R4S – Acceptability of family planning self-care behaviors and practices in Nepal, Niger, and Uganda
In-depth interview topic guide
Female participants

Instructions to Interviewers

This interview guide is for women living in households that have been randomly selected for IDIs.

- *The participant ID will be generated during the household enumeration process, and the consenting and screening will occur using the same process as that of the survey participants.*
- ***AFTER consenting and AFTER determining eligibility**, use the tablet to ask the short demographic survey questions. Do NOT read the response options, unless otherwise instructed.*
- *Ensure you have adequate privacy and cannot be overheard before beginning to ask questions.*
- ***AFTER the demographic questions have been asked,** save the responses and put the tablet away.*

Demographic Questions

READ AFTER ELIGIBILITY: Your answers indicate that you meet the eligibility for this study. I will ask you a few more questions on this tablet before we move to the audio-recorded part of the interview. As a reminder, you can decline to respond to any of these questions.

NO.	QUESTION	RESPONSE	CODE	SKIP
201.	What is the highest level of school you've attended?	No formal schooling Primary school Secondary school University or technical school No response	1 2 3 4 9	
202.	Did you do any paid work within the last six months?	Yes No Don't Know No response	1 0 8 9	
203.	How many living children do you have? ***Enter 00 if none.*** ***Enter 99 if no response.***	[___|___]		
204.	How long does it take for you to get to the nearest preferred health facility? ***Read response options aloud and select one.***	Less than 15 minutes 15 to 30 minutes 31-60 minutes 61 minutes to 2 hours More than 2 hours Don't know No response	1 2 3 4 5 8 9	

***READ*:** Thank you for answering my questions. We will now begin our discussion. There are no "right" or "wrong" answers to the questions I ask. I am interested in understanding your viewpoints about family planning information and methods and how they might be obtained. I will be audio-recording the interview so I can make sure to remember the information you provide. But, as a reminder, I will keep

any information you share with me confidential. I will not share it with anyone in your household. (Refer to consent information.) Are you ready to get started?

Turn on recorder, state your name, the participant ID, and confirm that they consented to participate and be recorded.

Questions

I. Orientation to the concept of "self-care"

1. How would you describe your overall health?
2. How much do you feel you are "in control of" or manage your own health?
    i. How much control do you feel you have over your ability to delay or avoid getting pregnant?
3. For what health issues do you visit a healthcare provider?
    i. For what health-related issues do you rely on yourself or others who are not healthcare providers? Tell me more about that.
    ii. How important is it to visit healthcare providers for family planning compared to other health-related issues? Why?
4. When I use the term "self-care", what does that mean for you?
    i. How would you describe it when it comes to family planning?
    ii. How is self-care related to providers and the health system?
    iii. How does shared decision-making between people like you and providers relate to self-care?
    iv. How does shared decision-making between you and your husband/ partner relate to self-care?

PROVIDE R4S DEFINITION OF SELF CARE: *We define self-care as the ability of individuals, families or communities to promote and maintain sexual health and avoid unintended pregnancies with or without the help of a healthcare provider.*

***If reading this definition, ask**: How would you describe this in your own words?*

II. Fertility awareness

5. Thinking about a woman's menstrual cycle, at what point in her cycle is a woman most fertile? Least fertile?
6. Have you ever tried to plan or time sex to get pregnant?
    i. What about to avoid pregnancy?
7. What kinds of products are you are aware of to help couples time their pregnancies?
8. What information or product(s) have you used to assist with this? Where did you obtain this knowledge, or these products? (e.g., calendar method, mobile apps)
9. How comfortable are you with the idea of using self-tests without supervision from a health care provider in a facility to see if you are pregnant?
    i. In what circumstances would you prefer to see a provider, even if a home test were available? Why? Can you please give an example of your preference?

