



Open Access Repository

[www.ssoar.info](http://www.ssoar.info)

## RESPOND - Improving regional health system responses to the challenges of migration through tailored interventions for asylum-seekers and refugees: Cognitive Pretest

Hadler, Patricia; Neuert, Cornelia; Lenzner, Timo; Stiegler, Angelika; Sarafoglou, Andrea; Bous, Patricia; Reisepatt, Niklas; Menold, Natalja

Veröffentlichungsversion / Published Version

Arbeitspapier / working paper

Zur Verfügung gestellt in Kooperation mit / provided in cooperation with:

GESIS - Leibniz-Institut für Sozialwissenschaften

### Empfohlene Zitierung / Suggested Citation:

Hadler, P., Neuert, C., Lenzner, T., Stiegler, A., Sarafoglou, A., Bous, P., ... Menold, N. (2017). *RESPOND - Improving regional health system responses to the challenges of migration through tailored interventions for asylum-seekers and refugees: Cognitive Pretest*. (GESIS Project Reports, 2017/07). Mannheim: GESIS - Leibniz-Institut für Sozialwissenschaften. <https://doi.org/10.17173/pretest83>

### Nutzungsbedingungen:

Dieser Text wird unter einer CC BY Lizenz (Namensnennung) zur Verfügung gestellt. Nähere Auskünfte zu den CC-Lizenzen finden Sie hier:

<https://creativecommons.org/licenses/by/4.0/deed.de>

### Terms of use:

This document is made available under a CC BY Licence (Attribution). For more information see:

<https://creativecommons.org/licenses/by/4.0>

  
Leibniz-Institut  
für Sozialwissenschaften

Mitglied der  
  
Leibniz-Gemeinschaft

Diese Version ist zitierbar unter / This version is citable under:

<https://nbn-resolving.org/urn:nbn:de:0168-ssoar-70605-3>

## GESIS Project Reports

2017|07

**RESPOND – Improving regional health system responses to the challenges of migration through tailored interventions for asylum-seekers and refugees**

**Cognitive Pretest**

**November/December 2017**

*Patricia Hadler, Cornelia Neuert,  
Timo Lenzner, Angelika Stiegler,  
Andrea Sarafoglou, Patricia Bous,  
Niklas Reisepatt & Natalja Menold*



GESIS Project Reports 2017|07

**RESPOND – Improving regional health system responses to the challenges of migration through tailored interventions for asylum-seekers and refugees**

**Cognitive Pretest**

**November/December 2017**

*Patricia Hadler, Cornelia Neuert, Timo Lenzner, Angelika Stiegler, Andrea Sarafoglou, Patricia Bous, Niklas Reisepatt & Natalja Menold*

## **GESIS Project Reports**

GESIS – Leibniz-Institut für Sozialwissenschaften  
Survey Design and Methodology  
Postfach 12 21 55  
68072 Mannheim

Phone: +49 (0) 621 1246 - 227 / - 225 / - 198

Fax: +49 (0) 621 1246 - 100

E-Mail: [timo.lenzner@gesis.org](mailto:timo.lenzner@gesis.org) / [cornelia.neuert@gesis.org](mailto:cornelia.neuert@gesis.org) / [patricia.hadler@gesis.org](mailto:patricia.hadler@gesis.org)

DOI: [10.17173/pretest83](https://doi.org/10.17173/pretest83)

### *Zitierweise*

Hadler, P.; Neuert, C.; Lenzner, T. et. al. (2017): RESPOND – Improving regional health system responses to the challenges of migration through tailored interventions for asylum-seekers and refugees. Cognitive pretest. *GESIS Projektbericht*. Version: 1.0. GESIS - Pretestlabor. Text. <http://doi.org/10.17173/pretest83>

# Contents

---

	Page
1 Aims of the pretest.....	5
2 Sample.....	6
3 Methods.....	7
4 Results.....	8
5 Overview of the notes on the translations.....	66
6 Glossary: Cognitive Techniques.....	67



---

## 1 Aims of the pretest

---

Increasing international refugee flows present the German health care system with the challenge of ensuring adequate care for this population group. The system response in the area of care for asylum seekers is determined by international, national and federal regulations and is often characterized by underuse, overuse and misuse.

The BMBF-funded project "RESPOND" was launched to improve the system response in the long term. The aim of the project is to develop and evaluate measures that overcome individual and organizational barriers to effective care in the light of legal framework conditions. On the one hand, this should improve the system response, i.e. become more effective, more efficient and more demand-oriented. On the other hand, they should lead to an improvement in health-related target variables for asylum seekers.

In order to address the project aims, a cross-sectional study will be conducted to assess the health status, access to care, quality of care and health literacy of asylum seekers in different settings. A standardized questionnaire will be used in all settings.

In preparation for the survey, selected parts of the questionnaire in different languages will be subjected to a cognitive pretest under methodological and questionnaire-related aspects and revised based on the test results.

For this purpose, the GESIS pretest laboratory was commissioned to carry out the cognitive pretest. The contact persons were Dr. Kayvan Bozorgmehr and Louise Bartelt of the University Hospital Heidelberg (Department of General Medicine and Health Services Research).



## 2 Sample

### Number of cognitive

interviews: 9

**Selection of target population:** A total of 9 cognitive interviews were conducted with asylum-seekers over 18 years of age who are accommodated in initial reception centers or in collective accommodation in cities and municipalities.

The aim was to invite at least two persons per language.

The test persons were selected and recruited by the client: A quota plan based on socio-demographic variables such as gender, age or educational level was not possible. Central characteristics of the test persons are shown in the following table:

### Central characteristics of the test persons

Language of the questionnaire	Test person number	Native language	Gender	Age
Serbian	SER01 <sup>1</sup>	Macedonian (Official language Serbian)	Male	20
Serbian	SER02	Serbian	Female	45
Arabic	AR01	Arabic	Male	35
Arabic	AR02	Arabic	Male	28
Farsi	FAR01	Dari	Male	26
Farsi	FAR02	Farsi	Female	36
Russian	RUS01 <sup>2</sup>	Russian	Female	43
Russian	RUS02 <sup>3</sup>	Russian and Ukrainian	Male	18
English	ENG01	Ibo	Male	27

<sup>1</sup> Test subject SER01 claims to use Serbian as a kind of official language but was only able to fill out the written questionnaire independently to a limited extent. The simultaneous interpreter had to consistently translate item texts into simple language, e.g. compounds such as "state of health". Where she did not do this, terms were not or incorrectly understood, e.g. "chronic illness" or "medical specialist".

<sup>2</sup> The interpreter was very much in the foreground in this interview and frequently answered questions for the test person. In addition, the interpreter only had the German version of the cognitive interview protocol, but she had some questions read out in Russian by the test person and evaluated the translation.

<sup>3</sup> The interview was translated by the same interpreter as the interview of test person RUS01. However, in this interview she had a Russian cognitive interview protocol.

### 3 Methods

---

<b>Field time:</b>	9 November to 22 November 2017
<b>Number of cognitive interviewers:</b>	4
<b>Pretests conducted in the lab (video-recorded):</b>	9
<b>Externally conducted tests (audio-recorded):</b>	-
<b>Procedure:</b>	The questions to be tested were available to the test subjects in their native language. The cognitive interview protocol (evaluation questionnaire) for conducting the interviews was available in German and English. The interviews in Arabic, Farsi, Serbian and Russian were conducted in German and the communication between interviewer and respondent was ensured by simultaneous interpreters who translated both the interviewer's questions and the respondents' answers. The cognitive interviews in English were conducted without simultaneous interpreters.
<b>Interview mode:</b>	PAPI
<b>Cognitive techniques:</b>	General Probing, Specific Probing, Category Selection Probing, Paraphrasing, Emergent Probing.
<b>Incentive for test persons:</b>	30 Euro

## 4 Results

---

Before listing the results for each tested question, we would like to give some general feedback on the questionnaire:

1. The length of the questionnaire: even if only part of the questionnaire could be tested in the cognitive interview, it has already been shown here that it is very long; especially in view of the fact that this questionnaire is aimed at people who may have a lower level of education or are people whose health does not permit longer concentration.

For this special target group, the questions should also be written in very simple language if possible, since it is not known in advance which linguistic and cognitive abilities are to be expected of the respondents.

2. The temporal (sometimes 2 weeks, sometimes 4 weeks, sometimes the last year) and spatial reference spaces (whether it is only the experiences in Germany) mentioned in the questionnaire regularly get mixed up and are therefore not considered by the respondents. We recommend keeping the time periods as constant as possible or to arrange the questions thematically according to longer/shorter periods, so that the frame of reference does not change every few questions, but per section.
3. Some questions are very abstract and are not tailored to the situation of refugees; for example, respondents are asked to rate on a scale how easy or difficult it is to judge something that they may not even have experienced (questions 72-80).

We therefore recommend that the questionnaire be systematically reviewed again for the points mentioned, regardless of the recommendations for the individual questions to be tested.

**Question 1:**

Wie ist Ihr Gesundheitszustand im Allgemeinen?

[What is your general state of health?]

**Frequency distribution (N=9)**

Answer	TP
Sehr gut [Very good]	SER01, AR01, FAR01, FAR02
Gut [Good]	RUS02
Mittelmäßig [Moderate]	AR02, RUS01
Schlecht [Bad]	SER02
Sehr schlecht [Very bad]	ENG01

**Cognitive techniques:**

Emergent Probing.

**Findings:**

This question has not been systematically tested. Therefore, only the spontaneous comments of some test persons are available - if at all.

**Serbian**

Test person SER01 changes her answer from "bad" to "very good" because she did not understand the composite "state of health", or more precisely the word "condition" at first. After the simultaneous interpreter translated into simple language, the test person immediately changed her answer. Test person SER01 had overall great difficulties in answering the questionnaire because her mother tongue is Macedonian. In Macedonia, Serbian is a kind of official language according to the test person, but she was only able to answer the questions on her own to a limited extent. The simultaneous interpreter had to consistently translate question texts into simple language, e.g. compounds such as "state of health". Where she did not do this, terms were not or incorrectly understood.

**Recommendations:**

No changes recommended.

**Question 3:**

**Haben Sie eine chronische Krankheit oder ein seit langem bestehendes gesundheitliches Problem?**  
Damit gemeint sind Krankheiten oder gesundheitliche Probleme, die mindestens 6 Monate andauern oder voraussichtlich andauern werden

**[Do you have a chronic illness or a long-standing health problem?** This refers to diseases or health problems that last or are expected to last for at least 6 months.]

**Frequency distribution (N=9)**

Answer	TP
Ja [Yes]	AR02, RUS01, ENG01, SER02
Nein [No]	SER01, AR01, RUS02, FAR01, FAR02

**Findings:**

This question has not been systematically tested. There were no significant comments on this question from the test persons, the simultaneous interpreters and the interviewers.

**Recommendations:**

No changes recommended.

**Questions 15-21:**

In den folgenden Fragen geht es um **Schwierigkeiten, die aufgrund von Gesundheitsproblemen entstehen können**. Gesundheitsprobleme beinhalten Krankheiten, die lang oder kurz andauernd sein können, Verletzungen, mentale oder emotionale Probleme sowie Drogen- oder Alkoholprobleme.

[The following questions deal with **difficulties that may arise due to health problems**. Health problems include illnesses that can be long or short lasting, injuries, mental or emotional problems, and drug or alcohol problems.]

Denken Sie an die **letzten vier Wochen** zurück und beantworten Sie die folgenden Fragen im Hinblick darauf, wie viele Schwierigkeiten Sie bei der Durchführung der nachfolgenden Aktivitäten hatten. Kreuzen Sie bei jeder Frage bitte **nur eine** Antwort an.

[Think back to the **last four weeks** and answer the following questions in terms of how much difficulty you have had in carrying out the following activities. Please mark **only one** answer for each question.]

Wie viele Schwierigkeiten hatten Sie in den **letzten vier Wochen**:

[How many difficulties have you had in the **last four weeks**?]

