

**RAPID ASSESSMENT OF MALARIA DURING PREGNANCY
TOOL 6: INDIVIDUAL INTERVIEW/FOCUS GROUP GUIDE FOR
HEALTH-CARE WORKERS**

This guide can be adapted to be used as a guide for conducting either focus groups or individual interviews.

Region_____
Name of facility/facility area_____
Date: ____/____/____ Month Day Year
Time_____
Interviewer_____
Recorder_____

INTRODUCTION: Introduce yourself and team members, describe your roles, and obtain agreement to participate (or informed consent if required). Tell the participant(s) the goal of the focus group.

A. Demographics:

Age:

Level of education: Highest level of school attended (primary, secondary, higher, unknown)

Job description at health facility:

B. Topical area: Prevailing health problems and malaria in pregnancy

1. What are the 3 most serious health problems among pregnant women in this area?

List them in order of how serious they are.

2. **(Ask if malaria is not mentioned in Question 1)** Is malaria a serious or common health problem among pregnant women in this community?

C. Topical area: Signs and symptoms of fever and malaria during pregnancy

1. What are the common signs and symptoms of malaria among pregnant women?

D. Topical area: Causes and consequences of malaria in pregnancy

1. What effect does malaria have on pregnant women? On the fetus? On the neonate?
2. Are pregnant women more susceptible to malaria? Do pregnant women with malaria get more severely ill than other people?

E. Topical area: Sources of advice for malaria prevention/treatment during pregnancy

1. From whom do women seek advice regarding malaria or pregnancy issues in general?
2. Who influences women the most when they need information about pregnancy or malaria? For example, someone at the health facility, a traditional birth attendant, a midwife, someone else in the community (example village elder), or someone in their family?

What is the order of seeking advice? First, second, third?

3. Do husbands play a role in deciding what to do if their pregnant wife gets malaria?

IF YES: please describe their role.

4. What is the best (most effective) way to reach women in this community in order to provide them malaria prevention and treatment information?

F. Topical area: Preventive strategies

1. In general, how do people protect themselves in this area against malaria when they are pregnant? (Probe for traditional remedies, use of insecticides, insecticide-treated nets or curtains, mosquito coils, dress, etc.)

Are any of these strategies harmful to a pregnant woman or her baby?

Yes___No___ IF YES: Which ones?

IF YES: please describe how it will hurt the woman or the baby.

2. What preventive methods are provided at the clinic?

3. For intermittent preventive treatment (IPTp), what drugs are given?

- When are these given? How many doses do the women get?
- Do you use directly observed treatments? Yes___ No___
- Are there any times when you can not do this? (Probes: for example, no drinkable water or drug shortages, woman complains that she has not eaten?)
- If you do not see the woman taking the pill, do you think most women are compliant?
- How are you recording the doses? For example, do you have a written record of women receiving doses or do you only ask the women if they have received a dose? Is it written in their clinic cards?
- When did this facility start implementing IPT?

- What has been the response of the women to the IPTp? (Probe: Do they see it as a welcome addition to antenatal care, are they concerned about toxic effects to the baby?)

4. What has been their response to insecticide-treated nets/nets?

- Are these provided to pregnant women? Yes___No___
- Do you think most women sleep under these nets? Yes___No___ IF NO: who sleeps under the net in most of these families?
- What comments have you heard from the women about the nets?
- How are they provided:
 - given free
 - given as a cost-sharing mechanism (If so, how much do you charge for the net?)
 - If using a cost-sharing mechanism, can most women afford them? Yes___No___

G. Topic area: Treatment strategies

1. What treatment do you use for a pregnant woman with uncomplicated malaria? Does this vary with gestational age?
2. Are there any antimalarials you will not use in pregnant women? Why? Does this vary with gestational age?
3. What concerns do most women express regarding malaria treatments during pregnancy?

(Probes: Are women concerned that the medicines are too harsh for the baby? Is the medicine worse for the baby or is the malaria worse? Will taking treatments during pregnancy put a curse on the baby?)

H. Topical area: Acceptance of antenatal care (from health facilities and traditional birth attendants)

1. How can health-care workers work better with traditional birth attendants?
With other community-based workers?
2. In your opinion, what could be done to improve the services of the health facility?
3. How could services for pregnant women regarding the prevention and treatment of malaria be improved?
4. Do you feel that you have had adequate training regarding malaria during pregnancy?

BE SURE TO THANK THE HEALTH CARE WORKER FOR HIS OR HER TIME, AND ASK IF HE OR SHE HAS ANY QUESTIONS FOR YOU.