Exit Interview with Pregnant Women

Project Title: Understanding opportunities and challenges of delivering maternal, infant and young child nutrition (MIYCN) services in urban maternal, newborn, and child health (MNCH) facilities in Dhaka City, Bangladesh

INTRODUCTION

Introduce yourself by saying, *"We are talking to pregnant women to learn about their experience in the health facility."* (Tick the appropriate box)

Q#	Question	Answer	Code	Remarks
Q1	What is your gestational age?	☐ 1st Trimester	1	
		☐ 2nd trimester	2	
		☐ 3rd trimester	3	
Q2	Why did you come to the health facility today?	☐ ANC check-up	1	
		☐ Other, Specify_____ _____ _____ _____	2	
Q3	Age of pregnant mother (in years):	____Years		

OVERALL VISIT

Q#	Question	Code	Remarks
Q4	Tell me, what do you remember most from your visit with the health care provider today? *Then code to:* *1=yes, mentions something related to weight gain, iron folic acid (IFA)/eating/nutrition,* *2=no, does not remember anything,* *3=mentions something unrelated to weight gain/IFA/eating/nutrition*	_____	

WEIGHT MEASUREMENT PROCEDURES AND EXPLANATION

"Now let's talk about your weight." (Tick the appropriate box)

Q#	Question	Answer	Code	Remarks
Q5	Were you weighed today?	☐ Yes	1	
		☐ No	2	

		☐ Don't remember	8	
		☐ No response	9	
Q6	Did the health care provider measure the size of your upper arm (MUAC)?	☐ Yes	1	
		☐ No	2	
		☐ Don't remember	8	
		☐ No response	9	
Q7	Did the health care provider talk to you about your weight?	☐ Yes	1	
		☐ No	2	
		☐ Don't remember	8	
		☐ No response	9	
Q8	Did the health care provider write down the weight on your health card?	☐ Yes	1	
		☐ No	2	
		☐ Don't remember	8	
		☐ No response	9	

NUTRITION CONTENT DELIVERED/RECEIVED
(Tick the appropriate box)

Q#	Question	Answer	Code	Remarks
Q9	Did the health care provider ask any questions about what or how you are eating at home?	☐ Yes	1	
		☐ No	2	
		☐ Don't remember	8	
		☐ No response	9	

Q10	Did the health care provider give you any <u>advice</u> today about eating?	☐ Yes	1	
		☐ No	2	
		☐ Don't remember	8	
		☐ No response	9	
Q11	Now, a couple of specific questions about feeding. Did the health care provider talk about <u>what types</u> of foods to eat?	☐ Yes	1	
		☐ No	2	
		☐ Don't remember	8	
		☐ No response	9	
Q12	Did the health care provider talk with you about how many times in the day to eat or how much to eat?	☐ Yes	1	
		☐ No	2	
		☐ Don't remember	8	
		☐ No response	9	
Q13	Did you receive IFA (Iron Folic-acid) at the clinic today?	☐ Yes	1	
		☐ No	2	
		☐ Don't remember	8	
		☐ No response	9	
Q14	Did you receive calcium supplements at the clinic today?	☐ Yes	1	
		☐ No	2	
		☐ Don't remember	8	
		☐ No response	9	
Q15	Did the health care provider give you any <u>advice</u> today about taking IFA?	☐ Yes	1	

		☐ No	2	
		☐ Don't remember	8	
		☐ No response	9	
Q16	Did the health care provider give you any <u>advice</u> today about taking calcium supplements?	☐ Yes	1	
		☐ No	2	
		☐ Don't remember	8	
		☐ No response	9	
Q17	Did the health care provider advise you about early breastfeeding?	☐ Yes	1	
		☐ No	2	
		☐ Don't remember	8	
		☐ No response	9	
Q18	Did the health care worker use any aids (e.g. flipcharts, posters, educational materials, etc.) when talking to you about eating?	☐ Yes	1	
		☐ No	2	
		☐ Don't remember	8	
		☐ No response	9	
Q19	Did the health care provider talk about your next visit to the health facility?	☐ Yes	1	
		☐ No	2	
		☐ Don't remember	8	
		☐ No response	9	

SATISFACTION WITH SERVICES:
Finally, I'd like to ask about how you were treated during the visit. *(Tick the appropriate box)*

SATISFACTION WITH SERVICES: (1 is the worst score and 5 is the best score)						
Q#	**Satisfaction**	1	2	3	4	5
Q20_1	How long do you have to wait to visit the doctor after you come to this facility?	☐ Too long	☐ Somewhat long	☐ Neither long nor short	☐ Somewhat short	☐ Very short
Q20_2	How would you rate the waiting area of the facility?	☐ Very bad	☐ Bad	☐ Average	☐ Good	☐ Very good
Q20_3	How would you rate the advice of the doctor?	☐ Very bad	☐ Bad	☐ Average	☐ Good	☐ Very good
Q20_4	Did you get any opportunity to ask questions to the health care provider?	☐ None	☐ Not much	☐ Average	☐ Some	☐ Plenty
Q20_5	Do you feel that you were treated with respect?	☐ Strongly disagree	☐ Disagree	☐ Neutral	☐ Agree	☐ Strongly agree
Q20_6	Would you return to this facility?	☐ Strongly disagree	☐ Disagree	☐ Neutral	☐ Agree	☐ Strongly agree
Q20_7	Would you recommend a loved one visit this health facility to receive services?	☐ Strongly disagree	☐ Disagree	☐ Neutral	☐ Agree	☐ Strongly agree

Q21. What suggestions do you have to improve these visits-- to best work with the health care provider—to promote a healthy pregnancy?

_____

_____

_____

Then code to 1=yes, if has a suggestion, 2=no suggestion

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Conclude the interview by thanking the respondent for her time and for sharing about the health facility visit.