

The Health Component of the Social Package: a Cross-Sectional Survey of Beneficiaries

Master of Public Health Integrating Experience Project

Utilizing Professional Publication Framework

by

Hratchia Lylozian, MD, MPH candidate

Advising team:

Varduhi Petrosyan, MS, PhD

Anahit Demirchyan, MD, MPH

School of Public Health

American University of Armenia

Yerevan, Armenia

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LIST OF ABBREVIATIONS

USSR – Union of Soviet Socialist Republics “Soviet Union”

GDP – Gross Domestic Product

OOP – Out-Of-Pocket

MoH – Ministry of Health

BBP – Basic Benefit Package

OCSC – Obstetric Care State Certificate

CHSC – Child Health State Certificate

HC – Health Care

SP – Social Package

SHA – State Health Agency

AMD – Armenian Dram

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ABSTRACT

Background: Millions of people around the world are denied the needed care because of financial hardship. This occurs in both higher and lower income countries. Armenia declared independence from the Soviet Union in 1991, facing economic and financial hardships, public expenditure on healthcare suffered. Since then the Armenian government has implemented several policy reforms and introduced several healthcare programs to make primary healthcare and inpatient care services affordable for the population and reduce informal payments. The Social Package was introduced in 2012; it provides coverage to public employees from educational, scientific, cultural spheres and civil servants.

Objectives: This study aimed to evaluate the health component of the social package from the perspective of beneficiaries, and investigate whether the policy changes made after 2014 met their objectives.

Methods: The study conducted a cross-sectional survey among employees of Yerevan public schools; a sample of 480 was drawn through multistage cluster sampling. Self-administered survey technique was used for data collection. Descriptive statistics, simple and multiple linear regression analyses were used. A linear regression model was fitted to identify the factors influencing the satisfaction score.

Results: Of the 443 participants (92.3% of the initial sample) who completed the survey, 95.4% had undergone the annual compulsory medical tests, and 15.8% had been hospitalized during the period from January 1, 2015, to April 1, 2016. About 12.0% of the total number of participants reported making a payment for the care received either in hospitals and/or polyclinics. Among those participants who had been hospitalized, 53.0% reported making some payments during their stay at the hospital. Only 5.0% of participants mentioned making some payments during the annual compulsory medical tests. Overall, 55.3% of beneficiaries reported being satisfied with the Health Component of the Social Package, 29.7% were neutral, and 15.0% were unsatisfied. For the participants who had undergone the annual compulsory medical tests, the multivariable regression model demonstrated that long waiting time to undergo the annual medical tests was associated with a lower satisfaction score after adjusting for other factors; for those participants who also used hospital services the multivariable regression model demonstrated that making payment to hospitals was associated with a lower satisfaction score after adjusting for other factors. In both groups of participants being a male, higher socio-economic status and higher satisfaction scores with hospital and primary healthcare facilities were associated with higher satisfaction score with the HC of the SP.

Conclusion: Out of pocket payments remain an unresolved issue. Satisfaction with the HC of the SP is lower than what was observed in other state funded programs. It is recommended to reduce the waiting times in primary care facilities, include outpatient procedures provided by hospitals into the benefit package, expand the list of inpatient and outpatient services provided, including follow-up consultations and tests for those with newly identified health problems, improve distribution of SP funds within healthcare facilities with higher proportion allocated for providers, and higher transparency of funds distribution.

1. INTRODUCTION

1.1 Background

The three ultimate performance goals of healthcare systems worldwide are health status, customer satisfaction, and financial risk protection. These three are defined by intermediary performance characteristics: efficiency, equity/access, and quality, which in their turn are achieved by modifications in the five “control knobs”, which are financing, payment, organization, regulation, and behavior.¹ Financial risk protection is defined as the level of financial security that a health care system provides to the general population who needs medical care.² Millions of people around the world are denied the needed care because of financial hardship; many people who are forced to seek care suffer financial catastrophe and impoverishment trying to meet the costs of their care. This occurs in both rich and poor countries.³

Throughout the world governments are engaged in health sector reforms, how to carry out financing, organize payment mechanisms, and how to reform the organization of the system to improve efficiency.⁴ However, conflicting political interests, economic implications, and ethical concerns often hinder health reform processes.¹

"Money is the mother's milk of healthcare"⁵ nevertheless money alone does not automatically achieve efficiency, equity, quality, and, most importantly, better health outcomes.⁵ That is why a comprehensive approach is needed, which includes changes in payment mechanisms, organization, and regulation.

After the collapse of the Soviet Union (USSR), former soviet countries faced a catastrophic economic crisis, which led to a dramatic decline in financing their healthcare systems.⁶

The newly independent states varied on how much their governments were willing to allocate for health care within the available resources. The Semashko system inherited from the USSR collapsed, since those newly independent states did not have the capacity to raise money to finance the system. Many health care workers left the field, pharmaceuticals and medical technology became unaffordable.⁷ Some former USSR countries tried to allocate additional financial resources to health care, some introduced complementary social health insurance programs, others like Belarus, Tajikistan, and Uzbekistan sought to retain much of the Semashko system.^{8,9} Despite their struggles and reforms, the issue of financial risk protection remained a problem in many countries.⁶

According to 2013 estimates, public sector expenditure on health as a percent of Gross Domestic Product (GDP) was 1.2 % in Azerbaijan, 2.0% in Georgia, 3.1% in Russia, and 4.2% in Ukraine.¹⁰ Out of pocket (OOP) spending as a percent of total health expenditure for 2013 was as follows: 71.1% Azerbaijan, 61.9% Georgia, 48.0% Russia, and 42.8% in Ukraine.¹¹ By 2010 estimates, the proportion of people who mentioned financial barriers for not seeking health care when ill was as follows: 70.0% Georgia, 33.9% Ukraine, and 11.0% in Russia.⁶

One way to solve the issue of financial risk protection is the idea of universal health coverage. Universal health coverage means that everyone in the society could have access to basic health care with sufficient quality without having to endure impoverishing health expenditures.¹²

Reforms in financial mechanisms could aid to reach the goal of having a universal coverage; single-payer and multi-payer models of a health insurance system are two options that could be considered.¹³ In the first case only one organization (usually governmental) performs the tasks of revenue collection, pooling of funds and purchasing of services while in the second case many different organizations carry on this task.^{13,14}

Some countries, such as Kyrgyzstan and Moldova, made several reforms to move their health systems from fragmented multi-payer systems to a more integrated single payer one.¹⁵ After shifting to a single-payer system in Kyrgyzstan, OOP payments as share of total health expenditures declined from 53% to 43%, however, in Moldova the policy change did not have an effect on the OOP payments.^{15,16}

In contrast to Kyrgyzstan and Moldova, Georgia moved to a multi-payer system in 2004 and by 2007 it was seen that OOP payments were as high as 70.9%.¹⁷ Evidence suggests that the health reforms in Georgia that shifted the system to a multi-payer one did not improve the quality of health services or access to care for the poor.¹⁸

Single and multi-payer systems each has its advantages and disadvantages, but due to the growing populations and the increasing demand for health care it is evident that single payer systems tend to offer a more progressive way of funding, they effectively distribute risks and give the governments a higher degree of control over the total expenditure on health.¹³

1.2 Situation in Armenia

Armenia declared independence from the USSR in 1991. Having suffered a devastating earthquake and the Nagorno-Karabakh war, Armenia faced a severe economic crisis and a rise in poverty.^{19,20} The healthcare system was also affected by those changes, the system shifted from a centralized Semashko model to a fragmented one, where OOP payments became the primary source of financing.²¹ According to estimates from 2013, total health expenditure as a percent of GDP in Armenia was 4.5% .²² Since the independence, public spending on healthcare has always been below 2% of GDP.²⁰ This proportion is one of the lowest shares of public spending on health in the WHO European Region, and it is about half of the average found in the Commonwealth of Independent States countries and about a fourth of the average found in the

European Union countries.²³ According to the European Observatory on Health Systems and Policies, in 2011, 57.4% of total health expenditures in Armenia were from OOP payments, 35.8% general government spending, 4.4% non-profit institutions, 0.3% voluntary health insurance and 2.1% from other sources.²⁰ High OOP payments result in poor utilization of health care services, in catastrophic health expenditure for the poor and unequal access to quality health services.²⁴ OOP payments bare the largest financial burden on the population, accounting for 6.2% of household income on average. This burden is much heavier for the poorest of the population (14.7% of the reported income vs. 2.0% of that for the wealthy population).²⁵ Inability to pay for healthcare services is the main reason for not seeking care when needed, there is a positive association between income and utilization of services, as income falls so does utilization.^{25,26} For example, in 2001 the proportion of people who did not seek care due to financial barriers among the adult population in Armenia was 77.5%, in 2010 this proportion was 27.1%.^{6,26} In 2008, using the extreme poverty line, 17% of Armenian households had catastrophic health expenditures.²⁵

The provided evidence shows that the Armenian health care system is not performing well regarding financial risk protection for its population, and due to the significant OOP payments many people have to spend a significant portion of their income on health.

In efforts to improve the Armenian health care system, the Ministry of Health (MoH) of Armenia introduced several programs; these included the Basic Benefit Package (BBP, 1996), the Obstetric Care State Certificate (OCSC, 2008), the Child Health State Certificate (CHSC, 2011), the official co-payment policy (2011), and the Social Package (2012).^{24,27-31}

The BBP was introduced in 1996, and its main purpose was to provide the population with basic health care services and formalize unofficial payments. Since 2006, it has expanded and now it

covers all ambulatory-polyclinic services.¹⁹ In 2008, the OCSC was introduced to provide all women free of charge and quality obstetric care, post-natal care in maternity hospitals, and also to eliminate informal payments.²⁸ In 2011, the CHSC was implemented to ensure children under the age of 7 years get free of charge access to inpatient care and thus eliminate informal payments for these services.²⁴

The Government of Armenia (GoA) introduced the Social Package (SP) in 2012 for public employees of educational, scientific research institutions of the Academy of Sciences, cultural institutions, as well as civil servants. The SP contains four services, mandatory health insurance, monthly mortgage loan payment, tuition fee payment, and holidays in the republics of Armenia and Nagorno-Karabakh.³¹

The primary goals of the SP were stated to 1) meet the employees' social needs, 2) increase the motivation and productivity of employees, 3) increase the attractiveness of government employment, and 4) reduce the flow of qualified workforce from government agencies to the private sector.

In an attempt to improve risk-pooling, financial risk protection, access to necessary healthcare, and to use public resources more efficiently, in 1996 voluntary health insurance was introduced in Armenia.^{21,32} The HIC of the SP program initially was organized similarly through private commercial insurance companies, creating fragmentation. International experience demonstrates that health financing reforms that created more fragmentation failed to address important policy objectives of improving efficiency and equity.⁹

The mandatory health insurance component (HIC) of the SP gave the beneficiaries opportunity to purchase health insurance from private health insurance companies with an amount of 52,000 AMD. The basic health package covered a number of medical services, namely in-patient care;

which included cardiac, vascular care, and neurosurgeries. The HIC of the SP also included several diagnostic tests and therapeutic preventive measures in the health insurance in the purchasing amount of 3000 AMD per year.³¹

In 2013, a fellow graduate student conducted a qualitative evaluation study of the HIC of the SP in the two major cities of Armenia, Yerevan and Gyumri.³³ The study sought to identify whether the HIC of the SP met its policy objectives from the perspective of the stakeholders. The evaluation showed that the HIC of the SP provided additional aid for the covered population, improved access to and utilization of health care services, and provided improved financial protection. The weaknesses identified were limited coverage of health services, stakeholders reported lack of information and understanding about the HIC of the SP program, informal pressures on employees to choose specific health insurance companies and/or health care providers, informal out of pocket payments, unnecessary utilization of inpatient care, and no motivation for preventive and primary care. The primary recommendation of this study was to eliminate existing fragmentation by moving the HIC of the SP program from the multi-payer arrangement to a single-payer one through a non-profit public agency.³³ Since 2014, the administration of HIC of the SP has moved to the State Health Agency (SHA) of the MoH of Armenia; this shift from a multi-payer arrangement to a single-payer could help to eliminate the fragmentation and improve efficiency and improve the risk pooling among a larger number of beneficiaries.^{33,34}

The SHA was established in 1997; the agency has the role of a purchaser and is responsible for covering the costs of state-guaranteed health services. In general, the agency is responsible for effective and efficient use of public funds in the framework of annual state-guaranteed health care programs; contracting with health care providers on the provision of services which are

financed by the state; supervising the quantity and quality of services provided; contributing to the development of modern mechanisms regarding organization, management and financing in the Armenian healthcare system.¹⁹ After the HIC of the SP was transferred to the SHA, the content of the medical services has not changed; the package contains surgical as well as therapeutic care including all types of neurosurgeries, cardio surgeries, expensive lab and diagnostic examinations. The package doesn't include dental care, plastic surgery, organ transplantation, and laser surgery of the eye. The only significant addition to the package was the introduction of the compulsory annual preventive medical tests, which are an obligatory component for all the employees to be able to activate and get coverage for the SP services in a given calendar year.³⁵ The compulsory annual preventive medical tests include a consultation with a general practitioner, consultation with a gynecologist for women, consultation with a urologist for men, consultation with other specialists, and lab tests such as blood, urine, glucose, and cholesterol. Diagnostic examinations included ECG test and an ultrasound examination of the abdominal and pelvic organs. PSA test and PAP smear test are also conducted.

1.3 Objectives of the study

The goal of this study was to evaluate the performance of the Health Component (HC) of the SP program from the perspective of SP beneficiaries. The study investigated whether the policy changes made after 2014 had met their objectives and to provide findings that would be a basis for future policy changes and improving the program.

The specific objectives of the study were:

- Measure the proportion of SP beneficiaries who have used inpatient services during the last 12 months (March 1st 2015 to April 1st 2016).

- Measure the proportion of SP beneficiaries who have undergone the yearly compulsory preventive screening tests during the last 12 months (March 1st 2015 to April 1st 2016).
- Measure the proportion of beneficiaries who made informal payments and the average amount of informal payments made during their in-patient and their annual compulsory medical tests during the last 12 months (March 1st 2015 to April 1st 2016)..
- Measure the level of satisfaction of the beneficiaries with the Health Component of the Social Package.
- Identify the factors influencing the satisfaction levels with the health component of the SP among the beneficiaries.

2. METHODS

2.1 Study design

The study utilized a cross-sectional study design through self-administered survey technique to answer our questions of interest. The rationale for using this study design was that it gave us the ability to understand the experiences, perceptions, and attitudes of the SP beneficiaries. Another rationale for choosing this study design was that it was relatively cheap and feasible in a short period of time.

2.2 Study Population

The study population for this study included employees of public schools in Yerevan (the capital of Armenia) who were beneficiaries of the Social Package program. The inclusion criteria for the study were employees of public schools in Yerevan, who were eligible for receiving the HC of the SP at the time of the interview.

2.3 Sampling Strategy and Data Collection

The survey used a multi-stage cluster sampling technique. The purpose of this strategy was to provide a representative sample of schools from Yerevan. The first stage of the sampling was the random selection of administrative districts in Yerevan city; the second stage was the random selection of schools in those districts.

During the CHSC evaluation study in 2011,²⁴ participants from Yerevan reported 87.7% satisfaction rate with the CHSC program at mid-term, 6.8% reported dissatisfaction with it, and 5.5% were neutral.²⁴ These numbers were used for the sample size calculation. To calculate a sample size for our cross-sectional survey, the one sample proportions formula was used.³⁶

$$N = \frac{Z^2 \cdot \frac{\alpha}{2} P(1-P)}{d^2}$$

At a confidence interval of 95%, and at a precision of 5%, the sample size was estimated to be:

$$N = \frac{1.96^2(0.877)(0.123)}{0.05^2} = 165$$

The cluster size was 32, and we multiplied the sample size with a design effect coefficient of two:

$$N = 165 * 2 = 330$$

After taking into account the response rate of 70% from a previous survey in Armenia that applied self-administered interviews,³⁷ the sample size was estimated to be 471 participants.

Out of 13 districts of Yerevan city, five were selected through simple random sampling, and then from each of the five districts we selected three public schools through simple random sampling, in each of the randomly selected school we approached a cluster of 32 employees selected

through convenience sampling (being available at school at the time of the survey) for self-administered interviews.

2.4 Study Instrument

The instrument of the study was a self-administered questionnaire; it was developed based on the CHSC study, and the 2006 Household Health Survey.^{24,37} The questionnaire was first developed in English, then it was translated into Armenian (Appendix 1&2). Before starting data collection, the student investigator pre-tested the instrument on eight participants and made modifications; changes were made to the language and the formulation of some questions to make the questionnaire more understandable for the participants. The questionnaire included a demographic section and questions regarding the beneficiary's latest experience with inpatient, outpatient care, and their overall satisfaction with the HC component of the SP. The questionnaire consisted of 75 questions and included the following domains:

- General information (including number of hospitalizations, use of different health care facilities)
- Inpatient care services (including information about informal payments)
- Perceived quality of care in hospitals
- Compulsory preventive medical tests and consultations at primary healthcare (PHC) facilities (including information about informal payments)
- Perceived quality of care at PHC facilities
- Satisfaction with the health care component of the Social Package
- Self-rated health status
- Sociodemographic data (including education, marital status, and monthly household expenditures).

