

# Gender and Quality of Care: In-depth Interview Guide for Health Providers

## A. Background on provider

1. Can you tell me about yourself? Probe to know age, family/marital status, where he/she is from.
2. Can you tell me about your position and why you became a health provider? Probe: doctor, midwife, nurse A1, etc.
3. What types of services are you involved in providing? Probe: family planning, antenatal care, labor/delivery, post-natal care, other(s).

Sex	<input type="checkbox"/> Female <input type="checkbox"/> Male
Age	<input type="checkbox"/> <input type="checkbox"/> years
Marital status	<input type="checkbox"/> Married/partnered <input type="checkbox"/> Single
Originally from the local area	<input type="checkbox"/> Yes <input type="checkbox"/> No
Type of health provider	<input type="checkbox"/> Midwife (A1) <input type="checkbox"/> Doctor (generalist) <input type="checkbox"/> Nurse (A1) <input type="checkbox"/> Doctor (specialist) <input type="checkbox"/> Nurse (A2) <input type="checkbox"/> Other <input type="checkbox"/> Nurse (A3)
Type(s) of services he/she providers [MARK ALL THAT APPLY]	<input type="checkbox"/> Family planning <input type="checkbox"/> Labor/delivery <input type="checkbox"/> Antenatal care <input type="checkbox"/> Postnatal care <input type="checkbox"/> Labor/delivery <input type="checkbox"/> Other service

## B. Provider-client relationships & interactions

Now I'd like to ask you a few questions about what it's like to treat and interact with the clients that you receive. You can share your own experiences, or those you have witnessed or heard about.

1. Can you describe the women who usually come to these services? Probe: age; socioeconomic status; provider opinions or perceptions of the female clients.
2. Can you describe the men who usually come to these services, whether alone or accompanying their partners? Probe: age; socioeconomic status; provider opinions or perceptions of male clients.
3. What are the most common reasons women seek care in the facility where you work? What about men?
4. What are your relationships or interactions with **female** clients generally like?
  - Are there certain things you do or say to help female clients to feel comfortable during the consultation? Probe: ask if they have any questions, welcome them kindly, listen to their concerns, etc.
  - Are some female clients easier to interact with than others? If yes, why and which kinds of women are they?

- Are some female clients more difficult to interact with than others? If yes, why and which kinds of women are they?
5. **If provider is female:** Do you think male health providers interact with female clients any differently than female providers?
  6. **If provider is male:** Do you think female health providers interact with female clients any differently than male providers?
  7. What are your relationships and interactions with **male** clients generally like (including men who accompany their partners services)?
    - Do your interactions with male clients differ in any way from the ones you have with female clients? If so, how? Why?
    - Are there certain things you do or say to help male clients to feel comfortable during the consultation? Probe: ask if they have any questions, welcome them kindly, listen to their concerns, etc.
    - Are some male clients easier to interact with than others? If yes, why and which kinds of men are they?
    - Are some male clients more difficult to interact with than others? If yes, why and which kinds of men are they?
  8. Do clients ever question or disagree with the service or care that they or their partners have received? Do female and male clients disagree about the same amount, or does one gender disagree more? Can you tell me about any experience you've had or witnessed?
    - Note to interviewer: if unclear, examples include: client didn't agree with the contraceptive method prescribed; or treatment received during labor or delivery; or other decision of a health care provider.
    - How was the situation handled?
    - Does this type of situation happen often? If yes, why do you think this occurs often?
  9. What are the relationships between the staff working in this facility like?
    - Are there differences in the relationships between the doctors and nurses? What about doctors and midwives? Nurses and midwives?
    - Do different types of providers have more power or authority?
    - Are there differences in the relationships between male and female staff?
    - Do hierarchical relationships you have with other providers in the facility ever impact your interactions with clients?

## C. Men's participation in RMNH services

Now I'd like to ask you a few questions about your experiences with men participating in reproductive and maternal health services.

1. What's your experience with women bringing their partners to maternal or reproductive health visits? What do you think about it?
  - Does how the service is delivered or your interaction with the female client change when the male partner is present? How so?
  - Is it easier or harder to do your job when men are present?

2. When a man is present, do you consult him on decisions related to his partner's health or care/treatment? Why or why not?
  - What types of decisions related to women's care do you involve men in? Why?
  - What do you do if a woman and her partner disagree on a decision, for example, about the use of contraceptives?
3. Are there any benefits or disadvantages for women when men accompany them or participate in the consultations? [Probe: different types of services; decision-making, partner support, etc.]
  - Are there any benefits for men? Any disadvantages?
  - Do you think men's presence at the consultation improves the care or services that their partners receive? If yes, why or how?
4. I know that men are requested to attend the first antenatal care visit. What happens if a woman comes without her partner?
  - What happens if a woman does not want her partner to be present?
  - Are women ever turned away from the service? If yes, how do you feel about this?
  - Are there any consequences if women are turned away from the service?
5. Have you ever received a man coming for family planning services alone? Or a man bringing his child for services? Can you tell me what it was like?
  - Are the men who attend family planning services on their own, or bring their newborns for postnatal check-ups on their own different from other men? How so?
  - Does the way you provide the service differ in this situation?

## D. Quality of care

Now I'd like to ask you a few questions about the quality of care services provided in health facilities in this community.

1. Can you describe what *high* quality reproductive and maternal health care looks like?
  - Probe: to know about patients' experience of care, including provider/client interactions and communication, infrastructure, privacy, and confidentiality.
  - What is the biggest difference between *high* and *low* quality care?
  - What do you think is the most important thing a health provider should do to promote quality care for his/her clients?
2. How important are privacy, confidentiality and patient consent to quality care?
  - What do you do to promote these when you see clients?
  - Are there other aspects of care that you think are important to ensure high quality care?
3. Have you ever heard or seen a health provider shout, hit or slap female clients? What happened?
  - Are these occurrences more common with certain types of clients?
  - With certain types of health providers?
  - Are these occurrences more common in some services compared to others (e.g. labor or delivery)?

4. What should happen to a client if s/he is unable to pay for the services s/he has received? What usually happens in these situations?
5. Are there any factors or circumstances that would cause you to see certain patients sooner than others, beyond the urgency of their clinical condition?
6. In your experience, are different types of clients treated differently or receive different quality of care at health facilities in this district?
  - Female clients compared to male clients?
  - Married compared to unmarried?
  - Adolescents compared to adults?
  - Educated compared to uneducated?
  - Rich compared to poor?
7. Why do you think that people do not access or receive the services that they need? Is there anything that can be done to promote the use of services to these people?
8. What can be done to help health providers and health facilities to be able to provide better or higher quality care?

We are at the end of our discussion, is there anything else that you would like to share with me before we end our discussion?

Thank you very much for talking to me today, your opinions are important to us. The information we discussed will help us to understand some of the challenges that health providers face when working in reproductive, maternal, and newborn health services.