**Interview details**

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| Participant ID | PWKAT05F |
| Municipality | Kathmandu |
| Occupation | Teacher |
| Education (grade) | Master in education |
| Type of household | Nuclear |
| Ethnicity | Brahmin |
| Nb of pregnancies before this one | 3 |
| Gestation age in months | 9 |
| Interviewer | Bibhu Thapaliya |
| Date | 12/03/2023 |
| Name of translator | Merina Dahal |
| Name of transcriber | Merina Dahal |

**Interview**

# INTERVIEWER:

Did you have check-ups in *Prasuti Griha* during your earlier pregnancy?

# PARTICIPANT:

Not here, I did it in Patan.

# INTERVIEWER:

Have you come here for check-ups since the third or fourth month?

# PARTICIPANT:

No. I have come here this time only. I was doing check-ups in Dhading.

# INTERVIEWER:

Why have you come here?

# PARTICIPANT:

I am here for my delivery planning as it will be good for my baby. If some problem arises later, I won't have to run here. I can shift to somewhere nearby if I need any additional services or facilities available in this hospital. My delivery date is soon.

# INTERVIEWER:

Will you give birth here?

# PARTICIPANT:

Yes.

# INTERVIEWER:

Do they accept that you give birth here even if you did not do your check-ups there?

# PARTICIPANT:

They did not say anything. I think they will accept. I think they will decide later based on if there is any problem with today's check-up. We hope I will be admitted when the report will come. They did not say anything, even about emergency delivery. I think they will accept if we come earlier. That's why we came here a week before my delivery date. Otherwise, I would come at the last hour, when the labour pain would have started.

# INTERVIEWER:

Do you know which diseases were tested during your blood tests?

# PARTICIPANT:

They screened for thyroid, sugar and my blood group.

# INTERVIEWER:

Did they provide you with any counselling on what tests need to be done?

# PARTICIPANT:

As you are speaking and I am reading, I am realising that I already know my blood group. They might have done some unnecessary tests without asking me. The thyroid can change monthly or even daily but I already know my blood group. Anyway, it's not that costly. I know my blood group since class 9. But when I had a miscarriage, I checked in a polyclinic nearby and my blood group was different. That time, I had to go for a check-up suddenly due to bleeding and the blood group result was different. Since then, I don’t want to do any tests there again.

# INTERVIEWER:

In that polyclinic?

# PARTICIPANT:

Yes, in that polyclinic because the report might have been exchanged with someone else. I don’t feel confident doing my check-ups there. I never went back. That's why I did not refuse to test for my blood group here as it is the first time, I will be able to compare.

# INTERVIEWER:

Don’t you think blood tests are expensive here?

# PARTICIPANT:

Even if it is expensive, we pay. Also, the price may be due to the combination of all tests. As the blood group is just one test, I did not want to say anything. I prefer to make sure before my delivery anyway in case I need a blood transfusion. I am happy to check all this at the last hour. It would have been difficult to give my blood and do this test during labour so it is better to do it now I think.

# INTERVIEWER:

Did they tell you what were the blood tests for?

# PARTICIPANT:

They didn't tell me anything. If my English was bad or if I could not read the document, I would not have known. I know because I looked at it but they didn't tell me anything. If they tell patients what is tested, they could know what tests have been done and what problems they have. I think they only inform the patients when the reports come. Sometimes, because it is too crowded, they even don't explain clearly the reports to the patients. In my consultations, in different places, if their voice or their way of speaking could relieve half of the patient’s pain, I did not find such politeness in them. If they don't have time to explain clearly, I can go home and read the report but it can be difficult for patients who can't do that. I don’t know if it is negligence or because it is a government hospital. They should hire more staff or reduce service hours to provide a good service. We can complain everywhere except in the hospital. It is a more secure job.

# INTERVIEWER:

Can you tell me more about your teaching position, please?

# PARTICIPANT:

I mainly teach Early Childhood Development classes. When it is over, I teach other classes such as classes 5, 7 and 8. I teach Health in classes 5 and 7 and I teach English in class 8.

# INTERVIEWER:

In Health, do you teach about the diseases that can be transmitted through sexual intercourse such as HIV?

# PARTICIPANT:

Yes, of course. It is in the course. Sometimes we also have to teach outside the programme. Sometimes we have to talk about a recent disease in the community. I also talk about HIV/AIDS with teenagers. This is class 7, not before. They are not comfortable with the subject. While I teach them, they usually laugh at the back of the class. That's the kind of environment where this teaching happens.

# INTERVIEWER:

This is during adolescence. What do you see in the health posts? Do the health workers talk openly about it?

# PARTICIPANT:

Yes. The health post is near our school. I usually meet them when there are sessions about folic acids, etc. I usually tell them to come to school to give a course. I usually tell them to come to the school to teach. This can help to improve health. The students might value it more if the doctors or nurses were to give lectures on these subjects, rather than me giving them lectures.

# INTERVIEWER:

Did they ask you if you take folic acid and calcium tablets properly?