2.5 Data Entry and Analysis

The student investigator used IBM SPSS Statistics 22 software to enter and clean the collected data. Single data entry was done, and the cleaning process was conducted through range checks and contingency checks of a randomly selected subsample of questionnaires. The cleaned data was imported into STATA 13.0 statistical package to be analyzed. For basic descriptive statistics means, medians, frequencies, and standard deviations were used. Satisfaction scores were calculated for hospital services, polyclinic services and the satisfaction with the social package, cases which had more than 20% missing values were dropped in the final score calculation, and for the rest of the missing values expectation maximization technique was used to impute for the missing data. To identify the relationship between each independent variable and the dependent variable, at first, categorical data were converted into “dummy” variables. Simple linear regression was performed between the outcome variable and the independent variables, and then statistically significant factors were included into the multiple linear regression models. The study team used the VIF (variance inflation factor) statistics test to check for multicollinearity between all the independent variables included in the final models.³⁸

2.6 Ethical Considerations

The American University of Armenia's Institutional Review Board (IRB) reviewed and approved the study protocol. An oral consent form was distributed along with the questionnaire (Appendix 2&3). Each questionnaire was provided with a separate unnamed envelope in which the participants placed the questionnaire after its completion. The questionnaires were stored for the duration of the study and after the final presentation they were archived.

3. RESULTS

3.1 Administrative results

The study team approached 19 schools, four of them refused to participate (21.1%), the reason for refusal was the absence of an official permission from the authorities. In the 15 participating schools we distributed 480 questionnaires. The total number of collected questionnaires was 460 (95.8%). The student investigator reviewed each questionnaire and 17 were considered as incomplete since more than 50% of the items in those questionnaires were not responded, therefore, they were not used for data entry. The overall response rate was 92.3%.

3.2 Descriptive statistics

Table 1 presents information on socio-demographic characteristics of participants. From 443 participants, 5.0% (n= 22) were men and 95.0% (n=417) women. The mean age of participants was 47.39 years old (SD: 11.89). The majority of participants were married - 73.7% (n=325), 5.9% (n=26) divorced, 8.2% (n=36) widowed, and 12.2% (n=54) were single. About 77% (n=338) of the study population were teachers, 9.0% (n=40) were administrative staff members, such as headmasters, vice-headmasters, 8.6% (n=38) were technical staff members, such as cleaning ladies, cafeteria workers, and doormen, 5.2% (n=23) mentioned other positions such as psychologists, speech therapists, librarians and special pedagogues. The educational levels of the participants were: 84.9% (n=370) university degree, 4.8% (n=21) postgraduate degree, 4.6% (n=20) professional technical education (10-13 years), 4.1% (n=18) high school (10 years) and 1.6% (n=7) had less than 10 years of education.

Table 2 presents information on the self-reported health of the participants. About half of the participants described their health as fair 58.8% (n=253), 6.5% (n=28) poor, 28.8% (n=124) good, 4.2% (n=18) very good, and 1.6% (n=7) excellent.

3.3 Health care services utilization

Table 3 presents the details on health services utilization of participants. The majority of participants 94.6% (n=419) reported using some medical services during the last 12 months, while 5.4% (n=24) reported not using any medical services. Most of them reported using polyclinic services - 96.2% (n=404), 30.5% (n=128) hospital services, 8.3% (n=35) medical care at home, and 3.6% (n=15) received medical care in other facilities such as dental clinics and diagnostic centers.

Of those respondents who did not use any medical services within the last 12 months, 60.9% (n=14) mentioned there was no need, 26.1% (n=6) reported lack of money/services too expensive, 8.7% (n=2) mentioned lack of time and 4.3% (n=1) mentioned it was a hassle to get healthcare.

3.4 The annual compulsory medical tests at primary healthcare centers

Table 4 shows the results of the annual compulsory preventive medical tests. The majority of the respondents - 90.8% (n=395) reported to know about the annual compulsory preventive medical tests and only 9.2% (n=40) reported not knowing. Respondents most frequently reported to learn about the medical tests from their workplace - 64.6% (n=246) and the booklet provided with the SP card - 53.7% (n=204). In the past 12 months, 95.4% (n=376) of the respondents passed the medical tests, and only 4.6% (n=18) reported not having passed them. The most frequent reason reported by the participants for passing the tests was to make sure that their health is fine - 69.2%

(n=256), followed by activating the other components of the SP - 47.3% (n=175). The most frequent reason for not passing the medical tests was lack of time - 43.8% (n=7). The most frequent health facility where the participants had their annual medical tests was their district polyclinic - 84.3% (n=316) and 15.7% (n=59) reported having it in other health centers. Slightly more than half - 54.7% (n=202) of the respondents reported waiting for a long time to undergo the medical tests, and 45.3% (n=167) reported not waiting for long. The mean waiting time to undergo the annual medical tests was 89.25 hours (SD: 227.72).

Table 5 shows in detail the list of all medical tests and the proportion of participants who have undergone each of them. Table 6 shows the payments that have been made during the medical tests. Only 5.1% (n=19) of all the participants who have undergone the annual medical tests reported making any payment. The mean amount spent by them was 29,100.00 AMD (SD: 83,171.06). Out of those who paid, 52.9% (n=9) reported paying to the cashier, 61.1% (n=11) reported paying to doctors, the mean amount paid to doctors being 5,500.00 AMD (SD: 4,427.18) and the reason for paying was polyclinic requirement - 37.5% (n=3), doctors requirement - 25.0% (n=2) and voluntarily - 25% (n=2). Only 3 participants - 16.7% reported paying to nurses with a mean amount of 1,350.00 AMD (SD: 1,202.08). Health related issues were reported to be diagnosed in 51.8% (n=191) of the participants and out of them 66.1% (n=125) had to undergo extra tests. From those who had undergone the extra tests, 54.1% (n=66) reported that the extra tests were covered by the SP while 45.9% (n=56) reported these were not covered by the SP.

Table 9 describes in detail the perceived quality of care received at the polyclinic by the participants. The reported overall quality of care at the polyclinic was average - 50.4% (n=184). A satisfaction score was calculated with the minimum score being 6 (very poor) and the

maximum score being 30 (very good), the mean reported score was 21.17 (SD: 3.68), hence the percent-score of satisfaction with the care provided in polyclinics was 70.6%. Majority of the participants 68.6% (n=243) reported they would return to the same polyclinic if needed and 31.4% (n=111) reported that they would not. The three main suggestions to improve the quality of care at the polyclinics were: improve the medical equipment in the polyclinics - 59.2% (n=216), improve the competency of doctors - 46.0% (n=168), and improve the free of charge drug supply - 37.8% (n=138).

3.5 Hospital services

Table 10 illustrates the utilization of hospital services. From the total population, 30.5% (n=128) reported using hospital services, 45.0% (n=58) reported using ambulatory services in a hospital setting (which is not covered by SP), while 55.0% (n=70) reported being hospitalized. Those who were hospitalized stayed in a hospital for 6.62 (SD: 5.56) days in average. Most of these people (60.3%, n=41) were referred to the hospital by a PHC provider, 27.9% (n=19) by self-referral, 10.3% (n=7) through an ambulance service, and 1.5% (n=1) was referred by a dentist. The mean reported time for receiving a referral from the polyclinic was 10.32 hours (SD: 29.34).

Table 11 presents the details on the proportions of those who paid and overall amounts of payments made by those who have been hospitalized. Out of 70 participants who had been hospitalized, 52.9% (n=37) reported making payments during their hospitalization, while 47.1% (n=33) reported making no payments. The mean reported amount paid in Armenian drams was 171,066.67 (SD: 172,139.66). The proportion of those who paid to the cashier was 58.6% (n=17). Of those participants who made payment during their hospitalization, 41.2% (n=14) reported borrowing money or selling an item to cover their hospital expenses.

Table 12 describes the proportion of participants who made payments to healthcare professionals and the amounts they paid. Of those who made any payment, the majority reported paying to doctors - 64.7% (n=22), followed by paying to cleaning ladies - 38.2% (n=13), then for drugs/ medical supplies from pharmacies - 35.3% (n=12). Other expenses like paying for lab or diagnostic tests were made by 32.4% (n=11), paying to nurses - 26.5% (n=9), and paying for drugs/medical supplies within the hospital - 17.1% (n=6).

The mean amount paid to doctors was 136,750.00 AMD (SD: 118,046.32), the most frequent reported reason for payments was that doctors required it - 47.1% (n=8). The mean amount paid to cleaning ladies was 5,600.00 AMD (SD: 3,134.04), the mean amount paid for drugs/ medical supplies from pharmacies was 32,909.09 AMD (SD: 22,540.87).

Among those participants who were hospitalized, 92.5% (n=62) reported that they knew that hospital care within the scope of the SP was free of charge, while 7.5% (n=5) reported not knowing. The booklet provided with the SP card was the most frequent source for learning about the hospital services covered by the SP - 71.9% (n=41), followed by being informed from their work place - 42.1% (n=24).

Table 13 presents the perceived quality of care at the hospital among those who have been hospitalized. The majority of respondents - 43.3% (n=29) reported that the quality of care was good. A satisfaction score was calculated ranging from a minimum score of 7 (very poor) to the maximum of 35 (very good) and the mean satisfaction score was 26.71 (SD: 5.57) or the mean percent-score for satisfaction 76.32%. Most participants, 73.0% (n=46), responded that they would return to the same hospital if needed, only 27.0% (n=17) reported they would not.

The three main suggestions to improve the hospital care were: increase the supply of free of charge drugs - 40.3% (n=27), increase the salary of providers - 35.8% (n=24), and improve medical equipment in hospitals - 31.3% (n=21).

3.6 Satisfaction with the health component of the Social Package

Table 14 illustrates the satisfaction rates of respondents with the health component of the Social Package. Of them, 55.3% (n=203) reported to be very satisfied and satisfied, 29.7% (n=109) neutral, and 15.0% (n=55) dissatisfied and very dissatisfied with the HC of the SP. A satisfaction score was calculated for all the participants. With the minimum score being 10 (very dissatisfied) and the maximum score 50 (very satisfied), the mean satisfaction score with the HC of the SP was 32.82 (SD: 7.77) or 66.0% percent-score for satisfaction. The mean satisfaction score for those participants who had used hospital services and had undergone the annual compulsory medical tests was 33.09 (SD: 8.91) and the satisfaction percent- score was 66.2%. A separate satisfaction score was calculated for those participants who had undergone the annual compulsory medical tests, but did not use hospital services thus the three items on hospital services included in the overall satisfaction score were not applicable for them. The range for the satisfaction score for this category of respondents was from 7 (very dissatisfied with all the constituents) to 35 (very satisfied with all the constituents), the mean satisfaction score was 22.53 (SD: 5.59) and the percent-score for satisfaction was 64.4%.

Table 15 presents the perceived influence which the HC of the SP had on the participants. The influence on the access (affordability) to hospital services was none/unchanged by 48.8% (n=146) of the respondents, while 36.1% (n=108) reported improvement. About half of the participants - 48.6% (n=170) reported no change in the access (affordability) to polyclinics. The quality of care received in hospitals was also deemed as unchanged for 53.2% (n=150) of the

participants, same with the quality of care in polyclinics - 49.4% (n=175). The HC of the SP was reported to improve the risk of experiencing high medical expenditures for 44.3% (n=139), while 39.8% (n=125) reported it remained the same. Half of the respondents, 50.7% (n=187), reported that their health status was unaffected by the HC of the SP while 40.1% (n=148) reported that their health status improved.

Table 16 presents the complete list of suggestions made by the participants to further improve the HC of the SP. The first recommendation was to expand the list of inpatient services provided by the SP - 67.1% (n=279), the second was to include outpatient procedures in hospitals into the benefit package - 52.4% (n=218), and the third most popular suggestion was to expand the list of polyclinic services provided by the SP - 38.2% (159).

3.7 Factors influencing beneficiaries' satisfaction level

Table 17 shows the results of a univariate analysis for all potential factors that could influence the satisfaction level of the beneficiaries. In univariate comparisons, gender was associated with an increase in the satisfaction score with the HC component of the SP, men tended to be more satisfied than women ($\beta=3.5$, $p=0.061$). Beneficiaries who had made any payment during their hospitalization or during their annual medical tests tended to be significantly more dissatisfied than those who did not ($\beta= -6.4$, $p=0.002$). Socio-economic status was associated with an increase in satisfaction, the higher the socioeconomic status the higher the satisfaction score ($\beta=1.5$, $p=0.000$). In comparison with married individuals, only divorced people were significantly dissatisfied with the HC of the SP ($\beta=-5.2$, $p=0.021$). Using hospital services was associated with an increase in satisfaction ($\beta= 3.1$, $p=0.010$). Reporting a long waiting time to undergo the medical test was associated with lower satisfaction score ($\beta=-6.8$, $p=0.000$). Higher satisfaction with hospital care and with polyclinic care were associated with higher satisfaction

with HC of the SP, ($\beta=0.6$, $p=0.001$) and ($\beta=1.104$, $p=0.000$), respectively. Better self-reported health status was also associated with higher satisfaction ($\beta=2.343$, $p=0.032$). Age, education, passing the annual medical tests, waiting times to receive referral or passing the medical tests and the number of days stayed at the hospital had no statistically significant association with the satisfaction score.

Two linear regression models were fitted to identify the factors independently associated with the satisfaction score with HC of the SP while controlling for possible confounders. The first, main model was fitted with those who used the compulsory primary care services without including hospital care-specific variables (Table 18), as their inclusion sharply reduced the number of observations included in the analysis because of small number of those who used hospital services. The second model with inclusion of hospital care-specific variables was fitted for those participants who used hospital services (Table 19). All the factors which were statistically or marginally significantly (at the $P \leq 0.1$ level) associated with the outcome variable during the unadjusted linear regression were included in the multivariable analysis; those factors which showed insignificant results in the multivariable analysis were removed.

Table 18 shows the multivariable linear regression model for determinants of satisfaction with the HC of the SP among those participants who had used PHC facility services. After adjusting for all other factors, being male was associated with higher satisfaction score ($\beta=5.4$, $p=0.012$); higher socio-economic status was associated with higher satisfaction score ($\beta=1.4$, $p=0.000$); and satisfaction with PHC services was associated with higher satisfaction score ($\beta= 1.1$, $p=0.000$). Perceived long waiting time to undergo the annual medical tests was associated with a lower satisfaction score ($\beta= - 3.4$, $p=0.005$) after adjusting for other variables. The R^2 coefficient of the final model was 0.54 and the adjusted R^2 coefficient was 0.53.

Table 19 shows the multivariable linear regression model of satisfaction with HC of SP among those participants who used hospital services. Being male was again associated with a higher satisfaction score with the HC of the SP ($\beta= 9.6, p=0.047$); higher socio-economic status was associated with higher satisfaction score ($\beta=2.2, p=0.011$); and education level showed marginally significant association with the satisfaction score with more educated being more satisfied, ($\beta= 11.7, p=0.058$) and ($\beta= 8.0, p=0.052$) for those having professional technical and university/higher education, respectively, compared to the group with only school education. Finally, making any payment to hospitals was significantly associated with a lower satisfaction score ($\beta= -5.0, p=0.035$) after adjusting for other factors.

The highest VIF factors were 1.34 and 1.81 respectively; hence the analysis found no multicollinearity between the covariates within the two models.

4. DISCUSSION

4.1 Main findings

The goal of this study was to evaluate the performance of the HC of the SP program from the perspective of SP beneficiaries, and investigate whether the policy changes made after 2014 met their objectives. The HC of the SP in its current format shows improvement in utilization of preventive and primary healthcare services by its beneficiaries. The overwhelming majority of the beneficiaries had undergone the annual medical tests, which was a significant improvement compared with the 2006 Household Health Survey results, which demonstrated that only 32.4% of the respondents that needed care had gone to a polyclinic, while 26.4% reported they needed care but did not go.³⁷ In the 2006 Household Health Survey among those who did not seek care at the polyclinic, 49.7% mentioned the reason to be lack of money while in our study only 6.3%

among those who did not go for the annual medical tests mentioned lack of finances.³⁷ Our evaluation suggested that 82.7% of women consulted with a GP, during which their blood pressure was measured, 78% reported having a blood glucose analysis test, and 77.3% of women underwent the PAP smear test. These numbers are substantially higher than the numbers observed in 2006: 76.6% of women in Yerevan reported having their blood pressure checked less than a year ago and only 15.3% reported having a PAP smear test.³⁷ The introduction of the annual compulsory medical tests provided motivation for utilizing preventive services which were previously accessible at polyclinics but not utilized. This is an attempt to shift the focus from more expensive hospital care to preventive and primary care, increasing efficiency, effectiveness, and equity.³⁹ However, the absence of coverage for outpatient hospital services could lead to unnecessary hospitalizations, leading to unnecessary financial burden on the State Health Agency, and the beneficiaries, creating inefficiencies and inequity.^{40,41} Awareness of the beneficiaries about their rights and the services covered by the SP was high. This might be a factor which would promote the use of medical services by the beneficiaries.³²

More than half of the beneficiaries who used inpatient hospital services made payments during their hospitalization, this indicates that the issue of OOP payments within the scope of the SP is not fully resolved; comparing the results of this study with the CHSC study we see that during the midterm CHSC evaluation the proportion of parents in Yerevan who had made any payment in hospitals was 20.6% - much smaller proportion than among the SP beneficiaries.²⁴ Among the different types of informal payments made by the participants, paying to doctors constituted the highest proportion. The participants suggested to increase the salaries of health providers, indicating that the problem with inappropriate provider compensation by the hospitals persists;

this issue has been consistently reported as a threat to the success of recent health reforms in Armenia.^{24,28}

A major improvement made by the SP after the changes of 2014 was the ability of the beneficiaries to choose the health care facilities they wanted, this in turn reflected positively on their overall perceived quality of care within the health care facilities they used, and their willingness to return to the same facilities.

