Description of the Key Informant Survey

The Key Informant survey is part of an important WHO initiative. It is a survey of informed opinions on the responsiveness of health systems. The name “Key Informant” is based on the origin of the survey methodology, which is used extensively in other spheres of social, political and anthropological research. A Key Informant about a health system is defined as someone knowledgeable about the health system.

While the primary goal of the health system is improving health, another important goal is ensuring the responsiveness of the health system to the legitimate expectations of the population. When we refer to responsiveness, we are referring to a number of elements of the ways health systems interact with people; these include: being treated with dignity, being attended to promptly, having autonomy, having personal information kept confidential, having a choice of health care provider, having the health care provider communicate with you in a way you understand, having access to social support during care, and having amenities in the health care environment that are of an acceptable standard.

At present, there is very little global information about the responsiveness of health systems. WHO is making an effort to collect more information about the responsiveness of health systems in WHO Member States. The present effort involves using a strategy of conducting household, postal and Key Informant surveys. Household and postal surveys are being conducted in about 60 countries. While the gold standard would be to use household surveys in all countries, cost constraints are requiring us to mix these with other survey methods. The Key Informant survey will be the simplest and most cost-effective way to cover all 191 WHO Member States. Because the Key Informant survey will be conducted in all countries, including those with household and postal surveys, it will offer us the opportunity to calibrate the results from the different methods.

All data gathered through these surveys will be made available to the government of the country in which they were collected, and should be useful for identifying ways to improve health systems.
“Snowball” message to potential Key Informants

Dear Colleague,

This is an important message. The World Health Organization is conducting a large-scale survey to evaluate the performance of health systems worldwide. This component of the survey is being carried out using Key Informants—persons with experience working in the health sector or a related sector, and both interested in and knowledgeable about the health system in their country.

This web-based survey will take about 30 minutes to complete. By completing this questionnaire you are contributing to this important WHO initiative to assess and enhance the performance of health systems in your country. You can participate in this important initiative by filling in the web-based questionnaire found at http://www.who.int/evidence/KI-Survey.

It is important that this questionnaire be completed by as many people as possible who could make a similar contribution. Therefore, after completing the questionnaire, please forward this message to at least five other people who may be able to contribute to this WHO research initiative. Our deadline for this phase of the study is early February 2001.

Thank you for your participation and cooperation,
The World Health Organization
Alternatives methods to the web-based approach

It is preferred that the web-based approach (using the combination of a “snowball” message and a web-based questionnaire) be used as much as possible. If you feel that this approach may not be usable by potential Key Informants in your country, please choose from among the following alternatives to develop an approach applicable in your country setting. If you need further advice or assistance please contact us at KI-Survey@who.ch. We do not feel that the “snowball” approach will work with these alternative methods within the timeframe required.

1. Paper-based questionnaire:

   The Key Informant Survey questionnaire can be downloaded in English [and other languages as they become available] from [http://www.who.int/evidence/surveys]. You can print copies locally and distribute as appropriate, or we can send you the necessary number of copies by pouch. As the “snowball” approach will not be used for paper-based questionnaires we recommend you distribute to 500 potential key informants in order to get 250 responses. The completed questionnaires can be returned to the WR’s office (not the Ministry). Results can be entered into an Excel spreadsheet or Word table or text file and returned to us via email to KI-Survey@who.ch. Alternatively, the completed questionnaires can be returned (pouch or fax) to Geneva for handling.

2. Telephone survey:

   Your office could conduct a telephone survey of Key Informants using the questionnaire.

3. Questionnaire session at meetings:

   At any meetings where potential Key Informants might be present, a session could be scheduled during which all participants would fill in the questionnaire simultaneously.
Steps required to carry out a Key Informant Survey - DRAFT

Steps required:

1. WR to discuss this approach with the Ministry of Health, to inform on the process and encourage their participation.
2. If other than one of the six official languages is required, WR to coordinate the translation.
3. WRs should decide whether or not they require a paper version for direct distribution.
4. The survey methods:
   - **For web-based method:** WR to distribute “snowball” message to a minimum of 50 potential Key Informants asking them each to pass it on to a minimum of five more. Two follow-ups of 50 key informants, at one-week intervals – one week after sending them the email and again one week later, to see whether they have completed questionnaire.
   - **For paper-based method:** WR to distribute 500 copies of questionnaire.
   - **For telephone or meeting session methods:** WR to ensure 250 responses.
5. For all correspondence please send email to ki-survey@who.ch.

Estimated Time Requirements:

1. The identification of potential Key Informants and sending off of “snowball” email message is expected to take about one day.
2. If using alternative methods 2-3 days is estimated.
3. Follow-up should take a further 1-2 days.
Criteria to be used in the Key Informant survey

It is desired to have a minimum of 250 Key Informants from each Member State, with the following criteria:

Key Informant criteria:

1. They should be over 18 years old.
2. They should have worked in the health sector or a related sector for a minimum of 2 years.
3. They should be recognised as being knowledgeable about the health system.
4. They should be recognised as having the capacity to answer questions based on their general knowledge about health systems and not based solely on their personal experiences.

