

Healthcare Navigation Questionnaire

This survey collects information about how patients choose healthcare facilities and the challenges they face. Your responses are anonymous.

* Indicates required question

Informed Consent

You are invited to participate in a research study investigating patients' experiences and needs when navigating healthcare services in Kigali, Rwanda.

Research Team

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Purpose of the Study

The purpose of this questionnaire is to understand how patients choose healthcare facilities, the challenges they experience when accessing healthcare services, and the information they would find useful when selecting an appropriate health facility.

Your participation is voluntary. You may choose not to participate or stop completing the questionnaire at any time. No personally identifying information will be collected, and your responses will be treated confidentially and used solely for research purposes. The questionnaire takes approximately **10–15 minutes** to complete.

If you have questions about the study or your participation, you may contact the researcher or the study supervisors using the contact information provided in the study documentation.

By selecting **"I agree to participate,"** you confirm that you have read and understood the information above and voluntarily agree to participate in this study

1. Consent to Participate *

Mark only one oval.

- ☐ I agree to participate
- ☐ I do not agree to participate

2. Hospital or clinic attending *

Mark only one oval.

- ☐ Masaka DH
- ☐ DMC
- ☐ POLYFM
- ☐ Kacyiru DH
- ☐ KIBAGABAGA DH
- ☐ MUHIMA DH

3. Age group *

Mark only one oval.

- ☐ 18-24 years
- ☐ 25-34 years
- ☐ 35-44 years
- ☐ 45-54 years
- ☐ 55 years and above

4. **Gender ***

Mark only one oval.

- ☐ Male
- ☐ Female

5. **District of residence**

Mark only one oval.

- ☐ Gasabo
- ☐ Kicukiro
- ☐ Nyarugenge
- ☐ Other

6. **Education level**

Mark only one oval.

- ☐ None
- ☐ Primary school
- ☐ Secondary school
- ☐ Technical training
- ☐ University or higher

7. Health insurance *

Mark only one oval.

- ☐ Mutuelle de Santé
- ☐ RSSB
- ☐ MMI
- ☐ Private insurance (UAP, RADIANT,.....)
- ☐ No insurance

8. Smartphone access *

Mark only one oval.

- ☐ Yes – personal
- ☐ Yes – shared
- ☐ No

NAVIGATING HEALTH FACILITIES

9. **How do you choose a health facility (hospital or clinic) ? ***

Mark only one oval.

- ☐ I go to the nearest facility to my home
- ☐ Recommendation from family or friends
- ☐ Previous good experience at that facility
- ☐ Advice from a community health worker (CHW)
- ☐ Online search or social media
- ☐ Other:

10.

*

What is the MOST IMPORTANT factor when choosing a health facility

Mark only one oval.

- ☐ Distance / proximity to my home
- ☐ Whether the service or specialist I need is available
- ☐ Whether a specific doctor I trust works there
- ☐ The expected waiting time
- ☐ Whether my insurance is accepted
- ☐ Quality of care / facility reputation

11. **Have you ever arrived at a facility and found that the service or specialist you needed was NOT available that day?** *

Mark only one oval.

- ☐ Yes – and this happens often (more than half the time)
- ☐ Yes – but only sometimes or rarely
- ☐ No – this has not happened to me

12. *

If you have experienced the above, what did you usually do?

Check all that apply.

- ☐ Waited at the facility until the service was available
- ☐ Asked staff to redirect me to another facility
- ☐ Went to another facility on my own
- ☐ Went home and returned another day
- ☐ Gave up seeking care that day
- ☐ Does not apply to me

13. *

On average, how long do you usually wait before being seen?

Mark only one oval.

- ☐ Less than 30 minutes
- ☐ 30 to 60 minutes
- ☐ 1 to 2 hours
- ☐ More than 2 hours

14. Is the cost of transport to a health facility a barrier for you?

Mark only one oval.

