

Mobile Services: feasibility and acceptability questionnaire

- A. Referred for
 1. HIV care 2. ART care 3. TB symptoms 4. Diabetes 5. HPT 6. STI 7. None 8. Other
- B. Interview details
 1. Date of test (dd/mmm/yyyy) ___/___/___
 2. Date of birth (dd/mmm/yyyy) ___/___/___
 3. Name of counsellor _____
 4. Demographics
 a. Nationality _____
 5. Language: 1: Afrikaans 2: English 3: Xhosa 4: Other _____

Greeting: Thank you for using the test, we really appreciate that you agreed to take part in this research! We would like to know what it was like to use the mobile clinic.

1. Before testing with the Tutu Tester, had you ever had an HIV test?				
Yes	No	Unsure		
2. Please circle which services you have accessed?				
Mobile clinic	Clinic	Hospital	Private doctor	Other: _____
3. Mobile Clinic survey				
1. On a scale of 1 to 5, how easy was it to understand the counselling at the mobile clinic?				
1 not at all easy	2 not easy	3	4 easy	5 very easy
2. On a scale of 1 to 5, please rate how helpful was the mobile clinic service? 1 = not at all helpful, 5 = very helpful				
1 not at all	2 not helpful	3	4 helpful	5 very helpful
3. On a scale of 1 to 5, would you consider using the mobile clinic service again? 1 = not at all, 5 = very much				
1 not at all	2 no	3	4 yes	5 very much
4. How likely are you to tell others about the mobile clinic service? 1 = never, 5 = very likely				
1 not at all	2 not likely	3	4 likely	5 very likely
5. How happy were you with the time it took to be seen at the mobile clinic?				
1 very unhappy	2 unhappy	3	4 happy	5 very happy
6. On a scale of 1 to 5, please rate how friendly was the clinic service?				
1 very unfriendly	2 unfriendly	3	4 friendly	5 very friendly
7. How confidential is the mobile clinic service? (Your information will be kept private?)				
1 not confidential	2 don't know	3 Confidential		
8. How do mobile clinics compare with traditional clinics/ hospitals?				
1 much worse	2 worse	3 same	4 better	5 much better
9. How do mobile clinics staff compare with traditional clinics/ hospitals?				
1 much worse	2 worse	3 same	4 better	5 much better
10. Which health facilities have the best healthcare experience?				
1 Mobile Clinics are better	2 Service is about the same	3 Clinic facilities are better		
11. How concerned are you that someone may see you at the mobile clinic?				
1 not at all	2 not really	3 don't know	4 yes	5 very much
12. Compared with traditional clinics, mobile clinics are				
1 much worse	2 worse	3 same	4 better	5 much better
13. Overall, how would you rate your experience at the mobile clinic?				
1 very bad	2 bad	3 okay	4 good	5 very good
14. How at risk are you for diabetes?				
1 not at all	2 not really	3 don't know	4 yes	5 very much
15. How at risk are you for high blood pressure?				
1 not at all	2 not really	3 don't know	4 yes	5 very much
16. How at risk are you of contracting HIV?				
1 not at all	2 not really	3 don't know	4 yes	5 very much
17. What makes it difficult to access healthcare? (Do not prompt)				
a. Too far			c. It takes too long	
b. Unfriendly staff			d. Other _____	
18. Have you experienced any bad consequences because of the mobile service?				
Yes	No			
19. If yes for 18, what were the bad consequences? (circle 1 letter)				
a. I did not enjoy the experience				
b. It was distressing				
c. I fear someone might find out I tested				
d. Other _____				

20. Demographics (circle relevant answer/s)

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|---------------------------------------|--------|------------|---------|----------|
| 1. Marital status | Single | Cohabiting | Married | Divorced |
| 2. Sex | Female | Male | | |
| 3. Employed | Yes | No | | |
| 4. Monthly income | Yes | No | | |
| 5. Highest education level (circle 1) | | | | |
| a. primary school | 1 Some | 2 Complete | | |
| b. High school | 3 Some | 4 Complete | | |
| c. University | 5 Some | 6 Complete | | |
| 6. Type of dwelling | Formal | Informal | | |

Greeting: Thank you so much for taking part in our research, we really appreciate your time!