Citizen satisfaction is one of the three goals which are used to assess the performance of a health care system.¹ More than half of the participants reported they were satisfied with the HC of the SP, however, the study revealed that the beneficiaries satisfaction rate of 55% was lower compared to the results of the CHSC program where the satisfaction rate was 87%.²⁴ We tried to identify the factors associated with the satisfaction level of the beneficiaries, and one of the factors contributing to lower satisfaction level was paying for hospital services, this finding could be explained by the fact that the overwhelming majority of the participants were aware of their right to free medical treatment but despite that they had to make payments. Waiting time to undergo the annual medical tests was also associated with a lower satisfaction score, and this finding was consistent with the literature.⁴⁵

Higher socio-economic status was associated with a higher satisfaction score, which is consistent with the literature stating that people with higher socio-economic status tend to be more satisfied with health care plans.⁴² Higher educational level was also associated with increased satisfaction levels among those who used hospital services, which is again consistent with the literature.⁴²⁻⁴⁴

4.2 Limitations

The main limitation of this study was that it was confined only to Yerevan city and to only one beneficiary group working in public schools limiting the generalizability of our findings for the situation throughout Armenia. The absence of a comparison group or a baseline measurement limited our ability to understand if beneficiary satisfaction improved after the recent policy changes or not.

4.3 Strengths

This was the second attempt of evaluating the HC of the SP, but the first through a quantitative assessment. The sample was quite representative of the target population: proportion of women 96.7% vs. 90.5%, proportion of technical staff member's 8.7% vs. 8.9%, and the proportion of administrative staff 9.1% vs. 6.8%, respectively.⁴⁶

5. RECOMMENDATIONS

Based on the findings of the study the following recommendations could be made:

- Include outpatient procedures provided by hospitals into the benefit package
- Expand the list of inpatient services covered by the HC of the SP
- Increase the number of drugs supplied within hospitals
- Increase the number of laboratory and diagnostic tests provided in the scope of the annual medical tests
- Cover with HC of the SP additional consultations and tests for those with suspected/identified health problems during the annual compulsory medical tests
- Improve financial management and the flow of finances on the facility level, increase healthcare worker compensation to eliminate incentives for informal payments

- Implement a system of actively calling and inviting beneficiaries to pass their annual compulsory medical tests according to a pre-developed schedule in polyclinics, to prevent long queues leading to long waiting time, provider overload, and dissatisfaction of beneficiaries.

REFERENCES

1. Roberts M, Hsiao W, Berman P RM. *Getting Health Reform Right: A Guide to Improving Performance and Equity*. Oxford University Press; 2008.
2. Xu K. Distribution of Health Payments and Catastrophic Expenditures Methodology. WHO; Discussion paper No.2, 2005.
3. Xu K, Evans DB, Carrin G, Aguilar-Rivera AM, Musgrove P, Evans T. Protecting households from catastrophic health spending. *Health Aff.* 2007;26:972-983. doi:10.1377/hlthaff.26.4.972.
4. Mills A, Bennett S, Russell S. *The Challenge of Health Sector Reform: What Must Governments Do ?* Palgrave Macmillan; 2001.
5. Hsiao WC. Why Is A Systemic View Of Health Financing Necessary? *Health Aff.* 2007;26(4):950-961. doi:10.1377/hlthaff.26.4.950.
6. Balabanova D, Roberts B, Richardson E, Haerpfer C, McKee M. Health care reform in the former Soviet Union: beyond the transition. *Health Serv. Res.* 2012;47(2):840-64. doi:10.1111/j.1475-6773.2011.01323.x.
7. Rechel B, Ahmedov M, Akkazieva B, Katsaga A, Khodjamurodov G, McKee M. Lessons from two decades of health reform in Central Asia. *Health Policy Plan.* 2012;27(4):281-287. doi:10.1093/heapol/czr040.
8. Figueras J, McKee M, Cain J, Lessof S. *Health Systems in Transition: Learning from Experience*. Copenhagen: European Observatory on Health Care Systems; 2004.
9. Kutzin J, Jakab M, Cashin C. Lessons from health financing reform in central and eastern Europe and the former Soviet Union. *Heal. Econ. Policy Law* 2010;5(02):135. doi:10.1017/S1744133110000010.
10. Health expenditure, public (% of GDP) The World Bank Web site. Available at: <http://data.worldbank.org/indicator/SH.XPD.PUBL.ZS>. Accessed December 6, 2015.
11. Out-of-pocket health expenditure (% of total expenditure on health) The World Bank Web site. Available at: <http://data.worldbank.org/indicator/SH.XPD.OOPC.TO.ZS>. Accessed December 6, 2015.
12. Savedoff WD, de Ferranti D, Smith AL, Fan V. Political and economic aspects of the transition to universal health coverage. *Lancet (London, England)* 2012;380(9845):924-32. doi:10.1016/S0140-6736(12)61083-6.
13. Hussey P, Anderson GF. A comparison of single- and multi-payer health insurance systems and options for reform. *Health Policy.* 2003;66(3):215-228. doi:10.1016/S0168-8510(03)00050-2.
14. Kutzin J. A descriptive framework for country-level analysis of health care financing arrangements. *Health Policy.* 2001;56(3):171-204. doi:10.1016/S0168-8510(00)00149-4.

15. Kutzin J, Ibraimova A, Jakab M, O'Dougherty S. Bismarck meets Beveridge on the Silk Road: coordinating funding sources to create a universal health financing system in Kyrgyzstan. *Bull. World Health Organ.* 2009;87(7):549-54.
16. Richardson E, Roberts B, Sava V, Menon R, McKee M. Health insurance coverage and health care access in Moldova. *Health Policy Plan.* 2012;27(3):204-12. doi:10.1093/heapol/czr024.
17. Chanturidze T, Ugulava T, Durán A, Ensor T, Richardson E. Georgia: Health system review. *Health Syst. Transit.* 2009;11(8):1-116.
18. Bauhoff S, Hotchkiss DR, Smith O. Responsiveness and satisfaction with providers and carriers in a safety net insurance program: Evidence from Georgia's Medical Insurance for the Poor. *Health Policy.* 2011;102(2-3):286-294. doi:10.1016/j.healthpol.2011.06.015.
19. Torosyan A, Romaniuk P, Krajewski-Siuda K. The Armenian healthcare system: Recent changes and challenges. *J. Public Health.* 2008;16(3):183-190. doi:10.1007/s10389-007-0160-y.
20. Richardson E. Armenia: health system review. *Health Syst. Transit.* 2013;15(4):1-99.
21. Hakobyan T, Nazaretyan M, Makarova T, Aristakesyan M, Margaryants H, Nolte E. Health System Review: Armenia. *Health Syst. Transit.* 2006;8(6):1-180.
22. Health expenditure, total (% of GDP) The World Bank Web site. Available at: <http://data.worldbank.org/indicator/SH.XPD.TOTL.ZS>. Accessed December 6, 2015.
23. Yeghiyan G. *Improving financial risk protection in Armenian Health Care System*, College of Health Sciences, American University of Armenia, Yerevan, 2009. Available at: <http://auachsr.com/PDF/MPH/2009/Yeghiyan,%20Gevorg.pdf>
24. Crape B, Demirchyan A, Grigoryan R, Martirosyan H, Petrosyan V, Truzyan N. Evaluation of the Child Health State Certificate Program. American University of Armenia College of Health Sciences, Center for Health Services research and Development, yerevan, Armenia, September 2011. Available at: http://aua.am/chsr/UserFiles/File/Child%20Health%20State%20Certificate_AUA%20Final%20Report%202011--.pdf
25. Aydinyan L, Feeley F. Affordability and Equity in Access to Health Services in Armenia: Is Progress Being Made? A Comparison of the Results of the 2006 and 2008 Armenian Household Health Expenditure Surveys. 2010.
26. Balabanova D, McKee M, Pomerleau J, Rose R, Haerpfer C. Health service utilization in the former soviet union: evidence from eight countries. *Health Serv. Res.* 2004; 39:1927-50. doi:10.1111/j.1475-6773.2004.00326.x.
27. Mladovsky P, Srivastava D, Cylus J, et al. Health policy responses to the financial crisis in Europe. *Policy Summ.* 2012;(5):1-38.

28. Truzyan N, Grigoryan R, Avetisyan T, Crape B, Petrosyan V. *Protecting the Right of Women to Affordable and Quality Health Care in Armenia: Qualitative Assessment of the Obstetric Care State Certificate Program*. American University of Armenia, Center for Health Services research and Development, Yerevan, Armenia, April 2010. Available at: http://aua.am/chsr/PDF/2010/Obstetric%20voucher%20program_English-Final%20report.pdf
29. Medium-Term State Expenditure Frameworks for 2011-2013 and 2012-2014 of the Republic of Armenia N-62587-AM.; 2011.
30. Ministry of Health of Armenia. National Strategy on Maternal and Child Healthcare in Armenia for the Years 2003-2015.
31. Decree of the GoA N-1691. On the provision of the Social Package and the services provided by the Social Package. Yerevan, 27th of December 2012.
32. Sekhri N, Kutzin J, Tsaturyan S. Voluntary Health Insurance in Armenia: Issues and Options. *WHO Heal. Financ. Policy* 2007/3.
33. Tumasyan A. Health Insurance Component of the Social Package : a Qualitative Assessment, School of Public Health, American University of Armenia, Yerevan, 2013. Available at: <http://sph.aua.am/files/2015/05/Tumasyan-Armine-FINAL-2013-.pdf>
34. Decree of the GoA N-375. On the procedure of Social Package services provision, financing. Yerevan, 27th of March 2014.
35. Decree of the GoA N-1483. On the additions and changes made on the government decrees N-1691 and N-375. Yerevan, 25th of December 2014.
36. Fosgate GT. Practical sample size calculations for surveillance and diagnostic investigations. *J. Vet. Diagn. Invest.* 2009;21(1):3-14.
37. Primary Healthcare Reform Project, USAID/Armenia, CHSR. *National Household Health Survey 2006, Baseline Evaluation*. Yerevan; 2008.
38. O'brien RM. A Caution Regarding Rules of Thumb for Variance Inflation Factors. *Qual. {&} Quant.* 2007;41(5):673-690. doi:10.1007/s11135-006-9018-6.
39. Starfield B. Primary care: An increasingly important contributor to effectiveness, equity, and efficiency of health services. SESPAS report 2012. *Gac. Sanit.* 2012;26(SUPPL.1):20-26. doi:10.1016/j.gaceta.2011.10.009.
40. Davis K, Russell LB. The Substitution of Hospital Outpatient Care for Inpatient Care. *Rev. Econ. Stat.* 1972;54(2):109-120. doi:10.2307/1926271.
41. Simoens S, Giuffrida A. The impact of physician payment methods on raising the efficiency of the healthcare system: an international comparison. *Appl. Health Econ. Health Policy* 2004;3(1):39-46.

42. Ware JE, Davies-Avery A, Stewart a L. The measurement and meaning of patient satisfaction. *Heal. Med. Serv. Rev.* 1977;1:3-45.
43. Haviland MG. Race/Ethnicity, Socioeconomic Status, and Satisfaction With Health Care. *Am. J. Med. Qual.* 2005;20(4):195-203. doi:10.1177/1062860605275754.
44. Linder-Pelz S. Toward a theory of patient satisfaction. *Soc. Sci. Med.* 1982;16(5):577-582. doi:10.1016/0277-9536(82)90311-2.
45. Bleustein C, Rothschild DB, Valen A, Valatis E, Schweitzer L, Jones R. Wait times, patient satisfaction scores, and the perception of care. *Am. J. Manag. Care* 2014;20(5):393-400.
46. Ministry of Education of Armenia. Public Education in Armenia - Statistical Data. Available at: <http://stat.amedu.am/?section=school&year=2015>. Accessed May 25, 2016.

TABLES

Table 1: Sociodemographic characteristics of the study participants

Variable	Values: % (n)
Gender of Participants	
Male	5.0% (22)
Female	95.0% (417)
Marital status	
Married	73.7% (325)
Divorced	5.9% (26)
Widowed	8.2% (36)
Single	12.2% (54)
Educational level	
School (less than 10 years)	1.6% (7)
School (10 years)	4.1% (18)
Professional technical (10-13 years)	4.6% (20)
University	84.9% (370)
Postgraduate	4.8% (21)
Position in the school	
Teacher	77.0% (338)
Administrative staff	9.1% (40)
Technical staff	8.7% (37)
Other	5.2% (23)
General standard of living	
Substantially below average	3.3% (14)
Little below average	11.1% (47)
Average	61.5% (260)
Little above average	18.9% (80)
Substantially above average	5.2% (22)
Household's average monthly expenditure (AMD)	
≤50,000 AMD	2.2% (6)
50,000 to 100,000 AMD	17.6% (49)
100,001 to 200,000 AMD	37.1% (103)
200,001 to 300,000 AMD	29.1% (81)
≥300,000 AMD	14.0% (39)
Age at last birthday	
Mean	47.39
SD	11.89
Median	49.00
Total # of people living in the household	
Mean	4.15
SD	1.46
Median	4.00

Table 2: Self-reported health status of the study participants

Variable		Values: % (n)
Reported health status within last 30 days		
	Poor	6.5% (28)
	Fair	58.8% (253)
	Good	28.8% (124)
	Very Good	4.2% (18)
	Excellent	1.6% (7)
Reported current health status compared to one year ago		
	Much worse	5.1% (22)
	A little worse	13.1% (56)
	About the same	61.7% (264)
	A little better	15.9% (68)
	Much better	4.2% (18)

Table 3: Utilization of health care services by the study participants

Variable		Values: % (n)
Use of any medical services during the last 12 months		
	Yes	94.6% (419)
	No	5.4% (24)
Facilities in which medical care was received during the last 12 months		
	Polyclinics	96.4% (404)
	Hospitals	30.5% (128)
	Home	8.1% (34)
	Other HC facility	3.6% (15)
Reason for not seeking care within the last 12 months N=23		
	No need	60.9% (14)
	Lack of money/too expensive	26.1% (6)
	Lack of time	8.7% (2)
	Other	4.3% (1)

Table 4: Compulsory preventive medical tests and consultations at primary healthcare centers

Variable	Values: % (n)	
Knowledge of the annual compulsory preventive medical tests N=435	Yes	90.8% (395)
	No	9.2% (40)
Source of information about the compulsory preventive medical tests N=381	Booklet with the SP card	53.7% (204)
	Mass media (TV, internet)	13.9% (53)
	HC provider	7.6% (29)
	Work place	64.6% (246)
	Other	0.8% (3)
Having passed the compulsory preventive medical tests within the last 12 months N=394	Yes	95.4% (376)
	No	4.6% (18)
Reasons for undergoing the medical tests N=370	Benefiting from free checkups	19.5% (72)
	Activating other components of the SP	47.3% (175)
	Making sure health is fine	69.2% (256)
	Other	2.2% (8)
Reasons for not passing the medical tests N=16	Lack of money/too expensive	6.3% (1)
	Lack of time	43.8% (7)
	Don't trust HC providers	25.0% (4)
	Other	25.0% (4)
Place of undergoing the compulsory medical tests N=375	District Polyclinic	84.3% (316)
	Other health center	15.7% (59)
Had to wait a long time to undergo the compulsory medical tests N=369	Yes	54.7% (202)
	No	45.3% (167)
Waiting time (hours)	Mean	89.25
	SD	227.72
	Median	48.00

Table 5: List of medical tests that the study participants undergone

Variable	Values: % (n)	
Consultation with GP N=372	Yes	97.6% (363)
	No	2.4% (9)
Consultation with Gynecologist N=344	Yes	91.9% (316)
	No	8.1% (28)
Consultation with Urologist N=14	Yes	64.3% (9)
	No	35.7% (5)
Consultation with other specialists N=332	Yes	79.2% (263)
	No	20.8% (69)
General blood analysis N=374	Yes	98.9% (370)
	No	1.1% (4)
General urine analysis N=373	Yes	97.1% (362)
	No	2.9% (11)
Glucose in blood analysis N=366	Yes	92.9% (340)
	No	7.1% (26)
Cholesterol in blood analysis N=356	Yes	89.3% (318)
	No	10.7% (38)
Electrocardiogram N=372	Yes	97.6% (363)
	No	2.4% (9)
Ultrasound examination N=370	Yes	98.4% (364)
	No	1.6% (6)
PSA test N=9	Yes	33.3% (3)
	No	66.7% (6)
PAP smear test N=309	Yes	77.3% (239)
	No	22.7% (70)

Table 6: Payments for annual compulsory medical tests

Variable		Values: % (n)
Made any payment		
N=374	Yes	5.1% (19)
	No	94.9% (355)
Proportion of those who paid to cashier		
N=17	Yes	52.9% (9)
	No	47.0% (8)
Overall spending of those who paid (AMD)		
N=17	Mean	29,100.00
	SD	83,171.06
	Median	5,000.00
Mean amount spent among those who paid to cashier (AMD)		
N=9	Mean	10,166.67
	SD	8,888.19
	Median	7,000.00

Table 7: Reported frequencies and amounts paid for different services among those who made any payments during the annual medical tests