**Frequency distribution (N=4)<sup>4</sup>**

Antwort	TP				
	Keine [None]	Geringe [Low]	Mäßige [Moderate]	Starke [Strong]	Sehr starke/ nicht möglich [Very strong/ not possible]
15 Sich für 10 Minuten auf etwas zu konzentrieren? [To focus on something for 10 minutes?]	AR01	SER01	AR02	ENG01	-
16 Eine längere Strecke (ca. einen Kilometer) zu Fuß zu gehen? [To walk a longer distance (about one kilometre)?]	-	SER01	AR01, ENG01	AR02	-
17 Ihren gesamten Körper zu waschen? [To wash your entire body?]	SER01, AR01, AR02, ENG01	-	-	-	-

<sup>4</sup> The test persons FAR01, FAR02, RUS01, RUS02 and SER02 did not answer this block of questionnaires because the questionnaire had to be shortened after the first four interviews in order to keep the duration of the interviews within reasonable limits.

---

18	Sich anziehen? [To get dressed?]	SER01, AR01, AR02, ENG01	-	-	-	
19	Im Umgang mit Personen, die Sie nicht kennen? [In dealing with people you do not know?]	AR01, AR02	SER01	ENG01		-
20	Eine Freundschaft aufrechtzuerhalten? [To maintain a friendship?]	AR01	SER01, AR02	-	ENG01	-
21	Bei der Bewältigung Ihres Arbeits-/Schulalltags? [In coping with your work/school routine?]	AR01	SER01, AR02	-	ENG01	-

---

#### Cognitive Techniques:

General Probing, Specific Probing, Emergent Probing.

Questions 19, 20 and 21 were systematically tested, while the other questions were only answered spontaneously, if at all.

#### Findings on the question as a whole:

##### Serbian

The interpreter notes that the connection between the introductory text *"How many difficulties have you had in the last four weeks"* and the items, e.g. *"To concentrate on something for 10 minutes?"* is "inelegantly solved" in the Serbian translation and therefore not clear.

##### Arabic

Test person AR01 points out that the answer category "None" in the Arabic questionnaire was translated as "No", which means that the translation here is not quite correct.

#### Findings on question 15 "To concentrate on something for 10 minutes":

##### Serbian

In test person SER01, question 15 shows major problems with understanding the question. The interpreter has to explain repeatedly what the question is about and the test person corrects her answer from "none" to "low": *"Oh, I wonder if I can concentrate on something for 10 minutes?"*<sup>5</sup>

---

<sup>5</sup> „Achso, ob ich mich 10 Minuten auf etwas konzentrieren kann?“ (SER01)

### Arabic

Test person AR02 also has problems understanding the question. For her it is not clear what the word "concentrate" refers to, i.e. whether it refers to learning or sports, for example. In the end, AR02's answer refers to the general ability to concentrate, which is in the sense of the question designer.

### Findings on question 17 "To wash your entire body":

#### Arabic

Test person AR01 asks how the item is to be understood, whether "showering" is meant. The formulation in the Arabic translation of the questionnaire of "to wash your entire body" is a little unusual. According to the test person it would be simpler and clearer to talk about bathing or showering. In addition, an article (the) was missing in Arabic, so that the formulation was not quite grammatically correct.

### Findings on question 19 "In dealing with people you do not know":

This question reveals problems of understanding regarding the intention of the question.

#### Serbian

In an interview with test person SER01, the interpreter must first explain the question: *"That he has problems with people he doesn't know. Is that the question?"*<sup>6</sup>. Test person SER01 interprets the question in the way that she gets on well with people, not that she has problems with people she does not know: *"What can I tick? I get along well with people."* (SER01)<sup>7</sup>.

After asking more precisely which people the test person was thinking of, she answers as follows: *"These are people I didn't know, we're not friends but we didn't have a fight either, nothing bad happened. [...] We didn't know each other, afterwards we were friends, but then we had a fight, I say it was nothing."*<sup>8</sup>

#### Arabic

The two interviews with the Arabic translation of the questionnaire also reveal ambiguities with regard to the intention of the question.

Test person AR01 misunderstands the intention of the question. She interprets the question as to how far dealing with people she does not know leads to psychological problems and not how far psychological (or other health problems) make dealing with such people more difficult. In answering the question, test person AR01 thinks of asylum seekers in a refugee accommodation who do not speak German or English (but only their mother tongue) and who therefore often could not communicate. This leads to psychological stress. The test person himself is not affected by this, as he speaks a little German. Their answer ("none") is therefore still "correct" in this case, even if she misunderstands the question.

---

<sup>6</sup> „Dass er Probleme hat, mit Menschen, die er nicht kennt. Ist das die Frage?“ (SER01)

<sup>7</sup> „Was kann ich ankreuzen? Ich verstehe mich mit den Leuten gut.“ (SER01)

<sup>8</sup> „Das sind Leute, die ich nicht kannte, wir sind keine Freunde aber wir hatten auch keinen Streit, es ist nichts Schlimmes passiert. [...] Wir kannten uns nicht, nachher waren wir Freunde, aber hatten dann Streit, ich sage das war nichts.“ (SER01)



Test person AR02 does not refer to health problems, but to characteristics of the 'foreign', such as religion or skin colour. The test person says that she has no difficulties in dealing with people she does not know.

#### English

Test person ENG01 claims to have "strong" problems in dealing with unknown persons due to the traumatic experiences in her home country (murder, torture). The test person justifies her answer by saying that she has the feeling that many people do not understand her or cannot understand her fate. Therefore she likes to be alone. The test person suffers from psychological problems due to traumatic experiences in her home country.

#### Findings on question 20 "To maintain a friendship":

##### Serbian

In the interview with test person SER01 there are no reportable anomalies in this question. The test person has no problems maintaining a friendship; disputes and small problems are part of it in her opinion.

##### Arabic

Test person AR01 spontaneously notes that she is unaware of the connection between health problems and the maintenance of friendships. The test person asks whether she should interpret the item in meaning that the difficulty in maintaining friendships leads to psychological problems. The intention of the item is not clear to the test person and she interprets the item - like item 19 - as to whether the difficulty in maintaining friendships (e.g. due to lack of time) leads to health problems.

Test person AR02, as in question 19, does not refer to health problems either. She justifies the choice of the answer category "low" with the fact that she neither belongs to Sunnis nor to Shiites, but since she mostly has to do with Sunnis or Shiites, she notices that she does not harmonize well with them.

The interviewers also note that the time frame of 4 weeks for a friendship is somewhat short.

##### English

Test person ENG01 ticks the answer "strong" and justified this by saying that she currently has no friends in the refugee camp. The test person further states that she does not like to let other people - again due to her history - get close to her. Therefore it is difficult to build up or maintain friendships.

#### Findings on question 21 "In coping with your work/school routine?":

The main aim of this question was to examine how respondents deal with this question when they do not have a work/school routine and which difficulty they choose.

##### Serbian

Test person SER01 goes to work and chooses the answer "low": "I go home from work, at home I sleep, then back to work."<sup>9</sup> (SER01).

---

<sup>9</sup> „Von der Arbeit gehe ich nach Hause, zuhause schlafe ich, dann wieder zur Arbeit.“ (SER01)

### Arabic

Test person AR01 also has both a work and a school routine. The test person works in the morning and attends evening classes 3 times a week. There are no problems with understanding the question.

Test person AR02 chooses the answer category "low". Again in the question, she does not refer to health problems, but feels generally uncomfortable working in an office. The test person states that she prefers to work in the garden instead, as she is not familiar with office routine.

### English

Test person ENG01 is the only person stating that she currently has no work. She chooses the answer category "strong" difficulties. The test person has completed a Bachelor's degree in her home country, but has nothing to do in the refugee camp. Due to the existing psychological problems, she also does not manage to motivate herself to read something and to keep herself busy or to concentrate on something for a longer period of time. This frustrates her a lot and makes her unhappy, according to her own statement.

The interviewer also notes that in the English translation of the questionnaire the translation of "school routine is missing; the question only refers to "day-to-day work".

### Recommendations:

Question in total: In answering this item battery, the intention of the question that difficulties may arise due to health problems is pushed into the background. The respondents often only answer whether they have these difficulties, not whether they have these problems due to health problems.

We therefore recommend to only ask the question to people who have had health problems in the last 4 weeks:

**"Due to your health problems, how easy or difficult has it been for you in the last 4 weeks...?"**

**[„Aufgrund Ihrer gesundheitlichen Probleme, wie leicht oder schwer ist es Ihnen in den letzten 4 Wochen gefallen...]"**

... to focus on something (for at least 10 minutes)?

[... sich auf eine Sache (mindestens 10 Minuten) zu konzentrieren?]

... to walk a longer distance (about one kilometer)?

[... eine längere Strecke (ca. einen Kilometer) zu Fuß zu gehen?]

... to wash your entire body without help (bathing, showering)?

[... sich ohne Hilfe zu waschen (Bad, Dusche nehmen)?]

... to get dressed without help?

[... sich ohne Hilfe anzuziehen?]

... to speak with people you do not know?

[... mit Personen zu sprechen, die Sie nicht kennen?]

... to stay in contact with friends?

[... mit Freunden in Kontakt zu bleiben?]

... to cope with your everyday life?

[... Ihren Alltag zu bewältigen?]

In this case an additional filter question would have to be connected in advance.

Answer options:

Very easy / Rather easy / Rather difficult / Very difficult / Not possible at all

[Sehr leicht / eher leicht / eher schwer / sehr schwer / war überhaupt nicht möglich]

Furthermore, we recommend adding an additional answer category "No friends" to "Contact with friends" for all respondents who do not maintain/have friendships.

**Questions 22-24:**

In den folgenden Fragen werden Sie danach gefragt, wie Sie Ihre Lebensqualität, Ihre Gesundheit und andere Bereiche Ihres Lebens beurteilen. Bitte überlegen Sie, wie Sie sich in den vergangenen zwei Wochen gefühlt haben und kreuzen Sie an, was für Sie am ehesten zutrifft.

[In the following questions you will be asked how you rate your quality of life, your health and other areas of your life. Please think about how you felt in the past two weeks and tick the ones that **apply most to you**.]

**Question 22:**

Wie würden Sie Ihre Lebensqualität beurteilen?

[How would you rate your quality of life?]

**Frequency distribution (N=9)**

Answer	TP
Sehr schlecht [Very bad]	ENG01, SER02
Schlecht [Bad]	-
Mittelmäßig [Moderate]	SER01, RUS01, FAR02
Gut [Good]	AR01, AR02, RUS02, FAR01
Sehr gut [Very good]	-

**Cognitive Techniques:**

Emergent Probing.

**Findings:**

This question has not been systematically tested. Therefore, only the spontaneous comments of some test persons are available - if at all.

**Russian**

Test person RUS01 and the interpreter in this interview stated that the question was not understandable or formulated too globally. It is unclear what "quality of life" refers to: health? How do you feel? Something different?

**Farsi**

Test person FAR01 points out that the term "quality of life" is rather vague and can refer to mental and physical well-being on the one hand, but also to things like the financial situation on the other. Since it was announced in the introduction of the interview that the questionnaire would deal with the subject of health, she thinks that the question of quality of life - as long as it does not exclusively refer to health - is out of place.

**Recommendations:**

Based on the comments of the test persons, we recommend rephrasing the question and not to talk about quality of life in general, as it seems difficult to apply such a global measure to the last 2 weeks. Instead, we recommend that the current level of life satisfaction be queried. Furthermore, the introductory text could be shortened.

Introduction:                    **Please think about how you have felt in the past two weeks and tick what applies to you most.**

**[Bitte überlegen Sie, wie Sie sich in den vergangenen zwei Wochen gefühlt haben und kreuzen Sie an, was für Sie am ehesten zutrifft.]**

Question:                        **How satisfied are you with your life right now?]**

**[Wie zufrieden sind Sie zurzeit mit Ihrem Leben?]**

Answer options:                **No changes recommended.**

**Question 23:**

Wie zufrieden sind Sie mit Ihrer Gesundheit?

[How satisfied are you with your health?]