# PARTICIPANT:

Yes, they asked me whether I am taking them. I told them that sometimes I have too much vomiting when taking nutriment complements so I eat more foods rich in folic acid such as radishes and pulses. I know that we should eat according to the advice of the doctor but organic food is healthier than tablets.

# INTERVIEWER:

Lemon helps in the absorption of iron.

# PARTICIPANT:

It is said that in case of pressure imbalance, lemon can also reduce it. I eat acidic fruits like lemon and lime. As far as snacks are concerned, I didn't use to eat anything outside during my first pregnancy, because MSG (monosodium glutamate) is added to these foods. During this pregnancy, I did not experience any problems such as bleeding or other difficulties. I usually bring food from home to school.

# INTERVIEWER:

Do your husband or other family members such as your mother-in-law or father-in-law ask you questions about the tests and the reasons for the tests? How curious are they to know more?

# PARTICIPANT:

My mother-in-law is not with us. My father-in-law has been ill with paralysis for 9 years. He doesn't have much sense so I am the one who takes care of him. My husband is busy with his official work. He used to come here in his spare time when we went to Dhading for a check-up. The doctor who examines me is like a friend. That's why he does a check-up when necessary. It says what the levels are and what I should eat when I see the reports. It doesn't say why tests have to be done.

My husband trusts me. So he doesn't ask me many questions. In case of a normal illness, he asks me what I should eat. So when I tell him about my check-up and the tests I have to do, he agrees. He doesn't ask me why I have to do them. He shows his concern. It's normal because he's from this generation and he's educated.

# INTERVIEWER:

Everyone asks about what the doctor said.

# PARTICIPANT:

When I was 2 or 3 months pregnant with my son, I got admitted to the hospital because I had bleeding. Before my son’s birth, in the Patan Hospital, they referred me saying that they were not sure that my child was alive. A doctor of the Patan Hospital had a clinic in Hattisar. We went there. I took the medicines recommended and I rested in bed completely. My son was born healthy.

During delivery, I had a bit more labour pain due to the position of the child. But it was a normal delivery. They told me they would have to use the vacuum at the last minute because of the heartbeat problem. I knew that the suction cup could affect the structure or cause mental effects on the child. So I told them I would rather tolerate the pain for another 5 minutes than cause lifelong effects on the child. They respected my decision and waited. With God's blessing, everything went well. At that time my husband and sister were outside. They did not know that I had given birth normally. They thought that the suction cup had been used and rushed to see the child. In the meantime, my pressure dropped so much that I could not regain consciousness even after three bottles of saline water. After I regained consciousness, I told them what had happened. They were very happy to hear that everything had gone better than they thought.

# INTERVIEWER:

How old is your son?

# PARTICIPANT:

He is 8 years old.

# INTERVIEWER:

What happened with the two pregnancies in between?

# PARTICIPANT:

We don't know the exact reason as I did normal household work such as cooking. I continue teaching though. That may be the reason. For this pregnancy, I went for a check-up before the conception, took folic acid and prepared myself. It might be the reason for the success. I think the miscarriage maybe because I did not do all this. Maybe I did not make a suitable environment for myself or maybe because of thyroid problems.

During my Master’s degree, we were 4/5 friends, who used to be very close. Four of us had miscarriages one after another so we had conversations about it. Two of them said it was due to their increased thyroid levels. Others had irregular periods. It might be a reason.

# INTERVIEWER:

You did your first blood test in Dhading. What is the difference between here and there?

# PARTICIPANT:

In Dhading, they told me about what tests I need to do. Here, maybe due to a large number of patients, the health workers don’t have much time to explain. They need to speak non-stop from morning to evening. Some patients don't listen and they have to repeat again and again.

# INTERVIEWER:

Everyone does not understand them.

# PARTICIPANT:

Yes. That's why.

# INTERVIEWER:

According to our government protocol, it is compulsory to test for hepatitis B, syphilis and HIV AIDS during pregnancy. But it's not implemented everywhere. What is the situation in Dhading?

# PARTICIPANT:

I think hepatitis was tested. Let me check. [Searching]. No, it's not here. Maybe that's why the doctor did not say anything about it. He wrote down the tests but did not say anything about it.

# INTERVIEWER:

Have you heard of any cases of syphilis in your area?

# PARTICIPANT:

No, I haven't. Usually, people keep it secret mostly in the village areas. It is similar in the case of miscarriage. For example, I did not reveal mine. We prefer to say that we are sick.

Even if we sleep due to fever or something else, people will talk and say that we had a miscarriage or abortion. That's why we don't talk about it. I once had typhoid at the time of COVID. The whole village knew about it. They said I had done this when I was a teacher. In a village, a small problem can spread so widely and quickly.

# In the villages, if someone goes somewhere else for treatment, they say things like "everyone has given birth here, why does she have to go there" and talk make drama. They say such things. It happens a lot.

# INTERVIEWER:

In your opinion, should STDs be tested during pregnancy?

