack of transportation
7. Other, specify: \_\_\_\_\_\_\_\_\_\_
 |
| 1. If the doctor prescribes you free medication but you have to return to the clinic weekly to take it, will you take it?
 | 1. Yes
2. No
3. Maybe
 |
| 22a. If no, what will prevent you from taking it? | 1. Cost
2. Inconvenience
3. Possible job loss
4. Childcare
5. Education
6. Lack of transportation
7. Other, specify: \_\_\_\_\_\_\_\_\_\_
 |
| 1. If the doctor prescribes you free medication but you have to return to the clinic monthly to take it, will you take it?
 | 1. Yes
2. No
3. Maybe
 |
| 23a. If no, what will prevent you from taking it? | 1. Cost
2. Inconvenience
3. Possible job loss
4. Childcare
5. Education
6. Lack of transportation
7. Other, specify: \_\_\_\_\_\_\_\_\_\_
 |
| 1. If you have to return to the clinic tomorrow to get results of your test, will you be able to return?
 | 1. Yes
2. No
3. Maybe
 |
| 24a. If yes, will be it be easy or difficult for you to return?  | 1. Easy
2. Difficult
 |
| 24b. If difficult, why will it be difficult? | 1. Cost
2. Inconvenience
3. Possible job loss
4. Childcare
5. Education
6. Lack of transportation
7. Other, specify: \_\_\_\_\_\_\_\_\_\_\_\_
 |
| ***INSTRUCTIONS:*** The following questions will randomly alternate between two starting values of 2,000 USh or 10,000 USh. Subsequent offered values will either be increased or decreased, depending on whether the participant declined or accepted the initial or previous offered value.***Read aloud to the participant:*** *We are exploring whether giving patients an incentive when they return to clinic would make it easier to return.*  |
| 1. Would you/could you return for your test results for: - 2,000 USh
* 10,000 USh
 | 1. Yes
2. No
3. Maybe
 |
| 25a. (If no to 2,000 USh) Why not? | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 25b. (If no to 10,000 USh) Why not? | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 1. (If no to 2,000 USh), would you/could you return for your test results for 5,000 USh?
 | 1. Yes
2. No
3. Maybe
 |
| 26a. (If no to 5,000 USh) Why not? | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 1. (If yes to 2,000 USh), would you/could you return for your test results for 500 USh?
 | 1. Yes
2. No
3. Maybe
 |
| 27a. (If no to 500 USh) Why not? | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 1. (If no to 10,000 USh), would you/could you return for your test results for 25,000 USh?
 | 1. Yes
2. No
3. Maybe
 |
| 28a. (If no to 25,000 USh) Why not? | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 1. (If yes to 10,000 USh), would you/could you return for your test results for 5,000 USh?
 | 1. Yes
2. No
3. Maybe
 |
| 29a. (If no to 5,000 USh) Why not? | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **NOTES** | Indicate any additional notes, observations or comments from the interview. |