**Frequency distribution (N=9)**

Answer	TP
Sehr unzufrieden [Very dissatisfied]	ENG01, SER02
Unzufrieden [Dissatisfied]	AR02, RUS01
Weder zufrieden noch unzufrieden [Neither satisfied nor dissatisfied]	-
Zufrieden [Satisfied]	SER01, RUS02, FAR02
Sehr zufrieden [Very satisfied]	AR01, FAR01

**Findings:**

This question has not been systematically tested. There were no significant comments on this question from the test persons, the simultaneous interpreters and the interviewers.

**Recommendations:**

Item text and answer options can be left. However, we would recommend that this is done by analogy with question 22:

**How satisfied are you with your health?**

**[Wie zufrieden sind Sie mit Ihrer Gesundheit?]**

**Question 24:**

Haben Sie genug Energie für das tägliche Leben?

[Do you have enough energy for daily life?]

**Frequency distribution (N=9)**

Answer	TP
Überhaupt nicht [Not at all]	SER02
Eher nicht [Rather not]	ENG01
Halbwegs [To some extent]	AR02, RUS02
Überwiegend [Largely]	RUS01, FAR02
Völlig [Completely]	SER01, AR01, FAR01

**Findings:**

This question has not been systematically tested. There were no significant comments on this question from the test persons, the simultaneous interpreters and the interviewers.

**Recommendations:**

Item text and answer options can be left. The wording would now also be analogous to questions 22 and 23.

**Questions: 25-27:**

In den folgenden Fragen werden Sie danach gefragt, wie Sie Ihre Lebensqualität, Ihre Gesundheit und andere Bereiche Ihres Lebens beurteilen. Bitte überlegen Sie, wie Sie sich in den vergangenen zwei Wochen gefühlt haben und kreuzen Sie an, was für Sie am ehesten zutrifft.

[In the following questions you will be asked how you rate your quality of life, your health and other areas of your life. Please think about how you felt in the past two weeks and tick the ones that **apply most to you**.]

**Frequency distribution (N=9)**

Answer	TP				
	Sehr unzufrieden [Very dissatisfied]	Unzufrieden [Dissatisfied]	Weder zufrieden noch unzufrieden [Neither satisfied nor dissatisfied]	Zufrieden [Satisfied]	Sehr zufrieden [Very satisfied]
25 Wie zufrieden sind Sie mit Ihrer Fähigkeit, alltägliche Dinge erledigen zu können? [How satisfied are you with your ability to do everyday things?]	ENG01	AR02, SER02	-	SER01, RUS01, RUS02, FAR02	AR01, FAR01
26 Wie zufrieden sind Sie mit sich selbst? [How satisfied are you with yourself?]	ENG01, SER02	-	AR02, RUS02, FAR02	RUS01	SER01, AR01, FAR01
27 Wie zufrieden sind Sie mit Ihren persönlichen Beziehungen? [How satisfied are you with your personal relationships?] <sup>10</sup>	ENG01, SER02	-	AR02, FAR02	SER01, RUS01, FAR01	AR01

**Cognitive techniques:**

General Probing, Specific Probing.

<sup>10</sup> Test person RUS02 leaves the question unanswered, as it is unclear to her what is meant by "personal relationships".



Systematisch getestet wurden die Fragen 25 und 27. Zu Frage 26 liegen – wenn überhaupt – nur spontane Reaktionen der Testpersonen vor.

Systematically tested were questions 25 and 27. For question 26 therefore, only the spontaneous comments of some test persons are available – if at all.

#### **Findings on question 25 "How satisfied are you with your ability to do everyday things?"**

The main aim of this question was to find out what the respondents understood by "everyday things" and whether there were country-specific differences.

#### **Serbian**

Test persons SER01 and SER02 refer to leisure time and household when answering the question. Test person SER01 also refers to their work: *"This includes work, what has to be done at home, leisure time. I am generally satisfied with that."*<sup>11</sup> (SER01).

#### **Arabic**

Test person AR01 thinks about getting up early in the morning, going to work and doing the tasks, helping the daughters with their studies in the afternoon or evening and then attending their language courses. She says that she has no problems with that, everything works out fine.

Test person AR02 states that she is "dissatisfied". She justifies this with her knee pain, because of which she could not walk for 15 minutes without pain. The test person is also unable to work because of the pain. When doing "everyday things" she thinks that she cannot walk or bend her knee properly.

#### **Farsi**

Test person FAR01 thinks of "everyday things" in terms of their work and leisure time (gym). When answering the question, she was thinking of activities she does every day.

Test person FAR02 thinks of "everyday things" such as the long way to a language course, but also of cooking and the household.

#### **Russian**

Test person RUS01 refers to their work and household when answering the question. Test person RUS02 thinks mainly of school and walking her dog.

#### **English**

Test person ENG01 is very dissatisfied and unhappy with her current situation. In "everyday things" she thinks of nothing specific, but of her life in general, which is currently very difficult. She has imagined her life differently and had other plans. She currently lives only from day to day and somehow tries to survive and to continue.

#### **Findings on question 27 "How satisfied are you with your personal relationships?":**

The main aim of this question was to examine how the test persons interpret the term "personal relationships" and whether there are country-specific differences.

---

<sup>11</sup> „Darunter fällt Arbeit, was zuhause zu erledigen ist, Freizeit. Damit bin ich allgemein zufrieden.“ (SER01).

### Serbian

Test person SER01 thinks primarily of the family when it comes to "personal relationships". Test person SER02 thinks of her social contacts in the refugee home: *"In the home there are only aggressive people who cause problems. I can't find any friends to talk to or to go out for coffee. I only have my husband."*<sup>12</sup> (SER02).

### Arabic

Test person AR01 thinks about relationships with work colleagues, friends, his wife and also his neighbours. Test person AR02 thinks above all about relationships with friends.

### Farsi

Test person FAR01 and the interpreter in this interview note that in the questionnaire in Farsi, "personal relationships" were translated as "private relationships". This formulation was too private for the test person, which is why she refused to answer. After it became clear in the interview that "personal relationships" were meant, the test person answered the question.

Test person FAR01 thinks of her girlfriend or friends in "private relationships", test person FAR02 thinks of her husband and children.

### Russian

Test person RUS01 understands "personal relationships" to mean her relationships with their family and work colleagues.

Test person RUS02 asks who is meant by the term "personal relationships". She thinks of friends, but does not answer the question because it is too "imprecise".

### English

Test person ENG01 was not asked any probing questions here out of consideration for her mental health.

### Recommendations:

The introduction to the question could be simplified linguistically by focusing the information on the essential:

**Please think about how you have felt in the past two weeks and tick what applies to you most.**

**[Bitte überlegen Sie, wie Sie sich in den vergangenen zwei Wochen gefühlt haben und kreuzen Sie an, was für Sie am ehesten zutrifft.]**

Question 25: No changes recommended. It would be worth considering to include the time frame in the question.

Question 27: Although subject RUS02 describes the term "personal relationships" as too imprecise, we recommend leaving the question as all other respondents could answer it.

Answer options: No changes recommended.

---

<sup>12</sup> „Im Heim gibt es nur aggressive Leute, die Probleme machen. Ich finde keine Freunde, mit denen man reden oder Kaffee trinken gehen kann. Habe nur meinen Ehemann.“ (SER02)

**Question 45:**

In den folgenden Fragen geht es um Ihre medizinische Versorgung in Deutschland. Wenn man in Deutschland ein gesundheitliches Problem hat, besucht man normalerweise zuerst einen Allgemeinmediziner. Wenn Sie einen Arzt haben, zu dem Sie immer als erstes mit Ihren Problemen gehen und der alle weiteren Untersuchungen für Sie organisiert, ist dies Ihr Hausarzt.

[The following questions are about your medical care in Germany. If you have a health problem in Germany, you will usually first visit a general practitioner. If you have a doctor, to whom you always go first with your problems and who organizes all further examinations for you, this is your primary care physician.]

Manchmal überweist Sie ein Allgemeinmediziner weiter an einen Facharzt, der besondere Expertise in einem bestimmten medizinischen Bereich hat.

[Sometimes a general practitioner will refer you further to a specialist who has particular expertise in a particular medical field.]

Wann waren Sie zuletzt bei einem der folgenden Ärzte, um sich selbst beraten, untersuchen oder behandeln zu lassen?

[When did you visit one of the following doctors for advice, examination or treatment the last time?]

**Frequency distribution (N=9)**

Answer	TP			
	Vor weniger als 12 Monaten [Less than 12 months ago]	Vor 12 Monaten oder länger [12 months or more ago]	Weiß ich nicht [Don't know]	Nie [Never]
a) Allgemeinmediziner/ Hausarzt [General practitioner/primary care physician]	SER01, AR01, AR02, RUS01, RUS02, FAR02, ENG01, SER02	-	-	FAR01
b) Facharzt [Specialist] <sup>13</sup>	AR01, AR02, RUS01, RUS02, FAR02, ENG01, SER02	-	-	FAR01
c) Zahnarzt oder Kieferorthopäde [Dentist or Orthodontist] <sup>1415</sup>	AR01, AR02, FAR02	SER01,	FAR01	RUS02, ENG01

<sup>13</sup> Test person SER01 is unfamiliar with the term "specialist", so she leaves the question unanswered.

<sup>14</sup> Test person RUS01 cannot answer the question, because she has never been to a dentist in Germany. It is unclear to her whether the question refers only to Germany or also to her home country.

<sup>15</sup> Test person SER02 cannot remember when she last visited the dentist and therefore leaves the question unanswered (instead of ticking "I don't know")

---

d)	Psychologe, Psychotherapeut oder Psychiater [Psychologist, psychotherapist or psychiatrist]	ENG01, SER02	-	-	SER01, AR01, AR02, RUS01, RUS02, FAR01, FAR02
----	---	--------------	---	---	--

---

### Cognitive techniques:

Paraphrasing, Category Selection Probing, Specific Probing.

### Findings:

In this question it should be examined above all whether the introduction is understandable and whether the doctor's name is understood.

#### Serbian

Test persons SER01 and SER02 point out that the term "visit...for advice" in the question in the Serbian questionnaire was translated as "asking for advice" and that both would therefore have thought first of all whether they had sought psychological advice from a psychologist. Only through the items does the relevance of the question become clear. Otherwise the introduction to the question is understandable.

Test person SER01 is unfamiliar with several doctor's names and asks the interpreter for explanations (primary care physician, specialist, orthodontist). The term "orthodontist" is also unknown to test subject SER02.

#### Arabic

Für die Testpersonen AR01 und AR02 ist die Einleitung verständlich. Sie geben an, dass es hier um das Gesundheitssystem in Deutschland geht. Mit Ausnahme von „Kieferorthopäde“ sind Testperson AR01 alle Begriffe bekannt und sie kann die Unterschiede zwischen den Ärzten erklären. Testperson AR02 kennt den Begriff „Hausarzt“ nicht, setzt ihn jedoch mit Allgemeinmediziner gleich.

For the test persons AR01 and AR02 the introduction is understandable. They indicate that this is about the health care system in Germany. With the exception of "orthodontist", test person AR01 knows all the terms and can explain the differences between the doctors. Test person AR02 does not know the term "primary care physician", but equates it with general practitioner.

#### Farsi

Test subjects FAR01 and FAR02 correctly reproduce the introduction and find it understandable. They also know all the doctor's names and find it easy to answer the questions. Regarding the term "general practitioner", subject FAR01 notes that in Farsi one does not speak of a primary care physician but of a family doctor: "In Afghanistan, for example, a family doctor is someone to whom the whole family always goes. The doctor knows all the family's problems and pre-existing conditions. He is therefore a specialist for this family."<sup>16</sup> (FAR01). Test subject FAR02 and an interpreter also point out that the term "family doctor" has been translated incorrectly

---

<sup>16</sup> „In Afghanistan zum Beispiel ist ein Familienarzt jemand, zu dem die ganze Familie immer geht. Der Arzt kennt dabei die ganzen Probleme und Vorerkrankungen der Familie. Er ist somit ein Spezialist für diese Familie.“ (FAR01)

The interpreters in these interviews point out that the questionnaire on Farsi makes no reference to the "following doctors". Only the last medical treatment/examination is mentioned. One interpreter also notes that orthodontist was translated as "jaw and tooth surgeon".