Variable		Values: % (n)
Paid to doctors		
N=18	Yes	61.1% (11)
	No	38.9% (7)
Amount paid to doctors (AMD)		
	Mean	5,500.00
	SD	4,427.18
	Median	5,000.00
Reason for paying to doctors		
N=8	Polyclinic requirement	37.5% (3)
	Doctor required	25.0% (2)
	Nurse required	12.5% (1)
	Voluntarily	25.0% (2)
Paid to Nurses		
N=18	Yes	16.7% (3)
	No	83.3% (15)
Amount paid to Nurses (AMD)		
	Mean	1,350.00
	SD	1,202.08
	Median	1,350.00
Reason for paying to nurses		
N=2	Polyclinic requirement	50.0% (1)
	Nurse required	50.0% (1)

Table 8: Health related issues diagnosed during the annual medical tests and coverage by the SP

Variable		Values: % (n)
Proportion of those diagnosed with a health related issues		
N=369	Yes	51.8% (191)
	No	48.2% (178)
Undergone extra tests among those diagnosed with health issues		
N=189	Yes	66.1% (125)
	No	33.9% (64)
Coverage of the extra tests by the SP among those who underwent extra tests		
N=122	Yes	54.1% (66)
	No	45.9% (56)

Table 9: Perceived quality of care in polyclinics reported by the study participants

Variable	Values: % (n)				
	Very Good	Good	Average	Poor	Very Poor
Overall perceived/reported quality of care at the Polyclinic N=365	7.1% (26)	35.6% (130)	50.4% (184)	5.5% (20)	1.4% (5)
Doctors' attitude N=372	8.6% (32)	53.5% (199)	34.4% (128)	3.2% (12)	0.3% (1)
Doctors' competency N=363	6.6% (24)	53.2% (193)	35.3% (128)	4.7% (17)	0.3% (1)
Nurses' attitude N=368	8.4% (31)	53.3% (196)	32.9% (121)	5.4% (20)	--
Nurses' competency N=365	5.2% (19)	50.1% (183)	38.9% (142)	5.8% (21)	--
Cleanliness of the polyclinic N=370	13.8% (51)	37.3% (138)	34.9% (129)	11.4% (42)	2.7% (10)
Physical conditions of the polyclinic N=367	10.9% (40)	30.5% (112)	33.0% (121)	16.9% (62)	8.7% (32)
Satisfaction score (n/N) N=350	Mean				21.17/30.00
	SD				3.68
	Median				21.00
	Percent-satisfaction score				70.56%
Would return to the same polyclinic if needed N=354	Yes				68.6% (243)
	No				31.4% (111)
Suggestions on how to improve the quality of care received at the polyclinics during the annual medical tests N=365	Improve the medical equipment in the polyclinic				59.2% (216)
	Improve competency of doctors				46.0% (168)
	Increase free of charge drugs supplies				37.8% (138)
	Improve physical conditions of the polyclinic				33.7% (123)
	Increase salary of providers				32.3% (118)
	Assure polite treatment of patients by providers				29.0% (106)
	Improve counseling skills of providers				20.0% (73)
	Improve cleanliness of the polyclinic				18.4% (67)
	Eliminate informal payments				16.4% (60)
	Improve competency of nurses				14.0% (51)
	Other				2.5% (9)

Table 10: Utilization of hospital services by the study participants

Variable		Values: % (n)
Having been hospitalized N=128	Yes	54.7% (70)
	No	45.3% (58)
Mode of referrals to the hospital N=68	PHC provider	60.3% (41)
	Ambulance	10.3% (7)
	Self-referral	27.9% (19)
	Other	1.5% (1)
Time taken to receive referral from polyclinic (hours)	Mean	10.32
	SD	29.34
	Median	1.75
Duration of stay at the hospital (days)	Mean	6.62
	SD	5.56
	Median	5.00

Table 11: Reported frequencies and amounts paid for hospital services

Variable		Values: % (n)
Made any payment N=70	Yes	52.9% (37)
	No	47.1% (33)
Overall spending of those who paid (AMD) N=30	Mean	171,066.67
	SD	172,139.66
	Median	122,500.00
Proportion of those who paid to cashier N=29	Yes	58.6% (17)
	No	41.3% (12)
Mean amount spent by those who paid to cashier (AMD) N=17	Mean	158,882.35
	SD	200,714.00
	Median	80,000.00
Of those who made any payment, borrowed money to cover expenses N=34	Yes	41.2% (14)
	No	58.8% (20)

Table 12: Reported frequency and amounts paid for different services among those who made any payments in hospitals

Variable	Values: % (n)	
Paid to doctors N=34	Yes	64.7% (22)
	No	35.3% (12)
Amount paid to doctors (AMD)	Mean	136,750.00
	SD	118,046.32
	Median	90,000.00
Reason for paying to doctors N=17	Hospital requirement	35.3% (6)
	Doctor required	47.1% (8)
	Nurse required	29.4% (5)
	Cleaning lady required	29.4% (5)
	Voluntarily	29.4% (5)
Paid to nurses N=34	Yes	26.5% (9)
	No	73.5% (25)
Amount paid to nurses (AMD)	Mean	10,444.44
	SD	5,960.52
	Median	10,000
Reason for paying to nurses N=8	Hospital required	12.5% (1)
	Nurse required	50.0% (4)
	Cleaning lady required	12.5% (1)
	Voluntarily	37.5% (3)
Paid to cleaning ladies N=34	Yes	38.2% (13)
	No	61.8% (21)
Amount paid to cleaning ladies (AMD)	Mean	5,600.00
	SD	3,134.04
	Median	5,000.00
Reason for paying to cleaning ladies N=10	Nurse required	10.0% (1)
	Cleaning lady required	50.0% (5)
	Voluntarily	50.0% (5)
Paid for drugs/medical supplies in the hospital N=35	Yes	17.1% (6)
	No	82.9% (29)
Amount paid for drugs/medical supplies in the hospital (AMD)	Mean	69,000.00
	SD	74,699.39
	Median	50,000.00

Reason for paying for drugs/medical supplies in the hospital N=6	Doctor required Hospital did not provide	66.7% (4) 50.0% (3)
Bought drugs/medical supplies from pharmacy N=34	Yes No	35.3% (12) 64.7% (22)
Amount paid drugs/medical supplies from pharmacy (AMD)	Mean SD Median	32,909.09 22,540.87 30,000.00
Other expenses during hospitalization N=34	Yes No	32.4% (11) 67.6% (23)
Amount paid for other expenses during hospitalization (AMD)	Mean SD Median	105,875.00 203,343.79 20,000.00
Reason for paying for other expenses during hospitalization N=8	Hospital required Voluntarily Other	75.0% (6) 12.5% (1) 12.5% (1)
Aware of free of charge hospital care for SP beneficiaries N=67	Yes No	92.5% (62) 7.5% (5)
Source of information about free hospital services among the hospitalized N=57	Booklet with the SP card Mass media (TV, internet) HC provider Work place	71.9% (41) 19.3% (11) 14.0% (8) 42.1% (24)

Table 13: Perceived quality of care in hospitals reported by the study participants who used hospital services

Variable	Values: % (n)				
	Very Good	Good	Average	Poor	Very Poor
Overall perceived/reported quality of care at the hospital N=67	16.4% (11)	43.3% (29)	34.3% (23)	4.5% (3)	1.5% (1)
Doctors' attitude N=69	23.2% (16)	50.7% (35)	20.3% (14)	2.9% (2)	2.9% (2)
Doctors' competency N=68	36.8% (25)	50.0% (34)	10.3% (7)	--	2.9% (2)
Nurses' attitude N=69	18.8% (13)	50.7% (35)	24.6% (17)	2.9% (2)	2.9% (2)
Nurses' competency N=70	18.6% (13)	55.7% (39)	22.9% (16)	--	2.9% (2)
Cleanliness of the hospital N=70	27.1% (19)	42.9% (30)	21.4% (15)	5.7% (4)	2.9% (2)
Physical conditions of the hospital N=70	25.7% (18)	30.0% (21)	32.9% (23)	7.1% (5)	4.3% (3)
Availability of drugs/medical supplies N=68	20.6% (14)	32.4% (22)	32.4% (22)	8.8% (6)	5.9% (4)
Satisfaction score (n/N) N=66		Mean			26.71/35
		SD			5.58
		Median			27.50
		Percent - satisfaction score			76%
Would return to the same hospital if needed N=63	Yes				73.0% (46)
	No				27.0% (17)
Suggestions on how to improve hospital care N=67	Increase free of charge drugs supplies				40.3% (27)
	Increase salary of providers				35.8% (24)
	Improve the medical equipment in the hospital				31.3% (21)
	Improve counseling skills of providers				29.9% (20)
	Eliminate informal payments				28.4% (19)
	Assure polite treatment of patients by providers				28.4% (19)
	Improve physical conditions of the hospital				25.4% (17)
	Improve cleanliness of the hospital				11.9% (8)
	Improve competency of doctors				10.4% (7)
	Improve competency of nurses				10.4% (7)
	Other				1.5% (1)

Table 14: Satisfaction with the Health Component of the Social Package

Variable Satisfaction with...	Values: % (n)				
	Very Satisfied	Satisfied	Neither satisfied nor dissatisfied	Dissatisfied	Very dissatisfied
The scope of inpatient services covered N=327	2.1% (7)	41.3% (135)	29.7% (97)	21.1% (69)	5.8% (19)
The Scope of outpatient services covered N=327	2.1% (7)	38.5% (126)	30.6% (100)	24.8% (81)	4.0% (13)
Waiting time to get referrals from polyclinics N=337	6.2% (21)	40.4% (136)	16.6% (56)	27.0% (91)	9.8% (33)
Waiting time to get admitted to the hospital N=225	7.6% (17)	40.4% (91)	23.6% (53)	21.8% (49)	6.7% (15)
Waiting time to complete the compulsory preventive medical tests N=366	3.8% (14)	41.3% (151)	19.7% (72)	24.0% (88)	11.2% (41)
Ability to choose hospitals N=239	6.7% (16)	43.9% (105)	18.8% (45)	23.4% (56)	7.1% (17)
Ability to choose polyclinics for the preventive medical tests N=338	9.2% (31)	57.4% (194)	15.1% (51)	14.2% (48)	4.1% (14)
Attitude of providers to beneficiaries of the SP in Hospitals N=310	10.0% (31)	42.9% (133)	19.4% (60)	20.0% (62)	7.7% (24)
Attitude of providers to beneficiaries of the SP in Polyclinics N=394	8.1% (32)	48.2% (190)	22.3% (88)	13.7% (54)	7.6% (30)
Overall the Health Component of the Social Package N=367	7.1% (26)	48.2% (177)	29.7% (109)	12.0% (44)	3.0% (11)
Satisfaction score (n/N) N=151	Mean				32.82/50.00
	SD				7.77
	Median				33.00
	Percent-satisfaction score				66%

Table 15: Influence of the Health Component of the Social Package

Variable Influence on...	Values: % (n)				
	Much improved	Improved	The same	Worsened	Much worsened
Access (affordability) to hospitals N=299	4.0% (12)	36.1% (108)	48.8% (146)	8.0% (24)	3.0% (9)
Access (affordability) to polyclinics N=350	4.3% (15)	40.0% (140)	48.6% (170)	4.9% (17)	2.3% (8)
The quality of care received in hospitals N=282	4.3% (12)	33.0% (93)	53.2% (150)	7.1% (20)	2.5% (7)
The quality of care received in polyclinics N=354	3.4% (12)	36.2% (128)	49.4% (175)	7.9% (28)	3.1% (11)
Risk of having high medical expenditures N=314	4.5% (14)	44.3% (139)	39.8% (125)	8.0% (25)	3.5% (11)
Own health status N=369	4.3% (16)	40.1% (148)	50.7% (187)	3.8% (14)	1.1% (4)
Influence score (n/N) N=250	Mean				19.99/30.00
	SD				3.96
	Median				19.00
	Influence percent-score (%)				67%

Table 16: Suggestions to improve the HC of the SP

Variable	Values: % (n)
Suggestions on how to improve the HC of the SP N=416	
Expand the list of inpatient services provided	67.1% (279)
Include outpatient procedures in hospitals into the benefit package	52.4% (218)
Expand the list of polyclinic services provided	38.2% (159)
Expand the list of annual screening tests	36.3% (151)
Increase free of charge drug supplies	36.1% (150)
Decrease the waiting times to receive services	29.8% (124)
Improve the attitude of providers towards SP beneficiaries	20.0% (83)
Eliminate informal payments	15.6% (65)
Get more information about the services covered by the SP	10.1% (42)
Other	1.9% (8)

Table 17: Unadjusted analysis of factors associated with the satisfaction score

Factor	Regression Coefficient	Std. Err.	95% Confidence Intervals	P-value
Gender				
Male	3.53	1.88	-0.17 – 7.24	0.061
Age	0.01	0.04	-0.07 – 0.10	0.726
Made payment to hospital	-5.05	1.88	-8.83 – (-1.28)	0.010
Made payment to polyclinic	-4.83	2.57	-9.90 – 0.24	0.062
Socio-economic status (score)	1.59	0.44	0.71 - 2.47	0.000
Number of people living in the household	0.30	0.36	-0.42 – 1.02	0.406
Marital status				
Married (ref.)				
Divorced	-5.24	2.25	-9.69 – (-0.79)	0.021
Widowed	1.58	1.94	-2.24 – 5.42	0.415
Single	0.66	1.53	-2.35 – 3.68	0.664
Education				
School (≤ 10 Years) (ref.)				
Technical professional	-1.43	3.56	-8.47 – 5.59	0.687
University	-3.41	2.45	-8.25 – 1.42	0.165
Position in the school				
Teacher (ref.)				
Administrative staff	-0.60	1.64	-3.85 - 2.63	0.712
Technical staff	4.39	1.94	0.58 - 8.22	0.024
Other	1.90	2.68	-3.38 - 7.19	0.478
Used hospital services	3.06	1.17	0.75 – 5.38	0.010
Passed medical tests	3.38	2.72	-1.98 – 8.76	0.215
Waiting time to receive referral to hospital (hours)	-0.04	0.04	-0.13 – 0.04	0.293
Had to wait long to undergo medical tests	-6.79	1.02	-8.81 – (-4.77)	0.000
Waiting time to undergo annual medical tests (hours)	-0.002	0.002	-0.01 – 0.001	0.170
Number of days stayed at the hospital	-0.13	0.17	-0.48 – 0.23	0.472
Satisfaction with hospital care	0.55	0.16	0.22 – 0.88	0.001
Satisfaction with polyclinic care	1.10	0.12	0.85 – 1.36	0.000
Self-reported health status during last 30 days	2.34	1.08	0.21 – 4.48	0.032

Table 18: Multivariate linear regression model of determinants of satisfaction with the HC of the SP among those who underwent the annual compulsory medical tests at PHCs (Valid n= 124)

Factor	Regression Coefficient	Std. Err.	95% Confidence Intervals	P-value
Male	5.42	2.13	1.19 - 9.66	0.012
Socio-economic status score	1.39	0.36	0.67 - 2.13	0.000
Satisfaction with PHC services	1.09	0.15	-0.79- (-1.39)	0.000
Waiting time to undergo annual medical tests	-3.38	1.18	-5.73 – (-1.03)	0.005

R² Coefficient: 0.54

Adjusted R² Coefficient: 0.53

Table 19: Multivariate linear regression model of satisfaction with HC of SP among those who used hospital services (Valid n= 35)

Factor	Regression Coefficient	Std. Err.	95% Confidence Intervals	P-value
Made payment to hospital	-4.99	2.24	-9.60 – (-0.39)	0.035
Male	9.58	4.60	0.16 - 19.02	0.047
Socio-economic status score	2.18	0.81	0.54 - 3.83	0.011
Satisfaction with hospital services	0.33	0.18	-0.03- (-0.71)	0.074
Education				
School (\leq 10 Years) (ref.)				
Technical professional	11.68	5.91	-0.42 – 23.78	0.058
University	8.03	3.95	-0.06 – 16.12	0.052

R² Coefficient: 0.48

Adjusted R² Coefficient: 0.36

APPENDICES

Appendix 1: English study instrument

Evaluation of the Health Component of the Social Package

1. Participant's ID _____

2. Date (dd/mm/yy) ___ / ___ / ___

Instructions for Completing the Questionnaire

Dear participant, first read carefully each question and the possible response options. Choose the option that best represents your response and check (✓) the box next to the option number. Some questions should be answered by words or by a number. There are blank lines next to these questions for you to write your response.

Please follow the instructions in *Italics*. These instructions will help you to complete the questionnaire and indicate which questions to skip for your particular case. Some questions may look like others, but each one is different. Please, take time to answer each of them.

Please, try to answer ALL THE questions.

Example

In many questions, you will be asked to choose and check response options provided in tables.

The following example shows how to check the responses in tables:

1. Please, indicate, how satisfied are you with:

		Very dis-satisfied	Dis-satisfied	Neither satisfied nor dis-satisfied	Satisfied	Very Satisfied	Not Applicable
1.1.	The health of your body?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input checked="" type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 88
1.2.	Your daily activity?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input checked="" type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 88
1.3	Your voyage to the Arctic	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input checked="" type="checkbox"/> 88

Answer the questions starting from here!

