Transparency for Development (T4D) Program

Beneficiary Scorecard Survey (INDONESIA)

August 2015

This survey was developed for the T4D intervention in collaboration with Pattiro and SurveyMeter (Indonesia).



| T4D - BENEFICIARY SURVEY | | | | | | |
|---|---|--------------|---------------------------------------|---------------------------|--|--|
| | | CONFIDENTIAL | Respondent is someone who has given b | oirth in the past 2 years | | |
| (PLEASE READ THE FOLLLOWING PARAGRAPH TO GET RESPONDENT'S CONSENT) Hello. My name is I am from PATTIRO and I will be staying for a couple months in this village to motivate community to take actions to improve MNH services in this village. In order to do that, I need to know what kind of challenges that are faced by women in accessing MNH services. I would like to ask you several questions about your experience with MNH and, if applicable, in accessing these services. The survey will take about 20 minutes or less. Your name will not be used and your answer will be combined with the answers from other women in this village and only I will know the responses that you give. You are not required to participate in this survey, but I am hoping that you will, because your answers will be very useful and will give community members a thorough understanding of the experiences of many mothers in this village. If you agree to participate, you also may choose not to answer questions that you are not comfortable answering. Please let me know, so I can move on to the next question. You may also stop this interview at any time. | | | | | | |
| May I continue? 1. Yes → 0 COV1 Respondent's name | CONTINUE INTERVIEW 3. No (RI | EASON: |) → END INTERVIEW | | | |
| COV2 ORIGINAL OR REPLACEN RESPONDENT | 1. Original Respondent 3. Replacement Respondent: b. REPLACEMENT RANDOM # LLL c. Reason for replacement: 01. Not the target respondent (most recent child is older than 2 years old, etc) 02. Interview with not respondent could not be finished (unsuitable time for interview, etc) 03. Target respondent not at home/ was away 04. Target respondent refused to be interviewed 96.Other,specify | | | | | |
| NUMVIS. NUMBER OF VISIT: | NUMVIS. NUMBER OF VISIT: | | | | | |
| | a. First Visit | b. Second | /isit c. Th | nird visit | | |
| DATE | | | | | | |
| START TIME | | 1 1 1.1 | | 1.1 1 1 | | |

| END TIME | | | |
|----------|---|---|---|
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SECTION A. CONFIRMATION

| A01 | Have you given birth in the last 24 months? From DD/MM/YY until DD/MM/YY (one day before interview date) I'm sorry if this question causes you sadness, but please answer "yes" even if the child died or was still born. | Yes → CONTINUE INTERVIEW No → END INTERVIEW |
|-----|---|--|
| A02 | Date of birth and name of most recent child (RECORD "SB" IF CHILD IS STILLBORN FOR THE NAME OF CHILD) | a. LLL / LLLLL DATE / MONTH / YEAR b. Name of child: |
| A03 | Did you live in this village when you gave birth to your most recent child? | Yes → CONTINUE INTERVIEW No → END INTERVIEW |

SECTION B. LOCATION

Now I'd like to ask some questions about the location of your house and your contact information.

| B01. | Provice | |
|------|---|---|
| B02. | Ditrict | |
| В03. | Sub-district | |
| B04. | Village | |
| во5. | Sub-village/RT/RW | a. Sub-village : b. RW : c. RT : |
| во6. | Complete address (WRITE THE NAME OF STREET, ALLEY AND HOUSE NUMBER, RT/RW, SUB-VILLAGE, VILLAGE) | |
| В07. | Location Description (RECORD LANDMARK/BULDING NEARBY THE RESPONDENT'S HOUSE/LOCATED ON THE SAME STREET SUCH AS SCHOOL, MOSQUE, CHURCH OR OTHER BUILDING) | |
| B08. | Telephone | A. Telephone : L. L. L. L. L. L. L. W. NOT APPLICABLE Y. DON'T KNOW B. Mobile phone : L. |

SECTION C. BIRTH PREPAREDNESS PLAN

Now I'd like to ask you about your experience preparing for the delivery of your most recent child.

