

# QUALITATIVE RESEARCH INSTRUMENT ON PERCEPTIONS OF ANEMIA AND USE OF IRON TABLETS—THE INDRAMAYU PROJECT, INDONESIA

## Introduction

The following plan and research instrument was developed for the USAID-funded MotherCare/John Snow, Inc. Project by the Manoff Group. This plan and the research instrument were used in formative research for the Indramayu Project. One component of this project tested ways to improve the existing iron supplementation program for pregnant women. Social scientists from the Manoff Group gave technical assistance to this process by developing these instruments, training non-medical interviewers and analyzing the results. The results were used to develop messages for counseling women and a social marketing campaign, to train health workers and other delivering iron tablets and to identify and develop delivery mechanisms/strategies for the improved iron supplementation program.

## THE PLAN

### Methods

Information will be collected through use of in-depth interviews. Interview guides have been prepared in draft form for pregnant and recently delivered women, traditional birth attendants (*dukun bayi*) and community volunteers (*kaders*), and midwives (*bidan*) and doctors in the study area. In addition, interviews will be conducted among a small number of husbands of pregnant or recently delivered women, and among elder women family members of pregnant women, who might influence compliance with iron tablets among pregnant women.

### Timeframe

The draft instruments will be pretested in the study community during February 1991, and interviewers will obtain training on in-depth interview techniques. Revisions indicated by the pretest process will be completed by end of February.

Interviews will take place in March, over a three-week period. Two interviewers will have primary responsibility for the interviews of women and TBA (*dukun bayi*). Two additional interviewers will assist with the health staff interviews.

### Sample Strategy

The project area includes approximately 10,000 households, and an estimated 1200 pregnant women according to most recent count.

A total of 30 pregnant and recently delivered women will be interviewed. Pregnant women should be in their second or third trimester of pregnancy. Current MOH policy

dictates that one iron tablet/day be taken by pregnant women beginning in the sixth month of pregnancy (end of the second trimester), and continuing into the postpartum period. In the Indonesian setting, pregnant women, even in second trimester, are not necessarily eligible to receive iron through government health facilities, and therefore would not be expected to have experience with consumption/compliance of iron tablets during the current pregnancy.

Identification information collected prior to the interview will indicate parity and level of use of antenatal care during this pregnancy. Half of interviews will be among previous users of iron, and half among non-users.

Six midwives (*bidans*) are currently working in the study area, and all will be included in the interview process. There are two doctors who will be interviewed.

At least 10 community volunteers (*kaders*) and 12 TBAs (*dukun bayi*) will be interviewed. Half of the *dukun bayi* will be trained, half untrained.

20 interviews will be conducted among people in the community who might influence women's consumption of iron tablets: 10 interviews with women with pregnant or recently delivered women in the household, and 10 interviews with husbands of pregnant or recently delivered women.

The total number of interviews is at least 78. This number might be increased slightly if patterns of information are not readily recognizable after the planned number of interviews in each category.

### **Overall Research Objectives, Formative Research on Iron Compliance in Pregnancy Component:**

1. To identify the behavioral, attitudinal or other factor that affect pregnant women's compliance with iron supplementation.
2. To identify sources of information/advice about pregnancy within the community and influentials who could influence compliance with iron supplementation.
3. To identify current channels or communication/media preferences for use in dissemination of iron-related IEC.
4. To identify current channels of distribution of iron tablets to pregnant women.
5. To determine the acceptability of several proposed alternative iron tablet delivery systems in the community, to both pregnant women and health providers.

6. To explore the level of awareness, use and attitudes toward iron in pregnancy of both women and providers of maternal health care (formal and non formal).
7. To conduct concept testing on limited basis to get feedback from a small sample of pregnant women on iron tablet acceptability.