Demographic Data

3.	Your gender	<input type="checkbox"/> 1. Male <input type="checkbox"/> 2. Female
4.	Your age in years at the last birthday	_____ Years old
5.	Your marital status	<input type="checkbox"/> 1. Married <input type="checkbox"/> 2. Divorced <input type="checkbox"/> 3. Widowed <input type="checkbox"/> 4. Single
6.	Indicate the highest level of education that you have completed.	<input type="checkbox"/> 1. School (less than 10 years) <input type="checkbox"/> 2. School (10 years) <input type="checkbox"/> 3. Professional technical education (10-13 yrs.) <input type="checkbox"/> 4. Institute/University <input type="checkbox"/> 5. Postgraduate
7.	Please indicate your position in the school.	<input type="checkbox"/> 1. Teacher <input type="checkbox"/> 2. Administrative staff member <input type="checkbox"/> 3. Technical staff member <input type="checkbox"/> 4. Other (<i>specify</i>) _____

General information

8.	In the last 12 months have you used any medical services?	<input type="checkbox"/> 1. Yes → <u>(go to Q.10)</u> <input type="checkbox"/> 2. No
9.	What was the reason for not using any medical services in the last 12 months? → <u>(after answering go to Q.44)</u>	<u>(Mention all that apply)</u> <input type="checkbox"/> 1. There was no need <input type="checkbox"/> 2. Lack of money/ services are too expensive <input type="checkbox"/> 3. Lack of time <input type="checkbox"/> 4. Fear of diagnosis <input type="checkbox"/> 5. Don't trust the healthcare providers <input type="checkbox"/> 6. Other reason <u>(specify)</u> _____
10.	In what kind of facilities have you received medical care during the last 12 months? <u>(Mention all that apply)</u>	<input type="checkbox"/> 1. Polyclinic <input type="checkbox"/> 2. Hospital <input type="checkbox"/> 3. At home <input type="checkbox"/> 4. Other health care facility (<i>specify</i>) _____
11.	Overall, how many times have you been hospitalized after the 1 st of January 2015?	_____ → <u>(write 0 if none and go to Q.44)</u>
12.	How many days did you stay in the hospital during your last hospitalization?	Number of days _____

13.	How were you referred to the hospital the last time you were hospitalized?	<input type="checkbox"/> 1. Primary healthcare provider (polyclinic) <input type="checkbox"/> 2. Ambulance service → <u>(go to Q.15)</u> <input type="checkbox"/> 3. Self-referral → <u>(go to Q.15)</u> <input type="checkbox"/> 4. Other (<i>specify</i>) _____ → <u>(go to Q.15)</u>
14.	How long did it take to receive the referral form from the polyclinic?	_____ hours _____ minutes

15.	Do you have a card stating you are a Social Package beneficiary?	<input type="checkbox"/> 1. Yes <input type="checkbox"/> 2. No → <u>(go to Q.18)</u>
16.	Did you present your Social Package card to the hospital?	<input type="checkbox"/> 1. Yes → <u>(go to Q.18)</u> <input type="checkbox"/> 2. No
17.	What was the reason for not presenting your Social Package card?	(<i>specify</i>) _____

Payment for Care at the Hospital

Now, I would like to learn what type of expenses you had during your hospitalization. Please, be sincere and try to remember all the medical costs related to your last hospitalization, if you cannot remember the exact amount paid, please write the approximate amount.

18.	Did you make any payments during your last hospitalization? (Including “thank you” payments and gifts)?	<input type="checkbox"/> 1. Yes <input type="checkbox"/> 2. No → <u>(go to Q.38)</u>
19.	To whom did you make the payment? (<i>Mention all that apply</i>)	<input type="checkbox"/> 1. Hospital cashier <input type="checkbox"/> 2. Doctor(s) <input type="checkbox"/> 3. Nurse(s) <input type="checkbox"/> 4. Cleaning ladies <input type="checkbox"/> 5. Other (<i>specify</i>) _____
20.	Overall, how much did you pay to doctor(s)? (including “thank you” payments and gifts)	_____ AMD <u>(write 0 if none and go to Q.22)</u>
21.	What was the reason for making a payment to the doctor(s)? (<i>Mention all that apply</i>)	<input type="checkbox"/> 1. The hospital required <input type="checkbox"/> 2. The doctor(s) asked <input type="checkbox"/> 3. The Nurse(s) asked <input type="checkbox"/> 4. The cleaning lady(ies) asked <input type="checkbox"/> 5. I made the payment voluntarily
22.	Overall, how much did you pay to nurses? (including “thank you” payments and gifts)	_____ AMD <u>(write 0 if none and go to Q.24)</u>
23.	What was the reason for making a payment to the nurse(s)? (<i>Mention all that apply</i>)	<input type="checkbox"/> 1. The hospital required <input type="checkbox"/> 2. The doctor(s) asked <input type="checkbox"/> 3. The Nurse(s) asked <input type="checkbox"/> 4. The cleaning lady(ies) asked <input type="checkbox"/> 5. I made the payment voluntarily

24.	Overall, how much did you pay to the cleaning ladies? (including “thank you” payments and gifts)	_____AMD (<i>write 0 if none and go to Q.26</i>)
25.	What was the reason for making a payment to the cleaning ladies? (<i>Mention all that apply</i>)	<input type="checkbox"/> 1. The hospital required <input type="checkbox"/> 2. The doctor(s) asked <input type="checkbox"/> 3. The Nurse(s) asked <input type="checkbox"/> 4. The cleaning lady(ies) asked <input type="checkbox"/> 5. I made the payment voluntarily
26.	Did you make any payments for any drugs/medical supplies (syringe, needle, cotton) in the hospital, if provided?	<input type="checkbox"/> 1. Yes <input type="checkbox"/> 2. No →(<i>go to Q.29</i>)
27.	Overall, how much did you pay for any drugs/medical supplies in the hospital?	_____AMD
28.	What was the reason for making a payment for any drugs/medical supplies in the hospital? (<i>Mention all that apply</i>)	<input type="checkbox"/> 1. The doctor(s) asked <input type="checkbox"/> 2. The nurse(s) asked <input type="checkbox"/> 3. The cleaning lady(ies) asked <input type="checkbox"/> 4. The hospital would not provide drugs/medical supplies without payment
29.	Did you buy any drugs/medical supplies from pharmacies to be used in the hospital?	<input type="checkbox"/> 1. Yes <input type="checkbox"/> 2. No →(<i>go to Q.31</i>)
30.	Overall, how much did you pay for any drugs/medical supplies from the pharmacies which were used in the hospital?	_____AMD
31.	Did you make other expenses during the hospital stay other than the ones mentioned above?	<input type="checkbox"/> 1. Yes <input type="checkbox"/> 2. No →(<i>go to Q.35</i>)
32.	Please, describe what other expenses you made?	_____
33.	Overall, how much did you pay for those other expenses?	_____AMD
34.	What was the reason for making the payment? (<i>Mention all that apply</i>)	<input type="checkbox"/> 1. The hospital required <input type="checkbox"/> 2. The doctor(s) asked <input type="checkbox"/> 3. The nurse(s) asked <input type="checkbox"/> 4. The cleaning ladies asked <input type="checkbox"/> 5. I made the payment voluntarily <input type="checkbox"/> 6. Other (<i>specify</i>)_____

35.	Overall how much money did you spend during your last stay at the hospital? (including “thank you” payments and gifts)	_____ AMD
36.	Of this amount how much was paid to the cashier?	_____ AMD <i>(Please, write 0 if none)</i>
37.	Did you have to borrow money or sell something to cover the expenses of your hospital treatment during the last hospitalization?	<input type="checkbox"/> 1. Yes <input type="checkbox"/> 2. No
38.	At the time when you were hospitalized did you know that in-patient care under the Social Package was free of charge?	<input type="checkbox"/> 1. Yes <input type="checkbox"/> 2. No → <i>(go to Q.40)</i>
39.	Where from did you receive information about the services you were entitled to receive free of charge under the Social Package? <i>(Mention all that apply)</i>	<input type="checkbox"/> 1. Booklet provided with the SP card <input type="checkbox"/> 2. Mass media (TV, radio, newspapers, internet) <input type="checkbox"/> 3. Health care provider <input type="checkbox"/> 4. Work place <input type="checkbox"/> 5. Other (<i>specify</i>) _____

Perceived quality of Care at the Hospital

Below are some questions regarding your rating of the care you received during your last hospitalization.

40.	How would you rate the overall quality of the medical care you received at the hospital?	<input type="checkbox"/> 1. Very Poor <input type="checkbox"/> 2. Poor <input type="checkbox"/> 3. Average <input type="checkbox"/> 4. Good <input type="checkbox"/> 5. Very good				
41.	How would you rate? (<u>Check one response for each statement</u>):	Very Poor	Poor	Average	Good	Very good
	41.1 Doctors' attitude	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
	41.2 Doctors' competency	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
	41.3 Nurses' attitude	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
	41.4 Nurses' competency	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
	41.5 Overall cleanliness of the hospital	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
	41.6 Overall physical conditions of the hospital	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
	41.7 Availability of drugs and medical supplies	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
42.	Would you return to the same hospital if needed?	<input type="checkbox"/> 1. Yes <input type="checkbox"/> 2. No				
43.	What are the <u>three</u> most important ways you would suggest to improve the quality of services in that hospital?	<u>Check (✓) up to three options.</u> <input type="checkbox"/> 1. Increase the competence of doctors <input type="checkbox"/> 2. Increase the competence of nurses <input type="checkbox"/> 3. Improve physical conditions of the hospital <input type="checkbox"/> 4. Improve cleanliness of the hospital <input type="checkbox"/> 5. Improve medical equipment in the hospital <input type="checkbox"/> 6. Increase free of charge drug supplies <input type="checkbox"/> 7. Improve counseling skills of providers <input type="checkbox"/> 8. Increase salary of providers <input type="checkbox"/> 9. Eliminate informal payments <input type="checkbox"/> 10. Assure the polite treatment of patients by the medical staff <input type="checkbox"/> 11. Other (<i>specify</i>) _____				

Compulsory preventive medical tests and consultations at the Primary Healthcare Centers

Now, I would like to learn about your experience and what type of expenses you had during your annual preventive medical tests and check-ups that are required by the Social Package. Please, be sincere and try to remember all the medical costs.

44.	Are you aware of the yearly compulsory preventive screening tests for the Social Package beneficiaries?	<input type="checkbox"/> 1. Yes <input type="checkbox"/> 2. No →(<u>go to Q.68</u>)
45.	Where from did you receive the information about the yearly compulsory preventive screening tests? <u>(Mention all that apply)</u>	<input type="checkbox"/> 1. Booklet provided with the SP card <input type="checkbox"/> 2. Mass media (TV, radio, newspapers, internet) <input type="checkbox"/> 3. Health care provider <input type="checkbox"/> 4. Work place <input type="checkbox"/> 5. Other (<i>specify</i>)_____
46.	During the last 12 months, did you undergo the yearly compulsory preventive medical tests for the Social Package?	<input type="checkbox"/> 1. Yes →(<u>go to Q.48</u>) <input type="checkbox"/> 2. No
47.	What was the reason for not undergoing the yearly compulsory screening tests? →(<u>after answering go to Q.68</u>)	<input type="checkbox"/> 1. Lack of money/ too expensive <input type="checkbox"/> 2. Lack of time <input type="checkbox"/> 3. Fear of diagnosis <input type="checkbox"/> 4. Don't trust the healthcare providers at the polyclinic <input type="checkbox"/> 5. Other reason (<i>specify</i>) _____
48.	What was the primary reason for you to undergo these check-ups? <u>(Mention all that apply)</u>	<input type="checkbox"/> 1. To benefit from the provided opportunity to get free-of charge check-ups <input type="checkbox"/> 2. To activate other components of the Social Package <input type="checkbox"/> 3. To make sure everything is Ok with my health status <input type="checkbox"/> 4. Other reason (<i>specify</i>) _____
49.	Where did you undergo the yearly compulsory preventive medical tests and check-ups for the Social Package?	<input type="checkbox"/> 1. In my district polyclinic →(<u>go to Q.51</u>) <input type="checkbox"/> 2. In other health center (<i>specify</i>) _____
50.	What was the reason for undergoing the medical tests in another health center and not your district polyclinic?	(<i>Specify</i>) _____

51.	During your last annual compulsory medical tests and check-ups for the Social Package.	
	51.1. Did you have to wait long to receive the services?	<input type="checkbox"/> 1. Yes <input type="checkbox"/> 2. No
	51.2. On average how long did you have to wait to complete your preventive screening tests and check-ups?	___days___hrs. ___ min.

52.	Did you undergo the following procedures during your last yearly compulsory medical tests for the Social Package?	
	52.1. Consultation with a General Practitioner	<input type="checkbox"/> 1.Yes <input type="checkbox"/> 2.No
	<u>Please, skip this item if you are a man.</u>	<input type="checkbox"/> 1.Yes <input type="checkbox"/> 2.No
	52.2. Consultation with a gynecologist	<input type="checkbox"/> 1.Yes <input type="checkbox"/> 2.No
	<u>Please, skip this item if you are a woman.</u>	<input type="checkbox"/> 1.Yes <input type="checkbox"/> 2.No
	52.3. Consultation with a urologist	<input type="checkbox"/> 1.Yes <input type="checkbox"/> 2.No
	52.4. Consultation with other specialists, with a referral by a GP	<input type="checkbox"/> 1.Yes <input type="checkbox"/> 2.No
	52.5. General blood analysis	<input type="checkbox"/> 1.Yes <input type="checkbox"/> 2.No
	52.6. General urine analysis	<input type="checkbox"/> 1.Yes <input type="checkbox"/> 2.No
	52.7. Glucose level in blood	<input type="checkbox"/> 1.Yes <input type="checkbox"/> 2.No
	52.8. Cholesterol level in blood	<input type="checkbox"/> 1.Yes <input type="checkbox"/> 2.No
	52.9. Electrocardiography (ECG)	<input type="checkbox"/> 1.Yes <input type="checkbox"/> 2.No
	52.10. Ultrasound examinations	<input type="checkbox"/> 1.Yes <input type="checkbox"/> 2.No
	<u>Please, answer this item if you are a man at age 45 or above.</u>	<input type="checkbox"/> 1.Yes <input type="checkbox"/> 2.No
	52.11. PSA test (<i>Blood test to determine the level of Prostate-Specific antigen</i>)	<input type="checkbox"/> 1.Yes <input type="checkbox"/> 2.No
	<u>Please, answer this item if you are a woman ages 30-60.</u>	<input type="checkbox"/> 1.Yes <input type="checkbox"/> 2.No
	52.12. PAP smear test (<i>cytology of cervical mucosa of uterus</i>)	<input type="checkbox"/> 1.Yes <input type="checkbox"/> 2.No

53.	Did you make any payments during your visit for the annual medical tests and check-ups for the Social Package? (Including “thank you” payments and gifts)?	<input type="checkbox"/> 1. Yes <input type="checkbox"/> 2. No →(<u>go to Q.61</u>)
54.	To whom did you make the payments? <u>(Mention all that apply)</u>	<input type="checkbox"/> 1. Polyclinic cashier <input type="checkbox"/> 2. Doctor(s) <input type="checkbox"/> 3. Nurse(s) <input type="checkbox"/> 4. Other (<i>specify</i>) _____
55.	Overall, how much did you pay to doctors during your visit for the annual medical tests for the Social Package? (including “thank you” payments and gifts)	_____AMD (<u>Please, write 0 if none and go to Q.57</u>)
56.	What was the reason for making a payment to the doctor(s)?	<input type="checkbox"/> 1. The polyclinic required <input type="checkbox"/> 2. The doctor asked <input type="checkbox"/> 3. The nurse asked <input type="checkbox"/> 4. I made the payment voluntarily

57.	Overall, how much did you pay to nurse(s) during your visit for the annual screening check-ups for the Social Package? (including “thank you” payments and gifts)	_____AMD (<u>Please, write 0 if none and go to Q.59</u>)
58.	What was the reason for making a payment to the nurse(s)?	<input type="checkbox"/> 1. The polyclinic required <input type="checkbox"/> 2. The doctor asked <input type="checkbox"/> 3. The nurse asked <input type="checkbox"/> 4. I made the payment voluntarily

59.	Overall how much money did you spend during your annual compulsory preventive medical tests for the Social Package? (including “thank you” payments and gifts)	_____ AMD
60.	Of this amount how much was paid to the cashier?	_____AMD (<u>Please, write 0 if none</u>)

61.	Were you diagnosed with any health related issues during your last annual compulsory preventive medical tests?	<input type="checkbox"/> 1. Yes <input type="checkbox"/> 2. No →(<u>go to Q.64</u>)
62.	Did you have to undergo extra medical test(s) or treatment concerning that diagnosed condition?	<input type="checkbox"/> 1. Yes <input type="checkbox"/> 2. No →(<u>go to Q.64</u>)
63.	Did the extra tests or treatment get reimbursed under the Social package?	<input type="checkbox"/> 1. Yes <input type="checkbox"/> 2. No

Below are some questions regarding your rating of the care you received during your last yearly compulsory medical tests and check-ups for the Social Package.