# PARTICIPANT:

Yes, it should be as these diseases affect reproductive organs. If we get STDs while having a baby, then it can directly affect the baby. The child can be born with problems or a miscarriage can happen. Even if no problem arises, you can transmit it if you have unsafe sex with your partner. For these reasons, it is good to check for these diseases.

# INTERVIEWER:

Is it better to test only the wife or the husband should be tested too?

# PARTICIPANT:

I think it is better to test both of them but they usually don’t come together. For example, I came alone today.

They have the wrong idea that HIV can be transmitted only through sexual intercourse but it may also be transmitted in hospitals, due to negligence. In some cases, the reports also get exchanged. If I get positive results due to this and if my family does not understand such things, they will think that I got the disease by having sex with others. Also, my husband would not trust me anymore and can doubt how I got the disease from. That's why awareness is really important in such a case.

Before doing the test, they should tell us what could happen. That's why I explain it to the students in my class. In the village, there are usually rumours about someone getting HIV through their relations with other people. The infection may have been transmitted by various causes, even if the person is good. For example, they may have been infected by a person with bad intentions, for example as a result of rape. The infection can also be transmitted through blood. But people mistakenly think that the infection can only be transmitted through sex with other people. Therefore, awareness-raising, counselling or orientation courses should be organised from time to time in the neighbourhood or community on this subject. It would be better for those who do not understand. Both the husband and wife should attend so that it is easier for them to understand what is happening in case of infection and not to be suspicious.

# INTERVIEWER:

Do you think other family members should also be tested?

# PARTICIPANT:

I think there should be screening for the husband and wife primarily. If one or both of them test positive, there will be a conflict about who got the infection first, no matter how long they survive. When there is disease and complications, the conflict between the two is even greater.

Even if the husband and wife had a very good relationship, once they become HIV-positive, they start to doubt and blame the other for the infection. It would be better if both were tested at the same time so that they both test positive at the same time. If only one of them is tested and the result is positive, the effect will only be felt by that person. That is why both should be tested.

# INTERVIEWER:

Do you think the husbands would be open to this?

# PARTICIPANT:

Most educated and aware people are in favour. But the situation may be different for people who do not understand. For example, if we ask women if their husbands drink or smoke, out of fear they will tell the doctor that they do not. Back home, they will tell their husbands that they have informed the doctor, in the hope that he will stop. In some cases, although the time of the wife's delivery has arrived, the husband continues to lie. He may have a disease that can be transmitted to his wife or it may have mental consequences if he abuses her. This is why it should be mandatory for husbands to attend the first prenatal consultation, as it would be better for pregnant women to receive care and support from their husbands.

Doctors want us to understand all this. But in some cases, when it is difficult for us to implement the measures, we act as if we do not understand. So it would be better if the husband and wife were counselled together. Otherwise, the husband does not care whether the wife has slept through anger, lack of appetite or nausea. But if the husband comes to visit, he may think about what the doctor said and worry that whatever the wife does will affect the child. It is not for her sake, but for the sake of the child, that they will create an environment conducive to caring for the pregnant woman.

# Although my husband is understanding, many pregnant women have husbands who do not understand or care about them. In some cases, the husband may be away from her after conception. In this case, one of the family members must stay with her. Only then can pregnant women receive proper care. In many cases, this may not be possible.

# INTERVIEWER:

About the behaviour of health workers in the hospital, do you think they are qualified enough to provide counselling?

# PARTICIPANT:

As they have studied their course and arrived at their position, we can't say that they are not qualified. Similarly for teaching, we are not qualified without getting a license. During the job vacancy, there has competition. They are selected on their qualification. I think the environment is really important in such a case.

As I teach, if parents never ask about their children then I will give less time to the child. My neglect and that of the parents can affect the child's future. Conversely, if parents keep asking me questions, then I will think about what answer I can give them when they ask about their child. I will do my best to teach the child so that the parents do not tell me that their child is the same today as yesterday and that there has been no improvement. What response should I give them in this case? Similarly, NMAs in the village, neighbourhood or community should be asked these questions and receive advice from more qualified experts. When they are asked questions about what they will do if they encounter certain problems in their community, only then will they begin to solve them. Some are already competent, but to improve them, a stimulating environment must be created.

# INTERVIEWER:

# Have you experienced discrimination by health workers based on ethnic group or economic status?

# PARTICIPANT:

First of all, the cost is not that high in government sectors. Even if it is, I don't think they discriminate based on caste or cost. It may also be because I haven't seen it myself. Those who do not admit that they have done it. Those who face it know it. Some of them may think that everyone has to face it too. They may never have met a person who has been treated with kindness and may not realise that they have been mistreated. For example, if two of us are here and ask for the same services, but you are given good service and I am not. If we are sitting at different tables, we will not know which service was provided to the other. But because we are close to each other, we can see the service they have given to another person. Some people do not have the opportunity to see it up close. That is why they may not know whether they are being discriminated against or not.

# INTERVIEWER:

Now, I won't keep you here for a long time. If I have left anything to ask or you have something to say, then please say it.

# PARTICIPANT:

No, I don't. What can I ask you? You are more expert than us.