## **Formative Research Topic Areas**

### **Pregnant Women**

1. Attitude toward pregnancy in general, and this specific pregnancy
  - planned pregnancy?
  - aspiration for pregnancy outcome, both for baby and maternal
2. Ethno medical view of pregnancy
  - awareness of relationship between blood and health
  - beliefs regarding effects of low bloods
  - blood loss on health
  - awareness of anemia as an illness (symptoms, sequelae such as hemorrhage, low birthweight) etiology
  - perceived susceptibility
  - severity
  - personal experience with anemia or sequelae
3. Perceived value of preventive action during pregnancy
  - self care practices
  - use of antenatal care
  - early care for self detected problems of pregnancy
4. Perceived value of iron supplementation during pregnancy
  - need for and effectiveness of iron tablets
  - personal experiences with iron supplementation (use, non-use, duration of use)
  - side effects
  - consequences of use/non-use of iron tablets
  - other traditional or self care for treatment of anemia in pregnancy
  - compatibility of iron supplementation with traditional ethno medical practices during pregnancy
5. Circumferences of iron supplementation (prior experience)
  - attitude toward pill-taking (size, color, taste, mode of delivery (tab, cap, tonic, injection))
  - dose

- timing
  - frequency
  - duration
  - with meals
  - how iron tabs obtained
  - from whom
  - how often
  - level of health education provided with iron tablets (treatment, instructions, comprehension/recall, adherence to instructions/education)
  - opinion of source of iron tablets (*dukun bayi, bidan, kader, others*)
6. Barriers to use
- difficulties in access to antenatal care
  - cost transport
  - distance no tablets at *posyandu* (health post)
  - not given tablets
  - unaware of need for tablets
  - cost of tablets
  - given but not instructed in use
7. Source of information on iron/anemia during pregnancy
8. Media preferences/communication channels
9. Iron tablets distribution (concept testing)

## **THE INTERVIEW INSTRUMENTS**

## DRAFT QUESTION GUIDE FOR IN-DEPTH INTERVIEWS WITH PREGNANT WOMEN

### IDENTIFICATION

1. Name:
2. Age:
3. Current month of pregnancy: (probably at least 6 months)
4. Date of Last Birth:
5. Parity: 0 1 2 3 4 or more
6. Previous Pregnancy Outcome(s):
  - normal
  - maternal problem \_\_\_\_\_
  - neonatal problem \_\_\_\_\_
7. Level of education/literacy:
8. Iron tablet use:
  - never used
  - used in previous pregnancy
  - used this pregnancy
  - # of tablets given in pregnancy or previous pregnancy
  - # of tablets taken in pregnancy or previous pregnancy
9. Antennal care use:
  - never
  - visits this pregnancy 0 1 2 3 4 5 6 or more
  - month of pregnancy at time of ANC visit \_\_\_\_\_
  - reason for visit (s)
10. Distance from:
  - *Posyandu* (health post)
  - *Puskesmas* (health center)
  - *Kader* (community volunteer)
  - *Dukun bayi* (TBA)
  - Hospital

## INTRODUCTION

1. We would like to ask you some questions about your pregnancy (explain briefly)  
Was this pregnancy (or most recent pregnancy) planned?  
Does having a baby now cause any problems for you?  
What kind?  
Overall, how have you been feeling during this (or previous) pregnancy?  
What thought/hopes/fears do you have about your own health during pregnancy and delivery?  
For the family during this pregnancy?

Do you notice any changes in your health during this pregnancy? What changes?

Have you had to change your daily activities in any way because of your health during this pregnancy? How?

Are you doing anything different since you became pregnant? What? Any traditional ceremonies?

Are you taking any medicines (*obat*), jamu, traditional remedies or other things especially for your pregnancy? What? Why?  
What about your diet? Any changes in your diet? What changes? Why?

- II. Do you know of any problems which pregnant women can have with their health?  
Where do you usually go for advice about these problems?  
What advice did you receive there?

Do you know of any problems in pregnancy caused by blood, low blood, bleeding?

If yes, what is this called? What are the symptoms?

If necessary, prompt tired, weak, dizzy, rapid heartbeat, headache

- tired
- weak
- dizzy
- rapid heartbeat
- headache

Do you know of any problems a pregnant women can have if she has anemia (use local name for anemia here if women has given you one)? What?

Do you know of any problems pregnant women can have if they lose blood during child birth?

What?

Has this ever happened to you or anyone you know?

What do you think causes this to happen?

Is this a serious problem? Why or why not?

Is there anything you can do to prevent this from happening? What?

Do you know anything you can do or place to go to cure these problems?

- self care
- *dukun bayi*
- household care
- *posyandu*
- take iron pills
- improve diet
- other

Have you ever done any of these things?

