

KEY INFORMANT INTERVIEW

Heshima: Promoting dignified and respectful care during childbirth in Kenya

General Information

These will be conducted with health facility managers, service providers, RH coordinators, Community focal persons and CHEWs for best performing, mid and poor performing sites. Depending on the facility level, facility and/or maternity in charges, medical superintendents, gynaecologists, and front line service providers will be interviewed.

Title	
Role in the project	
Gender	
Time interview started:	
Time interview ended:	
Name of interviewer:	

Role in project and implementation experiences

1. Can you please tell us about your experience in implementing interventions to reduce the occurrence of D&A in the facility setting?

Probe:

- *What was your role in the project?*
- *How were you involved in the project?*
- *What activities were you involved in? (participation in VCAT training, open days counseling, community engagement)*
- *What other capacity building activities were implemented?*
- *Any other activities?*

2. Let us now talk about your experiences in the project

Probe:

- *Was the project implemented as planned?*
- *Is the intervention being implemented at optimal level?*
- *What worked well in terms of implementation process? Why do you say so?*
- *What did not work well? Why do you say so?*
- *If the interventions did not work, what are the potential ways in which the intervention can be improved? (Who needs to be involved, what activities and why)*
- *Are there any other ways in which D&A can be reduced in our health facilities during child birth?*

Assessing key outcomes and impact of intervention

3. Considering impacts or outcomes what can you say are the key achievements of the project?

Probe:

- *What aspects of the intervention package were useful in improving how clients are handled during child birth?*
 - *What do you think is the most significant change that has taken place in this facility since Heshima started? (e.g. reduced occurrence of D&A, improved provider client behavior)*
 - *How has the project impacted on your relationship with your clients?*
 - *Has there been an increase in the number of reported cases of D&A?*
 - *Do clients express themselves more than before?*
 - *Do you listen to clients more than before?*
 - *Do client voices have a bearing on how you work?*
 - *Give us an example of how a case of D&A was handled at: facility/maternity management level*
 - *What factors contributed to the outcomes seen?*
 - *Please can you tell me how the Heshima project has affected you as an individual in the way you work in this facility*
 - *What benefits have the community seen as a result of this intervention?*
 - *What are the benefits to the facility?*
4. What other measures have you put in place in this facility (*Other than Heshima activities*) to mitigate the occurrence of D&A in the health system in general?
- Probes*
- *Existing measure put in place-what are they*
 - *Why were they put in place*
 - *Any evaluations done to examine their effectiveness?*
 - *How effective are they?*
 - *Who supported the initiative?*

Lessons learnt during the implementation

5. What key lessons have learnt in the course of implementing Heshima package of interventions?

Challenges faced while implementing the project

6. What are the greatest problems or challenges that you faced as (managers/providers/CHEWs) faced when implementing the project in this facility/site? Why do you say so?
7. How did you overcome the challenges that you faced?
Probe for each set of challenges how they managed it

Scalability of promising elements of the intervention

8. What elements of the intervention package were useful for scale up?
 - *Name the elements*
 - *For each of the issues mentioned, ask why they say so*
 - *What aspects need modifications?*
 - *What are the suggestions for the modifications?*
 - *What do you do think should have been done differently? Why?*
 - *What recommendations can you give for future projects?*