ANNEX 2: Key Informant Interview Guide for Health Personnel

I. Introduction (5 min)

1. Thank the interviewee for participating
2. Explain the purpose of the assessment (See text below)
3. Assure the interviewee that the discussion will be kept strictly confidential
4. Ask for her/his consent to participate and explain that her/his participation is voluntary
5. Have the participant complete demographic forms (see section II)
6. Explain that the interview will last not more than 45 minutes.
7. Explain that a tape recorder will be used since you cannot write down everything

Purpose: The Ministry of Health in collaboration with FHI360 is currently conducting an assessment of Implanon removal in Ethiopia. The main purpose of this study is to determine when women who have had Implanon removed and if there are any barriers for women to have Implanon removed using a representative sample of women drawn from nine regions and two city administrations.

Findings from this study will be used to develop recommendations for ways in which to improve Implanon service delivery and put in place effective post insertion follow-up mechanisms.

IDI No: REGION WOREDA [__] [__]
II. General information (5 min)

SECTION 1: General Information

<table>
<thead>
<tr>
<th>NO.</th>
<th>QUESTIONS</th>
<th>CODING CATEGORIES</th>
<th>CODES</th>
<th>SKIPS</th>
</tr>
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<tbody>
<tr>
<td>101</td>
<td>How old are you?</td>
<td>Age in completed years [<strong>]</strong></td>
<td>Estimate best answer</td>
<td></td>
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<tr>
<td>102</td>
<td>Sex of Participant</td>
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<td></td>
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<td>Female = 2</td>
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<td>103</td>
<td>Profession of Participant</td>
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<td></td>
<td></td>
<td>Mid Wife=2</td>
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<td>Health Officer=3</td>
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<td>Physician = 5</td>
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<td>Other Specify _____________=6</td>
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<td>104</td>
<td>How long have you worked as a health professional</td>
<td>years [<strong>]</strong></td>
<td></td>
<td></td>
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<td>105</td>
<td>What type of health facility are you working?</td>
<td>Health Post = 1</td>
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<tr>
<td></td>
<td></td>
<td>Health Center = 2</td>
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SECTION 2: Questions

201. Did you receive training for Implanon insertion? Do you feel the training was adequate? If not why?

   PROBES: adequacy in terms of training duration; content comprehensiveness on Implanon insertion; issues during pre-insertion, insertion and post insertion period; whether practical attachment with what number of model and or real client practiced, necessary supplies were available for practice.) were they felt that make them able to provide when they get back to their facility?

202. Did you receive training for Implanon removal? If not why? Do you think the training was adequate?

   PROBES: adequacy in terms of training duration; content comprehensiveness on Implanon insertion as issues during pre-insertion, insertion and post insertion period; whether practical attachment with what number of model and or real client practiced
necessary supplies were available for practice.....) were they felt that make them able to provide when they get back to their facility?

203. How has Implanon been accepted by women/couples in your community?
   PROBES: Women in our community has ....... Belief and talk between themselves which influences from various angle it can be drug related, misconceptions/rumor, compliant on the service, husband denial If there is “poor” acceptability reason for

204. Is Implanon always available in the health facility where you work? If not, why?
   PROBES: if not why is that happened, is it Supply problem? What else could be the reason, if they recognize any significant effect on service provision as a result of stock out...) or if it is available at the health facility, what mechanisms they applied to ensure continuous method availability

205. Do you think Implanon users are removing the Implanon as prescribed by health workers? If not why?
   PROBES: challenges from clients’ perspective in terms of accessing the service, clients’ awareness, lack of friendly service from providers’ side....

206. What do you think are the main reasons for not removing as it is prescribed by the health workers?
   PROBES: point out reasons that describe your community in best manner from what has been raised in the previous conversation

207. What is/are the preferred contraceptive methods among FP users in this community?
   PROBES: what do you think are reason behind; can be peer influence, is there any belief or thought to the specific method in the community, make sure to talk from clients’ perspective

208. What complaints do you hear from women about using Implanon?
   PROBES: Drug related, misconception, in relation with service providers approach, in terms of their access to removal service, and also from clients suggestion box if that work for them

209. Do some women want to access removal of IMPLANON but do not have access to removal services?
   PROBES: Why that has happened? Due to lack of trained staff....? Shortage of necessary supplies to do removal (observation of the FP register book at the completion of your conversation)

210. What do you recommend to improve IMPLANON service delivery?
   PROBES: from system/higher administration perspective (ministry to HDA, service provider perspective and FP users perspectives)

Thank You!!