Qualitative interview guide

Participant: Instructions: participants will be identified by Save the Children.

ſ	ID code	# participants	Location	Date (dd/mmm/yy)	Start time	End time	Facilitator
				//20	:	:	initials

TO READ AT THE BEGINNING

Introduction

Objective

The discussions will be recorded and then destroyed once the transcript is completed. All information provided will be stored securely and confidentially and will not be passed on to third parties. No real names will be used in reports resulting from the information collected. All information will be treated confidentially.

Explain the basic rules for the interview

This is a friendly interview, so there is no right or wrong answer. We encourage you to relax and not hesitate to express your opinions. Participation is free and voluntary. We will propose a series of open-ended questions or topics for discussion and you can begin to answer. As a reminder, you do not have to answer all of our questions, and you can skip questions. Please keep your mobile phone silent so as not to disrupt the discussion. We will spend approximately one hour in our interview (and refreshments will be served to you at the end of the interview).

We have reviewed your consent form, which describes the evaluation study in detail and gives us permission to talk to you. As a reminder, we will be using a digital recorder to record our conversation. Do you have any questions before we begin the interview?

Moderator: Turn on the digital recorder: "I am (NAME OF MODERATOR) and am conducting the interview (DETAILED INTERVIEW IDENTIFICATION CODE) on [DATE] [TIME OF BEGINNING]".

	Main questions	Probing questions
Strer	ngthening the health system	
1.	[Service delivery] What are the contributions of SC FP/PAC programs in terms of reinforcing the overall delivery of quality health services?	 a. Quality of care dimensions Safety of methods and services Respectful Acceptable, person-centered, as per the person's preferences/norms Confidential Free choice No-discrimination Availability of services when individuals need it Continuity of care b. Recommendations for further improvements and sustainability beyond the program period?
2.	[Supplies] What are the contributions of SC FP/PAC programs in terms of reinforcing the overall supply chain of medical products and commodities?	 a. Availability of commonly preferred method mix? b. Quality and safety of contraceptives? c. Availability of key supplies (specula, pregnancy tests)? d. Availability of product and stockout in outreach/harder to reach areas? e. Recommendations for further improvements and sustainability beyond the program period?
3.	[Community/Demand creation/Information] What are the contributions of SC FP/PAC programs in terms of reinforcing the overall creation of demand for services?	 a. How was the community involved in designing the program? b. Reaching adolescent, unmarried, disabled, and other priority populations? c. Engaging men? d. Engaging decisionmakers in the families (e.g., stepmothers)? e. Support from religious authorities? f. Support from local leaders? g. In-school/at work programming? h. Voucher programs? i. Recommendations for further improvements and sustainability beyond the program period?
4.	[Health workforce] What are the contributions of SC FP/PAC programs in terms of reinforcing the overall health workforce?	 a. MOH staff? b. SC staff? c. Skilled staff at outreach/harder to reach facilities? d. Workload compared to remuneration/social benefits/career opportunities? e. Supportive supervision and accountability mechanisms? f. Remaining gaps in training needs? a. In-service b. Pre-service g. Recommendations for further improvements and sustainability beyond the program period?
5.	[Governance/Policy & guidance] What are the contributions of SC FP/PAC programs to influencing subnational / national policies and guidances?	 a. Nature of policy and guidance? b. Dissemination and implementation of policy and guidance? c. Recommendations for further improvements and sustainability beyond the program period?

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6.	[Governance/Coordination]	a.	MOH (note: MOH main partner in Somalia)
	What are the contributions of SC	b.	NGOs (note: ask in particular in Somalia – DRC had
	FP/PAC programs in terms of		several local partners)
	strengthening coordination with	C.	United Nations agencies
	key stakeholders?	d.	· · · · · · · · · · · · · · · · · ·
		e.	
			sustainability beyond the program period?
7.	[Health information system]	a.	Locally
	What are the contributions of SC	b.	In the province
	FP/PAC programs in terms of	c.	Nationally
	strengthening the health	d.	Is there a reliable HIS capturing FP/PAC indicators and
	information system?		service performance?
		e.	Is data used to improve the quality of FP/PAC
			services/programs?
		f.	Recommendations for further improvements and
			sustainability beyond the program period?
8.	[Financing]	a.	From local/provincial/national authorities
	What are the contributions of SC	b.	From international partners
	FP/PAC programs in terms of	C.	Expenses from commodities supply?
	strengthening investment in	d.	Expenses from service delivery?
	FP/PAC services?	e.	Client-side co-payment/expenses?
		f.	Other financing mechanisms? Voucher programs?
			(note: PBF in the DRC by the WB, which is a source of
			operational confusion)
		g.	Recommendations for further improvements and
			sustainability beyond the program period?
Conc	lusion		
9.	-	rity reco	mmendations (max 3) to improve or help with the
	sustainability of this program?		
10.	Before we conclude, do you have any	thing else	e to share with us on the SC FP/PAC programs and
	services?		

It's the end of our discussion. Thank you for your time.

	eption of achievements and outcomes	related to	
11.	[Access] What do you think of the SC	a. b.	What was the situation before the program? What has the program achieved in terms of (bold
	program in terms of improving		theme)?
	access to FP/PAC services?	C.	Why?
		d.	,
		e. f.	Harder to reach, poor, underserved, marginalized, socially-excluded, young, unmarried, disabled, LGBTI individuals/communities? Men and male adolescents?
		١.	Well and male adolescents:
12.	[Coverage]	a.	What was the situation before the program?
	What do you think of the SC	b.	What has the program achieved in terms of (bold
	program in terms of improving		theme)?
	coverage for FP/PAC services?	c.	Why?
		d.	Harder to reach, poor, underserved, marginalized, socially-excluded, young, unmarried, disabled, LGBTI individuals/communities?
			maividuais/communities:
13.	[Quality]	a.	What was the situation before the program?
	What do you think of the SC	b.	What has the program achieved in terms of (bold
	program in terms of improving the		theme)?
	quality of FP/PAC services?	c.	Why?
		d.	Quality of care dimensions
			 Safety of methods and services
			- Respectful
			- Acceptable, person-centered, as per the person
			preferences/norms
			- Confidential
			- Free choice
			- No-discrimination
			- Availability of services when individuals need it
			- Continuity of care
14.	[Effectiveness]	a.	What was the situation before the program?
	How would you describe the	b.	Nature of health improvement?
	improvement of the health status		·
	of women/the community as a		
	consequence of SC FP/PAC		
	services?		
15.	[Responsiveness]	a.	What was the situation before the program?
	How responsive were the services	b.	Examples of responsiveness to women's/community
	to women's/the community needs		needs
4.0	in terms of FP/PAC?		Washing have been tree at 1 and 200
16.	[Efficiency/equity]	a.	Would you have invested resources differently? In
	What do you think about the	I.	other priorities? If so, what are they?
	resources invested in SC FP/PAC services?	b.	Sustainability of the program?
17	[Social/financial protection]	C.	Integration with other services? What was the situation before the program?
17.	What do you think about the social	a.	What was the situation before the program?
	or financial advantages brought to	b.	Examples?
	women/the community as a		
	consequence of SC FP/PAC		
	services?		
18.	For certain categories of	a.	What are the main difficulties you have encountered
_0.	participants:		in this role?
	[Rationale]	b.	What would help you improve your work?
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	What motivated you to become		
	[peer educators, etc.]?		
Conc	nclusion		
19.	In summary, what would be your priority recommendations (max 3) to improve or help with the		
	sustainability of this program?		
20.	Before we conclude, do you have anything else to share with us on the SC FP/PAC programs and		
	services?		

Notes