- what was the result?
- condition improved
- no change or condition worsens

### III. Some pregnant women take iron tablets during their pregnancy.

Have you ever heard of pregnant women taking iron tablets?

Do you know why they take them?

Where did you hear about them?

Has anyone you know taken them?

Have you taken them?

When did you first take iron?

- this pregnancy 6 7 8 9 month
- before 6 months
- previous pregnancy
- other

When is the last time you took iron tablet?

How many did you take?

Did you stop before you took all the tablets you were given? Why?

Were there any problems which you had because of the iron tablets?

What type of problems?

If no response, prompt

- constipation
- diarrhea
- change in color/consistency of stool
- vomiting
- nausea



- abdominal pain
- dizzy
- bad taste
- heartburn

(we will also add some conditions which are not iron related to check accurate)

Did you take the tablets with meals?

When during the day did you take them?

How many times per day?

For how many days, weeks, months?

Why did you stop?

IV. I am going to ask you a few question about the tablets:

Is there anything about the tablet which you do not like, or which makes it difficult for you to continue taking the tablet?

Probe:

- Size
- Taste
- difficulty swallowing
- color

Would you find it easier to take iron in some other form?

Probe:

- jamu/tonic
- injection
- other

Did you notice any change in your health or how you were feeling after taking the iron tablets?

What?

How long were you taking the tablets before you noticed these changes?

Where did you get the iron tablets?

Who gave them to you?

How often do you have to go back and get more?

Is this difficult for you?

Do you usually return to get more tablets?

Can you remember what the person who gave you the iron tablets told you about how to use them?

Probe:

- When to take
- How long to take
- How many to take
- What to do if side effects occur
- Reason for iron pills
- When to return for more tablets
- Explain side effects
- Other

Did you follow these instructions? Why/ Why Not?

Did any one else give you advise about iron/anemia in pregnancy? Who?

- *bidan*/nurse
- *kader*
- husband
- *dukun bayi*
- mother
- community leader
- mother in law
- female friend
- other

What did they tell you?

- V. Did you ever hear about iron on the radio? TV? What did the messages say? Have you seen posters about iron in pregnancy? At the *posyandu*? Where? What did the posters say? Can you think of any other way that would be easier for you to get iron tablets than the way you are getting them now? Which way? Do you have any problems getting to the *posyandu* or other source of iron tabs? What problems? Can you think about any other problems with iron tablets other than those we have already discussed? Any other comments? Do you have any iron tablets in the house now? Can you show them to me?
- type
  - amount
  - where stored
- Do you have any other tablets or medicines in the house? *Jamu*, tonics or other *obat*? Can I see them?

VI. Media Preference/Channels of Communication

Do you listen to the radio?

- How often?
- What stations?
- What times?
- What are your favorite programs?

Do you usually do other things while you are listening to radio, or only listen? Who listens with you?

Do you have a TV? Do your neighbors have a TV? How often do you watch TV? What stations? What programs? What times? Who watches with you?

How often do you read newspapers, magazines?

Which ones?

Where would you prefer to learn more about iron tablets?

When you go out of the house each day, where do you usually go? How often do you go each week?

- market (weekly market or smaller daily market or food stalls)
- mosque

- cinema
- *kader*
- Other

How often do you go to the *posyandu*? To *puskesmas*? To private clinic or private doctor? To *dukun bayi*? Other

Is this different than before you were pregnant? How?

## **TRIALS OF IMPROVED PRACTICES (TIPS)**

### **Introduction**

The Trials of Improved Practices (TIPs) methodology, based on product testing in marketing research, was developed by The Manoff Group in Washington, D.C. to test infant feeding recommendations and is used as the key methodology for developing the IMCI Food Box and outlined in more detail in *Designing by Dialogue*<sup>1</sup>. Historically nutritionists have set recommendations on how to feed young children based on nutritional requirements of children and have rarely consulted caregivers as to whether or not can follow the recommendations. Often these recommendations are not practical for the lifestyle or culture of caregivers but with some simple modifications can be made more feasible for caregivers to use. TIPs asks the caregiver to follow recommendations and then consults with them about their ability to follow these recommendations, if they would continue new practices, how the practice could be modified to suit the caregiver's home situation and culture, etc.