Sampling criteria:

1. WR to select a minimum of 50 potential Key Informants for the web-based method, 500 for alternative methods
2. In selecting potential Key Informants there should be as close to equal proportions of:
   - males and females,
   - government and private sector,
   - and urban and rural
3. Potential Key Informants should be drawn as equally as possible from the following organizations:
   - Ministry/Department of Health
   - Other ministries or departments
   - Expert advisory panels
   - Universities/academic/schools (e.g., WHO collaborating centres)
   - Non-governmental organizations/religious missions
   - Non-governmental organizations/charities
   - Public sector research organizations
   - Private sector research organizations
   - Public sector clinics or hospitals
   - Private health care practices, clinics or hospitals
   - Disease surveillance/monitoring units
   - Regulatory/standard setting authorities
   - Private insurance companies
   - Public insurance companies
   - Consumer groups/organizations
   - Professional associations (including non-medical professional associations)
   - Other private companies
   - Other public companies
This survey represents a very important initiative of the World Health Organization (a United Nations specialized agency) in evaluating the performance of health systems worldwide.

This questionnaire focuses on measuring how well the health system in your country responds to the legitimate needs of the people. It deals with issues such as different ways the health care services in your country show respect for people and make them the centre of care.

This questionnaire is most likely different from others you have filled out. Some of the questions want you to answer about your own experience with the health system. For example how you have been treated as a patient. Other questions ask you to respond as a person who is knowledgeable about the whole system in your country because of your profession. You will be told which questions to answer from each of these perspectives.

Note that when we refer to a country’s “health system”, we are including both public or private health sectors, as well as organized and traditional health sectors. We appreciate your support in agreeing to complete this questionnaire. The questionnaire has 12 sections, labeled from A to L and completing the entire questionnaire will take between 25 and 30 minutes. Note that you may be asked to skip some questions. Finally, please note that we will not be able to identify you as a result of your responses and all information you provide is completely confidential.

If you want to know more about the work on health systems performance, please refer to the website: http://www.who.int/whr/. If you do not have access to the web, please contact your local WHO office for more information about the 2000 World Health Report.
A. ABOUT YOU

This section asks some general questions about your background, what health system you will be reporting on for the rest of the questionnaire and how you heard about the survey.

1. What country are you going to report on for this survey?
   ____________________ (Specify)

2. Are you a citizen of this country?
   - [ ] Yes
   - [ ] No

3. What country are you a national of? (Only answer if you answered no to question 2)
   ____________________ (Specify)

4. How old are you?
   ___________ Years

5. Are you female or male?
   - [ ] Female
   - [ ] Male

6. What is the highest grade or level of schooling/education that you have completed?
   - [ ] Less than primary school
   - [ ] Primary school
   - [ ] Secondary school
   - [ ] High school or equivalent
   - [ ] College or university

7. How many years of formal education, including higher education, have you completed?
   ___________ years

8. Please describe your working environment by marking the appropriate boxes. (Check all that are appropriate)
   - [ ] Urban
   - [ ] Rural
   - [ ] Private
   - [ ] Public
   - [ ] Clinical setting
   - [ ] Non-clinical setting

9. Which of the following organizations describes where you spend most of your time working?
   - [ ] Ministry/Department of Health
   - [ ] Other ministries or departments
   - [ ] Consumer/patient groups/organizations
   - [ ] Universities/ academic institutions/schools
   - [ ] WHO collaborating centres
   - [ ] Non-governmental organizations/religious missions
   - [ ] Non-governmental organizations/charities
   - [ ] Public sector research organizations
   - [ ] Private sector research organizations
   - [ ] Public sector clinics of hospitals
   - [ ] Private health care practices, clinics or hospitals
   - [ ] Expert advisory panels
   - [ ] Disease surveillance/monitoring units
   - [ ] Regulatory/standard setting authorities
   - [ ] Private insurance companies
   - [ ] Public insurance companies
   - [ ] Professional associations (including non-medical professional associations)
   - [ ] Other private companies
   - [ ] Other public companies
   - [ ] International organizations
   - [ ] Other

10. Do you have any public or private health insurance funds to cover visits to doctors or other health care providers where you do not stay over night? (Include national health insurance schemes as public insurance coverage if relevant to your country.)
   - [ ] Yes
   - [ ] No

11. Do you have any public or private health insurance funds to cover hospital inpatient care?
   - [ ] Yes
   - [ ] No
12. The different types of places you can get health services are listed below. Please can you indicate the number of times you went to each of them in the last 30 days for your personal medical care. \((\text{Leave blank if no visits.})\)

**Times**
- General Practitioners
- Dentists
- Specialists
- Physiotherapists
- Chiropractors
- Traditional healers
- Clinics (staffed mainly by nurses, operating separately from a hospital)
- Hospital outpatient facilities
- Hospital inpatient services
- Pharmacies (where you talked to someone about your care and did not just purchase medicine)
- Home health care services (number of home visits)
- Other

13. How did you learn about this survey?
- Through a WHO representative
- Through the Ministry of Health
- Through another government department
- Through a professional organization
- Through a web advertisement or link
- Through a newspaper advertisement
- Through a colleague/business associate
- Through a friend
- Other

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### B. OVERALL HEALTH

This section asks about your health.

