

Appendix I- Questionnaire

University of Gondar
College of Medicine and Health Science,
School of Nursing, Department of Medical Nursing

Study questionnaire on healthcare-seeking behavior and associated factors among older people at
Motta town, East Gojjam Ethiopia, 2023.

Dear Madam/sir good morning /good afternoon

My name is _____ I am working as a data collector on a research project that is being conducted by the University of Gondar. We are interviewing individuals about their healthcare-seeking behavior and associated factors. I am going to ask you some questions that are not difficult to answer. Your name was not being written in this form and was never being used in connection with any information you gave us. All information given by you is kept confidential. Your participation is voluntary, and you are not obligated to answer any question that you do not wish to answer. If you feel uncomfortable with this, please feel free to drop it any time you want.

This took about 30 minutes. Could I have your permission to continue?

1. Yes, (if say yes, thanks and continue with her)
2. No, (if say no, thanks and skip her)

Data collector's name _____ signature _____ date _____

Supervisors name _____ signature. _____ date _____

2.1.English version questioners

Questionnaire ID: _____ Kebele ----- No: _____

Part I: Socio-demographic and individual characteristics

No	Variables	Responses
101	How old are you?	_____years
102	Sex	1. Male 2. Female
103	Religion	1. Orthodox 2. Muslim 3. Protestant 4. Others/specify-----
104	What is your marital status	1. Single 2. Married 3. Divorced 4. Windowed 5. Others (specify _____)
105	What is your level of education	1. Can't read and write 2. Can read and write 3. Primary 4. Secondary 5. College and above
106	What is your occupation?	1. Employ 2. Unemploy 3. Retired and received pension 4. Other (Specify)_____
107	What is your monthly income?	-----ETB
108	What is your living condition?	1. alone 2. With Spouse 3. with child/children 4. Others (specify; _____)

109	Where are the sources of money during illness?	1. Form CBHI 2. Free care 3. Selling agricultural product
110	Do you have a supportive family during illness?	1. Yes 2. No.
111	Are you dependent on others?	1.No 2. Partially 3. Fully
112	Are you a member of CBHI	1. Yes 2. No
113	Approximate distance from the health facilities	_____ Km

Part II: - Self-care and Health-related factors

No	Variables	Response
201	Have you been ill in the last six months?	1. Yes 2. No
202	What was done to treat illnesses?	1. Nothing 2. self -medicated 3. advice HCP at the health facility 4. traditional healer 5. pray
203	If care was not from the HCP at the healthcare facility for Q202 what is the reason?	1. The symptoms were not severe 2. Getting well from the symptoms without treatment 3. Lack of time 4. Lack of money 5. Others (specify _____)
204	If care was from the health facility for q202, how many days after the onset of disease symptoms did you get care from a healthcare provider?	1. Immediately as illness started 2. When it gets worse 3. When it's not reliefs by its own

205	How did you rate the severity of your illness ?	1) Sever 2) Moderate 3) Mild
206	Have you ever been diagnosed/ informed by a doctor with one or more chronic illnesses?"	1. yes 2. no
207	If yes for q 206, which type of chronic illness do you have (more than is possible to answer)	1. Asthma 2. hypertension 3. DM 4. HIV/AIDS 5. Others (specify_____
308	If yes for q 206, did you have a follow-up?	1. Yes 2. No
309	Can you perform a physical exercise at least a walk for 20 minutes per day	1. Yes 2. No
310	Do you currently smoke a cigarette?	1. Yes 2. No

Part IV; Health facilities-related indicators

No	Variables	Responses
401	Do you have confidence in getting a preferred healthcare provider?	1. yes 2. no
402	Do you have confidence in getting medicines at health facilities?	1. yes 2. no
403	Do you have confidence in getting adequate laboratory services at health care facilities?	1. yes 2. no

Part V: - Health care seeking behavior assessment (encircle the correct answer)

Variables	Response
In the past year, have you had any health check-ups without any health complaints at a healthcare center?	Yes
	No
Do you visit any healthcare centers when you have a health condition?	Yes

	No
In the past 1 year, have you ever refused to visit a health center, although you need care?	Yes
	No
Which kind of healthcare centers do you prefer?	Public HC
	Private
	Self-care

Appendix II

Information sheet

Title of the research project: healthcare seeking behavior and associated factors among older people adults at Motta town, East Gojjam Ethiopia, 2023

Investigator: _____
_____.
_____.
_____.

Name of the organization: University of Gondar, College of Medicine and Health Sciences, School of Nursing, Department of Medical Nursing

Introduction

My name is _____ I am a data collector at the University of Gondar. We are conducting research on healthcare-seeking behavior and associated factors among old people in Motta town, East Gojjam Ethiopia. Right now, I am going to give you the relevant information concerning my research and invite you to be part of this research. Before you decide to be part of the research you can talk to anyone to feel comfortable with the research.

If there is any word that you do not understand while I am giving the information, please stop me to ask for an explanation

Purpose of the Research the project

This research was to determine healthcare-seeking behavior and associated factors. Some literature states that in many low- and middle-income countries, the level of healthcare-seeking behavior and significant variables were different in different literature; therefore, this study tries to identify those factors influencing the level of healthcare-seeking behavior, and associated factors for a solution to the problem.

Procedure

This study involves the randomly selected to be one of the study participants if you are willing to take part in this study and we kindly invite you to take part in our project. If you are willing to participate, we are so happy and we need you to clearly understand the aim of this study and to sign the consent form. Finally, you are kindly requested to give your genuine response to the interview questionnaire. You do not need to tell the data collector your name, and all your

responses and the results obtained were kept confidential by using a coding system whereby no one has access to your responses.

Benefits

By participating in this research project, you may feel little discomfort from wasting your time (a maximum of 30 minutes). However, your participation is important to identify the level of HCSB and associated factors.

The result will be disseminated to the University of Gondar College of Medicine and Health Science, School of Nursing, East Gojjam Regional Health Bureau, Motta town health office, and interested partners.

Risk and /or Discomfort: There is no risk or direct benefit in participating in this research project.

Incentives/Payments for Participating: You were not being provided any incentives or payment to take part in this project.

Confidentiality

The information collected from you was kept confidential and stored in a file without your name by assigning a code number to it. It will not be revealed to anyone except the principal investigator.

Right to Refusal or Withdraw

Participating or not participating is the full right of participants, and they can stop participating in the study at any time. They can also skip any question to which they want to respond. You can ask any question that is not clear.

Person to contact

This research project was reviewed and approved by the ethical committee of the University of Gondar. If you have any questions, you can contact any of the following individuals, and you may ask them at any time you want.

Name _____

Tel: _____

E-mail: _____