The TIPs was adapted for iron pill-taking to determine what women's experiences were with taking iron (positive and negative), if they would continue to take iron for a longer period of time (i.e., throughout their pregnancy), if they would recommend iron to other women, etc. At the time of the Indramayu Project most people working in the science of anemia felt that programs were not working because women experience side effects shortly after taking iron supplements and as a result stopped taking them. The TIPs methodology was important because it showed that not all women experience side effects. Those that experienced side effects did not stop taking iron, particularly if they were counseled about how to manage them. However, there were other barriers to taking iron tablets for an extended period of time and TIPs helps identify these barriers. It also helps identify the factors that facilitate women taking iron.

### **Sample population for TIPs:**

- 10-20 Pregnant women without experience with taking iron pills
- These women should be given enough pills for a 15-20 day period and then interviewed at the end of that period

### **Counseling messages when women are given iron for TIPs:**

- Why to take (e.g., make you and your baby health)
- How often to take (e.g., once per day)
- When to take (between meals or before going to bed with water or fruit juice).  
Note this maximizes absorption
- That side effects (give examples: black stools, gastro-intestinal problems) might occur but that they are not serious and should subside in a few days

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<sup>1</sup> Dickin, Kate, Marcia Griffiths, and Ellen Piwoz (1997). *Designing by Dialogue: A Program Planners' Guide to Consultative Research for Improving Young Child Feeding*. Prepared for the HHRAA Project.

- What to do if side effects do not subside: split the pill in half and take one half in the morning and one half in the evening
- If side effects still don't subside: take with meals

### **TIPs Interview after 15-20 days of taking iron**

Greet the woman.

How have you been feeling since the last time I was here and left the iron tablets for you?

Did you take the iron tablets I left with you? Why did you decide to take it? Why not?

How many tablets did you take? How often? At what time of day?

Do you have any tablets remaining? Can I see them? (Count remaining tablets, and notice where she kept the tablets).

Did you take the tablets with any kind of drink or foods? Which?

Were there any things about the iron tablet which you did not like? (PROBE size, color, swallowing, taste, smell, hates pills, other)

Did you notice any changes in how you feel while taking the tablets? What kind of changes? (PROBE benefits, side effects, note the exact words used by women to describe)

Do you know why it is important for pregnant women to take iron tablets?

What is your opinion now that you have tried them yourself? (exact words)

Were there any things that you liked about the pills? (if not mentioned above. PROBE for specific words, concepts)

Would you be willing to continue to take iron tablets for the rest of your pregnancy? Why, why not?

Would you go to the *posyandu* (health post) for more iron tablets? To *puskesmas* (health center)? To the *dukun bayi* (TBA)? Some other place? Why, why not?

If iron tablets were available to buy, would you buy them? How much would you pay for them? What size package would you prefer? A package of 10 pills? A package of 30 pills? A package of all the pills you need in pregnancy?

Can you think of any difficulties you might face if you wanted to continue taking the tablets? What would make it easier for you?

Did you remember to take one tablet each day? If yes, how did you remember. If no, why not? Where did you keep your tablets?

Would you recommend these iron tables to some of your friends who are pregnant? Why or why not?

What would you tell them to convince them to take the tablets? (if any response, try to get exact words)

Did anyone in your family or any friends notice that you were taking these tablets? Did they make any comments? What comments?

Are you/have you taken any other pills, *obat*, *jamu*, other while pregnant? Why?

You will be giving birth soon. Have you thought about your children?

Have you/will you make any plans for it? What plans?

What are you hoping most about the delivery (PROBE safe delivery, easy delivery, short labor, strength for delivery, no problems, etc. Try to note exact words.)

Would you like me to leave some more iron tablets with you today? Why, why not?



**DRAFT QUESTION GUIDE FOR IN-DEPTH INTERVIEWS FOR DUKUN BAYI (TBA) AND KADER (COMMUNITY VOLUNTEER)**

How many pregnant women do you usually care for/visit each month? How many are you caring for/visiting now?

Are there many pregnant women in your area who you do not care for? How many?

Are there some common problems which pregnant women usually ask your advice about? What kind of problems?

What advice do you usually give them?