1. In general, how would you rate your health today?
   - Very good
   - Good
   - Moderate
   - Bad
   - Very Bad

2. Overall in the last 30 days, how much difficulty did you have with moving around?
   - None
   - Mild
   - Moderate
   - Severe
   - Extreme

3. Overall in the last 30 days, how much difficulty did you have with self-care, such as washing or dressing yourself?
   - None
   - Mild
   - Moderate
   - Severe
   - Extreme

4. Overall in the last 30 days, how much difficulty did you have with work or household activities?
   - None
   - Mild
   - Moderate
   - Severe
   - Extreme

5. Overall in the last 30 days, how much pain or discomfort did you have?
   - None
   - Mild
   - Moderate
   - Severe
   - Extreme
6. Overall in the last 30 days, how much distress, sadness or worry did you experience?
   - None
   - Mild
   - Moderate
   - Severe
   - Extreme

7. Overall in the last 30 days, how much difficulty did you have with concentrating or remembering things?
   - None
   - Mild
   - Moderate
   - Severe
   - Extreme

8. Overall in the last 30 days how much difficulty did you have with personal relationships or participation in the community?
   - None
   - Mild
   - Moderate
   - Severe
   - Extreme

9. In the last 30 days, as a result of your physical or emotional health, how many days were you completely unable:
   - To do any household work: ________ Days
   - To go to work: ________ Days

10. Considering different aspects of your own health today as you described it earlier, where would you place yourself on this scale? Please indicate by drawing an arrow on the scale below.
C. DIFFICULTIES USING THE HEALTH SYSTEM

Please refer to your personal experiences when answering C1 and C2.

1. In the last 12 months, did you ever not seek health care at outpatient facilities (for example, local doctors, or clinics, or hospital outpatient units) because you could not afford it?
   - Yes
   - No

2. In the last 12 months, did you ever not seek hospital care because you could not afford it?
   - Yes
   - No

Please refer to your knowledge about the health system you are most familiar with when answering C3 and C4.

3. How often do you think people in your country consult health care providers who are friends or relatives for free, as the consultation was a “favour”? 
   - Always
   - Usually
   - Sometimes
   - Never

4. Please check with either a yes or no if you think that people in your country are discriminated against by the health system for any of the following reasons: (Check all that apply)
   - Yes
   - No
   - Nationality
   - Social class
   - Lack of private insurance
   - Ethnicity
   - Colour
   - Sex
   - Language
   - Religion
   - Political/other beliefs
   - Health status
   - Lack of wealth or money

D. RESPONSIVENESS

Section D, E, F and G ask about the responsiveness of health services.

Responsiveness means the following:
- being treated with dignity,
- being attended to promptly,
- having autonomy,
- having personal information kept confidential,
- having a choice of health care provider,
- having the health care provider communicate with you in a way you understand,
- having access to social support during care,
- having amenities in the health care environment that are of an acceptable standard.

In order to keep the questionnaire short, we are randomising the questions on these different issues, and in the next 4 sections you will only be asked about communication and dignity.

Before the questions about responsiveness, we ask about your utilization of health services.

Utilization of Health Services

1. Have you received any health care in the last 12 months? (Including visits to local doctors or alternative health care providers for any minor reason, and stays in hospitals. If you are a doctor, exclude treating yourself. If you did not have any health care in the last 12 months, go to Section F)
   - Yes
   - No → Go to Section F (evaluating your health system)

2. In the last 12 months, did you get any health care at an outpatient health facility or did a health care provider visit you at home? (An outpatient health facility is a doctor’s consulting room, a clinic, hospital outpatient unit or any alternative provider - any place outside your home where you did not stay overnight.)
   - Yes
   - No
3. In the last 12 months, did you get most of your health care at a health facility or most from a health provider who visited you in your home?
   □ Mostly at a health facility
   □ Mostly from a health provider at home
   □ Equally from both

4. When was your last (most recent) visit to a health care facility or from a health care provider? Was it...
   □ In the last 30 days?
   □ In the last 3 months?
   □ In the last 6 months?
   □ Between 6 months and 12 months ago?
   □ Don’t remember

5. Was the last place you visited your usual place of care (if you have a usual place of care for the problem for which you presented)?
   □ Yes
   □ No
   □ Not applicable, don’t have a usual place

When answering questions D6 to D13, please reflect on all personal experiences you have had with the health system you elected to report on in the last 12 months. The health system you are reporting on should be the one you are most familiar with.

Communication

6. In the last 12 months, how often did doctors, nurses or other health care providers listen carefully to you?
   □ Always
   □ Usually
   □ Sometimes
   □ Never

7. In the last 12 months, how often did doctors, nurses or other health care providers, explain things in a way you could understand?
   □ Always
   □ Usually
   □ Sometimes
   □ Never

8. In the last 12 months, how often did doctors, nurses, or other health care providers give you time to ask questions about your health problem or treatment?
   □ Always
   □ Usually
   □ Sometimes
   □ Never

9. Now, overall, how would you rate your experience of how well health care providers communicated with you in the last 12 months?
   □ Very good
   □ Good
   □ Moderate
   □ Bad
   □ Very bad

Dignity

10. In the last 12 months, when you sought health care, how often did doctors, nurses or other health care providers treat you with respect?
    □ Always
    □ Usually
    □ Sometimes
    □ Never

11. In the last 12 months, how often did the office staff, such as receptionists or clerks, treat you with respect?
    □ Always
    □ Usually
    □ Sometimes
    □ Never

12. In the last 12 months, how often were your physical examinations and treatment done in a way that your privacy was respected?
    □ Always
    □ Usually
    □ Sometimes
    □ Never

13. Now, overall, how would you rate your experience of being treated with dignity at the health services in the last 12 months?
E. CARE AT PLACES YOU STAY OVERNIGHT

This section asks about your personal experiences of the responsiveness of inpatient health services if you had any health care in the last 12 months. If you have not had any inpatient health care in the last 12 months, you should go to Section F.

