

Interview Guide on Malaria in Pregnancy for Use with Facility-based Providers

Date of interview:	Start Time: End time:
Name of interviewer:	Name of note-taker:
County:	Sub-county/Community:
Name of the facility:	Name of person interviewed:
Interviewees position:	Contact info of interviewee: Telephone: Email:

Facilitator notes:

- Before beginning, the facilitator should get signed consent forms from everyone who will be participating.
- When ready to begin, the facilitator should tell the participant(s): Hello, my name is _____ and I work with the Impact Malaria project. Thank you for taking the time to speak with us today. I wanted to take some time to talk to you today about your experiences with regard to malaria in pregnancy services. My colleague, _____ is here to assist me by taking notes. Your participation in today's discussion is voluntary. You can choose to leave at any time. You will not lose any benefits if you do not participate. You will also not gain any additional benefits if you do participate. Everything we discuss here is confidential. Nothing that you say will be linked to your name. The discussion should take no more than 2 hours. Before we begin, do you have any questions?
- Respond to all questions, then ask, would you like to continue?
- Excuse anyone who does not wish to continue, and then begin the discussion.

I. Service delivery overview

1. What malaria in pregnancy-related services are currently offered in this facility? Who provides the services?
2. How are providers in this facility trained on malaria in pregnancy information and service provision (including ANC and IPTp)?
3. Do you feel you have the knowledge, skills, and resources to provide effective malaria in pregnancy services (including ANC and IPTp)? Why or why not?

II. Client practices

1. At what month of pregnancy do most women come for their first ANC visit? Why do you think this is? (Probe for family-related reasons, socio-cultural reasons, reasons related to the services themselves.)
2. Do most women attend ANC services alone or with someone else? If it is someone else, who usually accompanies them? Why do you think this is?
3. What do you think most women in your community know about malaria in pregnancy? What are the gaps in their knowledge?
4. Where do most women get their information about malaria in pregnancy? (Probe for media channels, people, etc)
5. Do women know about IPTp during pregnancy?
 - a. What are some reasons why pregnant women would take IPTp as counseled during pregnancy?
 - b. What are some reasons why pregnant would NOT take IPTp as counseled during pregnancy?

III. Service delivery practices

1. What are some of the barriers to providing effective malaria in pregnancy services (including ANC and IPTp) in this facility?
2. What would make it easier for this facility to provide effective malaria in pregnancy services (including ANC and IPTp)?
3. Do ANC clients regularly receive a mosquito net on their first visit? If yes, what is the counseling process like when they receive the net?
 - a. What are some of the barriers to pregnant women sleeping under a mosquito net every night in the community?
 - b. What would make it easier for pregnant women sleeping under a mosquito net every night in the community?
4. What is the interaction like between facility-based and community-based workers/volunteers here? In what ways could it be improved?