64.	How would you rate the overall quality of the medical care you received during the preventive medical tests and check-ups for the Social Package?	<input type="checkbox"/> 1. Very Poor <input type="checkbox"/> 2. Poor <input type="checkbox"/> 3. Average <input type="checkbox"/> 4. Good <input type="checkbox"/> 5. Very good				
65.	How would you rate? (<i>Check (✓) one response for each statement</i>): 65.1. Doctors' attitude 65.2. Doctors' competency 65.3. Nurses' attitude 65.4. Nurses' competency 65.5. Overall cleanliness of the polyclinic 65.6. Overall physical conditions of the polyclinic	Very Poor <input type="checkbox"/> 1	Poor <input type="checkbox"/> 2	Average <input type="checkbox"/> 3	Good <input type="checkbox"/> 4	Very good <input type="checkbox"/> 5
66.	Would you return to the same polyclinic if needed?	<input type="checkbox"/> 1. Yes <input type="checkbox"/> 2. No				
67.	What are the <u>three</u> most important ways you would suggest for improving the quality of services for the compulsory preventive medical tests for the Social Package?	<i>Check (✓) up to three options.</i> <input type="checkbox"/> 1. Increase the competence of doctors <input type="checkbox"/> 2. Increase the competence of nurses <input type="checkbox"/> 3. Improve physical conditions of the polyclinic <input type="checkbox"/> 4. Improve cleanliness of the polyclinic <input type="checkbox"/> 5. Improve medical equipment in the polyclinic <input type="checkbox"/> 6. Increase free of charge drug supplies <input type="checkbox"/> 7. Improve counseling skills of providers <input type="checkbox"/> 8. Increase salary of providers <input type="checkbox"/> 9. Eliminate informal payments <input type="checkbox"/> 10. Assure the polite treatment of patients by the medical staff <input type="checkbox"/> 11. Other (<i>specify</i>) _____				

Satisfaction with the Health care component of the Social Package

The following questions are about your overall satisfaction with the Health Component of the Social Package.

68.	How satisfied are you with the health component of the Social Package program in the following areas. (<u><i>If you are unaware of any of the answer options mention "Not Applicable"</i></u>)	Very dis-satisfied	Dis-satisfied	Neither satisfied nor dis-satisfied	Satisfied	Very satisfied	Not Applicable
	68.1. The scope of inpatient services covered	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 88
	68.2. The Scope of outpatient services covered	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 88
	68.3. Waiting time to get referrals from polyclinics within the scope of the SP	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 88
	68.4. Waiting time to get admitted to the hospital within the scope of the Social Package	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 88
	68.5. Waiting time to complete the compulsory preventive medical tests for the Social Package	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 88
	68.6. Ability to choose hospitals	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 88
	68.7. Ability to choose polyclinics for the preventive medical tests and check-ups for the Social Package	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 88
	68.8. Attitude of providers to beneficiaries of the Social Package in Hospitals	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 88
	68.9. Attitude of providers to beneficiaries of the Social Package in Polyclinics	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 88
	68.10. Overall the Health Component of the Social Package	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 88

69.	How do you think the Health component of the Social Package <i>as a whole</i> has influenced your:	Much worsened	Worsened	The same	Improved	Much Improved
	69.1. Access (affordability) to hospitals	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
	69.2. Access (affordability) to polyclinics	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
	69.3. The quality of care you receive in hospitals	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
	69.4. The quality of care you receive in polyclinics	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
	69.5. Risk of having high medical expenditures	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
	69.6. Own health status	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

70.	<p>Out of the following, what <u>three</u> measures would you consider the most important to improve the Health Component of the Social Package? <u>(please, mention no more than three options)</u></p>	<p><input type="checkbox"/>1. Expand the list of inpatient services provided</p> <p><input type="checkbox"/>2. Expand the list of polyclinic services provided</p> <p><input type="checkbox"/>3. Include outpatient procedures in hospitals into the benefit package</p> <p><input type="checkbox"/>4. Expand the list of annual screening tests</p> <p><input type="checkbox"/>5. Increase free of charge drug supplies</p> <p><input type="checkbox"/>6. Decrease the waiting times to receive services</p> <p><input type="checkbox"/>7. Get more information about the services covered by the Social Package</p> <p><input type="checkbox"/>8. Improve the attitude of providers towards Social Package beneficiaries</p> <p><input type="checkbox"/>9. Eliminate informal payments</p> <p><input type="checkbox"/>10. Other (<i>specify</i>)</p> <p>_____</p>
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Questions about you self-rated health:

71.	How would you describe your health in the last 30 days?	<input type="checkbox"/> 1. Poor <input type="checkbox"/> 2. Fair <input type="checkbox"/> 3. Good <input type="checkbox"/> 4. Very good <input type="checkbox"/> 5. Excellent
72.	How would you rate your overall health now compared to one year ago?	<input type="checkbox"/> 1. Much worse <input type="checkbox"/> 2. A little worse <input type="checkbox"/> 3. About the same <input type="checkbox"/> 4. A little better <input type="checkbox"/> 5. Much better

Questions about your family’s socio-economic status

73.	How many people live in your household (Including you)?	_____
74.	How would you rate your family’s general standard of living?	<input type="checkbox"/> 1. Substantially below average <input type="checkbox"/> 2. Little below average <input type="checkbox"/> 3. Average <input type="checkbox"/> 4. Little above average <input type="checkbox"/> 5. Substantially above average
75.	In average, how much money does your family spend monthly?	<input type="checkbox"/> 1. Less than 50,000 AMD <input type="checkbox"/> 2. From 50,000 to 100,000 AMD <input type="checkbox"/> 3. From 100,001 to 200,000 AMD <input type="checkbox"/> 4. From 200,001 to 300,000 AMD <input type="checkbox"/> 5. More than 300,000 AMD <input type="checkbox"/> 88. Don’t know/ Refusal

Thank you for participating!

Appendix 2: Armenian study instrument

Սոցիալական փաթեթի Առողջապահական բաղադրիչի գնահատում

1. Հարցվողի հերթական համար _____
2. Ամսաթիվ (օր/ամիս/տարի)___ / ___ / ___

Հարցաթերթիկի լրացման ցուցումներ

Հարգելի՛ մասնակից, ուշադիր կարդացեք յուրաքանչյուր հարց և պատասխանների ներկայացված տարբերակները: Ընտրեք այն տարբերակը, որն ավելի մոտ է Ձեր կարծիքին և նշում կատարեք (✓) այդ տարբերակի համարին կից վանդակում: Որոշ հարցերի պետք է պատասխանել բառերով կամ թվերով: Այդ հարցերին հաջորդում են դատարկ տողեր, որպեսզի Դուք գրեք Ձեր պատասխանը:

Խնդրում ենք հետևել շեղագիր գրված ցուցումներին: Այդ ցուցումները կօգնեն Ձեզ լրացնել հարցաշարը և ցույց կտան, թե որ հարցերը Դուք պետք է բաց թողնեք: Որոշ հարցեր կարող են նման լինել մյուսներին, սակայն դրանցից յուրաքանչյուրը տարբեր է: Խնդրում ենք ժամանակ տրամադրել պատասխանելու դրանցից յուրաքանչյուրին:

Խնդրում եմ, փորձեք պատասխանել ԲՈՒՈՐ ՀԱՐՑԵՐԻՆ ԱՆԽՏԻՐ:

Օրինակ

Բազմաթիվ հարցերի դեպքում, Դուք պետք է ընտրեք և նշեք աղյուսակներում ներկայացված պատասխանի տարբերակները:

Հետևյալ օրինակը ցույց է տալիս, թե ինչպես նշել պատասխանները աղյուսակներում.

1. Նշե՛ք, խնդրեմ, թե որքանով է Ձեզ բավարարում.

		Ամեննին բավարարված չեմ	Բավարարված չեմ	Ոչ բավարարված եմ, ոչ էլ չբավարարված	Բավարարված եմ	Լիովին բավարարված եմ	Կիրառելի չէ
1.1.	Ձեր առողջությունը	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input checked="" type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 88
1.2.	Ձեր ամենօրյա գործունեությունը	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input checked="" type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 88
1.3	Ձեր ուղևորությունը Արկտիկա	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input checked="" type="checkbox"/> 88

Պատասխաներ հարցերին՝ սկսած այստեղից.

Ժողովրդագրական տվյալներ

3.	Ձեր սեռը	<input type="checkbox"/> 1. Արական <input type="checkbox"/> 2. Իգական
4.	Ձեր տարիքը Ձեր վերջին տարեդարձին	_____ տարեկան
5.	Ձեր ամուսնական կարգավիճակը	<input type="checkbox"/> 1. Ամուսնացած <input type="checkbox"/> 2. Ամուսնալուծված <input type="checkbox"/> 3. Այրի <input type="checkbox"/> 4. Ամուրի (Չամուսնացած)
6.	Նշեք Ձեր ստացած կրթության ամենաբարձր աստիճանը:	<input type="checkbox"/> 1. Դպրոց (10 տարուց պակաս) <input type="checkbox"/> 2. Դպրոց (10 տարի) <input type="checkbox"/> 3. Միջին մասնագիտական (10-13 տարի) <input type="checkbox"/> 4. Ինստիտուտ/համալսարան <input type="checkbox"/> 5. Հետդիպլոմային
7.	Խնդրում ենք նշել Ձեր աշխատանքի բնույթը դպրոցում	<input type="checkbox"/> 1. Ուսուցիչ <input type="checkbox"/> 2. Վարչական աշխատակից <input type="checkbox"/> 3. Տեխնիկական աշխատակից <input type="checkbox"/> 4. Այլ (<u>նշեք</u>) _____

Ընդհանուր տեղեկություններ

8.	Վերջին 12 ամիսների ընթացքում Դուք օգտվե՞լ էք որևէ բժշկական ծառայությունից:	<input type="checkbox"/> 1. Այո → (<u>անցեք հարց 10-ին</u>) <input type="checkbox"/> 2. Ոչ
9.	Ո՞րն էր վերջին 12 ամիսների ընթացքում ոչ մի բժշկական ծառայությունից չօգտվելու պատճառը: → (<u>այս հարցին պատասխանելուց հետո անցեք հարց 44-ին</u>)	(<u>Նշեք բոլոր հնարավոր տարբերակները</u>) <input type="checkbox"/> 1. Կարիքը չկար <input type="checkbox"/> 2. Գումարի բացակայությունը /ծառայությունները չափազանց թանկ են <input type="checkbox"/> 3. Ժամանակի բացակայությունը <input type="checkbox"/> 4. Վախը ախտորոշումից <input type="checkbox"/> 5. Բուժաշխատողներին չվստահելը <input type="checkbox"/> 6. Այլ պատճառ (<u>նկարագրեք</u>) _____
10.	Ինչպիսի՞ հաստատություններում եք ստացել բժշկական օգնություն վերջին 12 ամիսների ընթացքում: (<u>Նշեք բոլոր հնարավոր տարբերակները</u>)	<input type="checkbox"/> 1. Պոլիկլինիկա <input type="checkbox"/> 2. Հիվանդանոց <input type="checkbox"/> 3. Տնային պայմաններում <input type="checkbox"/> 4. Այլ բժշկական հաստատությունում (<u>նշեք՝ որ</u>) _____

11.	Ընդհանուր առմամբ, քանի՞ անգամ եք պատկել հիվանդանոց (հոսպիտալացվել) 2015 թվականի հունվարի 1-ից հետո:	_____ (եթե ոչ մի անգամ նշեք 0, և անցեք հարց 44-ին)
12.	Քանի՞ օր եք մնացել հիվանդանոցում Ձեր վերջին հոսպիտալացման ժամանակ:	_____օր
13.	Ինչպե՞ս էիք ուղեգրվել հիվանդանոց Ձեր վերջին հոսպիտալացման ժամանակ:	<input type="checkbox"/> 1. Պոլիկլինիկայի բժշկի ցուցումով <input type="checkbox"/> 2. Շտապօգնության ծառայության միջոցով → (անցեք հարց 15-ին) <input type="checkbox"/> 3. Դիմել էի ինքնուրույն → (անցեք հարց 15-ին) <input type="checkbox"/> 4. Այլ (նշեք) _____ → (անցեք հարց 15-ին)
14.	Ձեր վերջին հոսպիտալացման ժամանակ որքա՞ն ժամանակ պահանջվեց պոլիկլինիկայից ուղեգիր ստանալու համար:	_____ ժամ _____ րոպե <input type="checkbox"/> 88. Ուղեգիր չեմ ստացել
15.	Դուք ունե՞ք Սոցիալական փաթեթի շահառու լինելը հավաստող քարտ:	<input type="checkbox"/> 1. Այո <input type="checkbox"/> 2. Ոչ → (անցեք հարց 18-ին)
16.	Դուք հիվանդանոց ներկայացրե՞լ եք Ձեր Սոցիալական փաթեթի շահառուի քարտը:	<input type="checkbox"/> 1. Այո → (անցեք հարց 18-ին) <input type="checkbox"/> 2. Ոչ
17.	Ո՞րն էր Սոցիալական փաթեթի շահառուի քարտը հիվանդանոց չներկայացնելու պատճառը:	(նշեք) _____

Հիվանդանոցային բուժօգնության հետ կապված վճարումներ

Այժմ նշեք թե ինչ տեսակի ծախսեր եք արել Ձեր վերջին հոսպիտալացման ընթացքում: Խնդրում ենք լինել անկեղծ և փորձել հիշել Ձեր վերջին հոսպիտալացման հետ կապված բոլոր բժշկական ծախսերը: Եթե չեք հիշում ճշգրիտ գումարը, ապա գրեք գումարի մոտավոր չափը:

18.	Դուք կատարե՞լ եք որևէ վճարում Ձեր վերջին հոսպիտալացման ընթացքում (այդ թվում՝ «շնորհակալական» վճարումներ կամ նվերներ):	<input type="checkbox"/> 1. Այո <input type="checkbox"/> 2. Ոչ → (անցեք հարց 38-ին)
19.	Ու՞մ եք կատարել Ձեր վճարումը: (Նշեք բոլոր հնարավոր տարբերակները)	<input type="checkbox"/> 1. Հիվանդանոցի դրամարկղին <input type="checkbox"/> 2. Բժիշկ(ներ)ին <input type="checkbox"/> 3. Բուժքույր(եր)ին <input type="checkbox"/> 4. Հավաքարար(ներ)ին (սանիտարկա) <input type="checkbox"/> 5. Այլ (նշեք) _____

20.	Ընդհանուր առմամբ, որքա՞ն էք վճարել բժշկին (բժիշկներին) (ներառյալ «շնորհակալական» վճարումները և նվերները):	_____ ՀՀ Դրամ → (<i>էթե ոչինչ՝ նշեք 0 և անցեք հարց 22-ին</i>)
21.	Ո՞րն էր բժշկին (բժիշկներին) վճարում կատարելու պատճառը: (<i>Նշեք բոլոր հնարավոր տարբերակները</i>)	<input type="checkbox"/> 1. Հիվանդանոցի պահանջով <input type="checkbox"/> 2. Բժշկի պահանջով <input type="checkbox"/> 3. Բուժքրոջ պահանջով <input type="checkbox"/> 4. Հավաքարարի (սանիտարկա) պահանջով <input type="checkbox"/> 5. Վճարել եմ իմ ցանկությամբ
22.	Ընդհանուր առմամբ, որքա՞ն էք վճարել բուժքույրերին (ներառյալ «շնորհակալական» վճարումները և նվերները):	_____ ՀՀ Դրամ → (<i>էթե ոչինչ՝ նշեք 0 և անցեք հարց 24-ին</i>)
23.	Ո՞րն էր բուժքրոջը (բուժքույրերին) վճարում կատարելու պատճառը: (<i>Նշեք բոլոր հնարավոր տարբերակները</i>)	<input type="checkbox"/> 1. Հիվանդանոցի պահանջով <input type="checkbox"/> 2. Բժշկի պահանջով <input type="checkbox"/> 3. Բուժքրոջ պահանջով <input type="checkbox"/> 4. Հավաքարարի (սանիտարկա) պահանջով <input type="checkbox"/> 5. Վճարել եմ իմ ցանկությամբ
24.	Ընդհանուր առմամբ, որքա՞ն էք վճարել հավաքարարներին սանիտարկաներին (Ներառյալ «շնորհակալական» վճարումները և նվերները):	_____ ՀՀ Դրամ → (<i>էթե ոչինչ՝ նշեք 0, և անցեք հարց 26-ին</i>)
25.	Ո՞րն էր հավաքարարներին (սանիտարկա) վճարում կատարելու պատճառը: (<i>Նշեք բոլոր հնարավոր տարբերակները</i>)	<input type="checkbox"/> 1. Հիվանդանոցի պահանջով <input type="checkbox"/> 2. Բժշկի պահանջով <input type="checkbox"/> 3. Բուժքրոջ պահանջով <input type="checkbox"/> 4. Հավաքարարի (սանիտարկա) պահանջով <input type="checkbox"/> 5. Վճարել եմ իմ ցանկությամբ
26.	Դուք կատարե՞լ էք որևէ վճարում հիվանդանոցի կողմից տրամադրված դեղորայքի կամ բժշկական պարագաների (ներարկիչ, ասեղ, բամբակ) համար՝ հիվանդանոցում պառկած ժամանակ:	<input type="checkbox"/> 1. Այո <input type="checkbox"/> 2. Ոչ → (<i>անցեք հարց 29-ին</i>)
27.	Ընդհանուր առմամբ, որքա՞ն էք վճարել հիվանդանոցի կողմից տրամադրված դեղորայքի կամ բժշկական պարագաների համար՝ հիվանդանոցում պառկած ժամանակ:	_____ ՀՀ Դրամ