1. Have you stayed overnight in a health care centre or hospital in the last 12 months?
   - □ Yes
   - □ No ➔ Go to beginning of Section F

Communication

2. Overall, how would you rate your experience of how well health care providers communicated with you during your stay in the hospital in the last 12 months?
   - □ Very good
   - □ Good
   - □ Moderate
   - □ Bad
   - □ Very bad

Dignity

3. Overall, how would you rate your experience of being treated with dignity at the hospital in the last 12 months?
   - □ Very good
   - □ Good
   - □ Moderate
   - □ Bad
   - □ Very bad

F. EVALUATING YOUR HEALTH SYSTEM

This section asks you about different aspects of responsiveness of the health system you are most familiar with. We would like you to think about what you know about the responsiveness of the whole health system, and not just your own personal experiences. Please try to answer all questions for both the public and private health sectors.

Communication

1. How often are patients provided information on alternative treatment options?
   - Public Sector: □ Always
   - Private Sector: □ Always
   - □ Usually
   - □ Sometimes
   - □ Never

2. How often do health care providers explain diagnoses and treatments in a way that it is easy for patients to understand?
   - Public Sector: □ Always
   - Private Sector: □ Always
   - □ Usually
   - □ Sometimes
   - □ Never

3. How often are patients encouraged to ask questions about diseases, treatment and care?
   - Public Sector: □ Always
   - Private Sector: □ Always
   - □ Usually
   - □ Sometimes
   - □ Never

4. How would you rate the communicability of information the health system provides about how to avoid getting ill?
   - □ Very Good
5. If your country has public, private, national or social health insurance systems, please indicate how would you rate the clarity of the communication these systems use to inform people about payments and benefits?

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6. Considering all the factors that you have reported on (F1-F5), how would you rate the health system in your country in terms of communicating with the population on a scale of very good to very bad?

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### Dignity

7. How often are patients treated with respect by health care providers?

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8. How often are patients treated with respect by office staff, such as receptionists or clerks?

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9. How often are the human rights of patients with communicable diseases such as AIDS or leprosy safeguarded within the health system?

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10. How often is respect shown for the patient’s desire for privacy during treatment and examinations?

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11. Considering all the factors that you have reported on (F7-F10), how would you rate the health system in your country in terms of treating patients with dignity on a scale of very good to very bad?

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G. RESPONSIVENESS SCENARIOS

Consider the following scenarios describing different experiences of responsiveness and rate them on a scale from very good to very bad.

1. [Kim] took her six month old infant went to the health centre for her regular check-up. The nurse was very annoyed when she found that Kim had forgotten to bring the baby's growth chart with her. She scolded her loudly in the hearing of all the other mothers who had come to the clinic, and kept grumbling about inconsiderate forgetful mothers who caused extra work as she weighed the baby.

   How would you rate Kim's experience of how the health care provider treated her with dignity?
   □ Very good
   □ Good
   □ Moderate
   □ Bad
   □ Very bad

2. [Rose] is an elderly woman who is illiterate. Lately, she has been feeling dizzy and has problems sleeping. The doctor did not seem very interested in what she was telling him. He told her it was nothing and wrote something on a piece of paper, telling her to get the medication at the pharmacy.

   How would you rate Rose's experience of how the health care provider communicated with her?
   □ Very good
   □ Good
   □ Moderate
   □ Bad
   □ Very bad

3. [Anya] took her three-month old infant for her vaccination. The nurse asked her why she had not been to the clinic before, and was sympathetic to hear that Anya had a problem finding transport. She advised her about the importance of regularly monitoring the growth of her baby.

   How would you rate Anya's experience of how the health care provider treated her with dignity?
   □ Very good
   □ Good
   □ Moderate
   □ Bad
   □ Very bad

4. [Florence] goes to the hospital as she has a pain in her stomach. The nurse shouts at her for not bringing her health card. Two other nurses who are standing by make rude comments about Florence's family and those from her village. Though Florence is in pain, and moaning she is not asked to sit down while her personal details are entered in the register.

   How would you rate Florence's experience of how the health care provider treated her with dignity?
   □ Very good
   □ Good
   □ Moderate
   □ Bad
   □ Very bad

5. [Carmen] has gone for a blood test and the doctor has told her that she has “diabetes mellitus” and that her “pancreatic activity is faulty”. He has also told her she needs “insulin injections three times a day” and that she should watch for “hypoglycemia”. If she does not control her blood sugar she may also go blind. Carmen feels very bad because she does not understand what the doctor is
talking about, but she has to leave because he has already called the next patient.

How would you rate Carmen’s experience of how the health care provider communicated with her?

☐ Very good
☐ Good
☐ Moderate
☐ Bad
☐ Very bad

6. [Julia] visits the health care centre for treatment at a time when the centre is very crowded. The patients are all impatient to get their treatment and are reluctant to queue and wait for their turn. The nurses are very patient most of the time about asking patients to wait their turn, but occasionally they get angry and shout at her for breaking the queue.