### Russian

Test person RUS01 cannot answer item c): "*I know what it is, but I haven't used it.*"<sup>17</sup> (RUS01). She has been to the dentist in her home country, but not yet in Germany. Therefore, she does not find any answer category appropriate and it is unclear to her whether the question refers only to Germany or also to her home country. However, she is aware of all the doctor's names.

Test person RUS02 can correctly repeat the introduction and all doctor's names are known to her.

### English

ENG01 has no difficulty in understanding the introduction. She also knows all the terms in the question and had no difficulty in answering it.

The interviewer notes that the translation of "specialist" is not ideal (medical or surgical specialist).

### Recommendations:

Question: As addressed by test subject RUS01, the introduction suggests that it is exclusively about visits to doctors in Germany. This is again not apparent from question 45. Should only doctor's visits in Germany be mentioned here or the general visit to a doctor (also in the home country). The test persons may find it difficult to tick "never" if they visited a doctor a few months ago but have since arrived in Germany.

Based on the comments of the test subjects in the pretest, we suggest changing the order of the verbs in the question to shift the focus from the consultation to the actual treatment. Furthermore, in order to keep translation problems to a minimum, a simpler choice of words should be used:

**The following questions are about your medical care in Germany.**

**[In den folgenden Fragen geht es um Ihre medizinische Versorgung in Deutschland.]**

**If you have a health problem in Germany, you first go to a general practitioner who is called a primary care physician in Germany. The primary care physician organizes all further examinations or refers you to a specialist. A specialist has special knowledge and experience in a certain medical field (cardiovascular, dermatologist, ophthalmologist, psychiatrist).**

**[Wenn man in Deutschland ein gesundheitliches Problem hat, geht man zuerst zu einem Allgemeinmediziner, der in Deutschland Hausarzt heißt. Der Hausarzt organisiert alle weiteren Untersuchungen oder überweist zu einem Facharzt. Ein Facharzt hat besondere Kenntnisse und Erfahrungen in einem bestimmten medizinischen Bereich (Herz-Kreislauf, Haut- oder Augenarzt, Psychiater).]**

---

<sup>17</sup> „Ich weiß was es ist, aber ich habe es nicht benutzt.“ (RUS01)

**When did you last visit one of the following doctors in Germany to be examined, treated or advised?**

**[Wann waren Sie zuletzt bei einem der folgenden Ärzte in Deutschland, um sich untersuchen, behandeln oder beraten zu lassen?]**

Since the term orthodontist is unknown to many test persons, it should be explained in more detail or possibly deleted completely.

Answer options:

In addition, we recommend that to reconsider the answer options in terms of the question and, if necessary, differentiate them more strongly, or even examine the standard examination on arrival in Germany.

**Question 47:**

Wie viel Geld haben Sie in den letzten vier Wochen für Ihre eigenen Besuche bei Allgemeinmediziner\*innen, Hausärzt\*innen oder Fachärzt\*innen ausgegeben?

[How much money have you spent in the last four weeks on your own visits to general practitioners, primary care physician or specialists?]

*(Bitte zählen Sie alle Ausgaben für Reisekosten zum Arzt, der Klinik oder sozialen Einrichtungen, Kinderbetreuung und andere Ausgaben die Sie aufgrund Ihres Arztbesuches hatten.)*

*[(Please count all expenses for travel costs to the doctor, clinic or social institutions, child care and other expenses you had due to your visit to the doctor.)]*

**Frequency distribution (N=9)**

TP	Amount in €	I haven't had any visits to a doctor
SER01	0	-
AR01	20	-
AR02	150	-
FAR01	-	X
FAR02	-	X
RUS01	-	X
RUS02	-	X
ENG01	None	-
SER02	-	X

**Cognitive Techniques:**

General Probing, Specific Probing.

**Findings:**

In most of the languages tested, difficulties in understanding the question are apparent. It is unclear which medical visits should be included in the answer and whether the question refers only to oneself or also to the family. However, the latter becomes clearer for some test persons through the instruction under the text of the question, while for other test persons it remains unclear whether the expenses mentioned in the instruction have been taken into account.

**Serbian**

Test person SER01 was once at the paramedic, but emphasizes that she was not at a doctor. As a result, the test person is uncertain whether or not to report this visit to the paramedic. The interpreter adds that the test person has never been to a hospital and therefore has not had any expenses in this regard.

### Arabic

Test person AR01 spontaneously asks whether she should only state the expenses for her own doctor's visits or the expenses for doctor's visits of the whole family. She understands this to mean doctor visits by the whole family and therefore replies with "20 Euros". She did not spend any money for herself (she should have stated "0 Euro"). However, because of the mention of "child care" in the brackets in the question text, she thinks of her daughters' two visits to the doctor and the costs involved. Test person AR01 claims to have considered both travel costs and costs for medication when answering the question.

Test person AR02 states that she does not have to pay anything because of her insurance. When asked what she would declare, the test person explains that she can only declare "150 Euro" as her salary, which is the money she is willing or able to pay. In response to a further question, test person AR01 states that about four weeks ago she spent 150 euros on dental treatment for someone else, but not for herself, so she finally decides on this value. The test person herself has been to the primary care physician in the last four weeks.

### Farsi

Test person FAR01 had no visits to the doctor and therefore no costs. The interpreter notes that in the question text, the term "medical specialists" was wrongly translated as "internal specialists or surgeons".

Test person FAR02 is also uncertain whether the question is only about her or also about her family, as the German phrase "Ich habe keine Besuche bei einem Arzt" (I had no visits to a doctor) was translated into "Ich habe keine..." (I have no...). After confirming that the question only refers to her, the test person claims not to have been to a doctor.

### English

Test person ENG01 specifies "none" instead of a numerical value ("0"). If only numerical values are desired, this should be communicated as a fill-in instruction. The test person had no difficulty with the question.

### Recommendations:

Question: It is not clear what kind of money/expenditure is involved in the question and to what extent these costs must be borne privately. As far as we know, the medical care of refugees/asylum seekers is paid for by the social service office or, in the case of residence status, by the job centre. However, additional costs up to a certain amount have to be borne by themselves or an exemption has to be applied for. This should be made clearer in the question. If additional costs (travel costs, medical aids) are of particular interest, the following question should be asked explicitly (possibly in a separate question):

"Did you also have expenses for travel to the doctor, clinic or social institutions or expenses for child care due to your visit to the doctor, and if so, how high were these?"

[„Hatten Sie darüber hinaus Ausgaben für Reisekosten zum Arzt, der Klinik oder sozialen Einrichtungen oder Ausgaben für Kinderbetreuung aufgrund Ihres Arztbesuchs und wenn ja, wie hoch waren diese?“]



In addition, we recommend placing a filter in front of the question so that this question only goes to respondents who have been to primary care physicians or specialists in the last 4 weeks.

The reference to "own doctor's visits" should be highlighted in the question text.

The notes in brackets should be followed by the instruction that only numerical values should be entered here (see ENG01).

Answer options:

No changes recommended.

**Question 48:**

Kam es in den letzten 12 Monaten einmal oder mehrmals vor, dass Sie dringend eine Untersuchung durch einen Allgemeinmediziner gebraucht hätten, diese aber nicht in Anspruch genommen haben?

Has it happened once or several times in the last 12 months that you urgently needed an examination by a general practitioner but did not make use of it?

**Frequency distribution (N=9)**

Answer	Quantity TP
Ja, dies kam mindestens einmal vor [Yes, this has happened at least once]	AR01, ENG01
Nein, dies kam nicht vor - weiter mit Frage 55 [No, this did not occur - continue with question 55]	SER01, AR02, RUS01, RUS02, FAR01, FAR02
Ich weiß nicht - weiter mit Frage 55 [I don't know - continue with question 55]	SER02

**Cognitive techniques**

General Probing.

**Findings:**

The majority of the test persons does not show any problems in answering the question. Only test person SER02 has difficulties and uses the answer option "I don't know" as an alternative category. Test person FAR01 finds the filters directly behind the answer text disturbing. All test persons except SER02 arrive at an answer that can be justified in terms of the intention of the question.

**Serbian**

For test person SER02, the question is unclear: *"Does that mean whether or not I've seen a doctor?"*<sup>18</sup> (SER02). She often goes to the general practitioner, whenever she is not feeling well. So she should have ticked "No", but ticked "I don't know" because she doesn't understand the question.

**Arabic**

Test person AR01 understands the question correctly. She claims to have had a problem with her knee and to have waited at first. Only when she could no longer walk she went to the doctor and was then operated on the meniscus.

Test person AR02 received a follow-up appointment from an orthopaedist, but she did not show up for it because she did not hope that he could help her. She hesitates first what to tick and is then told by the interpreter that the question refers to the primary care physician/general practitioner. The test person has overlooked this.

<sup>18</sup> „Heißt das ob ich beim Arzt war oder nicht?“ (SER02).

### Farsi

Test person FAR01 does not understand the question or the filters and states that the filter texts "continue with question 55" directly behind the answer options are confusing. It is also noted that "dringend eine Untersuchung [an urgent investigation]" has been translated as "Notfalls eine...[If necessary...]". Test person FAR 01 claims not to have been ill, which is why she did not need a doctor urgently. Also subject FAR02 did not have anything urgent.

### English

Test person ENG01 has no problem understanding the question. She was referred by the general practitioner to a specialist, but could not keep the appointment because she had an important appointment in the refugee camp on that day.

### Recommendations:

#### Questions:

We recommend reducing the question to the essential:

**Has it happened in the last 12 months that you have not made use of an urgently needed examination by a general practitioner?**

**[Kam es in den letzten 12 Monaten vor, dass Sie eine dringend benötigte Untersuchung durch einen Allgemeinmediziner nicht in Anspruch genommen haben?]**

#### Answer options:

Analogous to the reformulation of the question, the answer options can be reduced to "Yes", "No" and "I do not know".

**Question 49:**

Was war für Sie der wichtigste Grund, den Allgemeinmediziner nicht aufzusuchen?

*(Bitte nur ein Kästchen ankreuzen!)*

[What was the most important reason for you not to see the general practitioner?

*(Please tick only one box!)]*

**Frequency distribution (N=2)<sup>19</sup>**

Answer	Quantity TP
Ich konnte es mir nicht leisten (zu teuer). [I could not afford it (too expensive).]	-
Die Wartezeit für einen Termin oder eine Behandlung war mir zu lang. [The waiting time for an appointment or treatment was too long for me.]	-
Das Sozialamt stellte mir keinen Krankenschein aus. [The social service office did not issue me a sick certificate.]	-
Ich hatte sprachliche Probleme/ kein Dolmetscher war verfügbar. [I had language problems/ no interpreter was available.]	-
Ich hatte keine Zeit (aufgrund von beruflichen Verpflichtungen oder familiären Pflichten). [I had no time (due to work commitments or family obligations).]	AR01
Der Weg war mir zu weit./ Ich hatte keine Fahrgelegenheit. [It was too far for me. / I had no ride.]	-
Ich habe Angst vor Ärzten, Krankenhäusern, medizinischen Untersuchungen, Behandlungen. [I am afraid of doctors, hospitals, medical examinations, treatments.]	-
Ich wollte abwarten, ob sich die Beschwerden von selbst bessern. [I wanted to wait and see if the symptoms would improve themselves.]	-
Ich kenne keinen guten Arzt oder Facharzt. [I don't know any good doctors or specialists.]	-
Ich hatte sonstige Gründe [I had other reasons]	ENG01

**Cognitive Techniques:**

Specific Probing.

<sup>19</sup> The test persons SER01, SER02, FAR01, FAR02, RUS01, RUS02 and AR02 did not receive the question due to the filter guidance.

**Findings:**

Question 49 was only asked to those test persons who had indicated in the previous question 48 that they urgently needed an examination by a general practitioner but did not make use of it. This question was therefore answered by only two persons. Both persons can answer the question and have no difficulty in deciding on an answer category and thus on "the most important reason" for not consulting a general practitioner.

However, test person AR01 states that she would have liked to choose two answers, namely "I had no time" and "I wanted to wait and see if the symptoms would improve themselves".

Test person ENG01 states that she was referred by a general practitioner to a specialist but could not attend the appointment because she had an important appointment in the refugee camp that day.

**Recommendations:**

Question: No changes recommended.