- ☐ Yes – it is a major barrier
- ☐ Sometimes – it depends on the situation
- ☐ No – it is not a problem

SPECIALIST DOCTORS & SERVICES**15. Do you know on which days specialist services (e.g., eye clinic, dental, gynecology, physiotherapy) are available near you**

*

Mark only one oval.

- ☐ Yes – I usually know the schedule
- ☐ No – I do not know the schedule
- ☐ Sometimes – for some services but not all

16. In the past 6 months, have you arrived at a facility where the specialist doctor or service you needed was NOT available?

*

Mark only one oval.

- ☐ Yes – more than once
- ☐ Yes – once
- ☐ No

17. **If a mobile app could show you which specialist doctors are on duty at each facility TODAY, how useful would that be?** *

Mark only one oval.

- ☐ Very useful
- ☐ Somewhat useful
- ☐ Not useful

YOUR CHALLENGES

For each statement below, tick the box that best describes your experience.

18. *

I sometimes go to a facility that is not the right one for my needs.

Mark only one oval.

- ☐ Strongly Disagree
- ☐ Disagree
- ☐ Neutral
- ☐ Agree
- ☐ Strongly Agree

19.

*

I waste time due to not having information about services or waiting times before leaving home

Mark only one oval.

- ☐ Strongly Disagree
- ☐ Disagree
- ☐ Neutral
- ☐ Agree
- ☐ Strongly Agree

20.

*

I spend extra money on transport because I have to visit more than one facility.

Mark only one oval.

- ☐ Strongly Disagree
- ☐ Disagree
- ☐ Neutral
- ☐ Agree
- ☐ Strongly Agree

21.

*

Having better information about facilities before visiting would improve my healthcare decisions.

Mark only one oval.

☐ Strongly Disagree

☐ Disagree

☐ Neutral

☐ Agree

☐ Strongly Agree

MOBILE TECHNOLOGY & APP USE

22.

*

How often do you use a smartphone to access the internet?

Mark only one oval.

☐ Daily

☐ Weekly

☐ Occasionally

☐ Never

23. **How confident are you in using a mobile phone app? ***

Mark only one oval.

- ☐ Very confident – I use apps regularly
- ☐ Confident – I manage with a little effort
- ☐ Somewhat confident – I need occasional help
- ☐ Not confident at all

24. **Would you be willing to use a FREE mobile app to find the right health facility and check doctor / service availability? ***

Mark only one oval.

- ☐ Yes, definitely
- ☐ Possibly – I would try it
- ☐ No

25. **What would be your biggest barrier to using a mobile health navigation app?**

*

Mark only one oval.

- ☐ I do not have a smartphone
- ☐ The cost of mobile internet / data
- ☐ I do not feel confident using apps
- ☐ If The app is not in my preferred language
- ☐ I do not trust information from apps
- ☐ No barrier
- ☐ Other:

WHICH APP FEATURES MATTER MOST TO YOU?

1. 📌 Rank the features below from 1 (Most Important) to 6 (Least Important) by writing a number in the 'Rank' column. Use each number only once

26. **WHICH APP FEATURES MATTER MOST TO YOU?** 🖱️ Rank the features below from 1 (Most Important) to 6 (Least Important) by writing a number in the 'Rank' column. Use each number only once

Mark only one oval per row.

	1	2	3	4	5	6
Which specialist services are available today and on which days	☐	☐	☐	☐	☐	☐
Which specialist doctors are on duty today (name, specialty, hours)	☐	☐	☐	☐	☐	☐
Estimated waiting time at each facility	☐	☐	☐	☐	☐	☐
Distance and directions to the nearest suitable facility	☐	☐	☐	☐	☐	☐
Whether my insurance scheme is accepted at the facility	☐	☐	☐	☐	☐	☐
App content available in Kinyarwanda	☐	☐	☐	☐	☐	☐

YOUR SUGGESTIONS

27.

What information would MOST help you choose the right health facility or doctor?



28. **Do you have any other suggestions or ideas for a healthcare navigation tool in Kigali?**



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