| C01 | When you were pregnant with your most recent child, did you meet with any health attendant (midwife, nurse, doctor) and talk about the preparation for your delivery? | 1. Yes → C03 3. No | |
|-----|---|--|--|
| C02 | Why not? READ ANSWER CHOICES, MULTIPLE ANSWERS | A. I did not think it is important → SECTION D B. I did not know it is important/ No one has told me to make such plans → SECTION D C. My family was not supportive / no one to accompany me to talk to the midwife → SECTION D D. I prefer to talk with the baby dukun → SECTION D E. It is too costly to see the midwife/go to facility to be checked → SECTION D F. I did not think the midwife/other provider would be helpful → SECTION D V. Other, specify → SECTION D | |
| C03 | During the talk, did you make plans about the birth attendant you planned to use for delivery? | 1. Yes 3. No | |
| C04 | During the talk, did you make plans about the place of delivery you planned to use for delivery? | 1. Yes 3. No | |
| C05 | During the talk, did you make plans for saving money to pay for delivery or to cover the costs in the case of emergency during delivery? | 1. Yes 3. No | |
| C06 | During the talk, did you make plans for transportation to the place of delivery? | Yes No Not Applicable (i.e. the respondent lives close by to the health facility, or the respondent decided to deliver at home) | |
| C07 | During the talk, did you identify potential blood donor in the case of emergency during your delivery? | 1. Yes 3. No | |
| C08 | During the talk, did you identify a person to care for your other children for when you are in labor? | 1. Yes 3. No | |

| | | 5. | Not Applicable (i.e. the respondent has no other childre | n in her care) |
|------|---|----------|--|----------------|
| COX. | INTERVIEWER CHECK C03-C09: COUNT THE "YES" ANSWERS (OPTION 1) | <u> </u> | | |
| NUME | BER: | | | |
| | | | | |

SECTION D. Birth in Facility

Now I'd like to ask you about the place of birth for your most recent child

| D01 | For your most recent child, where did you give birth? | Health Facility (Puskesmas, Hospital, Pustu, Poskesdes/Polindes, Clinic) → SECTION E Others (home, midwife's house, baby dukun's house) |
|-----|---|--|
| D02 | Why did you choose to give birth at [location] instead of in a health facility? READ ANSWER CHOICES, MULTIPLE ANSWERS | A. I did not think it is important to give birth in a facility B. I did not know it is important/ No one has told me about the importance of birth in facility C. My family encouraged me to give birth at home/ somewhere else D. I prefer to give birth with baby dukun at home E. It is costly to give birth in a facility V. Other, specify |

SECTION E. POST NATAL CARE FOR MOTHER AND BABY

Now I'd like to talk to you about checks on your and your baby's health after delivery. These checks could have occurred at your home, at a facility or elsewhere.

| E01 | Within the first week (7 days) after you gave birth to your most recent child, did | 1. Yes |
|-----|--|--|
| | any medical personnel (doctor, nurse, midwife) check on your health ? | 3. No → E3 |
| E02 | Please only think about any checks that happened within the first week (7 days) | A. Checking your body for danger signs (e.g bleeding) → E4 |
| | after your delivery. Did the check(s) (E01) include? | B. Checking your temperature → E4 |
| | | C. Checking your breasts → E4 |
| | READ ANSWER CHOICES, | D. Providing you counsel on nutrition -> E4 |
| | MULTIPLE ANSWERS | E. Providing you counsel on danger signs after delivery (for mother and baby) → E4 |
| | | F. Providing you counsel on home care for baby → E4 |
| | | G. Giving you vitamin A and other supplements → E4 |
| | | |
| E03 | Why did you not have a check with a health professional within 7 days of your | A. Did not think it is important to be checked (e.g: I was healthy, etc) |
| | delivery? | B. Did not know it is important /what checks are important |
| | | C. No one was able to accompany me to get these checks (no family support) |
| | READ ANSWER CHOICES, | D. I prefer to be checked with baby dukun |
| | MULTIPLE ANSWERS | E. It is too costly to see the midwife/go to facility to be checked |
| | | V. Other, specify |
| E04 | Within the first week (7 days) after you gave birth to your most recent child, did | 1. Yes |
| | any medical personnel (doctor, nurse, midwife) check on your baby's health ? | 3. No → E6 |
| E05 | Did the check(s) (E04) include? | A. Checking the baby's body for danger signs → SECTION F |
| | | B. Weighing the baby → SECTION F |
| | READ ANSWER CHOICES, | C. Checking baby's temperature → SECTION F |
| | MULTIPLE ANSWERS | D. Checking baby's eyes → SECTION F |
| | | E. Checking baby's skin → SECTION F |
| | | F. Checking baby's umbilical cord → SECTION F |
| | | G. Checking baby is able to breastfeed → SECTION F |
| | | H. Giving the baby immunizations (like hepatitis B) → SECTION F |