How would you rate Julia’s experience of how the health care provider treated her with dignity?

☐ Very good
☐ Good
☐ Moderate
☐ Bad
☐ Very bad

7. [Deborah] is a young woman who has been brought to the clinic by her family because she feels very anxious and distressed. She is also afraid that she may die although she is in good health. The doctor has taken time to listen and reassure her and has invited Deborah to come to the clinic whenever she needs to.

How would you rate Deborah’s experience of how the health care provider communicated with her?

☐ Very good
☐ Good
☐ Moderate
☐ Bad
☐ Very bad

8. [Sonia] has arrived at the clinic with her three-month-old baby girl. The mother says that the baby has lost a lot of weight, has had fever for two days and will not take her milk. The nurse has listened to the mother without interrupting. She has asked her for additional information and has encouraged the mother to ask her questions if she did not understand.

How would you rate Sonia’s experience of how the health care provider communicated with her?

☐ Very good
☐ Good
☐ Moderate
☐ Bad
☐ Very bad

9. [Conrad] is suffering from AIDS. When he enters the health care unit the doctor shakes his hand. He asks him to sit down and inquires what his problems are. The nurses are concerned about Conrad. They give him advice about improving his health.

How would you rate Conrad’s experience of how the health care provider treated him with dignity?

☐ Very good
☐ Good
☐ Moderate
☐ Bad
☐ Very bad

10. [Mario] has been told that he has epilepsy and that needs to take medication. The doctor has very briefly explained what the condition is. He is very busy and there is a queue of patients waiting to see him. Mario would like to know more about what he has, but feels that there is not time to ask questions and that the doctor will not be very helpful.

How would you rate Mario’s experience of how the health care providers communicated with him?

☐ Very good
☐ Good
☐ Moderate
☐ Bad
☐ Very bad

11. [Said] has AIDS. When he goes to his health centre he feels that all the doctors and nurses are unfriendly towards him. They do not talk to him freely. Often they deliberately ignore him. He often has to beg them to answer his questions.

How would you rate Said’s experience of how the health care provider treated him with dignity?
12. [Thomas] has been told that he has cataracts and that he needs an operation. He has never had his eyes checked and does not understand why he cannot see well. The doctor has explained to Thomas what he has, but he has not understood a word and is afraid to ask again. The doctor has not checked whether or not he has understood.

How would you rate Thomas's experience of how the health care provider communicated with him?

☐ Very good
☐ Good
☐ Moderate
☐ Bad
☐ Very bad

13. [Patricia] goes to a health care unit close to her home regularly. The nurses there are very busy, but they always speak pleasantly to her. The receptionist however is often in a bad mood, and when she is in a bad mood she shouts at Patricia, and at other patients. All appointments to meet doctors and nurses have to be made through this receptionist so the patients put up with her rudeness.

How would you rate Patricia's experience of how the health care provider treated her with dignity?

☐ Very good
☐ Good
☐ Moderate
☐ Bad
☐ Very bad

14. [Jiang] has been having pain in his chest for a while. Whenever he coughs or exercises his chest is painful. He has been smoking for 30 years. After examining him, the doctor has told him that he will get cancer if he does not stop smoking. The doctor is not very sympathetic and has not even suggested what Jiang could do to give up smoking.

How would you rate Jiang's experience of how the health care provider communicated with him?

☐ Very good
☐ Good
☐ Moderate
☐ Bad
☐ Very bad
H. THE RESPONSIVENESS OF THE HEALTH SYSTEM TO DIFFERENT GROUPS IN THE POPULATION

In this section we are asking you to rate health system performance with respect to different population groups and with respect to the elements of responsiveness. When making the rating, we would like you to think about the part(s) of the health system you are most familiar with.

There are two sets of responsiveness elements that we ask you about:

1) Respect of persons elements, meaning:
- being treated with dignity,
- having autonomy,
- having personal information kept confidential,
- having the health care provider communicate with you in a way you understand;

2) Client orientation elements, meaning:
- being attended to promptly,
- having a choice of health care provider,
- having access to social support during care,
- having amenities in the health care environment that are of an acceptable standard.

First, in question H1, we would like to ask you about how you feel the health system performs on average with respect to these groups of elements. Then we will ask you about how the health system performs with respect to different groups in the population.

For example in H4, you are asked to rate the performance of the health system, on a scale from 0 to 10, where 0 is the worst and 10 is the best, for ensuring respect of persons and client orientation to those who are poor, compared to those who are rich.

For questions H1 to H7 and using a scale from 0 to 10, with 0 being the worst and 10 the best, how would rate health system performance in the context of different population groups cited in each of the columns below? Think of the part(s) of the health system you are most familiar with.