Any other things that pregnant women talk to you about?

Who else do you think pregnant women talk to about their health during pregnancy?

Have you ever heard of a problem in pregnant women called *kurang darah* (local term for anemia)?

Can you tell me what it is? What causes it? Is there any way to prevent it?

Do you know if a pregnant woman, or any woman, has anemia?

Do you know of any problems to health which can be caused by anemia in pregnant women? Which problems?

What do you advise pregnant women to do if you think she has anemia?

Do most women follow this advice?

Are there any other things you tell them to do?

Have you heard of taking iron tablets during pregnancy? (if this was not part of the answer to previous question)

Do you know why pregnant women take them?

Do you ever tell women to take iron tablets?

If so, where do you tell them to get the tablets?

Have you ever taken iron tablets yourself? When? How long?

Did you notice any change in your health (how you felt) after taking the tablets?



**GUIDE FOR DUKUN BAYI (TBA) AND KADER (COMMUNITY WORKER)  
CON'T**

How do most pregnant women you know get iron tablets now?

Do they have problems getting the tablets? What problems?

Would you be willing to distribute iron tablets to pregnant women in your area?

Do you think it would be possible for pregnant women to come to your house to receive iron tablets?

What about someone delivering iron tablets to the home of each pregnant woman? Who do you think could do that? Would you be willing to deliver iron tablets to the homes of pregnant women in your area? Why? Why not?

Can you think of any other way that pregnant women could receive iron tablets?

Any other things you would like to discuss?

## **DRAFT QUESTION GUIDE FOR IN-DEPTH INTERVIEWS FOR BIDAN (MIDWIFE) AND DOCTOR**

How common is anemia in pregnant women in this area? About what percentage of all the pregnant women you care for have anemia?

How do you usually determine that a woman is anemic? Any reason why you use this method? Any problems with this method?

How serious do you think anemia is as a problem for pregnant women? Are there other problems that you usually see in pregnant women which you think are more serious than anemia? Which?

Are there programs for prevention or treatment of anemia in this area? Can you describe them?

In your opinion, are these program effective? Why or why not?

What could you suggest to improve the effectiveness of the current program?

When you give iron tablets to pregnant women, do you give them any advice? On how to take the tablets? On why it is necessary to take the tablets? On possible side effects? Anything else you usually tell them?

Do you think the women take the tablets you give them? Why or why not? Do women usually give you any reason why they are not taking the iron tablets? Do many women return for resupply of the iron tablets throughout the pregnancy?

Do you know of any difficulties that may prevent pregnant women from obtaining iron tablets?

Do you know of any other medicines, tonics, jamu or other traditional medicines which pregnant women commonly take? Are any of these used for anemia?

How do pregnant women receive iron tablets now? How do those women who do not attend *posyandu* or *puskesmas* obtain iron tablets?

Can you suggest any other ways or locations which might be used to distribute iron tablets to pregnant women? Who might be appropriate person to distribute iron tablets at places other than health facilities?

Any other things which might make it easier for women to receive and take iron tablets? Can you think of any benefits or problems that might occur if iron tablets were distributed in the community, rather than only at health facilities?

## **DRAFT QUESTION GUIDE FOR IN-DEPTH INTERVIEWS FOR HUSBANDS OR ELDER WOMEN**

### **INTRO/GREETING**

Overall, how would you say your wife (daughter or daughter-in-law) has been feeling during this current pregnancy?

Is it different than her other pregnancies? (if this is not her first) How?

Does your wife (daughter or daughter-in-law) ever tell you about problems she is having during her pregnancy? What problems?

What advice do you give her?

Is there someone else you think is good for pregnant women to talk with when they have these problems? Who? Do you send your wife (daughter or daughter-in-law) there? Does she go?

Do you think pregnant women should talk to/receive care from someone even if they do not have problems? Why, why not? Who?

Do you know of any problems in pregnancy caused by blood/low blood/bleeding? How would you know if your wife (daughter or daughter-in-law) had this problem?

Have you heard of a problem called anemia? Can you tell me anything about it?

Has this happened to anyone you know? Is there anything that can be done to prevent this from happening? What can cure it?

Has your wife (daughter or daughter-in-law) or anyone you know ever done these things? What happened?