28.	<p>Ո՞րն էր դեղորայքի կամ բժշկական պարագաների համար վճարում կատարելու պատճառը հիվանդանոցում: <i>(Նշեք բոլոր հնարավոր տարբերակները)</i></p>	<input type="checkbox"/> 1. Բժշկի պահանջով <input type="checkbox"/> 2. Բուժքրոջ պահանջով <input type="checkbox"/> 3. Հավաքարարի (սանիտարկա) պահանջով <input type="checkbox"/> 4. Հիվանդանոցը չէր տրամադրում դեղորայք/բժշկական պարագաներ առանց վճարելու
29	<p>Դուք դեղատնից գնե՞լ էք դեղորայք կամ բժշկական պարագաներ՝ հիվանդանոցում օգտագործելու համար:</p>	<input type="checkbox"/> 1. Այո <input type="checkbox"/> 2. Ոչ → <i>(անցեք հարց 31-ին)</i>
30.	<p>Ընդհանուր առմամբ, որքա՞ն էք վճարել դեղատնից գնված դեղորայքի կամ բժշկական պարագաների համար, որոնք օգտագործվել են հիվանդանոցում:</p>	<p>_____ ՀՀ Դրամ</p>
31.	<p>Բացի վերը նշվածներից, Դուք այլ ծախսեր կատարե՞լ էք հիվանդանոցում պառկած ժամանակ:</p>	<input type="checkbox"/> 1. Այո <input type="checkbox"/> 2. Ոչ → <i>(անցեք հարց 35-ին)</i>
32.	<p>Խնդրում եմ նկարագրեք, թե ին՞չ այլ ծախսեր էք արել:</p>	<p>_____</p>
33.	<p>Ընդհանուր առմամբ, որքա՞ն էք վճարել այլ ծախսերի համար:</p>	<p>_____ ՀՀ Դրամ</p>
34.	<p>Ո՞րն էր այլ ծախսերի համար վճարում կատարելու պատճառը: <i>(Նշեք բոլոր հնարավոր տարբերակները)</i></p>	<input type="checkbox"/> 1. Հիվանդանոցի պահանջով <input type="checkbox"/> 2. Բժշկի պահանջով <input type="checkbox"/> 3. Բուժքրոջ պահանջով <input type="checkbox"/> 4. Հավաքարարի (սանիտարկա) պահանջով <input type="checkbox"/> 5. Վճարել եմ իմ ցանկությամբ <input type="checkbox"/> 6. Այլ (<i>նշեք</i>) _____
35.	<p>Ընդհանուր առմամբ, որքա՞ն գումար էք Դուք ծախսել Ձեր վերջին հոսպիտալացման ընթացքում (ներառելով «շնորհակալական» վճարումները և նվերները)</p>	<p>_____ ՀՀ Դրամ</p>
36.	<p>Այդ գումարից որքա՞ն էք վճարել դրամարկղում:</p>	<p>_____ ՀՀ Դրամ → <i>(եթե չեք վճարել՝ գրեք 0)</i></p>

37.	<p>Ձեր վերջին հոսպիտալացման ընթացքում Դուք ստիպված եղե՞լ եք պարտքով գումար վերցնել կամ վաճառել ինչ-որ բան՝ հիվանդանոցային բուժման ծախսերը հոգալու համար:</p>	<p><input type="checkbox"/>1. Այո <input type="checkbox"/>2. Ոչ</p>
38.	<p>Այն ժամանակ, երբ Դուք հոսպիտալացված էիք, գիտե՞ի՞ք, որ Սոցիալական փաթեթի շահառուների համար հիվանդանոցային բուժօգնությունն անվճար էր:</p>	<p><input type="checkbox"/>1. Այո <input type="checkbox"/>2. Ոչ → (<i>անցեք հարց 40-ին</i>)</p>
39.	<p>Որտեղի՞ց էիք Դուք տեղեկացել այն ծառայությունների մասին, որոնք իրավունք ունեիք անվճար ստանալու, որպես Սոցիալական փաթեթի շահառու: <i>(Նշեք բոլոր հնարավոր տարբերակները)</i></p>	<p><input type="checkbox"/>1. Սոցիալական փաթեթի քարտի հետ տրամադրված գրքույկից <input type="checkbox"/>2. Չանգվածային լրատվամիոցներից (հեռուստացույց, ռադիո, թերթեր, ինտերնետ) <input type="checkbox"/>3. Բուժօգնություն տրամադրողից <input type="checkbox"/>4. Ձեր աշխատավայրից <input type="checkbox"/>5. Այլ (<i>նշեք՝ որտեղից</i>)</p> <hr/>

Հիվանդանոցային բուժօգնության որակի ընկալումը

Ստորև բերված են որոշ հարցեր, որոնք վերաբերում են Ձեր վերջին հոսպիտալացման ընթացքում ստացած հիվանդանոցային բուժօգնության որակի Ձեր գնահատականին:

40.	Ինչպե՞ս կգնահատեիք հիվանդանոցում ստացած բժշկական օգնության ընդհանուր որակը:	<input type="checkbox"/> 1. Շատ վատ <input type="checkbox"/> 2. Վատ <input type="checkbox"/> 3. Միջին <input type="checkbox"/> 4. Լավ <input type="checkbox"/> 5. Շատ լավ				
41.	Ինչպե՞ս կգնահատեիք. <i>(Նշեք մեկ պատասխան յուրաքանչյուր հարցի համար)</i>	Շատ վատ	Վատ	Միջին	Լավ	Շատ լավ
	41.1. Բժիշկների վերաբերմունքը	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
	41.2. Բժիշկների մասնագիտական հմտությունները	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
	41.3. Բուժքույրերի վերաբերմունքը	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
	41.4. Բուժքույրերի մասնագիտական հմտությունները	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
	41.5. Հիվանդանոցի ընդհանուր մաքրությունը	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
	41.6. Հիվանդանոցի ընդհանուր շենքային պայմանները	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
	41.7. Դեղորայքի և բժշկական պարագաների հասանելիությունը	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
42.	Անհրաժեշտության դեպքում արդյո՞ք կրկին կօգտվեիք նույն հիվանդանոցի ծառայություններից:	<input type="checkbox"/> 1. Այո <input type="checkbox"/> 2. Ոչ				
43.	Որո՞նք են այն երեք կարևորագույն ուղիները, որոնք Դուք կառաջարկեիք այդ հիվանդանոցում մատուցվող ծառայությունների որակը բարելավելու համար:	<u>Նշեք (✓)առավելագույնը երեք տարբերակ</u> <input type="checkbox"/> 1. Բարելավել բժիշկների մասնագիտական հմտությունները <input type="checkbox"/> 2. Բարելավել բուժքույրերի մասնագիտական հմտությունները <input type="checkbox"/> 3. Բարելավել հիվանդանոցի շենքային պայմանները <input type="checkbox"/> 4. Բարելավել հիվանդանոցի մաքրությունը <input type="checkbox"/> 5. Բարելավել հիվանդանոցի բուժսարքավորումները <input type="checkbox"/> 6. Ավելացնել անվճար դեղորայքի տրամադրումը <input type="checkbox"/> 7. Բարելավել բուժաշխատողների խորհրդատվական հմտությունները <input type="checkbox"/> 8. Ավելացնել բուժաշխատողների աշխատավարձերը				

	<input type="checkbox"/> 9. Բացառել ոչ պաշտոնական վճարումները <input type="checkbox"/> 10. Ապահովել բուժաշխատողների բարեկիրթ շփումը հիվանդների հետ <input type="checkbox"/> 11. Այլ (<i>նշեք</i>) _____
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Պարտադիր կանխարգելիչ բժշկական քննությունները և խորհրդատվությունը առողջության առաջնային պահպանման հաստատություններում

Այս հարցերը վերաբերում են Սոցիալական փաթեթով նախատեսված ամենամյա պարտադիր կանխարգելիչ բժշկական քննությունների վերաբերյալ Ձեր փորձին և այդ ընթացքում կատարած ծախսերին: Խնդրում ենք լինել անկեղծ և փորձել հիշել բոլոր բժշկական ծախսերը, որը Դուք կատարել եք:

44.	Արդյո՞ք ք Դուք գիտեք Սոցիալական փաթեթի շահառուների համար նախատեսված ամենամյա պարտադիր կանխարգելիչ բժշկական քննության մասին:	<input type="checkbox"/> 1. Այո <input type="checkbox"/> 2. Ոչ → (<i>անցեք հարց 68-ին</i>)
45.	Որտեղի՞ց եք տեղեկացել ամենամյա պարտադիր կանխարգելիչ բժշկական քննության մասին: <i>(Նշեք բոլոր հնարավոր տարբերակները)</i>	<input type="checkbox"/> 1. Սոցիալական փաթեթի քարտի հետ տրամադրված գրքուկից <input type="checkbox"/> 2. Ջանգվածային լրատվամիջոցներից (հեռուստացույց, ռադիո, թերթեր, ինտերնետ) <input type="checkbox"/> 3. Բուժաշխատողներից <input type="checkbox"/> 4. Իմ աշխատավայրից <input type="checkbox"/> 5. Այլ (<i>նշեք</i>) _____
46.	Վերջին 12 ամիսների ընթացքում Դուք անցնե՞լ եք Սոցիալական փաթեթով նախատեսված ամենամյա պարտադիր կանխարգելիչ բժշկական քննությունները:	<input type="checkbox"/> 1. Այո → (<i>անցեք հարց 48-ին</i>) <input type="checkbox"/> 2. Ոչ
47.	Ո՞րն էր ամենամյա պարտադիր կանխարգելիչ բժշկական քննությունները չանցնելու պատճառը: → (<i>այս հարցին պատասխանելուց հետո անցեք հարց 68-ին</i>)	<input type="checkbox"/> 1. Գումարի բացակայությունը /քննությունների չափազանց թանկ լինելը <input type="checkbox"/> 2. Ժամանակի բացակայությունը <input type="checkbox"/> 3. Վախը ախտորոշումից <input type="checkbox"/> 4. Պոլիկլինիկայի բուժաշխատողներին չվստահելը <input type="checkbox"/> 5. Այլ պատճառ (<i>նկարագրեք</i>) _____

48.	Ո՞րն էր այդ ստուգումներն անցնելու հիմնական պատճառը: <i>(Նշեք բոլոր հնարավոր տարբերակները)</i>	<input type="checkbox"/> 1. Օգուտ քաղելը անվճար հիմունքներով ստուգումների ենթարկվելու տրամադրված հնարավորությունից <input type="checkbox"/> 2. Ակտիվացնելը սոցիալական փաթեթի այլ բաղադրիչները <input type="checkbox"/> 3. Համոզվելը, որ իմ առողջության հետ ամեն ինչ կարգին է <input type="checkbox"/> 4. Այլ պատճառ <i>(նկարագրեք)</i> _____
49.	Որտե՞ղ էք Դուք անցել Սոցիալական փաթեթով նախատեսված ամենամյա պարտադիր կանխարգելիչ բժշկական քննությունները:	<input type="checkbox"/> 1. Իմ տեղամասային պոլիկլինիկայում → <i>(անցեք հարց 51-ին)</i> <input type="checkbox"/> 2. Այլ հաստատությունում <i>(նշեք վայրը)</i> _____
50.	Ո՞րն էր բժշկական քննությունները մեկ այլ հաստատությունում, ոչ թե Ձեր տեղամասային պոլիկլինիկայում անցնելու պատճառը :	<i>(Նշեք)</i> _____

51.	Սոցիալական փաթեթի շրջանակներում Ձեր անցած վերջին տարեկան պարտադիր բժշկական քննությունների ընթացքում.	
	51.1. Արդյո՞ք ստիպված էիք երկար սպասել ծառայություններ ստանալու համար:	<input type="checkbox"/> 1. Այո <input type="checkbox"/> 2. Ոչ
	51.2. Ընդհանուր առմամբ, որքա՞ն ժամանակ էք սպասել Ձեր կանխարգելիչ բժշկական քննություններն անցնելու համար:	_____օր_____ժամ _____րոպե

52.	Արդյո՞ք Դուք ենթարկվել եք հետևյալ ստուգումներին Սոցիալական փաթեթի շրջանակներում Ձեր վերջին տարեկան պարտադիր բժշկական քննությունների ընթացքում.	
52.1.	Թերապևտի խորհրդատվություն	<input type="checkbox"/> 1.Այո <input type="checkbox"/> 2.Ոչ
	<u>Բաց թողեք այս հարցը, եթե դուք տղամարդ եք:</u>	<input type="checkbox"/> 1.Այո <input type="checkbox"/> 2.Ոչ
52.2.	Գինեկոլոգի խորհրդատվություն	<input type="checkbox"/> 1.Այո <input type="checkbox"/> 2.Ոչ
	<u>Բաց թողնեք այս հարցը, եթե դուք կին եք:</u>	<input type="checkbox"/> 1.Այո <input type="checkbox"/> 2.Ոչ
52.3.	Ուռուլոգի խորհրդատվություն	<input type="checkbox"/> 1.Այո <input type="checkbox"/> 2.Ոչ
52.4.	Այլ մասնագետների խորհրդատվություն՝ համաձայն թերապևտի կողմից տրված ուղեգրի	<input type="checkbox"/> 1.Այո <input type="checkbox"/> 2.Ոչ
52.5.	Արյան ընդհանուր քննություն	<input type="checkbox"/> 1.Այո <input type="checkbox"/> 2.Ոչ
52.6.	Մեզի ընդհանուր քննություն	<input type="checkbox"/> 1.Այո <input type="checkbox"/> 2.Ոչ
52.7.	Արյան մեջ գլյուկոզայի (շաքարի) մակարդակի ստուգում	<input type="checkbox"/> 1.Այո <input type="checkbox"/> 2.Ոչ
52.8.	Արյան մեջ խոլեստերինի մակարդակի ստուգում	<input type="checkbox"/> 1.Այո <input type="checkbox"/> 2.Ոչ
52.9.	Էլեկտրասրտագրություն՝ ԵԿԳ	<input type="checkbox"/> 1.Այո <input type="checkbox"/> 2.Ոչ
52.10.	Ուլտրաձայնային հետազոտություններ՝ սոնոգրաֆիա	<input type="checkbox"/> 1.Այո <input type="checkbox"/> 2.Ոչ
	<u>Պատասխանեք այս հարցին, եթե դուք 45 և ավելի տարեկան տղամարդ եք:</u>	<input type="checkbox"/> 1.Այո <input type="checkbox"/> 2.Ոչ
52.11.	ՊՍԱ (PSA) թեստ (արյան անալիզ՝ պարզելու շագանակագեղձի հատուկ անտիգենի մակարդակը)	<input type="checkbox"/> 1.Այո <input type="checkbox"/> 2.Ոչ
	<u>Պատասխանեք այս հարցին, եթե դուք 30-60 տարեկան կին եք:</u>	<input type="checkbox"/> 1.Այո <input type="checkbox"/> 2.Ոչ
52.12.	ՊԱՊ (PAP) թեստ (արգանդի վզիկի լորձաթաղանթի քսուկի բջջաբանական հետազոտություն)	<input type="checkbox"/> 1.Այո <input type="checkbox"/> 2.Ոչ

53.	Արդյո՞ք Դուք կատարել եք որևէ վճարում Սոցիալական փաթեթով նախատեսված տարեկան պարտադիր կանխարգելիչ բժշկական քննությունների համար (Ներառյալ «շնորհակալական» վճարումները և նվերները):	<input type="checkbox"/> 1. Այո <input type="checkbox"/> 2. Ոչ → (<i>անցեք հարց 61-ին</i>)
54.	Ու՞մ եք կատարել Ձեր վճարումը: (<i>Նշեք բոլոր հնարավոր տարբերակները</i>)	<input type="checkbox"/> 1. Պոլիկլինիկայի դրամարկղ <input type="checkbox"/> 2. Բժիշկ(ներ)ին <input type="checkbox"/> 3. Բուժքույր(եր)ին <input type="checkbox"/> 4. Այլ (<i>նշեք</i>) _____
55.	Ընդհանուր առմամբ, որքա՞ն եք վճարել բժիշկներին՝ Սոցիալական փաթեթով նախատեսված տարեկան պարտադիր կանխարգելիչ բժշկական քննություններն անցնելու ժամանակ (ներառյալ «շնորհակալական» վճարումները և նվերները)	_____ ՀՀ Դրամ → <i>(եթե չեք վճարել՝ գրեք 0, և անցեք հարց 57-ին)</i>
56.	Ո՞րն էր բժշկին (բժիշկներին) վճարում կատարելու պատճառը:	<input type="checkbox"/> 1. Պոլիկլինիկայի պահանջով <input type="checkbox"/> 2. Բժշկի պահանջով <input type="checkbox"/> 3. Բուժքրոջ պահանջով <input type="checkbox"/> 4. Վճարել եմ իմ ցանկությամբ
57.	Ընդհանուր առմամբ, որքա՞ն եք վճարել բուժքույրերին Սոցիալական փաթեթով նախատեսված տարեկան պարտադիր կանխարգելիչ բժշկական քննություններն անցնելու ժամանակ (ներառյալ «շնորհակալական» վճարումները և նվերները):	_____ ՀՀ Դրամ → <i>(եթե չեք վճարել՝ գրեք 0, և անցեք հարց 59-ին)</i>
58.	Ո՞րն էր բուժքրոջը (բուժքույրերին) վճարում կատարելու պատճառը:	<input type="checkbox"/> 1. Պոլիկլինիկայի պահանջով <input type="checkbox"/> 2. Բժշկի պահանջով <input type="checkbox"/> 3. Բուժքրոջ պահանջով <input type="checkbox"/> 4. Վճարել եմ իմ ցանկությամբ
59.	Ընդհանուր առմամբ, որքա՞ն գումար եք Դուք ծախսել Սոցիալական փաթեթի շրջանակներում Ձեր տարեկան պարտադիր բժշկական քննություններն անցնելիս (ներառյալ «շնորհակալական» վճարումները և նվերները):	_____ ՀՀ Դրամ
60.	Այդ գումարից որքա՞ն եք վճարել դրամարկղում:	_____ ՀՀ Դրամ → <i>(եթե չեք վճարել՝ գրեք 0)</i>
61.	Ձեր վերջին տարեկան պարտադիր բժշկական քննության ընթացքում Ձեր մոտ հայտնաբերվե՞լ է որևէ առողջական խնդիր:	<input type="checkbox"/> 1. Այո <input type="checkbox"/> 2. Ոչ → (<i>անցեք հարց 64-ին</i>)
62.	Այդ հայտնաբերված առողջական խնդրի կապակցությամբ Դուք անցե՞լ եք հավելյալ հետազոտություն(ներ) կամ բուժում:	<input type="checkbox"/> 1. Այո <input type="checkbox"/> 2. Ոչ → (<i>անցեք հարց 64-ին</i>)
63.	Այդ հավելյալ հետազոտությունը(ները) կամ բուժումը փոխհատուցվե՞լ են Սոցիալական փաթեթի շրջանակներում:	<input type="checkbox"/> 1. Այո <input type="checkbox"/> 2. Ոչ