Answer options: No changes recommended.

**Question 55:**

Haben Sie in den letzten 2 Wochen Medikamente eingenommen, die Ihnen von einem Arzt verschrieben wurden?

[Have you taken any medication prescribed by a doctor in the last 2 weeks?]

**Frequency distribution (N=4)<sup>20</sup>**

Answer	TP
Ja [Yes]	ENG01
Nein [No]	SER01, AR01, AR02
Ich weiß nicht [I don't know]	-

**Findings:**

This question has not been systematically tested. There were no significant comments on this question from the test persons, the simultaneous interpreters and the interviewers.

**Recommendations:**

No changes recommended.

<sup>20</sup> The test persons FAR01, FAR02, RUS01, RUS02, SER02 did not answer this question because the questionnaire had to be shortened in order to keep the interview duration within reasonable limits.

**Question 56:**

Wie viel Geld mussten Sie selbst für diese Medikamente bezahlen?

[How much money did you have to pay for these drugs yourself?]

**Frequency distribution (N=4)<sup>21</sup>**

TP	Betrag in € [Amount in €]	Mir wurden keine Medikamente verschrieben [I haven't been prescribed any medication]
SER01	0	X
AR01		X
AR02		X
ENG01	None	

**Findings:**

This question has not been systematically tested. Therefore, only the spontaneous comments of some test persons are available - if at all.

**Serbian**

Test person SER01 answers the question with the numerical value "0" and with "I have not been prescribed any medication". This shows that the question does not work properly without a filter.

**English**

Test person ENG01 answers the question correctly, but with "None" instead of the corresponding numerical value "0".

**Recommendations:**

Item text or instruction:

We recommend including a filter in question 55 so that this question only needs to be answered by respondents who have been prescribed medication.

If you want respondents to answer in numerical format only, you will need to add a corresponding instruction to the question.

<sup>21</sup> The test persons FAR01, FAR02, RUS01, RUS02, SER02 did not answer this question, because the questionnaire had to be shortened in order to keep the interview duration within a reasonable frame.

**Question 57:**

Wie oft haben Sie in den letzten 12 Monaten die Einnahme Ihrer Medikamente aufgrund von Kosten ausgelassen, verschoben oder beendet?

[In the last 12 months, how often have you skipped, postponed or stopped taking your medication due to cost?]

**Frequency distribution (N=4)<sup>22</sup>**

Answer	TP
Nie [Never]	SER01, AR01, AR02, ENG01
1 Mal [1 time]	-
2 Mal [2 times]	-
3 Mal oder mehr [3 times or more]	-

**Cognitive Techniques:**

Category Selection Probing.

**Findings:**

All four test persons who receive this question in the interview state that they have never skipped, postponed or stopped taking their medication due to cost in the last 12 months. The interviewers' probes make it clear that all four test persons understand the question in the intended way and have no problems answering it.

**Recommendations:**

Question: No changes recommended.

Answer options: No changes recommended.

<sup>22</sup> The test persons FAR01, FAR02, RUS01, RUS02, SER02 did not answer this question, because the questionnaire had to be shortened in order to keep the interview duration within a reasonable frame.



**Question 58:**

Wie oft haben Sie finanzielle Schwierigkeiten aufgrund von Ausgaben für Ihre gesundheitliche Versorgung?

[How often do you have financial difficulties due to expenses for your health care?]

**Frequency distribution (N=9)**

Answer	TP
Nie [Never]	AR02, RUS02, FAR01, ENG01
Selten [Rarely]	SER01
Manchmal [Some-times]	AR01, FAR02, SER02
Regelmäßig [Regularly]	RUS01

**Cognitive Techniques:**

General Probing, Specific Probing.

**Findings:**

Among other things, it should be examined what respondents think of when answering the question and whether they find the question about financial difficulties unpleasant or awkward. The latter was not the case for any of the test subjects.

**Serbian**

Test person SER01 answers the question more hypothetically than actually. She states that her asylum procedure is still ongoing and that she is therefore not covered by health insurance. She says that she would have to pay for any medical treatment she might need: *"For example, if I had to undergo surgery. [...] You don't know what's coming"*<sup>23</sup> (SER01).

Test person SER02 states that she has only 101 euros a month at her disposal and can hardly afford the most necessary things like bread, hygiene articles or clothing. Her answer ("sometimes") therefore rather refers to the fact that she cannot afford health care due to her financial difficulties (and not - as intended - that she would have financial difficulties due to expenses for her health care).

**Arabic**

When answering the question, test person AR01 thinks of visits to the dentist where, for example, additional costs are incurred in connection with the renewal of dental fillings that are not covered by health insurance.

Test person AR02 states that she has health insurance and does not have to pay for her own medical care.

<sup>23</sup> „Zum Beispiel wenn mal eine OP anstünde. [...] Man weiß ja nicht was kommt“ (SER01)

**Farsi**

Test person FAR01 claims to have been to the dentist only once in the recent past and since she has health insurance, the treatment was free.

Test person FAR02 asked this question mainly because of the financial difficulties she had in her home country due to medical expenses, not because of any current difficulties in Germany.

**Russian**

Test person RUS01 explains that she has to take medication regularly. However, since she has no work, she cannot always afford it. Like SER02, test person RUS01 answers the question that she cannot afford health care due to financial difficulties (and not – as intended – whether she has financial difficulties due to health care expenses).

Test person RUS02 is still attending school and therefore does not have to pay for her medical care herself.

**English**

Test person ENG01 has no problems answering the question. She has health insurance and does not have to pay for her own health care.

**Recommendations:**

Question: In order to clarify the intention of the question, we recommend rephrasing the question and also to make clear that it is about the current situation in Germany:

How often have you had financial difficulties in the last 12 months because you had to pay extra for your health care?

[Wie oft hatten Sie in den letzten 12 Monaten finanzielle Schwierigkeiten, weil Sie für Ihre gesundheitliche Versorgung zuzahlen mussten?]

Answer options: No changes recommended.

**Question 59:**

Haben Sie in den letzten 12 Monaten Ihre Ausgaben für Grundbedürfnisse wie Lebensmittel und Kleidung verringert, um Ihre gesundheitlichen Kosten decken zu können?

[Over the past 12 months, have you reduced your spending on basic needs such as food and clothing to cover your health costs?]

**Frequency distribution (N=9)**

Answer	TP
Ja [Yes]	RUS01, SER02
Nein [No]	SER01, AR01, AR02, RUS02, FAR01, FAR02, ENG01

**Cognitive Techniques:**

General Probing, Specific Probing.

**Findings:**

The test persons have no difficulty in answering the question, nor do they perceive it as redundant to the previous question 58.

The two test persons who answered the question with "yes" (RUS01, SER02) stated that they had to reduce their expenditure on basic needs due to (high) costs for (non-prescription) drugs. The other test persons indicate that they either had no health care costs to cover (e.g. because they have health insurance) or that these costs were not so high that they had to reduce their expenditure on basic needs such as food and clothing.

**Farsi**

One of the two interpreters mentions that the term "basic needs" was translated as "main needs" in the Farsi questionnaire.

**Russian**

The interpreter states that the term "basic needs" was incorrectly translated in the Russian questionnaire.

**Recommendations:**

Frage: Leave but check translation of the term "basic needs" in the Farsi and Russian questionnaire.

Answer options: No changes recommended.

**Questions 63–68:**

Wir möchten gerne mehr über Ihre Erfahrung mit der Gesundheitsversorgung in Deutschland wissen. Bitte denken Sie an Ihren letzten Besuch bei einem Arzt oder einem anderen medizinischen Versorger. Bitte bewerten Sie bei diesem letzten Besuch...

[We would like to know more about your experience with health care in Germany. Please remember your last visit to a doctor or other medical provider. Please rate at this last visit...]

**Frequency distribution (N=9)**

Answer	Quantity TP	Quantity				
		Sehr gut [Very good]	Gut [Good]	Mäßig [Moderate]	Schlecht [Bad]	Sehr schlecht [Very bad]
63 ... die Wartezeit, bis Sie an der Reihe waren? [...the waiting time for your turn?]	ENG01, SER02		SER01, AR01, AR02	RUS01, RUS02, FAR02	FAR01	-
64 ... Ihre Erfahrungen, inwiefern Sie respektvoll empfangen und mit Ihnen respektvoll gesprochen wurde? [...your experiences in how far you were received respectfully and spoken to respectfully?]	AR01, RUS02, ENG01, SER02		SER01, AR02, RUS01, FAR02	FAR01	-	-
65 ...Ihre Erfahrungen, inwiefern Ihnen von den Ärzten / dem Personal Dinge verständlich erklärt wurden? [...your experiences in how far were things explained to you in an understandable way by the doctors / staff?]	RUS02, FAR01, ENG01, SER02		SER01, AR01, AR02, FAR02	RUS01	-	-
66 ... Ihre Erfahrungen, inwiefern Sie in Entscheidungen, die Ihre Behandlung betrafen, miteinbezogen wurden? [...your experiences in how far you were involved in decisions concerning your ment?] <sup>24,25</sup>	AR01, ENG01		FAR02, SER02	AR02, RUS01	-	-

<sup>24</sup> SER01 cannot answer the question because the TP has not been to the doctor.

---

67	... Ihre Erfahrungen, inwie- weit dort sichergestellt wurde, dass Sie mit der Sie behandelnden Person ver- traulich sprechen konnten? [...your experience in how far was it ensured that you could speak confidentially with the person treating you?] <sup>13,26</sup>	AR01, RUS02, ENG01, SER02	AR02, RUS01, FAR02	-	-	-
68	...Ihre Möglichkeiten, sich die Sie behandelnde Per- son selbst aussuchen zu können? [...your possibili- ties to choose the person treating you yourself?]	RUS02, FAR01, ENG01, SER02	AR02	AR01, RUS01	-	FAR02

---

#### Cognitive Techniques:

General Probing, Specific Probing.

Questions 66 and 68 were systematically tested, while only spontaneous reactions - if any - of the test persons are available for the other questions.

#### Findings on the question as a whole:

##### Serbian

Test person SER01 points out that she actually cannot answer the entire battery of questions, as she has not visited a doctor in Germany so far. Especially questions 66, 67 and 68 therefore remain unanswered.

##### Russian

Test person RUS02 and the interpreter in this interview point out that the first sentence of the introduction in the Russian questionnaire was translated incorrectly: "[...] your experience in health care cooperation...".

#### Findings on question 63 "...the waiting time for your turn?"

##### Arabic

---

<sup>25</sup> FAR01 and RUS02 leave the question unanswered because they do not understand the intention of the question.

<sup>26</sup> FAR01 leaves the question unanswered. The test person states that she did not experience this, i.e. there was never the need to talk about anything confidential.

AR01 asks spontaneously whether this refers to the waiting time until you get an appointment with the doctor or whether it refers to the waiting time in the waiting room.

**Findings on question 66 "... your experiences in how far you were involved in decisions concerning your treatment?":**

#### Serbian

Test person SER02 has no difficulty in answering the question. She describes the overall impression of her last visit to the doctor, which she remembers as very positive: *"Nurse and doctor were nice and very good, explained everything well. It was a good examination, I was very satisfied."*<sup>27</sup> (SER02). It is unclear to what extent this overall impression also includes the focus of the item (involvement in decisions concerning treatment).

#### Arabic

Test person AR01 states that the attending physician explained the MRI images to her at her knee surgery and pointed out both the consequences of the procedure and alternatives to surgery. The test person finds the answer to this question very easy.

Test person AR02 explains that she has already seen seven orthopaedic surgeons because of her complaints and nobody knows exactly how her condition can be improved. The doctors had given her very few opportunities to have a say in the treatment.

#### Farsi

Test person FAR01 does not understand the intention or reason for the question. She states that she is the patient after all and does not know what to do from a medical point of view. That is why she goes to the doctor. The test person therefore leaves the question unanswered.

Test person FAR02 describes an experience at the dentist who had told her that a tooth had to be extracted. Since the test person did not want that, the dentist suggested a root canal treatment as an alternative, even though the tooth might have to be extracted later. At the test person's request, he also carried out the root canal treatment.