<table>
<thead>
<tr>
<th>1. Average for General Population</th>
<th>Average for general population</th>
</tr>
</thead>
<tbody>
<tr>
<td>Respect of persons</td>
<td></td>
</tr>
<tr>
<td>Client orientation</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>2. Male /Female</th>
<th>Male</th>
<th>Female</th>
</tr>
</thead>
<tbody>
<tr>
<td>Respect of persons</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Client orientation</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>3. Less than 65 years/65 years or older</th>
<th>Up to 65yrs</th>
<th>65yrs and over</th>
</tr>
</thead>
<tbody>
<tr>
<td>Respect of persons</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Client orientation</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>4. Rich/poor</th>
<th>Rich</th>
<th>Poor</th>
</tr>
</thead>
<tbody>
<tr>
<td>Respect of persons</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Client orientation</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>5. Those with primary school education/those without primary school education</th>
<th>With primary schooling</th>
<th>Without primary schooling</th>
</tr>
</thead>
<tbody>
<tr>
<td>Respect of persons</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Client orientation</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>6. Urban/Rural</th>
<th>Urban</th>
<th>Rural</th>
</tr>
</thead>
<tbody>
<tr>
<td>Respect of persons</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Client orientation</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>7. Indigenous/minority groups</th>
<th>Indigenous or minority groups</th>
<th>Rest of population</th>
</tr>
</thead>
<tbody>
<tr>
<td>Respect of persons</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Client orientation</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
I. INEQUALITIES IN RESPONSIVENESS

The next questions are about how you value changes in the distribution of responsiveness across different parts of the population.

When we refer to responsiveness, we are referring to all the elements of responsiveness. These include:

- being treated with dignity,
- being attended to promptly,
- having autonomy,
- having personal information kept confidential,
- having a choice of health care provider,
- having the health care provider communicate with you in a way you understand,
- having access to social support during care,
- having amenities in the health care environment that are of an acceptable standard.

The following three questions are hypothetical scenarios designed for you to show your preferences on inequalities in responsiveness. In each scenario there are two Populations, A and B, each made up of seven individuals.

1. **Scenario 1**

- Population A has an average level of responsiveness of 4 out of 10
- Population B has an average level of responsiveness of 7 out of 10
- In both populations A and B individuals are distributed similarly around the mean

Which population, A or B, do you think has more inequality in responsiveness?

- Population A has more inequality in responsiveness
- Population B has more inequality in responsiveness
- Both have the same inequality in responsiveness

---

**Sample Data:**

**Population A**

<table>
<thead>
<tr>
<th>Level of responsiveness</th>
<th>Number of people</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>3</td>
<td>1</td>
</tr>
<tr>
<td>4</td>
<td>1</td>
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<td>5</td>
<td>1</td>
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<tr>
<td>6</td>
<td>1</td>
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<tr>
<td>7</td>
<td>1</td>
</tr>
<tr>
<td>8</td>
<td>1</td>
</tr>
<tr>
<td>9</td>
<td>1</td>
</tr>
<tr>
<td>10</td>
<td>1</td>
</tr>
</tbody>
</table>

**Population B**

<table>
<thead>
<tr>
<th>Level of responsiveness</th>
<th>Number of people</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>3</td>
<td>1</td>
</tr>
<tr>
<td>4</td>
<td>1</td>
</tr>
<tr>
<td>5</td>
<td>1</td>
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<tr>
<td>6</td>
<td>1</td>
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<tr>
<td>7</td>
<td>1</td>
</tr>
<tr>
<td>8</td>
<td>1</td>
</tr>
<tr>
<td>9</td>
<td>1</td>
</tr>
<tr>
<td>10</td>
<td>1</td>
</tr>
</tbody>
</table>
2. **Scenario 2**

- Populations A and B have exactly the same inequality of responsiveness
- Populations A and B have the same average level of responsiveness
- In both populations two individuals experience a transfer of 2 units of responsiveness
- In Population A, one person with 2 units loses 1 unit of responsiveness and another person with 8 units gains 1 unit of responsiveness
- In Population B, one person with 4 units loses 1 unit of responsiveness and another person with 6 units gains 1 unit of responsiveness.

**Which population has a greater increase in inequality of responsiveness?**

- [ ] Population A has a greater increase in inequality of responsiveness
- [ ] Population B has a greater increase in inequality of responsiveness
- [ ] The increase is the same for both populations
3. **Scenario 3**

- Populations A and B have the same average level of responsiveness.
- Populations A and B have different inequality in responsiveness.
- In both populations there is a transfer of 8 units of responsiveness; one person with 5 units loses 4 units and another person with 5 units gains 4 units.

Which population experiences a greater increase in inequality of responsiveness?

- Population A has a greater increase in inequality of responsiveness.
- Population B has a greater increase in inequality of responsiveness.
- The increase is the same for both populations.

Before transfer

After transfer
J. THE IMPORTANCE OF DIFFERENT ELEMENTS OF RESPONSIVENESS

Read the cards below. These provide descriptions of some different ways health care services show respect for people and make them the centre of care.

DIGNITY
♦ being shown respect
♦ maintaining privacy during physical examinations

CONFIDENTIALITY OF INFORMATION
♦ having your medical history kept confidential
♦ consulting with health providers in a manner that your discussions cannot be overheard

CHOICE
♦ being able to choose the doctor or nurse or other person usually providing your health care
♦ being able to go to another place for health care if you want to do so

PROMPT ATTENTION
♦ having a health care provider a reasonable distance and travel time from your home
♦ having fast care in emergencies
♦ having short waiting times for appointments and consultations, and getting tests done quickly
♦ having short waiting lists for non-emergency surgery

AUTONOMY
♦ being involved in deciding on your care and treatment if you want to
♦ having the provider ask your permission before starting treatments or tests

QUALITY OF SURROUNDINGS AND ENVIRONMENT
♦ having enough space, seating and fresh air in the waiting room
♦ having a clean facility (including clean toilets)
♦ having healthy and edible food

SOCIAL SUPPORT DURING CARE
♦ being allowed visits from relatives and friends
♦ being allowed the provision of food and other gifts by relatives
♦ having freedom for religious practices

COMMUNICATION
♦ having the provider listen to you carefully
♦ having the provider explains things so you can understand
♦ having time to ask questions

1. Using the ranks 1 to 8, 1 being the most important, and 8 being the least important, rank the elements from most important to least important. Please note that each element should have its own number between 1 and 8 unless you think that certain elements share the same rank.