III. Contraception

10. Let's talk about family planning. Are you currently doing anything to delay or avoid getting pregnant?

i. (If yes) What contraceptive method are you currently using?
ii. (If none) What was the last method you used?
iii. (If never use) Have you ever thought about using a method? Why/why not? *If respondent has never used FP, skip to Q18 – "If you wanted to start using…".)*

11. Why did you use this current/last method instead of other methods available?
12. Where, or from whom, did you obtain this method?
    i. Why did you choose to obtain your method from this place or person?
    ii. Were there other options? Why did you not use these places?
    iii. To what extent was your choice of method affected by where you could get it?
13. How involved was a healthcare provider in determining which method to use? What role did you play in the decision?
    i. What role did the provider play in choosing your current/last method?
    ii. More generally, how involved should providers be in contraceptive decision-making? Why do you say this?
14. How involved has your partner been in decisions about whether to use contraception?
    i. What role did he play in choosing your current/last method?
    ii. More generally, how involved should men be in contraceptive decision-making? Why do you say this?
15. What kind of information or support have you needed to use your method?
16. What, if any, side effects have you/did you experience while using this method?
    i. (*Probe if not mentioned*) Have you had any changes to your menstrual cycle or monthly bleeding while using this method, such as changes in how long you bleed, how much you bleed, how often you bleed, how regularly you bleed, how your blood looks and/or smells—including more or fewer blood clots, as well as changes in menstrual cramping and pain?

17. How have you managed these?
    i. Which side effects required a visit to the clinic?
    ii. Which could be managed some other way? (self, drug shop, home remedies or other)
    iii. How comfortable were you with your use of self-management versus clinic management? Did you feel you had good options for care?
18. If you wanted to start using – or switch to a new contraceptive method, how well informed do you feel about the various options to delay or avoid getting pregnant? Why do you say this?
    i. What sources of information do you trust? Why?
    ii. What sources of information do you not trust? Why?
19. If you were using a contraceptive method obtained from places other than the health facility, for what would you still need provider support when using that contraceptive method?
    i. What do you think you would need provider support for?
    ii. How easy will it be to get provider support in this case? Why?
    iii. What are other options to get this support?
20. In general, do you prefer to use methods that are under your own control – or methods that are provided by a healthcare worker? Why do you say this?

21. [*If IUD not already mentioned*: An IUD or intrauterine device is a method that a woman can use to delay or avoid a pregnancy for up to multiple years. A small loop or coil is placed inside a woman's uterus or womb by a doctor or a nurse.] An IUD is usually removed by a healthcare provider at a clinic when a woman wants to stop using it, but women may be able to remove their own IUD instead. Knowing this information, what do you think about the idea of a woman removing her own IUD?

IV. Effect of COVID 19 on Access to FP Information and Services

22. How, if at all, has the COVID pandemic affected your ability to obtain FP information or services?
    i. In the last two years, did you ever find it difficult to obtain the FP information or services you wanted because of COVID? Please explain.

V. Facilitating engagement in self-care

23. At the beginning of this interview, we talked about the idea of "self-care". Thinking about the family planning experiences you have shared; how do your own experiences compare with your idea of self-care? Why?
24. In general, what kinds of self-care practices are possible or practical for women to avoid or delay getting pregnant?
    i. What kinds of support do women need to be able to practice self-care in family planning?
    ii. What are barriers to women being able to do and sustain self-care in family planning?
25. What family planning services or products, in your opinion, require provision by a trained healthcare provider?
    i. How can healthcare providers contribute to self-care in family planning?
    ii. What barriers are there to receive support from healthcare providers for self-care in family planning?
    iii. How do you feel about family planning products and services being available through other venues – that is, not through a clinic?
    iv. From your perspective, does this make obtaining family planning methods and services easier? Or place more burden on you?
26. What sources of support are there in the community for self-care in family planning?

INFORMATION TO INCLUDE IN TRANSCRIPT	
Interviewer's name	
Interviewer ID number *Assigned during training*	[___|___]
Interview date	[___|___] / [___| ___] / [___| ___] Day Month Year
Start/End Times	Start time [__ __: __ __] End time [__ __ : __ __]
Participant ID *Generated during household enumeration.*	[___] - [___|___] - [___|___] - [1|___|___] SNU PSU HH Participant
Venue of interview (e.g. client's home, health facility, etc..)	
Language of interview	