#### Russian

Test person RUS01 states that the treatment was "decided over [her] head" and she was not really involved in any decisions.

Test person RUS02 does not understand the intention of the question and therefore leaves the question unanswered: *"What is meant by 'involved'? Whether one was asked or had to tell? It's not clear what is meant."*<sup>28</sup> (RUS02).

#### English

Test person ENG01 states that the treating physicians included her in the treatment and presented different possibilities of the therapy.

---

<sup>27</sup> „Krankenschwester und Ärztin waren nett und sehr gut, haben mir alles gut erklärt. War eine gute Untersuchung, ich war sehr zufrieden.“ (SER02).

<sup>28</sup> „Was ist gemeint mit ‚miteinbezogen‘? Ob man gefragt wurde oder erzählen musste? Ist unklar, was gemeint ist.“ (RUS02).

## Findings on question 68 " ... your possibilities to choose the person treating you yourself?"

### Serbian

Test person SER02 says that she would love it if her current doctor also became her primary care physician and she didn't have to change to another doctor due to relocation or other imponderables. The concept of free choice of doctor is understood by the test person.

### Arabic

AR01 has no difficulty with the question. The test person claims to have been referred to a specialist by the primary care physician. She would have liked to have chosen another doctor but had to choose one because of the long waiting times with other doctors.

In answering the question, test person AR02 considered whether, for example in a joint practice, she could choose the treating orthopedist herself.

### Farsi

Test person FAR01 finds the answer to the question "very easy" and states that she has chosen her current primary care physician herself and is satisfied with him.

Since test person FAR02 does not speak German and lives in a small village, she goes to a doctor to whom everyone there goes. The doctor in turn refers her to a specialist if one is needed. She herself does not feel that she has any say in the choice of doctors.

### Russian

When answering the question, test person RUS01 thinks about whether it is possible to choose a specialist when referring a patient from a primary care physician to a specialist. In her experience, this possibility does not exist in Russia: *"The doctor has to decide that, it does not exist in Russia"*<sup>29</sup> (RUS01). The test person would therefore not even think of asking for a doctor in Germany. The test person finds the answer to this question rather difficult, since the concept of free choice of doctor is unclear or unknown to him.

Test person RUS02 claims to have been treated by a Russian-speaking doctor during her hospital visit. There would have been no need (and probably not the possibility) to choose the doctor himself. Here it remains unclear whether the concept of free choice of doctor was understood.

### English

Test person ENG01 has no difficulty in answering the question and understands the concept of free choice of doctor, which is the focus of this question.

## Recommendations:

Introduction: Before this battery of questionnaires, it should first be asked when the last visit to a primary care physician, specialist or other medical care provider took place. If no visit in Germany has taken place so far, respondents are asked to skip this question:

**When was the last visit to a primary care physician, specialist or other medical provider, such as XXX?**

<sup>29</sup> „Das muss der Arzt entscheiden, das gibt es in Russland nicht“ (RUS01).

[Wann erfolgte der letzte Besuch bei einem Hausarzt, Facharzt oder einem anderen medizinischen Versorger, wie z.B. XXX?]

- Month / Year [Monat / Jahr]
- No visit in Germany [Kein Besuch in Deutschland] -> continue with question X [-> weiter mit Frage X]

The translation of the introduction in the Russian questionnaire should be reconsidered.

- Question 63: Due to the spontaneous remark in the interview, we recommend a slight rewording: ... die Wartezeit in der Praxis, bis Sie an der Reihe waren? [... the waiting time in the doctor's office until it was your turn?]
- Question 65: In question 65 it is not clear whether this is a question of explaining the medical facts or of difficulties in understanding due to (lack of) language skills.
- Question 66: In question 66, two respondents (in Farsi and Russian) have substantive difficulties with the question, as it is not clear to them to what extent they should be "involved" as patients. Both persons leave the question unanswered. We recommend rephrasing this question as follows: Inwieweit Sie über Ihre Behandlung mitentscheiden konnten? [To what extent were you able to participate in deciding on your treatment?]
- Question 68: According to the two interviews, which were conducted in Russian, the principle of free choice of doctor is not known in Russia, so the interpreter first had to explain the intention of the question in more detail.
- Irrespective of whether this is the case or whether respondents are only unaware that they are free to choose their doctor in Germany, the question arises if this option is appropriate for the context of a particular visit to be evaluated.
- Answer options: An additional answer category "Can't judge" should be included, in case certain things that are asked in the questionnaire battery are not relevant for respondents. For example, if there is only one doctor on duty or speaking the language, the attending doctor cannot be selected at that moment.



**Questions 72-80:**

Auf einer Skala von sehr einfach bis sehr schwierig, wie einfach ist es Ihrer Meinung nach...

[On a scale from very easy to very difficult, how easy do you think it is...]

**Frequency distribution (N=8)<sup>30</sup>**

	Answer	TP			
		Sehr schwer [Very difficult]	Ziemlich schwer [Rather difficult]	Ziemlich einfach [Rather easy]	Sehr einfach [Very easy]
72	...zu verstehen, was Ihr Arzt sagt? [...to understand what your doctor is saying?]	-	AR01, AR02	RUS01, RUS02, FAR01, FAR02, SER02	ENG01
73	...die Anweisungen Ihres Arztes oder Apothekers zur Einnahme der verschriebenen Medikamente zu verstehen? [...to understand the instructions of your doctor or pharmacist regarding the use of the prescribed medication?]	-	-	RUS01, RUS02, AR02, FAR01, FAR02, SER02	AR01, ENG01
74	...zu beurteilen, wann Sie eine zweite Meinung von einem anderen Arzt einholen sollten? [...to judge when you should get a second opinion from another doctor?] <sup>31</sup>	FAR02, SER02	AR01	-	AR02, FAR01, ENG01
75	...mit Hilfe der Informationen, die Ihnen der Arzt gibt Entscheidungen bezüglich Ihrer Krankheit zu treffen? [...to make decisions regarding your illness with the help of the information the doctor gives you?] <sup>32</sup>	AR02	AR01	RUS01, RUS02, FAR02, ENG01, SER02	-
76	...den Anweisungen Ihres Arztes oder Apothekers zu folgen? [...to follow the instructions of your	-	-	RUS01, AR02	AR01, RUS02, FAR01, FAR02, ENG01

<sup>30</sup> Test person SER01: Question was skipped due to time constraints.

<sup>31</sup> Test persons RUS01 and RUS02 leave the question unanswered because they do not understand what the question is aimed at.

<sup>32</sup> Test person FAR01 leaves the question unanswered, as she never had a disease where she should/must decide something.

---

	doctor or pharmacist?]				
77	...Informationen über Unterstützungsmöglichkeiten bei psychischen Problemen, wie Stress oder Depression, zu finden? [...to find information about support possibilities for psychological problems such as stress or depression?] <sup>33</sup>	SER02	AR02, ENG01	FAR02	-
78	...Gesundheitswarnungen vor Verhaltensweisen, wie Rauchen, wenig Bewegung oder übermäßiges Trinken zu verstehen? [...to understand health warnings about behaviour such as smoking, little exercise or excessive drinking?] <sup>34</sup>	SER02	-	RUS01, AR02	AR01, RUS02, FAR01, FAR02, ENG01
79	...zu verstehen, warum Sie Vorsorgeuntersuchungen brauchen? [...to understand why you need screening?]	-	-	RUS01, RUS02, FAR01, SER02	AR01, AR02, FAR02, ENG01
80	...zu beurteilen, ob die Informationen über Gesundheitsrisiken in den Medien vertrauenswürdig sind? [...to assess whether the information on health risks in the media is trustworthy?]	-	RUS01, RUS02, AR02, FAR02, ENG01	AR01, SER02	FAR01

---

### Cognitive Techniques:

General Probing, Specific Probing.

Questions 75 and 80 were systematically tested, while only spontaneous reactions - if any - from the test persons were available for the other questions.

### Findings on the question as a whole:

#### Arabic

Test person AR01 states that the answer category "rather difficult" was translated in Arabic as "a little difficult" or "difficult in some way". The translator agrees that the answer categories should be checked again and translated slightly differently.

---

<sup>33</sup> The test persons AR01, FAR01, RUS01 and RUS02 leave the question unanswered, as they have never had psychological problems.

<sup>34</sup> Test person SER01 leaves the question unanswered, as she smokes but does not drink.

### Farsi

Test person FAR01 does not understand the introduction. The wording: *"On a scale from very easy to very difficult, please answer the following questions"* would be more understandable for them. The way the introduction is written (...how easy do you think it is...), the subject assumes that she should only answer the easy questions.

### Russian

In an interview with RUS02, the interpreter points out that the introduction is imprecisely translated, but does not explain why.

## Findings on question 72 "...to understand what your doctor is saying?"

### Arabic

In the interview with test person AR02, the interpreter asks whether the understanding in question 72 is related to the technical or to the linguistic, the test person referred to the linguistic understanding when answering.

### Farsi

Test person FAR01 answered the question with "rather easy", explaining that she could talk to the dentist in English. Here, too, the focus is not on technical understanding but on linguistic understanding.

## Findings on Question 74 "... to judge when you should get a second opinion from another doctor?":

### Arabic

AR02 has problems with the term "second opinion". According to the interpreter it is not clear in the Arabic translation that the second opinion is about the same medical case again. This could be translated more precisely.

After the interviewer clarifies what is meant by this, the test person states that she always asks for a second opinion, as she no longer has confidence in individual doctors and will certainly consult another one. Since the test person always proceeds in this way, she states that it is easy to make this decision.

### Farsi

Test persons FAR01, FAR02 and the interpreters agree that the question was poorly translated: *"When do they have to get the second opinion?"*

FAR01 misunderstands the question and thinks of a follow-up appointment with the same doctor and not a second opinion from another doctor.

On the other hand, FAR02 understands the question correctly, but states that she does not know anyone in Germany who could recommend another doctor to her, which is why she has never asked for a second opinion. Therefore the test person is uncertain what to tick. Without an interviewer she would have chosen "very difficult".

### Russian

Test person RUS01 notes that question 68 and 74 are very similar: *"same question"*<sup>35</sup>. Furthermore, the test person states that she does not know that it is her right to get a second opinion. The interpreter then explains that the understanding of the question depends on how long one has been living in Germany, as this behaviour is generally very unusual in Russia.

RUS02 also shows problems of understanding: *"What does it mean to be able to get a second opinion?"*<sup>36</sup>. It is also unclear what exactly is to be assessed in the question of when a second opinion should be obtained or how easy this should be. The interpreter confirms that the question was translated unluckily: *"Estimating when you can get a second opinion from a doctor?"*. Both test persons leave the question unanswered.

**Findings on question 75 "... to make decisions regarding your illness with the help of the information the doctor gives you?":**

### Serbian

Test person SER02 answers spontaneously: *"It is not difficult to understand what the doctor is saying."*<sup>37</sup> However, the test subject seems to make no reference to their decision behavior regarding the disease.

### Arabic

Test person AR01 has no difficulty in answering the question. She thinks about her meniscus surgery and found it difficult to decide whether she should have the surgery or not.

Test person AR02 has no confidence in doctors due to her experience with them. For example, when an orthopaedic surgeon prescribes her an insole, she feels that he is only testing but is not sure if it really helps.

### Farsi

Test person FAR01 has no problem understanding the question, but no answer option is applicable to her, as she has never had a disease for which she should decide.

Test person FAR02 states that it is quite easy to make decisions when the doctor gives information about the disease.

### Russian

Test person RUS01 claims to be able to make decisions fairly quickly based on information obtained from doctors.

Test person RUS02 answers accordingly: *"It is easy to accept the information you get from the doctor, if I say it is too complicated, the disease does not go away"*<sup>38</sup>.

Both test persons find the answer to the question rather easy.

---

<sup>35</sup> „gleiche Frage“ (RUS01)

<sup>36</sup> „Was bedeutet eine zweite Meinung einholen zu können?“ (RUS02)

<sup>37</sup> „Es ist nicht schwierig nachzuvollziehen was der Arzt sagt.“ (SER02)

<sup>38</sup> „Es fällt leicht die Informationen zu akzeptieren, die man vom Arzt bekommt, wenn ich sage es ist zu kompliziert, geht die Krankheit ja nicht weg“.