<table>
<thead>
<tr>
<th>Dignity</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Autonomy</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Confidentiality of Information</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Communication</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Prompt Attention</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Social Support during care</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Quality of Surroundings or Environment</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Choice of Care Provider/Institution</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
2. The slices in the pie chart below refer to two groups of the elements of responsiveness. These groups are:

1) Respect of persons elements (ROP), meaning:
- being treated with dignity,
- having autonomy,
- having personal information kept confidential,
- having the health care provider communicate with you in a way you understand;

2) Client orientation elements (CLO), meaning:
- being attended to promptly,
- having a choice of health care provider,
- having access to social support during care,
- having amenities in the health care environment that are of an acceptable standard.

Please select the pie which most closely shows the importance you place on respect of persons (ROP) elements versus client orientation (CLO) elements of responsiveness, or draw your own pie slices in (f).

a) CLO 75%  ROP 25%

b) CLO 67%  ROP 33%

c) CLO 50%  ROP 50%

d) CLO 33%  ROP 67%

e) CLO 25%  ROP 75%

Please draw in the pie slices. Label the pie slices and indicate the share out of 100 that each pie slice represents.

f) Other (specify)
K. HEALTH STATES

The following questions ask you to rate different health states.

1. [John] cannot wash, groom or dress himself without personal help. He has no problems with feeding.
   How would you rate his difficulty with self-care?
   - None
   - Mild
   - Moderate
   - Severe
   - Extreme

2. [Mark] has joint pains that are present almost all the time. They are at their worst in the first half of the day. Taking medication reduces the pain though it does not go away completely. The pain makes moving around, holding and lifting things, quite uncomfortable.
   How would you rate how much pain or discomfort he has?
   - None
   - Mild
   - Moderate
   - Severe
   - Extreme

3. [Peter] can wash his face and comb his hair, but cannot wash his whole body without help. He needs assistance with putting clothes on over his head, but can put garments on the lower half of his body. He has no problems with feeding.
   How would you rate his difficulty with self-care?
   - None
   - Mild
   - Moderate
   - Severe
   - Extreme

4. [Phil] has pain in the hip that causes discomfort while going to sleep. The pain is there throughout the day but does not stop him from walking around.
   How would you rate how much pain or discomfort he has?
   - None
   - Mild
   - Moderate
   - Severe
   - Extreme

5. [Rachel] feels pain and discomfort while washing, and in combing her hair. As a result, she neglects her personal appearance. She needs assistance with putting on and taking off clothes. She has no problems with feeding.
   How would you rate her difficulty with self-care?
   - None
   - Mild
   - Moderate
   - Severe
   - Extreme

6. [Helena] keeps herself neat and tidy. She requires no assistance with cleanliness, dressing and eating.
   How would you rate her difficulty with self-care?
   - None
   - Mild
   - Moderate
   - Severe
   - Extreme

7. [Jim] has back pain that makes changes in body position very uncomfortable. He is unable to stand or sit for more than half an hour. Medicines decrease the pain a little, but it is there all the time and interferes with his ability to carry out even day to day tasks.
   How would you rate how much pain or discomfort he has?
   - None
   - Mild
   - Moderate
   - Severe
   - Extreme
8. [Anne] takes twice as long as others to put on and take off clothes, but needs no help with this. She is able to bathe and groom herself, though that requires effort and leads to reducing the frequency of bathing to half as often as before. She has no problems with feeding.

   How would you rate her difficulty with self-care?
   □ None
   □ Mild
   □ Moderate
   □ Severe
   □ Extreme

9. [Laura] has a headache once a month that is relieved one hour after taking a pill. During the headache she can carry on with her day to day affairs.

   How would you rate how much pain or discomfort she has?
   □ None
   □ Mild
   □ Moderate
   □ Severe
   □ Extreme

10. [Sue] requires the constant help of a person to wash and groom herself and has to be dressed and fed.

    How would you rate her difficulty with self-care?
    □ None
    □ Mild
    □ Moderate
    □ Severe
    □ Extreme

11. [Tom] has a toothache for about 10 minutes, several times a day. The pain is so intense that Tom finds it difficult to concentrate on work.

    How would you rate how much pain or discomfort he has?
    □ None
    □ Mild
    □ Moderate
    □ Severe
    □ Extreme

12. [Paul] has no problems with cleanliness, dressing and eating. However, he has to wear clothes with special fasteners as joint problems prevent him from buttoning and unbuttoning clothes.

    How would you rate his difficulty with self-care?
    □ None
    □ Mild
    □ Moderate
    □ Severe
    □ Extreme

13. [Patricia] has a headache once a week that is relieved 3-4 hours after taking a pill. During the headache she has to lie down, and cannot do any other tasks.

