Code	Definition	When to use	Matching interview guide question	Example
HIP Type				
HIP Type: IPPFP	Related to the High Impact Practice of Immediate Post-Partum Family Planning. "Offer contraceptive counseling and services as part of facility-based childbirth care prior to discharge from the health facility."	Each HIP will have their own respective Excel Matrix tab. It is important to make sure that you are coding within the correct tab.		
HIP Type: PAFP	Related to the High Impact Practice of Postabortion Family Planning. "Proactively offer voluntary contraceptive counseling and services at the same time and location where women receive facility-based postabortion care."			
HIP Type: CHW	Related to the High Impact Practice of Community Health Workers. "Integrate trained, equipped, and supported community health workers (CHWs) into the health system."			
HIP Type: PDS	Related to the High Impact Practice of Pharmacies and Drug Shops. "Train and support pharmacies and drug shops to provide family planning information and a broad range of quality contraceptive methods."			
FInal Analyst Summaries				
Overarching Final Analyst Summary of Interview	Related to the qualitative analyst's overarching summary of the whole interview.	In this column, please feel free to summarize your findings, note any inconsistencies, highlight anything important that jumps out at you, or include additional questions that you'd like to know more about. This is the column where the analyst is expected to start synthesizing the information they've read and make sure that any future researcher who reviews your Matrix can understand and feel connected to the respondent's transcript. Suggest completing this summary column at the end of your transcript review.		
Final Analyst Summary of Challenges	Related to the qualitative analyst's overarching summary of challenges that the respondent noted about HIP use or implementation.			
Final Analyst Summary of Successes	Related to the qualitative analyst's overarching summary of successes that the respondent noted about HIP use or implementation.			
Participant Characteristics and Overarching HIPs Knowledge				
Participant characteristic	Related to the demographic and professional background the respondent shares about themselves, including their title and role within their organization.	Respondents are asked in the beginning of the interview to share about themselves and their position within the organization. If the respondent shares additional information throughout the course of the interview about their personal, professional background, then mark the section as "Participant Characteristics".	To start, could you tell me a little bit about **yourself** and **your position**?	Leads the Research and Monitoring tool, to capture all they do as an organization for external stakeholders, conduct research, and support Knowledge sharing with stakeholders, sharing lessons for adaptation elsewhere and internal usage.
Familiarity with HIPs	Related to the respondent's awareness of and level of understanding of the wider High Impact Practices in Family Planning initiative.	Respondents are asked if they are familiar with the High Impact Practices in Family Planning Initiative and what they know about it. They are asked to reflect on what the term "High Impact Practices" means to them.	Are you aware of the HIP brief on IPPFP? If yes: To what extent do you rely on the information from the HIP brief to implement IPPFP? Please explain. OR: 2. This is an assessment about High Impact Practices in Family Planning or HIPs. What does the term High Impact Practice mean to you?	I: Have you heard about the HIP initiative? R: Not the initiative but heard about the high-impact practices.
Use of HIP briefs	Related to the respondent's use of the HIP brief on the selected topic to implement interventions or activities to achieve the policy components.	Respondents are asked the extent to which they rely on the information from the HIP brief to implement the various practices within their organization.		
Challenges with using HIPs	Related to any challenges the respondent identifies with implementing the HIPs or accessing the HIPs information. The respondent might also include suggestions for making this easier/more efficient.	Respondents are asked if they are aware of any challenges with implementing the specific HIP being examined. The interviewer might probe on additional components of the HIP.	In your experience at your organization, what are some challenges with implementing the core components we have discussed for IPPFP?	The service is usually driven by the provider proactiveness. If the provide is quite about it, the mother won't know about it. We need to interest the providers into this service. Training has been done, but the HW attrition from the facilities affects provision of this service. The lack of skill in offering the IPPFP service.
Analyst Summary	Related to the qualitative analyst's overarching summary of this section of information.	In this column, please feel free to summarize your findings, note any inconsistencies, highlight anything important that jumps out at you, or include additional questions that you'd like to know more about. This is the column where the analyst is expected to start synthesizing the information they've read and make sure that any future researcher who reviews your Matrix can understand and feel connected to the respondent's transcript.		
Policy standard				
IPPFP Policy Standard: Commodity System	The commodity system includes the supplies, equipment, and methods to support the provision of IPPFP.	Respondents are asked to reflect on how their managing authority meets each policy standard. Use the respective code accordingly. Make sure to use the correct HIP and policy standard.		
IPPFP Policy Standard: National Guidelines and Training Curriculum	Facility leadership uses national guidelines and a training curriculum that includes client-centered IPPFP counseling and service provision.			
IPPFP Policy Standard: Service delivery guidelines	Service delivery guidelines in use address integration and referral for other RH/MCH services during FP care including in the post-partum period.			
IPPFP Policy Standard: Staff guidelines	Guidelines in use mandate the availability of a trained health worker who can provide immediate post-partum FP counseling, service provision or referral to other RH services as needed.			
IPPFP Policy Standard: Job descriptions	Job descriptions clearly articulate that all antenatal and maternity care providers have a role in PPFP.			
IPPFP Policy Standard: Monitoring	A documented system supports the provision and tracking of IPPFP in terms of both access and quality.			
IPPFP Policy Standrad: Facility leadership promotes IPPFP	Facility leadership reflect IPPFP in budget requests, formal documentation of services that they offer and in any external communication about their service.			