### English

Test person ENG01 states that she usually receives good advice from doctors to help her deal with her illness and symptoms.

**Findings on question 77 "... to find information about support possibilities for psychological problems such as stress or depression?":**

### Arabic

Test person AR01 claims not to be able to answer the question because she has never had psychological problems.

### Farsi

Just like test person AR01, test person FAR01 does not check anything here, as she never had such problems.

### Russian

According to test person RUS01, the answer options do not match the question. If you have no experience with this, there should be a "don't know" or "don't fit" category. When asked by the interviewer whether the question could not be answered purely theoretically, the interpreter answers: *"That is too theoretical, nobody knows"*<sup>39</sup>.

Also test person RUS02 does not know why this question is not answered. As with the other test persons, this one also has no experience with stress and depression, so no answer option applies.

**Findings on question 78 "...to understand health warnings about behaviour such as smoking, little exercise or excessive drinking"?**

### Serbian

Test person SER01 claims not to know what to tick, as she smokes but does not drink. She does not seem to relate the question to the understanding of health warnings about harmful behaviour but thinks of herself personally and thus misunderstands the question.

**Findings on question 80 "... to assess whether the information on health risks in the media is trustworthy?"?**

### Serbian

The test person SER02 states that he does not understand the question and does not know what to tick. When asked, he chooses the answer option "rather easy".

### Arabic

Test person AR01 has no comprehension problems with this question. She says she has general trust in the media, but not blind trust. One always hears study results from time to time and shortly afterwards contradictory study results are reported. For example, study 1 says that a child should only eat

---

<sup>39</sup> „Das ist zu theoretisch, das weiß keiner“.

one ice cream a week and shortly after study 2 is published saying it is ok for children to eat one ice cream a day. Some say you shouldn't eat fat, others say it is ok...etc.

Test person AR02 answers with "rather difficult" and states that she has language difficulties. Here it is unclear whether the question is meant professionally or linguistically, the test person refers to the linguistic component.

### Farsi

Test person FAR01 emphasizes the media and the information they provide are easy to understand. The interpreter points out that the test person misunderstands the question: the test person's understanding refers to her understanding of the media and not to her trust in them.

The interpreter in the interview with test person FAR02 notes that "health risks" in Farsi was translated as "hygiene risks". In addition, the test person explains that she automatically links media to advertising and thinks that something should be sold. Therefore, she generally feels that the media is not trustworthy.

### Russian

The test persons RUS01 and RUS02 choose the answer option "rather difficult" and justify this by the fact that contradictory information is disseminated in the media (RUS01) or that journalists are not medical professionals and it would therefore be reckless to trust this information (RUS02).

### English

Test person ENG01 finds it difficult to trust information from the media, as she cannot ask questions (like with a doctor) and does not know who put the information in the media or who was responsible for writing it. She had read that some of her medications are addictive, but her doctor could not confirm this.

### Recommendations:

In general, it should be noted that in the context of a refugee interview, a distinction should be made between language barriers and technical barriers. Otherwise, no recommendation for action can be derived from the results (e.g. making greater use of interpreters or training doctors in didactics).

Question:	We recommend to simplify the question linguistically: <b>How easy or difficult is it for you...?</b> <b>[Wie einfach oder schwer fällt es Ihnen ...?]</b>
Question 74:	In this question, the term "second opinion" should be reworded or the procedure explained, as this terminology has led to problems of understanding for almost all test persons.
Question 75:	The difference to question 66 should be highlighted.
Question 78:	This question leaves it open whether it is about German media or media in general, i.e. whether it is about language difficulties or media competence. We would therefore recommend deleting this question in this context.
Answer options:	We recommend adding a "do not know" or "does not apply" category (especially for question 77).

**Question 88:**

Was ist Ihre Staatsangehörigkeit?

[What is your citizenship?]

**Frequency distribution (N=9)**

Answer	TP
Afghanistan	FAR01
Algerien [Algeria]	-
Bosnien/Herzegovina [Bosnia and Herzegovina]	-
Kamerun [Cameroon]	-
Gambia	-
Georgien [Georgia]	-
Indien [India]	-
Iran	FAR02
Irak [Iraq]	-
Mazedonien [Macedonia]	SER01
Nigeria	ENG01
Pakistan	-
Russland [Russia]	RUS02
Serbien [Serbia]	SER02
Sri Lanka	-
Syrien [Syria]	AR01, AR02
Togo	-
Türkei [Turkey]	-
Andere Nationalität: _____ [Other nationality: _____]	RUS01

**Findings:**

This question has not been systematically tested. Therefore, only the spontaneous comments of some test persons are available - if at all.

**Russian**

The half-open answer category "Other nationality" was translated as "Other country" in the Russian questionnaire. Test person RUS01 also points out that there is a big difference between citizenship (e.g. Ukrainian) and nationality (e.g. Russian) in Russia. She therefore suggests speaking of "citizenship" as already mentioned in the question text.

**Recommendations:**

We recommend formulating the answer category "Other nationality" analogously to the question text, i.e. to rename it "Other citizenship".



**Question 89:**

Was ist Ihre Muttersprache?

[What is your native language?]

**Frequency distribution (N=9)**

Answer	TP
Albanisch [Albanian]	-
Arabisch [Arabic]	AR01, AR02
Dari	FAR01
Englisch [English]	ENG01
Farsi	FAR02
Französisch [French]	-
Georgisch [Georgian]	-
Hausa	-
Kurdisch [Kurdish]	-
Mazedonisch [Macedonian]	SER01
Mandinka	-
Paschtu [Pashto]	-
Russisch [Russian]	RUS01, RUS02
Serbisch [Serbian]	SER02
Tigrinya	-
Türkisch [Turkish]	-
Urdu	-
Yoruba	-
Other: _____	RUS02: Ukrainisch ENG01: Ibo

**Findings:**

This question has not been systematically tested. Therefore, only the spontaneous comments of some test persons are available - if at all.

**Russian**

Test person RUS02 asks spontaneously if she can select two languages here.

**English**

Subject ENG01 indicates two native languages, English (as official language) and Ibo as native language. At first, he is surprised that Yoruba and Hausa are available as languages, but not Ibo.

When he thinks about the fact that the questionnaire is distributed to people from many countries, he puts his opinion into perspective, as the other languages are larger or are also spoken in countries other than Nigeria.

**Recommendations:**

We recommend supplementing the question with a completion instruction that clarifies whether more than one native language can/should be specified.

**Question 90:**

Welchen höchsten allgemeinbildenden Schulabschluss haben Sie?

[What is your highest general school leaving certificate?]

**Frequency distribution (N=9)**

Answer	TP
keinen Schulabschluss [No school leaving certificate]	-
Grundschule [Primary school]	SER02
Sekundarbildung/Höhere Schulbildung: Unterstufe [Secondary education/higher education: lower secondary]	RUS02
Sekundarbildung/Höhere Schulbildung: Oberstufe [Secondary education/higher education: Upper secondary]	SER01
Berufsausbildung [Vocational training]	AR02, FAR02
Tertiäre Bildung/ Universitätsabschluss/Bildung auf Universitätsniveau [Tertiary education/ university degree/ education at university level]	AR01, RUS01, FAR01, ENG01

**Findings:**

This question has not been systematically tested. Therefore, only the spontaneous comments of some test persons are available - if at all.

**Serbian**

The test persons SER01 and SER02 point out that primary school in Serbia lasts 8 years. Subject SER02 has attended only this primary school, but probably should have chosen the answer category "secondary education/ higher education: lower level" in accordance with the German school system. A similar "translation problem" is present in test person SER01: This test person has attended primary school in Serbia, in Germany she has attended secondary modern school for two more years and left with a secondary modern school leaving certificate after grade 10. She should therefore have chosen the answer category "secondary education/ higher education: lower school" (instead of "upper school").

**Farsi**

Test person FAR01 is Afghan and does not understand the question, because - as the test person suspects - it was translated by an Iranian and a different school system applies in Iran than in Afghanistan. With the exception of the last answer category, the test person does not know the terms. However, she can still place herself correctly, as she has a Bachelor's degree.

**Arabic**

Test person AR01 points out that the answer categories for Syria, Lebanon, Yemen, and Morocco would not fit entirely. Vocational training is integrated into secondary education in these countries. For example, someone could complete secondary education with a focus on "vocational training". In addition, the category "medium-level institutes", which would correspond to a two-year course of study, was missing.

## Russian

Test person RUS01 and the interpreter in this interview stated that the answer option "tertiary education" in both the German and Russian questionnaires would not fit the question, as it had nothing to do with school education. According to the interpreter, the Russian questionnaire also asks for "education", whereas the German questionnaire speaks of "school leaving certificate".

Both test persons RUS01 and RUS02 point out that in the Russian education system there is also an intermediate school or an intermediate secondary which does not appear in this question.

## Recommendations:

This question sometimes mixes school and vocational qualifications in the answer categories, even if the question only asks for the highest school leaving certificate. A further difficulty is that each country has its own school/education system with its own degree titles and that these vary by country and not by language.

Due to the diversity of school systems and the fact that the answer categories in one language (e.g. Arabic) do not have to correspond to the designations in other countries with the same language, we recommend a very reduced survey of educational qualifications (cf. SOEP Migration Panel).

Which school-leaving certificate did you obtain? [Welchen Schulabschluss haben Sie erworben?]

- Compulsory school finished with degree [Pflichtschule mit Abschluss beendet]
- Secondary school finished with degree [Weiterführende Schule mit Abschluss beendet]
- Still in school education [Noch in Schulausbildung]
- Don't know [Weiß nicht]

Have you completed vocational training or studies? [Haben Sie eine berufliche Ausbildung oder ein Studium abgeschlossen?]

- Yes, a vocational training [Ja, eine berufliche Ausbildung]
- Yes, a college education [Ja, ein Hochschulstudium]
- No, no completed training [Nein, keine abgeschlossene Ausbildung]
- Don't know [Weiß nicht]

**Question to be tested: 99**

Was ist Ihr aktueller Aufenthaltsstatus in Deutschland?

[What is your current residence status in Germany?]

**Frequency distribution (N=9)<sup>40</sup>**

Answer	TP
laufendes Asylverfahren – Asylsuchender [Ongoing asylum procedure – asylum seeker]	SER01, FAR01, FAR02, ENG01
Asylverfahren abgeschlossen – Flüchtlingsstatus [Asylum procedure completed – refugee status]	AR01, AR02
Asylverfahren abgeschlossen – Duldung [Asylum procedure completed – toleration]	-
Asylverfahren abgeschlossen – Flüchtlingsstatus abgelehnt, aufgefordert – das Land zu verlassen [Asylum procedure completed – refugee status refused, asked to leave the country]	-

**Cognitive Techniques:**

Specific Probing.

**Findings:**

There are some difficulties with regard to the completeness of the categories. For example, three test persons cannot assign themselves to any answer option. However, the majority of the test persons have no problems with the understanding of the categories.

**Serbian**

To test person SER01 is not clear what the question is about: *“Does this mean why I came to Germany?”<sup>41</sup>*. SER01 claims to have come to Germany as an asylum-seeker, to have filed an application, which is still pending, and correctly assigns herself to the first answer option. In addition, the test person misses a response option that indicates that one has come to Germany but has not yet formally applied for asylum, which seems to take time and is the first completed step for them.

SER02 also has problems understanding the question, but unlike SER01, she does not know what to tick, as nothing applies to her. The test person explains that three weeks ago she received a deporta-

<sup>40</sup> The test persons RUS01, RUS02 and SER02 leave the question unanswered, because they cannot assign themselves. The two Russian test persons have a residence permit, since they did not immigrate as refugees.

<sup>41</sup> „Heißt das, warum ich nach Deutschland gekommen bin?“ (SER01)

tion notice (*"a letter that I have to go back"*<sup>42</sup>) but has filed an objection. When asked, SER02 is unable to specify her current status.

### Arabic

Both test person AR01 and AR02 have no problems answering the question and rate it as very easy.

### Farsi

Test person FAR01 has an ongoing asylum procedure and rates the answer to the question as very easy. The interpreter and the test person point out that the last answer option is missing a verb in the translation.