Ստորև բերված են որոշ հարցեր, որոնք վերաբերում են Սոցիալական փաթեթով նախատեսված Ձեր տարեկան պարտադիր կանխարգելիչ բժշկական քննությունների ընթացքում մատուցված բժշկական ծառայությունների որակին:

64.	Ինչպե՞ս կգնահատեիք պարտադիր կանխարգելիչ բժշկական քննությունների ընթացքում ստացած բժշկական օգնության ընդհանուր որակը:	<input type="checkbox"/> 1. Շատ վատ <input type="checkbox"/> 2. Վատ <input type="checkbox"/> 3. Միջին <input type="checkbox"/> 4. Լավ <input type="checkbox"/> 5. Շատ լավ				
65.	Ինչպե՞ս կգնահատեիք. <i>(Նշեք մեկ պատասխան յուրաքանչյուր հարցի համար)</i>	Շատ վատ	Վատ	Միջին	Լավ	Շատ լավ
	65.1. Բժիշկների վերաբերմունքը	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
	65.2. Բժիշկների մասնագիտական հմտությունները	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
	65.3. Բուժքույրերի վերաբերմունքը	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
	65.4. Բուժքույրերի մասնագիտական հմտությունները	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
	65.5. Պոլիկլինիկայի ընդհանուր մաքրությունը	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
	65.6. Պոլիկլինիկայի ընդհանուր շենքային պայմանները	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
66.	Անհրաժեշտության դեպքում արդյո՞ք կօգտվեիք նույն պոլիկլինիկայի ծառայություններից:	<input type="checkbox"/> 1. Այո <input type="checkbox"/> 2. Ոչ				
67.	Որո՞նք են այն երեք կարևորագույն ուղիները, որոնք Դուք կառաջարկեիք Սոցիալական փաթեթով նախատեսված պարտադիր կանխարգելիչ բժշկական քննության ծառայությունների որակը բարելավելու համար:	<i>Նշեք (✓) առավելագույնը երեք տարբերակ</i> <input type="checkbox"/> 1. Բարելավել բժիշկների մասնագիտական հմտությունները <input type="checkbox"/> 2. Բարելավել բուժքույրերի մասնագիտական հմտությունները <input type="checkbox"/> 3. Բարելավել պոլիկլինիկայի շենքային պայմանները <input type="checkbox"/> 4. Բարելավել պոլիկլինիկայի մաքրությունը <input type="checkbox"/> 5. Բարելավել պոլիկլինիկայի բուժսարքավորումները <input type="checkbox"/> 6. Ավելացնել անվճար դեղորայքի տրամադրումը <input type="checkbox"/> 7. Բարելավել բուժաշխատողների խորհրդատվական հմտությունները <input type="checkbox"/> 8. Ավելացնել բուժաշխատողների աշխատավարձերը <input type="checkbox"/> 9. Բացառել ոչ պաշտոնական վճարումները <input type="checkbox"/> 10. Ապահովել բուժաշխատողների բարեկիրթ շփումը հիվանդների հետ <input type="checkbox"/> 11. Այլ (<i>նշեք</i>) _____				

Սոցիալական փաթեթի Առողջապահական բաղադրիչի վերաբերյալ գոհունակությունը
 Հետևյալ հարցերը վերաբերում են Սոցիալական փաթեթի Առողջապահական բաղադրիչի մասին
 Ձեր ընդհանուր գոհունակությանը:

68.	Որքան՞վ են Ձեզ բավարարում Սոցիալական փաթեթի ծրագրի Առողջապահական բաղադրիչի հետևյալ հատկանիշները <i>(եթե Դուք տեղյակ չեք այդուսակում նշված որևէ հատկանիշի, նշեք “Կիրառելի չէ”):</i>	Ամենին բավարարված չեմ	Բավարարված չեմ	Ոչ բավարարված եմ, ոչ էլ՝ չբավարարված	Բավարարված եմ	Լիովին բավարարված եմ	Կիրառելի չէ
68.1.	Փաթեթում ընդգրկված հիվանդանոցային ծառայությունների շրջանակը	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 88
68.2.	Փաթեթում ընդգրկված ամբուլատոր (արտահիվանդանոցային) ծառայությունների շրջանակը	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 88
68.3.	Սպասելու տևողությունը՝ սոցիալական փաթեթի շրջանակներում պոլիկլինիկայից ուղեգիր ստանալու համար	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 88
68.4.	Սպասելու տևողությունը՝ սոցիալական փաթեթի շրջանակներում հիվանդանոց ընդունվելու համար	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 88
68.5.	Սպասելու տևողությունը՝ սոցիալական փաթեթի շրջանակներում պարտադիր կանխարգելիչ բժշկական քննություններն անցնելու համար	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 88
68.6.	Հիվանդանոցային բուժման անհրաժեշտության դեպքում հիվանդանոցն ընտրելու հնարավորությունը	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 88
68.7.	Սոցիալական փաթեթի շրջանակներում կանխարգելիչ բժշկական քննություններն անցնելու համար պոլիկլինիկան ընտրելու	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 88

	հնարավորությունը						
	68.8. Հիվանդանոցում բուժաշխատողների վերաբերմունքը Սոցիալական փաթեթի շահառուների նկատմամբ	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 88
	68.9. Պոլիկլինիկայում բուժաշխատողների վերաբերմունքը Սոցիալական փաթեթի շահառուների նկատմամբ	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 88
	68.10. Ընդհանուր առմամբ՝ Սոցիալական փաթեթի Առողջապահական բաղադրիչը	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 88

69.	Սոցիալական փաթեթի Առողջապահական բաղադրիչն ինչպե՞ս է ազդել Ձեր.	Շատ է վատթարացրել	Վատթարացրել է	Անփոփոխ է թողել	Բարելավել է	Շատ է բարելավել
	69.1. Հիվանդանոցային ծառայությունների ֆինանսական մատչելիության վրա	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
	69.2. Պոլիկլինիկական ծառայությունների ֆինանսական մատչելիության վրա	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
	69.3. Հիվանդանոցներում մատուցվող բուժօգնության որակի վրա	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
	69.4. Պոլիկլինիկաներում մատուցվող բուժօգնության որակի վրա	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
	69.5. Ձեր՝ բժշկական մեծ ծախսեր ունենալու ռիսկի վրա	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
	69.6. Ձեր առողջական վիճակի վրա	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

70.	<p>Հետևյալ միջոցառումներից ո՞ր <u>երեքը</u> կհամարեիք ամենից կարևոր՝ Սոցիալական փաթեթի Առողջապահական բաղադրիչը բարելավելու համար <i>(նշեք երեք տարբերակից ոչ ավել)</i></p>	<p><input type="checkbox"/>1. Ընդլայնել հիվանդանոցներում անվճար տրամադրվող բուժօգնությունների տեսականին</p> <p><input type="checkbox"/>2. Ընդլայնել պոլիկլինիկաներում անվճար տրամադրվող բուժօգնությունների տեսականին</p> <p><input type="checkbox"/>3. Անվճար ծառայությունների փաթեթին ավելացնել ամբուլատոր (առանց հոսպիտալացվելու) միջամտությունները հիվանդանոցներում</p> <p><input type="checkbox"/>4. Ընդլայնել տարեկան պարտադիր կանխարգելիչ բժշկական քննությունների ցանկը</p> <p><input type="checkbox"/>5. Ավելացնել անվճար տրամադրվող դեղերի տեսականին և քանակը</p> <p><input type="checkbox"/>6. Կրճատել սպասելաժամանակը բուժօգնություն ստանալու համար</p> <p><input type="checkbox"/>7. Հավելյալ տեղեկատվություն տրամադրել Սոցիալական փաթեթում ընդգրկված ծառայությունների վերաբերյալ</p> <p><input type="checkbox"/>8. Բարելավել բուժաշխատողների վերաբերմունքը Սոցիալական փաթեթի շահառուների նկատմամբ</p> <p><input type="checkbox"/>9. Բացառել ոչ պաշտոնական վճարումները Սոցիալական փաթեթով նախատեսված ծառայությունների համար:</p> <p><input type="checkbox"/>10. Այլ <i>(նշեք)</i> _____</p>
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Ստորև ներկայացված հարցերը վերաբերում են Ձեր ընդհանուր առողջական վիճակին:

71.	Ինչպե՞ս կգնահատեիք Ձեր առողջությունը վերջին 30 օրվա ընթացքում:	<input type="checkbox"/> 1. Վատ <input type="checkbox"/> 2. Բավարար <input type="checkbox"/> 3. Լավ <input type="checkbox"/> 4. Շատ լավ <input type="checkbox"/> 5. Գերազանց
72.	Ինչպե՞ս կգնահատեիք Ձեր ներկայիս առողջական վիճակը՝ մեկ տարի առաջվա հետ համեմատած:	<input type="checkbox"/> 1. Շատ ավելի վատ է <input type="checkbox"/> 2. Փոքր-ինչ ավելի վատ է <input type="checkbox"/> 3. Մոտավորապես նույնն է <input type="checkbox"/> 4. Փոքր-ինչ ավելի լավ է <input type="checkbox"/> 5. Շատ ավելի լավ է

Հետևյալ հարցերը վերաբերում են Ձեր ընտանիքի կենսամակարդակին:

73.	Քանի՞ հոգի է բնակվում Ձեր տանը (<i>ներառյալ Ղուբ</i>):	_____ հոգի
74.	Ինչպե՞ս կգնահատեիք Ձեր ընտանիքի կենսամակարդակը:	<input type="checkbox"/> 1. Միջինից բավականին ցածր <input type="checkbox"/> 2. Միջինից մի փոքր ցածր <input type="checkbox"/> 3. Միջին <input type="checkbox"/> 4. Միջինից մի փոքր բարձր <input type="checkbox"/> 5. Միջինից բավականին բարձր
75.	Միջինում ամսական որքա՞ն գումար է ծախսում Ձեր ընտանիքը:	<input type="checkbox"/> 1. 50.000 դրամից պակաս <input type="checkbox"/> 2. 50.000 - 100.000 դրամ <input type="checkbox"/> 3. 100.001 - 200.000 դրամ <input type="checkbox"/> 4. 200.001 - 300.000 դրամ <input type="checkbox"/> 5. Ավելի քան 300.000 դրամ <input type="checkbox"/> 88. Չգիտեմ/ հրաժարվում եմ պատասխանել

Շնորհակալություն մասնակցության համար:

Appendix 3: English consent form

**American University of Armenia
Institutional review Board #1
Consent Form**

**Health Component of the Social-Package: A Cross-Sectional Survey of Beneficiaries in
Yerevan**

Hello. My name is Hratchia Lylozian I am a physician and a graduate student of the Master of Public Health program at the American University of Armenia. The School of Public Health is conducting a research project that includes a survey aimed to identify the experiences of beneficiaries of the Social Package. We want to understand the performance of the Health component of the Social Package and make suggestions to policy makers for improvements.

The school where you work was randomly selected from the list of all public schools in Yerevan, and you are one of the thirty two participants chosen randomly from this school to participate in our study. In total 15 schools are participating in this study from Yerevan City, and the total number of participants is 480.

I would like to ask you to participate in this survey because you are a beneficiary of the Social Package and could share with us your experiences with the Health Care component of the Social Package. Your participation in this survey is voluntary. There is no penalty if you refuse to participate in this study. Your participation will involve filling a questionnaire that I will provide to you, the questionnaire contains questions about your experiences during your recent hospitalization and annual medical tests. You can skip any questions you do not want to answer or stop completing the questionnaire at any time. Your participation in the study poses no risk for you. There is no direct benefit from the participation in this study, but your participation can contribute to improving the Health care component of the Social Package.

The information provided by you is confidential and will be used only for the study and will be presented only in an aggregate form. The study report will present only the overall findings from the survey. The name of the school will not be mentioned anywhere.

If you have questions about this study, you can call the primary investigator of this study, Dr. Varduhi Petrosyan at the School of Public Health, American University of Armenia, phone: 060612592. If you feel you have not been treated fairly or think you have been hurt by joining the study, you can contact Dr. Kristina Akopyan, the Human Subject Protection Administrator of the American University of Armenia, phone: 060612561.

Thank you

Appendix 4: Armenian consent form

**Հայաստանի Ամերիկյան Համալսարան
Հանրային Առողջապահության Բաժին
Գիտահետազոտական Էթիկայի թիվ 1 Հանձնաժողով
Իրազեկ Համաձայնության ձև**

Սոցիալական Փաթեթի Առողջապահական Բաղադրիչի Գնահատում

Բարև Ձեզ: Իմ անունը Հրայրա Լիլոյան է: Ես մասնագիտությամբ բժիշկ եմ և Հայաստանի Ամերիկյան համալսարանի Հանրային առողջապահության ֆակուլտետի մագիստրատուրայի ավարտական կուրսի ուսանող: Հանրային առողջապահության ֆակուլտետը կատարում է հետազոտություն, որի նպատակն է ուսումնասիրել Սոցիալական փաթեթի շահառուների փորձը, որպեսզի ավելի լավ հասկանանք ծրագրի բժշկական բաղադրիչի իրագործման ընթացքում հանդիպող խնդիրները և կատարենք առաջարկություններ քաղաքականություն մշակողներին ծրագիրը բարելավելու համար:

Դպրոցը, որտեղ դուք աշխատում եք, ընտրված է պատահականության սկզբունքով Երևան քաղաքի հանրային դպրոցների ընդհանուր ցանկից և դուք այս դպրոցում աշխատող պատահականության սկզբունքով ընտրված 32 անհատներից մեկն եք, ում հրավիրում ենք մասնակցելու այս հետազոտությանը: Երևան քաղաքից 15 դպրոց է մասնակցում այս հետազոտությանը, և մասնակիցների ընդհանուր թիվը կազմում է 480:

Ձեր մասնակցությունը կարևոր է, քանի որ Դուք Սոցիալական փաթեթի շահառու եք և կարող եք Սոցիալական փաթեթի բժշկական բաղադրիչի վերաբերյալ Ձեր կարծիքը հայտնել մեզ: Ձեր մասնակցությունը հետազոտությանը կամավոր է: Մասնակցությունը ներառում է Ձեզ տրամադրված հարցաթերթիկը լրացնելը, հարցաթերթիկը պարունակում է հարցեր հիվանդանոցներում և տարեկան կանխարգելիչ բժշկական քննությունների ժամանակ Ձեր փորձառությունների վերաբերյալ: Լրացման ընթացքում Դուք կարող եք հրաժարվել պատասխանել որևէ հարցի կամ ցանկացած պահի դադարեցնել լրացնելը: Ձեր մասնակցությունը կամ հրաժարվելը մասնակցել այս հետազոտությանը որևէ անհարմարություն չի առաջացնի Ձեզ համար և որևէ ձևով չի անդրադառնա Ձեր աշխատանքի վրա: Այս հարցազրույցին Ձեր մասնակցությունը չի ենթադրում որևէ ուղղակի շահ Ձեզ համար, սակայն այն կարող է օգնել բարելավել Սոցիալական փաթեթի բժշկական բաղադրիչը:

Ձեր կողմից տրամադրված տվյալները անանուն և գաղտնի են և օգտագործվելու են միայն այս հետազոտության նպատակով, որի միայն ընդհանրացված արդյունքները կներկայացվեն զեկույցի ձևով: Չեկույցում նույնիսկ չի նշվելու, թե որ դպրոցներն են մասնացել այս հետազոտությանը:

Այս հետազոտության վերաբերյալ հարցեր ունենալու դեպքում կարող եք կապ հաստատել Հանրային առողջապահության բաժնի դեկան Վարդուհի Պետրոսյանի հետ հետևյալ հեռախոսահամարով՝ (37460) 61 25 92 : Եթե Դուք կարծում եք, որ այս հետազոտությանը մասնակցելու ընթացքում Ձեզ հետ լավ չեն վերաբերվել կամ մասնակցությունը Ձեզ վնաս է պատճառել, կարող եք զանգահարել Հայաստանի ամերիկյան համալսարանի Էթիկայի հանձնաժողովի քարտուղար Քրիստինա Հակոբյանին՝ (37460) 61 25 61 հեռախոսահամարով:

Շնորհակալություն