Some pregnant women take iron tablets during their pregnancy. Have you ever heard of this?

Do you know why they take iron tablets? Where did you hear about it?

Has your wife (daughter or daughter-in-law) or any woman you know taken them?

Do you know where they got the tablets?

How long did she take them? Why did she stop?

Did your wife (daughter or daughter-in-law) tell you anything about the tablets while she was taking them? What?

Did you notice any change in her health while or after she was taking the iron tablets? What changes?

Do you think it is necessary for pregnant women to take iron? Why, why not?

Do you know of any other special things your wife (daughter or daughter-in-law) or other women do or take when they are pregnant? What things? Do you think these things are necessary?

Before we started the talking did you ever hear about iron tablest for pregnant women? Where? On radio? TV? At the *posyandu* (health post) or *puskesmas* (health center)?

How often do you go to the *posyandu* (health post)? Why? How often do you go to the *puskesmas* (health center)? Why?

How often does your wife (daughter or daughter-in-law) go to *posyandu*? Why? *Puskesmas*? Why?

Is there a radio in your house?

How often do you listen? What station? What programs? What times?

Do you have a TV? Do you ever see TV? Where how often? What programs? What times?

How often do you read newspapers, magazines? Which ones?

Do you attend market? Mosque, etc. When, How often ?

Ref.: A:IRON RESEARCH/mbd

**APPENDIX**

**Sample Matrix for Analysis of TIPs Research Results**

**EXAMPLE OF A MATRIX FOR ORGANIZING INFORMATION FOR TIPS  
WITH PREGNANT WOMEN**

<p>1. How have you been feeling since the last time I was here and left the iron tablets for you?</p>	<p>1. Kamirah, 22, 8 months, 0 x, no education When she took it in the first time, she complained to her family that she felt weakness, always want to sleep, can't do anything. .... Had constipation..." So she had no feeling at all except constipation.</p> <p>2. Dani, 24, 5 months, 6x, no education '.... I feel healthy, all of my body is right('enak'), and my pregnancy feels good, but I have only constipation.."</p> <p>3. Taryati, 18, 5 months, 0x, SD graduate "I feel fit (enak') and now I like to eat very much..."</p> <p>4. Caskiah, 27, 6 months, 0x, no education. "I worried why pregnant women given iron pills by strange/unknown person, so I feel fear if anything happens to me..."</p> <p>5. Enih, 20, 4 months, 0x. SD graduate "I feel different after taking it (pill), so because of that I like to eat lots and can sleep well.."</p>
<p>2. Did you take iron tablets I left you? Why did you decide to take it? Why not?</p>	<p>1. Yes = 5 - Because of order</p>
<p>3. How many tablets did you take? How often? At what time of day?</p>	<p>1. "... I take it one each day and usually I take it after lunch" (Kamirah took 10 pills)</p> <p>2. "I take one everyday after eating in the afternoon..." (Taryati took 10 pills)</p> <p>3. "...I take one each day in the morning"(Dani took 11 pills)</p> <p>4. "I took only 8 pills until now because I forget, " "When I have breakfast half, I take it with water and continue the breakfast, but sometimes I take it when I have lunch" (Enih)</p>

	5. "...I took it only 9 and then stopped, because of smell and taste. It made me nausea, headache...."
4. Do you have any tablets remaining? Can I see them?	1. Yes = 4 2. No = 1 because missing in the drug place (she sells any kinds medicines). She thought her sister threw it away because she didn't know what pills they are. Maybe her sister thought the pills aren't useful.
5. Did take the tablets with any kind of drink or food? Which?	1. Just water/warm water =5 Because of order
6. Were there anything about iron tablet which you did not like?	1. "...fishy smell, but it's okay because the smell or bad taste will not be long and the pill easily to take with warm water" (Dani) 2. "It smells fishy and like iron metal taste... I don't like it" (Taryati) 3. "The smell is fishy and make nausea.." (Kamirah) 4. "It smells fishy and the taste like fish" (Enih) 5. "It smells fishy .. I don't like it"
7. Did you notice any changes in how you feel while taking the tablet? What kind of changes?	1. "Before taking the pills I felt weakness, but not I don't feel it" (Kamirah) 2. "...my body felt stiff ('pegal-pegal') after taking it and easily tired when just took a walk.." ( Taryati) 3. Isn't weak anymore after takin it. Before that she often got headache or weakness. (Enih) 4. After taking the pills, she felt nausea, headache and always wanted to sleep. She felt her body more heavy. (Caskiah) 5. She felt fit, no part of body pained again (Dani)
8. Do you know why it is important for pregnant women to take iron tablet?	1. Don't know (without giving reason) =2 2. Don't know because it's the first pregnancy for her. 3. Don't know because it's just first in taking iron tablet.

