

## Question in Project:

SHARElife – Healthcare Module (English Version)

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## Question Topic:

Public health/ Visits to the doctor & treatments

## Construct:

Abandonment of medical service due to long waiting time

## General Information:

**\*Note: This item was tested in German. This is an English translation of the original German wording. The translation does not correspond exactly to the wording in the English [SHARE source questionnaire](#).\***

## Question Text:

Have you ever needed a medical treatment or to see a doctor but you could not because you had to wait too long?

*[Haben Sie jemals auf einen Arztbesuch oder eine Behandlung verzichtet, weil Sie zu lange auf einen Termin warten mussten?]*

## Answer Categories:

Yes *[Ja]*

No *[Nein]*

## Cognitive Techniques:

General Probing, Specific Probing, Emergent Probing.

## Findings for Question:

Four respondents (respondents 01, 02, 09 and 10) stated that they have ever needed to see a doctor but could not because they had to wait too long. The remaining six respondents answered the question with ‚No‘.

Further on, those six respondents were asked whether it was the case that the waiting period for an appointment had never been too long or whether the treatment had never been indispensable. Five respondents (respondents 03, 04, 06, 07 and 08) explained that for them the waiting period had never been too long. Respondent 04 additionally had never been in a position to give up a treatment. Therefore, he had never given up a consultation despite long waiting periods. Respondent 07 stated spontaneously that he understood ‘waiting too long’ differently than the other respondents. He referred to the process of ‘waiting too long’ as to the period of time spent in the waiting room until the patient is called to the doctor’s surgery: *‘No. Even if that’s the case, one has to take that into consideration. It happened to me at the ophthalmologist’s. I had an appointment at 10 o’clock and had to wait for a long time. I cannot expect that my appointment will start at 10:02 a.m..’* (respondent 07). Respondent 06 stated that he had never given up a treatment yet because *‘it had to be treated. In this case I cannot give it up.’* (respondent 06). Also, respondent 04 explained that he had always gone to see a doctor as soon as he decided to do so. Long waiting times for a preventive medical check up are acceptable for the respondent but if it is something urgent *‘... then I simply go to the doctor’s practice and demand an appointment, putting a bit more pressure on them.’* (respondent 04).

Those respondents who had never given up an appointment were additionally asked about the kinds of treatment where they generally plan an appointment a long time in advance. Three respondents (respondents 03, 05 and 07) mentioned appointments to see an *orthopaedist*. Appointments with the following doctors were named once: *cardiologist* (respondent 05), *general practitioner* (respondent 05), *dentist* (respondent 06) and an *ophthalmologist* (respondent 06). Respondent 04 said that in general he planned longer waiting times for preventive medical check-ups.

The four respondents who answered ‘Yes’ to question 3 were asked for a more detailed answer and to specify the kind of doctor they had in mind. From the explanation given by respondent 02 it is clear that he did not refer to any particular appointment but to his efforts to get a doctor’s appointment in general. He mentioned skin screening as an example. If he had to wait more than two months for an appointment, he would give it up or try to find another doctor’s office where an appointment could take place earlier. Here, he referred again only to preventive medical check ups. Also, respondent 10 said that he gave up preventive medical check ups (an ultrasound test of adipose tumours) after having to wait for more than two hours for this kind of procedure despite having an appointment. This medical check up was supposed to be made every other year, according to the respondent’s words. The respondent stated that he had never attempted to get this kind of appointment again because he did not want to spend as much time in the waiting room again. All in all, that particular treatment was assessed as unimportant for the respondent because he did not experience any acute symptoms or pain. Overall, preventive medical check ups are given up because of the interaction of three factors: waiting time, relevance of the treatment and effort involved.

Respondents 01 and 09 reported appointments with an orthopaedist at this point. Both

cases involved urgent treatment (*'I was in pain,'* respondent 09). Respondent 09 had had to wait for six weeks for treatment to alleviate his pain, which seemed too long for him. As a result, he *'searched for a different possibility'* (respondent 09) and went to a different doctor's office. Respondent 01 said that she had left an orthopaedist's office after a waiting period of four hours, although he had a set appointment. He arranged another appointment and had to wait another four weeks for it.

Considering the answers given by the respondents who answered the question with a 'Yes', it is clear that some of the respondents referred only to the waiting time in the waiting room itself, but others had the general waiting time for an appointment in mind.

In conclusion, the respondents would think of different issues when responding to this question. In addition, the responses show that there is a difference between waiting time for an appointment in the case of pressing pain and waiting periods for preventive medical check ups: Respondent 10 told the interviewer after the probing question (*'And what if someone tells you that you have to wait four weeks for a treatment when you are making an appointment?'*) that he was OK with longer waiting periods as long as it is was not an urgent case of pain. Considering acute pain, only respondent 01 made a specific statement (eight days). As regards preventive medical check ups, a waiting period is 'too long' in the following cases: fourteen days or longer for respondent 08, six weeks or longer for respondent 09 and eight weeks or longer for respondent 02.

The two respondents who have private health insurance also reported in this question that they had never given up an appointment or a treatment for a reason such as having to wait too long and said they always received appointments within a short period of time: *'There are patients of first and second class, and also more people who are mandatorily insured. I think this is not fair. I mean, it's nice that you get an appointment right when you enter the doctor's office when you have private insurance; and I've already experienced that myself. I wanted to make an appointment for an orthopaedist and was told that I could only get an appointment in three months. I didn't react and just stood there and then they asked me what kind of insurance I had. If you say 'private', they look into another book and, surprise, surprise, I had an appointment within the next two days.'* (respondent 07).

## **Recommendations:**

It is not clear in the question that the long waiting period is taken as the time between the moment of making an appointment and the actual appointment rather than the period one has to spend waiting in the waiting room until the appointment begins when one has an appointment for a fixed hour. Therefore, we recommend rephrasing the question as follows:

"Have you ever needed a medical treatment or to see a doctor but did not because the waiting time for an available appointment was too long? This question refers not to the

waiting time in the actual waiting room, but to the waiting time for a doctor's appointment.

*[Haben Sie jemals auf einen Arztbesuch oder eine Behandlung verzichtet, weil die Wartezeit bis zum nächstmöglichen Termin beim Arzt zu lang war? Es geht hier nicht um die Wartezeit auf die Behandlung im Wartezimmer, sondern um die Terminvereinbarung für einen Arztbesuch.]"*

Furthermore, we recommend that question 1 and 3 should explicitly state that the respondents should not include dentist appointments or dental treatments in their answers.