    How would you rate how much pain or discomfort she has?
    □ None
    □ Mild
    □ Moderate
    □ Severe
    □ Extreme

14. [Steve] has excruciating pain in the neck radiating to the arms that is very minimally relieved by any medicines or other treatment. The pain is sharp at all times and often wakes him from sleep. It has necessitated complete confinement to the bed and often makes him think of ending his life.

    How would you rate how much pain or discomfort he has?
    □ None
    □ Mild
    □ Moderate
    □ Severe
    □ Extreme
L. RELATIVE IMPORTANCE OF HEALTH SYSTEM GOALS

To answer the following questions, you need to understand what is meant by the term “Health System Goals”.

The main goals of a health system of a country are:

1. Improving the health of the population
2. Improving responsiveness of the health system
3. Fairness in financial contribution.

These goals mean the following:

1. Improving the health of the population
   - The whole population lives longer
   - The whole population lives with less illness
   - There is more equality in length and quality of life and illness.

2. Improving responsiveness of the health system,
   - The health system respects the rights of the individual for dignity, autonomy, confidentiality and clear communication
   - The health system provides basic amenities in a prompt way, allows adequate social support and gives people a choice of provider
   - The health system treats all people equally with respect to the above issues.

3. Fairness in financial contribution:
   - Every household should pay a fair share towards the health system
   - This means that healthy people share costs for the services for the ill; and richer people subsidize the services for the poor.
1. Select the pie which most closely shows the importance you place on the three health system goals, or draw your own pie slices in (h):

a) [Pie chart with 33% Financing, 34% Health, 33% Responsiveness]

b) [Pie chart with 30% Financing, 40% Health, 30% Responsiveness]

c) [Pie chart with 25% Financing, 50% Health, 25% Responsiveness]

d) [Pie chart with 20% Financing, 50% Health, 30% Responsiveness]

e) [Pie chart with 30% Financing, 50% Health, 20% Responsiveness]

f) [Pie chart with 20% Financing, 60% Health, 20% Responsiveness]

g) [Pie chart with 15% Financing, 70% Health, 15% Responsiveness]

h) Other (specify)

Please draw in the pie slices. Label the pie slices and indicate the share out of 100 that each pie slice represents.
HEALTH: IMPROVING AVERAGE LEVEL VERSUS IMPROVING EQUALITY

2. Select the pie which most closely shows the importance you place on improving average level of health versus improving the equality of health in the population, or draw your own pie slices in (f):

a) 

b) 

c) 

d) 

e) 

f) Other (specify)

Please draw in the pie slices. Label the pie slices and indicate the share out of 100 that each pie slice represents.
RESPONSIVENESS: IMPROVING AVERAGE LEVEL VERSUS IMPROVING EQUALITY

3. Select the pie which most closely shows the importance you place on improving the average level of responsiveness versus improving equality, or draw your own pie slices in (f).

a)  

b)  

c)  

d)  

e)  

f) Other (specify)

Please draw in the pie slices. Label the pie slices and indicate the share out of 100 that each pie slice represents.
Implementation Notes

The intention was always to make the questionnaire available to the widest possible audience of key informants.

The questionnaire became unmanageably long in its final stages of development—taking nearly an hour to complete for the average person. In order to reduce the time required for the key informant to complete the questionnaire it was decided to have fixed as well as variable sections. The internet version of the questionnaire randomly selected the variable parts for each respondent. The paper-based questionnaires appeared in four versions; Set A, Set B, Set C and Set D, which together encompassed all the fixed and variable sections (see annexes xxx-xxx – attachments kis-a-en.pdf through kis-d-en.pdf). The variable parts of Set A dealt with communication and dignity. The variable parts of Set B dealt with confidentiality and quality of basic amenities. The variable parts of Set C dealt with social support and choice. The variable parts of Set D dealt with prompt attention and autonomy.

Internet:
The questionnaire was made available on the internet in all six official languages of the Organization, plus Turkish. Not all countries or individuals had good access to the internet, especially in view of the fact that it often took over an hour to complete the questionnaire. We experimented with methods of allowing the user to pick up filling in the questionnaire in a separate session, if interrupted, but this was not a complete solution to the problem.

Paper-based forms:
Where available, WHO country representatives were approached and asked to organize the completion of at least 500 questionnaires by key informants in their country. They were encouraged to use the internet-based questionnaire if possible. However, in order to facilitate their task WRs were offered the option of using paper-based forms should internet access be problematic. The paper-based forms in the six official languages were made available for online downloading or, if local printing was difficult, we offered to send 500 copies by pouch.

In the event that it was necessary to translate the questionnaire into another language than the official six languages of WHO/HQ, translation software developed by our terminology staff was used. Thus, paper-based versions of the questionnaires were available in some 30 languages.

Instructions for administering the paper-based survey were also made available online (see annex xxx -- attachment kis-instructions-en.pdf). This document also contained instructions for local data entry as well for returning the questionnaire data to Geneva.

Completed questionnaires were thus received in Geneva in electronic form (internet online version of questionnaires, and Excel files) and in paper-based form; which was then necessary to have keypunched. In total, approximately 17 thousand completed questionnaires were available for analysis.