PDS Policy Standard: Documented Procurement Process	There is a documented process for drug shops and pharmacies to obtain a wide range of approved contraceptive products.			
PDS Policy Standard: Trainings	A system documents trainings or orientations that PPMVs/pharmacists receive in the provision of FP information and products.			
PDS Policy Standard: Supportive supervision	A supportive supervision system is in place that supports the provision of a wide range of contraceptive commodities and accurate information through drug shops and pharmacies.			
PDS Policy Standard: Supply systems	A system is in place to supply drug shops and pharmacies with promotional and point-of-sale materials.			
PDS Policy Standard: Job description	Job descriptions clearly articulate that all antenatal and maternity care providers have a role in PDS.			
PDS Policy Standard: Referral system	Norms and procedures in use at the operational level that govern drug shop and pharmacy processes describe a referral system that links into the larger health system.			
PDS Policy Standrd: Commodity Monitoring	A documented system is in place that supports the provision and tracking of FP products provided via drug shops and pharmacies.			
PAFP Policy Standard: Commodity System	The commodity system includes the supplies, equipment, and methods to support the provision of PAFP.			
PAFP Policy Standard: National guidelines and training	Facility leadership uses national guidelines and a training curriculum that includes client-centered PAFP counseling and service provision.			
PAFP Policy Standard: Integration and Referral	Service delivery guidelines in use address integration and referral for other RH/MCH services during FP care including in the post-abortion period.			
PAFP Policy Standard: Staffing	Guidelines in use mandate the availability of a trained health worker who can provide immediate post-abortion FP counseling, service provision or referral to other RH services as needed.			
PAFP Policy Standard: Job descriptions	Job descriptions clearly articulate that all antenatal and maternity care providers have a role in PAFP.			
PAFP Policy Standard: Monitoring	A documented system supports the provision and tracking of PAFP in terms of both access and quality.			
PAFP Policy Standard: Leadership Support	Facility leadership reflect PAFP in budget requests, formal documentation of services that they offer and in any external communication about their service.			
CHW Policy Standard: Commodity Availability	Aspects of the commodity system such as order forms, reporting forms, etc. sufficiently includes the supplies, equipment, and methods and the means to supply CHWs to support the provision of counseling and a wide range of appropriate (in-stock) methods through CHWs.			
CHW Policy Standard: Guidelines and training	Facility leadership (linked to CHWs) uses/refers to national guidelines and a training curriculum that includes guidance on FP counseling, service provision and referrals through CHWs.			
CHW Policy Standard: Supportive Supervision	A supportive supervision system is in place that supports community health workers and reflects national guidelines.			
CHW Policy Standard: Referral System	Norms and procedures in use at operational level that govern CHW's role in the health system describes a referral system that links into the larger health system.			
CHW Policy Standard: Monitoring	A documented system is in place that supports the tracking of FP counseling, services and referrals provided via CHWs.			
CHW Policy Standard: Leadership Support	A documented system is in place for facility leadership to seek feedback from communities on CHW recruitment and support.			

Implementation of Policy Standard			For each core component, we have a list of standards that implementers may use to define the quality of implementation of these practices. Let's work through this list of standards together and discuss how your organization approaches them. I will ask two questions for each standard:	
MA's Actions towards policy standard	Related to the respondent's understanding of what their organization is doing to meet the respective policy standards.	If the respondent shares information regarding how their organization works towards achieving the policy standard or if they have not done anything specific to work toward the respective policy standard.	The first question is about **what your organization does to meet the standard**. I will also ask you to share relevant documentation to help me better understand what you are doing, but I will follow-up with you after this discussion for those materials. How does your organization meet this standard?	The same structure, working through HFs. We don't give supplies we work within facilities. Having meeting with NMS and other stakeholders, then bring them to the TWG to ensure commodity availability issues are solved to an extent
Emphasis Rating (#)	Related to the respondent's rating of the emphasis that their organization places on a particular policy standard. This will be numerically shared. 0-No emphasis; 1= minor emphasis; 2= moderate emphasis; 3= major emphasis.	Record the numerical emphasis rating the repsondent shares. Record the rating as a numeric digit. This will allow the analyst to average the various reponses and utilize any specific Excel functions.	The second question refers to the **emphasis your program actually places on a particular standard**. For this, please indicate if this is no emphasis, minor emphasis, moderate emphasis, or major emphasis. How much emphasis does your program actually place on this standard?	
Explanation of emphasis rating	Related to the respondent's reflections on why they chose the specific emphasis rating.	If the respondent shares any written commentary on why they selected the emphasis rating, please include it in this column.		R: However much the leadership structures are available, and develop budgets, but they don't budget specifically for IPPFP but for general FP/MCH
Analyst Summary	Related to the qualitative analyst's overarching summary of each HIP policy standard.	In this column, please feel free to summarize your findings, note any inconsistencies, highlight anything important that jumps out at you, or include additional questions that you'd like to know more about. This is the column where the analyst is expected to start synthesizing the information they've read and make sure that any future researcher who reviews your Matrix can understand and feel connected to the respondent's transcript.		
Suggestions	Related to any suggestions or comments the respondent might have shared, especially at the end of the interview.	If the respondent shares any additional information that they feel is relevant to the project. This could include suggestions for future integration, dissemination of results, etc.	Do you have any questions or comments on any of the information we discussed above?	
Notes		Include any miscellaneous notes or thoughts that don't fit into any of the defined codes/columns.		
Additional quotes		Include any interesting quotes that do not fit within any of the defined codes/columns		