	4. Yes, for healthy, and the blood become increase.
9. What do you think now that you have tried them yourself?	<ol style="list-style-type: none"> <li>1. She will continue if she receive without pay.</li> <li>2. She felt better, not vomiting or headache anymore.</li> <li>3. Don't want to continue = 2</li> <li>4. She felt that taking iron tablet is same as take other pills. She felt nausea after taking it.</li> </ol>
10. Were there any things that you liked about the pill?	<ol style="list-style-type: none"> <li>1. "The pill is small, so easily to swallow..." (Caskiah)</li> <li>2. "After taking it I felt fit" (Dani)</li> <li>3. "...I want to eat more and more.." (Taryati)</li> <li>4. "I like it because it's small, make healthy and my body wasn't weak anymore"</li> <li>5. She didn't know. (Kamirah)</li> </ol>
11. Would you be willing to continue to take iron tablets for the rest of your pregnancy? Why? Why not?	<ol style="list-style-type: none"> <li>1. "Yes, I will if I am permitted and the pill provided for increasing blood" (Enih)</li> <li>2. I will if you give me more (free)" (Dani)</li> <li>3. "Yes, I will so that I eat very much and make healthy..." (Taryati)</li> <li>4. "No, I won't because it smells fishy and make me nausea and constipation" (Kamirah)</li> <li>5. No, It's smell fishy and make nausea. (Caskiah)</li> </ol>
12. Would you go to Posyandu for more iron tablets?	<ol style="list-style-type: none"> <li>1. No, because she never goes to Posyandu. She told taking the pill make nausea. (Caskiah)</li> <li>2. Yes, but she went there (twice) she didn't receive iron tablets because the Posyandu was over. (Taryati)</li> <li>3. Yes, so that her baby healthy. (Enih)</li> <li>4. Yes, if the pills free. (Dani)</li> <li>5. If there is Posyandu. (Kamirah)</li> </ol>
To Puskesmas?	<ol style="list-style-type: none"> <li>1. Prefer to posyandu, because it's nearer.</li> <li>2. Enih: "It's better go to Puskesmas because there are various medicines." (When she went to Puskesmas twice, she just received vitamins, she never</li> </ol>



	<p>get iron tablets because the pregnancy isn't right time to give the iron tablets)</p> <ol style="list-style-type: none"> <li>3. No, it's far away.</li> <li>4. If she had money, it's better go to Puskesmas to check he pregnancy all at once</li> <li>5. No, it's far and didn't want to continue.</li> </ol>
To dukun bayi?	<ol style="list-style-type: none"> <li>1. "No, because I don't want to take it anymore"</li> <li>2. "It's better go to dukun bayi, because it's near"</li> <li>3. "I prefer to dukun bayi if there are iron tablets"</li> <li>4. "No, I fear the pill is false (counterfeit) but if it comes from Puskesmas I'll take there"</li> <li>5. "... dukun bayi is cheaper"</li> </ol>
13. Can you think of any difficulties you might face if you wanted to continue taking the tablets? What would make it easier for you?	<ol style="list-style-type: none"> <li>1. "... smell fishy.."</li> <li>2. Nothing, because it's received from interviewer. (she hope each month given by us some pills)</li> <li>3. Don't know because do not want to continue taking it.</li> <li>4. "...it's so far, I want it near so I am not tired"</li> <li>5. "Nothing, wherever isn't problem if I get it free"</li> </ol>
14. Did you remember to take one tablet each day? If yes, how did you remember. If no, why not? Where did you keep your tablets?	<ol style="list-style-type: none"> <li>1. "Yes, I did because you asked me take these tablets each day." She kept in the book place (Dani)</li> <li>2. Yes, because she wanted healthy. She kept in the cupboard. (Enih)</li> <li>3. Yes, because I usually take contraception pill before pregnant, so I remember taking iron pills." (Caskiah)</li> <li>4. Not everyday, because she often forgot to take it. "...while eating I remember, but sometimes after eating I worked soon so I forgot" (Taryati)</li> <li>5. "Yes, I remember because my family (Her aunt) told me to take it.." (Kamirah)</li> </ol>