| E06 | Why did your baby not have a check from a health professional within 7 days of | A. Did not think it is important to be checked (e.g. My baby was healthy, etc) |
|-----|---|--|
| | your delivery? | B. Did not know it is important /what checks are important |
| | | C. No one was able to accompany me to get these checks (no family support) |
| | READ ANSWER CHOICES, | D. I prefer to be checked with baby dukun |
| | MULTIPLE ANSWERS | E. It is too costly to see the midwife/go to facility to be checked |
| | | V. Other, specify |

| EOX. INTERVIEWER CHECK <u>E02</u> : COUNT HOW MANY CIRCLED ANSWERS NUMBER: | |
|---|--|
| EOY. INTERVIEWER CHECK <u>E05:</u> COUNT HOW MANY CIRCLED ANSWERS NUMBER: | |

SECTION F. GENERAL QUESTIONS ABOUT HEALTH SERVICE QUALITY AND ACCESS

Now I'd like to ask about your opinion about the village midwife, and the Puskesmas

| F01 | Do you ever felt disrespected by the current village midwife or heard from others that the midwife is disrespectful to patients? | | Yes No |
|-----|---|----|-----------|
| | By disrespect, I mean she was not friendly, she used strong or offensive language, she did not show attention/care, etc. | | |
| F02 | Do you ever experience any difficulty in trying to reach the village midwife or heard from others that the midwife is too difficult to reach? | 1. | Yes No |
| | By difficulty, I mean maybe she was not at her house/facility during open hours, she | | |

| | repeatedly canceled or rescheduled posyandu, she did not answer her phone, or that you/other patients had to wait too long to see her. | |
|-----|---|--|
| F03 | How would you rate your overall satistaction with the midwife Please think about her knowledge/skill as midwife, her attitude/friendliness, and her availability. Even if you have not interacted with the midwife, you may have heard about the performance from others. Note: 4 being very satisfied and 1 being very not satisfied | Very Unsatisfied Unsatisfied Satisfied Very Satisfied |

Now, I would like you to think about the Puskesmas that serves this village, which is PUSKESMAS ______

| F4 | In the past one year, have you ever wanted to go to the Puskesmas but could not because you have difficulty in transportation? | 1. Yes 3. No |
|----|--|---|
| | This could mean you did not have the money to pay for public transportation/to rent a vehicle/buy gasoline, or it could be that there was no convenient public transportation, or that you did not have anyone to take you to the facility and it is difficult to go alone using public transportation | |
| F5 | Please think about the location of the Puskesmas and what most community members in this village needs to do to access the Puskesmas. | Puskesmas is far and difficult to access by most people in this community Puskesmas is close, but difficult to access by most people in this |
| | Choose one statement that mostly reflect your opinion regarding access to Puskesmas | community (e.g bad road access, no public transportation) 3. Puskesmas is easy to access by most people in the community |

THANK THE RESPONDENT

Thank you for your time in completing this survey and sharing your experience! Your experience will be very valuable in informing the community members of this village about the obstacles faced by women in this village to get appropriate healthcare, and I hope that together as a community, we can make improvements to MNH Services in this village.

INTERVIEWER'S NOTE

| SECTION | QUESTION NUMBER | INTERVIEWER'S NOTE |
|---------|-----------------|--------------------|
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