Test person FAR02 also has an ongoing asylum procedure. The test person states that she had a hearing that was rejected, but that the procedure is continuing with a lawyer. Therefore, the first answer option was chosen, but the question was judged to be moderately difficult: *"Not very easy but not very difficult either"*<sup>43</sup>.

### Russian

Test person RUS01 stumbles over the Russian translation of "asylum seeker", as it does not exist in this way: *"You don't say that"*<sup>44</sup>. The wording "ongoing asylum procedure" would be sufficient. The interpreter notes that the remaining answer options have been well translated. Furthermore, the test person does not find any of the answer options suitable, as she married a German man. For this reason it is very difficult to answer the question.

Test person RUS02 is the son of RUS01, which is why none of the answer options is applicable here either; neither of the Russian test persons is part of the actual target group of the questionnaire.

### English

Test person ENG01 asks what the difference is between the first and the third answer categorie. She would spontaneously choose the first answer, which is correct in her case.

### Recommendations:

Question: It may be necessary to add a category for the phase before the asylum application: "I intend to make an asylum application" [„Ich habe vor einen Asylantrag zu stellen.“]

Answer options: The term "asylum seeker" should possibly be changed or deleted in Russian.

---

<sup>42</sup> „ein Schreiben, dass ich zurück muss“ (SER02)

<sup>43</sup> „Nicht sehr leicht aber auch nicht sehr schwer“. (FAR02)

<sup>44</sup> „Das sagt man nicht“. (RUS01)

**Question 103:**

**Denken Sie bitte an Ihre Situation in Deutschland!**

**[Please think about your situation in Germany!]**

In unserer Gesellschaft gibt es Bevölkerungsgruppen, die eher oben stehen und solche, die eher unten stehen. Ganz oben stehen die Menschen mit dem meisten Geld, der höchsten Bildung und den besten Jobs. Ganz unten stehen diejenigen mit dem wenigsten Geld, der niedrigsten Bildung und den schlechtesten Jobs oder ohne Job.

[In our society there are population groups that tend to be at the top and those that tend to be at the bottom. At the top are the people with the most money, the highest education and the best jobs. At the bottom are those with the least money, the lowest education and the worst jobs or no job.]

Wir haben hier eine Skala, die von oben nach unten verläuft. Wenn Sie an sich selbst denken: Wo würden Sie sich auf dieser Skala einordnen?

[We have a scale here that runs from top to bottom. If you think of yourself: Where would you place yourself on this scale?]

#### Frequency distribution (N=8)<sup>45</sup>

Answer	TP
10	-
9	-
8	RUS02
7	-
6	RUS01
5	AR01, ENG01
4	SER01
3	FAR02
2	-
1	AR02, SER02

#### Cognitive Techniques:

General Probing, Specific Probing.

#### Findings:

##### Serbian

Test person SER01 states that she has chosen the value 4 because it is "so medium".

<sup>45</sup> Test subject FAR01 did not answer the question due to lack of time.

Test person SER02 has difficulties in answering the question. At first she does not understand the scale: *"Don't have friends who work, I am where I am"*<sup>46</sup>. Only after explaining that it is a matter of her own assessment and that there is no right or wrong, she decides on the value 1. The test person justifies her answer by saying that she is grateful for the protection and help and that she is generally satisfied.

### Arabic

Test person AR01 notes that in the introduction to the question only the upper and lower classes are mentioned, but not the middle class. In her opinion, the middle class should be mentioned here, otherwise the question would suggest that there is only one upper and one lower class. But the intention of the question is understood and the answer is rather easy for the test person. AR01 bases her answer on the fact that she works full-time, receives additional housing benefit and also money from the Youth Welfare Office for looking after her daughters.

Test person AR02 is placed on the lowest level ("1"), because she has no job at the moment, but gets money from the "Jobcenter" and is learning German.

### Farsi

Test person FAR02 receives benefits from the social services and asks if she has to mark "1" for this reason. The test person first ticked the "6" because (the following is clear from the questions on the following question 104) there are others who are worse off, for example those from neighbouring countries who do not receive social benefits and have to beg. Then she changes her answer in F103 to "3", because one does not see so many beggars and maybe there are not so many after all. When asked, test person FAR02 states that the question was unpleasant and difficult to answer.

### Russian

The test person RUS01 first asks which country to refer to. She explains this uncertainty by saying the question would say "if you remember" (in the German questionnaire "Wenn Sie an sich selbst denken") and that this formulation would not fit her current situation in Germany. It remains unclear whether the test person has observed the heading. After clarifying that it is about Germany, the test person chooses the answer "6", which she describes as "medium level". However, the test person found the answer "rather difficult", as it is difficult to summarise what should be included and to define a value.

The test person RUS02 chooses the value "8" and justifies her answer mainly with regard to financial means. There is enough money to finance a car and an apartment, but there is not enough money to check the "10", but *"we are doing well"*<sup>47</sup>. However, the test person says that she finds it "rather difficult" to answer because the limits [of the scale] are unclear: *"What does 8 mean and what does 1 mean?"*<sup>48</sup>. In her opinion, examples for classification would be helpful, e.g. "8=good car/good flat; 1=no flat".

### English

Test person ENG01 has no difficulty with the question. The test person claims to have a relatively good education, but no job and no money. Therefore she places herself in the middle at "5".

<sup>46</sup> „Habe keine Freunde die arbeiten, ich bin da wo ich bin“ (SER02)

<sup>47</sup> „es geht uns gut“ (RUS02)

<sup>48</sup> „Was bedeutet 8 und was bedeutet 1?“ (RUS02)



**Recommendations:**

Question: No changes recommended.

Answer options: No changes recommended.

**Question 104:**

**Denken Sie bitte nun an Ihr Herkunftsland!**

[Now please think about your country of origin!]

In Ihrem Heimatland gibt es Bevölkerungsgruppen, die eher oben stehen und solche, die eher unten stehen. Ganz oben stehen die Menschen mit dem meisten Geld, der höchsten Bildung und den besten Jobs. Ganz unten stehen diejenigen mit dem wenigsten Geld, der niedrigsten Bildung und den schlechtesten Jobs oder ohne Job.

[In your home country there are population groups that tend to be at the top and those that tend to be at the bottom. At the top are the people with the most money, the highest education and the best jobs. At the bottom are those with the least money, the lowest education and the worst jobs or no job.]

Wir haben hier eine Skala, die von oben nach unten verläuft. Wenn Sie an sich selbst denken, bevor Sie Ihr Land verlassen haben: Wo würden Sie sich auf dieser Skala einordnen?

[We have a scale here that runs from top to bottom. If you think of yourself before you left your country: where would you place yourself on that scale?]

#### Frequency distribution (N=8)<sup>49</sup>

Answer	Quantity TP
10	ENG01
9	-
8	AR01, RUS01, RUS02
7	-
6	AR02
5	-
4	FAR02
3	-
2	SER02
1	SER01

#### Cognitive Techniques:

General Probing, Specific Probing.

#### Findings:

Serbian

<sup>49</sup> Test person FAR01 did not answer the question due to lack of time.

Test person SER01 chooses the value "1" for her country of origin. At the end of the interview, the test person asks the interviewer why such personal information has to be given. This question seems to concern her sense of honour – possibly it is also an interviewer effect and an additional reinforcement by the fact that she is a female interviewer. The male test person is obviously uncomfortable talking about her socioeconomic status [in front of women].

SER02 chooses the value "2" for question 104 (country of origin) and justifies this with the fact that she was already badly off in her country of origin, but that she assesses her status in Germany even worse: *"in Germany no rights, no work, no house"*<sup>50</sup> (value question 103: "1").

### Arabic

Test person AR01 again points out that no middle class is mentioned in the introduction. The test person understands the question and can easily answer it. The reason given for the answer is that the test person had a very well paid job in her home country Syria and the wife also had a good job. They also had a home and a car. Here in Germany, the wife has no job, they live for rent and the current work is not the same which the test person AR01 did in Syria.

Test person AR02 chooses the value "6" and justifies this with the fact that she worked in a bank in Syria.

### Farsi

Test person FAR02 chooses the value "4" for this question, while she rated her current situation in Germany with the value "3". The respondent explains the difference between questions 103 and 104 by saying that in Germany they were given everything (accommodation, basic services, etc.) to help them integrate and there were no more worries about electricity and rent, while in their country of origin they had to pay everything themselves. Due to the political situation of her husband they were in a very low class, as some of them could not even cover their basic costs.

When asked, test person FAR02 states that the question was unpleasant and difficult to answer. Difficult because she was already in her home country in many classes. Initially at the top and after her husband was no longer allowed to work because he was politically active, at the bottom.

### Russian

Test person RUS01 chooses the value "8" for this question and gives the following reasons: *"I felt better before, I had a completely different status. Here I have a much lower status because I cannot speak the language etc."*<sup>51</sup>. The answer to question 104 is rather easy for her.

RUS02 – as with the previous question – has difficulties in classifying herself and is having difficulty in answering it. She chooses the same value ("8") as in the previous question and justifies this with the fact that the situation is "similar to home, but a little better here." The father has found a job with a big company and they have moved for him because of a better education. The decision to move was not made because there was a lack of money, but because of the education.<sup>52</sup>

### English

Test person ENG01 has no problem with the question. She had a very good job in the government in his country of origin, a good education and could afford a lot, which is why she chose the value "10".

<sup>50</sup> *„in Deutschland keine Rechte, keine Arbeit, kein Haus“* (SER02)

<sup>51</sup> *„Vorher ging es mir besser, ich hatte einen ganz anderen Status. Hier habe ich einen viel niedrigeren Status, weil ich die Sprache nicht kann etc.“* (RUS01)

<sup>52</sup> The test person RUS02 did not enter the country as a refugee.

**Recommendations:**

Question: No changes recommended.

Answer options: No changes recommended.

## 5 Overview of the notes on the translations

---

### Serbian

- Question 15-21: The translation of the introduction should be checked.  
Question 45: Check translation of the term "advise" in the questionnaire.

### Arabic

- Question 15-21 The translation of the answer categories should be checked.  
Question 17: The translation of the question should be checked for grammatical correctness.  
Question 72-80: The translation of the answer categories should be checked again.  
Question 74: According to the interpreter, it is not clear in the translation that the second opinion is about the same medical case again. The translation of "second opinion" should therefore be checked again.

### Farsi

- Question 27: The translation of "personal relationships" should be checked.  
Question 45: The translation of the term "following doctors" should be checked.  
The translation of the term "orthodontist" should be checked.  
The translation of the term "primary care physician" should be checked.  
Question 47: The translation of the term "medical specialists" should be checked.  
Question 59: The translation of the term "basic needs" should be checked.

### Russian

- Question 59: The translation of the term "basic needs" should be checked.  
Question 63-68: The translation of the introduction should be checked.  
Question 88: The translation of the half-open answer category should be checked again.

### English

- Question 45: The translation of the term "medical specialists" should be checked.  
Question 59: The translation of the term "everyday school life" is missing in the questionnaire.

---

## 6 Glossary: Cognitive Techniques

---

Think Aloud	<i>„Please vocalize everything that comes to your mind while you answer the following question. Please also vocalize things that seem unimportant to you. The question is...“.</i>
Comprehension Probing	<i>“In this context, what do you understand by 'a highly responsible professional activity'?”</i>
Category Selection Probing	<i>„You have just said that you strongly agree with this statement. Why did you select this answer?“</i>
Information Retrieval Probing	<i>„How did you remember that you went to the doctor [...] times in the past 12 months?“</i>
General/Elaborative Probing	<i>„Can you please explain your answer a little further?“</i>
Specific Probing	<i>“You have answered yes to this question. Does this mean that you have already given up opportunities for career advancement for your family, or that you might be willing to give them up but have not yet done so?”</i>
Emergent Probing	<i>“You just frowned and laughed when I read out the answer options for you. Can you please explain to me why you did that?”</i>
Paraphrasing	<i>„Please repeat the question that I have just read out to you in your own words.“</i>
Confidence Rating	<i>„How sure are you that you went to the doctor [...] times in the past 12 months?“</i>