<p>15. Would you recommend these iron tablets to some of your friends who are pregnant? Why or why not?</p>	<ol style="list-style-type: none"> <li>1. No, because she doesn't associate with other pregnant women. = 2</li> <li>2. Ye, she has already recommended to her friends but they didn't want to take iron tablets because they worried their faces turned black, when urinate felt pain/hurt and they also worried their blood turned black.</li> <li>3. Yes, she has already recommended to her friends who are pregnant but they didn't want to take it.</li> <li>4. No, because she knew that her friends also received the tablets.</li> </ol>
<p>16. What would you tell them to convince them to take the tablets?</p>	<ol style="list-style-type: none"> <li>1. No = 3</li> <li>2. "You often receive the pills, don't you? If you take it so that you will like to eat very much and can sleep well" (But her friend didn't want to because she's afraid the pill attached on her baby).</li> <li>3. "It's okay if your faces turned black, but the important thing is that the iron tablets make your blood increase..." But her friend didn't want to except when her dark stool wasn't black anymore, she continue taking the pills).</li> </ol>
<p>17. Did anyone in your family or any friend notice that you were taking these tablets? Did they make any comment? What comments?</p>	<ol style="list-style-type: none"> <li>1. Husband, only asked what the pill and from whom. (Enih and Caskiah)</li> <li>2. Husband. He told to respondent to take the pills all. (Taryati)</li> <li>3. Her aunt. She told to respondent to take the pill everyday. (Kamirah)</li> <li>4. Husband, "If you are given the pills, take it until none..." (Dani)</li> </ol>
<p>18. Are you/have you taken any other pills, obat, jamu, other while pregnant? Why?</p>	<ol style="list-style-type: none"> <li>1. Jamu gendong for treating nausea.</li> <li>2. Jamu hamil muda (1-6 months) merk "Leo"</li> <li>3. Javanese Jamu for old pregnancy Sorok II for healthy.</li> <li>4. Jamu sorok II (for early pregnancy/hamil muda), for body fit.</li> <li>5. never taking other pill/jamu because she never gets sick during pregnancy.</li> </ol>

<p>19. You will giving birth soon. Have you thought about your childbirth? Have you/will you made any plans for it? What plans?</p>	<ol style="list-style-type: none"> <li>1. After probe: She planned calling dukun or helped by dukun bayi's house is so far but she is experienced. There is also another dukun bayi whose house is near but respondent or her friends don't want to be helped by her because the dukun often calls bidan to refer the women when she had difficulties even little difficulty.</li> <li>2. Not yet. Later when the baby giving birth.</li> <li>3. No have any plans because the pregnancy not 9 months yet.</li> <li>4. Yes, call dukun bayi Tawi (near from her house)</li> <li>5. Not yet, still long time to giving birth.</li> </ol>
<p>20. What are you hoping most about the delivery?</p>	<ol style="list-style-type: none"> <li>1. "...I am already too old to giving delivery so I hope I can have easy delivery.."(Dani)</li> <li>2. Want short delivery, no pain and safe.</li> <li>3. Safe for mother and baby.</li> <li>4. Want to easily outcome and safe delivery.</li> <li>5. Dafe and easy delivery. After delivery want to use contraception (KB suntik).</li> </ol>
<p>21. Would you like me to leave some more iron tablets with you today? Why, why not?</p>	<ol style="list-style-type: none"> <li>1. "Yes, because it's easy to get and after taking it I feel better/fit..."</li> <li>2. "Yes, I feel fit, want to eat much and want to be healthy"</li> <li>3. "Yes, because I received without pay (free) so if you give me I'll take it"</li> <li>4. "No, because it makes me nausea...."</li> <li>5. "No, because it makes nausea and constipation" (She is lazy to go back again and again to toilet because her constipation.</li> </ol>

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