|  |  |  |
| --- | --- | --- |
| **NESOG FIGO PPIUD project**  **In-depth Interview checklist for women who chose other PPFP methods** | | |
|  | **Identification** |  |
| 01 | NAME OF FACILITY\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |
| 02 | RESPONDENT’s CODE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |
| 03 | LOCATION\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |
| 04 | NAME OF INTERVIEWER\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |
| 05  06 | DATE INTERVIEWED.....................................................................................  Time Interview started: Hour: \_\_\_ Minute: \_\_\_ | DAY MONTH YEAR |

**Factors affecting the behavior outcomes on post-partum intrauterine contraceptive device uptake and continuation in Nepal: a qualitative study**

Interview checklist

|  |  |
| --- | --- |
| **Questions/ Issues** | |
| **I.** | **General background** |
|  | * What is your age? * What is your level of education? * What is your occupation? * Could you tell us a bit more about the family you were born into? * How your parents were like when you were growing up? (e.g were they too strict? Too conservative?) * How is your relationship with your parents now? * How many siblings do you have? * How is your relationship with them now? |
| **II.** | **Marriage and the family** |
|  | * When did you get married? * How old were you when you got married? * How did you first meet your husband? * How did you get married? (*e.g was it a love marriage? Arranged marriage? Was it a forced marriage?)* * What is your husband’s occupation? * What is your husband’s level of education? * Whom do you currently live with? (*e.g husband, mother in-law, father in-law etc*.) * Who is the head of the household or takes the decision in your family? * How is your relationship with your husband? * How is your relationship with your in-laws? * How is your relationship with rest of the family? * What changes has marriage bring in your life? * How much of authority do you think you have in your family? (*e.g to decide what is best for yourself and your family*) |
| **III.** | **Family planning** |
|  | * How many children do you have? * Were your last pregnancy and previous pregnancies (if any) planned? * What changes did having a child/children bring in your life? * Do you have plans to have more children?   -If yes, why?  -If no, why?   * Did you ever discuss family planning with your husband?   -If not, why didn’t you discuss about family planning?  -If yes, why did you discuss about family planning?  -What did you discuss about family planning?   * Did you discuss about family planning with anybody else?   -If yes, who did you discuss with?  -What did you discuss about?   * Have you ever used any FP method before your last pregnancy?   -If yes, what did you use?  -What made you use the contraceptive?  -How did you use the contraceptive?  -Who decided that you should use the contraceptive?  -If No, why didn’t you use?   * Do you wish to have more child/children in the future?   -If yes, why?  -If no, why? |
| **IV.** | **Experience with childbirth** |
|  | * How was the experience of your last childbirth in the hospital? * Was it a vaginal birth or by CS? * How long was the labour? * How did you feel after you delivered? * How did you feel when you first saw your new born? * Did you wish for a specific sex for your new born?   -If yes, why?  -If no, why?   * Were you happy with the sex of your new born?   -If yes, why?  -If no, why?   * How long did you stay in the hospital? |
| **V.** | **Experience with current FP method** |
|  | * What made you choose the FP method you ware currently using after you delivered your last child? * Who provided the counselling to you? (e.g doctor, nurse, counsellor etc) * How many time were you counselled? * When were you counselled each time? (at which stages of pregnancy?) * How was your experience with the health provider counselling you on PPFP? * Who made the decision that you should use FP method you are currently using? (e.g yourself, husband, mother-in law etc. * Was anybody else from your community/ neighbourhood involved in the decision? (such as FCHVs, friends etc) * How was your experience with the health provider providing FP method you are currently using? * How long do you want to continue using this method? And Why? * Is there any message or advice you want to give to health workers who provided PPFP service to you? |

Thank you very much for your help.

Time interview ended: ………..hour ………minute