

FOCUS GROUP DISCUSSION WITH TRADITIONAL BIRTH ATTENDANTS (TBA)

FGD:#

Number of Participants:

Location:

TBA Ideal Behaviors:

- Provide social support and anticipatory guidance during pregnancy, birth and early postpartum to women in the community.
- Actively participate as part of the maternal care team during pregnancy, birth, and early postpartum period (first week after birth) along with a skilled provider whenever possible.
- Function as a “link care provider”- link women and families to the closest source of skilled obstetric care.
- When attending a birth without skilled attendant present, recognize complications during birth and early postpartum and influence family to seek timely care from the closest skilled attendant.
- Accompany women and families with obstetric complications to the nearest skilled provider, and actively participate in their home-based follow-up care.
- Assist in community dissemination and acceptance of “link behaviors” and “link care providers.”

Research Objectives:

To explore TBAs perceptions of the advantages of TBA care and skilled care.

To determine TBAs perspective on “service conditions” in homes where they assist births and how “enabling environment” could be improved.

To investigate current practice of TBAs in treating or referring when complications occur.

To determine TBA perspective on reasons behind household and community level delays in seeking skilled care for normal births and in obstetric emergencies, and on provider/facility factors influencing timely receipt of quality obstetric care; their perception of facility/provider barriers, motivators, willingness of providers to change.

To determine TBAs awareness of the need for and content of early postpartum care (at 1 and 2 weeks following birth); when and what TBAs do now during first week after birth; get ideas on how early postpartum care coverage (both in-home and by a skilled provider in facility) could be increased.

To explore the concept of TBAs as link care providers; motivations, constraints, consequences and to determine whether TBAs believe repositioning them as “links to skilled care” and support providers is acceptable/feasible to TBAs and women and families; explore in-depth perceived barriers, motivators, enabling factors.

To understand the TBA perspective on who comprises their own social networks; the social networks of WRA in their district; social networks of elder female family influentials; social networks of husbands/community leaders and influentials, and how these social networks might be best used to rapidly spread information about improved obstetric care practices.

This is part of a study to learn more about how we can help women be healthier in pregnancy and childbirth. We want to ask you about TBAs ideas on how communities can keep women healthy, because we know you are very important during childbirth.

Basic Line of Questioning	Probes
SKILLED ATTENDANCE AT BIRTH	
<ul style="list-style-type: none"> • What do TBAs think the reasons why women do or don't use TBAs? • What do TBAs think about the quality of care offered by "skilled providers" practicing in the community or facility? • Do TBAs think it would be good to promote the use of skilled attendance? 	<ul style="list-style-type: none"> • Why/why not?
SKILLED CARE FOR OBSTETRIC EMERGENCIES	
<ul style="list-style-type: none"> • What do you know about major obstetric complications and emergencies? • What factors do you and other TBAs think contribute to household and community level delays in seeking and reaching skilled care? • Do TBAs think there are delays in after a woman gets to a facility? 	<ul style="list-style-type: none"> • What do they do, treat or refer? • What are TBA's roles in the delay and the roles of other household and community influentials? • What are the delays? Why do they happen?
EARLY POSTPARTUM CARE	
<ul style="list-style-type: none"> • After birth, do TBAs see the woman again? • Do TBAs see a need for routine early postpartum care after perceived normal birth by skilled providers, if no there is no problem? • Is there a perceived need for early postpartum care if there are complications in new mother or newborn? • Do TBAs think they could have a role in increasing use of skilled postpartum care at home? 	<ul style="list-style-type: none"> • Why? When? What for? • What kind of care? By who? • What kind of care? By whom? • In the community? At a facility?

CONCEPT TESTING: TBA AS LINK CARE PROVIDER	
<ul style="list-style-type: none"> • Would the TBA consider/accept new role of TBA as “link care provider” in support role compared to primary childbirth care provider now? • Would the women and family accept new role of TBA? • What do TBAs think the costs and consequences as serving in the new role as “link-care provider” would be? • Is there anything that would make you want to change to be a link care provider? 	<ul style="list-style-type: none"> • Why/ why not?
SOCIAL SUPPORT/SOCIAL NETWORKS/COMMUNICATION CHANNELS	
<ul style="list-style-type: none"> • Do TBAs often see other TBAs? Are there groups or activities that TBAs belong to or attend? • Is there anyone who TBAs listen well to? • Is there a head TBA? How can you tell they are a lead TBA? • Is there anyone in particular that most TBAs admire and listen to? • How can we tap into the identified social networks to rapidly spread information and change behaviors about skilled attendance? • How can awareness of the need and benefits of skilled care be increased through existing and new channels? 	<ul style="list-style-type: none"> • Where? • How often? • Who? Why?